



1

Category A
Core Measures
Experiment with and
evaluate the use of
new measures Category B Category C Health Medical Home/ Information **Behavioral Health** Exchange/EHR Incorporate Mental Promote the use of health HIT and exchange to integration/screening improve quality within a medical Goal: improving children's health outcomes in SC. Healthy Connections

**How QTIP Worked with Practices** Learning Collaborative **Pediatric Practices**  Heterogeneous practices
 Identified QI Team · Face-to-face semi-annual learning sessions Quality Improvement Topic specific expert Taught technique and presentations documentation Communication Relationships building · Blog, monthly calls, in-person On-Site Visits learning sessions Technical Assistance by QTIP Maintenance of Certification (MOC) · Topic specific visits • Physicians earn Part 4 MOC · Academic Detailing credit on QI work Healthy Connections

3

5

Core
Measures

QTIP:

Introduced various measures over time which cover breadth of pediatrics

To provide useful strategies for working with core measures

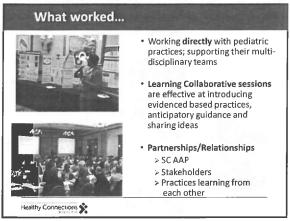
Provided anticipatory guidance

Promoted grassroots initiatives by letting the practice chose what to work on and how

Emphasized the importance of data gathering

QTIP: Behavioral Health Used AAP resources "Integrate behavioral health care within the Offered training Provided technical assistance medical home. Assisted in identifying community resources Individualized interventions Implemented a recommended screening protocol SC QTIP Recommended Routine Screening Protocol Fintroduced Jan 2013 Elementary School Adolescents Developmental Screening ALL: ASQ-3 or PEDS All: PSC – parent report All: PSC-Y 11+ Psychosocial/Environmental Risk Factors - ALL Edinburgh Post-Partum (depreserent for moms) SEEK-PSO SWYC If indicated or desired: Modified PHQ-9 CRAFFT SCARED Vanderbilt

QTIP 101 - Overview January 2019



What worked...

Keep practices engaged and activities meaningful:
Continuous messaging and technical assistance
ABP MOC Part 4 credits
Provide focus

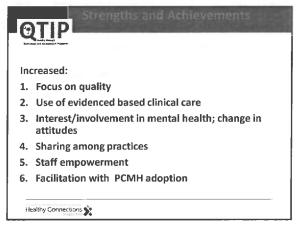
Coordination and timing important
State, DHHS initiatives
Relate to MOC and PCMH
Reimbursement

Enhancing skill sets
Teach Quality Improvement skills
Build on existing knowledge

Healthy Connections

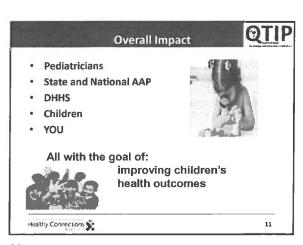
8

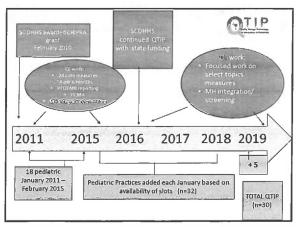
7



Challenges Cited by QTIP: Cited by Practices: Time • Data extraction Office support PCMH applicability Competing priorities • Too ambitious Reporting/documenting · Uniqueness of Implementing procedures/ pediatric practices maintaining progress Too many measures Healthy Connections

9





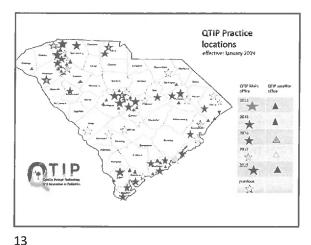
12

QTIP 101 - Overview January 2019

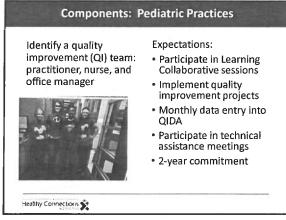
14

16

18



2019 Components: **Quality Improvement Learning Collaborative** Mental Health **Technical Assistance:** • On-Site Visits Measures of Focus Skill Building Communication **Data Collection** Healthy Connections



