

NCDV PATIENT CENTERED MEDICAL HOMES

Successfully Reducing HbA1c

Texas Statewide DSRIP Learning
Collaborative
August 30, 2016

South Texas Health System
Nuestra Clinica del Valle

Project Collaborators:



- FQHC operating 11 total clinics in the Rio Grande Valley since 1971
- Primary population served: 88% Hispanic, 81% uninsured/underinsured, 20,000+ patients
- Medical staff: 8 physicians, 13 mid-level providers, 3 dentists, 1 psychiatrist, 6 pharmacists



- Operates four acute care hospitals and two freestanding ERs in the Rio Grande Valley. First hospital acquired in 1985.
- 23,500 admissions, 74,900 ER visits in 2015
- 665 physicians on medical staff
- \$328M charity care in 2015

South Texas Health System



McAllen Medical Center, 441 beds



McAllen Heart Hospital, 60 beds



Edinburg Children's Hospital, 111 beds



Edinburg Regional Medical Center, 102 beds

Nuestra Clinica Map



NCDV Clinics:



San Juan Clinic



PSJA SBHC



SJ Women's Health Center



Edcouch Clinic



Mercedes Clinic



Donna Clinic



San Carlos Clinic



Mission Clinic

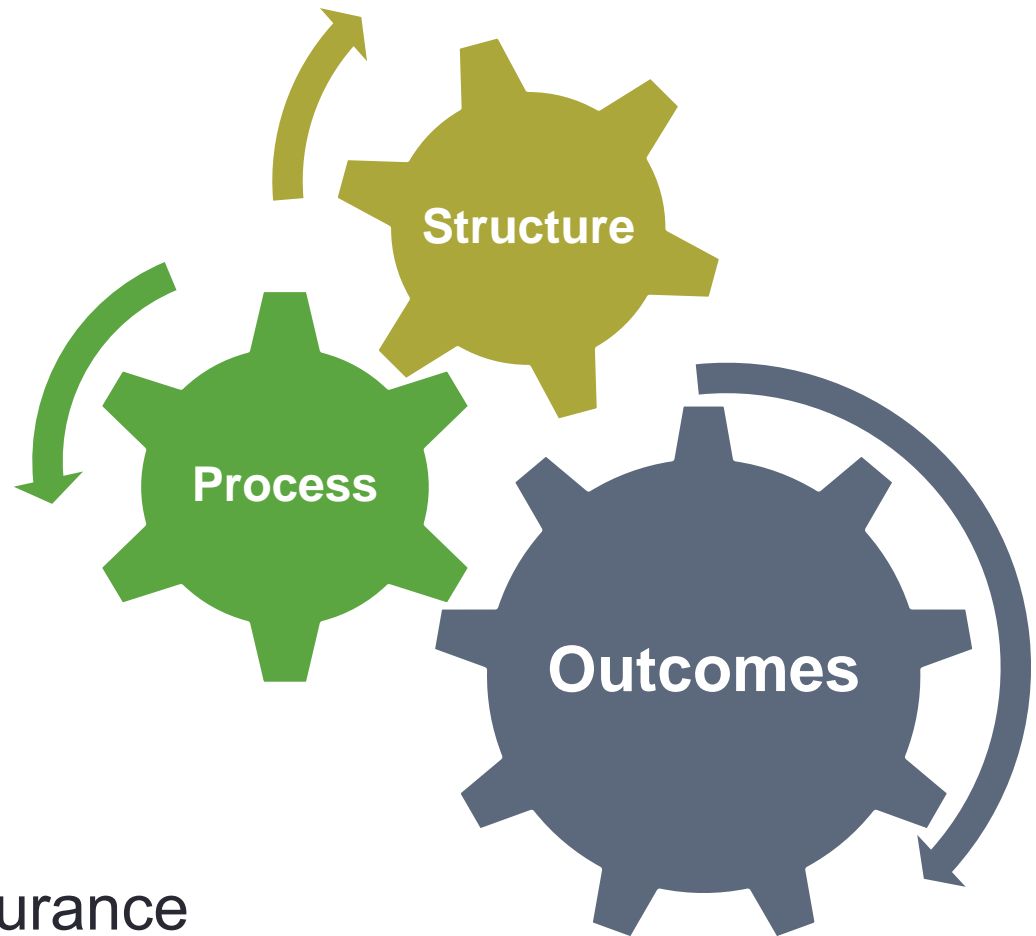
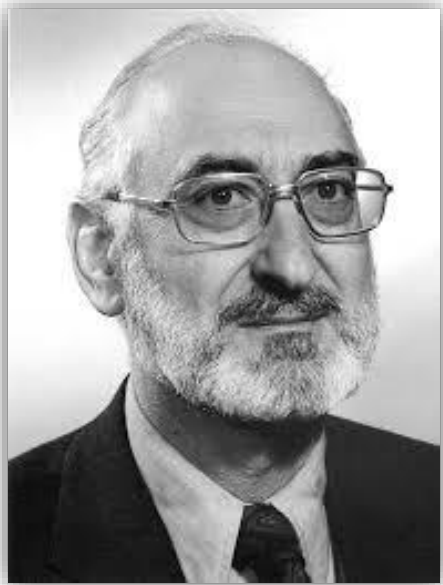


