

GunderKids: A New Model of Care to Prevent Child Maltreatment

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Child Abuse in Wisconsin 2015

- 76,442 referrals to CPS for concerns of maltreatment
- 27,316 cases investigated
- 5,278 substantiations of maltreatment involving 4,697 children
- 250 of these children in my clinic for child abuse evaluations each year

Parental Risk Factors for Maltreatment

- Substance Abuse
- Untreated Mental Illness
- Low educational level
- Social Isolation
- Young age
- Poor understanding of normal child development
- Domestic Violence

Prevention is Key

- Identify families at risk before abuse occurs
- Identify the individual stressors facing each family
- Provide education on parenting, child development, nurture and play
- Provide support to address family stressors

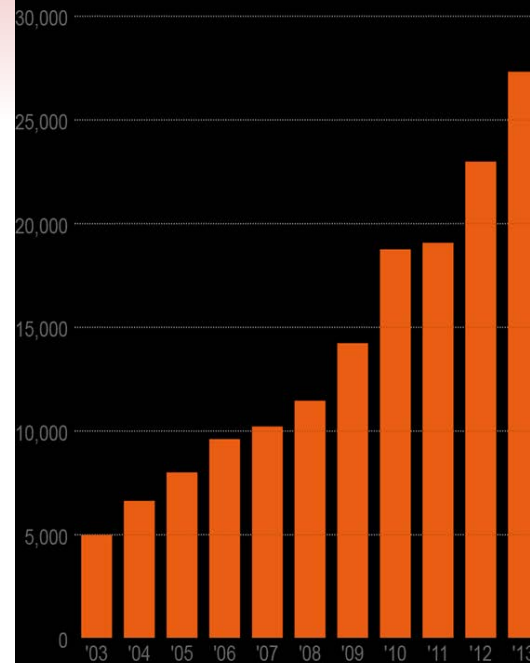
Drug Endangered Children



Rise in drug-dependent newborns

Since 2003, when Congress called on states to intervene in cases of drug-dependent babies, diagnoses of Neonatal Abstinence Syndrome, also known as newborn drug withdrawal syndrome, have increased dramatically.

NUMBER OF BABIES DIAGNOSED WITH NEONATAL ABSTINENCE SYNDROME (NAS)



Source: Reuters analysis of U.S. Department of Health and Human Services data

Neonatal Abstinence Syndrome



NAS

- Extreme irritability, high pitched cry
- Inconsolability
- Tremors
- Seizures
- Difficulty feeding
- Vomiting
- Diarrhea
- Excessive sneezing and or hiccups

Drugs Which Cause NAS

- Amphetamines, especially methamphetamine
- Heroin, methadone and suboxone
- Barbiturates
- Benzodiazepines
- antidepressants
- Cocaine
- THC
- PCP

GUNDERKIDS



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A New Model of Care for the Socially Complex

- A program for newborns and their parents with Substance Use Disorder
- Care is provided in the outpatient pediatric clinic by a team: Pediatrician, 2 Pediatric RN's, Pediatric Social Worker, Child Psychologist and Pediatric Occupational Therapist
- 17 visits in the first year of life beginning when baby leaves the newborn nursery

GUNDERKIDS GOALS

- Grow healthy babies
- Help moms and dads be the most successful parents they can be
- Keep moms, dads and babies together
- Prevent child abuse

Program Initiation

- The GunderKids RNs meet with mom's during an OB clinic visit ideally between 23-26 weeks gestation
- The program is introduced and families are invited to join
- The program is voluntary
- The GunderKids RNs meet with the family in the hospital when the baby is born to welcome baby

Visits

- Baby and parents are seen weekly for the first month, then every two weeks until 4 months then monthly until 6 months and every 6 weeks until a year.
- If they don't come to appointments we call them and reschedule
- We are very flexible with time – our families are often late or come on a day we weren't expecting them

A GunderKids Visit

- Each visit begins with the RN asking about the home life, stressors, challenges, sobriety, food insecurity, housing, transportation in addition to how baby is eating, sleeping, etc.
- The RN provides specific education at each visit on child development, parenting as well as nurture and play activities
- The pediatrician joins the visit and does the physical exam, addresses medical issues and answers parents questions

The visit (cont.)

- The social worker provides resources identified by the nurse – MTM, W-2, housing information, paternity testing information, food pantry locations, etc.
- The pediatric O.T. attends visits to review NAS soothing techniques and provide developmental therapy recommendations
- All families meet with the child psychologist to discuss parental ACE score, risks of child maltreatment and other stressors

Encourage use of the medical home

- The GunderKids nurse carries a direct line phone and we encourage parents to call us with any questions
- We encourage families to see us instead of urgent care or ER if at all possible



Additional Nursing Role

Program RN functions as a care coordinator:

- Facilitate attendance of appointments
- Present during MD portion of exam to support communication
- Attends visits to other specialties
- Assists parents in finding medical care for themselves as needed
- Problem solve by phone

Metrics

- Growth velocity
- Immunization rate
- Number of GunderKids appointments kept
- Number of ER/Urgent care visits
- Number of hospital admissions
- Completion of Behavioral Health visit
- PSI score analysis
- CAPI score analysis
- Number of specialty appointments missed
- % of patients improving on caregiver satisfaction and caregiver wellbeing
- Parents maintaining custody
- Number of patients with a diagnosis of maltreatment



Program Experience

- We began the program on December 1, 2015
- We currently have 50+ babies and their parents in the program
- The vast majority come to their appointments and have maintained sobriety
- Some left the hospital with baby in foster care and have regained custody
- Incidents of maltreatment have been rare

Lessons Learned

- 1. It's all about building relationships
- 2. It is critical to treat patients with respect and be non-judgmental
- 3. Most of our parents have a past history of trauma
- 4. They have a strong desire to be good parents
- 5. Addiction is a chronic disease



When you look at
a field of dandelions
you can either see
a hundred weeds
or a hundred
wishes

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