 <b>Winnipeg Regional Health Authority</b> <i>Caring for Health</i> <b>Office régional de la santé de Winnipeg</b> <i>À l'écoute de notre santé</i>	<b>Practice Guideline:</b> Implementation of Well Baby / Child Clinical Care in the EMR	<b>Guideline Number:</b> FINAL DRAFT #20
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## 1. INTENT:

- To provide safe, comprehensive and evidence informed care to infants, children and their parents or caregivers within an interprofessional team and ensure the team optimizes collaborative practice of all team members to improve outcomes (i.e., maximize the role of Clinical Support Staff and Primary Care Nurse). This serves as a Guideline and Clinical Decision Support Tools that are aligned with the College of Registered Nurses of Manitoba Employer guide.
- To provide recommendations within the interprofessional practice team to become familiar with the national guidelines, tools and resources prior to independent initiation of well-baby / child visits.
- To facilitate effective communication to avoid duplication and/or missed interventions/assessments within the interprofessional team members (include RNs, PA's NPs and MDs.)
- To provide patient and provider satisfaction within the collaborative approach by implementing a system to ensure an inter-disciplinary approach in the provision of collaborative well-baby care. The system includes:
  - electronic medical record (EMR) macros and Rourke records, intended to be used concurrently during office visits
  - suggested references and orientation opportunities for all inter-disciplinary team members; and
  - guidelines for appropriate appointment bookings and check in

**NOTE:** The system is intended to assist care but does not replace clinical judgment;


## 2. GUIDELINE

### ASSESSMENT & MANAGEMENT

#### HISTORY & PHYSICAL

As outlined in the age-appropriate Rourke Record and Electronic Medical Record 'Maros' which support the use of the Rourke as follows:

Well Baby/Child Age or Age Range Macros	Associated Parent / Caregiver Resources:	Resources to support clinical care & documentation
3 day old Newborn Visit 1-2 week old Newborn Visit 1 month old Well Baby Visit	Well Baby Suggested Resources Birth to 1 Month Old	Clinical Note Template tips or red flags from 3 days to 12 months  Well Baby/Child Resource Reference Sheet for clinic accordion file  EMR Well Baby Documentation to support tracking visits
6 week Postpartum Visit (approx. 6 weeks) 2 month old Well Baby Visit 4 month old Well Baby Visit 6 month old Well Baby Visit	Well Baby Resource List 2 Months Old to 6 Months Old	
9 month old Well Baby Visit 12 month old Well Baby Visit	Well Baby Resource List 9 Months Old to 15 Months Old	
18 month old Well Child Visit 2-3 year old Well Child Visit 4-5 year old Well Child Visit	Well Child Resource List 18 Months Old to 5 Years Old	

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#### **ORIENTATION:**


- All Providers to review documents in reference section
- PCN to shadow a provider at the clinic until comfortable to assume responsibility individually
- Ability to demonstrate navigating between Rourke and Clinical Note Templates
- PCN to attend Public Health nutrition seminar on Intro to Solids

#### **READINESS TO PRACTICE:**

- It will be the responsibility of the individual to determine if they are prepared to undertake the above role in well-baby care.

#### **APPOINTMENT BOOKING GUIDE FOR PRIMARY CARE ASSISTANTS:**

- Based on the sites approach to service delivery will determine whether to book 1:1 or group appointments. Refer to [CSIS INSITE](#) link to create a new appointment, create a reoccurring appointment or create group appointments.
- Clinical Support Staff to search for a pre-existing individual record or register a new client if no record currently exists. Client registration is based on the information found on the Manitoba Health card, and / or:
  - **Pre-existing Client:** Search for a pre-existing client record using at least 2 client identifiers (i.e., first & last name and PHIN). From the available search results, validate at least 3 client identifiers to ensure the record belongs to the correct individual. Update any demographic information as necessary.
  - **New Client:** If no client record is found after performing a search within the EMR, or a record cannot be validated as the same individual, Clinical Support Staff will register the client with a brand new record.
- To book appointment if the individual is not a client of the clinic select from the drop down:
  - **Appointment Type: New Client Initial Visit**
  - **Reason: Well Baby / Well Child**
- If the individual is a client of the clinic select one of the following based on the reason the individual provides at the time of the appointment booking:
  - **Appointment Type: Short or Long**
  - **Reason: Well Baby / Well Child**
- 45 minute appointment with PCN, followed by 15 minute appointment with NP/MD
- 2m, 4m, 6m, 12m and 18m appointments should be booked for AFTER the infant has turned that age, not earlier (for accuracy with immunizations)
- Infants/children up to and including age 5 will be booked in the above manner

