NATIONAL ASSOCIATION OF Community Health Centers®

VALUE TRANSFORMATION FRAMEWORK

Action Guide

HEALTH CENTER

INFRASTRUCTURE | CARE DELIVERY | PEOPLE

EVIDENCE-BASED CARE

WHY

take a systems approach to evidence-based care?

When "evidence" is the foundation for care decisions and interventions - rather than opinion, common practice, or expediency - better outcomes can be achieved. Performance on key clinical conditions can improve when decisions to implement *evidence-based* condition-specific interventions are combined with *evidence-based* systems-level interventions.

This strategy supports value transformation – the process of changing organizational systems of infrastructure, care delivery, and people in order to reach the Quadruple Aim goals of: improved health outcomes, improved patient and staff experience, and reduced costs.

EVIDENCE-BASED CARE

Make patient care decisions using a process that integrates clinical expertise and best-practice research with patient values and self-care motivators.

WHAT

can health centers do differently when it comes to evidence-based care?

Health centers can "package" condition-specific, evidence-based interventions with systems-levels interventions for greater impact. The Community Preventive Services Task Force (CPSTF) recommends multi-component interventions be used to address disease-specific conditions.[1]

The National Association of Community Health Centers's (NACHC) Value Transformation Framework offers a process for considering and applying condition-specific interventions within the context of overall health center systems-change. The Framework's accompanying Action Guides outline how to make these changes.

This Evidence-Based Care Action Guide is intended to be paired with condition-specific, companion guides. It makes the broad case for nesting clinical care improvements within system improvements. Taken together, this action guide and its companions offer health centers actionable road maps to transforming health center systems and delivering evidence-based care.

© 2019 National Association of Community Health Centers. All rights reserved. | QualityCenter@nachc.org | October 2019

EVIDENCE-BASED CARE

EVIDENCE-BASED CARE ACTION STEPS:

This guide suggests coupling ten (10) systems-level interventions from the Value Transformation Framework with condition-specific interventions (see condition-specific Companion Guides) to advance toward the Quadruple Aim.

STEP 1 Engage Leadership

Action Item: Identify a core set of priority clinical conditions for improvement. Leadership incorporates condition-specific priorities within the larger business case for value transformation. See NACHC's Leadership Action Guide for more on leadership action steps: (1) create your business imperative; (2) institute structure and clarity with psychological safety; (3) invest in QI training; and (4) track Quadruple Aim progress.[2]

STEP 2 Apply Population Health Management Strategies, including Risk Stratification and Registries

Action Item: Complete risk stratification to segment the population into target groups for screening, chronic care management, and other care and services. Use health center, local, and national data to support clinic-based quality improvements related to priority conditions. See NACHC's Risk Stratification Action Guide for a four-step process to implementing risk stratification: (1) compile a list of health center patients; (2) sort patients by condition; (3) stratify patients to segment the population into target groups; and (4) design care models and target interventions for each risk group.[3]

STEP 3 Design Models of Care that Incorporate Evidence-Based Interventions

Refer to condition-specific Companion Guides

Action Item: Design models of care that incorporate evidence-based clinical interventions for high-risk, rising-risk, and low-risk patients. Clearly define a core set of evidence-based preventive and chronic care management interventions for key clinical conditions. Define how your health center will deploy these interventions within each risk-group. See NACHC's Population Health Management: Models of Care Action Guide for how to design unique models of care for sub-groups of the patient population[4] and condition-specific Evidence-Based Companion Guides for more specific guidance.

STEP 4 Create/Update Clinical Policies and Standing Orders

Action Item: Create/update clinical policies and standing orders based on evidence-based practice guidelines. See NACHC's Companion Guides (e.g., cancer screening and diabetes control) for specific examples.

