Connect for Health Pediatric Weight Management Program Clinical Training Tools

- Workflow Observation Guide
- Environmental Audit Guide
- Clinician Interview Guide
- Parent Feedback Survey

Connect for Health Workflow Observations

Drac	tica n	ame.
		ame:
		ient:
		ons made by:
		on date:
User	name	name of observed staff:
l.	Se	ction II: Check-In
	a.	Contact Information
		i. Is the patient asked if they need to update their contact information?
		ii. Is their contact information read aloud to them to confirm it is accurate?
		iii. Is the patient asked what is their preferred method of contact?iv. Please describe the questions used to collect/confirm contact information.
		iv. Please describe the questions used to collect/colliniii contact information.
II.	Se	ction III: Vitals
	a.	Prior to taking a patient back for vitals, what screens does the medical assistant look
		at to prepare for the patient? Describe.
	b.	Please ask the medical assistant if they would share their username. This
		information will enable us to understand what screen they see when they open Epic
	c.	Are vitals taken in a separate area?
	d.	What is completed (check below)
		□ Weight
		□ Height
		□ Vitals:
		□ Review medications
		□ Chief complaint
		☐ Ask about preventive/ screening services
		Other:
	e.	Equipment/ procedures
	,	i. Is the staff sensitive when taking the child's weight? Describe.
	f.	What does the medical assistant document? Describe.
		i. Where does the medical assistant enter in the vitals?

(1 of 3 pages)

Copyright © 2019, Massachusetts General Hospital All rights reserved.

g. h.		2. e med	If initially on paper, when is it entered into Epic? Is it completed before the provider sees the patient? If on paper, please ask for a blank copy of that paper. ical assistant place orders? Describe. ommunication between the MA and MD? Describe.
	i. I	f yes,	how:
			Face-to-face
			Whiteboard
			Pager
			Paper/ paper chart
			 a. If via paper or paper chart, how is this information exchanged? (Placed on door, handed to next provider, etc)
			Other:
	ii. V	What t	type of information is communicated?
			Chief complaint Chief chie
			Medications
			Preventive/ screening services due
			Height/ weight/ BMI
			Other:
			ere variations between MAs and between MA/ provider teams?
		Descri	oe.
_			
Sec	ction IV: I	Physic	al Exam
	5		
		•	ent go into a different room after their vitals are taken?
b.			am begins, does the provider review the patient's chart?
	I. I	-	where does the provider review the chart?
		1.	Please ask the provider if they would share their username. This
			information will enable us to understand what screen they see when
		_	they open Epic.
			Does the provider review Epic, paper chart, or both? Describe.
		3.	What is reviewed in Epic?
			□ Problem list
			□ Medication list
			□ Lab tests
			 Preventive/ screening services that are due
			□ Vitals
			□ Growth chart

2. What screens/sections in Epic are they looking at?

3. What does the provider do if the vitals have not yet been entered? Describe.

☐ How often does that happen?

□ Other:

III.

- c. Does the provider immediately open Epic when the visit begins?
 - i. If no, when does the provider open Epic?
 - ii. If yes, what is being reviewed in Epic? What screens are being viewed? Document this throughout the visit.
 - iii. Does the provider review the growth chart?
- d. Does the provider enter information into Epic during the visit?
 - i. If yes, what information is entered?
- e. Does the provider place orders? Describe.
- f. Does the provider discuss referrals or set-up follow-up visits?
- g. Does the provider print an after-visit summary?
 - i. If yes, who gives the summary to the family?
- h. Who writes the note in Epic? (Nurse, Scribe). Describe.
- i. After the patient has left, does the provider enter any other information in Epic? Describe.

(3 of 3 pages)

Connect for Health Environmental Audit

I. Section I: Waiting Rooms

- a. Number of waiting room(s): ______
- b. Describe waiting room(s):
 - i. Is the waiting room weight friendly?
 - 1. Are there double seats for parents with obesity?
 - 2. Do the chairs have armrests that would prevent someone from sitting comfortably?
 - 3. Other observations:
- c. Are there signs or posters present? If so, describe.
- d. Is there a TV in the waiting room? Can it be used for informational purposes?

II. Section II: Check-In

- a. Is there a defined check-in area? If so, describe.
- b. Is the check-in area staffed or automated?
 - i. If staffed, please ask the front-desk personnel if they would share their username. This information will enable us to understand what screen they see when they open Epic.
- c. Is the patient asked to complete screeners?
 - i. If yes, are the screeners on paper or tablet?
 - ii. What screeners are completed?
 - iii. How long do the screeners take?
 - iv. If on paper, who collects it? Who then reviews it?
 - v. Is the information from the screener uploaded into Epic?

III. Section III: Vitals

- a. Equipment/procedures
 - i. Would equipment be impacted by a child with an excessive BMI? Describe.
 - 1. How high does the scale go?
 - 2. Are blood pressure cuffs large enough for accurate readings and patient comfort?
 - 3. Any other equipment that would be impacted? Describe.

