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FALL | 2013

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



Iowa Chapter

# The Heartland Pediatrician

## The Pediatric Integrated Health Home Program: New Support Services for Children with Mental Health Challenges

Submitted By Jennifer McWilliams, MD

Director of Clinical Services, Division of Child and Adolescent Psychiatry

University of Iowa Hospitals and Clinics



As more and more children come to our clinics with increasingly complex concerns, we are reminded of how disjointed and confusing the system is, particularly for patients with mental health and behavioral health challenges. Identifying, let alone coordinating, the best services and supports for a particular child can be challenging and time-consuming for even the most experienced providers. The new Pediatric Integrated Health Home (PIHH) program can help assist patients covered by Medicaid with Serious Emotional Disorders by providing care coordination, community linkages and family support services.

- Provide whole-person care coordination across medical, behavioral and social services and supports.
- Provide an accessible, single point of coordination while assuring children and their families have access to timely, quality, and appropriate services and supports.
- Build alliances with various professionals that provide supports and services to the child and their family.
- Provide different levels of care coordination that meet the different levels of need for children and their families.

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### The Pediatric Integrated Health Home

The PIHH is a locally based team of professionals working together to provide whole-person, patient-centered, coordinated care for children with a serious emotional disturbance (SED). The team consists of a registered nurse, a social worker and a family support peer specialist. This team helps children and their families navigate the service system. The PIHH is administered by the Medicaid Behavioral Health Care Managed Care Organization (Magellan Behavioral Care of Iowa) and provided by community-based PIHHs. An Integrated Health Home is responsible to:



## A Note from the Chapter President

Labor Day is over and September is starting with a flurry of activities in the child health world. September is National Infant Mortality, a campaign developed by the National Healthy Start Association (NHSA) to celebrate babies living past the first year of life. With the theme, *Celebrate Day 366: Every Baby Deserves a Chance*, the campaign addresses the high infant mortality rate in the US and honors the accomplishments of families whose babies are reaching the milestone of their first birthday and beyond. NHSA also promotes the effectiveness of ongoing programs and efforts implemented to reduce infant deaths, low-birth weight, pre-term births and disparities in perinatal outcomes all year round. *Celebrate Day 366: Every Baby Deserves a Chance* supports and inspires people from around the nation to take action in support of the Healthy People 2020 goal to improve the health and well-being of women, infants, children and families. To partner with the Healthy Start program in your community or for tools to promote the Month, check out the NHSA website [www.nationalhealthystart.org](http://www.nationalhealthystart.org).

Child Passenger Safety Week is September 15-21, 2013. Many communities will have certified Child Passenger Safety Technicians available to provide free, hands-on, car seat education and inspections. The week concludes with National Seat Check Saturday on September 21, when certified Child Passenger Safety Technicians

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## A Note from the Chapter President

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will be available at car seat events across the country to offer advice and instruction. Resources to support local activities for the month are available at [http://www.safekids.org/events/field\\_coalition/safe-kids-iowa/field\\_type/check-event](http://www.safekids.org/events/field_coalition/safe-kids-iowa/field_type/check-event).

Lastly, the AAP has updated their recommendations for flu vaccines. A special effort should be made to vaccinate people in vulnerable groups, including children with chronic health conditions, children of American Indian or Alaskan Native heritage, health care workers, women who are pregnant, may become pregnant or are breastfeeding, and household contacts and caregivers of children in

high-risk populations. You can read more at <http://www.aap.org/en-us/about-the-aap/aap-press-room/Pages/Children-Should-be-Vaccinated-Against-Influenza-as-Soon-as-Possible.aspx>

Please join your fellow members of the Iowa AAP chapter in ensuring that our infants, children, and youth are safe and protected.

