

Welcome!



California ACEs Learning and Quality Improvement Collaborative
(CALQIC)

Data Reporting Office Hours

January 6, 2021

This virtual session is being recorded and will be posted to careinnovations.org/calqic-portal

Everyone is currently muted.

To unmute yourself: Press *7

To mute yourself: Press *6

Please use the [chat box](#) to ask questions.

Data Reporting Office Hours: agenda & goals

1:00 – 1:05 Welcome

1:05 – 1:20 Q4 materials review and walk-through

1:20 – 1:55 Open Q&A (for CCHE team and/or peer-to-peer)

1:55 – 2:00 Feedback

Goals for our time together:

1. Provide an overview of the data reporting materials for Q4 2020
2. Respond to questions about Q4 data reporting
3. Create opportunities for peer connections

Evaluation Support

The Center for Community Health and Evaluation (CCHE)



Maggie Jones,
Director



Lisa Schafer,
Senior Evaluation &
Learning Consultant



Monika Sanchez,
Evaluation & Learning
Associate



Creagh Miller,
Evaluation & Learning
Associate



Goals of the Evaluation

- Assess **changes in organizations' capacity** related to implementing ACEs education, screening, & response.
- Assess **changes in clinic-level outcomes** related to screening and response.
- Provide **real time information to CCI** about program progress and participant experience.
- **Synthesize and communicate** results and learnings from the program to key stakeholders.

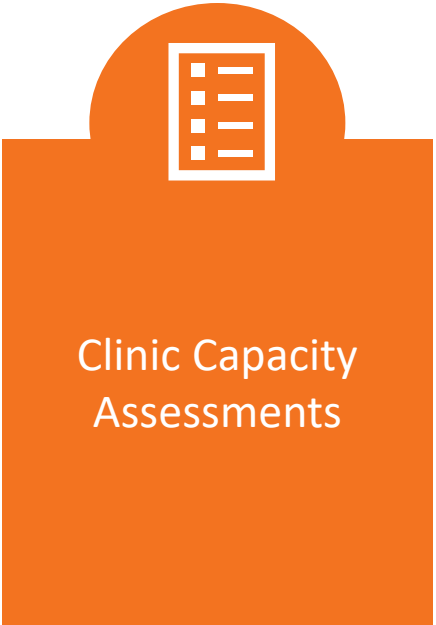


Measurement Strategy



Clinical Data Reporting

- Quarterly Submission



Clinic Capacity Assessments

- Baseline
- End of learning collaborative



Program Participant Interviews

- ★ Mid-point
- End of learning collaborative



Coaching logs & Interviews

**Evaluators & Coaches only*



Learning Collaborative Activities

- Post-event surveys

Clinical Data Reporting Measures



1 % PCPs trained/credentialed to bill for ACEs screening

2 Screening rates (% of patients screened for ACEs)

3 % of patients at high risk for ACE associated health conditions per the state definition

4 Response rates (% of patients with a positive screen per clinical definitions receiving response)

5 Optional: Strengths and resilience (e.g., # of patients who are also screened for resilience or positive childhood experiences)

Clinical data reporting Q4 timeline



Dec 2020: Adjustments made to reporting template & sent to all CALQIC teams



Jan 6: Office hours



Jan 15: Q4 (Oct-Dec) data report due to CCHE



Feb: Dashboards shared & data reporting community of practice call (TBD)



Mar: Adjustments made to reporting template (as needed)



- Future reports due:**
- April 15, 2021
 - July 15, 2021
 - October 15, 2021



Data reporting materials overview

- Quarterly clinic data reporting guidance (**PDF document**)
- Quarterly clinic data report template (**Excel files**)
- Clinic data workflow diagram (**PowerPoint file**)



Data reporting guidance (PDF)

California ACEs Learning and Quality Improvement Collaborative:
Quarterly clinic data report template guidance

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Screening tab (Pediatrics and Adults).....3

Response tab (Pediatrics and Adults).....4

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What if our organization/site has not started screening yet?.....5

Which sites should we be submitting these data for?.....5

Can we customize the race categories?.....5

Can we customize the response/referral categories?.....5

Our site is screening for resilience – how can we report data for this measure?.....5

Are there questions we should be asking ourselves as we look at these data?.....5

Changes to the reporting template in Q4

1. Site information tab contains fewer questions. Clinics are now being asked to provide workflow information in PowerPoint diagrams.
2. Provider tab no longer asks for race and ethnicity information.
3. Provider tab includes space for all reporting quarters.
4. Provider tab clarifies reporting should reflect only primary care providers.
5. Screening tab specifies reporting should reflect the PEARLS tool for pediatrics and ACE-Q or other tool for adults.
6. Screening tab specifies an ACE score of 4 or more is for Part 1 of the PEARLS tool for pediatrics.
7. Response tab no longer includes space to enter chart information; only accepts totals.
8. Response tab recharacterizes “accepted” responses as “not declined” responses.
9. Added Definitions tab in the template.
10. Modified reporting dates to reflect a 3-month period each quarter instead of a cumulative value from the initiative’s start.

