

What's New in Clinical Preventive Services

An update on Policies, Research and Emerging Paradigms of Parental Engagement

**Adolescent and Young Adult Health
National Resource Center**

SAHM Annual Meeting
Washington, DC
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AYAH-NRC : Overview & Scope

- **Funder:**
 - Maternal and Child Health Bureau, Health Services and Resources Administration, USDHHS (cooperative agreement U45MC27709)
- **Grant period:**
 - September 1, 2018 – August 31, 2023 (5 years)
- **Purpose:**
 - To improve the health of adolescents and young adults (ages 10-25) by strengthening the capacity of state maternal and child health (MCH) programs and their clinical partners to address the needs of adolescents and young adults.

More info at <http://nahic.ucsf.edu/resource-center/>

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ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS



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AYAH-NRC: Project Teams & Foci

Adolescent Well Visit Team

- Increase Adolescent Well Visit Rates

Young Adult Team

- Increase State Focus on Young Adult Health

Quality Improvement Project

- Increase screening and follow-up for major depressive episode for adolescents and young adults

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Health Consortium*

Conflict of Interest Statement

The speakers have no commercial relationships to disclose.

The speakers will not be discussing any unapproved uses of pharmaceuticals or devices.

Session Outline

- ✓ **What's new in research and policy:** The latest on the importance of the well visits, the ACA, preventive care.
- ✓ **Engaging parents:** What we thought and what we're learning.
- ✓ **What we can do:** Resources and initiatives around family engaged care

What's New in Research and Policy: The Importance of the Well Visit and the ACA to Adolescents & Young Adults

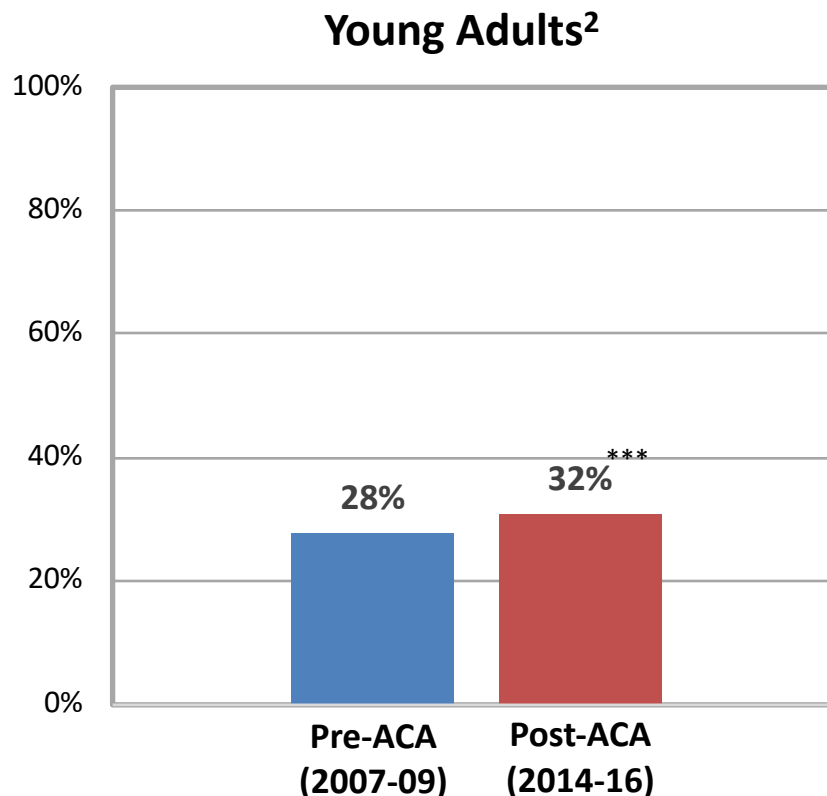
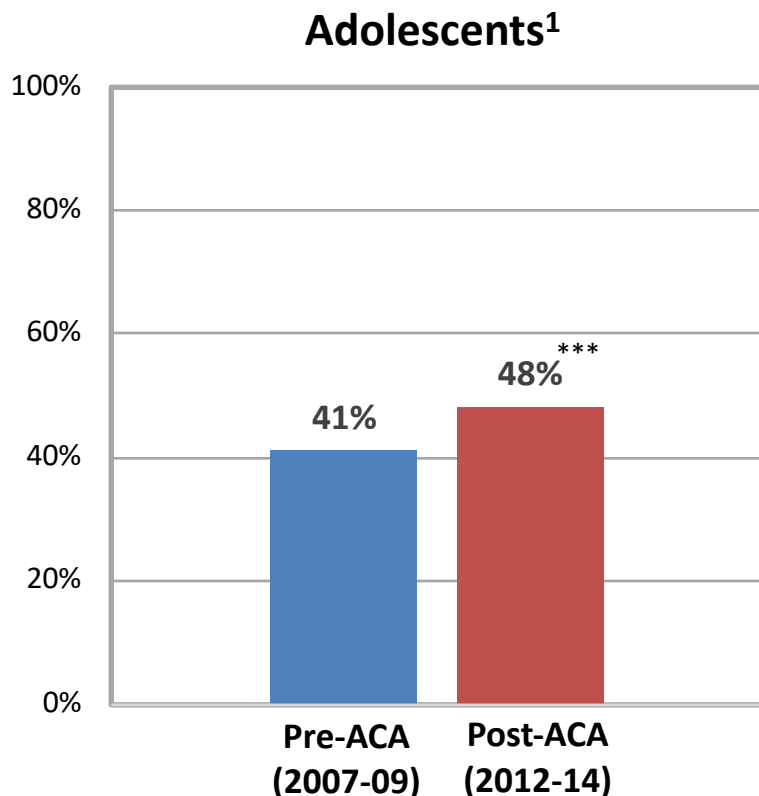
- ✓ The ACA is helping increase well visits and receipt of preventive care
- ✓ The well visit is key to delivery of preventive services
- ✓ Rates are still low

