BUILDING RESILIENT COMMUNITIES: WORKING AT THE INTERFACE BETWEEN PUBLIC HEALTH AND HOSPITAL SYSTEMS

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BUILDING RESILIENT COMMUNITIES: WORKING AT THE INTERFACE BETWEEN PUBLIC HEALTH AND HOSPITAL SYSTEMS

- Overview
- Case studies
 - Postpartum depression
 - Abusive head trauma







THE INTERFACE BETWEEN PUBLIC HEALTH AND HOSPITAL SYSTEMS

MEDICINE

Primary focus on individuals

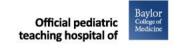
Goal: Improve the health of individuals through disease diagnosis, care, and treatment of patients

PUBLIC HEALTH

Primary focus on population

Goal: Improve the health of populations through disease prevention and health promotion

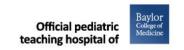




THE INTERFACE BETWEEN PUBLIC HEALTH AND HOSPITAL SYSTEMS

Healthier and more resilient communities and individuals





TEXAS CHILDREN'S

- Hospitals: 3 hospitals with 3.5 million patient encounters / year
- Pediatric Association: 53 pediatric practices,
 260 pediatricians, largest pediatric primary
 care network in the nation
- Health Plan: 400,000 members, provides more than half of Medicaid coverage to children in Harris County
- Pavilion for Women: 6,000 births /year





Why treat people...



then send them back to the conditions that made them sick?

WHO Commission on Social Determinants of Health | August 28 2008







SECTION OF PUBLIC HEALTH PEDIATRICS

- Mission
 - To create a healthier future for Texas's children and families by leading in patient care, education and research that seeks to mitigate childhood adversities and to accentuate individual, family and community resilience.
- Clinical
 - Child Abuse Pediatrics Program
 - Children's Assessment Center
 - Foster Care Clinic
- Public Health
 - Center for the Study of Adversity, Resilience, and Education
 - ACE workgroups



ADVERSE CHILDHOOD EXPERIENCE WORKGROUPS

- Convenes local government, community nonprofits, health care, and academia
- Dedicated staff time
- Collaborative, data driven, action oriented
- Identified four ACEs as a starting point
 - Intimate Partner Violence
 - Postpartum Depression
 - Food Insecurity
 - Abusive Head Trauma / Parent Support







Committee Advisory **Pediatrics** Health

Texas Children's Public Health Pediatrics

ACE Workgroup's Framework to Mitigate Childhood Adversity and Foster Resilience

Community facing

Collaborative

Capacity building

ACE Workgroups

Assessment

- Develop objectives
- Conduct assessment
 - Review literature
 - Collect local data
 - Interview experts
 - Focus groups



- Identify strategies to mitigate adversity and foster resilience by addressing gaps and opportunities to enhance practice, knowledge, and policy.



- Summarize findings
- Initial pilot work
- Decide if SPHP should address the adversity
- If yes, create work plan and refine objectives
- If no, identify partners to address the adversity and/or revisit in 3 5 years.



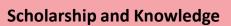






Services and Programs

Direct services and programs that support children and families



Research and quality improvement projects

Policy

Advocacy

Education & Training

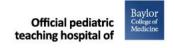
Education and training of professionals and the community on how to mitigate adversity and foster resilience

PEDIATRICS

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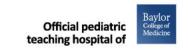
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CASE STUDY #1 POSTPARTUM DEPRESSION





POSTPARTUM DEPRESSION SCREENING

 How do we improve the early identification, referral, and treatment for women with postpartum depression?



Strategies:

- Train pediatricians to screen and refer mothers with postpartum depression to treatment
- Assess available treatment options
- Pilot a model to increase treatment and care options



