



In-Office Administration of the Promoting Healthy Development Survey- Reduced-Item Version

**Developed by CAHMI- The Child and Adolescent Health
Measurement Initiative**

Christina Bethell PhD, Colleen Peck Reuland MS, Christopher Walker,
Krista Brockwood PhD, Brooke Latzke, and Debra Read MPH

Supported by The Commonwealth Fund

Acknowledgements

The survey and protocols presented in this toolkit are based on learning gathered from a pilot of the PHDS in five pediatrics offices. This PHDS pilot study was led by FACCT and in collaboration with an innovative, courageous team of pediatricians and other health professionals dedicated to improving health care quality for young children. We would like to thank the following organizations and people for their commitment to this project:

- ❖ The **Commonwealth Fund** for supporting the development, testing and implementation of the PHDS over the last five years.
- ❖ **Vermont Child Health Improvement Program (VCHIP)**: This project was conducted in collaboration with VCHIP via a contract to execute the sampling and mail-based survey administration, coordinate the in-office survey administration and coordinate the focus groups and cognitive interviews with parents and health care providers. Their insight into practice-level quality improvement, their established and working relationships with pediatric practices, and their ability to strategically think about future applications were invaluable to this project. We would like especially thank Judy Shaw, Kim Paul, and Sara Barry.
- ❖ **Center for Primary Care Research Group (CPCRG)**: The CPCRG was also a subcontractor for this work and was responsible for printing the surveys and developing and maintaining data entry systems including a fax line where health care providers could fax in their completed surveys. Their expertise and experience working with health care practices to collect data and their insights on about system-level change strategies were imperative to the success of our pilot projects. We would like especially thank Peter Margolis, David Kleckner, and Shelby Sikes.
- ❖ **Mousetrap Pediatrics and University Pediatrics**: These two medical groups in Vermont volunteered to be the pilot sites for an in-office application of the PHDS. Their in-kind support in administering the surveys and providing key input and guidance were a vital component of this project. In addition, they allowed us to conduct interviews and focus groups with parents of their patients, which enabled valuable learnings. Their commitment to their patients is paramount. We would especially like to thank the “practice site champions,” Fred Holmes and Wendy Davis.
- ❖ **Practice-Level PHDS Measurement Advisory Group**: During the 18-month time period of this project, we benefited from the review and guidance provided by our measurement advisory group who participated in two in-person meetings, four group conference calls and numerous one-on-one conference calls. This advisory group included the following people: Judy Shaw, Peter Margolis, Barbara Lantz, Jan Hanson, Scot Gee Marian Earls, Russell Frank, Kathryn Taaffe McLearn, David Bergman, Helen DuPlessis, Claire Lerner, Rita Goodman and Ed Schor.

Table of Contents

Overview	1
Chapter 1:	
Background Information about the PHDS.....	3
Chapter 2:	
Reduced-Item PHDS for In-Office Administration.....	11
Chapter 3:	
Sampling and Survey Administration Protocol	31
Chapter 4:	
Scoring Protocol for the In-Office PHDS.....	41
Chapter 5:	
Reporting the Findings to Health Care Providers and Parents.....	48
 Appendices:	
Talking Points for Office Staff Giving the Survey to Parents/Guardians	
Instructions and Tracking Sheet for Inserting the Surveys into Child’s Chart	
“Common Questions and Answers” Sheet for Parents	
Data Dictionary for Survey and Analytic Variables	

Attachment:

1 -- Template for Reporting the PHDS Findings to Health Care Providers

2-- Template for Reporting the PHDS Findings to Parents

Overview

Overview

The purpose of this document is to enable pediatric health care providers to implement the Promoting Healthy Development Survey (PHDS) in their offices.

The materials provided guide health care providers in the following:

- ⇒ Identifying parents to receive the survey.
- ⇒ Administering the survey in their offices.
- ⇒ Reporting the survey findings to health care providers and parents.

Leading methodologies place at the measurement of performance on an ongoing basis and the use of this information to inform, shape and track improvements in care at the center of effective quality improvement. Donald Berwick, MD, the President and CEO of the Institute for Healthcare Improvement, also asserts that the patients, in this case parents and children, are the most underutilized resource for informing and ensuring that improvements in health care quality occur.

By involving both the parents and health care providers in the quality improvement loop —**parent-centered quality improvement**— a new systems change strategy is implemented with the capacity to:

- (1) Inform BOTH providers and parents about what makes up quality of care
- (2) Provide practice-level information that is based on parental report and that incorporates parent preferences and needs
- (3) Engage providers and parents as partners in effective strategies that may result in improvements in care that would not otherwise occur.

Our parent-centered model complements current methods by utilizing parent-reported information about the quality of care provided, by enhancing traditional methods used to communicate quality information to health care providers and also by including patients – or in this case parents – as key recipients and drivers of needed improvements in care at the practice-level.

Information derived from the PHDS in pediatric practices has significant potential to shape and drive improvements in the quality of health care provided.

Chapter 1

Background Information about the PHDS

Background Information about the Promoting Healthy Development Survey (PHDS)

An essential first step to focusing both the health care system and consumers on improving preventive and developmental services for young children is the measurement of the degree to which health care needs and goals are currently being met. The parent-completed Promoting Healthy Development Survey (PHDS) was developed for this purpose. The PHDS provides a comprehensive, parsimonious and feasible methodology for evaluating health care system performance for young children in the areas of preventive and developmental services.

The PHDS was developed and tested through support from The Commonwealth Fund. It is one of three measurement sets recommended for use by the national advisory committee of the Child and Adolescent Health Care Measurement Initiative (CAHMI). The goal of this national initiative, led by FACCT since 1998, is to improve the quality of health care for children and adolescents.

Prior to the development of the PHDS, few standardized quality measures were available to provide specific information about preventive and developmental health care services for young children. There current well-child visit measures used by states and health plans, provide information about whether children had a visit for well-child health care, but *do not* provide information about the quality of care delivered at these visits. The Promoting Healthy Development Survey (PHDS) addresses this gap in available information.

What is the PHDS and what does it measure?

The PHDS is a 43-item, 128-component survey of parents with children 0- 3 years old, designed to capture quality information about preventive and developmental health care services provided to these young children.

The items in the PHDS are aligned with the American Academy of Pediatrics' recommendations in the Health Supervision Guidelines and the Maternal and Child Health Bureau's Bright Futures guidelines, as well as many Healthy People 2010 goals.

The PHDS evaluates whether health care providers:

- (1) talk with parents about education and counseling topics recommended in the American Academy of Pediatrics Guidelines for Health Supervision and the Maternal and Child Health Bureau's Bright Futures guidelines.
- (2) provide follow up health care for children who may be at risk for developmental, behavioral or social delays,
- (3) assess psychosocial well-being and safety within the family, and
- (4) assess smoking and drug abuse in the family.

The PHDS also assesses the degree to which parental interactions with providers are family-centered and are perceived by the parent as being helpful and improving parental confidence.

Individual survey questions are combined to score nine composite measures of care:

- ❖ Anticipatory guidance and parental education by a doctor or other health provider
- ❖ Health information
- ❖ Follow-up for children at risk for developmental, behavioral or social problems
- ❖ Ask about and address parents concerns
- ❖ Assessment of psychosocial well-being and safety in the family
- ❖ Assessment of smoking, drug, and alcohol use in the family
- ❖ Family-centered care (experience of care)
- ❖ Helpfulness and effectiveness of care provided

How was the PHDS developed and who developed it?

A standard and rigorous six-stage process was used to develop the PHDS beginning with focus groups with families to identify the aspects of health care quality that are important to parents in the area of preventive care for their children. A review of literature identified through Medline or during key informant interviews was conducted. Relevant materials identified and reviewed included over a dozen parent surveys on early childhood development and family-centered care and other topics, encounter forms, and checklists used by clinicians to help with the provision of anticipatory guidance and the assessment of young children and their families.

The six-stage development process included:

- Stage 1:** Develop conceptual framework and investigate relevance of measure.
- Stage 2:** Develop starting-point measurement proposal including initial feasibility studies.
- Stage 3:** Develop draft instrument and implementation methodology.
- Stage 4:** Conduct field testing (minimum of three sites).
- Stage 5:** Revise and refine survey, survey administration protocol, and scoring protocol as necessary.
- Stage 6:** Develop scientific and technical documentation and begin larger scale implementation and dissemination.

The following criteria were used to select topics assessed in the PHDS survey:

- Appropriateness for all children in the specific age group
- Strength of scientific evidence
- Professional consensus
- A more reliable, valid, or efficient way to measure the topic was not already developed or available
- The topic was important to parents as ascertained from cognitive interviews and focus groups.
- The topic can be validly and reliably reported by parents.
- Parsimony (e.g., topic is not already largely represented by another, related topic in the PHDS).

In the early stages of developing the PHDS, many existing surveys and tools were reviewed, particularly those methods designed to evaluate the Healthy Steps project or previously validated survey-based tools (e.g., Parental Evaluation of Development Status- PEDS). Although many of the PHDS survey concepts reflect those represented in these surveys and tools reviewed, nearly all of the PHDS items were newly-developed due to a lack of available, tested candidate items appropriate for performance assessment in a self-administered survey. The PHDS is the first parent reported survey specific designed and tested for comprehensive performance assessment of preventive and developmental health care for young children.

Three advisory groups within the CAHMI, comprised of pediatricians, family practitioners, consumer representatives, public health experts, and researchers, regularly reviewed and provided input on the identification of quality measurement topics and the development of the PHDS. A list of the key advisors and FACCT staff who were instrumental in the development process can be found on the FACCT Web site at www.facct.org.

Approximately **13,000** completed cases of PHDS data have been collected, analyzed, and scored into measures for purposes of quality assessment in six states (VT, ME, NC, WA, CA, OH) and nationally (through the National Survey on Early Childhood Health). PHDS quality measures have also been recommended by FACCT and published as candidate measures in the Institute of Medicine's recently released report "Envisioning the National Health Care Quality Report."

How and why was the in-office PHDS developed and tested?

Prior to 2002, the PHDS has administered by mail or telephone only. Acknowledging that few health care providers in office settings are able to feasibly administer a survey to their patients through the mail or via telephone, FACCT sought and received funding from The Commonwealth Fund to develop and test a model for implementing the survey in a pediatric office setting.

In 2002-2003 FACCT piloted the in-office PHDS in two medical groups, representing five participating pediatric practices in Vermont. This work was done in collaboration with the Vermont Child Health Improvement Program and the Center for Primary Care Research Group. The protocol, recommendations and materials provided in this toolkit were tested and modified based on key learnings from the pilot projects.

Through the pilot projects in these pediatric practices, approximately 1,000 completed surveys were obtained through two rounds of survey administration conducted October 2002-January 2003. VCHIP conducted the first round of survey administration via the mail. The offices implemented the PHDS during well-child care for the second round of administration.

Extensive effort was also devoted to understanding how parents and providers understand quality information, where and how they hope to receive quality information and how it can be reported in ways that empower and motivate actions that will improve care. Through this project, FACCT had the opportunity to talk with 43 parents and 40 health care providers in Vermont to hear about how the information from the PHDS can be implemented, reported and used to guide improvements in care for young children.

How is the in-office PHDS different from other versions of the PHDS?

The in-office PHDS is different from the full-length PHDS recommended for mail, telephone or online administration in the following ways:

- 1) Length of the Survey:** The in-office PHDS is an reduced-item version of the PHDS and is designed for practice- and/or health care provider level assessments of care. Research with health care providers demonstrated that in order for the in-office survey administration to be feasible, the survey must take no longer than five minutes for parents to complete.

Three criteria were used to determine which items to include in the reduced-item version of the survey:

- a)** Preference was given to PHDS items focused on preventive and developmental care over items related to child health, parenting behaviors, and parent ratings of the health care provided.
- b)** FACCT kept a majority of the items within measures of care that health care providers and parents found to be the most valuable for improving quality of care.
- c)** Preference was given to items for which national data was available or where a national objective such a Healthy People 2010 objective was measured.

Using these criteria, the item-reduction process was informed by the following:

- Two focus groups with the health care providers in the participating practices
- Two focus groups with parents whose child receives care in these practices.
- Review of national surveys focused on preventive and developmental care for young children such as the National Survey of Early Childhood Health.
- Review of key national health objectives.

The result of this work was the creation of the four-page, reduced-item version of the PHDS provided in this toolkit. This reduced-item version of the PHDS collects some descriptive information about parenting behaviors and issues in the family, and captures information about six out the nine PHDS measures of care:

- ❖ Anticipatory guidance and parental education (Questions #1-2)*
- ❖ Family-centered care (Question #3)*
- ❖ Ask about and address parental concerns (Question #5)
- ❖ Follow-up for children at risk for developmental/behavioral delays (#7)
- ❖ Assessment of the family (#8)**

* Because research with health care providers and parents demonstrated that these two measures of care are the most valuable in gathering information for quality improvement purposes, all items within this measure of care were included in the reduced-item version of the PHDS.

** A single measure of family assessment was created based on an reduced-item version of the assessment of psychosocial well-being and safety within the family measure of care and the two questions focused on assessment for smoking and drug abuse in the family.

2) Age-Specific Surveys: The anticipatory guidance and parental education section has three age-specific sections to assure that the questions asked are age-appropriate. In order to increase the feasibility of administering the PHDS in the office, three distinct age-specific surveys are recommended as opposed to the one survey with age-specific skip patterns provided for a mail or telephone administration. The three specific surveys are for the following ages of children:

- **3-9.99** Months Old
- **10-18.99** Months Old
- **19-46.99** Months Old

- 3) Sampling Frame- Children Whose Parents Are Identified to Complete the Survey:** Sampling for the in-office administration of the PHDS specifies that parents of children who are at the office that day for a well-child health care visit and who have received well-child health care at the office in the last 12 months are eligible to receive the survey. In comparison, a mail or telephone administration allows the sampling to be more inclusive and can be based on enrollment in specific health care programs such as Medicaid, a health plan, etc. or can be sent to parents of children who have received well-child care at the practice in the last 12 months.
- 4) Place of Administration:** The survey is administered in the office as opposed to the mail and telephone administrations used with other versions of the PHDS. The place of administration may influence how the parent responds, and parents may limit their responses to their experience with only the health care providers in that office as opposed to any health care provider of their child.

All four of the factors noted above may influence the quality of care findings observed and therefore need to be considered closely. For example, when the quality of care findings in the pilot practices were compared by type of administration (between the mail-based and in-office administration), the in-office findings were consistently higher despite adjustments by the age of the child and by well-child health care utilization.

If the data are being gathered for comparison purposes among practices or other entities or for trending purposes within a practice, then one mode of administration, one place of survey administration and one version of the PHDS should be used.

--IMPORTANT NOTE--

The full-length survey allows for more comprehensive, detailed information to be gathered and for variations in specific aspects of care to be examined by health care provider, child and family characteristics.

Whenever possible, health care providers should consider exploring partnerships that will allow for a mail, telephone or online administration of the survey prior to or instead of the in-office survey administration.

Where can I obtain information about the full-length PHDS and how administer it by mail, telephone or online?

A technical assistance manual for the PHDS is available on the FACCT Web site at www.facct.org. This manual provides detailed information about how to plan for, implement, score and report the PHDS to various stakeholders and for various quality measurement purposes.

Chapter 2

Reduced-Item PHDS for In-Office Administration

Reduced-Item PHDS for In-Office Administration

Survey for Parents of Children 3-9.99 Months Old

Your Child's Health Care

- ❖ This survey is about discussions you may have had with your child's doctors or other health providers since your child was born.
- ❖ By completing this survey, you are indicating that you have given your consent to participate.
- ❖ This survey is confidential. Do not write your name or your child's name on this survey.
- ❖ If you choose to not answer the survey, the decision will have no effect on the health care your child receives.
- ❖ If you begin to answer the questions and then change your mind, you may stop at any time. Also, if there are particular questions that you don't want to answer, you may skip them.

Instructions

1. Please use a BLUE or BLACK ink pen to complete this survey.
2. Answer all the questions by checking the box on top of your answer like this:

Yes No

SECTION I: DISCUSSIONS WITH YOUR CHILD'S DOCTORS OR OTHER HEALTH PROVIDERS

A doctor or other health provider could be a general doctor, a specialist, a pediatrician, a nurse practitioner, a physician assistant, a nurse or any one else your child would see for health care.

