

# Engaging Parents as Quality Improvement Partners: Introducing the Well Visit Planner

April 11, 2013



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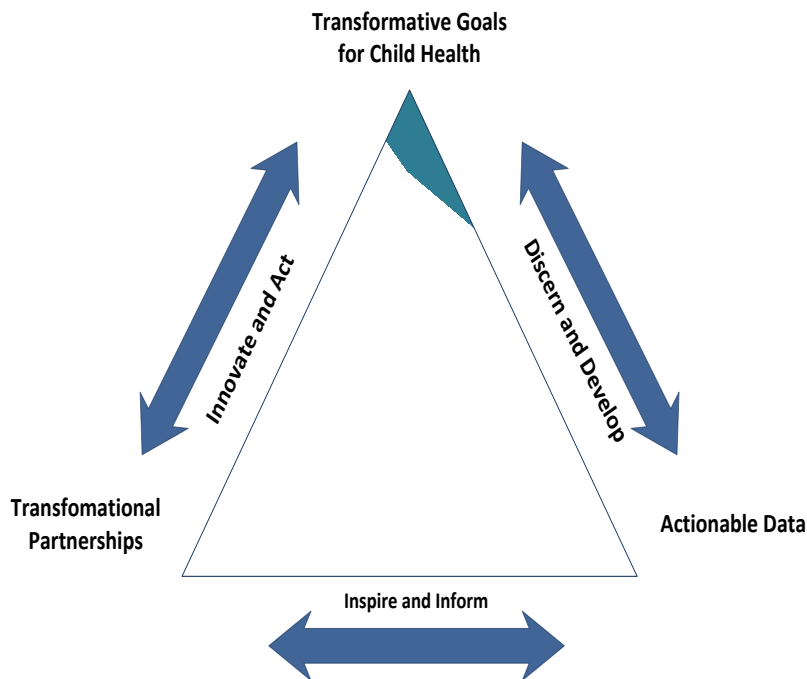
The WVP was developed and tested by the Child and Adolescent Health Measurement Initiative (CAHMI) for use in pediatric practices over four years and through a grant from the federal Maternal and Child Health Bureau (R40 MC08959). Its continued development and implementation is supported by the CAHMI, volunteer advisors and through support from HRSA/MCHB through Cooperative Agreement U59-MC06890.

# Presentation Goals

1. **Inspire your interest** in methods to engage parents and families directly in measuring and improving health care quality and outcomes
2. **Discover** at least one way these methods may have relevance for your focus for promoting health and health outcomes in maternal and child health research, policy and practice
3. **Learn from you** to optimize the alignment of this work with opportunities to collaborate in improving MCH

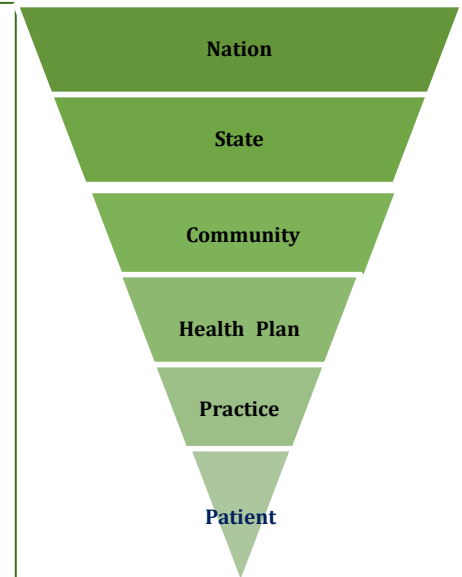
# Quick Snapshot of the CAHMI

The CAHMI provides leadership to define, assess and inspire patient-centered interventions to improve children's health. We promote early and lifelong health of children using patient-centered data and tools.



## Key Areas of Innovation:

- Family-centered child & adolescent health measurement & improvement at the national, state & local levels (DRC; NQF)
- Tools to inform and activate families as quality measurement and improvement partners
- Stakeholder facilitation to inspire, inform and track transformation and best practices





Ask us a question | Request a dataset  
 Open your data briefcase

- About the Data Resource Center
- Learn About the Surveys
- Browse the Data
- Put Data into Action
- Get Help

**Publicly insured children are more likely to have insurance coverage which adequately meets their health needs than privately insured**

- Survey Fast Facts
- Quick Data Search
- Browse by State
- How to Use This Site

Keyword Search

### Data at a Glance

At your fingertips—easy-to-read data snapshots for each state

State/Region

**Welcome to the Data Resource Center for Child & Adolescent Health!**  
 Welcome to the newly redesigned DRC website. Take a tour of the site and give us your feedback.

The mission of the Data Resource Center (DRC) is to take the voices of parents, gathered through the National Survey of Children's Health (NSCH) and the National Survey of Children with Special Health Care Needs (NS-CSHCN), and share the results through this online resource so they can be used by researchers, policymakers, family advocates and consumers to promote a higher quality health care system for children, youth and families. [Learn more about the DRC](#)

- #### DRC Highlights
- Child Obesity State Report Cards
  - New NS-CSHCN Data Trends
  - New chartbook comparing CSHCN with children who do not have special health care needs
- 
- #### Most Popular Topics
- Medical Home
  - Breastfeeding
  - Childhood Obesity
  - CSHCN

- #### What you can do on the DRC website?
- Learn about** the National Survey of Children's Health and the National Survey of Children with Special Health Care Needs
  - Browse** national and state findings on hundreds of child health indicators
  - Search** data based on numerous important topics and subgroups of children
  - Download** and print snapshot profiles on key topical areas for your state
  - Request** a dataset and conduct in-depth data

#### Connect with the DRC

Sign up for email updates

childhealthdata National study finds that providing insurance to the poor helps them maintain both health and financial stability: <http://t.co/y0X8Hlb>  
4 days ago · reply · retweet · favorite

childhealthdata 1 in 5 high school students meets the medical criteria for addiction, according to a Columbia study. Read an article at <http://t.co/a3ox4H2>  
6 days ago · reply · retweet · favorite

Join our conversation!

# Flow



Rationale for and overview of patient centered quality measurement and improvement (PCQMI)

In depth review of the design, testing and application of the Well Visit Planner

Dialogue about opportunities and address questions



# Motivation: Patients are the most underused resource for quality improvement!

**THERE ARE 126 SCHOOLS IN THE COUNTRY THAT TEACH YOU HOW TO BE A PHYSICIAN BUT NOT ONE FOR HOW TO BE A PATIENT.**

**101**

**TAKE CHARGE OF YOUR CARE.**

- Do your homework. Gather as much trustworthy information as you can on your condition.
- Bring someone with you for support when visiting your physician and to help you remember what was said.
- Have key information with you, including your medical and medication history.
- Take a notebook, ask questions and double-check your notes for accuracy.

At United Health Foundation, we believe that the more you know, the healthier you will be. Which is why we partnered with the NATIONAL PATIENT SAFETY FOUNDATION™ to bring you these important health tips. We encourage you to get more involved in your care, to seek out information and to always make sure that the information you use comes from a reliable, evidence-based source. To find out more on this and other important topics, visit [UHFtips.org](http://UHFtips.org).

**United Health Foundation**



# Motivation: What Does the Evidence Say?

## **Partner, Engage and Activate Patients!**

The evidence suggests it will:

- Improve safety by reducing errors
- Improve compliance
- Lead to fewer no-shows
- Encourage better self-care behaviors
- Reduce repeat procedures
- Foster better care coordination
- Build greater trust
- Enhance communication





## Motivation: PCQMI Methods Research Base

Health psychology and information science suggest that:

- active two-way partnerships between patients and clinicians...
- coupled with an assessment-based approach to tailoring the content of care help...
- promote the likelihood of salient and effective delivery of communication-based health care

The WVP tools are based on the mutual-participation and the elaboration-likelihood health communication models.





