REQUEST TO CREATE NEW CENTER AT THE UNIVERSITY OF IOWA:
UNIVERSITY OF IOWA CENTER FOR CHILD HEALTH IMPROVEMENT AND INNOVATION

Action Requested: Consider recommending approval of the request by the University of Iowa to establish a Center for Child Health Improvement and Innovation in the Department of Pediatrics in the Carver College of Medicine.

Executive Summary: The purpose of the proposed center is to assist the state to integrate and improve children’s disability and mental health system in Iowa. This proposal was reviewed by the Board Office and the Council of Provosts and is recommended for approval. Board of Regents Policy Manual §6.08 requires that all centers and institutes be approved by the Board. This request addresses the Board of Regents Strategic Plan priorities to provide “educational excellence and impact” and “economic development and vitality,” Goal #7 - “Iowa’s public universities shall contribute to the expansion and diversification of the Iowa economy,” and Goal #8 - “Iowa’s public universities and special schools shall be increasingly efficient and productive.”

Background:

Description of proposed center. In partnership with Iowa Medicaid Enterprises and Magellan of Iowa, the proposed center will develop, implement, support, and evaluate the redesigned system. The new system will be built on the foundation of locally-based pediatric integrated health homes. The Center designation is required by the funding agency to provide assurance that the necessary expertise and competence of the University of Iowa are committed to this ongoing child health improvement project, Iowa’s Initiative for Children’s Mental Health Systems Integration. The University of Iowa has been selected to assist with administration of the project because of its history of working to improve the health and well-being of Iowa children and its successful implementation of the Northeast Iowa’s Children’s Mental Health Initiative in partnership with the Iowa Department of Human Services.

The proposed center will provide Iowa’s child health community with the knowledge, skills, tools, and resources to improve service delivery for an especially vulnerable population of the state – children with serious emotional disorders who are eligible for Medicaid coverage. The proposed center will assist in the design and implementation of the pediatric integrated health home model across the state. This project will be entirely funded through a multi-year contract with Magellan of Iowa.

The creation of the proposed center and successful implementation of its first project will lead to future opportunities to develop and test innovative solutions to improve the health care system and, ultimately, to improve the health outcomes for all Iowa children and youth. The proposed center will embrace the eco-bio-developmental perspective of child health and will be built on the platform of public health and health care integration, using the public health framework of assessment, assurance, and policy development. The pediatric integrated health home project, as well as subsequent projects, will strive for improvements in the lives of children, youth, and their families and improvements in service delivery systems. Key thematic areas will include health promotion, prevention, and early intervention; family and youth partnership; systems development; workforce development; access to care and opportunities; and continuum of services and supports.
Need for Center. Currently, Iowa does not have a well-organized children’s mental health system; services vary statewide, and access is limited by community and family resources. In 2010, ≈67,900 children (9% of Iowa’s population under 18 years of age) were reported to need behavioral or emotional care; approximately 15%, almost 10,000 children, could not receive this care. The incidence of pediatric behavioral, emotional, and mental health conditions is increasing. There is a shortage of qualified mental health providers and the distribution of qualified providers is uneven.

There is a lack of coordination of the child mental health system in Iowa and lack of an organizing entity that ensures an effective, comprehensive, community-based child system. There are multiple agencies in the state that provide child health services, but there is no assurance that the care is well-coordinated among agencies. This frequently leads to duplication of services among health, education, and social service agencies. This significant lack of coordination of care was documented by the 2009-2010 National Children with Special Health Care Needs Survey.\(^1\) Only 23.4% of children in Iowa aged 0-11 years and 15.4% of children aged 12-17 had care delivered through a well-functioning system. The proposed center will allow the University of Iowa to establish and implement a strategic focus on children’s systems integration and innovation and to remain a leader in Iowa’s evolving health system.

Proposed center activities and objectives. The immediate goal of the proposed center is to develop and support the community-based pediatric integrated health home model – Iowa’s Initiative for Children’s Mental Health Systems Integration.

