

West County Health Centers Well Child Visit and IZ Recall Workflow

Redwood Community Health Coalition
Promising Practice

PROMISING PRACTICE OVERVIEW

West County Health Centers (WCHC) developed and refined workflows for well child visits and immunizations to improve efficiency and streamline outreach. To generate recall lists for well child checks for ages 3-6, WCHC uses a Tableau dashboard and the front office staff calls and sends letters to patients due. For children ages 0-3 and over 6 years, WCHC uses open access alerts in eCW to create outreach lists. The front office staff also conducts outreach (letter and call) to these patients to schedule their well child visits when due. The chart prep workflow is where the MA reviews prior visit types and determines and documents what is due. WCHC developed a separate and parallel workflow for childhood immunizations outreach led by the immunization coordinator. For immunization exception letters, WCHC developed provider guidelines and an IZ Committee comprised of medical directors who follow the guidelines to approve or decline the request and then a standard form letter is completed. This process reduces pressure on the provider to approve exceptions when requested because there are protocols in place and it is not up the individual providers to approve.

AIM

To improve well child checks where all required elements such as immunizations and developmental screenings are completed.

MEASURES

QIP Well Child Visits for Children ages 3-6

Numerator: Had one or more well-child visits with a primary care practitioner in the past year.

Denominator: Continuously enrolled PHP members between 3 to 6 years of age at the end of the reporting period

UDS Childhood Immunizations

Numerator: Documentation of a full immunization on or before the second birthday; A full immunization is all of the following: 4 DTP/DTaP, 3 IPV, 1 MMR, 3 Hib, 3 Hep B, 1 VZV, 4 Pneumococcal conjugate, 1 Hep A, 2 or 3 RV, and 2 influenza.

Denominator: Patients who had their second birthday within reporting period; Had at least one medical visit during reporting period; Had at least one medical visit any time prior to the second birthday; Exclusion: contraindication for the vaccine or a history of illness

RESULTS TO DATE

WCHC's UDS measure for childhood immunizations in 2016 was 10%. Due to issues with CAIR2, the 2017 childhood immunization rate is not yet available.

Photo of WCHC provider conducting well child exam



ACTIONS TAKEN

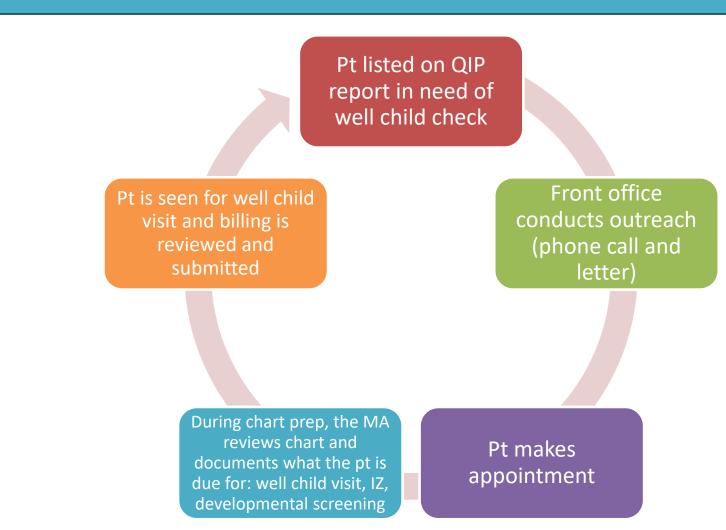
Recall Workflow Developed for Well Child Checks:

