NATIVE AMERICAN HEALTH CENTER
Serving the community since 1972

Native American Health Center, Inc.

PHLN Year 2 Project Aim

Within 12 months, to optimize team based care by redefining roles and reshaping scopes of work for 100% of our support staff (i.e., RNs, Clinical Care Assistants, and Referral Coordinators).

Measures for Success

1. Add Clinical Care Assistants (CCAs) to each team.
   - Improved HEDIS measures
2. Add Referral Coordinators to each team.
   - Decreased outstanding referrals
3. Add Registered Nurses (RNs) to each team.

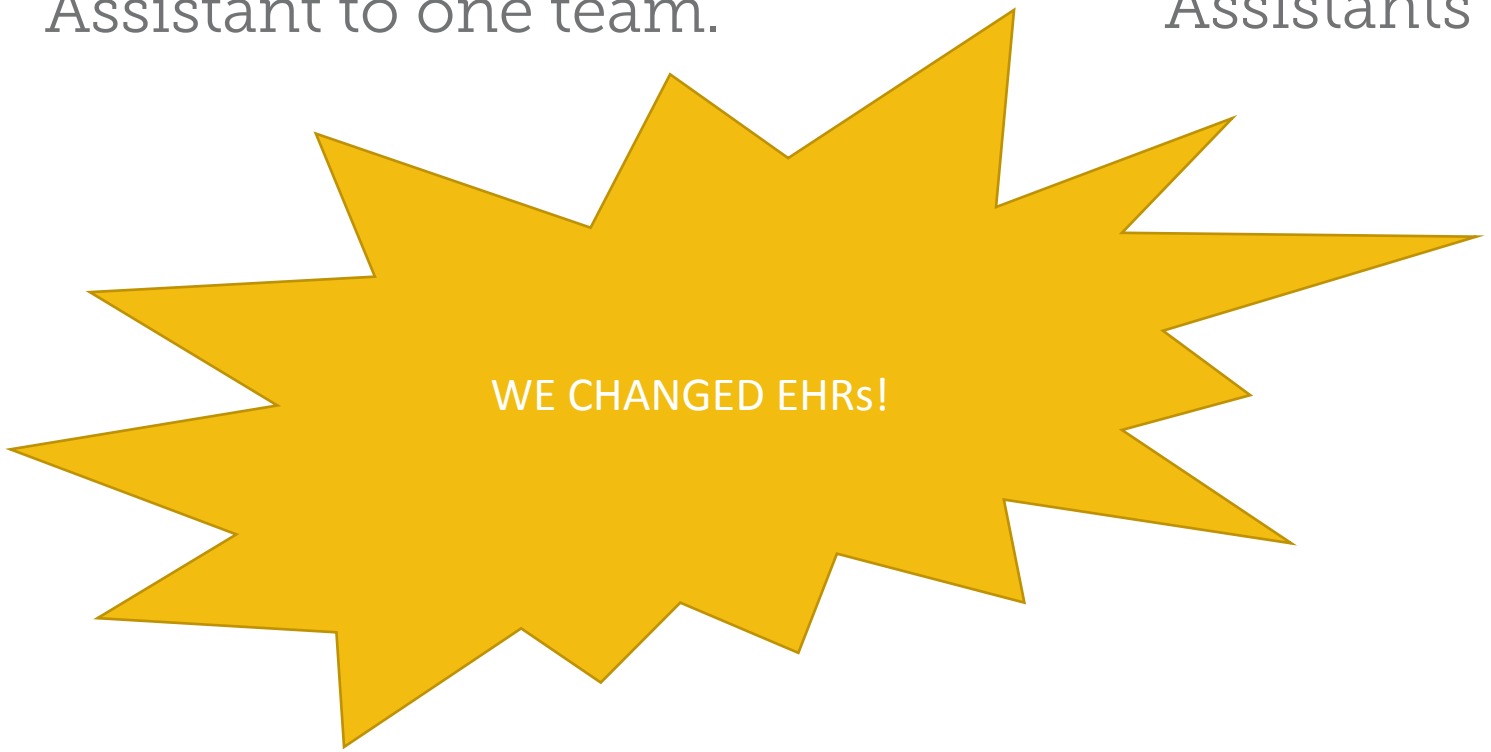
Changes

Tested Changes

- Added one Clinical Care Assistant to one team.

Implemented Changes

- Added both Clinical Care Assistants to each team.



