# Davies Award Site Visit


## El Rio Health
## Tucson, Arizona

**September 14, 2018**

EL RIO
HEALTH

# Mission & Values

Improving the health of our community through comprehensive, accessible, affordable, quality and compassionate care.

**Step Up**
I am accountable for making El Rio a world class health center.

**I Matter**
I make a difference by voicing my opinions and knowing I am heard.

**Break Boundaries**
I work with others to achieve success.

**Value Health**
I take time for my own health to promote yours.

**Create Tomorrow**
I embrace effective change and seek innovative solutions.

**Honor Patients**
I always put the patients first.

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NCQA RECOGNIZED PRACTICE

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# About Us

## History

**1970- Opened in October**

- Serving patients as El Rio Santa Cruz Neighborhood Health Center

**1971- A Federally Qualified Health Center**

- Organization that receives a grant under section 330 of the Public Health Service.

**1974- A Non-for-Profit**

- Managed by a Community Board of Directors – CEO/Executive Director and Senior Staff.

## A Nationally Recognized Organization

**2010- Joint Commission**

- El Rio was accredited for both Clinical and Diagnostic Laboratory Services

**2010- National Committee for Quality Assurance (NCQA)**

- El Rio was granted a Level-3 Patient Centered Medical Home (PCMH)

**2018- Healthcare Equality Index (HEI)**

- El Rio was recognized as leaders in LGBTQ Healthcare Equality Index

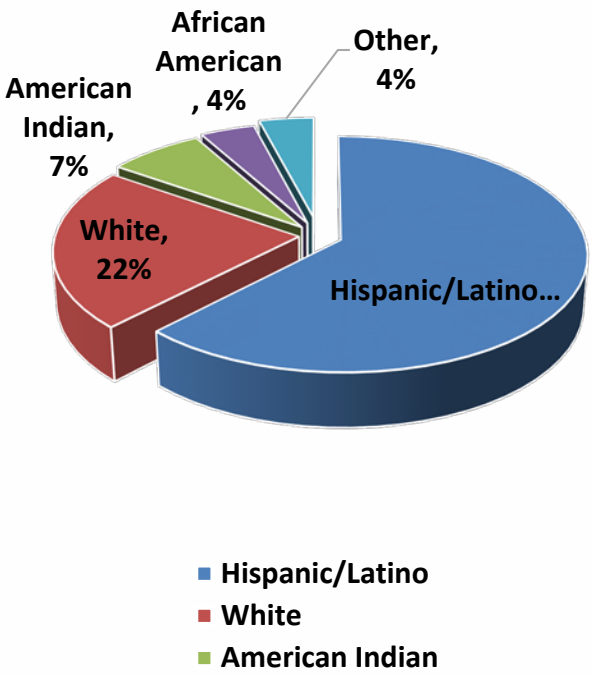
EL RIO HEALTH

# Our Practice

### 2017 UDS Data

- Total # of Patients Served: 101, 563
- Total # of Patient Visits: 389, 303
- # of Employees: 1, 156
- # of Unique Clinic Sites: 14
- Number of Providers: 211
  - 140 Medical Providers
  - 31 Dental
  - 24 Behavioral Health
  - 16 Clinical Pharmacists

### El Rio Patients by Race/Ethnicity




### Patients by Payer Source

- Medicaid: 55%
- Private: 21%
- Uninsured: 12%
- Medicare: 11%

- 64% of patients live below the Federal Poverty Line

EL RIO HEALTH

# EL RIO HEALTH HAS MULTIPLE LOCATIONS IN TUCSON TO SERVE YOU AND YOUR FAMILY.

More than **95,000** people in Tucson come to El Rio Health for medical, dental, behavioral health & other health care services


1. **Birth & Women's Health Center**
   5979 E. Grant Road, #107
2. **Broadway Health Center**
   1101 E. Broadway Blvd.
3. **Cherrybell Health Center**
   1538 E 22nd St.
4. **Congress Health Center**
   839 W. Congress Street
5. **El Pueblo Health Center**
   101 W. Irvington Rd, Bldg #100
6. **HealthOn Broadway**
   One West Broadway Blvd..
7. **Northwest Health Center**
   320 W. Prince Road
8. **OB / GYN Associates**
   225 W. Irvington Rd.
9. **Pascua Yaqui Health Center**
   7490 S. Camino de Oeste
10. **Southeast Health Center**
    6950 E. Golf Links
11. **Southwest Health Center**
    1500 W. Commerce Court
12. **Special Immunology Associates**
    1701 W. St. Mary's Road, #160

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# 2018 Key Results

**WORLD CLASS EXPERIENCE FOR PATIENTS AND EMPLOYEES**

25%

- **Patient World Class Experience**
  - Overall satisfaction at patient appointment [Poor, Fair, Good, Excellent, NA].
    *Baseline = 90.6 Mean Score* **2018 Goal = 93 Mean Score**
    - Length of time to get an appointment
    - Courtesy of person with whom you spoke
    - Courtesy and helpfulness of check-in staff
    - Length of time waiting to see the provider

5%

- **Employee World Class Experience**
  - Increase employee quarterly survey response.
    *Baseline = 325* **2018 Goal = 500**

30%

**HEALTHIER PATIENTS AND EMPLOYEES**

- **Healthier Patients**
  - Decrease Emergency Room Visits
    **2018 Goal = 600/1,000**
  - Decrease Hospital Readmissions (w/in 30 days)
    **2018 Goal = 8.9%**
  - Increase Patient Portal Use (minimum 1 bidirectional interaction)
    **2018 Goal = 30,000**
  - Decrease overall patient "no-show" percentages across El Rio
    **2018 Goal = 12%**
- **Healthier Employees**
  - Decrease Emergency Room Visits
    **2018 Goal = 290**
  - Increase Employee Patient Portal Use (minimum 1 bidirectional interaction)
    **2018 Goal = 500**

40%

**POSITIVE FINANCIAL RESULTS**

- **Operating Margin**: Achieve an **Operating Margin of 4.5%.** Stretch goal 5.5% for 2018.

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# Integrated Cascading Dashboard

Below Threshold | Meets or Exceeds Threshold | Meets or Exceeds Target | Meets or Exceeds Stretch Goal

| Pillar | Measure | Goal | 2014 | 2015 | 2016 | 1Q 2016 | 2Q 2016 | 3Q 2016 | 4Q 2016 | 1Q 2017 | 2Q 2017 | 3Q 2017 | 4Q 2017 | 2Q14 - 2Q17 Quarterly Trend | Threshold | Target | Stretch Goal | Notes |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Quality | Adolescent Well-Care Visits [12-21] | Increase the percentage of patients aged 12-21 who have one or more comprehensive well-care visits during the measurement year | 50.6% | 46.7% | 50.4% | 47.1% | 46.7% | 47.8% | 50.4% | 51.8% | 51.6% | 50.4% | 55.5% | | 45.0% | 50.0% | 55.0% | Target = 2014 HEDIS Medicaid HMO mean; Stretch Goal = Internally Selected Goal |
| Quality | Asthma Pharmacologic Therapy [5-64] | Increase the percentage of asthma patients aged 5-64 who were prescribed an accepted pharmacologic therapy during the measurement year | 87.9% | 85.9% | 82.1% | 86.2% | 85.9% | 82.5% | 82.1% | 82.9% | 84.0% | 83.5% | 83.5% | | 84.2% | 89.1% | 90.1% | Threshold = 2015 UDS National Mean; Target = 2016 330 Goal; Stretch Goal = 2018 330 Goal |
| Quality | Breast Cancer Screening [50-74] | Increase the percentage of female patients aged 50-74 who received a mammogram in the previous two years | 78.6% | 74.2% | 75.9% | 74.2% | 74.2% | 75.0% | 75.9% | 76.6% | 78.0% | 79.6% | 82.9% | | 72.8% | 80.9% | 82.9% | Target = 2016 330 Goal; Stretch Goal = 2018 330 Goal; We consistently exceed 2014 HEDIS Medicaid HMO (58.8%) benchmark. |
| Quality | Cervical Cancer Screening [21-64] | Increase the percentage of female patients aged 21-64 who received a Pap test in the previous three years (or if over 30 and accompanied by an HPV test, the previous five years) | 72.2% | 73.6% | 75.2% | 73.0% | 73.6% | 74.9% | 75.2% | 75.9% | 77.0% | 77.8% | 77.7% | | 54.5% | 60.6% | 76.3% | Target = 2016 330 Goal; Stretch Goal = 2014 HEDIS Commercial HMO Mean. We consistently exceed 2015 UDS National (56.0%) benchmark. |
| Quality | Colorectal Cancer Screening [50-75] | Increase the percentage of patients aged 50-75 who received an appropriate screening for colorectal cancer in its corresponding time frame | 53.2% | 57.7% | 59.0% | 57.1% | 57.7% | 58.0% | 59.0% | 59.5% | 60.9% | 61.4% | 60.3% | | 38.4% | 49.5% | 60.0% | Threshold = 2015 UDS National mean; Target = 2016 330 Goal; Stretch Goal = 2018 330 Goal |
| Quality | Combo 10 Immunizations [by Age 2] | Increase the percentage of patients who received all of the required Combo 10 immunizations by their 3rd birthday | 35.3% | 42.0% | 40.7% | 34.0% | 42.0% | 41.9% | 40.7% | 41.1% | 43.6% | 43.1% | 42.8% | | 32.5% | 36.1% | 51.5% | Target = 2014 HEDIS Medicaid HMO Mean; Stretch Goal = 2014 HEDIS Commercial HMO Mean |
| Quality | Coronary Artery Disease (CAD) Lipid Therapy [18+] | Increase the percentage of patients with CAD aged 18+ who were prescribed a lipid-lowering therapy during the measurement year | 88.5% | 90.2% | 90.6% | 89.3% | 90.2% | 90.3% | 90.6% | 90.4% | 90.4% | 91.4% | 91.1% | | 76.5% | 85.0% | 87.1% | Target & Stretch Goals = Internally Selected Goals. We consistently exceed 2015 UDS National (77.9%) benchmark. |
| Quality | Depression Screening and Follow-up [12+] | Increase the percentage of patients aged 12+ who were screened for depression using a standardized tool and (if screened positive) had a follow-up plan documented during the measurement year | 69.2% | 76.9% | 82.8% | 76.9% | 76.9% | 79.4% | 82.8% | 82.4% | 82.9% | 83.8% | 86.8% | | 61.3% | 68.1% | 82.0% | Target = 2016 330 Goal; Stretch Goal = Internally Selected Goal. We consistently exceed the 2015 UDS (50.6%) benchmark. |
| Quality | Diabetic Eye Exam [18-75] | Increase the percentage of diabetic patients aged 18-75 who received an eye exam during the measurement year | 30.0% | 36.1% | 35.7% | 30.4% | 36.1% | 41.6% | 51.8% | 58.2% | 59.2% | 59.3% | 55.2% | | 33.6% | 37.3% | 54.4% | Target = Internally Selected Goal; Stretch Goal = 2014 HEDIS Medicaid HMO Mean |
| Quality | Diabetic HbA1c Control [18-75] | Increase the percentage of diabetic patients aged 18-75 whose most recent HbA1c reading was ≤ 9% | 64.8% | 65.7% | 65.5% | 66.3% | 65.7% | 65.0% | 65.5% | 65.5% | 66.4% | 66.4% | 65.5% | | 60.8% | 67.5% | 72.0% | Target = 2015 Organizational Goal; Stretch Goal = 2015 330 Goal; The 2015 UDS benchmark is 70.2%. |
| Quality | Flu Vaccination [18-64] | Increase the percentage of patients aged 18-64 who received a flu vaccine during the measurement year's flu season (September 1 - March 31) | 45.9% | 43.4% | 53.4% | 45.1% | 43.4% | 47.0% | 53.4% | 47.1% | 47.5% | 49.4% | 56.1% | | 45.2% | 50.2% | 80.0% | Target = 2014 HEDIS Commercial HMO Mean; Stretch Goal = HP 2020 Target |
| Quality | Flu Vaccination - Homeless [18-64] | Increase the percentage of patients aged 18-64 who received a flu vaccine during the measurement year's flu season (September 1 - March 31) | 48.2% | 49.6% | 51.9% | 56.2% | 49.6% | 48.0% | 51.9% | 58.7% | 51.3% | 51.7% | 52.8% | | 53.7% | 59.7% | 66.4% | Target = 2016 330 Goal; Stretch Goal = 2018 330 Goal |
| Quality | Flu Vaccination [65+] | Increase the percentage of patients aged 65+ who received a flu vaccine during the measurement year's flu season (September 1 - March 31) | 72.7% | 59.3% | 73.3% | 64.5% | 59.3% | 66.6% | 73.3% | 66.5% | 67.3% | 69.3% | 74.9% | | 64.6% | 71.8% | 90.0% | Target = 2014 HEDIS Medicare HMO Mean; Stretch Goal = HP 2020 Target |
| Quality | High Blood Pressure Control [18-85] | Increase the percentage of hypertensive patients aged 18-85 whose most recent blood pressure measurement was <140/90 | 63.0% | 62.0% | 62.9% | 60.8% | 62.0% | 64.5% | 62.9% | 62.4% | 64.7% | 65.4% | 63.6% | | 56.8% | 63.1% | 65.1% | Target = 2016 330 Goal; Stretch Goal = 2018 330 Goal. We consistently exceed HP2020 (61.2%) and 2014 HEDIS Medicaid (57.1%) benchmarks. |
| Quality | Ischemic Vascular Disease (IVD) Therapy [18+] | Increase the percentage of patients aged 18+ with IVD or who were discharged for AMI/CABG/PTCA who were prescribed an antithrombotic therapy during the measurement year | 99.5% | 99.0% | 99.8% | 99.4% | 99.0% | 99.0% | 99.8% | 99.8% | 100.0% | 99.9% | 99.9% | | 89.5% | 99.4% | 99.6% | Target = 2016 330 Goal; Stretch Goal = 2018 330 Goal; We consistently exceed 2015 UDS National (78.0%) benchmark. |
| Quality | Pediatric Oral Health [6-9] | Increase the percentage of "elevated" risk patients aged 6-9 years who received a sealant on a permanent first molar tooth within the measurement year | 47.2% | 51.4% | 53.7% | 48.2% | 51.4% | 53.6% | 53.7% | 54.0% | 56.4% | 59.2% | 55.6% | | 38.7% | 43.0% | 47.0% | Target = 2016 330 Goal; Stretch Goal = 2018 330 Goal; We consistently exceed HP 2020 (28.1%) benchmark. |
| Quality | Pneumococcal Vaccination [65+] | Increase the percentage of patients aged 65+ who have ever received a pneumococcal vaccine | 88.6% | 83.9% | 82.7% | 84.9% | 83.9% | 83.3% | 82.7% | 83.4% | 83.5% | 83.2% | 81.9% | | 63.2% | 70.2% | 90.0% | Target = 2013 HEDIS Medicare HMO Mean; Stretch Goal = HP 2020 Target |
| Quality | Tobacco Use Screening and Cessation Intervention [18+] | Increase the percentage of patients aged 18+ who were screened for tobacco use within 2 years of their most recent visit and who received cessation counseling intervention and/or pharmacotherapy if identified as a tobacco user | 81.2% | 81.1% | 81.5% | 81.0% | 81.1% | 81.3% | 81.5% | 81.4% | 81.5% | 81.0% | 81.6% | | 70.4% | 78.2% | 82.8% | Target = 2016 330 Goal; Stretch Goal = 2015 UDS National Mean |

Threshold = 90% of Target except where noted.
Targets and Stretch Goals are based on organizational goals and/or external benchmarks (when available).

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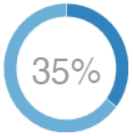
# Relevant Cascading Dashboard (HbA1c)

COMPLIANCE



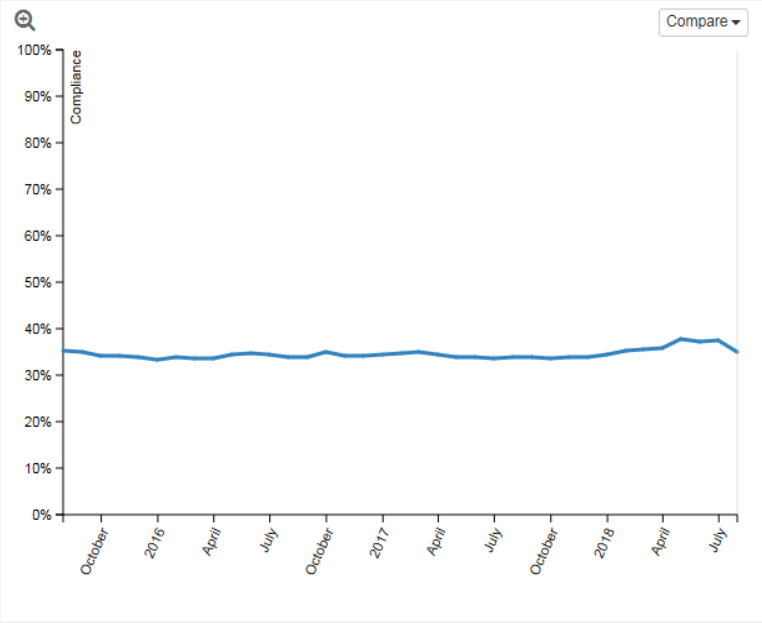

3,397
9,678
0 exclusions

TARGET

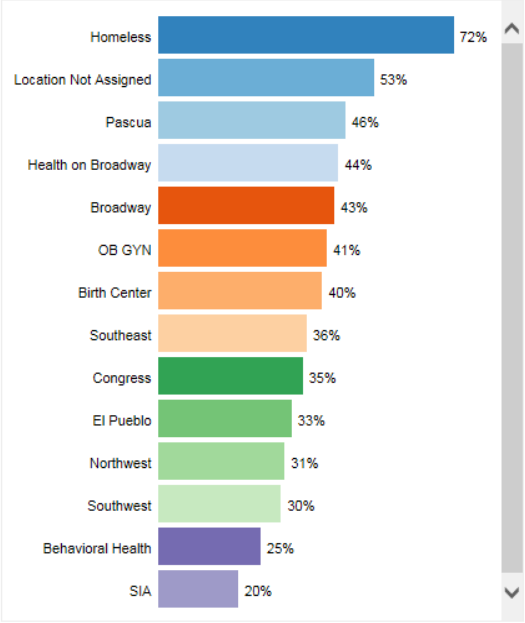
FILTERS

No filters selected

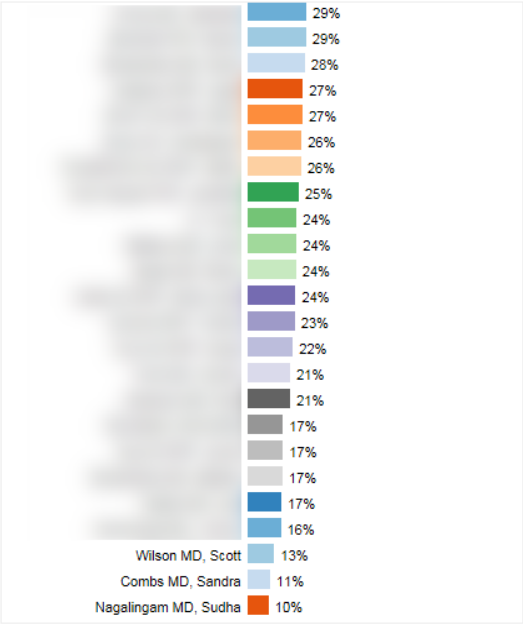
Compliance trend




Compliance by Location




Compliance by Provider

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# Well-Child Visits in the 3rd, 4th, 5th, & 6th Years of Life: 3Q15 - 2Q18

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| | |
|---|---|
| **Goal** | Increase the percentage of patients aged 3-6 years who had 1 or more well-child visits during the measurement year |
| **Benchmark** | 76.8% (2016 HEDIS Commercial HMO Mean)<br>72.2% (2016 HEDIS Medicaid HMO Mean)<br>74.2% (2016 HEDIS Commercial PPO Mean) |
| **Numerator** | 5,455 patients aged 3-6 years who had one or more well-child visits during the measurement year |
| **Denominator** | 7,025 patients who turned 3, 4, 5, or 6 years old during the measurement year |
| **Quarter** | 2nd Quarter (April – June 2018) |

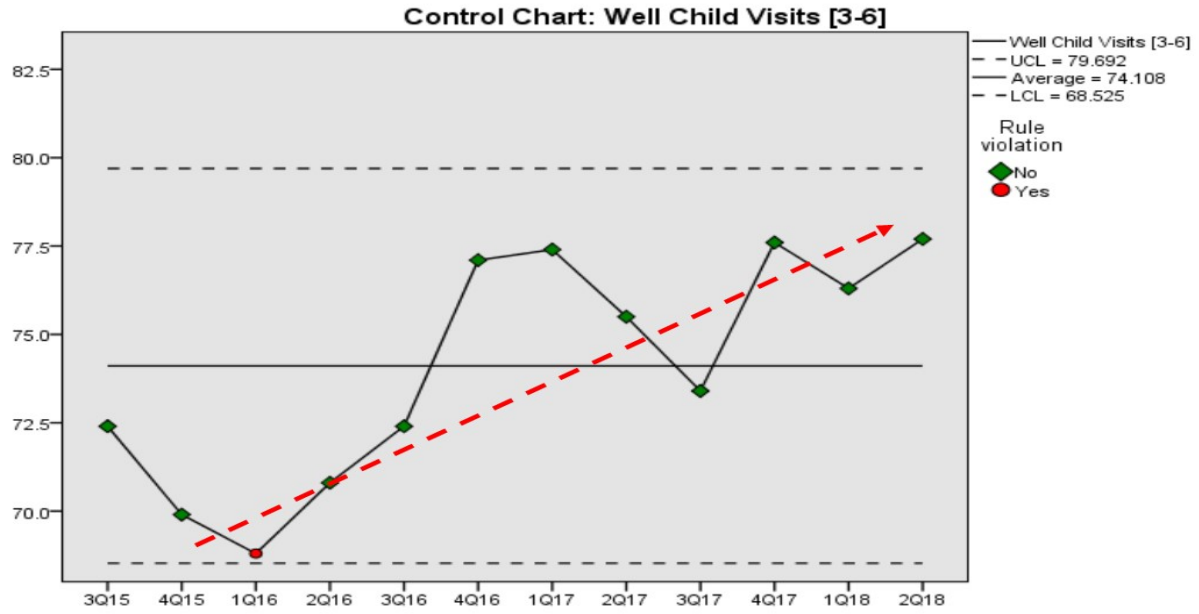
| | |
|---|---|
| **Interpretation** | The data demonstrates no significant trend while consistently maintaining compliance rates above 70%. |
| **Action Plan** | Continue to utilize provider specific missed opportunity reports as well as disseminate best practices from SW clinic QI project to other pediatric sites. |

