

## Child Health: Well-Child Preventive Services

*Objective 3.3: Increase the proportion of MCH program participants, 1 through 11 years, receiving a quality, comprehensive annual preventive services by 10% annually through 2025.*

### **Activities During Federal Fiscal Year 2023**

Submission of TPEC Grant: In May 2022, Kansas submitted the HRSA Transforming Pediatrics for Early Childhood (TPEC) (HRSA-22-141) application to expand the existing holistic care coordination (HCC) and early childhood systems work. The proposed project, Health Education, Access, and Referrals to Transform Systems (HEARTS) Project proposed to serve rural and urban communities across Kansas by developing a network to create, establish, and sustain Early Childhood Development (ECD) Resource Hubs, supporting increased access, reduced barriers, and more coordinated services for high-risk/underserved families with children prenatal-to-five years old (P-5). The HEARTS Project planned to improve (1) equitable access to a continuum of ECD services in child health care provider (CHCP) settings, and (2) the capacity of the CHCP workforce to deliver high-quality ECD services that address the holistic needs of children and families. Proposed grant activities included training, education and outreach for providers and partners on the continuum of ECD services (e.g., early developmental promotion/prevention, community resources, quality preventive health services for children), coordination of community-level intake and referrals, family engagement and supports, screenings (e.g., development, behavioral health, social determinants, special health care needs/disability), provision of HCC services, continuous quality improvement, and policy change.

While Kansas scored highly for the funding available under HRSA-22-141, it was not selected as a recipient. Title V continues to look for ways to implement many of these components and efforts which is in line with the spread/scale efforts for the KPCC's.

Partnership with the Kansas PMHCA Program: KDHE Bureau of Family Health provides oversight to the HRSA Pediatric Mental Health Care Access (PMHCA). The established Kansas program, KSKidsMAP, offers mental health case consultations, training, and physician wellness support to pediatric primary care practitioners. KSKidsMAP expanded upon the developed [Pediatric Mental Health Toolkit's](#) depression resources to include video didactics and resources for ADHD and Anxiety. Included within this Toolkit is an adapted AAP [Integrating Pediatric Mental Health into Primary Care Algorithm](#) that Title V continues to promote. More details about KSKidsMAP are included in the Cross Cutting Section.

Kan-Be-Healthy Visits: The Kansas Early and Periodic Screening, Diagnosis and Testing (EPSDT) program, known as Kan-Be-Healthy, provides comprehensive and preventive health care services for children under 21 enrolled in Medicaid. Visits provide screening and medically necessary health care services - even if the service is not available under the Kansas Medicaid plan. Title V staff continued to promote Kan-Be-Healthy Visits to our ATL grantees through the tailored resource packets provided to

each site. The MCH Program Manager was working with the Bureau of Community Health Systems to provide a Kan-Be-Healthy training but due to a variety of barriers it was not able to happen during this reporting period.

#### Local MCH Agencies:

The following are examples of how some of the local MCH grantee agencies have made progress toward objective 3.3 during the reporting period.

- Ellsworth County Health Department increased communication with their local preschools, daycares, and schools to let them know well child services are provided by the health department. The total number of well child visits increased from 18 in 2022 to 32 in 2023.
- Leavenworth County Health Department promoted the well-child clinic on social media and are using the Bright Futures toolkit to gather health and developmental information. They were able to provide 72 well-child visits that put them close to meeting their goal of 75 clients.
- Mitchell County Health Department met their goal of increasing the number of well child exams by 10%. In 2022 they documented 1 well child visit, 1 hearing screening, 1 vision screening, and served 2 children across all services. In 2023, they increased on every measure to 15 well child visits, 16 hearing screenings, 15 vision exams, and served 21 children across all services. They attributed the increases to staff training on data entry, correcting errors in the Nightengale Notes to DAISEY interface, improving their relationship with the local hospital, reorganization of staff roles and responsibilities, and development of an audit process to ensure data quality.
- Marshall County Health Department conducted 40 Kan Be Healthy exams, 40 hearing screenings, 45 vision screenings, and 8 well child visits. These resulted in 24 referrals for dental visits, 15 for hearing services, 20 vision assessments, 21 fluoride varnish applications, 58 blood lead screenings (along with needed follow up for elevated levels), 10 for health care coverage applications, and one for early childhood intervention.

