**RHP 9 Improvement Collaborative Cohort Sessions**

**March 24 & 25, 2015**

**Behavioral Health & Chronic Disease Cohorts 9:00 a.m – 12:00 p.m.**

**Access & ED/Readmission Cohorts 1:00 p.m. – 4:00 p.m.**

**Texas Health Resources University**

## [8194 Walnut Hill Lane Dallas, TX 75231](http://www.texashealth.org/workfiles/THR%20System/Maps/THRU_Campus_Map.pdf)

Minutes

**RHP 9 UPDATES**

Statewide

* HHSC has confirmed two DY4 Reporting Webinars for April 7, 2015. The first webinar on General Reporting will be from 10:00 a.m. – 11:30 a.m. and the second webinar on Category 3 & 4 will be from 2:00 p.m. to 4:00 p.m. The anchor has sent the webinar call-in information to you.
* March 31, 2015 Providers will receive final determinants from HHSC on their NMI provisionally approved metrics from DY3 October reporting.
* The Statewide Learning Collaborative has been tentatively scheduled for August 26 & 27, 2015 in Austin, TX. We anticipate the location and attendee slot availability process to be the same as last year (slots will be allocated based on number of projects per provider). If slots from other regions are not filled, they will divide them between the other regions to open more slots. RHP 9 had the largest representation at last year’s SLC and we hope to do the same this year.
* *Waiver Renewal*
	+ STC 48 – Special Terms and Conditions Document
		- HHSC has formally submitted the Transition Plan for the UC and DSRIP pools to CMS as required by the waiver terms and conditions.
		- The attached version is the same version that was sent 2 weeks ago and that was also discussed with CMS during the visit in Baltimore early this month, but **attached** is the final copy.  It is also available on our RHP9 website.  [www.texasRHP9.com](http://www.texasRHP9.com).
	+ Through their visit with CMS in Baltimore, HHSC is working with the Interim leaders for CMS over the 1115 Waivers and Medicaid to answer questions/concerns they have around the 1115 Waiver in Texas in order to prepare the Waiver renewal/extension request that will be submitted by August/September 2015.
	+ Those working with the waiver renewal process feel that even though there is concern around the 1115 Waivers from CMS, the waiver will be renewed. However, they believe that the next version of the Waiver, what we call Waiver 2.0, will look a little different. Initial thoughts: reduce the total number of projects (Texas largest with 1494 projects), continue funding successful waiver projects (“success” has not been defined), new projects, and region-level outcomes/incentive pools (similar to NY waiver). For RHP9 we already see a need for new projects with a focus on collaboration, behavioral health, BH/PC integration, and specialty care. Due to the way behavioral health is funded in our Region, RHP9 has fewer BH projects/dollars.

* *UC Deferral*
	+ The UC deferral, as a result of the CMS financial audit last summer, was lifted at the end of last year with the understanding that HHSC would continue to work with CMS on their concerns. CMS has provided HHSC with feedback on their concerns. Was emailed to region a month ago and is available on the website. HHSC continues to work on next steps and we will keep all updated.
* *Clinical Champions Workgroup* – Statewide group working with HHSC to assist with waiver renewal activities and review of projects. RHP 9 is well represented on this group through PHHS, BSW, UTSW, and Metrocare. Group is also working on how to show we are successfully transforming care through the 1115 Waiver projects. Since we are just now starting on our Cat 3 outcomes, this information will not be complete prior to submission of the renewal request. HHSC has drafted a DSRIP project impact assessment template. We will be requesting providers complete this form for their projects. It is still in draft form. The current plan is to have the form/project peer-reviewed. A thought was to have similar regions review each other (ex RHP3/Harris County would review RHP9).
	+ The draft for DSRIP project impact assessment template was shared for review and thoughts on completing for their projects. **Providers are asked to review the tool against some of their projects and provided feedback to Christina by April 6**, so she can take that back to the workgroup. Christina will send out the most current version of the Draft after the workgroup meets this Thursday. The attached is the original version.