**Control Rules (Special Cause Variation)**

- One point outside the upper or lower control limits (3 SD)
- Two out of three successive points more than 2 SD from the mean on the same side of the center line
- Four out of five successive points more than 1 SD from the mean on the same side of the center line
- Eight successive points on the same side of center line
- Six successive points increasing or decreasing (a trend)
- Obvious cyclic behavior (14 in a row alternating)

**Rule Violations**

| Month | Violation |
|---|---|
| 1Q16 | 2 points out of the last 3 below –2 sigma |

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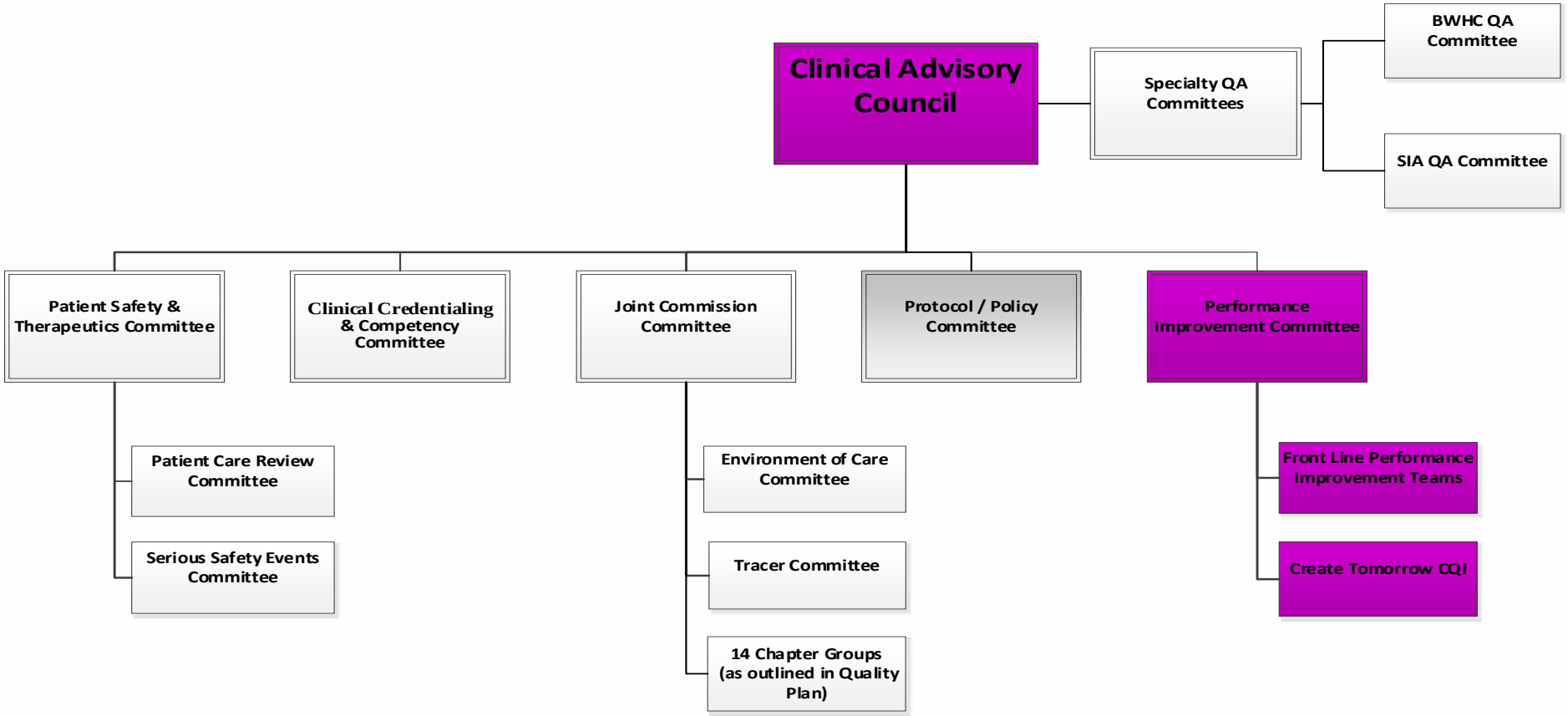
# Create Tomorrow Quality Improvement Governance

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# Create Tomorrow Quality Improvement Projects

- Abnormal lab and results Tracking
- Human DX/IPE NACHC Collaborative
- At-Risk Teen Project
- National Collaborative for Transforming Primary Care for LGBTQ People
- Team-Based Care Learning Collaborative
- STI Screening in Teens
- HIV/HEP-C Screening Opt Out Program
- Six Sigma Projects:
  - Diabetic HbA1c >9 Control
  - Provider Capacity
  - Eligibility & Coding Error Denials

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# El Rio IT Department- Quick Facts

- All IT functions are in-house – close to 50 employees
- Host our own data center
- NextGen EHR system for 10 years
  - Medical
  - Dental
- IT Leadership team
  - Deep knowledge of FQHC's
  - Health IT
  - Data analytics
- Knowledge resource for other agencies
- Clinical and operational leadership work collaboratively with IT on QI

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# Other Innovative Healthcare IT Projects

- Telehealth/Virtual visits
- Collection of SDOH and other clinical data on a tablet- entered by patient
- Patient self check-in through Kiosks
- Online scheduling, form completion, and check-in
- HIE and other interoperability partnerships (API's) – care coordination, continuity of care, closing gaps in care, and is linked to increased value based payments

# Case Study: 24 Month Old Autism Screening


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# Autism Spectrum Disorder

- As of 2018, 1 in 59 children has been identified with Autism Spectrum Disorder (ASD)
- Research has shown that autism can be reasonably detected by age 2
- Average age of diagnosis of ASD is 4-6 years old
- Early detection and treatment are key to improved outcomes
- AAP recommends universal screening at 18 and 24 months old with a standardized tool

# Barriers to Screening

Waiting for patients to schedule their well visit without timely outreach

Inconsistency in provider adherence to AAP autism screening timelines

Provider does not regularly remember to administer screening

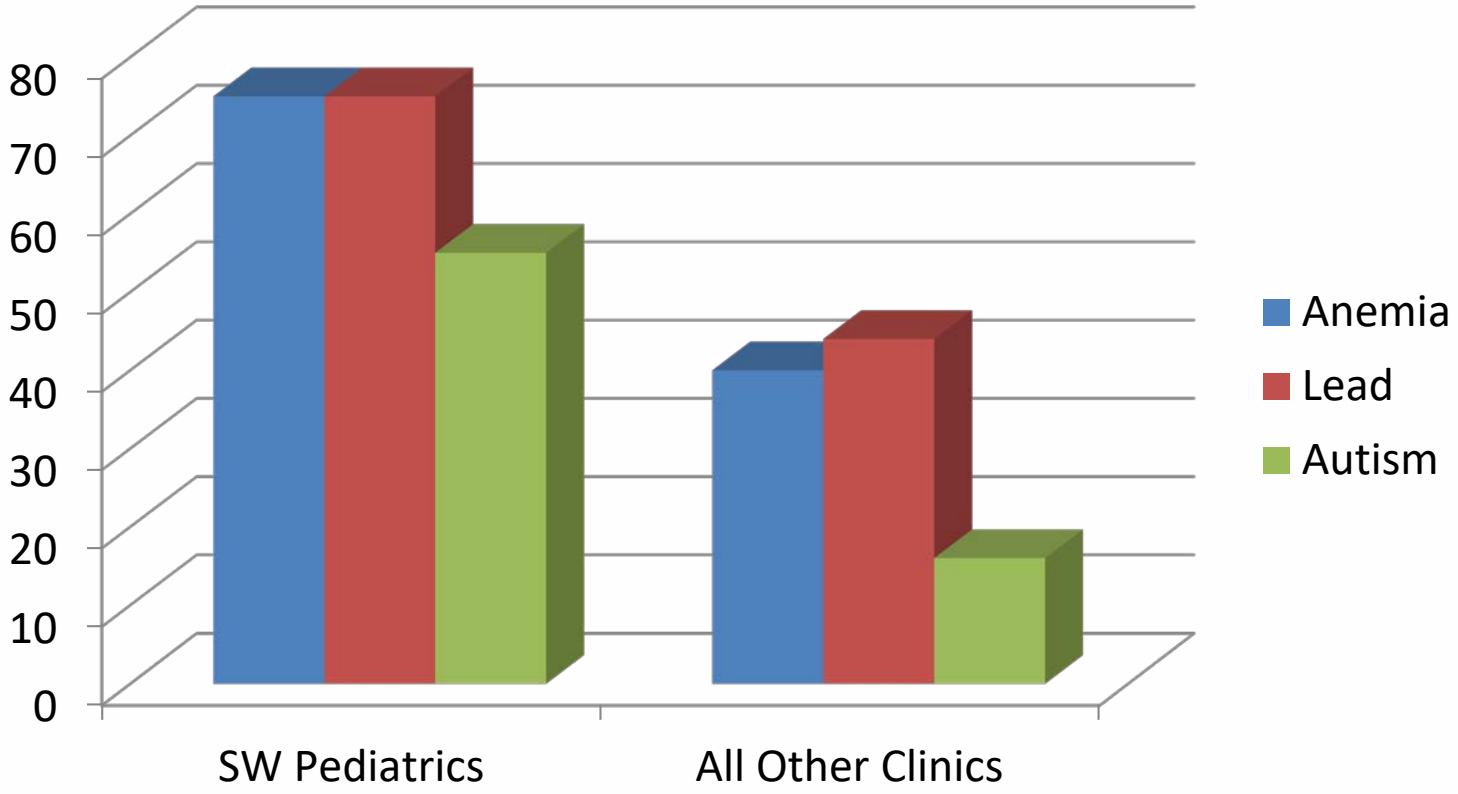
Data is not readily available or reviewed regularly resulting in less than optimal quality numbers

# Local Problem

- Need to review AAP guideline adherence for 24 month well baby screenings
- Providers moderately effective in meeting the recommended screenings (50-60% range for SW Pediatrics)
  - Anemia
  - Lead
  - Autism
- Rate of completion higher at SW Peds than other sites

**Goal:** Significantly increase screening rates at SW Peds and subsequently provide a best practice model for the organization

# Baseline Data September 2016

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# Using Data to Increase Well Checks

- First increase the number of patients who come for well visits
- Utilize Relevant analytic tool
  - ❖ IT department created reports of children with gaps in care
- Provider teams use Relevant reports for directed outreach

**Desired Outcome:** More children come to clinic for well checks and screenings

# Example Report From Relevant

Relevant | Relevant | Rajiv

https://elrio.relevant.healthcare/listings/measure_results#~(current_page~1~filters~(measure~(id~(~29))~measurement_period_start_date~'2017-09-01~

## Measure Results

All Patients | Compliant Patients | Non-Compliant Patients | Excluded Patients

Displaying 25 of 96 results  Export ▾  Search

| Measure ↓ | Start Date | End Date | Patient Name | MRN | Risk Score | DOB | Provider Name | Location | Msrmt Value | Numerator |
|---|---|---|---|---|---|---|---|---|---|---|
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Modak, Rajiv | Southwest | | N |
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Samoy, Sarah | Southwest | | N |
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Strempel, Patricia | Southwest | | N |
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Modak, Rajiv | Southwest | | N |
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Modak, Rajiv | Southwest | | N |
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Samoy, Sarah | Southwest | | N |
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Samoy, Sarah | Southwest | | N |
| Well-Child Visits in the 1st 15 Months of Life | 09/01/2017 | 08/31/2018 | | | | | Samoy, Sarah | Southwest | | N |

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# Gaps in Care Workflow

## Outreach

MA team generates list → Post cards sent to call for WCC → Generate new list each month

## Opportunity

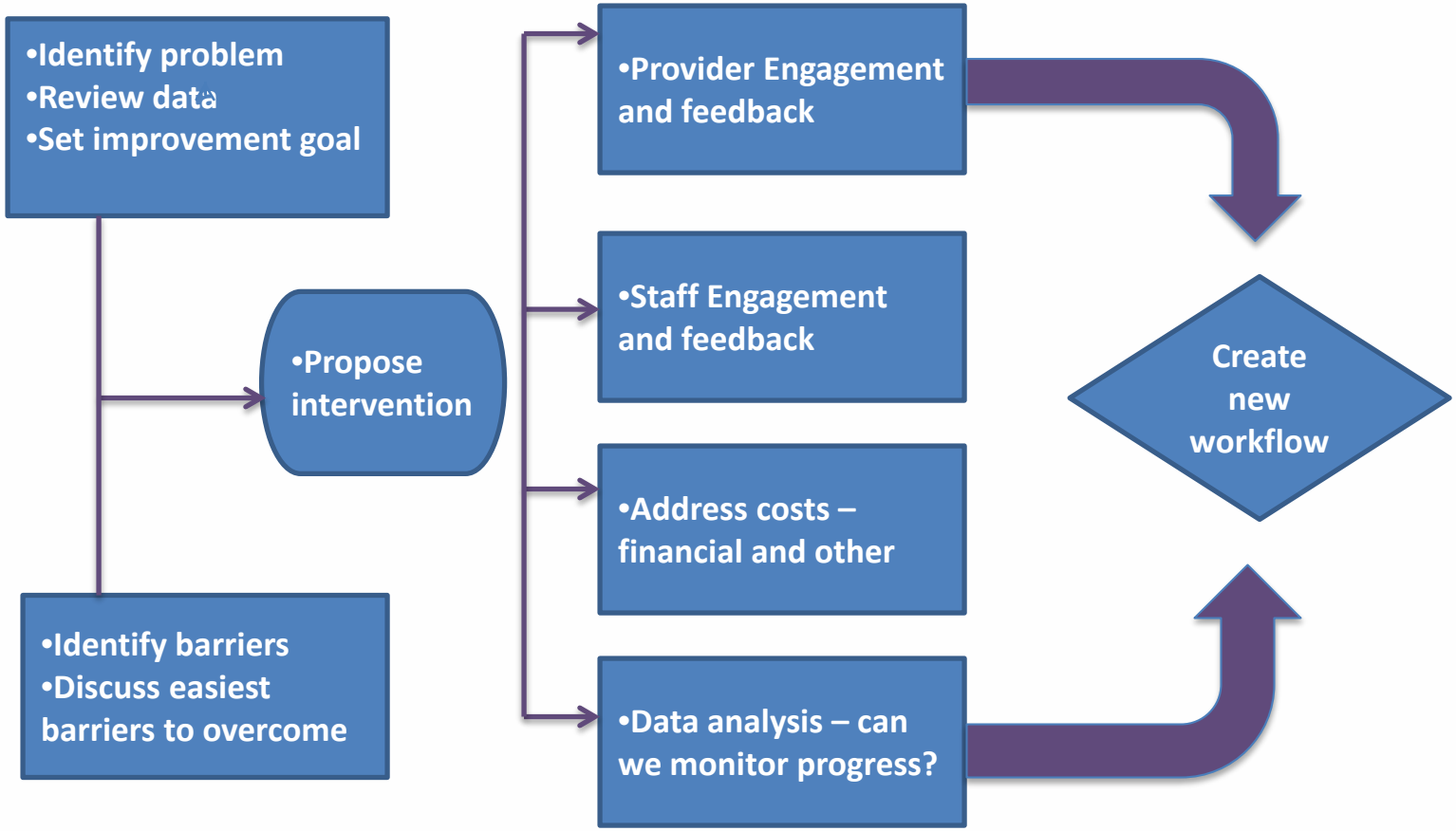
***Daily**

MA team reviews schedule during morning huddle → Gaps in care noted → Appointment changed from sick to well visit