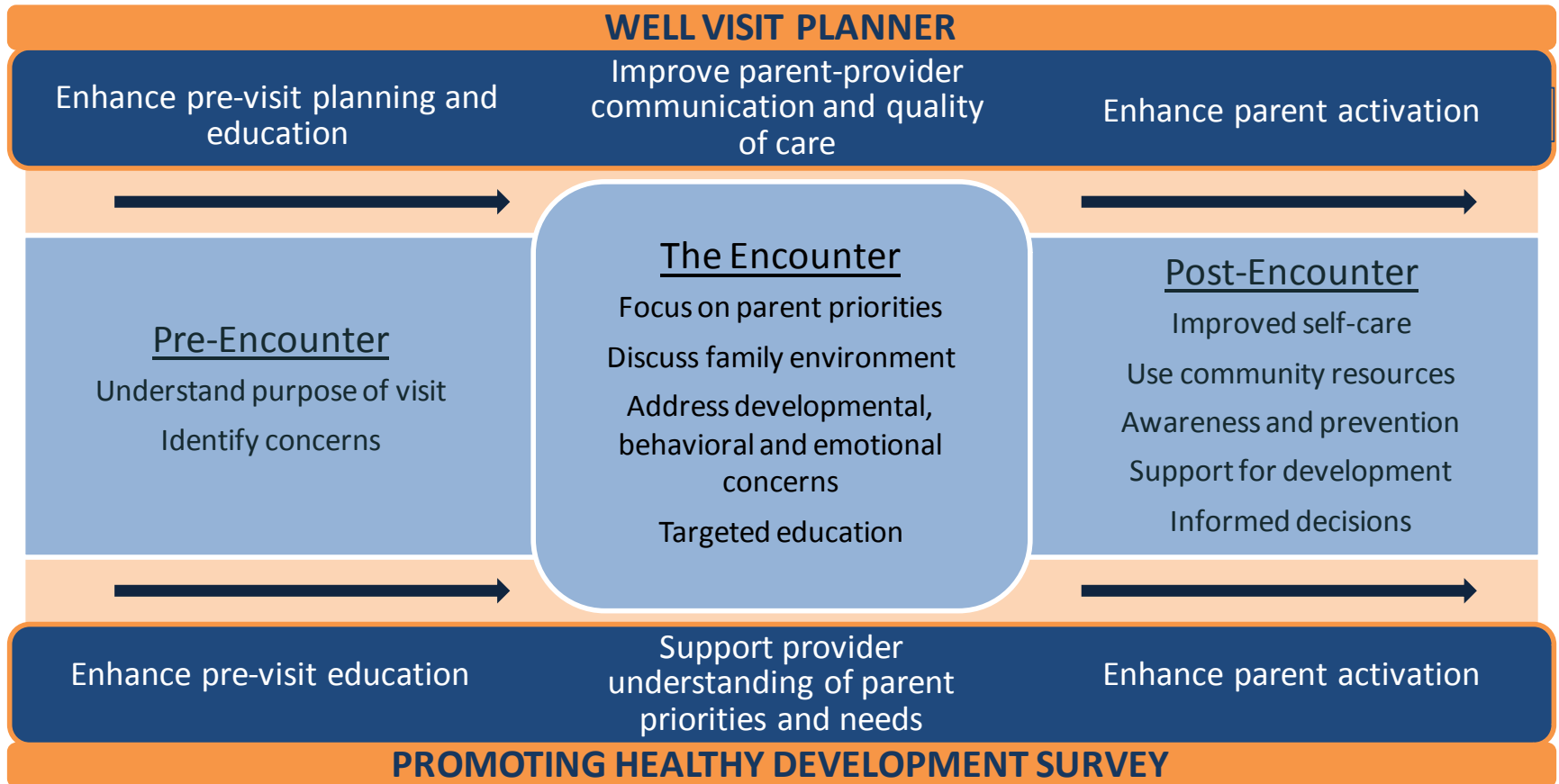
## Motivation: How do we Engage Parents? PCQMI Methods - Effects on Quality

The primary mechanisms for improvement are:

- **educating and priming (cueing)** parents and their pediatric clinicians to focus on priority topics and priority parent needs;
- establishing a method for **easy collection and transfer of information** about these needs and priorities; and
- **facilitation of a patient-centered context** of care.

# The Vision: Empowering A Cycle of Patient-Provider Engagement

## (1) Promoting Healthy Development Survey; (2) WVP; (3) PHDS





# Core Well Visit Planner (WVP) tools?

- **Quality Measurement: Promoting Healthy Development Survey**
- **Quality Improvement: Well Visit Planner Pre-Visit Planning**

**Promoting Healthy Development Survey**

A Survey About Well-Child Visits for Young Children

**Welcome!**  
If your health care provider at fill out a survey about your ch

**Why complete the surv**  
The health care providers at T this survey so that they can ge

- The Children's Clinic will us can do better.
- There's something in it for report will guide you in pr provider to improve your c

**How long does the surv**  
Only 10-15 minutes!  
If you can't finish right away, c

**Take the Survey and**  
**NORTH BEND MEDICAL CENTER**  
**SUMMARY OF MAIN FINDINGS**

The chart below highlights the proportion of children who received the specific, recommended aspect of well-child care. Detailed information about each of the measures, or indicators of quality, can be found on the pages listed and in the Appendix. Information provided includes: what was asked in the survey; how the measure was scored across the multiple individual survey items in that scale; item-level findings; and descriptive information about the related behaviors reported from parents in North Bend.

ASPECTS OF RECOMMENDED WELL-CHILD CARE	NORTH BEND FINDINGS
Anticipatory Guidance and Parental Education Report on Page 3	45.4%
Developmental Surveillance Report on Page 5	74.9%
Follow-Up for At-Risk Children Report on Page 6	32.3%
Assessment of the Family Report on Page 7	46.3%

NO children got the recommended aspect of care. ALL Children got the recommended aspect of care.

**Well-Visit Planner™**  
a project of The Child & Adolescent Health Measurement Initiative

*Your Child, Your Well-Visit*

Parents, welcome to the Well-Visit Planner™ website (WVP)! The purpose of the WVP is to help you prepare, learn about and identify your priorities for your child's next well-visit. The WVP is for parents of children who are from 4 months through 3 years of age. Complete it before every well-child care visit by going through these three steps:

**Step 1**

**Answer a Questionnaire**  
about your child and family

**Step 2**

**Pick Your Priorities**  
for what you want to talk or get information about at your child's well-visit

**Step 3**

**Get Your Visit Guide**  
that you and your child's health care provider will use to tailor the visit to your child & family needs

Your privacy is important to us. Please review our terms and conditions, check each box and click the **Get Started** button below.

- I am 18 years old or older. I agree to the [Terms and Conditions](#) of the Well-Visit Planner
- I voluntarily consent to the Well-Visit Planner.

**Get Started!**  
Click here

Are you a health care provider?  
Click here for more info

About this Website | Terms and Privacy | Educational Materials | Help  
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# Phase I: Promoting Healthy Development Survey

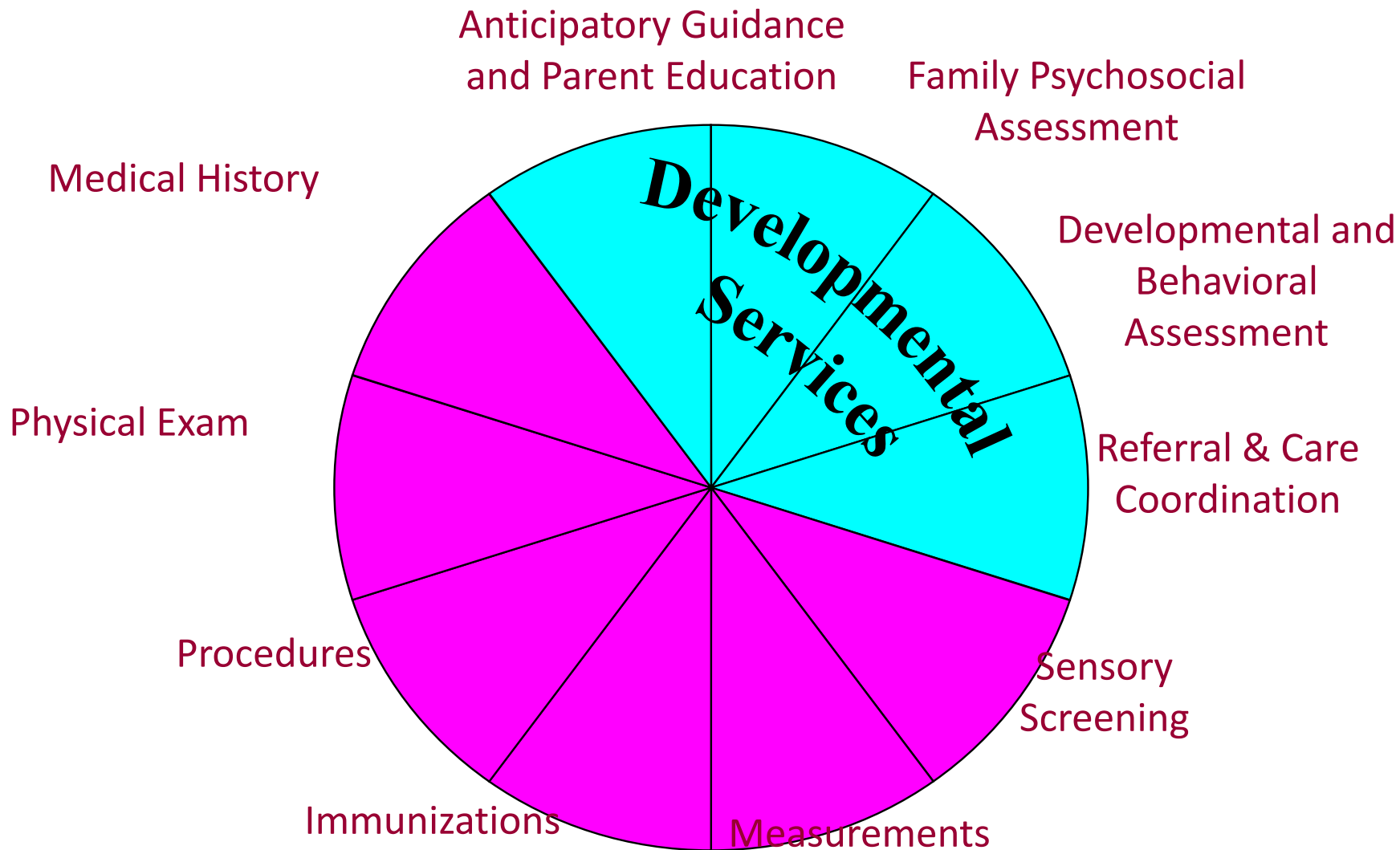
## THE PROMOTING HEALTHY DEVELOPMENT SURVEY

