

Performance Improvement Committee

August 19, 2020



August PI Committee Agenda

Monthly Dashboard

- Medication Errors
- Food Insecurity
- Depression Remission

Improvement Updates – Progress and Challenges

- Phone Access
- Flu Campaign 2020

Population Health Updates

- Cancer Screenings
- Pre-Diabetes

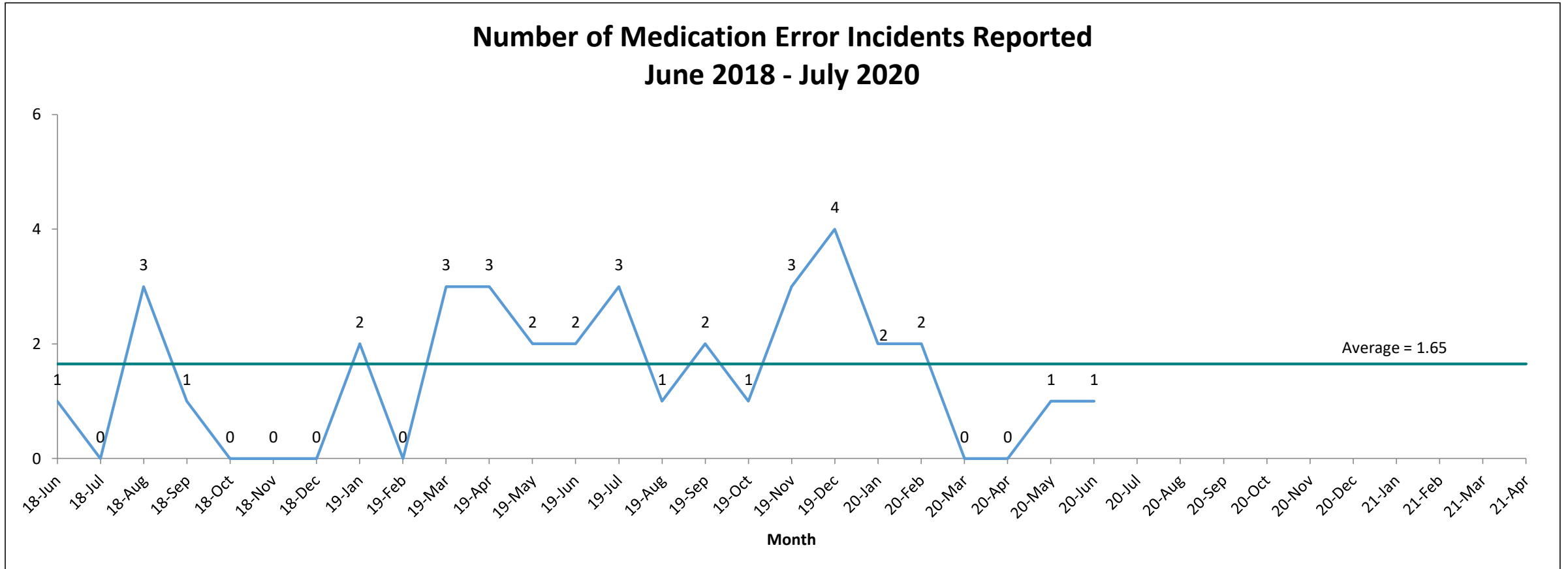


Monthly PI Dashboard



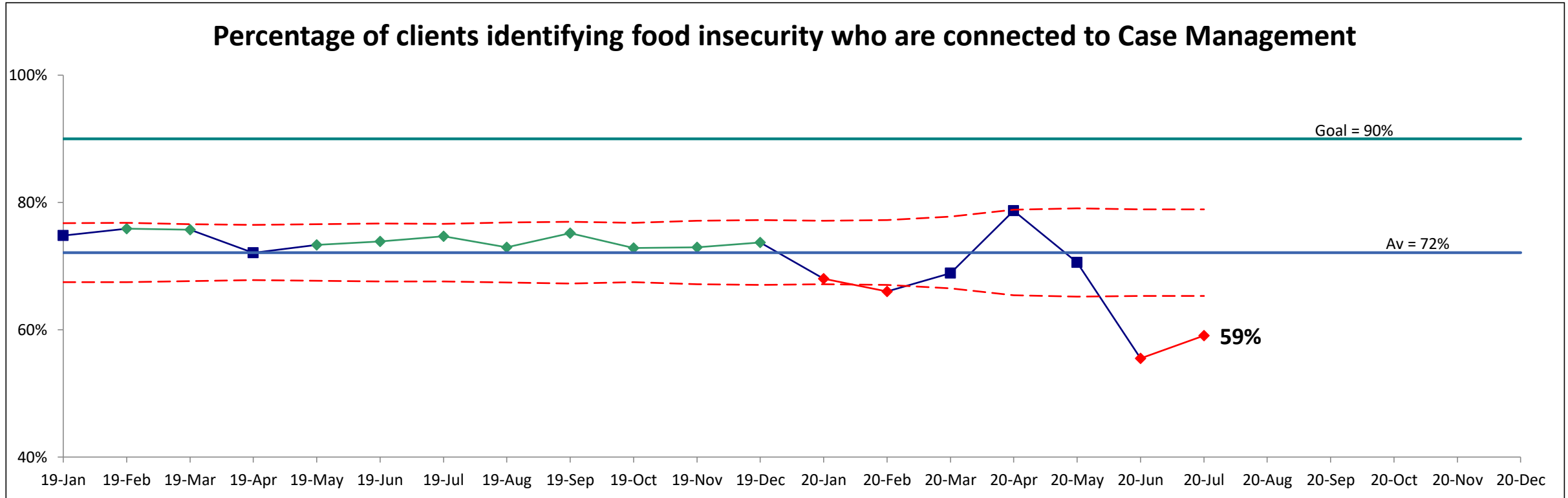
Medication Errors

Client Safety Goal: By June 2020, Medication Errors will decrease to 0



Food Insecurity

Food Security Goal: By December 2020, 90% of clients who identify as having food insecurity on the PREPARE tool will be connected to Case Management*

