

AHCCCS Targeted Investments Program

Quality Improvement Workgroup #2

Peds BH 7 & 30 Day FUH

William Riley, PhD

TIP Year 6: Quality Improvement Workgroup Series
April 25, 2022: Session #6

Disclosures

CEU Disclosures:

There are no disclosures.

Recording Disclosures:

This meeting is being recorded and shall be the property of ASU and AHCCCS. Participation in this meeting indicates your waiver of any and all rights of publicity and privacy. Please disconnect from this meeting if you do not agree to these terms.

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>

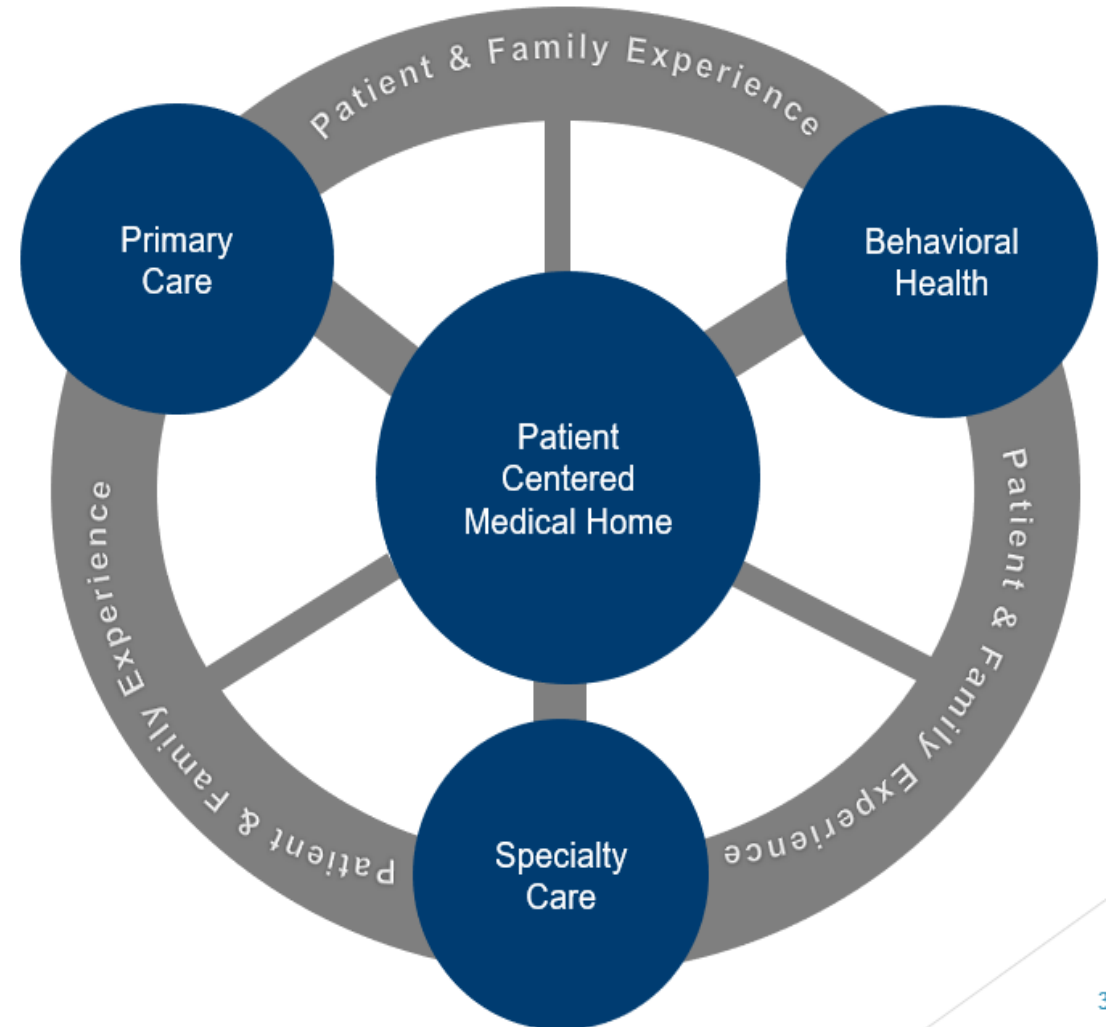
Quality Improvement Workgroup Case Study

District Medical Group - Children's Rehabilitative Services

Contact Information:

- Veronica Ojeda, Physician Practice Transformation Manager
veronica_ojeda@dmgaz.org
- Harlyn V. Chacon, MSW, LMSW, Care Manager,
harlyn_chacon@dmgaz.org
- Natasha Flores, Care Coordinator Nastasha_flores@dmgaz.org

District Medical Group Children's Rehabilitative Services is a multispecialty interdisciplinary clinic designed to meet the unique needs of medically complex/medically fragile patients.



