



LOS ANGELES LGBT CENTER

POPULATION HEALTH LEARNING NETWORK: YEAR 2

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PROJECT AIM

Restructure the focus of the team model from case management to a clinical team model that addresses patient care needs such as preventative and chronic care management as evidenced by improved outcomes in rates of colorectal cancer screening.



MEASURES FOR SUCCESS

Los Angeles LGBT Center will improve the health of our community by increasing the number of patients aged 50 to 75 years who are screened for colorectal cancer from 42% [703 patients] to 75% [1872 patients] by February 01, 2020.



TESTED CHANGES

- Post - FIT Kit reminders via text message
- Daily huddles
- Huddle tool
- Daily, weekly, and monthly missed opportunities report
- In visit – FIT Kit with mail-in option
- Direct mail - FIT Kit outreach without an upcoming visit
- Live follow-up call 1 week after receiving FIT Kit

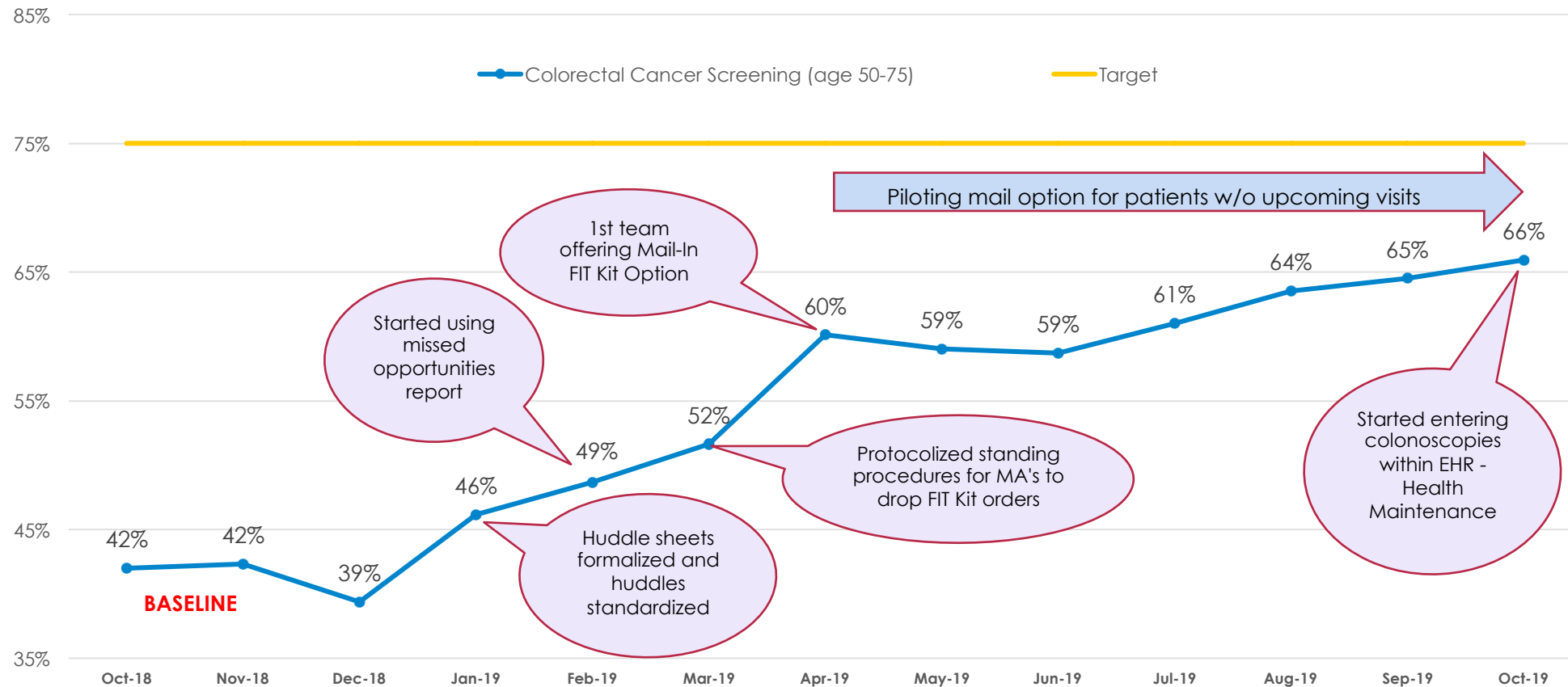


IMPLEMENTED CHANGES

- Pre-visit chart prep (huddle tool)
- Care Team daily huddles
- Daily missed opportunity report
- MA FIT Kit standing orders
- FIT Kit patient mail-in option
- Daily and weekly data sharing
- Process Improvement Change Letters (PICL)



USING DATA FOR IMPROVEMENT



THE M-A TEAM



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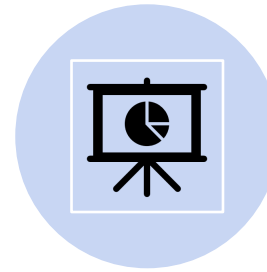
STRATEGIES FOR SUCCESS



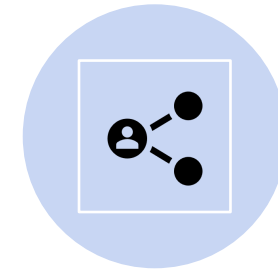
BUY-IN



INCREMENTAL
CHANGES



DATA SHARING



ADOPTING BEST
PRACTICES
FROM PARTNER
CLINICS



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Care Team Flowchart	Core Clinic Care Team				Specialty Referrals	>>> Staff Limited to HIV Status	Case Management				Important Phone Numbers				
	Provider License# NPI #	MA	LVN Care Coord.	RN Nursing Coordinator (Triage)	Send EHR pt message only		MCM (RN)	PCM (MSW)	Case Manager (LVN)	Retention	SECURITY:				
	Medical Appointments	Daily Clinical needs with PCP, Appt prep and mgmt. Vaccines. Imaging Referrals.	Point Person for PCP Referral f/u; Pre-Op; Clinical/Case Mgmt Liaison	Urgent Clinical Questions Triage / STI Queue & follow up. Calls from outside Drs and Hospitals	Specialty Care Referrals; Referral extensions; change of specialty provider. NO IMAGING.		