

## Project Description / Purpose

<b>Project Name:</b>	<i>Comprehensive Assessment Integration Initiative</i>
<b>Clinic:</b>	<i>Colorado River Behavioral Health System DBA: Transitional Living Center Recovery Yuma Transitional Living Center Casa Grande</i>
<b>Process:</b>	<i>Integration of the HSRN screening tool (AHC HSRN) and the PRAPARE tool into our clinic assessment form</i>
<b>TIP 2.0 Process Milestone:</b>	<i>Health Equity.</i>
<b>Project Description / Purpose</b>	
<i>The Comprehensive Assessment Integration Initiative aims to standardize and enhance our screening process by incorporating the HSRN screening tool (AHC HSRN) and the PRAPARE tool into our assessment form. This integration ensures that everyone who comes into our services has a 100% chance of being screened for HSRN and risk assessment. Furthermore, the addition of Z codes and referral G codes will facilitate more accurate documentation and effective referrals, ultimately improving the quality of care provided.</i>	

## Project Overview

<b>Problem Summary:</b>	<i>The current issue is the absence of an embedded HSRN screening tool within our EHR system. Furthermore, the PRAPARE tool is currently included in the member orientation packet, which often remains incomplete due to the brevity of some member stays.</i>
<b>Desired Outcome(s):</b>	<p><b>Key Deliverables:</b></p> <ol style="list-style-type: none"> <li><b>Embedded Screening Tools:</b> Integrate the HSRN screening tool (AHC HSRN) and the PRAPARE tool into the EHR system to ensure all members are screened during their initial assessment.</li> <li><b>Accurate Documentation:</b> Incorporate Z codes and referral G codes into the assessment forms to enhance the accuracy and comprehensiveness of member documentation.</li> <li><b>Standardized Workflow:</b> Develop a streamlined and standardized assessment workflow for healthcare providers, improving efficiency and consistency in screenings.</li> <li><b>Effective Risk Assessment:</b> Improve the identification and management of social needs and health risks among members through thorough and consistent screening processes.</li> <li><b>Increased Screening Completion:</b> Boost member engagement and completion rates of screening tools by integrating them into the assessment form, moving away from reliance on the orientation packet.</li> <li><b>Optimized Referral System:</b> Implement a standardized referral process using G codes to ensure timely and appropriate referrals to necessary services.</li> </ol> <p><b>Desired Outcomes:</b> <i>The desired outcome of this project is to achieve 100% screening of all our members for social needs and health risks.</i></p>

## Project Charter

<b>Benefits:</b>	<p><i>This project offers substantial benefits through the integration of the PRAPARE tool and the AHC HSRN screening tool into our assessment processes. By implementing these tools within our electronic health record system, we anticipate several advantages. Firstly, the PRAPARE tool enhances our ability to comprehensively assess members' social determinants of health, allowing us to identify underlying factors impacting their well-being more accurately. This not only improves our understanding of their needs but also enables targeted interventions and resource allocation, ultimately fostering more personalized care plans. Similarly, the AHC HSRN screening tool ensures consistent and thorough health risk assessments for all members, promoting early detection and management of health issues. By standardizing these screenings across our clinics, we enhance efficiency and ensure equitable access to preventive healthcare services. Overall, integrating these tools not only improves our capacity to deliver holistic care but also strengthens our commitment to addressing the diverse social and health needs of our community effectively.</i></p>
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### Timeline

	Description of Task and Completion Dates
<b>Task 1</b>	<p><i>Task 1 Planning and Preparation (Month 1)</i></p> <ul style="list-style-type: none"> <li>• <i>Form project team and assign roles.</i></li> <li>• <i>Identify key stakeholders and establish communication channels.</i></li> <li>• <i>Review current screening processes and identify gaps.</i></li> </ul>
<b>Task 2</b>	<p><i>Task 2 Integration of PRAPARE Tool (Months 2 and 3)</i></p> <ul style="list-style-type: none"> <li>• <i>Customize EHR system to incorporate PRAPARE tool functionalities.</i></li> <li>• <i>Train staff on the use of PRAPARE tool for comprehensive social determinants of health assessment.</i></li> <li>• <i>Pilot test integration and gather initial feedback.</i></li> </ul>
<b>Task 3</b>	<p><i>Task 3 Integration of AHC HSRN Screening Tool (Months 3 and 4)</i></p> <ul style="list-style-type: none"> <li>• <i>Customize EHR system to embed AHC HSRN screening tool for health risk assessments.</i></li> <li>• <i>Train staff on administering AHC HSRN screenings and interpreting results.</i></li> <li>• <i>Conduct initial screenings using the integrated tool and evaluate effectiveness.</i></li> </ul>
<b>Task 4</b>	<p><i>Task 4 Documentation and Standardization (Month 4)</i></p> <ul style="list-style-type: none"> <li>• <i>Develop standardized protocols and workflows for using both tools.</i></li> <li>• <i>Implement Z codes and referral G codes into the assessment and documentation process.</i></li> <li>• <i>Conduct training sessions for staff on new documentation procedures.</i></li> </ul>
<b>Task 5</b>	<p><i>Task 5 Monitoring and Evaluation (Months 5 and Ongoing)</i></p> <ul style="list-style-type: none"> <li>• <i>Monitor the use of PRAPARE and AHC HSRN tools across all clinics.</i></li> </ul>

	<ul style="list-style-type: none"><li>• <i>Collect data on screening completion rates and documentation accuracy.</i></li><li>• <i>Evaluate the impact on care quality and member outcomes.</i></li><li>• <i>Adjust protocols and provide additional training as needed based on evaluation results.</i></li></ul>
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\* Add new rows as needed.

# Project Charter

## Project Scope

<b>In Scope Project Objectives</b>
<i>All appointments for members with Medicaid.</i>
<b>Out of Scope Project Objectives or Activities</b>
<i>Enter description of the objectives or activities that are out of scope here.</i>

## Project Team

<b>Team Lead:</b>	Richard Ploski, COO	<b>Project Champion:</b>	Brooke Keith, Executive Director
<b>Process Owner:</b>	Charlene McNew, Director of Documentation	<b>Process Manager:</b>	Sarah Leone, Clinical Director

Stakeholders			
Stakeholder	Title	Department	Organization
Amber Russel	Specialty Court Coordinator	Probation Department	Pinal County Probation Department
Deborah White	Specialty Court Coordinator	Justice Department	Yuma County Probation Department

Project Team Members	
Name	Team Role
Jennifer Lagunas	Assessor
Aimee Vounas	Assessor
Jamie Santos	Assessor
Melissa Torres	Assessor
Pamela Ferguson	Assessor

## Signatures

<b>Process Owner</b>	<i>Charlene McNew</i>
<b>Project Champion</b>	<i>Brooke Keith</i>
<b>Team Leader</b>	<i>[Signature]</i>