**Component: Pediatric Practices** What Contributed to **Practices' Success?** HINTS · Formal process/structure Meet regularly Commitment of a lead (established times) practice champion Use the on-site visit to get feedback · Buy-in from staff · Be a peer reviewer Identify a person and job · ASK for assistance Start small... pilot with one doctor, with one office tasks to oversee quality Review projects over time · Display your data Healthy Connections

15



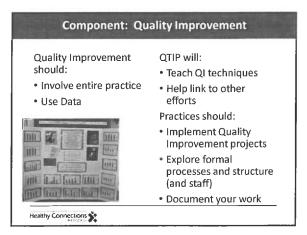
17

**Component: Technical Assistance** Technical assistance to support key messaging/concepts: On-site visits Webinars/conference calls QI coaching · Support with Mental health efforts, including community meetings and resource linkage, etc. Healthy Connections

QTIP 101 - Overview January 2019

20

22



Mental Health

Let the practices set their own priorities with the goal of moving each practice toward integration

Help connect grant activities to what practices are already doing

Frame mental health in the context of physical health

Screening protocol and reimbursement

Help identify resources

Provide a framework - along with consistent contact and messaging

Healthy Connections ★

19

Limited number of measures for focus:

• Anticipatory guidance, resources, tools, and evidenced-based best practices

• Practices chose HOW to work on measures

• ABP MOC Part 4 credit

HINTS

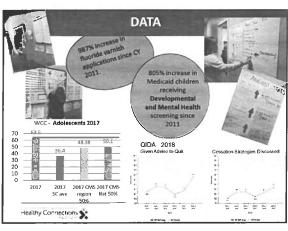
• Work on improvements with core measures is; change takes time and is on-going

• Review, Review, Review - monitor your work

• Share and learn from others

**Previous focal topics** 2018 24 months 3- 6 years
• Well child visits 6-9 months Well child visit Risk Assessments · Well child visits Vaccinations Positive parenting Screening Special · Maternal depression VaccinesSocial-environmenta Health Care Needs Family Strengths · Socio environmental screening screening Family Concerns · Family strengths BMI Oral Health Tobacco Cessation Adolescents Social Determinates Oral Health of Health Well child visits SHCN BMI Vaccinations Assessments/s Work with · Mental Health **Asthma** assessments & follow-up - General Asthma Care subspecialist Assessment for special Assessment for special . Well health care needs (SHCN) . BMI Well child visits Care plans **Asthma** · Family Strengths Adolescents BMI Healthy Connections

21



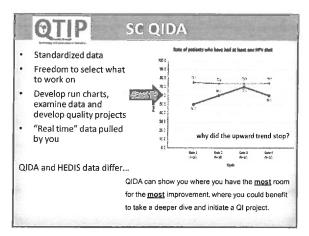
Data Collection:
SC QIDA
PDSA cycles

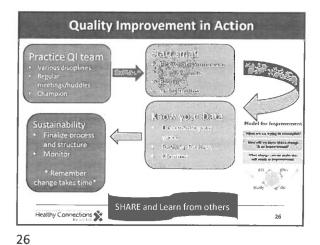
QTIP will use your data to track and report aggregate data over time ... for information and trends

Practices will use the data gathered to identify, implement and track QI projects

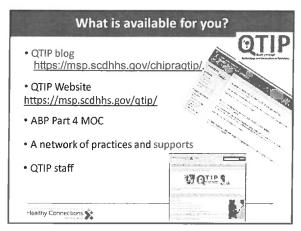
HEALTHY Connections ★

24





25



QTIP Project Director: Lynn Martin, LMSW 803-898-0093 Medical Director: Francis Rushton, MD martinly@scdhhs.gov frushton@aap.net Mental Health Coordinator: Kristine Hobbs, LMSW Quality improvement Coordinator: Laura Brandon Berry, MHP 803-898-2719 hobbs@scdhhs.gov 803-898-2128 laura.brandon@scdhhs.gov Technical Support: Liz Parham 803-898-3727 Parham@scdhhs.gov Healthy Connections 28

27