

About OCHIN & the Communities We Serve

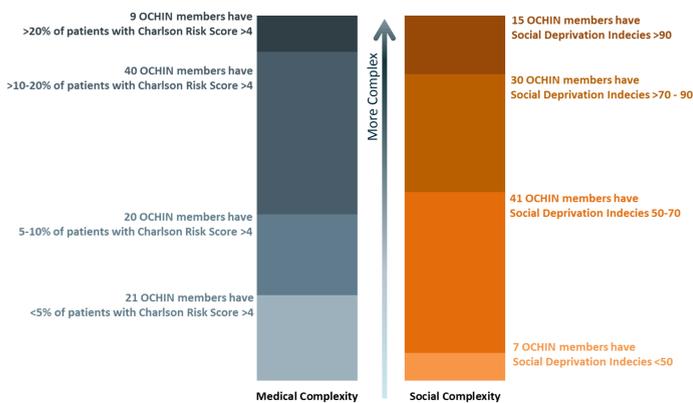
OCHIN is a nonprofit health care innovation center designed to provide knowledge solutions that promote quality, affordable health care to all.

OCHIN partners with over 500 organization across 47 states who serve over 37 million patients, many of whom are the most vulnerable in their communities.



OCHIN members provide services to medically and socially complex patients.

Patient Complexity Across OCHIN Member Organizations



Learnings from High Performers

High Performers demonstrate characteristics of **learning organizations**^{2,3}

Leadership in a Industrial - Bureaucratic Organization		Leadership in a Knowledge – Interactive Organization
Management	Who are the leaders?	People with knowledge lead
Command and control	What do leaders focus on?	Guiding ideas, theories, and innovation
Top management	Who are the decision-maker(s)?	Distributed and aligned with areas of responsibility
Bureaucratic and hierarchical (e.g. top-down)	What does this look like? (e.g. structure)	Flattened hierarchy, networked system
Top down; knowledge resides in silos	How is information communicated?	Multi-directional and transparent
Top management	Who is accountable for outcomes/results?	Responsibility is distributed across organization
In silos	How does the organization operate?	As a system – all parts interact to achieve the purpose of the organization

Purpose

Our aim is to identify a shared definition of performance across ambulatory care centers in order to:

- Identify key attributes of high performance
- Spread learnings
- Enhance OCHIN’s support services
- Increase performance of the OCHIN collaborative

Defining Performance

Our definition of performance is shaped by OCHIN’s commitment to achieving the Quadruple Aim. We chose metrics that are:

- Meaningful to OCHIN members
- Accessible using EHR data
- Actionable for OCHIN and our members

We adapted a methodology used by the Commonwealth Fund¹, allowing us to focus on *consistency of performance* across the following indicators:

Clinical Quality Measure Performance	Financial Performance
<ul style="list-style-type: none"> • Cervical cancer screening (CMS124v5; NQF0022) • Childhood immunizations (CMS117v5; NQF0038) • Colorectal cancer screening (CMS130v5; NQF0034) • Controlling high blood pressure (CMS165v5; NQF0013) • Diabetes hemoglobin A1c poor control (CMS 122v5; NQF0059) 	<ul style="list-style-type: none"> • Days of open encounters • Days in A/R • Days undistributed • %>90 (debits only) • Charge lag • Claim acceptance rate
Access Performance	HRSA Quality Improvement Award Performance
<ul style="list-style-type: none"> • Third next available appointment • Patient portal adoption • No-show rate 	<ul style="list-style-type: none"> • Awards in 2017

We explored quantitative and qualitative data, and assembled a constellation of observations that guide our understanding of what it takes to be a high performer.

Further Explorations

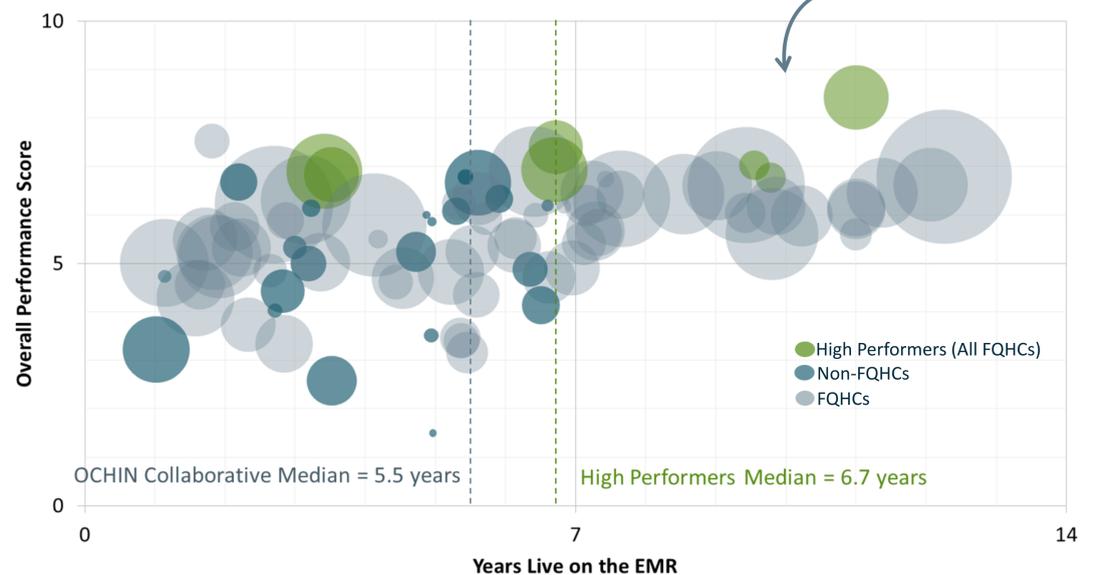
Adding indicators that:

- Reflect the diversity of collaborative members (e.g. additional clinical quality indicators)
- Align with the Quadruple Aim (e.g. patient experience data)

...And they make investments in:

- **Leadership and staff development**
- **Data analytics**
- **Care delivery infrastructure** (e.g. care teams with non-provider staff, telehealth)

High performers tend to have been on an OCHIN EHR system for longer than low performers.



...and they tend to have:

- More **robust care team models**
- More **interaction with the EHR system**

Applications

This work is shaping OCHIN’s ability to meet the unique needs of members across the performance continuum by:

- Informing how we assess the needs of our members
- Accounting for organizational characteristics and performance
- Customizing training, technical assistance, and support

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¹The Commonwealth Fund. (2017). *Aiming Higher: Results from the Commonwealth Fund Scorecard on State Health System Performance, 2017 Edition*. Retrieved on March 26, 2018 from: <http://www.commonwealthfund.org/interactives/2017/mar/state-scorecard/#chapter6>

²Senge, P. (1994). *The Fifth Discipline Fieldbook: Strategies and Tools for Building a Learning Organization*. Random House.

³Maccoby, M., Norman, C., Norman, C.J., Margolies, M. (2013). *Transforming Health Care Leadership: A Systems Guide to Improve Patient Care, Decrease Costs, and Improve Population Health*. Jossey-Bass, 17.