Chronic Disease & Population Disease Mgmt; LTC/RIC/TIC Appt; Hosp. f/u; Inj. Teaching	Psychosocial needs; Housing/transportation; Gender & Name Change letters; Social Services	HIV+ (IMCC) Only Referral f/u, Dx forms, SSI/SSDI & Disability Forms Initiate Historical Records Request	HIV+ (IMCC) Only Retention for established Pts who have been lost to care = 6+ months with no labs or PCP visits	Main	Main Phone: 323.993.7500, Option 3 = Call Center			
Red	Provider	Medical Assistant	LVN Care Coordinator		1 Specialty Referral Coordinator	HIV	1 RN Case Manager covers 2 teams	1 MSW or LCSW Per Team	1 LVN Case Mgr	1 Retention Coordinator		Fax	Main Fax: 323.308.4449 Hx Records Fax: 323.308.4400 Referral Consult Fax: 323.308.4499		
	Provider	Medical Assistant				PC	2 RN's for all Teams				1 MSW or LCSW Per Team		See LVN Care Coord. Or RN/MSW	1 Retention Coordinator	
Orange	Provider	Medical Assistant	LVN Care Coordinator		1 Specialty Referral Coordinator	HIV	1 RN Case Manager covers 2 teams	1 MSW or LCSW Per Team	1 LVN Case Mgr	1 Retention Coordinator	Front Office	~Warm Transfer Only~ Offsite Call Center - Internal ext: Supervisor: 3rd Flr Front Desk: Group ext: Manager: Supervisors:			
	Provider	Medical Assistant				PC	2 RN's for all Teams					1 MSW or LCSW Per Team	See LVN Care Coord. Or RN/MSW	1 Retention Coordinator	
Yellow	Provider	Medical Assistant	LVN Care Coordinator		1 Specialty Referral Coordinator	HIV	1 RN Case Manager covers 2 teams	1 MSW or LCSW Per Team	1 LVN Case Mgr	1 Retention Coordinator	H. Service	Pharmacy Pt line: PCP line:	Medical Records Dept Ext.	Lab Ext.	Mental Health Internal only:
	Provider	Medical Assistant				PC	2 RN's for all Teams					1 MSW or LCSW Per Team	See LVN Care Coord. Or RN/MSW	1 Retention Coordinator	
Green	Provider	Medical Assistant	LVN Care Coordinator		1 Specialty Referral Coordinator	HIV	1 RN Case Manager covers 2 teams	1 MSW or LCSW Per Team	1 LVN Case Mgr	1 Retention Coordinator	Miscel	Legal Services:		Help Desk: HIS: IT:	
	Provider	Medical				PC	2 RN's for all Teams					1 MSW or LCSW Per Team	See LVN Care Coord. Or RN/MSW	1 Retention Coordinator	
						HIV	1 RN Case Manager covers 2 teams	1 MSW or LCSW Per Team	1 LVN Case Mgr	1 Retention Coordinator	Personal	My Ext: _____; My Fax: _____ My Supervisor: _____ Other: _____			