1. Since your child was born, did your child's doctors or other health providers talk with you about the following:	YES, and my questions were answered	YES, but my questions were not answered completely	NO, but I wish we had talked about that	NO, but I already had information about this topic and did not need to talk about it any more
a) Things you can do to help your child grow and learn	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) The kinds of behaviors you can expect to see in your child as he/she gets older	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Breastfeeding	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) Issues related to food such as the introduction of solid foods	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) The importance of placing your child on his or her back when going to sleep	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f) Where your child sleeps (such as the location and type of crib of your child may sleep in)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g) Night waking and fussing	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

2. Since your child was born, did your child's doctors or other health providers talk with you about the following:	YES, and my questions were answered	YES, but my questions were not answered completely	NO, but I wish we had talked about that	NO, but I already had information about this topic and did not need to talk about it any more
a) How your child communicates his/her needs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) What your child is able to understand	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) How your child responds to you, other adults, and caregivers	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) How to avoid burns to your child, such as changing the hot water temperature in your home	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) Using a car-seat	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f) How to make your house safe	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g) Importance of showing a picture book to or reading with your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h) Issues related to childcare	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

SECTION II: EXPERIENCE OF CARE

The next questions ask about your overall experiences with the health care your child has received from his or her doctors or other health providers since your child was born.

3. Since your child was born , how often did your child's doctors or other health providers. . .	Never	Sometimes	Usually	Always
a) Take time to understand the specific needs of your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) Respect you as an expert about your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Help you feel like a partner in your child's care	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) Explain things in a way that you can understand	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) Show respect for your family's values, customs and how you prefer to raise your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

SECTION III: HEALTH CONCERNS ABOUT YOUR CHILD

The next few questions ask about concerns parents or guardians sometimes have about their child.

4.* Do you have any concerns about . . .	Yes	A little	Not at all
a) Your child's learning, development or behavior	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b) How your child talks and makes speech sounds	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c) How your child understands what you say	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d) How your child uses his or her arms and legs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e) How your child behaves	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f) How your child gets along with others	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

5. **Since your child was born**, did your child's doctors or other health providers ask if you have concerns about your child's learning, development or behavior?

1
Yes

2
No

3
I don't remember

* Adapted with permission from *Parent's Evaluation of Developmental Status*, © 1997 Frances Page Glascoe, Ellsworth and Vandermeer Press. Any reproduction or adaptation without the express written consent of the publisher is a violation of federal law.

YOUR CHILD'S HEALTH CARE

6. Since your child was born, did your child's doctors or other health providers give you specific information to address your concerns?

1
Yes

2
No

3
I don't remember

4
I did not have any
concerns

7. Did your child's doctors or other health providers ever:

	Yes	No
a) Refer your child to another doctor or other health provider	1 <input type="checkbox"/>	2 <input type="checkbox"/>
b) Test your child's learning and behavior	1 <input type="checkbox"/>	2 <input type="checkbox"/>
c) Note a concern about your child that should be watched carefully	1 <input type="checkbox"/>	2 <input type="checkbox"/>
d) Refer your child for speech-language or hearing testing	1 <input type="checkbox"/>	2 <input type="checkbox"/>

SECTION IV: QUESTIONS ABOUT YOUR FAMILY

A child's doctors or other health providers sometimes ask questions about a child's family. These questions help them provide the best care possible for your child. These questions can be asked in a survey that you fill out before the visit, in the waiting room or when you talked with your child's doctor or other health provider during your child's visit.

8. Since your child was born, did your child's doctors or other health providers ask you:

	Yes	No
a) If you or someone in your household smokes	1 <input type="checkbox"/>	2 <input type="checkbox"/>
b) If you or someone in your household drinks alcohol or uses other substances	1 <input type="checkbox"/>	2 <input type="checkbox"/>
c) If you ever feel depressed, sad or have crying spells	1 <input type="checkbox"/>	2 <input type="checkbox"/>
d) If you have any firearms in your home	1 <input type="checkbox"/>	2 <input type="checkbox"/>
e) To talk about any changes or stressors in your family or home	1 <input type="checkbox"/>	2 <input type="checkbox"/>

SECTION V: YOUR CHILD'S PERSONAL DOCTOR OR NURSE

9. A personal doctor or nurse is a health professional who knows your child well and is familiar with your child's health history. This can be a general doctor, a pediatrician, a specialist doctor, a nurse practitioner or a physician assistant. Do you have one person you think of as your child's personal doctor or nurse?

1
Yes

2
No

10. Do you have more than one person you think of as your child's personal doctor or nurse?

1
Yes

2
No

SECTION VI: YOUR CHILD, YOU, AND YOUR FAMILY

These last questions are about your child, you, and your family. We are asking these questions to better understand the children and families we care for so that we can improve our services. Remember this survey is **confidential** and results will be kept completely anonymous.

11. Is the child named in this survey your first child?

1
Yes

2
No

3
The question does not
apply to me

12. How long did you breastfeed your child?

1
My child was not breastfed

2
Less than a month

3
A month or more

4
I am still breastfeeding

13. How many days in **a typical week** do you or other family members read a book with your child?

1
Everyday
(7 days)

2
5-6 days

3
3-4 days

4
1-2 days

5
No Days
(0 days)

14. What is the highest grade or level of school that you have completed?

1
8th grade
or less

2
Some high
school, but did
not graduate

3
High school graduate
or GED

4
Some college
or 2-year degree

5
4-year college
graduate

6
More than
a 4-year college
degree

15. In the **last 12 months**, have you had two weeks or more during which you felt sad, blue, depressed or lost pleasure in things you usually cared about or enjoyed?

1
Yes

2
No

16. How much trouble have you had paying for. . .

	A Lot of Trouble	Some Trouble	No Trouble
a) Child's health and medical expenses	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b) Supplies like formula, food, diapers, clothes and shoes	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c) Healthcare for yourself	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

YOU'RE DONE!!

Thank you for completing the survey. Please put the survey in the envelope provided and drop it off in the "completed survey" box before you leave.

You have helped make a difference.

Reduced-Item PHDS for In-Office Administration

Survey for Parents of Children 10-18.99 Months Old

Your Child's Health Care

- ❖ This survey is about discussions you may have had with your child's doctors or other health providers in the last 12 months.
- ❖ By completing this survey, you are indicating that you have given your consent to participate.
- ❖ This survey is confidential. Do not write your name or your child's name on this survey.
- ❖ If you choose to not answer the survey, the decision will have no effect on the health care your child receives.
- ❖ If you begin to answer the questions and then change your mind, you may stop at any time. Also, if there are particular questions that you don't want to answer, you may skip them.

Instructions

1. Please use a BLUE or BLACK ink pen to complete this survey.
2. Answer all the questions by checking the box on top of your answer like this:

Yes No

SECTION I: DISCUSSIONS WITH YOUR CHILD'S DOCTORS OR OTHER HEALTH PROVIDERS

A doctor or other health provider could be a general doctor, a specialist, a pediatrician, a nurse practitioner, a physician assistant, a nurse or any one else your child would see for health care.

1. In the last 12 months , did your child's doctors or other health providers talk with you about the following:	YES, and my questions were answered	YES, but my questions were not answered completely	NO, but I wish we had talked about that	NO, but I already had information about this topic and did not need to talk about it any more
a) Things you can do to help your child grow and learn	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) The kinds of behaviors you can expect to see in your child as he/she gets older	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Vitamins and foods your child should eat	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) Bed and naptime routines	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) Words and phrases your child uses and understands	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f) Night waking and fussing	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g) Whether your child sleeps with a bottle	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h) Weaning your child from a bottle	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

2. In the last 12 months , did your child's doctors or other health providers talk with you about the following:	YES, and my questions were answered	YES, but my questions were not answered completely	NO, but I wish we had talked about that	NO, but I already had information about this topic and did not need to talk about it any more
a) How your child may start to explore away from you	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) Guidance and discipline techniques to use with your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Toilet training	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) What you should do if your child swallows certain kinds of poisons	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) Using a car-seat	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f) How to make your house safe	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g) Importance of reading with your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h) Issues related to childcare	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

SECTION II: EXPERIENCE OF CARE

The next questions ask about your overall experiences with the health care your child has received from his or her doctors or other health providers in the last 12 months.

3. In the last 12 months , how often did your child's doctors or other health providers. . .	Never	Sometimes	Usually	Always
a) Take time to understand the specific needs of your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) Respect you as an expert about your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Help you feel like a partner in your child's care	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) Explain things in a way that you can understand	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) Show respect for your family's values, customs and how you prefer to raise your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

SECTION III: HEALTH CONCERNS ABOUT YOUR CHILD

The next few questions ask about concerns parents or guardians sometimes have about their child.

4.* Do you have any concerns about . . .	Yes	A little	Not at all
a) Your child's learning, development or behavior	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b) How your child talks and makes speech sounds	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c) How your child understands what you say	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d) How your child uses his or her arms and legs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e) How your child behaves	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f) How your child gets along with others	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

5. In the **last 12 months**, did your child's doctors or other health providers ask if you have concerns about your child's learning, development or behavior?

1
Yes

2
No

3
I don't remember

* Adapted with permission from *Parent's Evaluation of Developmental Status*, © 1997 Frances Page Glascoe, Ellsworth and Vandermeer Press. Any reproduction or adaptation without the express written consent of the publisher is a violation of federal law.

YOUR CHILD'S HEALTH CARE

6. In the **last 12 months**, did your child's doctors or other health providers give you specific information to address your concerns?

1
Yes

2
No

3
I don't remember

4
I did not have any
concerns

7. Did your child's doctors or other health providers ever:

	Yes	No
a) Refer your child to another doctor or other health provider	1 <input type="checkbox"/>	2 <input type="checkbox"/>
b) Test your child's learning and behavior	1 <input type="checkbox"/>	2 <input type="checkbox"/>
c) Note a concern about your child that should be watched carefully	1 <input type="checkbox"/>	2 <input type="checkbox"/>
d) Refer your child for speech-language or hearing testing	1 <input type="checkbox"/>	2 <input type="checkbox"/>

SECTION IV: QUESTIONS ABOUT YOUR FAMILY

A child's doctors or other health providers sometimes ask questions about a child's family. These questions help them provide the best care possible for your child. These questions can be asked in a survey that you fill out before the visit, in the waiting room or when you talked with your child's doctor or other health provider during your child's visit.

8. In the **last 12 months**, did your child's doctors or other health providers **ask** you:

	Yes	No
a) If you or someone in your household smokes	1 <input type="checkbox"/>	2 <input type="checkbox"/>
b) If you or someone in your household drinks alcohol or uses other substances	1 <input type="checkbox"/>	2 <input type="checkbox"/>
c) If you ever feel depressed, sad or have crying spells	1 <input type="checkbox"/>	2 <input type="checkbox"/>
d) If you have any firearms in your home	1 <input type="checkbox"/>	2 <input type="checkbox"/>
e) To talk about any changes or stressors in your family or home	1 <input type="checkbox"/>	2 <input type="checkbox"/>

SECTION V: YOUR CHILD'S PERSONAL DOCTOR OR NURSE

9. A **personal doctor or nurse** is a health professional who knows your child well and is familiar with your child's health history. This can be a general doctor, a pediatrician, a specialist doctor, a nurse practitioner or a physician assistant. Do you have one person you think of as your child's personal doctor or nurse?

Yes

2
No

10. Do you have more than one person you think of as your child's personal doctor or nurse?

1
Yes

2
No

SECTION VI: YOUR CHILD, YOU, AND YOUR FAMILY

These last questions are about your child, you, and your family. We are asking these questions to better understand the children and families we care for so that we can improve our services. Remember this survey is **confidential** and results will be kept completely anonymous.

11. Is the child named in this survey your first child?

1
Yes

2
No

3
The question does not
apply to me

12. How long did you breastfeed your child?

1
My child was not breastfed

2
Less than a month

3
A month or more

4
I am still breastfeeding

13. How many days in **a typical week** do you or other family members read a book with your child?

1
Everyday
(7 days)

2
5-6 days

3
3-4 days

4
1-2 days

5
No Days
(0 days)

14. What is the highest grade or level of school that you have completed?

1
8th grade
or less

2
Some high
school, but did
not graduate

3
High school graduate
or GED

4
Some college
or 2-year degree

5
4-year college
graduate

6
More than
a 4-year college
degree

15. In the **last 12 months**, have you had two weeks or more during which you felt sad, blue, depressed or lost pleasure in things you usually cared about or enjoyed?

1
Yes

2
No

16. How much trouble have you had paying for. . .

	A Lot of Trouble	Some Trouble	No Trouble
a) Child's health and medical expenses	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b) Supplies like formula, food, diapers, clothes and shoes	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c) Healthcare for yourself	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

YOU'RE DONE!!

Thank you for completing the survey. Please put the survey in the envelope provided and drop it off in the "completed survey" box before you leave.

You have helped make a difference.

Reduced-Item PHDS for In-Office Administration

Survey for Parents of Children 19-46.99 Months Old

Your Child's Health Care

- ❖ This survey is about discussions you may have had with your child's doctors or other health providers in the last 12 months.
- ❖ By completing this survey, you are indicating that you have given your consent to participate.
- ❖ This survey is confidential. Do not write your name or your child's name on this survey.
- ❖ If you choose to not answer the survey, the decision will have no effect on the health care your child receives.
- ❖ If you begin to answer the questions and then change your mind, you may stop at any time. Also, if there are particular questions that you don't want to answer, you may skip them.

Instructions

1. Please use a BLUE or BLACK ink pen to complete this survey.
2. Answer all the questions by checking the box on top of your answer like this:

Yes No

SECTION I: DISCUSSIONS WITH YOUR CHILD'S DOCTORS OR OTHER HEALTH PROVIDERS

A doctor or other health provider could be a general doctor, a specialist, a pediatrician, a nurse practitioner, a physician assistant, a nurse or any one else your child would see for health care.

1. In the last 12 months , did your child's doctors or other health providers talk with you about the following:	YES, and my questions were answered	YES, but my questions were not answered completely	NO, but I wish we had talked about that	NO, but I already had information about this topic and did not need to talk about it any more
a) Things you can do to help your child grow and learn	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) The kinds of behaviors you can expect to see in your child as he/she gets older	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Issues related to food and feeding	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) Bedtime routines and how many hours of sleep your child needs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) Toilet training	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f) Words and phrases your child uses and understands	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g) How your child is learning to get along with other children	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

2. In the last 12 months , did your child's doctors or other health providers talk with you about the following:	YES, and my questions were answered	YES, but my questions were not answered completely	NO, but I wish we had talked about that	NO, but I already had information about this topic and did not need to talk about it any more
a) Guidance and discipline techniques to use with your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) Ways to teach your child about dangerous situations, places and objects	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Using a car-seat	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) How to make your house safe	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) What you should do if your child swallows certain kinds of poisons	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f) Importance of reading with your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g) Issues related to childcare	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

SECTION II: EXPERIENCE OF CARE

The next questions ask about your overall experiences with the health care your child has received from his or her doctors or other health providers in the last 12 months.

3. In the last 12 months , how often did your child's doctors or other health providers. . .	Never	Sometimes	Usually	Always
a) Take time to understand the specific needs of your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b) Respect you as an expert about your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c) Help you feel like a partner in your child's care	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d) Explain things in a way that you can understand	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e) Show respect for your family's values, customs and how you prefer to raise your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

SECTION III: HEALTH CONCERNS ABOUT YOUR CHILD

The next few questions ask about concerns parents or guardians sometimes have about their child.

4.* Do you have any concerns about . . .	Yes	A little	Not at all
a) Your child's learning, development or behavior	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b) How your child talks and makes speech sounds	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c) How your child understands what you say	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d) How your child uses his or her arms and legs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e) How your child behaves	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f) How your child gets along with others	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

5. In the **last 12 months**, did your child's doctors or other health providers ask if you have concerns about your child's learning, development or behavior?

1
Yes

2
No

3
I don't remember

* Adapted with permission from *Parent's Evaluation of Developmental Status*, © 1997 Frances Page Glascoe, Ellsworth and Vandermeer Press. Any reproduction or adaptation without the express written consent of the publisher is a violation of federal law.