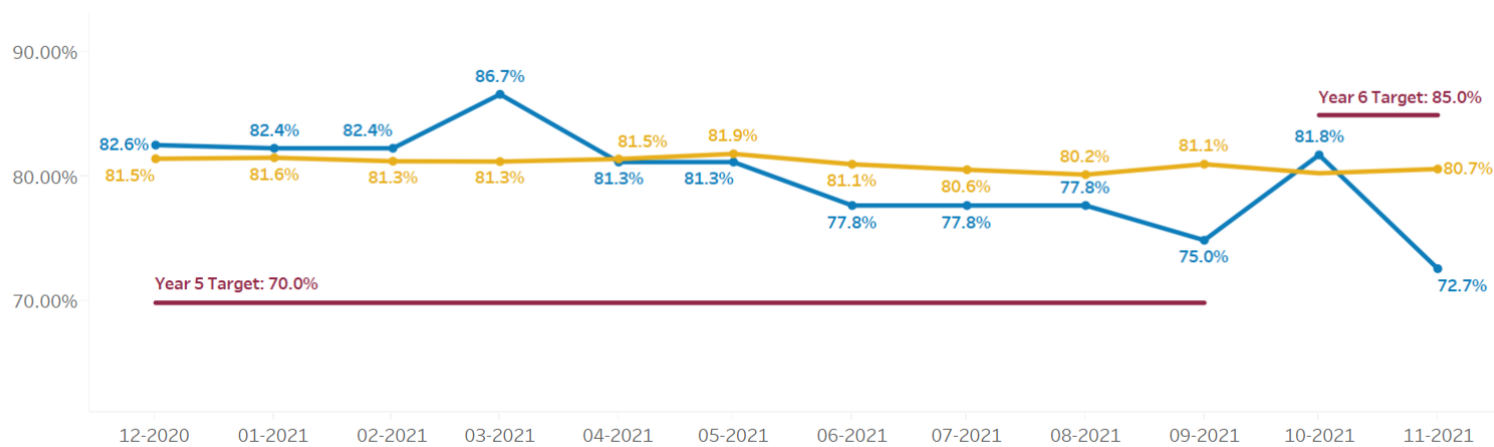
DMG-CRS 7-Day Follow-Up After Hospitalization Performance

Select Filters:

1. Provider: DISTRICT MEDICAL GROUP INC
 2. Area of Concentration: PEDS BH
 3. Measure: Follow-Up After Hospitalization for Mental Illness: 6-17 Years (7-day)

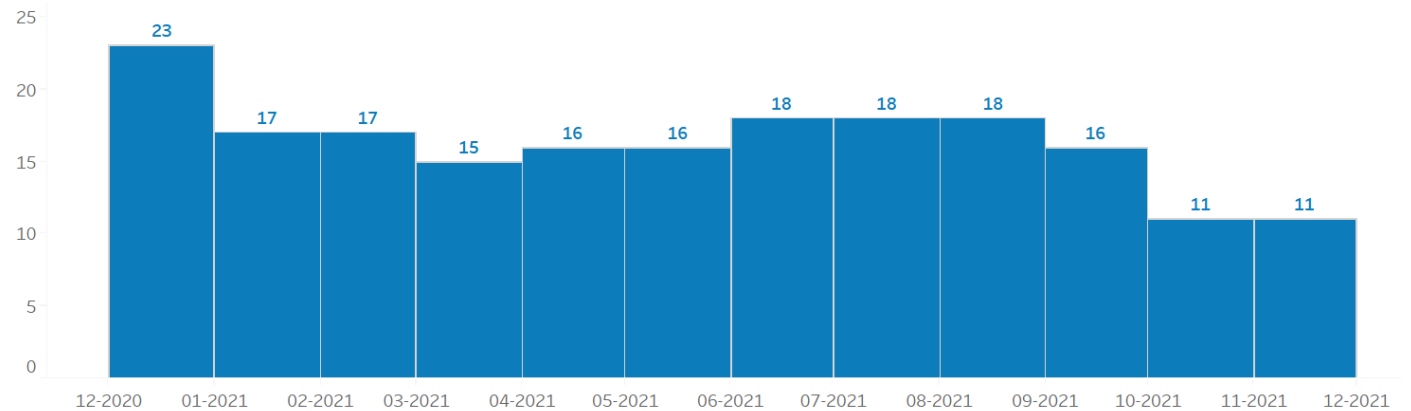
Performance on Measure (Each month is a 12-month report period)

DISTRICT MEDICAL GROUP INC vs. Providers in same Area of Concentration



Denominator

DISTRICT MEDICAL GROUP INC



DMG-CRS Develop Aim Statement

Template statements for FUH measure

- Increase the **7-day** follow-up after hospitalization (FUH) rate 14% percentage points (72.7% to 86%) from February 1, 2022, to August 30, 2022
- Increase the **30-day** follow-up after hospitalization (FUH) rate 11% percentage points (81% to 92%) from February 1, 2022, to August 30, 2022

