appendix a:
Readiness Assessment: Preparing to Launch a Childhood Obesity Initiative
Appendix A: Readiness Assessment: Preparing to Launch a Childhood Obesity Initiative

In 2007, the Agency for Healthcare Research and Quality (AHRQ), developed the TeamSTEPPS program, a suite of evidence-based tools developed to improve patient outcomes by enhancing communication and teamwork skills among clinicians and medical staff. This comprehensive, evidence-based national initiative includes many resources including a validated readiness assessment tool. Readiness assessment tools provide organizations with an opportunity to perform a systematic analysis of readiness to pursue new processes or changes. This may also include opportunities to identify gaps in the current organization or methods and may structure approaches to close those gaps, potentially leading to quality improvement and improved outcomes for patients or Medicaid managed care organizations (MMCO) members.

Clinical leadership at MMCOs can use this tool to assess barriers to implementation and identify resources that may need to be developed before implementing childhood obesity prevention and treatment initiatives. One of the first steps to launching a successful childhood obesity prevention and treatment initiative is to determine how ready the plan is to design and implement a program that will make meaningful change in the lives of children with obesity who are enrolled in Medicaid. Identifying and addressing barriers to program development will improve your plan’s ability to implement successful initiatives.
GUIDE TO COMPLETE THE READINESS ASSESSMENT

The following are list of questions that have been adapted from the original Team-STEPPS tool. The questions are intended to help assess your organization’s readiness to implement a childhood obesity prevention and treatment initiative. As you complete the questions, you may find it helpful to have several members of clinical leadership staff review this tool independently. This may include your plan’s chief medical officer, chief quality officer, nursing leadership, pediatric experts, and product development staff.

Identifying Need

The first two questions of the readiness assessment found on page 54 is identifying need. Has your organization identified a need to initiate an evidence-based program to address (i.e., prevent and/or treat) childhood obesity? You may want to consider the following questions as you evaluate your organization’s need for a childhood obesity prevention and treatment program.

1. Do your current claims track pertinent data that highlight disease processes that are related to childhood obesity?

Organizations are more likely to be ready to design and implement a childhood obesity prevention and treatment initiatives if they are already collecting preliminary data to track conditions or illnesses that provide evidence of overweight or obesity. MMCOs make consider the following information helpful to track for the purposes of an obesity prevention initiative: BMI scores, growth charts, asthma, pre-diabetic, type II diabetes, hyperlipidemia, hypertension, blood work (e.g., lipid panel, glucose, HbGA1C).

2. Are parents, caregivers, community stakeholders, and/or clinicians expressing a need for a childhood obesity prevention and treatment program?

While tracking pertinent data that highlights disease processes related to obesity and overweight is one method of identifying need for an initiative, another indicator is feedback from clinicians, caregivers, and family members. If your plan is receiving feedback from individuals that regularly interact with enrollees in your health plan that overweight and obesity is a growing concern for your members, it might be the right time to consider designing and implementing a childhood obesity prevention and treatment program. Additionally, you may wish to consider confirming feedback with data collected from claims or begin to track preliminary data that would be helpful to identify the individuals who should participate in such initiatives.
3. Is developing an evidence-based childhood obesity program an appropriate strategy to mitigate disparities correlated with childhood obesity? Is developing an evidence-based childhood obesity program an appropriate strategy to improve the health status and associated health outcomes for overweight or obese children enrolled in your plan?

If your organization is beginning to identify a need for a childhood obesity prevention and treatment program, whether from claims data or from stakeholders, then it is important to consider the potential options for responding to this need. In an era of value-based purchasing, quality reporting, and pay-for-performance, it is increasingly important to assess potential designs for obesity prevention and treatment efforts through a lens of evidence-based methods that account for relevant health data and are responsive to quality metrics.

4. Readiness for Change

Questions three through six of the readiness assessment found on page 54 evaluate readiness for change. Has your organization clearly assessed the willingness and readiness of clinical leadership to participate in an initiative using evidence-based approaches to prevent and/or treat childhood obesity? You may want to consider the following questions as you evaluate your organization’s readiness for change.

5. Do you feel the organization is supportive in pursuing a childhood obesity and preventive initiative?

The goals of a childhood obesity prevention and treatment initiative may include providing overweight and obese children with evidence-based, effective ways to safely reduce body weight, providing understandable, accessible health education, and the adoption of a healthy lifestyle. Once your organization has identified a need for a childhood obesity prevention and treatment initiative, it will be necessary to discuss the development of an initiative with your organization’s leadership. In order to foster support, it will important to communicate the evidence supporting a need for an initiative, the goals, and thoughts around potential designs for the program.

6. Will your plan’s clinical leaders and product development staff support the effort required to implement and sustain a childhood obesity prevention and treatment program?

In order to accomplish these goals, your organization must be willing to identify and build relationships with key stakeholders, foster support among clinician groups, and drive change in approaches to the health care delivery with community health workers and other community-based resources. These changes may require your organization to be supportive of the use of internal resources and experts to engage in the creative development of evidence-based, team-driven designs for a childhood obesity prevention and treatment initiative.
Time, Resources, Staff, and Partnerships

Questions seven and eight of the readiness assessment found on page 54 address time, resources, staff, and partnerships. Is your organization willing to allocate the necessary time, resources, and staff to implement and sustain a childhood obesity program? Is the community and/or key stakeholders expressing a need for such a program? You may want to consider the following questions as you evaluate your organization’s capacity to undertake a childhood obesity prevention and treatment program.

