


Annual Healthcare Visit Toolkit Instructions

Purpose Statement: Regular annual healthcare visits with a primary care provider (PCP) are an important, evidence-based, part of well-being and are focused on health, fitness, and preventive care, not just addressing illness or problems. The Annual Healthcare Visit Toolkit is meant to bolster identified factors which improve the quality of healthcare individuals with developmental disabilities (DD) receive by using documents developed to streamline all steps of the process; pre-visit preparation and planning; health literacy and learning; advocacy and communication occurring during the visit; and post-visit follow-up and maintenance. These tools will help caregivers navigate the healthcare system more effectively and efficiently resulting in better outcomes for individuals with DD (5) (1) (3) (4) (2).

Will each individual's toolkit contain the same documents?

- No. The documents chosen will vary from one individual to the next, as no two individuals are exactly alike. The toolkit for each individual should be person-centered and its content tailored to meet their age and gender.
- The Content List:






Annual Healthcare Visit Toolkit Contents List

Key:  = Print and take to appointment.  = Print, fill out and take to appointment.

Recommended Immunization Schedules

- [Children 0-6 Recommended Immunization Schedule](#) - Immunizations for birth to age 6.
- [Children 7-18 Recommended Immunization Schedule](#) - Immunizations for age 7 to 18.
- [Adult Recommended Immunization Schedule](#) - Immunizations for ages 19 and up.


Preparation & Planning

-   **W-1 Pre-Visit Checklist** - Checklist to streamline an annual healthcare visit.
-   **W-10 Annual Healthcare Visit - Primary Care Provider (PCP) Appointment Form** - Form for caregivers to take with them to the PCP appointment to share information and organize instructions.
-  **W-11 Annual Healthcare Visit Preventive Screening Checklist** - Checklist of annual healthcare screening tests done for adult individuals with developmental disabilities.


Health Literacy & Learning

- W-2 Common Healthcare Abbreviations** - Frequently used healthcare abbreviations.
- W-3 Common Lab Tests** - Frequently requested laboratory tests ordered by primary care providers.
- W-4 Body Mass Index (BMI) Chart** - A chart used to compare the ratio of someone's height to weight in order to estimate body fat percentage.

Advocacy & Communication

-   **W-5 DBHDS My Care Passport** - A tool to help assist caregivers share important information about individuals with others.
- W-6 Consent Tip Sheet** - Chart to assist healthcare professionals understand surrogate decision makers for persons who lack the ability to make decisions for themselves.
- W-7 Medicaid Waiver Tip Sheet** - Briefly explains what a Medicaid Waiver is and gives a description of each type of Waiver.
- W-8 Discharge Tip Sheet** - Outlines the requirements for prescription/orders medications, treatments, protocols, or equipment within the Waiver system.

Follow-up & Maintenance

-   **W-9 Post-Visit Checklist** - Checklist to streamline follow-up after an annual healthcare visit.

July 2023
Content List
The Virginia Department of Behavioral Health
and Developmental Services
Page 1 of 1

Annual Healthcare Visit Toolkit Instructions

The Recommended Immunization Schedules

- The recommended immunization schedules are three-clickable links directly connected to the Centers for Disease Control and Prevention (CDC) website which allows access to downloadable files of the recommend immunizations schedules within each age group.
 - [Children 0-6 Recommended Immunization Schedule](#)
Schedule of recommended immunizations for birth to age 6.
 - [Children 7-18 Recommended Immunization Schedule](#)
Schedule of recommended immunizations for age 7 to 18.
 - [Adult Recommended Immunization Schedule](#)
Schedule of recommended immunizations for adults age 19 and up.

Preparation & Planning

W-1 Pre-Annual Healthcare Visit Checklist

- The Pre-Annual Healthcare Visit Checklist will help caregivers gather and organize important information before the visit.
- Complete the checklist. Multiple people may be completing the form and/or accompanying the individual to the actual visit. For this reason, there is space for specific details and a space for the caregiver who completes each task to record their initials. Caregivers who complete tasks will record their full name at the end of the form.
- Notify the individual's parent, legal guardian, or Authorized Representative (AR). Document the name of the person notified, and the date and time notified, as well as the caregiver who completed the notification. In the event notification is called into question, the time, date, and person notified is well-documented and defensible.
- Verify the address, date, and time of the annual healthcare visit. This helps lower risk of delays or missed appointments.
 - When contacting the PCPs office to verify appointment details, it is a good time to ask about any fasting requirements for the individual prior to the visit, to get specific fasting instructions if applicable, and to confirm the individual's insurance information is correct and the PCP accepts the individual's insurance.
- Check to see if pre-appointment lab work, is required. Document the lab company's contact information, along with the date the labs where completed, and if the information has been transmitted to the PCPs office. If not, lab work test results may need to be picked up and hand carried by the individual or the caregiver to the appointment.
- Gather documents which should be taken to the annual healthcare visit.

