Insights into your patient population from KIDSNET

November 1, 2018
Warwick, RI
Session Overview

🌟🌟🌟 Overview of KIDSNET, Rhode Island’s integrated child health information system

🌟🌟🌟 KIDSNET reports that can be used for care coordination

🌟🌟 Description of newborn developmental risk screening data collected in KIDSNET

🌟🌟 PCMH Kids Practice Profiles provided by KIDSNET

🌟🌟 Care Coordination case study
What is KIDSNET?

-', 'A Public Health Program – not an electronic medical record

- Integrated Child Health Information System for maternal and child health programs

- Facilitates the collection and appropriate sharing of health data by authorized users for the provision of timely and appropriate preventive health services and follow up
# KIDSNET Partner Programs

**Universal:**
- Newborn Developmental Risk
- Newborn Bloodspot Screening
- Newborn Hearing Assessment
- Immunization
- Childhood Lead Poisoning
- Vital Records
- Child Outreach

**Targeted:**
- WIC
- Early Intervention
- Home Visiting
- Birth Defects
- Cedar (Medicaid care coordination)
- Healthy Weight
- Asthma
- Early Childhood Developmental Screening
- Foster Care
- Head Start
KIDSNET Users

- Medical Care Providers
- Maternal & Child Health Programs
- Head Start and Child Care Agencies
- Schools/Child Outreach
- Home Visitors

- Certified Lead Centers
- Audiologists
- Managed Care Organizations
- Early Intervention
- WIC
- Cedar Centers
KIDSNET can be used to look at information for an individual child.
Check the left-menu bar

Demographics

Search

Enter KIDSNET ID:  

LookUp

Demographic Information - 09/20/2018

<table>
<thead>
<tr>
<th>Child Id</th>
<th>7278013</th>
<th>Medical Record:</th>
<th>Date Updated:</th>
<th>10/05/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name</td>
<td>SNOOPY</td>
<td>Middle: B</td>
<td>Age:</td>
<td>8y 6m</td>
</tr>
<tr>
<td>Last Name</td>
<td>BROWN</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alias:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Race:</td>
<td>WHITE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic:</td>
<td>NO</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender:</td>
<td>FEMALE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOB: (hh:mm)</td>
<td>02/23/2010 -12:00 AM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother's Maiden Name:</td>
<td>TEST</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital:</td>
<td>WOMEN &amp; INFANTS</td>
<td>KIDSNET Status:</td>
<td>ACTIVE</td>
<td></td>
</tr>
<tr>
<td>State of Birth:</td>
<td>RI</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last Known Insurance:</td>
<td>BLUE CROSS/BLUE SHIELD</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurance status may not be current. Verify eligibility directly with the health plan.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Provider History

Current PCP: TEST PEDIATRIC PRACTICE

Immunization

Others:

EAST BAY PEDIATRICS AND ADOLESCENT MEDICINE
FERRETTI, MARCOLINO

Identified at Birth:

DOCTOR, TEST

Parent/Guardian Information

MOTHER: (1 of 1)

<table>
<thead>
<tr>
<th>Parent/Guardian:</th>
<th>TIGE BROWN MOTHER</th>
<th>DOB:</th>
<th>01/01/1970</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship:</td>
<td></td>
<td>Language:</td>
<td>ENGLISH</td>
</tr>
<tr>
<td>Home Phone:</td>
<td>(401) 555-1212</td>
<td>Status:</td>
<td>G</td>
</tr>
<tr>
<td>Alternate Phone:</td>
<td>(401) 222-2222</td>
<td>Status:</td>
<td>G</td>
</tr>
</tbody>
</table>

Parent/Guardian Address:

123 MAIN STREET, Apt: 22
NEW SHOREHAM, RI 22222

Status: G

123 MAIN ST PROVIDENCE, RI 02905
Status: G

Mailing Address:

