



STEP 6.3: Review guidelines and tips for reporting to frontline health care providers

➡ What is the purpose of this step?

The purpose of this step is to provide you with a reporting template that can be used to share the PHDS findings with frontline health care providers. We also highlight tips and issues to consider based on past CAHMI experiences.

In this step you will:

- Review the CAHMI template for reporting the findings to frontline health care providers.
- Review tips and issues to consider in reporting the findings to frontline health care provider.



Guidelines and Issues to Consider

- Review the CAHMI template for reporting the findings to frontline health care providers.

Appendix 13 provides a report template for displaying the PHDS findings to frontline health care providers. This template is based on cognitive interviews and focus groups conducted by CAHMI with frontline health care providers in five private practices in Vermont and Kaiser Permanente Northwest.

Important characteristics about the dissemination of this template include the following:

1. The report should come from someone the health care providers trust. If the report cannot come from someone they trust, it should be followed with a note of encouragement from someone they trust and/or their boss/manager, such as the chief of pediatrics.

2. The report should be followed by an in-person meeting so that a summary of the survey and key findings can be shared and questions answered. In past projects this was accomplished through the monthly office-level meetings.
3. Each individual provider should personally receive the report. In some health systems, it may be best to fax the report to each provider so that it does not become buried under the rest of the mail that providers receive.

Review tips and issues to consider in reporting the findings to frontline health care providers.

Below are general tips and issues to consider when reporting the findings to senior health system leaders.

- **Show comparative data to "pull them in" and give them a sense of overall findings.** It is important to start the report with overall quality of care findings and how they compare with others (See Step 6.5 for comparison PHDS data). It can be valuable to use charts for this purpose. However, **CAHMI recommends** that you do not include ONLY charts in the report. The qualitative studies conducted by CAHMI found that providers prefer reports that combine graphics and text.
- **Explain the measures of care.** It is important to provide a description of the recommendations behind each quality measures, the items that are included in each of the quality measures, and how you scored each measure.
- **Provide item-level findings, shown by categories.** The quality measures are important to give providers a sense of how they are doing. However, they do not describe specific ways providers can improve care. Therefore, it is invaluable to include BOTH the quality measure and item-level findings in the provider-level report.
- **Include the areas in which providers are doing well and the areas most in need of improvement.** The report needs to highlight areas of excellence and areas of improvement. If the entire report has a negative tone, it will not be well received or used by health care providers to improve care.

- **Link findings to health behaviors and other indicators of high-quality care.**
To reinforce the validity of your results and emphasize its importance, it is helpful to link your findings to broad issues surrounding the health of young children, such as child's risk of developmental, social, or behavioral delays, as well as correlates of higher quality, such as having a personal doctor or nurse. It is also invaluable to show the relationship between children whose parents reported that they had their informational needs met on specific anticipatory guidance and parental education topics with positive parent and family behaviors reported in the survey (e.g., breastfeeding, reading, minimal television watching).
- **Provide background information, links to additional resources.** It is important to include links to background information about the PHDS and the aspects of care included. Also include links to resources that can help providers conduct quality improvement efforts in the areas addressed in the PHDS. Examples of these links to related information can be found in **Appendix 2** and the final page of **Appendix 13**.
- **Provide contact information to address questions.**