DMG-CRS Prioritize Obstacles, Identify Interventions & Establish Measures

Priorities	Prioritized Obstacles	Intervention	Metrics
1	<p>HIE Alerts:</p> <ul style="list-style-type: none"> Lack of timely information on children discharged Complex and incomplete admission and discharge notification system 	<ul style="list-style-type: none"> Continually upload up-to-date patient panels into HIE to secure ADT alerts Work with HIE to distinguish ADT alerts from medical and behavioral health f/u Track HIE alert by medical vs. BH 	<ul style="list-style-type: none"> Patient panel upload to HIE on quarterly basis (yes/no) # of HIE alerts for medical # of HIE alerts for BH
2	<ul style="list-style-type: none"> Full provider schedule prevented 7-day and 30-day scheduling 	<ul style="list-style-type: none"> Reserve 2 appointment slots per provider Continually monitor appointment slot availability 	<ul style="list-style-type: none"> # of slots available per provider # of failures due to lack of appointment slots
3	<ul style="list-style-type: none"> Incorrect appointment type for 7-day and 30-day follow up after hospitalization were being used 	<ul style="list-style-type: none"> Education and train support staff on different appointment types for hospital follow ups (appointment types = In person, Telephonic, Telehealth) 	<ul style="list-style-type: none"> # of miscoded appointments (through chart review) Conduct internal audit of appointment types

DMG-CRS Administrative Workflow

7 Day Follow-up after Hospitalization BH

A patient or parents calls for a hospital follow-up after hospitalization for mental illness appointment

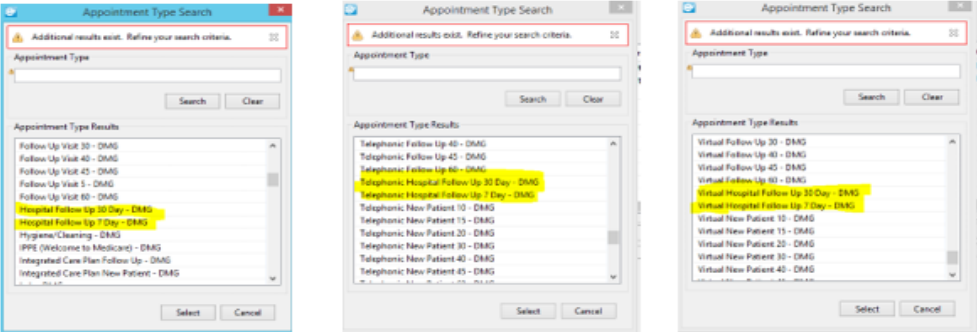


Message/Call Harlyn (6106) to see if she is available or the MA assigned to BH department
Name, DOB, Phone, MRN, Hospital patient was discharged



Harlyn or MA assigned to BH department will coordinate care with an appropriate provider for an appointment time
7 day / 30 day

- Develop a report to continue growth with 7-day and 30-day follow-up after hospitalization



Visit can be completed via telehealth, telephonic, or in person

DMG-CRS PDSA Ramp #1 Update

Aim: Increase the 7-day follow-up after hospitalization (FUH) rate 14 percentage points (72% to 86 %) from February 14, 2022, to August 30, 2022					
Goal: Develop a process to improve performance for the 7-day follow up after hospitalization					
		Cycle 1: Develop timely reporting for BH discharges	Cycle 2: Designate appointment slots in providers schedule for 7-day and 30-day f/u	Cycle 3: Monitor providers' schedules to ensure 7-day and 30-day appointment availability	Cycle 4: Create appointment for telemedicine and telephonic 7-day and 30-day f/u
Plan	Who?	TIP Team	TIP Team	TIP Team	TIP Team
	What?	Create workflow for Hospital discharge 7 day/30 day. EMR care alert to Primary Care and Behavioral Health providers and support staff of a 7 day follow up.	In EMR designed two time slot per week per provider for 7 day follow up.	Maintain appointment slot availability in EMR.	Develop a report for all three types of visits (telemedicine, telephonic, and in person) within EMR. Work with provider to ensure appropriate codes/claims are processed for 7 day and 30 day follow up.
	Where?	DMG-CRS Primary Care and Behavioral Health	DMG-CRS Primary Care and Behavioral Health	DMG-CRS Primary Care and Behavioral Health	DMG-CRS Primary Care and Behavioral Health
	When?	6-weeks (Complete)	6-12 weeks (Complete)	12-16 weeks (Complete)	16-24 weeks (In Progress)
Do	How?	Educate providers and support about EMR care alerts within the Chart for patients seen at hospital.	Workflow education at monthly department meeting for Primary Care and Behavioral Health.	Workflow education at monthly department meeting for Primary Care and Behavioral Health.	Implementing report; implementing education; implementing coding
Study	Evaluate	% of 7-day f/u per HIE ADT alerts received.	Patient outreach for every patient we receive alert on HIE. % of 7 day follow up completed.	Patient outreach for every patient we receive alert on HIE. % of 7 day follow up completed.	Tracking patient passed on appointment type for hospital follow up 7 day and 30 day.
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

PDSA Ramp Update Discussion

- Audience Discussion
 - Has anyone made continued progress with their PDSA Cycles?
 - Has anyone encountered any major barriers with the PDSA Cycles?

Next Steps

- Continuing Education Units (CEU): Post Event Survey
 - Once session has ended, CEU survey will appear in browser
 - 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