

Transforming
Pediatrics
for Early
Childhood:
Program
Spotlight

Pediatric primary care is a nearly universal, frequent touchpoint for children and families. There are 16 recommended well visits during the first five years of a child's life, and 90% of families visit a pediatric practice setting in this same timeframe. This provides an unparalleled opportunity to advance early childhood developmental (ECD) care by meeting families where they already are. Research shows that the prenatal through age 5 period is critical for early brain development and lifelong health, yet many pediatric practice settings have not fully implemented recommended universal practices and a continuum of care that includes proven strategies to promote ECD and family well-being.

The **Transforming Pediatrics for Early Childhood (TPEC)** program advances the delivery of ECD services in pediatric practice settings to improve access to care that promotes early developmental health, school readiness, and child and family flourishing. This includes addressing the social and relational drivers of health. The Health Resources and Services Administration's Maternal and Child Health Bureau has **funded eight TPEC recipients**, **referred to as Resource Hubs**, to:



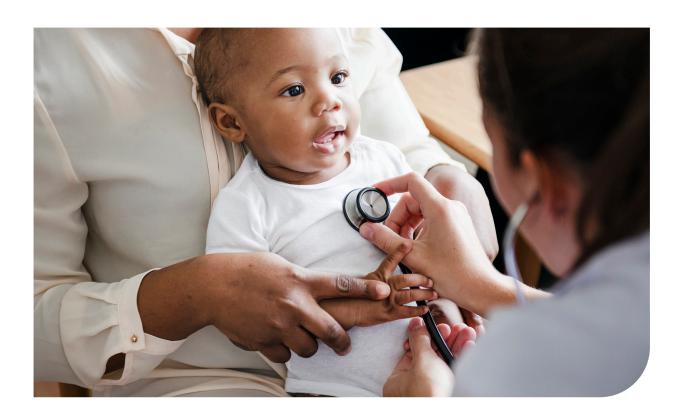
- **1. Improve access to the ECD Continuum of Care** that spans developmental health promotion and prevention services, comprehensive screening and surveillance for child and family strengths and needs, linkage and coordination for follow-up services, and issue-focused consultation or brief intervention.
- **2.** Improve the capacity of pediatric practice settings and workforce to deliver high-quality and sustainable ECD services that address the holistic needs of children and families.

While each TPEC Resource Hub has a unique context, they are all expected to reach a high percentage of families who are eligible for Medicaid and the Children's Health Insurance Program (CHIP). Each Hub also supports pediatric sites across a variety of settings, such as large hospital systems, pediatric and family medicine practice settings, federally qualified health centers, and resident training programs in both rural and urban locations.

How Each Resource Hub Implements the ECD Continuum of Care

The TPEC Resource Hubs are expected to implement the ECD Continuum of Care across pediatric practice sites. Key strategies for implementing the continuum and creating the conditions to spread, scale, and sustain the approach in their state include:

- 1. Identifying and engaging pediatric practices as partners in practice transformation.
- 2. Cultivating and equipping a workforce with ECD expertise.
- 3. Providing support and intensive technical assistance to implement and integrate the continuum.
- 4. Identifying barriers and promoting strategies to finance, incentivize, and sustain continuum services and related supports.
- 5. Facilitating coordination and referral pathways to ECD services and embedding TPEC as part of a comprehensive early childhood system.



TPEC is grounded in an understanding that all children and families should experience the ECD Continuum of Care. The continuum is based on the American Academy of Pediatrics (AAP) Bright Futures recommendations, which the majority of states have adopted as their Medicaid benefit for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT). Some TPEC Resource Hubs have chosen to advance the implementation of specific models and interventions to support their practice transformation efforts. Explore examples of some specific strategies each Resource Hub uses in the table below.



TPEC Resource Hubs

	Program	Grantee	Strategies Used to Implement the ECD Continuum of Care			
			Workforce	Family Engagement	Models and Interventions	
1.	Arkansas Transforming Health outReach for Infants and children (P-5) through Vital community Engagement (THRIVE P-5)	University of Arkansas School of Medicine	Community Health Workers	Advisory Network	HealthySteps	
2.	Early Needs Response for Infant and Child Health – Los Angeles County (ENRICH-LAC)	Los Angeles County Department of Public Health, Division of Children's Medical Services	Community Health Workers	Parent Educators	ENRICH-LA; Help Me Grow	
3.	High Five for P-5	Johns Hopkins University (Maryland)	Integrated Mental Health Professionals	Family Leaders on Practice Transformation Teams	Chicago Parent Program; HealthySteps; Mothers and Babies; Reach Out and Read	

4.	Hofanti Chokma Program	Chickasaw Nation (Oklahoma)	Integrated Mental Health Professionals	Family Leaders on Practice Transformation Teams	HealthySteps; Project LAUNCH; Reach Out and Read
5.	New Jersey SEEDlings	New Jersey AAP Chapter	Integrated Family Resource Specialists	Family Leaders on Practice Transformation Teams	HealthySteps; Help Me Grow; Reach Out and Read
6.	Oregon Pediatric Improvement Project (OPIP)	Oregon Health & Science University	Community Health Workers; Integrated Mental Health Professionals	Family Leaders on Practice Transformation Teams	Help Me Grow
7.	TPEC Vermont	Vermont Agency of Human Services/ Department of Health, Maternal Child Health	Integrated Mental Health Professionals	Family Leaders on Practice Transformation Teams	Developmental Understanding and Legal Collaboration for Everyone (DULCE); Help Me Grow; Reach Out and Read
8.	Transforming Massachusetts Pediatrics for Early Childhood (TMPEC)	Massachusetts Department of Public Health	Integrated Mental Health Professionals	Family Leaders on Practice Transformation Teams	HealthySteps; Project LAUNCH; Reach Out and Read; <u>Team Up;</u> Homegrown Model

Technical Assistance to Achieve TPEC Goals

The Early Childhood Developmental Health Systems (ECDHS): Evidence to Impact Center provides support to the TPEC Resource Hubs. The Center responds to the TPEC Resource Hubs' needs through a continuum of technical assistance offerings (e.g., individual team calls, peer-to-peer learning sessions), resource development and dissemination, continuous quality improvement, and impact storytelling. The ECDHS: Evidence to Impact Center is led by ZERO TO THREE, AAP, Help Me Grow National Center, Center for the Study of Social Policy, Family Voices, James Bell Associates, and the Thrive Center for Children, Families, and Communities at Georgetown University. The Center is also committed to tracking learnings, successes, opportunities, and facilitators and identifying and addressing barriers to sustainability for future spread and scale to transform pediatrics.

Resources to support TPEC efforts are available at earlychildhoodimpact.org.

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