YOUR CHILD'S HEALTH CARE

6. In the **last 12 months**, did your child's doctors or other health providers give you specific information to address your concerns?

1
Yes

2
No

3
I don't remember

4
I did not have any
concerns

7. Did your child's doctors or other health providers ever:

	Yes	No
a) Refer your child to another doctor or other health provider	1 <input type="checkbox"/>	2 <input type="checkbox"/>
b) Test your child's learning and behavior	1 <input type="checkbox"/>	2 <input type="checkbox"/>
c) Note a concern about your child that should be watched carefully	1 <input type="checkbox"/>	2 <input type="checkbox"/>
d) Refer your child for speech-language or hearing testing	1 <input type="checkbox"/>	2 <input type="checkbox"/>

SECTION IV: QUESTIONS ABOUT YOUR FAMILY

A child's doctors or other health providers sometimes ask questions about a child's family. These questions help them provide the best care possible for your child. These questions can be asked in a survey that you fill out before the visit, in the waiting room or when you talked with your child's doctor or other health provider during your child's visit.

8. In the **last 12 months**, did your child's doctors or other health providers **ask** you:

	Yes	No
a) If you or someone in your household smokes	1 <input type="checkbox"/>	2 <input type="checkbox"/>
b) If you or someone in your household drinks alcohol or uses other substances	1 <input type="checkbox"/>	2 <input type="checkbox"/>
c) If you ever feel depressed, sad or have crying spells	1 <input type="checkbox"/>	2 <input type="checkbox"/>
d) If you have any firearms in your home	1 <input type="checkbox"/>	2 <input type="checkbox"/>
e) To talk about any changes or stressors in your family or home	1 <input type="checkbox"/>	2 <input type="checkbox"/>

SECTION V: YOUR CHILD'S PERSONAL DOCTOR OR NURSE

9. A **personal doctor or nurse** is a health professional who knows your child well and is familiar with your child's health history. This can be a general doctor, a pediatrician, a specialist doctor, a nurse practitioner or a physician assistant. Do you have one person you think of as your child's personal doctor or nurse?

1
Yes

2
No

10. Do you have more than one person you think of as your child's personal doctor or nurse?

1
Yes

2
No

SECTION VI: YOUR CHILD, YOU, AND YOUR FAMILY

These last questions are about your child, you, and your family. We are asking these questions to better understand the children and families we care for so that we can improve our services. Remember this survey is **confidential** and results will be kept completely anonymous.

11. Is the child named in this survey your first child?

1
Yes

2
No

3
The question does not
apply to me

12. How long did you breastfeed your child?

1
My child was not breastfed

2
Less than a month

3
A month or more

4
I am still breastfeeding

13. How many days in **a typical week** do you or other family members read a book with your child?

1
Everyday
(7 days)

2
5-6 days

3
3-4 days

4
1-2 days

5
No Days
(0 days)

14. What is the highest grade or level of school that you have completed?

1
8th grade
or less

2
Some high
school, but did
not graduate

3
High school graduate
or GED

4
Some college
or 2-year degree

5
4-year college
graduate

6
More than
a 4-year college
degree

15. In the **last 12 months**, have you had two weeks or more during which you felt sad, blue, depressed or lost pleasure in things you usually cared about or enjoyed?

1
Yes

2
No

16. How much trouble have you had paying for. . .

	A Lot of Trouble	Some Trouble	No Trouble
a) Child's health and medical expenses	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b) Supplies like formula, food, diapers, clothes and shoes	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c) Healthcare for yourself	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

YOU'RE DONE!!

Thank you for completing the survey. Please put the survey in the envelope provided and drop it off in the "completed survey" box before you leave.

You have helped make a difference.

--IMPORTANT NOTE--

If health care provider-level information is desired then health care provider level sampling is conducted.

However, in some practices, this is not possible due to office-level approaches to care that do not make health care provider level sampling feasible (for example: person who prepares the charts does so for all patients who come to the office that day and not for individual health care providers).

If this is the case, then a question should be added to ~~after~~ question 10 that asks parents report which doctor or other health care providers are their child's personal doctor or nurse. The health care providers in the office are then listed, including physicians and nurses that provide well-child care.

Health care provider-level analyses is performed only for those parents who noted that health care provider as their child's personal doctor or nurse.

Below is an example of a question that can inserted in to the survey to allow for health care provider-level analysis.

12. Which of these people do you think of as your child's personal doctor or nurse? Please mark one or more.

- | | | | | | |
|--------------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| Doctor A | Doctor B | Doctor C | Nurse D | Nurse E | Nurse F |
| 7 <input type="checkbox"/> | | | | | |
| Other Person (Name Not Listed Above) | | | | | |

Chapter 3

Sampling and Survey Administration Protocol

Sampling and Survey Administration Protocol for the In-Office, Reduced-Item PHDS

The sampling and survey administration protocol for the in-office PHDS is designed to identify parents who can validly report about the quality of preventive and developmental care received during the last 12 months or since the child was born. The procedures outlined in this chapter provide a standardized method that can be applied across office settings so that similar samples of parents/guardians are identified to complete the survey.

The protocol specified is designed to achieve **150** completed surveys per office over a three consecutive months, with ~~50 completed surveys~~ obtained per month. If individual health care provider-level findings are desired, then a total of **75** completed surveys per provider are needed over a three-month period, with ~~25 completed surveys~~ obtained per month.

In order to obtain sufficient samples of completed age-specific surveys, it is recommended that the sample be stratified by age. One fourth of the ~~completed surveys~~ from parents of children aged three through 9.99 months old, one-fourth for children 10-18.99 months old, and one-half for children who are 19-46.99 months old at the time of sampling and survey administration. Within each month, once the completed surveys quota is obtained, then sampling and survey administration are stopped until the beginning of the next month.

Therefore, for the **office-level assessment** quota of **50** completed surveys per month, in order to obtain **150** completed surveys over the entire three-month period:

- ✓ ~~Ten~~ completed surveys per month per office from parents of children aged 3 months through 9.99 months old, 30 completed surveys over three-month period.
- ✓ ~~Ten~~ completed surveys per month per office from parents of children aged 10 months through 18.99 months old, 30 completed surveys over three-month period.
- ✓ ~~Thirty~~ completed surveys per month per office from parents of children aged 19 months through 46.99 months old, 90 completed surveys over the entire three-month period.

For the **health care provider-level assessment** quota of **25** completed surveys per month, in order to obtain **75** completed surveys over the entire three-month period:

- ✓ ~~Five~~ completed surveys per month per health care provider from parents of children 3-9.99 months old, 15 completed surveys over the entire three-month period.
- ✓ ~~Five~~ completed surveys per month per health care provider from parents of children 10-18.99 months old, 15 completed surveys over the entire three-month period.
- ✓ ~~Fifteen~~ completed surveys per month per health care provider from parents of children 19-46.99 months old, 45 completed surveys over the entire three-month period.

Preparing for Sampling and Survey Administration

Prior to conducting sampling and survey administration it is first important to prepare for the sampling and survey administration.

The following are important steps to take:

Exploratory Research about Well-Child Care Visit Rates

Identify the three consecutive months planned for sampling and survey administration. Examine office visit records books for the number of children ages three through 46.99 months who received well-child care at the office during the same three-month period in the previous year. This number should be tallied for each age group (3-9.99, 10-18.99, 19-46.99 months).

Based on the tallied numbers gathered above, the following options for sampling and survey administration are recommended:

- Option #1. If the number of children across and within each age group who received well-child care is ~~equal to or above~~ the completed surveys quota listed above, then sampling and survey administration can occur during those three consecutive months. Within each month, sampling and survey administration is stopped when the completed surveys quota for that month is reached.
- Option #2. If the total number of children ages three to 46.99 months old who received well-child care in three consecutive months examined is ~~significantly less than~~ the completed surveys quota listed above, then alternate months with possibly higher well-child visit rates should be examined.
 - Option #2A. If there are no months for which the number of children who received well-child care is equal to the completed surveys quota, then the three ~~consecutive months that have the highest number of~~ children receiving well-child care is chosen for sampling and survey administration AND parents of all eligible children receive the survey during a three-month period.
- Option #3. If the total number of children ages three to 46.99 months old who received well-child care is equal to or above the completed surveys quota BUT the number of children WITHIN each age-specific category is ~~below the age-specific completed surveys quota~~, then parents of all eligible children receive the survey, and a stratified sample is not necessary.

Confidential Survey Administration

A confidential survey administration process be used. Therefore, parents/guardians are ~~not be asked~~ to put their names on the survey. The person who collects the surveys and enters information about completed surveys must destroy all name-specific information about that child from all sampling and survey administration materials. Results from individual surveys cannot be reported at any time, but rather, population-level findings about all those who completed the surveys or findings about population sub-groups can be presented.

Institutional Review Board (IRB) Process

IRB approval should be obtained for this project. The patient's rights are first and foremost. IRBs make sure that consumer/patient rights are protected. The protocols outlined in this manual address the legal issues related to administering surveys in the office. If your organization does not have an IRB, a review is still possible through independent IRBs. Also, almost every educational institution has an IRB. If possible, partner with your local university, and they may be able to have their IRB review the project at no cost to you.

Toll Free Number and Email Address for Parents' Questions

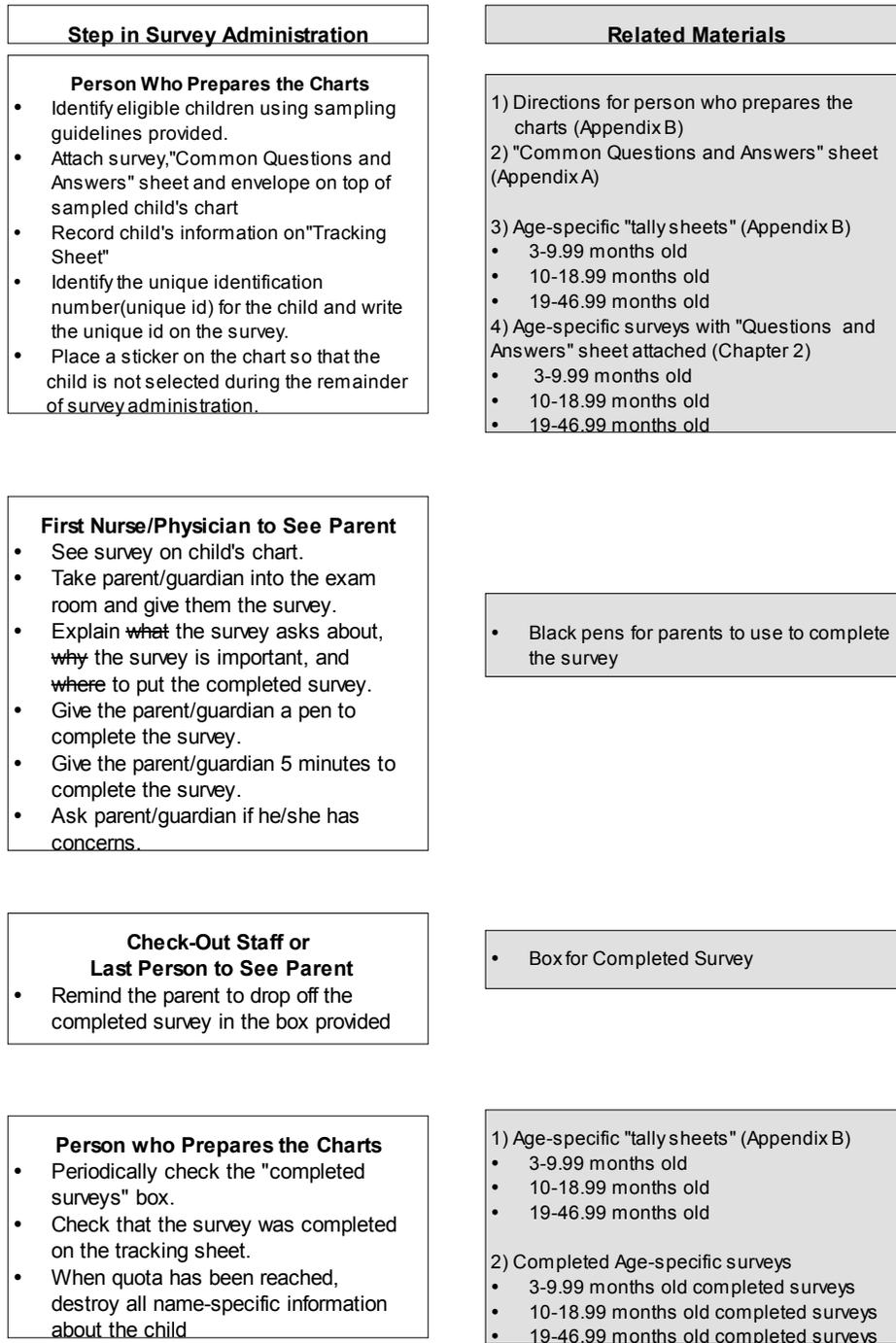
During survey administration parents are given a "Common Questions and Answers" sheet (See Appendix A) which has a space for the office to note a toll-free number that parents can call if they have questions about the survey and/or topics raised in the survey. We recommend having a toll-free number so that parents have an opportunity to ask questions that they may not be able to ask or feel comfortable asking during the office visit. Past experience has shown that very few parents (less than 2 percent) will actually choose to contact the office with questions either via the phone number or via an email address; however, they highly value having the option to contact someone if they do have questions.

Standardization of the Survey Administration Protocol and Survey Instruments

In order to assure comparability, the recommended sampling and survey administration protocols should be followed, and the format of the PHDS should not be altered. Differences in where and how the survey is administered and significant alterations to the survey itself may affect the findings and compromise cross-practice comparability. Therefore, if there are differences in where and how the survey is administered and if the format of the survey is significantly altered, comparing the findings across practices is discouraged.

Overview of Sampling and Survey Administration

Below is a diagram listing the key steps and specific materials used for sampling and survey administration:



Sampling Frame

Those children who have received well-child care at the office in the last 12 months comprise the sampling frame for the survey.

Children whose parents/guardians are eligible to receive the survey are those meet the following criteria:

- ⇒ Child is coming into the office for well-child visit.
- ⇒ Child is between the ages of three and 46.99 months old at the time of survey administration.
- ⇒ Child has been to that office in the last 12 months for a well-child visit.

Sampling Two Children In The Same Family Having a Well-Child Visit on the Same Day

If a parent/guardian has two children who meet the eligibility criteria and both are receiving well-child care at the office that day, then the parent is given the age-appropriate survey for the ~~oldest eligible~~ **oldest eligible** child and instructed to complete the survey only for the oldest child.

Attaching the Surveys to the Child's Chart

The person who prepares the medical charts for the office visit should conduct the sampling. **Appendix B** provides instructions sheet and a tracking form that the person who prepares the charts can use to determine if a child is eligible to receive the survey and to document important information about a child and his or her health care.

Information to be Gathered At the Time of Sampling

Appendix B also provides tracking form that the person who prepares the charts can use to document important information about the child and child's health care use. This information will be used to guide the person who prepares the charts in assuring that only eligible children's parents receive the survey.

Information to be gathered at the time of sampling includes:

- ↳ Child's age in months
- ↳ Child's gender
- ↳ Health care provider child is seeing that day for well-child visit
- ↳ Date of last well-child visit at the office and the health care provider who delivered well-child care.

Making Sure A Same Child is Not Sampled More Than Once

Some children may come into the office for a well-child visit more than one time during the three-month sampling period. For example, a child may come in for the 4-month and the 6-month well-child visits during the three months. A survey should not be attached to a child's chart more than once during the three-month survey period. Therefore, the person who prepares the charts should mark each chart to which he or she has attached a survey so that no additional surveys are placed in the child's chart at later visits.

Length of Time for Sampling

Overall, sampling and survey administration lasts for **three consecutive months**.

Sampling occurs daily until the ~~quota number of surveys is obtained for that month~~, at which time sampling and survey administration ~~stops for that month~~. Continuous sampling and survey administration over a three-month period is recommended only if the quota number of surveys has ~~not been~~ obtained during a given month.

