TRACTION MONTHLY WEBINAR B

November 20, 2020

AGENDA

- Thank you for your participation!
- Updates to the Chart Review Form (both Google Form and Word versions)
  - Questions about the chart review?
- PDSA Discussion
- Review of the Monthly Data
- Next Steps

UPDATES TO THE CHART REVIEW TOOL

QUESTIONS ABOUT THE CHART REVIEW TOOL?

PDSA DISCUSSION

- Questions about PDSAs?

- How are the teams forming and carrying on?

- Have you submitted a PDSA?

- Overview of submitted PDSAs

ARA PHOENIX PDSA
TITLE: SHARED DECISION MAKING FOR PATIENT TREATMENT GOALS

PLAN

What is the objective for this cycle?

Assess RA patient's goal of treatment while implementing shared decision making

What do you predict will happen?

Strengthen patient-provider relationship while improving patient outcomes

What is the plan for the cycle? What are the steps to execute the cycle, including data collection (who, what, where, when)?

Goals will be discussed and answers documented using standard phrases in the office note under the impression section in the RA assessment.

DO

Carry out the cycle. What did you observe? Include descriptions of successful encounters, problems, and other special circumstances that may or may not have been part of the plan.

Monthly chart audits.

STUDY

Summarize and analyze the observed results. What did you learn from this cycle?

25% of the chart from the first cycle had the goal documented. The process was quite easy to implement and did not take much time.

Do the results agree with the predictions you listed in the "Plan" phase? (circle one)

Yes   No

ACT

What action are you going to take as a result of this cycle? (circle one)

Expand the Test   Adapt the Test   Abandon the Test

Plan for the next cycle. What changes are needed? If expanding or adapting, what will you do to continue your learning while beginning to spread the successes?

Implement shared decision-making model to achieve better patient outcomes and target goal.

UNIVERSITY OF SOUTHERN CALIFORNIA PDSA
TITLE: INCREASE RAPID3 DOCUMENTATION

DO

Carry out the cycle. What did you observe? Include descriptions of successful encounters, problems, and other special circumstances that may or may not have been part of the plan.

Still ongoing. A concern is that we are not going to be able to do this intervention in this cycle for phone visits.

STUDY

Summarize and analyze the observed results. What did you learn from this cycle?

We are only 1 week into this data and we would like to do this for two weeks due to limited patient encounters due to ACR

Do the results agree with the predictions you listed in the "Plan" phase? (circle one)

Yes   No

Other: We are indeed seeing an increase in documentation, but do not have the final data yet.

ACT

What action are you going to take as a result of this cycle? (circle one)

Expand the Test   Adapt the Test   Abandon the Test

Plan for the next cycle. What changes are needed? If expanding or adapting, what will you do to continue your learning while beginning to spread the successes?

Better communication with nurses.

PLAN

What is the objective for this cycle?

To increase the number of RAPID3 results documentation in our in-person RA visits

What do you predict will happen?

We will increase the number of notes with RAPID3 documentation by 50%

What is the plan for the cycle? What are the steps to execute the cycle, including data collection (who, what, where, when)?

Dr. Zagelbaum and I will ensure that all in-person RA individuals are giving the RAPID3 form in either English or Spanish as appropriate prior to the visit. We will then enter the results in the clinic note from that day.

ARA GLENDALE PDSA
TITLE: TRACKING PATIENTS RA TREATMENT GOALS

PLAN

What is the objective for this cycle?

To assess each RA patients' goal of treatment and document it in the chart.

What do you predict will happen?

There was likely going to be a small percentage from the first month that had the goal documented, as this intervention was implemented towards the end of the first month.

What is the plan for the cycle? What are the steps to execute the cycle, including data collection (who, what, where, when)?

To ask the patient what their goal of RA treatment is and then to document it in the impression of the chart. Then monthly, to choose 12 charts each to review to assess if this process was carried out.

DO

Carry out the cycle. What did you observe? Include descriptions of successful encounters, problems, and other special circumstances that may or may not have been part of the plan.

It was observed that the time used to ask the goal and to document it in the impression was quite quick. Numerous patients needed coaching/examples of goals given in order to provide a more concise answer.

STUDY

Summarize and analyze the observed results. What did you learn from this cycle?

25% of the chart from the first cycle had the goal documented. The process was quite easy to implement and did not take much time.

Do the results agree with the predictions you listed in the "Plan" phase? (circle one)

Yes   No

ACT

What action are you going to take as a result of this cycle? (circle one)

Expand the Test   Adapt the Test   Abandon the Test

Plan for the next cycle. What changes are needed? If expanding or adapting, what will you do to continue your learning while beginning to spread the successes?

To continue this effort to get a higher percentage of adherence. Will then revaluate at the end of cycle 2.

UNIVERSITY OF IOWA PDSA
TITLE: IMPLEMENT AN EPIC SMARTPHRASE FOR DOCUMENTING DAM, T2T GOAL AND SDM

PLAN

What is the objective for this cycle?

To create and implement a SmartPhrase in Epic for documenting key components of the TRACTION LC: 1) disease activity measure (DAM) used by provider, 2) T2T goal for patient, 3) shared-decision making statement pertaining to treatment change to achieve T2T.

What do you predict will happen?

This will allow each provider participating in the TRACTION LC to standardize their documentation to help implement T2T during their clinic visit with the patient. Additionally, this will optimize chart reviews.

What is the plan for the cycle? What are the steps to execute the cycle, including data collection (who, what, where, when)?

A member of our team (PL) will design a SmartPhrase and feedback will be given by the other team members (providers) so that we reach a consensus smart-phrase to be used in the future for all RA patient notes by the TRACTION LC providers.