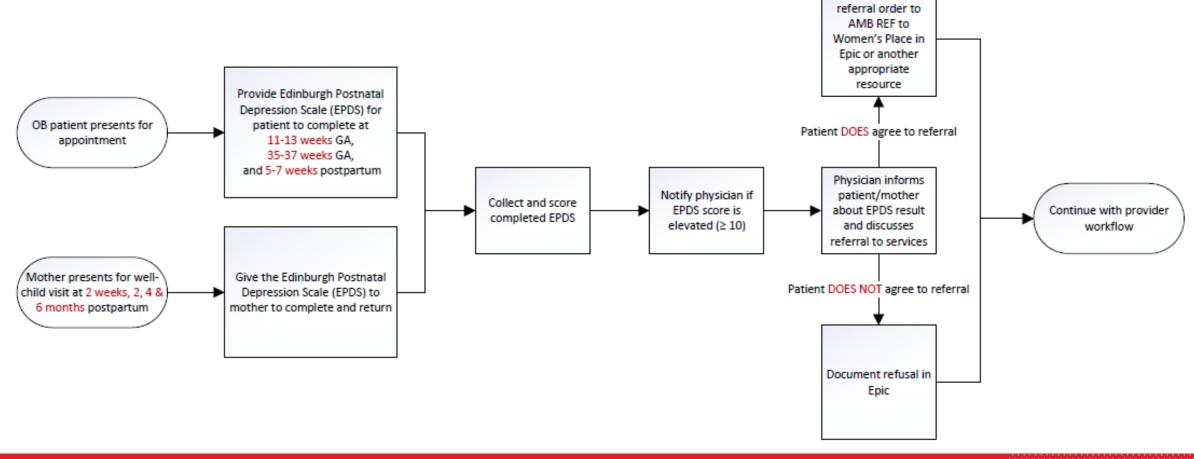
POSTPARTUM DEPRESSION SCREENING

- Trained 36 pediatric practices, 3 obstetric practices to screen mothers for postpartum depression
- One hour training with physician and clinic staff
 - Signs and symptoms of perinatal mood and anxiety disorders
 - Administering and scoring the Edinburgh Postnatal Depression Scale (EPDS)
 - Integrating screening workflow into practice
 - Documentation and submitting electronic referrals via electronic medical record (EMR) system

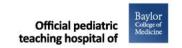


POSTPARTUM DEPRESSION SCREENING WORKFLOW

Submit electronic



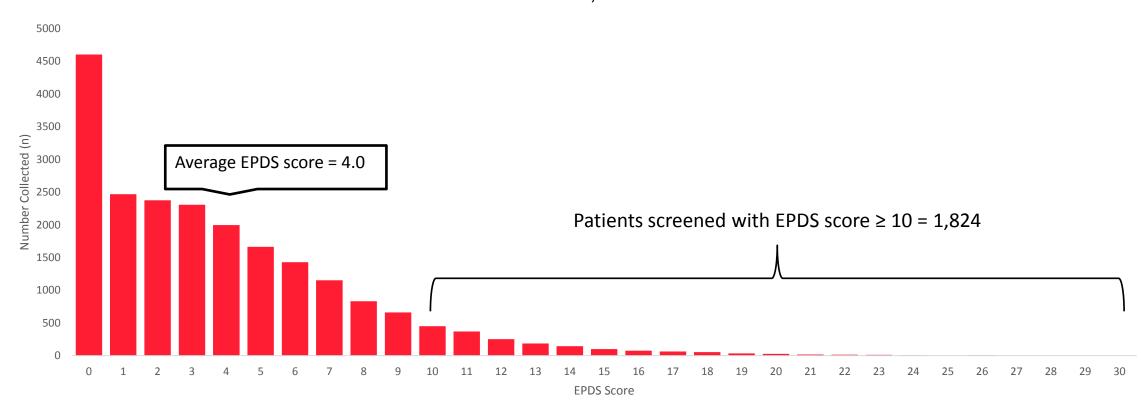




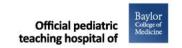
DISTRIBUTION OF EPDS SCORES, OBSTETRIC AND PEDIATRIC PRACTICES

MAY 2014 - JUNE 2017

N = 21,302







REFERRAL AND TREATMENT OUTCOMES

	Referrals Received	Patients Treated*	
Clinic Type	(n)	(n)	(%)
Obstetric	1,371	1,094	80%
Pediatric	321	90	28%
Total	1,692	1,184	70%

^{*} Treated is defined as patients completing an appointment with a mental health provider within 60 days of referral.

Obstetric: October 2014 – June 2017 Pediatric: May 2014 – June 2017



POSTPARTUM DEPRESSION-POLICY IMPLICATIONS

- January 2017: Texas Children's Health Plan began reimbursing pediatricians for screening for PPD
- May 2017: Texas legislature passed HB2466, requires
 Medicaid to reimburse pediatricians for PPD screening