Revised December 2020 Page 1

Includes:

- Purpose, timeline, and logistics
- How to fill out the Excel template
- Definitions
- Frequently Asked Questions
- Changes to the Excel template in Q4

Data reporting template (Excel)

Includes:

California ACEs Learning and Quality Improvement Collaborative (CALQIC)
 A program of the Center for Care Innovations and the University of California San Francisco
 Quarterly clinic data report template
 Questions? Please contact Monika from the evaluation team at monika.a.sanchez@kpi.org

Organization: [Enter organization name here]
 Site name: [Enter site name here - 1 site per Excel file]

Please respond to the following questions for this site.

1) Please describe this site's eligible population to receive ACEs screening, e.g., ages of eligible children, types of visits (well-child, acute, etc.), number of providers participating.
 Include the date this site began screening the eligible population.

<p>For pediatrics</p> <p>Please ensure the pediatric eligible population definition described in the Site Information tab matches the PowerPoint workflow diagram.</p>	<p>For adults</p> <p>Please ensure the adult eligible population definition described in the Site Information tab matches the PowerPoint workflow diagram.</p>
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2) Please describe this site's definition of a positive screen warranting follow up/referral, including the number of ACEs, symptomology, etc.
 (If this site's definition of a positive screen warranting follow up is the same as the state's definition of high-risk, i.e., 4+ ACEs, please indicate that here.)

<p>For pediatrics</p> <p>Please ensure the pediatric positive screening result definition described in the Site Information tab matches the PowerPoint workflow diagram.</p>	<p>For adults</p> <p>Please ensure the adult positive screening result definition described in the Site Information tab matches the PowerPoint workflow diagram.</p>
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Image of the Site Information tab.

We will review the other tabs in Excel.

- **Site information:** asks about the site's population eligible to receive ACEs screenings and follow-up during the initiative
- **Providers tab:** includes Measure 1
- **Screening tabs:** include Measures 2 & 3 by race and ethnicity
 - One tab each for pediatrics and adults
- **Response tabs:** include Measure 4
 - One tab each for pediatrics and adults
- **Definitions tab:** *new* for Q4

Clinic: Organization name, Clinic name



Workflow for: Pediatrics – Children under 18 or Adults – 18+ (delete one)

Eligible population

Please describe this site's eligible population to receive ACEs screening, e.g., ages of eligible children, types of visits (well-child, acute, etc.), number of providers participating. Include the date this site began screening the eligible population.


Tool

Which tool is this site using to screen for ACEs? Please indicate whether the tool identifies or de-identifies the ACEs.


Training

Please describe how the care team has been trained to introduce screening to patients.


Introducing the screening and interacting with patients

 **Who introduces the screening**

Please indicate who will introduce the tool to the patient/caregiver, e.g., front office, MA, CHW, etc. Describe how this person will interact and create connection with the patient/caregiver.


 **How tool is administered**

Please describe how the tool will be administered, e.g., caregiver will complete on paper, member of the care team will administer verbally, etc.

 **Who discusses the score**


Please indicate who speaks with the patient/caregiver about the completed ACE tool, e.g., CHW, provider, etc. Describe how this person will interact with the patient/caregiver.

Screening result


 **Result that warrants follow-up**

Please describe this site's definition of a positive screen warranting follow up/referral, including the number of ACEs, symptomology, etc.

Supporting patients' healing

 **Who offers response**

Please indicate who offers appropriate responses to patients/caregivers when there is a positive screen, e.g., CHW, provider, etc. Describe how this person will interact with the patient/caregiver.

 **Most common types of referrals made**

Please list the most common types of referrals made in response to a positive screen, e.g., mental health support, parenting classes, etc.

Who documents screening

Please indicate who documents the screening result and where they document it, e.g., in the EHR, in a spreadsheet, on paper, etc.

Who documents response

Please indicate who documents the response/referral result and where they document it, e.g., in the EHR, in a spreadsheet, on paper, etc.



Q&A

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