DO

Carry out the cycle. What did you observe? Include descriptions of successful encounters, problems, and other special circumstances that may or may not have been part of the plan.

We came up with a preliminary SmartPhrase which contained the essential parts of T2T. Our team discussed whether to use full sentences or medical abbreviations, which other providers and/or the billing/coding department might not be familiar with, as well as patients who have access to their notes and who might not understand the documentation.

STUDY

Summarize and analyze the observed results. What did you learn from this cycle?
Documentation of the key components of T2T is essential to help guide discussion with the patient, but there are several ways of documenting which need to be optimized for streamlined use in our notes.

Do the results agree with the predictions you listed in the "Plan" phase? (circle one)

Yes   No

ACT

What action are you going to take as a result of this cycle? (circle one)

Expand the Test   Adapt the Test   Abandon the Test

Plan for the next cycle. What changes are needed? If expanding or adapting, what will you do to continue your learning while beginning to spread the successes?

We will plan to adapt and modify our SmartPhrase such that we spell out some of the medical abbreviations (T2T, LDA, etc.). We will also add elements which should be documented in the shared decision making section (such as discussing risk, benefits, and side effects of medications).

UNIVERSITY OF ROCHESTER PDSA
TITLE: IMPLEMENTING RA DISEASE ACTIVITY ASSESSMENT

PLAN

What is the objective for this cycle?

Create a team based model to implement RA disease activity assessment in the rheumatology clinics

What do you predict will happen?

This will help increase frequency of assessment of RA disease activity

What is the plan for the cycle? What are the steps to execute the cycle, including data collection (who, what, where, when)?

Form team, delegate activities and meet on Friday afternoons at the clinic

DO

Carry out the cycle. What did you observe? Include descriptions of successful encounters, problems, and other special circumstances that may or may not have been part of the plan.

Team formed – including administraive assistant in addtion to QI participants. Plan to include RA nurse. Will use CDAI as measure

STUDY

Summarize and analyze the observed results. What did you learn from this cycle?

Successfully completed first meeting and agreed to use team model. Agreed as a team to use CDAI as assessment tool.

Do the results agree with the predictions you listed in the "Plan" phase? (circle one)

Yes   No

ACT

What action are you going to take as a result of this cycle? (circle one)

Expand the Test   Adapt the Test   Abandon the Test

Plan for the next cycle. What changes are needed? If expanding or adapting, what will you do to continue your learning while beginning to spread the successes?

Include others in the team who are yet to complete "training" from the TRACTION program

GUNDERSEN HEALTH SYSTEM PDSA
TITLE: HOW TO DISTRIBUTE THE R3 – TAKE 2.

PLAN

What is the objective for this cycle?

Determine how to best get the R3 to our RA patients.

What do you predict will happen?

As a group we will find a new strategy. It will probably more realistic this time, because we have already learned from our first round. The new strategy will be a less cumbersome process for everyone. We won't have to rely on an archaic system (snail mail). Having the patient complete the R3 right at the time of visit will be most up to date – and will provide a visual to remind the provider to address the R3.

What is the plan for the cycle? What are the steps to execute the cycle, including data collection (who, what, where, when)?

R3's will be given to the patients by the MA's when patients arrive at the clinic. Randi and LeeAnne will mail out R3's to phone call and skype visits. Providers will score it when they get in the exam room.

MA's will have to determine which patients need the RA – this should only require a quick chart review when prepping for that day's patients. Randi agreed to educate remaining MA's about the process and get them on board.

DO

Carry out the cycle. What did you observe? Include descriptions of successful encounters, problems, and other special circumstances that may or may not have been part of the plan.

All group members liked the new process – at least in theory. Thought it would be more efficient and would also allow for more consistent distribution to all RA patients.

STUDY

Summarize and analyze the observed results. What did you learn from this cycle?

Do the results agree with the predictions you listed in the "Plan" phase? (circle one)

No   Yes

ACT

What action are you going to take as a result of this cycle? (circle one)