Update on Research and Policy

The ACA is helping increase well visits and receipt of preventive care for Adolescents and Young Adults

- Greatest increases in **adolescent well visit** rates among underserved adolescents (minority, low income, publicly insured)
- **Young adult** rates of receipt of **preventive services** also show greatest increase among underserved

Receipt of Past-Year Well Visit Among AYAs, Pre- and Post-ACA (MEPS)



*** $p < .001$

1-Adams et al., 2018 (<https://www.ncbi.nlm.nih.gov/pubmed/29114725>); 2-Adams et al., In press.

Update on Research and Policy

Services measured in MEPS analyses

- Adolescents

Physical Parameters:

- Blood Pressure
- Weight
- Height

Anticipatory Guidance:

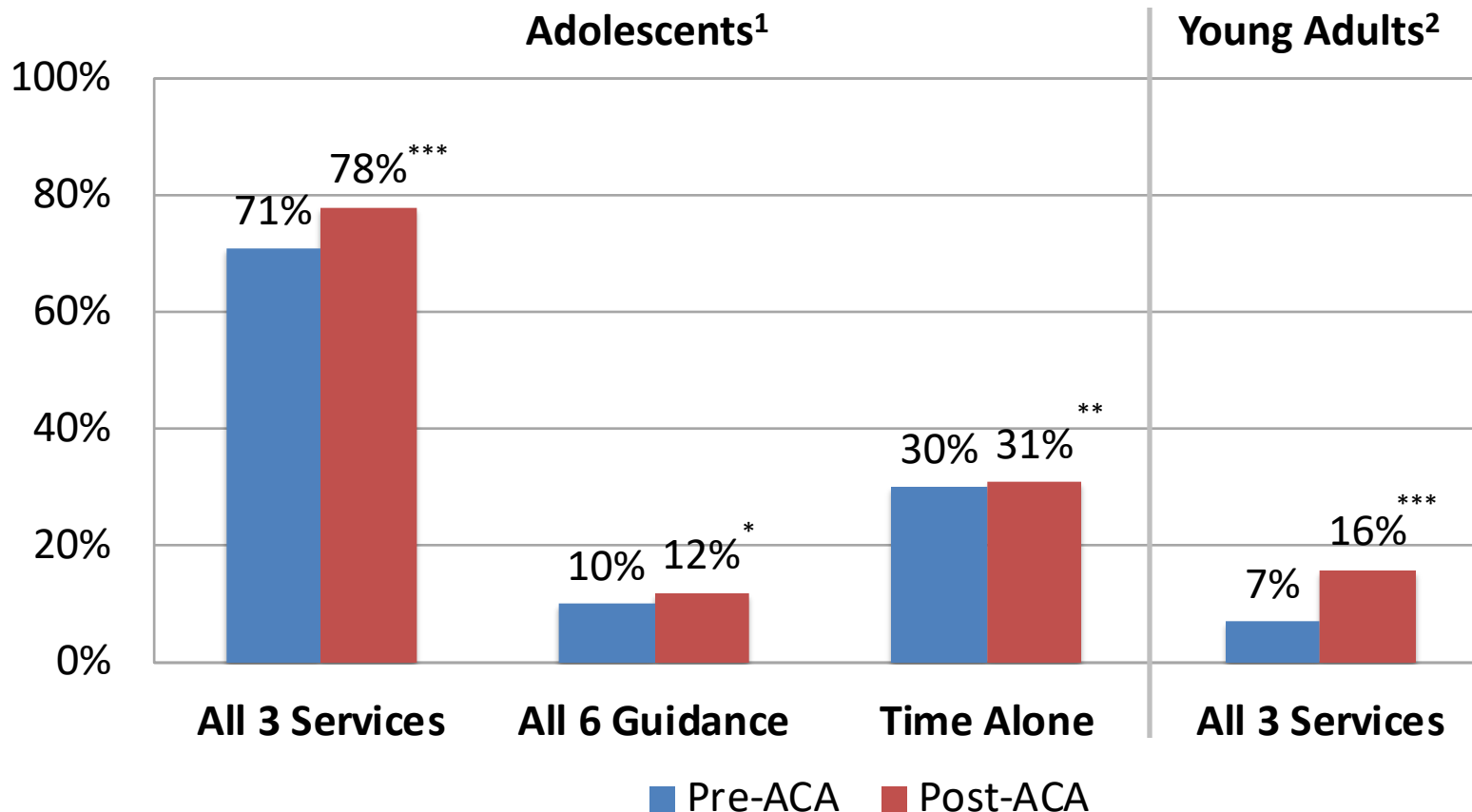
- Physical activity
- Healthy eating
- Seatbelt use
- Helmet use
- Second hand smoke
- Dental visit