- 1. WCHC developed a Tableau dashboard built from the BridgelT QIP Well Child Visits for ages 3-6 report. This dashboard drills down to identify children due for well child visits. The report is based on claims data and as this was implemented, WCHC learned that some visits that were documented as well child visits in the progress notes, ended up being billed as different visit types due because not all the elements of a well child visit were included (such as developmental screenings). More provider and staff education was needed about using the standard well child visit templates to ensure that all well child visit elements were addressed and the visit would appropriately be billed as such.
- 2. Well child visits are included on WCHC's Quality Watch Checklists to increase data literacy among staff and reinforce use of the templates.
- 3. Children ages 0-3 and over 6 years are not included in the Tableau dashboard and open access alert lists ("patient specific alerts" in eCW) are run by the front office staff. These reminders are based on visit types. When a patient due for a well child visits they appear on this list and a TE is created. A call is made, message left and a letter is sent before the open access alert is closed. As part of WCHC's chart prep workflow, MAs look at prior visit types and document what is needed for the upcoming visit.
- 4. As part of WCHC's chart prep workflow, MAs look at prior visit types and document what is needed for the upcoming visit.

Recall Workflow Developed for Childhood Immunizations (IZ):

- 1. WCHC uses CAIR to generate outreach call lists and letters for children overdue for immunizations. Outreach is conducted by the immunization coordinator. Monday night drop in hours were tested, but not sure if they are recommended since some children were vaccinated and then did come back for their well child check.
- 2. If a parent requests an exemption letter, WCHC developed provider guidelines and an IZ Committee comprised of medical directors who follow the guidelines to approve or decline the request and then a standard form letter is completed.

WELL CHILD VISIT RECALL WORKFLOW: CHILDREN AGES 3-6



LESSONS LEARNED

Well child visits: WCHC would have spent more time training staff and providers on coding for well child visits. They also conducted chart audits and found that providers were using personal templates and not the standard well child templates that include all necessary elements. Training staff on workflows and how the standard well child templates are more efficient for patient care was important.

Childhood Immunizations: WCHC recommends provider education on exemptions and what reasons are accepted by the County so that exemption letters are not returned by the County.

West County Health Centers, Inc. Clinical Protocol

Clinical Protocol:	Creating an Open Access Alert	Category: DRAFT
Staff Role:	CTMA	Page: 1 of 11

Protocol Summary: The CTMA will create an Open Access alert to indicate the next appointment date and appointment reason. They will indicate the time frame the patient will need to follow up by giving the patient a card with time frame and days that their provider works or by typing it onto the visit summary at the time of discharge.

<u>Follow-up Appointment Alert</u> will be made when discharging the patient if the provider indicates they need a follow-up appointment. The CTMA will create an Open Access alert with the reason if the patient needs a follow up appoint greater than two weeks. If the patient needs an appointment within two weeks they will schedule it with the Front Office before leaving.

<u>Well Women Exam Alert</u> will be made by the CTMA during Chart Prep or discharge based on the date of the last WWE appointment type. (See WCHC OA Appointment Table).

Well Child Exam Alerts can be made by the CTMA during Chart Prep or discharge based on the date of the last WCE and child's age. (See WCHC OA appointment Table). Indicate the age the child will be at the next WCE exam. For example (follow up 10/18/2014 for 3 year old WCE).

<u>Open Access Dental Alerts</u> will be made by the CTMA when rooming a pediatric patient who does not have a future dental appointment and/or a Dental Home. Dental Alerts should be created for at least a week out.

Dental alerts can only be made for:

• Children younger than 21 years old who have:

Medical/Partnership

Or Healthy Families with Delta Dental

Or Healthy Families with Premier Access Dental

- Anv Adult with CMSP
- Any '22' patient regardless of insurance

Open Access FWC Alert for PHASE will be made by the CTMA when rooming a PHASE patient who is due for a PHASE Behavioral Change Support Alert. The CTMA will only create the alert after explaining what the class at FWC is and the patient agrees to be contacted.

To create a follow up Open Access Appointment

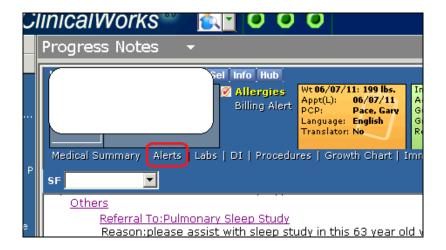
During a visit the Provider should indicate when they want the patient for a return visit by indicating the f/u date and reason in the bottom of the progress note.