123 MAIN STREET, Apt: 22
NEW SHOREHAM, RI 22222

Status: G

123 MAIN ST PROVIDENCE, RI 02905
Status: G
**Hearing Assessment Screen**

**Child Information**
- **Name:** KAREN SMITH
- **KIDSNET ID:** 450433
- **Date Of Birth:** 11/01/2004
- **Age:** 4y 9m
- **Gender:** FEMALE
- **KIDSNET Status:** ACTIVE
- **PCP:** DOH TEST PRACTICE
- **Parent/Guardian:** JANET SMITH
- **Date of birth:** 02/11/1980

**Newborn Hearing Screening Results**

<table>
<thead>
<tr>
<th>Date Tested</th>
<th>Screen Type</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/04/2004</td>
<td>OAE RIGHT EAR</td>
<td>PASS</td>
</tr>
<tr>
<td>12/04/2004</td>
<td>OAE LEFT EAR</td>
<td>PASS</td>
</tr>
</tbody>
</table>

**Screening Result:** Pass

**Audiological Recommendation:** DISCHARGE FROM RIHAP, NO FURTHER ACTION

**Risk Factors:**

**Detailed Audiological Diagnostic Information**

<table>
<thead>
<tr>
<th>Date Tested:</th>
<th>Diagnosis Left:</th>
<th>Degree Left:</th>
<th>Tests performed:</th>
<th>ICD9:</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/25/2009</td>
<td>CONDUCTIVE-PERMANENT</td>
<td>MILD</td>
<td>Tympanometry,DPOAE,Bone Conduction</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Conductive hearing loss unilateral (389.05)</td>
<td></td>
</tr>
</tbody>
</table>

**Audiologist:** KIM AUDIOLOGIST

**Diagnosis Right:** NORMAL

**Degree Right:** N/A

**Risk Factors:**

**Comments:** retest in 6 months
# Lead Screening

**Child Information** - 05/03/2010

<table>
<thead>
<tr>
<th>Name: TOM W SMITH</th>
<th>KIDSNET ID: 66296</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Of Birth: 01/14/2000</td>
<td>Age: 10y 3m</td>
</tr>
<tr>
<td>KIDSNET Status: ACTIVE</td>
<td>PCP: DOH TEST PRACTICE</td>
</tr>
</tbody>
</table>

**Blood Lead Screening Information**

<table>
<thead>
<tr>
<th>Test Date</th>
<th>Physician Name</th>
<th>Sample Type</th>
<th>EP</th>
<th>PbB</th>
<th>Date Updated</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/29/2004</td>
<td>WAGNER, CARRIE L</td>
<td>V</td>
<td>030</td>
<td>013</td>
<td>08/19/2004</td>
</tr>
<tr>
<td>04/15/2004</td>
<td>CHAPMAN, HEATHER A</td>
<td>V</td>
<td>024</td>
<td>015</td>
<td>04/20/2004</td>
</tr>
<tr>
<td>12/30/2003</td>
<td>CHAPMAN, HEATHER A</td>
<td>V</td>
<td>019</td>
<td>013</td>
<td>01/07/2004</td>
</tr>
<tr>
<td>09/11/2003</td>
<td>CHAPMAN, HEATHER A</td>
<td>V</td>
<td>026</td>
<td>015</td>
<td>10/15/2003</td>
</tr>
<tr>
<td>05/08/2003</td>
<td>CHAPMAN, HEATHER A</td>
<td>V</td>
<td>018</td>
<td>019</td>
<td>05/23/2003</td>
</tr>
<tr>
<td>02/13/2003</td>
<td>CHAPMAN, HEATHER A</td>
<td>V</td>
<td>022</td>
<td>017</td>
<td>02/28/2003</td>
</tr>
<tr>
<td>01/09/2003</td>
<td>NO ATTENDING</td>
<td>F</td>
<td>ND</td>
<td>021</td>
<td>02/28/2003</td>
</tr>
</tbody>
</table>

**Environmental Lead Inspection Information**

<table>
<thead>
<tr>
<th>Inspection Date:</th>
<th>06/29/2004</th>
<th>Close Date:</th>
<th>06/30/2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inspection Result:</td>
<td>NO LEAD PAINT FOUND/LEAD PAINT PRESENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status:</td>
<td>CLOSED, ABATEMENT COMPLETE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inspection Address:</td>
<td>19 OCEAN AVE , OCEAN CITY , RI 02101</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date Updated:</td>
<td>06/10/2009</td>
<td>Apt:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Inspection Date:</th>
<th>05/03/2004</th>
<th>Close Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inspection Result:</td>
<td>LEAD PAINT HAZARD - BOTH INTERIOR AND EXTERIOR OPEN</td>
<td></td>
</tr>
</tbody>
</table>
## Immunization

### Search

Enter KIDSNET ID:  

**LookUp**

### Child Information - 09/20/2018

- **First Name:** SNOOPY  
- **Middle:** B  
- **Last:** BROWN  
- **KIDSNET ID:** 7278013  
- **Date Of Birth:** 02/23/2010  
- **Age:** 8y 6m  
- **Gender:** FEMALE  
- **KIDSNET Status:** ACTIVE  
- **PCP:** TEST PEDIATRIC PRACTICE  
- **Parent/Guardian:** TIGE BROWN  
- **Date of birth:** 01/01/1970

### School Requirements:

- **K:** ✗  
- **7th:** ✗  
- **8th:** ✗  
- **9th:** ✗  
- **12th:** ✗  

(as of 8/1/2017)

### Immunization Schedule

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Dose 1</th>
<th>Dose 2</th>
<th>Dose 3</th>
<th>Dose 4</th>
<th>Dose 5</th>
<th>NEXT DUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B</td>
<td>04/21/2010</td>
<td>07/01/2010</td>
<td>11/23/2010</td>
<td>DTaP-HepB-IPV</td>
<td>End of Series Reached</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DTaP-HepB-IPV-1m 29d</td>
<td>DTaP-HepB-IPV-8m 8d</td>
<td>DTaP-HepB-IPV-9m 0d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DTaP</td>
<td>04/21/2010</td>
<td>07/01/2010</td>
<td>11/23/2010</td>
<td>DTaP-HepB-IPV</td>
<td>See Tdap Below</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DTaP-HepB-IPV-1m 29d</td>
<td>DTaP-HepB-IPV-8m 8d</td>
<td>DTaP-HepB-IPV-9m 0d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumo</td>
<td>04/21/2010</td>
<td>07/01/2010</td>
<td>10/20/2010</td>
<td>Prevnar 7</td>
<td>Childhood Series Complete</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Prevnar 7-1m 29d</td>
<td>Prevnar 13-4m 8d</td>
<td>Prevnar 13-7m 27d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polio</td>
<td>04/21/2010</td>
<td>07/01/2010</td>
<td>11/23/2010</td>
<td>DTaP-HepB-IPV</td>
<td>Past Due Dose 4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DT-HepB-IPV-1m 29d</td>
<td>DT-HepB-IPV-4m 8d</td>
<td>DTaP-HepB-IPV-9m 0d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hib</td>
<td>04/21/2010</td>
<td>07/01/2010</td>
<td>10/20/2010</td>
<td>Pedvax HIB</td>
<td>End of Series Reached</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pedvax HIB-1m 29d</td>
<td>Pedvax HIB-4m 8d</td>
<td>Pedvax HIB-7m 27d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rotavirus</td>
<td>04/21/2010</td>
<td>07/01/2010</td>
<td>09/21/2010</td>
<td>Rotateq</td>
<td>End of Series Reached</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rotateq-1m 29d</td>
<td>Rotateq-4m 8d</td>
<td>Rotateq-6m 29d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MMR</td>
<td>02/28/2011</td>
<td>05/05/2013</td>
<td>End of Series Reached</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MMR-12m 5d</td>
<td>MMR-3y 2m</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Child Outreach Screening

Name: SALLY T. BROWN
Date of Birth: 08/10/2013
Age: 5y 1m
KIDSNET Status: ACTIVE
PCP: TEST PEDIATRIC PRACTICE
Gender: MALE
KIDSNET ID: 7519544
Parent/Guardian: MRS BROWN
Date of Birth: 01/01/1970

Child Outreach Screening Packages

<table>
<thead>
<tr>
<th>Year to K</th>
<th>School Year</th>
<th>Package Status</th>
<th>Submit Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>K - 1</td>
<td>2017 — 2018</td>
<td>Archived - Submitted</td>
<td>09/27/2017</td>
</tr>
</tbody>
</table>

