Disclosures

CEU Disclosures:

There are no disclosures.

Recording:

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.

All templates, slides, and session materials can be found: https://tipqic.org/QIWorkgroups.html

Learning Objectives (for CEUs)

1. Critically analyze the role of an interdisciplinary Quality Improvement team in achieving well-child targets
2. Describe Plan-Do-Study-Act (PDSA) cycle interventions to achieve key metrics
3. Debrief pros and cons of applying the PDSA cycle to the well-child metrics

Agenda

TIME	TOPIC
12:00 to 12:02 PM	Overview
12:02 to 12:20 PM	PDSA Cycle Updates
12:20 PM to 12:50 PM	PDSA Cycle Discussion
12:50 PM to 1:00 PM	Homework and Next Steps

Quality Improvement Workgroup Case Study Organization

Encompass

Matthew Lasslo, LPC, Clinical Director

Matthew.Lasslo@encompass-az.org

Alicia Stewart

Alicia.Stewart@ENCOMPASS-AZ.ORG

Last Session's Case Study
Component 2, 3, & 4: Encompass Priorities, Interventions, and Measures

#	Prioritized Obstacles (What to change)	Intervention (How to change)	Metrics (Measuring Progress of Change)
1	Identify a comprehensive list of PCP patients and PCP assignment	• Identify team members who will be responsible for developing, engaging, tracking progress in this area. • Have IT and Compliance create a list of all patients in these 3 categories • Identify those that are PCP only (compared to PCP and BH enrollment or BH only) • Create a system for tracking newly eligible members and those no longer eligible.	• Identify team members • Establish a working list of eligible PCP members by April 25
2 & 3 (Combined)	Proactive patient outreach & Cultivate frontline staff re-engagement	• Work with management to establish cross-departmental cooperation for additional duties. • Create outreach guidelines and procedures • Train staff for outreach • Manage list of eligible patients for engagement/re-engagement teams. • Review and re-train engagement policy • Establish ongoing communication between engagement team, medical providers, and TI Management/tracking members	• Secure permission from management team to proceed or alternative team member options discussed no later than April 11 • Create outreach guidelines and procedures by TBD • Train eligible staff by TBD • Percentage of patients contacted • Percentage of patients who successfully complete visit • Number of team members in re-engagement team by April 25 (at minimum 2)
4	Establish integrated collaboration/communication among staff for well-child measures	• Establish a monthly meeting with medical provider and engagement team. • Establish a monthly meeting with engagement team and TI management.	• Monthly meeting with PCP providers and engagement team • Monthly meeting with engagement team and TI management team

6

Encompass Multiple PDSA Ramps
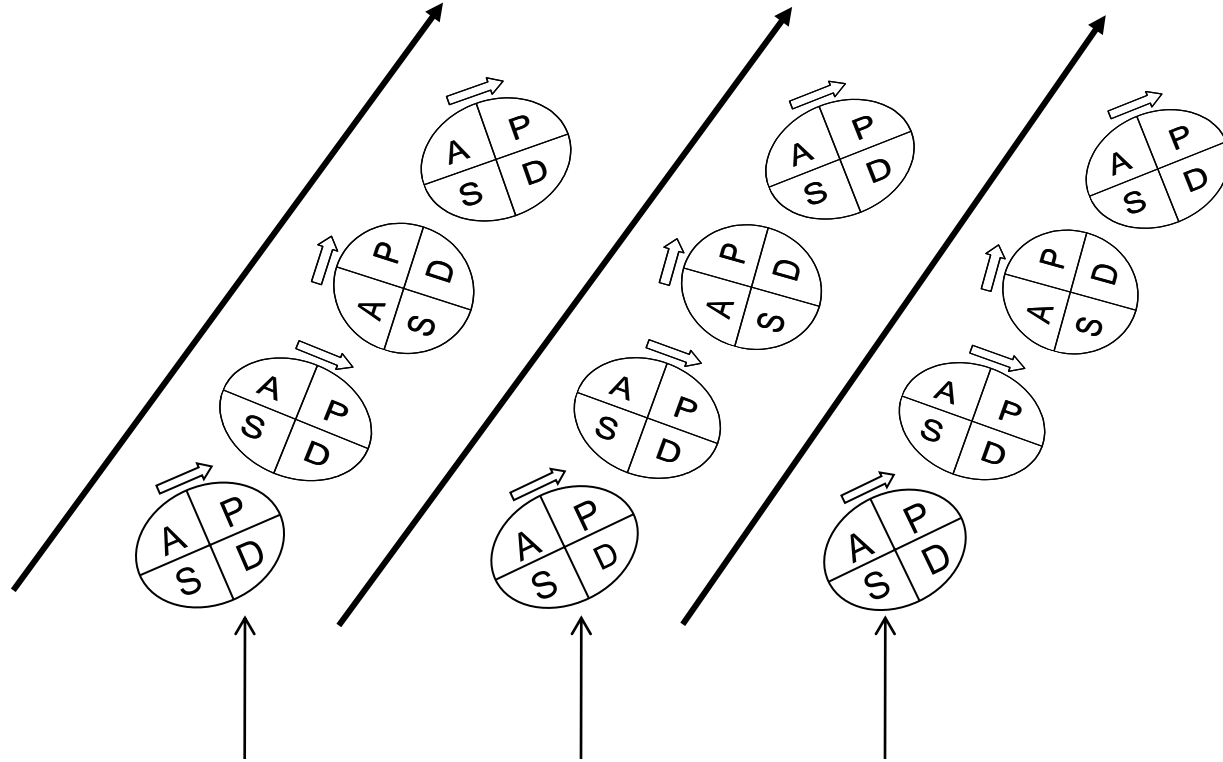
Ramp #1: Identify a comprehensive list of PCP patients and PCP assignment

