F-2 - Implementation of Screening Guidelines in a Culturally Diverse Pediatric Primary Care Practice…Then What?

Purpose: The purpose of this project was to assess the feasibility and uptake of incorporating standardized screening tools for obesity and autism during annual well child visits in a small, ethnically diverse pediatric primary care practice in Southern California.

Background and Significance: Implementation science relates to the dissemination and implementation of research into practice. Standardized screening is recognized as an important process in identifying conditions early to allow for early intervention. Although best practice guidelines have been shown to be effective, the process of translation into practice has been challenging.

Design: Current practice workflow was reviewed and a needs assessment was conducted resulting in a standardized obesity assessment tool implementation for children ages of 5-18 years with >95% body mass index (BMI). Patients identified offered Nurse Practitioner (NP) led individualized and tailored weight management educational sessions. Secondly, an autism screening tool was implemented at the 18 month well child visit.

Findings: The results of this quality improvement evidence based project demonstrated successful implementation of obesity and autism screening tools with an uptake of 77% and 60% respectively. Specific to obesity screening, 82 out of 452 children were diagnosed with >95% BMI. Additionally, tailored and individualized nurse practitioner led weight management education sessions were offered to families, with low parental uptake (24%).

Clinical Implications: Formal standardized screening tools that are integrated into existing workflow can be successfully implemented into an ethnically diverse pediatric primary care setting. There were identified gaps that exist between parents’ perception of obesity, weight concerns and potential and future health consequences.

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**BACKGROUND SETTING**
- Private pediatric primary care practice in Southern California
- 2 Pediatricians, 1 Pediatric Nurse Practitioner
- Inconsistent implementation of screening guidelines
- Ethnically diverse patient population

**AIM /PURPOSE**
- To increase uptake of standardized screening tools
- Identify gaps in weight management program

**EVIDENCE FOR PROBLEM**
- American Academy of Pediatrics (AAP) practice guideline for screening tools (2011)
- 33% of children are obese and overweight in US
- The evidence supports screening for early identification and early intervention improves outcomes
- Translation of guidelines into practice can be challenging

**SCREENING TOOLS/ PROGRAM**
- Obesity Assessment Tool: Department of Health Care Services: Child Health and Disability Prevention (CHDP) Program
- Autism Screening Tool: Modified Checklist for Autism in Toddlers, Revised (MCHAT-R) Program
- NP individualized tailored weight management program based on motivational interviewing and behavioral change.

**RESULTS- OBESITY SCREENING UPTAKE**
- Total children >5 years old screened for obesity: 453
- BMI >95% obese children: 82 or 18%

**RESULTS- AUTISM SCREENING UPTAKE**
- Autism: No positive screening identified

**RESULTS- OBESITY**

**COST BENEFIT ANALYSIS**
- Low cost interventions, easily integrated into workflow with potential benefits
- Cost reduction of early identification and intervention versus long term disability

**CONCLUSION/IMPLICATIONS**
- Purposeful structured implementation of screening can be effective
- Process integrated into electronic health record workflow would greatly increase uptake and sustainability
- Parental education aimed at consequences of obesity is an identified gap
- Minimal interest in participation of tailored education opportunities

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