Innovations in Primary Care Practice Improvement

Workshop 1: Maximizing a Registry

May 24th, 2016

7:30am – 4:00pm

Maximizing Registry Use Workshop

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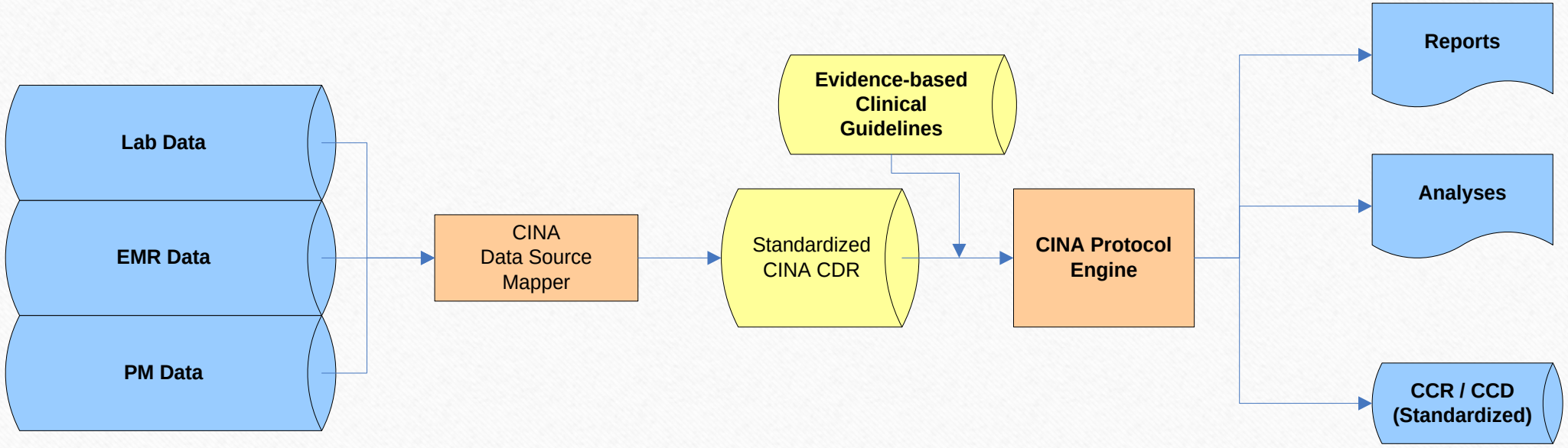
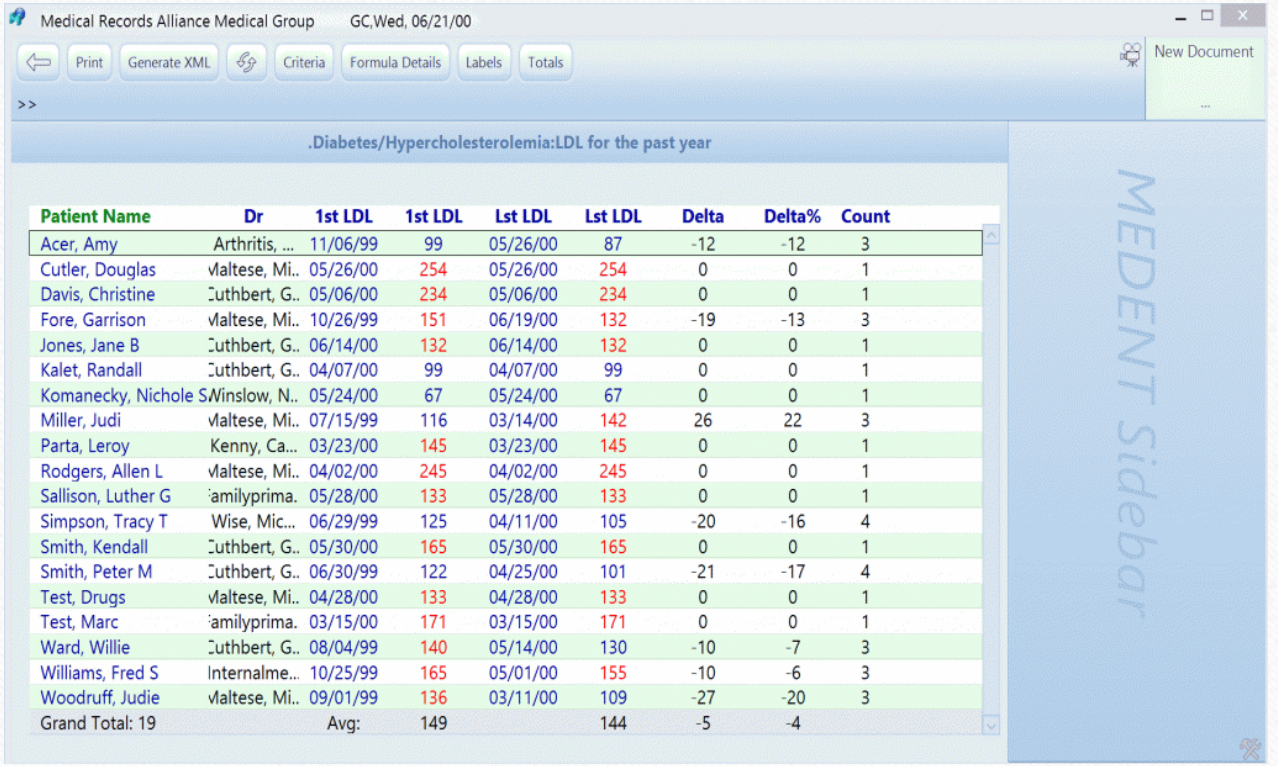
Requirements for a good registry

