

MN State Innovation Model - Practice Facilitation

Filling Your Improvement Toolbox:
The Shift From Volume to Value

April 5, 2017

Today's Objectives

- Increase awareness of the elements required for care delivery transformation
- Identify practical tools that aid in building and supporting the infrastructure for improved care delivery

State Innovation Model (SIM)

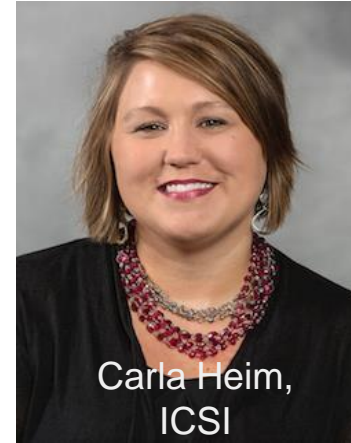
- Minnesota is one of six states to receive a three-year SIM grant from The Center for Medicare and Medicaid Innovation (CMMI)
- \$45 million was awarded to the Minnesota Department of Health and Minnesota Department of Human Services

What are the 5 Drivers of the SIM Model?

<i>E-HEALTH</i>	<i>DATA ANALYTICS</i>	<i>COORDINATED CARE</i>	<i>COMMUNITY PARTNERSHIP</i>	<i>ACCOUNTABLE CARE ORGANIZATION</i>
Increasing ability to share data for treatment, care coordination and quality improvement between providers.	Understanding data trends to manage cost and improve quality for the Medicaid ACO's	Providing practice transformation, learning opportunities, and integrating new professions to support coordinated care.	Identifying health goals and strategies in partnership with impacted populations. Accountable community for health (ACH).	Integrate accountability measures for populations with complex chronic conditions.

This practice facilitation grant is focused on ***coordinated care***.

SIM-Practice Facilitation Team – It Takes A Village!



Supporting Team:

- Mary Beth Schwartz
- Patty Staack
- Roberta Russett
- Senka Hadzic

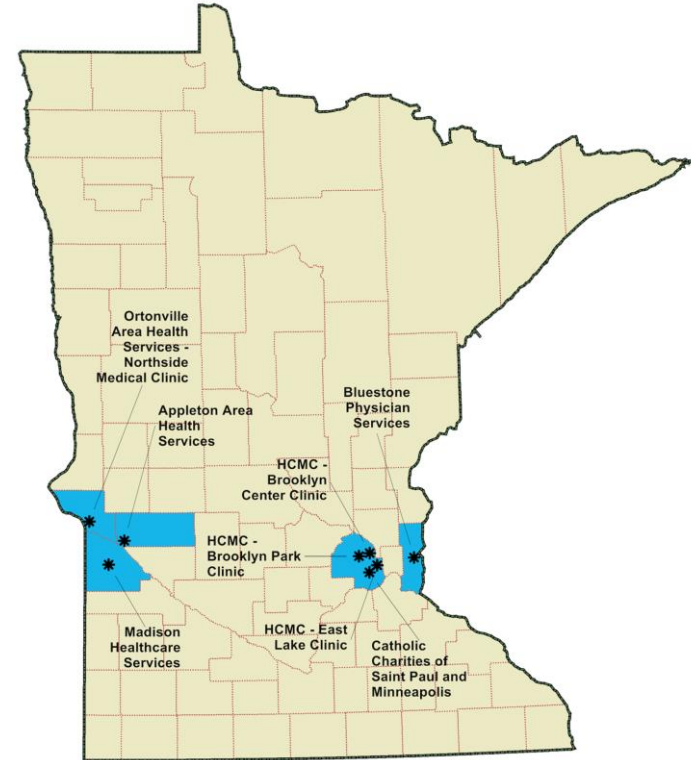
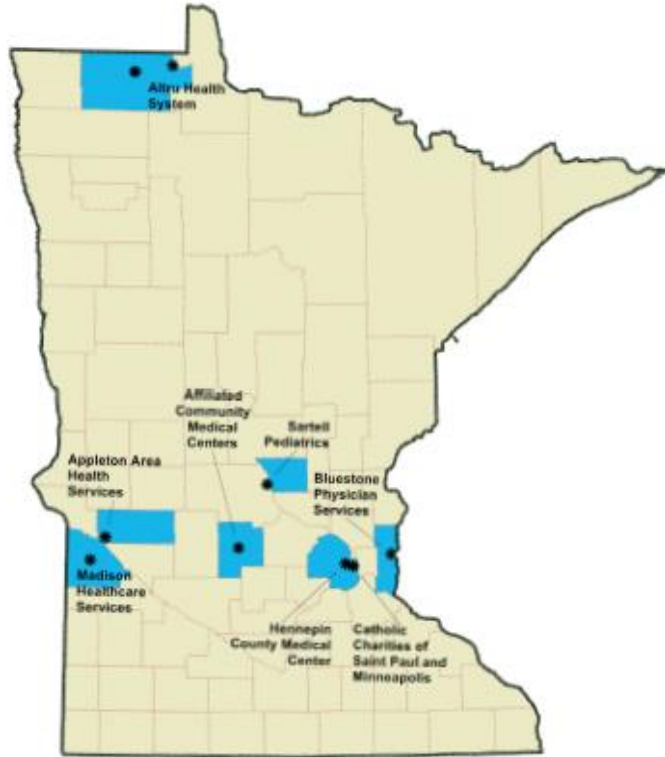
Evaluation Team:

