

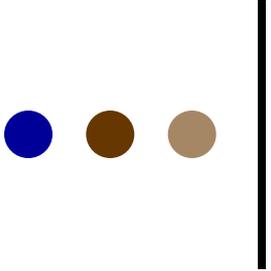
Promoting Health Weight for Young Children: A Blueprint for Preventing Early Childhood Obesity in North Carolina

Clinical Strategies

Breakout Session

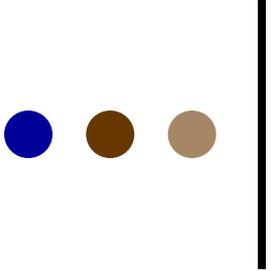
11:15 am – 12:30 pm





Clinical Strategies

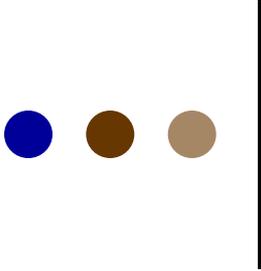
- Research shows that health professionals can play an important role in supporting health behavior change.
- All of the other groups that developed recommendations to promote healthy weight among young children include a key role for health professionals, by:
 - Measuring body mass index (weight and height) during each well-child visit.
 - Advising parents and other caretakers about risk factors and strategies to promote healthy weight.



Clinical

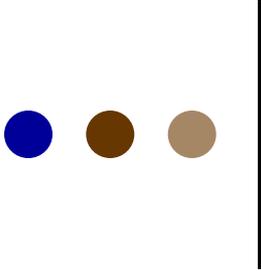
CLINICAL STRATEGY 2: EXPAND EDUCATION ABOUT OBESITY PREVENTION AND TREATMENT FOR PRACTICING HEALTH PROFESSIONALS. FUNDING AMOUNT: \$250,000.

- North Carolina and national funders should provide funding to the Area Health Education Centers (AHEC) program and to Community Care of North Carolina to expand the work of quality improvement consultants to work with practices to incorporate obesity prevention and treatment into their practice.
- AHEC and CCNC should develop a Maintenance of Certification module and continuing education courses that include skills, toolkits, and practice redesign needed to support practitioners in offering evidence-based prevention, assessment and treatment.



Clinical

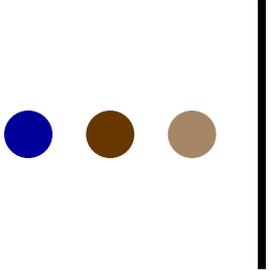
- The training should help practitioners:
 - Educate women about healthy weight gain during pregnancy and the health benefits of breastfeeding.
 - Encourage pregnant women and new mothers to breastfeed and help them understand infant satiety cues.
 - Chart the child's weight and height (BMI) using appropriate growth charts during each well-child check.
 - Educate parents and caregivers about healthy weight at different stages of the child's life, healthy eating, appropriate sleep duration, limiting screen time, and other strategies to increase physical activity.
 - Provide evidence-based prevention, assessment and treatment options.
 - Use motivational interviewing.



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POLICY STRATEGY 2: ENHANCE FAMILY EDUCATION ABOUT EARLY CHILDHOOD HEALTHY WEIGHT AND OBESITY PREVENTION STRATEGIES THROUGH EXISTING HOME VISITING AND FAMILY STRENGTHENING PROGRAMS. FUNDING AMOUNT: ADDITIONAL FUNDING NOT REQUIRED.

- The Children and Youth Branch in the NC Division of Public Health should train Nurse Family Partnership (NFP) and Healthy Families America (HFA) parent educators about healthy weight, breastfeeding, nutrition, physical activity, sleep and other obesity prevention strategies.
- North Carolina Partnership with children should collaborate with DPH to educate Parent as Teachers (PAT) parent educators.
- DPH should examine whether this information can be tracked in existing data systems.



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POLICY STRATEGY 5: COLLECT BODY MASS INDEX (BMI) DATA FOR YOUNG CHILDREN AND MAKE THE INFORMATION AVAILABLE TO EVALUATE EXISTING PROGRAMMATIC AND POLICY INITIATIVES AND TO INFORM FUTURE ONES. FUNDING AMOUNT: ADDITIONAL FUNDING NOT REQUIRED.

- Community Care of North Carolina (CCNC) should encourage primary care professionals to calculate BMI for all Medicaid recipients at least once annually, and the information should be included in the quality improvement reports provided back to practices.
- The NC Division of Public Health should explore the possibility of collecting BMI data from electronic health records.
- The Kindergarten Entry Assessment should capture BMI data for each child entering kindergarten.