

AHCCCS Targeted Investments Program

Quality Improvement Workgroup #1

Adult PCP/BH 7 & 30 Day FUH

William Riley, PhD

TIP Year 6: Quality Improvement Workgroup Series
April 18, 2022: Session #6

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

Agenda

TIME	TOPIC
12:00 to 12:02 PM	Overview
12:02 to 12:30 PM	Review Progress on PDSA Cycles <ul style="list-style-type: none">• PDSA Ramp Update• Monitoring Metrics
12:30 PM to 12:50 PM	PDSA Ramp Discussion
12:50 PM to 1:00 PM	Next Steps

Today's Goal

1. Review Progress on PDSA Cycles

QI templates and prior presentations can be found:

<https://tipqic.org/QIWorkgroups.html>

Quality Improvement Workgroup #1

Session #3

Case Study

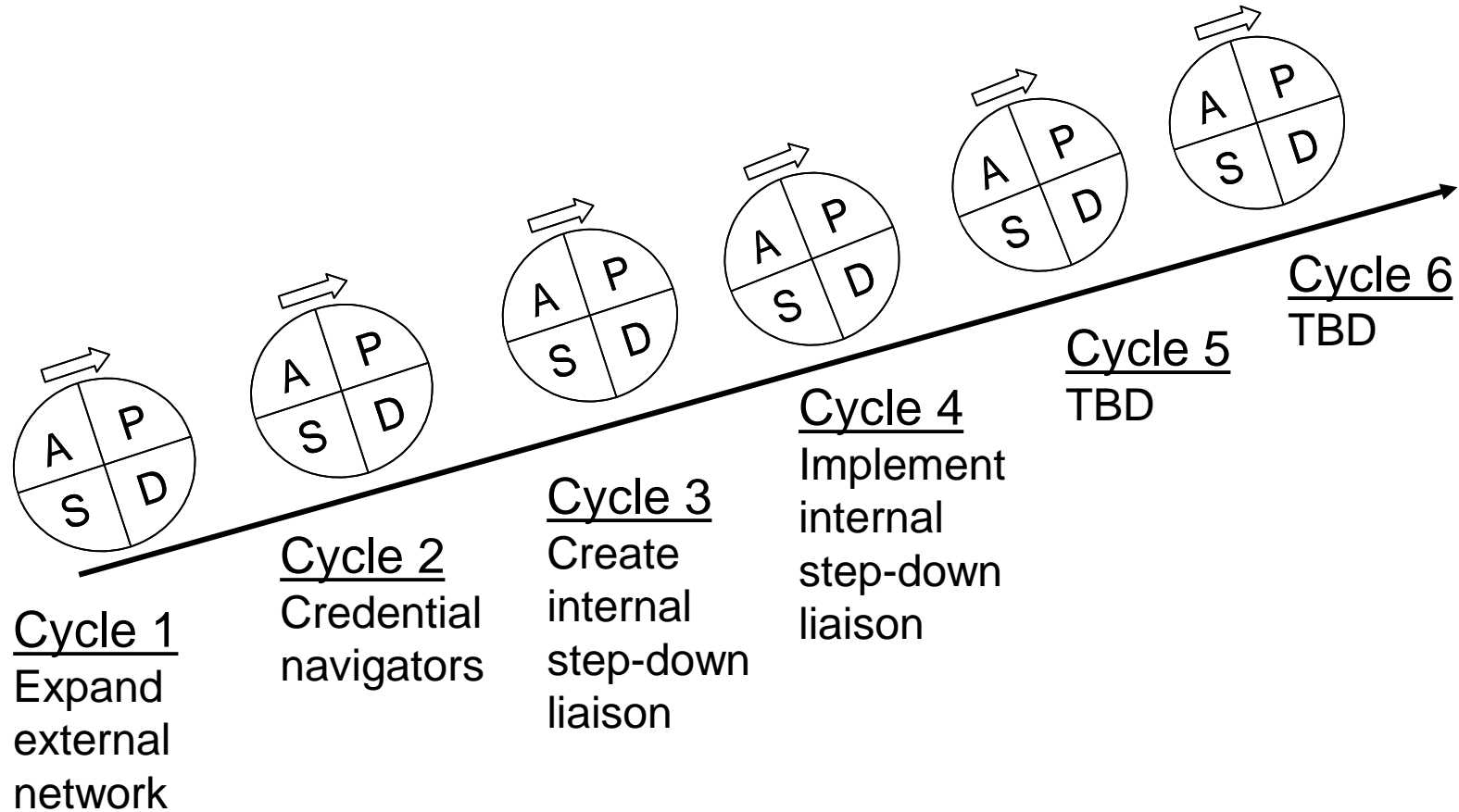
Aurora Behavioral Health

- Valerie Purdie, Community Liaison,
Valerie.Purdie@aurorabehavioral.com
- Jordan L. Peterson, Director of Business Development,
Jordan.Peterson@aurorabehavioral.com