- ❖ **Parent-Centered:** The PHDS is completed by parents of young children (ages 0-3)
- ❖ **Endorsed** by the National Quality Forum (NQF)
- ❖ **Used** for quality measurement at the national, state, plan, and provider-level. (10+ years)
- ❖ **Flexible** longer and shorter versions available; online, mailed, telephone
- ❖ **Non-Proprietary**
- ❖ **More than 45,000 surveys have been collected by:**
  - 10 Medicaid agencies, 26 health plans and hundreds of pediatricians
  - Nationally through the National Survey of Early Childhood Health (NSECH) and
  - National Survey of Children's Health (NSCH).

### KEY MEASURES:

- Anticipatory guidance and parental education
- Addressing parental concerns (Developmental surveillance)
- Standardized developmental and behavioral screening
- Follow-up care for children identified at-risk for developmental delays or behavioral issues
- Assessment of the family for risk factors to the child
- Family-centered care (Communication and experience of care)

# PHDS: Measuring the Content of Well Child Care Services





# Phase II: Pre-Visit Well Visit Planner (WVP)



*Your Child, Your Well-Visit*

Parents, welcome to the Well-Visit Planner™ website (WVP)! The purpose of the WVP is to help you prepare, learn about and identify your priorities for your child's next well-visit. The WVP is for parents of children who are from 4 months through 3 years of age. Complete it before every well-child care visit by going through these three steps:

**Step 1**



**Answer a Questionnaire**  
about your child and family

**Step 2**



**Pick Your Priorities**  
for what you want to talk or get information about at your child's well-visit

**Step 3**



**Get Your Visit Guide**  
that you and your child's health care provider will use to tailor the visit to your child & family needs

Your privacy is important to us. Please review our terms and conditions, check each box and click the **Get Started** button below.

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- I voluntarily consent to the Well-Visit Planner.

**Get Started!**  
Click here

**Are you a health care provider?**  
Click here for more info

[About this Website](#) | [Terms and Privacy](#) | [Educational Materials](#) | [Help](#)

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Engaging Parents as Improvement Partners, April,

2013 |



# The Well-Visit Planner Website: Three Steps

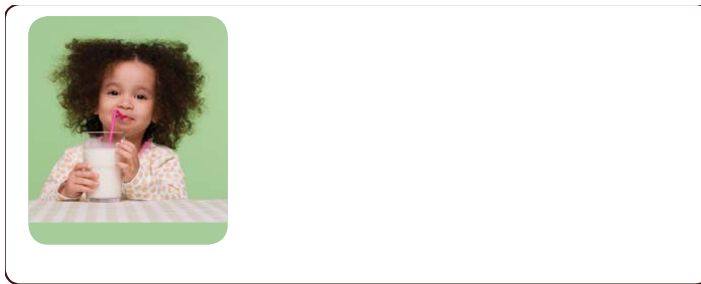
**Parents** of young children visit the Well-Visit Planner™ website and complete the following steps before their child's age-specific well visit:

**Public use site available**  
[www.wellvisitplanner.org](http://www.wellvisitplanner.org)

**Site specific/branded** option  
with parent visit guide  
transfer into EMR: Coming  
Soon!

**Full EMR integration:** Beta  
testing in FQHC's now.

Spanish language version  
nearing completion!







# Example: Practice or Site Specific Version

- Key Partners
  - Harvard Pilgram's Pediatric Physicians' Organization (PPOC) at Boston Children's
  - Children's Health Alliance (Oregon)
  - FQHC's (Los Angeles area)
- Key Issues
  - Data Transfer Protocol (e.g. secure faxing into EMR)
  - Data Security & PHI Standards (cross institutional)
  - Aggregated Data Reports & Population Based Data Set
- Establishing the Real-World Process
  - Dissemination and implementation
  - Technical support infrastructure
  - Continuous learning and updates

The screenshot shows the PPOC Well-Visit Planner website. At the top, there is a logo for the Well-Visit Planner, described as a project of the Child & Adolescent Health Measurement Initiative, and the PPOC logo (Pediatric Physicians' Organization at Children's), a leader in preventative and well-child care. The main heading is "Your Child, Your Well-Visit". Below this are three steps: Step 1: Answer a Questionnaire (with an image of a girl), Step 2: Pick Your Priorities (with an image of a baby), and Step 3: Get Your Visit Guide (with an image of a girl). A call to action says "Take 10 minutes to get a personalized visit guide for your child's next well-care visit". Below this are three bullet points: "Explore key issues and needs important to the health of your child and family", "Learn about important topics to discuss with your healthcare provider", and "Pick your top priorities and get educational information before the visit". A fourth bullet point says "Partner with your child's provider by sharing your personalized visit guide". A privacy notice follows: "Your privacy is important to us. Please review our terms and conditions, and consent form, check each box below and click the 'Get Started' button below." There are two checkboxes: "I am 18 years old or older. I agree to the Terms and Conditions of the Well-Visit Planner." and "My use of the Well-Visit Planner is voluntary". A green "Get Started" button is present. At the bottom, it asks "Are you a health care provider? Click here for more info." and a footer contains links: Home | About | Terms & Conditions | Consent Form | Educational Materials | For Providers | FAQ. A green bar at the very bottom says "¿Hablas español? Haga clic aquí."



# Full EHR Integration

**Continued...**

The questions below will help your child's doctor or health care provider understand the specific needs of your child and your family.

**General Questions about You and Your Child:**

1. Share one thing that your child is able to do that you are excited about:

she can say so much lately! It is fun to hear the new words she comes up with everyday!

2. Are there any specific **concerns** you would want to discuss at your child's upcoming well-visit?  
 Yes  No

Please Describe:

Should she be interested in toilet training yet?

3. Have there been any **changes at home** lately? Check all that apply.

None  
 Move  
 Job change  
 Separation  
 Divorce  
 Death in the Family  
 Other, please describe:

You Must select an option to enter text

**Questions about Your Growing and Developing Child:**

4. Do you have any concerns about your baby's learning, development, or behavior?  
 A Lot  A Little  Not at All

Please Describe:

You Must select "A Lot" or "A Little" to enter text

**2yr Nurse Intake: Donald Duck**

**2yr Nurse Intake**

History Source: [ ]  
Nurse: [ ]  
Interpreter Used: [ ]  
Nickname: [ ]  
Genetic Testing:  GTY  GTN

Accompanied By:  Mom  Dad  Sibling

Current Medications: [ ] **Add Medication**

Family History: [ ]  
Social History: [ ]  
Parental Concerns: [ ]

One thing parent enjoys about child: [ ]

**Diet**

Milk: [ ] Daily Intake of Milk:  <20 oz/day  >20oz/day

Balanced Diet:  vegetables/fruits  dairy  grains  meat  iron rich foods

Comment: [ ]

**Supplements/Dental Care**

Vitamins:  yes  no  
Fluoride Supplement Needed:  yes  no  
Dental Care/Toothbrushing:  yes  no



# Additional Tools

- Shared Encounter Forms; Educational Website

**Your Child's 12 Month Well-Visit** RECORD #: \_\_\_\_\_ (office use only)

This form will help us give your child the best care possible. We will use it to focus the visit on your child and the information you would like to receive.