- Claire Neely
- Jill Kemper
- Senka Hadzic
- Tani Hemmila

Advisory Team:

- Claire Neely
- Jill Kemper
- Mary Beth Schwartz
- Patty Staack
- Roberta Russette
- Senka Hadzic
- Tani Hemmila

Participating Clinics



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What is Practice Facilitation?

Practice facilitation is a **supportive** service provided to a health care practice. Its aim is to help the practice reach specific improvement goals while building the internal capacity of a practice to engage in improvement activities over time.

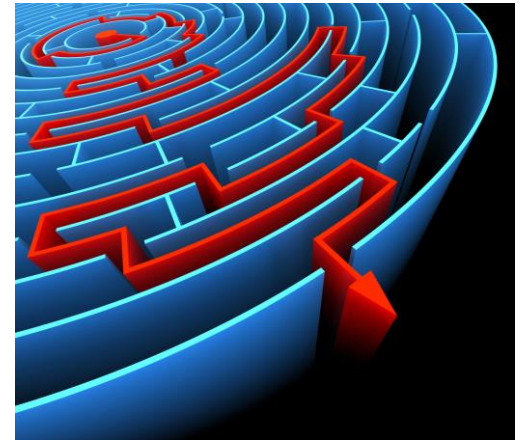
- Source: Agency for Healthcare Research & Quality (AHRQ)

What's Involved in SIM Practice Facilitation?

- Extensive assessments to help **guide** your projects:
 - Minnesota Accountable Health Model's "Continuum of Accountability" Assessment Tool
 - ICSI/Stratis Health Current State Review Documents
 - Gap Analysis
- **Customized** goal setting for each organization
- **Active** practice facilitation
- Comprehensive evaluation throughout your project to **support transformation** within your organization

Value Based Care: What is it?

- Significant quality & payment reform
- Shift from payment for volume to payment for value (quality)
- Impacts all settings
- Goal: improved care, reduced cost, improved patient experience
- Patient at the center



Elements Needed For Care Delivery Transformation

Infrastructure that supports ongoing improvement efforts:

- Leadership support
- A culture that embraces improvement
- Resource of dedicated time
- Realistic goals that align with your mission
- Real time actionable data
- Someone to understand and can articulate what your data means
- A plan to improve



“This project has helped our staff see the full continuum of change, specifically as it relates to clinical care. Identifying the measure, documenting the workflow, changing/modifying the workflow as needed, and then measuring our success – this is a process we can extend to multiple facets of patient care.”

Jill Smith, Clinic Administrator - Sartell Pediatrics

SIM-Practice Facilitation Improvement Toolbox

- 1a. SMART AIMS Goal Instructions
- 1b. SMART AIMS Template
- 1c. QAPI Goal Setting Worksheet
- 2a. Measurement Plan Narrative
- 2b. Evaluation Measurement Template
- 3a. Project Plan Template
- 4a. Communications Plan Tool
- 4b. QAPI Communications Plan Worksheet
- 5a. Process Mapping Overview
- 6a. Trend Chart Template and Example (including Privacy & Security)
- 6b. Creating and Editing Trend Charts Video
- 7a. Small Tests of Change Narrative
- 7b. Small Tests of Change Worksheet
- 8a. QAPI Sustainability Decision Guide



