# 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

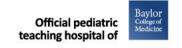
Goal: Improve the health of individuals through disease diagnosis, care, and treatment of patients

#### **PUBLIC HEALTH**

Primary focus on population

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

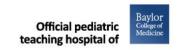




## THE INTERFACE BETWEEN PUBLIC HEALTH AND HOSPITAL SYSTEMS

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**

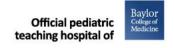
Education and training of professionals and the community on how to mitigate adversity and foster resilience

**PEDIATRICS** 

ublic

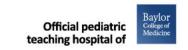
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# CASE STUDY #1 POSTPARTUM DEPRESSION





#### 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



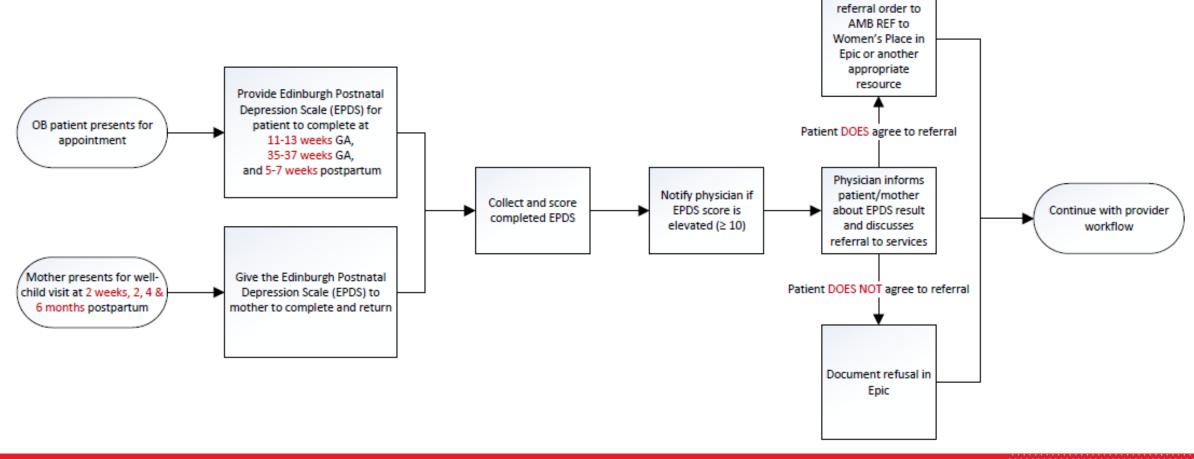
#### POSTPARTUM DEPRESSION SCREENING

- 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

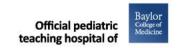


#### POSTPARTUM DEPRESSION SCREENING WORKFLOW

Submit electronic



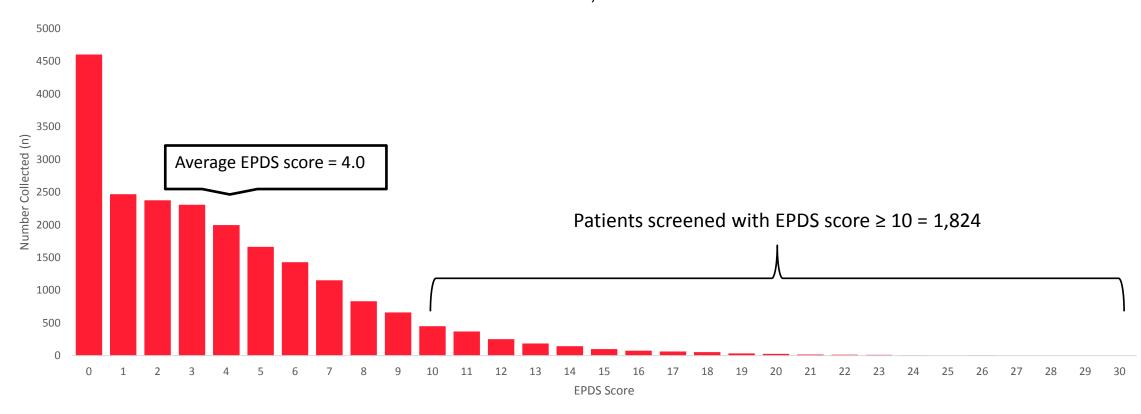




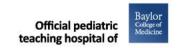
### DISTRIBUTION OF EPDS SCORES, OBSTETRIC AND PEDIATRIC PRACTICES

**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%

<sup>\*</sup> 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



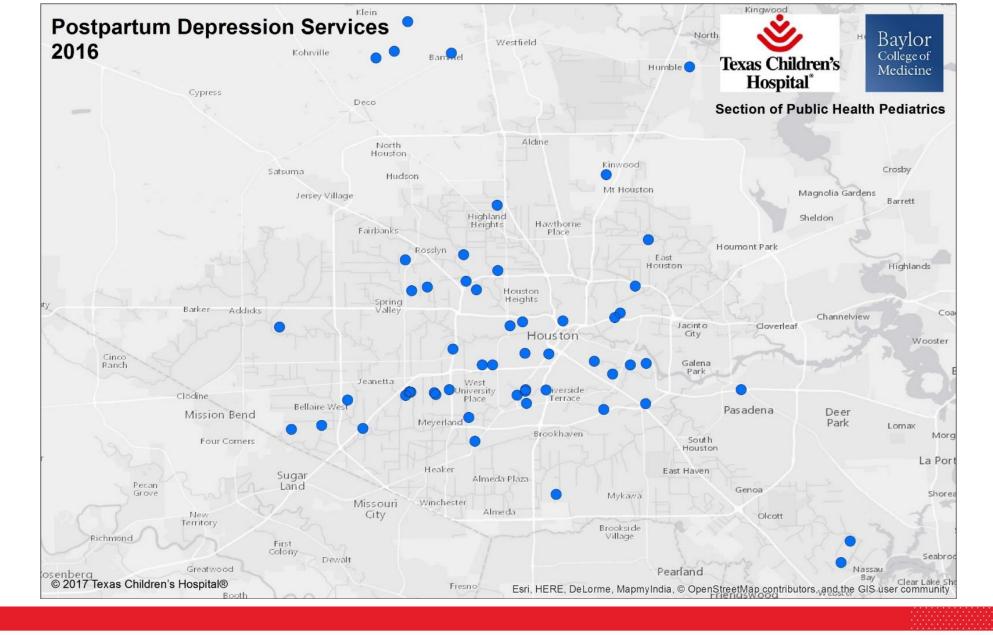
#### **NEXT STEPS**

- 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?