Survey Administration Protocol

Overview of Protocol

1. The person who prepares the chart will attach the survey to the child's chart.
2. The check-in person will note that there is a survey on the child's chart and make sure that the first nurse or physician who will see the child knows that he/she is to give the survey to the parent.
3. When an exam room is available, the first nurse or physician who picks up the child's chart will ask the parent to come into the exam room and will give the parent/guardian the survey to complete. This nurse/physician leaves the parent alone in the exam room for five minutes to complete the survey.
4. After completing the survey, the parent puts the survey into the envelope provided and into the "completed surveys" box. Parents can also choose to hand completed surveys to office staff to place in the completed survey box.
5. When the nurse/physician comes back into the exam room, ask the parent about any concerns he/she may have about his/her child's learning, developmental and behavior.
6. The person who preps the charts will periodically check the "completed surveys" box. Once the target number of completed surveys has been reached, then survey administration will end for that month.

Overview of Roles and Responsibilities for Office Staff

Chart-Pren Person	First Nurse/Physician to See Parent/Child	Check-Out Staff	Chart-Pren Person
<ul style="list-style-type: none"> • Attach age-specific surveys to the charts of eligible children • Document all information on the tracking sheet (Appendix B) for the surveys placed in the chart • Identify the unique identification number (unique id) for the child and write the unique id on the survey • Place a post-it or sticker on the chart of the child so that the child WILL NOT be selected again. 	<ul style="list-style-type: none"> • Take the parent and child into the exam room. • Give parent/guardian the survey, a "Common Questions and Answers" sheet (Appendix A), pen, and envelope to place the complete survey. • Use the script provided (Appendix C) to ask the parent to complete the survey. • Encourage parent/guardian to try and complete the survey before the exam begins. • Place any completed surveys received from the parent in the "completed surveys" box. • Ask the parent/guardian if they noted any concerns about the child in the survey. 	<ul style="list-style-type: none"> • Remind parents/guardians to turn in their completed surveys into the box. 	<ul style="list-style-type: none"> • Periodically collect surveys from the box • On the tracking sheet (Appendix A) check the survey was returned and completed and enter in all remaining information • When age-specific quota is reached for the month cease inserting surveys in the children's charts • At the end of survey administration destroy the name-specific information that links the completed survey to the child.

Timing of Survey Administration

- ⇒ Survey administration begins at the ~~same time each month~~ (first day of the month or first Monday of the month).
- ⇒ Within each month, ~~once the quota number of surveys is obtained~~, then survey administration ~~stops for that month~~. Continuous survey administration over a three-month period is recommended only if the quota number of surveys has ~~not been~~ obtained.

Tracking Returned Surveys

As has been highlighted, a “completed surveys” box should be labeled well, placed in a spot in the office that is highly visible to parents, labeled well and that parents/guardians will pass on their way out of the office. Again, parents/guardians place their completed surveys in an envelope and then into the “completed surveys” box or can hand the completed surveys enclosed in the envelope to office staff to place in the box.

The person who is responsible for preparing the charts and for attaching the surveys to the charts periodically checks the “completed surveys” box. Depending upon the number of parents/guardians who complete the survey per day, for most practices, the person who prepares the charts can check the “completed surveys” box weekly. In a private space that is not open to patients, the person who prepares the charts to opens the envelopes and record all tracking information about the completed survey, and file the completed survey in a safe and secure spot.

Asking Parents About Their Concerns About Their Child's Learning, Development or Behavior

Appendix C, the talking points for nurses and/or physicians giving the survey to the parent, reminds the nurse and/or physician seeing the child to specifically ask the parent about whether he/she noted in the survey any concerns about his/her child's learning, development or behavior. Questions **#4 a-f** of the PHDS are adapted from the *Parents' Evaluation of Developmental Status* ©, and ask parents about specific concerns they may have about their child's learning, development and behavior. Because we recommend a confidential survey administration process, the nurse and/or physician who will be seeing the child during the well-child visit does not see parents' actual responses to these questions. In order to assure that parents' concerns are addressed during the office visit, we recommend that the nurse/or physician seeing the child specifically ask the parent.

Printing the Surveys

~~Number of surveys to print:~~ Several factors need to be considered in determining the total number of surveys to print for the three- month survey administration period. In addition to printing the completed survey quota that is desired, the starting sample size for surveys to be printed is inflated by the following factors:

- *Parents Unable to Complete the Survey:* Not every parent who is asked to complete the survey will be able to complete the survey. Based on the pilot tests in Vermont, approximately five percent of parents will not be able to complete the survey in the office.
- *Parents and children who do not show up for the well-child visit.* The percent of parents and their children who do not show up for well-child visits should also be examined and accounted for in determining the number of surveys that may be placed on a chart but never actually given to a parent to complete.

Tip: *Print enough surveys for the first month of survey administration, and monitor the factors noted above in order to determine the number of surveys printed for the second and third months of survey administration.*

~~Printing the age-specific surveys in different colors:~~ It is recommended that the three age-specific surveys (3-9.99 months, 10-18.999 months, 19-46.99 months) be printed in three different colors. Due to the shading and tables that are embedded in the surveys, light colors are recommended, such as yellow, light blue, light green, and pink.

Printing the “Common Questions and Answers” Sheet for Parents (Appendix A)

It is recommended that this sheet be printed in color and on a different color of paper than is used for printing the age-specific surveys.

Chapter 4

Scoring Protocol

Scoring Protocol for the In-Office, Reduced-Item PHDS

Once the completed survey quota has been reached, the results are tabulated and scored in way that will allow for establishing targeted improvements in care.

This chapter provides an overview of data cleaning and analytic steps that can taken to insert the findings into the data reporting templates described in *Chapter 5* and provided in **Attachment 1** and **Attachment 2**. These templates are based on extensive one-on-one interviews and focus groups with health care providers and parents participating in our pilot project.

We know that few health care providers have the time, resources or skill sets needed to analyze and clean survey data. Generating the item-level frequencies will be extremely informative and can guide you in determining where improvements are needed. However, the templates provided allow for more strategic and targeted displays of the findings that may be more easily read and used by both health care providers and parents.

There may be help out there for you! Consider persons or organizations that you can partner with, who can help you score your survey data. Think creatively! For example, if you need statistical expertise to help you design your analysis, consider a partnership with a local university. Researchers may assist you with the analysis in exchange for the ability to use the data for more complex analyses or the rights to publish a peer-reviewed journal article.

Tip: *The scoring and templates in this manual represent one way of reporting the findings to health care providers and parents. The PHDS technical assistance manual on the FACCT Web site (www.facct.org) provides detailed descriptions of additional ways that the data can be analyzed and reported to various stakeholders.*

Step 1: Enter the complete survey responses into a database

A data base is created for analytic purposes. This database includes the following:

- Information gathered at the time of sampling on the tracking sheet and entered by the person who prepares the chart (See Page 38 and **Appendix A**)
- Information from the completed surveys. As you will see next to each response box on the age-specific surveys, there is a small number that indicates the response code entered into the database for that person for that particular survey question.

For example, for the question below a “1” is entered into the database if the parent answered never, a “2” is entered if the parent answered sometimes, a “3” is entered if the parent answered “usually,” and “4” is entered if the parent answered “always.”

3. In the last 12 months , how often did your child's doctors or other health providers. . .	Never	Sometimes	Usually	Always
a) Take time to understand the specific needs of your child	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

Appendix D provides a recommended data dictionary that includes the original survey questions and all analytic variables created.

Step 2: Prepare the database for analysis

Many people feel that the most difficult part of any analysis is the data preparation that needs occur prior to starting the analysis itself. Data preparation is necessary and is essential to ensuring valid results of the analysis. The following are necessary steps in preparing the data for analysis. The steps do not necessarily need to be conducted in the order presented.

1. *Verify survey completeness.* Only surveys with at least 80 percent of the questions that ~~all respondents answer~~ completed are included in the analysis.
2. *Check for duplicate data records.* Make sure that every record has a unique identifier.
3. *Check for out-of-range values.* Run frequencies on all of your variables to check for out-of-range values or odd-looking distributions. For example, question 3a asks respondents to report how often their child's health care providers take time to understand the specific needs of their child. There are

four possible response codes. If a number that is not between 1 and 4 has been entered, then there may be a data entry problem.

4. *Recode missing values.* Missing values are recoded in some way so that you know not to include them in the analyses. Designate missing values in the database to ensure that they are omitted when calculating measures of care. Also, recode the response options of 'refused' (primarily for telephone administration) and 'don't know' to be missing values. If you recode missing responses to "0," be very careful not to include them in your analyses, as this will affect your results.

Here are some quick analysis tips:

- *Always label your variables and make sure your data dictionary is updated. Good documentation can make the project run smoother!*
- *Create a backup of your data set in case of emergency. Also, create temporary and permanent data sets wisely. Think about what you would need to do if you lost the data.*
- *Always keep a copy of your original data set.*

Step 3: Create analytic variables for analysis

There are five measures of care in the in-office PHDS:

1. Anticipatory guidance and parental education (Questions #1-2)
2. Family-centered care (Question #3)
3. Ask about and address parental concerns (Question #5)
4. Follow-up for children at risk for developmental/behavioral delays (#7)
5. Assessment of the family (#8)

This section provides general information about the analytic variables needed for templates provided in Chapter 5. Chapter 5 also provides detailed information about how these five aspects of care can be reported back to health care providers and to parents.

The following variables will be needed to complete the data reporting templates:

- **Anticipatory guidance and parental education (Questions #1-2)**
 - a. On average, the percent of topics parents reported were discussed in the last 12 months. In order to calculate this percent, it is recommended that the "yes" responses be recoded to 100 and the "no" responses be recoded to zero. For each parent, a mean is calculated (only parents who answered all of the questions are included). The mean value across all eligible parents is, on average, the percent of topics discussed.
 - b. The proportion of parents who reported either "Yes, and my questions were answered" **OR** "No, but I already had information about that and did

- not need to talk about it any more” to ~~all of the age-appropriate topics~~ asked about in the PHDS.
- c. The proportion of parents who reported one or more times “No, but I wish we had talked about that” OR “Yes, but my questions were not answered.”
 - d. Item-level frequencies runs for questions #1 and #2 that list the percent of parents who said “Yes, and my questions were answered,” “No, but I already had information about that and did not need to talk about it any more” and either “No, but I wish we had talked about that” OR “Yes, but my questions were not answered.”
 - e. For the template recommended to report the findings to parents, the top two topics for which parents’ informational needs were met and the top two topics for which the parent’s informational needs were NOT met are listed. Therefore, the items are ranked in order based on the percent of parents who said “No, but I wish we had talked about that” OR “Yes, but my questions were not answered”.

Family centered care (Question #3)

- a. On average, the percent of topics for which parents reported that family-centered care was “usually” or “always” provided. In order to calculate this percent, it is recommended that the “usually” and “always” responses be recoded to 100 and the “sometimes” and “never” responses be recoded to zero. For each parent, a mean is calculated across the questions (only parents who answered all of the questions are included). The mean value across all eligible parents is, on average, the percent of topics for which parents reported that family-centered care was received.
- b. The proportion of parents who reported one or more times “Never” OR “Sometimes.”
- c. Item-level frequencies for question #3 that list the percent of parents who reported “Usually” OR “Always.”

Ask about and address parental concerns (Questions #5-#6)

- a. The proportion of parents who were asked if they had concerns about their child.
- b. The proportion of parents who noted concerns about their child’s learning, development or behavior who were asked whether they had concerns about their child (Question #4 asks parents if they have specific concerns about their child. A count variable is created that counts the number of questions for which parents reported “yes” or “a little.” A binomial variable is created that categorizes parents as those who reported a concern versus those who did not report a concern about their child.
- c. The proportion of parents who noted concerns about their child’s learning, development or behavior who received information to address their concerns.

Follow-up for children at risk for developmental/behavioral delays (#6)

- a. The proportion of children at risk for developmental/behavioral delays who received some form follow-up care.
 - i. Identifying children at risk: Question #4 is derived from the Parents Evaluation of Developmental Status¹ (PEDS) tool. Specific concerns that parents have about their children at specific ages can be an indication of a child's risk for developmental/behavioral delays. Children whose parents have one or more "indicator" concerns (parent said "yes" or "a little") are identified as being at risk. The following are the indicator concerns for each age group:
 - ⇒ 3-9.99 months old: #4 a, #4b
 - ⇒ 10-18.99 months old: #4a, #4b, #4f
 - ⇒ 19-35.99 months old*: #4a, #4b, #4c
 - ⇒ 36-46.99* months old: #4a, #4b, #4c, #4d

Children whose parents have noted concerns for only one indicator item are at moderate risk for delays. Children whose parents note two or more concerns to indicators items are at high risk for delays.

-- **Important Note** – This four category age break-out is different than the age break-out for the age-specific surveys (3-9.99 months, 10-18.99 months, 19-46.99 months). The child's age, in months, is documented on the tracking sheet (**Appendix A**) and is used in order to identify whether parents concerns are an indication of the child's risk for developmental/behavioral delays.

- ii. Provision of follow-up care: Question #7 asks parents about steps their child's health care provider may have taken to follow-up or address a child's risk for developmental/behavioral delays. A risk-specific algorithm is recommended to identify children who have received follow-up health care.
 - ⇒ Moderate Risk: Parent said yes at least once to #7 a or #7b or #7c or #7c.
 - ⇒ High Risk: Parent said yes to #7a or #7b or yes to both #7c and #7d.

Assessment of the family (#8)

- a. On average, the percent of topics questions #8c-#8e parents reported were discussed in the last 12 months. In order to calculate this percent, it is recommended that the "yes" responses be recoded to 100 and the "no" responses be recoded to zero. For each parent, a mean is calculated (only

1

- parents who answered all of the questions are included). The mean value across all eligible parents is, on average, the percent of topics discussed.
- b. On average, the percent of topics in question #8a and question #8b parents reported were discussed in the last 12 months. In order to calculate this percent it is recommended that the “yes” responses be recoded to 100 and the “no” responses be recoded to zero. For each parent, a mean is calculated across the questions (only parents who answered both of the questions are included). The mean value across all eligible parents is, on average, the percent of topics discussed.
 - c. The proportion of parents who said “Yes” to all three questions #8c-#8e.
 - d. The proportion of parents who said “No” to all three questions #8c-#8e.
 - e. The proportion of parents who said “Yes” to both questions #8a and #8b.
 - f. The proportion of parents who said “No” to both questions #8a and #8b.
 - g. Item-level frequencies for question #8 showing the percent of parents who said “Yes.”

Tips: The data dictionary in **Appendix D** lists the analytic variables created. This data dictionary can be used to double check that the correct analytic variables are created. Be sure not to overwrite the original items in the database – create new items in case you make a mistake. For more detailed information about how to recode and score analytic measures, please refer to the *Promoting Healthy Development Survey Technical Assistance Manual* at www.facct.org, or email cahmi@facct.org.