3a. Project Plan

SMART AIM/GOAL: <i>INSERT SMART AIM/GOAL HERE</i>		<i>(Insert Months of the project in the green boxes below)</i>												
Activities	Resource(s)													Complete? (date)
Decide on what you want to improve	Internal QI and/or Change Team													
Determine your Readiness to take on the QI Project	Use a general AHRQ -SWOT and GAP Analysis tools. MN Accountable Matrix. Readiness Tools													
Determine Capacity: What will it take to implement the QI Project.	Capacity evaluation: Internal QI and/or Change Team													
Develop SMART aim/goal	1a. SMART aim/goal instructions, 1b template, 1c. QAPI Goal Setting Worksheet													
Establish Data Measurement metric(s) including what will comprise baseline data (What will be gathered and where does it come from?)	2a. Measurement Plan narrative, 2b Evaluation Measurement Template													
Develop Project Plan	3a. Project Plan Template													
Develop/establish/Implement Communication Plan (Share findings and results)	4a. Communication Plan Tool, 4b. QAPI Communications Plan Worksheet													
Develop process map for: Workflow Current and Future states (What you are working on or your focus area)	5a. Process Mapping Overview													
Develop data measurement metric(s) & Visual Display of Data (Trend Chart)	6a. Trend Chart Template and Example, see also 2a & 2b above. 6b. Access creating and editing trend charts video: https://mnaimpracticefacilitation.org													
Develop or Plan "Small Tests of Change" document: Organize what you are going to test and establish PDSA.	7a. Small Tests of Change Narrative, 7b. Small Tests of Change Worksheet													
Pilot or Do "Small Tests of Change" to address focus area...	See 7a & 7b. See GAPS from workflow to address steps in the process to be changed. "Do" phase													
Implement Action Plan(s) or Study & Act "Small Tests of Change"	See 7a & 7b. "Study & Act" Phase													
*Additional "Small Tests of Change" ADD Rows as needed	*See above "Small Tests of Change" activities													
Evaluation: Measure results against interventions	See 6a & b and 2a & b. Trend Charts (Visual display of data)													
Sustainability: What will it take to sustain the improvement? (Light Grey shows thinking about sustainability starts at the beginning)	8a. QAPI Sustainability Decision Guide													

1b. SMART AIMS Template

|Getting Started: SMART AIM Template

To develop SMART aim, use the template below and fill in the blanks:

By ___/___/___, _____
[WHEN—Time bound] [WHO/WHAT—Specific]

from _____ to _____
[MEASURE (number, rate, percentage of change and baseline)—Measurable]

Adapted from

http://www.cdc.gov/dhdsdp/state_program/evaluation_guides/pdfs/smart_objectives.pdf

2a. Measurement Plan Narrative

ICSI Institute for Clinical
Systems Improvement



Measurement Plan

Introduction

As part of this project, your clinic will decide on a quality improvement focus topic that your teams will work on implementing. One key piece of quality improvement is determining what you will measure as part of your improvement effort. In order to do this, you will need to create a measurement plan.

Your measurement plan should consist of the following:

- 1) Aims and Measures;
- 2) Baseline Data Collection;
- 3) Data Collection Post-Implementation;
- 4) Data Analysis and Reporting;
- 5) The Role of Quality Committee.

SIM-Practice Facilitation Communication Plan

Who should I communicate to?

- Leadership
- Champions
- Team
- Staff

What information should I communicate?

- How does that differ for different audiences?
- Consistent messaging to all levels in the organization

When should I communicate about this work?

Where do I find information to share?

- SMART Aim
- Process Map document
- Trend Chart document
- Evaluation Measurement document
- PDSA document
- Other

How do I communicate about the work?

- How frequently should I communicate about the work?

