

Welcome

Best Practices 101: AMCHP's Approach to Collecting, Highlighting and Disseminating Effective Programs in MCH

For the audio, type your number in the pop-up box that appears on your screen OR call:

1-866-910-4857
Participant Code: 637242



Technology Notes Cont.

- ❖ **Call Recording and Presentation** will be available on AMCHP's website shortly after the webinar:

<http://www.amchp.org/bestpractices>

Association of Maternal & Child Health Programs



Mission: AMCHP supports state maternal and child health programs and provides national leadership on issues affecting women and children.

AMCHP is a national resource, partner and advocate for state public health leaders and others working to improve the health of women, children, youth and families, including those with special health care needs. AMCHP's members come from the highest levels of state government and include directors of maternal and child health programs, directors of programs for children with special health care needs, and other public health leaders who work with and support state maternal and child health programs.

Webinar Objectives

- ❖ Increase knowledge about how AMCHP defines, collects and disseminates best practices
- ❖ Participants will learn about the submission process and the reviewing criteria for best practices
- ❖ Increase participant awareness of the Innovation Station database and the ability to use this resource

AMCHP's Best Practices Program: An Overview

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*Supporting Resilient Maternal & Child
Health Leaders*



Presentation Outline

- Background Information
- Best practice Definition and Criteria
- Collection and Submission Process
- Reviewing Best Practices
- Innovation Station
- Next steps
- Questions and Discussion



History of Best Practices at AMCHP



In 2004, AMCHP convened a Best Practices workgroup that was lead by internal staff to:

- Develop the best practices definitions/criteria
- Develop materials for submissions and review
- Assemble a review panel
- Solicit Best Practices from AMCHP members (i.e., state and territorial MCH programs)
- Discuss vision for a website and supporting database (Innovation Station)



The Importance of Collecting Best Practices



- States want to know what's being done by their peers in MCH
- The public health field is facing funding challenges
 - ❖ Resources must be used wisely
 - ❖ Program and policy decisions need to be evidence-based



The Best Practice program helps to accomplish one of AMCHP's strategic goals to:

Improve maternal and child health outcomes by promoting a life course perspective and sharing effective and promising practices with state and territorial MCH programs





What makes something a “best” practice?



Defining what “Best Practice” means for AMCHP

AMCHP defines “Best Practices” as a continuum of emerging, promising and best practices.



Emerging

- Evaluation plan in place
- Incorporates continual quality improvement
- Based on guidelines, effective models
- Incorporates theoretical foundations, or uses a novel approach

Promising

- Strong evaluation data presented which demonstrates effectiveness

Best

- Program has been peer reviewed
- Replicable in many settings
- Positive results linked to practice



How are practices collected?



- A call for submissions is sent out via:
 - ❖ Listservs (Adolescent health dir, etc)
 - ❖ AMCHP publications
 - ❖ Regional calls

- Practices may also be identified through:
 - ❖ Staff recommendations
 - ❖ Annual conference
 - ❖ Best Practice Review Panel



The Submission Process



Applicants complete an online form (Zoomerang) and submit it electronically

Submissions are accepted on a rolling basis; the review process occurs twice per year



AMCHP Best Practice Submission Form

DEFINITION & PURPOSE

WHAT IS A BEST PRACTICE?

AMCHP defines "best practices" as a continuum of practices, programs and policies that range from emerging to promising to those that have been extensively evaluated and proven effective ("best practices"). A best practice could focus on the health of women, adolescents, young children, families, or children with special health care needs. It could address mental health, data and assessment, financing, program integration, workforce development, emergency preparedness, family involvement, or another public health issue in Maternal and Child Health (MCH).

BEST PRACTICE (categories and criteria)

EMERGING PRACTICE

- Incorporates characteristics or theoretical foundations of other effective public health practices OR uses a novel approach that incorporates alternative foundations
- Based on guidelines, standards or models that have been proven effective
- Incorporates a process of continual quality improvement
- Has an evaluation plan in place to measure program outcomes

PROMISING PRACTICE (in addition to those listed above)

- Has strong evaluation data that demonstrates effectiveness of practice

BEST PRACTICE (in addition to those listed above)

- Has expert/peer review that demonstrates effectiveness of practice
- Has been replicated and produced desirable results in a variety of settings
- Has evaluation results that clearly link positive outcomes to the practice and not outside factors

WHY IS AMCHP COLLECTING BEST PRACTICES?

