Strategies to Deliver HealthySteps to Children and Families in Rural and Small Pediatric Primary Care Practices





BRING HEALTHYSTEPS TO YOUR COMMUNITY

HealthySteps is committed to improving the lives of young children and families in a wide array of pediatric primary care settings and geographic areas.

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HealthySteps is an evidencebased, team-based pediatric primary care model that promotes the health, well-being and school readiness of babies and toddlers.

THE HEALTHYSTEPS NATIONAL NETWORK SPANS 20+ STATES, WASHINGTON, D.C., AND PUERTO RICO



HEALTHYSTEPS IS CURRENTLY IN 160+ PEDIATRIC PRACTICES SUPPORTING 200,000+ CHILDREN



HEALTHYSTEPS TRANSFORMS THE LIVES OF CHILDREN AND FAMILIES

HealthySteps, a program of **ZERO TO THREE**, is an evidence-based, team-based pediatric primary care model that promotes the health, well-being and school readiness of babies and toddlers, with an emphasis on families living in low-income communities. HealthySteps has demonstrated myriad positive outcomes for children, their families and the practices that serve them.

HealthySteps partners with the pediatric primary care team to provide tailored support for common and complex concerns that primary care providers often lack time to address, such as behavior, sleep, feeding, attachment, parental depression, social determinants of health and adapting to life with a baby or toddler. The entire practice works together to implement the HealthySteps model, with leadership from a Physician Champion and a child development professional, known as a HealthySteps Specialist, integrated into the primary care team.

The HealthySteps national network spans more than 20 states, Washington, D.C., and Puerto Rico. HealthySteps is currently in more than 160 pediatric primary care practices supporting more than 200,000 children.

HEALTHYSTEPS IS A POPULATION-BASED AND RISK-STRATIFIED MODEL

The HealthySteps model includes eight Core Components organized into three Tiers of Service that are responsive to each family's needs. Universal Services (Tier 1) for all children and families in the practice include child developmental and social-emotional/behavioral screening; family needs screening; and access to a child development support line. Based on these universal screenings as well as clinical judgment and/or identified parent concerns, the practice identifies children and families in need of additional services. As needed, families receive Short-Term Supports (Tier 2), including development and behavior consults with the HealthySteps Specialist; care coordination and systems navigation services; positive parenting guidance; and early learning resources. Children and families with the greatest needs also receive Comprehensive Services (Tier 3) in the form of ongoing, preventive, team-based well-child visits during which both the HealthySteps Specialist and primary care provider meet with families.

HEALTHYSTEPS IS REPLICABLE ACROSS A VARIETY OF PRACTICE SETTINGS

The low-cost model is replicable in many settings from small pediatric practices to large health systems in both urban and rural geographies. Currently, **20% of HealthySteps sites across the country are in rural areas and 35% are small sites, defined as practices with a panel size of up to 500 children birth to 3**. While one full-time equivalent HealthySteps Specialist can help a practice serve up to 2,000 children birth to 3, the HealthySteps model has flexibility and innovative solutions that can help smaller practices and those with limited resources provide services to young children and families within their communities.

CONSIDERATIONS FOR IMPLEMENTING HEALTHYSTEPS IN RURAL AREAS

HealthySteps can be implemented in practices where the birth to 3-panel size may not necessitate the hiring of a full-time HealthySteps Specialist or a practice cannot hire a full-time HealthySteps Specialist due to workforce shortages. The strategies below require new practices to attend the mandatory **HealthySteps Institute** and complete implementation planning with the HealthySteps National Office to support successful model implementation.

STRATEGIES FOR IMPLEMENTING HEALTHYSTEPS IN RURAL AREAS/ SMALL PRACTICES

- Deploy flexible scheduling: This approach allows HealthySteps Specialists to split their time between two sites (due to the important work of integrating fully into the practice, the National Office does not recommend splitting time across more than two sites). Flexible scheduling requires participating sites to attempt to schedule well-child visits for children birth to 3 on certain days of the week (or potentially less difficult, only scheduling visits for families needing Tier 3 services on certain days of the week) and the ability for HealthySteps Specialists to split time between sites that are in geographic proximity. This will also require office administrative staff to understand the HealthySteps Specialist's schedule and how to book visits.
- Expand HealthySteps Specialist role: This approach requires that the role of the HealthySteps Specialist expand to accommodate a full-time position and maintain cost-effectiveness. This may include a HealthySteps Specialist seeing children older than 3 and/ or performing additional services beyond HealthySteps' Core Components (e.g., autism assessments, lactation consults, etc.) with a focus on reimbursable activities. Multiple sites in rural areas of Arizona, Colorado and South Carolina have HealthySteps Specialists that also serve as lactation consultants. Small urban sites in New York offer autism assessments alongside the usual three Tiers of Service.
- **Repurpose current staff**: Another approach is to retrain an existing staff member who is already performing many of the core services of the HealthySteps model (e.g., social worker) to dedicate a portion of time to serving children birth to 3 and their families. This allows the practice to leverage existing resources and does not require hiring a new staff member.
- Use telehealth: This approach relies on using telehealth solutions to provide access to HealthySteps Specialists located at other sites. Telehealth equipment and space are required, as well as staff training on using equipment, two-way booking capability for sites and identification of willing HealthySteps Specialists with the capacity to provide telehealth consults.

The HealthySteps National Office is currently working with our national network to explore these strategies in greater detail and share lessons learned with interested practices.