- Able to extract data and normalize it.
- Able to apply an evidence based algorithm
- Able to create a queriable database that creates a population list
- Bonus: able to create a patient centered point of care reminder system

Flow Chart for Data Extraction

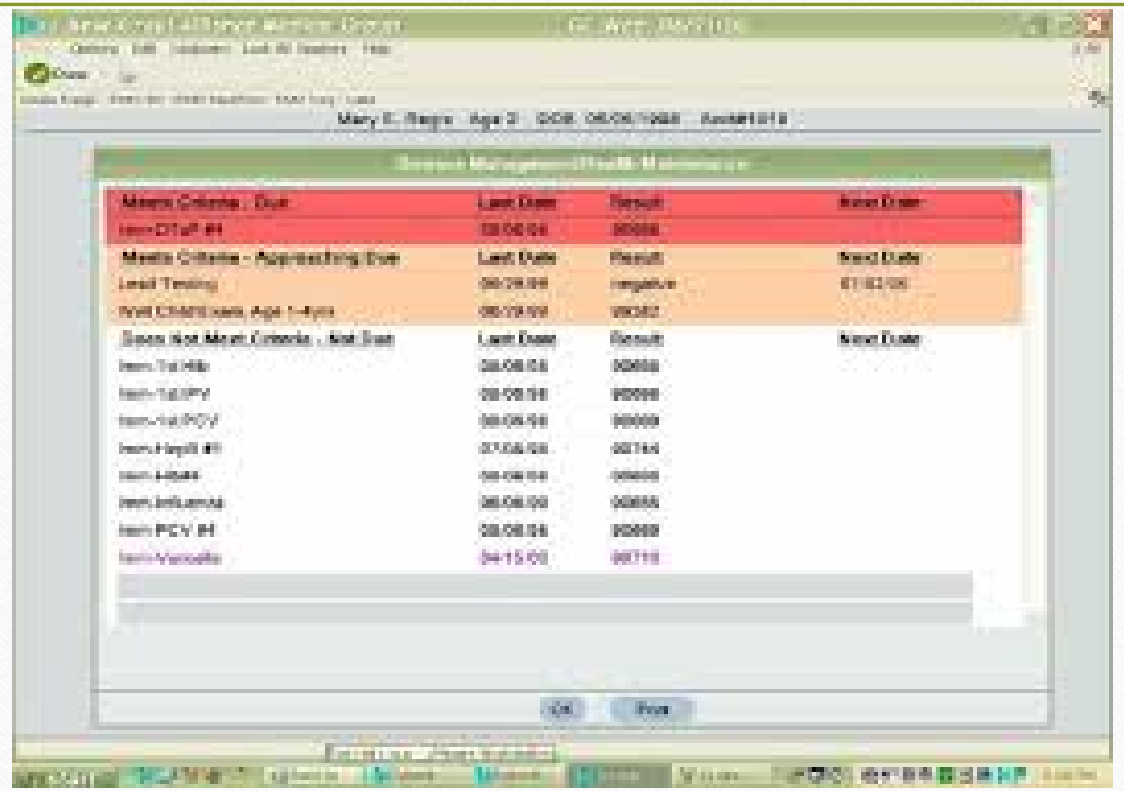


Population Health Registries



Patient Name	Dr	1st LDL	1st LDL	Lst LDL	Lst LDL	Delta	Delta%	Count
Acer, Amy	Arthritis, ...	11/06/99	99	05/26/00	87	-12	-12	3
Cutler, Douglas	Maltese, Mi..	05/26/00	254	05/26/00	254	0	0	1
Davis, Christine	Cuthbert, G..	05/06/00	234	05/06/00	234	0	0	1
Fore, Garrison	Maltese, Mi..	10/26/99	151	06/19/00	132	-19	-13	3
Jones, Jane B	Cuthbert, G..	06/14/00	132	06/14/00	132	0	0	1
Kalet, Randall	Cuthbert, G..	04/07/00	99	04/07/00	99	0	0	1
Komanecky, Nichole S	Winslow, N..	05/24/00	67	05/24/00	67	0	0	1
Miller, Judi	Maltese, Mi..	07/15/99	116	03/14/00	142	26	22	3
Parta, Leroy	Kenny, Ca...	03/23/00	145	03/23/00	145	0	0	1
Rodgers, Allen L	Maltese, Mi..	04/02/00	245	04/02/00	245	0	0	1
Sallison, Luther G	Familyprima.	05/28/00	133	05/28/00	133	0	0	1
Simpson, Tracy T	Wise, Mic...	06/29/99	125	04/11/00	105	-20	-16	4
Smith, Kendall	Cuthbert, G..	05/30/00	165	05/30/00	165	0	0	1
Smith, Peter M	Cuthbert, G..	06/30/99	122	04/25/00	101	-21	-17	4
Test, Drugs	Maltese, Mi..	04/28/00	133	04/28/00	133	0	0	1
