

PI Committee Meeting



March 28, 2018



May 2018 PI Committee Agenda

1. PI Dashboard Review:

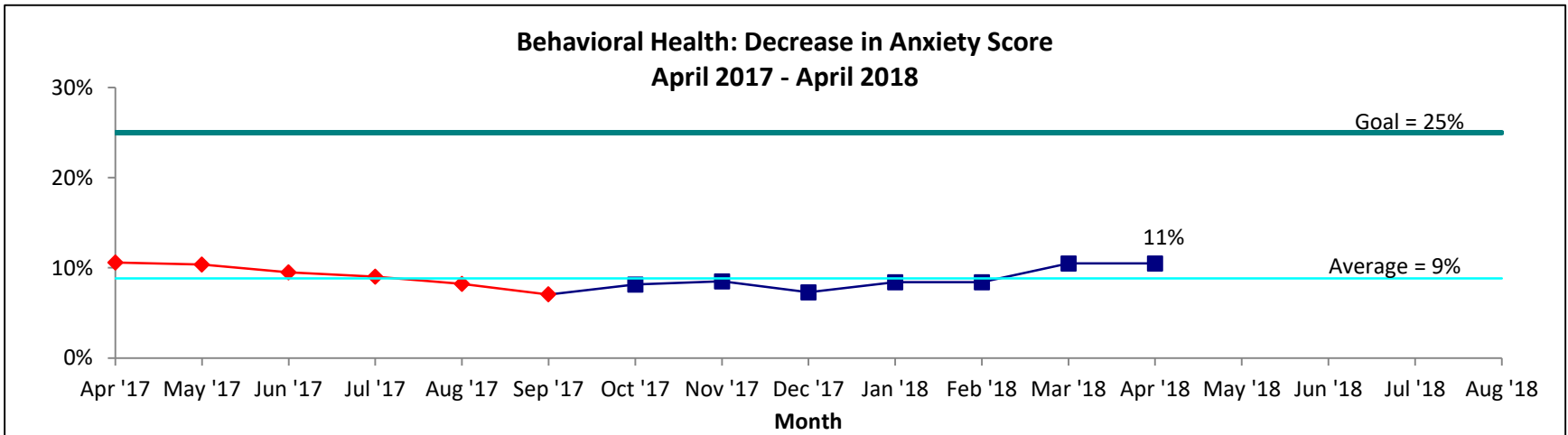
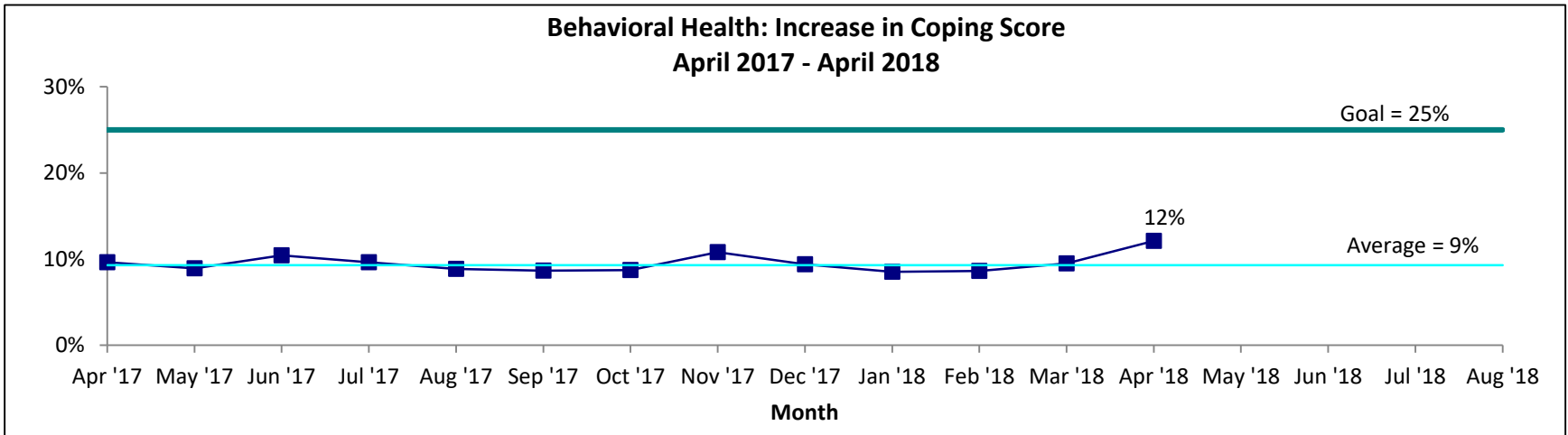
- Behavioral Health: Coping & Anxiety
- Colorectal Cancer Screening
- Missed Appointment Rate

