

## HCH Performance Improvement Committee Meeting Minutes

Date of Meeting:	11/20	Time:	8:15-9am
Location:	421 Fallsway, 3 <sup>rd</sup> Fl Large Conf. Room	Minutes prepared by:	Ziad Amer
<b>Attendees</b>			
Z. Amer, C. Bauer, C. Brocht, A. Darby, D. Dexter, J. Diamond, J. Ferdous, M. Flanagan, C. Fowler, K. Healy, M. Johnston, K. Lindamood, E. Martin, H. Mast, T. Russell, A. Shearer, C. Synovec, M. Williams, L. Williams			
<b>Agenda and Notes, Decisions, Issues</b>			
<b>Topic</b>	<b>Discussion</b>		
<b>Monthly Dashboard</b>			
<b>Adult BMI:</b>	<ul style="list-style-type: none"> <li>While we continue to track this measure, we are confident that our efforts in 2018 and 2019 will continue to see sustained results above our goal of 75%. In October we saw a rate of 82%.</li> </ul>		
<b>Child Weight Screening and Counselling</b>	<ul style="list-style-type: none"> <li>As a direct result of our improvement methods, namely the testing and implementation of a new counselling tool, the 5-2-1-0, we saw a significant increase in our screening and counselling rate. In October, for the first time, we exceeded our goal of 70% - at 72%. We will continue our efforts to find more ways for sustained improvement.</li> </ul>		
<b>Missed Appointments</b>	<ul style="list-style-type: none"> <li>In October we saw our lowest rate of missed appointments ever agency wide at 22%! This is the result of a long and concerted effort by members of the sub-committee to test and implement changes to our scheduling policies, workflows, and referrals process. We will continue these efforts to ensure that this success can be maintained.</li> </ul>		
<b>Pediatric Dental Varnish</b>	<ul style="list-style-type: none"> <li>For the eighth month in a row we are above our goal of 50%, and in October we saw our highest rate yet of 66%. We will continue to track this goal, but see this sustained improvement a success in this campaign.</li> </ul>		
<b>Flu Immunization</b>	<ul style="list-style-type: none"> <li>Thus far, two months into the 2019-2020 flu season, we are already 10% above our vaccination rate from last season. However, we can still see that we are below our goal of a 45% vaccination rate and are able to identify the specific departments and sites that can continue the work to improve our vaccination delivery. The cohort that are heading this measure are in the process of testing and implementing workflow changes to ensure this improvement is achieved. To date, we have a vaccination rate of 38%</li> </ul>		
<b>Project Updates</b>			

<p><b>Depression Remission:</b></p>	<ul style="list-style-type: none"> <li>• We have seen a lot of fluctuation in the data for our depression remission measure, and have not yet met our goal of 10%. However, we have made progress outlining areas of opportunity. First, we began an investigation into the medication adherence of our clients who visit our psychiatrists. We used the ASK-12 medication adherence assessment tool to gauge clients' adherence to their treatment plans, as well as the main barriers preventing them from maintaining compliance. Through this study we have determined that clients often skip or stop taking medicine "because they didn't think it was working" or "because it made them feel bad" at a higher rate than clients who were given the same assessment by their medical provider. There are implications to this that require further analysis and discussion. However, we have concluded that the ASK-12 tool is useful in determining the medication adherence level of clients and will explore ways of standardizing its use. Second, we have also identified an opportunity to use provider supervision sessions to discuss new ways to approach clients' treatment plans. This PDSA we aim to conduct will address clients with limited progress in their treatment do not have adequate review of their treatment plans. We will be reviewing both the anecdotal response from supervisors and supervisees as well as any change in clients' PHQ-9 scores.</li> </ul>
<p><b>Incident Reporting</b></p>	<ul style="list-style-type: none"> <li>• While we have not yet reached our goal of 25%, we have addressed a number of our main barriers preventing us from reporting patient safety incidents. First, we made it easier for staff to navigate the reporting system. Second, we trained our "incident owners", those in charge of investigating a reported incident, on how to conduct their investigations and how to close the loop with the staff involved. And finally, we clearly defined what constitutes an incident to ensure staff know when to report something they observe regarding patient safety. These trainings will also be considered in 2020 for a continued education effort on incident reporting. To conclude the year we plan to identify ways to continue this progress into 2020 and find other ways to use incident reporting data in meaningful ways.</li> </ul>