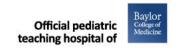


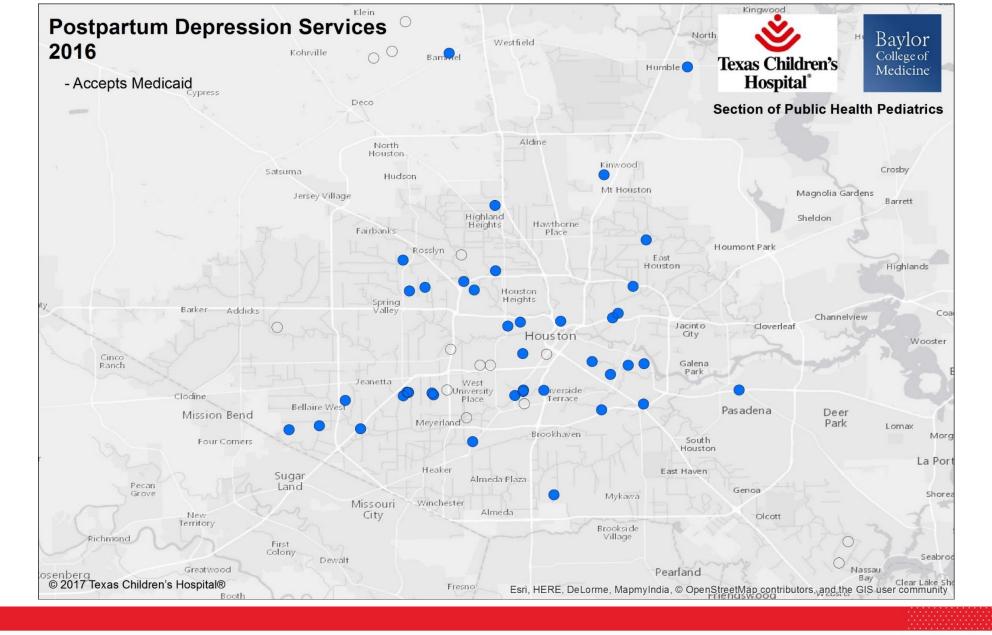




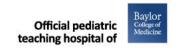


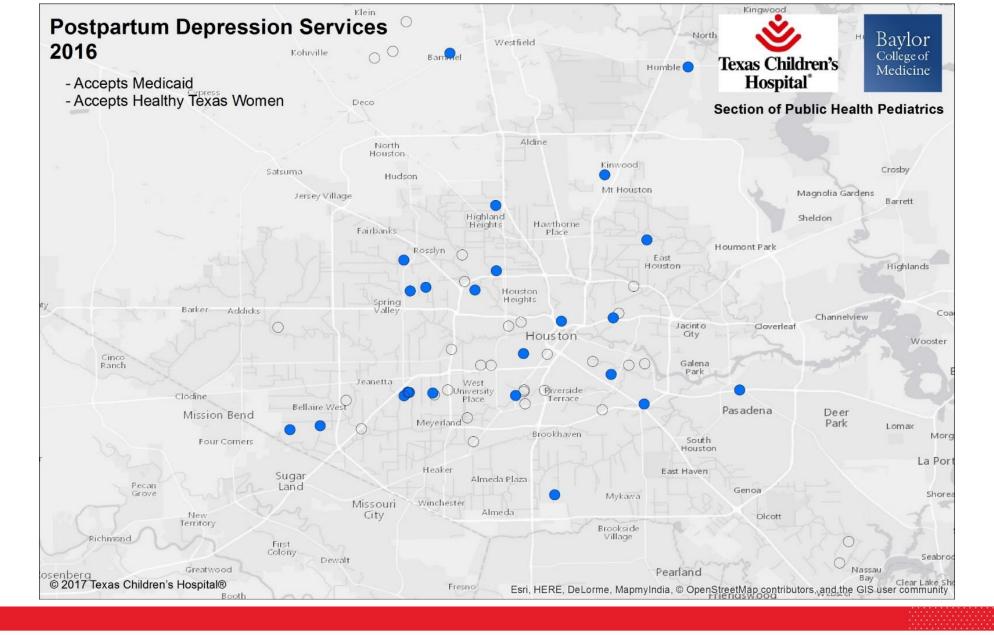




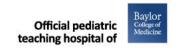


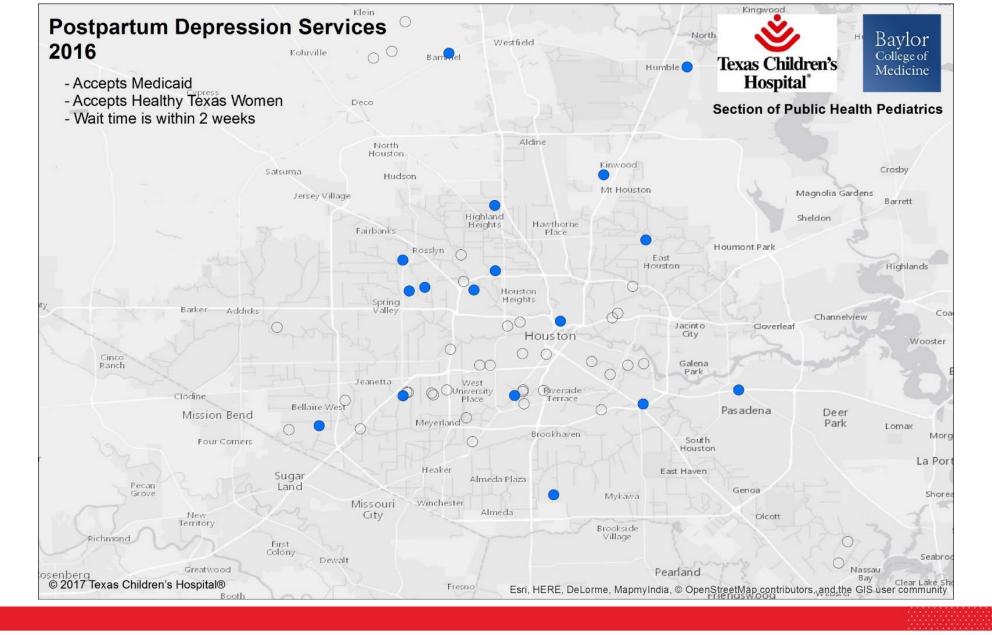




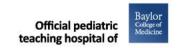


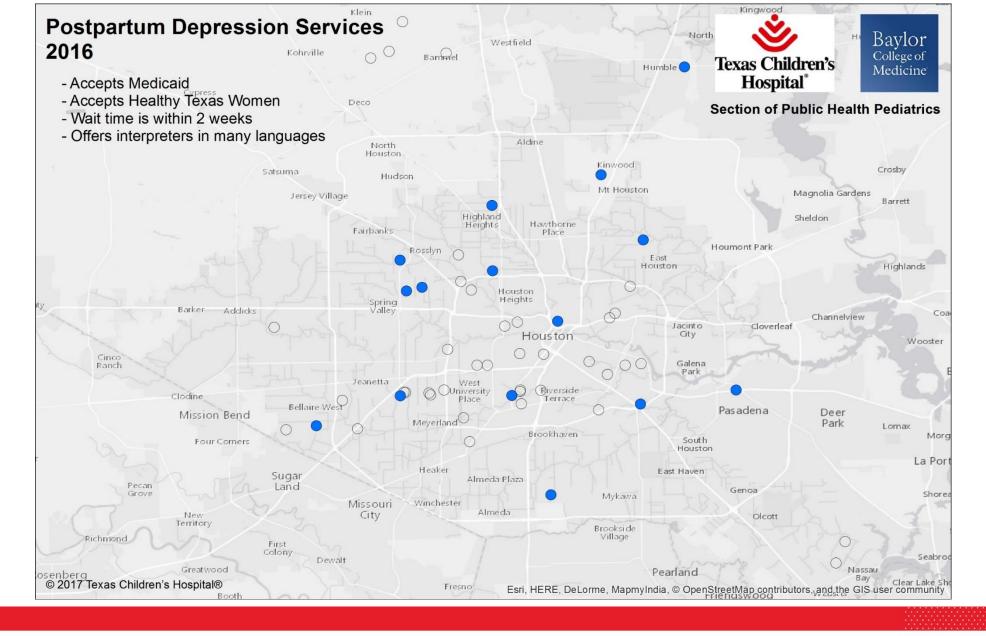
















#### WHERE WE ARE NOW?

- 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



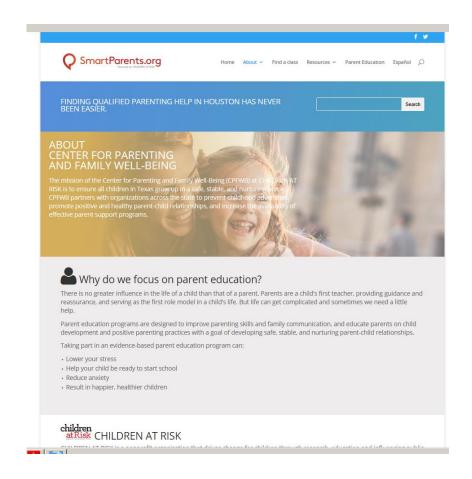


- Formed a coalition chaired by the Surgeonin-Chiefs at Texas Children's Hospital and Children's Memorial Hermann
- 10 local hospitals are delivering Period of Purple Crying<sup>®</sup> to 20,000 families this year
- Period of Purple Crying® is an educational program to normalize infant crying, teach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

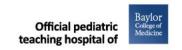




- Trained 86 providers from 19
   organizations to deliver Triple P, a
   parent education program at churches,
   schools, afterschool programs,
   daycares, clinics, and social service
   agencies.
- Developed a website and marketing campaign to decrease stigma and improve access





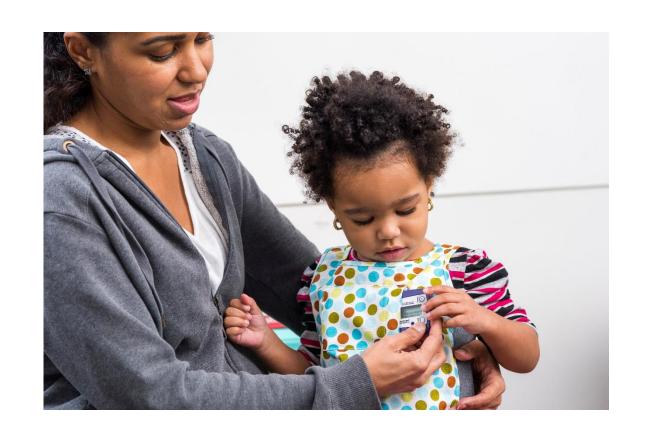


#### Safe Babies

 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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