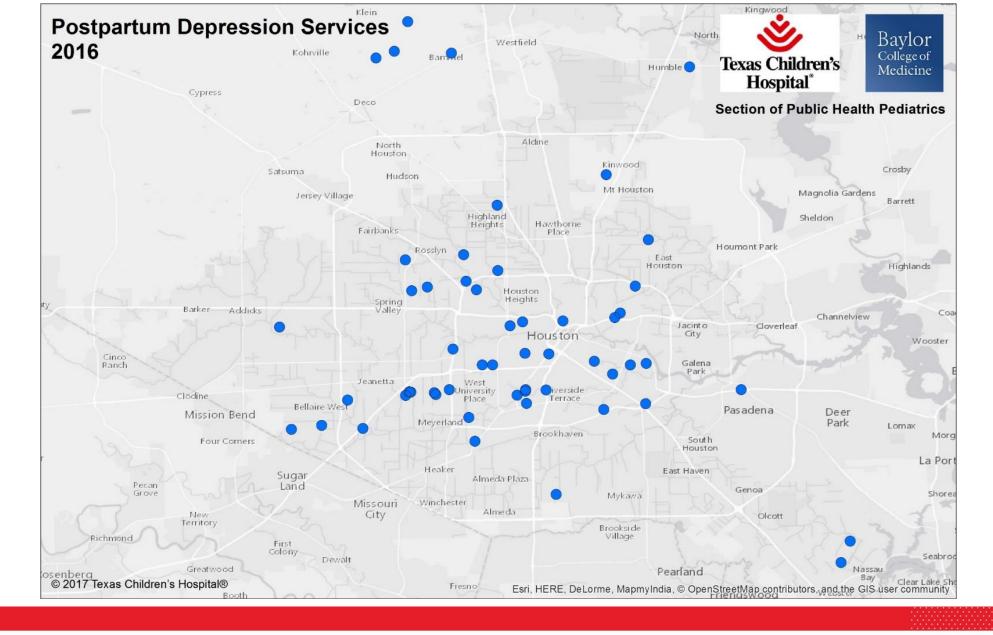
NEXT STEPS

- As screening rates increase, we anticipate the demand for services to increase
- Are there enough services in Harris County to meet the needs of the 12,000 – 15,000 women with postpartum depression each year?