Using Data for Improvement

PROMPT: What data have you collected and what decisions or further changes have you made as a result? *Examples of data to include are pictures of your run charts, quotes from staff and patients, other data visualization.*

- Number of Outstanding (unprocessed) referrals
- HEDIS Measures
  - Colorectal Cancer Screenings
  - Cervical Cancer Screenings
  - Breast Cancer Screenings
  - Retinal Exams for Diabetic Members

Population Health Learning Network (PHLN) Year 2
Native American Health Center, Inc. Project Measures

Key Activity/Milestones	Mar-19	Apr-19	####	Jun-19	Jul-19	Aug-19
Add a Clinical Care Assistant(CCA) to the two Teams by 7/8/19	IP	IP	IP	IP	C	
Add Referral Coordinators to the two Teams by 8/30/19	NS	NS	NS	NS	NS	NS
Add Registered Nurse (RN) to the two Teams by 9/30/19	NS	NS	NS	NS	NS	NS
Develop/refine workflows through PDSAs for care team (e.g., H	NS	NS	NS	IP	IP	IP

Key Activity/Milestone KEY: NS=Not started, IP=In process, C=Complete

	NS	IP	C

Referral Tracking	Mar-19	Apr-19	####	Jun-19	Jul-19	Aug-19
# Outstanding Referrals	35	16	73			
Target	**20**	**20**	**20**	**20**	**20**	**20**
Numerator	35	16	73			
Denominator (6-month look back)	1,259	1,492	1,243			
% Ordered Referrals Unprocessed (i.e.,	**3%**	**1%**	**6%**	**#N/A**	**#N/A**	**#N/A**
Target	**5%**	**5%**	**5%**	**5%**	**5%**	**5%**

HEDIS Tracking	Mar-19	Apr-19	####	Jun-19	Jul-19	Aug-19
Numerator	244	244	243	224		
Denominator	642	643	640	640		
Colorectal Cancer Screening	**38%**	**38%**	**38%**	**35%**	**#N/A**	**#N/A**
Target	**60%**	**60%**	**60%**	**60%**	**60%**	**60%**
Numerator	798	780	788	777		
Denominator	1267	1258	1250	1253		
Cervical Cancer Screening	**63%**	**62%**	**63%**	**62%**	**#N/A**	**#N/A**
Target	**60%**	**60%**	**60%**	**60%**	**60%**	**60%**
Numerator	127	134	154	157		
Denominator	276	280	327	328		
Breast Cancer Screening	**46%**	**48%**	**47%**	**48%**	**#N/A**	**#N/A**
Target	**60%**	**60%**	**60%**	**60%**	**60%**	**60%**
Numerator	79	82	84	81		
Denominator	291	292	290	289		
Retinal Exams for Diabetics	**27%**	**28%**	**29%**	**28%**	**#N/A**	**#N/A**
Target	**70%**	**70%**	**70%**	**70%**	**70%**	**70%**

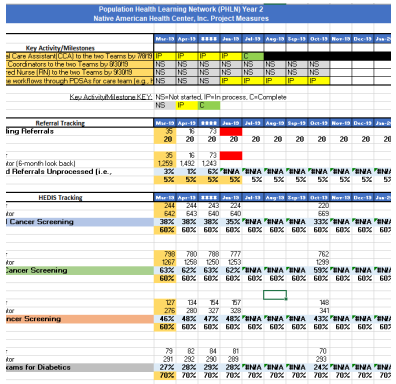
Strategies for Success

PROMPT: What strategies or tools have helped you mitigate challenges and manage your changes? *Examples may be using PDSAs to engage staff and get buy-in; allocating one hour per week of protected time to focus on your project; using visual displays of data to show progress and celebrate early wins.*

1. Developed an 'as needed' Task Group with the Chronic Disease Manager, for feedback regarding CCAs in teams.
2. Started a Population Health recurring meeting to review data metrics with cross-functional team.
3. Hired a Quality Improvement Director.
4. Hired a Population Health Analyst.

Key Tools & Resources

PROMPT: What 1-3 tools/resources have been integral to your project?
Examples could include workflows, patient questionnaires, a registry, job descriptions, brochures/pamphlets, etc. Please email CCI copies of shareable resources so that we can print copies and post to the PHLN program website.



Project Measures Data Tracking Tool – developed for NAHC by Jerry Lassa to help us track progress on our project

Population Health Meeting- internal, cross-functional meeting to address and monitor population health metrics

Tableau – a data visualization software

Next Steps

Spreading

Update job descriptions of Clinical Care Assistants.

Move one Referral Coordinator to a team; test, track.

When able, update reporting tool.

PROMPT: Next steps with your project in the next couple months and also beyond the PHLN. *Do you have plans to spread changes or learnings from your project to other areas in your organization (ie; populations, conditions, etc.)?*

Sustaining

Continue monitoring data, and using the tracking spreadsheet.

PROMPT: How will you sustain your project after the grant ends? *Other funding sources, staff changes, etc.*

Current Challenges or Barriers

PROMPT: What are the top one or two challenges you're currently encountering that fellow PHLN-ers can help you with? *Is there a specific question, curiosity or frustration you would like to brainstorm with the people listening to/reading your storyboard presentation?*

1. Switching electronic health record (EHR) systems mid-PHLN-year.

   - NAHCs time was devoted to this project. Two PHLN members are Super Users.

2. Lack of available (trustworthy) data as a result of the change in EHR systems.