- Young adults

Three services assessed:

- Blood pressure checked
- Cholesterol checked
- Flu shot received

Receipt of Preventive Services Among AYAs with Any Healthcare Visit in Last Year, Pre- and Post-ACA (MEPS)



* $p < .05$ in unadjusted model only

** $p < .05$

*** $p < .001$

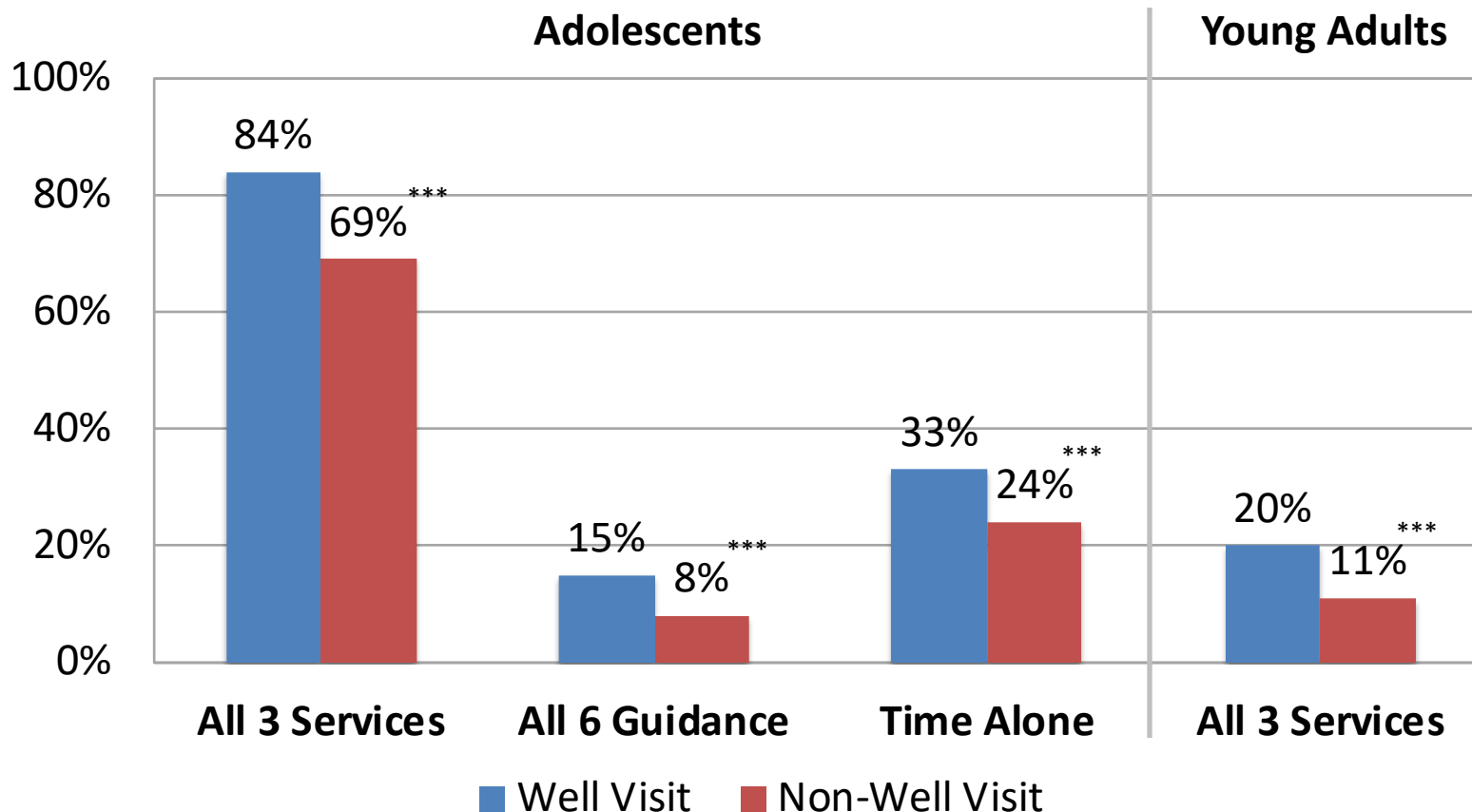
Update on Research and Policy

The well visit is an effective model for delivering preventive services to adolescents and young adults

- Significantly higher rates of preventive services if AYA attended a preventive well visit vs. a non-preventive visit.*

* Adams et al., 2018 (<https://www.ncbi.nlm.nih.gov/pubmed/29929838>)

Receipt of Preventive Services Among AYAs with Any Healthcare Visit in Last Year, Well Visit vs. Non-Well Visit (MEPS)



*** p<.001

Adams et al., 2018 (<https://www.ncbi.nlm.nih.gov/pubmed/29929838>)

Update on Research and Policy

Well Visit Rates are still low

- Rates for AYAs are still low in post-ACA years
- Less than half of As get a well visit
 - Even among full-year insured adolescents, only **half** got a WV
 - Time alone remains low
 - Overall, less than half of As are getting preventive services
- Less than a third of YAs get a well visit
 - Fewer than half got **2 of the 3** preventive services measured

Engaging parents: What we thought and what we're learning

- ✓ From Risk Prevention to Thriving, with supportive relationships and healthy choices
- ✓ Connecting Adolescents and Young Adults to Clinical Preventive Services

Parents: Original Focus - Risk Prevention

- ✓ Consensus recommendations have supported confidential care for adolescents and time alone with a clinician for more than two decades, based on two broad premises:
 - Adolescents **more likely** to seek care and disclose risky behaviors on sensitive topics when confidentiality is assured
 - Adolescents will **gain competence** in managing a relationship with a clinician and navigating the health care system

*Elster AB, Kuznets, 1994 & Hagan et al., 2017

