

Ideas for Closing Performance Gaps

Key Activity: Elicit and Address Patient/Family Concerns

Rationale: Bright Futures believes that for a health supervision visit to be successful, the needs and agenda of the family must be addressed. The first priority of any Bright Futures health supervision visit is to attend to the concerns of the parent and/or the patient.

| Potential Barriers | Suggested Ideas for Change | Still Not Seeing Results? |
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| <p>Gap: Practice does not actively or effectively elicit and document that patient/family concerns were addressed and resources were provided during health supervision visits.</p> | | |
| <p>The practitioner does not have systematic process for eliciting family strengths and needs.</p> | <ol style="list-style-type: none"> 1. Pilot the use of Bright Futures documentation forms found in the Bright Futures Tool and Resource Kit on a limited basis. <ul style="list-style-type: none"> • Adjust the use so the forms fit in the needs of your practice and patients' needs. • Ask teens and families on the Family Advisory Committees to review the forms. Discuss ways to pilot/implement the forms in the office setting. 2. Use other standardized questionnaires such as mental health surveys, screens for family substance abuse, social isolation, family hunger, and family mental health issues to identify needs. 3. Discuss with your staff the challenge of balancing recommended anticipatory guidance and preventive services with addressing family strengths and needs. Include a discussion of confidentiality policies and how you will address the needs of teens and parents/caregivers. 4. Consider reviewing and/or developing a brief template that outlines questions to ask patients/parents about their concerns. <ul style="list-style-type: none"> • Investigate the Bright Futures Tool and Resource Kit for questions that can be incorporated into your EMR or patient portal. 5. Focus on a particular group of patients as you adopt new strategies for eliciting parental concerns. <ul style="list-style-type: none"> • Start with a small, focused population when testing new approaches, such as new patients, because parents may have similar concerns. • Identify a key clinician with an interest in well-youth improvement and ask them to pilot a change on a limited number of patients before making the change officewide. | <p>Try suggested strategies on a small scale first, with a single practitioner and a limited number of patients.</p> <p>Recruit teens and families on Family Advisory Committees to review forms, help design policy, and plan implementation.</p> <p>Survey patient satisfaction and scheduler satisfaction of a new role for this staff member.</p> <p>Provide memory ticklers and signs next to the scale or nurse's station, or drop-down boxes in the computer to remind nurse or MA to get forms completed.</p> |

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| | <ul style="list-style-type: none"> • Work with a quality improvement coach to map the office workflow around youth visits including scheduling appointments and delivering care. 6. Ask the scheduler to ask if a parent has concerns at the time an appointment is made and note concerns in the patient's medical record. <ul style="list-style-type: none"> • Pilot the process first on a few patients before taking it officewide. • After a successful pilot, schedule training for all office staff to review proper use of the new templates. 7. Pilot a process in which the nurse or medical assistant (MA) places the completed forms with the chart, or, if using an electronic health record (EHR), ask the MA to optically scan the completed questionnaire or enter the information into the EHR. <ul style="list-style-type: none"> • It is also possible to add a Family/Patient Concerns prompt to the EHR that can be clicked during the examination. 8. Review and discuss with the youth/adolescent and/or parent/caregiver what she or he is doing well and any concerns identified by office staff or through the questionnaire. 9. Customize your EHR to include a Family/Patient Concerns prompt that provides space to type or write in information regarding needs of the parent/caregiver and youth/teen. The prompt may even link to the questionnaire used to elicit information, or the questionnaire may be optically scanned into the EHR. 10. Determine topics of concern you will address during the visit and topics for which you will refer to outside resources. 11. Consider what new resources or referrals your practice may need. 12. Identify new community resources or referrals for issues that are best handled outside the office. <ul style="list-style-type: none"> • Gathering data about the most common concerns of your patients may help you decide which referrals and community resources are the most likely to be needed and used by your patients. (Refer to the Bright Futures Community Resources Tip Sheet.) • Ask youth/adolescents about possible community resources with which they are familiar and using. • Identify options for using social media to educate teens. | <p>Consider where the prompt is placed in the chart and if it is noticed by the intended user.</p> <p>Be flexible, especially in situations in which you cannot identify satisfactory outside resources. Your empathy and hope for patients may be better than no care at all.</p> <p>For those families with significant concerns or who appear to have substantial adverse circumstances interfering with their ability to provide optimal development, consider partnering with other resources for family support.</p> <p>Consider hosting meet-and-greet sessions with outside community resources to establish a better understanding of services and a personal contact.</p> <p>Schedule training for all office staff to review proper use of the new templates.</p> |

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| | <ul style="list-style-type: none"> Keep a ready resource of commonly used referral resources in the community. <p>13. Ask youth/adolescents about possible social media options for education.</p> <p>14. As success builds with your pilot approaches, consider taking the improvement officewide with appropriate preparation.</p> | |
| Health care professional agenda and patient/family agenda differ. | <ol style="list-style-type: none"> Rely on your clinical judgment to balance the needs of the family with your recommendations and goals for the visit. Develop a policy for office staff that outlines questions to ask patients/parents about concerns at the time an office visit is scheduled and/or during a reminder call, and note the concerns on the patient chart. Incorporate Bright Futures previsit questionnaires (both for patient and parent) into your office routine. Provide Bright Futures previsit questionnaires for the patient and family to complete in the waiting room or exam room before the visit. | <p>Schedule a brainstorming session with office staff to generate suggestions that address how:</p> <ul style="list-style-type: none"> To change the culture of the practice with the team. To rebalance the duties of the team so each member is utilized effectively Other practices handle parental concerns. To Implement Bright Futures suggestions. |
| Family concerns from previous visits were not documented in the chart or EHR. | <ol style="list-style-type: none"> Rely on your clinical judgment to balance the needs of the family with your recommendations and goals for the visit. Develop a policy for office staff that outlines questions to ask patients/parents about concerns at the time an office visit is scheduled and/or during a reminder call, and note the concerns on the patient chart. Incorporate Bright Futures previsit questionnaires into your office routine. Provide Bright Futures previsit questionnaires for the family to complete in the waiting room or exam room before the visit. | <p>Get feedback from families formally or informally as to ways they think their concerns could be more effectively addressed. Parent partners on the office QI team can be especially valuable in this situation.</p> |
| Follow-up visits and/or counseling may not be covered without the correct International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) code. | <ol style="list-style-type: none"> Become familiar with coding requirements for counseling during health supervision visits. Ensure that appropriate documentation is made for billing codes. Communicate coding requirements to the office staff and billing group. Develop a practicewide policy that outlines how to code correctly for counseling during a health supervision visit. | <p>Identify a specific clinician in the practice with an interest in coding who can work with office staff in optimizing code results.</p> |