CHILD'S NAME: \_\_\_\_\_ CHILD'S DATE OF BIRTH: \_\_\_\_\_

YOUR RELATIONSHIP TO THE CHILD: \_\_\_\_\_

Share with me one thing that your child is able to do that you are excited about: \_\_\_\_\_

Are there any specific concerns you want to discuss today?  YES  NO

Have there been any MAJOR changes in your family lately?  None  Move  Job change  Separation  Divorce  Death in the family  Other: \_\_\_\_\_ Describe: \_\_\_\_\_

**PICK YOUR PRIORITIES FOR THE VISIT** Tell us what you want to talk about today by checking up to 3 boxes TOTAL from the topics below (fewer than 3 is okay too). Find information sheets on the topics below at [www.nbmcwellvisit.com](http://www.nbmcwellvisit.com)

<p><b>Establishing Routines For Your Child</b></p> <input type="checkbox"/> Importance of family real-time routines <input type="checkbox"/> Importance of outside family activities <input type="checkbox"/> Television - why the experts say no TV <input type="checkbox"/> Ways to read to your child to promote language development <input type="checkbox"/> How your child responds to new people <input type="checkbox"/> The importance of your child pointing to let you know what they want <input type="checkbox"/> Bed and naptime routines & sleep habits <input type="checkbox"/> Issues related to <p><b>Your Child's Feeding &amp; Appetite Changes</b></p> <input type="checkbox"/> Feeding time strategies <input type="checkbox"/> Nutritious foods & how much your child eats <input type="checkbox"/> Day-to-day changes in your child's appetite <input type="checkbox"/> Giving your child a choice between 2 options that are acceptable to you <p><b>GENERAL HEALTH INFORMATION</b></p> <p>Since your last visit, has your child had any MAJOR illnesses and/or Has your child ever had a bad reaction to a vaccine (temp/104, etc. Have any of your child's relatives developed new medical problems Do your child's eyes appear unusual or seem to cross, drift, or be la Does your child use bottles? Do you ever put your child to bed with a bottle of milk or juice? Does your child live in more than one home (e.g. divorced parents)? Do any adults who are around your child smoke (includes inside or c Do you have a dentist for your child? <input type="checkbox"/> No <input type="checkbox"/> Yes Who takes care of your child most days of the week? <input type="checkbox"/> Child's mother <input type="checkbox"/> Child's father <input type="checkbox"/> Other relative (e.g. How many times in the last 2 weeks have you gone out socially or ri <input type="checkbox"/> None <input type="checkbox"/> 1-2 <input type="checkbox"/> 3-5 In general, how well do you feel you are coping with the day to day <input type="checkbox"/> Hot well at all <input type="checkbox"/> Hot very well <input type="checkbox"/> Somewhat w</p>	<p><b>Your Child &amp; Family</b></p> <input type="checkbox"/> Behaviors to exp <input type="checkbox"/> Ways to guide fi <input type="checkbox"/> Time-outs <input type="checkbox"/> Consistent guida <input type="checkbox"/> Consistent guida <input type="checkbox"/> Consistent guida <input type="checkbox"/> Balancing taking <input type="checkbox"/> Making time for <input type="checkbox"/> Issues related to <p><b>Your Child's Dent</b></p> <input type="checkbox"/> Your child's first <input type="checkbox"/> Brushing your ch <input type="checkbox"/> Impact of finger <input type="checkbox"/> Bottles on your c <p><b>INFORMATION PROVIDED &amp; INSTRUCTIONS</b></p> <p>Handouts Provided</p> <p>Additional Information/Resources</p> <p>Parents-Your Notes</p> <p>Plan &amp; Instructions</p>
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**YOUR GROWING AND DEVELOPING CHILD** Do you have any spec  
 Yes  No  Not sure

Please check each tick your child is able to do right now.

Gross Motor  Fine Motor

Pull up to stand  Bang 2 small objects held in hands

Stand alone  Put a small object in a cup

**PROVIDER NOTES - Office Use Only** \_\_\_\_\_



## My Child's Well-Visit

Learn and Prepare

**Download Visit Form**

Save some time - print and fill out the visit form for your child's well-visit ahead of time. Click on a link below.

4 Month Visit Form ▶

6 Month Visit Form ▶

9 Month Visit Form ▶

12 Month Visit Form ▶

15 Month Visit Form ▶

18 Month Visit Form ▶

24 Month Visit Form ▶

36 Month Visit Form ▶

**Welcome**

This website is where parents that take their children to North Bend Medical Center for Well-Child Care can learn about nationally recommended topics that are important to discuss or get information about for children your child's age. Click on the well-visit that corresponds to your child's age to begin learning.

**Get information about your child's well-visit**

4 Month Education Page ▶

15 Month Education Page ▶

6 Month Education Page ▶

18 Month Education Page ▶

9 Month Education Page ▶

24 Month Education Page ▶

12 Month Education Page ▶

36 Month Education Page ▶

**Download Visit Form**

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4 Month Visit Form ▶

6 Month Visit Form ▶

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12 Month Visit Form ▶

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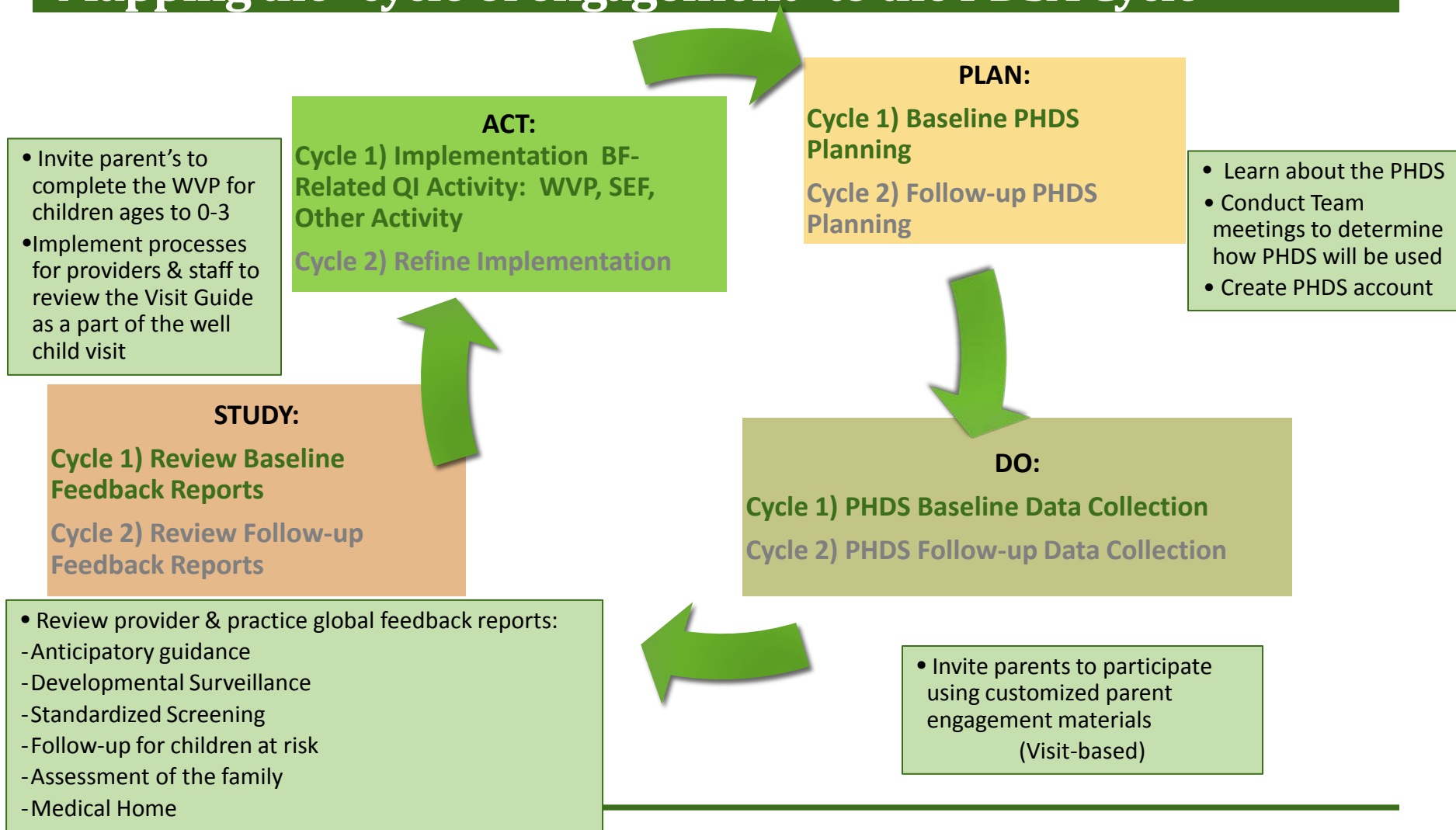
24 Month Visit Form ▶

36 Month Visit Form ▶

About this website ▶

# The Fit with Quality Improvement

## Mapping the “cycle of engagement” to the PDSA Cycle





# Patient Engagement Process

1

- **Communicate** with your patients about completing the WVP prior to their appointment
- Email, fliers, posters, postcards, phone calls, etc. (Example materials will be available in the implementation toolkit)

2

- Parents go to [www.WellVisitPlanner.org](http://www.WellVisitPlanner.org) and **engage** with with the interactive website, including age-specific questions and educational materials

3

- Parents view, save and print their **customized Visit Guide** to bring to their child's appointment. They can also email it to the office ahead of time via a secure email connection.