Best in health,

*Debra*



## AAP National Elections: New Election Cycle This Year

This is the first year the national AAP's new election cycle. Voting will begin on the Friday before the NCE, October 25, and will run through November 25. The results will be announced on Tuesday, November 26. The two candidates are:

**Sandra Hassink, MD, MS**

**Thomas Tryon, MD, MBA**



Dr. Hassink has spent her professional career caring and advocating for children. She has served as chapter vice president, chapter president and National Nominating Committee representative, district vice chair and district chairperson for District III. Dr. Hassink is the director of Nemours Pediatric Obesity Initiative and is seeing patients in the weight management clinic she began in 1988.

Dr. Tryon is a general pediatrician with broad-based experience and a global perspective. He has served on the executive committee of both Oklahoma and Missouri chapters including as Missouri Chapter president. He is chair of the AAP Committee on Membership. In 2006, he returned to Children's Mercy as associate division director of the Section of Urgent Care.

An official Voter's Guide is available at <http://aapnews.aappublications.org/content/34/9/19.extract#>



Project ImPACT (Improving Parents as Communication Teachers) is an evidence-based intervention program offered through the UICH Autism Center and cooperating departments. Project ImPACT is a 13-week parent training program designed to improve the social communication skills of young children with an autism spectrum disorder (ASD). If you know of young that would benefit from this type of intervention, please visit <http://psychology.msu.edu/AutismLab/projectimpact.html> for details and contact information.

## SAVE THE DATE!

Reach Out and Read Iowa presents

## Revel Read

A Gala to Benefit Early Childhood Literacy

Saturday, November 16<sup>th</sup> 2013  
Hyperion Field Club • Johnston, IA

*Join us in creating an Iowa where every child  
and family revels in joys of reading!*

# Iowa Association for Infant and Early Childhood Mental Health

Submitted by Rhonda Rairden, Community Health Consultant, IPHD

The Iowa Association for Infant and Early Childhood Mental Health (IAIECMH) was recently formed to support Iowa's professionals in the area of young children's social, emotional and behavioral wellbeing. With leadership provided by the Iowa Department of Public Health, the Association was designed to operate as a public-private partnership with diverse cross-sector participation.

Research demonstrates that a child's experiences, relationships and environment have a direct and profound impact on that child's physical, social/emotional, cognitive and behavioral development. The goal of the Association is to develop a workforce that recognizes the role of mental health in overall child wellbeing, and demonstrates competencies in working with children and their caregivers to promote positive social, emotional and behavioral outcomes.

The vision for the IAIECMH is that all professionals who work with young children and their families (including pediatricians, nurses, law enforcement, child welfare, early interventionists, child care providers and others) have access to resources that will enhance their confidence and competence in promoting healthy mental development.

Benefits of joining this professional association include:

- Increased awareness of children's social, emotional and behavioral health needs
- Opportunities for networking and peer learning
- Training and professional development

- A forum for discussion on emerging issues
- Links to relevant data, research and publications
- Peer support
- Enhanced career opportunities

The Association was formed by a diverse group of professionals and included representation from the following organizations: University of Iowa, Iowa Child Welfare Project, Early Childhood Iowa, Early Head Start, Polk County Health Department, Iowa Chapter of the Ameri-



can Academy of Pediatrics, Des Moines Regional Child Protection Center, Iowa State University, Iowa Department of Human Services, Visiting Nurse Services, National Association of Social Workers (Iowa Chapter,) University of Northern Iowa, Orchard Place Child Guidance Center, Iowa Department of Education, Mid-Iowa Health Foundation and Iowa Department of Public Health. In addition, several private mental health clinicians have been actively involved in this initiative.

For more information, contact Rhonda Rairden, Community Health Consultant, IPDH  
[Rhonda.Rairden@idph.iowa.gov](mailto:Rhonda.Rairden@idph.iowa.gov) or 515-281-4926.

## Iowa Influenza-like Illness Surveillance Program Seeks Sentinel Providers

Submitted by Yumei Sun, Ph.D.