- Create a comprehensive, accessible, fully integrated model of care that blends a medical model with a social support model.
- Implement systemic changes needed to develop and expand a broad array of home and community-based services and supports.
- Implement broad use of evidence-informed, practice guidelines and treatment strategies.
- Provide training, technical assistance and coaching to families, providers, agencies, and community stakeholders.
- Support the spread of effective population health practices and innovations through quality improvement methodology.
- Create data collection and analysis methodology to measure, evaluate, and report on health outcomes.
- Enhance and spread children’s tele-health behavioral and mental services.
- Create a focus on children’s ‘positive’ mental health and develop measures of positive mental health.

The long-term goals and objectives for the proposed center include the following:

GOAL 1. The proposed center will be a leader in health system integration and transformation and a strong partner with community-based systems of services.

- Build the capacity needed to identify and address Iowa’s child health priorities.

Support and enhance the skills and competencies of University of Iowa providers and the community workforce with a focus on systems building.

Support the spread of effective population health practices and innovations with UIHC, community members, partners, and other stakeholders.

Convene and lead strategic alliances to advance progress on Iowa’s health issues.

**GOAL 2.** The proposed center will be an effective advocate for child health improvement at the community, state, and national levels.

- Communicate the critical role of ecological, biological, social, and developmental factors on health outcomes.
- Increase awareness of federal and state policies affecting health outcomes.
- Develop data collection and analysis methodology to measure and report on health outcomes.
- Create a focus on children’s ‘positive’ mental health and develop measures of positive mental health.

**Proposed Center structure and organization.**

**Overarching System Transformation Staff**

- **Chief Medical Officer** – Will provide oversight, direction, and leadership of the University of Iowa Center for Child Health Improvement and Innovation (UI-CCHII) using core public health functions – assessment; policy development; and assurance. These will be delivered through the defined technical assistance elements of the project (education/training, learning networks, consultation, workforce development, and evaluation).

- **Executive Director** – Will direct and monitor the fiscal, administrative, and programmatic activities of the proposed center including developing, coordinating, communicating, monitoring, and system building activities for the defined elements of the project.

- **Secretary** – Will provide support to the Center staff.

- **Evaluation Manager** – Will coordinate the activities of the longitudinal and system evaluation activities including development of a sound evaluation protocol, liaison activities with the Institutional Review Board (IRB), and submission of all required evaluation reports.

- **Data Analyst** – Will analyze data results, prepare reports, and provide communications regarding data trends.

- **Project Manager** – Will be responsible for developing, coordinating, implementing, and monitoring action plans, and reporting progress as required by funder.

**Support and Training Staff**

- **Child Psychiatrist** – Will direct the psychiatry consult project including real time consults, telemedicine, and web-based resources and training for primary care practitioners. Will provide clinical leadership to the technical assistance team and will develop and disseminate best practices guidelines.
Pediatrician – Will provide education and technical assistance to community practices on the development of the specialized health home; will provide expertise and assistance to primary care practices on integration of mental health into primary care; will provide assistance building health homes for children with special needs; will provide clinical expertise on complex medical and therapeutic issues.

Registered Nurse – Will provide record review and coordination for the psychiatry consults and create member health profiles.

Technical Assistance Coordinator – Will coordinate the technical assistance activities, including scheduling, travel, locations, CEUs, and communicate details to all parties; will assist in developing presentations and curriculum development; will provide assistance to the support and training teams.

Psychologist – Will provide focused technical assistance and training regarding specific mental health treatment modalities, planning, and interventions. Will provide leadership to topic specific learning network groups.

Quality Improvement and Technology Advisor – Will assist providers acquire knowledge and skills of quality improvement methodology; will be a resource to the teams for individual team and practice quality improvement projects; will facilitate learning network groups; will train practice coaches; will assist with all aspects of information and technology related to the project including development of web based tools, design website for learning networks, and recommend technology enhancements.

Trainers – Will deliver small and large group training sessions to community providers, families, and other stakeholders.