KEY TOOLS & RESOURCES

- Team restructure and interdepartmental collaboration
- Daily huddles



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9:15 AM	JARAMILLO, ELIZABETH		English	White	HALL, M JASON
	Reason: STI tx rw ok Hall Accom Last Visit DR: HALL, M JASON Outstanding Referrals: 3				
	Weight Change (6 Mo.): Last BP: 113/76 (2/11/19)				
	Last Colon Cancer Screening: Smoker: No				
	Protocols: Birth Sex: MALE, Identifies As: Male, Pronoun: He/Him, Due: COLON CANCER, Due: HIV MENINGITIS				
9:45 AM	JARAMILLO, ELIZABETH		English	White	JARAMILLO, ELIZABETH
	Reason: having trouble focusing-mcal ok kb Last Visit DR: CAMPBELL, OLIVIA Outstanding Referrals: 5 bump r/s				
	Weight Change (6 Mo.): 1 lbs. Last BP: 136/81 (10/18/19)				
	Smoker: Yes				
	Protocols: Birth Sex: MALE, Identifies As: Male, Pronoun: He/Him				

KEY TOOLS & RESOURCES

- i2i Huddle Tool and Missed Opportunities Report
- Data Sharing Boards



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Process Improvement Change Letter (PICL): **Insert Name of the project or pilot**

Communication Campaign Start Date:

Communication Campaign End Date:

Implementation Date:

Purpose:

Goal:

Locations:

Staff Responsible:

Process:

1. Summarize process steps

Role of the Medical Assistant:

- 1.

Role of the Providers:


- 1.

Role of the LVN Care Coordinator:

- 1.

Role of the Supervisors and Managers:

- 1.

 LOS ANGELES LGBT CENTER		Health Services Weekly Operational Dashboard						
		November	11/3 - 11/09	10/27 - 11/2	10/20-10/26	10/13 - 10/19	10/06 - 10/12	Octol
Measures	Colorectal CA Screening	>75%	68%	61%	63%	69%	61%	>75
	CRS Completed/FITs given	>90%	88%	77%	81%	74%	81%	>90
	Flu Vaccines Completed		47%	46%	44%	43%	40%	
	Flu Vaccines Completed + Declinations		90%	87%	85%	83%	78%	

KEY TOOLS & RESOURCES

- Bi-Weekly Health Services Operations Data Review Meeting
- Process Improvement Change Letter (PICL)