IV. Section IV: Physical Exam

- a. Equipment
 - i. Would equipment be impacted by a child with an excessive BMI? Describe.
 - 1. Are the gowns large enough?
 - 2. Are the exam tables large enough?
 - 3. Any other equipment that would be impacted?

(1 of 2 pages)

V. Section V: Check-Out

- a. Is the family required to check-out?
- b. Is there a defined check-out area?
 - i. If yes, is it the same as the check-in area? If different, describe.
- c. Is any additional information given to the family at check-out? Describe.
- d. Is the family asked to complete any additional paperwork or surveys? If yes, describe.
- e. Are follow-up appointments scheduled at check-out? Describe.

Connect for Health Clinician Feedback Interview Guide

Connect for Health is a pediatric weight management program for children ages 2-12 who have a BMI ≥85th percentile. The program is based on a randomized trial that showed improvements in children's body mass index. The goal of this interview is to learn how to increase the adoption of the program in your primary care practice.

Introductory Questions

I'd like to start by learning more about your experience working with children with obesity.

1. In general, what tools in the clinical setting help with your management of children with obesity? Are there any features in your site's electronic health record that have made taking care of patients with obesity more seamless? Do you have examples of other tools you use beyond obesity that you have found helpful for management of children with specific health conditions?

Overall Program Feedback

- 2. Now I would like to hear your thoughts on the program components. The *Connect for Health* program includes electronic health record enhancements, including clinical decision support tools for the flagging, management and follow-up of children with obesity. It also includes training for clinicians and medical staff, parent educational materials, and family text messages to support behavior change. As you think about the components just listed:
 - a. What are your initial thoughts about the program components?

EHR Alert

Now I'd like to ask a few questions about proposed enhancements to the electronic health record for screening, management, and follow-up of children with obesity.

- 3. Best practice for childhood obesity management includes flagging children who have a BMI ≥ [85th/95th] percentile, notifying clinicians within the health record, and providing supportive tools to guide screening and management.
 - a. What do you think would be the best way to flag a child as having an elevated BMI?

Probe: When is an optimal time to flag or alert you to a child with an elevated BMI?

- b. What barriers do you see in using a flagging system?
 - i. What useful components could be put into the flagging system to make it worth using instead of ignoring it?

EHR Program Components

- 4. The *Connect for Health* program includes information about labs, referrals, follow-up, an after-visit summary and patient education materials. I'd like to hear your thoughts on each, specifically what you find helpful in managing children with obesity.
 - a. <u>Labs, Referrals, Follow-up</u>
 - i. Are there labs, referrals, follow-up that you would want to make sure we include?
 - b. After-Visit Summary & Patient Education Materials
 - i. The program includes an after-visit summary. Do you currently use after-visit summaries? What format do you use to give this to your patients? Is there a format you would prefer?
 - 1. Probes: Printed out at the visit, Sent via a patient portal
 - ii. What would be the easiest way for you to provide educational materials to families? For example, print the materials, send via a patient portal, text or email the materials, direct link to materials at a website, create an App for families.

Text Messaging

- 5. Connect for Health includes text messaging for families. Parents enrolled in the program receive text messages that focus on supporting family behavior change over the course of one year.
 - a. Do you think your patients will be interested in enrolling?
 - a. What barriers do you think might prevent patients from signing up for the text messaging program?
 - b. What would be the best way to enroll families to receive the text messages?
 - a. What would be the best way to confirm the mobile phone number?

Clinician Training

- 6. Now we would like to talk with you about our plan for helping clinicians adopt the program. Your practice will have on-site support from a clinician champion and a practice coach to demonstrate how to use the tools. We will also provide an overview of the tools and how to manage children with obesity at regularly scheduled staff meetings and through a virtual, on-line learning community.
 - a. Are there particular strategies that you would find helpful in learning about the *Connect for Heath* Program or learning about best practices for screening and management of children with obesity?
 - i. How could a clinician champion or practice coach best support you?
 - b. Are there other resources, topics or components you would like to add to the training plan?

Readiness for Change/Implementation Climate

I'd like to now ask a few questions about your organization's readiness to adopt a program like *Connect for Health*.

- 7. To what extent are new ideas and programs embraced and used to make improvements in your organization?
- 8. To what extent might this program take a backseat to other high-priority initiatives going on now?

Language Used When Talking with Families

I'd like to now ask a few questions about how you talk with your families about weight management.

- 9. How do you talk to your patients and their parents about their BMI?
- 10. Are there certain ways of conveying this information that you have found to be well received?
- 11. How comfortable are you about talking about this with your patients?

Wrap-Up

I'd like to end with a few wrap-up questions.

- 12. Do you see any possible barriers to adopting this program? How could we address those barriers?
- 13. Anything else you would like to share with us?

Connect for Health Parent Feedback Survey

Connect for Health is a pediatric weight management program that helps children achieve a healthy weight. We will describe to you parts of this program and we would like to know what you think. This will help us customize the program to meet the needs of families.