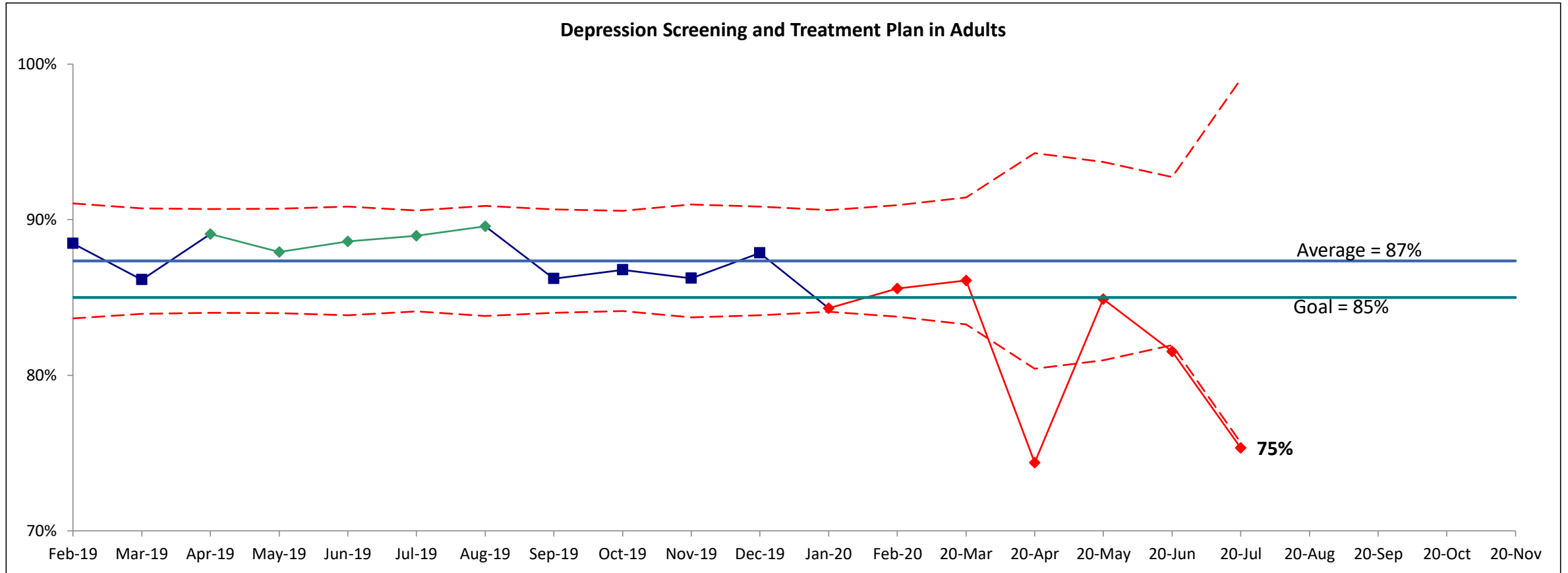


*Includes Community Health Workers



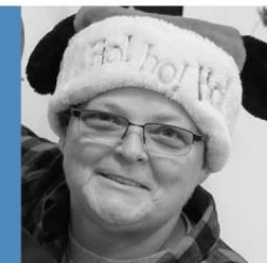
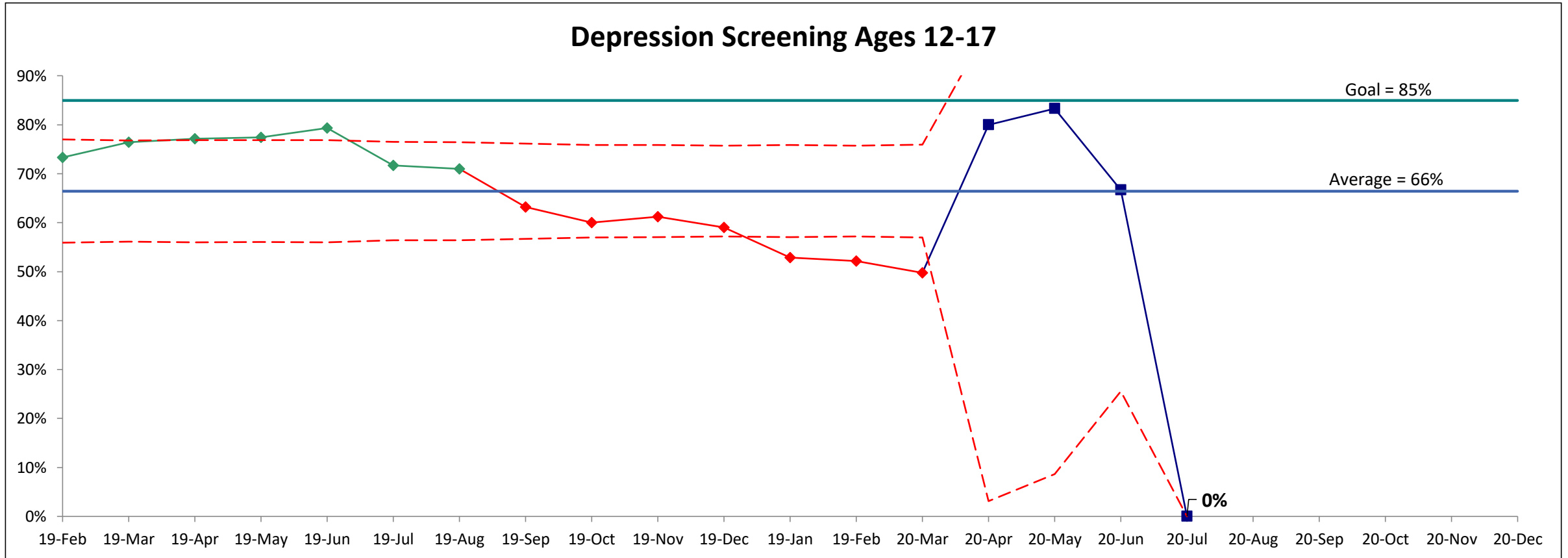
Depression Screening and Treatment - Adults