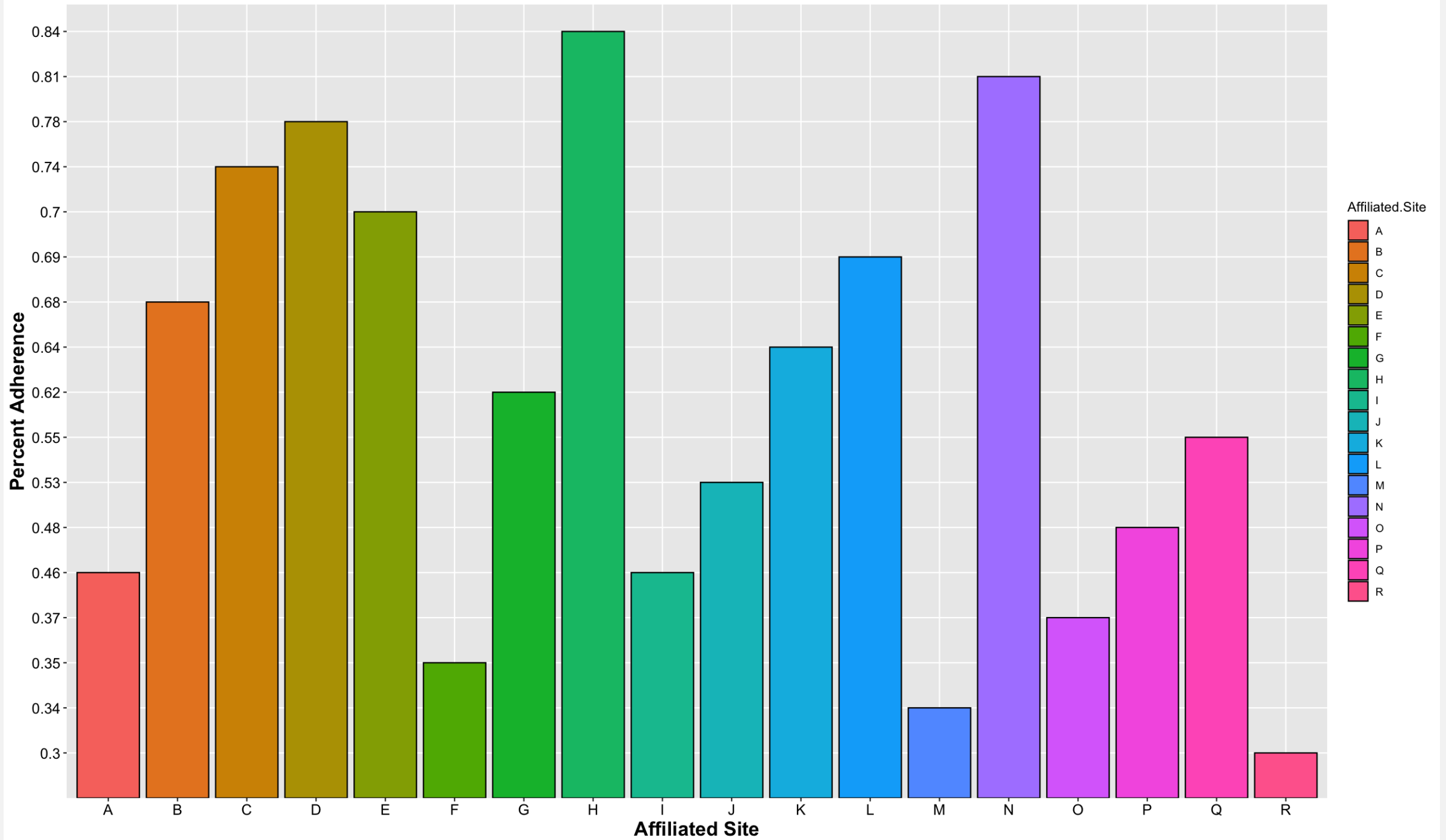Expand the Test   Adapt the Test   Abandon the Test

Plan for the next cycle. What changes are needed? If expanding or adapting, what will you do to continue your learning while beginning to spread the successes?
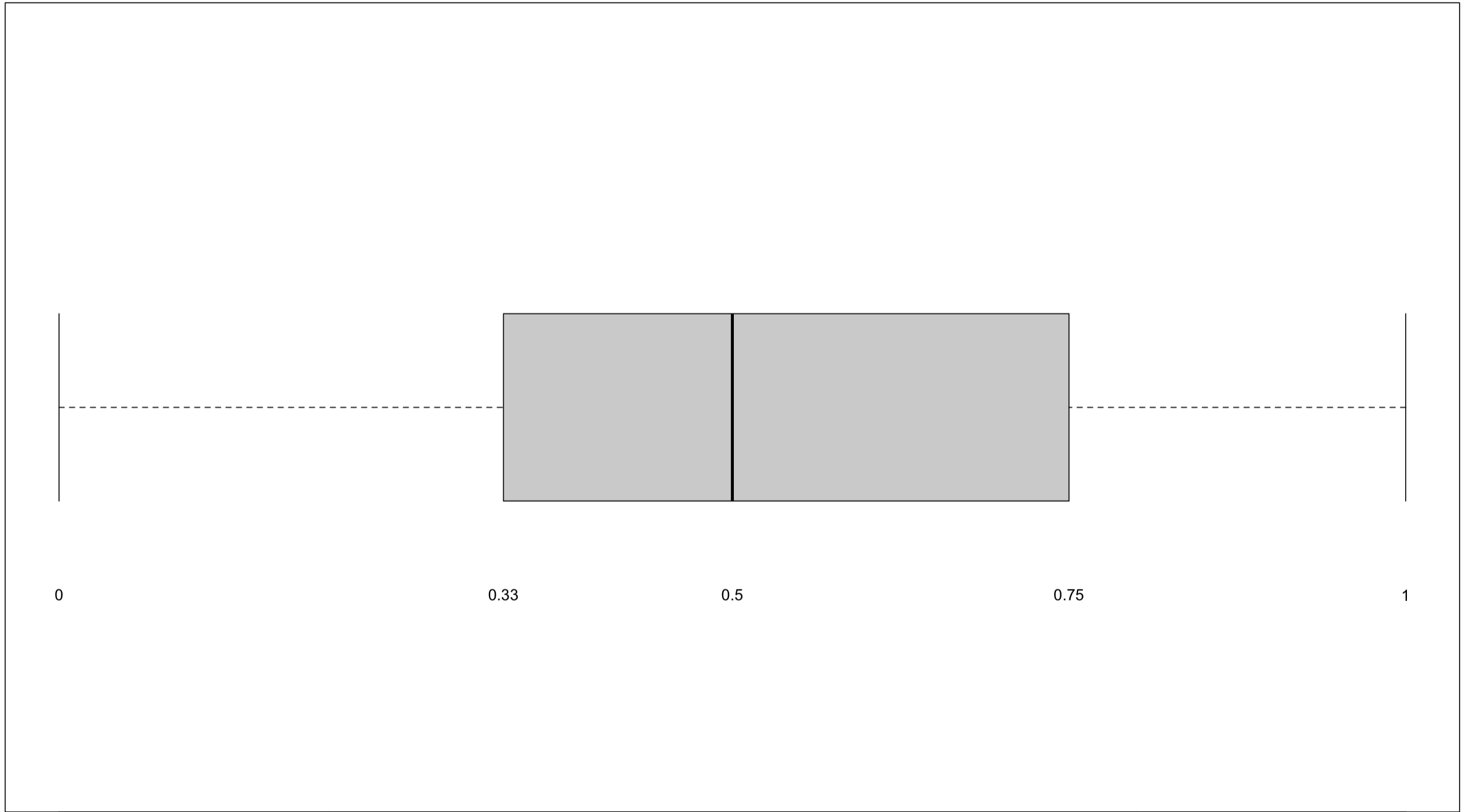
TRACTION DATA VISUALIZATION

