CHANGE IDEA: Establish a collaborative care model to coordinate primary care and specialized child health and behavioral health services.

STEP 1: GET READY (TASKS)

A. Define the focus population: families with children who need both primary care and behavioral health services (e.g., infant mental health, dental care).
B. Identify primary care providers and behavioral health providers willing to participate (e.g., infant mental health professionals, dental providers).
C. Establish communication protocols to ensure seamless and timely sharing of patient information and care plans.
D. Develop a standardized bidirectional referral process.
E. Train providers on the benefits of the model and how to integrate their services effectively.
F. Create a shared electronic health record (EHR) or case management system for coordinated communication and documentation.

STEP 2: PLAN AND PRACTICE

Test a care coordination plan that clearly defines provider roles and common goals for child health (e.g., developmental milestones, behavioral health, dental care).

A. Test the model (communication, referral process, training, shared EHR/case management system) with a small group of families.
B. Identify and address any challenges to collaboration (e.g., gaps in communication, coordination, appointment scheduling, service integration).
C. Collect baseline data on behavioral health screenings, dental checkups, and developmental assessments.

STEP 3: REVIEW AND REFINE

A. Monitor the pilot group to assess effectiveness of the collaborative care model.
B. Gather feedback from providers and families on the coordination process.
C. Evaluate if families experienced improved access to primary care and behavioral health services and whether coordination enhanced care delivery.
D. Measure key health outcomes (e.g., developmental progress, mental health, dental health).

STEP 4: EXPAND

A. If successful, expand the collaborative care model to additional families and providers (e.g., pediatric specialists, therapists, nutritionists).
B. Refine the referral system, provider communication, and shared care planning based on lessons learned.

C. Develop implementation tools (e.g., training materials, referral templates, care coordination workflows).
D. Review results to identify further improvements.
E. Assess whether the expanded model improved outcomes for child and behavioral health outcomes.
F. Consider integrating additional services (e.g., early intervention, parent education) for a more holistic care model.

STEP 5: SUSTAIN

A. Develop a long-term sustainability strategy, including securing funding, resources, and stakeholder buy-in.
B. Train new providers to ensure they understand the value of collaboration and are prepared to integrate the model.
C. Create a plan for regular program evaluation and feedback to ensure continuous and responsive improvements.