Chapter 5

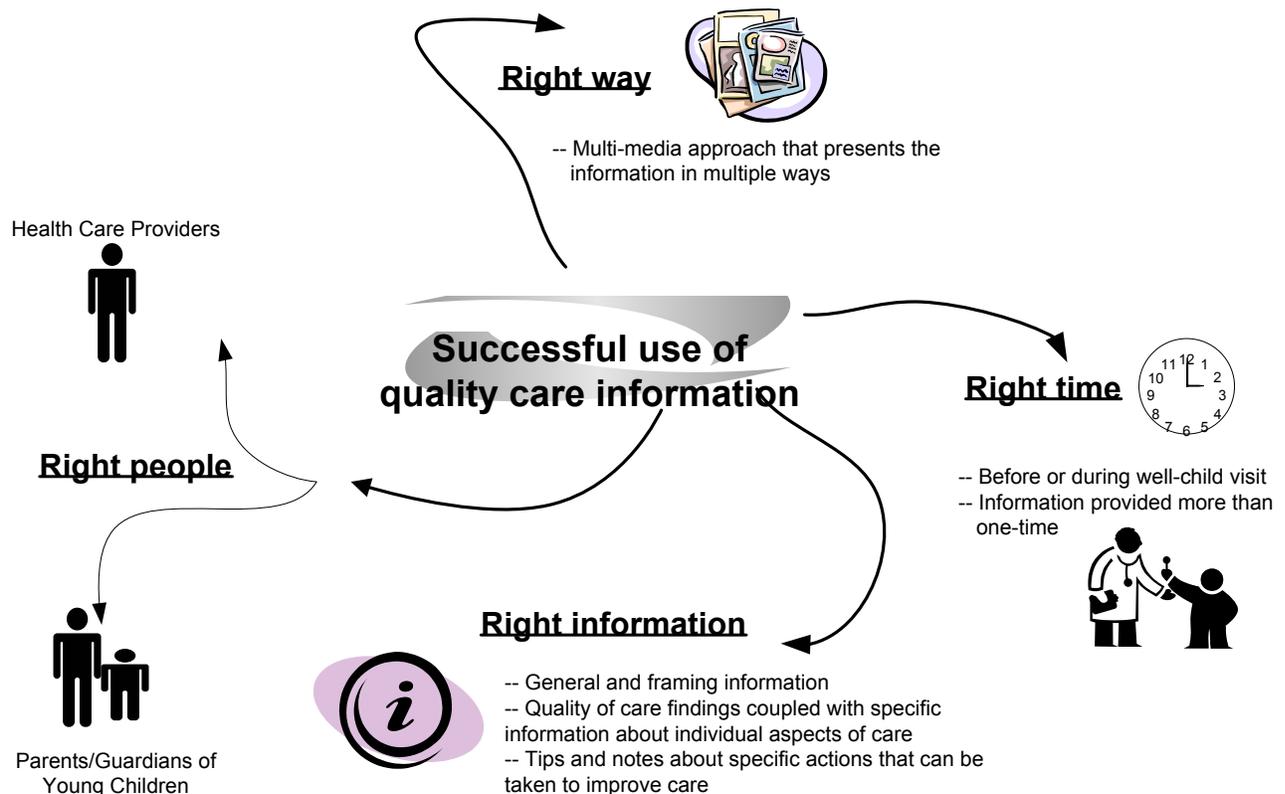
Reporting the PHDS Findings to Health Care Providers and Parents

Reporting the PHDS Findings to Health Care Providers and Parents

The most important part of implementing the in-office PHDS is reporting back the findings to health care providers and parents so that they can be informed about the current level of care and can work together towards improvements.

Research shows that successful use of quality information is achieved when the information contains the following attributes:

- ⇒ The right kind of ~~information~~ information is given, including (1) general, framing information about the importance of the topic evaluated, (2) overall quality of care findings (3) specific information about individual aspects of care and (4) specific actions that can be taken to improve health care.
- ⇒ The right ~~people~~ people receive the information, such as health care providers who provide preventive and developmental care in the office setting and parents/guardians who bring their child in for well-child care and who are primarily responsible for assuring the healthy development of their child.
- ⇒ The information is given at the right ~~time~~ time, which is before or during a well-child visit at which the preventive and developmental care measured in the PHDS is delivered.
- ⇒ The information is given in the right ~~way~~ way, which is through a multi-media approach and delivered more than one time.



Reporting Templates

Attachment 1 and **Attachment 2** provide templates for reporting information about the PHDS and the quality of care findings to health care providers and parents. These templates are based on one-on-one interviews and focus groups conducted with health care provider and parents.

Reporting The Findings to Health Care Providers

General Findings

Research based on health care provider focus groups and interviews showed that pediatric clinicians' value quality information reported by parents in the PHDS more than quality information derived from medical charts or administrative encounter records. Health care providers want the information provided in the templates to describe the following:

- ⇒ General information about the PHDS, how many parents completed the survey, and general information about socio-demographic characteristics of the parents that responded.
- ⇒ Overall, general findings about the quality of care provided. Where possible, comparative information should be provided at practice, state and national levels.
- ⇒ Item-level findings to allow for establishing strategies for targeting improvements.
- ⇒ Additional resources that provide information about the survey, the topics assessed in the PHDS, and quality improvement strategies provided.

Template for Reporting Findings to Health Care Providers

Attachment 1 provides a template for reporting the findings from the PHDS to health care providers. Important characteristics about this template and how to disseminate include the following:

1. An in-person meeting is recommended after analysis of the data and ~~prior~~ to the dissemination of the findings, to assure that health care providers understand the goals and purpose for reporting the findings and to highlight additional resources that providers may access. A person should be present at this meeting that is extremely familiar with the information gathered in the survey and how the findings presented were calculated.
2. The template provided is in a form that is meant to be faxed to health care providers for review. This process was found to be a feasible and useful way to provide information to health care providers.

3. Where and if possible, provide benchmark data and/or comparative findings across practices so that health care providers have a “sense of where they are.”

Additional Tips for Reporting PHDS Data to Health Care Providers

- ✓ **~~Collaborate with groups respected by the audience:~~**
 - In order to add perceived credibility to your report, be sure to mention any collaborative efforts with respected organizations or groups. For example, one state sent a joint letter to providers from four agencies before providing results.
 - In the cover letter accompany the report try to include signatures of names that will be familiar to health care providers.
- ✓ **~~Avoid language that would make the audience defensive, particularly providers:~~**
 - Often when practices and providers receive feedback on their performance, they can be defensive if the language of the feedback is perceived as overly critical or judgmental. Brainstorm questions and concerns that providers may have, and provide information addressing these issues.
 - If comparing practices or providers, display each practice or provider in comparison with the rest of the entire group, rather than displaying all individual provider- or practice-level results.
- ✓ **~~Provide additional information and/or resources:~~**
 - Provide information about related resources, such as Web sites, books, and telephone numbers health care providers can call with questions about the reports and/or aspects of care presented. Include tools to aid in improvement efforts in an Appendix.
- ✓ **~~Display the findings in a multi-media format:~~**
 - Where possible, enable providers to view and review the findings in multiple formats, such as on a Web site, through in-person meetings, and to call a toll-free phone number with questions.

Reporting the Findings to Parents

General Findings

Research based on parent focus groups and cognitive interviews show that parents want to give their child’s health care providers feedback that can be used to inform improvements in care. Research also shows that parents want information to educate them about what to expect from their child’s health care providers in the area of preventive and developmental care, as well as tips and guidance for how to be a partner in the process of ensuring high-quality care for their child.

- ⇒ General information about the PHDS, how many parents completed the survey, and how their child's health care providers are going to use the information to improve care.
- ⇒ Item-level findings coupled with specific tips or actions that parents can take to improve care.
- ⇒ General statements about what health care parents can and should expect in at their child's well-visits.
- ⇒ The parent's role as a partner in their child's health care is emphasized.
- ⇒ Additional resources listed that provide parents with information about the survey, the topics assessed in the PHDS, and how he/she can work with their child's health care providers.

Template for Reporting to Parents

Attachment 2 provides a template for reporting the findings about the PHDS to parents. Important characteristics about this template and how to disseminate include the following:

1. The template is meant to be in brochure or pamphlet form. Parents who participated in the one-to-one interviews and focus groups indicated a strong preference that they receive this pamphlet before OR during their child's well-child visit from their child's health care providers and/or other office staff.
2. It is important that parents understand why this information is being given to them and how the health care providers in their office plan to use the information to improve the health care they provide. Office staff who give the brochure to the parent can note how the survey findings are being used. This important information can also be noted in a cover letter that accompanies the brochure in the mail.

Additional Tips for Reporting PHDS Data to Parents

- ✓ ~~**Collaborate with groups respected by the audience:**~~
 - In order to add perceived credibility to your report, be sure to mention any collaborative efforts with respected organizations or groups.
- ✓ ~~**Provide additional information and/or resources:**~~
 - Provide information about related resources such as Web sites, books, and telephone numbers parents can call with questions about the reports and/or aspects of care presented.
- ✓ ~~**Be aware of issues surrounding the confidentiality of results:**~~
 - Only report on practices or providers that have a sufficient number of respondents, so that the risk of breaching confidentiality is minimized.
- ✓ ~~**Display the findings in a multi-media format:**~~
 - Where possible, enable parents to view the findings in multiple formats, such as on a Web site or to call a toll-free phone number with questions.

Appendices

Appendix A: Common Questions and Answers Sheet for Parents



QUESTIONS & ANSWERS

Who is sponsoring survey?

(INSERT TEXT ABOUT SPONSOR). (INSERT PRACTICE NAME) will use the information gathered from this survey to improve the health care they provide.

What is the purpose of this survey?

The purpose of this survey is gather information about health care the providers in (INSERT PRACTICE NAME) have provided to your young child when he or she was not sick. This health care is often called “well-child care” or health care often provided during a routine check-up. We know that there are some things that only families can tell us about the health care their children receive. That is why we asking parents or guardians like you these important questions.

How will what is learned from this survey be used?

The ultimate goal for this survey is to help (INSERT PRACTICE NAME) provide the best health care possible for your children. What is learned through this survey will be summarized in a report that will be read by the doctors, nurses and other office staff at (INSERT PRACTICE NAME). The information in the report will be used to set priorities and guide plans for improving services and care.

Can I get a copy of this report?

Yes! The report is expected to be finished by (INSERT DATE). If you want to have a copy of the report mailed to you, call (INSERT NAME) on the toll free line: (INSERT NUMBER) or email her at (INSERT EMAIL MESSAGE). Leave your name and phone number with your message and she will get back to you as quickly as possible.

If I have questions, who can I call?

You can call (INSERT NAME) on the toll free line: (INSERT NUMBER) or email her at (INSERT EMAIL MESSAGE).. You may also contact (INSERT NAME), the Institutional Review Board Administrator at the (PRACTICE NAME) (INSERT NUMBER) if you have any questions about your rights as a participant in this research project.



Appendix B: Tracking Sheet and Instructions for Inserting the PHDS into the Child's Chart

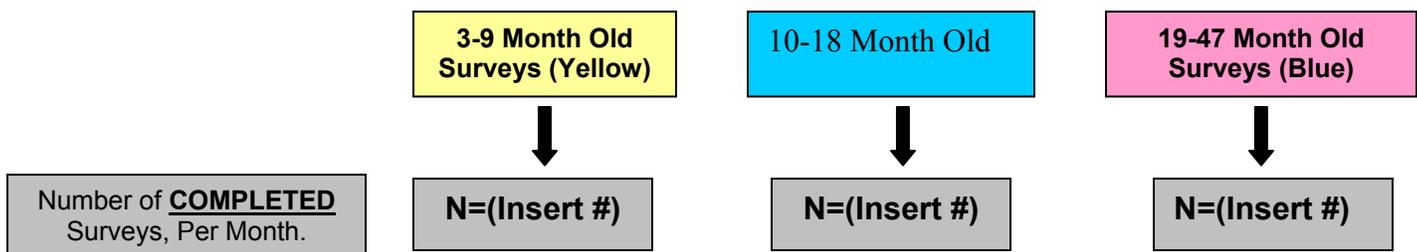
What you should have:

- Packet with the materials of surveys for parents of 3-9.99 month olds
- Packet with materials of survey for parents of 10-18.99 month olds
- Packet with materials of survey for parents of 19-46.99 month olds

In each packet you will find: A "tracking" sheet for you to complete, Surveys that have a letter for the parents to read and an envelope for them to put completed surveys, A large envelope for you to put the completed surveys when the target number of surveys has been reached

Instructions:

1. Starting on (INSERT DATE) you will begin identifying children eligible to receive the survey.
2. Until you reach your target number of completed surveys (INSERT NUMBER), you want to give the surveys to all children who have been in for well-child care before and are in this age range. (Target # is based on completed surveys, not surveys handed out)
3. While prepping the charts, when you see that a child is a) within the **age range** and b) is **there for a well-child** visit then you would and c) has been in for well-child care before:
 - a. Grab the age-appropriate survey (3-9 mos, 10-18 mos, 19-46.99 mos)
 - b. Write in the survey # and all related child & health care information
 - c. Attach the survey to the chart
 - d. Place a sticker on the chart so that in the next few months, if the child comes back in for well-child care, you DO NOT give them another survey.
4. When calling to remind the parent about the visit, ask them to come ten minutes early or give them the option to complete the online survey that night before they come in.
 - ❖ For the parents who do not choose to do the online survey, attach the survey to the child's chart. These surveys are specific to the age of the child.
 - ❖ For the parents who choose to do the online survey, follow the instructions on page two of this document.
5. You will need to check the "completed surveys box" that parents will be asked to drop off their completed surveys.
6. Once you have a completed survey, mark that the survey has been completed on the tracking sheet and enter in other information.



- ❖ **This exact process is repeated again, beginning (INSERT DATE OF 2nd Month) . And again in (INSERT DATE OF THE THIRD MONTH) the first Monday of the following month.**

Appendix C:

Instructions For Nurses/Physicians Giving the Parent the Survey to Complete

- ⇒ Starting on the (INSERT DATE) you may see a survey chart attached to the charts of children 3-48 months old. This process will continue for (INSERT DATES)
- ⇒ When you see that survey on the child's chart, give the parent the survey in the exam room before you care for the child. Try and give the parent at least five minutes to complete the survey.
- ⇒ When you give the survey to the parent please explain the following to parents:
 - 1. I would like you to please fill out this important survey. We are asking you to complete this survey because it will help us to understand how we can make health care for your child better.**
 - 2. This is a survey about health care this child has received in the past. Don't answer this survey about care received for your other children.**
 - 3. This survey is confidential.** Do not write your name or your child's name on the survey. When you are finished put the survey on the envelope and then drop it off in the "completed" survey box.
 - 4. This letter has more information about the survey for you.**
 - 5. Please use this black pen when answering this survey.**
- ⇒ When you come back in the office
 - 1. Ask the parent to remember to put the completed survey in the "completed survey box". If they need more time, let them know they can continue to complete the survey but only respond about care provided in the past and not care provided today.**
 - 2. Ask the parent if they noted any concerns about their child's learning, development and behavior in the survey.**

Appendix D:

Data Dictionary for Reduced-Item PHDS Surveys and Analytic Variables

Variable	Description of Variable (Source of Data)	Response Choices
Part 1: Data Variables from the tracking sheet (Appendix B)		
CHDAGE	Child's age in months (<i>tracking sheet</i>).	
GENDER	Male/Female (<i>tracking sheet</i>).	1. Male 2. Female
PROVCH	Provider child seeing (<i>tracking sheet</i>).	Provider names and/or codes listed.
PROLSTWCV	Provider for last well child visit (<i>tracking sheet</i>).	Provider names and/or codes listed.
Part 2: Data Variables from the Age-Specific Item-Reduced PHDS Surveys (Chapter 2)		
Part 2A	Items asked in only the Survey for Children 3-9.99 Months Old	
AGPE3_1A	#1a. In the last 12 months, did your child's doctors or other health providers talk with you about things you can do to help your CHILD grow and learn? (<i>Survey for children 3-9.99 months old</i>)	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_1B	#1b. In the last 12 months, did your child's doctors or other health providers talk with you about the kinds of behaviors you can expect to see as your CHILD gets older? (<i>Survey for children 3-9.99 months old</i>)	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_1C	#1c. In the last 12 months, did your child's doctors or other health providers talk with you about breastfeeding? (<i>Survey for children 3-9.99 months old</i>)	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_1D	#1d. In the last 12 months did your child's doctors or other health providers talk with you such as introduction of solid foods? (<i>Survey for children 3-9.99 months old</i>)	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_1E	#1e. In the last 12 months, did your child's doctors or other health providers talk with you about the importance of placing your CHILD on his/her back when going to sleep? (<i>Survey for children 3-9.99 months old</i>)	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_1F	#1f. In the last 12 months, did your child's doctors or other health providers talk with you about where your child sleeps (such as the location and type of crib your child may sleep in)? (<i>Survey for children 3-9.99 months old</i>)	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_1G	#1g. In the last 12 months did your child's doctors or other health providers talk with you about night waking and fussing? (<i>Survey for children 3-9.99 months old</i>)	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.

