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# RAPID

## Reporting Assistance and Process Improvement Discussion

## Session 4

UDS
Uniform Data System

# Roadmap for Today

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**PART 1:**
**Review Action Work**

**PART 2:**
**Understanding Data Quality**

**PART 3:**
**Understanding Measure Specifications for UDS Reporting**

**PART 4:**
**Measure FAQs**

**PART 5:**
**Action items to complete prior to next session**

Session 1, June 2025: Understand your Own UDS Reporting

Session 2, July 2025: Understanding your Measure of Focus

Session 3, Aug. 2025: Working Towards Your Goal

**Session 4, Sept. 2025: Making and Sustaining Progress on Your Goal**

SME Session: Data Governance

SME Session: Workflow Mapping

# Agenda

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- **Review August Activities**
  - Process Mapping Session
  - Action Work from Last Session
- **Collaboration on Planning**
  - How will efforts evolve?
  - Considerations for validation and piloting/ small tests of change
  - Measurement and implementation
- **Action Work following this Series**
  - Go forth with your selected improvement!
  - Monitor progress on your SMART goal
- **Success session in 3 months**

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## You joined a SME session focused on Process Mapping, which focused on:

- Sustainable change
- Process maps (process flows and workflows) as an opportunity for improvement
- Data governance role in sustaining and monitoring change

## You completed the following Action Work and submitted it via email:

Get together with your team. Start with the concrete action step identified in your action work before this session and discuss what it would look like to make this improvement.

Scope the improvement into something that can be planned and tested out in about 4-6 weeks.

Work through the SMART Goal worksheet, to fully document the improvement and related goal.

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# How did selecting your change/ improvement go?

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# Let’s Share

Discussing what you have covered since our last session!

# Breast Cancer Screening
## Selected Improvement

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### Enhancing Data Management and EHR Utilization

- Implementing automated EHR prompts to alert providers during patient visits when a patient is due for screening.
- Improving the data collection related to screenings and reconciling outside data sources.
- Creating a report that shows which mammograms are missing and auditing patients who have not completed their mammograms.
- Building and testing EHR standing orders/alerts for mammogram screening.

### Improving Patient Outreach and Engagement

- Developing and implementing a standardized outreach protocol for breast cancer screening reminders via phone, text, or patient portal.
- Launching patient reminder campaigns (calls/texts) and providing culturally sensitive education and peer testimonials.
- Collaborating with referred agencies to streamline a process for sending records of completed mammograms.
- Providing education materials, reminder calls, and collaboration with imaging centers for easier scheduling.

### Standardizing Clinical Workflows and Staff Training

- Providing targeted training sessions for clinical and support staff on breast cancer screening guidelines and workflow improvements.
- Reviewing current pre visit planning and other clinical workflows to determine if additional guidance is needed.
- Implementing changes to the workflow to give specific guidance on checking for completed mammograms.
- Training MAs and front desk staff on updated workflows and implementing process for uploading paper records in the electronic health record.