Epidemiologist, Iowa Influenza Surveillance Network Coordinator, IDPH

Influenza season will be underway soon, and the Iowa Influenza-like Illness Surveillance Program (ILINet), in collaboration with the Centers for Disease Control and Prevention (CDC) and IDPH, works with sentinel health care providers throughout the state to conduct surveillance for the influenza-like illness (ILI). Data reported by sentinel providers informs a statewide and nationwide picture of influenza activity. Across the country, approximately 2,900 health care provider sites participated in ILINet during the 2012-13 influenza season.

Providers of any specialty in any type of practice are eligible to be sentinel providers. Sentinel providers report the total number of patient visits and number of patient visits by ILI age group via an online CDC data

system. Incentives for sentinel providers include:

- Weekly statewide influenza activity reports and important announcements related to influenza and the vaccine
- Free influenza testing performed by the State Hygienic laboratory (SHL)
- Free on-line subscriptions to the CDC publications, *Morbidity and Mortality Weekly Report* (MMWR) and *Emerging Infectious Diseases*
- Certificate of appreciation from the CDC and the state of Iowa

To enroll or for more information please contact Yumei Sun at [yumei.sun@idph.iowa.gov](mailto:yumei.sun@idph.iowa.gov) or 515-281-7134.



# The Pediatric Integrated Health Home Program: New Support Services to Children with Mental Health Challenges

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The Pediatric Integrated Health Home (PIHH) is a vision of the 2010-2012 Children's Mental Health and Disability Services Workgroup that was created to address the gaps in Iowa's services for children with disabilities and their families. The workgroup developed an implementation strategy for a statewide, publicly funded, system of care service system funded by section 2703 of the Affordable Care Act. The P-IHH will be rolled out in three phases. (See Iowa state map for more information).

### What is a System of Care Model?

The System of Care (SOC) model was developed in response to significant concerns with the current fragmented service delivery system.

The SOC model utilizes a team approach where team members, including those from a variety of agencies, work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating a single care coordination plan.

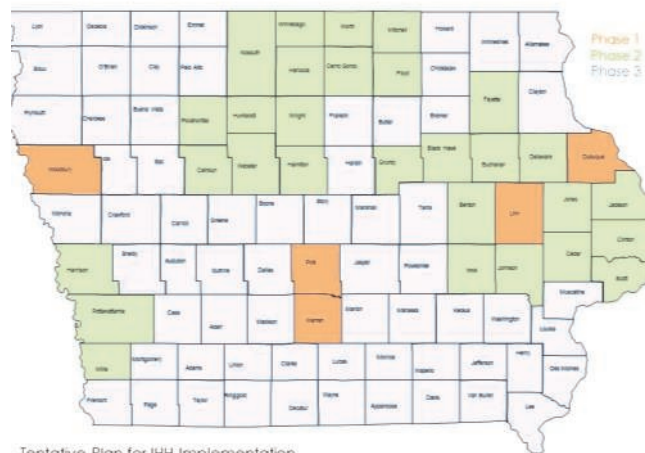
The System of Care model emphasizes the need for coordination of all of the care children and their families need. By integrating the medical component of care with the family's natural supports and the community's social supports, providers are able to develop more effective and realistic care plans for our patients. The PIHH team helps to identify services that are strength-based and individualized, to ensure that services match the family's goals, needs and preferences.

The SOC model is based on the following core values:

- Family Centered – families are engaged in decision-making and take the primary role in setting goals and choosing supports, services, and providers
- Child-centered – young people have the right to be empowered, educated, and given a decision-making role in their own Community-based – services are offered in the most inclusive, most responsive, most accessible, and least restrictive setting possible
- Culturally competent and responsive – services are built on values, preferences, and traditions of the child, family, and community

### Care Coordination and the Integrated Health Home Teams

As described, the SOC model is based on a team approach. The P-IHH teams will be comprised of family peer support specialists, and care coordinators with nursing and social work specialties. Several behavioral health agencies are participating in the program helping families navigate the service systems, linking them to needed services, and developing a single plan of care outlining strengths, supports, and goals of each family. Examples of care coordination activities include finding local services and supports, making referrals to needed services, assisting with insurance and waiver paperwork, helping families coordinate appointments, and



Tentative Plan for IHH Implementation

educational meetings such as IEP meetings. Care Coordinators can also help families find funding for supportive services like respite, mentoring, or transportation. Importantly, coordinators will also help support coordination of care with primary care providers and specialists, to help children and families attain important health outcomes, such as adherence to treatment interventions, and important follow up appointments and procedures.

