

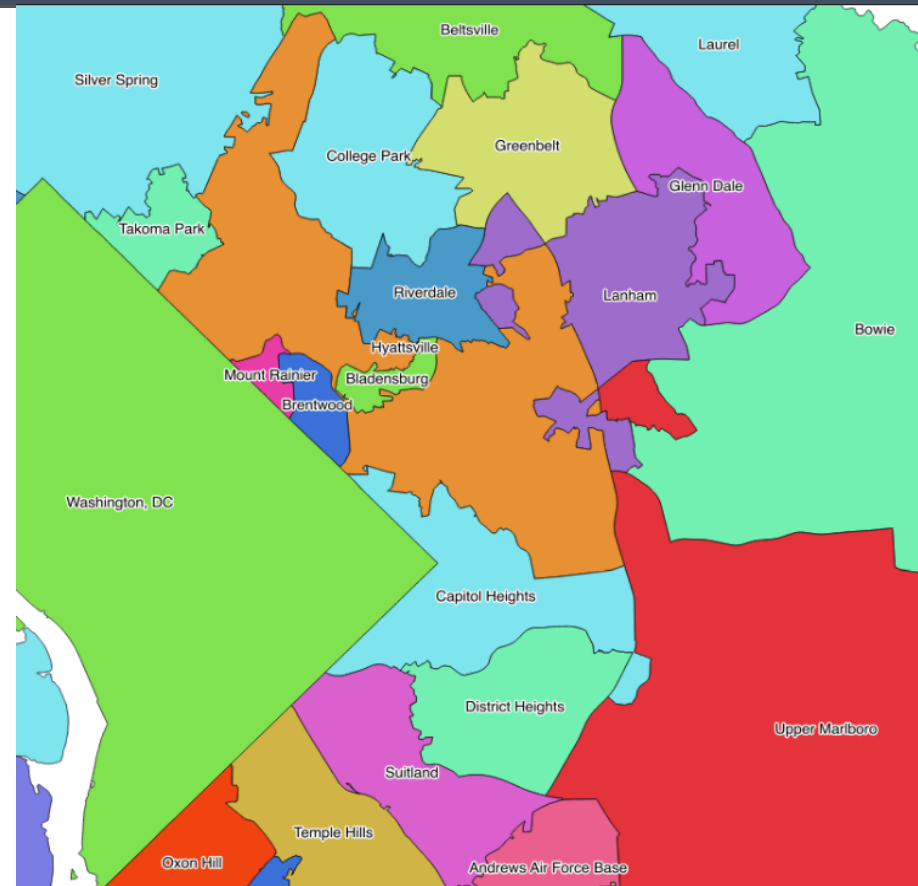
FUNDAMENTALS OF DATA GOVERNANCE: A WORKSHOP FOR HEALTH CENTERS

HELPING HANDS NEEDS HELP

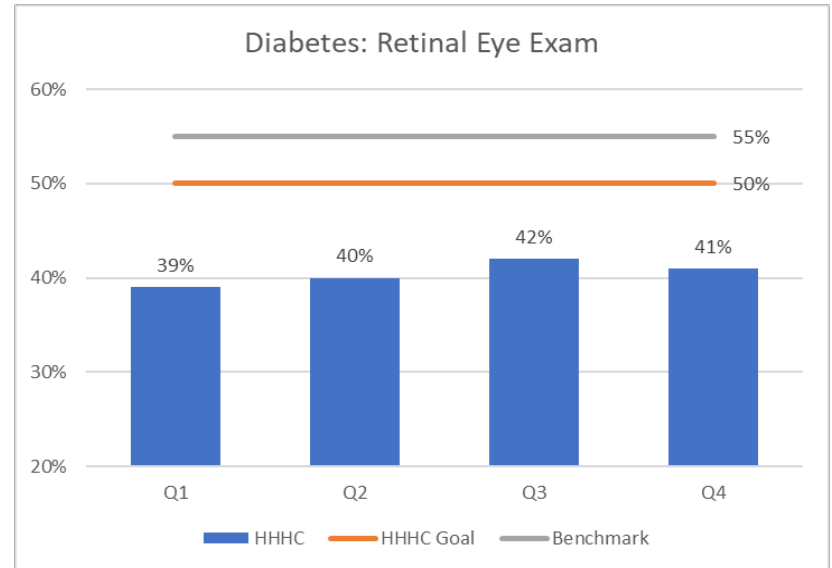
