Peds A Quality Improvement Collaborative

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Session #5
June 2, 2020

Disclosures

There are no disclosures for this presentation

Updates

- Data through January of 2020 will become available mid-June

- No QIC sessions in July, will resume QIC's in August

- If any questions, please email us at TIPQIC@asu.edu

Agenda

TIME	TOPIC	PRESENTER
11:30 AM – 11:35 AM	Overview • Agenda	Kailey Love
11:35 AM – 11:45 AM	Quality Improvement Technique • Cause and Effect Analysis	Bill Riley
11:45 AM – 12:30 PM	Peer Learning Presenter • Cause and Effect Analysis Applied	Bayless Integrated Health
12:30 PM – 12:45 PM	Discussion	Charlton Wilson
12:45 PM – 1:00 PM	Next Steps	Kailey Love

Learning Objectives

1. Create a Cause and Effect Diagram
2. Critically analyze and interpret a Cause and Effect Diagram
3. Apply a Cause and Effect Diagram to improving performance on a TIP milestone.
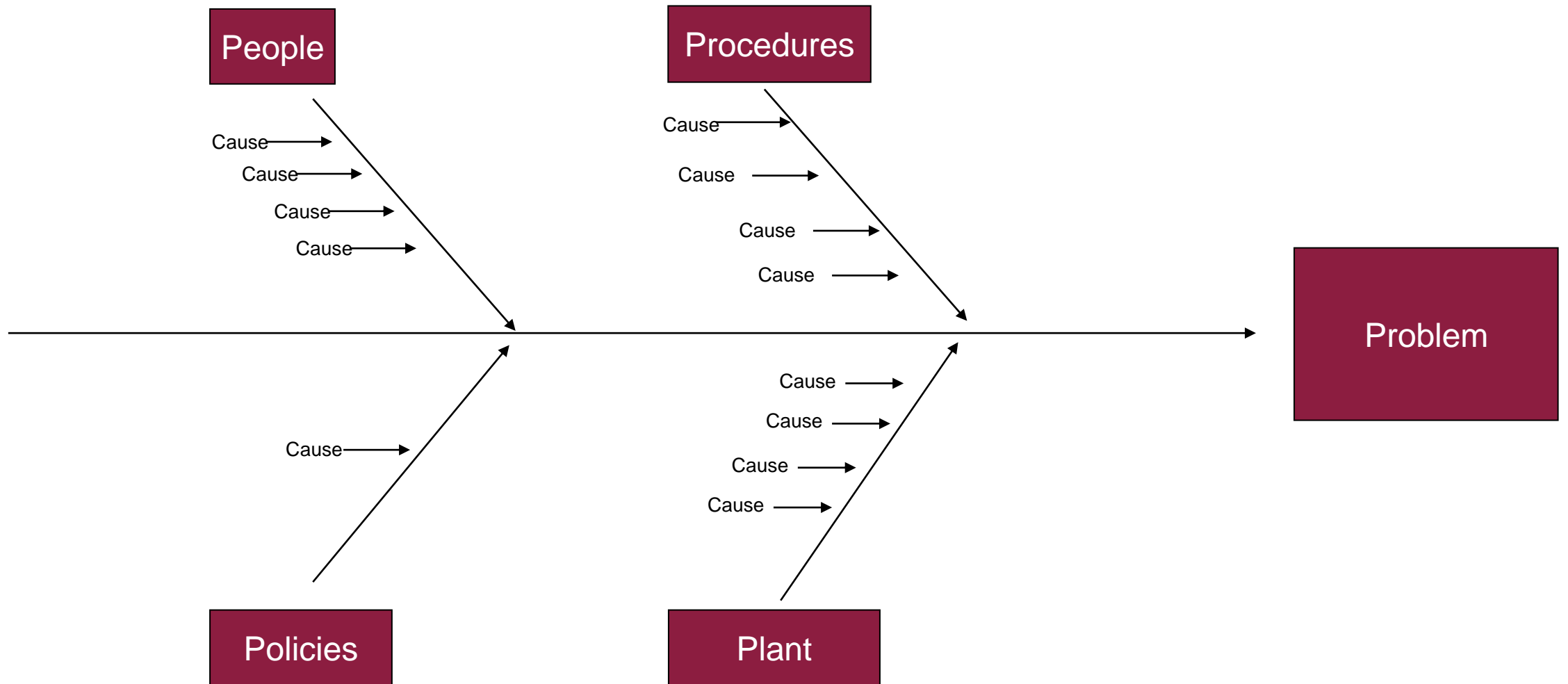
Cause and Effect Analysis

