#### **AHCCCS Targeted Investments Program**

# Quality Improvement Workgroup #2 Peds BH 7 & 30 Day FUH

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TIP Year 6: Quality Improvement Workgroup Series

March 14, 2022: Session #3







### Disclosures (for CEUs)

There are no disclosures

### Learning Objectives (for CEUs)

- 1. Critical analysis of the Plan-Do-Study-Act (PDSA) cycle intervention to achieve key metrics
- 2. Debrief pros and cons of applying the PDSA cycle to the Follow-up After Hospitalization for Mental Illness target

## Agenda

TIME	TOPIC
12:00 to 12:02 PM	Overview
12:02 to 12:10 PM	Review Progress on PDSA Cycles
	PDSA Ramp Update
	<ul> <li>Monitoring Metrics</li> </ul>
12:10 PM to 12:40 PM	ARCS Introduction
	Opportunity Analysis
12:40 PM to 12:50 PM	Discussion and Q&A
12:50 PM to 1:00 PM	Homework and Next Steps

### **Today's Goal**

- 1. Review Progress on PDSA Cycles
- 2. Monitor Metrics
- 3. ARCS Introduction
- 4. Opportunity Analysis
  - How to Identify and Establish Targets for Successful Population Management

QI templates and prior presentations can be found:

https://tipqic.org/QIWorkgroups.html

## Quality Improvement Workgroup #2 Session #3 Case Study

Southwest Behavioral Health Services (SBHS)

#### **Contact Information:**

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#### **SBHS's PDSA Ramp Update**

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Aim: Incre	ease the <b>7</b> .	-day follow-up after hospitalization	(FUH) rate 14 percentage points (71%	to 85%) from February 14, 2022 to A	August 30, 2022						
Goal: Red	Juce staffir	ng shortages in order to complete n	avigation for all patients								
		Cycle 1: Secure leadership support for recruitment follow-up	Cycle 2: Create incentive package for recruitment and retention	Cycle 3: HR outreach to qualified candidates	Cycle 4: Training for new hires	Cycle 5: Complete Navigation for all Patients					
Plan	Who?	TIP Team	TIP Team	TIP Team	TIP Team	TIP Team					
What?		nat? Secure VP leadership support approval to hire Recovery Transition Specialists (RTS) position(s). Secure HR leadership support to hire RTS position(s).		Identify hiring channels for RTS candidates. Identify new recruitment methods. Identify qualified RTS candidates. Conduct proactive HR outreach for candidates.	Finalize training plan. Conduct training for new RTS hires. Orient new RTS hires to team and clinics. Complete necessary credentialing.	Conduct complete navigation on 3 patients.					
	Where SBHS.		SBHS.	SBHS.	SBHS.	SBHS; from hospital to clinic.					
	When?	6-weeks	6-12 weeks	12-16 weeks	16-24 weeks	Week 17+					
Do	How?	Leadership support secured	Incentive package developed	1 RTS position already; 2 RTS positions hired & onboarded; 1 in process.	3 RTS positions fully trained and onboarded.	Navigation in process; started in February. As remaining RTS positions hired, will assist.					
Study	Evalua te	VP leadership support obtained (yes/no); HR leadership support obtained (yes/no); # of monthly meetings leadership attended; engagement of leadership at monthly meetings	Incentive package created (yes/no); retention package created (yes/no)	# of qualified candidates identified; # of qualified candidates outreached to; # of candidate interviews scheduled; # of interviews completed	# of training sessions completed; # of staff retained	Debrief each navigation. Identify and implement changes if needed.					
Act	Monito r or Revise	If plan met = monitor If plan not met = revise and doover	If plan met = monitor If plan not met = revise and doover	If plan met = monitor If plan not met = revise and doover	If plan met = monitor If plan not met = revise and do-over	If plan met = <b>continue</b> If plan not met = revise and do-over					

### **Cycle #1 Discussion**

- Audience Discussion:
  - Has any team implemented Cycle #1?
  - If not, what difficulties were encountered?

#### **SBHS's Metrics Update**

Metrics				Dec				Jan			Fe	b		Mar			Арі	r+	
Cycle	Numerator/Denominator	1	2	3	3	4 5	6	7	8	9	10	11	12	13	14	15	16	171	8+
Cycle #1: Secure leadership support for rec	ruitment																		
VP leadership support obtained	Yes/No	х	х	Yes															
HR leadership support obtained	Yes/No	х	Х	Х	Yes	<u>:                                    </u>												丄	
Cycle #2: Create incentive package for recr	uitment																		
Incentive package created	Yes/No					x	х	Yes											
Retention package created	Yes/No					x	x	Х	Yes										
Cycle #3: HR outreach to qualified candidate	res																		
Proactive HR outreach	# of candidates outreached to									1	3	3	3	3	х	х			
	# of qualified candidates									4	4	4	4	4	4	4			
Cycle #4: Training for new hires																			
Conduct training	# of training sessions completed									1	3	3	3	3	Х	Х			
	# of required training sessions									4	4	4	4	4	4	4			
Staff retention	# of staff retained									1	3	3	3	3	Х	Х			
	# of staff hired									4	4	4	4	4	4	4			
Cycle 5: Complete Navigation																			
Patient Navigation	# of navigated patients/families																х	х	Х
	Cumulaive Total																х	Х	Х

#### **Metrics Discussion**

- Audience Discussion:
  - Has any team started to track your metrics?

