

Well Visit Planner and Promoting Healthy Development Survey:

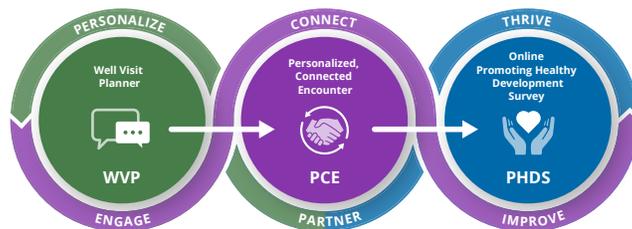
Summary of content, reports, implementation and alignment with screening and quality of care standards



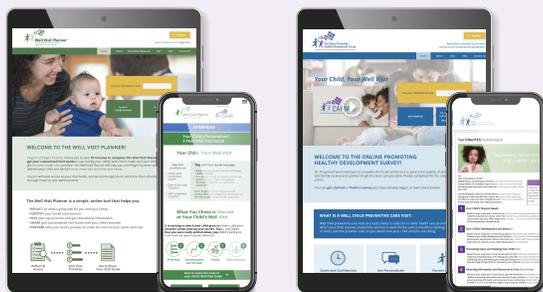
CAHMI's Early Childhood Cycle of Engagement

A project of the Child & Adolescent Health Measurement Initiative

The CAHMI's Early Childhood Cycle of Engagement *Well Visit Planner (WVP)* and *Promoting Healthy Development Survey (PHDS)* family completed tools include valid content aligned with national standards of care. Actionable reports for families and child health professionals are provided and help you improve performance measures and meet requirements for provision of preventive care for children.



Family Tools and Reports



Provider and Care Team Dashboards and Reports



Topics Assessed Using the Well Visit Planner (WVP)

The Well Visit Planner® is a brief family-completed, pre-visit planning tool anchored to *Bright Futures* guidelines for children ages 4 months to 72 months (other ages coming soon!)

CORE CONTENT

- Tailored for 11 recommended visits based on *Bright Futures* guidelines (ages 4 months to 72 months)
- English and Spanish
- Mobile optimized
- Not all content applies for all ages

- Child and parent/caregiver **strengths** (what is going well!)
- Developmental **surveillance and standardized developmental screening** using the Survey of Well-Being of Young Children (SWYC)
- **Autism spectrum disorder screening** using the Modified Checklist for Autism in Toddlers, Revised (**M-CHAT-R™**) for 18- and 24-month visits
- Caregiver concerns about speaking, vision, hearing
- Other caregiver concerns about development (open ended response)
- Caregiver **depression** using the Patient Health Questionnaire-2 (**PHQ-2**) or Edinburgh Postnatal Depression Scale (**EPDS**)

- Family **psychosocial issues** (e.g., meeting basic needs, alcohol and substance use, smoking, emotional support, coping, experiencing racism, etc.)
- **Intimate Partner Violence** using the Women Abuse Screening Tool-Short (**WAST-Short**)
- **Anticipatory guidance and parental education** prioritization checklist (can pick up to 5 across all recommended; average selected is 3)
- **Other child health** and updates (age-specific; e.g., nutrition, medications, vitamins, having a special health care need, etc.)
- **Other family health** history and updates (heart, stroke, blood pressure, new problems, recent changes or stressors)
- **Other environmental** assessments (e.g., living situation, lead, fluoride)

OPTIONAL ASSESSMENTS AND TOPICS

- **Child Flourishing Index (CFI)**
- **Family Resilience Index (FRI)**
- Parent-Child **Emotional Connection** Items (derived from the Welch Emotional Connection Screen (WECS))
- **Protective Family Routines and Habits (PFRH)**
- **Pediatric ACEs and Related Life-events Screener (PEARLS)**

- Additional social determinants of health topics
- **Other social-emotional screening** (Baby Pediatric Symptom Checklist (BPSC) and Preschool Pediatric Symptom Checklist (PPSC))
- Impact of COVID-19

Additional assessments will be added as requested by users. Other assessments can be added by you during customization of your WVP.

Aspects of Quality Assessed Using the Promoting Healthy Development Survey

The Online PHDS is a valid family-reported, post-visit assessment of quality of care for families of children 3 months to 6 years.

QUALITY OF CARE MEASURES

- **Anticipatory guidance and parental education** needs are met
- Receives recommended developmental **surveillance** and standardized **developmental screening** occurs
- **Follow up** occurs for children at risk for developmental problems (using PEDS)
- Basic **psychosocial screening** occurs
- Surveillance of caregiver **mental health** conducted
- **Family concerns** about child development are addressed
- Surveillance about problems/issues in the **community** occurs and resources provided
- **Core medical home criteria are met** (e.g., personal doctor or nurse, access to and coordination of care, family centered care)
Quality measures are stratified by child/family demographics, caregiver mental health, child developmental status and having a special health care need (CSHSC Screener).

OPTIONAL CONTENT

- Caregiver interest in telemedicine and concerns/barriers to telemedicine
- Impact of COVID-19 on child's well visits and daily life
- Feedback on the use of the Well Visit Planner (if using this tool)
Additional assessments will be added as we discern their need by EC_COE users.

Implementation Support

Resources to support EC_COE implementation are provided and anchored to best-practice frameworks and strategies.

Resources for the Personalized, Connected Encounter (PCE) support relationship-centered care recommendations from the American Academy of Pediatrics.

EXPLORE

Learn, envision, and customize



PLAN

Team up, train up, and test up!



IMPLEMENT

Launch, learn, adapt, and improve



SUSTAIN

Evaluate, integrate, and celebrate



Alignment with Professional Standards and Requirements

The CAHMI's EC_COE model and tools are carefully aligned to help you meet your goals, standards, and performance requirements.



Meet Standards of Care: The WVP and PHDS align with national *Bright Futures* Guidelines implementation standards set forth by the American Academy of Pediatrics and other standards set forth for home visiting (MIECHV), early care/Head Start, and Child Welfare. [Click here to learn more.](#)



Complete Required Screenings Using Valid Screening Tools: All screening tools and items included in the WVP draw on validated measurement and reporting methods tested with families and providers. The WVP is aligned with *Bright Futures* criteria for standardized development surveillance, developmental screening, maternal depression screening, and other screening recommendations. [Click here to learn more.](#)



Improve Quality of Care: The WVP and PHDS are designed to foster improvements in quality as measured by the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS) measures and the Medicaid Core Measurement Set. The WVP and PHDS align with 7 of the 19 HEDIS measures for children, adolescents, and maternal health, 2 of the 4 HEDIS measures related to preventive care for children, and 5 out of 8 Medicaid Core Set "Primary Care Access and Preventive Care" measures (62%).



Grow and Earn Continuing Education/Recertification Credits: Both the PHDS and WVP were designed to support your continuing education and the training of new child health professionals. They also align with the American Board of Pediatrics' Maintenance of Certification requirements to engage patients in quality improvement activities. [Click here to learn more.](#)

To learn more about the Early Childhood Cycle of Engagement, Well Visit Planner, and Online Promoting Healthy Development Survey, please visit implement.cycleofengagement.org.

Beginning in 2024, State Medicaid agency reporting of the Child Core Set will become mandatory as a result of the Bipartisan Budget Act of 2018. The Well Visit Planner and Promoting Healthy Development Survey can help you meet these standards.

[Click here to learn more.](#)



"If you want to effectively engage families, efficiently provide comprehensive care, and meet standards you need the Well Visit Planner."

- Pediatric Provider