Depression Screening Goal: By August 2020, 85% of clients over 18 years of age will be screened for depression using a validated tool.



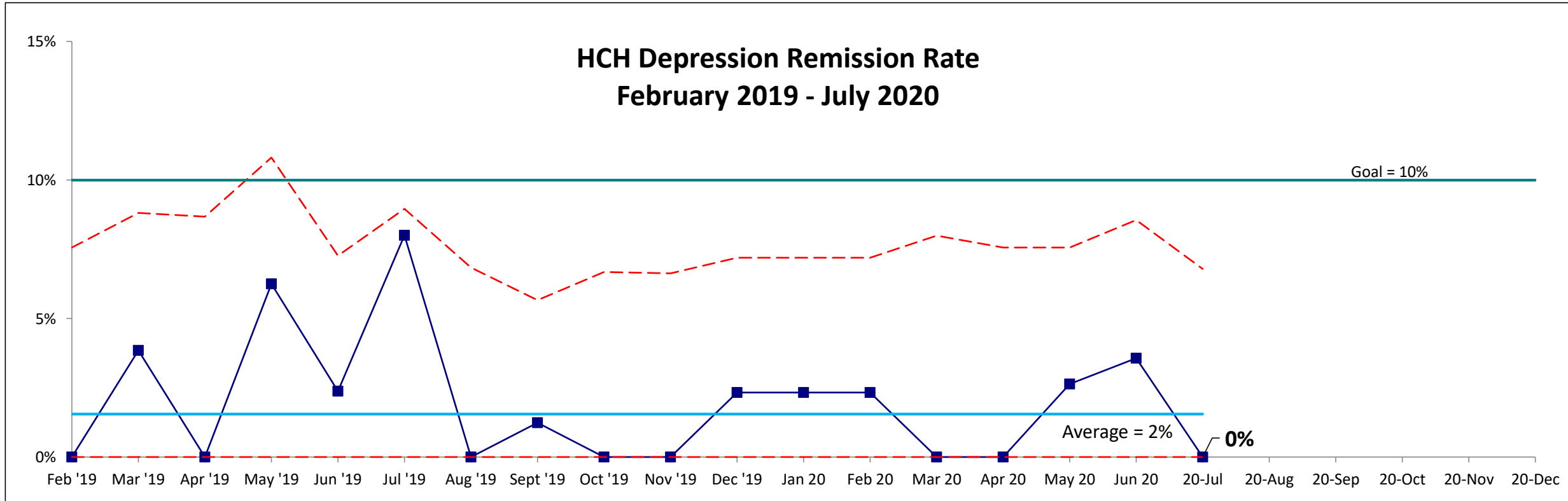
Depression Screening and Remission - Adolescents

Depression Screening Goal: By August 2020, 85% of clients ages 12-17 will be screened for depression using a validated tool.



Depression Remission

Depression Treatment Goal: By December 2020, 10% of adults diagnosed with major depression or dysthymia who scored positively on an initial PHQ-9 (>9) will demonstrate remission at 6 months (PHQ <5)

