

February Performance Improvement Monthly Meeting

February 19, 2025



Overview

1. Icebreaker
2. 2025 Framework
3. Clinical Quality Measures (CQM) Data
4. Performance Improvement (PI) Goal Data
5. PI Updates
6. PI Tool: Process Maps



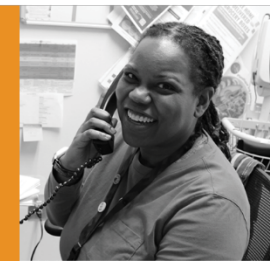
Icebreaker

What sport would you compete in if you were in the Olympics?

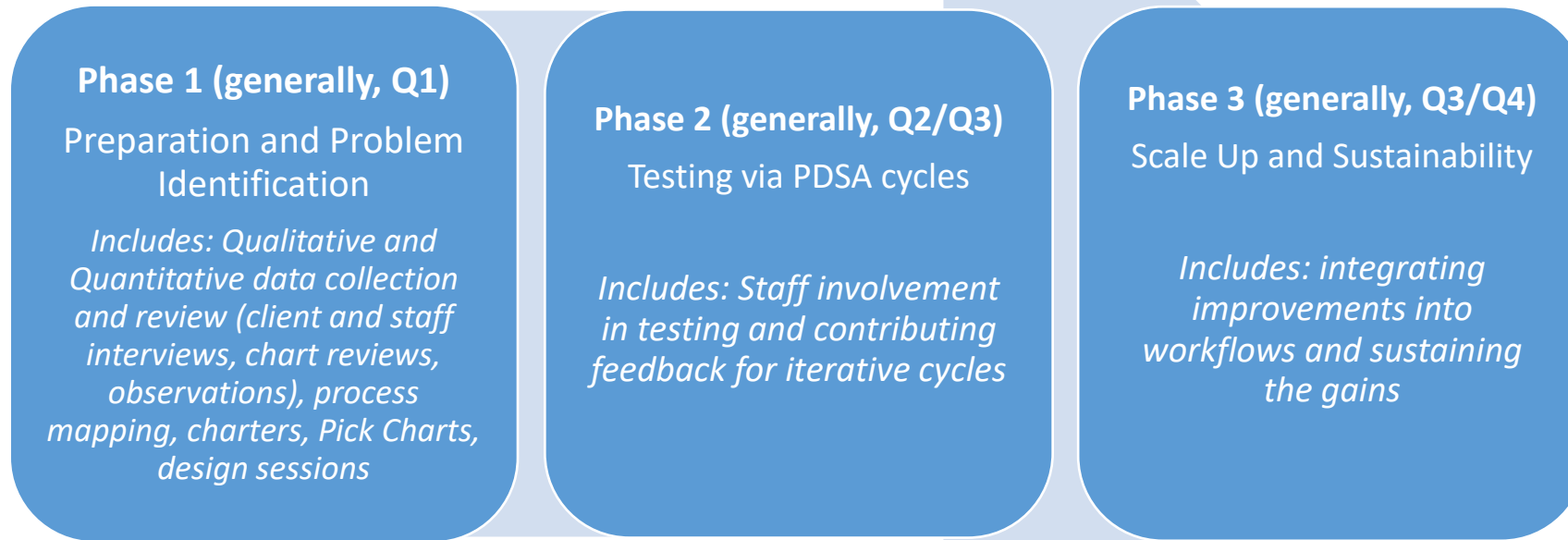


The 28 sports approved for the 2028 Los Angeles Olympics include: [🔗](#)

- **Aquatics:** Swimming, rowing, sailing
- **Archery:** A traditional Olympic sport
- **Athletics:** A traditional Olympic sport
- **Baseball/softball:** Returning to the Olympics after a break
- **Badminton:** An Olympic sport
- **Basketball:** A traditional Olympic sport
- **Canoe:** An Olympic sport
- **Cricket:** Returning to the Olympics for the first time since 1900
- **Cycling:** An Olympic sport
- **Equestrian:** An Olympic sport
- **Fencing:** An Olympic sport
- **Flag football:** An optional sport making its Olympic debut
- **Football (soccer):** An Olympic sport
- **Golf:** An Olympic sport
- **Gymnastics:** An Olympic sport
- **Handball:** An Olympic sport
- **Hockey:** An Olympic sport
- **Judo:** An Olympic sport
- **Lacrosse:** Returning to the Olympics as a full medal sport after a break
- **Modern pentathlon:** A multisport that includes fencing, swimming, and equestrian show jumping
- **Squash:** An optional sport making its Olympic debut
- **Weightlifting:** A non-core sport that will be included in the 2028 Olympics