2. Progress Updates & Discussion:

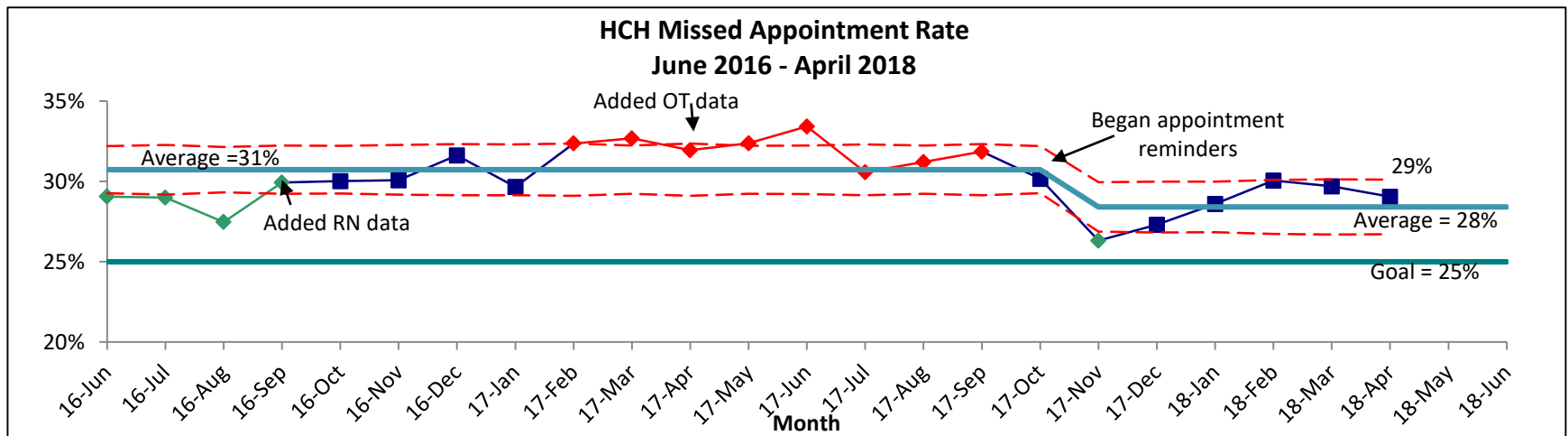
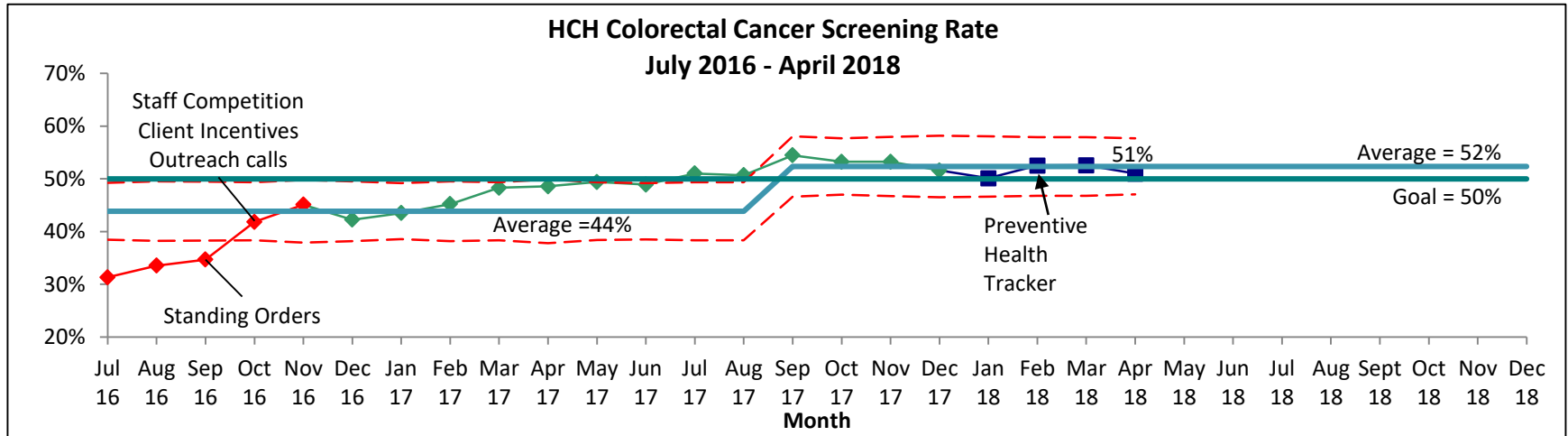
- Diabetes Control
- Cervical Cancer Screening
- Client Experience: After-Hours Access
- Client Involvement in PI: Experience to date



