

Implementing Mobile Text-messaging to Improve Well Visit Rates in Early Head Start Programs

Martine Kirwin MS, RN, DNP-FNP Candidate May'23
Kelsey McGinty, DNP, APRN, FNP-C, RN, CPHQ, CPPS
Meagan Clemence MS
University of Maryland School of Nursing

Problem Statement

- The American Academy of Pediatrics (AAP) recommends 13 well-child visits before the age of six.
- Scheduled and completed well-child visits have been associated with increased school attendance, fewer trips to the emergency room, and inpatient hospitalizations.
- In a federally funded Early Head Start (EHS) program serving underserved children from birth to 3 years of age, 53.5% of children missed their routine well child visit.

Purpose and Goals

Purpose: The Quality Improvement (QI) project was to implement a mobile text-message reminder to parents in order to improve the completion rate of well child visits in the EHS program.

Process Goal: 100% of children parents identify as being late with their well child visits will receive a text message reminder.

Outcome Goal: 100% of children will be up to date with their well child visits.

Methods

Setting: EHS programs located in an urban area.

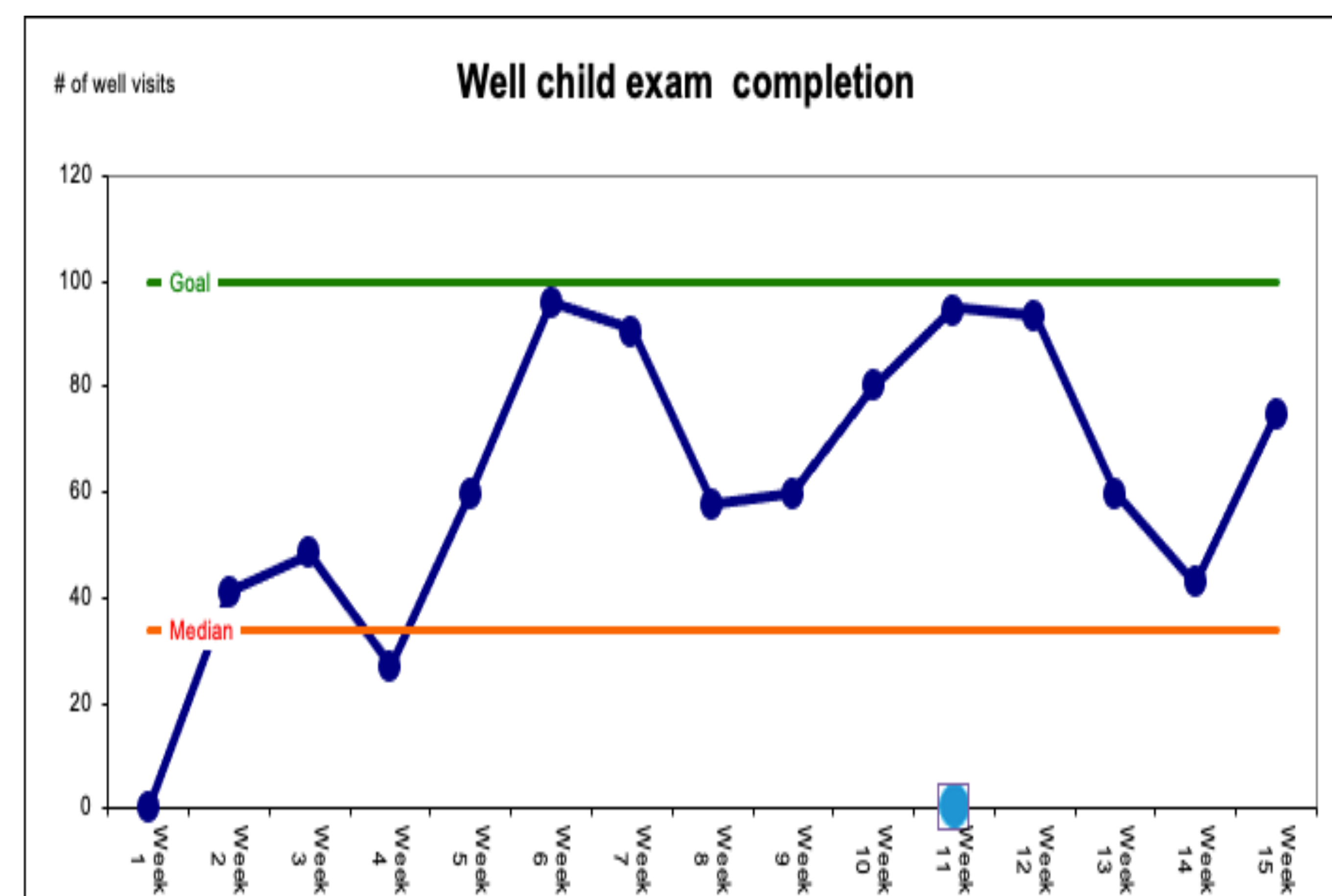
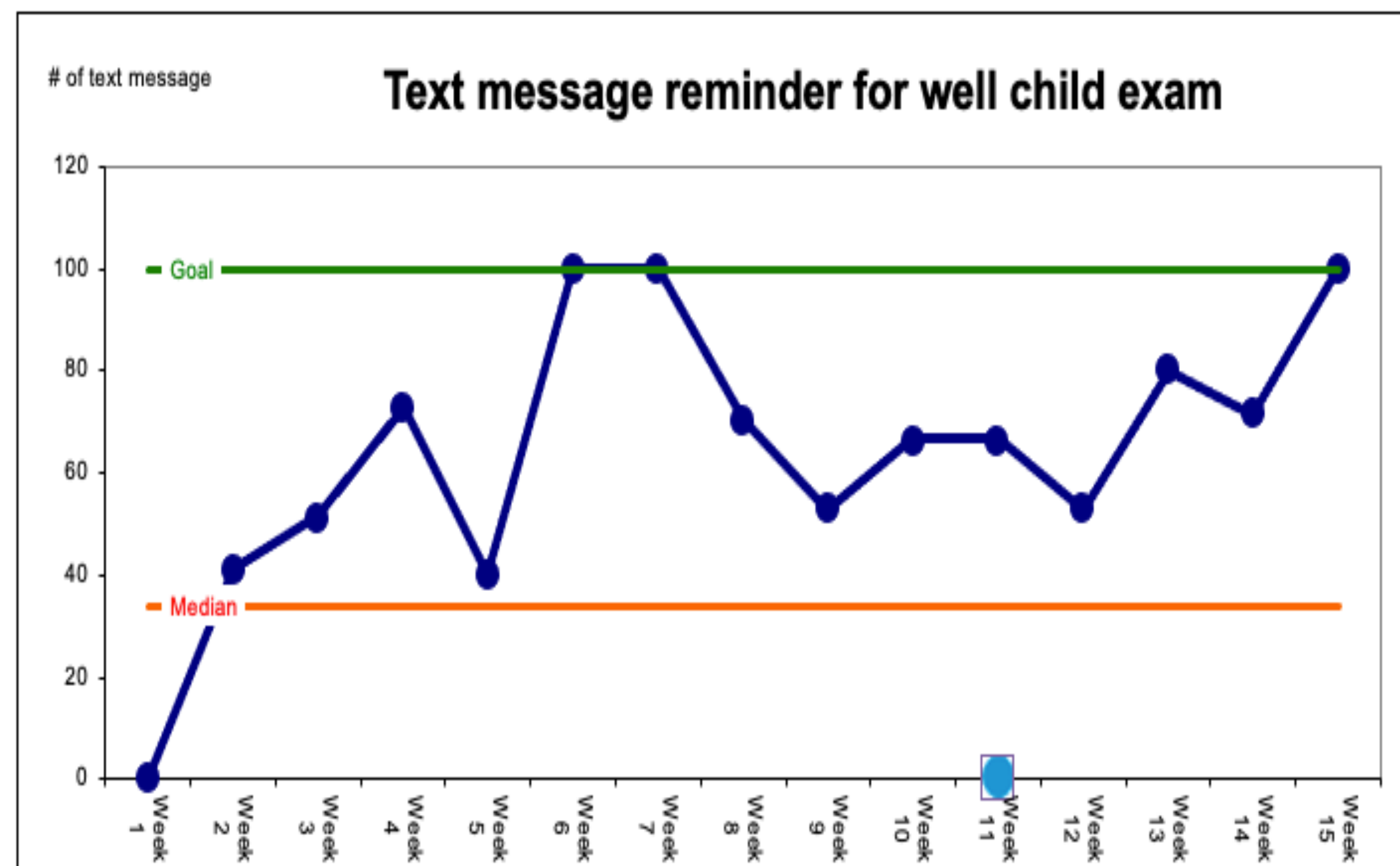
Population: Children from birth to age 3 years enrolled within the EHS during the 15-week period of implementation.

Intervention: Chart review of all children enrolled as a method for informing a master list of children who were missing a well-child visit. A text message was sent by the family advocate (FA) to all parents of children identified. Messages were sent weekly as a continuous reminder.

