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Office Based Prevention of Child Abuse and Neglect: Lessons Learned from the Practicing Safety QULIN Project

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Office Based Prevention of Child Abuse and Neglect: Lessons Learned from the Practicing Safety QIIN Project



Diane Abatemarco, PhD, MSW, Co-PI, Ruth Gubernick, MPH, Steve Kairys, MD, MPH, FAAP, Co-PI

Abstract

Parental behavior effects child psychosocial development. Parents who once had the benefits and supports of extended families and communities are now more isolated in their parenting. The isolation of families increases stress. New parents receive little education and support to deal with stress and the added stress of a newborn or their very young children. This poster presentation will describe a quality improvement project based in pediatric practices. The study was designed to test methods to increase anticipatory guidance, screening, and referral for psychosocial development. The project included physician use of chart data to identify outcomes of their enhanced care. The study included quantitative and qualitative methods (i.e. in depth interviews surveys, etc.) to determine physician adoption of prevention bundles. 15 practices throughout the U.S. adopted new practices to screen and refer for maternal depression, infant crying, toileting and discipline. Physicians do not typically use the chart data to inform their practices but will if prompted as shown in this study. Outcome measures such as developmental assessments can be used by physicians to determine the impact and quality of care of interventions on child health. This work demonstrates that physicians can play an important role with the use of enhanced tools to treat the “new morbidities” that arise in the first three years of life.

References

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Background

- Millions of children are physically, emotionally, sexually abused &/or neglected each yr.
- Children < age 3 account for nearly 30 % of victims. Current costs of child protection & treatment over \$24 billion yr.

New Morbidities - Pediatric practices in a prime position for expanded role in primary & secondary prevention of abuse & neglect. Over 2/3 of parents discuss non-medical concerns w/ pediatricians. A 1987 study: doctors second only to a parent’s mother of sources for advice on childrearing. Changing physician behavior requires going beyond continuing education to community-based efforts that focus on system change.

Objectives

- Identify which Practicing Safety (PS) tools were reported to be the most useful in each of the 3 bundles
- Recall at least 2 qualitative themes uncovered by post in-depth interviews
- Analyze the office supports and systems that enable successful adoption of interventions
- List at least 2 lessons learned from the QIIN PS project