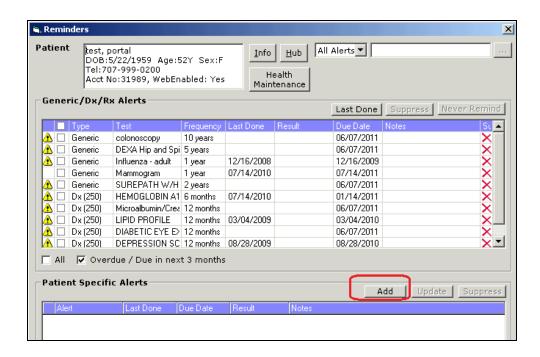
To create the alert click on the 'Alert' tab in the Hub



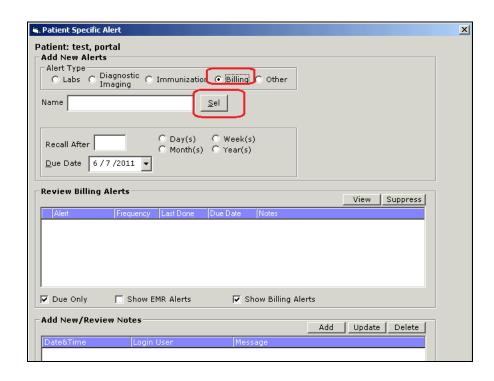
Or the 'Alerts' button in the top of the Progress Note



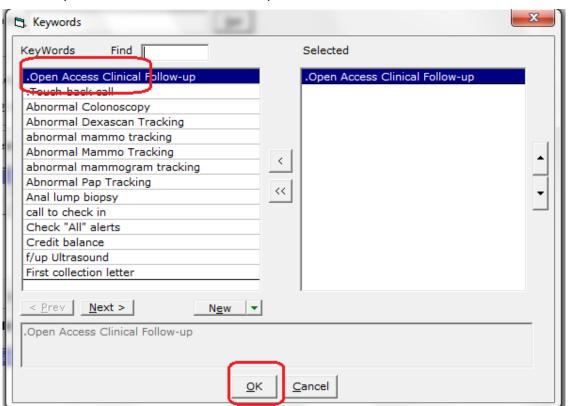
In the Alerts window click on 'Add' under Patient Specific Alerts



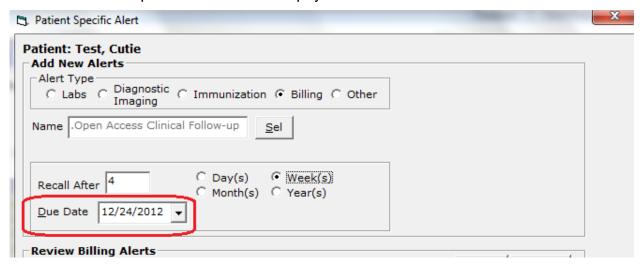
Click on the Billing Alert Type and click on the Select button to bring up the Alert pick list



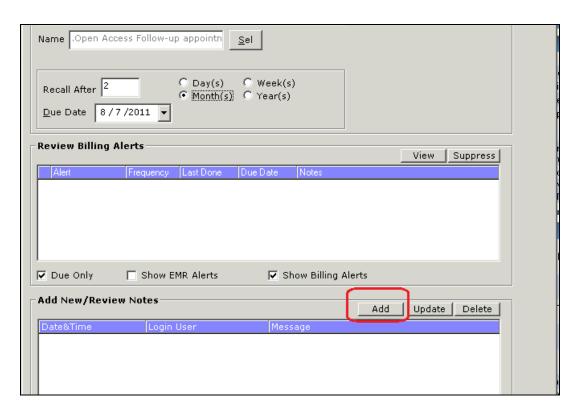
Select the 'Open Access Clinical Follow-up' from the list and click OK



Select the follow-up date and be sure to pay attention to the date that calculates.