4

- **Enhanced patient encounter:** parents come to the visit prepared, doctors/nurses are prepared to use the visit guide to focus on parental priorities and concerns. Less time needed to ask developmental questions so more time to address developmental concerns and family psychosocial issues





**Engage**

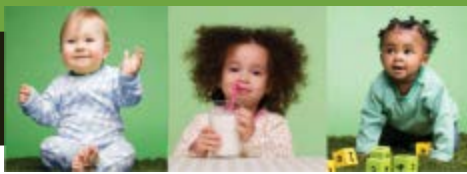
**Educate**

**Improve**

# DEMONSTRATION OF THE WELL VISIT PLANNER

<http://youtu.be/eG-fFjfyqnY>

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# Development & Feasibility (1)

- **Research:**

- Developed and tested over 4 years by the CAHMI for use in pediatric practices to assess: (1) Feasibility; (2) Acceptability; (3) Implementation requirements; (4) Impact on quality of the well-child visit
- Drew on prior knowledge of using the online Promoting Healthy Development Survey to assess quality of well child care in practices
- Funded through an R40 grant from the federal Maternal and Child Health Bureau with additional MCHB support to complete the public use website for dissemination

- **Content:**

- Anchored to the American Academy of Pediatrics' Bright Futures Guidelines for Health Supervision of Infants, Children and Adolescents, 3<sup>rd</sup> edition

- **Expert and Parent Engagement Process**

- National experts, families and pediatric providers collaborated in the design, content specification, all aspects of development, implementation and testing of the WVP tools
- Goals: ensure feasibility, optimize impact on the quality and efficiency of the well child visit for parents, children and provider teams

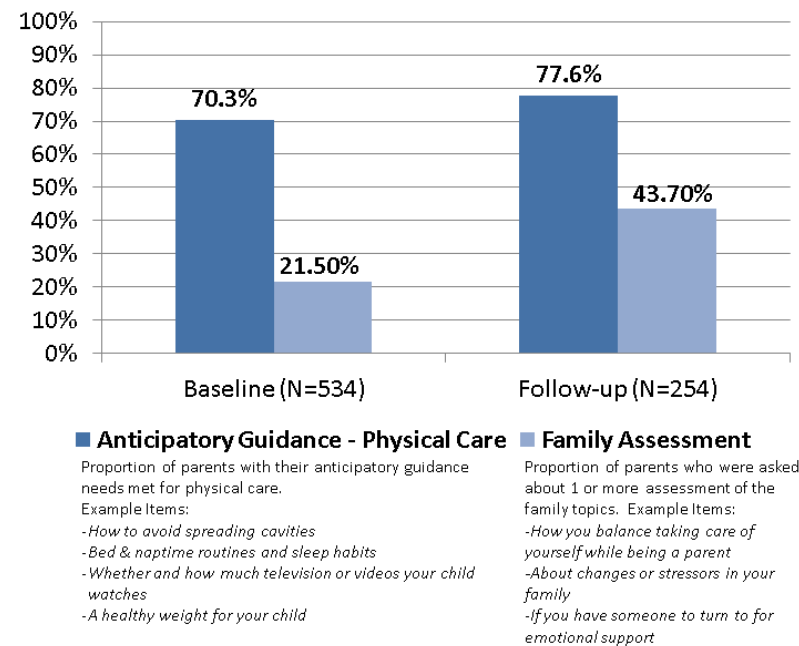




# Development, Feasibility, Results (2)

- Initial testing documented improvements to provider office work flow, patient engagement and experience and quality of care
  - Over 92% of the 3200 parents included in the initial testing reported:
    - They would recommend the tool to other parents
    - They were comfortable with time required to complete the tool
    - Tool helped them understand goals for each well visit and prioritize topics for discussion with their child's health care providers
- The WVP was recognized in the Health 2.0/Academy Health 2012 Relevant Evidence to Advance Care and Health competition

Quality of Care Evaluation Findings



**Note.** Results are statistically significant at the alpha = .05 level, based on Pearson's  $\chi^2$  test for a statistical difference between groups at baseline and follow-up (2-sided).



**Engage**

**Educate**

**Improve**

# SLIDES IN CASE DEMONSTRATION VIDEO DOES NOT WORK

<http://youtu.be/eG-fFjfyqnY>

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# Flow and Content

- A strengths and observations based approach as well as addressing any issues parents want to discuss right at the start of the tool
- Important family changes and health information



## Step 1: Answer a Questionnaire

### General Questions about You and Your Child

1. Share one thing that your child is able to do that you are excited about:

2. Are there any specific **concerns** you would want to discuss at your child's upcoming well-visit?

Yes  No

Please Describe:

You must select "Yes" to enter text

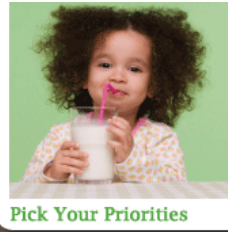
3. Have there been any **MAJOR** changes in your family since your child's last well-visit? Check all that apply and describe.

- None
- Move
- Job change
- Separation
- Divorce
- Death in the Family
- Other, please describe:

You must select "Other" to enter text



# Step 1: Child and Family Information



- Child health and functioning (e.g. feeding, immunizations etc.)
- Assessment of a prior developmental screening questionnaire being filled out by parent

## Step 1: Answer a Questionnaire Continued...

### Specific Questions about Your Child

The next questions are general health questions about your child.

1. Is your child being breastfed or fed breast milk?

Yes  No

1a. If breastfeeding, do you give your child Vitamin D?

Yes  No

	Yes	No
2. Has your child been on any new medications since the last visit? List: <input type="text" value="You must select 'Yes' to enter text"/>	<input type="radio"/>	<input type="radio"/>
3. Has your child ever had a bad reaction to a vaccine? (temp > 104, inconsolable crying > 3hrs)	<input type="radio"/>	<input type="radio"/>
4. Do your child's eyes appear unusual or seem to cross, drift or be lazy?	<input type="radio"/>	<input type="radio"/>
5. Have you started weaning your child from the bottle?	<input type="radio"/>	<input type="radio"/>
6. Do you give your child any vitamins or herbal supplements?	<input type="radio"/>	<input type="radio"/>
7. Does your child live with both parents in the same home?	<input type="radio"/>	<input type="radio"/>
8. Do you have a dentist for your child?	<input type="radio"/>	<input type="radio"/>

9. In the last 12 months, did your child's doctors or other health providers have you fill out a questionnaire about **specific concerns or observations** you may have about your child's development, communication or social behaviors?

Yes  No

9a. Did this questionnaire ask about your **concerns or observations** about how your child **talks or makes speech sounds**?

Yes  No

9b. Did this questionnaire ask about your **concerns or observations** about how your child **interacts with you and others**?



## Your Growing and Developing Child

Please indicate whether your child is able to do the following tasks right now. ([Why does my health care provider ask about this?](#))

	Yes	No	Unsure
1. Will your child pull to stand?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Does your child stand alone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Will your child bang 2 objects held in hands?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Will your child put an object (block, Cheerio, etc) in a cup or other container?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Does your child play pat-a-cake OR other games where he/she imitates your movements?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. When your child wants something does he/she tell you by pointing to it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Does your child wave bye-bye?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Does your child imitate household activities (for example, dusting)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Does your child babble with inflections of normal speech?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Does your child imitate vocalizations and sounds?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Does your child speak at least 1 word (other than mama and dada? )(a word is a sound that babies say to mean something)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Specific Questions about You, Your Family and Your Home

The next questions help your child's health care provider understand your family better in order to give the best care possible. Just like all the questions in this online tool, they are optional to answer. Your answers will be kept confidential.

	Yes	No
12. Have any of your child's relatives developed new medical problems since the last visit?	<input type="radio"/>	<input type="radio"/>
13. Does your child's primary water source contain fluoride? <a href="#">Click here to check if unsure</a>	<input type="radio"/>	<input type="radio"/>
14. Do any adults who are around your child smoke (including inside or outside the house)?	<input type="radio"/>	<input type="radio"/>

15. How many times in the last 2 weeks have you gone out socially or spent time doing hobbies, self-care or spare-time activities you enjoy?