November Monthly Webinar
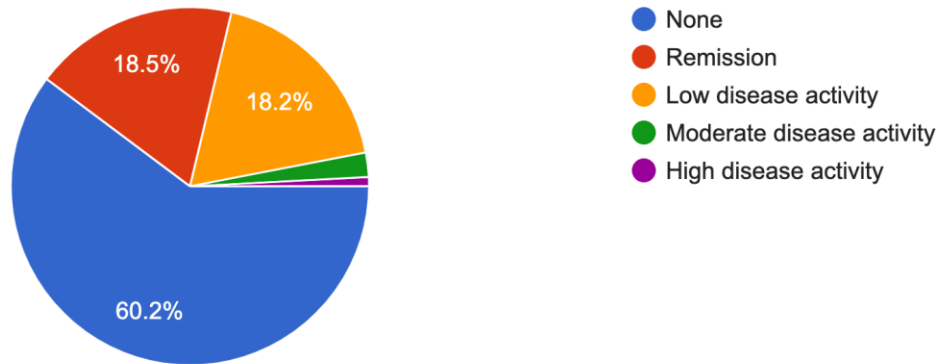
% Adherence by Site for November Webinar
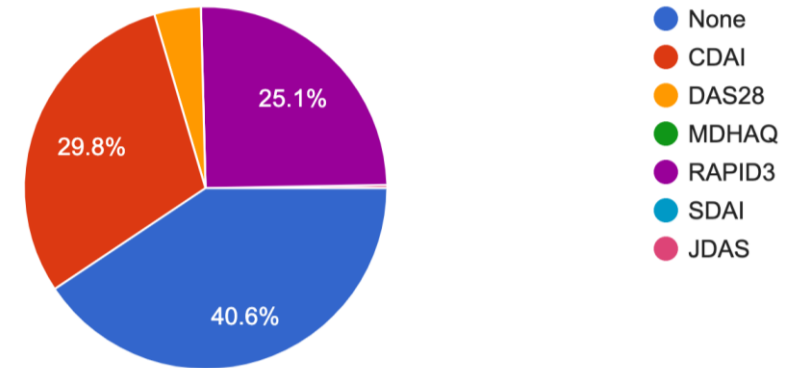
Adherence Across All Sites (Median and IQR)
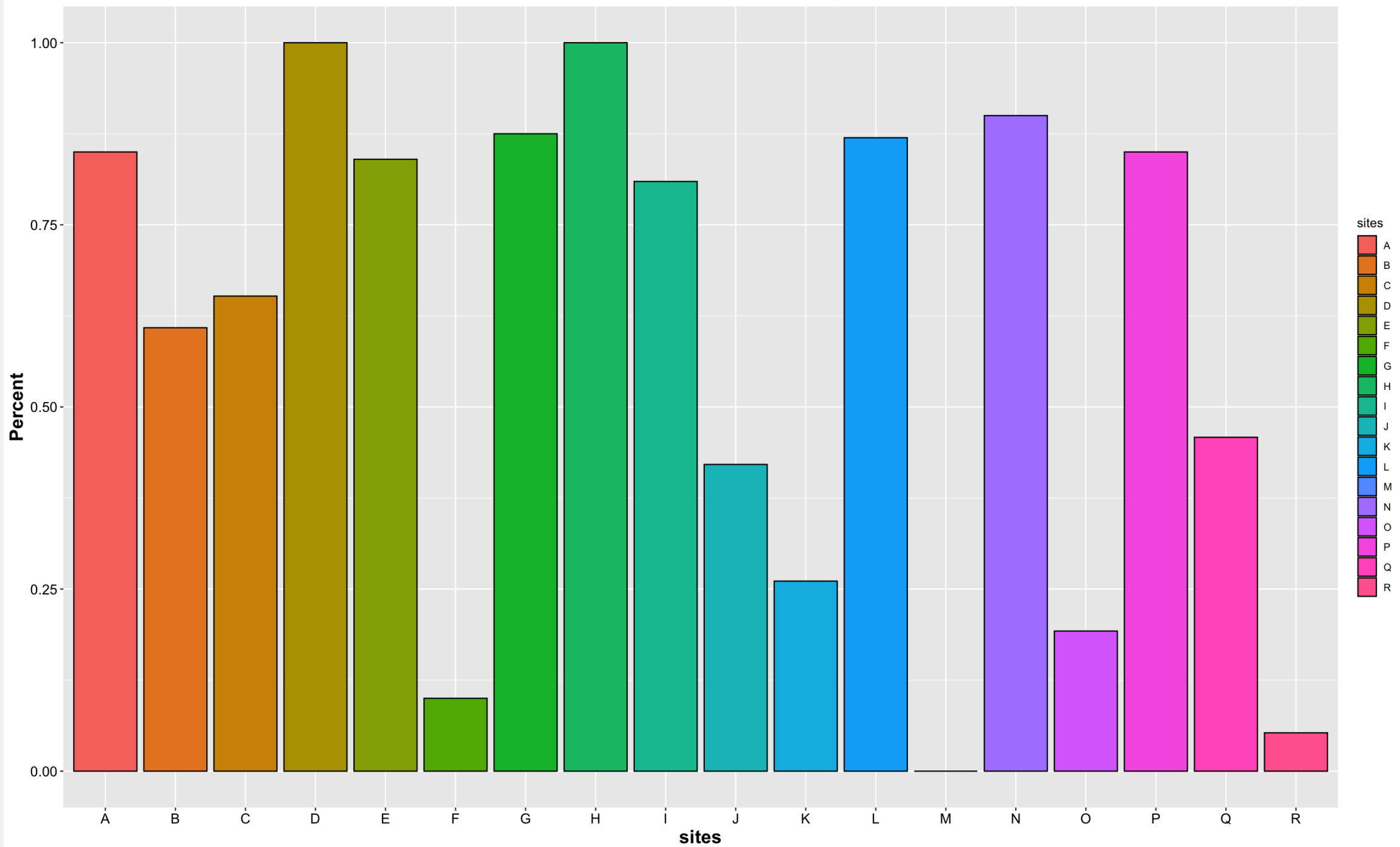
Is there a treatment "target" noted?