Ramp #2: Proactive patient outreach & cultivate frontline staff re-engagement

Ramp #3: Established integrated collaboration/communication among staff for well-child measures

Encompass PDSA Ramp #1

Aim: Increase well-care visit rate performance (see specific aims) from April 4, 2022 to August 30, 2022				
Goal: Identify a comprehensive list of PCP patients and PCP assignment (prioritized obstacle #1)				
		Cycle 1: Identify team members who will be develop, engage, and track progress	**Cycle 2:** Compliance creates a list of patients in 3 age categories	**Cycle 3:** Identify those that are PCP only (compared to PCP and BH enrollment or BH only)	**Cycle 4:** Create a system for tracking patients who move across age categories and those no longer eligible
Plan	Who?	Matt, Alicia, Courtney (TI Team)	Alicia	Courtney	Jessica
	What?	Identify who is able to pull these lists and from where	Create 3 separate lists for the appropriate age ranges	Identify dual enrollment status	Create report using EMR
	Where?	Encompass	Health Plan Rosters for TI members	EMR	Behavioral & Medical EMR
	When?	April 11 (**Complete**)	April 25 (**Ongoing; at stage of list completion and data harmonization**)	May 16 (**On Hold; Contingent Upon Cycle 2**)	May 16 (**On Hold; Contingent Upon Cycle 2**)
Do	How?	TI Team meeting to identify team members	Break list into 3 age categories; compare across lists and complete TIP data harmonization process	Identify dual enrollment status	Following creation of list, review list monthly
Study	Evaluate	team members identified (yes/no); # of team members involved in identifying members and re-engaging (goal = 5)	# of lists (broken out by age category); match with TI member list; complete data harmonization process (yes/no)	# of dual enrollments; # of PCP only (broken out by age category)	Monthly review complete (yes/no); # of patients transitioned
Act	Monitor or Revise	**Plan met** = monitor periodically (check-in with the team; monitor list)	If plan met = monitor If plan not met = revise and do-over	If plan met = monitor *monthly* If plan not met = revise and do-over	If plan met = monitor *monthly* If plan not met = revise and do-over