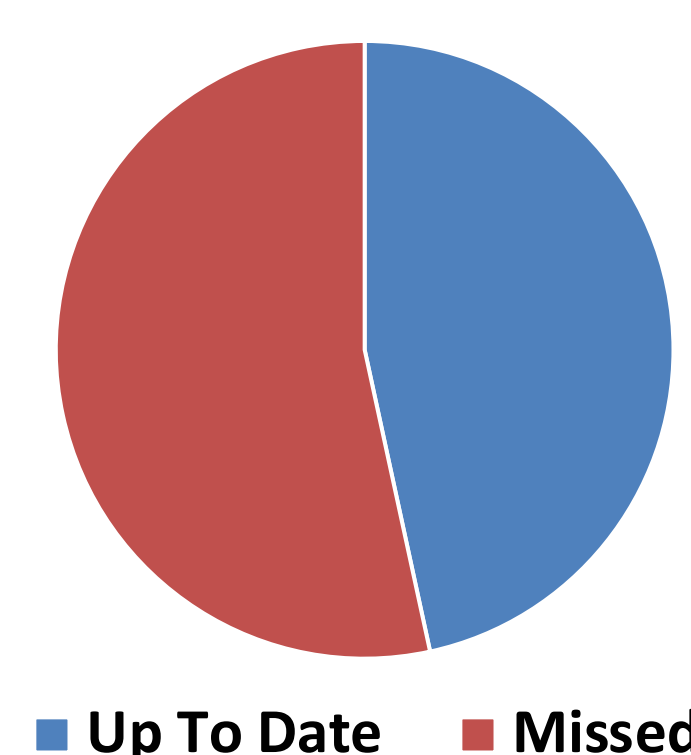
Measures: The total number of children identified as missing a visit, families that received a text message, and well child visit completion were monitored through the use of a checklist maintained by the EHS.

Implementation Strategies: Weekly presence at the site for support, communication and accountability.

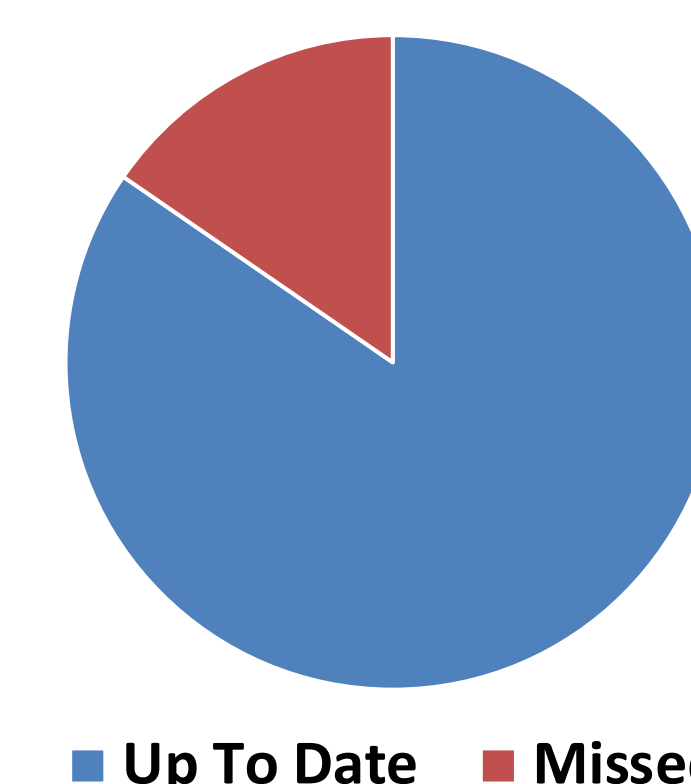
Results



Pre-Implementation Well Child Visits Completion



Post-Implementation Well Child Visits Completion



Discussion

Pre-implementation:

46.6% of children enrolled in the EHS program were up to date with their well child exams.

Post-Implementation:

A total of 90 children were identified as fitting criteria to receive a test message, of those, 80% of families received a text message. At the conclusion of the intervention period, 84.6% of children enrolled within the EHS were up to date with their well child visits.

Limitations:

- Short-staffed
- Short time-frame for the QI implementation
- Decreased attendance due to a disease outbreak at the center

Conclusion

Implication for Practice

- Many children missed their routine well child visit over the years, specially during COVID-19 pandemic.
- It is important to identify those children and for parents to work with their child's doctor to get their children caught up with their missed well child visits and recommended vaccines.

Conclusions:

- Routine well-child visits are essential for early identification of developmental delays, behavior concerns and medical concerns.
- Early intervention services can greatly improve a child's physical and mental development.
- Overall, this QI project has demonstrated improvement in well visit completion.

Sustainability:

- QI project will be supported by the family advocates through their continuous close relationship with parents.

Acknowledgement & References

Sincere gratitude to the project team, champions, and UMSON faculty for their guidance and support throughout this project.

Scan QR Code for full reference list

