



Children’s Health Committee
Revised Goal Statements and Areas of Focus and Proposed Measures of Success

DESIRED SYSTEM OUTCOME	All children have access to high quality preventive and continuous health care, including physical, behavioral, oral, and nutritional health.	
CONDITIONS TO BE MET	Children and families have access to high quality, affordable health care coverage and services, including services that contribute to healthy births.	All children are provided access to early periodic screening and diagnosis to identify physical, behavioral, and developmental health issues and, if necessary, follow-up treatment/services are provided.
PRIORITY SYSTEM ROLES	Access to Quality Health Care Coverage & Service – Collaborate with partners to increase access to high quality health care services (including oral health and behavioral health) and affordable health care coverage for young children and their families.	Early Screening & Intervention - Collaborate with partners to increase awareness of and access to a continuum of information, support, and services for families and their children who have or are at risk of having developmental, physical, and/or behavioral health issues.
REVISED GOALS	<p>GOAL 1 To increase Arizona children birth through five with access to preventive health services, including oral health and behavioral health</p> <p>GOAL 2 To increase Arizona children birth through five that are receiving care coordination services and healthcare through a medical and dental home</p> <p>GOAL 3 To increase parents and caregivers knowledge and understanding on how to support their child’s optimal health and development.</p>	<p>GOAL 1 To increase Arizona children birth through five receiving appropriate developmental and health screening</p> <p>GOAL 2 To create, sustain, and expand the development of coordinated statewide and community based systems to identify and serve children with physical, mental, and/or developmental health needs</p> <p>GOAL 3 To increase Arizona children birth through five that are getting appropriate supports, intervention services based on screenings</p> <p>GOAL 4 To increase Arizona pregnant women who are receiving early and adequate prenatal care, perinatal depression screening and services.</p>

REVISED AREAS OF FOCUS

These focus areas include topics identified through the Children's Health Committee survey and Task Force opportunities.

- Continue efforts to improve children's oral health and work to make sure that oral health care is unduplicated and coordinated for children. (1,2,3)
- Support health insurance outreach, enrollment and increase health literacy and health insurance literacy (1,2,3)
- Collaborate with AHCCCS and managed care plans to work on issues affecting children birth through five. Conduct analysis of data on utilization of healthcare services, including EPSDT and other children's preventive health services. Use data to guide the work on children's access to care. Leverage flexibility within Medicaid reimbursement to help support services such as home visitation, physical health, and behavioral health services, particularly for at-risk families. (1,2)
- Support medical homes, (including Indian healthcare providers) providing care coordination services for children with emphasis on children with complex needs and understanding social determinants of health impacting young children and families. (3)
- Explore ways to help rural and tribal children better access services such as lay health workers, telehealth, transportation, and workforce capacity building. (1,2)
- Support partners in promoting EPSDT, including an adequate network of providers and benefits for children (1, 2)
- Coordinate programs, funding, care delivery for children among state agency partners, managed care plans, tribal health, and other partners working with children birth through five so that services are not duplicated and families receive timely and appropriate care when they need it. (2)
- Identify how to integrate health programs provided in early childhood education settings so that it is aligned with the care provided to children in medical and dental homes. Bring partners together to explore/define what an integrated system of care looks like (2)
- Partner to help families navigate the impact of health reform on children's health and increase the health literacy of families so they can effectively advocate within the health system for timely, appropriate, and coordinated care for their children. (2)
- Support developmental, autism, and sensory screening services, inclusion of screening for social determinants and toxic stress to build resiliency and perinatal depression screening for mothers (1,4); and connect children to appropriate services and interventions who have received screening and need assistance (3).
 - Partner with Arizona Academy of Pediatrics and primary care providers to ensure children are receiving appropriate screenings during well visits, referred for evaluation and connected to services and treatment. (1,2,3)
 - Work with partners to reduce duplication of services, coordinate quality screenings, help families understand the results, and support the appropriate follow up and referrals needed.
 - Work with Indian healthcare providers to improve collaboration with state agencies to increase screening and decrease no show rates
 - Continue to partner with efforts to increase sensory screening including identification of data sources.
- Explore the use of telehealth services to expand capacity, with attention to shortage areas (3)
- Provide and coordinate information for families and providers working with young children around the importance of screenings and where to access screening services. (1,2,3,4)

<p>PROPOSED MEASURES OF SUCCESS</p> <p><i>Specific, measurable outcomes, determined by existing data or data that could be obtained that FTF will set a benchmark to achieve at the end of the five year strategic plan. Programmatic measures will be identified as part of the action planning and strategy development by FTF.</i></p>	<ul style="list-style-type: none"> • % of AZ children 0-5 with tooth decay (FTF/AZDHS/ITU) • % of AZ children 0-5 with undiagnosed tooth decay (FTF/AZDHS) • % of AZ children 0-5 with health coverage (Census) • % of AZ children who receive comprehensive, ongoing and coordinated care within a medical home (National Children’s Health Survey) • % of children receiving a well child visit in the past year (AHCCCS data/Indian healthcare data) <p>ALL DATA SHOULD BE DISAGGREGATED BY SOCIOECONOMIC STATUS, GEOGRAPHY, RACE/ETHNICITY</p>	<ul style="list-style-type: none"> • % of AZ children age 10 months to 5 years who received a standardized screening for developmental or behavioral problems (National Children’s Health Survey) • % of AZ children 0-5 who received a screening for vision (National Children’s Health Survey) • % of AZ children 0-5 who received a screening for hearing (TBD, requires further discussion) • % of children entering kindergarten exiting preschool special education to regular education (ADE, Tribal Head Start) • % Adequacy of Prenatal Care received by pregnant women in Arizona (PRAMS) <p>ALL DATA SHOULD BE DISAGGREGATED BY SOCIOECONOMIC STATUS, GEOGRAPHY, RACE/ETHNICITY</p>
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Definitions

Social determinants of health: The complex, integrated, and overlapping social structures and economic systems that are responsible for most health inequities. These social structures and economic systems include the social environment, physical environment, health services, and structural and societal factors. (CDC)

Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Resources that enhance quality of life can have a significant influence on population health outcomes. Examples of these resources include safe and affordable housing, access to education, public safety, availability of healthy foods, local emergency/health services, and environments free of life-threatening toxins.(Healthy People 2020) <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

Additional Data:

- % of AZ children 0-5 who have seen a dentist in the past year (FTF/AZDHS; National children’s health survey)
- % of children who families indicated that during the past 12 months, they needed dental care but could not get it at that time (NHANES)
- % of women who received counseling and support around maternal depression during or after pregnancy (PRAMS)
- % of AZ children Age 19-35 months who are immunized (National Immunization Survey, AZDHS)

Cross-Cutting Themes

The following themes emerged across the Children's Health, Early Learning, and Family Support Committees of the Early Childhood Task Force.

- **Outreach:** Increase effective outreach to families to connect them with appropriate information, services, and support. Understanding that there are multiple ways to connect families to information, services and supports, focus on coordination and alignment of this work across the goal areas.
- **Public Awareness:** Strengthen partnerships with effective messengers (for example, pediatric and family practices) to increase parents' awareness of the services and supports available and increase the general public's awareness of the importance of early childhood and the work of FTF.
- **Advocacy:** Strengthen engagement with legislators and public policy-makers on early childhood issues.
- **Professional Development:** Promote a professional development system that is inclusive of efforts to support early childhood professionals from multiple professional backgrounds across early learning, family support, and children's health.
- **Partnerships:** Increase coordination and alignment with partners and leveraging resources.