## Project Description / Purpose

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| **Project Name:** | *HRSN Screening, diagnosis and referral* |
| **Clinic:** | *HRT* |
| **Process:** | *HRSN Screening, documentation, diagnosis and referrals* |
| **TIP 2.0 Process Milestone:** | *Core Component 3 Process for Screening for HRSN* |
| **Project Description / Purpose** | |
| *The HRSN screening process needs to be implemented, including but not limited to, completing the screening, assigning a diagnosis as appropriate, and making need referrals for services.*  The purpose of the project is to increase the consistent completion of the Patient Centered Assessment Method (PCAM), increase the utilization of Z codes when appropriate, and increase community referrals for identified needs. Overall, this would improve our internal reporting and data. | |

## Project Overview

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| **Problem Summary:** | *The staff need to be trained on the HRSN screening, Z code diagnosis, and HRSN. We are currently not able to report data on this process.*  *Identified barriers include training on the PCAM and Z codes, staff not fully understanding the impact of HRSN on clients and their health, issues in the EHR for Z codes diagnosis.* |
| **Desired Outcome(s):** | *The usage of PCAM screenings will increase from 0% to 85% at intake and annual assessment completion.*  *Increase the number of Z codes utilized from 0% to 25% in the first year.*  *Increase the number of referrals for ancillary services to address HRSN, and improvements in our clients lives from 0% to 10% in the first year (accounting for the time it will take to connect to the closed loop referral system).* |
| **Benefits:** | *Increase number of referrals for HRSN.*  *Improvement in overall functioning and decrease in medical cost.*  *Ability to use improved data to identify inequities or resource gaps* |

## Timeline

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|  | **Description of Task and Completion Dates** |
| **Task 1** | *Conduct a training for all staff on HRSN and PCAM, and include expectations for the use of the PCAM, 6/30/24* |
| **Task 2** | *Work with internal EHR team to streamline process for adding Z codes, 6/30/24* |
| **Task 3** | *Run reports on PCAM completion and establish baseline, 5/20/24* |
| **Task 4** | *Run and track PCAM completion and if completion is not improving complete a root cause analysis and modify plan as needed, at minimum monthly* |
| **Task 5** | Review findings with executive and clinical leadership monthly, monthly. |

\* Add new rows as needed.

## Project Scope

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| **In Scope Project Objectives** |
| *The project is improve the use of PCAM in the intake and annual assessment by using this improvement plan and modify as needed.* |
| **Out of Scope Project Objectives or Activities** |
| *At this time we are not identifying any objectives outside the scope of the project, and this may change is the process improvement is not seen and we conduct an additional root cause analysis and identify other concerns.* |

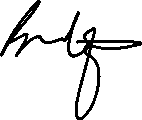
## Project Team

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| **Team Lead:** | Bridget Bossert | **Project Champion:** |  |
| **Process Owner:** | Caryn Hahne | **Process Manager:** | Melissa Herzog |

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| **Stakeholders** | | | |
| **Stakeholder** | **Title** | **Department** | **Organization** |
| *Kim Whisenhunt* | *Network Relations Manager* | *Network Management* | *MercyCare* |
| *Marco Magana* | *Network Relations Manager* | *Network Management* | *Optum* |
| Chelsie Sharp | Network Relations Manager | Network Management | Banner |
| Jennifer Houde | Network Relations Manager | Network Management | Care 1st |

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| **Project Team Members** | |
| **Name** | **Team Role** |
| *Bridget Bossert* | *Grant Manager* |
| Caryn Hahne | *Process Owner* |
| Melissa Herzog | Process Manager |
| Danielle Garlington | Perinatal |
| Shaylyn Davidson | Clinical Supervisor |

## Signatures



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| **Process Owner** |  |
| **Project Champion** |  |
| **Team Leader** |  |