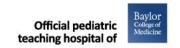


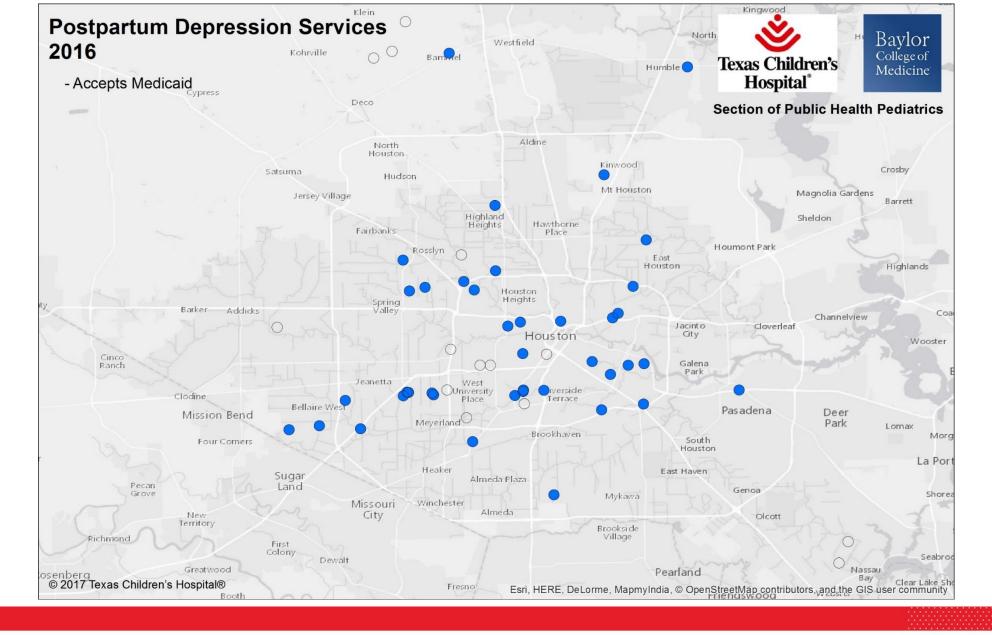




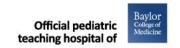


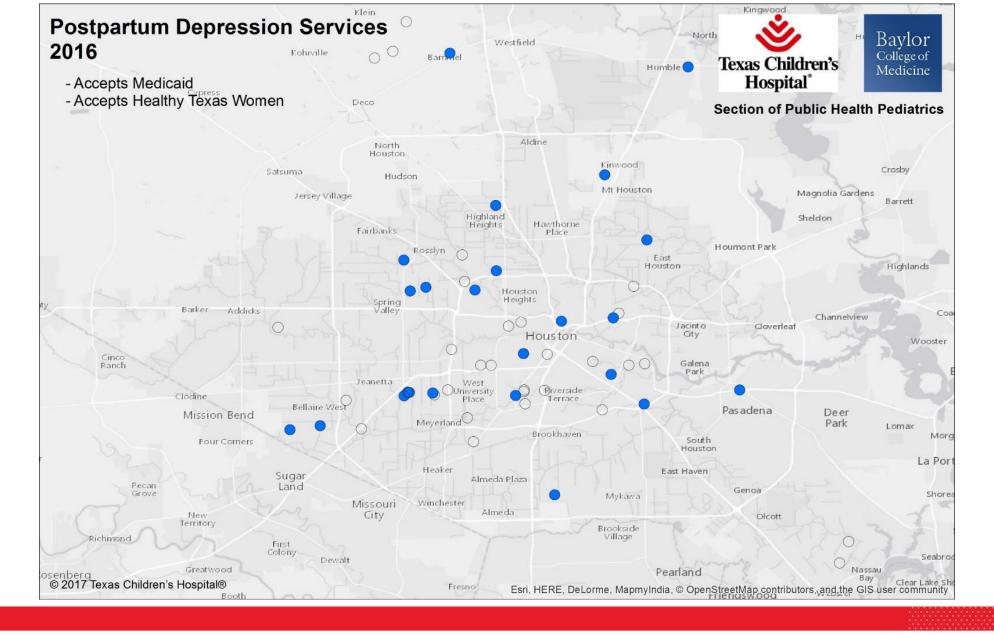




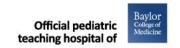


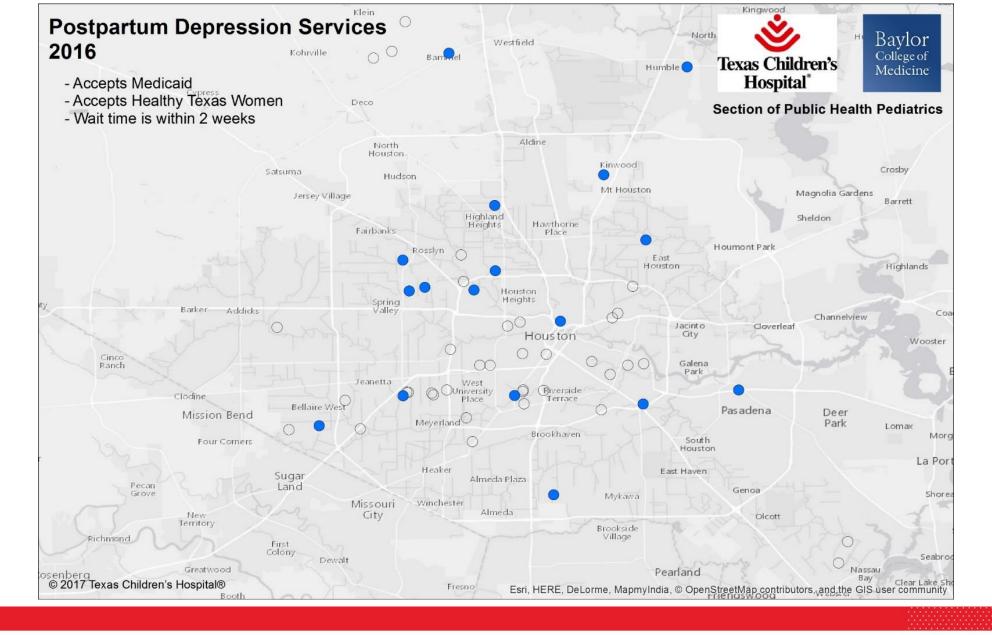




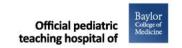


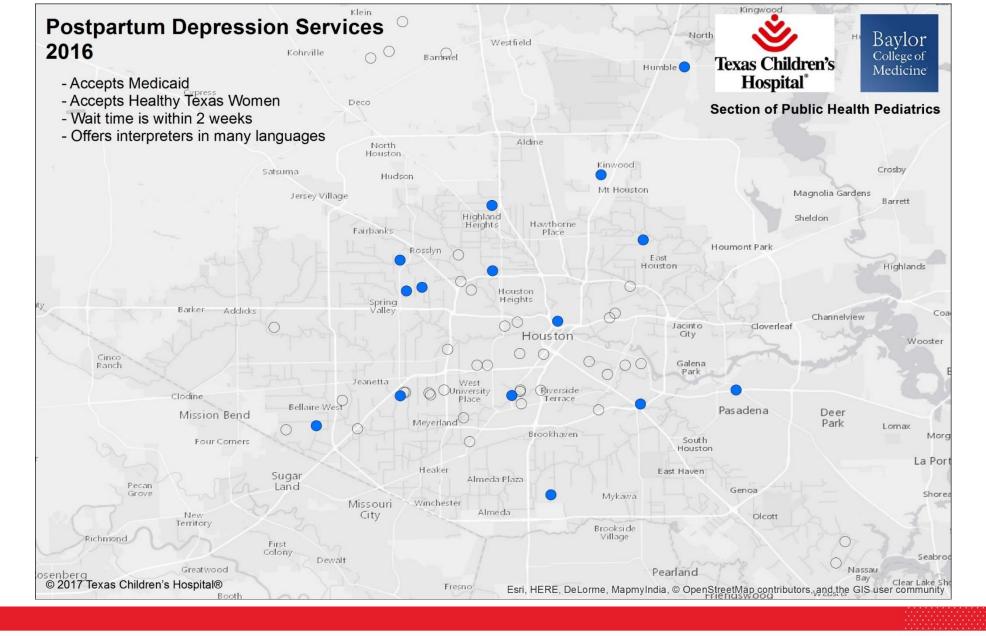
















WHERE WE ARE NOW?

- Piloting a study to see if home visitation programs and support groups are as effective as a referral to a psychiatrist for mothers with mild to moderate signs of postpartum depression
- Partnering with state leaders on the implementation of HB2466



CASE STUDY #2 ABUSIVE HEAD TRAUMA AND PARENT SUPPORT



 How do we decrease rates of abusive head trauma and provide more support to parents of young babies?

Strategies:

- Provide evidence-based parent education to parents through hospitals and community organizations
- Normalize participation in parenting programs



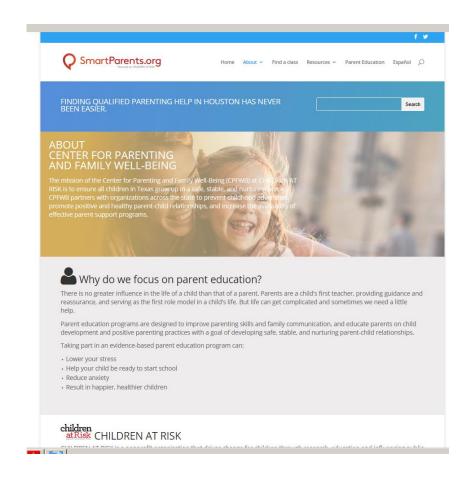


- Formed a coalition chaired by the Surgeonin-Chiefs at Texas Children's Hospital and Children's Memorial Hermann
