

Meeting called to order on **March 2, 2012 at 9:35 a.m.**

Present:

1. Yusr Aboushaar, MD
 2. Teresa Frazer, MD
 3. Timothy York, DO
- Kim Allen, Division of Infant Child and Adolescent Health
 - Jim Jeffries, HealthCheck Director
 - Norma Parker, Children’s Reportable Disease/Newborn Metabolic Screening
 - Pam Roush, WV Birth to Three Director
 - Denise Smith, Director, Division of Perinatal and Women’s Health
 - Heidi Staats, Children with Special Health Care Needs (CSHCN) Director
 - Deborah Templin, Children’s Reportable Disease/Newborn Metabolic Screening
 - Kim Wentz, HealthCheck Promotions Coordinator
 - Ann Willard, Division of Infant Child and Adolescent Health

Absent¹:

1. Martin Carpenter, OD
2. Norman Cottrill, DO
3. Matthew Cupp, MD
4. George Damous, MA, EdS, Licensed Psychologist/School Psychologist
5. Fernando Indacochea, MD
6. Raymond Leonard, MD
7. Carlos Lucero, MD
8. Isabel M. Pino, MD
9. Debra Sams, DO
10. Gary Veronneau, OD

- **Purpose of feedback meeting**

- ❖ Note: The Board has endorsed the addition of page 2 (additional documentation/medical necessity certification) to each HealthCheck Preventive Health Screen Form. The new forms will be 2-sided documents.

- ☞ Proposed modifications to page 1 – within the margins of AAP’s *Bright Futures* standard of well-child care for children, were thoroughly deliberated.

- ○ Dr. Frazer – recommended the prominent display of “EPSDT” on each form (all concurred).

¹ All members were afforded the opportunity to contribute via email.

Office of Maternal, Child, and Family Health Pediatric Medical Advisory Board (MAB) Feedback Meeting
March 2, 2012 Meeting Minutes

- Dr. Frazer – articulated rationale for identifying the individual who accompanies the child to his/her HealthCheck screening visit. Revised forms will identify with whom the child presents (all concurred).
- Children’s Reportable Disease/Newborn Metabolic Screening Nurses, Norma Parker and Deborah Templin, discussed the need for screening follow up. “Newborn Metabolic Screen” will be included (in bold font) on each of the following forms: 1 day-4 weeks, 2 month, and 4 month, and 6 month (all concurred).
- Drs. Aboushaar, Frazer, and York – recommended removing “vitamins” from the 1 day-4 weeks form (all concurred).
- Dr Frazer – recommended adding “jaundice” under the abnormal findings and comments section of the 1 day-4 weeks form (all concurred).
- Dr. York – recommended modification to the oral health screen with regard to specific water source and well water testing (all concurred).
- HealthCheck Director, Jim Jeffries, discussed the need to clarify developmental surveillance and developmental screening on the forms. Surveillance and screening (developmental and autism-specific) will be prominently displayed on the forms, as appropriate (all concurred).
- Dr. Frazer – recommended the addition of “ASQ,” “Other,” and “Score” for the standardized developmental screening tool (all concurred).
- Dr. York – articulated the importance of the physician being aware of in utero drug exposure. HealthCheck Health History (0-6 years) will be revised to include this indicator (all concurred).
- Dr. Frazer – recommended the addition of dyslipidemia risk indicators, as appropriate. Currently, forms only indicate low risk/high risk at the appropriate screening intervals. Dyslipidemia risk indicators will be added to the 24 month form (all concurred).
- Drs. Frazer and York – reviewed and discussed health education/anticipatory guidance subjects on the forms. “Sexuality” will be removed from the 12 month form (all concurred).
- CSHCN Director, Heidi Staats, reviewed the AAP position on transition from pediatric to adult care. Drs. Frazer and York recommended this subject for health education/anticipatory guidance beginning at 14 years of age (all concurred).
- Dr. Frazer – reviewed and discussed correlation between postpartum depression and child abuse. Much discussion occurred regarding the AAP position on postpartum depression at pediatric visits. HealthCheck Director, Jim Jeffries, asked to table the matter to allow additional input and advice from the Bureau for Medical Services (Medicaid) and absent members of the Board (all concurred).
- Dr. York – recommended the addition of specific ages for the follow up/next visit section of each form (all concurred).
- Dr. Frazer – recommended the addition Birth to Three transition planning – appropriate only for families enrolled in WV Birth to Three. Birth to Three transition planning will be added to the Plan section of the 24 month and 30 month forms (all concurred).
- Dr. York – recommended the addition of OMCFH Programs with the 800# on forms to smooth the progress for making referrals (all concurred).
- Drs. Frazer and York – did not recommend the revision of developmental surveillance indicators to accommodate parents/caregivers with lower level reading comprehension. Drs.

Frazer and York affirmed that HealthCheck forms should only be completed by licensed medical practitioners or said practitioners' appropriate designees.

- Dr. Frazer – recommended that HealthCheck consider developing single-page age-appropriate safety handouts for providers to give at each screening interval.

☞ The aforesaid modifications to page 1 of HealthCheck Preventive Health Screen Forms will be completed. By the end of March 2012, draft revisions of the HealthCheck Preventive Health Screen Forms will be distributed via email to all members of the Board for review and comment.

- **HealthCheck update**

☞ Reviewed HealthCheck continuous quality improvement initiative to build developmental surveillance and screening elements into the process of care.

- ✓ From January through May 2012, HealthCheck will assesses the extent to which West Virginia children at various ages from 0-36 months received developmental screening with a standardized, documented tool or set of tools. Data for the measure is medical record only.
- ✓ Every effort is being made to limit the impact of this activity at the practice level.
- ✓ By way of simple random sampling, HealthCheck Program Specialists select 10 medical records of children, ages 9-36 months.
- ✓ For every comprehensive preventive health care service encounter between the ages 9-36 months, HealthCheck Program Specialists complete data elements on the HealthCheck medical record review form specific to this measure.
- ✓ Other than date of birth, ensure that no details related to individuals are recorded as part of the review. Protected health information will neither be removed from the site nor photocopied.
- ✓ Data from HealthCheck medical record review forms specific to this measure is being compiled for statistical analysis.
- ✓ On June 15, 2012, all relevant findings will be shared with the Office of Maternal, Child and Family Health (OMCFH) Pediatric Medical Advisory Board for advice and guidance on necessary correction strategies.

- **Next Meeting**

☞ June 15, 2012

Meeting adjourned at 3:30 p.m.

Minutes electronically submitted for approval by Jim Jeffries on March 20, 2012 at 3:30 p.m.