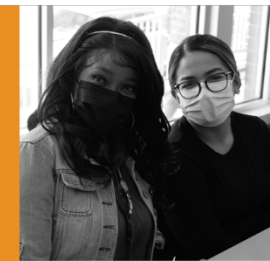
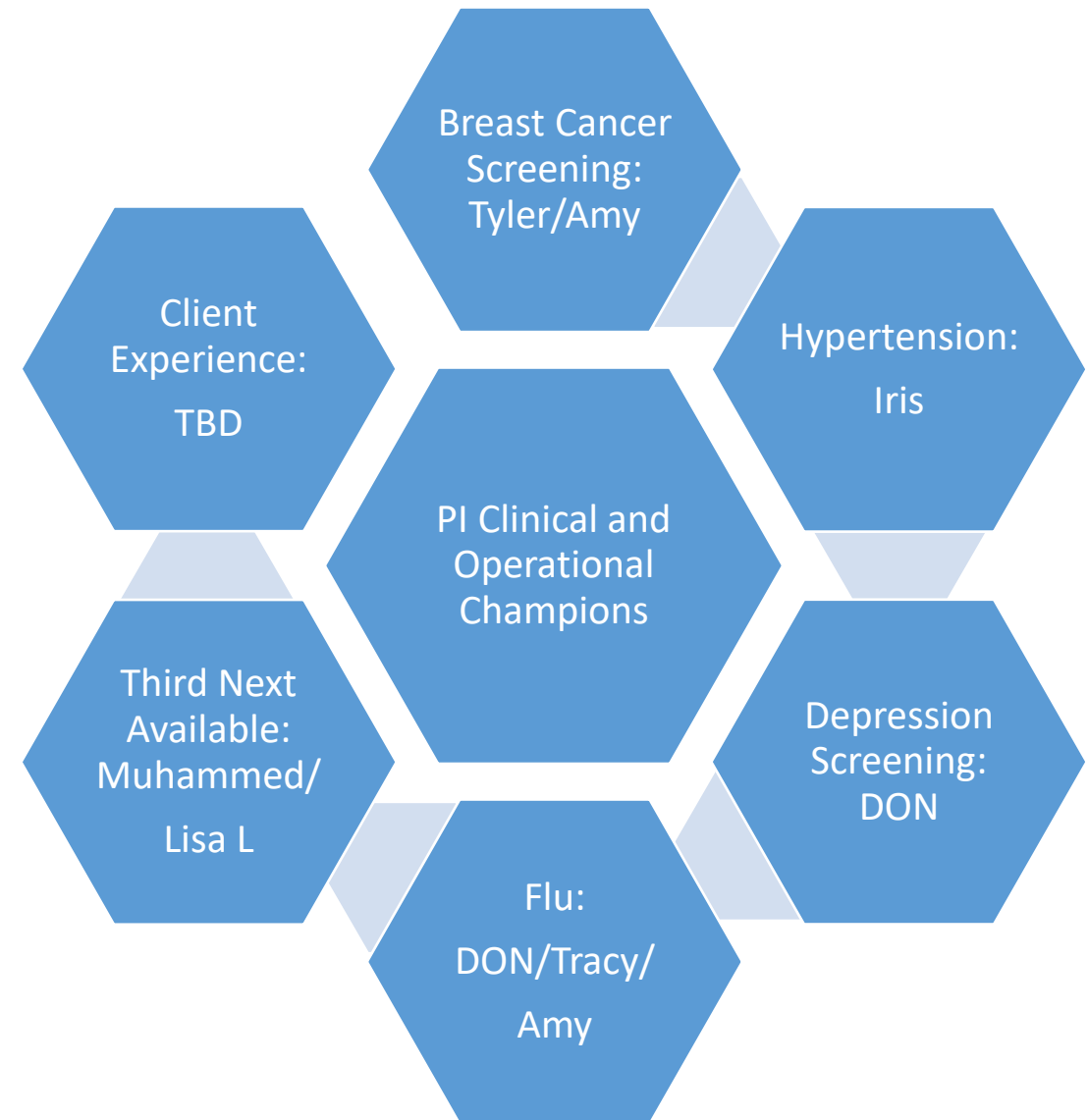
2025 PI Framework