Variable	Description of Variable (Source of Data)	Response Choices
AGPE3_2A	#2a. In the last 12 months, did your child's doctors or other health provider's talk with you about how your child communicates his/her needs? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_2B	#2b. In the last 12 months, did your child's doctors or other health providers talk with you about what your child is able to understand? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_2C	#2c. In the last 12 months, did your child's doctors or other health providers talk with you about how your child responds to you, other adults, and caregivers? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_2D	#2d. In the last 12 months, did your child's doctors or other health providers talk with you about how to avoid burns to your child such as changing the hot water temperature in your home? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_2E	#2e. In the last 12 months, did your child's doctors or other health providers talk with you about using a car seat? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_2F	#2f. In the last 12 months, did your child's doctors or other health providers talk with you about how to make your house safe? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_2G	#2g. In the last 12 months, did your child's doctors or other health providers talk with you about the importance of showing a picture book and reading with your child? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE3_2H	#2h. In the last 12 months, did your child's doctors or other health providers talk with you about issues related to childcare? <i>(Survey for children 3-9.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore. <i>(Survey for children 3-9.99 months old)</i>
Part 2B	Items asked in only the Survey for Children 10-18.99 Months Old	
AGPE101A	#1a. In the last 12 months, did your child's doctors or other health providers talk with you about things you can do to help your child grow and learn? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE101B	#1b. In the last 12 months, did your child's doctors or other health providers talk with you about the kinds of behaviors you can expect to see in your child as he/she gets older? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.

Variable	Description of Variable (Source of Data)	Response Choices
AGPE101C	#1c. In the last 12 months, did your child's doctors or other health providers talk with you about vitamins and foods your CHILD should eat? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE101D	#1d. In the last 12 months, did your child's doctors or other health providers talk with you about bed and naptime routines? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE101E	#1e. In the last 12 months, did your child's doctors or other health providers talk with you about words and phrases your CHILD uses and understands? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE101F	#1f. In the last 12 months, did your child's doctors or other health providers talk with you about night waking and fussing? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE101G	#1g. In the last 12 months, did your child's doctors or other health providers talk with you about whether your child sleeps with a bottle? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE101H	#1h. In the last 12 months, did your child's doctors or other health providers talk with you about weaning your child from a bottle? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE102A	#2a. In the last 12 months, did your child's doctors or other health providers talk with you about how your child may start to explore away from you? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE102B	#2b. In the last 12 months, did your child's doctors or other health providers talk with you about guidance and discipline techniques to use with your child? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE102C	#2c. In the last 12 months, did your child's doctors or other health providers talk with you about toilet training? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE102D	#2d. In the last 12 months, did your child's doctors or other health providers talk with you about what you should do if your child swallows certain kinds of poisons? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.

Variable	Description of Variable (Source of Data)	Response Choices
AGPE102E	#2e. In the last 12 months, did your child's doctors or other health providers talk with you about using a car seat? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE102F	#2f. In the last 12 months, did your child's doctors or other health providers talk with you about how to make your house safe? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE102G	#2g. In the last 12 months, did your child's doctors or other health providers talk with you about the importance of reading with your child? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE102H	#2H. In the last 12 months, did your child's doctors or other health providers talk with you about issues related to child care? <i>(Survey for children 10-18.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
Part 2C Items asked in only the Survey for Children 19-46.99 Months Old		
AGPE191A	#1a. In the last 12 months, did your child's doctors or other health providers talk with you about things you can do to help your child grow and learn? <i>(Survey for children 19-46.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE191B	#1b. In the last 12 months, did your child's doctors or other health provider's talk with you about the kinds of behaviors you can expect to in your child as he/she gets older? <i>(Survey for children 19-46.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE191C	#1c. In the last 12 months, did your child's doctors or other health providers talk with you about issues related to food and feeding? <i>(Survey for children 19-46.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE191D	#1d. In the last 12 months, did your child's doctors or other health provider's talk with you about bedtime routines and how many hour of sleep your child needs? <i>(Survey for children 19-46.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE191E	#1e. In the last 12 months, did your child's doctors or other health providers talk with you about toilet training? <i>(Survey for children 19-46.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE191F	#1f. In the last 12 months, did your child's doctors or other health provider's talk with you about words and phrases child uses and understands? <i>(Survey for children 19-46.99 months old)</i>	<ol style="list-style-type: none"> 1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.

Variable	Description of Variable (Source of Data)	Response Choices
AGPE191G	#1g. In the last 12 months, did your child's doctors or other health provider's talk with you about how your child is learning to get along with other children? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE192A	#2a. In the last 12 months, did your child's doctors or other health provider's talk with you about guidance and discipline techniques to use with your child? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE192B	#2b. In the last 12 months, did your child's doctors or other health provider's talk with you about ways to teach your child about dangerous situations, places, and objects? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE192C	#2c. In the last 12 months, did your child's doctors or other health provider's talk with you about using a car seat? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE192D	#2d. In the last 12 months, did your child's doctors or other health providers talk with you about how to make your safe? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE192E	#2e. In the last 12 months, did your child's doctors or other health providers talk with you about what you should do if your child swallows certain kinds of poisons? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE192F	#2f. In the last 12 months, did your child's doctors or other health provider's talk with you about the importance of reading with your CHILD? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
AGPE192G	#2g. In the last 12 months, did your child's doctors or other health provider's talk with you about issues related to childcare? <i>(Survey for children 19-46.99 months old)</i>	1. Yes, and my questions were answered 2. Yes, but my questions were not answered completely 3. No, but I wish we had talked about that 4. No, but I already had information about this topic and did not need to talk about it anymore.
Part 2D:	Survey Items Asked About in All Three Age-Specific Surveys	
FC3A	#3a. In the last 12 months how often did your child's doctors or other health providers take time to understand the specific needs of your CHILD? <i>(Age-specific survey)</i>	1. Never 2. Sometimes 3. Usually 4. Always
FC3B	#3b. In the last 12 months how often did your child's doctors or other health providers respect you as an expert about your CHILD? <i>(Age-specific survey)</i>	1. Never 2. Sometimes 3. Usually 4. Always
FC3C	#3c. In the last 12 months how often did your child's doctors or other health providers help you feel like a partner in your child's care? <i>(Age-specific survey)</i>	1. Never 2. Sometimes 3. Usually 4. Always
FC3D	#3d. In the last 12 months how often did your child's doctors or other health providers explain things in a way that you can understand? <i>(Age-specific survey)</i>	1. Never 2. Sometimes 3. Usually 4. Always

Variable	Description of Variable (Source of Data)	Response Choices
FC3E	#3e. In the last 12 months how often did your child's doctors or other health providers show respect for your family's values, customs and how you prefer to raise your child? (<i>Age-specific survey</i>)	1. Never 2. Sometimes 3. Usually 4. Always
PEDS4A	#4a. Do you have any concerns about your child's learning, development, or behavior? (<i>Age-specific survey</i>)	1. Yes 2. A little 3. Not at All
PEDS4B	#4b.How your child talks and makes speech sounds? (<i>Age-specific survey</i>)	1. Yes 2. A little 3. Not at All
PEDS4C	#4c. How your child understands what you say? (<i>Age-specific survey</i>)	1. Yes 2. A little 3. Not at All
PEDS4D	#4d. How your child uses his/her hands and arms and legs? (<i>Age-specific survey</i>)	1. Yes 2. A little 3. Not at All
PEDS4E	#4e. How your child behaves? (<i>Age-specific survey</i>)	1. Yes 2. A little 3. Not at All
PEDS4F	#4f. How your child gets along with others? (<i>Age-specific survey</i>)	1. Yes 2. A little 3. Not at All
DEV5	#5. In the last 12 months, did your child's doctors or other health providers ask if you have concerns about your CHILD'S learning, development, or behavior?	1. Yes 2. No 3. I don't remember
DEV6	#6. In the last 12 months, did your child's doctors or other health providers give you specific information to address your concerns? (<i>Age-specific survey</i>)	1. Yes 2. No 3. I don't remember 4. I did not have any concerns
FU7A	#7a. In the last 12 months did your child's doctors or other health providers refer your CHILD to another doctor or other health provider? (<i>Age-specific survey</i>)	1. Yes 2. No
FU7B	#7b. In the last 12 months did your child's doctors or other health providers test child's learning and behavior?	1. Yes 2. No
FU7C	#7c. In the last 12 months did your child's doctors or other health providers note a concern about your CHILD that should be watched carefully? (<i>Age-specific survey</i>)	1. Yes 2. No
FU7D	#7d. In the last 12 months did your child's doctors or other health providers refer your CHILD to speech-language or hearing testing? (<i>Age-specific survey</i>)	1. Yes 2. No
AF8A	#8a. In the last 12 months did your child's doctors or other health providers ask you if you or someone in your household smokes? (<i>Age-specific survey</i>)	1. Yes 2. No
AF8B	#8b. In the last 12 months did your child's doctors or other health providers ask you if you or someone in your household drinks alcohol or uses other substances? (<i>Age-specific survey</i>)	1. Yes 2. No
AF8C	#8c. In the last 12 months did your child's doctors or other health providers ask you if you ever feel depressed, sad, or have crying spells? (<i>Age-specific survey</i>)	1. Yes 2. No
AF8D	#8d. In the last 12 months did your child's doctors or other health providers ask you if you have any firearms in your home? (<i>Age-specific survey</i>)	1. Yes 2. No
AF8E	#8e. In the last 12 months did your child's doctors or other health providers ask you to talk about any changes or stressors in your family or home? (<i>Age-specific survey</i>)	1. Yes 2. No
PD9	#9. Do you have one person that you think of as your child's personal doctor or nurse? (<i>Age-specific survey</i>)	1. Yes 2. No
PD10	#10. Do you have more than one person that you think of as your CHILD'S personal doctor or nurse? (<i>Age-specific survey</i>)	1. Yes 2. No
FRSTCH11	#11. Is the child named in the survey your first child? (<i>Age-specific survey</i>)	1. Yes 2. No 3. This question does not apply to me
PB12	#12. How long did you breastfeed your child (<i>Age-specific survey</i>)	1. My child was not breastfed 2. Less than a month 3. A month or more 4. I am still breastfeeding

Variable	Description of Variable (Source of Data)	Response Choices
PB13	#13. How many days in a typical week do you or other family members read a book with your child? (<i>Age-specific survey</i>)	1. Everyday (7 days) 2. 5-6 days 3. 3-4 days 4. 1-2 days 5. No days (0 days)
RESPED14	#14. What is the highest grade or level of school that you have completed? (<i>Age-specific survey</i>)	1. 8 th grade or less 2. Some high school, but did not graduate 3. High school graduate or GED 4. Some college or 2 year degree 5. 4 year college graduate 6. More than a 4 year college graduate
DEP15	#15. In the last 12 months, have you had two weeks or more during which you felt sad, blue, depressed, or lost pleasure in things that you usually cared about or enjoyed? (<i>Age-specific survey</i>)	1. Yes 2. No
PTRB16A	#16a. How much trouble have you had paying for.....CHILD'S health and medical expenses? (<i>Age-specific survey</i>)	1. A lot of Trouble 2. Some Trouble 3. No Trouble
PTRB16A	#16b. How much trouble have you had paying for.....Supplies like formula, food, diapers, clothes and shoes? (<i>Age-specific survey</i>)	1. A lot of Trouble 2. Some Trouble 3. No Trouble
PTRB16C	#16c. How much trouble have you had paying for.....Healthcare for yourself? (<i>Age-specific survey</i>)	1. A lot of Trouble 2. Some Trouble 3. No Trouble

Part 3: Variables Created for Analytic Purposes

AGPE_YES	Measure of anticipatory guidance and parental education (#1 and #2 in the survey): Discussed All Items-Parents who reported "yes, topic was discussed and my questions were answered" or "yes, but my questions weren't answered" to all items (Based on variables AGPE3_1a-AGPE192G)	0. Did not discuss all items 100. Discussed all nil items: Parent reported "yes, topic was discussed and my questions were answered" or "yes, but my questions weren't answered" to all items)
AGPE_ALL	Measure of anticipatory guidance and parental education (#1 and #2 in the survey): Information Needs Met-Parents who reported "yes, topic was discussed and my questions were answered" OR "No, but I already had information about this topic and did not need to talk about it anymore" to all items (Based on variables AGPE3_1a-AGPE192G)	0. Did not have informational needs met. 100. Parent had their information needs met on all items: Parent reported "yes, topic was discussed and my questions were answered" OR "No, but I already had information about this topic and did not need to talk about it anymore" to all items
AG_UNMET	Measure of anticipatory guidance and parental education (#1 and #2 in the survey): Unmet Need: Parents who reported "no, but I wish we had talked about that" at least once (Based on variables AGPE3_1a-AGPE192G)	0. Did not discuss all 100. Parent had an unmet need: Parent reported "no, but I wish we had talked about that" at least once
GRWLRN39	Recode of #1a - Things you can do to help child grow and learn (Based on AGPE3_1A)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BREAS_39	Recode of #1c - Breastfeeding (Based on AGPE3_1C)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
FOOD_39	Recode of #1d - Issues related to food and feeding (Based on AGPE3_1D)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BACK_39	Recode of #1e - Placing child on back when going to sleep (Based on AGPE3_1E)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"

Variable	Description of Variable (Source of Data)	Response Choices
SLEEP_39	Recode of #1f - Where the child sleeps (Based on AGPE3_1F)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
CHLDC_39	Recode of #2h - Issues related to childcare (Based on AGPE3_2H)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BEHV_39	Recode of #1b - Behaviors you can expect to see as your child gets older (Based on AGPE3_1B)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
NTWAK_39	Recode of #1g - Night waking and fussing (Based on AGPE3_1G)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
COMM_39	Recode of #2a - How child communicates his/her needs (Based on AGPE3_2A)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
UND_39	Recode of #2b - What child is able to understand (Based on AGPE3_2B)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
RESP_39	Recode of #2c - How child responds to you and other caregivers (Based on AGPE3_2C)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
READ_39	Recode of #2g - Importance of showing picture book and reading to your child (Based on AGPE3_2G)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BURN_39	Recode of #2d - How to avoid burns to your child (Based on AGPE3_2D)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"

Variable	Description of Variable (Source of Data)	Response Choices
CAR_39	Recode of #2E - Using a car seat (Based on AGPE3_2E)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
HOUSE_39	Recode of #2F - How to make your house safe (Based on AGPE3_2F)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
GRWLRN18	Recode of #1a - Things you can do to help child grow and learn (Based on AGPE10_1A)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
FOOD_18	Recode of #1c - Vitamins and foods your child should eat (Based on AGPE10_1C)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BED_18	Recode of #1d - Bed and naptime routines (Based on AGPE10_1D)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BOTSLP18	Recode of #1g - Whether your child sleeps with a bottle (Based on AGPE10_1G)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
WBOTT_18	Recode of #1h - Weaning your child from a bottle (Based on AGPE10_1H)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
CHLDC_18	Recode of #2h - Issues related to childcare (Based on AGPE 10_2H)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BEHV_18	Recode of #1b - Behaviors you can expect to see in your child as he/she get older (Based on AGPE10_1B)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"

Variable	Description of Variable (Source of Data)	Response Choices
WORDS_18	Recode of #1e - Words and phrases your child uses and understands (Based of AGPE10_1E)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
NTWAK_18	Recode of #1f - Night waking and fussing (Based on AGPE10_1F)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
EXPL_18	Recode of #2a - How your child may start to explore away from you (Based on AGPE10_2A)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
DISC_18	Recode of #2b - Guidance and discipline technique to use with child (Based on AGPE10_2B)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
TT_18	Recode of #2c - Toilet training (Based on AGPE10_2C)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
READ_18	Recode of #2g - Importance of reading with your child (Based on AGPE10_2G)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
POIS_18	Recode of #2d - What to do if your child swallows certain kinds of poisons (Based on AGPE10_2D)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
CAR_18	Recode of #2e - Using a car seat (Based on AGPE10_2E)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
HOUSE_18	Recode of #2f -How to make your house safe (Based on AGPE10_2F)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"

Variable	Description of Variable (Source of Data)	Response Choices
GRWLRN48	Recode of #1a - Things you can do to help child grow and learn (Based on AGPE19_1A)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
FOOD_48	Recode of #1c - Issues related to food and feeding (Based on AGPE19_1C)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BEDR_48	Recode of #1d - Bedtime routine and how many hours of sleep your child needs (Based on AGPE19_1D)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
CHLDC_48	Recode of #2g - Issues related to childcare (Based on AGPE19_2G)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
BEHV_48	Recode of #1b - Behaviors you can expect to see as your child gets older (Based on AGPE19_1B)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
TT_48	Recode of #1e - Toilet training (Based on AGPE19_1E)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
WORD_48	Recode of #1f - Words and phrases child uses and understands (Based on AGPE19_1F)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
GETA_48	Recode of #1g - How your child is learning to get along with other children (Based on AGPE19_1G)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"
DISC_48	Recode of #2a Guidance and discipline techniques to use with your child (Based on AGPE19_2A)	0. Parent reported "No, but I wish we had discussed" or "Yes, but my questions were not answered" 75. Parent reported "No, but I already had information about this topic and did not need to talk about it anymore" 100. Parent reported "Yes, and my questions were not answered"