Materials & Methods

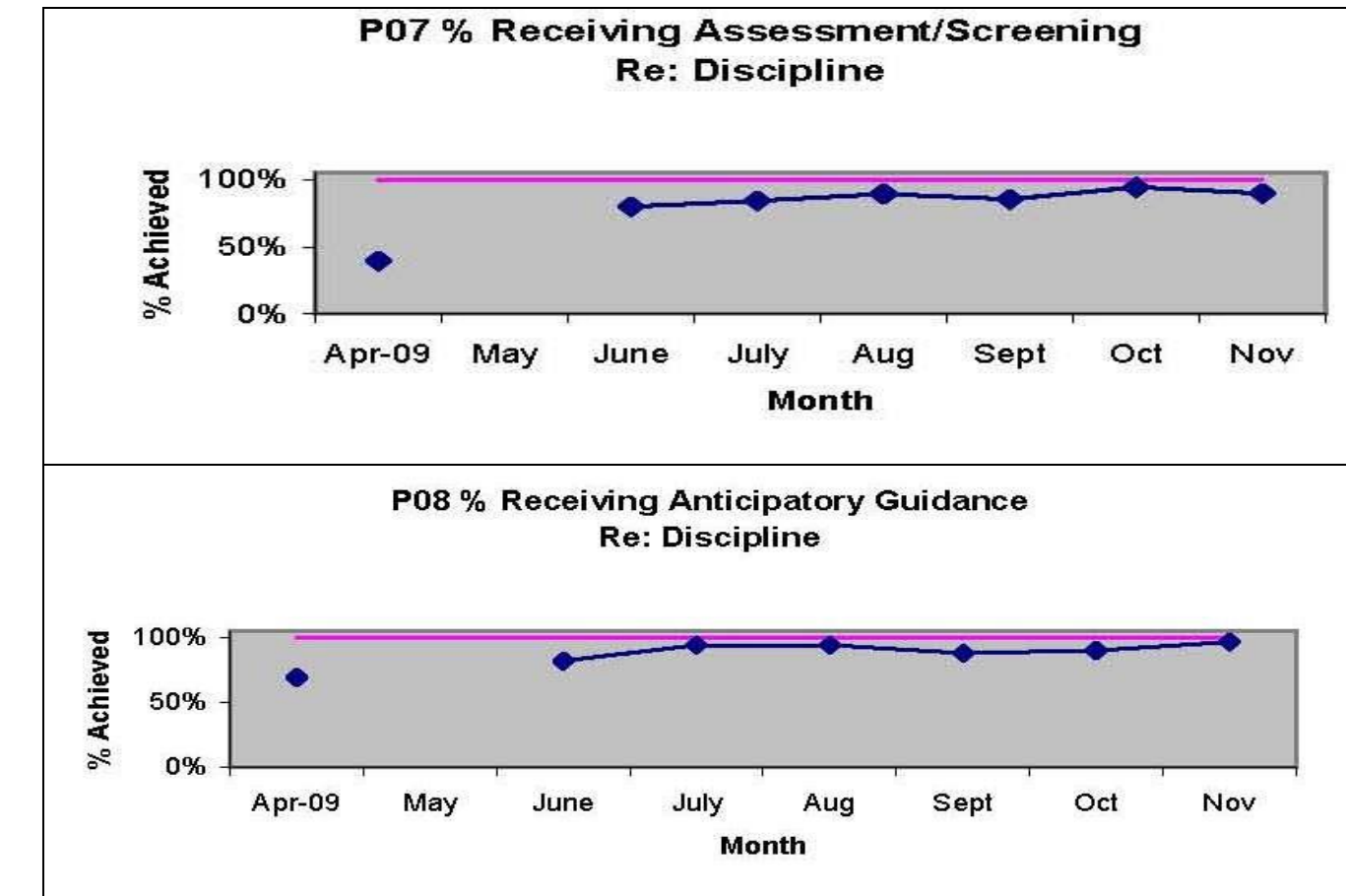
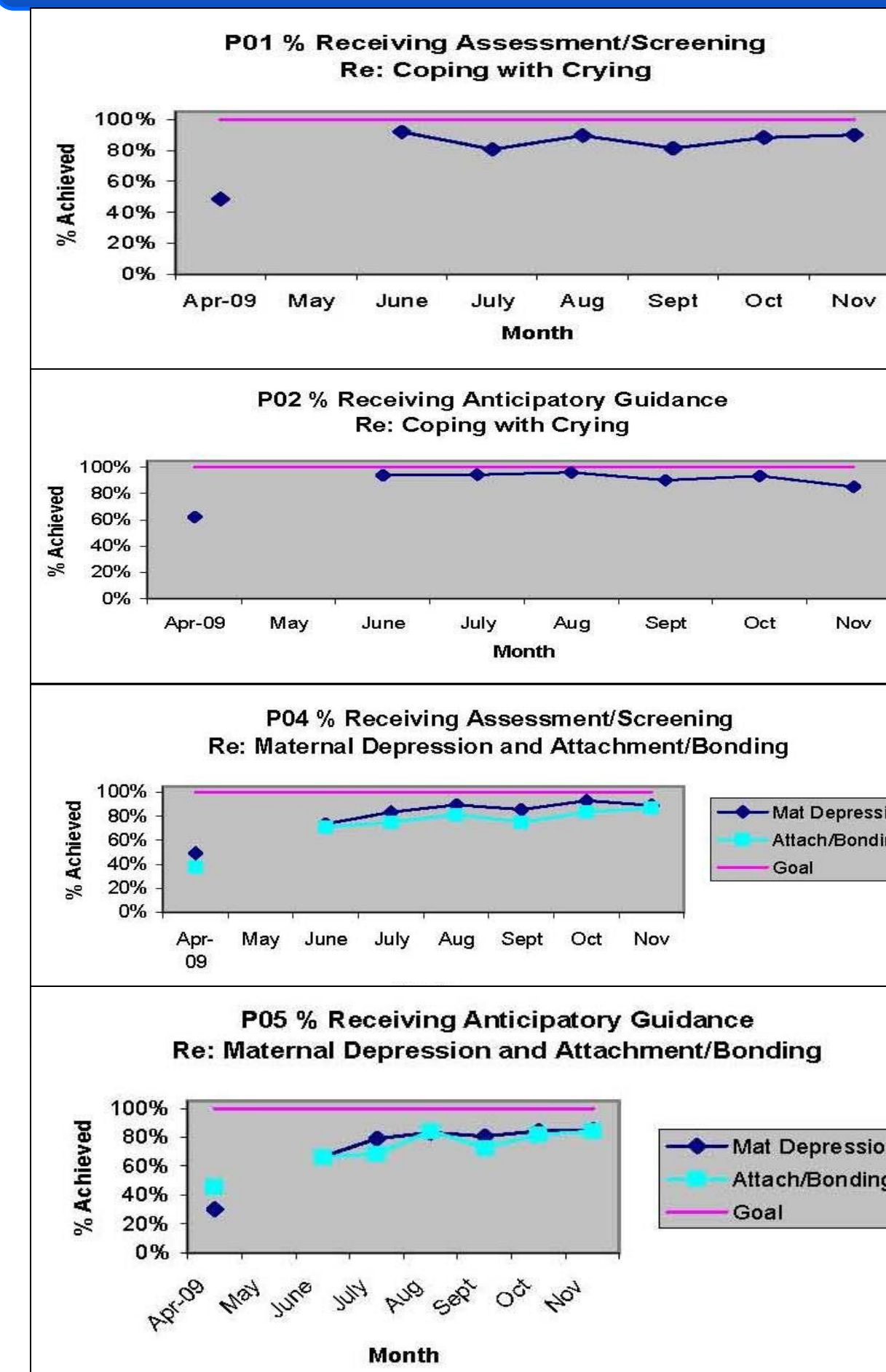
Modified Learning Collaborative with 14 teams (lead physician plus 2 others from practice)
Model for Improvement; Plan, Do, Study, Act; small tests of change
 •Pework, Baseline chart review, Pre-Inventory Survey, Learning Session, Intervention, Monthly Chart Review/Chart Documentation Forms
Data Collection: 10 charts of patients at 2-month visit (infant & mother/caregiver bundles) & 10 charts of patients at 18-month visit (toddler bundle), Monthly Progress Reports, Monthly Team Calls, Review of Run Charts, Follow-up, Post-Inventory Survey, Post Toolkit, Evaluation Survey, Post-Telephone Interviews

Practicing Safety Toolkit

3 Bundles

- Infant: coping with crying
- Mother/Caregiver: maternal depression, bonding/attachment
 - Toddler: effective discipline, toilet training
- Each bundle includes a practice guide and tools for each topic

Results



Qualitative Themes

- Consistent use of PS toolkit
- Systemization of risk
- Changes to chart documentation
- Community resource linkages
- Initiation of meetings
- Improved medical education
- Implementation of QI methodology
- Increased awareness
- Challenges
- Unanticipated positive outcomes

Discussion

- Practices need guidance to incorporate practice-based protocols that address child abuse & neglect prevention as part of well-child care
- Pediatricians, if supported & mentored, are excited to offer families more concrete & systematic guidance in these areas
- Practicing Safety can inform more successful implementation of enhanced care & assists practices in establishing a medical home
- Parents are receptive to guidance on these topics & believe these issues are of significant concern
- Practicing Safety provided an opportunity for enhanced clinical education for physicians, nurses, residents, etc