



Transitioning Youth to Adult Health Care

Pediatric Data Collection Tool

Data collection for quality improvement (QI) is intended to help identify areas for improvement based on current performance. Use the results of the data collection to identify gaps; then use the suggested ideas for change from the *Potential Barriers and Ideas for Change* grid to design and run PDSA cycles to make improvements.

Patient Name/ID Number: _____ Age: _____



Note: This data collection tool does not record any patient identifying information. You may enter it here for record-keeping purposes (for example, to attach to the patient's chart). The questions in this tool align with the Key Clinical Activities (KCAs) identified for transition planning in the training modules. You will enter patient record data into the online learning management system (LMS).

Key Clinical Activities and Data Collection for QI

Begin with a baseline (cycle 1) measurement to provide a starting point for improvement.

1. Review the materials and your QI tools from the presentations with your colleagues and QI team (if applicable).
KCAs 1-3 are required and must demonstrate modest improvement over the next 18 weeks (4 ½ months) to receive Maintenance of Certification (MOC) Part 4 Credit from the American Board of Pediatrics. Physicians from the same practice find it easier to demonstrate improvement and secure MOC Part 4 credit when they work on the same KCAs.
2. *Chart Selection.* Note that KCAs 1-3 (**required**) pertain to patients age 14 and older, while KCAs 4-8 pertain to patients 17 and older (**optional**). This course will not collect data on optional KCAs. Select a minimum of 10 charts for patients who meet the activity's age. Use your patient records and data collection worksheet to record patient data from patient charts in order of most recent visit. If you have a transition registry in place, you may select patients and use information from the registry to complete your review. Your scheduling system and EMR may also identify patients to select.
3. Review the information documented for each patient, ensuring that the patient's age matches the activity under review.
4. **Answer the three required KCA data collection questions** for each patient and enter your responses in the worksheet. After your worksheet is completed, answer the KCA chart review questions in the online LMS.

Data Collection

1. **At 6-week intervals**, select a new set of 10 charts for patients of the appropriate age (≥ 14 years) whom you have seen within the past 6 weeks. Review the information documented for each patient.
2. You must report on at least 10 patient charts in order of most recent visit per data cycle. If during the 6 week cycle you fall short of the minimum of 10 charts, continue until you have 10 charts for reporting.
3. Answer three data collection questions for each patient and record responses in the worksheet and in the online tool (quiz).
4. The scores displayed will be your actual results along with your baseline (cycle 1 data) and goal. Review the cyclical chart review scores for each of the required three KCAs to assess your progress.
5. Create an improvement plan to help bridge the identified gap and move you closer to your goals. Refer to the training modules and other resources as needed. Conduct a test of change through a **Plan Do Study Act (PDSA)** cycle and implement changes.
6. Repeat steps 1 through 5 at 6-week intervals over a period of 4 ½ months for a total of 4 data collection cycles (baseline + 3).

Develop/Maintain a Registry

Among its many other benefits, a registry should simplify data collection. Please complete the *Pediatric Practice Survey* on the topic of registries to evaluate your practice's use of a registry to support transition planning for youth. Identification of transition-age youth with and without special health care needs is a fundamental first step for quality improvement and transition planning activities.



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Directions: Review each patient chart/record individually and answer the following questions based on whether or not the activity *has been documented in the chart/record*. Beginning with a baseline assessment (cycle 1) and then at 6-week intervals, select a new set of 10 charts for patients of the appropriate age (≥ 14 years) whom you have seen within the past 6 weeks. Record patient data from patient charts in order of most recent visit. Review the information documented for each patient.

Data Collection

1. You must report on at least 10 patient charts in order of most recent visit per data cycle. If during the 6 week cycle you fall short of the minimum of 10 charts, continue until you have 10 charts for reporting.
2. Answer the 3 data collection questions for each patient and record your responses in the worksheet and in the online tool.
3. The scores displayed will be your actual results along with your baseline (cycle 1 data) and goal. Review the cyclical chart review scores for each of the required three KCAs to assess your progress.
4. Create an improvement plan to help bridge the identified gap and move you closer to your goals. Refer to the training modules and other resources as needed. Conduct a test of change through a **Plan Do Study Act** (PDSA) cycle and implement changes.
5. Repeat steps 1 through 5 at 6-week intervals over a period of 18 weeks (4 ½ months) for a total of 4 cycles (baseline + 3).

3 Required KCAs for MOC Part 4 QI Credit

(Consider adding EMR fields to assist with data collection or ensure providers are documenting in medical record. Incorporate KCAs into required high school entrance physical or sports physical appointment.)

KCA: Provide/Explain Written Transition Policy

Goal = 90%

For charts of youth ≥ 14 :

1. Has the practice's transition policy been provided/explained to the patient and family? **Note:** AAP recommends that this is done at age 12.
 Yes No

KCA: Assess Health Care Skills

Goal = 70%

For charts of youth ≥ 14 :

2. Have the patient's and/or caregiver's health care skills been assessed within the past 12 to 24 months using a tool such as the *Transition Checklist for Teens* or *Transition Checklist for Parents/Caregivers*? **Note:** AAP recommends that this is done annually.
 Yes No

KCA: Develop or Review Individualized Transition Goals

Goal = 70%

For charts of youth ≥ 14 :

3. Have transition goals been defined, prioritized, and reviewed together with the patient/family within the past 12 to 24 months? **Note:** AAP recommends that this is done annually.
 Yes No





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Optional KCAs (Patient record data are not required and are not reported on LMS)

KCA: Provide Insurance, Benefits and Services Information Sources, as Needed

Goal = 90%

For charts of youth ≥ 17 :

4. Has the need for adult insurance, benefits and services been discussed with the patient and family?

Yes No

For charts of youth ≥ 17 :

5. Have information sources for adult insurance, benefits and services been provided?

Yes No Not applicable, no resources needed

KCA: Create or Update/Maintain a Portable Medical Summary

Goal = 90%

For charts of youth ≥ 17 :

6. Has the patient's portable medical summary or care plan been created or updated/maintained in the last 12 to 24 months?

Yes No

KCA: Help Identify Adult-care Physicians/Providers

Goal = 70%

For charts of youth ≥ 17 :

7. Has the need to identify an adult-oriented primary care physician been discussed with the patient/family?

Yes No

For charts of youth ≥ 17 :

8. Has the need to identify adult-oriented specialty and/or service providers been discussed with the family?

Yes No

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