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Understanding Home Visitor Attendance at Well Child Checks: A Mixed Methods Study

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Understanding Home Visitor Attendance at Well Child Checks: A Mixed Methods Study

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Background & Objectives

- Early childhood home visiting programs have variable outcomes on child health
- Attendance of a home visitor (HV) at medical provider well child checks (WCCs) may more strongly link home visiting and the medical home
- Objectives: Quantitatively evaluate effects of the practice on (1) family compliance with American Academy of Pediatrics (AAP) WCC recommendations and (2) acute care visits and qualitatively explore perspectives of HVs attending WCCs

Methods

- · Mixed methods design
- Quantitative: Retrospective cohort study using a multi-model home visiting database of participants between 5/01/2016 5/31/2019
- <u>Intervention group</u>: Home visiting participants who experienced HV attendance at WCCs
- <u>Control group</u>: Routine home visiting services only
- Qualitative: Semi-structured interviews and focus groups with 10 home visitors, 9 medical providers, and 9 parents

Results – Quantitative

Table 1. Predictor vs. Outcome Variables – Association between Attendance of the Home Visitor at WCC and Outcomes by Frequency of the Intervention

Outcome	Control Group (n=400)	Intervention Group Any Frequency (n=361)	Control vs Total Intervention Group p or OR	Intervention 1-2 HV WCC (n=206)	Controls vs Intervention with 1-2 HV WCCs p or OR	Intervention 3-5 HV WCC (n=128)	Controls vs Intervention with 3-5 HV WCCs p or QR	Intervention 6-12 HV WCC (n=27)	Controls vs Intervention with 6-12 HV WCCs p or OR
Children with ED/UC Visits	80/400 (20%)	91/361 (25%)	p=.086, OR=.742 [.527,1.043]	48/206 (23%)	p=.346, OR=.823 [.549,1.234]	32/128 (25%)	p=.228, OR=.750 [.469,1.199]	11/27 (41%)	p=.011, OR=.364 [.162,.814]
Children with Injury Related ED/UC Visits	14/400 (4%)	20/361 (6%)	p=.174, OR=.618, [.308,1.243]	15/206 (7%)	p=.039, OR=.462, [.218,.976]	4/128 (3%)	p=1.000*, OR=1.124, [.363,3.479]	1/27 (4%)	p=1.000, OR=.943, [.119,7.453]
WCC Family Completed/Possible Well Checks	929/1360 (68%)	1542/2063 (75%)	p=<.001,	644/962 (67%)	P=<.001,	687/861 (80%)	p=<.001,	211/240 (88%)	p=<.001,

NOTE: ED = Emergency Department, UC = Urgent Care, WCC = Well Child Check

- Any dosage of HV attendance at WCCs led to increased child attendance of WCCs (p < 0.001)
 - Association persisted regardless of total number of home visits experienced by the family (p < 0.001)
- No consistent associations between HV attendance at WCCs with acute care visits

Results – Qualitative

Improved communication and understanding

Facilitation of the visit



Logistical challenges

Appointment dynamic changes

• Parent: "... it's just it helps me. All the way around from when you know going to a visit. More hands and just more encouragement.. I really believe that I probably would have missed more appointments. Just having her there and just being able to have the cheat sheet where we already, you know talked about things and things to talk about with the doctor. It's just very helpful."

Conclusions

- Home visitor participation in WCCs increased familial compliance with the recommended WCC schedule
- Participants identified multiple benefits of home visitors attending WCCs







