QUALITY IMPROVEMENT STORY BOARD



PROGRAM NAME:

PROJECT TITLE:

DPH STRATEGIC GOAL/OBJ.:

PROJECT TIMELINE:

QI SPECIALIST:

EMAIL/PHONE NUMBER:

CHS SPA 1 & 2

Improving Referrals to Public Health Investigators

5.1: Improve effectiveness in preventing & controlling infectious disease

Seira Kurian, MD, MPH & Olga Vigdorchik, MPH

skurian@ph.lacounty.gov;

oviadorchik@ph.lacountv.gov

PLAN

Identify an opportunity and Plan for Improvement

1. Getting Started

SPA 1/2 was suffering from severe staffing shortages for Public Health Investigators, which was resulting in rising caseloads and delays in bringing patients in for care or follow-up. For existing staff it was critical to increase efficiency in caseload management. The PHI referral process was targeted as an early point of intervention.

2. Assemble the Team

PHI Supervisor (PHIS), SPA 1/2 Area Medical Director, clinic and field nursing supervisors, business office supervisors and key Quality staff were assembled to be on a team.

3. Examine the Current Approach

Referrals focusing on bringing patients into compliance with evaluation or treatment are submitted to PHI by clinical and field staff. The first step in the referral process requires the initiation of a PHI referral form. Appropriate completion of this form ensures timeliness of follow-up, but three key components (i.e., level of risk, action to be taken, and nursing field notes), were often found to be incomplete. Baseline data found that only 33% of referrals over a 2week time contained these key elements.

The team decided that these three key fields of a PHI referral form should be highlighted in an email from the Area Medical Director to all staff reminding them of the importance of completing these fields on all PHI referral forms.

5. Develop an Improvement Theory

By increasing awareness among staff about the need for complete forms we will see improvements in form completion.

DO

Test the Theory for Improvement

6. Test the Theory

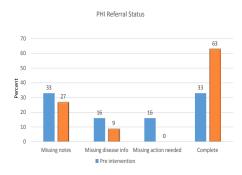
The PHIS reviewed the importance of the data elements with the supervising staff at a QI meeting and then a reminder email was sent to staff by the Area Medical Director to remind them of the need to include these data elements in all PHI referrals.

CHECK

Use Data to Study Results of the Test

7. Check the Results

For the next two weeks, randomly selected referrals were reviewed for completeness of these three fields.



Sixty-three percent of referrals now contained the complete information. PHIS also reported a decrease in the number of communications necessary to process a referral.

ACT

Standardize the Improvement and Establish Future Plans

8. Standardize the Improvement or Develop a New Theory

The improvement was standardized by developing a staff memo outlining the process by which PHI referrals should be completed and the key elements necessary for completing a referral.

9. Establish Future Plans

To further reduce the number of communications needed to process a referral, the PHIS created an Excel log that showed which stage each PHI referral was in and that was accessible to all staff online.

4. Identify Potential Solutions