Bright Futures - Improving Preventive Care

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Agenda

Introduction & Background

4th Edition Updates
- 3 New Themes
- Expanded evidence and rationale
- New Screening Recommendations

Goals of the Well Child Visit

Bright Futures Tools
In the past 12 months, I have no relevant financial relationships with the manufacturer(s) of any commercial product(s) and/or provider(s) of commercial services discussed in this CME activity.

I do not intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.

These slides were customized from available material produced by the AAP and Bright Futures teams.
Participants will be able to:

- Understand the updates to the 4th edition of *Bright Futures/AAP* Guidelines for children and adolescents

- Support the use of pediatrician-tested strategies and *Bright Futures* tools to improve the quality of preventive services delivered in their clinical setting
...is a set of principles, strategies and tools that are theory-based, evidence-driven, and systems-oriented, that can be used to improve the health and well-being of all children through culturally appropriate interventions that address the current and emerging health promotion needs at the family, clinical practice, community, health system and policy levels.
### Periodicity Schedule

**Recommendations for Preventive Pediatric Health Care**

Bright Futures/American Academy of Pediatrics

These guidelines represent a consensus by the American Academy of Pediatrics and Bright Futures. The AAP endorses the importance of preventing or correcting problems in comprehensive health supervision and the need to avoid fragmentation of care.

Developmental, psychological, and chronic disease issues for children and adolescents may require frequent monitoring and treatment to achieve optimal health. Periodic examination and screening techniques or processes may be needed to ensure that surveillance and referral processes are sustained.

Periodic examination and screening techniques or processes may be needed to ensure that surveillance and referral processes are sustained. These guidelines are designed to provide an overview of the periodicity of assessments and to address many of the questions that arise when selecting appropriate periodicity schedules. The schedules are very general and are not intended to be used to replace the need for a detailed medical record.

### Available at:
https://www.aap.org/periodicityschedule

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<tr>
<th><strong>Domains</strong></th>
<th><strong>0-24 Months</strong></th>
<th><strong>2-5 Years</strong></th>
<th><strong>5-10 Years</strong></th>
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**Notes:**

- **0-24 Months:** Schedule is for children aged 0-24 months.
- **2-5 Years:** Schedule is for children aged 2-5 years.
- **5-10 Years:** Schedule is for children aged 5-10 years.
- **10-12 Years:** Schedule is for children aged 10-12 years.
- **12-15 Years:** Schedule is for children aged 12-15 years.
- **15-18 Years:** Schedule is for children aged 15-18 years.
- **18+ Years:** Schedule is for adults aged 18 years and older.

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**References:**


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**Additional Resources:**

- [AAP Periodicity Schedule](https://www.aap.org/periodicityschedule)
At the heart of the medical home is the relationship between the clinician and the family or youth.

Bright Futures is the health promotion/disease prevention part of the medical home.
The Bright Futures Guidelines provide the background and all the details.

Bright Futures can be used by physicians, nurses, schools, publish health officials, state Medicaid generally follows

Use the Guidelines along with other Bright Futures materials

Each visit has priorities made by expert panels unique for that particular age group.
Part 1: Health Promotion Themes
- 12 chapters highlighting key health promotion themes
- New themes in development: Social determinants of health; Media use, Children with Special Health Care Needs

Part 2: Health Supervision Visits
- Rationale and evidence for screening recommendations
- 32 age-specific visits (including prenatal visit)
- 5 health supervision priorities for each visit
  - Designed to focus visit on most important issues for child that age
  - Includes: social determinants of health, health risks, developmental issues, positive reinforcement
Bright Futures Guidelines, 4th Edition

- Child Healthy Development
- Family Support
- Mental Health and Emotional Well-Being
- Nutritional Health
- Physical Activity
- Healthy Weight
- Promoting Lifelong Health for Families and Communities
- Oral Health
- Healthy Sexuality
- Safety and Injury Prevention
- Community Relationships and Resources
- Promoting the Healthy and Safe Use of Social Media
- Children and Youth with Special Health Care Needs
Theme 1

Promoting Life Long Health for Families and Communities
Promoting Life Long Health for Families and Communities

- Each visit includes discussion of social determinants of health
  - Early experiences are cumulative, influence health into adulthood
  - Risk factors AND protective factors
  - No specific tool is recommended for screening
    - However, specific topics need to be addressed
      - Intimate partner violence
      - Food insecurity
      - Alcohol, tobacco, drugs
Social Determinants of Health
• 4\textsuperscript{th} Edition contains more evidentiary support for the new themes
Adverse Childhood Experiences Study