PI Dashboard: April 2018



PI Dashboard: April 2018

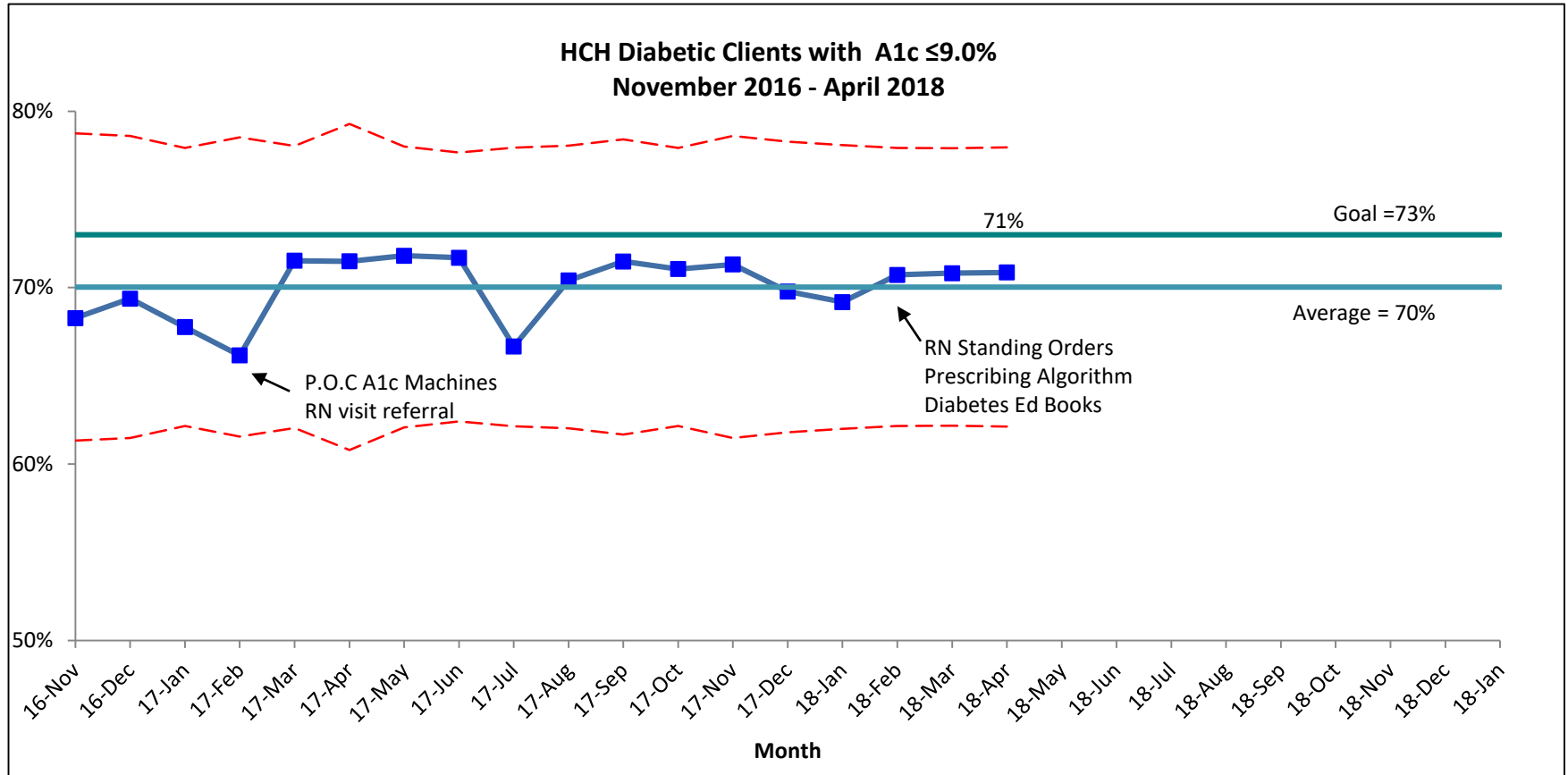


Diabetes: A1c Control

Goal: 73% of diabetic clients' most recent HgbA1c will be 9.0% or less by December 2018

Team: Adrienne Trustman, Tobie Smith, Tracy Russell, Gabby Rehmeyer, Mara Schneider, Sheila Roman

Progress:



Diabetes: A1c Control

Goal: 73% of diabetic clients' most recent HgbA1c will be 9.0% or less by December 2018

Team: Adrienne Trustman, Tobie Smith, Tracy Russell, Gabby Rehmeyer, Mara Schneider, Sheila Roman

April Rate by site:

Clinic Site	A1c less than 9.0%	2018 A1c testing rate
All HCH	71%	95%
Baltimore County	77%	97%
West Baltimore	73%	97%
Fallsway	71%	96%
Harford County	67%	53%
Mobile	50%	68%
Convalescent Care	50%	57%



Diabetes: A1c Control

Current Work: Focus on Client Diet/Nutrition

- Hands-on nutrition education tools in clinic – “Rethink Your Drink”
- Met with Our Daily Bread, WRC, and Eastern Family Resource Center re: food supply sources and nutritional value of offerings.

Our Daily Bread:

- 95% of meals are donations using specified recipes; no nutritional information given to clients
- Offer vegetarian option as “healthy option”
- Clients are offered Sweet Tea or water and given dessert
- Staff is primarily rotating volunteers

HCH next steps:

- Nutrition awareness class to staff/clients
- “Rethink your drink” poster at ODB
- Other opportunities: Create nutritional materials using recipes, change to opt-in dessert



Diabetes: A1c Control

Current Work: Focus on Client Diet/Nutrition (CONT.)

- Weinberg Resource Center- help with “diabetic snack” planning – discussed portion size and targets for carbohydrates.
- Eastern Family Resource Center (Baltimore County)– Meeting this week.

Current Work: In-clinic Management of Diabetes

- Evaluating standing order & algorithm effectiveness (are providers using guidelines and what is the effect?)
- Looking to test how to best utilize diabetic client lists in care team meetings.
- Adding Diabetes A1c testing to Preventive Health Tracker to benefit CMA workflow.

