The Early Childhood Cycle of Engagement (EC_COE) builds the capacity of families, communities, and pediatric primary care teams to partner in the joyful work of promoting the well-being of all children. The EC_COE's online, guideline-based and family-driven Well Visit Planner (WVP) and post visit Promoting Healthy Development Survey (PHDS) quality assessment give voice to families and help child and family care teams:

1. **Integrate and streamline** family-reported screening and priority setting
2. **Prepare for and optimize time** during encounters to address family agenda
3. **Focus on building strengths** and coordinating resources and supports
4. **Continuously improve** in partnership with families and communities
5. **Track population-level** needs, priorities, and quality of care

### Creating an Integrated Cycle of Family Engagement Before, During, and After Well Child Care Encounters

#### Engage

**Personalize Care Using the Family Driven Well Visit Planner (WVP)**

**What is it?**

- **Brief**: A 10-minute web-based tool where families share strengths, complete developmental, psychosocial screens, pick priorities for support/education, note concerns, and learn. Mobile optimized.
- **Transparent & Secure**: Autogenerated Well Visit Guides are shared with families and providers to plan for and personalize encounters. Providers also receive Clinical Summaries with more detailed results.
- **Supported**: Family-owned accounts store Well Visit Guides and support use for multiple children. Customized provider accounts provide access to Visit Guides and Clinical Summaries and support implementation.

**Optimize Time Spent During Encounters**

- **Focus**: Use the at-a-glance Well Visit Guide and Clinical Summary to prepare for visits and prioritize the family agenda.
- **Your Well-Being**: Increase your joy in work by using time freed up to deepen your connection with your patients and rest knowing you met their priorities, celebrated strengths, addressed risks, and linked families to needed supports.

#### Partner

**Measure & Improve Using the Promoting Healthy Development Survey (PHDS)**

**What is it?**

- **Meaningful**: A family-completed survey yields a set of meaningful quality indicators aligned with Bright Futures implementation standards.
- **Flexible**: Use on an ongoing or periodic basis based on your needs.
- **Confidential**: Generate your own confidential, aggregate quality report based on family responses.
- **Shared**: Families receive a PHDS Feedback Report with resources to partner in improving care.
- **Focus**: Use the at-a-glance Well Visit Guide and Clinical Summary to prepare for visits and prioritize the family agenda.
- **Your Well-Being**: Increase your joy in work by using time freed up to deepen your connection with your patients and rest knowing you met their priorities, celebrated strengths, addressed risks, and linked families to needed supports.

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### Try It Out!

Contact us at info@cahmi.org for a customized and secure COE account. From your COE account you can:

1. Create your branded, customized and secure Well Visit Planner tool
2. Create your branded, customized and secure Promoting Healthy Development Survey
3. Access more information and resources on how to implement the EC_COE tools

### Engage your care team!

Implementing the EC_COE as a team or organization means getting everyone on board and creating workflows. Our implementation process and resources help your team succeed. Teams using the EC_COE report:

- Streamlined process for completing required screenings using valid screening tools in a family friendly way
- Improvements in workflow and a stronger sense of collaboration to help children and families
- Improving quality of care by understanding family needs and priorities
- Advocating for supports to meet family needs using population-based data and quality reports

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### What users have to say about the EC_COE tools:

**Pediatrician**: “I got more information about how the parent was doing than I did before...We didn’t have to ask as many questions...we only asked about what was needed.”

**Parent**: “It asks me if I have any questions that I would like to discuss with the doctor before the physical. So then it makes my job easier when I go in to see the doctor, everything is written down back there.”

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**Studies to date have demonstrated acceptability, feasibility, improvements in screening and quality, and reductions in urgent care.**

**Over 92%** of providers and families recommend the Well Visit Planner.

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**Learn More!**

- **Sign up** for a demonstration.
- **Learn** more about the WVP and PHDS content, reports, implementation resources and alignment with screening and quality of care standards.
- **Watch** a short introductory video.

**Get Help!**

Please email us at info@cahmi.org for more information or questions. We aim to partner to continuously improve and look forward to hearing from you!
Visit www.cycleofengagement.org to learn more and get a customized and secure COE account and personalized COE dashboard.

Providers can sign-up on their own or as a practice. Anyone on your team can manage your account if you give them permission.

Step 1:
Sign up to get a secure COE account, access your COE dashboard and customize your Well Visit Planner and Promoting Healthy Development Survey (one or both). Get your unique URL and brand your websites. Get resources for implementation in your practice and team.

Step 2:
From your COE dashboard add or change account administrators and add or change additional assessments and resources to share with your families (in English or Spanish).

Step 3:
Send your customized WVP and/or PHDS URLs to your families and track use. Use options and resources (email/verbal scripts, postcards) to invite families or create your own.