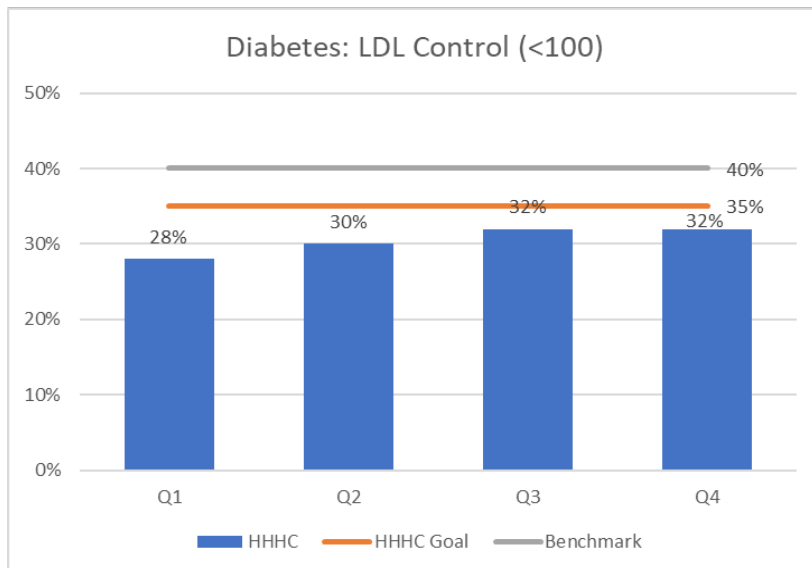
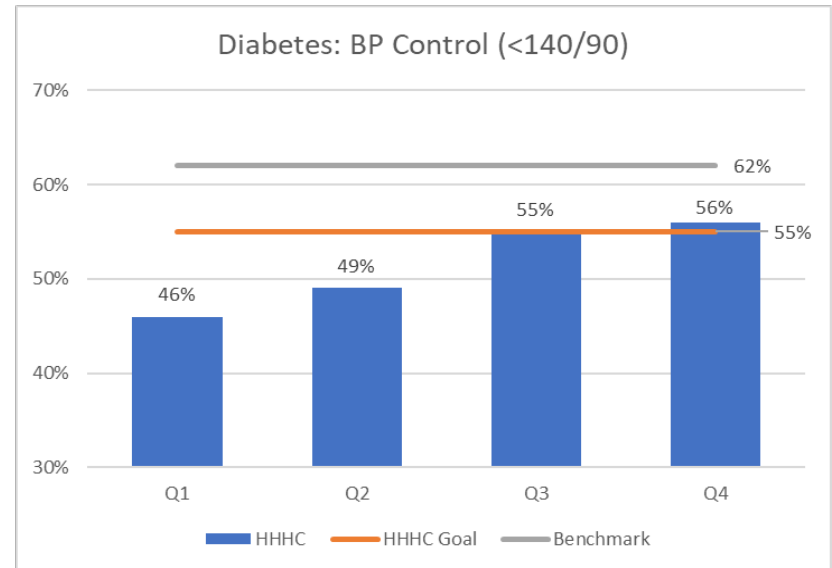
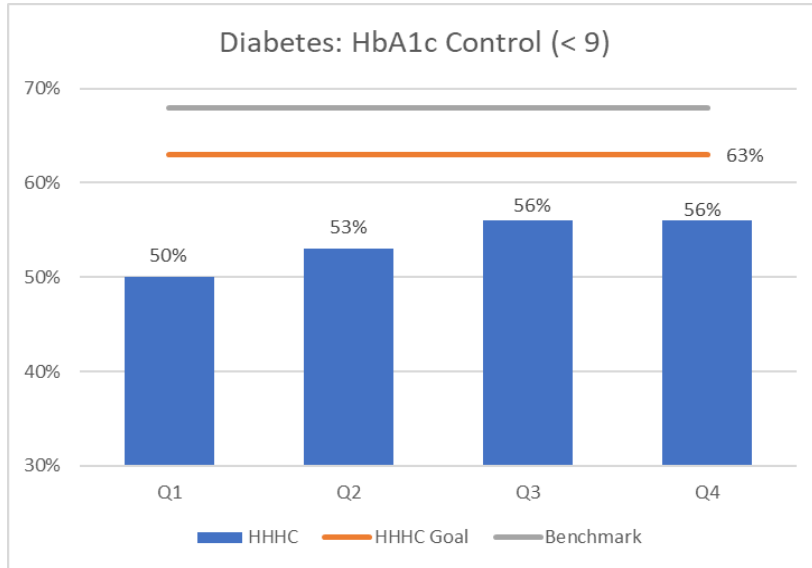
Data Governance in Action – A Case Study

SETTING THE STAGE: HELPING HANDS HEALTH CENTER (HHHC) OVERVIEW

- 20,000 patients served a year (medical, dental, behavioral health)
- 90,012 visits
- 203 staff total (35 medical and behavioral health providers)
- PCMH Level II Recognition
- 1/3 of patients are hypertensive, 1/4 are diabetic



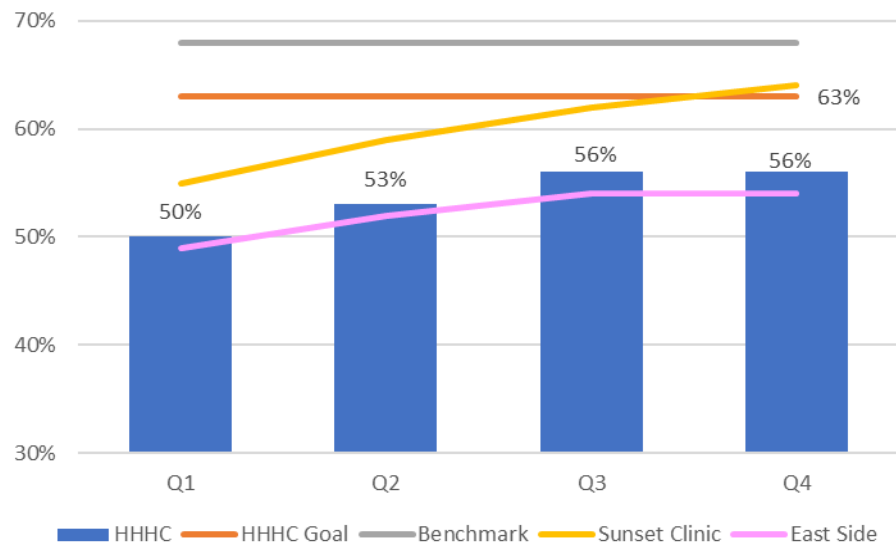
HHHC DASHBOARD



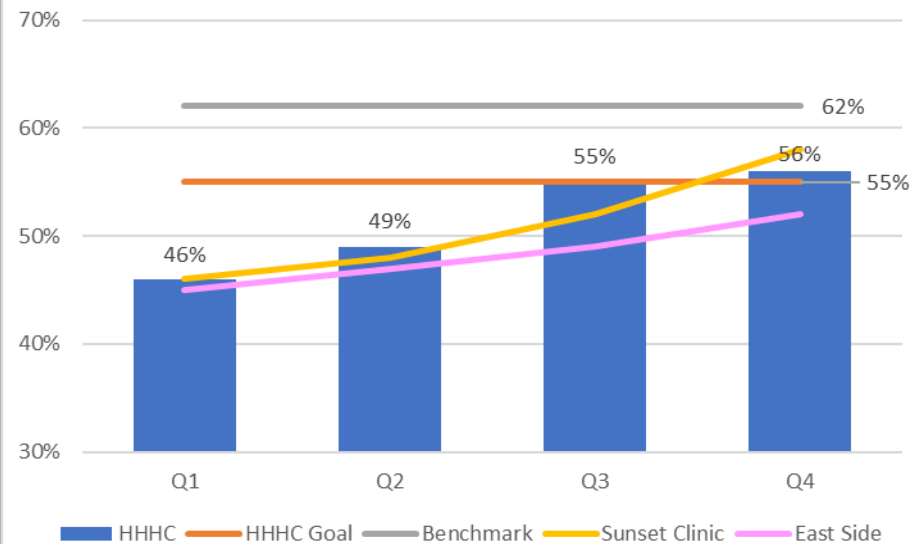
SENIOR LEADERSHIP DASHBOARD

Key Measures

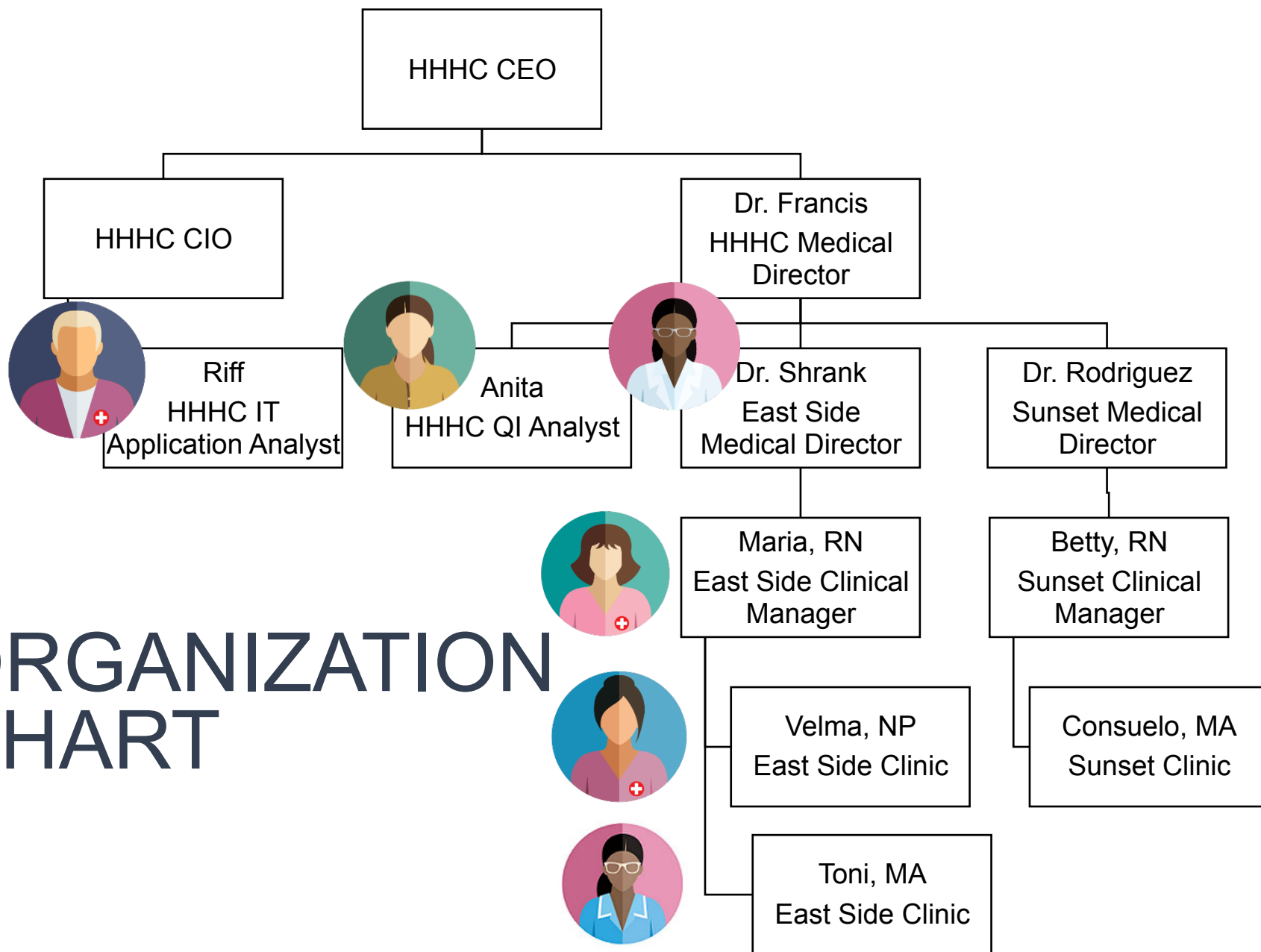
Diabetes: HbA1c Control (< 9)



Diabetes: BP Control (<140/90)



ORGANIZATION CHART





Maria
RN, Site Manager
East Side Clinic

Maria, a Registered Nurse, was just hired at Helping Hands but came from another community health center where she was very active on the quality improvement committee and helped open a new school based health site. Since coming to Helping Hands, she has brought fresh perspectives and good ideas from her previous health center. On the weekend, she teaches kids how to salsa dance.



Riff
IT Specialist
Helping Hands
Health Center

Riff used to work at a small hospital and has been the “IT Guy” at Helping Hands for four years. He really enjoys the variety of information technology challenges at the health center but, recently, he has felt overwhelmed by everything he has on his plate and is growing a little weary of it all. An avid National’s fan, his most prized possession is a baseball autographed by Ryan Zimmerman.



Toni
Medical Assistant
East Side Clinic

Toni is a medical assistant and works mostly with Dr. Shrank. She was recently promoted from lab tech and really pays attention to documentation in the EHR. She has good rapport with patients and keeps them laughing while sticking them with a needle. Toni’s family owns a popular pupuseria, and she loves spending time at the restaurant with her family on the weekends.



Anita
QI Analyst
Helping Hands
Health Center

Anita graduated with an MPH over a year ago has been with Helping Hands Health Center ever since. She is a whiz at reporting and data analysis. With all the regulatory reporting she has to do it doesn’t leave much time for data analysis, which is actually what she enjoys most about her role. She is based at East Side, the largest site, but supports all Helping Hands sites. For relaxation, Anita solves Sudoku and crossword puzzles.



Velma
Nurse Practitioner
East Side Clinic

Velma, a Nurse Practitioner provider, has been with the organization for over five years and really loves her patients. She is always trying to find ways to improve care and actively uses the EHR and other tools for Population Health Management. She loves data and sees it as essential piece in managing the care of her patients. Velma has a green belt in karate.



Dr. Shrank
Medical Director
East Side Clinic

Dr. Shrank, an Internal Medicine physician, came from one of the top medical schools in the area. She has worked on many community health initiatives in the region (and is sometimes over-committed) and is passionate about providing access to care for underserved populations. In her limited spare time she can be found running or biking along the Anacostia River.

CHAPTER 1: HELPING HANDS NEED HELP



ANITA

Helping Hands Health
Center QI Analyst



Riff and Maria, thank you for attending the meeting today. Dr. Shrank couldn't be here today so she asked me to update you all on the Clinical Quality Leadership meeting that we attended last week. As you know, our system focus has been to improve our diabetes measures. The good news is that all sites have made great strides in BP control. However, the same is not true for Hemoglobin A1c: only one site, Sunset, met the target.

Of our other sites, East Side has the biggest opportunity for improvement. Granted, you're larger than the other sites and treat more diabetic patients. I know you have been working really hard on this but you are going to need to step it up. I did talk with Betty, the RN manager at Sunset, and she said she would be happy to help out in anyway she can.

MARIA

East Side Clinic RN
Site Manager



Anita, I hear what you are saying, but I think the data are wrong.

When I got Monday's worklist report, there were three patients on the list that had already had their HgA1c tested in the past month. And that was not the first time I have found issues with the data.

I tried working with IT on it but we just don't seem to make any progress on it. I don't get the sense that it's a priority for them. In the meantime, several teams have just stopped using the report.

Anita, I know you are frustrated, too.

ANITA

Helping Hands Health
Center QI Analyst



Wow, I had no idea that the reports were that inaccurate and that some teams had stopped using them. I wonder why Dr. Shrank hadn't shared that with me? Sure wish she was at the meeting today.

I've been working with Sunset on their A1c control reports as well. I wonder if they ever run into the same issue?

I'll check in with Betty on this too. I know she has a few people at Sunset who really know the data well.

RIFF

Helping Hands Health
Center Application
Analyst



I remember this issue coming up. We did try to clean up the reports but we found so many data entry issues that there wasn't much we could do. I wasn't sure where to turn for direction or who had the final say about it.

It really is a data entry workflow problem and, until that is fixed, our hands are tied.

Besides, you have to remember—it's just me and one other tech taking all these requests. We can try to take another look after the EHR upgrade. That's our biggest priority now.

CHAPTER 1

PROMPTS

1. What are the issues and do any of them signal a need for data governance?
2. Are all the right stakeholders involved in the meeting?





HOW TO GET STARTED: DATA GOVERNANCE & THE ROLES IN DATA GOVERNANCE

1. What are the key roles of data governance?
2. What are the key skills for an effective data steward?
3. In what ways does a data steward help an organization achieve the Triple Aim of Data Governance?

WHAT HAPPENED NEXT?




Maria, feeling a little frustrated, called Betty, the Sunset Clinic Manager, to learn more about what made the difference for them.

Betty shared how Dr. Rodriguez, their Medical Director, helped them stay focused and worked to get the team the resources they needed to resolve issues. She also shared that she often gave presentations at clinic meetings so that end users understand the numerator and denominator of important metrics and where the data were coming.

Betty explained that because this data work became time-consuming, she needed to delegate much of it to Consuelo, an MA in the clinic. Who had been part of the EHR implementation squad. The data work proved to be so valuable that Dr. Rodriguez and Betty decided to allocate a few hours every week for Consuelo to work on data quality issues, data analysis and answering questions from the care teams.

Betty offered Consuelo's help to the East Side clinic.

CHAPTER 2: SUNSET CLINIC GIVES EAST SIDE A HAND



ANITA

Helping Hands Health
Center QI Analyst



Maria, I understand you reached out to Betty over at Sunset and that Consuelo has spent some time orienting Toni and Velma to the tools and processes she uses to identify data issues. I'm sorry I couldn't make that meeting but from what I'm hearing it sounds like you are really making progress.

Maybe you could give us a snapshot about what's been going on?

MARIA

East Side Clinic RN
Site Manager



That's right, it's been a rewarding and eye-opening experience so far. Consuelo showed us a data quality checklist and reports she uses to identify data issues like inaccurate or missing clinical data (such as undiagnosed patients, ICD or problem codes, and lab results) and inaccurate or missing demographic data (such as missing gender, age out of range or incomplete phone numbers).

By the way, were you able to follow up our discovery about the broken interface and how long it's been since the HgA1c values from Qworst Lab had not been updating the diabetes flow sheet?

ANITA

Helping Hands Health
Center QI Analyst



Yes, I was just going to up date you and the team. I put in a ticket to IT but in the meantime, I did a little research and adjusted your reports. This fix resulted in 74 patients coming off the overdue list!

Maria, because of your leadership and because of Toni and Velma's hard work, I can see that the care teams have started to use the reports again. The teams are so excited about the reports they are now asking for provider specific reports.

Unfortunately, I am not able to help because I have a grant report due and then it will be time for UDS reporting.

Riff, would you help?

RIFF

Helping Hands Health
Center Application
Analyst



I really wish that I could, but the EHR upgrade is all consuming.

Plus, I've got another bunch of reports waiting for me when that's done: there's the birthday card list for human resources that they asked me for months ago, the appointment reminder list for the care coordinators, and a bunch of reports for that research study we got some grant for.

The provider specific reports are going to need to wait until I get these other reports in the queue completed.

TONI

Medical Assistant
East Side Clinic
Care Team



I wish it wasn't so difficult to get useful reports out of the system. The teams are getting frustrated that they are expected to make improvements but don't know where to focus.

And some of the reports that they do get are hard to understand. People are always coming to me asking about how the measures get calculated and what they mean.

It's exciting to see people get more engaged but, man, it's starting to eat up a lot of my time. After all, I still have to see patients and we're starting to implement group visits for diabetes education, too.

The more I get into this the more I'm having a hard time seeing how I can do both.

VELMA

Nurse Practitioner,
East Side Clinic
Care Team



I have to agree with Toni on all points.

We are also working on empanelment and are recognizing the need for data quality reports. It would really help to have cleaner patient totals before we start working on balancing patient loads across the providers.

