



RAPID

Reporting Assistance and Process
Improvement Discussion

3 Month Success Session

Vision: Healthy Communities, Healthy People



Agenda

1. Welcome back!
 - a. Recap of measure and planned improvements
2. Sharing progress in the past 3 months
 - a. Successes
 - b. Challenges
 - c. Recommendations
3. Where to go next
 - a. Adopt, Adapt, Abandon
4. Harvest and spread results
 - a. Embedding change
 - b. Sustaining success
5. How will we continue

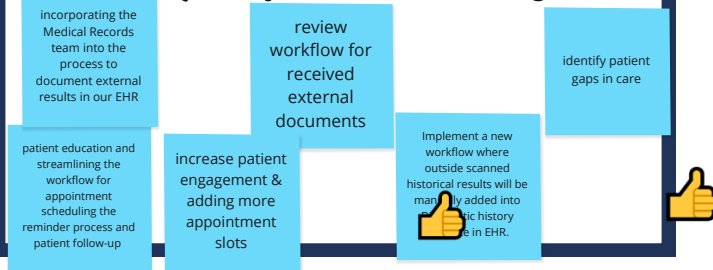


Recap of Planned Improvements

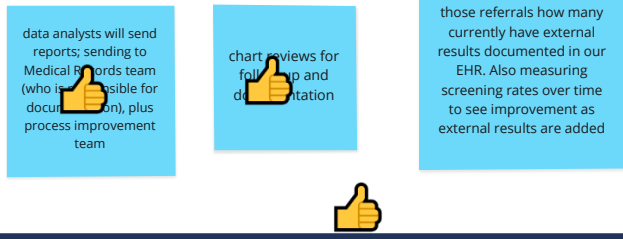
Where did we leave it?

- 1 Each group **selected an intervention that addressed a specific problem or barrier** identified for their clinic's performance on the measure.
- 2 Forces that might **support or hinder** the selected improvement were identified.
- 3 SMARTIE goals were discussed.
- 4 A **plan to monitor and measure** the outcomes of the test of change was created for each clinic.
- 5 Everyone shared how a **successful change** would impact their work.

Summary of planned changes



Monitoring plans



How did it go?

Drop an emoji (from below or of your own choosing) that describes how your planned changes have gone thus far.



And do the same for how your monitoring plan went—were you able to monitor your change specifically? Did that go well or not?



Rose, Thorn, Bud

What it is

Rose, Bud, Thorn is an exercise to help understand what's working, what's not, and areas of emerging opportunity. The goal is to find commonalities among what you and your peers experiencing, and share more about those areas where people are having diverging experiences.

How to do it

Steps:

- Our work on this today focuses on this CQM specifically in your health center's workflows and serves both providers and patients.
- We'll work from left to right together, identify Roses, Thorns, and Buds - taking a few minutes on each before moving on to the next.
- Once done with the exercise, we'll cluster similar stickies together to surface patterns and use the theme sticky notes to give them a name.

Grab a sticky here at the bottom, drag it to the top of the column and type into it. Add at least one sticky to each column.

Rose What went well?	Thorn What did not go well or continued to be a challenge?	Bud What is showing promise? What needs more cultivation?
<p>Automated weekly reports of upcoming patients that need to be screened</p> <p>leadership involvement has been great</p> <p>The 3 additional EQNs were hired and trained. They continue to work on identifying gaps in care and scheduling appointments</p> <p>workflow review; supervisor support and medical director follow up</p>	<p>documentation stewards have many responsibilities and are not able to spend as much time on cervical cancer screening as planned</p> <p>We only saw a 2% increase in compliance for Cervical CA but saw larger increases in other measures the EQNs worked on.</p>	<p>Pre-visit chart scrubbing has improved but still needs to become a routine practice.</p> <p>To work on easier ways to remind patients need for screening beyond chart scrubbing</p>
<p>improved workflow documentation</p> <p>We are trending up in the metric.</p>	<p>Patients still not convinced to get pap done even if the appointment was scheduled for it.</p>	



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**Where to go next
and sustaining success
when you find it.**

Vision: Healthy Communities, Healthy People



Review qualitative and quantitative data related to the change.

Seek to understand experiences of those involved (e.g., focus groups or interviews). Compare the information you have to predictions and goal.

Did the change/ improvement work?

Did it have the intended effect? Did it progress you toward your goal? Did it do so without making people's work notably harder?

Act



ADOPT

1. When the test resulted in the desired outcomes
2. Expand test, and begin embedding into health center systems and processes



ADAPT

1. When the test resulted in some positive outcomes, or some improvement, but not exactly the goal
2. Tweak the tested enhancement and test again



ABANDON

1. When the test did not result in desired outcomes
2. Discontinue the change tested; ensure that it has not remained embedded in systems or processes

Principles Driving Sustained Improvement

Embedding Change

- 🔄 Standardize what makes sense
- 🔄 Ensure accountability
- 🔄 Visual management
- 🔄 Have problem solving tools
- 🔄 Escalating problems
- 🔄 Integration across organization



Standardize What Makes Sense

Your improvement must become part of standard work, a standard workflow exists and is updated for all those positions impacted and shared with all.



Ensure Accountability




Accountability *for standardization* needs to be ensured through systems of routine review across every level of org. *Ex. provider score cards, peer chart reviews*

Visual Management



Be sure there is visual sharing of status of improvement.
Ex. Dashboards, data presentation at regular meetings, thermometer showing progress

How are you ensuring accountability and using visual management?



monthly monitoring of quality measures; shared with Quality committee and governing board

Using Provider score cards per site with staff.

sharing trending reports with leadership - showing cervical cancer screening rates by month

Principles Driving Sustained Improvement

Problem Solving Tools

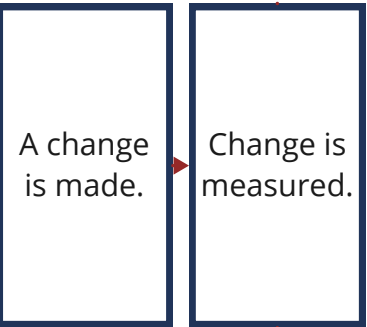
Staff (particularly those implementing) must have tools and bandwidth for addressing problems.

Escalating Problems

Protocols must exist for problems that cannot be solved at the front line to be escalated to the right level in the right time frame.

Integration

There must be alignment across initiatives as well as levels/ sites/ depts around goals and systems.



Recap: Where you'll go from here



Good luck with your UDS Reporting!



- Keep up the great work!
- Remember, if you have any questions, reach out to [UDShelp330@bphcdata.net!](mailto:UDShelp330@bphcdata.net)

Please take a moment to complete an evaluation for today's session:

<https://survey.alchemer.com/s3/7893859/2024-Cervical-Cancer-Screening-RAPID-Series-Feedback-Form-SS>



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**Thank
you!**