Step 4:
Get WVP Well Visit Guides and provider Clinical Summaries from your COE dashboard and prepare for and conduct personalized, connected encounters. Generate PHDS quality reports after 25 visits. Use options and resources (email/verbal scripts, postcards) to invite families or create your own.

Step 5:
Continuously innovate to make the EC_COE model and tools work best for you. Use population-based WVP and PHDS data to track needs and priorities, identify areas for improvement, and advocate/collaborate for positive change in your health system and/or community.

Frequently Asked Questions for Getting Started

1. Do I have to pay? The CAHMI is dedicated to making the EC_COE free to use for families. The EC_COE is now free to use for care providers with support from private foundation funders.

2. Do I have to use this with all families? No. You choose who to engage and when. You can start and stop at any time. Test drive the tools and see.

3. What ages are covered by the WVP? Currently, 11 age-specific tools are available for children ages 4-72 months. We aim to expand to newborns and all ages.

4. How do I engage families in the PHDS or WVP? Families can be invited to complete the WVP and PHDS through the same mode of communication that you or your team currently use with your families (in person, by phone, and through email, patient portal, or text message). You will receive guidance and customizable postcards to hand out, verbal/email scripts and other guidance with options for how and when to invite families. QR codes for your WVP/PHDS are provided for easy scanning.

5. Are the WVP/PHDS optimized for use on mobile devices? Yes. Both the WVP and PHDS can be used on a smartphone or similar device.

6. What if a family cannot access the internet? Families can complete on devices in your office or during home visits, and you can also verbally administer the WVP in person or over the phone or video platforms.

7. What languages are available? Currently the WVP is in English and Spanish. Invitation scripts, postcards, and posters for inviting families are also available in Spanish.

8. Is the data collected secure? Yes. We use highest data security standards and maintain HIPPA compliance at all times. See our Use Agreement and Privacy Notice for more.

9. How do I access WVP Well Visit Guides and Clinical Summaries? Visit Guides and provider Clinical Summaries are automatically uploaded to your secure EC_COE account. Families are encouraged to upload their Well Visit Guide to their patient portal, bring it in at the time of visits, and/or email it to you at a secure email you provide. You choose how families share Well Visit Guides.

10. Can I get data directly integrated into my electronic records? Yes. The WVP was developed and tested for full integration into electronic records. Right now, families can upload their Well Visit Guides to the EMR via a patient portal. You can also scan data reports into your EMR. Direct integration into your EMR is possible if your EMR is able to receive WVP data. Collaboration with your EMR vendor and additional data sharing agreements are required.

11. Do I need my own account for families to use the WVP and PHDS? No. If you do not want customized account features, you can ask families to use these tools today at www.wellvisitplanner.org and www.onlinephds.org.

12. Have the WVP and PHDS been validated? Yes. The PHDS was endorsed by the Nationally Quality Forum in 2008 and continues to demonstrate validity. The WVP has been validated through a randomized controlled trial and other studies. We seek research partners if you are interested.

13. Will families use the Well Visit Planner? Yes. Studies show that once families know you want them to use the WVP, they take the time. This is new for families and providers, but it is worth it to engage families and partner closely to promote the health of the whole child and family—all while meeting requirements for screening and quality of care.

14. Are there tools for chronic care and other types of care? Yes. The CAHMI has developed the CARE_PATH for Kids shared care planning tools to ensure comprehensive care plans are based on the foundation of child and family needs, priorities, goals and social and family context. See www.carepathforkids.org.

Our Journey and Collaborators

The EC_COE has been a labor of love for the CAHMI driven by our dedication to partner with you to meet the great need and possibilities to promote the early and lifelong health of children, families, and communities. As a part of our broader Advancing Tools and Technologies to Achieve Child Health (ATTACH) work, since 1997 the Child and Adolescent Health Measurement Initiative (CAHMI) has partnered with families, providers, and experts at the national, state, health plan, practice, and provider levels to design, develop, and test the EC_COE model and tools. With initial support from The Commonwealth Fund and the Health Resources and Services Administration, CAHMI has worked in close collaboration with Family Voices and leaders of the American Academy of Pediatrics’ to translate guidelines into family-friendly, actionable tools to customize and improve the quality of well child care services based on family reported assessments and priorities. The Well Visit Planner includes standardized assessments, including the Survey of Well-Being of Young Children (SWYC), for which the CAHMI holds a license for use in the EC_COE. Other guideline-aligned content was designed and tested by CAHMI.

Partner and Support:

CAHMI aims to continue to innovate and partner to help all children thrive. We need your partnership and support. Current funding for the EC_COE comes from a grant from the Robert Wood Johnson Foundation to the CAHMI at Johns Hopkins School of Public Health and from the Center for the Advancement of Innovative Health Practices. If you wish to partner or support this work please contact Christina Bethell, PhD, MBA, MPH at cbethell@jhu.edu.