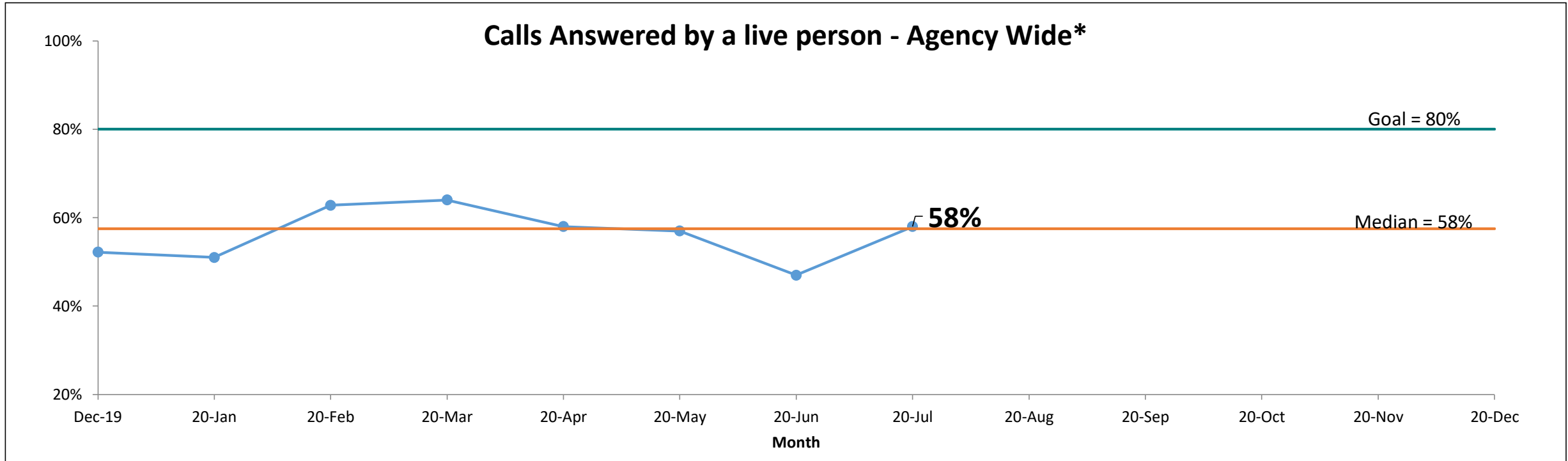


PI Project Updates



Phone System Access

Client Phone Access Goals: By December 2020, 80% of calls will be answered by a human and 80% of voicemails will be returned within 1 business day.



Data includes Scheduling line, Medical Records, Referrals, Medical Triage line, West Baltimore Main*, Baltimore County Main*, & Fallsway Front Desk. Data excludes weekends



Phone System Access: Workgroup Overview

Vision for client experience by phone

- A simple way to reach the person who can address their needs
- Calls answered in a timely, courteous fashion
- Messages returned in a timely, courteous fashion
- Phone conversations that are plain-spoken and easy to understand
- Information about services available that is clear, accurate and timely
- An easy system to register complaints, compliments or suggestions (as well as a workflow to direct, address and respond as necessary)
- Information documented in a manner that supports or improves their care



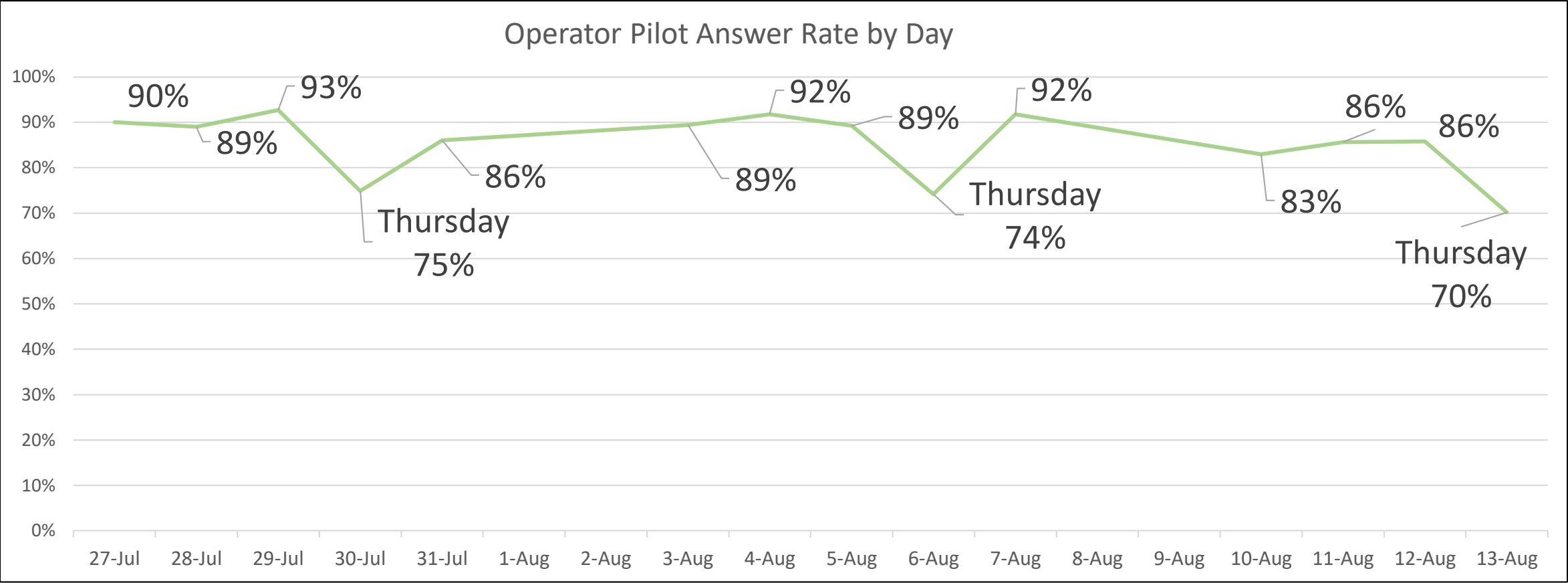
Phone System Access:

- **Performance Indicators**
 - **Workgroup Answer Rate**
 - **Workgroup Maximum or Average Abandon Time**
 - **Workgroup Voicemail Return Rate**
 - **Workgroup Average Call Transfer Rate (First call resolution)**
 - **Semi-Annual Client Experience Survey – Three Questions**
- **Sub Workgroups:**
 - **Vendors + Mitel System Management**
 - **Documentation of Phone Notes in Centricity**
 - **Voicemail Management**