None  1-2  3-5  > 5

16. In general, how well do you feel you are coping with the day to day demands of parenthood?

Very Well  Well  Somewhat Well  Not Very Well  Not Well at All

- Age-specific developmental surveillance
- Important family psychosocial assessment items



- Identification of children with special health care needs

## Well-Visit Planner - Step 1: Answer a Questionnaire

### Step 1



### Step 2



Pick Your Priorities

### Step 3



Get Your Visit Guide

### Step 1: Answer a Questionnaire Continued...

#### Some Last Questions About Your Child

The following questions are about any kind of health problems, concerns, or conditions that may affect your child's behavior, learning, growth or physical development.

	Yes	No
1. Does your child currently need or use <u>medicine prescribed by a doctor</u> (other than vitamins)?	<input type="radio"/>	<input type="radio"/>
1a. Is this because of ANY medical, behavioral or other health condition?	<input checked="" type="radio"/>	<input type="radio"/>
1b. Is this a condition that has lasted or is expected to last for at least 12 months?	<input type="radio"/>	<input type="radio"/>
2. Does your child need or use more <u>medical care, mental health or educational services</u> than is usual for most children of the same age?	<input type="radio"/>	<input type="radio"/>
3. Is your child <u>limited or prevented</u> in any way in his or her ability to do the things most children of the same age can do?	<input type="radio"/>	<input type="radio"/>
4. Does your child need or get <u>special therapy</u> , such as physical, occupational or speech therapy?	<input type="radio"/>	<input type="radio"/>
5. Does your child have any kind of emotional, developmental or behavioral problem for which he or she needs or gets <u>treatment or counseling</u> ?	<input type="radio"/>	<input type="radio"/>





# Flow and Content

## Basic demographic items

### Some Last Questions About You and Your Family

1. How are you related to the child for whom you are completing this tool?

- Mother
- Father
- Grandmother or Grandfather
- Brother or Sister
- Foster Mother
- Foster Father
- Guardian
- Nanny
- Other

2. In what state do you live?

3. What kind of insurance do you currently have (check all that apply)?

- Private or Employment-based (Such as Blue Cross Blue Shield, Kaiser, Aetna, etc.)
- Public - Medicaid or Child Health Insurance Program (CHIP)
- Medicare
- Military
- Indian Health Services
- None
- Other





# Step 2: Pick Your Priorities

## Step 2: Pick Your Priorities

Check up to 5 topics you want to discuss with your health care provider. Fewer than 5 is okay!

To learn more click on the [i](#) icon to get education & tips from pediatric health care experts about each topic.

### Your child and family:

- Behaviors to expect in the next few months [i](#)
- Ways to guide and discipline your child [i](#)
- Why having consistent guidance and discipline strategies between parents, family members and care providers are important [i](#)
- Time-outs [i](#)
- How you balance taking care of yourself while being a parent [i](#)
- How to make time for other relationships [i](#)

### Establishing routines for your child:

- Importance of your family eating meals together [i](#)
- Importance of outside family activities that involve playing, walking, running or playing chase [i](#)
- Television – why the experts say no TV [i](#)
- Ways to read to your child that promotes his language development [i](#)
- How your child responds to new people or caregivers [i](#)
- Importance of your child pointing to let you know what he wants [i](#)
- Sleep routines and sleep habits [i](#)

### Your child's feeding and appetite changes:

- Feeding time strategies, such as teaching your child to use a cup and to feed himself [i](#)
- Nutritious foods and how much/what kinds of food your child eats [i](#)
- Giving your child choices between 2 options [i](#)
- How your child's appetite might change from day to day [i](#)

### Your child's dental health:

- Your child's first check up with a dentist [i](#)
- Brushing your child's teeth, not letting them do it themselves [i](#)
- Finger sucking, pacifiers or use of bottles and their impact on your child's teeth [i](#)



# Step 3: The Visit Guide



After completing the tool, a customized visit guide is generated for use by both parents and their child's health care provider(s). The entire online time for most parents is roughly 10 minutes



## WVP VISIT GUIDE: WHAT TO DISCUSS AT JESSICA'S 12-MONTH WELL-VISIT

**Parents:** Bring this Full Summary Visit Guide to your child's well-visit to help you remember what topics to bring up with your child's health care provider. →

***So you don't forget, put this in your purse, wallet or diaper bag now!***



**Note to Dr. Smith:** For more information on the Well-Visit Planner, please see the end of this Visit Guide or visit [www.wellvisitplanner.org/about](http://www.wellvisitplanner.org/about).

1

### **Your Priorities to Discuss During Jessica's Visit**

***Based on the priorities you selected, you may want to talk to your child's doctor about:***

#### **Time-outs**

Questions about **time-outs** that you could ask:

- How long is too long to be in a time-out?
- What if my child will not stay in his time-out?
- My toddler likes to be in his playpen – will he think this is a reward?
- I don't think time-outs are right. What are other strategies that we can use that help my child get a "break" from the unwanted behavior?



**Engage**

**Educate**

**Improve**

# IMPLEMENTING THE WELL VISIT PLANNER TOOLS

---

# GET STARTED WITH THE ORIENTATION KIT AND USERS SIGN UP FORM



## Getting Started with The Well-Visit Planner™

Engaging Parents as Partners to Customize and Improve  
Well Child Care for Young Children and their Families  
[www.WellVisitPlanner.org](http://www.WellVisitPlanner.org)

### Orientation Kit and User Sign Up Form

*Complete the form to learn more and get started!*



#### What's in this Packet?

Background.....	1
What is it?.....	2
How does it work?.....	3
Which version of the tool is right for you?.....	4
Implementation: What does it take?.....	5
Site-Specific Options.....	6
Health Care Provider Interest Form.....	7



**Engage**



**Educate**



**Improve**

# SELECTING THE RIGHT TOOL(S)



# Two Primary Options

1) Free public use website...start now! 2) Site-specific

## Public Use Site Option: Key Features

- Free access to the Well Visit Planner site
- No site branding (logo) or tailored content
- Parent delivers their Visit Guide/Data to you (via secure e-mail or at time of visit)
- Parent reported data fields not included in EHR

Yes

The public use WVP is FREE to use. There may be small costs for printing parent waiting/visit room posters, invites and education materials.

If the **Public Use WVP** is the right version for you and your practice, continue reading and learn more about the WVP or complete the User Sign-Up Form to request the Implementation Toolkit.

User Sign-Up Form is Here and on the Last Page:  
[www.wellvisitplanner.org/Providers/GettingStarted.aspx](http://www.wellvisitplanner.org/Providers/GettingStarted.aspx)

## Site Specific Options: Key Features

- Site specific URL, logo, some tailored content
- Integration of parent responses into child's electronic health record (EHR)
- Use reports or datasets containing parent responses

Yes

The costs for the site-specific WVP vary & are minimal as possible! Check it out!

If the **Site-Specific WVP** is the right version for you and your practice, continue reading to learn more about the WVP and complete the User Sign Up form to begin working with the CAHMI to define and develop your site specific WVP.

User Sign-Up Form is Here and on the Last Page:  
[www.wellvisitplanner.org/Providers/GettingStarted.aspx](http://www.wellvisitplanner.org/Providers/GettingStarted.aspx)





# Detailed Options

## **Public Use Website (free) as seen on [www.wellvisitplanner.org](http://www.wellvisitplanner.org)**

- Receive the Public Use Implementation Toolkit and start using the WVP today
- Supplement the Public Use WVP with the abbreviated paper-pencil version, Shared Encounter Forms (a good back up option for parents that forget to complete the WVP online)
- Spanish language version of the Public Use WVP (currently under development, projected completion summer 2013)

## **Basic Site-Specific Options**

- Unique URL (e.g. [myclinic.wellvisitplanner.org](http://myclinic.wellvisitplanner.org))
- Branding (e.g. your clinic's logo/contact information)
- Summary reports or full datasets on your patient population
- Add links to external developmental screening tools (for which you have license)
- Tailoring some of the questions asked in the tool (allowable customizations are limited)

## **Enhanced Site-Specific Options (involves close partnership due to PHI and advanced technical development)**

- Receive parent Visit Guides and responses in PDF format via secure email or fax (vs. parent delivery only)
- Integrate parent response directly into fields in your electronic health record (EHR)

## **Other Supplementary Options**


- Measure and improve quality by pairing the WVP with the **Promoting Healthy Development Survey (PHDS)**, an online parent-completed tool that yields automated quality reports with 8 nationally endorsed quality indicators from aggregated parent responses
- Use the WVP to help meet Meaningful Use requirements (still under development)
- Use the WVP for Maintenance of Certification (still under development)





# User Sign-Up Form

Available at [wellvisitplanner.org/Providers/Default.aspx](http://wellvisitplanner.org/Providers/Default.aspx)



**Well-Visit Planner™**  
a project of The Child & Adolescent Health  
Measurement Initiative

## User Sign-Up Form

Fill it out online: [www.wellvisitplanner.org/Providers/GettingStarted.aspx](http://www.wellvisitplanner.org/Providers/GettingStarted.aspx)  
Return to get your implementation toolkit and other information you need to get started! Return to: [cahmi@ohsu.edu](mailto:cahmi@ohsu.edu) or 503-494-2475

### Select the WVP Options You are Interested In Learning

Before completing this form, please be sure you are **read the short "Getting Started" toolkit** for the Well-Visit Planner™ Suite of Tools, available at <https://www.wellvisitplanner.org/Providers/GettingStarted.aspx>.

