



Charter for Improvement: Instructions and Goals Worksheet

July 2018-December 2019

CFI Instructions and Overview

Purpose. The Charter for Improvement (CFI) is intended to provide a roadmap for achieving your PHASE goals and objectives during each half of the 2017-2019 grant cycle. The CFI is a “contract” between your organization, Kaiser Permanente and the PHASE support team, and identifies what you hope to achieve, the work you’ll need to do and the technical assistance available to meet your goals. Your team’s completion of the CFI process is also part of your PHASE grant requirements and will help us monitor progress and harvest lessons learned from grantees. Following this guide, you will find a goals worksheet for your team to complete.

Structure. The CFI has three components: goals, improvement approaches, and harvesting lessons learned. Goals and improvement approaches are set at the beginning and mid-point of the grant cycle. Harvesting lessons occurs at the end of each grant year. Taken together as a living document, the CFI serves as a springboard for substantial improvements in care processes, population health, and your organization’s care transformation capabilities.

	1. PHASE Goals	2. Structured Improvement Approach	3. Harvesting Lessons Learned
Description	PHASE goals will draw upon your work in the first half of the 2017-2019 PHASE grant cycle, the initiative-wide goals, your Building Blocks of PHASE assessment, and your organization’s strategic plan.	To accelerate your progress, a structured approach will help you to achieve your improvement goals (for PHASE and beyond) in a systematic and sustainable way. ¹	Harvesting lessons learned is an essential component of continuous improvement. Lessons learned provide insight into effective population health management in PHASE and beyond.
Documentation	Document your PHASE goals in Section 1 of the CFI Goals Worksheet . Progress on your PHASE measures will be demonstrated in your quarterly data reports.	Document your high-leverage planned activities in Section 2 of the CFI Goals Worksheet . Document your PDSAs and use other tools like the CDS-QI worksheet or Lean A3 Template.	Document your reflections and lessons learned in your Year-End Reflection .
Deliverable	Complete the goals worksheet by July 2, 2018 . Report PHASE measures by the end of July, September, January, and April for the previous quarter.	Submit your improvement strategy in your goals worksheet and meet quarterly with the evaluation team to discuss your data and progress.	The Year-End Reflection will be due December 2018. A final project report will be due December 2019.

¹ See Appendix A for Key Improvement Questions and ways to approach improvement work.



PHASE Initiative-Wide Goals

Updated for the Second Half of the 2017 – 2019 Grant Cycle

Kaiser Permanente Northern California is investing in community health centers, consortia and public hospital and health systems in order to prevent heart attacks and strokes in patients served by the health care safety net. Significant progress has been made to enhance care processes supporting hypertension control in the first half of the PHASE grant cycle. Yet every grantee still has substantial opportunity to prevent additional heart attacks and strokes by bringing *more* patients with uncontrolled hypertension under control. All grantees are asked to continue their efforts to re-engineer care processes to improve their HTN control as indicated by two key metrics: BP Control in HTN Patients and BP control in DM Patients.

For the remaining 18 months of the current PHASE initiative, organizations are expected to express an achievable improvement goal that gets them closer to national benchmarks for excellence across all their sites, with the following considerations:

- Grantees only applying PHASE approaches in some of their sites should develop and implement plans to spread the PHASE capacity building and care process re-engineering activities across more – *if not all* – sites. The ultimate goal is that *all* patients managed by *all* care teams experience the same outstanding quality of hypertension care.
- Grantees should set a target control rate to achieve by the end of the grant (December 31, 2019). This target control rate should be realistic, achievable and take into account how much your rate has changed in response to improvement efforts so far, and how much additional HTN care process improvement you anticipate during the remaining grant period.
- In keeping with PHASE goal of supporting outstanding care and outcomes, we will continue to assess our performance measure impact using HEDIS 75th and 90th percentile benchmarks.

Supplemental Goal: Extending CV Risk Reduction by Attention to Other Measures

When assessing organizational capacity and improvement priorities, some grantees will determine they have the ability to address additional PHASE targets. In this circumstance, these organizations are encouraged to identify these targets and goals in the Charter for Improvement.

- Organizations planning to expand their PHASE improvement focus beyond HTN are welcome to choose any of the PHASE measures as areas for additional quality improvement work; however, because Kaiser Permanente's vision for improving health in the communities it serves focuses specifically on controlling HbA1c and eliminating tobacco use, these PHASE targets are particularly encouraged when aligned with local priorities.



PHASE Goals Worksheet Questions

Charter for Improvement

July 2018 - December 2019

A completed goals worksheet is due **July 2, 2018**

Instructions

This worksheet will help your team formalize and share what it hopes to accomplish through its July 2018 – December 2019 participation in PHASE and lay a strong foundation for success. These organization-specific PHASE goals will draw upon your work in the first half of the PHASE grant cycle, the initiative-wide goals, your assessment scores, and your organization’s strategic plan. Enter your responses to these questions in an online form [here](#) by 5pm July 2, 2018.

Section 1: Our 2018 PHASE Goals²

- 1. Big Win within Your Local Context:** What are the *current* deeper organizational imperatives or strategic initiatives that PHASE will help you address? How will your success in PHASE help your organization achieve these major strategic goals? See Appendix B for guidance on big wins.
- 2. PHASE BP Measures Targeted for Improvement:** What is the relative percent improvement you will aim to achieve by December 2019? Your baseline performance is your Q1 2018 data.

Blood Pressure Measures	Goal % Improvement	Baseline	Performance end of December 2019
HTN controlled blood pressure			
DM controlled blood pressure			

- 3. Other PHASE Measures Targeted for Improvement (as applicable):** *If* you will be adding one or more secondary goals, what is the relative percent improvement you will aim to achieve by December 2019?

² We recommend referencing the following documents to help determine your goals: PHASE Building Blocks Assessment, your 2017 Year End Reflection, your PHASE Grant Application, your organization’s strategic plan.



Clinical quality	Goal % Improvement	Baseline	Performance end of December 2019
DM controlled A1c			
Tobacco			
BMI			
Depression			
Diabetes statin			
Diabetes ACE/ARB			
Diabetes statin and ACE/ARB			
HTN antihypertensive			

- 4. Spread and Reducing Variation Across Sites:** Are PHASE capacity building and care process re-engineering activities reaching all your sites? If not, please comment on how they will be more widely applied so that more—if not all—of your patients and care teams benefit from PHASE.

Section 2: Improvement Approach

- 1. Strategies:** Resources like the [Hypertension Control Change Package](#) (HCCP) lists strategies and tools that can improve hypertension control and other targets. Consider these changes – specifically those outlined in HCCP Tables 1, 2, and 3 - to identify the top three to four strategies that you will implement over the next 18 months. Typically, at least one change in each of the three tables is needed to significantly improve performance measure-related care processes and outcomes.

Improvement Strategies	Describe your implementation and evaluation approach to this change

- 2.** Which building blocks of PHASE need to be strengthened for you to be successful, and how can the support team help you do that? See Appendix C for more information on capability building support.



Section 3: Core PHASE Team

1. Who is on your core PHASE Team?

PHASE Role	Name	Title	Email
PHASE Team Lead & Point of Contact			
Clinical Champion			
Other team members			



Appendix

Appendix A: Structured Improvement Approach

3 Key Improvement Questions³:

- 1) What are our current processes that are producing suboptimal results for our target/objective(s)?
- 2) What do these processes look like in organizations that are performing very well on the target/objective(s)?
- 3) What steps can we take to close the gap between our current state and one that will produce better results for all stakeholders?

Structured Approach to Guide Your Improvement Work. There are many ways to approach improvement work. Examples include Lean, Six Sigma, and the Institute for Healthcare Improvement's Model for Improvement. Many PHASE Grantees use HRSA's [Guide to Improving Care Processes and Outcomes](#) that has helped health centers address these questions.

The [CDS/QI Worksheets](#) contained in the Guide help organizations to document, analyze, share and improve pertinent target-focused information flow and workflow.⁴

The [CDS 5 Rights framework](#) is a key resource for this process re-engineering; it asserts that to improve a care process or outcome you have to get the right information to the right people through the right channels in the right formats at the right times.

The *Guide* and CDS/QI Worksheets can enhance other QI methodologies (e.g., LEAN, 6 Sigma, Model for Improvement) and/or tools that your organization has adopted (e.g., A3, IHI PDSA tools).

³ See '[Guide to Improving Care Processes and Outcomes](#)' for more details. For consortia – consider how you'll help your member clinics answer these questions.

⁴ An introductory webinar on the *Guide* and CDS/QI worksheet can be found [here](#).



Appendix B: Big Wins within Your Local Context



Big wins are the deeper organizational imperatives or strategic initiatives that PHASE will help you address. Aligning these will help sustain PHASE momentum and will amplify its benefits for your broader initiatives – and vice versa. Organizational imperative/strategic initiative examples include: meeting P4P Medi-Cal Managed Care contract targets, participation in Public Hospital Redesign & Incentives in Medi-Cal (PRIME) program, leveraging an EHR transition to improve processes and procedures, building practice transformation capacity in anticipation of value-based payment, and achieving goals related to strengthening QI infrastructure.

Appendix C: Capacity Building Support

Assistance and support for meeting your capacity building goal(s) your goals for your selected measure(s) are available to all grantees. Training and TA usually falls into the buckets of the Building Blocks of PHASE and includes In Person Convenings, Wireside Chats, other webinars, coaching, and [Responsive Assistance](#). Available training and support are posted and regularly updated on the [PHASE support portal](#).

Building Blocks of PHASE