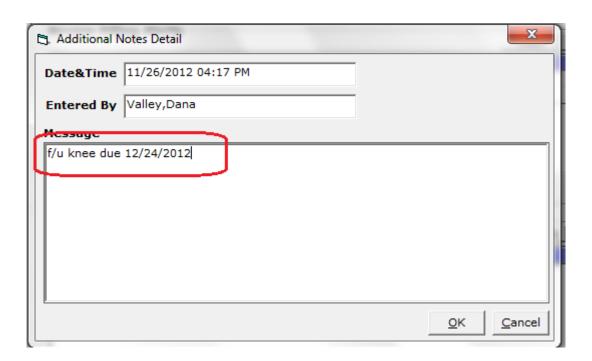


You must add a note to the alert. Click on 'Add'

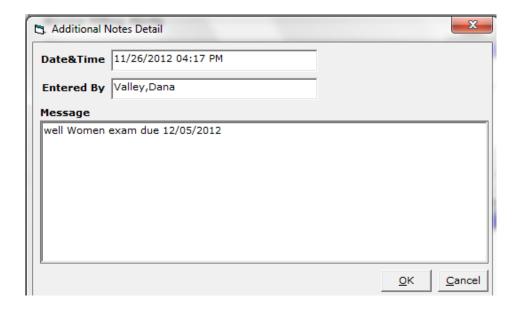


Free text the reason for the appt in the notes box also type in the date the patient is due.

You can also type in a more detailed note for the Front Office if needed. (exp: remind pt to bring in IZ records)

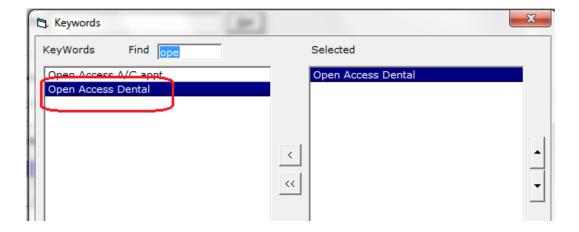


At any time during chart prep, discharge or during Population Management the CTMA is responsible for putting in an Open Access Alert for a Well Child Exam or a Well Women Exam based on visit type and the Open Access Alert Table (see WCHC Open Access Alert Table).



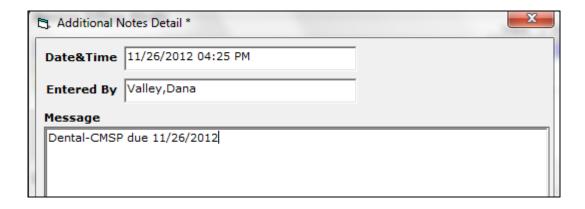


To create a Dental Alert you must choose 'Open Access Dental' from the alert list

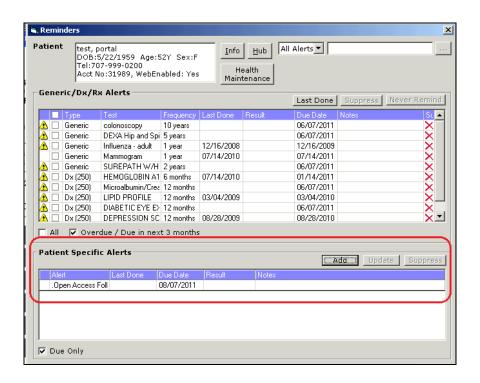


All Dental Alerts must be created at least 2 weeks out.

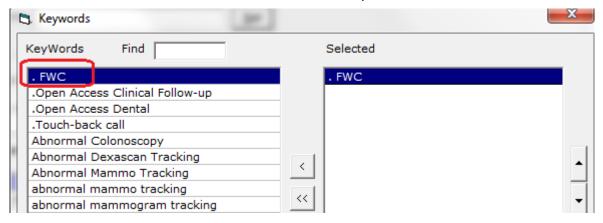
In the notes section type 'Dental' their insurance and the date due.