Variable	Description of Variable (Source of Data)	Response Choices
READ_48	Recode of #2f – Importance of reading with your child (Based on AGPE19_2F)	0. Parent reported “No, but I wish we had discussed” or “Yes, but my questions were not answered” 75. Parent reported “No, but I already had information about this topic and did not need to talk about it anymore” 100. Parent reported “Yes, and my questions were not answered”
DANG_48	Recode of #2b - Ways to teach your child about dangerous places and objects (Based on AGPE19_2B)	0. Parent reported “No, but I wish we had discussed” or “Yes, but my questions were not answered” 75. Parent reported “No, but I already had information about this topic and did not need to talk about it anymore” 100. Parent reported “Yes, and my questions were not answered”
CAR_48	Recode of #2c - Using a car seat (Based on AGPE19_2C)	0. Parent reported “No, but I wish we had discussed” or “Yes, but my questions were not answered” 75. Parent reported “No, but I already had information about this topic and did not need to talk about it anymore” 100. Parent reported “Yes, and my questions were not answered”
HOUSE_48	Recode of #2d How to make house safe (Based on AGPE19_2D)	0. Parent reported “No, but I wish we had discussed” or “Yes, but my questions were not answered” 75. Parent reported “No, but I already had information about this topic and did not need to talk about it anymore” 100. Parent reported “Yes, and my questions were not answered”
POIS_48	Recode of #2e - What you should do if your child swallows certain kinds of poisons (Based on AGPE19_2E)	0. Parent reported “No, but I wish we had discussed” or “Yes, but my questions were not answered” 75. Parent reported “No, but I already had information about this topic and did not need to talk about it anymore” 100. Parent reported “Yes, and my questions were not answered”
BF	Recode of breastfeeding item to a binomial variable of whether or not the parent breastfed for more than a month (Based on PB12)	0. Parent breastfed less than a month/not breastfed 100. Parent breast fed a onth or more/still breastfeeding
READV1	Recode of item related to how often the parent reads to a binomial variable of whether or not the parent read everyday (Based on PB12)	0. NOT read to everyday 100. Read to everyday
FCCUA_12	Measure of family centered care (# 3): Received Family-Centered Care- Parents who reported “usually:”/”always” to all family-centered care items (Based on FC 3A-FC3E)	0. Parent DID NOT say usually/always to all items 1. Parent said usually/always to all items
FCC_NEG	Measure of family-centered care (#3): Negative indicator – Did Not Receive Family-Centered Care Parents who reported “sometimes”/”never” to at least one family-centered care item (Based on FC 3A-FC3E).	0. Parent said usually/always to all items 1. Parent said sometimes/never to at least one item
TAKTIME	Recode of: #3a Take time to understand specific needs of child (Based on FC3A)	0. Parents reported “Sometimes”, “Never” 100. Parent reported “Usually”, “Always”
RESPECT	Recode of: #3b - Respect you as an expert about your child (Based on FC3B)	0. Parents reported “Sometimes”, “Never” 100. Parent reported “Usually”, “Always”
PARTNER	Recode of: #3c- Help you feel like a partner in your child's care (Based on FC3B)	0. Parents reported “Sometimes”, “Never” 100. Parent reported “Usually”, “Always”
EXPLAIN	Recode of: #3d- Explain things in way that you can understand (Based on FC3D)	0. Parents reported “Sometimes”, “Never” 100. Parent reported “Usually”, “Always”
ASS_YES	Measure of family assessment (Items #8c-#8e): Talked about All Three- Parents reported that doctor asked about ALL 3 family assessment items (Based on AF8C- AF8E)	0. Didn't ask about all 3 items 100. 100 Asked about all 3 items
ASS_NO	Measure of family assessment (Items #8c-#8e): Negative Indicator- Parents who reported that doctor did NOT ask about ALL 3 family assessment items (Based on AF8C- AF8E)	0. Asked about 1 or more item 100 Did not ask about all three items

Variable	Description of Variable (Source of Data)	Response Choices
METSMK	Measure of assessment for smoking, alcohol or substance abuse in the home (Items #8a-#8b)- Asked About Both; Parents who reported yes to both questions about smoking and alcohol/substance use in home (Based on AF8A and AF8B)	0. Did NOT answer 'yes' to both questions 100. Answered 'yes' to both questions
ASS_SMOK	Recode of: #8a- Asked if someone in household smokes (Based on AF8A)	0. Item was NOT discussed 100. Item was discussed
ASS_ALC	Recode of: #8b- Asked if someone in household drinks or uses other substances (Based on AF8B)	0. Item was NOT discussed 100. Item was discussed
ASS_DEP	Recode of: #8c Asked if they ever feel depressed, sad or have crying spells (Based on AF8C)	0. Item was NOT discussed 100. Item was discussed
ASS_GUN	Recode of: #8d Asked if they have firearms in home (Based on AF8D)	0. Item was NOT discussed 100. Item was discussed
ASS_CHNG	Recode of: #8e Asked about any changes or stressors in family or home (Based on AF8E)	0. Item was NOT discussed 100. Item was discussed
HADCON12	Recode of #4 to create a binomial variable of parents that reported "Yes" or "a little" concerns to one more of the items (Based on PEDS4A-PEDS4F)	0. Parent does not have concerns 1. Parent has 1 or more concerns
CRNASK	Measure of care about asking about and addressing parents concerns (Items #4 and #5): Concerned parents who were asked about their concerns by their child's health care provider. (Based on PEDS4A-PEDS4F and DEV5)	0. Parent had concerns, was NOT asked about concerns 100. Parent had concerns, was asked about concerns
GOTINFO	Measure of care about asking about and addressing parents concerns (Items #4, #5, #6): Concerned parents who were asked about their concerns and received specific information to address concerns by their child's health care provider. (Based on PEDS4A-PEDS4F, DEV5 DEV6)	0. Parent had concerns/was asked about concerns/DIDN'T get info 100. Parent had concerns/was asked about concerns/got information to address their concerns
CONLRN12	Recode of: #4a- Parent concerns about child's learning, development or behavior (Based on PEDS4A)	0. Parent reported "not at all" 1. Parent reported "Yes" or "A little"
CONTLK12	Recode of #4b: Parent concerns about how child talks and makes speech sounds - (Based on PEDS4B)	0. Parent reported "not at all" 1. Parent reported "Yes" or "A little"
CONUST12	Recode of #4c: Parent concerns about how child understand what parent says - (Based on PEDS4C)	0. Parent reported "not at all" 1. Parent reported "Yes" or "A little"
CONARM12	Recode of #4d: Parent concerns about how child uses arms and legs (Based on PEDS4D)	0. Parent reported "not at all" 1. Parent reported "Yes" or "A little"
CONBHV12	Recode of #4e: Parent concerns about how child behaves - (Based on PEDS4E)	0. Parent reported "not at all" 1. Parent reported "Yes" or "A little"
CONOTH12	Recode of #4F: Parent concerns about how child gets along with others - (Based on PEDS4F)	0. Parent reported "not at all" 1. Parent reported "Yes" or "A little"
RISKCAT4	Identifying children at risk for developmental/behavioral delays (Item #4): Categorical variable of children at risk for developmental/behavioral delays (Based on PEDS4A-PEDS4f)	0. Child not identified at risk 1. Child identified at moderate risk. 2. Child identified at high or moderate risk.
FU_REF	Recode of #7A: For children at risk (based on riskcat2), whether doctor referred child to another doctor (Based on FU7A)	0. No 100. Yes
FU_TEST	Recode of #7B: For children at risk (based on riskcat2), whether doctor tested child learning and behavior tested (Based on FU7A)	0. No 100. Yes
FU_CON	Recode of #7C: For children at risk (based on riskcat2), whether doctor noted concern that child should be watched (Based on FU7A)	0. No 100. Yes
FU_SPCH	Recode of #7D: For children at risk (based on riskcat2), whether doctor referred child to speech-language or hearing testing (Based on FU7A)	0. No 100. Yes
FU4RISK	Measure of follow-up care provided to children identified at risk for developmental/behavioral delays (Items #7a-#7d) Parents who reported that their child received follow-up health care to address their child's risk for developmental/behavioral delays. (Based on FU7A-FU7D)	0. Did not receive follow-up health care 0. Received follow-up health
HSORLESS	Recode of #14 into a binomial variable of parents with an education of high school or less (Recode of RESED14)	1. Parent reported more than high school level of education 2. Parent reported high school or less level of education
LESSHS	Recode of #14 into a binomial variable of parents with less than a high school education(Recode of RESED14)	0. Parent reported High school or more level of education 1. Parent reported less than high school
PAY_CHLD	Recode of #16A into a binomial variable of parents who reported problems paying for child's health care expenses (PTRB16A)	0. Parent reported "no trouble" paying 100. Parent reported "a- lot" or "some" trouble paying

Variable	Description of Variable (Source of Data)	Response Choices
PAY_SUPL	Recode of #16B into binomial variable of parents who reported problems paying for child care supplies such as diapers, formulas etc (PTRB16B)	0. Parent reported "no trouble" paying 100. Parent reported "a- lot" or "some" trouble paying
PAY_SELF	Recode of #16C into binomial variable of parents who reported problems paying for health care for self (PTRB16C)	0. Parent reported "no trouble" paying 100. Parent reported "a- lot" or "some" trouble paying

Attachments

Attachment 1

Reporting Template To Health Care Providers

To: From:
Fax: Date:
Phone: Pages (including cover page): 7
Re: CC:

Snapshot of Quality of Care Findings for Office X

Dear

During <enter time frame>, <list participating offices> implemented a survey to parents of young children (0-3 years old). This survey, the Promoting Healthy Development Survey, assesses whether national recommendations for health promotion and developmental services are provided by pediatric clinicians.

We've since compiled the data, analyzed it by a number of variables, and are now sharing some of the office-level findings.

<Insert number> parents or guardians of children who receive well-child care at <insert office name> completed this survey in your office.

This report details key findings in <insert office name> related to the following measures of care:

Anticipatory Guidance and Parental Education.....	2
Assessment of the Family.....	4
Addressing Parental Concerns.....	5
Follow-up for Children At-Risk.....	6
Family-Centered Care.....	7

Additional information and resources are provided on page 7.

If you have questions about the findings presented in this report please contact <insert name and contact information for person>.

<Insert signature(s)>

MEASURE:

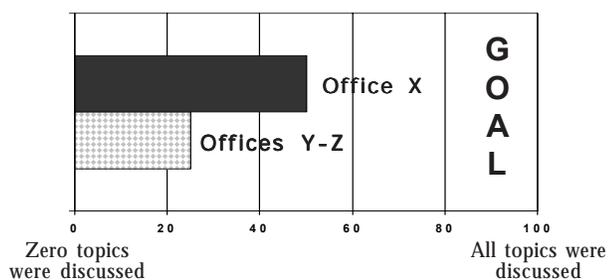
ANTICIPATORY GUIDANCE AND PARENTAL EDUCATION

DESCRIPTION:

National recommendations for well-child care call for health care providers to provide anticipatory guidance and parental education about a number of topics related to children's development, growth, behavior and safety. In the PHDS, parents are asked whether their child's doctor or other health care providers discussed 15 recommended age-specific anticipatory guidance and parental education topics. The response choices allow parents to indicate whether their informational needs on each topic were met:

- ✓ Yes, and my questions were answered
- ✓ Yes, but my questions were not answered completely
- ✓ No, but I wish we had talked about that
- ✓ No, but I already had information about that and did not need to talk about it any more

OVERALL RESULTS



All Recommended Topics Discussed

- XX% of parents report that their child's doctors or other health care providers talked with them about all of the age-appropriate topics.

Informational Needs Met

- XX% of parents report "Yes, and my questions were answered" OR "No, but I already had information about that and did not need to talk about it any more" to all of the age-appropriate topics.

Informational Needs Unmet

- XX% of parents noted at least once "No, but I wish we had talked about that" OR "Yes, but my questions were not answered".

RELATED PARENTING BEHAVIORS

To provide you with descriptive information about your patients, we asked parents to report about key parenting behaviors. Following each topic is the percentage of parents who report they did NOT do the activity:

- Did not breastfeed their child - XX%
- Did not read to their child every day - XX%
- Did not turn down the hot water temperature on their water heater - XX%
- Did not keep Syrup of Ipecac in their home - XX%
- Did not have the Poison Control Center phone number near the phone - XX%
- Did not put locks on cabinets where things such as cleaning agents or medicines are kept - XX%

TOPIC-SPECIFIC FINDINGS

3-9 MONTHS OLD
N = 1234

10-18 MONTHS OLD
N = 1234

19-48 MONTHS OLD
N = 1234

- DISCUSSIONS ABOUT PHYSICAL CARE**
- Things you can do to help child grow and learn - **XX, YY, ZZ (%)***
 - Breastfeeding - **XX, YY, ZZ (%)**
 - Issues related to food such as the introduction of solid foods - **XX, YY, ZZ (%)**
 - Importance of placing child on back - **XX, YY, ZZ (%)**
 - Where your child sleeps (location, type of crib) - **XX, YY, ZZ (%)**
 - Issues related to childcare - **XX, YY, ZZ (%)**

- Things you can do to help child grow and learn - **XX, YY, ZZ (%)***
- Vitamins and foods your child should eat - **XX, YY, ZZ (%)**
- Bed and naptime routines - **XX, YY, ZZ (%)**
- Whether child sleeps with a bottle - **XX, YY, ZZ (%)**
- Weaning your child from a bottle - **XX, YY, ZZ (%)**
- Issues related to childcare - **XX, YY, ZZ (%)**

- Things you can do to help child grow and learn - **XX, YY, ZZ (%)***
- Issues related to food and feeding - **XX, YY, ZZ (%)**
- Bedtime routines and how many hours of sleep child needs - **XX, YY, ZZ (%)**
- Issues related to childcare - **XX, YY, ZZ (%)**

- DISCUSSIONS ABOUT DEVELOPMENT AND BEHAVIOR**
- Kinds of behaviors you can expect to see in child as he/she gets older - **XX, YY, ZZ (%)***
 - Night waking and fussing - **XX, YY, ZZ (%)**
 - How child communicates his/her needs - **XX, YY, ZZ (%)**
 - What your child is able to understand - **XX, YY, ZZ (%)**
 - How your child responds to you and other caregivers - **XX, YY, ZZ (%)**
 - Importance of showing a picture book to or reading with your child - **XX, YY, ZZ (%)**

- Kinds of behaviors you can expect to see in child as he/she gets older - **XX, YY, ZZ (%)***
- Words and phrases child uses and understands - **XX, YY, ZZ (%)**
- Night waking and fussing - **XX, YY, ZZ (%)**
- How your child may start to explore away from you - **XX, YY, ZZ (%)**
- Guidance and discipline techniques - **XX, YY, ZZ (%)**
- Anticipatory guidance about toilet training - **XX, YY, ZZ (%)**
- Importance of reading with child - **XX, YY, ZZ (%)**

- Kinds of behaviors you can expect to see in child as he/she gets older - **XX, YY, ZZ (%)***
- Toilet training - **XX, YY, ZZ (%)**
- Words and phrases child uses and understand - **XX, YY, ZZ (%)**
- How child is learning to get along with other children - **XX, YY, ZZ (%)**
- Guidance and discipline techniques - **XX, YY, ZZ (%)**
- Importance of reading with child - **XX, YY, ZZ (%)**

- DISCUSSIONS ABOUT INJURY PREVENTION**
- How to avoid burns to your child, such as changing the hot water temperature in your home - **XX, YY, ZZ (%)***
 - Using a car seat - **XX, YY, ZZ (%)**
 - How to make your house safe - **XX, YY, ZZ (%)**

- What you should do if your child swallows certain kinds of poisons - **XX, YY, ZZ (%)***
- Using a car seat - **XX, YY, ZZ (%)**
- How to make your house safe - **XX, YY, ZZ (%)**

- Ways to teach child about dangerous situations, places and objects - **XX, YY, ZZ (%)***
- Using a car seat - **XX, YY, ZZ (%)**
- How to make your house safe - **XX, YY, ZZ (%)**
- What to do if your child swallows certain kinds of poisons - **XX, YY, ZZ (%)**

*The figures following each topic represent, respectively, the percentage of parents who responded: Yes, topic was discussed; No, but I already had information about that topic; or No, but I wished we had talked about that OR Yes, but I still had questions.