Relationship of proposed center to University’s strategic plan. The proposed center’s goals and objectives are consistent with the University of Iowa mission of teaching, research, and public service, and the strategic priorities of improving knowledge and practice and ensuring better futures for Iowans. The Center’s role is aligned with the University of Iowa Health Care strategic plan as well as the new University of Iowa Hospital strategic plan to provide Iowa’s child health community with the necessary knowledge, skills, and resources to help all Iowa children achieve their optimal potential.

The proposed center will support improved knowledge and practice by developing and evaluating innovative models of care; conducting health outcomes and systems research; developing and tracking quality metrics; providing opportunities for professional development and capacity building; and establishing statewide networks for dissemination and spread of best practices. It will ensure better futures for Iowans (especially children and their families) by promoting enhanced service delivery, coordinated population health management, and improved clinical care.

The new University of Iowa Children’s Hospital is designed to be a healing environment built on a system of care philosophy. As the proposed UI-CCHII develops future projects and a broader focus on physical, as well as mental health conditions, it will provide the infrastructure for the system’s integration at the local, community, and state levels. It will assist the Children’s Hospital with development and evaluation of the child and family focused approach. This integrated pediatric system of care will also ensure better futures for Iowans (especially children and their families) as it provides a coordinated network of resources and services centered on the child and family; it will improve population health outcomes for children by improving access to services, expanding the array of community
based services available on a local level, and working to increase collaboration among systems.

**Relationship of proposed center to existing centers.** There are a number of University of Iowa centers that include child health in their programs, but there is no organizing entity that holistically addresses child health issues, using a systematic, integrated, and comprehensive approach. The proposed UI-CCHII will link these centers to create synergy and coordination of efforts. It will help to develop projects, leverage resources, and disseminate information in a coordinated and collaborative fashion.

The proposed UI-CCHII will work with the University of Iowa Public Policy Center in systems building opportunities of the Patient Protection and Affordable Care Act; one specific project will entail the design and evaluation of health homes for children with chronic conditions. The proposed center will partner with the University of Iowa Autism Center in the development of Iowa’s integrated health and education system for children and families living with autism. In addition, the proposed center will partner with the Center for Disabilities and Development in the assessment and assurance of home and community-based services for children with disabilities.

**Existence of proposed center at other Iowa institutions.** The proposed center is a unique concept that has not been developed by any other Iowa institution. It combines a public health, population-based focus with a clinical and social health model. Outcomes will be achieved and monitored by using a quality improvement methodology. By virtue of its existence in the state’s academic medical university, it will highlight UIHC expertise and experience. Its emphasis on systems integration and innovation will result in transformative change of the health care delivery system and ultimate improvements in the health of Iowa children.

At present, no other institution in Iowa has the faculty and experience to achieve the goals and objectives described in the proposal. The proposed center will collaborate with centers at other Iowa colleges and universities vested in child health. Discussions to date with the University of Northern Iowa Center for Energy and Environmental Education have focused on development of an integrated systems approach to children’s exposure to toxic environments. The proposed center will lead the state’s efforts in addressing the broader concept of the intertwining of biology, ecology, and development and their impact on health and development of disease.

**Unique features of the University of Iowa to support the proposed center.**

As Iowa’s only comprehensive academic medical center, University of Iowa Health Care sets high standards for excellence in providing quaternary level patient care, education of medical and allied health professionals, and advancement of significant leading edge biomedical research, including groundbreaking clinical and translational science. A focus on assuring access to health care services in local communities, extensive outreach, and community benefit programs supplement efforts aimed at enhancing the health and well-being of the people of Iowa and beyond. The University of Iowa has the expertise and capacity to support and perform all of the activities that will be required to take this project to scale across the state.
UI Health Care and UI Children’s Hospital have already made progress in the area of systems integration and innovation in its long history of an evolving state/university program for children with special health care needs. The following offer a few highlights and provide the groundwork for the proposed center to be formally established:

- Designation of UI’s Child Health Specialty Clinics as Iowa’s Title V program for children and youth with special health care needs by the Iowa Department of Public Health.
- Role of Child Health Specialty Clinics with the Iowa Department of Education as a Signatory Agency for Iowa’s Early ACCESS system (Part C of the Individuals with Disabilities Education Act).
- Acknowledgement by the Iowa Department of Human Services and the Iowa state legislature of the proposed center’s successful Northeast Iowa Children’s Mental Health Initiative (Community Circle of Care).
- Active participation of SUI Departments of Pediatrics and Psychiatry faculty in the redesign of Iowa children’s mental health and disability system.
- Incorporation of technology into service delivery through a tele-health network for special needs children in rural Iowa.
- Coordination of activities with the Iowa Chapter of the American Academy of Pediatrics on medical home and primary care health home systems building and quality improvement partnership.

