

Performance Improvement Committee

Monthly Meeting – January 17, 2018

Attendance: Vanessa Borotz, Jan Caughlan, Jan Ferdous, Margaret Flanagan, Tonii Gedin, Meredith Johnston, Taylor Kasky, Jen Marsh, Ted Ramsay, Joshua Brusca, Tyler Gray, Bilqis Rock, Tracy Russell, Lisa Stambolis, Lawanda Williams, Kate Leisner, Cynthia Singletary

2017 Discontinued Goals Recap:

Hepatitis C Treatment

- Reached 71% having started treatment by the end of 2017
- The population we could work with was very limited due the staging F2 or greater requirement
- Most of the problems encountered dealt with errors in data entry
- This project was a good exercise in the use of registries to target a specific population

Universal Screenings

- HIV stood at 65% and HCV at 56% at year's end
- Psychiatry created a workflow to identify and refer patients that was effective
- This workflow stalled at being utilized in other teams due to the departure of our CTR
- PI team observed and corrected for very large differences between proposed workflow and reality of work
- West Baltimore had higher rates than the organization, possibly due to having very few non-medical clients

Hospitalization Follow Up

- Baseline data was not able to be collected until October, baseline established at year's end of 10%
- Tried a partnership with Mercy that was unsuccessful due to reliance on their staff
- Re-focused on internal methods of following up with clients on the CRISP list
- Used front desk, walk-in providers, and case management to try to catch individuals who had recently been discharged from a hospital
- Focusing now on efforts through community health workers to engage these clients

Housing Documentation

- Seeking to reduce the same day variation in housing type documentation, as well as decrease the frequency of incorrect housing type documentation
- The PRAPARE evaluation tool was refined to allow for better housing type documentation
- Currently seeing a 1/3 completion rate of PRAPARE

2017 New Goals

Cervical Cancer Screening

- Goal is set at 50%, however that is also our past year average due to changes in the data definition; will be setting a new goal
- New goal suggestions range from 60-75%
- Suggested that we compare to prostate cancer screening rates for equity
- Suggested that we monitor other cancer screening rates to avoid tradeoff

Performance Improvement Committee

Monthly Meeting – January 17, 2018

- After Hours**
- No impact observed in the November survey
- Contact**
- Transitioned to a CAHPS model which revealed that we are somewhat behind national standards on a number of items

2018 PI Changes

- _Introducing PI goal charters
- Will be communicating tests of change weekly by email to the group
- PI Committee meetings will be used more as an open learning environment and focus less on reporting out