

# Covenant Community Care

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# About us

- Faith based organization
- FQHC
  - Primarily serving uninsured and underinsured populations
- 4 Clinic Sites
  - We offer integrated medical, dental and behavioral health services
    - Approximately 20,000 patients per a year are seen in our clinics
- Patient Population
  - Variety of populations served
    - Dependent upon clinic location

# Where we began

- No real process in place
- General consent did not include HIV/HCV testing. No additional consent for this.
- Barriers with EMR prompting and user-friendliness
  - Health Maintenance only indicates/prompts that a pt should be screened for HIV/HCV once in their lifetime
  - Risk factors are not automatically included in prompting for additional testing. Manual modifications and chart review

# Our Initial Plan

- Develop process
- Modify general consent to include HIV/HCV testing
- Work with Beaumont IT and Epic to make modifications to EMR
- Notify providers of new initiative and encourage increased testing

# Barriers

- EMR modifications
  - Merger between Beaumont, Oakwood and Botsford Epic had all building within Beaumont Epic on hold
    - Any/all Epic modifications within Epic for us are going to be very slow process
- Providers:
  - Unclear Evidence Based Practice (EBP) guidelines
  - Hesitancy to repeat testing due to lack of resources
    - CCC covers lab costs for uninsured pts
    - Pts unable to afford medical treatment once diagnosed
  - Comfortability with effectively communicating with patient and presenting new diagnoses
- Support Staff:
  - Biases
- Linkage to care
  - Lack of resources for our patient population
  - Cost
  - Lack of follow-up on patients end
- Undocumented patients
  - Language and additional resource/financial barriers

# Addressing Barriers

- Funding dedicated primarily to lab costs
- Staff and provider education regarding
  - Evidence Based Practice guidelines
  - Biases
  - Medicaid now treating stage 2
- General consensus amongst clinics to refer patients to our on-site ID specialist as much as possible and offer transportation from our driver.
- Behavioral health provider completed special training for communicating new diagnosis results to patients
  - Training through the Division of HIV & STD Programs
- EMR Modification still an issue

# Continuous Quality Improvement

- What is needed to implement and sustain QI initiatives?
  - Include staff in process change/planning
    - Give them a voice
  - Designate champions
  - Consistency
    - Auditing progress
    - Reporting results to staff (not just leadership)
  - Visibility and approachability
  - Flexibility
    - Continue to learn from the data and modify processes as needed