

COTTAGE GROVE HEALTH CENTER

Building Medical Homes for the ACHN
Learning Session 4
Health Center Storyboards

Team Members

- **Facilitator:** Dru O'Rourke
- Kimberly Walton-Verner (Pediatrician)
- Elizabeth San Juan (Nurse)
- Isabel Argueta (Medical Assistant)
- Marydale Donald (Administrator)
- Tais Crawford (Family Physician and Medical Director)

PCMH Standard 1: Enhance Access and Continuity

- Cottage Grove offers daily walk-in appointments
- Extended hours 2-3 days per week
- Saturday clinic once a month (started in September)

Standard 2: Identify and Manage Patient Populations

- This center is able to generate condition-specific patient lists and is beginning to utilize the lists for patient population management
- This center utilizes Cerner EHR as well as a clinical management application (CMapp)
- Has an asthma registry in place and a system to ensure all pediatric asthma patients receive the proper instruction and information and asthma action plans
- The CCHHS/ACHN is in the process of developing a written policy to facilitate transitioning youth to adult health care

Standard 3: Plan and Manage Care

- CMap provides day of care reminders for preventive services and for some chronic condition management
- Currently working to bring patients in that are behind on immunizations

Standard 4: Provide Self-Care Support and Community Resources

- The clinic utilizes Illinois Lifespan to locate supports and resources for families of children with special health care needs.
- Cottage Grove staff developed a resource bulletin board that provides patients and families with information about local resources
- Staff attend health fairs at local school and offer school physicals, sports physicals, and immunizations

Standard 5: Track and Coordinate Care

- Cottage Grove has developed effective processes for utilizing Medical Home Network Connect to track and coordinate care for recently discharged patients. Cottage Grove has relatively low volume in the portal but consistently follows up with patients
- Staff track referrals and follow-up with patients

Standard 6: Measure and Improve Performance

- The clinic completes the ASQ-3 at 9, 12, or 18 month visit and notes in the EHR when the ASQ-3 was administered.
- Cottage Grove had a very low volume of positive developmental screenings in 2013 and 2014 so the clinic was unable to complete the developmental screening QI activity, but has successfully implemented the project into practice.

Overall Successes

- Cottage Grove's asthma registry is a very big accomplishment for the clinic
- Cottage Grove has been very successful in implementing the team huddle policy
- There is a high volume of pediatric asthma patients and the system ensures that all patients receive proper asthma care
- Cottage Grove is successful in community outreach and connecting patients to community resources in the Southwest suburbs The QI team process using a facilitator has been well accepted and is seen to offer value for patients and for clinic staff

Overall Challenges/Barriers

- Cottage Grove has seen a lot of staff turnover and been understaffed, which has made it difficult to implement and sustain change across the clinic.