

Alameda County Health Care for the Homeless
HEALTH CARE SERVICES AGENCY



Quality Management Program Quarterly Update


ACHCH Commission Meeting
4/21/2017

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Recap

- ▶ In November 2016, HCH Quality Management Program staff presented the HRSA-approved quality plan for 2017 to the HCH Commission.
- ▶ This plan includes goals and objectives to accomplish within this year, with the understanding that due to this being the first year of the program, changes to the plan would be made by Quality Management Program Staff and approved by the Quality Committee on an ongoing basis.



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2017 Quality Goals– Status

| Goal | Status |
|--|-------------------|
| By 1/30/17, set in place a schedule for HCH QC to complete a review of current program data and narratives related to utilization and quality improvement. | Complete |
| By 3/31/17, HCH Ad Hoc Training Subcommittee will create a training schedule through 2019 for HCH staff, AHS staff, and HCH contractors to be reviewed and updated annually. | Complete |
| By 3/31/17, at least three HCH management staff will complete Results-based Accountability 101 training. | Process Initiated |
| By 3/31/17, update and finalize written document outlining HCH Quality Management Program (including QC bylaws, roles and responsibilities, electronic file structure for information storage, risk management [credentialing/ privileging, adverse incident reporting/evaluation], patient client grievances, and annual quality plan). | Process Initiated |
| By 5/30/17, complete recruitment of two new members for HCH Quality Committee, representing contractors, consumers, and relevant specialists. | Complete |
| By 5/30/17, HCH will update AHS sub-recipient contract to include specific written content relating to its expectations regarding quality assurance/improvement activities aimed at improving health care and enabling services delivery for homeless patients. | Not Started |
| By 6/30/17, HCH will have completed documentation of current safety procedures and protocol(s) for a) HCH staff, b) AHS and Contractor staff, and c) patients (including patient record confidentiality). | Complete |

2017 Quality Goals– Status

| Goal | Status |
|---|-------------------|
| By 6/30/17, available patient experience data will be provided to the HCH Consumer/Community Advisory Board (CCAB) on a quarterly basis. | Process Initiated |
| By 1/30/17, the AHS Ambulatory Quality Committee will create a plan and schedule for sharing homeless patient data with HCH Quality Committee from its four wellness centers, Same Day Clinic, and the Mobile Clinic, to be implemented in FY2017-18. | Complete |
| By 5/30/17, the four health center programs under the AHS Homeless Coordinating Office will complete a comprehensive Results-based Accountability training module resulting in the development of RBA performance measures for each one. | Complete |
| By 6/30/17, AHS will provide to the HCH Quality Committee, a mutually agreed upon dataset of clinic and utilization performance measures for homeless patients seen in its four wellness centers. | Process Initiated |
| By 8/30/17, AHS will provide data/narrative and analysis for at least four clinical performance measures, aligned with PRIME metrics, for homeless patients served by its four wellness centers. | Process Initiated |

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2017 Quality Goals– Status

| Goal | Status |
|---|-------------------|
| By 12/31/17, AHS will provide the QC with a proposal for collecting and providing patient experience data from its ambulatory division. | Process Initiated |
| By 6/30/17, all HCH Contractors will produce "low tech" patient experience and patient satisfaction data and analysis on a quarterly basis, to be reviewed by the HCH QC and the HCH Consumer/Community Advisory Board. | Process Initiated |
| By 10/30/17, all HCH Contractors will provide data and analysis to the HCH QC, through the HCH Contract Manager, from at least one quality improvement goal. | Not Started |

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2017 Quality Goals– Status

Summary

- ▶ 40% -Complete
- ▶ 47% -In Progress
- ▶ 13% -Pending

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Highlights

- ✓ Alameda Health System staff RBA training completed
- ✓ Alameda Health System successful completion of the development of RBA measures for all four (4) Homeless Programs
- ✓ Successful recruitment of two (2) new Quality Committee members
- ✓ Refining the Quality Management Program structure