1. **Please let us know** which of the Well-Visit Planner (WVP) option(s) are of interest to your practice(s). Your responses will help us build a partnership. There are several levels of options, with varying complexity and cost. Though, as a non-profit we seek to keep all costs to a minimum. Please check all the options that apply.

**Public Use Website (free)** as seen on [www.wellvisitplanner.org](http://www.wellvisitplanner.org)

- Select this option to receive the Public Use Implementation Toolkit and start using the WVP today
- Supplement the Public Use WVP with the abbreviated paper-pencil version, Shared Encounter Forms (provides a good back up option for parents that forget to complete the WVP online)
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**Basic Site-Specific Options**

- Unique URL (e.g. [www.MyClinic.wellvisitplanner.org](http://www.MyClinic.wellvisitplanner.org))
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- Add links to external developmental screening tools (for which you have license)
- Tailoring some of the questions asked in the tool (allowable customizations are limited)

**Enhanced Site-Specific Options** (Involves close partnership with the CAHMI due to PHI handling and advanced technical development)

- Receive parent Visit Guides and responses in PDF format via secure email (vs. parent delivery only)
- Integrate parent response directly into fields in your electronic health record (EHR)

**Other Supplementary Options**

- Measure and improve quality by pairing the WVP with the Promoting Healthy Development Survey (PHDS), an online parent-completed tool that yields automated quality reports with 8 nationally endorsed quality indicators from aggregated parent responses
- Use the WVP to help meet Meaningful Use requirements (still under development, but let us know your interest)
- Use the WVP for Maintenance of Certification (still under development, but let us know your interest)



# Practice-Based Implementation Toolkit



## Implementation Toolkit

*for Pediatric Primary Care Practices and Alliances*

### Public Use Website

[www.WellVisitPlanner.org](http://www.WellVisitPlanner.org)



The Well-Visit Planner was developed and tested by  
the Child & Adolescent Health Measurement Initiative\*  
[cahmi@ohsu.edu](mailto:cahmi@ohsu.edu)

Version 1.1  
Updated February, 4 2013

- Overview of the tool
- Engaging the practice team
  - Example Focus Groups, staff and provider surveys, meeting agendas and presentation materials
  - Time Tables and Check Lists
  - Office Flow Diagrams and Analysis
  - Handling the cultural shift represented by patient engagement; sample scripts to invite and engage parents
- Resources
  - Flyers, Post Cards and Communication Materials
  - Presentations, videos, etc.



# Requirements for each WVP implementation option

<u>Requirements</u>	Implementation Options					
	Public Use Site WVP	Unique Clinic URL for WVP	Site-specific URL, Branding	Site specific URL with customized content	EHR Integration of Visit Guides (PDF)	Full EHR Integration Module
Engage Staff (Develop culture of engagement, momentum and office champions)	X	X	X	X	X	X
Engage patients (Develop posters and engagement materials)	X	X	X	X	X	X
Office Flow (Work to include engagement into flow of well-child visits)	X	X	X	X	X	X
Develop EHR system for inclusion of PDF					X	
Develop EHR system for manual import of HL7 file						X
Develop EHR forms for full automated integration of data into visit						X



# Office Flow

## Before Visit

### Clinic Scheduler

- \* Children with upcoming well-child care visits who are eligible for parents to participate in Well Visit planner are identified
- \* Five days before well-child visit, parent is reminded about visit and told to go to website. This can be done along with a practice's existing process, i.e. telephone and/or email appointment reminder.

### Parent

- \*Some (not all) parents complete tool AT HOME
- \*Parent prints Visit Guide at home
- \*Parent can visit WVP educational material website anytime

## During Visit

### Front Desk Check In

- \* Aware of the project and able to answer questions

### MA/RN

- \* Asks eligible/invited parents if they filled out the WVP
- \* Ask parent for Visit Guide to make a photocopy for health care provider to use during visit and for the patient's record
- \* Review Visit Guide and follow up on any items appropriate for MA/RN to discuss with parent, make entries/notes in chart or electronic health record

### Provider

- \* Review Visit Guide and MA/RN notes, if applicable
- \* Address parent's concerns, priorities and health screening flags
- \* Guide parent to parent education materials on website

## After Visit

### Parent

- \* Can go back to website for the **educational materials** and resources



# The Cultural Shift

- Families may not be accustomed to being engaged, particularly *prior* to a visit
- A friendly office environment with posters about the desire and need for families to engage— “We need your participation!”
- Encouragement that doing the WVP ahead of time is best for the provider and the family, and the child will benefit



## PARENTS

**We'd like to partner with you!**

If you have a child 3 years old or younger, we will be asking you to complete an **online tool** prior to his or her well-visits. This will help us focus on topics important to you and give your child the best care possible.

Here is what parents of children 3 years old or younger can expect for well-visits:

**Before the visit - at home, online tool**

We will ask you to go to [www.WellVisitPlanner.org](http://www.WellVisitPlanner.org) to:

- Answer questions about topics or concerns you want addressed at the visit and general child and family health issues.
- Read educational information about promoting your child's health.
- Receive a personalized Visit Guide summarizing your priorities to be discussed with your provider.

➤

**During the visit - we use your responses**

- Our health care providers will use your responses to focus the visit on your child and the information you would like to receive.
- Completing the online tool before the visit will give us more time during the visit to discuss your concerns and your child's strengths!

➤

**After the visit - get information**

- You can return to the *Well-Visit Planner* online tool at [www.WellVisitPlanner.org](http://www.WellVisitPlanner.org) anytime to review the educational information about topics in which you are interested for your child.
- We will let you know when to return to the online tool to prepare for your child's next well-visit.

www.WellVisitPlanner.org

**Thank you for partnering with us!**

# Putting it All Together: An Online Package for pediatrician Maintenance of Certification

## User: Provider/Practice

- Provider Information
- Selection of Tools (PHDS, WVP, SEF, Education)
- Customization of Tools (e.g. components of tools, reporting preferences)

Registration & Customization Portal

## User: Provider/Practice

- Summary of customization preferences
- Implementation guidance (including parent engagement materials)
- Reporting Management
- Background Information

Quality Measurement Toolkit

Parent Engagement & Education Toolkit

## User: Provider/Practice

- Suite of Parent Websites
- Provider/Practice-Specific URL

OnlinePHDS

WVP

SEF

Education Website





# Working Directly with Parents

- Building key partnerships
  - Family Voices, AAP, Text4Baby, March of Dimes, etc.
- Social Media and Public Information for Parents



*“As a busy mom it’s hard to find time to do things... having a smart phone app to be able to do it.. They [the parent] could do [the WVP] at their kid’s soccer game.”*  
 – Focus Group Participant

*“Patients are going to love [the WVP]. The new families that are part of this generation.”—Practice Staff Member*





# Future Developments

## **New topic/content modules & versions**

- Fill out for other ages
- Adolescent version
- Children with Special Health Care Needs (CSHCN)

## **Continue to scale**

- Expand capacity to work with many practice sites

## **Continue to evaluate and renew content**

- Continue building research partnership to ensure on-going assessment and improvement of tools
- Field development

## **Ongoing research and evaluation!!!**



# The Translation Transition

- Disseminating and supporting web-based tools require the capacity to:
  - educate and support tailored implementation and
  - maintain, routinely update and improve to tools
  - support alternative implementation models (e.g. practices; early head start; ACO/CCOs, Family Voices)
  - develop new collaborations to ensure consistency and optimize value
  - address cultural shift entailed
  - specify and implement allowable customizations
  - address inevitable needs for tailored content modules
- Integration of patient data into the EMR is logistically feasible, but scaling such technologies involves specifying and addressing many legal, logistical and technical requirements of alternative EMR systems



# Why Early Childhood and Why Now?

## Critical Developmental Period

- ~12 Well-Child Visits in first 3 years
- Key for preventive/developmental care delivery
- Long-term impact: demonstrated implications for health, well-being, school and life success