• ACE Study by Kaiser Permanente 1995-1997
  – > 17,000 participants
  – Standardized exam & number of AE experienced during childhood
  – Total number of ACEs used as a measure of cumulative childhood stress
    • Physical, emotional, sexual abuse
    • Emotional or physical neglect
    • Witness to IPV
    • Loss of birth parent
    • Growing up with household substance use disorder, mental disorder or incarcerated household member
  – Identified many associations with adult health conditions
    • Dose dependent
Theme 2

Promoting the Healthy and Safe use of Social Media
Promoting the Healthy and Safe use of Social Media

- Social media has an ever increasing effect on communication, interpersonal relations, development, and health.
- New Screen Time Recommendations
- One size does not fit all
  - Family Media Use Plan
Theme 3

Promoting Health for Children and Youth with Special Health Cares Needs
Promoting Health for Children and Youth with special Health Care Needs

- The US Department of Health and Human Services Maternal and Child Health Bureau
  - “…….have or are at increased risk for chronic physical, developmental, behavioral, or emotional conditions, and who require health and related services of a type or amount beyond that required generally.”
Screening Updates
Updated Screening for Infants and Children

• Bilirubin
  – Universal screening at initial visit (usually in the hospital)
• Maternal Depression
  – Universal screening at 1 month through 6 month visits
• Dyslipidemia
  – Universal screening once between 9 & 11 year visits
• Oral Health
  – Universal Fluoride Varnish at 6 month or first tooth through age 5 years
  – Selective Fluoride Supplementation at 6 month through 16 years
Updated Screening Recommendations for Adolescents

• Adolescent Hearing Screening – universal
  – Audiometry once during the early, meddle and late adolescent visits
  – Screen higher frequencies of 6000 & 8000

• Cervical Dysplasia Screening
  – Starting at age 21 years

• Universal Screening for Alcohol and Tobacco
  – No longer selective screening
Goals of the Well Child Visit

- Disease Detection
- Disease Prevention
- Health Promotion
- Anticipatory Guidance
Components of a Bright Futures Visit

- History
- Surveillance
- Physical examination
- Screening
- Immunizations
- Anticipatory guidance
Previsit Questionnaires
- Allows healthcare provider to gather pertinent information without using valuable time asking questions

Documentation Forms
- Enables Provider to document all pertinent information and fulfill quality measures

Parent/Patient Handouts
- Provides Parental Education all the Bright Future Priorities for the visit
The Bright Futures Tool and Resource Kit also contains supplementary materials:
- Additional Parent/Patient Handouts
- Developmental, behavioral, and psychosocial screening and assessment tools
- Practice management tools for preventive care
- Information on community resources

All of Bright Futures developed materials are in the public domain

Office-Based Systems Components

- Utilize a preventive services prompting system
- Utilize a recall/reminder system (to address immunizations and well child visits)
- Utilize a system to track referrals (paper-based or electronic)
- Utilize a system to identify children with special health care needs
- Link families to appropriate community resources
- Utilize a strength-based approach and shared decision-making strategy
Questionnaires

- Paper
- Electronic
  - At the visit in the waiting or exam room
  - At home (via email)

- Make appointment time 15 minutes earlier

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- Practice support and nursing staff in charge of how this happens:
  - Have a staff session to reinforce importance and contribution
  - Train how to distribute
  - Develop a scoring system
  - Develop a system to alert practitioner to know “when ready to proceed”
  - Help parents/youth with literacy or language differences
  - Have all tools and supplies ready
  - Shift some responsibilities from the clinician to non-clinician staff where appropriate
What can you get from a Bright Futures Previsit Questionnaire?

- Maternal depression screening
- Medical risk screening
  - TB, Lead, Anemia, STIs, Cholesterol
  - Vision and Hearing
    - If possible, practice staff can perform or set up
- “Parental/youth concerns and questions” for this visit
- Oral health risk assessment
  - Dental home/fluoride H₂O
- Developmental surveillance for young children
- Strength/developmental surveillance for school aged children & adolescents
PRIORITIES FOR THE VISIT

The first priority is to attend to the concerns of the parents. In addition, the Bright Futures Early Childhood Expert Panel has given priority to the following topics for discussion in this visit:

- Family support (parental well-being, adjustment to toddler’s growing independence and occasional negativity, queries about a new sibling planned or on the way)
- Child development and behavior (adaptation to nonparental care and anticipation of return to clinging, other changes connected with new cognitive gains)
- Language promotion/hearing (encouragement of language, use of simple words and phrases, engagement in reading/singing/talking)
- Toilet training readiness (recognizing signs of readiness, parental expectations)
- Safety (car safety seats; parental use of safety belts; falls, fires, and burns; poisoning; guns)
### Screening

<table>
<thead>
<tr>
<th>Universal Screening</th>
<th>Action</th>
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<tbody>
<tr>
<td>Development</td>
<td>Structured developmental screen</td>
</tr>
<tr>
<td>Autism</td>
<td>Autism Specific Screen</td>
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<table>
<thead>
<tr>
<th>Selective Screening</th>
<th>Risk Assessment</th>
<th>Action If RA +</th>
</tr>
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<tbody>
<tr>
<td>Oral health</td>
<td>Does not have a dental home</td>
<td>Referral to dental home or, if not available, oral health risk assessment</td>
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<tr>
<td></td>
<td>Primary water source is deficient in fluoride</td>
<td>Oral fluoride supplementation</td>
</tr>
<tr>
<td>Blood pressure</td>
<td>Children with specific risk conditions or change in risk</td>
<td>Blood Pressure</td>
</tr>
<tr>
<td>Vision</td>
<td>Parental concern or abnormal fundoscopic examination or cover/uncover test results</td>
<td>Ophthalmology referral</td>
</tr>
<tr>
<td>Hearing</td>
<td>+ on risk screening questions</td>
<td>Referral for diagnostic audiologic assessment</td>
</tr>
<tr>
<td>Anemia</td>
<td>+ on risk screening questions</td>
<td>Hematocrit or hemoglobin</td>
</tr>
<tr>
<td>Lead</td>
<td>If no previous screen or change in risk</td>
<td>Lead screen</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>+ on risk screening questions</td>
<td>Tuberculin skin test</td>
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*See Rationale and Evidence chapter for the criteria on which risk screening questions are based.*
Bright Futures Previsit Questionnaire
18 Month Visit

For us to provide you and your baby with the best possible health care, we would like to know how things are going.
Please answer all of the questions. Thank you.

What would you like to talk about today?

We are interested in answering your questions. Please check off the boxes for the topics you would like to discuss most today.

Your Child and Family
- Taking time for yourself
- Being a role model
- Your child getting along with brothers and sisters
- Family time together
- Having another child
- Getting your child to try new foods

Your Child’s Behavior
- How your child acts
- How to tell your child she did a good job
- Fun activities for your child
- Your child being scared in new places
- Setting limits and discipline

Talking and Hearing
- How your child talks
- Helping your child to learn

Safety
- Learning when your child is ready
- Car safety seats
- Preventing falls, fires, and poisoning
- Gun safety
- Keeping your child safe outside

Questions About Your Child

Have any of your child’s relatives developed new medical problems since your last visit? If yes, please describe:

Yes No Unsure

Hearing
- Do you have concerns about how your child hears?
- Do you have concerns about how your child speaks?

Vision
- Do you have concerns about how your child sees?
- Do you have concerns about how your child’s eyes appear?
- Do you have concerns about how your child’s eyes appear (unusual or seem to cross, drift, or be lazy)?
- Do your child’s eyes close or does one eyelid tend to close?
- Have your child’s eyes ever been injured?

Lead
- Does your child have a sibling or playmate who has had lead poisoning?
- Does your child live or regularly visit a house or child care facility built before 1950 that is being or has recently been within the past 6 months renovated or remodeled?

Tuberculosis
- Does your child live in a county at high risk for tuberculosis countries other than the United States, Canada, Australia, New Zealand, or Western Europe?
- Has your child traveled (had contact with resident population) for longer than 1 week to a country at high risk for tuberculosis?
- Has a family member or contact had tuberculosis or a positive tuberculin skin test?
- Is your child infected with HIV?

Anemia
- Do you ever struggle to put food on the table?
- Does your child’s diet include iron-rich foods such as meat, eggs, iron-fortified cereals, or beans?

Oral Health
- Does your child have a dentist?
- Does your child’s primary water source contain fluoride?

Have there been any major changes in your family safety?:
- Move
- Job change
- Separation
- Divorce
- Other

Your Growing and Developing Child

Do you have concerns about your child’s development, learning, or behavior?:
- No
- Yes, describe:

Check off each of the tasks that your child is able to do:
- Helps around the house
- Walks up steps
- Scoops 2 small blocks
- Sits
- Laughs in response to others
- Knows name of favorite book
- Speaks 6 words
- Speaks and cup without spilling most of the time
- Points to 1 body part
What’s Left?