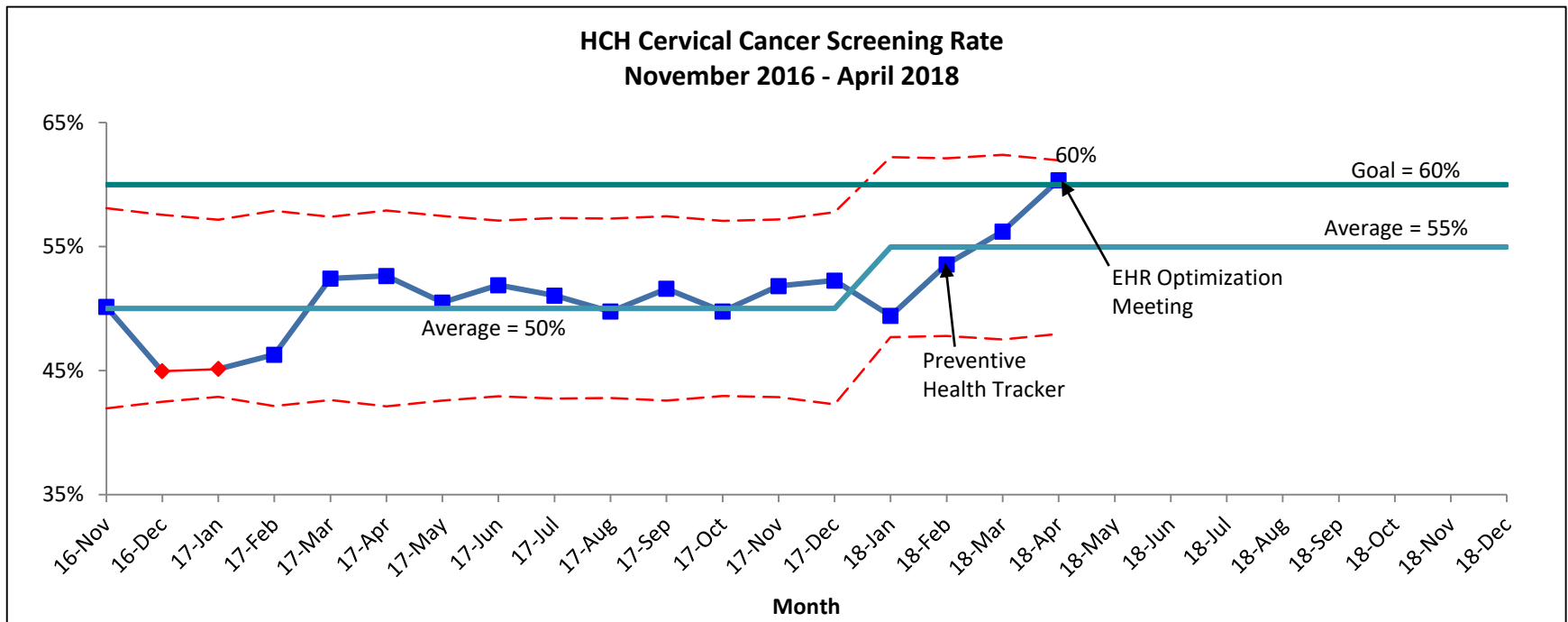


Cervical Cancer Screening

Goal: By December 2018, 60% of eligible medical clients will have an up-to-date cervical cancer screening.

Team: Amber Richert, Laura Garcia, Tracy Russell, Amelia Jackson, Kristin McCurnin, Cyndy Singletary, LaTanya Cammon

Progress:

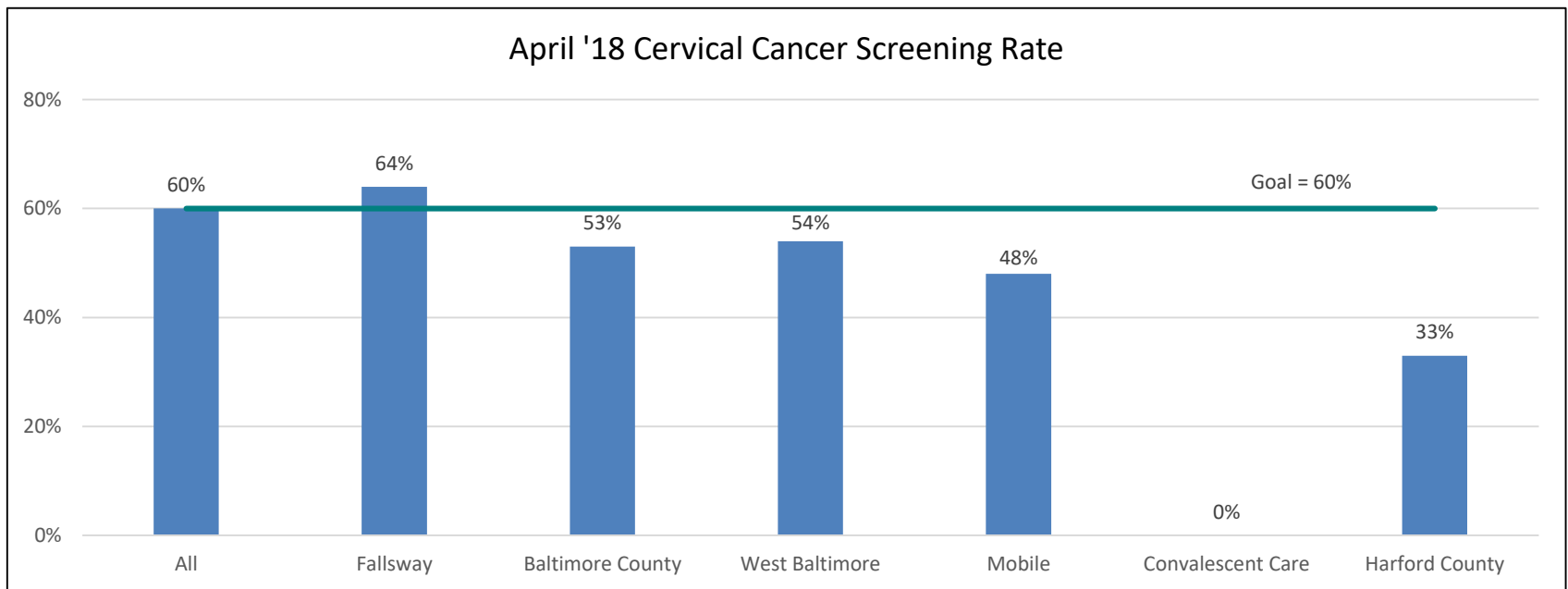


Cervical Cancer Screening

Goal: By December 2018, 60% of eligible medical clients will have an up-to-date cervical cancer screening.

Team: Amber Richert, Laura Garcia, Tracy Russell, Amelia Jackson, Kristin McCurnin, Cyndy Singletary, LaTanya Cammon

April rates by site:



Cervical Cancer Screening

Current Work:

Record Accuracy/Standard Workflows

In April and May, held an all-provider meeting for discuss Preventive Health Tracker, EHR workflow, and external sources of documentation.

- Allowed for sharing of best practices and refreshed training of workflows
- Training can't be a 1-time event – looking to hold similar session quarterly
- Was an effective way to implement a new tool across sites

Client Input

We had a client join our subcommittee and she offered the following barriers for clients:

- Clients sometimes don't want to add on any more services/procedures because they are trying to get to the lunch line/afraid of missing a meal.
 - Possible intervention – gift cards for clients
- Waiting space doesn't always feel safe for women, constant perceived harassment could make someone not want an invasive procedure.
 - Follow-up: Clinical Operations is working to address issue of safe space in the building.



Cervical Cancer Screening

Next steps:

- PDSA with Baltimore County with calling clients ahead of time
- PDSA at Fallsway for pap set-up by CMAs (standardize best practices)
- PDSA on client incentives

Questions:

- How do we make sure we sustain improvements?
- How do we support each other to make changes across departments/roles?