362 responses

- None
- Remission
- Low disease activity
- Moderate disease activity
- High disease activity

18.5%
18.2%
60.2%

Does the note mention a disease activity?

362 responses

- None
- CDAI
- DAS28
- MDHAQ
- RAPID3
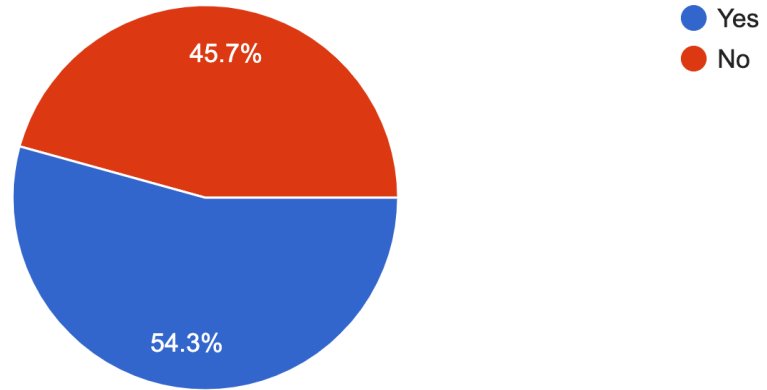- SDAI
- JDAS

25.1%
29.8%
40.6%

ACTIVITY MEASURES AND TARGETS

% of Charts with 'Yes' to Disease Activity Present

If the patient is not at target, was there a change in treatment?
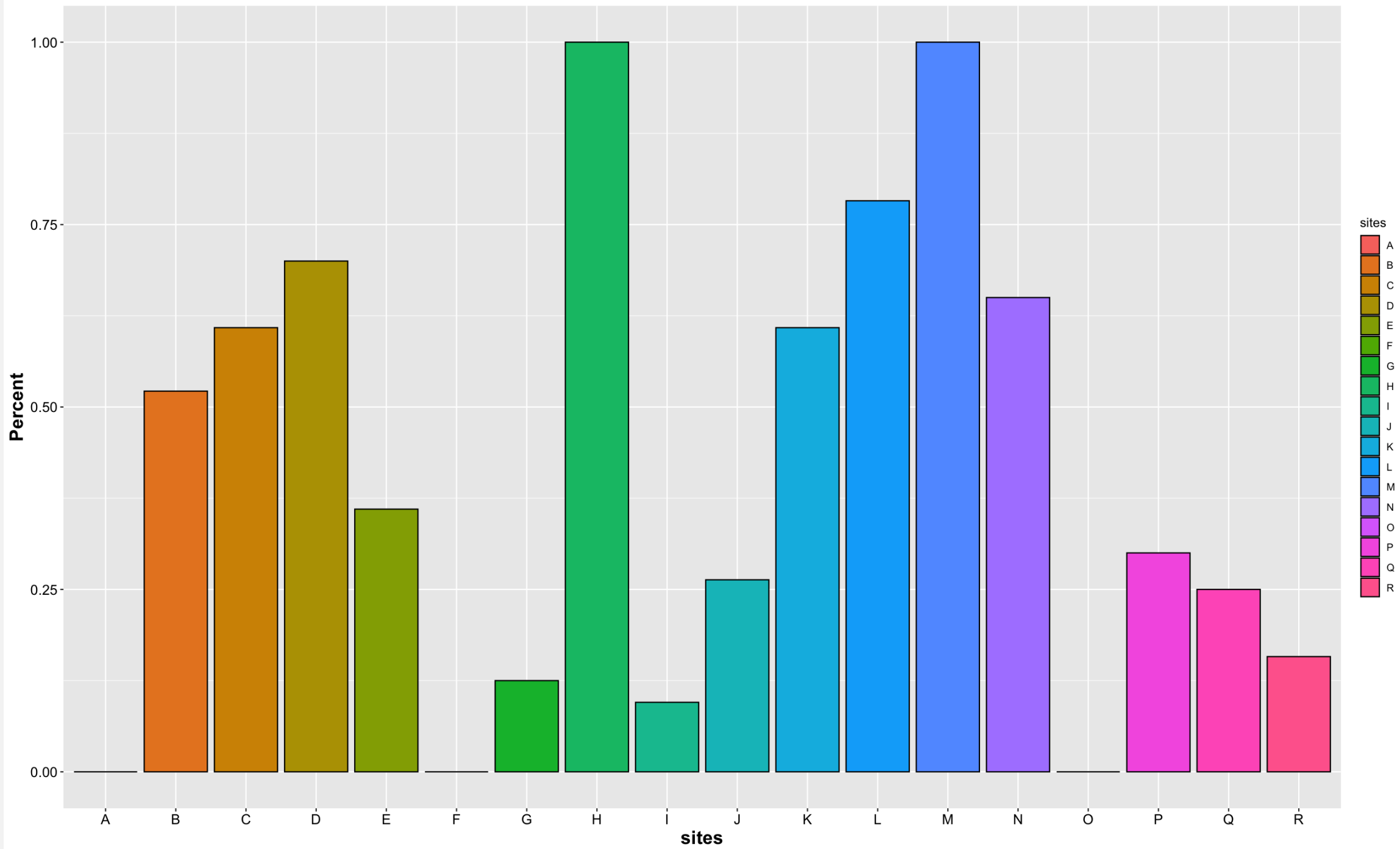221 responses

