



ADVANCING INTEGRATED HEALTHCARE

Welcome Healthy Tomorrows

Referral Process – Current State, Lessons Learned & Recommendations

HEALTHY TOMORROWS 06-28-2021

Agenda

Topic <i>Presenter(s)</i>	Duration
Welcome, Review of Agenda & feedback from TA meeting <i>Blythe Berger and Kristin Lehoullier, RIDOH</i>	10 minutes
PCHC/BVCAP meeting recap	20 minutes
Hasbro/Meeting Street meeting recap	20 minutes
Next Meeting Deliverables <i>Susanne Campbell & Team Discussion</i>	10 minutes

PCHC and BVCAP meeting recap

Discussion of 4-5 families identified by FV to answer the following questions:

§ **What services is FV providing to this family? How are they assisting families?** FV is assisting family with case management needs, developmental needs, screening. Family visitor was able to join the meeting to give a quick description of some of her work with the family. PCHC had information regarding concerns about food insecurity and transportation for one patient, but not the other.

§ **How does FV notify the pediatric team about their involvement? What information is shared? What information would be helpful to pediatric team?** BVCAP does not have access to secure email. Fax works well for both PCHC and BVCAP. PCHC's fax number is 401-780-0689. PCHC agrees that having list sent monthly that includes all PCHC patients would be helpful.

§ **Is there FV notification of involvement in medical record? Scanned information? KidsNet information? Field in EMR?** Karla Arango was originally not able to find the first child reviewed in KidsNet; family had changed child's name. BVCAP suggested that the monthly list include the KidsNet identification number.

§ **If not, how could FV involvement be noted?** If BVCAP sends information by fax, that would go to medical records. Amy suggested that they could have an indicator in the EMR in the info tab under care program to indicate FV involvement.

§ **What is the workflow process for capturing information sent from FV?** It looks like there is no current process – no information in EMR.

§ **Is there documentation of contact person and services provided?** PCHC checked two names in KidsNet. One record had documentation of contact person and some services provided, as well as ASQ scores and flag for out-of-range results. The other record did not have updated FV information – Shana and Shannon will investigate further.

§ **Has family shared that they are being seen by FV? Where would this information be shared? Is this important to know?** Many families are reluctant to share information, including signing a release form, if they are undocumented immigrants.

PCHC and BVCAP meeting recap

§ Identify lessons learned:

- BVCAP does not have secure email but can use fax
- PCHC prefers scanned information to checking information in KidsNet
- KidsNet information should be updated automatically, but the process is not consistent.
- Providers never check KidsNet. However, if they had a monthly list, a care team member could check KidsNet for information and add that information to the EMR.

§ **Further recommendations?** Teams agreed to meet together next month.

-

PCHC and BVCAP next steps

Action items - Due by next meeting, unless otherwise noted		
Item	Owner	Notes/Completed?
Decide where information should sit in chart and solidify workflow	PCHC	If BVCAP sends information by fax, that would go to medical records. Amy suggested that they could have an indicator in the EMR in the info tab under care program to indicate FV involvement.
Decide how information regarding FV status be transmitted to PCP	PCHC	Would this be the same as above?
Generate monthly report on all PCHC patients receiving services from BVCAP	BVCAP	Is this something that can be generated now?
Consider frequency of case reviews	FV/Pediatric teams	We did not discuss this, but it might be good to consider somewhat regular (bi-monthly? quarterly?) case reviews with each other.
Investigate why information on patient A was not available in KidsNet and FSRI is still listed as the appropriate agency	BVCAP	

Questions for PCHC and BVCAP



Hasbro and Meeting Street meeting recap

Discussion of 4-5 families identified by FV to answer the following questions:

§ What services is FV providing to this family? How are they assisting families?

- Cris pointed out that the mom is often the focus of family visiting, which then allows the mom focus on the child.

- FV also addresses child's needs, as well as other siblings in the family.

§ How does FV notify the pediatric team about their involvement? What information is shared? What information would be helpful to pediatric team?

- Monthly list of which children are receiving services and the name of the worker would be helpful. This list is in the process of being developed, but hasn't been sent out yet.

- Kat suggested a general idea of concerns, perhaps through checkboxes, but privacy and releases could be a problem.

- Carol suggested as categories: family mental health support, social determinants of health, parental education

- Pat suggested a case review on a regular basis – perhaps quarterly or bi-monthly

§ Is there FV notification of involvement in medical record? Scanned information? KidsNet information? Field in EMR?

- There is no note in EMR, and they could not locate scanned info on the children presented (this might be a factor of it being difficult to get signed releases during virtual visits).

- There is some information in KidsNet (name of agency and worker), but it is not practical to check KidsNet for each child.

§ If not, how could FV involvement be noted? This workflow is to be determined.

§ What is the workflow process for capturing information sent from FV?

- Information may go in care coordination tab, such as name of program and name of worker.

- Scanned information should also be in media tab.

§ Is there documentation of contact person and services provided? In KidsNet only so far.

§ Has family shared that they are being seen by FV? Where would this information be shared? Is this important to know? –

- Families do not generally have this information, nor do they share it.

- The practice does not want to rely on families to provide this information.

Hasbro and Meeting Street meeting recap

§ Identify lessons learned:

Prenatal referrals may be more difficult to track, because referral hasn't come from Hasbro. A letter to the practice would be sent at first visit after baby is born, after release is obtained.

