



Share Your Story and Commit to Action: UCMC Start Strong

Will Morevac
Clinique Davis

Learning Objectives:

- Identify at least one way our team committed to action that you could take back to your team and try
- Identify how our team's commitment to actions over the last 90 days has resulted in system and process improvements

Where our Team was BEFORE Preoccupation with Failure (90 Days Ago)



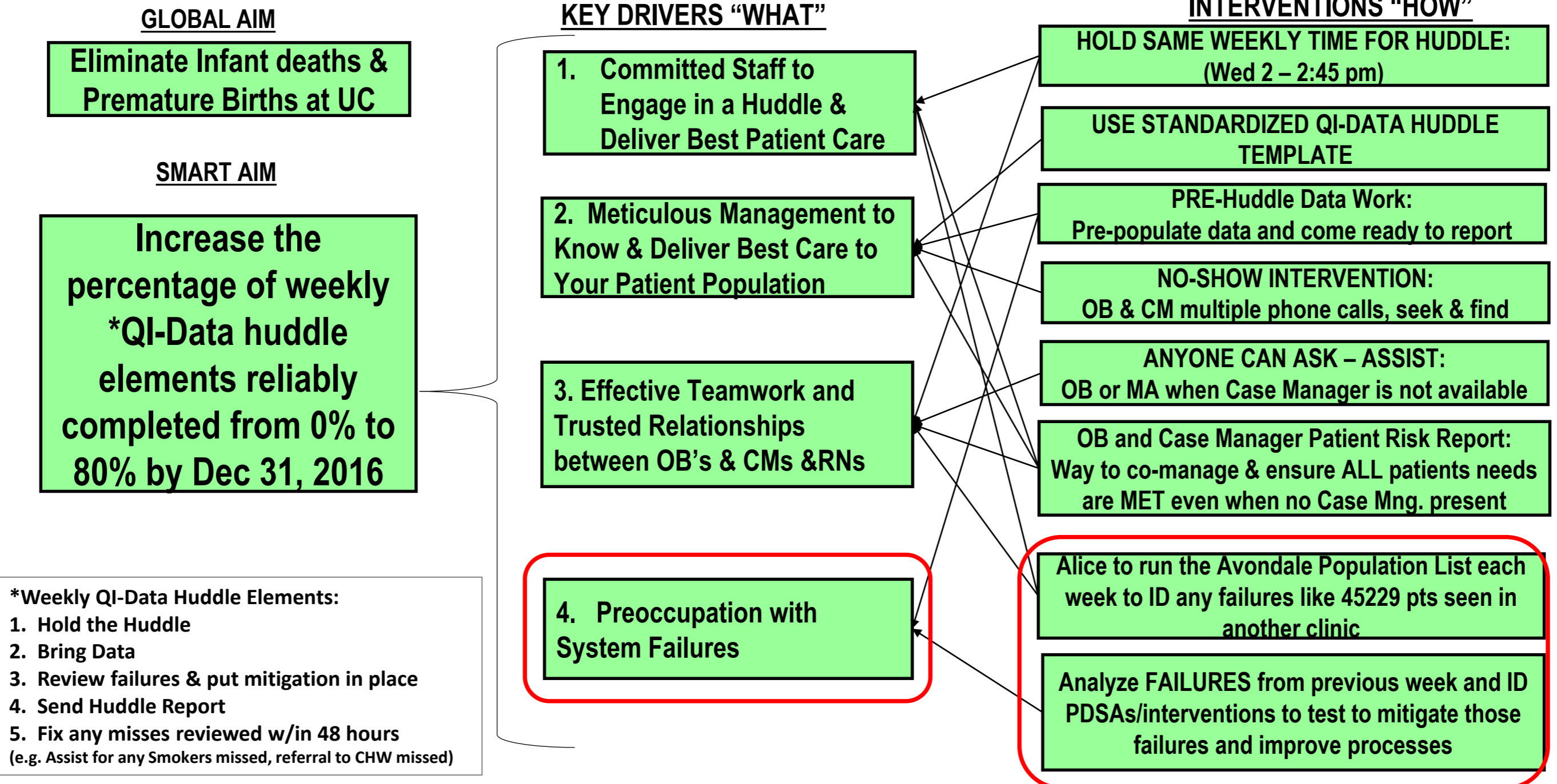
Where we are TODAY!