7. Will your organization provide sufficient support staff for the initiative?

In order for a new childhood obesity prevention and treatment program to be successful, it is important to find the internal support staff and resources needed to design and implement the program. This may include:

- Registered Dietitian
- Behavioral Therapist
- Fitness Trainer
- Health Care Clinician (e.g., Primary Care Clinician)
- Nurse
- Medical Assistant
- Informatics Specialist/Coder
- Care Coordinator

8. Will your organization develop the necessary stakeholder relationships and community partnerships to implement a childhood obesity prevention and treatment initiative? And allow clinicians and support staff to develop community partnerships?

Commonly, childhood obesity prevention and treatment programs leverage existing community resources and stakeholders to provide various services and social supports. In some cases, MMCOs may have existing relationships with appropriate community stakeholders. For those organizations that do not have established community partnerships, it may be necessary to allocate time and resources to identify community stakeholders and establish solid relationships that yield additional benefits and resources for initiatives.

9. Will your organization allow time to train support staff and clinicians on the initiative?

If your childhood obesity prevention and treatment program utilizes a treatment model that is new to your organization, you will need time and resources to properly train staff. Additionally, if your organization needs to expand the number of staff to implement a childhood obesity prevention and treatment model, new staff will need to be trained to provide care, even if the model is currently used by your organization. In order for initiatives to be successful, it is important that participating staff are given the training and resources needed to adhere to identified model of care.
Sustainability

Questions nine and ten of the readiness assessment found on page 54 consider sustainability of childhood obesity prevention and treatment programs. Has your organization clearly defined the systems and measures needed for sustaining continuous evaluation and improvement of childhood obesity prevention and treatment initiatives? You may want to consider the following questions as you evaluate your organization’s ability to sustain a childhood obesity prevention and treatment program.

10. Will your plan be able to measure and assess the success of your initiative? (Taskforce to comply and evaluate the data)

A key component of implementation is evaluation. In order to properly evaluate a childhood obesity prevention and treatment initiative, an organization must identify measures of success during the design phase (prior to implantation). These measures of success should be guided and informed by your goals and intended outcomes. Once these measures are identified, it is important to collect preliminary or baseline data to provide information about the condition of the enrollees prior to intervention. Throughout the implementation of the initiative, your organization should continue to collect data for these very same measures. Once the initiative is concluded, the pre- and post-intervention data should be analyzed by individuals with experience in data analytics and evaluation methods to determine the success of your initiative. If your organization has not collected data previously or does not currently have staff to evaluate the initiative, your organization may need to invest in resources to ensure an evaluation can be conducted once the initiative is complete.

11. Will your organization be able to sustain and scale the initiative if it is determined to be successful and treating or preventing childhood obesity?

Once your organization has evaluated the childhood obesity prevention and treatment initiative and determined the program to be successful in meeting identified goals, your organization may want to consider sustaining the current initiative and scaling, or expanding, the initiative into other geographic areas. In order to do this, your organization will need to identify sustainable sources of funding to ensure the continuation of the program. Additionally, your organization will need to determine whether the initiative needs to be adapted to meet the needs of the population in other areas. This may include changes to the implementation of the treatment model, changes to community partnerships, or changes to the types of staff needed to implement the initiative.
**Organizational Readiness Assessment Checklist**

**What is this tool?**

*This tool was developed by the Agency for Healthcare Research and Quality’s (AHRQ) Quality Indicators Toolkit. This tool can be used to assess your organization’s resources and readiness to support effective implementation of childhood obesity prevention and treatment initiatives. Using this checklist, you can identify resources, infrastructure and staffing needs that should be in place prior to implementation of such initiatives.*

Record your responses to the questions below:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you clearly defined the need that is driving your organization to consider designing and implementing a childhood obesity and prevention program?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Is building an evidence-based childhood obesity program an appropriate strategy to mitigate patterns of claims suggesting childhood obesity</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Do you feel the organization is supportive in pursuing a childhood obesity and preventive initiative?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Will your organization provide sufficient support staff for the initiative?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Does your organization currently have the necessary stakeholder relationships to implement a childhood obesity prevention and treatment initiative?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Does your organization currently have the necessary community partnerships to implement a childhood obesity prevention and treatment initiative?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Will your organization allow time and resources to prepare support staff?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Will your organization allow time and resources to develop community partnerships?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Will your organization be able to measure and assess the success of your initiative?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Will your organization be able to sustain and scale the initiative if it is determined to be successful and treating or preventing childhood obesity?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
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</tbody>
</table>
Count the number of **NO** responses that you have recorded. If the number is:

**0–3:** This is likely to be a good time to design and implement a childhood obesity prevention and treatment initiative at your plan. As you begin the design and implementation process, make sure you continue to monitor whether the answers to these questions change and keep a close eye on any items to which you answered “no.”

**4–6:** Your responses indicate that your plan may not be ready on one-third to one-half of the factors. This may likely undermine the success of the initiative if your plan moves forward with implementation. Take some time to determine if this is the appropriate time to implement a childhood obesity prevention and treatment program. Review the following tips and suggestions to enhance readiness that follow and determine if any are appropriate within your institution.

**7–10:** Based on your responses, significant work is likely needed to raise the readiness level of your plan. Consider postponing the design and implementation process for a few months, and then answer the questions again to determine if your readiness has changed. Also, review the helpful advice in Section III to enhance your institution’s readiness.