MEASURE:

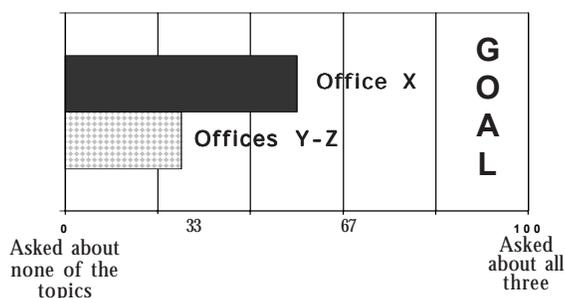
ASSESSMENT OF THE FAMILY

DESCRIPTION: Parental well-being and the home environment are major determinants of the health and well-being of young children. National guidelines recommend that pediatric clinicians annually assess for the well-being of parents and safety within the family. Five items in the PHDS ask about whether the child's doctors or other health care providers assess the parent and family for risks to the child's health.

OVERALL RESULTS

PSYCHOSOCIAL ISSUES/SAFETY TOPICS

- ✓ If the parent ever feels depressed, sad or has crying spells
- ✓ Firearms in the home
- ✓ Changes or stressors in the home



Asked About All Topics

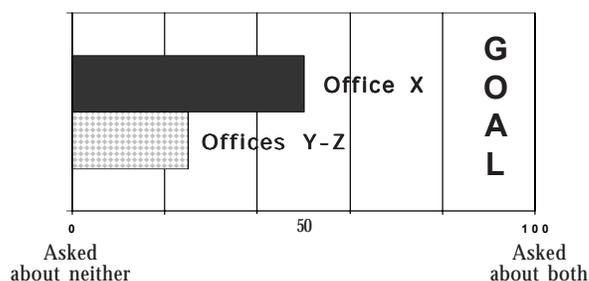
- XX% of parents report that their child's doctors or other health care providers asked about all three topics.

NOT Asked About Any Topic

- XX% of parents report that their child's doctors or other health care providers did NOT ask about any of the three topics.

SMOKING/SUBSTANCE ABUSE TOPICS

- ✓ Smoking in the household
- ✓ Alcohol and other substance abuse in the household



Asked About Both Topics

- XX% of parents report that their child's doctors or other health care providers asked about both topics.

NOT Asked About Either Topic

- XX% of parents report that their child's doctors or other health care providers did NOT ask about either topic.

ITEM-SPECIFIC FINDINGS

The percentage of parents reporting their child's doctors or other health care provider asked about the following topics in the last 12 months:

- If parent feels depressed, sad or has crying spells - XX%
- If there are firearms in the home - XX%
- If there are changes or stressors in their life or home - XX%
- If someone in the household smokes - XX%
- If someone in the household drinks alcohol or uses other substances - XX%

RELATED ISSUES IN THE FAMILY*

- XX% of parents report experiencing symptoms of depression in the last 12 months. Of this group, XX% were asked by their child's doctors or other health care providers if they have felt depressed, sad or had experienced crying spells.
- XX% of parents report that someone in the household smokes. Of this group, XX% were asked by their child's doctors or other health care providers about smoking.

*Findings are based only on the data collected in the Round 1 survey administration by mail. The items about related issues in the family (smoking in the home, depression screener) were not included in the in-office, reduced-item version of the PHDS.

MEASURE:

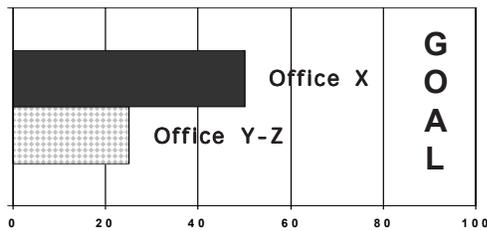
ADDRESSING PARENTAL CONCERNS

DESCRIPTION: Research with health care providers and parents consistently finds that asking about and addressing parent concerns is one of the most important and valuable aspects of well-child care. Two items in the PHDS focus on addressing parent concerns:

- ✓ Whether or not their child’s doctors or other health care providers asked the parent if he/she has concerns about the child’s learning, development or behavior.
- ✓ Whether or not parents with concerns received specific information to address those concerns.

Six items derived from the Parent’s Evaluation of Developmental Status (PEDS)^{®*} are also included in the PHDS. These items ask parents about specific concerns they may have about their child’s learning, development or behavior.

OVERALL RESULTS



Zero parents were asked about whether they have concerns

All parents were asked whether they have concerns

Parents With Concerns Who Are Asked About Their Concerns

- XX% of parents had one or more concerns about their child’s learning, development or behavior. Of this group, XX% of parents report that their child’s doctors or other health care providers asked whether or not they had any concerns about their child.

Parents With Concerns Who Received Information to Address Their Concerns

- XX% of parents with concerns report that their child’s doctors or other health care providers gave them specific information to address their concerns.

SPECIFIC PARENT CONCERNS

The following percentages of parents report having a specific concern in the following areas:

- How the child understands what parents say - XX%
- The child’s learning, development or behavior - XX%
- How the child talks and makes speech sounds - XX%
- How the child uses his or her arms and legs - XX%
- How the child behaves - XX%
- How the child gets along with others - XX%

*Glascoe FP. Parents’ Evaluation of Developmental Status. Nashville, TN: Ellsworth & Vandermeer Press, Ltd; 1998

MEASURE:

FOLLOW-UP FOR CHILDREN AT-RISK

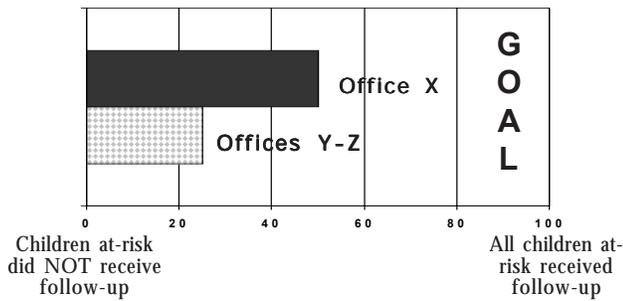
DESCRIPTION:

Parent concerns can be an indication of their child’s risk for developmental, behavioral or social delays. Adapted from the PEDS® manual*, an age- and concern-specific scoring algorithm was used to identify children at “at risk” for a developmental/behavioral delay based on parent responses to the PEDS items included in the PHDS.

The PHDS includes five-items which indicate whether or not children at risk for developmental/behavioral delays received follow-up care from the child’s doctors or other health care providers:

- ✓ Tested the child’s learning and behavior
- ✓ Referred the child to another doctor or health care provider
- ✓ Referred the child for speech-language or hearing testing
- ✓ Noted a concern about the child that should be watched
- ✓ Gave the parent advice about how to help the child

OVERALL RESULTS



Children Identified At-Risk

- XX% of parents noted concerns that indicate their child is at significant risk for developmental, behavior or social delays.

Children At-Risk Who Received Follow-Up Care

- XX% of children identified at significant risk for developmental/behavioral delays whose parents report that their child received some form of follow-up care.

LEVEL OF FOLLOW-UP RECEIVED FOR AT-RISK GROUP

Listed below are the percentages of parents whose children were identified as at-risk by the PEDS items reporting that their child’s doctor or other health care providers did one or more of the follow-up actions:

- Tested their child’s learning and behavior - XX%
- Referred their child to another doctor or health care provider - XX%
- Referred their child for speech-language or hearing testing - XX%
- Noted a concern about their child that should be watched - XX%
- Gave the parent advice about how to help their child - XX%

*Glascoe FP. Parents’ Evaluation of Developmental Status. Nashville, TN: Ellsworth & Vandermeer Press, Ltd; 1998

MEASURE:

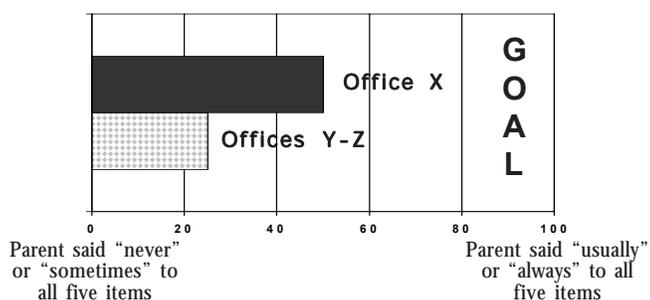
FAMILY-CENTERED CARE

DESCRIPTION:

Research demonstrates that a positive partnership with a child’s doctors or other health care providers is one of the most important factors for ensuring parents get the information and support they need to promote the healthy development of their child. Five items in the PHDS assess the degree to which the care provided is family-centered by asking parents how often the child’s doctor or other health care providers do the following:

- ✓ Respect the parent as an expert about their child
- ✓ Take time to understand the specific needs of the child
- ✓ Help the parent feel like partner in their child’s care
- ✓ Explain things in a way that the parent can understand
- ✓ Show respect for the family’s values, customs and how they prefer to raise their child

OVERALL RESULTS



- XX% of parents report "usually" or "always" to all of the family-centered care items.
- XX% of parents report "never" or "sometimes" to one or more of the family-centered care items.

ITEM-LEVEL RESULTS

Percentage of parents reporting that their child’s doctors and other health care providers “usually” or “always”:

- Respect the parent as an expert about the child - 45%
- Take the time to understand the specific needs of the child - 45%
- Help the parent feel like a partner in their child’s care - 45%
- Explain things in a way the parent can understand - 45%
- Show respect for the family’s values, customs and how they prefer to raise the child - 45%

~ ABOUT THE SURVEY ~

The Promoting Healthy Development Survey (PHDS) was created by FACCT-Foundation for Accountability. To date, over 13,000 PHDS surveys have been collected and analyzed. The PHDS has been proven to be a reliable and valid tool for measuring preventive and developmental care. For more information about this survey and other related activities, please visit FACCT’s Web site-<http://www.facct.org>-and Bethell C, Peck C, Schor E. Assessing Health System Provision of Well-Child Care: The Promoting Healthy Development Survey Pediatrics 2001 107: 1084-1094.

~ FOR MORE INFORMATION ~

About Topics Measured in the PHDS:

- American Academy of Pediatrics Health Supervision Guidelines: <http://www.aap.org>
- Bright Futures Recommendations: <http://www.brightfutures.org>

About Related Quality Improvement Strategies:

- National Initiative for Children’s Healthcare Quality: <http://www.nichq.org>
- Vermont Child Health Improvement Program (802) 847-4330
- Zero to Three: <http://www.zerotothree.org>

Attachment 2

Reporting Template To Parents of Young Children



Your Child's Physical Needs

Areas of Excellence in Office X:

- XX% of parents had their informational needs met about how to place their child on his or her back when going to sleep.
- XX% of parents had their informational needs met about what vitamins and food their child should eat.

Room for improvement:

- XX% of parents of toddlers did not have their informational needs met about whether their child should sleep with a bottle.
- XX% of parents did not have their informational needs met about childcare issues.

BE A PARTNER IN YOUR CHILD'S HEALTH CARE!

Your child's health care providers can give you information, guidance and support about how to care for your child's **physical needs**.

Talk to your child's health care providers about:

- ✓ How to help your child grow and learn
- ✓ Vitamins and food your child should eat
- ✓ Issues related to feeding
- ✓ Bed and naptime routines and how many hours of sleep your child needs
- ✓ Issues related to childcare

Learning All We Can to Keep Your Child Healthy

We asked <insert #> parents at <insert office> to complete the **Promoting Healthy Development Survey** to make sure your child is getting the best health care possible.

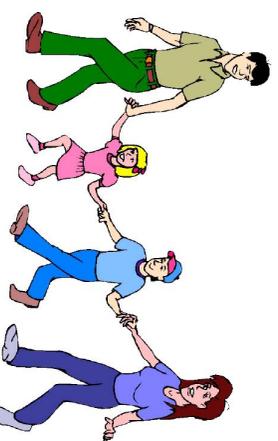
Why?

Your child's health is important to us and we want to learn where we can improve our efforts. We want to do everything we can to make sure your child gets the recommended preventive services they need to stay healthy.

What can you do?

Know what to expect from well-child visits, work in partnership with your child's health care provider, ask questions and make sure your concerns are addressed.

Use the information in this pamphlet to learn how to get the most out of your child's well-visits!



Did you know

A national study found that most children do not get all of the recommended preventive services they need to stay healthy. In fact, less than 10 percent of children 0 - 3 years old receive all of these important services.



Well-child care is important!

Well-child care is preventive health care provided when your child is NOT sick. Also known as a "check-up" or a "regular, routine visit," well-child care is essential to keeping your child healthy.

Know what to expect and BE A PARTNER

National recommendations for helping children stay healthy say that primary care providers should give parents **INFORMATION, GUIDANCE** and **SUPPORT**.

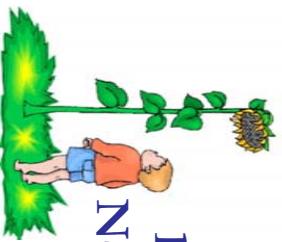


The information in this pamphlet will help you learn how to get the most out of your child's well-visits.

GET THE BEST HEALTH CARE FOR YOUR CHILD



Know what to expect and BE A PARTNER



Your Child's Developmental Needs & Behavior

Areas of Excellence in Office X:

- **XX%** of parents had their informational needs met about the importance of reading to their child.
- **XX%** of parents had their informational needs met about words and phrases their toddler uses and understands.

Room for improvement:

- **XX%** of parents did not have their informational needs met about toilet training.
- **XX%** of parents did not have their informational needs met about guidance and discipline techniques.

BE A PARTNER IN YOUR CHILD'S HEALTH CARE!

Your child's health care providers can give you information, guidance and support about your child's **development and behavior**.

Talk to your child's health care providers about:

- ✓ Behaviors to expect in your child
- ✓ Words or phrases your child may use
- ✓ How often you should read to your child
- ✓ Toilet training
- ✓ Guidance and discipline techniques

Preventing Injury & Keeping Your Child Safe



Areas of Excellence in Office X:

- **XX%** of parents had their informational needs met about car seats.
- **XX%** of parents of infants had their informational needs met about how to avoid burns to their child.

Room for improvement:

- **XX%** of parents did not have their informational needs met about what to do if their child swallows poison.
- **XX%** of parents of toddlers did not have their informational needs met about teaching their toddler about dangerous situations, places and objects.

BE A PARTNER IN YOUR CHILD'S HEALTH CARE!

Your child's health care providers can give you information, guidance and support about **injury prevention**.

Talk to your child's health care providers about:

- ✓ House and car safety
- ✓ Poison prevention
- ✓ Teaching your child about danger

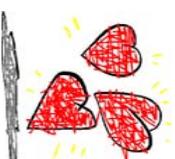


Family Assessment

Your child's doctors or other health care providers should ask about issues that may affect your child's health and well-being.

Your child's health care provider may ask:

- If you or someone in your household smokes.
- If you or someone in your household drink alcohol or uses other substances.
- How parenting works into your daily activities and future plans in life.
- If you feel safe at home.
- If you have someone to turn to for emotional support.
- If you ever feel depressed, sad or have crying spells.



- ✓ You can talk to your child's health care providers about these issues
- ✓ A healthy and happy parent is important for a healthy and happy child

Copyright © 2006. The CAHMI quality measure tools (including sampling, administration, analysis and reporting specifications) are available for free on this website thanks to past and current support from the David and Lucile Packard Foundation, The Commonwealth Fund, and the Robert Wood Johnson Foundation. All CAHMI quality measures are copyrighted by the CAHMI. Should you use any of the material from this site, please reference it appropriately.