

IDAHO SHIP – SOUTHEAST FOCUS GROUPS

Report: Clinical Quality Improvement

Major Themes and Key Findings

- **Education** — in many forms — is at the root of the problems with the current healthcare system:
 - Education about health in general and personal responsibility for health is needed, starting in elementary school.
 - Education about healthcare careers is needed, starting at the middle school level, to raise awareness among students of careers along the healthcare continuum (i.e., nurse practitioner, physician assistant, research/health science, etc.).
 - Providers are not adequately trained to work together to coordinate care.
 - Lapses in care are due to **poor case management**:
 - Medicare and mental health patients “drop from service” and disappear from the system.
 - 30-day follow up requirements are not being accurately followed/reported.
 - Better **information access and education** is needed to facilitate improvement:
 - Universal tip sheets should be made available for consumers (such as for resources for maternity care or emergency services, wellness visit types and frequency, etc.) would be helpful.
 - Electronic Health Records (EHRs) “don’t talk to each other” and need to better connect to exchange data and information.
- “It really ties back into the education system. We decided as a society that [physical education and health classes] weren’t important anymore. As those are being cut we see a rise in obesity.”*
- “We don’t teach a PCMH model. We don’t teach well what we say we want them to do once they graduate. We don’t teach them to collaborate. They don’t know how to spread the knowledge around.”*
- “The state is supposed to do oversight, but nationwide they are not doing it. They don’t have the personnel and the resources. The sickest patients are the hardest to take care of.”*



Major Themes and Key Findings

- Creating a **culture focused on improving health outcomes** is critical to delivering quality and managing the cost of healthcare:
 - Processes should be in place to encourage all providers in a facility to report outcomes, positive and negative, and to identify contributors to outcomes.
 - For negative outcomes, identifying the contributors (errors, infections, etc.) is key to making changes that avoid negative outcomes and improving the health of patients.
 - Building this type of culture requires making providers feel comfortable that improving care is the goal, and not punishment of the provider. (“Just Cultured” by David Marks was noted as a resource on this topic.)
 - Collaboration on outcomes should be built among all levels of providers into the way healthcare professionals are educated.
- Insurance **premiums are high** for users who don’t use a lot of medical care:
 - The burden is especially high for students, who may choose to not get health insurance due to high premiums.

“I like that idea a lot where people can have a meeting and just speak openly about errors or issues they’re having just to learn from each other.”

“If you’re a well person, there has to be some way to reduce your monthly payments to reflect that.”

Additional Emergent Themes

<p>Specialists vs. Primary Care Providers (PCPs)</p>	<ul style="list-style-type: none"> • There are doctors who hoard patients because they are afraid they will lose them to the specialists, but specialists are necessary as they are trained to do the work PCPs are not. <ul style="list-style-type: none"> – There should be incentives for specialists to take “curbside consults.” • Because most med students are specializing these days (presumably because the money is better) and PCPs are underpaid in Idaho, PCPs are more scarce than specialists. • PCPs play a possibly more “important” role in maintaining healthy people because they are the doctors who see people regularly and generally take care of them.
<p>Clinical Quality Improvement</p>	<ul style="list-style-type: none"> • The following were identified as opportunities for improvement in clinical quality: <ul style="list-style-type: none"> – Communicate performance measures – Create a culture of quality – Implement a third party system to standardize measures – Open discussion of problems, solutions and brainstorming how to improve – Consider a free clinic – the staffing cost can be small compared to the amount saved on emergency visits

Additional Emergent Themes

<p>Case Management</p>	<ul style="list-style-type: none"> • The following were identified as measures of case management quality: <ul style="list-style-type: none"> – Evidence based best practice – Rapport – Cooperation – Compliance – Outcome vs. process management – Length of patient productivity – Realistic patient goal setting and case manager tracking of achievement of goals – For behavioral health, rates of incarceration, employment, hospitalization, homelessness – Evidence based guidelines for care
<p>Waste in the Current Healthcare System</p>	<ul style="list-style-type: none"> • The following were identified as areas of waste in the current healthcare system: <ul style="list-style-type: none"> – Procedures are incentivized instead of outcomes – Too much money on things that aren't directly patient care related — interior design and furnishings, etc. – Tasks (like asking background questions of the patient) are conducted by multiple staff members during a single visit



Location-Specific Findings

- Consumers in the Southeast:
 - Feel access to providers is a problem.
 - There are not enough general practitioners or “mid-level” providers, such as nurse practitioners or physician assistants, in their communities.
 - PCPs are seen as more important than specialists because these providers can help consumers manage the majority of their healthcare needs.
- Healthcare Service Providers in the Southeast:
 - Feel access to providers is a problem.
 - Legislators pay a lot to secure medical school seats to produce doctors for Idaho, but the education process is long. They noted that perhaps there should more investment in educating mid-level providers to achieve a faster return on the investment and produce more providers for the community.
 - Believe more focus on outcomes is seen as a critical need in the behavioral healthcare system. Protecting patient privacy should not be an excuse for not following patients and keeping family members informed so that they can take an active role in managing the care of patients who are not capable of managing their conditions.



Implications

- Innovation in clinical quality should take into account:
 - The way providers are educated. Encourage collaboration and a team-based approach to providing healthcare by building this into the curriculum and providing incentive for providers along the delivery continuum to work together, rather than compete with each other.
 - Reporting and measuring outcomes to identify what contributes to the outcomes, so that positive contributors can be operationalized and negative contributors can be corrected.
 - Patient follow-up by providers to help ensure patients (or their families) are taking responsibility for managing their health and conditions to avoid costly episodes of treatment for chronic conditions that go unmanaged. For behavioral health, follow-up is seen as a key to managing the monetary and societal cost to the public of homelessness and incarceration.
- Because access to providers is a challenge in rural communities, finding ways to fund and expand access to public health department services will be important to improving the overall health of the population by:
 - Improving education and awareness about healthy behaviors, prevention and personal responsibility for managing one's health.
 - Expanding awareness of services, both how to access appropriate care and how to find coverage for healthcare expenses so that patients do not avoid accessing care until a condition is severe and may be more costly to treat.
- Ways to raise middle and high school students' awareness of healthcare careers, such as job-shadowing, internships and seminars about careers to potentially increase the number of providers along the continuum of care and expand future employment opportunities for young people in the community,