# Design and Implementation

- Bring together a multidisciplinary QI team
  - ❖ Physician
  - ❖ Medical assistant (MA)
  - ❖ Nurse (LPN)
  - ❖ IT
- Discuss baseline data, current barriers, proposed workflow changes and stakeholder analysis
- Test of change was incorporated into Plan-Do-Study-Act (PDSA)
- Data analyst reported progress weekly
- Data sharing for positive reinforcement

# El Rio Workflow Utilized

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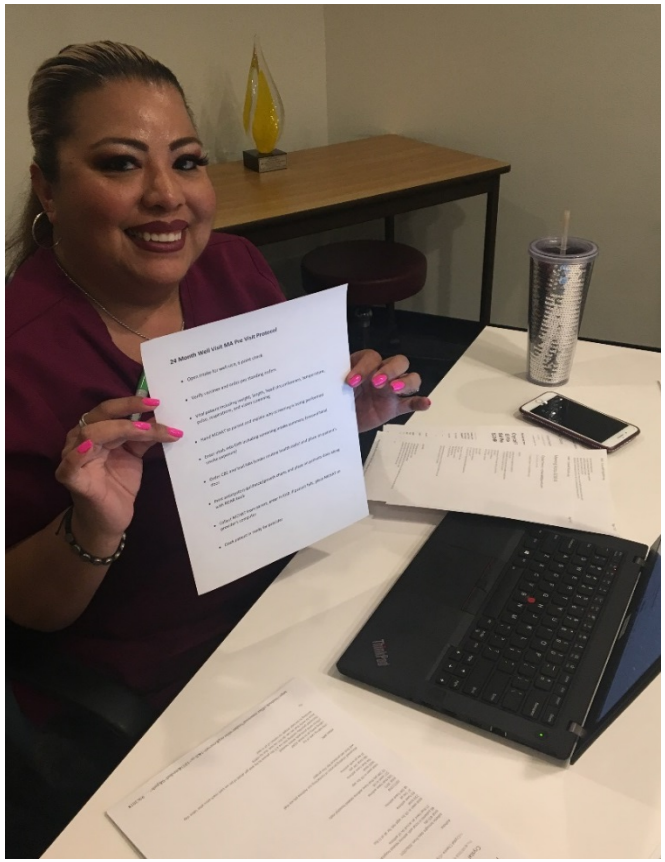
# Change From Provider Driven Screening to Medical Assistant Driven Screening

- Screening protocol included in MA workflow checklist
- MA orders lab tests (CBC, lead) in EMR
- MA administers MCHAT survey and enters into EMR

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# Medical Assistant Pre Visit Protocol for 24 Month Well Check

- Open intake for well visit (6 point check)
- Verify vaccines and utilize standing orders
- Vital patient (weight, length, head circumference, temperature, pulse, respirations, and vision screening)
- Provide MCHAT to parent and review purpose of screening
- Enter vitals into EMR
- Complete other tasks and place on exam room door
  - CBC and lead labs
  - Anticipatory guidance/growth charts
  - ROAR book

## Parent Questionnaire

Child's Name: _____ Date of Birth: _____ Date of Screen: _____

Please complete this form before today's visit with your child's physician. Answers should indicate how your child usually behaves. Please try to answer every question. If the behavior is rare (i.e., you've seen it once or twice), please answer as if the child does not engage in the noted behavior. To indicate "Yes" or "No," completely fill in appropriate square with pencil or pen.

| | | | |
|---|---|---|---|
| 1. Does your child enjoy being swung, bounced on your knee, etc.? | Yes | | No |
| 2. Does your child take an interest in other children? | Yes | | No |
| 3. Does your child like climbing on things, such as up stairs? | Yes | | No |
| 4. Does your child enjoy playing peek-a-boo/hide-and-seek? | Yes | | No |
| 5. Does your child ever pretend, for example, to talk on the phone or take care of dolls, or pretend other things? | Yes | | No |
| 6. Does your child ever use his/her index finger to point, to ask for something? | Yes | | No |
| 7. Does your child ever use his/her index finger to point, to indicate interest in something? | Yes | | No |
| 8. Can your child play properly with small toys (e.g. cars or bricks) without just mouthing, fiddling, or dropping them? | Yes | | No |
| 9. Does your child ever bring objects over to you (parent) to show you something? | Yes | | No |
| 10. Does your child look you in the eye for more than a second or two? | Yes | | No |
| 11. Does your child ever seem oversensitive to noise? (e.g., plugging ears) | Yes | | No |
| 12. Does your child smile in response to your face or smile? | Yes | | No |
| 13. Does your child imitate you? (e.g., you make a face – will your child imitate it?) | Yes | | No |
| 14. Does your child respond to his/her name when you call? | Yes | | No |
| 15. If you point at a toy across the room, does your child look at it? | Yes | | No |
| 16. Does your child walk? | Yes | | No |
| 17. Does your child look at things you are looking at? | Yes | | No |
| 18. Does your child make unusual finger movements near his/her face? | Yes | | No |
| 19. Does your child try to attract your attention to his/her own activity? | Yes | | No |
| 20. Have you ever wondered if your child is deaf? | Yes | | No |
| 21. Does your child understand what people say? | Yes | | No |
| 22. Does your child sometimes stare at nothing or wander with no purpose? | Yes | | No |
| 23. Does your child look at your face to check your reaction when faced with something unfamiliar? | Yes | | No |



Responses in Red

Responses in *both* Red and Blue

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Thompson

## CUESTIONARIO
## (Parent Questionnaire)

Nombre del niño (a): _____ Fecha del Nacimiento: _____ Fecha: _____

Evaluación del desarollo de niño en edad de caminar

Por favor conteste acerca de como, su niño (a) es usualmente. Por favor trata de contestar cada pregunta. Si el comportamiento de su niño no ocurre con frecuencia, conteste como si no lo hiciera.

