The Well-Visit Planner for Families

The Well-Visit Planner is an Internet-based tool (www.wellvisitplanner.org) developed to improve well-child care for children 4 months to 6 years of age. Information in this tool is based on recommendations established by the American Academy of Pediatrics *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*, 3rd Edition. The tool helps parents and caregivers to customize the well-child visit to their family’s needs by helping them identify and prioritize their health risks and concerns before the well-child appointment. This means that parents and health care professionals are better able to communicate and address the family’s needs during the well-child visit.

The Well-Visit Planner and Head Start

The Child and Adolescent Health Measurement Initiative (CAHMI) has worked with the Office of Head Start National Center on Health to expand the Well-Visit Planner through age 6 years and has prepared materials to help Head Start and Early Head Start programs use this tool with the families they serve. Knowing that school readiness begins with health, Head Start and Early Head Start programs are committed to supporting the health and well-being of every child enrolled in a program. The Well-Visit Planner has been tested in several programs, and staff have found it helpful for encouraging parents to complete well-child visits and become familiar with what is expected at each visit. The tool also reinforces the role of parents as the experts for their child’s needs—including those related to health.

*School readiness begins with health!*
Using the Well-Visit Planner in Head Start and Early Head Start Programs

In partnership with the National Center on Health, CAHMI has prepared a number of tools and resources to help programs assess their readiness to begin using the Well-Visit Planner as a standard part of their work with parents and children. There is also an implementation toolkit that helps programs with step-by-step implementation of the Well-Visit Planner within the program, including materials to help promote the use of the tool among parents. Materials are also there to help reach out to local health care professionals to help prepare them for the use of the Well-Visit Planner by their patient families.

These materials will be housed on the Early Childhood Learning & Knowledge Center but are currently available at www.cahmi.org/projects/wvp/wvp-implementation-portal.

How does the Well-Visit Planner help families?

Completing the tool, which takes about 15 to 20 minutes, will help empower parents and caregivers to identify priorities for a child’s upcoming well-child visit; it will also prepare them for what to expect at that visit. The content of the Well-Visit Planner is different based on the age of the child. It is developed to be used before each well-child visit through age 6 years. The Well-Visit Planner also includes educational materials about topics such as a child’s growth and development, language development, and safety. The educational materials address the topics of most importance for each age.

After parents use the Well-Visit Planner, they can save or print a summary or Visit Guide of the needs and priorities for the visit. They will take this summary with them to help prioritize their time with the child’s pediatrician or primary health care professional. Parents can print a copy to leave with the physician or send a copy prior to the visit if the child’s physician has a secure e-mail address. The summary can also be discussed with the parents and the family service worker and integrated into the family partnership agreement.

Additional Background

The tool was developed and is maintained by CAHMI to engage parents as partners to improve well-child care services as a part of a project supported by the US Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Research Program (R40 MC08959). Continued development and implementation of the Well-Visit Planner is supported by CAHMI and volunteer advisors and through support from HRSA/Maternal and Child Health Bureau through Cooperative Agreement U59-MC06890.