



Children's
Healthcare of Atlanta
Strong4Life

New program we participate in, we are audited and must keep track of the participating patients.

PCMH4:B:2

Dear Colleagues:

The Strong4Life movement is alive in Atlanta. The billboards and commercials are raising awareness and starting a conversation about childhood obesity in Georgia. On Saturday, Oct. 8, we hosted Strong4Life Atlanta, a free community and family festival promoting nutrition and physical activity. We are continuing to bring programs that support schools, early childcare centers and communities to fight this epidemic affecting our children.

As we continue to offer Strong4Life to additional providers, we hope that you have taken the training content and brought it to life with your patients. Here are five ways to ensure sustainability of the techniques learned in training:

1. Design a process for patients and families to complete the assessment in the waiting room.
2. Post BMI posters in each patient room.
3. Utilize reflective listening after sharing assessment results with families.
4. Figure out what will motivate the family to incorporate a healthy habit into their homes utilizing the ruler or the driver.
5. Choose one wellness goal for patients and families to work towards at each well child visit based on the family's preference.

As an additional resource, view this quick video to reinforce the training you received.

As you use the toolkit and training methods, do not hesitate to contact us with questions or concerns. You will receive a short survey approximately three months after your training date to help us evaluate the effectiveness of the Strong4Life Provider Program.

Sincerely

Stephanie Walsh, M.D.
Medical Director, Child Wellness
Children's Healthcare of Atlanta

I'm Crystal Hulin, a Research Assistant with Children's Healthcare of Atlanta. Dr. Ed and Jackie Gotlieb and Laura Yedvobnick PA attended a Strong4Life Provider Training we offered **September 12th 2011** on prevention and treatment of childhood obesity and at that training they agreed for us to come and do a chart audit visit.

The visit involves chart reviews (a total of 20 well child check-ups for children ages 2-9 yrs old) for each physician or physician assistant. We would need to review 10 charts that occurred before their training and then 10 charts that occurred after. We know the practice is busy but we don't intend to be an inconvenience. -None of the doctors or the PA has to be present at the time of our visits. All we need is access to EMRs or charts if not electronic and one "go to" person for any questions that we might have.

What we usually do is set up a pre-site visit along with the date for the chart audit. I've already done this with you today, so we are scheduled for **03/05/2012 from 8:30-10:00 am** for our pre-site visit and **03/06/2012 from 8:30am-12:00pm** for our chart audit visit.

A pre-site visit will help us do the chart audit quickly. The purpose of the pre-site visit is to learn from you how to navigate your EMR system and ask questions. Also, we'll discuss our chart audit checklist sheet. We'll show you what we look for and what information we document on each patient from their chart. Before or at the pre-site visit we would suggest **providing us with a list** of all the patients seen by each physician and physician assistant (those for well-child check-ups for children ages 2-9 yrs old). We hope to have a list including the patient's number or name, age, date of visit, and physician or physician assistant. We use an online research randomizer to take the total number of patients seen before and after the physician's training and it calculates which charts for us to review. We'll assign a number for each patient seen and based on the randomizer we'll review only the charts selected. The list you provide will help us have all information needed for navigating EMR and filling out our checklist. **Any information given to us is completely confidential and only used for the purpose of this chart audit.** You can decide to provide this to us before (via email) or at the pre-site visit.

On the date of the chart audit, an estimate of time can be this for 3 people (60 charts):

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View Patient List

Strong4Life Audit (9/13/2011-03/05/2012)

Patient List

The Pediatric Center

Generated 07/10/2012 04:47pm

Time Range for Criteria: From 09/13/2011 to 03/05/2012

433 Unique Patients Found

Patient	△	Date of Birth	Sex
A [REDACTED] C# 30175		01/14/94	Male
A [REDACTED] C# 26949		12/12/94	Female
A [REDACTED] C# 10370		10/23/94	Female
A [REDACTED] A PCC# 25279		08/15/98	Female
A [REDACTED] J PCC# 18080		05/14/94	Male
A [REDACTED] PCC# 27163		02/23/09	Female
A [REDACTED] J PCC# 22842		05/23/05	Female
A [REDACTED] # 18090		08/01/00	Female
A [REDACTED] PCC# 29422		07/22/99	Female
A [REDACTED] # 29884		07/26/96	Female
A [REDACTED] 23656		10/31/98	Female
A [REDACTED] 28624		07/25/98	Female
A [REDACTED] C# 15945		08/18/92	Female

HEALTHY CHOICES FOR HEALTHY KIDS



HANDOUT DURING VISIT

 **FILL 1/2**

**YOUR PLATE WITH
VEGGIES AND FRUITS**

 **BE**

**ACTIVE FOR
60 MINS**



DRINK

MORE WATER

**2/3 LIMIT SUGAR
DRINKS**



LIMIT

SCREEN TIME

TO ONE HOUR

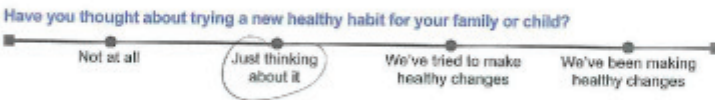
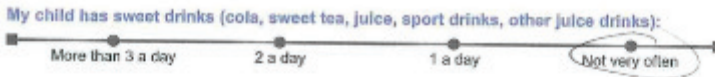
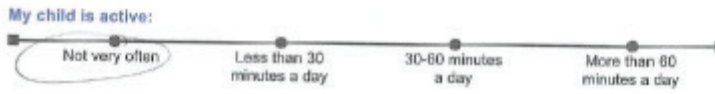
HEALTHY HABITS ASSESSMENT



Patient Name Shemaiah
Moyle
Date of Birth _____ Date 7/2/12

Given to patient at
time of check-in

Circle the answer that best describes your child's average eating habits.



- If you could work on one healthy habit, which would it be?
- Fill half your plate with veggies and fruits
 - Limit screen time to one hour
 - Be active for 60 minutes
 - Drink more water and limit sugar drinks