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Newsletter PAHP

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Pediatric and Adolescent Health Partners,
Midlothian, Bon Air and Powhatan
www.pahpartners.com [phone]

Becoming a Medical Home

By Dr. Scott Keel

PAHP has been working hard over the past year to become Central Virginia's first NCQA certified Medical Home. What is a Medical Home?

A Medical Home is about you! The patient-centered medical home is a way of organizing primary and pediatric care that emphasizes care coordination and communication to transform primary care into "what patients want it to be." Medical homes can lead to higher quality and lower costs, and can improve patients' and providers' experience of care. NCQA Patient-Centered Medical Home (PCMH) Recognition is the most widely-used way to transform primary care practices into medical homes

We wanted to share how becoming a medical home has helped up better serve you. In the following pages we wanted to show some of our reports on how we have increase our HPV success rate,

Please see *Become a Medical Home*
on page 2

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Suicide Prevention is Key

By Jonathan H.

At the request of the National Institute of Health, Our practice has been ask to test a new instrument designed to screen for suicidal risk in our adolescent patient. The screening questionnaire has been tested and validated in the Emergency Room setting, but never in a private pediatric office. We have agreed to do this project because of the alarming statistics on the rate of suicide in our countries adolescent population. As we are sure you know, above all, our office really wants to keep all of our patients healthy, both mentally and physically and to keep them safe.

When an adolescent come to our office, a nurse trained by the National Institute of Mental Health on suicide screening and risk assessment, will ask your child some questions in private. These additional questions ask about depression and suicide risk, which are major public health

Please see *Suicide Prevention is*
key on page 3

"As a kid, I like it that someone is asking me about suicide, nobody has ever asked me before."

Referral Tracking is getting an update

By Scott Keel

So, you have seen your doctor and now time to make a referral. Over the last few years we did not have a way to track our patients to see if they made the appointment.

Part of the requirement is to track referrals. As it turned out, we did not track our referrals. We did not have a good way to tell, how was able to make their appointments.

Referral tracking By Office: Jan –March 2016 reporting period

“tracking is hard work, so we have turned to technology to help us better serve you.”

	Location	Bon Air	Midlothian Village	Pow
Numerator	Referrals made from Jan, 1 st to March 1 st 2016	330	697	183
Denominator	Referral information was sent back to office and recorded	302	630	158
Percentage	% completed	91%	90%	86%

WE are now able to see who did not attend their referral and have our
Please see *Tight Space* on page 4

Becoming a Medical Home
from page 1

learned how to better track our referrals, were successful on implementing a suicide prevention screening and have listened to the patients and the parent advisory council and started printing out clinical summaries after each visit.

Keep following us on facebook to learn more as we strive to be the best provider for you and your family.



Using technology to make life easier for you.

HPV by the numbers

By Scott Keel

The Providers of PAHP give this important vaccine to our youth because the HPV vaccine can prevent 9 out of 10 cases of a cancer that affects the tongue, throat, and cervix. It is recommended for both girls and boys starting at 9-12 years of age. In the year 2012 cervical cancer killed over 4,000 women and the benefits of vaccination are not limited to cervical cancer.

Our providers recommend starting the series of 3 injections at 9 years of age. The average age of starting is 11. Below are the reports. We have a success rate of about 70 percent of our patients age 9-12 to start. Have your child started theirs. Ask about it on your next visit.

NO HPV shot for pt. age 9-12 y = 3894 Total amount of Pts. 9-12 y = 13003



	Location	Bon Air	Midlothian Village	Pow
Numerator	Patients with No HPV 9-12yo	1,051	2219	584
Denominator	Total Pts 9-12yo	3510	7411	1950
Percent	% pts NEED HPV	29%	28%	30%

Suicide from page 1

problems for youth in the United States.

If we have any concerns after asking the screening questions, we will let you know. We will also ask your opinion about our new process, and hope you will give us feed back.

Facts on Suicide:

Teenage Suicide is the Second Leading cause of death for youths age 10-24 years. In fact there were more deaths from suicide than deaths from the 7 other leading causes of death (HIV, Sepsis, Diabetes, Pneumonia, Stroke, Cardiovascular, Cancer) combined in teenagers in 2013. There were 1,047 suicides in Virginia, the highest rate in 13 years and this included 131 adolescents.

In the United States, 2 Million young people attempt suicide annually an additional 2.5 million high school students reported “seriously considering suicide.” And 2 million high school students made an actual plan to commit suicide. Of those students, 85% do not reveal ideation (seriously considering suicide) 30-60% did not reveal a past attempt to anyone.

The concern for the medical professionals that the majority of those who commit suicide have had a contact with a medical professional prior to killing himself or herself. 80% had contact within 3 months of the event. We need to start asking the right questions.

“HPV vaccination is an important preventive measure that is safe”

Referral Tracking is getting an update. from page 2

social workers track them down to see if assistance is needed or help reschedule an appointment.

We have learned how important sharing of information is to our patients over all health. We have now turned to an electronic tracking system called INFINA that is better able to help us.

You asked for it, Clinical Summaries are now available at check out.

By Scott Keel

You asked for it, now we are happy to give it. Patient feedback is an important to us and we review your patient survey reports regularly. It was noticed that many patients wanted to have a clinical summary report when they left the office. Office visits can be a challenge and trying to remember everything that happened during the visit can be hard. We worked with our PAC, Patient Advisory Board to do a PDSA cycle on how we can make this happen. We trained our staff and updated the Electronic Health Records to make this happen.

Now we are trying to make a report available to all patients' visits. Please ask for it when you leave. Our rates of print were below 3 percent at each office when we started. We are now over 30 percent and we hope to reach 90 percent by summer.

If you did not get a clinical summary report, please let us know.

Also, don't forget to sign up for the patient portal. An easy way to track all your medical records. Just ask the front desk to sign you up

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