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CURRENT CHALLENGES/BARRIERS

- Data that cannot be queried
- Staff Onboarding and Training

Encounters: By Type, Newest to Oldest, (You are c

Explore | Flow Sheets (0) | Load All Enc

- Encounters
 - Messages
 - Patient Message
 - Refill
 - Web Message
 - Chart Attachments
 - Scanned Documents
 - Case Management - MCC
 - Consults
 - 9/13/2018: Consults - ortho consult DOS: 5/18/2017 (CYNTHIA HARRISON, FNP)
 - 9/13/2018: Consults - GI consult DOS: 6/08/2017 (CYNTHIA HARRISON, FNP)
 - 9/13/2018: Consults - Ortho. Consult note DOS: 3/29/18 (CYNTHIA HARRISON, FNP)
 - 1/10/2018: Consults - colonoscopy (CYNTHIA HARRISON, FNP)

- HEALTH MAINTENANCE
 - Colonoscopy [3/6/2019]: Per consult notes: Findings: 1 cm polyp in the trans
 - HIV first postive test (year) [10/8/2018]
- OTHER PAST HISTORY
 - HIV DISEASE (042 | B20) (New dx, Genotype no specific mutation. Taking and
 - ENCOUNTER FOR IMMUNIZATION/ INJECTION/ VACCINATION (V03.89 | Z23
 - TOBACCO NON-USER (V49.89 | Z78.9)
 - INFLUENZA vaccination declined (V64.06 | Z28.21)

History

Knowledge Term: Colonoscopy Date: 3/6/2019 (8 months ago)

Renamed as: Status: Active

☐ Promoted ☐ Barrier to Health Significance: *

Details

Include | Add to Comments | Show Test Terms

Health Maintenance Details

- Normal
- Abnormal
- Unknown
- Refused

Attributes

Remove | Clear

Comments

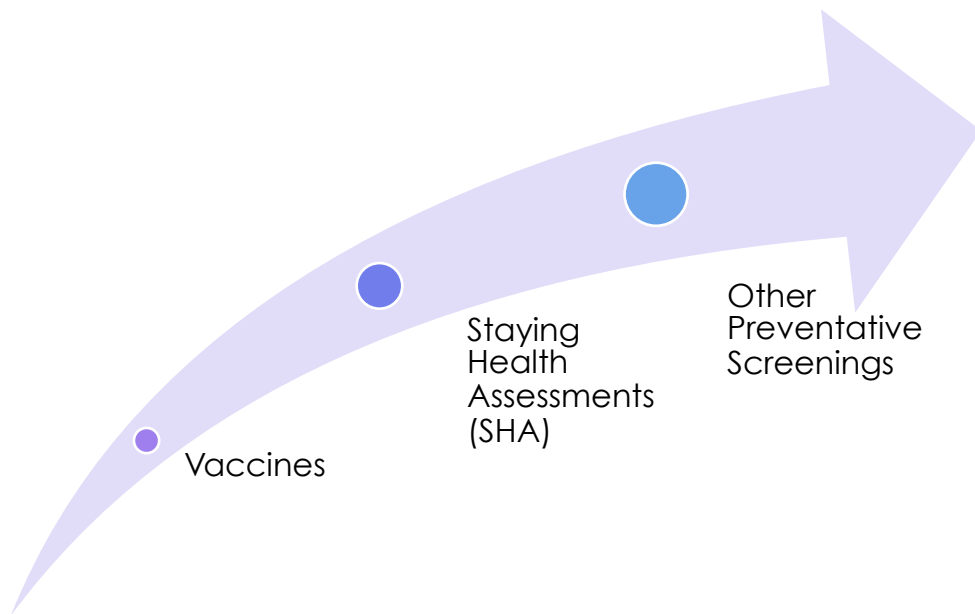
Per consult notes: Findings: 1 cm polyp in the transverse colon, otherwise normal, hemorrhoids. Recommendations: Await biopsy results, Sitz bath as needed, repeat exam in 5 years for colonoscopy.

Restricted Disclosure: OK Cancel



NEXT STEPS

Spreading



Sustaining