Annual Healthcare Visit Toolkit Instructions

- Form ***W-5 My Care Passport*** is an advocacy and communication tool for individuals with DD. This is a recommended form to be completed, printed and taken to the annual healthcare visit. This 4-page document will be reviewed in detail within these instructions.
- ***W-10 Annual Healthcare Visit – Primary Care Provider (PCP) Appointment Form*** is also a recommended form to be used while at the appointment. A caregiver is encouraged to print and complete the top half of page 1 of the form before the actual appointment. The bottom half of page 1 of the form is for completion during the visit with the PCP. This 2-page form will be reviewed next in these instructions.
- The caregiver should print any other documents specific to the individual which requires a physician’s signature to take along to the appointment. Such documents might include Form 485 The Skilled Nursing Plan of Care, or any orders/protocols for health & safety, etc.
- Print and take to the appointment the individual’s current Medication Administration Record (MAR) along with their history & physical record which will be required by the PCP to achieve an accurate assessment.
- Next is verification of transportation to the annual healthcare visit.
 - Having the distance in miles to the visit and the estimated time of travel documented will assist the individual and caregiver to be prepared on the day of the appointment.
 - If the individual is being transported by a Medicaid/CCC+/Cardinal Care transportation company, document the company name and contact information. These details will also need to be communicated to the Care Team.
 - The link to the Medicaid/CCC+/Cardinal Care transportation services has been added to this checklist.
 - If a caregiver will be providing transportation to and from the appointment, please note confirmation.
- The caregiver accompanying the individual to the appointment should be briefed on the details of the appointment by using the ***W-1 Pre-Annual Healthcare Visit Checklist***.
- In anticipation of the appointment there is a section for caregivers to confirm everything the individual needs to take with them to the appointment, such as a communication device, any security/sensory items, a change of clothes, briefs, etc.
- To help with this task a “To Go” bag checklist is included at the end of the form.
- Finally, each caregiver who assisted with completing information on the ***W-1 Pre-Annual Healthcare Visit Checklist*** is encouraged to sign and print their names at the bottom of the form so initials on the form can be quickly identified.

W-10 Annual Healthcare Visit – Primary Care Provider (PCP) Appointment Form

- This is a 2-page form. The top half of page 1 of this form is to be completed before the appointment and the bottom half is to be completed during the visit. Page 2 of the form is

Annual Healthcare Visit Toolkit Instructions

a checklist of topics for the individual and the caregiver to discuss with the PCP during the appointment.

- The top of the first page is space to complete vital information which will be asked for at the appointment such as the individual's name, date of birth, Medicaid number and the name of the physician being seen as many offices might have a number of practitioners.
- The next section of this form has:
 - A space to write the reason for the visit. This should include the individual's annual healthcare visit, and any other concerns which have come up for the individual since the last visit to the PCP's office.
 - The next space is for a note about any other recently treated conditions the individual might have experienced in the last 12 months or since the last PCP office visit, which the PCP may not be aware of. This may include a wide range of psychological, dental, medical, nutritional, and or behavioral issues.
 - List any and all visits the individual has had to an emergency room (ER), and/or a community urgent care center within the past 12 months, and/or since the last visit to the PCP's office. The reason for the visit, the final diagnosis, and any treatment or medications prescribed as a result should be documented and communicated to the PCP during the annual healthcare appointment.
 - List any and all hospital admissions which have occurred in the past 12 months, and/or since the last visit to the PCP. Note the reason for the admission, the diagnosis, the length of stay, and any treatments or medication changes as a result.
- The bottom section of page 1 of the form has sections to record:
 - Any vital sign measurements assessed at the annual healthcare visit (e.g., blood pressure, temperature, pulse/heart rate, oxygen level, and respirations).
 - The individual's weight, and height, if checked.
 - Any treatments, medications, durable medical equipment evaluations, or referrals to specialist ordered by the PCP during the annual healthcare visit and space for those orders to be written out.
 - The PCP's signature, if any orders/protocols are written out on the appointment form, and a signature line for the caregiver attending the visit.
- Page 2 of the form is a list of checkboxes which should prompt caregivers to ask the PCP questions about newly prescribed medications and/or medication changes, other possible topics, and next steps.