| | | | |
|---|---|---|---|
| 1. ¿Disfruta su niño a cuando lo balancean a hacen saltar sobre su rodilla? | Si | | No |
| 2. ¿Se interesa su niño(a) en otros niños? | Si | | No |
| 3. ¿Le gusta a su niño (a) subirse a las cosas, por ejemplo subir las escaleras? | Si | | No |
| 4. ¿Disfruta su niño (a) jugando "peek-a-boo" o "hide and seek" (a las escondidas)? | Si | | No |
| 5. ¿Le gusta a su niño (a) jugar a pretendar, como por ejemplo. pretende que habla por teléfono, que cuida sus muñecas, a pretende otras cosas? | Si | | No |
| 6. ¿Utiliza su niño (a) su dedo indice ara señalar algo, o para preguntar alguna cosa? | Si | | No |
| 7. ¿Usa su niño (a) su dedo indice ara señalar o indicar interés en algo? | Si | | No |
| 8. ¿Puede su niño (a) jugar bien con jugetes peqneños (como carros o cubos) sin llevárselos a la boca, manipularos o dejarlos caer)? | Si | | No |
| 9. ¿Le trae su niño (a) a usted (padre o madre) objetos o cosas, con el propósito de mostrarle algo alguna vez? | Si | | No |
| 10. ¿Lo mira su niño (a) directamente a los ojos por mas de uno o dos segundos? | Si | | No |
| 11. ¿Parece su niño (a) ser demasiado sensitivo al ruido? (por ejemplo, se tapa los oidos)? | Si | | No |
| 12. ¿Sonrie su niño la) en res puesta a su cara o a su sonrisa? | Si | | No |
| 13. ¿Lo imita su niño (a)? Por ejemplo, si usted le hace una mueca. su niño (a) trata de imitarlo? | Si | | No |
| 14. ¿Responde su niño (a) a su nombre cuando lo(a) llaman? | Si | | No |
| 15. ¿Si usted señala a un juguete que está al otro lado de la habitación a su niño (a), lo mira? | Si | | No |
| 16. ¿Camina su niño (a)? | Si | | No |
| 17. ¿Presta su niño (a atención a las cosas que usted está mirando? | Si | | No |
| 18. ¿Hace su niño (a) movimientos raros con los dedos cerca de su cara? | Si | | No |
| 19. ¿Trata su niño (a) de llamar su atención (de sus padres) a las actividades que estada\ llevando a cabo? | Si | | No |
| 20. ¿Se ha preguntado alguna vez si su niño (a) es sordo (a)? | Si | | No |
| 21. ¿Comprende su niño (a) lo que otras dicen? | Si | | No |
| 22. ¿Fija su niño (a) su mirada en nada a camina sin sentido algunas veces? | Si | | No |
| 23. ¿Su niño le mira a su cara para chequear su reacción cuando esta en una situación diferente? | Si | | No |



Responses in Red

Responses in *both* Red and Blue

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# Medical Assistant Documentation

Peds MCHAT

**Modified Checklist for Autism in Toddlers (M-CHAT)**

Date of test: 08/29/2018 Historian:

Detailed document Reviewed Relationship to child:

| Yes | No | |
|---|---|---|
| | | 1. Does your child enjoy being swung, bounced on your knee, etc.? |
| | | 2. Does your child take an interest in other children? |
| | | 3. Does your child like climbing on things, such as up stairs? |
| | | 4. Does your child enjoy playing peek-a-boo / hide-and-seek? |
| | | 5. Does your child ever pretend, for example, to talk on the phone or take care of dolls, or pretend other things? |
| | | 6. Does your child ever use his / her index finger to point, to ask for something? |
| | | 7. Does your child ever use his / her index finger to point, to indicate interest in something? |
| | | 8. Can your child play properly with small toys (e.g. cars or bricks) without just mouthing, fiddling, or dropping them? |
| | | 9. Does your child ever bring objects over to you (parent) to show you something? |
| | | 10. Does your child look you in the eye for more than a second or two? |
| | | 11. Does your child ever seem oversensitive to noise? (e.g., plugging ears) |
| | | 12. Does your child smile in response to your face or your smile? |
| | | 13. Does your child imitate you? (e.g., you make a face-will your child imitate it?) |
| | | 14. Does your child respond to his / her name when you call? |
| | | 15. If you point at a toy across the room, does your child look at it? |
| | | 16. Does your child walk? |
| | | 17. Does your child look at things you are looking at? |
| | | 18. Does your child make unusual finger movements near his / her face? |
| | | 19. Does your child try to attract your attention to his / her own activity? |
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| | | 21. Does your child understand what people say? |
| | | 22. Does your child sometimes stare at nothing or wander with no purpose? |
| | | 23. Does your child look at your face to check your reaction when faced with something unfamiliar? |

Result:

Additional comments: By:

M-CHAT Test Instrument and Scoring Methodology © 1999-2001 Robins, Fein, & Barton. Used with permission.

OK Cancel

Templates Orders Medications Close PM Problems EDR

Meds 2 Appts 0 Labs

Modak, Rajiv MD

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Modak, Rajiv MD

Patient History

Patient Hist... Patient Dem... Categories

New Lock Filter

PEDS 8.29.18 03:00 PM Modak, R S

*Checkout

*Finalize

*Histories

*Home Page

*Intake

Child Dev. Rec

EPSDT 6MONTH Er

EPSDT Supplemental CST83

Immunization - Pediatric

Well Child SOAP

edinburg_depressions

Custom

El Rio Health Center RModak CAP NUM SCRL 08/31/2018

9:27 AM 8/31/2018

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# Relevant Results Sample Report

- Teams can access independently
- Allowed monitoring of progress in real time
- Demonstration of quality improvement was critical in engaging both providers and staff

MCHAT 24 month old

Measurement period: September 1, 2017—August 31, 2018

COMPLIANCE

80%

392

493

0 exclusions

TARGET

FILTERS

No filters selected

Compliance trend

Compare

Compliance

100%
90%
80%
70%
60%
50%
40%
30%
20%

Compliance by Location

Birth Center 100%
Congress 88%
Southwest 85%
Southeast 77%
El Pueblo 77%
Northwest 66%

Compliance by Provider

Birdi RFP, Amandip 100%
Carrillo MD, Cynthia 100%
Christiaens MD, Brooke 100%
Cobb DO RFP, Sierra Lahti 100%
Cruz DO RFP, Sonja 100%
Fonseca RFP, Veronica 100%
Hartenstein MD, Parvana 100%
Hensel, Jessica 100%
May, Stephanie 100%
Nisbet MD, Fanny 100%
Nusbaum MD, Tammy 100%
Preciado MD, Teresa 100%
Quigley MD, Carolyn 100%
Rivera PNP, Jocelyn 100%
Schlabach MD, Jay 100%
Sup DO RFP, Jacob 100%
Young PNP, Melissa 100%

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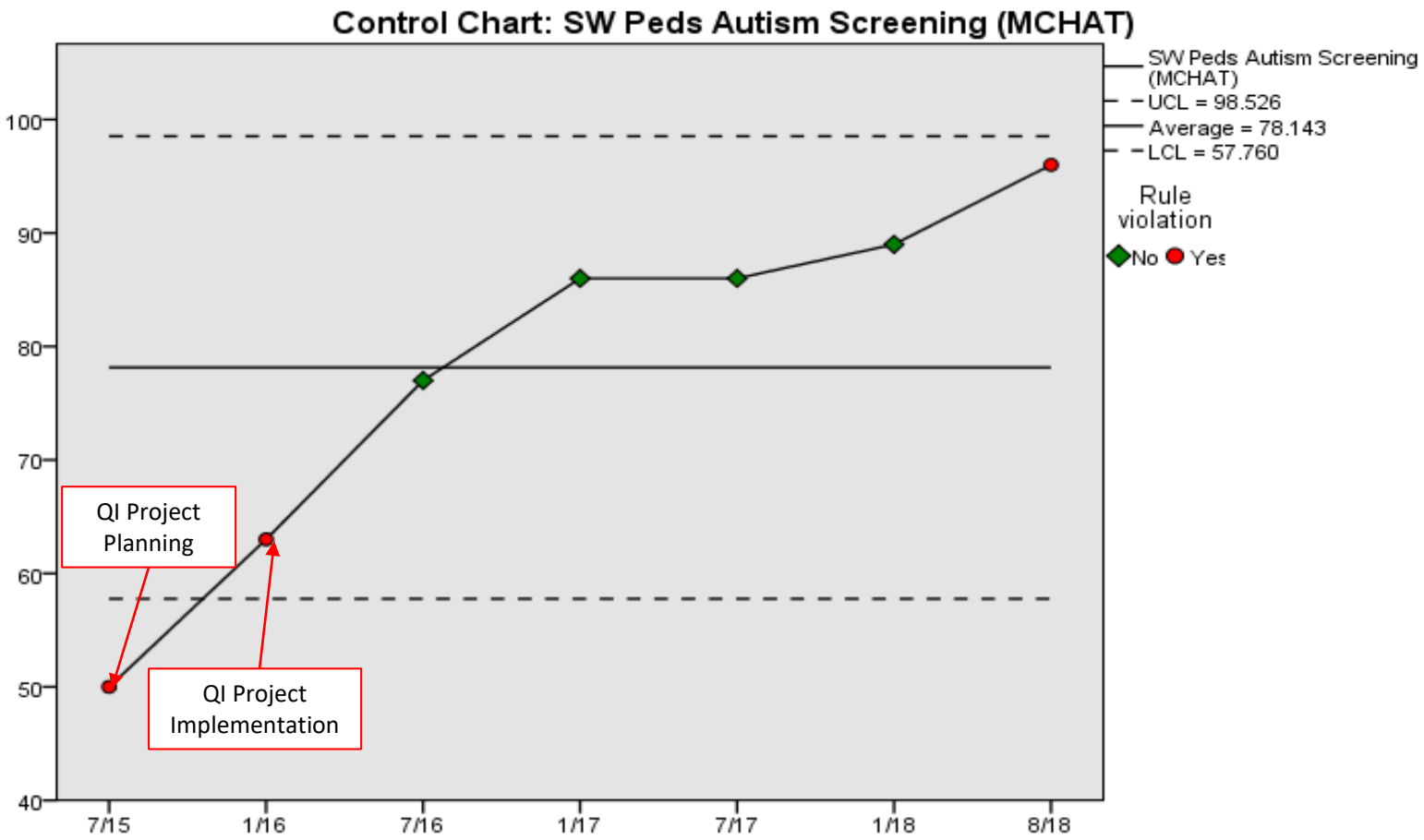
# SW Pediatrics Autism Screening