Rev: 11-1-16 | Ver. 5
Leader: Will Moravec

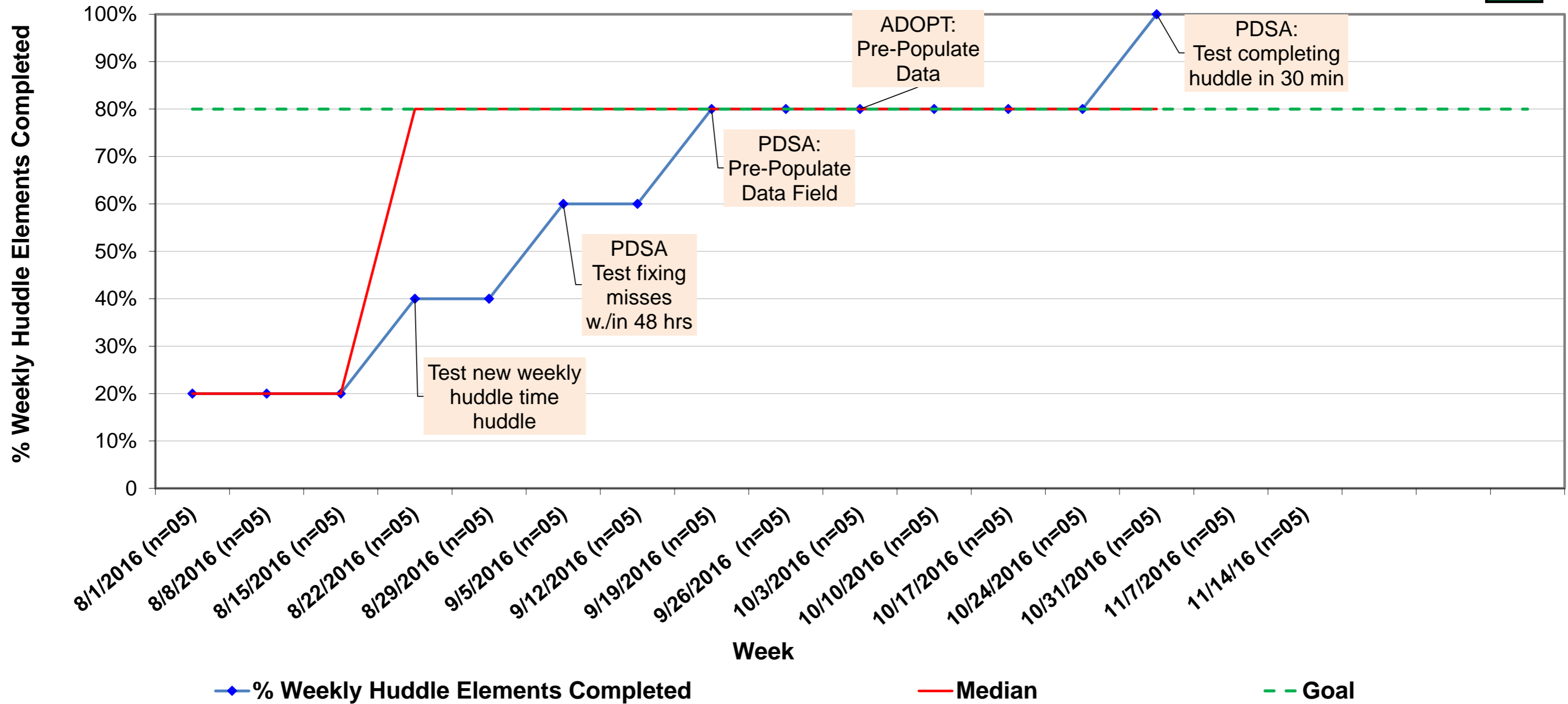
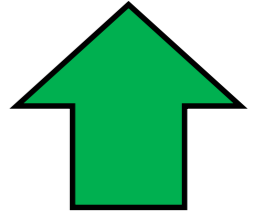
Preoccupation with System Failure: UC StartStrong - QI-Data Weekly Huddle KDD

QI Lead: Christina Williams Harding



Preoccupation with System Failure Measure (PT 4)

% of Weekly QI-Data Huddle Elements Completed
August 1- October 31, 2016



Test new weekly huddle time huddle

PDSA Test fixing misses w./in 48 hrs

PDSA: Pre-Populate Data Field

ADOPT: Pre-Populate Data

PDSA: Test completing huddle in 30 min

Commitments to Action Over the Last 90 Days

BEFORE: PRE-ACTION

- Assumed all 45229 patients were triaged to our clinic
- Assumed our processes were reliable and our patients received best care

NOW: COMMITTED TO ACTION

- CWH Nurse Manager in charge of making sure all 45229 patients are seen in Avondale Clinic
 - Meticulous tracking and reporting of any incorrect assigned patients to scheduling
- Case Manager follows up with patients seen in “Walk-In/APN” before being seen in Avondale Clinic (e.g. phone call to set up CHW referral)
- CM to be in constant communication with CHW in regards to patients assigned, no shows, domestic violence risk, etc.
- Standardized documentation of CHW name, first meeting date, etc., in a separate encounter
- Weekly QI-Data huddles to track, identify and improve system failures

Overall Learnings

- The importance of CHW communication (i.e. contact made, no show)
- Multiple phone calls throughout the week to a previous “no show” patient gets them seen quicker versus once a week attempts
- Other team members are willing to help our patients if the Case Manager (CM) is not available
- Weekly huddles are an effective intervention and improves two-way communication between the MD and CM, as MD can get other pertinent clinical information before the CM and share it
- Continuous collection of data and weekly analysis of failures allows timely interventions for our high risk patients
 - Much easier to fix a miss/ failure from last week versus waiting until the end of the month to review data and find out failures from 1-4 weeks ago

Questions