The faculty and staff of the Child Health Specialty Clinics were asked by Magellan of Iowa to develop the proposal to integrate Iowa children’s mental health services. This collaborative project has the acknowledgement of the Iowa Department of Human Services. The creation of the proposed center will provide the infrastructure and University of Iowa institutional home for this ground breaking, innovative child health system project.

- **Resources.** The initial project for the proposed center will be *Iowa’s Initiative for Children’s Mental Health Systems Integration*. The positions previously identified will oversee the planning, development, implementation, quality improvement, and evaluation for the project. The system transformation staff will provide leadership to the project in the areas of administration, management, systems building, and coordination of training, workforce development, and outreach activities.

Existing space in the Child Health Specialty Clinics administrative offices in Iowa City will house the proposed staff. Equipment will include computers and office supplies.

- **Expected need.** The proposed center has a multi-year contract (initial length will be four years) for the development and support of the community based pediatric integrated health home model. The initial funding is expected to range from $4 - $5 million over the four years. The proposed center is expected to be in existence for many years. The work of systems integration, improvement, and innovation is an iterative process. Continuous improvement and enhancements are expected as new opportunities, technology, and resources are devoted to the center. The proposed center will continuously explore and apply for funding for future innovative child health improvement projects.
Costs and funding sources. The proposed center will be funded entirely through external sources. There will be no reallocation of university funds. No General Education funds will be used for this project. The proposed center will be dependent on external funding secured by future grants and contracts. The loss of partial external funding will result in condensing Center resources. The event of loss of all external funding may ultimately result in closure of the center.

PROPOSED CENTER COSTS AND FUNDING SOURCES

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<tr>
<th>PROJECT PERIOD</th>
<th>SOURCE OF FUNDS</th>
<th>TOTAL NEW COSTS</th>
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<tbody>
<tr>
<td>Year 1</td>
<td>Magellan Contract</td>
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<td>Year 2</td>
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<td>Year 7</td>
<td>Magellan Contract, other grants</td>
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Implementation. After obtaining Board approval, the Carver College of Medicine is prepared to implement the University of Iowa Center for Child Health Improvement and Innovation in Fall 2013.
About Magellan of Iowa

Magellan Behavioral Care of Iowa has managed the Iowa Plan for Behavioral Health since 1995. The Iowa Plan serves most Medicaid recipients in the state. It offers a broad range of mental health and substance abuse services. This includes community services and supports.

The Iowa Department of Human Services (DHS) oversees the Iowa Plan for Medicaid-funded services. The Iowa Department of Public Health (IDPH) oversees the Iowa Plan for IDPH-funded substance abuse services.

Community Reinvestment

The Iowa Plan has a fund that it uses to give back to the community. The fund comes from a small percentage of the Medicaid payment that Magellan receives from DHS for the Iowa Plan. This money and claims funds that are not spent at the end of each contract year go directly into these community programs. The programs provide mental health and substance abuse services to Medicaid enrollees.

Examples of projects funded include:

- Assertive Community Treatment
- Intensive Psychiatric Rehabilitation
- Tele-health and consultation
- Recovery centers
- Training on working with explosive children
- Integrated Services for Co-Occurring Disorders
- Family Psycho-education
- Trainings on STEPPSTM/Dialectical Behavioral Therapy
- Motivational Interviewing training for substance abuse providers
- NAMI educational programs: Family-to-Family, Visions for Tomorrow, and Peer-to-Peer
- Peer Support Services
- Dual Recovery Anonymous

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