Parents: Original Focus - Risk Prevention

- ✓ Support for time alone and confidential care driven largely by a goal of reducing risky behavior.
- ✓ Subsequent research with adolescents supports premise that adolescents more likely to seek care and disclose risky behaviors on sensitive topics when confidentiality is assured.*
- ✓ Parental perspectives and role in supporting their adolescents' health were rarely addressed in research or programs.

*Ford et al., 1997, Ford et al., 1999 & Ford et al., 2004

New Focus on parents' role in health care

- ✓ Most adolescents want their parents engaged in their health & health care. (*national sample, 2016*)¹
 - 89% of teens feel reassured with a parent in the exam room
 - 87% want their parents' involvement in decisions about their health
- ✓ Research links parent engagement in health care to better outcomes,² including in “sensitive” areas such as helping males who have sex with males make healthy choices.³

Parents generally support time alone

- ✓ Parents report support for time alone
 - 58% said “a lot” important (Urban pediatric clinics, 58% Black/28% White; 2016)¹
 - 89% said adolescents should be able to speak with their providers (national sample, 2012-3)²
 - 67% of parents say time alone is important (national sample, 2016)³
- ✓ Parents willing to waive rights to allow confidential care (university-based adolescent clinic, 2016)⁴

1-Miller et al, 2018; 2-Gilbert et al, 2014; 3-Unity Consortium, 2017;

4-Butler & Middleman, 2018

Parents are ambivalent about their role

- ✓ Parents also want to stay in the room
 - *61% prefer to be in the room the entire visit (national sample, 2012-3)¹*
 - *53% of parents insist on staying the room for the entire visit (national sample, 2016)²*
- ✓ Early qualitative research suggests that ambivalence can be addressed by building on parents' recognition of time alone's benefits in building competence in adult responsibilities.³

Role of parents: Next steps

How do we advance **adolescent-centered, family-engaged** care?