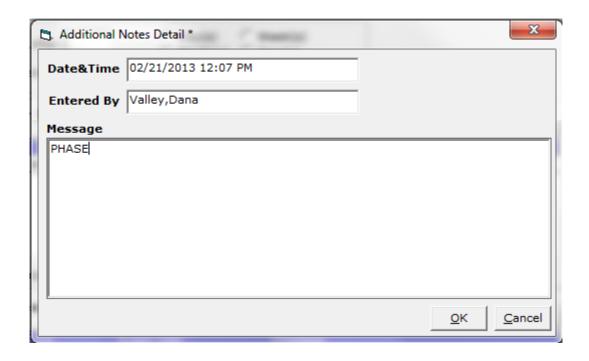
The Open Access alert will now show in the Patient Specific Alerts list.



To Create a FWC-PHASE alert select the FWC Open Access Alert



And type 'PHASE' in the notes section.



Effective Date:	Revision Date:
Supervisor Approval:	Medical Director Approval: _DRAFT

WCHC Open Access Appointment Table

WCE (Well Child Exams):

Age of child being seen regardless of insurance type:	Next Appt due:
Under 1 month	1 month
2 months	2 months
4 months	2 months
6 months	3 months
9 months	3 months
12 months	3 months
15 months	3 months
18 months	6 months
24 months (2yr old)	6 months
30 months (2 ½ yr old)	6 months
3-21 yr old	yearly

WWGN (Well Women Exams):

Females 21 and older	yearly

Dental Alerts

Children younger than 21 who have: • Medical/Partnership • or Healthy Families with Delta Dental • or Healthy Families with Premier Access Dental • or no Dental Insurance	One time If patient does not have a Dental Home or a future dental appointment
OB patients with Medical/Partnership or no dental insurance and no private insurance, even if they are not West County Health Center patients. Any '22' patient who have Medical, CMSP or no	
dental insurance	

3 year old Well Child Template

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Subjective:
   Chief Complaint(s): ▼
      • stomach pains
   HPI: ▽
   Developmental Assessment
      Fine motor - Adaptive Reaches out/grasps rattle, follows past midline, brings hand to mouth.
       Language Squeals/coos/laughs, babbles with expression, copies sounds.
       Gross Motor Functions Rolls over one way, holds head steady, pushes up to elbows when prone .
   Nutrition
       Breast Feeding Adequate intake.
       Infant feeding
          How is baby being fed? {...}
   Key Family Checks
       Tuberculosis screening Not born in Latin America/Africa/Asia/Eastern Europe, no travel to high-risk area x > 1 week, no family member/contact with TB
 disease or LTBI, no family member/contact PPD+ .
    Dental
       CONCERNS OR QUESTIONS- ..
       Screening .
    INTAKE (Interim History)
       GROWING UP HEALTHY Age Appropriate Form Given Yes.
  Social History:
    Smokina
      Exposure to 2nd hand smoke? .
  ROS: ♥
Objective:
  Vitals:
  Past Results:
    Lab:Pap and HPV Co-testing (age >=30) (Order Date - 10/06/2017)
    Lab:TSH (Order Date - 01/31/2018)
  Examination:
   General Examination
     General Appearance: NAD healthy appearing infant. .
     Skin: normal.
     HEENT: Hearing and vision appear clinically normal, Head - NC/AT, TMs normal, pharynx normal, AF - soft, flat and patent, clear conjunctiva,
PERRLA, EOMI.
     Oral cavity: normal, moist mucus membranes.
     Neck: supple, no thyromegaly, no lymphadenopathy.
     Chest: normal shape and expansion.
     Heart: Regular rate and rhythm, normal S1S2, no murmur or extra sounds.
     Lungs: clear to auscultation bilaterally, no wheezes/rhonchi/rales, normal breathing rate and effort.
     Abdomen: soft, non-tender, non-distended with normal bowel sounds, no hepatosplenomegaly, no mass, no rebound or guarding.
     Back: spine straight, no tenderness.
     Extremities: no edema, good tone and skin color, no hip click bilaterally.
     Peripheral pulses: normal (2+) bilaterally.
     neurologic exam normal tone and movement x all four extremities. .
  Physical Examination: ▼
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