- Yes
- No

45.7%
54.3%

Is the patient "at target" (see table below for information about disease activity levels)?
362 responses

- Yes
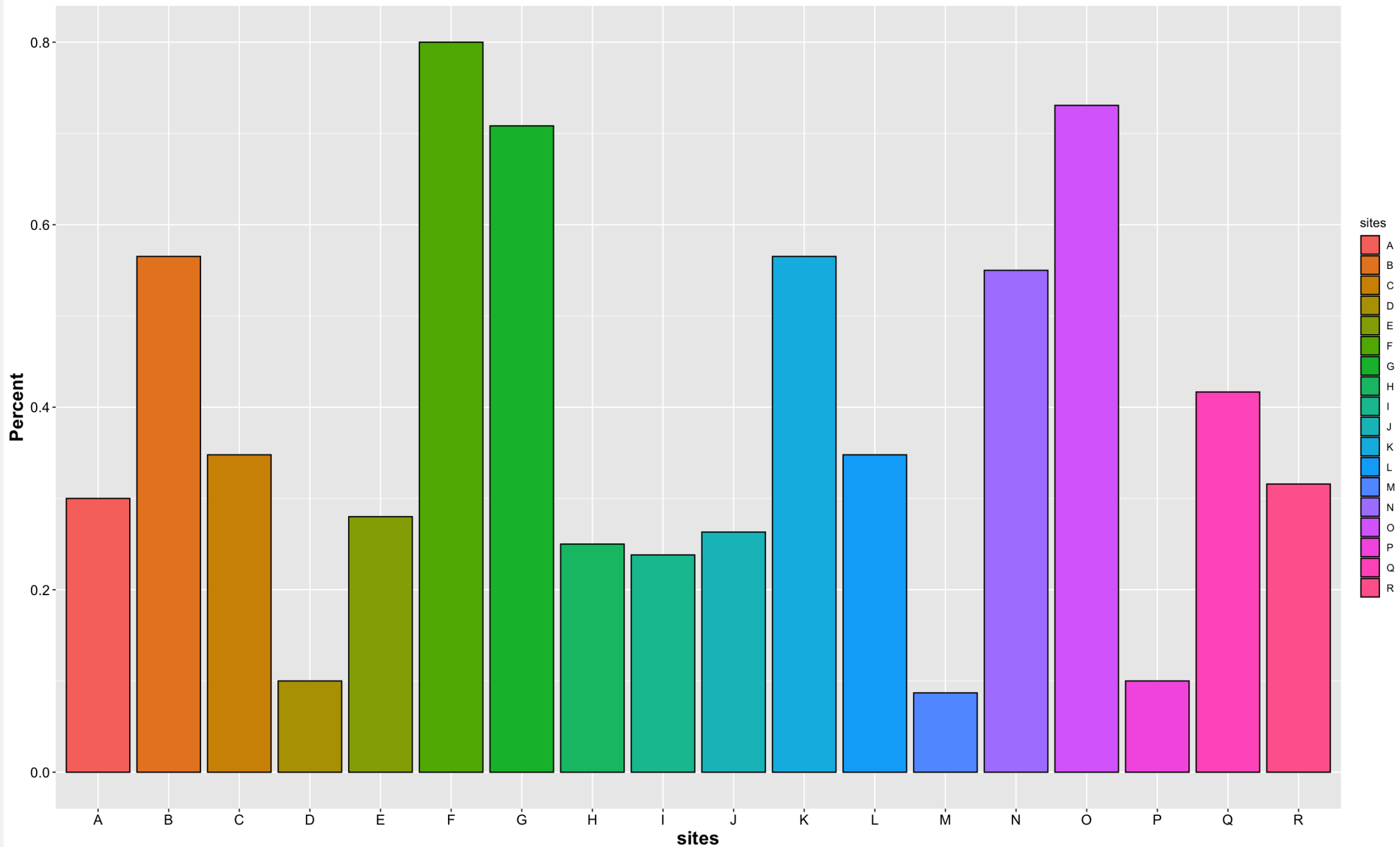- No