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- Baby scale, height measurement instrument and resource accordion should be placed in clinic room See Appendix A - Well Baby/Child Booking & Rooming Macros (located in the EMR) and the guide on how to complete [PCOG #25 - Appendix C EMR Booking](#)

#### **HAND OFF SUMMARY:**

- Expectation that history and physical as outlined in the Rourke/Clinical Note templates will have been completed by the PCN
- PCN will present identified concerns and voiced parental concerns to Physician, Nurse Practitioner or Physician Assistant

#### **CASE MANAGEMENT:**

- PCN is responsible to review and act on the below Case Management reports at 2 months intervals. PCN's to identify to Clinical Support Staff which patients/caregivers need to have a follow-up appointment booked or a reminder letter sent indicating they are in need of a Well Baby / Child follow-up appointment.

##### ***Well Baby / Child Case Management Reports***

- Case Management reports to be run for the following ages 5 months, 13 months, 2-3 years that identifies the number of outstanding well baby visits for each of these months.

##### ***Immunization Catch- up Case Management Reports***


- Case Management reports to be run for the following ages 3 months, 5 months, 7 months, 13 months, 19 months and 7 years that identifies the number of outstanding immunizations for each of these months.(By Clinic, by Provider, by patient)

#### **EDUCATIONAL RECOMMENDATIONS:**

- It is recommended that team members become familiar with the protocol and review the documents in the reference section prior to embarking on collaborative well-baby/well-child. It is the responsibility of each professional to ensure preparation and accountability for the individual care provided. Each professional will have the opportunity to practice to full scope of practice.
- It is the responsibility of each professional to understand and practice within the limits of one's regulatory body's Code of Ethics, Standards of Practice and Competencies, as applicable and as guided by the Regulated Health Professions Act (RHPA).

#### **Reference Recommendations for Safe Evidence Based Well-Baby Care:**

1. Rourke Baby Record, Health Professional section: <http://www.rourkebabyrecord.ca/default.asp>  
These sections in particular:
  - a. Interactive RBR
  - b. Indepth Info
  - c. Parents Resources
2. WRHA Ages & Stages Questionnaires and Activity Sheets:  
<http://home.wrha.mb.ca/prog/pph/hpecd/asg.php>


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## PRIMARY HEALTH CARE PRACTICE GUIDELINES

3. WRHA Breastfeeding Practice Guidelines for the Healthy Term Infant (April 2013 revision): [http://www.wrha.mb.ca/healthinfo/prohealth/files/BF\\_Guidelines.pdf](http://www.wrha.mb.ca/healthinfo/prohealth/files/BF_Guidelines.pdf) **Caution does not include communicable disease contraindications in the process of revision.**
  - a. Pay particular attention to Appendix E: LATCH-R (page 71)
4. Perinatal Services BC Health Promotion guideline breast feeding healthy term infants v.3 March 2015 <http://www.perinatalservicesbc.ca/health-professionals/guidelines-standards/health-promotion-prevention>
5. WRHA Introduction to Solids: <http://www.wrha.mb.ca/prog/nutrition/stages-toddlers.php>
6. Best Practice Guidelines for Mental Health Disorders in the Perinatal Period BC Reproductive Mental Health Program & Perinatal Services BC <http://www.perinatalservicesbc.ca/NR/rdonlyres/3E43CC0F-8F18-4AB7-8752-E579548E7328/0/MHGuidelines2014.pdf> (March 2014)
  - a. Pay particular attention to Whooley Depression Screen
7. WRHA Oral Health Program <http://www.wrha.mb.ca/pog/oralhealth/index.php>
8. The American Academy of Pediatric Dentistry's Table 1 - Caries risk assessment tool for physicians and non-dental health care providers [http://www.aapd.org/media/Policies\\_Guidelines/G\\_CariesRiskAssessment.pdf](http://www.aapd.org/media/Policies_Guidelines/G_CariesRiskAssessment.pdf)
9. American Academy of Pediatrics (2008). Red reflex examination in neonates, infants and children. Pediatrics, 122(6), 1401-1404. <http://pediatrics.aappublications.org/content/122/6/1401>
10. Baby Friendly Initiative Strategy Ontario. Tip sheet for infant feeding informed decision making. <http://www.beststart.org/bflinks/Tip%20Sheet%20-%20Infant%20Feeding%20Informed%20Decision%20Making.pdf>
11. King, T.L., Brucker, M.C., Kriebs, J.M., Fahey, J.O., Geger, C.L., and Varney, H. (eds) (2015). Varney's Midwifery (5th ed.). Chapter 36 (Breastfeeding and the Mother-Newborn Dyad), Chapter 37 (Anatomy and Physiology of the Newborn), Chapter 38 (Examination of the Newborn) and Chapter 39 (Neonatal Care).
12. Blackwell, D., and Blackwell, J. (2015). Advanced Assessment: Interpreting Findings and Formulating Differential Diagnoses (Goolsby, M.J and Grubbs, L. eds). F.A. Davis Company: Philadelphia. Chapter 18 (Pediatric Patients)

### Orientation Suggestions for the Inter-disciplinary Team Prior to Undertaking Collaborative Well-Baby Care:

1. Review documents/websites in reference section
2. Clinical time with a pediatrician or Child Development Clinic if it can be arranged
3. Clinical time with a clinic colleague
4. Review macros and potential clinical situations with Site Medical Lead and other experienced clinicians
5. Demonstration by a colleague on navigating between Rourke and macros
6. Attend Public Health nutrition seminar on Intro to Solids
7. Attend breastfeeding education course: 3-hour online Multidisciplinary Breastfeeding Education course (University of Manitoba) and/or attend 2-day Public Health Breastfeeding course (WRHA)

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## PRIMARY HEALTH CARE PRACTICE GUIDELINES

**3. SOURCE/REFERENCES:** See reference recommendations as above

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- Margaret Kozlowski, Family Medicine Primary Care Director, Community
- Jeanette Edwards, Regional Director, Primary Health Care and Chronic Disease

**6. APPENDICES:**

- APPENDIX A - Well Baby-Well Child Booking/Rooming Macros
- APPENDIX B - Well Baby 3 day old Newborn Visit
- APPENDIX C - Well Baby 1-2 week old Newborn Visit
- APPENDIX D - Well Baby 1 month old Visit
- APPENDIX E - Well Baby Suggested Resources Birth to 1 Month Old
- APPENDIX F - Maternal - 6 week postpartum Visit (approx. 6 weeks)
- APPENDIX G - Well Baby 2 month old Visit
- APPENDIX H - Well Baby 4 month old Visit
- APPENDIX I - Well Baby 6 month old Visit
- APPENDIX J - Well Baby Resource List 2 Months Old to 6 Months Old
- APPENDIX K - Well Baby 9 month old Visit
- APPENDIX L - Well Baby 12 month old Visit
- APPENDIX M - Well Baby Resource List 9 Months Old to 15 Months Old
- APPENDIX N - Well Baby 18 month old Visit
- APPENDIX O - Well Child 2-3 year old Visit
- APPENDIX P - Well Child 4-5 year old Visit
- APPENDIX Q - Well Child Resource List 18 Months Old to 5 Years Old
- APPENDIX R - Health Care Professional Tips and Red Flags
- APPENDIX S - Well Baby/Child Resource Reference Sheet For Accordion File
- APPENDIX T - EMR Well Baby/Child Documentation to Support Tracking Visits
- APPENDIX R- How to use the Well Baby/Child System

**SCOPE: Applicable to all WRHA Primary Care Direct Operations Clinics, Walk In Connected Care Clinics, WRHA Staff in Fee for Service Accuro users**