The care coordinators will also be involved in health promotion. Health promotion may take the form of educating children and their families to understand the diagnosis and treatment of the mental health diagnosis. Care coordinators can also provide information on proper nutrition, obesity reduction, and increasing physical activity. The coordinators can also assist in providing health education about preventing and managing other chronic conditions such as asthma and helping the family to identify behavioral that increase the risk of developing a chronic condition.

Finally, care coordinators will play a vital role in comprehensive transitions of care and crisis plan development. They will work with families to develop strategies and crisis plans to minimize emergency department visits or hospitalization. When children do require hospitalization, coordinators will participate in the discharge process and follow up with the family, providing extra support as needed. When necessary, the PIHH team can identify and link families to long-term care and community-based services.

The Pediatric Integrated Health Home program will help ensure that our patients are receiving comprehensive and coordinated care that will help them reach their optimal potential. Find a PIHH program in your community to help your patients realize their full potential.

The information above was provided in part with support from the Child Health Specialty Clinics. [www.chsciowa.org](http://www.chsciowa.org)

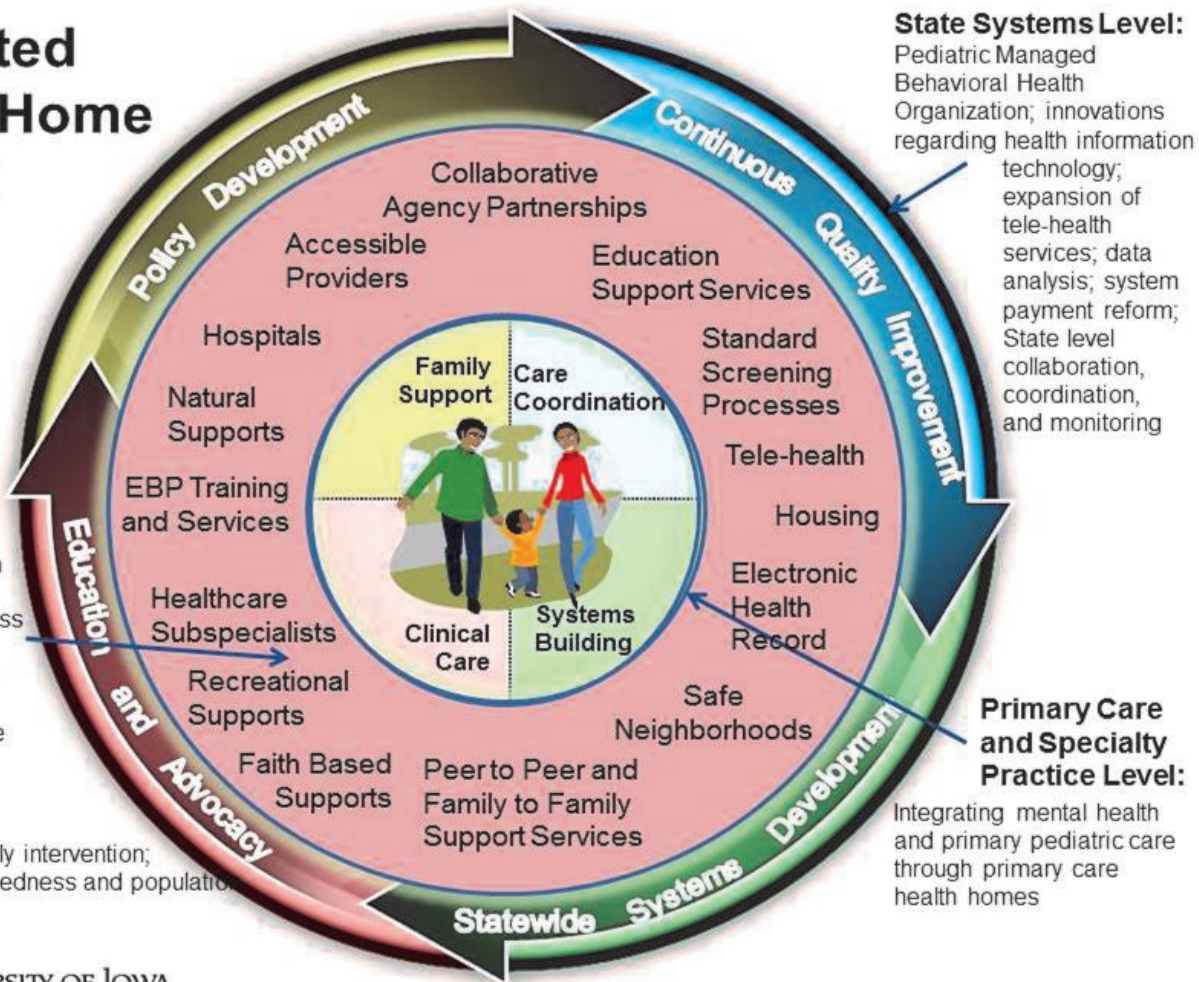
## PROGAM SPOTLIGHT: PIHH

### Integrated Health Home Project

#### Community System Level:

Pediatric Integrated Health Home; Local systems of care with a Community Child Health Team convening wraparound process and linkages to community based services; school based preventative services; building local systems of care with focus on prevention, early intervention; community preparedness and population health activities.

 THE UNIVERSITY OF IOWA  
Center for Child Health Improvement and Innovation



#### For more information on P-IHH, please contact:

Jennifer A. Cook, MPH  
100 Hawkins Drive, 239 CDD  
Jennifer-a-cook@uiowa.edu or 319-356-7741

### RD's are an important part of your patients' health care outcome!

Submitted by Jody Kealey, RD, LD