#### ***Plans for Federal Fiscal Year 2025***

KanBeHealthy Trainings & Bright Futures™: KanBeHealthy (KBH) is the [Early and Periodic Screening, Diagnostic and Treatment \(EPSDT\)](#) benefit that provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental, and specialty services. Kansas Medicaid utilizes [Bright Futures™](#) as the EPSDT/KBH standard of care, so all services are expected to be provided in accordance. Kansas Title V programs continue to support and promote the use of the Bright Futures Guidelines. The Child Health Consultant will work to further educate and encourage the utilization of Bright Futures™ to MCH partners and local grantees. Additionally, efforts will be focused on building up targeted technical assistance to help MCH partners and local grantees successfully implement all components of Bright Futures™.

Help Me Grow Integration: During FY25, Help Me Grow (HMG) will continue shifting to KDHE for leadership with the continued support of KU-CPPR through December 2024. The goal for HMG over the next year is to continue exploring connection points of the Help Me Grow framework with various Kansas initiatives, including those supported by the KDHE Bureau of Family Health/Title V and other programs that support children and families. KU-CPPR will utilize best practices, personal systems-level expertise and understanding, and family experiences to support progress to provide technical assistance and support to KDHE/Title V on strategy, research, and implementation of Help Me Grow elements within the Kansas-specific context.

Working collaboratively, KDHE/Title V and KU-CPPR identified the following objectives for the upcoming year:

- Prioritize initiatives that leverage the existing Kansas efforts related to referrals and care coordination, developmental health early screening and detection, and family voice.
- Build understanding of what HMG is in Kansas with relevant state agency programs staff and leaders.
- Establish a standing team to support the connection points between the HMG framework and Kansas prioritized initiatives.

The Child Health Consultant will serve on the standing team and support the implementation and advancement of HMG in Kansas. While specific work assignments for members of the leadership have not been assigned yet, it is likely that the Child Health Consultant will be integrated into many of the core elements of the HMG framework.

*Centralized Access Point (CAP):* While the Centralized Access Point is already established in Kansas, there is still collaboration between state agencies that needs to occur regularly to continue to fund and promote this as a statewide access point for all families and consumers. The State Directors within each agency will continue to work together to make sure funding is secure while state staff continue to promote the CAP with families and providers across the state. In the coming year, Title V plans to host a presentation for employees and agency partners on 1-800-CHILDREN including what it is and how it can be accessed to encourage others to be part of this resource. Title V staff will continue to promote and share about this resource during presentations, public meetings, councils, and through promotional fliers. All Title V brochures will continue to list the 1-800-CHILDREN phone number and QR code. As new resources are identified by Title V staff, they will be shared with the Kansas Children's Service League, who manages the 1-800-CHILDREN line, mobile app and searchable website, so that these new resources can be included in their system.

*Family and Community Outreach:* Over the next year, Title V team will continue to offer Systems Navigation Training for Families (see more about this in the CYSHCN Plan) and provide information about HMG and its associated programs and resources. The Child Health Consultants also intends to engage with local Family Resource Centers to

see how better collaboration between Title V, HMG, and their agencies can be built to better support families in Kansas.

*Child Health Care Provider Outreach:* This component of HMG supports early detection and intervention efforts while supporting providers in connecting families to appropriate community resources in their area. Providers are supported and encouraged to screen children birth through five using the Ages and Stages Questionnaires' (ASQ), so any child showing a delay can be referred to the right community resource for assistance. The Title V Team will continue working to raise awareness about ASQ and the HMG framework over the next year. A provider champion for the HMG work will be identified to help support implementation and advancement of the framework.

*Data and Analysis:* Data collection and analysis will assist with ensuring all other components are working effectively, help to identify gaps or barriers, and guide quality improvement work. There are a few different Title V data systems that collect data needed for HMG. Title V is currently part of a data trust agreement where a variety of information can be shared among state agency partners for a more complete picture of the early childhood systems and supports. This is known as the Early Childhood Integrated Data (ECID) approach. Title V will continue to be part of ECID and will make data requests as needed to support and strengthen the HMG system.

*Community Hubs:* The community level infrastructure of HMG is building out community hubs or networks of early childhood service providers within communities. During FY25 the Child Health Consultant and the P/I Consultant will work collaboratively with community partners to develop HMG community hubs based on the existing KPCC framework. A work plan will be developed that will identify community readiness, lead entity, and partners. The work plan will outline steps and activities to assist communities in the development of their unique HMG hub while linking them to the state level HMG supports.