

Priority 4: Ensure that adolescents and young adults have consistent access to and actively engage with comprehensive, patient-centered care that supports their physical, social, and emotional well-being.

Preventative Health Initiatives

Objective 4.1—By 2030, increase the percent of adolescents, ages 12 to 17, that have had a preventive health visit, which included a behavioral health screening, in the past year to 60%.

Adolescent Well Visit: In FFY26, the Title V team will focus on engaging adolescent-serving community partners to help raise awareness among parents, caregivers, and youth about the importance of annual adolescent well visits. Emphasis will be placed on the value of preventive care, including behavioral health screenings, and how regular well visits support adolescents' overall development and readiness for adulthood.

Planned activities include:

- Partnering with organizations such as school-based health centers, youth-serving nonprofits, and local public health grantees to share aligned messaging and outreach materials.
- Developing or adapting at least two family- or youth-facing materials (e.g., social media graphics, clinic flyers, or school handouts) to promote the well visit.
- Exploring opportunities to align messaging with national campaigns such as National Adolescent Health Month (May) or back-to-school initiatives.

These efforts will support increased awareness of preventive services while complementing clinical outreach efforts.

Bright Futures™: Kansas Title V programs continue to support and promote the use of the Bright Futures™ Guidelines to maternal and child health (MCH) partners, providers, and grantees as the evidence-based standard for delivering comprehensive preventive care to adolescents.

The Title V team will continue to focus on maintaining foundational Bright Futures™ promotion activities, while planning for expanded provider engagement in subsequent years.

Key actions will include:

- Ensuring MCH Aid to Local (ATL) grantees and other Title V-funded programs have continued access to Bright Futures™ toolkits, client handouts, and provider education materials.
- Encouraging use of Bright Futures™ screening recommendations, particularly for behavioral health, vision, and hearing, in adolescent well visits, and supporting gap-filling roles played by MCH ATL agencies.
- Promoting available training resources and self-guided tools such as:
 - The Bright Futures™ Toolkit and Adolescent Toolkit Training,
 - The Pediatric Mental Health Toolkit,
 - The Got Transition Health Care Transition Readiness Quiz;
- Coordinating with internal and external partners (such as the Kansas Chapter of the American Academy of Pediatrics (KAAP) and KSKidsMAP) to ensure public and private providers are aware of available resources and training opportunities.

Cross-Agency Collaboration for Improved Adolescent Health and Well-Being: Highly collaborative, ongoing work across agencies and systems will specifically assist with the creation of a unified cross-agency standardized list of best practices to be disseminated to

health care providers, Kansas Certified Community Behavioral Health Clinics (CCBHCs), schools, and community youth-serving organizations to support holistic adolescent health in their communities. Title V will continue its partnerships with the Kansas Department for Children and Families (DCF), Kansas Department for Aging and Disability Services (KDADS), Kansas Department of Corrections' Juvenile Services (KDOC-JS), and Kansas State Department of Education (KSDE). Title V is involved in several key stakeholder groups to ensure coordination of information/resource sharing with local MCH programs and public health approach is applied to addressing systemic issues. Of note, Title V is represented on the Governor's Behavioral Health Services Planning Council Children's, Prevention, and Rural and Frontier Subcommittees, the Kansas School Mental Health Advisory Council, the Youth Behavioral Health State Leadership Team, and the Kansas Suicide Prevention Coalition. A brief summary of these Councils/Committees is included in the Report.