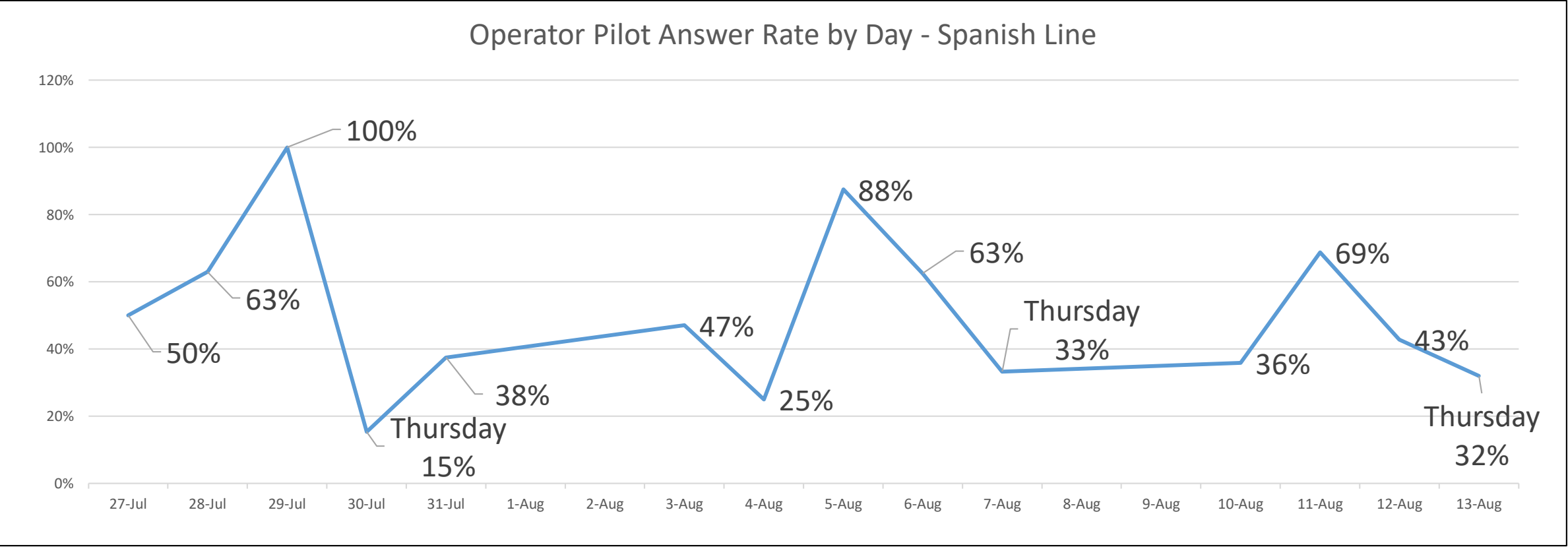
Phone System Access: Phone Operator Pilot

Baseline: July (weeks 1 and 2) 73%



Phone System Access: Phone Operator Pilot – Spanish Line

Baseline: July (weeks 1 and 2) 72%



Phone System Access: Phone Operator Pilot

- Correlation between answer rate and maximum queue/abandon rate
 - Higher the answer rate → Lower the abandon rate/queue time
- Call volumes have mostly held the same over the past month
- No correlation between call volume and answer rate
- Lunch hour, Early morning, Late Afternoon = Lower Answer rate
 - Less staff available to answer calls during these times
- Thursday afternoons are clear drivers of lower answer rates
- More exploration of Spanish line process needed to reveal why answer rate has not climbed



Flu Campaign 2020

Why Does this Matter?

- Now more than ever it is imperative to provide the flu vaccine to clients to not only decrease the likelihood of getting the flu but also the severity
- Any client we assist in getting the flu vaccination is one less person who could end up in the hospital

Key Lessons from Prior Flu Seasons

- Training must be ongoing – not a single event
- Consistent weekly data is useful in maintaining momentum for care teams
- The EMR reminder is not a universal part of all providers' workflow

Changes due to Covid-19

- No Group Events
- Lobby Announcements and reminders to clients to get their shots
- Tangible reminders, (stickers, buttons, pins) will be less impactful as less clients will see them



Flu Campaign 2020

- Multiple Workflows specific to discipline and appt. type – reduce barriers to vaccine deliver
 - Telehealth clients, In-Clinic Clients, Medical appointments, BH appointments, etc.
- Repeat trainings on EMR workflow, Client Navigation and External resources
- Adapting Coat Drive to accommodate Covid-19 precautions
- Delineating telehealth client visits from in-person client visits
 - Tracking workflow success
 - Identifying Gaps in Delivery
- 2020-2021 Goal = 45% → Our 2019-2020 baseline = 37%