Test, Marc	Familyprima.	03/15/00	171	03/15/00	171	0	0	1
Ward, Willie	Cuthbert, G..	08/04/99	140	05/14/00	130	-10	-7	3
Williams, Fred S	Internalme...	10/25/99	165	05/01/00	155	-10	-6	3
Woodruff, Judie	Maltese, Mi..	09/01/99	136	03/11/00	109	-27	-20	3
Grand Total: 19		Avg:	149		144	-5	-4	

Point of Care Decision Support



Discussion

- Describe your experience with Registries
- What works well?
- What are the barriers?
- How do you close the loop between knowing the gaps in care and getting them completed.

Innovations in Primary Care Practice Improvement

Workshop 2: Engaging Patients

May 24th, 2016

7:30am – 4:00pm

ENGAGING PATIENTS

Dr. Carlos Swanger

Jennifer Aiello, MS

Patient Concern

- Cost
- Discomfort or fear
- Comprehension
- Difficulty navigating the system

Evidence-based Patient Outreach

- Small media
- Reminders
- One-on-one education
- Reducing structural barriers

The role of Care Coordinators

- Effective communication
- Interface with clinical team
- Data exchange
- PCMH status; Medicaid Managed Care

Discussion

- What have you found to be most effective at engaging patients to understand and complete screening?
- What are some of the most common and influential barriers?
- Who else have you engaged in your practice to discuss the importance of screening with a patient?