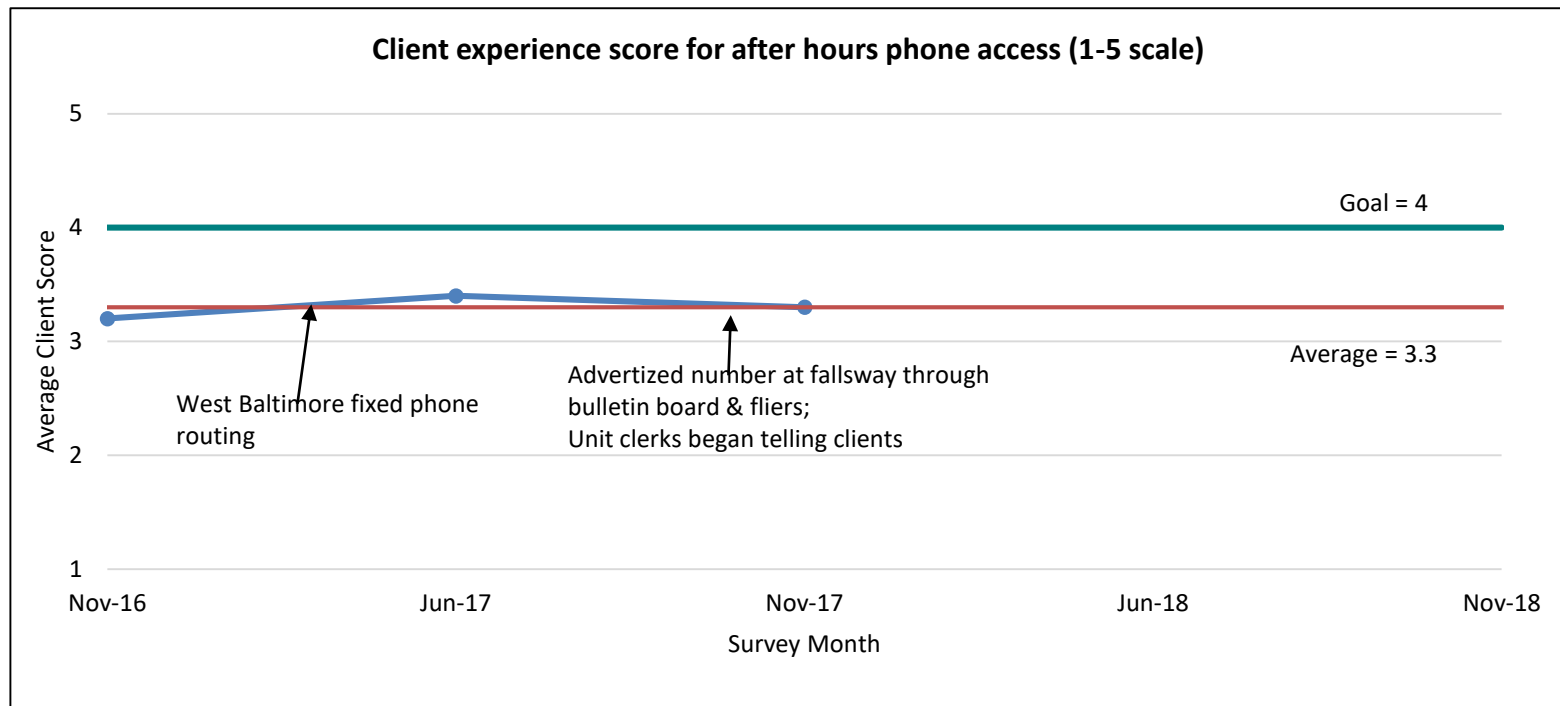


Client Experience: After-Hours Access

Goal: By December 2018, the organization will improve its client satisfaction with reaching a provider when the clinic is closed to 4.0 on a 1-5 scale

Team: Laveda Bacetti, Aisha Darby, Kate Leisner, Darrell Richardson, Lauren Ojeda

Progress:



Client Experience: After Hours Access

Current Work:

- After Hours number on the front of the appointment card at Fallsway
- After hours phone line usage remains stable, with noticeable spikes when the clinic is closed for inclement weather or opens late (ex. last Wednesday).
- A client has joined the subcommittee, and is contributing ideas about what experiences may lead to a negative score on our question.
- Working with volunteer services to get surveyors to measure this question once/month, beginning after the June 2018 Client Experience Survey.



Client Experience: After Hours Access

Question:

What can be done to notify clients that the clinic will have a change in hours on a given day (besides Televox reminders)?

Next Steps:

- Client Experience Survey, June 4- June 29th



Client Involvement in PI

Current State:

PI Goal	Client Involvement Mechanisms
Client Experience	CRC, lobby focus groups, Subcommittee
Cervical Cancer Screening	Subcommittee
Colorectal Cancer Screening	Subcommittee
Diabetes A1c	Subcommittee, Diabetes group, shelter tours
Missed Appointment	Client interviews
Flu	Survey (2017)
Behavioral Health: Coping & Anxiety	Client interview*

*Upcoming



Client Involvement in PI

Lessons Learned:

- **HIPAA!** When involving clients, all staff need to be aware to not discuss other clients by name.
- Subcommittee involvement needs to be carefully planned to help client feel included and make the best use of their time
- Client lens has provided valuable insight of barriers

Next Steps:

- Considering having clients contribute feedback through experiences – shelter tours, secret shopping, reacting to proposed scenarios. Ex. Mailing back FITs, CRC referrals. Helps inform process creation.



Next Month: June 20, 2018

Prioritized Goals:

- Behavioral Health: Coping & Anxiety
- Colorectal Cancer Screening
- Missed Appointments

