

Community Access to Child Health (CATCH)

SCAAP 2019 O. Marion Burton, MD CATCH QI Meeting
Michael K. Foxworth II, MD, FAAP
1/19/2019



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The CATCH Program

The concept of the CATCH Program emerged in 1993 from the recognition that many pediatricians and communities have ideas for improving the health care of children in their local areas but do not have the **time, expertise or money to plan and implement** the projects.



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The “OLD” CATCH Mission

CATCH supports pediatricians to collaborate within their communities so that all children have access to needed health services and a medical home.



CYCLOPEDIA
ROCHESTER

Geoffrey Collins, MD
2010 CATCH Resident Funds Grantee
Cyclopeda



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The “OLD” The CATCH Vision

The vision of CATCH is that every child in every community has a medical home and other needed services to reach optimal health and well-being.



Henry G. “Hank” Herrod, MD
2010 CATCH Planning Funds Grantee
Inner-city Medical Home: Parental and Provider Perceptions



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“NEW” Mission and Vision

- Mission: CATCH supports pediatricians to collaborate within their communities to advance the health of all children.
- Vision: Every child in every community reaches optimal health and well-being.



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CATCH Accomplishments

- Provided close to \$10 million in grants.
- Funded more than 1700 pediatricians working in their communities: 842 planning, 585 resident, and 305 implementation grants.
- Support to communities in every state as well as the District of Columbia and Puerto Rico; and in urban, suburban and rural settings.



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What is a CATCH project?

- Is led by a pediatrician or pediatric resident.
- Focuses on building strong community partnerships.
- Serves those who are underserved/experience health disparities.
- Provides access to services that lead to optimal child health and well-being.
- Has measurable outcomes.
- Plans for sustainability.



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CATCH Grants



Joanna Mimi Choi, MD
2011 CATCH Resident Funds Grantee
MotivateMe: Motivational Interviews to
Address Obesity

- **Planning Grants and Implementation Grants for Pediatricians and Fellowship Trainees**
 - Grants of up to \$10,000 awarded twice per year
 - Grant applications available May–July and November–January
- **Resident Grants**
 - \$2,000 grants awarded twice per year for planning and/or implementation projects
 - Grant applications available May–July and November–January



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Planning Grants

• For individual pediatricians or fellowship trainees to plan innovative, community-based initiatives that increase children's access to optimal health or well-being.

• Requirements:

- New in your community but may exist in another community.
- Provide services and/or outreach to children in the community, not just those served in your practice
- Includes plans for community partnerships
- For planning activities only
- Methods for measurement of project goals and objectives are clearly described.
- Budget reflects project timeline and activities

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Implementation Grants

• For individual pediatricians or fellowship trainees to conduct initial implementation of or to pilot innovative, community-based initiatives that increase children's access to optimal health or well-being.

• Requirements:

- New in your community but may exist in another community
- Must provide services and/or outreach to children in the community, not just those served in your practice
- Includes plans for community partnerships.
- For the initial phase of implementation (can include a combination of planning and implementation activities)
- Methods for measurement of project goals and objectives are clearly described
- Budget reflects project timeline and activities

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Resident Grants

• For pediatric residents to conduct initial implementation of or to pilot innovative, community-based initiatives that increase children's access to optimal health or well-being.

• Requirements:

- Must be new in your community but may exist in another community.
- Includes plans for community partnerships
- Planning **or** implementation activities. If project proposal only includes implementation activities, then prior planning must be demonstrated.
- Methods for measurement of project goals and objectives are clearly described
- Budget reflects project timeline and activities

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Resident Grants

• Eligibility

- Postgraduate status as of July 31, 2019
- PL-1 or PL-2
- PL-3 or below in medicine-pediatrics residency
- PL-3 if planning a chief resident year in 4th year
- PL-4 or below in triple-board residency
- PL-3 residents may apply as co-applicants



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Ineligible Expenses

- Supplemental funding to previously awarded grants or existing programs
- Any payment to a pediatric care provider* or dentist
- Any clinical encounter i.e., any service that is deemed a billable encounter
- Professional development (conferences or educational/training activities)
- Educational materials for a pediatric care provider* or medical student
- Speaker fees or speaker travel reimbursement
- Quality improvement projects only benefiting clinics or practices
- Health fairs or one-time events
- Building or office construction, maintenance, or repairs
- Capital equipment (i.e., durable items lasting beyond the project timeline)
- Medical equipment, medical supplies, or pharmaceuticals (Exception: select supplies for oral health projects)
- Indirect costs or fiscal agent fees

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Scoring

- Each Planning & Implementation application is scored by:
 - Chapter CATCH Facilitator
 - District CATCH Facilitator
 - Random District CATCH Facilitator
 - CATCH staff
- Each Resident application is scored by:
 - Chapter CATCH Facilitator
 - District CATCH Facilitator
 - District Resident CATCH Liaison
 - Randomly selected District Resident CATCH Liaison or at-large Resident Liaison
 - Randomly selected National Resident Liaison
 - CATCH staff

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Important Dates

- **January 14, 2019:** Technical assistance available through this date.
- **January 31, 2019, 3 pm CST:** Application deadline.
- **By May 1, 2019:** Applicants receive e-mail notice of funding decisions.
- **By August 1, 2019:** Submit signed award documents; projects are 12-month in length and may begin upon receipt of funds.



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What makes a strong proposal?

- Target population is clearly described
- Target community is clearly described
- Plan or intervention is clearly described
- Evidence of community partnerships
- SMART Goals
 - Specific
 - Measurable
 - Attainable
 - Realistic/Reasonable
 - Time sensitive



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What makes a strong proposal?

- Evidence of Sustainability
- Appropriate Budget Items
- Get help! Technical assistance is available from:
 - District CATCH Facilitators
 - Chapter CATCH Facilitators
 - District Resident CATCH Liasons
 - CATCH Staff



Be a CATCH pediatrician.

“One pediatrician can make a difference.”



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Our Supporters



The AAP CATCH Program is made possible through the generous support of Pfizer, Inc, with additional support from individual donations through the AAP Friends of Children Fund.



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Your CATCH Resources

Chapter CATCH Facilitators District CATCH Facilitator

Nancy Powers, MD

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Amber Pendleton, MD

Amber.pendleton@louisville.edu

Michael K. Foxworth II, MD

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Find out more

- CATCH: www.aap.org/catch
- Community Pediatrics: www.aap.org/commpeps
- Funded project list of grantees:
www.aap.org/fundedprojects



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