- If special cause:
  - Identify the signal
    - Root Cause Analysis (cause and effect analysis and hierarchy of causes)
- If no special cause:
  - There is only random variation, process is stable and capable
  - If the process capability is not what you want
    - Reengineer the process
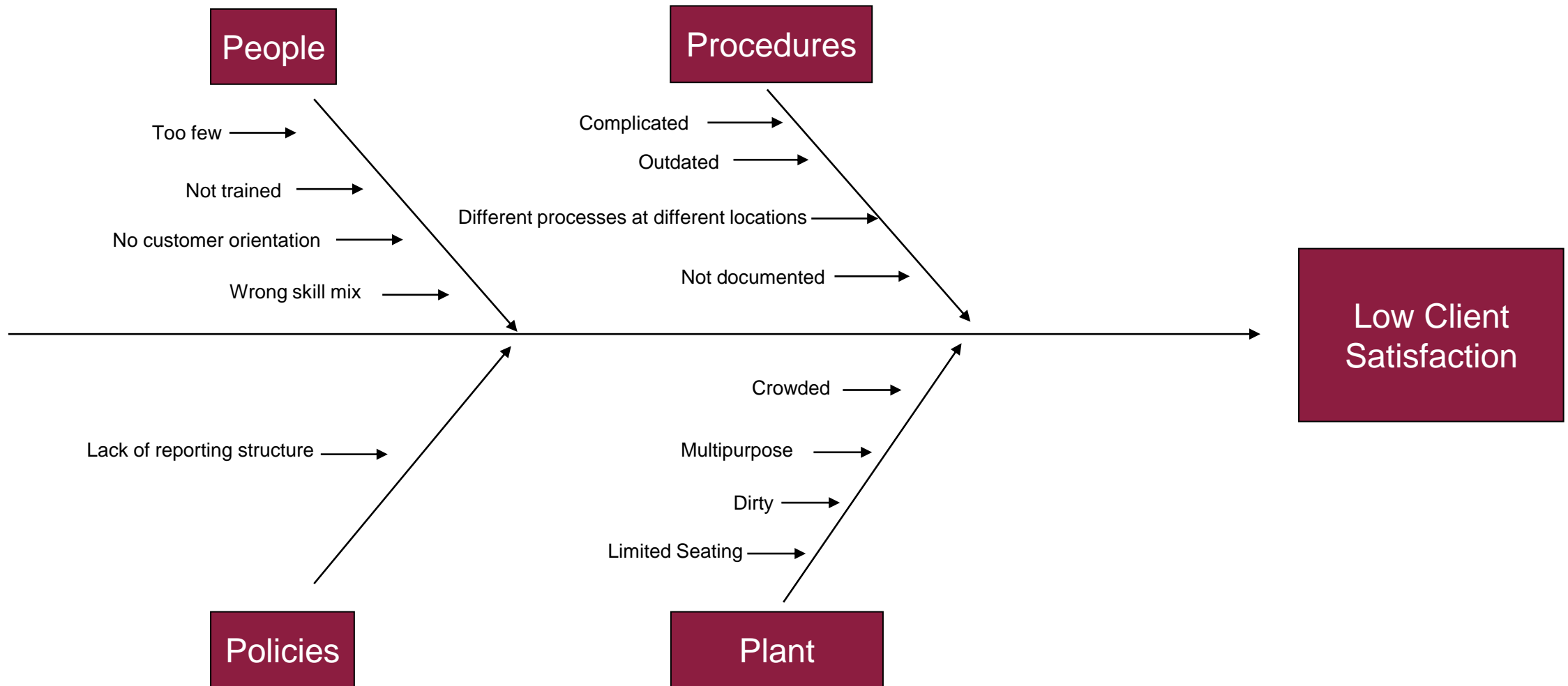   - Cause and Effect Analysis

Case Study

- Surveys indicate that client satisfaction at the Main Street Counseling Center are 20% below the industry benchmark