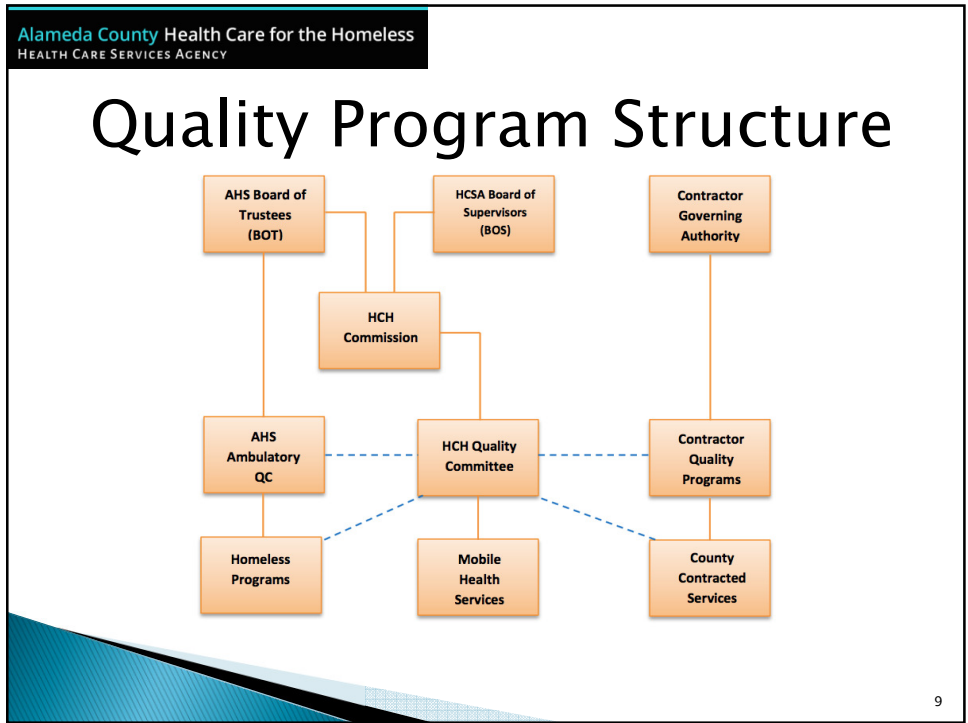
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Quality Management Program Structure

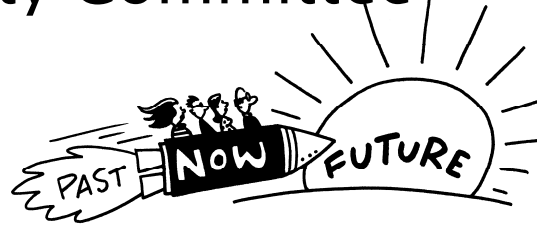
| Quality Planning | Quality Assurance |
|---|---|
| <ul style="list-style-type: none"> ➤ Development of annual quality plan ➤ Incorporating quality metrics and monitoring processes into the planning of new and existing HCH program services | <ul style="list-style-type: none"> ➤ The "confidence" of well-managed services ➤ Development and monitoring of a risk management plan, including ensuring patient safety, privacy and security and conducting regular audits |
| Quality Control | Quality Improvement |
| <ul style="list-style-type: none"> ➤ Maintaining integrity of processes to maintain reliability of achieving desirable outcomes ➤ Inspection, testing and measurement | <ul style="list-style-type: none"> ➤ Quality assurance and control processes drive improvements in efficiency and effectiveness ➤ Tracking, analyzing and improving data quality ➤ Developing, monitoring and acting on patient experience/satisfaction data |

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HCH Quality Committee

▶ Current Focus

- Understanding current sub recipient, contractor and HCH data, data collection processes and patient experience efforts.



▶ Future Focus

- Forming consensus on selecting health outcomes to track and improve
- Providing recommendations for improving metrics
- Ensuring high levels of data integrity
- Monitoring compliance to policies and procedures associated with risk management

