

## Performance Improvement Meeting

5/18/22

Attendees: Ziad Amer, Margaret Flanagan, Joanna Diamond, Adedoyin Eisape, Adrienne Trustman, Andrea Shearer, Arie Hayre-Somuah, Kat Acosta, Kim Carroll, Laura Garcia, Lawanda Williams, Malcolm Williams, Sean Morrissey, Shannon Riley, Meredith Johnston, Tolu Thomas, Tracy Russell, Tara Dorsey

### **2022 Performance Improvement Goals YTD Updates**

Measures with an improvement of 3+ percentage points over April Data:

- Colorectal Cancer Screening, Depression Screening and Follow-Up Plan, HIV Screening, Tobacco use: Screening and Cessation Intervention, Weight assessment & counseling for nutrition (Peds)

Measures with an improvement of 1-2 percentage points over April Data:

- Body Mass Index Screening and Follow-Up, Breast Cancer Screening, Cervical Cancer Screening, Childhood Immunization Status, Colorectal Cancer Screening, Controlling High Blood Pressure, Statin Therapy for Prevention/Treatment of CVD

Measures that saw a reduction in percentage points from April Data:

- Diabetes: HbA1c Poor Control (>9%), IVD: Use of Aspirin/Other Antiplatelets

### **Final Three CQM KPIs**

#### **1. Lab Tracking**

- Health IT working on a results to order report that is being developed
- Anticipated completion is 5/30

#### **2. Referral Tracking**

- Health IT working on a results to order report that is ready; Quality Team has to work through to create baseline and update data
- Anticipated completion 5/30

#### **3. Social Determinants of Health (SDH) ask rates**

- Next priority for Health IT team
- Anticipate completion 6/30

### **Health Disparities Dashboard (PI KPI):**

- Identified measures to prioritize
  - Diabetes
  - Hypertension
  - Cervical, breast, and colorectal cancer

- Consulted REI Health Specialist regarding how to visualize the data we have in the best way
- HCH also investing in Azara, which will assist with creating more views for the measures
- Also pulling disparity data for all prioritized PI measures to ensure equity is a part of all PI work this year
- Updating deadline: 6/30/2022

#### **Attend Standing Meetings for Communication & Planning (PI KPI):**

- PI holding biweekly meetings with medical provider leadership
- PI meeting monthly with entire medical team
- Quality Assurance Team is attending medical team huddles weekly to ensure quality and safety information is getting directly to front-line staff

#### **Conduct Improvement Projects on Five Quality Measures (PI KPI):**

- HIV Screening – Ziad
- Hypertension Control – Ziad
- Depression Screening – Ziad and Tracy
- Cervical Cancer – Tracy
- IVD: Use of Aspirin/Other Antiplatelets – Tracy

#### **Innovation Challenge:**

- PI will orchestrate an agency-wide Innovation Challenge where staff members can submit change ideas that will help to improve the quality of care the agency provides; PI will support all staff interested in submitting ideas with basic PI tools that will better equip them in forming/developing their ideas and becoming positive change agents.
- Use the webform on the portal page

#### **Introducing: “PI Chats”:**

- Join us every week to chat about the “Pebbles in your shoe”!
- A staff led conversation about ways to improve the work that you do
- Attend or stop by for snacks and drinks and enter the raffle to win great prizes every week!
- Opportunities for all sites to participate

#### **Resource Stewardship – Aspirin Deprescription:**

By December 31<sup>st</sup>, 2022, clients aged 70 and older who are prescribed aspirin for primary prevention (i.e. if they do not have a dx of CAD, MI, etc.) will decrease by 15% (finalized the goal based on the data: was originally 5-15% subject to data)

- Report finalized on 5-5-22
- Medical providers aware of goal, with Senior Director of Medicine reinforcing goal and sending out the official report so that providers can begin to have discussions with eligible clients

**Client Access Goal:**

Goal: By December 31st 2022, HCH will achieve 80% utilization across all departments.

As of 4/4/2022 total agency average: 75%

**Client Experience Survey:**

- Comprehensive vendor search completed to re-envision client experience survey
- Two-pronged approach in 2022:
  - Post-visit surveys through Medstatix to pilot real-time feedback from clients that we can act on swiftly – anticipated start date in July
  - One-time annual CG-CAHPS survey – anticipated start date in June