

## Medical Chart Review - START Adolescent Health Project

The **purpose** of the Medical Chart Review for the START Adolescent Health Project is for practices to ‘take a snapshot’ of the care that their providers conduct during Adolescent Well Visits related to depression and substance abuse. By taking this snapshot, practices can better understand whether their office systems and processes related to depression and substance abuse care during Adolescent Well Visits are being experienced by patients in the manner intended.

To facilitate practices to conduct the Medical Chart Review, OPIP has developed a ‘**Snapshot Form**’ in Excel. The Snapshot Form contains drop-down menus and check-boxes with which providers answer questions regarding the depression and substance abuse screenings they conducted during Adolescent Well Visits, the documented results of those screenings, and the documented follow-up steps resulting from those screenings.

**To complete the Snapshot Form**, each provider in the practice who conducts Adolescent Well Visits selects a specified number of charts in which an Adolescent Well Visit occurred for patients between (and including) the ages of 12 and 18. For each of these charts, providers will then answer the following questions for *both* depression screening and substance abuse screening:

1. Was a Screening Conducted for depression/ substance abuse using a standardized tool?
  - Snapshot Forms have been customized for practices based on the tools they use
2. What was the Screening Result using the standardized tool for depression/ substance abuse?
  - Definitions of Screening Results have been provided to practices for the tools they use
3. What Follow-Up steps were taken
  - Providers are instructed to select all steps that have been documented in the chart

### Sample Snapshot Form

#### SNAPSHOT FORM

Charts of Adolescents who had Well Child Visits	Information Gathered in Reviewing Adolescents									
	DEPRESSION SCREENING					SUBSTANCE ABUSE SCREENING				
	Screening Conducted with PHQ-A? (Select ONE)	Answer IF SCREENING WAS CONDUCTED				Screening Conducted with CRAFFT? (Select ONE)	Answer IF SCREENING WAS CONDUCTED			
		Screening Result (Select ONE)	Follow-Up (Check ALL THAT APPLY)				Screening Result (Select ONE)	Follow-Up (Check ALL THAT APPLY)		
<b>PROVIDER #1</b>										
Chart #1	Yes	At Risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other	Yes	Low risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other
Chart #2	Yes	At Risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other	Yes	Moderate Risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other
Chart #3	Yes	Not At Risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other	Yes	High risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other
Chart #4	Yes	No documentation	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other	Yes	Not at risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other
Chart #5	Yes	No documentation	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other	Yes	No documentation	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other
<b>PROVIDER #2</b>										
Chart #1	Yes	At Risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other	Yes	Low risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other
Chart #2	Yes	Not At Risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other	Yes	Moderate Risk	<input type="checkbox"/> Referred <input type="checkbox"/> Counseled	<input type="checkbox"/> Made a care plan <input type="checkbox"/> No documentation	<input type="checkbox"/> Other