2025 PI Framework Continued

Clinical and Operational Champions = department leaders that collaborate on lean team and serve as co-POC for goal work

Staff Champions = collaborate via ad hoc and one-on-one meetings throughout the year, help test changes and provide feedback



Maternal and Child Health	Dec	Jan	2025 Goal
Dental Sealants (Ages 6-9 Years; YTD)	81%	100%	86%
Low Birthweight	6%	7%	5%
Weight Assessment & Counseling for Nutrition & Physical Activity (Peds)	78%	79%	80%
Early Entry into Prenatal Care	63%	62%	65%
Childhood Immunization Status	4%	7%	10%

Key
3+ Improvement
1-2+ improvement
Reduction

Disease Management	Dec	Jan	2025 Goal
Ischemic Vascular Disease (IVD): Use of Aspirin/Other Antiplatelet	88%	86%	90%
Statin Therapy for Prevention/Treatment of Cardiovascular Disease (CVD)	86%	86%	88%
Depression Remission at Twelve Months	5%	4%	7%



Key
3+ Improvement
1-2+ improvement
Reduction

Screening and Preventive Care Measures	Dec	Jan	2025 Goal
Height and Weight Assessment and Health Counseling	44%	45%	50%
Cervical Cancer Screening	51%	52%	55%
Colorectal Cancer Screening	33%	34%	35%
HIV Screening	74%	74%	77%
Tobacco Use: Screening and Cessation Intervention	72%	70%	74%

Chronic Disease Management	Dec	Jan	2025 Goal
Controlling High Blood Pressure	62%	60%	65%
Diabetes: HbA1c Poor Control (>9%) [inverse]	32%	32%	31%



CQM

Trailing Year Data

Key
3+ Improvement
1-2+ improvement
Reduction

Additional HCH Priorities	Dec	Jan	2025 Goal
Closing the Referral Loop (% Completed Referrals)	35%	39%	40%
SDH Ask Rate	29%	32%	50%
Flu Vaccinations	Offer Rate: 57% Admin Rate: 48%	Offer Rate: 59% Admin Rate: 48%	Offer Rate: 75% Admin Rate: 50%
Suicide Assessment and Safety Plan	34%	30%	85%
Prescribing Antibiotics for Upper Respiratory Infection (URI) and Acute Bronchitis (YTD)	-	100%	100%
Hospital Readmission	14%	13%	12%



Key
3+ Improvement
1-2+ improvement
Reduction

2025 Performance Improvement Measures

PI Measures	Dec	Jan	2025 Goal
Breast Cancer Screening (Ages 40 – 74)	41%	44%	46%
Depression Screening and Follow-Up Plan	52%	54%	55%
Flu Vaccinations	Offer Rate: 57% Admin Rate: 48%	Offer Rate: 59% Admin Rate: 48%	Offer Rate: 75% Admin Rate: 50%
Hypertension Disparity (Black/African American Females)	55%	53%	57%
Third Next Available	-	pending	Fallsway Avg: 21 days
Client Experience	TBD		



Breast Cancer Screening

Other Preventive: (Cancer Screening) By December 31, 2025, increase the percentage of **women aged 40 – 74 years old who had a mammogram** to screen for breast cancer to 46%. Additionally, **increase screening percentages by 5% for Black/African American and White women to more equitably align with Agency average.**

- Baseline: 41% (July 2024 TY)
- **Goal: 46%**

HCH Average	White	Black	Hispanic/Latina	Goal
41%	26%	35%	65%	46%



Breast Cancer Screening

Current: 44%

Goal: 46%

Disparity Current:

- B/AA: 35% (**goal:** 40%)
- W: 30% (**goal:** 31%)
- H/L: 64%



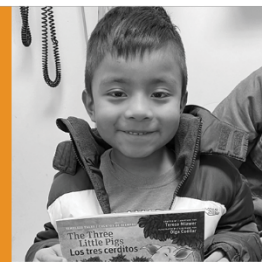
Breast Cancer Screening

In progress:

1. Process mapping referral and outreach workflows with Tracy, Amy, and Kim
2. Literature Review underway
3. Outreach to Mercy partners to inquire about Quality Department work with Women's Imaging

Next Steps:

1. Data Analysis (March)
2. Client and staff interviews (April 1 – 11)
3. Mercy and MedStar meetings (March/April)
4. Intervention Design Sessions (May)
5. Testing and Iterating via PDSAs (June – October)
6. Scale Up and Sustain (November – December)



Depression Screening and Follow Up Plan

Behavioral Health (Depression): By December 31, 2025, improve the percentage of **clients 12+ years old screened for depression, and if/when positive have a documented follow up plan**, to 55%.

- Baseline: 46% (July 2024 TY)
- Current: 54%
- **Goal: 55%**



Depression Screening and Follow Up Plan

In progress:

1. Data Analysis (81% of missed screen or f/u in medical department; 98% of those missing screening vs. f/u piece)
2. Barrier identification with DON
3. Pilot of Intake Packet (paper packet of English and Spanish versions of PHQ-9, BRIEF, and new SDH screening)
 - Feedback that health literacy to complete screenings independently is challenging (iterate by coversheet to circle Qs that are challenging and discuss with staff)

Next Steps:

1. Roll out coversheet idea (Feb)
2. Connect with new clinical champion
3. Process map current state
4. Interviews with staff across departments on workflows
5. Design intervention (March)
6. Testing and iterating via PDSAs (April – August)
7. Scale up and sustain (Sept – Nov)



Flu Vaccinations

Immunizations (Flu): By the end of the 2025/2026 flu season, improve Agency percentage who were **offered an influenza vaccine** to 75% and **administered** to 38%.

- Baseline: Offer Rate: 28%; Administered Rate: 27% (2023/2024 Flu Season)
- Current: Offer Rate: 59%; Administered Rate: 48%
- **Goal: Offer Rate: 75%; Administered Rate: 50%**



Flu Vaccinations

Flu work continues! Shout out to staff continuing to offer and administer flu vaccines and to Tracy for communicating the rates regularly!

In progress:

1. 2024/2025 Flu Season

Next Steps:

1. Close Flu season with staff interviews (successes and challenges from 2024) March 24 – 28
2. Begin prep work (process mapping, RCA, adjustments to workflows/interventions) June – August
3. Conduct lit review on best practices (June - August)
4. Testing and iterating via PDSA (Sept – October) and scale up Nov - March

Hypertension Disparity

Chronic or Acute (Hypertension): By December 31, 2025, improve hypertension control rates (less than 140/90 mmHg) for Black/African American women to 57% to more equitably align with the Agency’s other racial, ethnic, and gendered populations.

- Baseline: 52% (July 2024 TY)
- **Goal: 57%**

Race/Ethnicity/Gender	Baseline Comparison (July 2024 TY)
Agency Average	62%
Black/African American men	62%
Black/African American women	52%
White men	73%
White women	63%
Hispanic/Latino men	72%
Hispanic/Latina women	69%



Hypertension Disparity

Disparity Current:

- **B/AA M:** 57%
- **B/AA F:** 53% (goal: 57%)
- **W M:** 63%
- **W F:** 65%
- **H/L M:** 67%
- **H/L F:** 68%



Hypertension Disparity

In progress:

1. Literature Review (complete)
2. Blood pressure observations (in progress)
3. Client interviews (analysis phase)
4. Current state process mapping (in progress)
5. Hypertension Medication Algorithm Review (in progress)

Next Steps:

1. Design Intervention(s) (March)
2. Testing and Iterating via PDSAs (April – October)
3. Scale Up and Sustain (Nov – January)



Third Next Available

By December 31, 2025, improve the **Fallsway location time to third next available appointment to an average of 21 days** (includes Behavioral Health, Dental, Medical, and Psychiatry departments).

- Baseline: 24 days (December 2024 TY)
- **Goal: 21 days**



Third Next Available

In progress:

1. Template Changes Learning Session (complete)
2. Call Center Observation (Thursday)
3. Kickoff meeting with operational champions (Thursday)

Next Steps:

1. Literature Review (Feb)
2. Process Mapping (March)
3. Testing and iterating via PDSAs (April – Sept)
4. Scale up and sustain (Oct – Jan)



Client Experience

TBD – stay tuned!