The provider level outcomes reports will be good but I think we should make sure patient attribution is cleaned up first. If the patient totals look wrong, we'll never get them to buy into using this data for improvement.

How are all the reporting and data needs being managed and prioritized? Has anyone asked Dr. Shrank what we should do? There is so much going on!

CHAPTER 2

PROMPTS



1. What roles do you see emerging?
2. What issues/challenges are emerging roles facing?
3. What new processes do you see emerging?

WHAT HAPPENED NEXT?

Velma Updates Her Fellow Providers

During the monthly provider meeting, Velma gave a brief overview of the data quality work she and the others were doing. Dr. Shrank was in attendance and Velma used the opportunity to request a meeting.

Later that week, Velma and Toni met with Dr. Shrank and asked about having time allocated to their data role. Because of the initial success and improvement they demonstrated, she was willing to listen. Dr. Shrank asked for more detail on exactly what they were doing and how much time it took.

They had come prepared. They gave Dr. Shrank the details of their work along with a role description. They also suggested she reach out to Dr. Rodriguez to learn how Sunset Clinic approached the data steward role.

WHAT HAPPENED NEXT?


Maria and Anita, unable to resolve the resource constraints and prioritization challenges on their own, meet with Dr. Shrank and asked that she take a more visible and active role in helping East Side.

Maria and Anita ask for
Executive Support

Specifically, they asked that she would attend the team meetings, advocate for more resources and help with the prioritization of clinical reports needed within and across clinics.

CHAPTER 3:

DR. SHRANK IS IN THE HOUSE, LET'S GIVE HER A HAND



ANITA

Helping Hands Health
Center QI Analyst



I want to start today by welcoming Dr. Shrank to the team. We are so happy you are here.

Toni, would you give us an update on what's been going on in your data clean up efforts? What have you been noticing?

TONI

Medical Assistant
East Side Clinic
Care Team



We have made a lot of progress in cleaning up our data and we found 43 more diabetic patients that didn't have the diagnosis code. We added them to our registry.

This past week has been difficult though because our patient volumes have been higher than usual and I just haven't been able to make the calls to get them in.

It's great having more confidence in the data but it takes time.

DR. SHRANK

East Side Clinic
Medical Director



I want to thank you for your work on getting accurate data about our diabetic patients. A handful of the patients you identified are my patients. I wasn't expecting this, but data quality is impacting my ability to care for patients and they're falling through the cracks. When I spoke with Dr. Rodriguez at East Side, their site found the similar issues. I'm beginning to understand how challenging this work is.

And it's not just patient care that is being compromised. Dr. Francis, our CMO, reported that HHHC had received only \$20,000 out of a possible \$100,000 in incentives from Wellness For All (WFA) health plan, one of the largest that HHHC provides care for, this past year. We've missed out on diabetes quality care incentives.

RIFF

Helping Hands Health
Center Application
Analyst



With the EHR upgrade complete, we should have more time to work on the provider specific reports for diabetes measures. But there are so many other data and reporting requests that have been in the queue for longer—I really wish I could stop saying “yes” to everything.

There are over 50 requests from individuals and departments across HHHC and everyone feels like their report is the most important.

I can only do so much with the staffing and resources I have.

MARIA

RN, East Side
Clinical Manager



I couldn't agree more, Riff. I imagine you don't have the resources to work on all of those requests, so it must be difficult trying to meet everyone's needs.

Maybe we could get the people with the most requests together and have them help you figure this out. If we can't reach agreement among us, maybe Dr. Shrank could take this to the leadership team to weigh in?

DR. SHRANK

East Side Clinic
Medical Director



I think that's a great idea, Maria. I'd like to propose that we also assess how the reports and data will help us improve incentive payments and gain sharing.

We're leaving money on the table with our health plans, money that could be used to hire more patient care staff and help to free up your time for the data work that's proving to be so valuable.

CHAPTER 3 PROMPTS



1. What are the implications for East Side and all of Helping Hands Health Center now that there is a need and desire to set priorities?
2. With the reality of resource constraints, what data governance process could East Side Clinic implement to move from a reactive to a proactive approach of data management?
3. What are the implications for East Side and Helping Hands Health Center now that there is a need and desire to set priorities?