Memorial Clinic

Problem Statement:

- During the period of 10/1/2013 to 9/30/2014, NCDV had 7,288 type 1 or type 2 diabetic patients between the ages of 18 and 75 with 37.0% (2,696) having HbA1c > 9.0%.

Structure, Process, Outcomes



- Avedis Donobedian
(1919 – 2000)
“Father of Quality Assurance

1

Structure: Patient Centered Medical Home

- Accrediting bodies include the Joint Commission (TJC), Accreditation Association for Ambulatory Health Care (AAAHC), the National Committee for Quality Assurance (NCQA).



- **PCMH Components (TJC):**

- **Patient Centered Care:** Relationship-based care based on individual patient needs, culture, values, and preferences.
- **Comprehensive Care:** Multidisciplinary team approach
- **Coordinated Care:** Care is coordinated across specialty care, hospitals, home care, and community support services.
- **Superb Access to Care:** Improving access to services with shorter wait times for urgent needs, enhanced in-person hours, around the clock telephone or electronic access to care team.
- **Systems-based Approach to Quality and Safety:** PCMH uses evidence-based medicine and clinical decision support tools, engages in PI initiatives.

1

Structure: PCMH Implementation

- The NCDV leadership team started its PCMH journey by developing PCMH-specific policies, protocols, and procedures.
- Developed standing orders that providers and staff follow to ensure referrals are made to the Nutrition department and Behavioral department
- “Warm Hand-off” Transition Model
- PCMH model encourages patients to establish self-goals that target behavior modification and lifestyle change
- Collaboration with other entities and programs that aim to reduce A1c values such as UTHealth’s Salud y Vida, and Methodist Healthcare’s Si Texas NCDV NuCARE model.

1

Structure: Hardwiring Orientation

NUESTRA CLINICA DEL VALLE ORIENTATION CHECKLIST

EMPLOYEE NAME: _____

POSITION: _____

MEDICAL

INTRODUCTION _____

DEPT. GOALS & OBJECTIVES _____

WORKING HOURS _____

PATIENT APPOINTMENTS/WALKINS _____

ANSWERING SERVICE/ _____

AFTER HOURS COVERAGE _____

PAY PERIODS/FIRST PAYDAY _____

DIRECT DEPOSIT _____

REFERRALS _____

X-RAY/LAB SERVICES _____

NIGHT CLINIC _____

VACATION/SICK LEAVE _____

COVERAGE AT OTHER CLINIC SITES _____

SUPERVISING MID-LEVEL PROVIDERS _____

PAGER _____

FORMULARY _____

PROVIDERS MEETING _____

OUTSIDE EMPLOYMENT FORM _____

EMPLOYEE SIGNATURE DATE

STAFF SIGNATURE DATE

CLINIC OPERATIONS

INTRODUCTION _____

PATIENT FLOW _____

CUSTOMER SERVICE _____

LEAVE SCHEDULES _____

TIME CARDS/TIMESHEETS _____

MEETINGS _____

ATTENDANCE/PUNCTUALITY _____

LUNCH BREAK PERIODS _____

DRESS CODE _____

PCMH _____

EMPLOYEE SIGNATURE DATE

STAFF SIGNATURE DATE

2

Process: Patient Panel Huddles

- Complete daily for every patient
- Multi-disciplinary team
- Use form and sign-in sheet