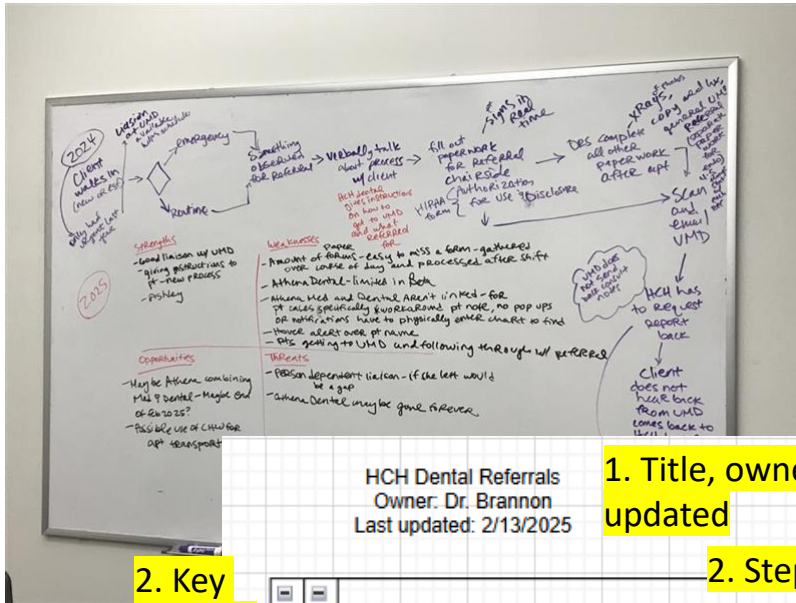
PI Tool of the Month

Process Maps

- Allow for person to see and understand the flow of information or material as it makes its way through the process/visual representation from start to finish
- Drawn in current state to help inform future state (minimize waste and achieve value in each step)
 - Shows waste/gaps in process for targeted intervention
- Shows interrelationships between activities and information in end-to-end way
- Provides a common language
- Helps ensure all elements of a process are working together