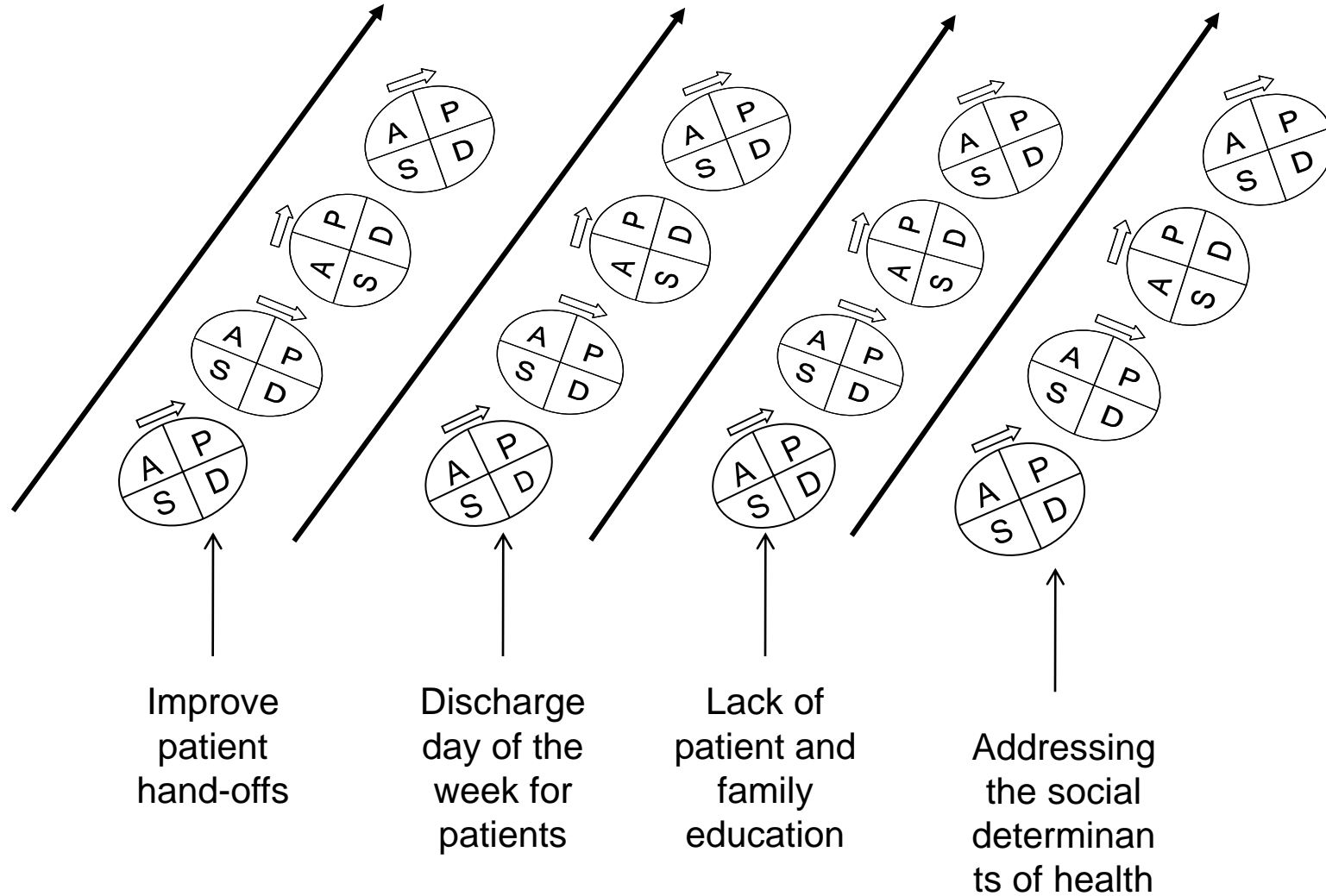
Aurora's PDSA Ramp Update

Aim: Increase the 7-day follow-up after hospitalization (FUH) rate 10 percentage points (50% to 60%) from February 7, 2022 to August 30, 2022					
Goal: Ensure warm hand-offs for all patients discharged from Aurora hospital					
		Cycle 1: Expand external network	Cycle 2: Credential navigators	Cycle 3: Create internal step-down liaison position	Cycle 4: Implement internal step-down liaison position
Plan	Who?	Valerie	Valerie	Valerie	Valerie
	What?	Complete MOUs. Orient preferred providers.	Complete credentialing process for navigators (N = 16 Navigators)	Conduct needs assessment, develop position description for new role, and recruit internal step-down liaison.	Develop internal step-down liaison process, train and orient internal step-down liaison
	Where?	Aurora Glendale & Tempe	Aurora Glendale & Tempe	Aurora Glendale & Tempe	Aurora Glendale & Tempe
	When?	Weeks 1-6	Weeks 1-6	Weeks 1-6	Weeks 7-12
Do	How?	Contacted existing preferred providers. MOUs in process; none completed yet.	As of today, 14 Navigators completed 'neo-day;' all are keyed, badged, and oriented.	Needs assessment underway; which is in turn informing the description for internal liaison role. Position description is being refined.	Dependent upon Cycle 3
Study	Evaluate	# of preferred providers contacted; # of MOUs executed; # of preferred providers oriented	Complete post New Employee Orientation (NEO) debriefing.	Reversing barrier-to-use; correcting process audits; collect feedback from all stakeholders.	Evaluate performance of liaison and revise position description as needed.