Nuestra Clinica del Valle PCMH Patient Panel Group Discussion Form

Patient Panel Provider:	Date:
Patient Name/Info:	Discussion/Action:
Name: _____ DOB: _____ Staff assigned to complete action required: <input type="checkbox"/> Yes _____ _____ _____	<input type="checkbox"/> Action required: (see comments below) _____ _____ _____ Follow-up: <input type="checkbox"/> No <input type="checkbox"/> Yes Date & Time: _____
Patient Name/Info:	Discussion/Action:
Name: _____ _____ _____ signed to complete action required: _____ _____ _____	<input type="checkbox"/> Action required: (see comments below) _____ _____ _____ Follow-up: <input type="checkbox"/> No <input type="checkbox"/> Yes Date & Time: _____

Nuestra Clinica del Valle
PCMH Patient Panel Huddle
Sign In Form

Date: 1-9-15

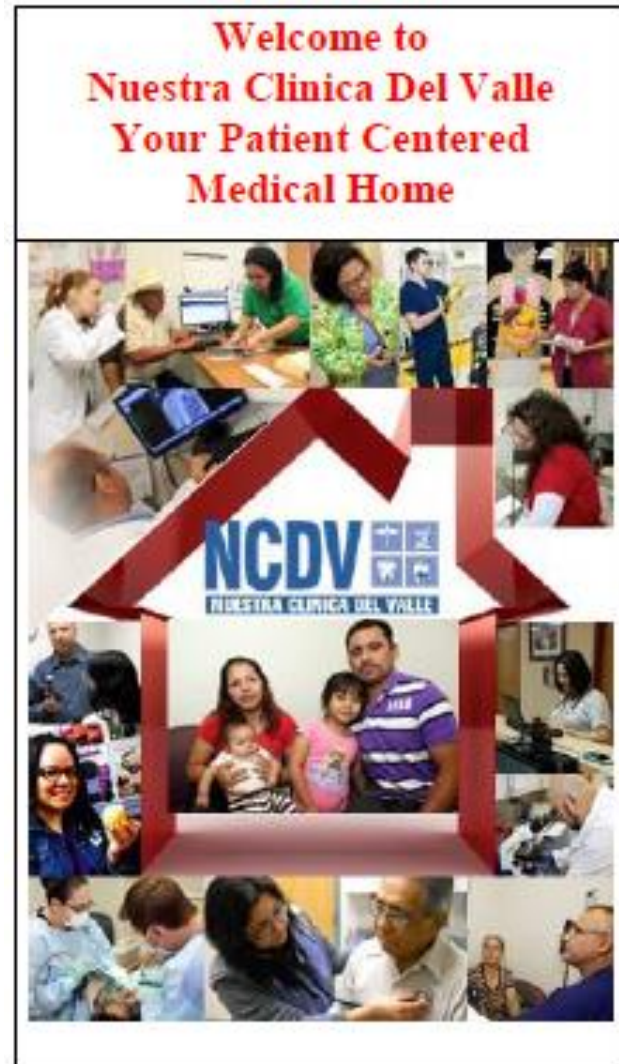
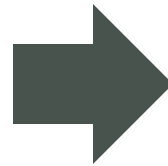
Provider Name: JESSENYA L. FALCON, PA-C

Team Member Name	*Team Member Signature	Department
1. Crystal Sanchez	<i>[Signature]</i>	Nursing
2. Jessenya Falcon	<i>[Signature]</i>	PA-C
3. Dante Gutierrez	<i>[Signature]</i>	N. Assistant
4. NOLVA PANSECA	<i>[Signature]</i>	MIR
5. Leydis Maldonado	<i>[Signature]</i>	SS.
6.		
7.		

