



# Quality Watch Checklists

## Redwood Community Health Coalition Promising Practice

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H2QCS30258, Health Center Controlled Networks, for \$1,500,000. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

### PROMISING PRACTICE OVERVIEW

The Quality Management Department of West County Health Centers (WCHC) developed and implemented Quality Watch Checklists and Action Plans to advance data literacy among staff and provide managers with tools to measure staff workload and capacity in achieving agency-wide goals. The Quality Watch process helps to support QI efforts on specific clinical areas of focus. The tool includes information about nine clinical areas including details on internal measure definitions, outline goals, which programs the measure is reportable to, clinical significance, and workflows/systems in place. Care team members complete monthly worksheets which walk them through questions about their progress/performance for each measure and takes them through checklists to assess their progress in following agency-wide workflows. This process takes about 30 minutes to complete and allows each care team member to think through issues and opportunities related to their work and develop monthly action plans for ongoing improvements.

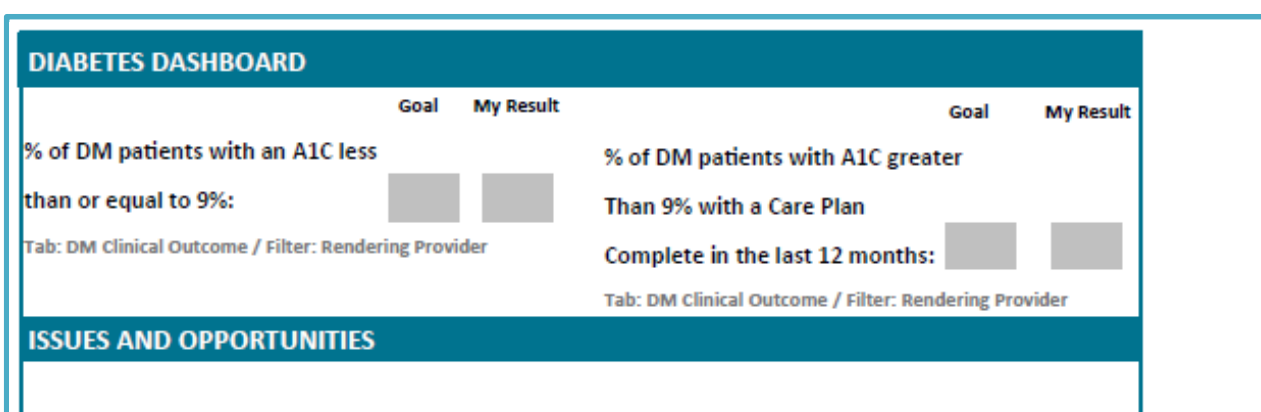
### AIM

To ensure that quality measures and performance are reviewed on a monthly basis, staff are engaged in QI activities to reach set goals, and serve as a resource and training tool to improve data literacy among care team staff.

### MEASURES

WCHC selected nine priority areas for focus in 2017 and they will select a new set for 2018. The measures align with agency-wide goals and priorities based on current initiatives and areas of opportunity.

#### Quality Watch for RN (Partial Template)



Measure	Result	Measure	Result
Number of open Telephone Encounters assigned to me:	[Progress bar]	Daily provider jelly management support: (Rx, Dx, Tlx, Lx)	[Progress bar]
Date of the oldest Telephone Encounter assigned to me:	[Progress bar]	Pap and Mammogram Tracking complete:	[Progress bar]
Number of open Documents assigned to me:	[Progress bar]	Reconciled tracked labs complete:	[Progress bar]
Date of the oldest Document assigned to me:	[Progress bar]	Performed medication reconciliation: (Rx, Hospitalizations, Consult notes)	[Progress bar]
Number of open Labs assigned to me:	[Progress bar]	Commedin management per protocol complete:	[Progress bar]
Date of the oldest Lab assigned to me:	[Progress bar]	No show/cancellation follow-up complete:	[Progress bar]
Do I have any referrals assigned to me?:	[Progress bar]	Monthly care team meeting: (at minimum)	[Progress bar]
Number of active IDPCM Patients:	[Progress bar]	Monthly check-in with CTMA:	[Progress bar]
IDPCM Items completed:	[Progress bar]	Chart prep attended huddle: (PACU, goal setting for patients being seen)	[Progress bar]
Number of transition care patients with a risk score > 20:	[Progress bar]	<b>ISSUES AND OPPORTUNITIES</b>	
Number of patients with 4 pillars complete for patients with a risk score > 20: (Face-to-face visit + 4 f/u calls)	[Progress bar]		
Number of transition care patients with a risk score < 20:	[Progress bar]		
ID f/u calls complete:	[Progress bar]		

### ACTIONS TAKEN

In April 2017, WCHC implemented a Quality Watch Checklist for care team roles including care team receptionists, front office managers, care team MAs, MA coordinators, care team nurses and clinic nurse managers. The initial purpose of the quality watch checklist was to improve data literacy and provide staff more training on reported measures, workflows and where to find data. The Care Team Quality Check Worksheet is filled out by each of the responsible roles including the agency's result and the team's result prior to the monthly care team meetings. During the care team meeting, each staff member will formulate a simple action plan using the data collected on the worksheet. The action plan is shared with the front office manager and is reviewed at the site management quality meeting and posted on the site quality board. Since implementing the Quality Watch for Care Teams, WCHC has expanded to RN managers and the Associate Director of Nursing because this process has been helpful in assessing staff workload and capacity as well as facilitating exploitation of data and getting movement on changes. Staff and providers are incentivized to complete action plans and this process has been instrumental in serving as a communication tool and documentation of staff goals for managers. Clinical areas of focus in 2017 are: PHASE ASA Prescribing, Diabetic Care Plans, Tobacco Screening, Cessation Counseling, Colorectal Cancer Screening, Cervical Cancer Screening, and Well Child Exams.

### WORKFLOW



### RESULTS TO DATE

Results are preliminary since the rollout in April 2017. WCHC's colorectal cancer screening measure for adults ages 50-75 improved from 35% in June 2017 to 37% in October 2017. This 2% improvement was achieved through data clean up that the staff were motivated to take on based on their improved understanding of the measure and clinical significance.

### LESSONS LEARNED

WCHC learned that it was helpful to have each of the clinic nurses to have completed the Quality Watch worksheet themselves prior to giving it to their staff so they can answer any questions that will come up. It is recommended that managers sit with staff to walk through the role specific worksheets and clarify any of the process measures, workflows, and expectations. WCHC uses calendar requests through Outlook to remind staff to complete the worksheets and also let them know when they should have received the next month's quality watch document to prepare for their monthly care team meetings.