The purpose of AMCHP's Best Practice work is to identify, collect and disseminate best practices in MCH to serve as a resource for AMCHP members and partners and to help improve state MCH programs. This resource will allow people to share information and get ideas from a wide range of existing programs.

AMCHP Best Practice Submission Form

BACKGROUND

- 1 What is the name of your practice or program?

- 2 Please provide a description/abstract of the practice you are submitting in 200 words or less which address the following 1.) project goals 2.) activities undertaken to develop the practice 3.) how was project/practice success measured 4.) what makes this a remarkable practice, and 5.) how will others benefit from learning about this practice.

- 3 What is the primary population focus for your best practice? *Check all that apply.*

- All
- Adolescents
- Children
- Children/Youth with Special Health Care Needs
- Families/Consumers
- Infants/Newborns
- Women
- Other (please specify):



18 Were there other factors in your state or community that influenced the launch of this practice- e.g., legislation, new leadership, release of data, etc.? Please describe how these contributed.



19 Was the practice implemented as intended?

YES NO

What challenges did you face in implementing your practice?



20 How did you overcome the challenges you encountered in implementing your practice?



OUTCOMES



21 What data did you collect to measure the outcomes of your practice?



22 What were the results of your practice? Be specific, including both short-term and long term outcomes. If available, please provide data (e.g., through use of control group, etc) demonstrating that outcomes were achieved by your practice and not due to outside factors.

Submission Do's

- Clearly describe your program in terms of:
 - ❖ What are you doing? (activities)
 - ❖ Why are you doing it? (need)
 - ❖ What population are you targeting? (who)
 - ❖ How are you measuring success? (evaluation)
 - ❖ What were the results/outcomes? (impact)

- Answer all the questions as completely as possible

- Use spell check

- Clearly define all acronyms

- Remember to highlight successes, lessons learned and resources that you've created



Why Submit?

- Demonstrate the success and lessons learned from your program and spreading the word about your work
- Serve as a resource to other states and contribute to program replication
- Potential to receive an award and be recognized at AMCHP's annual conference
 - ❖ Plaque and complimentary conference registration



Best Practice Review Panel Members



Diverse Review Panel

- Representatives from state health departments
- Federal partners such as CDC and MCHB
- Representatives from partner organizations
- Representatives from foundations

Areas of expertise

- Maternal and Child Health
- Women's Health
- Children with Special Health Care Needs
- Epidemiology
- Policy
- Specialty Areas (e.g. chronic disease, injury)



Innovation Station

AMCHP's database of best practices



This database catalogs the emerging, promising and best practices that are reviewed and accepted by the Best Practice Review Panel. This site:

- Provides AMCHP website users with information on best practices in an easy-to-use, searchable format
- Encourages replication of best practices in other states through information sharing
- Provides useful resources about other organization's best practices programs as well as information about evaluation

The site can be found at: www.amchp.org/innovationstation





State:

Region:

Practice Category:

Primary Topic:

National Performance Measures:

Year:

Keywords:

Document	State	Primary Interest
Partners in Pregnancy	VA	Birth Outcomes
Environmental Health Training for Nurses	RI	
Partners in Care: Together for Kids	FL	Autism and other Developmental Disabilities
Oregon Care COOrdination Program	OR	Family/Consumer Involvement

NOTE: 1) The blank space in the drop down boxes is the equivalent of the "ALL" option. 2) Upon hitting the Search button, this page will refresh and links to the documents will be listed under the Search button.

http://www.amchp.org/AboutAMCHP/BestPractices/InnovationStation/ISDocs/Partners%20in%20Pregnancy-VA.pdf

1 / 3 75% Sign Find



Partners in Pregnancy ★

Location: Virginia (statewide)
Date Submitted: 11/2008
Category: Promising Practice