Act	Monitor or Revise	If plan met = monitor If plan not met = revise and do-over	If plan met = monitor If plan not met = revise and do-over	If plan met = monitor If plan not met = revise and do-over	If plan met = monitor If plan not met = revise and do-over

Aurora's PDSA Ramp



Aurora's Multiple PDSA Ramps



Additional Case Study

La Frontera

Stephen Guarrera, Population Health Administrator

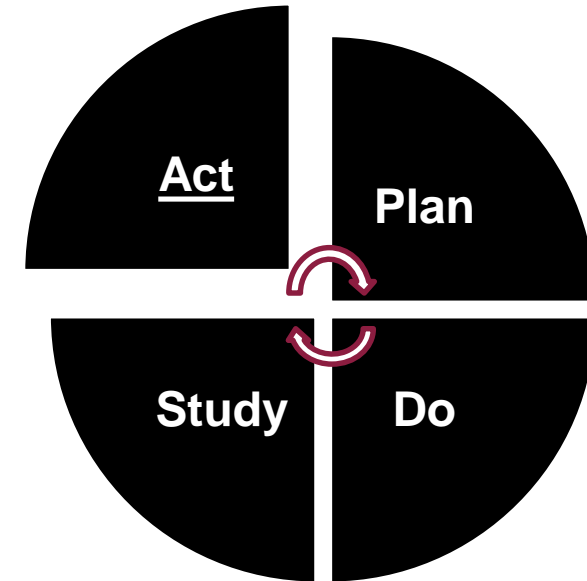
Stephen.Guarrera@lafrontera.org

Kristin Ross, Director of Quality Management &
Utilization Management

Kristin.Ross@LaFrontera.org

La Frontera Plan-Do-Study-Act

Aim: Increase the 7-day follow-up after hospitalization (FUH) rate 5 percentage points (66.9% to 71.9%) from February 1, 2022 to August 30, 2022		
Goal: Ensure members are being informed of their 5 day appointment		
		Cycle 1: Recovery Coaches to have a scheduled appointment/contact (In-Person or Telephonic) with every member who discharges from the hospital the day following discharge*.
Plan	Who?	Recovery Coaches, and Hospital Liaisons
	What?	Hospital liaisons and Recovery coaches to coordinate to schedule next day appointments* with RC following a hospital discharge
	Where?	All adult outpatient clinics
	When?	Effective immediately (February 21 st , 2022), for the next 6 weeks.
Do	How?	Guidance has been given to all applicable staff regarding the process change. Guidance includes COSS staff scheduling an appointment with the recovery coach at the same time as the BHMP appointment.
Study	Evaluate	TBD
Act	Lock-in or Revise & Re-do	If plan met = monitor If plan not met = revise and re-do



*Ideally the appointment/contact would be the day following DC, however, we are counting the contact as a “Yes” if it is anytime before the scheduled 7 day BHMP appointment.