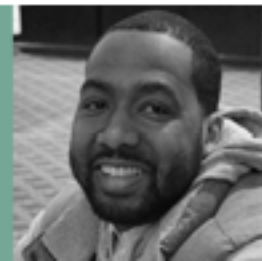
Population Health Updates

August 2020

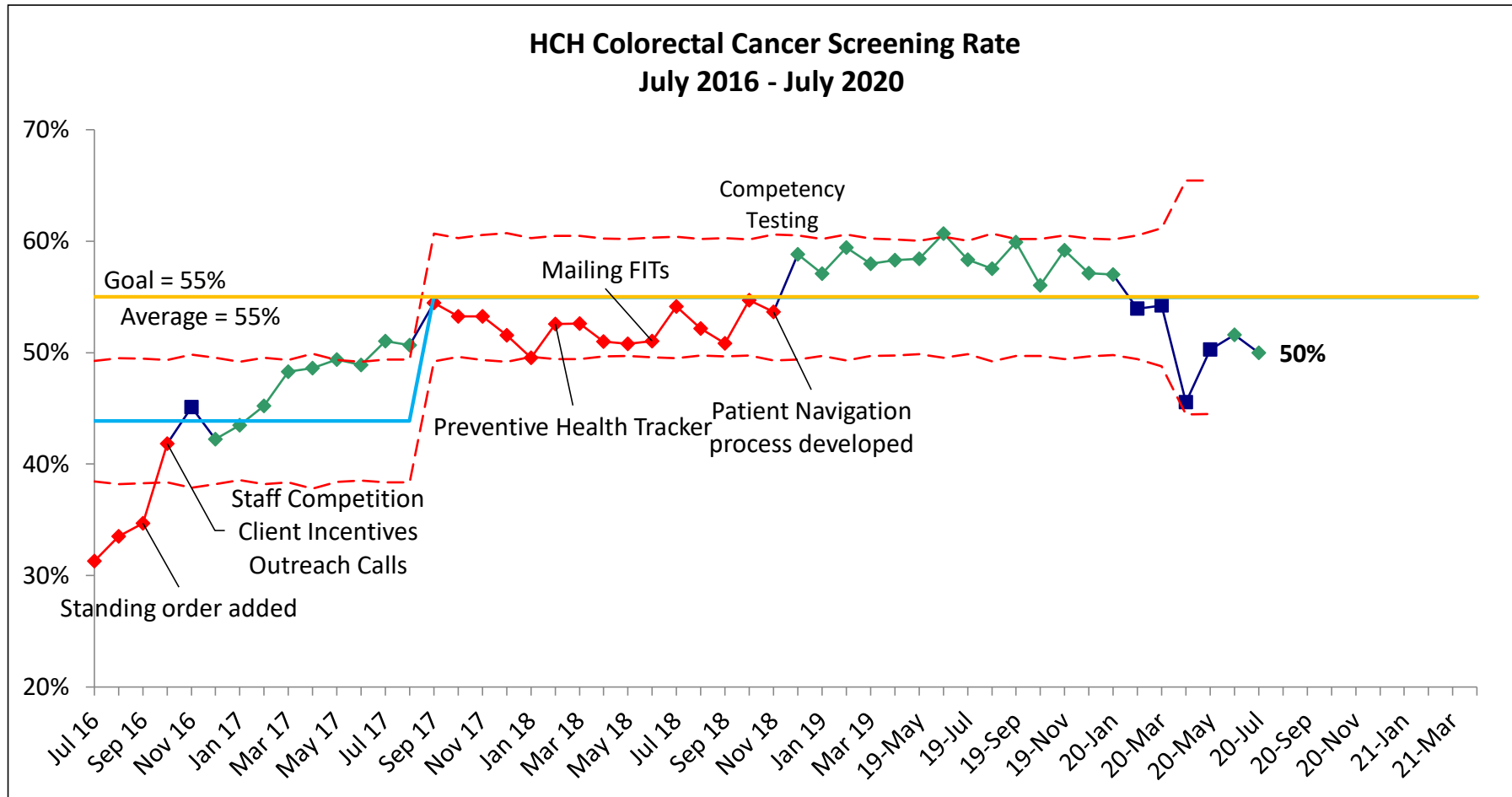


Cancer Screenings

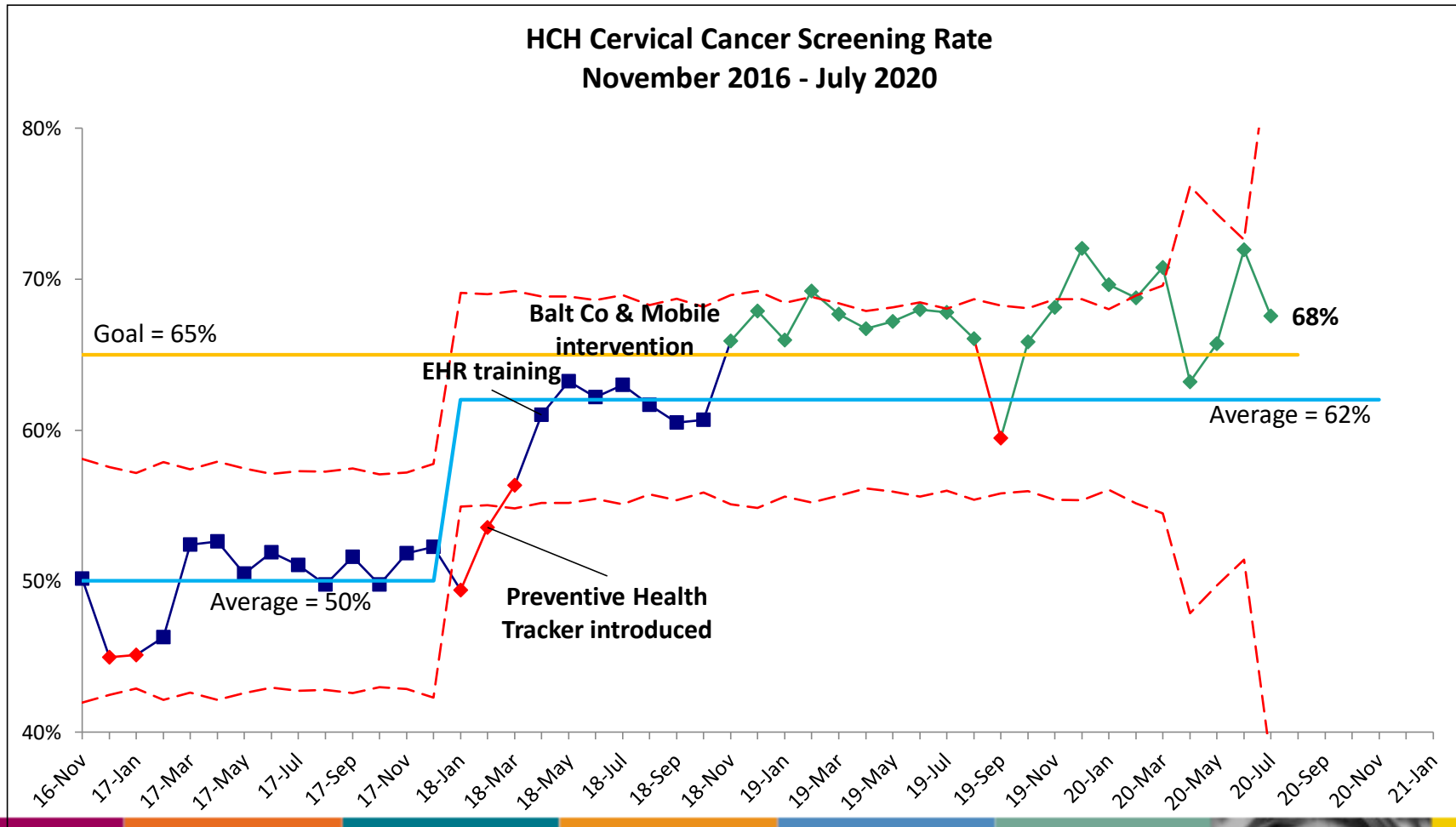
- **Colorectal cancer screenings**: Called and mailed out 162 FITs thus far. This effort is continuing during telehealth visits.
- **Cervical Cancer Screenings**: Our ability to tackle this is somewhat limited and inconsistent across providers during COVID.
- **Breast Cancer Screenings**: We are in the middle of a breast cancer screening campaign, placing orders for clients who are past due and contacting clients via phone/mailing.