I.		As part of this program, your provider will talk with you about how you and your child can make changes to achieve a healthy weight.
	•	How important is it to you that your child's provider talks about a plan to help your child get to a healthy weight? □ Extremely Important □ Very Important □ Somewhat Important □ Not Important
II.		Your provider might make referrals to specialists or to community programs. We would like to know what programs and places have helped your family in the past and what programs and places might be helpful to you.
	•	What programs and places has your provider referred you to that have helped your child achieve a healthy weight? (Pick all that apply) Nutritionist/Dietician Weight Management Program or Clinic Specialist such as a gastroenterologist or endocrinologist Websites or Apps YMCA or Boys & Girls Club Cooking classes Other: None of the above
	•	What programs and places have you found to be helpful in supporting your child's weight management? Pick three most important resources. SNAP (food stamps) WIC Nutritionist/Dietician Primary care provider Weight Management Program or Clinic Websites or Apps Food bank Farmer's Market Structured activity programs such as dance class or soccer team School programs YMCA or Boys & Girls Club Other:
		■ None of the above

•	How important is it to you that your child's provider sends you to a specific clinic or program to help your child get to a healthy weight? □ Extremely Important □ Very Important □ Somewhat Important □ Not Important
•	How important is it to you that your child's provider encourages you to attend programs in the community (such as the YMCA or Boys and Girls Club) to help your child get to a healthy weight? □ Extremely Important □ Very Important □ Somewhat Important □ Not Important
III.	After your child's provider visit, they will give you a written summary (also known as an after-visit summary) of what was talked about during the visit and any recommendations they have for you. We would like to know more about the after-visit summary.
•	How important is it to you that your child's provider gives you a specific plan to help your child get to a healthy weight? □ Extremely Important □ Very Important □ Somewhat Important □ Not Important
•	How would you want to get the after-visit summary? Printed in the doctor's office Mailed to me Emailed to me From a text that has a link to the after-visit summary Sent using the Patient Portal (MyChart, Patient Gateway) Other:
•	Do you use the Patient Portal? ☐ Yes ☐ No ☐ Don't know
IV.	The Connect for Health program provides educational materials and text messages to families. We would like to know more about how you would like to get this kind of information and how you would use it.
•	How would you want to receive educational handouts? Pick three most preferred ways. ☐ Text messages with a link to the handouts

	☐ Text messaging apps (Whats App)
	☐ Email
	☐ Patient Portal
	☐ Website
	□ Арр
	☐ Social media (Twitter, Instagram, Facebook, Snap Chat)
	Printed handouts in the doctor's office
	 If printed handouts are selected: If the handouts had a link to a website, would you visit that website? Yes No
•	How likely are you to visit a website that has information about making changes to help your child achieve a healthy weight? Uery likely Somewhat likely
	☐ Somewhat not likely
	☐ Not likely
	☐ I don't have access to or don't use the internet
•	How likely are you to download and use an App that has information about making changes to help your child achieve a healthy weight? Uery likely Somewhat likely Somewhat not likely
	☐ Not likely
	☐ I don't have access to or don't use the internet
	 How likely are you to open a link to a webpage or video with more information if it was included in a text message? Very likely Somewhat likely Somewhat not likely Not likely
	 How would you want to get messages with tips about making behavior changes? Text messages Text messaging app (What's App) Direct messaging (Facebook, Instagram, Snap Chat) Email Other:
	 How often do you run out of data on your phone? Always (every month) Often (most months)

		☐ Sometimes (a few times per year)☐ Never
	0	What time of day would you be most likely to read a text? ☐ Morning ☐ Afternoon ☐ Evening
	0	How often would you want to get text messages that have tips about making behavior changes? ☐ 1 time a week ☐ 2 times a week ☐ More than 2 times a week
	0	How helpful do you think text messages with tips about making behavior changes would be? ☐ Very helpful ☐ Somewhat helpful ☐ Not helpful
V.	We wo	ould like to know more about your household.
•		s your preferred language at home? English Spanish Other: nany people live in your household, including yourself?
		people
•		s your ethnicity? Hispanic or Latino
		Not Hispanic or Latino
•		s your race? White
		Black or African American
		Asian
		American Indian or Alaskan Native
		Native Hawaiian or Other Pacific Islander
		other:

•	What is the highest grade or degree you completed in school? 3th Grade or Less (0-8)
	☐ Some High School (9-11)
	☐ High School Graduate (12)
	☐ Some College or Technical School (13-15)
	☐ College Graduate (16)
	☐ Postgraduate Training or Degree (17+)
	☐ Don't Know
	☐ Refused
•	What is your annual household income from all sources?
	☐ Less than \$10,000 per year
	☐ \$10,000 to \$15,000 per year☐ \$15,001 to \$20,000 per year
	□ \$20,001 to \$25,000 per year
	□ \$25,001 to \$35,000 per year
	☐ \$35,001 to \$50,000 per year
	☐ \$50,001 to \$75,000 per year
	☐ Greater than \$75,000 per year
	☐ Don't Know