4a. Communications Plan Tool

5a. Process Mapping Overview

The Process Mapping Experience

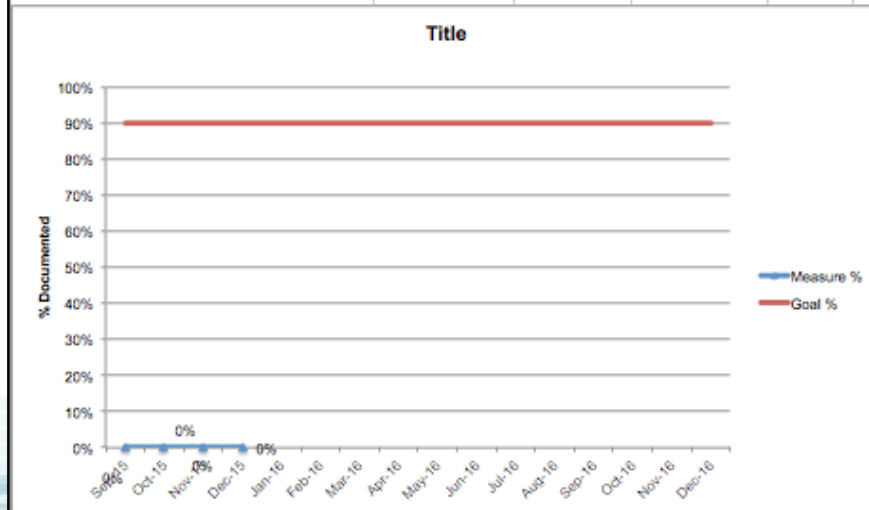
When to do a Process Mapping Experience:

- You know a process is broken or needs improvement
- The process has many steps
- There are multiple roles or departments involved
- The process is high impact (if it's not working it affects other processes/outcomes)
- You know there is variation
- When you really want to understand what is going on

Examples: Office Visit, Lab Orders to Results, Forms, Chronic Condition Management

6a. Trend Chart Template & Example

Organization:					
SMART Aim:					
Measure:					
Time (month)	Denominator	Numerator	Measure %	Goal %	
Sep-15			#DIV/0!	90%	
Oct-15			#DIV/0!	90%	
Nov-15			#DIV/0!	90%	
Dec-15			#DIV/0!	90%	
Jan-16				90%	
Feb-16				90%	
Mar-16				90%	
Apr-16				90%	
May-16				90%	
Jun-16				90%	
Jul-16				90%	
Aug-16				90%	
Sep-16				90%	
Oct-16				90%	
Nov-16				90%	
Dec-16				90%	
Totals	0	0	#DIV/0!	90%	



7a. Small Tests of Change
Narrative

PDSA

Sustainability Decision Guide



Directions: This is a resource to help leaders or teams determine if the interventions and changes they are making are sustainable. This guide will help identify why interventions may not be sustainable, and therefore need to be reconsidered. Use this guide at any point during a Performance Improvement Project (PIP), ideally when strategies have been found that appear to be successful and consideration is being given to adopting them broadly within the organization. The more questions that can be answered as “yes,” the higher the likelihood of sustainability.

SYSTEMS

- Has the change been defined in terms of how it fits with the overall organizational mission, vision and strategic plan?
- Are there policies and procedures written in support of the change?
- Are those who need to carry out the new actions up to date with the information they need to be successful?
- Have the organization's systems been revised to encourage the new action? How are staff members reminded to carry out the new actions? Are you monitoring that the new actions are being carried out and is staff being supported in their ability to carry out the new actions?
- Are there system barriers that prevent the new action from occurring? Are there certain identifiable parts of the system that pose a roadblock to doing things in the new way?
- Are there incentives or rewards for people who do not adopt the new action that need to be addressed or removed?
- Has the change been integrated into new employee orientation and training?

8a. QAPI Sustainability Decision Guide

Introduction To Visual Tutorials



Where Can You Find These Tools?

www.ICSI.org

www.stratishealth.org

Next Steps For Value Based Care

- Get on board
- Don't start too big
- Make it easy on yourself for 2017 (pick your pace)
- Take advantage of existing resources
- Carve out/protect your improvement time
- Recognize your improvement efforts and celebrate your successes

Question?

Contact Us!

- Jeyn Monkman, ICSI at jmonkman@icsi.org or call 952-883-7980
- Candy Hanson, Stratis Health at chanson@stratishealth.org or call 952-853-8524
- Carla Heim, ICSI at cheim@icsi.org or call 952-814-8286

This project is part of a \$45 million State Innovation Model (SIM) cooperative agreement, awarded to the Minnesota Department of Health and the Minnesota Department of Human Services in 2013 by the Center for Medicare and Medicaid Innovation (CMMI) to help implement the Minnesota Accountable Health Model.