Overview

Demographics | Vision | Hearing | Speech/Language | General Development | Social/Emotional Development | Screening Outcome | Special Ed. Referral Follow-Up |

K - 1 Domain Status

<table>
<thead>
<tr>
<th>Domain</th>
<th>No. of Screenings</th>
<th>Domain Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision</td>
<td>1</td>
<td>Refer to PCP Indicated</td>
</tr>
<tr>
<td>Hearing</td>
<td>1</td>
<td>Pass</td>
</tr>
<tr>
<td>Speech / Language</td>
<td>1</td>
<td>Screening Necessary but Incomplete</td>
</tr>
<tr>
<td>General Development</td>
<td>1</td>
<td>Pass</td>
</tr>
<tr>
<td>Social / Emotional</td>
<td>1</td>
<td>Pass</td>
</tr>
</tbody>
</table>
KIDSNET can be used to look at subpopulations of children (e.g. children in your practice ages 0-3)

- Newborn summary
- Children overdue for lead screening
- Children overdue for immunizations
- Pre-filled school health form
- Missing newborn screening
- Newborn Hearing Follow-up needed
Available Reports

1. Patient List Report
2. Developmental Screening - Due Now Report
3. Lead Screening Report - Children Without a Lead Screening
4. Lead Screening Report - Children Due for Second Lead Screening
5. Lead Report - Children with results ≥ 5ug/dl
6. School Eligible Report
7. Immunization Report
8. Newborn Hearing Screening Report
9. Newborn Summary Report
10. Immunizations Submitted to KIDSNET By Other Providers
11. Immunization Coverage Report

Seasonal Reports

Seasonal Influenza - Children Due For Shot #1 Report

Seasonal Influenza - Children Due Now or Due Soon For Shot #2 Report
A list of patients in your practice.

**Reports children without a lead screening**
(Report limited to children less than 6 years of age.)

- Turning 15 months in MARCH, 2019
  - Or...
- From 15 months Up To 36 months
  - Or...

**Date of Birth:**
- From: [ ] / [ ] / [ ] / (mm/dd/yyyy)
- To: [ ] / [ ] / [ ] / (mm/dd/yyyy)
  - Or...

**Age**
- From: [ ] months
- Up To: [ ] months

For more information or to provide feedback, email KIDSNET via the above link.
## Lead Screening Report - Children Without Lead Screening

**Report Criteria:** Monday, May 16, 2005 11:17:33 AM  
**Provider Id:** 9999  
**Practice:** DEMO PEDIATRICS  
**Patients 15 - 36 months**

### Lead Screening Report - Children Without Lead Screening

<table>
<thead>
<tr>
<th>Child Name</th>
<th>Date Of Birth</th>
<th>KIDSNET Id</th>
<th>Not a Patient</th>
<th>Transferred</th>
<th>Moved Out of State</th>
</tr>
</thead>
<tbody>
<tr>
<td>SANDY N BOTTOMS</td>
<td>01/09/2003</td>
<td>251592</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AMANDA JONES</td>
<td>05/07/2003</td>
<td>272925</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALEX LETTY</td>
<td>02/08/2004</td>
<td>272926</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>JOHN SMITH</td>
<td>01/01/2004</td>
<td>272924</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Practice Reports - Immunizations Submitted to KIDSNET By Other Providers

**Report Criteria:** Thursday, September 20, 2018 02:46:22 PM  
**Provider Id:** 34567  
**Practice:** TEST PEDIATRIC PRACTICE  
**Created in KIDSNET From Date:** 01/01/2018  
**To Date:** 09/20/2018  
**Report limited to children less than 19 years of age**

The report is based on when the data was added to KIDSNET, but lists the date of vaccine administration.

