Meeting summary for [Opt] CalHIVE BHI BeeHIVE - January: Pilot Site Evaluation and Engagement - Resources and Sharing (01/30/2024)

Quick recap

The webinar focused on the importance of early provider engagement and communication. Daniel Blocker from Pomona shared a presentation they gave on proposed workflow for patient care, emphasizing the need for feedback and collaboration. The team also discussed a pilot project aiming to enhance behavioral health services in primary care departments, highlighting the challenges of implementing a measurement plan, including the need for baseline data and system alignment. Future plans include a Commons meeting on February 13th and an optional webinar on training, education, and monitoring in February.

Summary

First Beehive Webinar of the Year on Pilot-Side Evaluation Engagement
Anna Baer introduced the first beehive webinar of the year on pilot-side evaluation engagement. She provided tech tips for the attendees and encouraged active participation. The webinar was designed for peer sharing and resource exchange. Anna also mentioned the use of the Zoom AI summary feature and invited questions or technical issues to be directed messaged to her. Participants were invited to introduce themselves and their organizations, which included representatives from Chinese Hospital, Community Memorial, UCSD, Pearlman, Pomona Valley Hospital, Riverside Family Physicians, San Francisco Health Network, and Sharp.

Pilot Site Evaluation and Engagement Discussion
Kristina led a discussion about a pilot site evaluation engagement, emphasizing the importance of connections and learning from each other's experiences. Next steps outlined by Kristina include getting the team together with clinical champions and engaged stakeholders to discuss their willingness to recommit to scaling and ensuring stability for the pilot site office. A "Choose your own adventure" poll was launched to choose between pilot site evaluation or pilot site engagement, with the majority voting for sharing impactful resources. Kristina then discussed the importance of engaging the pilot site for the behavioral health integration project, stressing the need for fact-finding to identify any gaps in knowledge. She highlighted the use of surveys and a stakeholder analysis and communication plan to facilitate effective communication and manage change. The discussion ended with Kristina inviting teams to share their experiences and plans related to pilot site engagement.

Patient Care Workflow Revision and Feedback

Daniel Blocker from Pomona Valley shared about their staff meetings where they discussed their proposed workflow for patient care with physicians and other involved parties. The feedback received indicated some challenges, leading them to rework the workflow and pilot it with three different physicians. Kristina Mody, PBGH/CQC from PBGH/CQC commended their early start and involvement of various stakeholders. Daniel also shared some changes they made, such as adjusting their engagement threshold from a score of 10 to 15 and dealing with discrepancies in their depression screener. He invited further thoughts and ideas via email for continuous improvement.

Pilot Program Provider Engagement Strategies
Kristina Mody, PBGH/CQC emphasized the importance of early engagement and buy-in from providers participating in the pilot program. She also mentioned Dan's email for further follow-up. Chris Lee shared that they were restarting their pilot site after losing their clinical champion. They were exploring different providers and assessing who would be a good fit for the program. Aasif Parekh shared that they had selected their pilot site and successfully gained buy-in from clinical and admin staff through morning huddles. Kristina suggested that teams consider creating an elevator pitch to succinctly explain their project.

Physician Staff Huddles: Communication and Engagement
The team discussed the importance of efficient and effective communication with physician staff huddles. Aasif Parekh emphasized the need for brief and simplified messages to avoid confusion. Scott Heimer highlighted the importance of consistency and availability, and the need to assure physicians that the project is not adding to their workload. The team also discussed the benefit of having physician champions, but acknowledged that not all pilot sites may have them. Kristina Mody, PBGH/CQC suggested alternative ways to get feedback and engagement from physicians, such as involving them in the implementation process and making them advocates. The team also encouraged sharing of ideas and experiences among different teams.

Behavioral Health Services Expansion Progress
Denise Coyle from Scripps discussed the progress of a pilot project aiming to enhance behavioral health services in primary care departments. Denise mentioned that the project had attracted interest from multiple departments, but was initially restricted to two. The team was now in discussions with their administration about financial support for hiring a behavioral health specialist. The project was also considering the shift towards virtual health in behavioral health services. Kristina Mody, PBGH/CQC suggested that Denise's team should provide updates on the project's progress at regular intervals. The team also discussed the importance of selecting appropriate measures for the project.

Pilot Site Measurement Plan Discussion

Kristina Mody, PBGH/CQC discusses the pilot site measurement plan, which includes five categories: outcome measures, process measures, patient experience, workforce, financial, and financial. She suggests leveraging data from Calhive Bhi for outcome measures like HBA1C poor control, depression, remission and response, and patient experience measures. Kristina also recommends a patient experience measure, which can be used to ask specific questions about care and patient satisfaction. However, the big caveat is that this tool is not going to speak to all of the organization's specific contracts or revenue opportunities. The PBGH/CQC suggests using a tool highlighted in a peer sharing webinar and a National Council resource for decision support modeling.

Implementing Measurement Plan for Pilot Site
The team discussed the challenges of implementing a measurement plan for the pilot site, given the transition to a new system in March. Kristina highlighted the importance of collecting baseline data and the need to align systems for seamless integration. Aasif suggested that synchronizing the application used by physicians and social workers could aid the buy-in process. The team was urged to complete Section 5 of the BHI implementation plan by the end of January. Future plans include another CalHIVE BHI Commons meeting on February 13th and an optional webinar on training, education, and monitoring in February.