



RCHC

Sharing Promising Practices:

Sonoma County Indian Health Project (SCIHP)

PHASE Clinic

Categories: Clinical Practice Operations Compliance Finance

Aim:

To improve clinical quality outcomes for PHASE patients at Sonoma County Indian Health Project (SCIHP).

Target Population:

Health center patients over age 18 with a diagnosis of diabetes or ASCVD.

Promising Practice Overview:

SCIHP implemented a PHASE Clinic on Monday mornings where PHASE identified patients are scheduled for a visit with their multidisciplinary care team at once. The SCIHP team consists of a nutritionist, a pharmacist, a provider, a health educator (RN) and a front desk representative. The PHASE clinic hours are 8:00 a.m. to 5:00 p.m. and each patient is scheduled for one hour with the team.

Measures:

SCIHP is tracking the following metrics for the PHASE program: patient reach, clinical quality including hypertension control and A1c control.

Pre-existing infrastructure:

PHASE patients were seen in traditional appointments with each team member separately where patients would end up describing their concerns or care plans with each team

members. Patients are expressing increased satisfaction in the efficiency provided through these group visits where the patient meets with all care team members at once.

Changes:

SCIHP implemented a new PHASE Clinic on Monday mornings where PHASE patients are scheduled for a visit with their multi-disciplinary care team including a registered dietitian, RN Health Educator, medical assistant, provider, and pharmacist. This opportunity provides the patient with an entire team of support for goal setting and follow-up. SCIHP developed a script for the front office representative to use when calling the patient to schedule the initial visit. Due to staff turnover, the team now consists of Clinical Pharmacist, RN Health Educator and scribe. The scribe and RN Health Educator have been trained as DEEP peer educators and are offering group classes.

Results:

SCIHP's patients are reporting increased satisfaction with the PHASE clinic as an efficient way to interact with the team and work together to set and meet goals. SCIHP has improved blood pressure control among diabetics from 61% in Q3 2015 to 71% as of Q2 2017. SCIHP has also improved by more than 20% on all PHASE prescription measures since 2015. The PHASE clinic has been expanded to a second day on Wednesdays.

Conclusions:

SCIHP's PHASE clinic provides a structured clinic encounter that improves patient satisfaction and comfort with their care team. The patient only needs to describe their situation one time instead of repeating for each care team member and the patient is provided with a multidisciplinary care team with specialized skills to serve patients with diabetes.

Companion Documents:

DEEP flyer
PHASE clinic data

DEEP

- New curriculum for group visits
- Hands on, visual learning
- Collaborative effort

Diabetes Empowerment Education Program

DEEP Workshop

Do you or someone you love have diabetes or is at-risk for diabetes? This a 2 hour class for 6 six weeks that encourages lifestyle change while learning about your diabetes and the way it affects your health.

When: Every Thursday
October 5—November 9

Where: Community Room

Time: 2pm-4pm

Cost: Free \$0

For more information or to sign up please contact :

Healthy Traditions at 707-521-4502



****Space is limited****

D.E.E.P. is a six-week curriculum which covers the following topics:

- ♦ Diabetes risk factors
- ♦ Complications
- ♦ Nutrition
- ♦ Physical activity
- ♦ Home glucose monitoring
- ♦ Partnerships with healthcare team
- ♦ Psychosocial effects of illness
- ♦ Problem-solving strategies
- ♦ Access community resources



This workshop will be presented by :

Andre Maldonado
DEEP Peer Educator

and

Jennifer Burnett, RN
Registered Nurse &
DEEP Peer Educator

Diabetes



PHASE Clinic Data

As of 10/6/17:

- 56 patients have seen by PHASE team
- 82% have an A1C \leq 9.0
- 71% have BP $<$ 140/90
- 25 or 45% have had a decline in A1C this year