2

Process: Patient Education

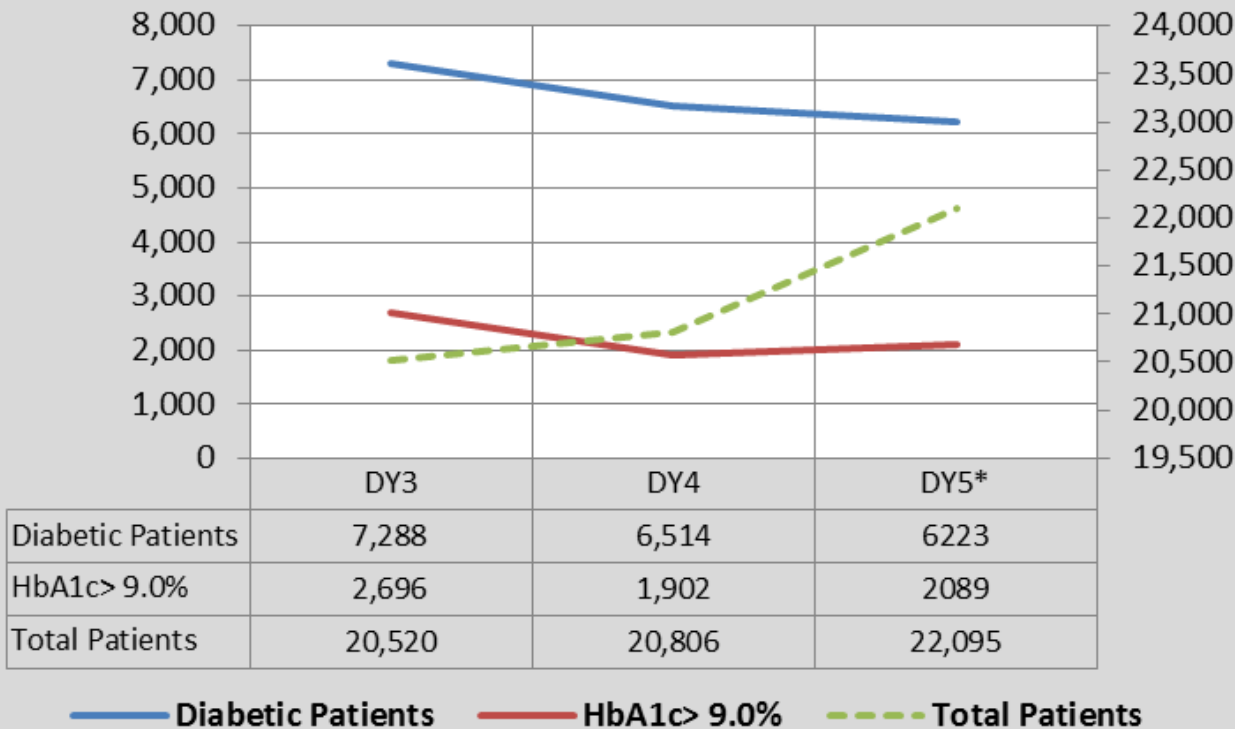
- All patients review individual care plans with their physician or NP, nurse, and dietician.
- Patients watch a video about the disease process of diabetes.
- Patients are provided an educational pamphlet about diabetes management.



3

Outcomes: Showing Improvement

NCDV HbA1c Trending



* Projected based on data from October 1, 2015 – June 30, 2016

- 11.8% decrease in overall patients with diabetes from DY3 to DY4.
- Projecting a 17.1% decrease in overall patients with diabetes from DY3 to DY5
- Decreased patients with HbA1c >9% from 37.0% in DY3 to 29.2% in DY4 and projected 33.6% in DY5.

PCMH is Making a Difference



“PCMH provides a partnership with the primary care team, creating better support and communication among providers, patients and their families. Care is organized and patients are able to access services with shorter waiting times including 24/7 electronic or telephone access. The medical home is a place where patients will be treated with respect, dignity and compassion while achieving excellent primary care.”

- Flora Reyes, San Juan Clinic Coordinator

PCMH has been a rewarding and beneficial culture change that has brought together systems in place in a more coordinated effort that has yielded positive patient outcomes which translate to development of a healthier community.

—Christian Martinez, COO

Thank You!

Lance Ames

Associate Administrator

South Texas Health System

Email: lance.ames@uhsrgv.com