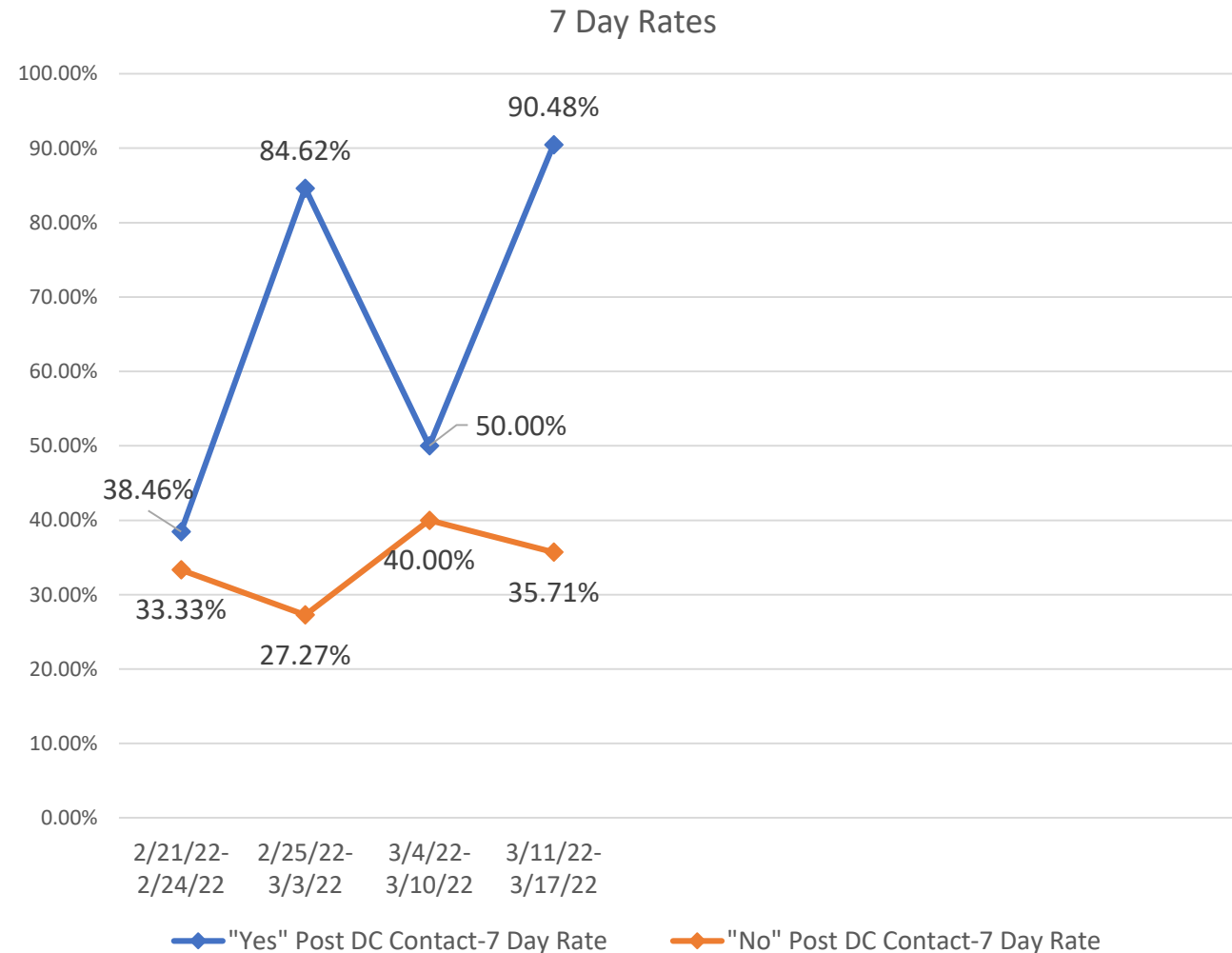
La Frontera

Ramp #1: Evaluation and Data

	2/21/22- 2/24/22	2/25/22- 3/3/22	3/4/22- 3/10/22	3/11/22- 3/17/22
Total # of Hospital DCs	28	30	28	41
Contact Received After Hospital DC	13	13	14	21
No Contact After Hospital DC	12	11	10	14
Removed from Sample	3	6	4	6

	2/21/22- 2/24/22	2/25/22- 3/3/22	3/4/22- 3/10/22	3/11/22- 3/17/22
Members who received post DC contact and scored a "Y" on the 7 Day Measure	5	11	7	19
Members who DID NOT receive post DC contact and scored a "Y" on the 7 Day Measure	4	3	4	5

	2/21/22- 2/24/22	2/25/22- 3/3/22	3/4/22- 3/10/22	3/11/22- 3/17/22
"Yes" Post DC Contact-7 Day Rate	38.46%	84.62%	50.00%	90.48%
"No" Post DC Contact-7 Day Rate	33.33%	27.27%	40.00%	35.71%



Polling & Discussion

Next Steps

- Continuing Education Units (CEU): Post Event Survey
 - CEU survey available in the chat box
 - If issues accessing, please email TIPQIC@asu.edu
 - 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 TIPQIC@asu.edu if questions or concerns

Thank you!

TIPQIC@asu.edu