## Immunizations Submitted to KIDSNET by Other Providers

**** This Person lives outside of RI, contact KIDSNET if this is incorrect.

<table>
<thead>
<tr>
<th>Child Name</th>
<th>Date Of Birth</th>
<th>KIDSNET Id</th>
<th>CPT-Short Name</th>
<th>Date of Admin</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. SNOOP N KITTY</td>
<td>11/11/2013</td>
<td>7412991</td>
<td>166-FLU ID QUAD</td>
<td>01/01/2018</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>03-MMR</td>
<td>02/02/2018</td>
</tr>
</tbody>
</table>

---

**Report Run:** Thursday, September 20, 2018 02:46:22 PM
Questions?
IDEA (Individuals with Disabilities Act) “Child Find” requirement for states to seek out children at risk for developmental challenges and intervene early

The Rhode Island system is:

1) Developmental risk assessment followed by family visits
2) Screening of actual development, resources, supports and home environment
3) Referral to Early Intervention /other community resources
Who receives a developmental risk assessment?

- All infants born in Rhode Island maternity hospitals
- Infants transferred to RI maternity hospitals if family resides in RI
What data are collected?

- Demographic information used in communication, reporting, data analysis
- Language spoken in the home for written and oral communication with families
- Insurance status
- Prenatal care information
What data are collected? Cont’d.

- Newborn immunizations and hepatitis B status for tracking and follow-up
- Alternate contact information to reach families in emergencies such as life threatening conditions identified through newborn screening
- Community primary care provider for follow-up and care coordination
- Breast feeding data
- Known developmental risk factors
Developmental Risk Factors

- **Child Characteristics**
  - APGAR Score
  - Gestational age
  - Growth parameters
  - Hearing screen
  - HEP B risk
  - Intensive care

- **Parental Characteristics**
  - DCYF
  - Chronic illness
  - Developmental disabilities
  - Mental health history
  - Inadequate prenatal care
  - Substance use

- **Parental Demographics**
  - Caregiver’s education
  - Caregiver’s marital status
  - Maternal age
  - # children living in home

- **Established Conditions**
  - Chromosomal anomalies
  - Developmental disability
  - Genetic disorder
  - Inborn error in metabolism
  - Infectious disease
  - Sensory disorder
  - Toxic exposure
Where do the data come from?

- Delivery sheet
- Birth certificate worksheet
- Hospital data systems
- Hospital staff
- Child’s medical record if indicated
How are the data used?

- Referral to Family Visiting

- Assurance, tracking and follow-up for newborn blood spot, hearing and hepatitis

- Policy development for newborn and early childhood programs

- Analyzing key maternal and child health indicators and trends

- Opens records in KIDSNET to assure and promote public health preventive services throughout childhood
## Statewide Newborn Developmental Screening Data

<table>
<thead>
<tr>
<th>Year</th>
<th>Total DOB 2012 - 2017</th>
<th>Known Established Conditions</th>
<th>Mother Education &lt; 11th grade</th>
<th>Mother not married</th>
<th>NICU &gt; 48 hrs</th>
<th>No previous live births</th>
<th>One or more parental characteristic</th>
<th>Inadequate Prenatal Care</th>
<th>Mother’s previous live births &gt; 5</th>
<th>Birth Weight &lt; 1500 gm</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>10474</td>
<td>204</td>
<td>1365</td>
<td>4959</td>
<td>705</td>
<td>4649</td>
<td>3659</td>
<td>1405</td>
<td>41</td>
<td>170</td>
</tr>
<tr>
<td>2013</td>
<td>10321</td>
<td>230</td>
<td>1141</td>
<td>4749</td>
<td>663</td>
<td>4389</td>
<td>3608</td>
<td>1396</td>
<td>53</td>
<td>143</td>
</tr>
<tr>
<td>2014</td>
<td>10301</td>
<td>242</td>
<td>1179</td>
<td>4802</td>
<td>713</td>
<td>4361</td>
<td>3743</td>
<td>1952</td>
<td>54</td>
<td>144</td>
</tr>
<tr>
<td>2015</td>
<td>10397</td>
<td>221</td>
<td>1177</td>
<td>4390</td>
<td>711</td>
<td>4397</td>
<td>3409</td>
<td>674</td>
<td>63</td>
<td>141</td>
</tr>
<tr>
<td>2016</td>
<td>10241</td>
<td>199</td>
<td>1147</td>
<td>4582</td>
<td>687</td>
<td>4127</td>
<td>3676</td>
<td>987</td>
<td>48</td>
<td>147</td>
</tr>
<tr>
<td>2017</td>
<td>10073</td>
<td>220</td>
<td>1190</td>
<td>4412</td>
<td>718</td>
<td>4187</td>
<td>3570</td>
<td>927</td>
<td>48</td>
<td>150</td>
</tr>
<tr>
<td>Total</td>
<td>61807</td>
<td>1316</td>
<td>7199</td>
<td>27894</td>
<td>4197</td>
<td>26110</td>
<td>21665</td>
<td>7341</td>
<td>307</td>
<td>895</td>
</tr>
<tr>
<td>Average</td>
<td>10301</td>
<td>219</td>
<td>1200</td>
<td>4649</td>
<td>700</td>
<td>4352</td>
<td>3611</td>
<td>1224</td>
<td>51</td>
<td>149</td>
</tr>
</tbody>
</table>