- Support time alone
- Improve “health literacy” around confidentiality & time alone
 - Communicate policy/clinic procedures, etc.
 - Communicate in ways that are meaningful to diverse populations of adolescents and families for whom we provide services

Citations

- Adams SH, Park MJ, Twietmeyer L, et al. Association Between Adolescent Preventive Care and the Role of the Affordable Care Act. JAMA Pediatrics. 2018; 172(1): 43-48.
(<https://www.ncbi.nlm.nih.gov/pubmed/29114725>)
- Adams SH, Park MJ, Twietmeyer L, et al. Increasing delivery of preventive services in adolescents and young adults: Does the preventive visit help? J Adolesc Health 2018;63:166–71.
(<https://www.ncbi.nlm.nih.gov/pubmed/29929838>)
- Adams SH, Park MJ, Twietmeyer L, Brindis CD, Irwin CE, Jr. Young Adult Preventive Healthcare: Change in Receipt of Care Pre- to Post-Affordable Care Act. J Adolesc Health. In press.
- Butler P, Middleman AB. Protecting adolescent confidentiality: A response to one state’s “Parents Bill of Rights”. J Adolesc Health 2018;63:357–9.
- Elster AB, Kuznets NJ. The American Medical Association Guidelines for Adolescent Preventive Services (GAPS): Recommendations and rationale. Baltimore: Williams and Wilkins; 1994.
- Ford C, English A, Sigman G. Confidential health care for adolescents: Position paper of the Society for Adolescent Medicine. J Adolesc Health 2004;35:160–7.
- Ford CA, Millstein SG, Halpern-Felsher BL, Irwin CE. Jr. Influence of physician confidentiality assurances on adolescents’ willingness to disclose information and seek future care: A randomized control trial. JAMA 1997;278:1029–34.
- Ford CA, Bearman PS, Moody J. Foregone health care among adolescents. JAMA 1999;282:2227–34.
- Gilbert AL, Rickert VI, Asalma MC. Clinical conversations about health: The impact of confidentiality in preventive care. J Adolesc Health 2014;55:672–7.

Citations

- Grilo, SA, Catallozi M, Santelli JS, Yan H, Song X, Heitel J, Kaseeska K et al. Confidentiality Discussions and Private Time With a Health-Care Provider for Youth, United States, 2016. J Adolesc Health 2018;In press.
- Hagan J, Shaw JS, Duncan PM. Bright futures: Guidelines for health supervision of infants, children and adolescents. 4th ed. American Academy of Pediatrics, 2017.
- Harris SK, Aalsma MC, Weitzman ER, et al. Research on clinical preventive services for adolescents and young adults: Where are we and where do we need to go? J Adolesc Health. 2017; 60(3): 249-60.
- Irwin CE, Jr. (ed), Time Alone for Adolescents with their Providers during Clinical Encounters: It Is Not That Simple. J Adolesc Health 2018;63:265-66.
- Kim BKE, Oesterle S, Catalano RF, Hawkins JD. Change in protective factors across adolescent development. J Appl Dev Psychol 2015;40:26–37.
- Miller VA, Friedrich E, Garcia-Espana JF, et al. Adolescents spending time alone with pediatricians during routine visits: Perspectives of the parents. J Adolesc Health 2018;63:280–5.
- Nelson KM, Pantalone DW, Carey MP. Sexual Health Education for Adolescent Males Who Are Interested in Sex With Males: An Investigation of Experiences, Preferences, and Needs. J Adolesc Health 2019;64(1):36-42.
- Santelli JS, Klein JD, Song X, Heitel J, Grilo S, Wang M, Yan H et al. Discussion of Potentially Sensitive Topics with Young People. AAP 2019;143(2).
- Tebb, K. Forging Partnerships With Parents While Delivering Adolescent Confidential Health Services: A Clinical Paradox. J Adolesc Health 2011;49:335–336.
- Unity Consortium. Beliefs on adolescent health and vaccination: Results from a Unity U.S. Survey, <http://www.unity4teenvax.org/wp-content/uploads/2015/03/Unity-Harris-Survey-Executive-Summary-July-2017.pdf>. Accessed June 25, 2018.