- No target listed in note

59.9%
39.5%
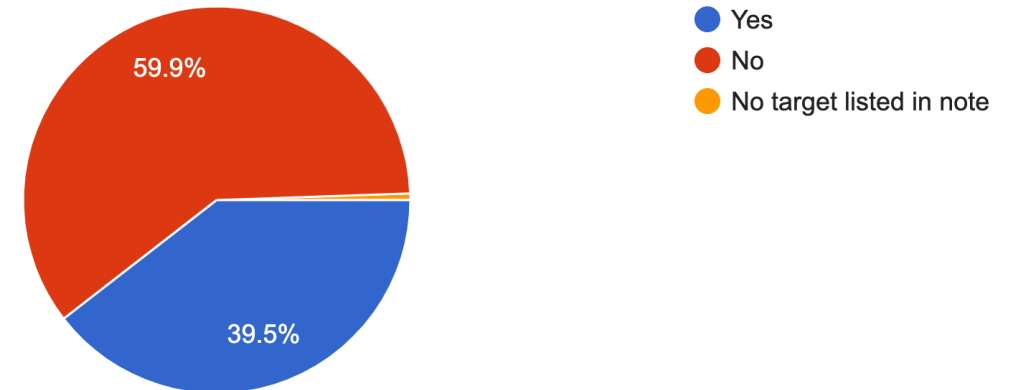
RESPONSE TO TARGET

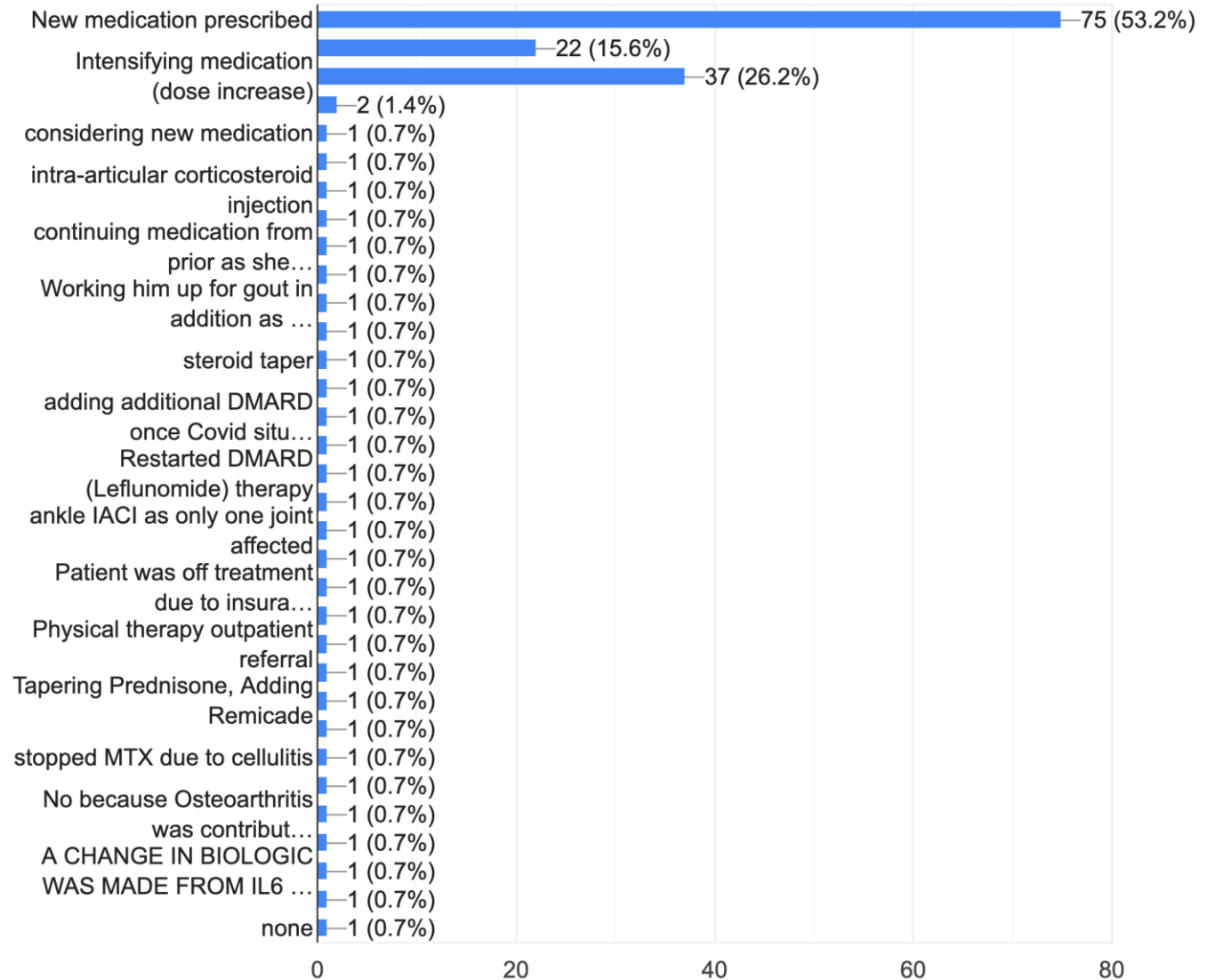% of Charts with 'Yes' to Activity Target Present