Data Source: RI Department of Health, Center for Health Data and Analysis, KIDSNET
Questions?
PCMH Practice Report

Total Number of Patients DOB 2012 – 2017

Known Established Conditions (eligible for Early Intervention)

Mother Education < 11th grade

Mother not married

NICU > 48 hours

No previous live births (first time parent)

One or more parent characteristic (e.g. history of mental illness)

Inadequate Prenatal Care

Mother’s previous live births greater than 5

Birth Weight Less than 1500 grams
### Sample Practice Profile Report

<table>
<thead>
<tr>
<th>Year of Birth</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total # patients</strong></td>
<td>444</td>
<td>439</td>
<td>442</td>
<td>476</td>
<td>493</td>
<td>PCP indicator = Y</td>
</tr>
<tr>
<td><strong>Birth Weight &lt; 1500 grams</strong></td>
<td>11</td>
<td>6</td>
<td>7</td>
<td>6</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td><strong>NICU &gt; 48 hours</strong></td>
<td>36</td>
<td>41</td>
<td>44</td>
<td>34</td>
<td>37</td>
<td></td>
</tr>
<tr>
<td><strong>Eligible for newborn referral to EI</strong></td>
<td>14</td>
<td>9</td>
<td>16</td>
<td>13</td>
<td>17</td>
<td>Child Characteristic = Y under Known Established Condition</td>
</tr>
<tr>
<td><strong>Mother not married</strong></td>
<td>361</td>
<td>339</td>
<td>342</td>
<td>334</td>
<td>376</td>
<td></td>
</tr>
<tr>
<td><strong>Mother Education &lt; 11th grade</strong></td>
<td>123</td>
<td>104</td>
<td>118</td>
<td>124</td>
<td>119</td>
<td></td>
</tr>
<tr>
<td><strong>Inadequate prenatal Care</strong></td>
<td>102</td>
<td>107</td>
<td>144</td>
<td>46</td>
<td>79</td>
<td>&lt; 6 prenatal care visits before 36 weeks or, total number of prenatal visits &lt; 10 or, No prenatal care visits before 5 months</td>
</tr>
<tr>
<td><strong>Mother’s previous live births greater than 5</strong></td>
<td>2</td>
<td>7</td>
<td>4</td>
<td>6</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td><strong>No previous live births (first time parent)</strong></td>
<td>166</td>
<td>183</td>
<td>147</td>
<td>166</td>
<td>149</td>
<td></td>
</tr>
<tr>
<td><strong>One or more parent characteristic (e.g. chronic illness)</strong></td>
<td>187</td>
<td>188</td>
<td>202</td>
<td>198</td>
<td>237</td>
<td>Y (Mother or Father) under Developmental Disability, Substance Abuse, Mental Health Inpatient/outpatient, DCYF Services or Other</td>
</tr>
</tbody>
</table>
Questions?
Care Coordination Opportunities

- Identify previous primary care providers
- Run reports
- Identify community programs serving family and child
  - Family Visiting
  - Early Intervention
  - WIC
  - Child Outreach
  - Cedar
  - Head Start
Check the left-menu bar
Case Studies