**PHLN PCP Visit Script**

****Version 2

**INTRODUCE**

**Introduce yourself and briefly describe the purpose of your call.**

“Good morning/afternoon, this is [your name] calling on behalf of [clinic name]. May I speak to a parent or guardian of [patient’s full name]?”

“How are you doing today? Is this a good time to talk? I am calling that your child is due for their routine visit with their primary care provider. If you’d like, we can schedule that appointment at [Clinic name] now? Or if not, I can call back later.”

**BUSY**

***patient is busy or unable to talk at the moment***

“I understand. When would be a better time for me to call back?”

“Great. I’ll call back **[DATE AND TIME—e.g., at 4 p.m. tomorrow, before 10:00 tomorrow morning, after 5 p.m. on Wednesday**]. Thanks so much for your time.”

***Patient Transferred Care or moved out of area (Note in excel tracker and TE)***

**MOVED CARE**

“I understand, thank you for letting us know so I can note that! Would you be willing to call your health plan (SFHP or Anthem) so they update your medical home and you avoid any potential billing concerns? I can provide you a phone number to reach them. (***PROVIDE PLAN PHONE NUMBERS).***

**IF YES**

***patient has time to talk***



proceed to **CONNECT** step

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**CONNECT**

**Provide high-level description of appointment.**

“Great! It is recommended that children/adolescents have a well child visit every one to two years. It looks like your child is due, and we would like to schedule [patient’s name] for a well-child visit with their provider. Even if your child is healthy, well-child visits are a good time to focus on your child's wellness. Talking about ways to improve care and prevent problems helps keep your child healthy.

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proceed to **ASK** step

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**ASK**

**Ask to schedule an appointment with provider.**

Great, before I look at our upcoming availability to schedule, we would like to verify patient information. Can you please verify [patient’s name]’s date of birth?

[VERIFY]; if not able to verify or provided incorrect information, then stop the call and ask that they call back with guardian/parents to schedule.

Great, looking at availability in the schedule now. Is [patient’s name] available the week of XX?”

**IF NO**

***patient does not want to schedule an appointment***

“I understand. Is there anything else I can do for you? If you change your mind, you can call us back at [clinic call back number]. Thank you for your time.

end call

**IF YES**

***patient would like to schedule an appointment***

**“**We have available timeslots from XX-XX during that week. Would one of those times work for you?”

proceed to  **RESPOND** step

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**RESPOND**

**Close the loop by highlighting important details or answering further questions.**

“Great, you are scheduled/confirmed for XX-XX. Before you go, I just want to share three important things that would be helpful to bring on the day of the appointment to make sure we address all your needs or make the appointment go by faster:

1. Your child’s immunization card or record to ensure that our records are up to date
2. A list of topics or questions you may want to discuss with your child’s provider
3. Any school or other activity forms that you need completed

“If you do not have these some or all of these items, that’s okay too, you can still come to the appointment. Do you have any other questions/ is there anything else that I can help you with today?”

***patient has no further questions***

**IF NO**

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 proceed to  **EXIT** step

**IF YES**

***patient has further questions***

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refer to **FAQs**, then proceed to **EXIT** step

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**EXIT**

**Thank patient for their time.**

“Thank you so much for taking the time to discuss your appointment with me. Again, my name is [your name]. We are looking forward to seeing [patient’s name] in the clinic on [day, date]!

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***Frequently Asked Questions (FAQs)*** *that patients may ask:*

**My child is very healthy; why do they need to come to the clinic?**

* Even if your child is healthy, this visit provides a great opportunity to talk about prevention as well as answer any questions you may have about your child’s growth and development.

**Is my child going to get shots or vaccines during this visit?**

* I am not a clinician so I cannot provide you the best answer to that question. But this visit with your provider will be an excellent opportunity to review your child’s current immunizations and assess if any are needed. If your child is due for a particular vaccine, you can always ask any questions or discuss any concerns you may have with the provider.

**If they bring up a physical (or other medical) complaint during outreach phone call**

* [Acknowledge you are hearing person]. I am not a clinician, so I am not the best person to answer your questions/concerns. We do have a Nurse Advice line/On-call physician I can transfer you directly over to them and you can speak with them about your concerns. Would you like me to transfer you?

**If unsure that insurance is still valid?**

* Recommend they call their insurance to get the most up-to-date information about their coverage.

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**Leaving a voicemail**

Hello, this message is for the parent(s)/guardian for [patient’s full name]. This is [your name] calling on behalf of [clinic name] and I am leaving you a non-urgent message. I am calling because we would like to schedule [patient’s name] for a routine well-child visit with their provider. Please call us back at [clinic number] if you’d like to schedule an appointment, or if you are no longer receiving care with [clinic name]. Again the number is [clinic number]. Thank you and we look forward to hearing from you!