Colorectal Cancer Screening Rates

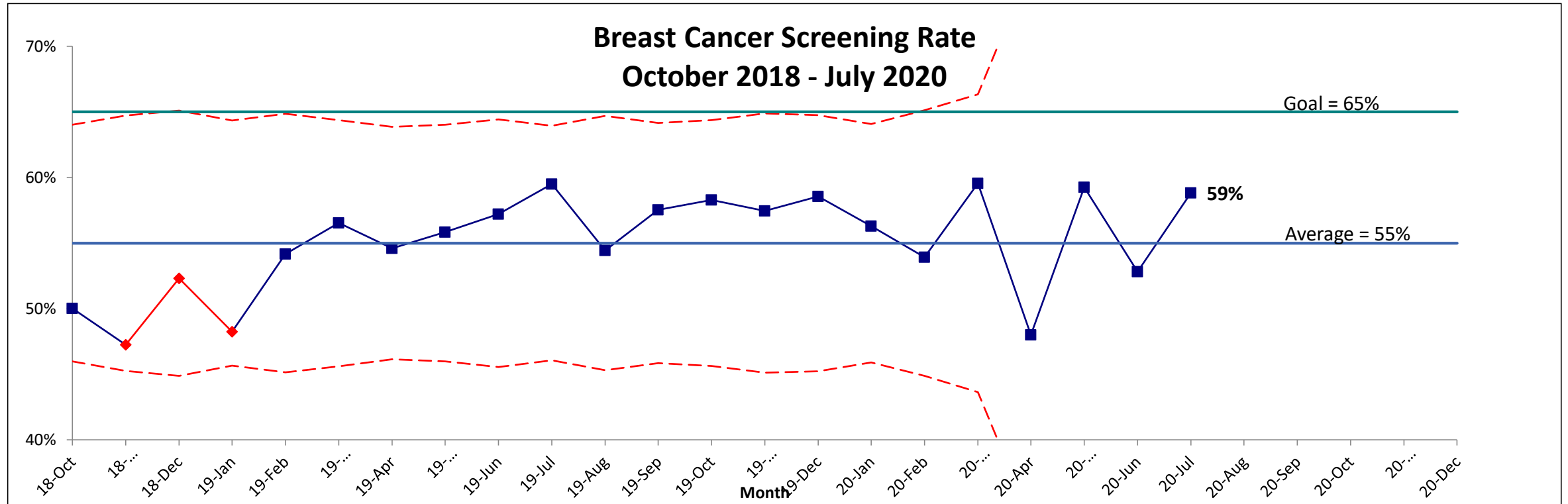


Cervical Cancer Screening Rates



Breast Cancer Screening

Mammogram Completion Goal: By December 2020, 65% of women recommended to have a completed mammogram will have documentation of screening