Innovations in Primary Care Practice Improvement

Workshop 3: The Conversation & Workflow

May 24th, 2016

7:30am – 4:00pm

DISCUSSING SCREENING WITH PATIENTS

UNDERSTANDING HOW WORKFLOW SUPPORTS THESE CONVERSATIONS AND IMPROVES SCREENING OUTCOMES

SECTION OVERVIEW

- Understanding Workflows
- Team Based Care Concepts
- Identifying Patients who need Screening
  - Registries
  - Pre Visit planning

WHAT IS WORKFLOW?

- Defined as a series of steps, frequently performed by different staff members and often dependent on related workflows, that accomplishes a particular task.

- Workflows represent how work actually gets done, not the protocols that have been established to do the work.

http://www.ahrq.gov/professionals/prevention-chronic-care/improve/system/pfhandbook/mod5.html

WHAT DOES WORKFLOW HAVE TO DO WITH SCREENING CONVERSATIONS?

- The right workflow makes it easier to have successful conversations
- Targets attention to the right patients
- Primes the patient with helpful information prior to provider visit
- Provides reminders / follow ups for patients and providers
- Ensures information enters the chart clearly so it's easier to have the "repeat screening" conversation

TEAM BASED CARE CONCEPTS

- Shared responsibility for the patient – not just the provider's job
- Delegation of tasks / coordination of effort
- Use of protocols to move more work away from the provider
- Everyone works at the top of their licensure
- Effective regular inter-professional communication

1. HTTP://WWW.IHI.ORG/COMMUNITIES/BLOGS/_LAYOUTS/IHI/COMMUNITY/BLOG/ITEMVIEW.ASPX?LIST=0F316DB6-7F8A-430F-A63A-ED7602D1366A&ID=29
2. HTTP://WWW.IHI.ORG/RESOURCES/PAGES/CHANGES/OPTIMIZETHECARETEAM.ASPX

IDENTIFYING PATIENTS IN NEED OF SCREENING

- Registries
- Pre-Visit Planning
- Other options:
  - Insurance Lists
  - Point of Care decision support

REGISTRIES - DEFINED

- A simple tool to track a disease or condition in your patient panel
- Can track clinical patient data across a wide range of conditions
- Measure the quality of patient care against providers and other institutions

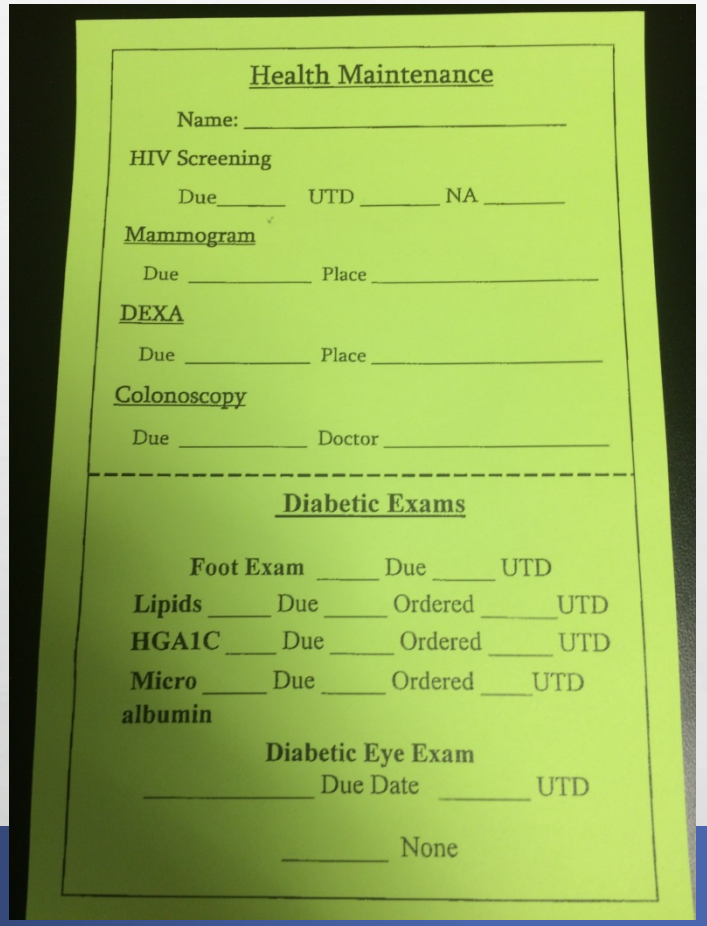
A GOOD REGISTRY

- Links closely with your EHR
- Identifies all patients in need of screening
- Allows you to track patient progress towards screening
  - From recommendation to completion
- Provides you with the information you need to reach patients
  - Name, address, phone number, etc
- Is mapped accurately to the places your are documenting screening
- Finds patients who are not coming into the office routinely