- Therapist and staff expressed concern regarding their client satisfaction rates

- They believed they were providing high quality service

Cause and Effect Diagrams (4 P's)

People

Procedures

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Cause

Problem

Policies

Plant

Cause and Effect Diagrams (4 P's)

People
- Too few
- Not trained
- No customer orientation
- Wrong skill mix

Procedures
- Complicated
- Outdated
- Different processes at different locations
- Not documented

Policies
- Lack of reporting structure

Plant
- Crowded
- Multipurpose
- Dirty
- Limited Seating
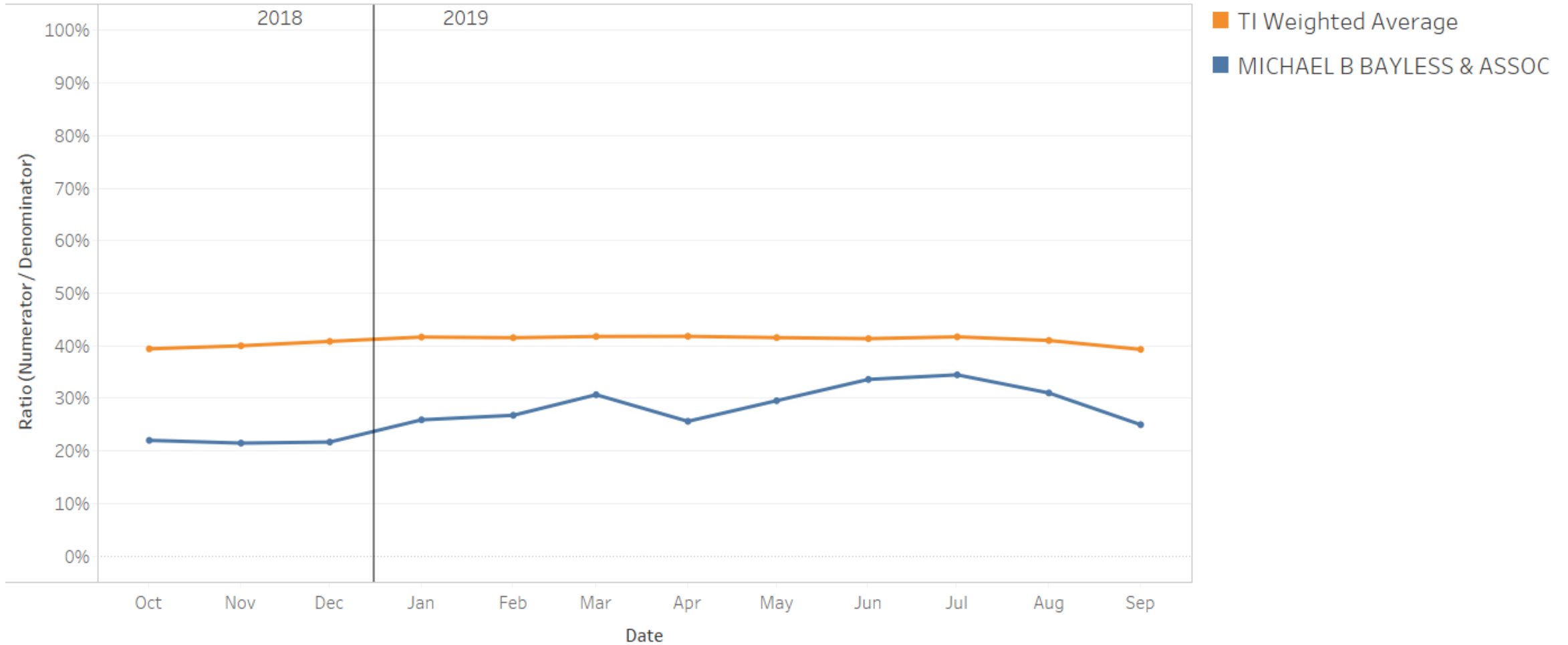
Low Client Satisfaction