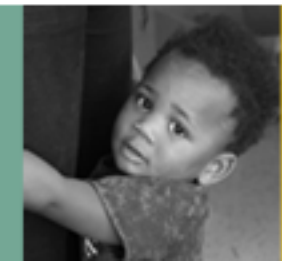
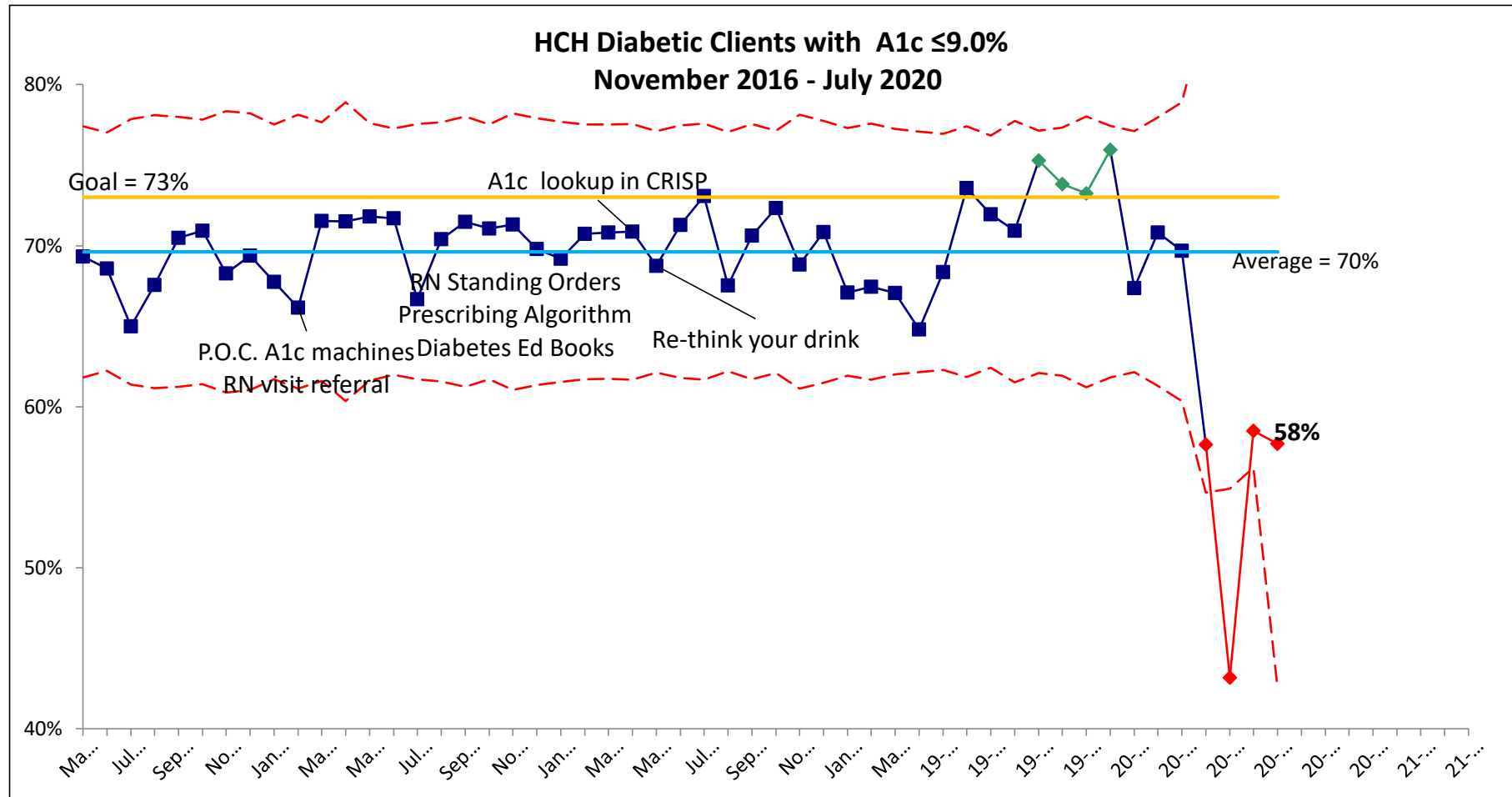


Follow-up to Abnormal Cancer Screenings

- **Positive FIT f/u**
 - 4 out of 30 (TY) = 13% have completed their diagnostic colonoscopies
- **Abnormal pap result requiring gyn f/u**
 - 3 out of 31 (TY) = 10% have completed their f/u gyn appointments

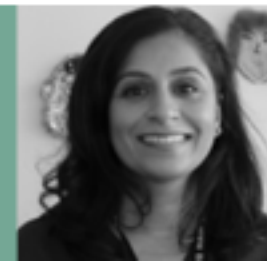


Diabetes



The Prediabetes Project

- Goal: to create resources by department that could help aid staff in having helpful conversations with clients around healthy dietary changes
- 42 respondents from CM, Nursing, BHT, CHW/outreach, OT, SH, Other
 - 79% felt it was **very important** to discuss healthy eating behaviors with clients
 - 67% **usually or always** having discussions with clients about healthy eating behaviors
 - 55% of the time it is the **staff member** who brings up this topic
 - About a third were interested in being a prediabetes champion for their department, about third were unsure, and about a third were not interested.
 - There was interest in both resources for clients (9 total) & resources/training for staff (5 total)



...The Prediabetes Project

- 3 helpful resources listed across all disciplines:
 - Easy, healthy recipes
 - Affordable, healthy grocery List
 - Healthy snacks (7-eleven, Dunkin' Donuts, etc.)
- Next Steps:
 1. Create the 3 resources above (tying the first two resources together) to make available to everyone.
 2. Send to the champions for feedback + edits.
 3. Schedule in-house MI training for interested staff (August 27th from 2-3 pm)
 4. Work with champions on more department-specific resources
 5. Schedule staff training for interested staff with a certified diabetes educator
 6. See if there are areas where this project and our PI goal around connecting clients who are food insecure with CM/CHWs can overlap



Other projects

- Health Ed Ringlets (Diabetes, Chronic Diseases, Infectious Diseases, Nutrition/Wellness)
 - COMPLETED, thanks to LVC Rachel Larson!!!
 - These will go in each exam room and hopefully in each hallway for departmental use when educating clients (I'll be contacting Directors shortly)
- DME: using home blood pressure cuffs and scales as a way to manage chronic diseases during COVID
- Hep C: training nurses to submit Hep C Prior Auths



Questions or Comments?

Next Meeting:
Wednesday, September 16