USING PRE-VISIT PLANNING

- Ensure all staff know patient is due for screening
- Allows team based approach so that patient may receive information about screening prior to seeing physicians
  - Distribute brochures on screening needs
- Ensure needed materials are available
  - Having FIT kit in room for patients due
- Allows potential bundling of appointment
  - Have PAP while at routine appointment
  - Have mammogram immediately following appointment (when available on site)
  - Distribute FIT kit at appointment

WHAT MIGHT THIS LOOK LIKE?



Health Maintenance

Name: _____

HIV Screening

Due_____ UTD _____ NA _____

Mammogram

Due _____ Place _____

DEXA

Due _____ Place _____

Colonoscopy

Due _____ Doctor _____

Diabetic Exams

Foot Exam _____ Due _____ UTD

Lipids _____ Due _____ Ordered _____ UTD

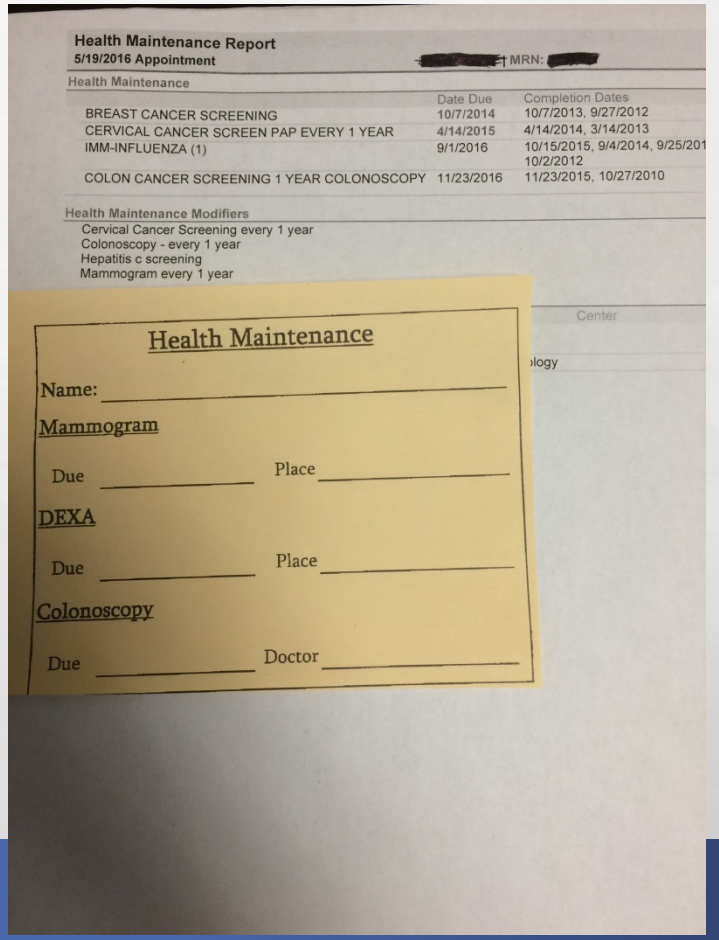
HGA1C ____ Due _____ Ordered _____ UTD

Micro _____ Due _____ Ordered ____ UTD
albumin

Diabetic Eye Exam

_____ Due Date _____ UTD

_____ None



Health Maintenance Report
5/19/2016 Appointment [redacted] MRN: [redacted]

Health Maintenance

	Date Due	Completion Dates
BREAST CANCER SCREENING	10/7/2014	10/7/2013, 9/27/2012
CERVICAL CANCER SCREEN PAP EVERY 1 YEAR	4/14/2015	4/14/2014, 3/14/2013
IMM-INFLUENZA (1)	9/1/2016	10/15/2015, 9/4/2014, 9/25/201 10/2/2012
COLON CANCER SCREENING 1 YEAR COLONOSCOPY	11/23/2016	11/23/2015, 10/27/2010