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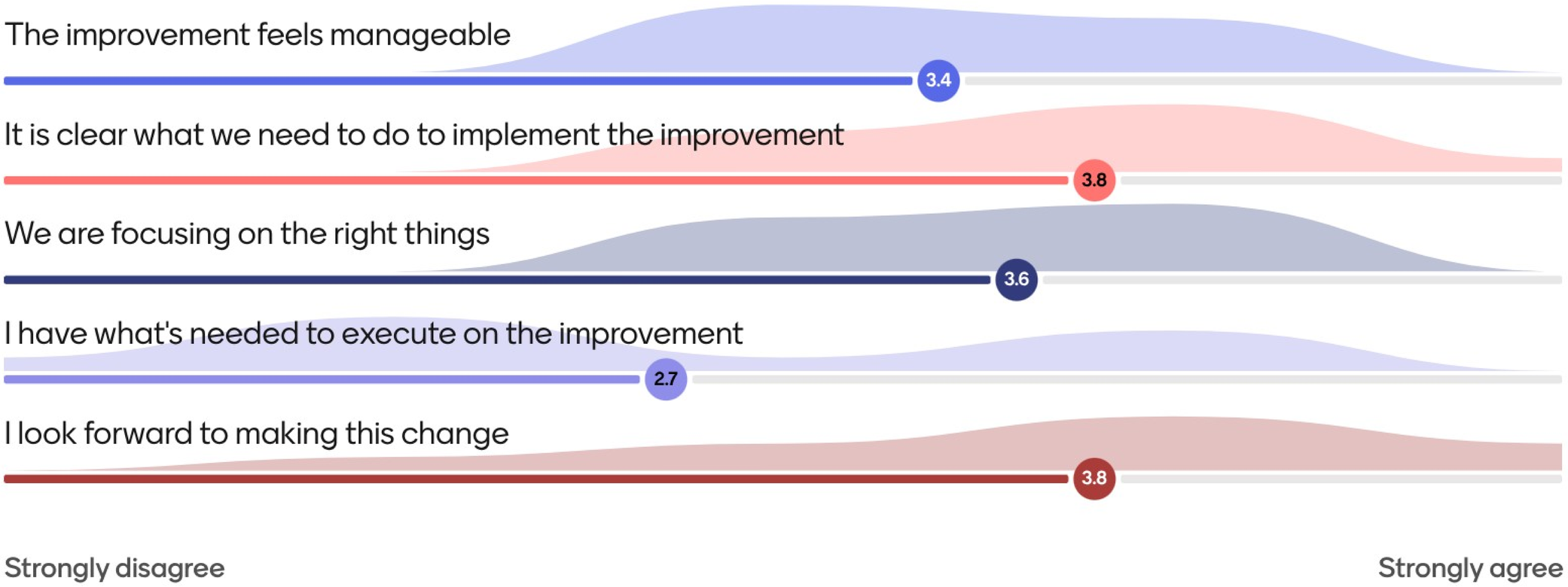
# How do you feel about the improvement you've selected?

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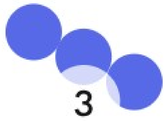
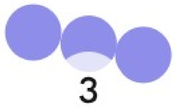
# **Driving Forces:** What forces encourage or support this change?



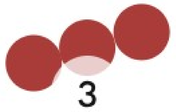

Agreement that it's a solution to our root cause

Leadership buy-in or support

Leverages available staff/ capacity




Fits within existing workflows




Informed by existing data

# **Restricting Forces:** What headwinds or challenges are you likely to face?

Not enough staff, with too many other responsibilities. Patients not compliant Patient finances are a hinderance

Access to imaging centers is limited in our area, it is very rural. The mamo bus wasn't sure if they even serviced our area when contacted, and said they didn't have availability until next year

Leadership Buy-in mixed with High Staff Turnover

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# Anything you need help on or are blocked by? What could you use your colleagues' advice on?

How do you get patients to do their mammos?

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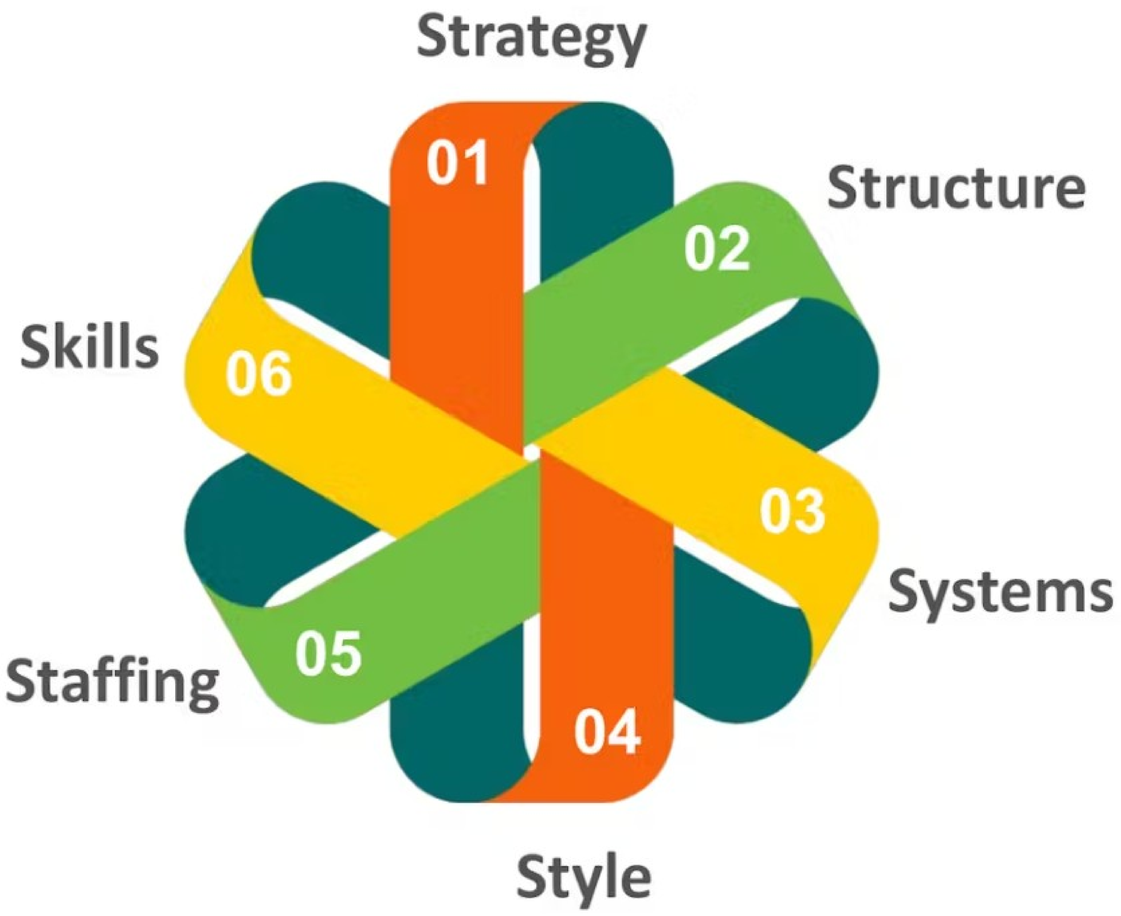
# What common features of potential improvements?