Example: Dental Referrals

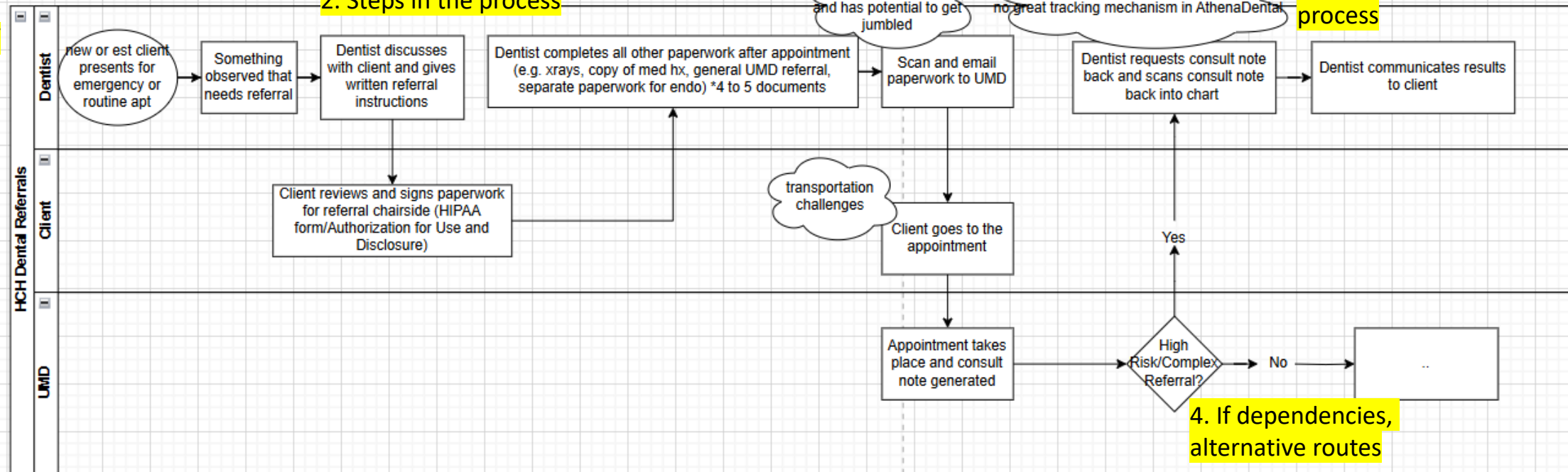


HCH Dental Referrals
Owner: Dr. Brannon
Last updated: 2/13/2025

1. Title, owner, and last updated

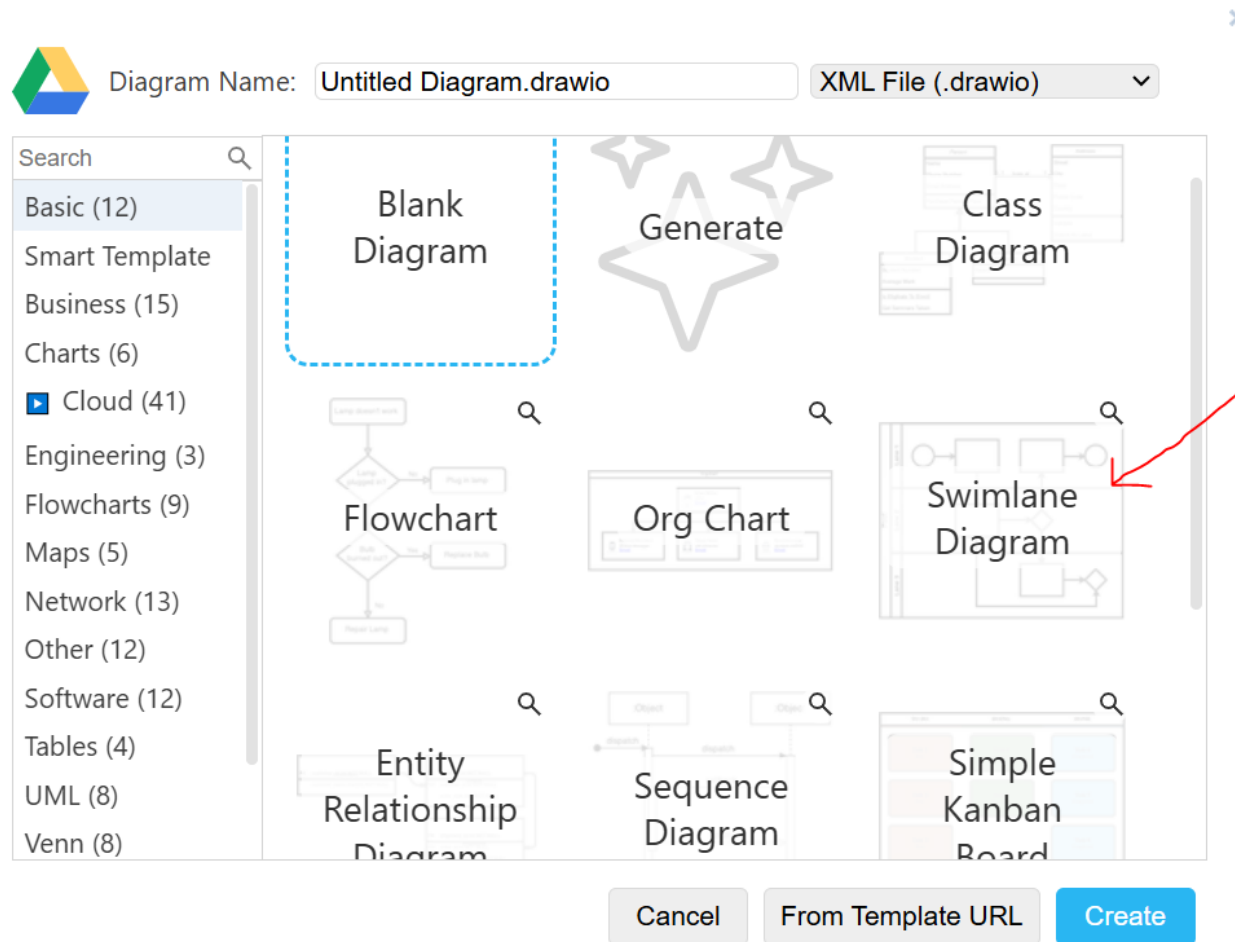
2. Steps in the process

2. Key players/spaces/etc.



Practice

<https://www.drawio.com/>



Let's design a morning routine in 2 minutes



Thanks for joining