Encompass PDSA Ramp #2

		Cycle 1: Work with management to establish cross-departmental cooperation for additional duties.	**Cycle 2:** Create outreach guidelines and procedures	**Cycle 3:** Train staff for outreach	**Cycle 4:** Manage list of eligible patients for engagement/re-engagement teams.
	Aim: Increase well-care visit rate performance (see specific aims) from April 4, 2022 to August 30, 2022				
	Goal: Proactive patient outreach and cultivate frontline staff (prioritized obstacle #2 and #3 combined)				
Plan	Who?	TI Team and EHS Management	TI Team	TI Team	Engagement Team
	What?	Discuss TI needs and benefits for adding additional duties	Update current policies	Train front-desk staff, MA's, and case managers on updated policies and procedures	Document engagement (successful/not successful); re-engagement team reports back to compliance team
	Where?	EHS	Encompass	BH and Medical	Encompass
	When?	April 11 (**Complete**)	May 16 (**Complete**)	May 30 (**On Hold, Contingent Upon Ramp 1**)	Ongoing (**On Hold, Contingent Upon Ramp 1**)
Do	How?	Meet with management to discuss TI needs and benefits for adding additional duties	Review encompass policies on re-engagement; update and submit to leadership for approval	Communicate updated policies through trainings with relevant staff across Encompass sites; include motivational interviewing	Continuously manage list of eligible patients
Study	Evaluate	Cross-Departmental Cooperation Permission (Yes/No)	Policies and procedures updated (yes/no) – No Change Needed	# of staff trained by staff type	# of patients outreached to; # of patients re-engaged; # of patient not re-engaged % of patients contacted; % of patients completed visit
Act	Monitor or Revise	**Plan met** = Lock-in approval	**Plan met** = monitor	If plan met = monitor If plan not met = revise and do-over	If plan met = monitor *monthly* If plan not met = revise and do-over

Encompass PDSA Ramp #3

		Cycle 1: Establish a monthly meeting with medical provider and ~~engagement team~~ TI Team; Revised to swap these two cycles	**Cycle 2:** Establish a monthly meeting with engagement team and TI management.
Plan	Who?	PCP and Engagement Team	Engagement Team and TI Team
	What?	Monthly team meetings with relevant members to discuss upcoming medical appointments	Monthly team meetings with relevant members to discuss unsuccessful and successful engagement
	Where?	Encompass	Encompass
	When?	Monthly (meet first of the month to discuss upcoming appointments)	Monthly (meet at the end of the month to discuss engagement successes)
Do	How?	Monthly team meetings with relevant members to discuss upcoming medical appointments	Monthly team meetings with relevant members to discuss unsuccessful and successful engagement
Study	Evaluate	Monthly meeting (yes/no); # of upcoming appointments reviewed	Monthly meeting (yes/no); # of successful engagements; # of unsuccessfully engaged
Act	Monitor or Revise	Plan not met = **revise** and do-over → Meet with engagement team beginning of month to set expectations and goals	Plan not met = **revise** and do-over → Meet with medical provider to update on completed exams

Aim: Increase well-care visit rate performance (see specific aims) from April 4, 2022 to August 30, 2022

Goal: Establish integrated collaboration/communication among staff for well-child measures (prioritized obstacle #4)

Encompass Metrics

Metrics - Tracking & Monitoring	Numerator/Denominator	Target	April 1	2	3	4	May 5	6	7	8	June 9	10	11	12
Ramp #1: Identify a comprehensive list of PCP patients and PCP assignment														
Team Members Identified	Yes/No	11-Apr		Y										
Team Members (N = 5)	# of team members onboarded (Move to Ramp 2)	11-Apr												
	# of total preferred team members (N = 5)													
Member Lists (N = 3)	# of lists developed	25-Apr			Y									
	# of broken out by age category (N = 3)					2/3								
Complete TIP Data Harmonization Process	Yes/No	25-Apr												
Match Lists with TI Roster	Yes/No	25-Apr				N								
Enrollment Status - Dual	# of dual enrollments	16-May												
	# of total members													
Enrollment Status - PCP Only	# of PCP only enrollments	16-May												
	# of total members													
Monthly Review of Lists	Yes/No	16-May												
Patients Transitioned	# of patients transitioned to new age category	16-May												
	# of total members													
Ramp #2: Proactive patient outreach & cultivate frontline staff														
Cross-Departmental Permission	Yes/No	11-Apr	Y											
Policies/Procedures Updated	Yes/No	16-May				Y								
Staff Training (by staff type)	# of staff trained	30-May												
	# of total staff													
Patient Outreach	# of patients outreached to	Cont.												
	# of total patients													
Patient Re-Engagement	# of patients re-engaged	Cont.												
	# of patients outreached to													
Patient Visits	% of patient visits completed	Cont.												
Ramp #3: Establish integrated collaboration/communication among staff														
Medical/Engagement meetings	Yes/No	Cont.												
Engagement/TI Meetings	Yes/No	Cont.												

Discussion

- Polling Questions

Next Steps

- Continuing Education Units (CEU): Post Event Survey
  - CEU survey located in the chat; click on the survey before we close out of today's session
  - If issues accessing, please email TIPQIC@asu.edu
  - All CEU's for 2022 will be awarded following all 2022 QIC sessions (ETA November 2022)

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

Thank you!

TIPQIC@asu.edu