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The mission of the Department of Health is to improve health through leadership and innovation.

Welcome to the New Jersey DSRIP Learning Collaborative

June 23rd, 2014
2:00 PM – 4:00 PM

New Jersey Department of Health (NJDOH)





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**Please hold all questions
until the end of the presentations.
Thank you.**





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DSRIP Program Update

- ✓ Databook and Attribution
- ✓ Baseline MMIS Data
- ✓ DY3 1st Quarter Progress Report
- ✓ Due July 31, 2014
 - Includes Completion of Stage I Quarterly Activities (13, 14, and 15)
- ✓ Learning Collaborative Monthly Survey





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Objectives

- ✓ To understand the purpose and goals of the Learning Collaborative (LC)
- ✓ To understand the (LC) structure
- ✓ To understand the responsibilities of the LC participants
- ✓ To introduce key quality improvement concepts
- ✓ To hold break-out sessions by focus area/ LC
 - Discuss the LC aims, objectives and intervention methodologies
 - Begin peer-to-peer networking support





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Purpose of Learning Collaborative:

The purpose of the learning collaborative is to promote and support a continuous environment of learning and sharing within the New Jersey healthcare industry in an effort to bring meaningful improvement to the landscape of healthcare in New Jersey.





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Goals of the Learning Collaborative:

The learning collaborative will be designed to promote and/or perform the following:

- ✓ Sharing of DSRIP project development including data, challenges, and proposed solutions based on the hospitals' quarterly progress reports
- ✓ Collaborating based on shared ability and experience
- ✓ Identifying key project personnel
- ✓ Identification of best practices
- ✓ Provide updates on DSRIP program and outcomes
- ✓ Track and produce a "Frequently Asked Questions" document
- ✓ Encourage the principles of continuous quality improvement cycles





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The Learning Collaborative Schedule:

- ✓ Meet monthly, every second Thursday
 - First and second month of the quarter will be via conference call/webinar
 - Call will last one hour





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The Learning Collaborative Schedule:

- ✓ Last month of quarter will be in-person session
 - First hour will be general industry topic/program updates
 - Second hour will be LC break-out sessions
 - Held at NJHA, unless otherwise notified
 - DOH encourages LC participants to reach out to other participants as needed throughout the demonstration period





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Learning Collaborative Attendance:

- ✓ Attendance at Learning Collaborative is **MANDATORY**
- ✓ Each hospital is required to have **TWO** hospital representatives in attendance:
 - Required: One hospital representative that is either the DSRIP Champion or DSRIP Project Manager
 - Required: Another hospital representative or a DSRIP stakeholder (such as project partner)
- ✓ No more than two hospital representatives in attendance per hospital, with exception of a hospital system representative





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LC System Representative:

A single representative from a hospital system (i.e. multiple hospitals) is allowed to attend in addition to the two required LC representatives

OR

A system representative may represent each DSRIP hospital in their system along with another hospital representative, as long as one of these individuals is a DSRIP Champion or DSRIP Project Manager





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LC Attendance Example 1:

- ✓ Hospitals A, B, and C are part of Hospital System 1. Ms. Jones represents all three hospitals and is also the DSRIP Champion for all three hospitals.
 - Ms. Jones will attend the monthly LC and represent Hospital A, B, and C as the DSRIP Champion for each hospital.
 - Mr. Smith (project manager), Mr. Reid (CEO), and Dr. Avery (project partner) will attend the LC and represent Hospitals A, B and C, respectively.
 - A total of 4 representatives from Hospital System 1 will be in attendance to represent Hospitals A, B, and C.



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LC Attendance Example 2:

- ✓ Hospitals D, E, and F are part of Hospital System 2. Mr. Martin, as the Chief Operating Officer, represents all three hospitals.
 - Mr. Martin, COO, will attend the monthly LC and represent Hospital D, E, and F as a system representative.
 - Mrs. Emge, DSRIP Project Manager for Hospital D, will attend along with Mrs. Roberts, RN.
 - Mrs. Chavez, DSRIP Project Manager for Hospital E, will attend along with Dr. Rodriguez.
 - Mr. Green, DSIRP Project Manager for Hospital F, will attend along with Dr. Smith. Dr. Smith works at the FQHC clinic that is partnering with Hospital F.
 - A total of 7 representatives from Hospital System 2 will be in attendance to represent Hospitals D, E, and F.