% of Patients At Target

TREATMENT CHANGES

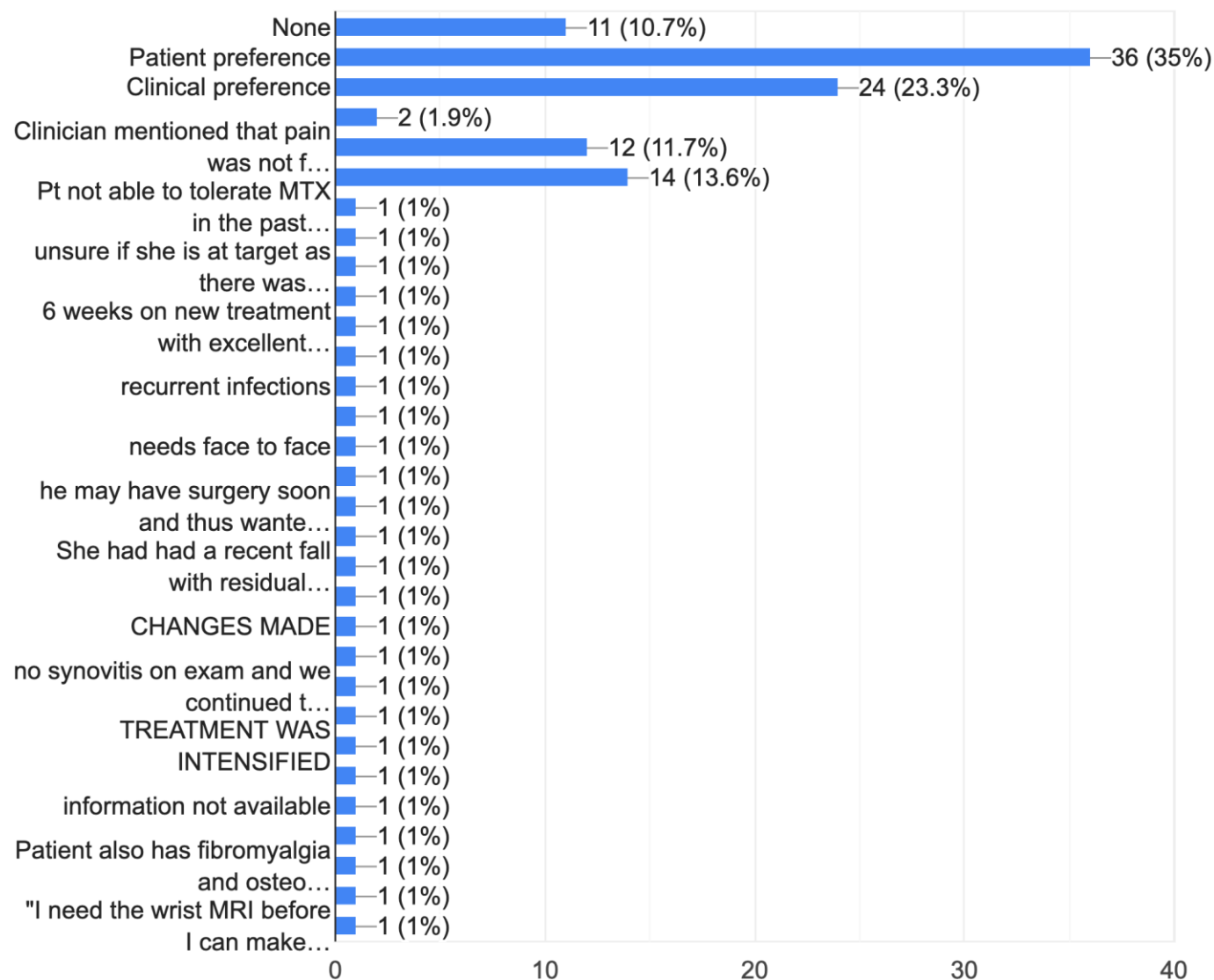If there was a treatment change noted, please select all that apply.

141 responses

REASONS FOR NO TREATMENT CHANGE

If NOT at target and NO treatment change was recorded, is there a reason noted for this?

103 responses

Reason	Count
None	11 (10.7%)
Patient preference	36 (35%)
Clinical preference	24 (23.3%)
Clinician mentioned that pain was not f…	2 (1.9%)
	12 (11.7%)
Pt not able to tolerate MTX in the past…	14 (13.6%)
	1 (1%)
unsure if she is at target as there was…	1 (1%)
	1 (1%)
6 weeks on new treatment with excellent…	1 (1%)
	1 (1%)
recurrent infections	1 (1%)
	1 (1%)
needs face to face	1 (1%)
	1 (1%)
he may have surgery soon and thus wante…	1 (1%)
	1 (1%)
She had had a recent fall with residual…	1 (1%)
	1 (1%)
CHANGES MADE	1 (1%)
	1 (1%)
no synovitis on exam and we continued t…	1 (1%)
	1 (1%)
TREATMENT WAS INTENSIFIED	1 (1%)
	1 (1%)
information not available	1 (1%)
	1 (1%)
Patient also has fibromyalgia and osteo…	1 (1%)
	1 (1%)
"I need the wrist MRI before I can make…	1 (1%)

SHARED DECISION MAKING

Common Phrases

"Discussed treatment options"

"Discussed options of switching vs escalating
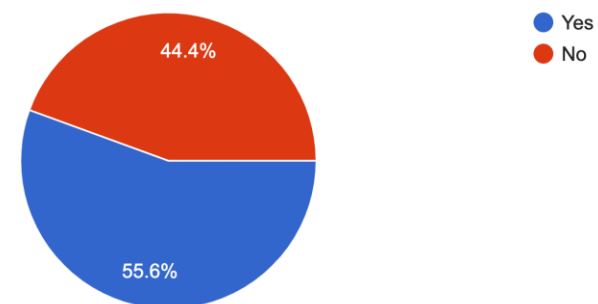
"Patient prefers to continue on current medications"

"Side effects, risks and benefits reviewed with patient, patient agrees"

"Patient prefers not to escalate"

"Because patient is not at goal, we discussed options to include…"

If a decision about treatment or treatment target was made, is there evidence of Shared Decision Making?

288 responses

- ● Yes
- ● No

44.4%

55.6%

% Shared Decision Making