STEP 5 Deploy Care Teams in New Ways

Action Item: Redefine the role of individual members of the care team to more efficiently "share the care" and work in new, innovative ways. Implement interventions outlined in NACHC's Care Teams Action Guide (1) define standards of care; (2) distribute tasks to meet standards and document workflow; (3) update job descriptions; (4) train staff; (5) monitor task performance in dashboards; (6) hardwire accountability into personnel systems and performance reviews; and (7) educate patients on redesigned care team. See also NACHC's Care Management Action Guide.[5, 6]

© 2019 National Association of Community Health Centers. All rights reserved. | QualityCenter@nachc.org | October 2019

EVIDENCE-BASED CARE

STEP 6 **Optimize Health Information Systems**

- **Action Item: Create/update EHR templates to capture data on screening, UDS, and other measures (e.g., HEDIS). Train providers and staff in methods to accurately document care.** Create screenshot "cheat sheets" to guide providers and staff in capturing key clinical measures as structured data. Regularly assess data validity and reliability.

STEP 7 **Engage Patients and Support Self-Management**

- **Action Item: Use patient engagement tools. Support patient self-management and shared decision-making.** See NACHC's Patient Engagement Action Guide for action steps to support and engage patients, including: (1) identify a patient engagement lead; (2) establish patient engagement metrics; (3) use daily huddles to support patient engagement; (4) enhance patient communication skills; (5) provide a written care plan or visit summary; (6) use patient decision aids; and (7) train staff in patient engagement.[7]

STEP 8 **Develop/Enhance Community Partnerships**

- **Action Item: Create a list of community partnerships to support the full health and social service needs of health center patients. Design patient-centric referral processes to partner organizations, including effective communication mechanisms.** Train staff in partnership building.

STEP 9 **Tailor Treatment for Social Context**

- **Action Item: Incorporate social risk assessment into the patient visit process. Develop processes to respond to and refer patients to appropriate resources.** Assess potential food insecurity, housing instability, financial and other barriers, and apply that information to treatment decisions.

STEP 10 **Maximize reimbursement**

- **Action Item: Collect reimbursement for all provided care and services. Consider adding business lines that support evidence-based care and generate additional revenue.** Refer to the condition-specific Evidence-Based Companion Guides for more specific guidance.

This Action Guide was developed with support from the Centers for Disease Control and Prevention (CDC) cooperative agreement #NU38OT000310. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, the CDC or the U.S. Government.

© 2019 National Association of Community Health Centers. All rights reserved. | QualityCenter@nachc.org | October 2019

EVIDENCE-BASED CARE

References

1. Community Preventive Services Task Force. Multicomponent Interventions Recommended to Increase Cancer Screening | The Community Guide. The Community Guide. https://www.thecommunityguide.org/content/multicomponent-interventions-recommended-increase-cancer-screening. Published August 15, 2018. Accessed August 3, 2019.
2. The National Association of Community Health Centers. Leadership Action Guide. http://www.nachc.org/wp-content/uploads/2019/03/Leadership-Action-Guide-Mar-2019.pdf. Accessed October 3, 2019.
3. The National Association of Community Health Centers. Risk Stratification Action Guide. http://www.nachc.org/wp-content/uploads/2019/03/Risk-Stratification-Action-Guide-Mar-2019.pdf. Accessed October 3, 2019.
4. National Association of Community Health Centers. Models of Care Action Guide. http://www.nachc.org/wp-content/uploads/2017/09/Action-Guide_Pop-Health_Models-of-Care-Sept-2017.pdf. Accessed October 3, 2019.
5. National Association of Community Health Centers. Care Teams Action Guide. http://www.nachc.org/wp-content/uploads/2019/03/Care-Teams-Action-Guide-Mar-2019.pdf. Accessed October 3, 2019.
6. National Association of Community Health Centers. Care Management Action Guide. http://www.nachc.org/wp-content/uploads/2019/03/Care-Management-Action-Guide-Mar-2019.pdf. Accessed October 3, 2019.
7. National Association of Community Health Centers. Patient Engagement Action Guide. http://www.nachc.org/wp-content/uploads/2019/03/Patient-Engagement-Action-Guide-Mar-2019.pdf. Accessed October 3, 2019.

© 2019 National Association of Community Health Centers. All rights reserved. | QualityCenter@nachc.org | October 2019