Bayless Integrated Healthcare

Dr. Gyann Phillips, DBH, LPC

Dr. Kristen Ray, DBH, LPC

Metabolic Monitoring for Children and Adolescents on Antipsychotic Medication

Data were calculated using BH attribution methodology, and represent a 12-month rolling average ending on the last day of the month of each data point
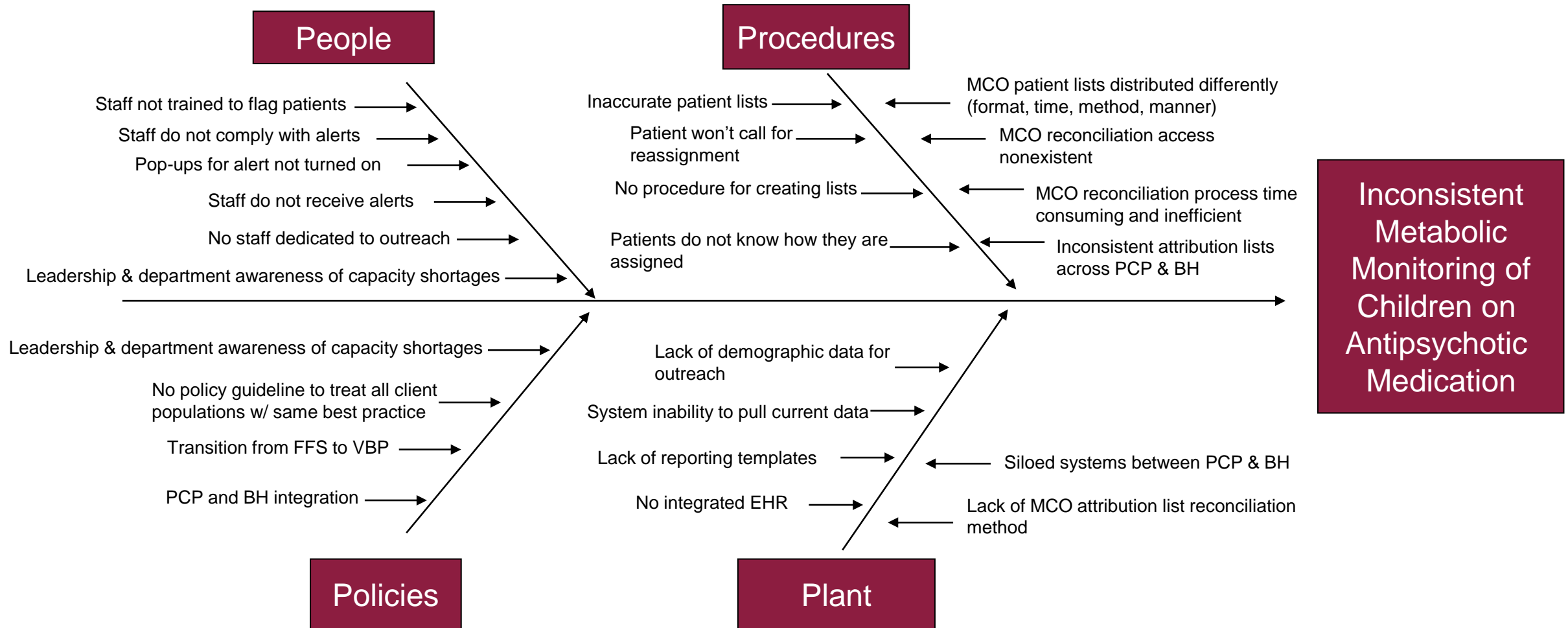