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Five Learning Collaboratives:

LC 1: Asthma/Pneumonia (combined)

- Pediatric Asthma Case Management and Home Evaluations
- Hospital-Based Educators Teach Optimal Asthma Care
- Patients Receive Recommended Care for Community-Acquired Pneumonia

LC 2: Behavioral Health/Chemical Addiction/Substance Abuse (combined)

- Electronic Self-Assessment Decision Support Tool
- Integrated Health Home for the Seriously Mentally Ill (SMI)
- Hospital-Wide Screening for Substance Use Disorder





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Five Learning Collaboratives (Continued):

LC 3: Cardiac Care #1

- Care Transitions Intervention Model to Reduce 30-Day Readmissions for Chronic Cardiac Conditions

LC 4: Cardiac Care #2

- Extensive Patient CHF-Focused Multi-Therapeutic Model
- The Congestive Heart Failure Transition Program (CHF-TP)





Five Learning Collaboratives (Continued):

LC 5: Diabetes and Obesity

- Diabetes Group Visits for Patients and Community Education
- Improve Overall Quality of Care for Patients Diagnosed with Diabetes Mellitus and Hypertension
- After School Obesity Program



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Learning Collaborative Content:

- ✓ General Session (Quarterly Face-to-face)
 - New Jersey DSRIP program updates and accomplishments
 - General topic which applies across DSRIP projects
 - Potential guest speakers

- ✓ Breakout Sessions (Quarterly and Monthly)
 - Summary of prior meeting
 - Hospital accomplishments/achievement of milestones
 - Hospital success stories/best practices
 - Hospital challenges and resolutions
 - LC-specific topic



Role	Responsibilities
Moderator	<ul style="list-style-type: none">• Organizes LC meetings• Summarizes and distributes LC materials (reports and agendas)• Introduces the LC aims (project objectives), and submitted hospital-specific project interventions• Supports chair and co-chair to ensure meeting goals are met
Chair /Co-chair	<ul style="list-style-type: none">• State or hospital representative• Assists the moderator in meeting agenda goals• Leads, stimulates and encourages conversation to build collaboration and hospital support• Ensures that all LC participants have an opportunity to share information, including their own hospital's data• Keeps the meeting focused and on-topic
Participant	<ul style="list-style-type: none">• Discusses project planning and infrastructure development• Completes timely progress reports and surveys in order to support LC• Verbally reports and shares on successes, barriers and lessons learned during LC meetings• Participation is required as a component of Stage 2, Activity 6





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Stage II, Activity 6: Provide feedback to the learning collaborative –*REQUIRED*

- ✓ Performance of Activity is quarterly starting with the quarter ending September 2014 (starts July 1, 2014) through the quarter ending March 2017 (total of 11 quarters)
 - Activity (i.e. participation in the learning collaborative) is to be performed/completed during the quarter and cannot be made up in future quarters.





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Stage II, Activity 6: Provide feedback to the learning collaborative (Continued)

- ✓ **Action/Milestone:** Participating providers engage in learning collaborative for the DSRIP program to promote sharing of best practices and resolutions to problems encountered.
- ✓ **Metrics:** Number of monthly phone calls attended
Number of attended quarterly webinars
- ✓ **Minimum Submission Requirements:**
 - Documentation supporting participation with the New Jersey Learning Collaborative such as copies of correspondence and meeting attendance/attendees
 - Summary of Learning Collaborative engagement and results





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Learning Collaborative Summary Reports

- Using the submitted hospital DSRIP progress reports and learning collaborative surveys, the Department will produce a summary report that will be provided to each learning collaborative.
- The report will summarize DSRIP progress, challenges, best practices, and challenge resolutions.



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Speaker:

Dr. Kimberly Rask, M.D., Ph.D., F.A.C.P.

Alliant Health Solutions

Topic:

Rapid Cycle Learning and PDSA Cycles





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Q & A

