



Components of Best Practice Developmentally Oriented Primary Care for Infants and Toddlers Birth to Three Years

Overview and List of Original Contributors
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Enhancing Developmentally Oriented Primary Care (EDOPC) is a partnership between: Advocate Health Care Healthy Steps Program, Illinois Chapter of the American Academy of Pediatrics (ICAAP), Illinois Academy of Family Physicians (IAFP), the Ounce of Prevention Fund (OPF), and the Illinois Department of Healthcare and Family Services (IDHFS) in collaboration with our generous partners and funders:

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- The Illinois Children's Healthcare Foundation
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- W. Clement and Jessie V. Stone Foundation

EDOPC Overview

The overall goal of the EDOPC project is to improve the delivery and financing of preventive health and developmental services for children birth to three years of age in primary care practices in Chicago and throughout Illinois. The project targets the education of primary care clinicians and staff using a series of training options that address the practical challenges surrounding practice change. It focuses on developmental, social-emotional, perinatal depression, and domestic violence screening, referral, and follow-up and includes the delivery of preventive services, early identification of delays and/or concerns, and care coordination.

The six overarching project objectives of EDOPC are to:

- 1) increase the number of primary care clinicians (PCCs) using validated tools for developmental screening with all children by the one-year well-child visit;
- 2) increase the number of PCCs using validated tools to screen for postpartum depression as a family risk factor by the six-month well-child visit and child social-emotional risk factors by the two-year well-child visit;
- 3) increase the number of PCCs who have established at least three referral relationships with Early Intervention, Family Case Management, local public health departments, and other providers of developmental and social-emotional services;
- 4) increase the number of referrals of children and families who are identified as at-risk through developmental, social-emotional, and postpartum depression screenings for further evaluation and follow-up;

- 5) increase the number of parents who report being asked by clinicians about their concerns regarding their child's development/behavior; and
- 6) increase the number of referrals of families who are victims of domestic violence through screening using a validated screening tool.

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