BACKGROUND

In Virginia, 10,300 babies born each year are low birth weight (LBW), and 3,000 of these are Medicaid births. Virginia's infant mortality rate is 7.2 per 1,000 live births, making it the 18th highest state in the country and above the national average for infant mortality. Despite advances in health care, research, technology and millions of dollars invested in the prevention of low birth weight, the incidence of LBW has increased; 7-11% of all live births are complicated by LBW. Improvement in neonatal technology has improved survival rates but at a high cost. Neonatal intensive care days are among the most expensive, and the social impact from significant morbidity after birth is staggering. Partners in Pregnancy is a partnership between Children's Health Insurance Program (CHIP) of Virginia and the Optima Health Plan aimed at improving health outcomes for high risk pregnant women and their infants.

Partners in Pregnancy provides high-risk pregnant women and their infants with the care they need to survive and grow up healthy. The program involves home visits and case management by CHIP nurses and outreach workers, in combination with a medical home and regular nurse consultations provided by Optima. This program has been effective in improving the lives of at-risk mothers and their infants, and can be utilized by other programs that share the goal of improving health outcomes for at-risk women and children.

PROGRAM OBJECTIVES

The overall program goal is to improve adverse pregnancy outcomes by decreasing NICU days and dollars. Primary project objectives include:

- Reduction of NICU days and costs
- Maintenance of eligibility for Medicaid coverage for mothers and infants
- Increasing percentage of infants with a medical home
- Reduction of health care costs to improve health

TITLE V/MCH BLOCK GRANT MEASURES ADDRESSED

#3: The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home.
#13: Percent of children without health insurance.
#15: Percentage of women who smoke in the last three months of pregnancy.

TARGET POPULATION SERVED

The Partners in Pregnancy project serves low-income women in 11 urban, suburban and rural communities in central and eastern Virginia. The target population was identified from pregnant Optima Health Plan-enrolled women based on a demographic assessment of high risk factors, including past history of pre-term labor, low birth weight and other measures of poor health outcomes. As of November 2008, over 700 women have received program services.

PROGRAM ACTIVITIES

CHIP nurses were trained according to the March of Dimes recommendations for the care of high-risk pregnant women. Ten March of Dimes nursing modules were presented in 2-day trainings across three regions of the state by Sentara/Optima Partners in Pregnancy nurses. Nurses received copies of each of the modules. Several months after the initial training, a follow-up training was conducted to instruct nurses on how to apply March of Dimes recommendations to specific high-risk pregnancy scenarios.

Great Beginnings Start Before Birth prenatal training was offered to all outreach workers. This training covered the three trimesters of pregnancy, nutrition, depression during and after pregnancy, labor and delivery planning, breastfeeding, cultural implications on pregnancy and lifestyle issues such as domestic violence, smoking, substance and alcohol use, and motor vehicle safety during pregnancy.

Bright Futures Guidelines were used by all CHIP nurses and outreach workers as a basis for health supervision activities conducted in the family's home after the child is born. All CHIP nurses and outreach workers receive training on the Bright Futures Guidelines during CHIP Core Training. In order to make these training materials and protocols more

Successes So Far

- Assembling an engaged and active review panel
- Creating definitions and criteria for best practices
- Developing a system for collecting and reviewing applications
- Innovation Station



Future Steps include:

- Marketing the Innovation Station database
- Creating new methods to collect practices from members
- Assisting states with replication of best practices/ facilitating peer to peer sharing
- Tracking the utility of Innovation Station among users





Discussion



Discussion Questions



Are there programs that you know about that are doing innovative or promising work in your state?

How are you currently sharing information about your programs both within or outside of your state (are there particular meetings, calls, etc) that you use to disseminate information?

What are some ways that AMCHP can facilitate state to state sharing of effective programs beyond the Innovation Station?



Final Questions?



Thank You!

You will receive a brief evaluation following this webinar – we appreciate your feedback!

Visit AMCHP's website for the recording and slides:

www.amchp.org/bestpractices



**For more information about best practices,
contact:**

bp@amchp.org or visit:

Best Practices website:

www.amchp.org/bestpractices

Innovation Station: www.amchp.org/innovationstation

