

Healthy NJ 2030, Committee on Preventive Services Biweekly meeting March 24, 2022: Meeting notes

Attendees:

Pamela Tew (Chair), Natasha Coleman, Polly Thomas

Update from Chairs' meeting:

Pamela provided an update from the last Chairs' meeting. We had asked, can we invite additional members to our committee, and we can.

Natasha has reached out to one person and is waiting to hear.

Polly will invite two new Preventive Medicine faculty members (one from NJMS one from the VA)

We discussed linkages with Trenton Health Care Team, Camden Coalition of Health Care Providers, and the Greater Newark Health Care Coalition.

We have questions for the upcoming Chairs' meeting:

- What is the format for the recommendations we will provide? Do we provide specific areas, or do we draft SMART objectives, or some other format?
- How many recommendations do they expect? We can coalesce all for preventive services into one, but might prefer to have a few categories
- What is the deadline for a first draft?

Discussion of data, searching for gaps:

We then discussed data presented by Pamela on children under five and by Natasha on adult screening.

Children under five

Kids Count:

This provides information on demographics of children in NJ. There are just over two million children with over 500,000 under age 5. It shows data on demographics, immunization rates, lead screening rates.

It also shows data on prenatal and postpartum depression, and maternal depression screening rates.

Medicaid Claims Data:

This includes HEDIS measures for children receiving care financed by Medicaid. It provides data on well child visits and dental visits.

Discussion:

Pamela reported there are not good data on developmental screening for children.

Pediatricians are recommended to follow Bright Futures guidelines but may not always use

standard forms, and even if they do, many EMRs are not programmed to record the data. She recommends the SWYC form, cannot tell how many pediatricians are using that.

Polly asked, are there data from NJDOH on Early Intervention referrals? If yes, we could look at rates by region/demographic group/ type of insurance/ age of child. As a proxy for how well pediatricians and family docs may be spotting developmental issues.

Pamela described program “Integrated Care for Kids” initiative led by Hackensack Meridien, aiming for transformative care management

Primary care:

There was a discussion of primary care.

What do we want to know about primary care?

- Does the person have a primary provider?
- Do they keep recommended visits?
- Is the care they are receiving competent

Natasha then showed data from CDC’s Community Guide.

She points out, it is not just the primary provider but the entire team.

Adult screening:

Natasha presented data from HRSA on FQHC Preventive Health Screening and Services.

Screening on the entire population is in NJ BRFSS (self-reported but reliable trends over years)

We agreed to meet every two weeks.

Next meeting:

- Polly will present data on adolescent and adult immunization
- Pamela will report on answers to questions we are sending to the Chairs’ meeting
- We will introduce new members if we have any.
- We will begin to draft our goals/objectives/ recommendations.

Sources used / recommended by Pamela and Natasha:

<https://www.tuftschildrenshospital.org/the-survey-of-wellbeing-of-young-children/overview>

<https://www.thecommunityguide.org/>

UDS Data (FQHC data) - <https://data.hrsa.gov/tools/data-reporting/program-data/state/NJ>

<https://www-doh.state.nj.us/doh-shad/topic/Cancer.html>