FV was seeing families with concerns regarding maternal mental health. This information was not in the patients' Hasbro charts and would be valuable information for the providers.

§ Further recommendations?

FV gets information only from parent. Would appreciate any information regarding pediatric teams' concerns.

FV encouraging workers to attend pediatrician visits, which would also help residents understand the role of FV and see them as allies. This process would require more education to residents on how to handle a hybrid visit – mom/pt in the room, and worker on video. Staff should have badge available to show if on virtual visit.

Hasbro and Meeting Street next steps

Action items - Due by next meeting, unless otherwise noted

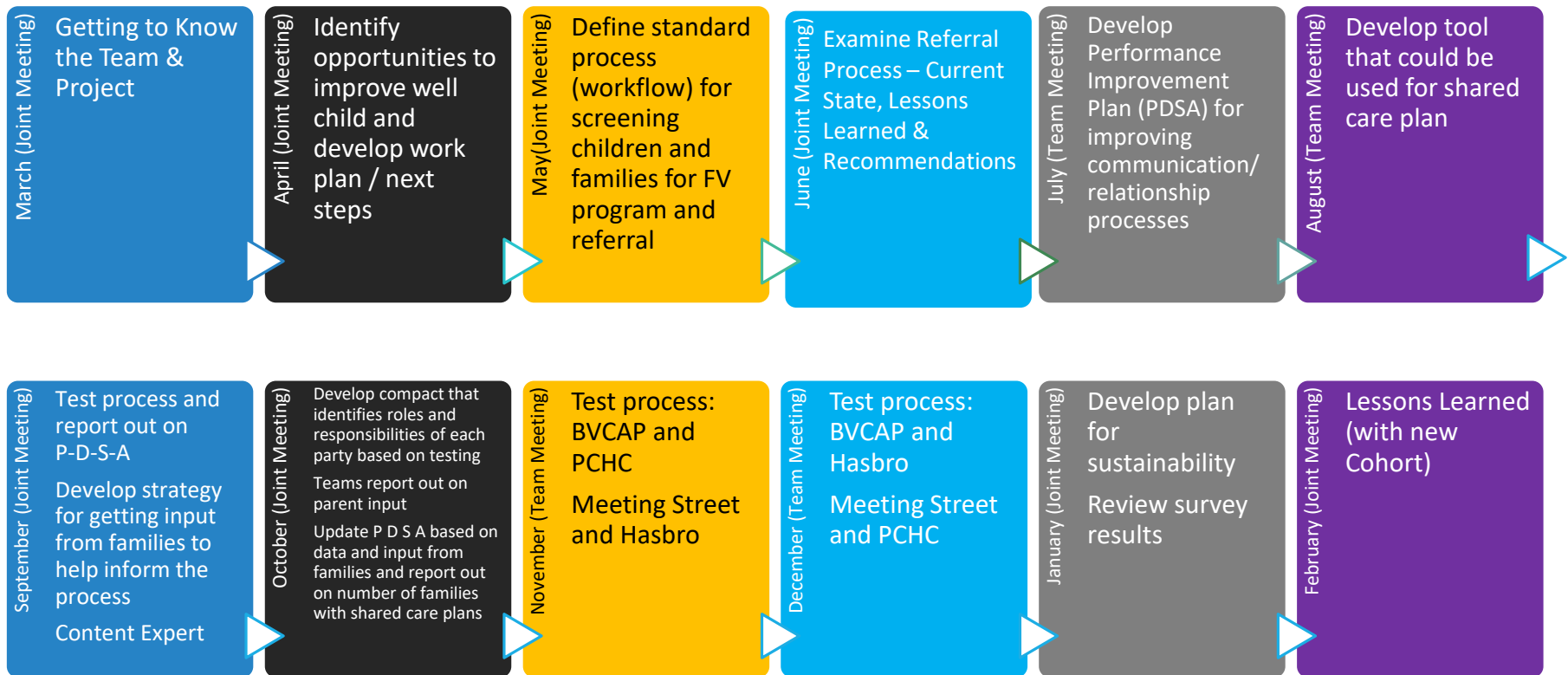
Item	Owner	Notes/Completed?
Where should information sit in chart?	Hasbro team	
How would information regarding FV status be transmitted to PCP/residents/attendings	Hasbro	
When will reports on all Hasbro patients receiving services from Meeting Street/BVCAP be generated? Is this something that Cris and Ilesha can do? Can it be sent to Hasbro via secure email? To whom should it be sent?	Suzanne to follow up with Sara, Cris and Ilesha	
After reports are available, how often should case reviews occur?	FV/Pediatric teams	
FV is not able to collect family signatures on release form, because they are not meeting in person. How can this be handled? If Hasbro knows about FV status, can they obtain the release at the next in-person visit?	Teams, Sara	

Questions for Hasbro and Meeting Street



Process Overview

We are here



Next Steps

No scheduled **Joint meetings** in July & August

Continue to **Meet in Teams** (Practice/FV program)

- Develop Performance Improvement Plan (PDSA) for improving communication/relationship processes (July)
 - Teams develops an AIM statement for improving communication/relationships and Plan
 - How will we measure success?
- Develop tool that could be used for shared care plan (August) & test in September
 - How will we create shared care plan for team meetings?
- Family consultant – no homework

Stay Safe and Healthy

Resources

[Healthy Tomorrows Virtual Resource Binder](#)