From what you considered while doing your action work and what your colleagues have shared, what are the important considerations?

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# Key Takeaways and Risk Mitigation

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## Communication

It's important to communicate about the improvements you are making, and what you are testing related to that change, and why. Also communicate how broad the test will be and how you'll determine whether it worked.

## Validation

All the data used to determine what change is needed or whether the change is working need to be validated -- simply trusting that data reflects the work being done is not enough!

## Piloting

If you are familiar with PDSA cycles, you know that the focus is small tests of change. Doing this ensures that you don't make big investments or re-train staff before ensuring that the change works as we hoped.

## Storytelling

Many people don't love data and especially don't love data that's used to say how well or not well they are doing. Using patient and staff stories to illustrate the importance of this is meaningful!

# Reminder of SMART Goal

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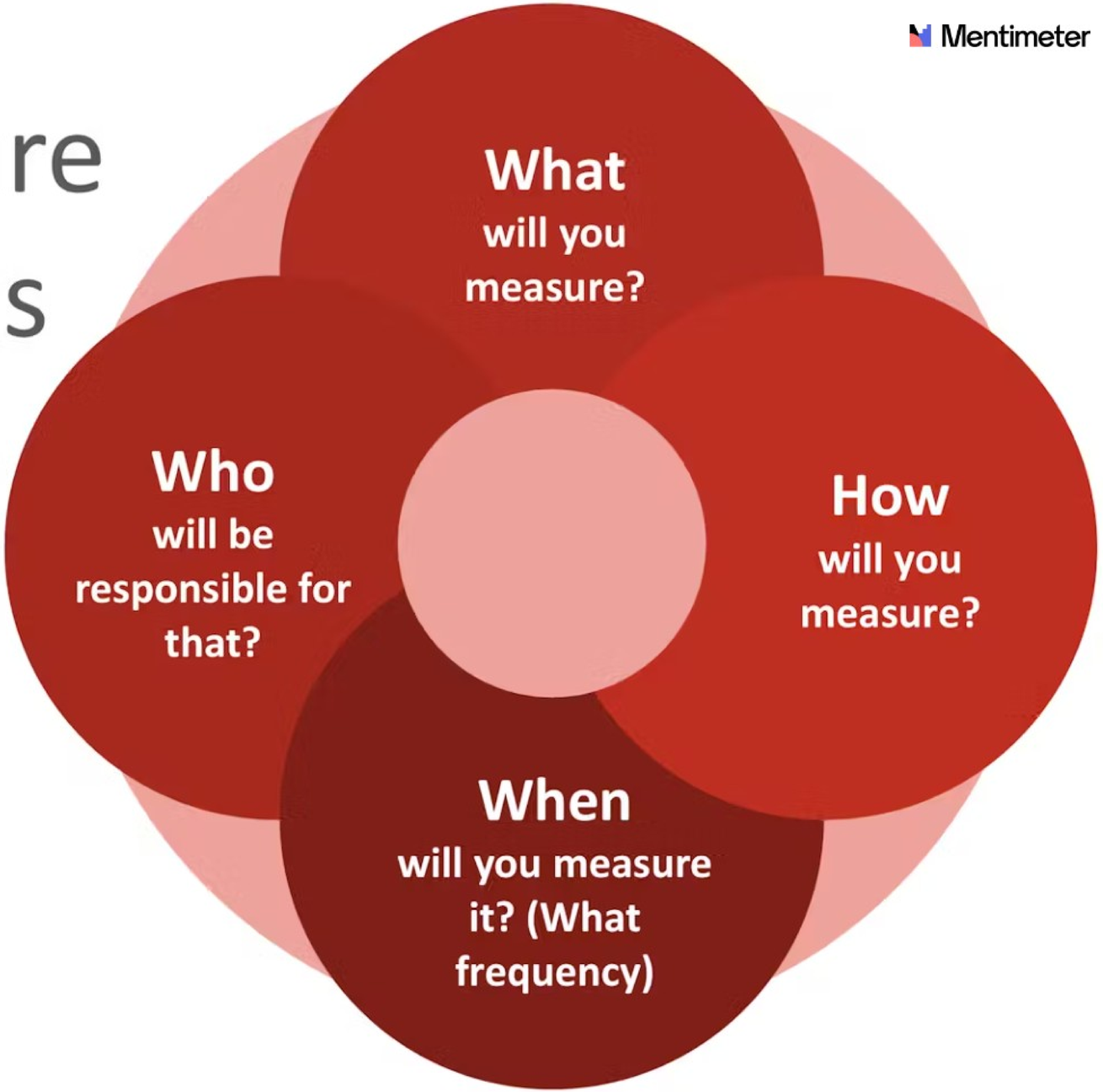
| | |
|---|---|
| **Specific** | Reflects an important dimension of what your organization seeks to accomplish. |
| **Measurable** | Includes standards by which reasonable people can agree on whether the goal has been met (by numbers or defined qualities). |
| **Ambitious** | Challenging enough that achievement would mean significant progress; a “stretch” for the organization. |
| **Realistic** | …but not so challenging as to indicate lack of thought about resources or execution; possible to track and worth the time and energy to do so. |
| **Time-bound** | Includes a clear deadline |

**Why is a SMART goal important?**

- Ensures a thoughtful, clear goal tied to the planned change.
- A quality goal can inspire a team, set a clear path forward, and show people how their individual work impacts the bigger picture.

# How will you measure your change towards your SMART goal?

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# How do you see successful change impacting your work?

Patients receiving better quality care.

Mammogram referrals becoming common place

Staff will be happy to see patients taking ownership in their own health.

Stronger Collaboration- Successful change often brings departments together, improving communication and shared goals.

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# What comes next?

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| Step 1 | Step 2 | Step 3 | Step 4 | Step 5 |
|---|---|---|---|---|
| Implement your change! Be sure to include communication, validation, piloting, and storytelling. | Monitor and measure, particularly against you SMART goal. | Review progress with your team regularly. | Iterate as needed based on team response and monitoring results. | Join the Success Session 3 months from now to share how it's going. |

# Success Session in Three Months!

Action work between now and then is to **go forward with your change**!

Be sure to track progress on your SMART goal as a result of the change you are making, and measure progress along the way!

At the Success Session, we'll:

- Share progress and lessons
- Strategize how to *SUSTAIN* change

# Assistance Available

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**UDS Support Center**

- Assistance with UDS reporting content questions
- 866-UDS-HELP (866-837-4357)
- udshelp330@bphcdata.net

**HRSA Call Center**

- Assistance with EHBs account and user access questions
- 877-Go4-HRSA (877-464-4772), Option 3
- http://www.hrsa.gov/about/contact/ehbhelp.aspx

**Health Center Program Support**

- Assistance with EHBs electronic reporting or EHB account issues
- 877-464-4772, Option 1
- http://www.hrsa.gov/about/contact/bphc.aspx

**GeoCare Navigator**

- Assistance with the online service area mapping tool
- https://geocarenavigator.hrsa.gov/

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# Thank You!

## Contact:

udshelp330@bphcdata.net or BPHC Contact Form

1-866-837-4357

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