

QTIP: TRIVIA

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Disclosure Statement

Lynn Martin

- I have no relevant financial relationships with the manufacturers(s) of any commercial products(s) and/or provider of commercial services discussed in this CME activity.
- I do not intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.

QTIP TRIVIA

How much was SC awarded to administer our 5 year grant ?

A) 5.1 million

B) 9.2 million

C) 10.5

QTIP Team



QTIPs' new QI Staff:
Laura Brandon



QTIP TRIVIA

Q in the Q-TIP swab stands for:

A) Quality

B) Quick

C) Quilted



**DID QTIP
SUCCEED?**

YES!

Accomplishments

“QTIP achieved both measurable and immeasurable impacts on CHIPRA core measures, incorporating behavioral health into the pediatric medical home, enhancing medical home structures within practices and infusing a ‘culture of quality’ ”.

What worked...



STRUCTURE

- Variety of practices and team members
- Continuity
- Direct support
- Partnership
- Learning Collaborative
- Teaching QI

QTIP TRIVIA

What were the 2 most frequent PDSA topics documented by QTIP practices?

- A) Asthma and Preventative Dental
- B) Preventative Dental and Developmental Screening
- C) Mental Health and Developmental Screening

QTIP Award

**Most QI meetings
documented on blog in
2016**

**LRMC and
BJHCHS**

CORE MEASURES

- Change in performance (2011-2013)
As a group, QTIP practices improved on 16 core measures (11 statistically significant).
 - Dental (2)
 - Well child visits (3)
 - Weight Management (1)
 - Access (2)
 - Developmental Screening (3)
- Increased skills in collecting quality measures

QTIP TRIVIA

What core measures did QTIP as a group show the most improvement between 2011 and 2015?

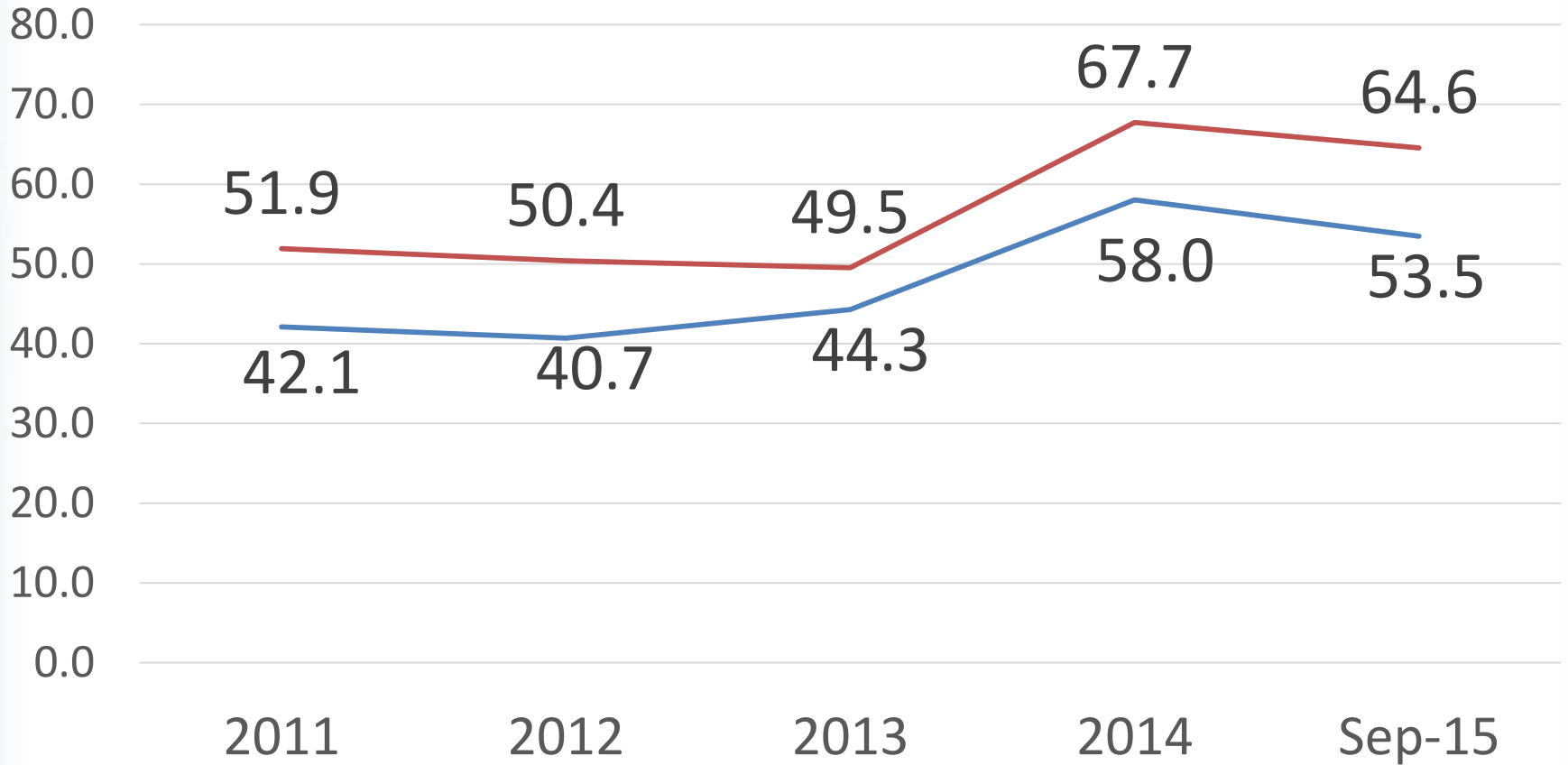
A) Developmental Screening and ADHD

B) BMI and Well Child Visits 6+ in the 1st 15 months of life

C) ADHD and WCV 6+

HEDIS

ADHD



- ADD - Reported rate - Initiation 27% change
- ADD - Reported rate - Continuation 23% change

Impact of the collection of core measures

Pediatric practice and performance:

- New scheduling strategies
- Protocols for quality measures
- Routine assessment /screening
- Routine efforts to educate patients/families
- Utilized practice personnel in different ways
- QI as routine
- EHR and billing procedures changed

Nationally

- Provided input on usefulness of core measures

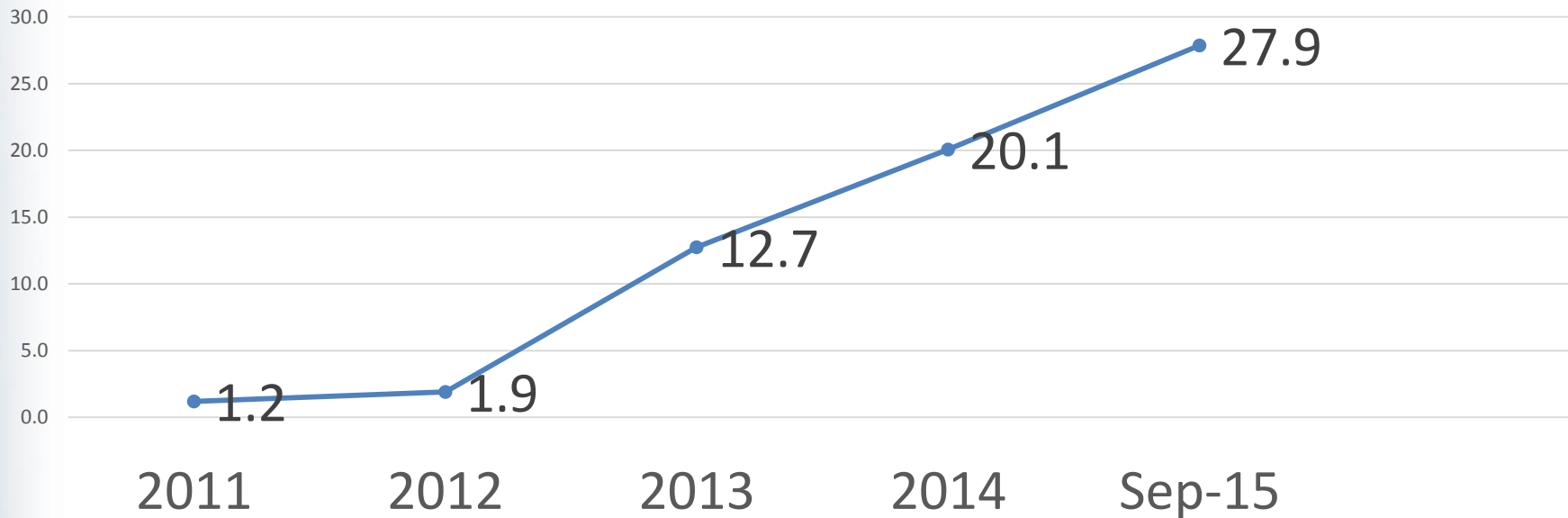
QTIP 2011

Quality Measure Year SEP2015

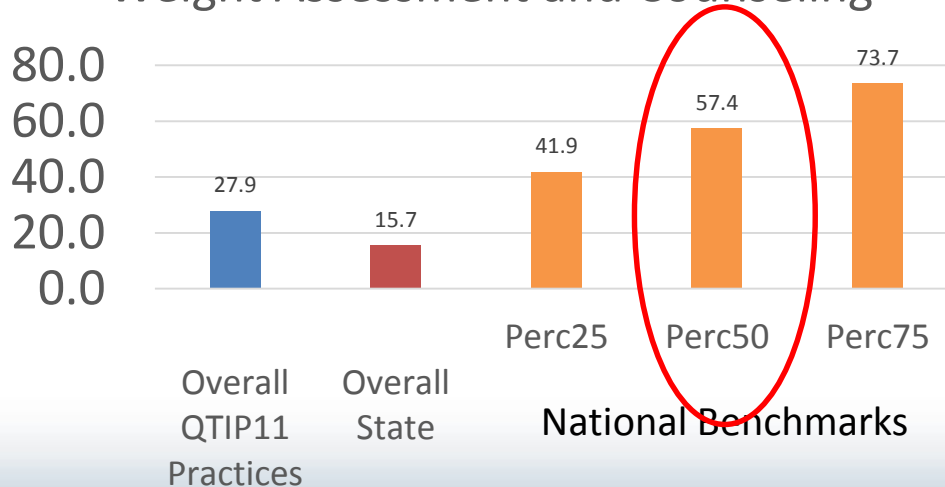
QTIP 11 represents the "original" 18 practices who were engaged with QTIP from 2011 - 2014

		Overall QTIP11	Overall State	National Perc50	National Perc75
Adolescent Well-Care Visits	AWC - Reported Rate	55.3	30.6	48.5	59.2
Annual Dental Visits	ADV - Rate - 2-3 Years	41.2	36.9	37.5	44.0
Appropriate Testing for Children With Pharyngitis	CWP - Reported Rate	77.0	72.5	68.5	78.0
Appropriate Treatment for Children With Upper Respiratory Infection†	URI - Reported Rate	90.0	85.0	86.1	91.2
Children and Adolescents' Access to Primary Care Practitioners	CAP - Rate 12-24 Months	99.6	91.5	97.0	97.9
	CAP - Rate 25 Months-6 Years	98.2	81.5	89.1	91.7
	CAP - Rate - 7-11 Years	98.9	86.9	91.2	93.5
	CAP - Rate - 12-19 Years	99.1	83.7	90.0	92.2
Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication	ADD - Reported rate Initiation	53.5	52.0	41.1	47.0
	ADD - Reported rate Continuation	64.6	60.4	49.5	57.6
Use of Appropriate Medications for People with Asthma	ASM - Rate - 5-11 Years	91.6	88.1	91.1	93.6
	ASM - Rate - 12-18 Years	89.8	85.1	87.3	89.5
	ASM - Rate - Total	90.8	84.2	84.9	87.2
Well-Child Visits in the First 15 Months of Life	W15 - zero visits Rate *	1.4	3.4	1.5	2.6
	W15 - one visit Rate	1.5	2.4	1.6	2.4
	W15 - two visits Rate	2.6	3.7	2.6	3.7
	W15 - three visits Rate	4.9	5.8	4.9	6.3
	W15 - four visits Rate	10.4	10.6	9.2	11.9
	W15 - five visits Rate	20.9	19.3	16.0	18.7
	W15 - Six or More visits Rate	58.4	54.6	62.9	69.8

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents



Weight Assessment and Counseling



What worked...

Health Information Technology/ Electronic Medical Records

- Increased HIT adoption and utilization
- Implemented a transferrable and scalable data collection method useful to a variety of practices
- Identified strengths and challenges of administrative claims and EMR data

QTIP: TRIVIA

Of the original 18 practices, how many EMR changes occurred between 2011 and 2014?

A) 12

B) 15

C) 19

PCMH

- Increased number of NCQA-recognized PCMH pediatric practices
- Helped make recommendations on SCDHHS policy



National Committee for Quality Assurance
Patient-Centered Medical Homes

MENTAL HEALTH

- Changes in attitude and behavior
- Increased screening using nationally validated tools
- Improved access to and satisfaction with MH services
 - Increased delivery of mental health service
 - Increased awareness and use of community resources
 - Increased integration
 - Open dialogue

QTIP: TRIVIA

QTIP practices' (overall) level of integration increase was ?

A) 6%

B) 11%

C) 15%



Developmental Screenings

88% to 100%

Adolescent Depression Screenings

~58% to 100%

Family MH and substance abuse

~54% to 85%

WOW!

Impact of QTIP on the State

Practice level

- ☾🌴 Culture of quality
- ☾🌴 Relationships
- ☾🌴 Incorporating & sustaining non-traditional services

System level

- ☾🌴 Framework for other initiatives
- ☾🌴 Dialogue
- ☾🌴 Transferrable skill sets
- ☾🌴 Partnerships

QTIP: TRIVIA

What percentage of Medicaid eligible children are served by current QTIP practices?

A) 30 %

B) 26%

C) 41%

**QTIP Award
for “Sticking your
Neck Out”**

Deandra
Clark, MD

AnMed

**QTIP Award
for “Sticking your
Neck Out” with
innovative approaches**

**Debbie
Greenhouse,
MD
Palmetto
Pediatrics**

2016 - 2017

January – June 2016

- 27 active practices
- Learning Collaborative
- Bright Futures
- QIDA
- Updated MOC
- Technical Assistance

QTIP: TRIVIA

How many visits has Kristine made during the past 12 months?

A) 62

B) 94

C) 126



QTIP Award

for persistence and
participation during
community visits

Grand
Strand
Pediatrics

Bright Futures (PreSIPS2)



- SC is one of 4 states awarded a grant from the National AAP
- 24 active SC offices
- Focus:
 - 9 and 24 month well child visits
 - Screenings and risk assessments
- Time Frames:
 - “live” January 2016
 - November 2016 project concludes with final data pull
- QIDA

Bright Futures
Results

W O W

Documentation of Patient/Family
concerns

93% (9 mo.)

90% (24 mo.)

9 Months
24 Months

Performing Age Appropriate Medical
Screening (measure and plot weight)

99% (9 mo.)

98% (24 mo.)

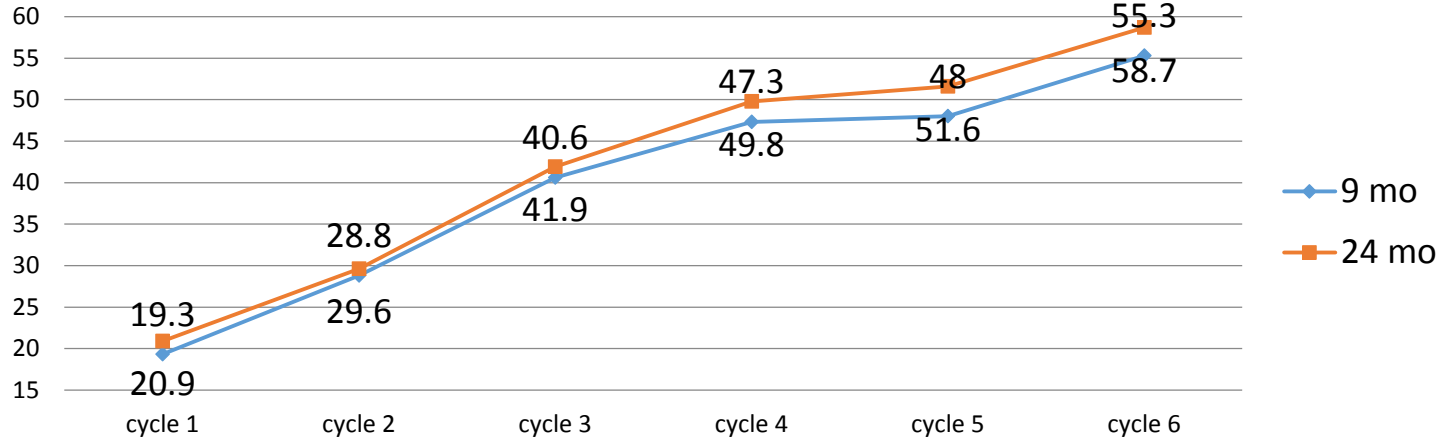
Perform Developmental Screening

81% (9 mo.)

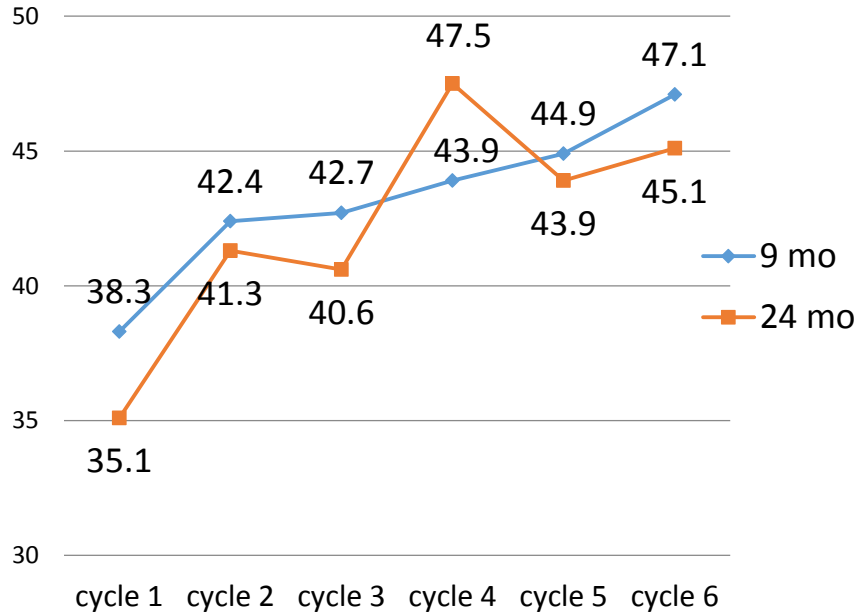
Perform Oral Health Risk Assessments

87% (24 mo.)

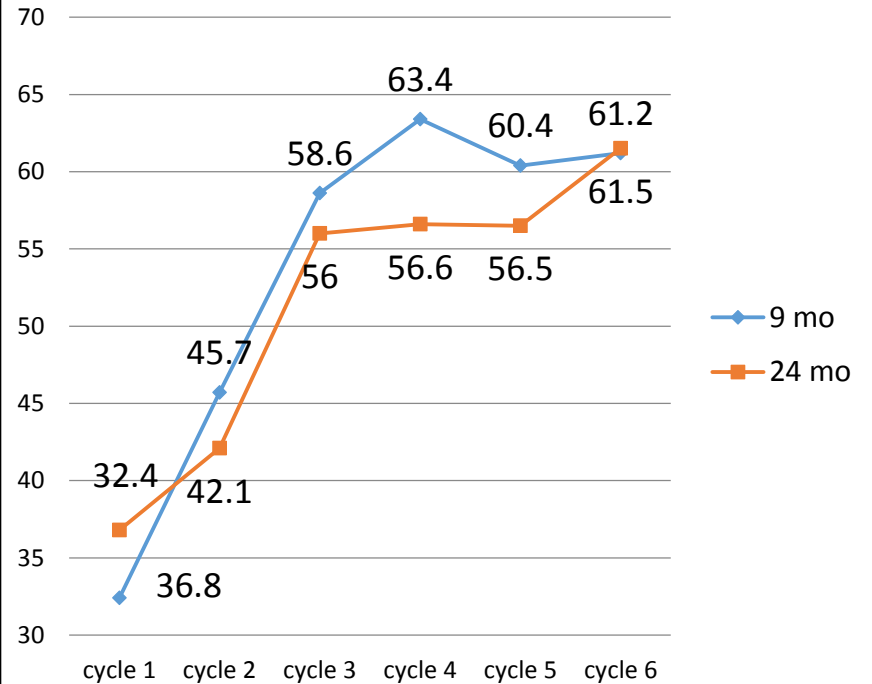
Identify Family Strengths



Social Determinates of Health



Age Appropriate Risk Assessments



QTIP Award

**Bright Futures Data
Submission
“Early Bird”**

Amanda
McDuffie
Salerno
Pediatrics

**We would like to
ACKNOWLEDGE offices
who started
participating in Bright
Futures**

July – December 2016

- Learning Collaborative
- Technical Assistance
- Complete Bright Futures Nov 2016 final data pull

2017

- Learning collaborative (LC) sessions/year
(WCV, adolescent, BMI)
- Provide **technical assistance**
 - Site visits
 - Provide training on quality improvement topics or techniques
 - Continue mental health integration efforts
 - Monthly calls
- QIDA



MCO Incentives and Withholds 2017

Pediatric Preventative Care

- Well-Child Visits in the first 15 months of Life (6 visits)
- Well Child Visits in the 3rd, 4th and 5th and 6th years of life
- Adolescent Well-Care Visits
- Weight Assessment and Counseling for Nutrition and Physical Active for children/adolescents: BMI percentile total.

QIDA group A

(Jan, Mar, May, July, Sept, and Nov)

6-9 months

- Well child visits
- Vaccinations
- Maternal depression
- Socio environmental screening
- Family strengths

Adolescents

- PCP
- Well child
- Vaccinations
- Mental Health assessments and follow-up
- Risk Assessments
- Assessment for special health care needs
- Family Strengths
- BMI

QIDA group B

(Feb, Apr, June, Aug, Oct and Dec)

24 months

- Well child visit
- Risk Assessments
- Screening special Health Care Needs
- Family strengths
- Family Concerns
- Oral Health
- Social determinates of Health
- BMI

Asthma

- General Asthma Care
- PCP
- Well child visits
- BMI

DRAFT

QTIP: TRIVIA

Who are the QTIP Rock Stars?

A) You

B) You

C) You





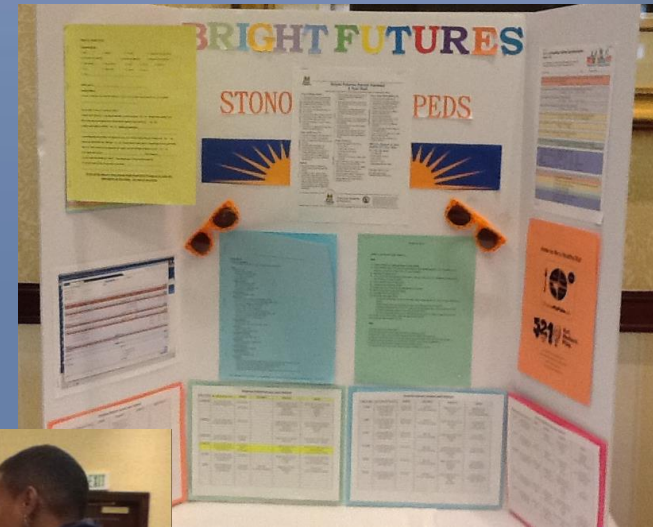
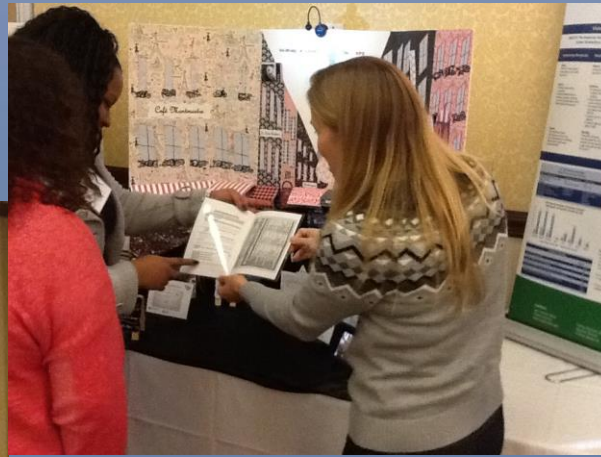
wants your Feedback

- Small groups
- QTIP awards
- Story Boards
- Dr. Khetpal

Considering/need feedback:

- QTIP Mentor?
- Ways to keep QTIP interesting
- QI workshop topics ?
- QI Coordinators group ?

Thank you for being part of QTIP and making QTIP a success!





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