Health Maintenance Modifiers

Cervical Cancer Screening every 1 year
Colonoscopy - every 1 year
Hepatitis c screening
Mammogram every 1 year

Center

ology

Health Maintenance

Name: _____

Mammogram

Due _____ Place _____

DEXA

Due _____ Place _____

Colonoscopy

Due _____ Doctor _____

ROLES THE STAFF MAY PLAY IN IMPROVING SCREENING RATES

- Identify patients / flag charts to indicate patients needing screening
- Outreach to patients lost to follow up or provide reminders
- Distribute brochures and information to patients due
- Begin the conversation, allow patient to ask questions
- Serve as the “confidant” for patients with difficult questions about screening
- Describe the process of screening in more detail
  - What the procedure is like
  - What preparation is like
  - Time, location, etc
- Reinforce and reiterate recommendations made during the visit
- Trouble shoot road blocks for screening (transportation, insurance coverage)

THEN…..

When the provider enters the room the patient is primed and ready to discuss screening, much of the foundation has been laid

BUT WHY AREN'T PATIENTS GETTING SCREENED?

WHY PATIENTS AREN'T GETTING SCREENED *(ACCORDING TO PHYSICIANS)*

Table 4 Perceived barriers by primary care physicians in Arizona to ordering CRC screening tests

Barriers	Ranked #1	Ranked #2	Ranked #3	Total votes (%)
Patient reluctance to undergo screening procedures	501	229	83	813 (83)
Patient fear of procedure or results	183	279	180	642 (65)
Patient lacks insurance coverage for screening procedure	188	147	173	508 (52)
Time constraints	42	55	107	204 (21)
Logistical problems for the patient	20	55	118	193 (20)
Lack of reimbursement for ordering or performing procedures	38	45	53	136 (14)
Decreased availability of screening tests	36	22	51	109 (11)
Other	27	7	17	51 (5)
Your familiarity with current guidelines	4	1	4	9 (1)

Cancer Causes Control.,2011

WHY PATIENTS AREN'T GETTING SCREENED
(ACCORDING TO PATIENTS)

"MY DOCTOR NEVER TALKED TO ME ABOUT IT!"

THE CONVERSATION

- Meet the patient where they are
- Identify gaps in health literacy, but don't try to fill them all immediately
- Utilize Motivational Interviewing
- Utilize staff to support you (you might not have time for motivational interviewing…)

SCREENING DISCUSSION – WHAT DO PATIENTS WANT TO KNOW?

Table 2. Patient rated importance of screening information and proportion that received information from physician ($n = 415$)

Type of information	Patients who rated information "very important"	Patients receiving information (of those who rated information "very important")
Screening purpose	368/415 (88.7%)	214/368 (58.2%)
Test accuracy	354/415 (85.3%)	26/354 (7.3%)
Testing alternatives	346/415 (83.4%)	101/346 (29.2%)
Testing pros/cons	356/415 (85.8%)	14/356 (3.9%)
Testing process	323/415 (77.8%)	323/323 (100.0%)

Cancer Epidemiol Biomarkers Prev. 2011

WHAT'S NEXT AFTER SCREENING IS 'DONE'

- Closing the loop
  - EMR data entry – workflows /staff responsibilities
  - How do you find out where your patients receive care outside your office?
  - How do you communicate with outside providers?
  - What's the next screening interval (i.e colonoscopies with polyps)?
  - Abnormal results who/ how are they handled?
  - Patient feedback – an opportunity for education.

DISCUSSION QUESTIONS

- What have been your experiences with team-based approaches to identifying and tracking patients needing screenings in your practice?
  - What are some of the common and challenging barriers?
  - Any particular successes or failures?
  - Let's brainstorm some solutions to these barriers
- How have you overcome difficulties communicating with outside providers to close the screening loop on your patient?
- What strategies have you used to have successful conversations on screening?