**Discussion:  
2020 PI Plan**

- The PI Plan is our agency roadmap for Performance Improvement that guides our priorities each year, complimenting and balancing our larger organizational goals. This year, we are proposing five distinct categories of focus: clinical goals, population health and social determinants of health, staff and client engagement, patient safety, and clinical operations.
- Our 2020 PI Plan proposal includes the following measures:
  - Mammogram completions
  - Depression Screening and Treatment
  - Flu Vaccine Delivery
  - Medication Adherence
  - Food Insecurity
  - Provider Communication
  - Joy in Work
  - Medication Errors
  - Phone Access
- Though not yet finalized, this proposal is informed by continuously collected data, agency priorities, and the needs of our clients and staff. As such, our main clinical goals in the 2020 proposal are, Mammogram completions, Depression Screening and Treatment, and Flu Vaccine Delivery. The latter two will be continued from our 2019 PI Plan and our Depression Screening and Treatment goal will see some expansion to include a process and outcome component.
- In an effort to address a root cause of more than one clinical measure, we will also be proposing Medication Adherence and Food Insecurity be a PI Goal for 2020. Medication Adherence has already been studied and identified to be a contributor to the mismanagement of chronic illnesses.
- Additionally, we also want to continue our work on Provider Communication as a measure of our client satisfaction and experience at HCH. We will however be increasing the goal from 83% to 85% in the hopes that we will continue to see that improvement year over year. As important as our client satisfaction is to our agency, so too is the satisfaction and retention of our staff. As such, we are proposing a Joy in Work measure to assess and improve our staff feelings of burnout throughout the organization.
- We have identified through our 2019 incident reporting work, that medication errors are an area we can focus on in 2020. This can include things like, double dose given, incorrect medication prescribed, medication mix-ups from pharmacy. While we do not see such a high number of these incidents, it is a serious patient safety concern we seek to address.

<p><b>2020 PI Plan (Cont.)</b></p>	<ul style="list-style-type: none"> <li>• Finally, we also have identified an agency wide limitation to our call center functionality that we aim to improve in 2020. We have set an ambitious but necessary target of 80% of calls will be answered by a human and 80% of voicemails received will be returned within 1 business day.</li> <li>• The PI Committee had an opportunity to express their views on each of these goals for 2020 and the results show that there is mixed excitement around each measure proposed, to which the PI team has awarded an “excitement meter”.</li> <li>• The breakdown is as follows: <ul style="list-style-type: none"> <li>○ Mammogram completions (excitement rating: 6)</li> <li>○ Depression Screening and Treatment (excitement rating: 4)</li> <li>○ Flu Vaccine Delivery (excitement rating: 3)</li> <li>○ Medication Adherence (excitement rating: 8)</li> <li>○ Food Insecurity (excitement rating: 3)</li> <li>○ Provider Communication (excitement rating: 2)</li> <li>○ Joy in Work (excitement rating: 12)</li> <li>○ Medication Errors (excitement rating: 3)</li> <li>○ Phone Access (excitement rating: 10)</li> </ul> </li> <li>• The PI team will continue to analyze the written comments and these results in preparation for the presentation of the 2020 PI Plan Proposal to the Executive Team and eventually the Board of Directors in December</li> </ul>
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**Next Meeting:**

Wednesday, December 18<sup>th</sup>, 2019

8am – 9am

3<sup>rd</sup> Floor Large Conference Room