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Bayless Integrated Healthcare Run Chart (FY Oct 2018 - Sept 2019)
Metabolic Monitoring for Children and Adolescents on Antipsychotics
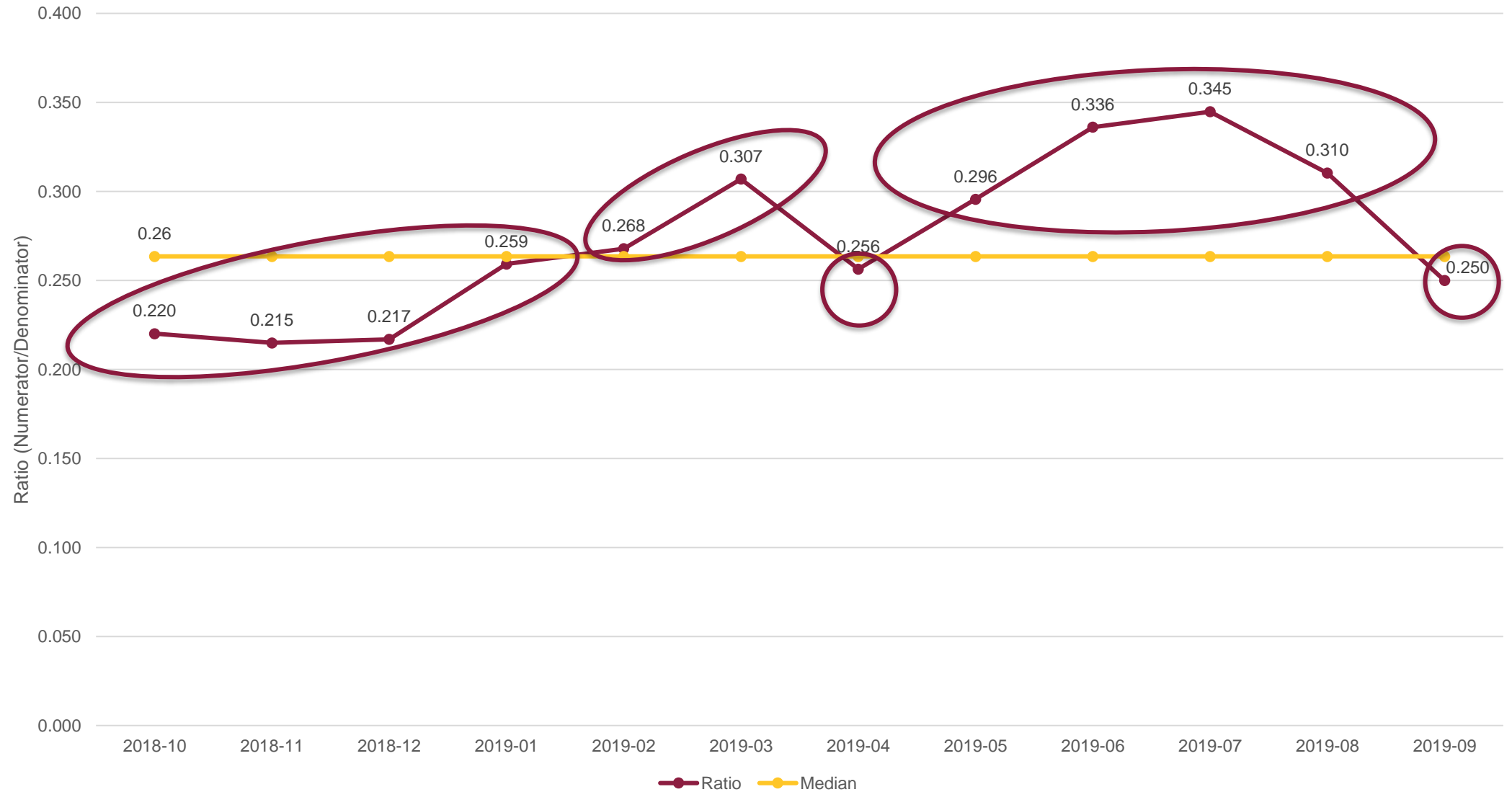
Presentation Questions

- Please provide an overview of your organization.
    - Founded in 1982, provided behavioral health services
    - Family owned
    - Integrated primary care services in 2012
    - Currently:
        - 8 Clinics (6 integrated and 2 counseling)
        - 200+ employees
        - 3 service lines (behavioral health, psychiatry, and primary care)
            - All ages (birth to death)
            - All payers (Medicaid, Medicare, Self-Pay, Commercial)
            - General Mental Health (Medication Assisted Treatment, IOP, Case Management)
        - Virtual Services
- When did you learn about needing to do metabolic monitoring?
    - TIP Year 4, when it became a measure

Bayless Integrated Healthcare
Cause and Effect Diagram ~ 2019

People

- Staff not trained to flag patients
- Staff do not comply with alerts
- Pop-ups for alert not turned on
- Staff do not receive alerts
- No staff dedicated to outreach
- Leadership & department awareness of capacity shortages

Procedures

- Inaccurate patient lists
- Patient won't call for reassignment
- No procedure for creating lists
- Patients do not know how they are assigned
- MCO patient lists distributed differently (format, time, method, manner)
- MCO reconciliation access nonexistent
- MCO reconciliation process time consuming and inefficient
- Inconsistent attribution lists across PCP & BH