Regional

* *RHP 9 Journey to Transformation Roadshows*: Site Specific tours/information sharing sessions. Kickoff in January at Metrocare to one of their BH/PC integrated clinics. February: Methodist Dallas to see their new ER and their ER Navigation program. March: Baylor’s Community Care Clinic in Irving and were taken through the journey of “Chuck” at the clinic who used seven different services (DSRIP projects) that are a result of the 1115 Waiver. Our upcoming roadshows are listed below.
	+ April 6, 9:30 am – 11:30 am Children’s Health
	+ May, TBD – Parkland – Tour of New Parkland
	+ June, TBD – UTSW – Clements University Hospital and DSRIP Project
	+ July, TBD – Full Day (Denton Projects: THR, HHS, MHMR with Regional Lunch Provided)
	+ August, TBD – HCA’s Hospitals
	+ September, TBD – TAMU Baylor College of Dentistry
	+ October – No Road Show this Month
* *Give Back Campaign* – We are the only RHP doing this type of campaign (we’re pretty sure!). We are very excited about the opportunities to give back to our communities. In December we donated 297 pounds of food to the North Texas Food Bank. This time we are collecting blankets for the DFW Rescue Me. The blankets are used by DFW Rescue Me volunteers through the year; in crates, during Spay/Neuter day, at the State Fair, in some cases for transporting, fostering, and the list goes on. Not only helping our patient population in the community but our four legged family members too. The cohorts were asked to identify other ideas for Give Back Campaign. Suggestions:
	+ School supplies for Back to School
	+ Duffle Bags for Homeless patients discharging from Hospital/MH facility.
	+ Hygiene Products
	+ Tennis Shoes
	+ Socks/Underwear
	+ Bottle water for homeless Shelters
	+ Old cell phones for victims of domestic abuse
	+ Glass slipper Project – gently used prom attire donated to local charity for local high schools (maybe for next spring)
	+ Volunteer for day at a local charity as a cohort session – conduct cohort business during a lunch period.
	+ Health literacy Fair at Elementary School (or just in general with)
	+ Girls Inc.,
	+ Color Run/Walk
	+ Rock-a-thon (Rocking Chairs)
	+ Texas CASA - Bags for Foster Kids with various supplies
* *Regional Learning Collaborative Events – Upcoming*
* May 27 & 28, 2015 - Combined Learning Collaborative with RHP 10 – Hurst Conference Center
	+ - Registration will be posted by close of business Friday, 3/27/2015
		- Call for Posters – 1 per Provider (26 total) – See attached template – due by April 6, 2015.
* September 24, 2015 – RHP 9 Regional Learning Collaborative Baylor Charles A. Sammons Cancer Center
* *PDSA Webinars*
* June 10, 2015
* August 5, 2015
* *Cohort Sessions*
	+ June 23 & 24, 2015
* *Improvement Collaborative – Measures*
	+ DY 4 – Readmissions – We will continue to specifically focus on Readmissions measures this year in our efforts. We will ask those providers who have Readmission data to provide us with the data. You will be asked to provide your numerator, denominator, rate. We will ask for 30-day All-Cause Readmission and then any sub-category you may be including in your projects.
	+ Evolving Again *–* we have reviewed the single measures that everyone selected based on our last meeting. After review we have determined that this would not truly create a full representation of the transformation of care that is happening in the Region. Therefore, we will be sending providers a form to identify the milestones/measures we will want to track for our region to show success (ex: Cat 3, QPI, number of providers served, new clinics, etc.). Once you have confirmed that these are the measures you are collecting for you project, we ask that you either update Performance Logic with your measures or send us your data for us to upload in to PL. We will be consolidating and aggregating the data across providers for a set of regional performance improvement measure. For example, if you hired staff to expand care/access, we want to capture everyone in the region who hired staff to show the cumulative results.
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* DY 5 – Patient Engagement and BH/PC Integration – in DY5 we look to redirect the cohorts to 2 focus areas: Patient Engagement and BH/PC Integration. Patient Engagement will have a variety of components for us to look at like Patient Education, Health Literacy, Motivational Interviewing, etc. The BH/PC Integration will have us looking at both the BH to PC Integration format and the PC to BH Integration format. We will bring in speakers on these topics and set up “Raise the Floor” activities such as PDSA’s and other activities.

**PROJECT UPDATES – ROUND ROBIN**

Projects were asked to share updates on their projects. A separate email will be sent next week with some of the highlights from the round robin. During the discussion providers were asked to share highlights, challenges, status of their measures achievement progress, and anything that they might want to ask the group for ideas on. There was great information shared and many new connections between providers for different things that folks are trying.