## Gaps Persist Though Guidelines Exist

- <10% of young children meet minimum criteria for receiving quality care
- Sig. variation in quality of care by child and family characteristics, provider, office, health system
- Variation exists both within and across providers
- No-one is achieving high-quality all of the time

## Health Care Reform and Transformation

- ACA and CHIPRA
- Meaningful Use
- PC Outcomes Research Institute
- US Secretary of Health's National Quality Strategy
- PC Medical Home initiative
- Institute of Medicine "Best Care at Low Costs"
- The Joint Commission's High Reliability Organizations model
- Maintenance of Certification

## Tailored Communication & Partnering w/ Patients is Essential

- Improving care means :
  - improving communication and partnerships with parents and
  - meeting the unique priorities and needs of each child and family

## Meet Goals with Greater Ease and Efficiency

- The easy to use Well Visit Planner tools help providers efficiently measure and engage parents in improving care



# Thank You to Our Many Partners

**Thank you to all of the staff, advisors and family involvement in the development of the WVP website**

- The staff at the Child and Adolescent Health Measurement Initiative
- The entire staff at The Children's Clinic in Tigard, Oregon
- The federal Maternal and Child Health Bureau
- UCLA and FQHC partners
- Boston Children's Hospital/PPCO
- The Children's Health Alliance
- OHSU General Pediatrics

## Parent Advisors

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**Edward L. Schor**

**Judy Shaw**

**Sara Slovin**



The WVP was developed and tested by the Child and Adolescent Health Measurement Initiative (CAHMI) for use in pediatric practices over four years and through a grant from the federal Maternal and Child Health Bureau (R40 MC08959). Its continued development and implementation is supported by the CAHMI, volunteer advisors and through support from HRSA/MCHB through Cooperative Agreement U59-MC06890.

**Engaging Parents as  
Improvement  
Partners, April,**



# Thank You!

- **Getting materials:** Slides, video and other informational materials are posted at [wellvisitplanner.org](http://wellvisitplanner.org)

## Contact Information:

### **Christina Bethell**

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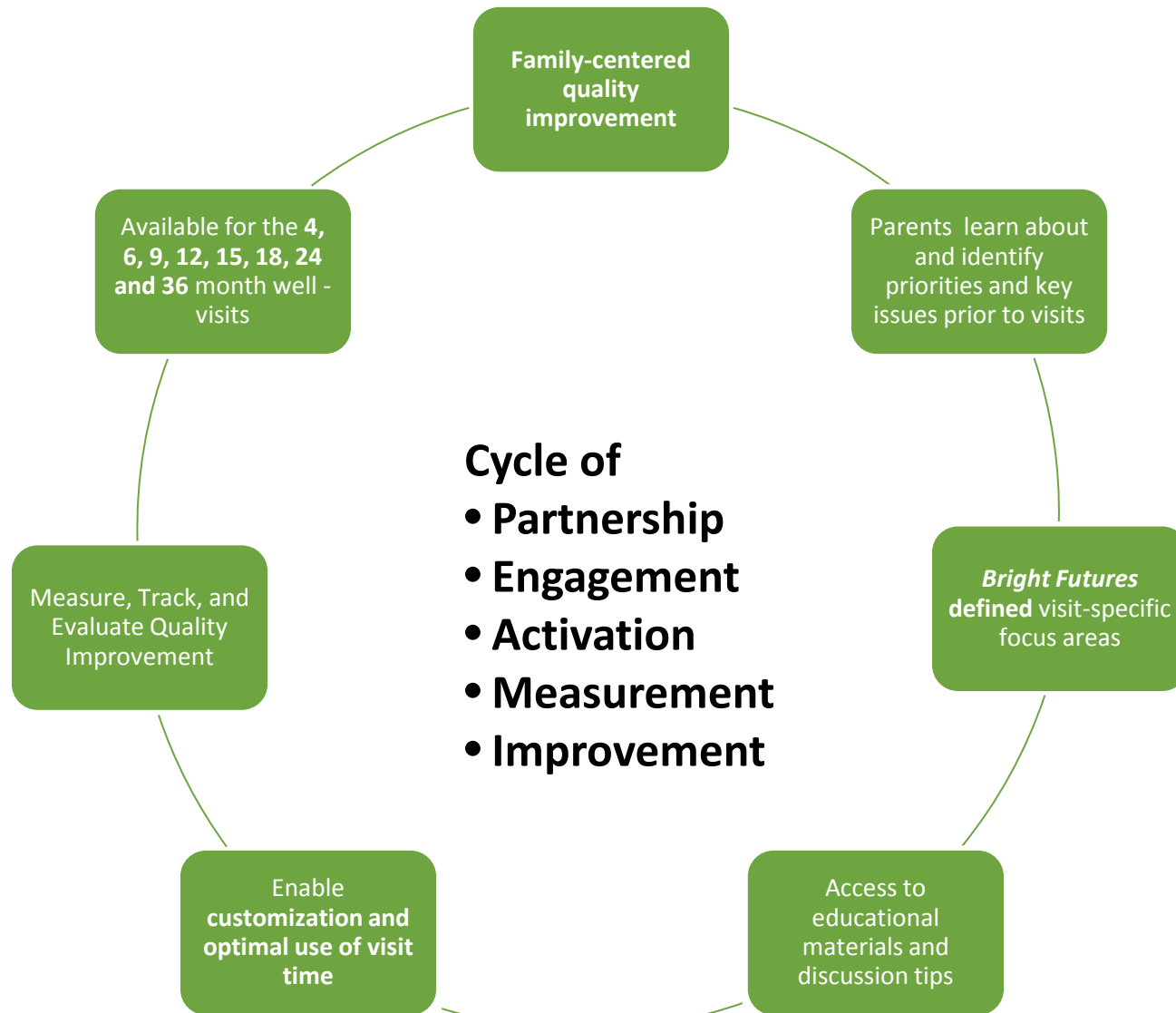
# QUESTIONS?

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# EXTRA SLIDES

---

# Summary





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# ADDITIONAL INFORMATION ON IMPLEMENTATION

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# Secure EHR Integration & Data Transfer

- Full Integration (PHI)
- E-mail/Fax (without PHI)

Original Nurse Intake Form

Intake Form After Integration with Well-Visit Planner

- ♦ Denotes new fields populated by the WVP
- ◊ Denotes fields populated by the WVP



# Aggregated Data Reports and Full Data Sets

-CONFIDENTIAL-

## Example Provider Report: Summary of Improvement Opportunities

Parents indicated many areas where your office is doing very well. They also noted areas where there are opportunities for improvement. Listed below is a selection of key findings and "change ideas" that can guide you in using these findings to improve the care you provide. The last page of this report provides a list of improvement resources for each of these components of well-child care.

### Meeting Parents' Informational Needs

- **100.0%** of parents responded at least once "No, but I wish we had talked about that" OR "Yes, but my questions were not answered" to the items asking about recommended anticipatory guidance and parental education topics.
- Page 3 of this report lists the specific topics asked about in the PHDS. The **last percentage** shown for each topic (in blue font) is the percent of parents who had unmet informational needs on that topic. **Review page 3 and find the topics highlighted in blue. These are the areas you should focus your improvement efforts!**

#### Improvement ideas you can use:

- ✓ Create visit-specific prompts that remind you to ask about the topics identified as needing improvement on Page 3.
- ✓ Get topic-specific parent education hand-out materials on the topic that parents indicated a need for more information.
- ✓ Get topic-specific posters and put them in your office.
- ✓ Consider having the parent complete surveys or questionnaires prior to the visit about these topics in order to understand their informational needs and child and family risk factors.

### Asking About and Addressing Parental Concerns

- **100.0%** of children had parents who reported one or more concerns about their child's learning, development or behavior.
  - Of this group, **21.4%** were asked about their concerns and **75.0%** received information to address their concerns.
- **32.1%** of children three and under were screened using a standardized, parent-completed tool in the last year.
- **92.3%** of children identified at risk for developmental/behavioral delays received some form of follow-up care.

#### Improvement ideas you can use:

- ✓ Research has shown that asking parents a general question such as, "Do you have any concerns?" **does not** elicit reliable parent responses to indicate a child's risk for delays.
- ✓ To standardize this activity in your office, add visit-specific prompts that remind you to ask parents at every visit if they have concerns about their child's learning, development or behavior.
- ✓ Consider having the parent complete a standardized developmental screening tool in the waiting room or have your office staff help parents complete the tool before they see you. Current tools recommended by the American Academy of Pediatrics include the Parents Evaluation of Developmental Status (PEDS) & the Ages and Stages Questionnaire (ASQ).

### Assessing the Parent for Risks to the Child's Healthy Development

- **23.1%** of children had parents who reported symptoms of depression.

#### Improvement ideas you can use: