



CHANGE IDEA: Incorporate family-engaged developmental surveillance into well-child visits.

STEP 1: GET READY (TASKS)

- A. Engage senior leadership to support staff time and resources toward quality improvement efforts.
- B. Convene a planning team (e.g., providers, nurses, care coordinators, administrative staff) to align on goals and logistics.
- C. Align on the value of family engagement in surveillance (e.g., improved child outcomes, early identification of delays, continued support of children with identified delays, enhanced family-provider relationships).
- D. Select a family-engaged surveillance tool aligned with Bright Futures guidelines. This example uses the [Cycle of Engagement – Well Visit Planner®](#). Allow time for your health center's approval of third-party tools, or choose resources that can be integrated into the electronic health record (EHR).
- E. Define the target population (e.g., children ages 0-5 during well-child visits). Discuss necessary adaptation processes (e.g., for children and families with known disabilities, ensure families feel seen when they receive a tool that may not apply to their child).
- F. Define team roles (e.g., who distributes, reviews, and responds to reports). Schedule [staff training](#) on the Well Visit Planner, including how to interpret family reports and incorporate them into developmental conversations.

STEP 2: PLAN AND PRACTICE

The planning team develops a workflow that integrates the Well Visit Planner into the pre-visit preparation and well-child visits.

SAMPLE PROCESS:

- A. Send families a digital or paper Well Visit Planner 3-5 days before the visit. Encourage completion via [phone/email reminders or text messages](#).
- B. Assign a pediatric nurse or care coordinator to review submitted Well Visit Planners 24-48 hours before the visit and highlight developmental concerns, risk factors, or family priorities.
- C. Prepare the provider with a summary of family responses in the EHR or printed form. Include Bright Futures prompts to support conversations about development and anticipatory guidance. See a [sample summary for a 9-month visit](#). Review this information during the morning team huddle if applicable.
- D. During the visit, providers use the Well Visit Planner report to start the developmental surveillance conversation, addressing family observations, concerns, and developmental milestones, including social-emotional health.
- E. At the end of the visit, share a summary of key takeaways and any referrals or follow-ups discussed.

- F. Pilot the full process with one provider and one age group for 1 week to observe the workflow in action.

STEP 3: REVIEW AND REFINE

Create a [huddle flow](#) and hold a review huddle with participating staff to assess:

- Frequency of Well Visit Planner use
- Time required for pre-visit review and in-visit conversation
- Provider and family satisfaction
- Workflow challenges or training needs

Use findings to adapt the workflow, tools, or training before expansion.

STEP 4: EXPAND

After refining the process, gradually expand implementation to additional providers and age groups. Continue regular huddles to identify challenges and adapt for different populations. Celebrate early wins to maintain momentum and foster staff buy-in.

STEP 5: SUSTAIN

Integrate family-engaged developmental surveillance into routine operations by:

- Including Well Visit Planner steps in job descriptions, [onboarding](#), and [staff training](#)
- Establishing standard operating procedures
- Periodically reviewing process and outcome metrics
- Sharing success stories and lessons learned

Maintain a continuous improvement loop to adapt as family needs, technology, or developmental guidelines evolve. If your organization has a formal quality improvement plan, ensure this change is included.

As more staff engage with the process, review data and user feedback to refine how the Well Visit Planner is integrated into workflows. Make needed updates to [EHR templates](#), communication scripts, and training.