W-11 Annual Healthcare Visit Preventive Screening Checklist

- This 1-page form is a checklist for tracking annual preventive screenings for all adults.
 - The first column is to record the date of the last screening.
 - The second column is the name and/or reason for the screening.
 - The third column are the listed requirements for completing the screening.

Annual Healthcare Visit Toolkit Instructions

- The form is divided into categories which are titled all adults, version & hearing, immunizations, men, women, specific concerns, general counseling and guidance.
- The screening recommendations are best practice guidelines from the Massachusetts Health Quality Partnership (MHQP) 2018 Adult Preventive Care Guidelines and The Centers for Disease Control and Prevention (CDC) Adult Immunization Schedule by Age Recommendations for Ages 19 Years or Older, United States, 2023.
- Some individuals with DD may require special accommodations to tolerate certain preventive screening tests to be completed. If this is the case, it should be discussed with the individual's PCP and may require additional coordination for a successful screening.

Health Literacy & Learning

W-2 Common Healthcare Abbreviations

- This 1-page educational document is an alphabetized list of frequently used healthcare abbreviations which may be seen in prescriptions, orders, and PCP or nursing notes. Caregivers should become familiar with these abbreviations to gain better understanding of the medical terminology used by healthcare professionals. This skill will enable caregivers to navigate the healthcare system more easily.

W-3 Common Lab Tests

- This 1-page document is a listing of commonly ordered laboratory and imaging tests ordered by PCPs and include a brief explanation of each.
- Knowledge of basic healthcare information such as healthcare abbreviations and lab tests can improve individuals and caregivers' health literacy. Studies have shown that improved health literacy can lead to better health outcomes.

W-4 Body Mass Index (BMI) Chart

- This 1-page chart is used to compare the ratio of an individual's height to weight in order to estimate body fat percentage.
- When looking at the chart, find an individual's height in the column on the left and their weight in the row across the top to conclude which BMI category they fall into such as underweight, healthy, overweight, obese, or extremely obese.
- Caregivers should discuss an individual's BMI with the PCP and never adjust the nutritional intake of an individual without a healthcare professional's written order/protocol. The PCP may refer an individual to a registered dietician or nutritionist for dietary education and nutritional assistance with their diet or diet modifications.

Advocacy & Communication

W-5 DBHDS My Care Passport

Annual Healthcare Visit Toolkit Instructions

- This 4-page document is a communication and advocacy tool used to relay the unique needs of individuals with DD to healthcare professionals and others and is a recommended form to be used during the annual healthcare visit.
- The form is a fillable PDF document which should be saved to a computer, filled in, and printed. It may also be printed and filled in by hand.
- A photo of the individual in a state of wellness, should be uploaded on the first page. It is a great advocacy tool to use when the individual is ill/sick, as it will be easy for healthcare professionals to visually see the difference in an individual's appearance.
- Page 1 is for documenting the individual's personal information, such as name, the type of home in which they live, who can give consent for their treatment, the name of their parent, legal guardian, or authorized representative (AR), who can receive personal health information about them, and what allergies they have.
- Page 2 is red representing the most important details to know about the individual such as how they communicate, how they deal with pain, what supports they need when eating or drinking, how they take their medication, respond to medical treatments, their vision & hearing, safety requirements and common behaviors.
- Page 3 is divided into two sections of yellow and green. The yellow top section is for relaying information about the individual such as the support needed for activities of daily living (ADLs), how they move around in their environment, and how they typically sleep. The bottom green section is for things the individual likes and dislikes, and their activities, behavior and functioning on a routine/normal day.
- Page 4 is divided into two sections of blue and purple. The top blue section is for healthcare professionals to write updates regarding any change in condition the individual may have experienced. The bottom purple section is space for additional notes.
- Additional My Care Passport Resources:
 - [My Care Passport Health and Safety Alert.](#)
 - [My Care Passport and Advocacy Tips Narrated Training.](#)
- Live virtual trainings on the My Care Passport are offered periodically. Check the Office of Integrated Health's webpage and click on Educational Resources for a list of current training opportunities.