Policies

- Leadership & department awareness of capacity shortages
- No policy guideline to treat all client populations w/ same best practice
- Transition from FFS to VBP
- PCP and BH integration

Plant

- Lack of demographic data for outreach
- System inability to pull current data
- Lack of reporting templates
- No integrated EHR
- Siloed systems between PCP & BH
- Lack of MCO attribution list reconciliation method

Inconsistent Metabolic Monitoring of Children on Antipsychotic Medication

Presentation Questions

- Please describe your process to monitor metabolic status for children and adolescents on antipsychotics.
  - Created best practice standard (all patients, not just AHCCCS patients)
  - Provided training regarding workflow with providers and clinical support staff
  - Created standing lab order
  - Created "pop-up" alert in EMR to notify providers/clinical support
- Have you changed your process?
  - Yes
- How so?
  - Created population health department to increase team capacity to train, track/trend data, and improve workflows associated with measure
  - Increased team capacity will be able to outreach patients who were not able to follow-up with ordered labs
  - Created home-based care model for RN/LPN to provide education/obtain labs (Hold-COVID)

Presentation Questions

- How much deliberate design has been done to engineer this process to achieve the outcomes that you want? (Prior to and following the establishment of this measure)
  - Prior to establishment, there was no deliberate design and measure was done inconsistently
  - Following the establishment of the measure:
    - EMR template was built
    - Standing lab order created
    - Pop-up alert system created/rolled out
    - Trained staff on workflow

Presentation Questions

- Who led this effort? Who was on the team for this effort? Did you have the correct representation of team members from your organization?
  - Dr. Gyann Philips, DBH, LPC: Clinical Outcomes Director
  - Team included: Dr. Andrea Raby, VP of Psychiatry, Tia Marden, COO, EMR team, Clinical Support Leaders, Clinical Support Staff
  - Increased team capacity includes:
    - Dr. Kristen Ray, DBH, LPC-VP of Population Health, RNs, Population Health Manager, Dr. Danielle Sink: VP of Primary Care, Population Health Engagement Specialist

Presentation Questions

- How often do you get feedback regarding your metabolic monitoring performance? (Before this metric and currently)
  - Before this metric: None
  - Currently: Continuous due to pop-up alert, quarterly score-card with more detailed data
- What staff training have you done?
  - Met with providers and clinical support staff to provide workflow training

Sample Scorecard

TIP: PSYCH Labs 10/1/2019-10/31/2020			GOAL: 80%	$ Incentive:		Continue to Monitor	Review Req'd	Action Req'd
Progress Legend								

Provider	# of AHCCCS pts. Assigned-internal	Labs Ordered Total	Labs Completed Total	Outstanding Labs Total	Visit w/in 90 days	% to Goal	Comments
Crumley, Jamie							
Dorman, Samantha							
Fong, Luis							
Fossmeyer, Marcus							
Gin, Linda							
Greene, Lindsey							
Herrera, Gorky							
Holliday, Jessica							
Mayberger, Corey							
Metzger, Liz							
Moore, Jamie							
Murugesan, Mani							
Oriabure, Rosine							
Raby, Andrea							
Whtilock, Renata							
Reed, Anna-Marie							
Totals							

Discussion Questions

- Based on your cause and effect analysis, was it helpful to identify multiple causes rather than a single cause?

    – Yes, helped to determine need for capacity increase

- Did this approach help you to better understand the process steps to achieve this metric?

    – Yes, helped to prioritize program development, training needs, and data analysis needs

- What do you plan to do moving forward?

    – Create training manual for onboarding providers, standard operating procedures for outreaching patients who haven't been able to complete lab work, train/onboard new staff in department, and create better reporting systems for real-time data

Q&A

- Please insert any questions in the Q&A box

Next Steps

- Next Steps
  - Post-Event Survey: 2 Parts
    - General Feedback Questions – New Questions!
    - Continuing Education Evaluation
  - Continuing Education will be awarded post all 2020 QIC sessions (November 2020)

- Questions or concerns?
  - Please contact ASU QIC team at TIPQIC@asu.edu if questions or concerns regarding performance data

Thank you!

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