- Further history including identification of parental strengths
  - Additional visit questionnaire with questions in each of the five visit priority areas
- BMI
- Physical exam
- Answering questions, addressing concerns and anticipatory guidance about five priority topics
- If a change needs to be considered, use a shared decision-making approach
- Immunizations
Case Studies 1 & 2
Case Study 1: Maternal Depression

Mia

- 28-year-old married mother of two
- College educated
- Currently a high school math teacher, but considering staying at home
- On 3 month parental leave
- Husband is computer consultant and travels once a week for job
- She is well-liked at school and has friends from school and book club
- With her first child she had a relatively easy adjustment and has a good child care situation
Embarrassed that she is having so much trouble

Mia is at home and feels like she should be able to do this

IF WE DO SCREENING

WHAT SCREENING TOOL
Patient Health Questionnaire-2

Over the past 2 weeks, how often have you been bothered by any of the following problems?

Little interest or pleasure in doing things.

0 = Not at all
1 = Several days
2 = More than half the days
3 = Nearly every day

Feeling down, depressed, or hopeless.

0 = Not at all
1 = Several days
2 = More than half the days
3 = Nearly every day

Total point score: __________

Available at:
http://www.innovations.ahrq.gov/content.aspx?id=2280
Maternal Depression Questionnaire

Maternal Depression: PHQ-9

Available at: http://www.phqscreeners.com/
Case Study 2: Autism

Jason

- 24-month-old who is only speaking 2 to 3 words. Most of his speech is jibberish. He also has prolonged temper tantrums lasting 15 to 20 minutes.

- Mother brought her concerns to her previous pediatrician at 18 months. She was told boy’s usually talk later and temper tantrums are normal.
### Case Study 2: Autism cont.

#### Jason

- **M-CHAT-R Screening**

- **Bright Future Guidelines**
  - Autism screening at 18 and 24 months
Case Study 2: Autism cont.

M-CHAT-R Screening (excerpt)

For more information on autism screening tools, go to: mchatscreen.com/
How do I address a positive screening response?

- Maternal depression
  - Referral to OB/nurse midwife, primary care or mental health professional (set up ahead of time)
  - Co-located/employed mental health practitioner in the practice
  - Referral to a mental health professional

- Adolescent mental health issues
  - More practitioner education and experience
  - Telephone, telemedicine and email support systems

- Developmental screening
  - Have a developmental behavioral specialist come to practice once a month to see kids with positive screens
This resource contains comprehensive listings of codes that may not be used by your practice on a regular basis. We recommend that you identify the codes most relevant to your practice and include those on your encounter form/billing sheet.
EQIPP Bright Futures, an online learning program, weaves improvement principles and concepts with pediatric-specific clinical content to improve health outcomes. It is designed to identify and continuously close gaps in practice using practical tools.

- EQIPP Bright Futures courses are currently undergoing revision. It is expected to re-launch within 6 – 12 months.
- EQIPP participants simultaneously earn CME credit and meet MOC Program Part 4: Performance in Practice requirements. EQIPP is now a member benefit.
Web Site Resources

Bright Futures Guidelines provides a common framework for well-child care from birth to age 21.

The Guidelines are the cornerstone—the handy Pocket Guide, Previsit Questionnaires, Visit Documentation Forms, Parent/Patient Education Handouts, and family materials are designed to help you implement the Guidelines in practice with the time you have!

brightfutures.aap.org/
Resources: Parent/Family

- **healthychildren.org**
  - General information related to child health and/or more specific guidance on parenting issues
  - Information on AAP policies, guidelines, publications, and other child health resources
  - Tips & tools
    - [www.healthychildren.org](http://www.healthychildren.org)

- **Brightfutures.aap.org**
  - Patient/Parent handouts in the Bright Futures Tool & Resource kit
  - Family Resources Web page
  - Virginia Department of Health educational videos
    - [brightfutures.aap.org/](http://brightfutures.aap.org/)

- **Healthy Child Care America**
  - Promotes cognitive, social and physical development of children in early education and child care
  - Supports the needs of health professionals interested in promoting healthy and safe early education and child care programs
  - Resource library (for health care and early education & child care professionals)
    - [www.healthychildcare.org/bfutures.html](http://www.healthychildcare.org/bfutures.html)

- **Bright Futures Family Pocket Guide**
  - Developed by the National Family Voices Project IMPACT with input from the Bright Futures National Center
  - Easy-to-use book designed to help families support health and wellness for their children at every age (in English and Spanish)
  - [www.fv-impact.org/](http://www.fv-impact.org/)
Goals for the well child visit:

- Disease Detection
- Disease Prevention
- Health Promotion
- Anticipatory Guidance

- 3 New Themes added to the 4th Edition
- New Screening Recommendations
  - Infants
  - Children
  - Adolescents
Questions & Answers

THANK YOU!