W-6 Consent Tip Sheet

- This 1-page document is an educational tool which covers consent information as it relates to individuals with DD regarding surrogate decision makers for persons who lack the ability to make decisions for themselves.
- This document was created to be shared with healthcare professionals in medical facilities who may not be familiar with consent requirement affecting individuals with DD.

W-7 Medicaid Waiver Tip Sheet

Annual Healthcare Visit Toolkit Instructions

- This 1-page document is a summary explaining what a Medicaid waiver is, the types of waivers options, with additional educational resources at the bottom.
- This document was created to be shared with healthcare professionals in medical facilities who may not be familiar with Medicaid waiver requirements affecting individuals with DD.

W-8 Discharge Tip Sheet

- This 1-page document is a review of discharge requirements in the Medicaid waiver system needed by provider agencies in the community caring for individuals with DD.
- It outlines prescription/orders requirements for medication, treatments, specialist assessments, durable medical equipment, and/or protocols within the Waiver system which are needed upon discharge from a medical facility.
- This document was created to be shared with healthcare professionals in medical facilities who may not be familiar with Medicaid waiver discharge requirements.

Follow-up & Maintenance

W-9 Post-Annual Healthcare Visit Checklist

- This 2-page checklist will help streamline any follow-up requirements after the annual healthcare visit, to include the date and time the task was completed along with the initials of the caregiver completing the task.
- The checklist has a space to document the next scheduled annual healthcare visit date and time, if known, and any new prescriptions or other orders.
- Verify new prescriptions have been transmitted to the correct pharmacy and filled, if applicable. It is important to notify the PCP if a prescription cannot be filled for any reason and to get instructions on next steps.
 - Speak with the pharmacist about any questions concerning the new medication.
 - Ask pharmacist for side-effect information on any new medications.
 - Each new medication prescription should include diagnoses information.
 - All discontinued or changed medications require a written prescription.
- The medication administration record (MAR) should be updated with any new medications, discontinued medications, or changed medications after the appointment.
- Any required preventive screening should be scheduled with the appropriate facility, and the date and time should be noted, along with the location of the appointment and any special accommodations required by the individual. If caregivers are unclear on where to schedule the screening test, call the PCPs office for recommendations and/or assistance.
- Schedule any required lab work, and document the lab company used, the address, and the date the labs were completed and transmitted to the PCPs office. Follow-up with PCPs office to verify they have received the results.

Annual Healthcare Visit Toolkit Instructions

- Schedule any required specialist appointments as needed. Note the specialist contacted, their name and address, time and date of appointment.
- Schedule any required durable medical equipment evaluations. Note the person contacted, address, date and time of evaluation.
- Work with the Care Team to draft protocols for specific care concerns identified during the annual healthcare visit. Some individuals with stable health may not need specific protocols. Other individuals whose health may be unstable or declining, as evidenced by multiple ER visits or hospital admissions, may need specific physician ordered protocols. Some possible needed protocols might include measuring and documenting an individual's vital signs on a regularly scheduled basis, repositioning an individual more frequently to reduce risk for skin breakdown or possible pressure injuries, modified diet protocols for those who have had choking events or difficulty swallowing (dysphagia).
All care protocols are orders which should be reviewed and signed by the individual's PCP. If you need more information about protocols, please contact the Registered Nurse Care Consultant at OIH-HSN in your region for technical assistance.
- The post-checklist also has a box for notification of the individual's parent, legal guardian, or Authorized Representative (AR). It is important to note exactly who was spoken to when contact was made by documenting their name, the date, the time, and the caregiver who made the contact. If ever notification is called into question the information is accurate and defensible.
 - Other persons to notify about the results of the individual's annual healthcare visit are the individual's Support Coordinator (SC), their day program, the individual's work or job program, and/or any other community program.
- Follow-up with the PCPs office if there are any issues with prescriptions/orders, specialist appointments, preventive screenings, and/or lab work.
- Finally, each caregiver who assisted with completing information on the W-9 Post-Annual Healthcare Visit Checklist is encouraged to sign and print their names at the bottom of the form to verify identity for their initials.

References:

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5. Melville C., Finlayson J., Cooper S.-A., Allan L., Robinson N., Burns E., Martin G. & Morrison J. (2005) Enhancing primary health care services for adults with intellectual disabilities. *Journal of Intellectual Disability Research 49, 190–198*