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# Formal Process For Spread of Autism Screening

- Presentation to El Rio Board of Directors
- Reviewed by Clinical Advisory Committee (CAC)
  - reviews all policy/procedure changes
  - comprised of various stakeholders in leadership
    - Nursing
    - Medical
    - Dental
    - Pharmacy
    - Lab
    - IT
    - Compliance

Both recommended spread to all clinic sites

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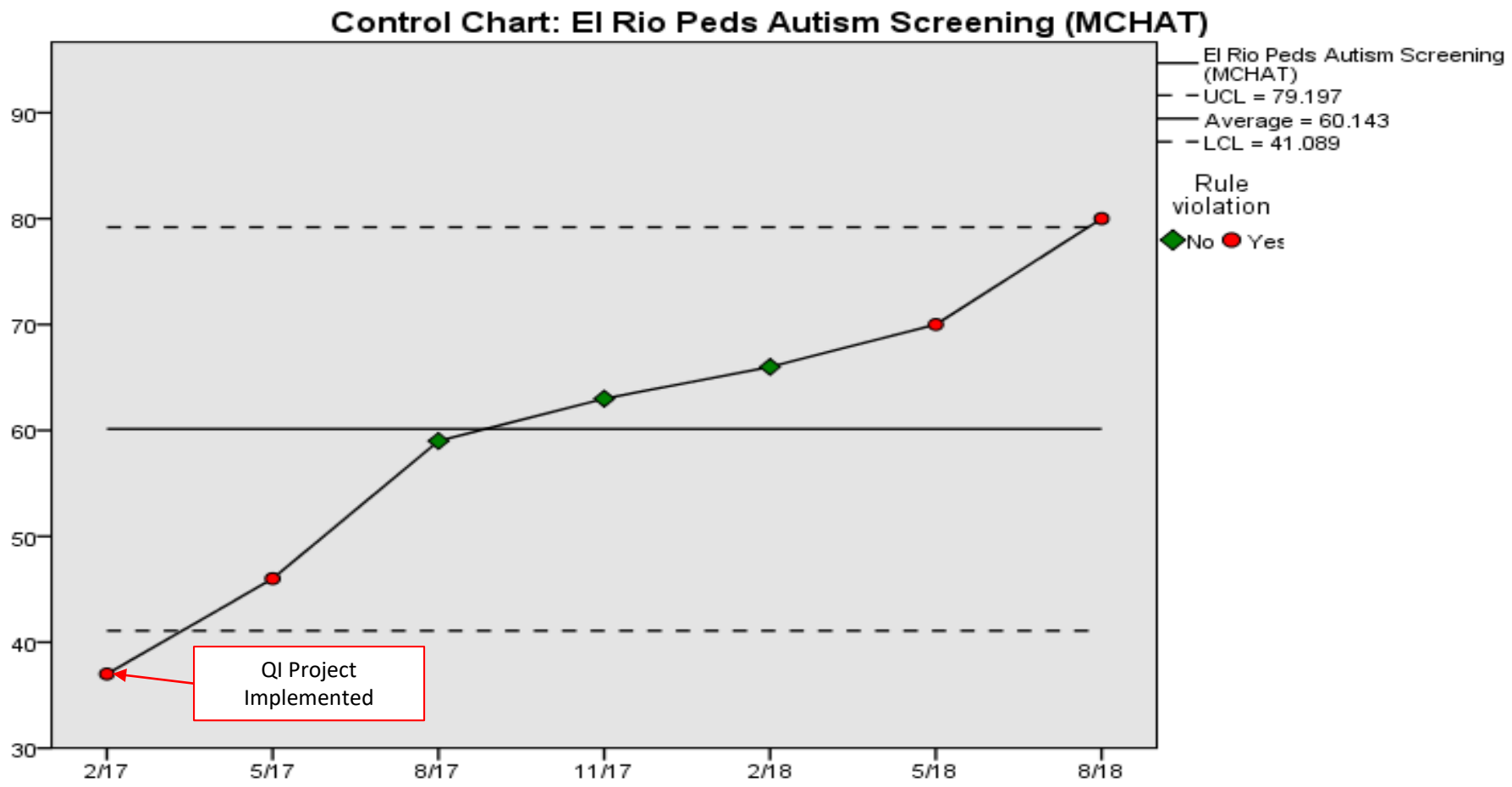
# El Rio Autism Screening

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# How IT Was Critical to Success

- Creation of reports in Relevant
  - ❖ individual teams able to access their own data
  - ❖ identified gaps in care
  - ❖ allow outreach to bring patients in for interventions
- Relevant reports with autism screening rates
  - ❖ presented real time data for discussion
  - ❖ facilitated planning at monthly meetings
- Data used to engage teams and celebrate success
  - ❖ facilitated healthy competition among teams

# How IT Was Critical to Success

- Increased staff satisfaction as data demonstrated their power in improving quality of care for patients.
- Decreased provider workload as MA drives screening process
- High autism screening rates resulted in positive outcomes
  - chosen to be part of a grant funded project
    - all children who failed autism screening would have expedited evaluation by a behavioral/developmental specialist
    - prior to this, children would have to wait over a year to see a pediatric autism specialist

# Developmental Referral Process

Provider referral into EHR for tracking

↓

MA faxes referral to Pediatric Developmental team (Intermountain BH)

↓

Developmental team contacts family to set up appointment

↓

Email sent to team notifying them of appointment status (updated weekly)

***Jan 2017-June 2018***
Total patients screened
N = 842

Negative Screening
N = 730

Positive Screening
N = 112

Completed Evaluation
N = 84

Declined Evaluation
N = 28

Diagnosed ASD
Treatment Implemented
N = 22

Evaluation non-confirmatory
ASD
N = 66

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# Future State to Refine Process

- Creation in NextGen HER of automatic alerts for gaps in care like autism screening
- MCHAT entry into EHR via tablet
- Provider incentive tied to quality measures in Relevant
- Staff incentive tied to teams quality measures in Relevant.

# Arizona Alliance of Community Health Centers Health Care Heroes Innovation Award 2018


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