- 10 local hospitals are delivering Period of Purple Crying[®] to 20,000 families this year
- Period of Purple Crying® is an educational program to normalize infant crying, teach parents how to soothe their infants, and prevent abusive head trauma

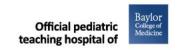




- Trained 86 providers from 19
 organizations to deliver Triple P, a
 parent education program at churches,
 schools, afterschool programs,
 daycares, clinics, and social service
 agencies.
- Developed a website and marketing campaign to decrease stigma and improve access





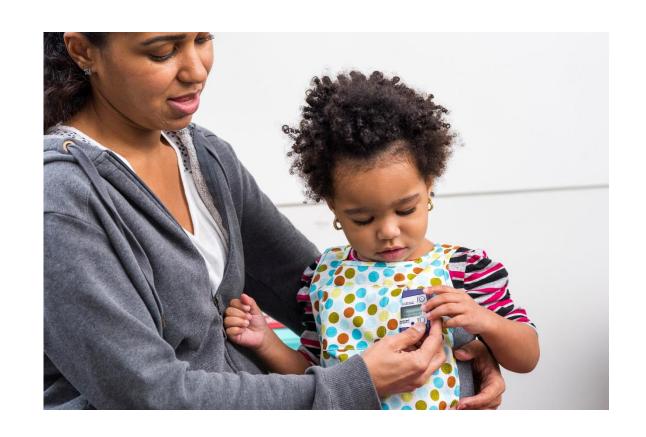


Safe Babies

 A four arm research trial that is looking at maternal supports and the impact on maternal stress and bonding

upWORDS

 Parenting program for new parents that teaches parents how to talk and engage with their young children.







INTERFACE OF PUBLIC HEALTH AND HOSPITALS TO BUILD RESILIENT COMMUNITIES

- Collaborative efforts
- Outcome oriented
- Need a champion within the healthcare system
- Address the strengths and limitations of the healthcare system and public health in developing strategies







QUESTIONS?

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