## **SBHS** FUH-7 Performance Overview

Aim Statement: Increase the 7-day follow-up after hospitalization (FUH) rate 14 percentage points (71% to 85%) from February 14, 2022 to August 30, 2022

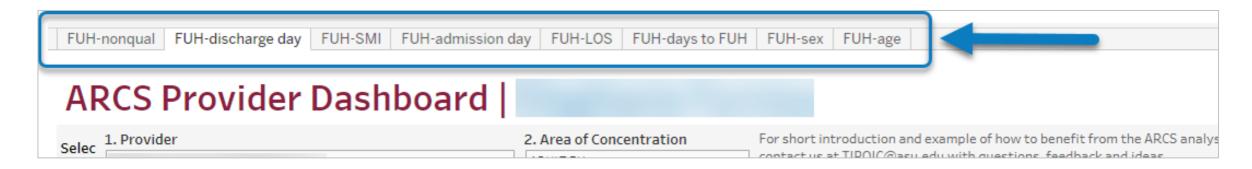
Peds FUH 7-Performance Summary	Patient Count	%
Total Member Hospitalization Events	100	100%
Total Member Hospitalization Events Seen within 7 Days	71	71%
Total Member Hospitalization Events <b>NOT</b> Seen within 7 Days	29	29%
SBHS Total Goal for 7 Day FUH	85	85%
Number of Additional Patients that Need to be Seen to Meet SBHS Goal	14	14%

#### **AHCCCS Root Cause at Scale (ARCS)**

- ARCS = AHCCCS Root Cause at Scale
- Useful resource in your quality improvement efforts
- Current FUH-focused analyses available:
  - 1. Non-qualifying visits
  - 2. Discharge day of the week
  - 3. Admission day of the week
  - 4. Days to FUH visit
  - 5. Length of stay
  - 6. Member sex
  - 7. Member age

### **Accessing the ARCS Dashboards**

- 1. Go to data.tipqic.org and sign in
- Navigate to "Explore" → "TIPQIC Provider Dashboards" → "ARCS Dashboards"
- 3. You will see a number of tiles, one for each ARCS dashboard available to you. Click on one to open and view the dashboard
- 4. Once you've opened one, you can navigate between the dashboards using the tabs at the top of the dashboard (see image)



#### **SBHS** Opportunity Summary:

Priorities	Process	Goal of Additional Patients for 7 Day FUH*
Clinical Priorities	Recruit RTS Staff	
	Complete Navigation	Navigation for All Patients by June 2022
	LOS 0-7 Care Process	TBD

## **SBHS** Opportunity Analysis ARCS Priorities: Length of Stay

		Estimated	Estimated	Measur	e Met?	
ARCS	LOS Care	Patient Count	Patient %	Ye	es	Priority Next Steps
Analysis	Process			Patient Count	%	
=	0-7 Days	55	55%	31	57%	Understand then close the
FUH Performance	8-14 Days	33	33%	21	65%	gap in performance between LOS
by LOS	>14 Days	12	12%	9	71%	
	Total	100 (Denominator)		61		

- How can the care processes for LOS >14 days be applied to the care processes for the LOS 0-7 days?
  - Obstacles, Priorities, & Interventions
  - Metrics
  - PDSA Cycle

## **SBHS** Opportunity Analysis: Clinical & ARCS Priorities Summary

Priorities	Process	Goal of Additional Patients for 7 Day FUH*
Clinical Priorities	Recruit RTS Staff	
	Complete Navigation	Navigation for All Patients by June 2022
	LOS 0-7 Care Process	TBD

#### QIW #1 Session 3: "Homework"

- 1. Review Progress on PDSA Cycles
- 2. Monitor Metrics
- 3. ARCS Dashboard Introduction
- 4. Opportunity Analysis

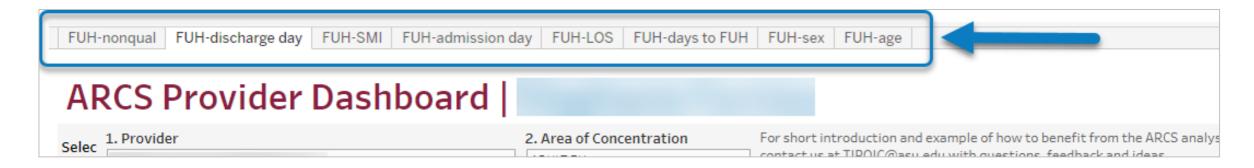
### **Template: Monitoring Metrics**

Metrics										
Cycle #1	Numerator/Denominator	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6			
Cycle 2:										
Cycle #3:										
Cycle #4:	ı									

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## **Suggestion: Review the ARCS Dashboards**

- 1. Go to data.tipqic.org and sign in
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#### **Template: Opportunity Analysis**

					Measu	ire Met?			
ARCS Analysis	Care Process	Estimated Patient	Estimated Patient %	Yes		No		Opportunity by Patient Count	Target Improvement
		Count		Patient Count	%	Patient Count			Gain Goal (%)

### **Next Steps**

- Continuing Education Units (CEU): Post Event Survey
  - Once session has ended, CEU survey will appear in browser
  - If issues accessing, please email <u>TIPQIC@asu.edu</u>
  - All CEU's for 2022 will be awarded following all 2022 QIC sessions (ETA November 2022)
- Attendees to complete recommended 'homework' prior to session #3; slides and template can be found on the TIPQIC website
- Questions or concerns?
  - Please contact ASU QIC team at <u>TIPQIC@asu.edu</u> if questions or concerns

## Thank you!

TIPQIC@asu.edu





