

American Academy of Pediatrics (AAP) Fetal Alcohol Spectrum Disorders (FASD) Virtual Learning Collaborative

**Enhancing Pediatricians' Capacity and Improving Health Outcomes for Children and Families
Cohort 1 (2024-2025)**

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- ## Evaluation
- 8,580 learners
 - All 49 states had at least one participant involved

Introduction

Overview: Introduction to the FASD Virtual Learning Collaborative

Our findings revealed that:

- **Organizational barriers**
- **Refine high-touch programs**
- **Systems-based approaches**

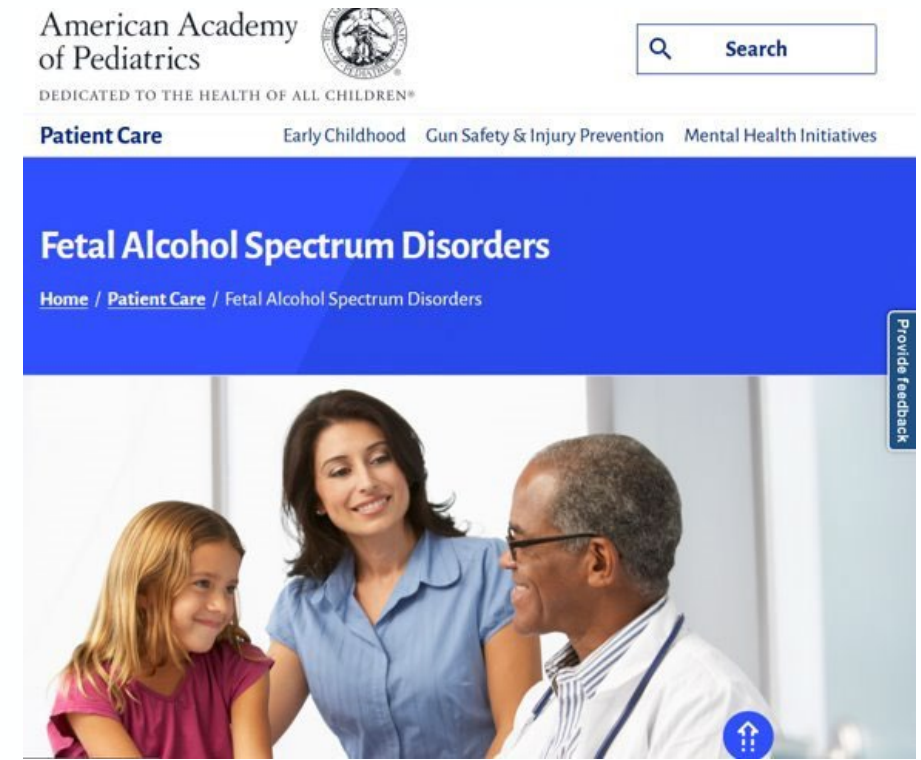
Other:

- Pediatricians responded positively **to incremental, targeted, and small-step activities**

Introduction

Overview: Introduction to the FASD Virtual Learning Collaborative

- Goal: Improve pediatricians' capacity to support children and families impacted by alcohol and substance use during pregnancy.
- Focus on improving identification, referral, and care for children living with prenatal alcohol and FASDs.



Introduction (Continued)

Project Objectives

- **Increase pediatricians' capacity** to support children and families affected by alcohol and substance use
- **Promote patient- and family-centered care approaches** to improve access to services and referrals
- **Enhance the identification and health outcomes** of children affected by prenatal alcohol and substance exposure and FASD

Introduction (Continued)

Educational & Learning Components

- **Blended Learning Model:** Synchronous and asynchronous materials
 - Online modules, webinars, and interactive sessions
 - Focus on practical skills, knowledge, and tools for healthcare providers
- **Quality Improvement (QI) Activities:** Teams implemented and assessed small tests of change to improve care delivery

Introduction (Continued)

Collaborative Structure and Audiences

- **AAP Chapters' Role:** Recruitment and formation of multidisciplinary teams
 - 6 AAP chapters: California, Florida, Indiana, Maryland, South Carolina, & Texas
 - *Partnerships:* Collaboration with clinical and public health stakeholders
- **Key Roles:** FASD Ambassadors and interdisciplinary team members
 - **FASD Ambassador:** A pediatrician selected to lead the initiative and drive quality improvement
 - **Pediatricians and multidisciplinary teams:** Will include pediatricians, non-physician clinicians, nurses, adult primary care physicians, support staff, and community-based partners



AAP FASD VLC Quality Improvement & Program Evaluation

Measures and Design



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Key Focus Areas For Curriculum

Clinical Workflow Measures

Measures	Clinical Workflow
<i>Identification of FASD</i>	Strategies to detect and diagnose FASD early
<i>Referral and Access to Care</i>	Strengthening systems for referrals and improving access to needed services
<i>Family-Centered Care</i>	Ensuring that care is holistic, inclusive, and tailored to the needs of families



Virtual Learning Collaborative Stages

AAP Thought Process

Stage	Description
Learn	-Professional development activities (synchronous and asynchronous) -Topics focused on FASD, prenatal alcohol and substance exposure, and family-centered care
Apply	-Teams will implement small tests of change -Focus on practical interventions for improving care and health outcomes
Improve	-Program evaluation and reflection on session outcomes -Measure progress through key quality improvement metrics



VLC FASD QI Measure

- Cohort Overview
- Improvement in 4 out of 6 measures
- None statistically significant

VLC FASD Measure	% Baseline*	% Cycle 4*	Difference in %*	Sample Size (n)**	Targeted Change	Alpha	P-Value**	Significant**
Measure 1- Prenatal Alcohol Screening	83%	92%	9%	3	10%	0.05	0.838	No
Measure 2- Anticipatory Guidance	75%	97%	21%	2	10%	0.05	0.595	No
Measure 3- Anomaly Screening	97%	98%	1%	3	10%	0.05	0.838	No
Measure 4- Developmental Surveillance	61%	80%	19%	3	10%	0.05	0.538	No
Measure 5- SDoH Screening	91%	90%	-1%	2	10%	0.05	0.845	No
Measure 6- Follow-up Referral to Community	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a

Knowledge and Confidence Gains

Post VLC Survey Results

The data from the FASD Virtual Learning Collaborative (VLC) provided several insights (n=32).

- 88% of participants reported increased knowledge about FASD-related topics.
- 84% felt more confident in applying the information to their work.
- 90% expressed a stronger commitment to applying the learning from the VLC.
- Specific knowledge increases included a 66.67% rise in understanding AAP and CDC FASD-related guidance and a 50% increase in confidence to communicate with families, teachers, and administrators about FASDs.

Testimonials

Post VLC Results

Feedback from FASD VLC participants:

- “I recently saw a 2-year-old patient with speech delay and hearing concerns... After discussing FASD with the mother, she appreciated the conversation and the referrals I provided...This workshop taught me how to ask the right questions and guide families to the proper resources.”
- “I appreciated in the very beginning all of the people helped me to figure out how to ask questions to screen more with less judgement basically. That makes a big, big difference and I could not figure out how to do that. The way that it’s been outlined through the programs that you all have offered here.”

Outcomes of the Virtual Learning Collaborative

Improved Pediatrician Capacity

- Enhanced ability to identify and manage FASD

Better Health Outcomes

- Early intervention and support for children living with prenatal alcohol and substance exposure

Improved Systems of Care

- Enhanced collaboration between clinical and community resources

Impact Stories

- Participants shared positive experiences, emphasizing improved ability to screen for FASD with less judgment and guide families to appropriate resources.



Thank You Questions?

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