Statewide Nutrition Coordinator/ Early ACCESS Nutrition Coordinator Child Health Specialty Clinics

Registered dietitians (RD's) need physicians who are willing to champion nutrition as a priority in our health care system.

According to a new study led by researchers at the Johns Hopkins Bloomberg School of Public Health featured in the December 20, 2012 issue of *BMJ Open*, physicians identified registered dietitians and nutritionists as the most qualified providers to care for obese patients. The National Prevention Study identifies the role of nutrition in health promotion, disease prevention, and chronic disease treatment as a significant public health issue. RD's and their expertise in medical nutrition therapy (MNT) can positively influence health outcomes and health costs. Yet, most insurance plans do not recognize RD's as providers and do not pay for visits to an RD for MNT.

Your patients need you as physicians to help advocate for RD nutrition services coverage. What can you do?

1. Refer your patients to RDs and then call insurance companies to urge RD coverage for medical nutrition therapy.
2. Speak to other physicians about the importance of making RDs part of the health care system.
3. Know how to incorporate nutrition services into your Accountable Care Organizations, Medical Home or Integrated Health Home.

Please contact the Iowa Academy of Nutrition and Dietetics (formerly the Iowa Dietetic Association) to see how you can help your patients gain improved access to RD's.

Monica Lursen, RD, LD, CLF  
Executive Director, Iowa Academy of Nutrition and Dietetics  
27924 Butler Center Road  
Clarksville, IA 50619  
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Monday, September 9, 2013

University of Iowa

Urmila Sahai Seminar Room

Room 2117 Medical Education and Research Facility

375 Newton Road Iowa City, IA 52242



## Keynote Presentation

Julie Price, MM

National Center for Shaken Baby Syndrome



## Pediatric Bereavement Lecture

David J. Schonfeld, MD, FAAP

Pediatrician-in-Chief at St. Christopher's Hospital for Children

## Sponsored by

University of Iowa Children's Hospital

Department of Pediatrics

Roy J. and Lucille A. Carver College of Medicine

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