Meeting Title:	**NYP Queens** **DSRIP Asthma Home Based Care**	**Meeting Date:**	August 9, 2017
Facilitator(s):	H. Jabbar, MD C. Guglielmo	**Meeting Time:**	1:00 pm-2:00 pm
Location:	NYP Queens Hospital, MRI Conference Room 1-866-692-4538 26098085#		

Meeting Purpose:

DSRIP Project Implementation – Committee meeting

#	Topic	Responsible Person	Document
1.	Welcome	H. Jabbar, MD	
2.	Review & Approve Minutes: 7/11/2017	H. Jabbar, MD	Asthma Minutes.docx
3.	**DY3Q4 Deliverables:** ***Milestone# 5:*** Ensure coordinated care for asthma patients includes social services and support. ***Metric 5.3:*** PPS has assembled a care coordination team that includes the use of a nursing staff, pharmacist, dieticians and community health workers to address life style changes, medication adherence, health literacy issues, and patient self-efficacy and confidence in self-management. ***Current Status:*** • Total Care RX and CMMP are working on a strategy for Asthma education. • C. Duffy will confirm whether Medicaid patients have a co-pay for Home Care assessments. ***Next Steps:*** • The PMO will develop the Care Coordination roster for reporting including Pediatricians, Asthma Center, Emergency Department, and Saint Mary's nurses.	M. Hay	

	• The PMO will create a packet for Pharmacist with laminated visual instructions, educational pamphlet with DSRIP referral information. ***Patient Needs:*** • Social services patient needs-resource and gaps. • Social services process of coordination ***Pending Task:*** • ACQ and MHPWQ are scheduled to meet on 8/16/2017 to create the education timeline. The goal is to integrate Asthma education in to the school system. • Jalen and Marlon met with Dr. Jabbar on 8/4/17 in regards to the Patient Navigation/Care Coordination workflow. ***Next Steps:*** • Jalen will create the workflow and present the information in the next meeting. (9/13/2017)		
5.	***Actively Engaged Patients:*** • ACQ and St. Mary's will collaborate with the PMO to develop an outreach strategy. The strategy will require partners to refer patients to the asthma program. • ACQ will train providers on the home assessment referral process. • Once the patient is discharged from the ED, the physician will suggest where the patient should go for a follow up. ***Current Status:*** • Kim sent St. Mary's a list of actively engaged patients so that they can be reviewed and referred for a home assessment. ***Next Steps:*** • ACQ and St. Mary's will work together and create scripts for providers to use to refer patients for a home assessment.	H. Jabbar, MD K. Fung	 Package  Package  Package  PDI 14 Asthma Admission Rate.pdf

	• The PMO will look at actively engaged patients and enroll them into the ACD asthma program. ***Quality Metric Reference Documents*** • Medication Management for Asthma • Asthma Medication Ratio • Asthma Admission Rate • Asthma in Younger Adults ***Rapid Cycle/Quality Data*** • Kim is currently working on the data for Dr. Jabbar to conduct hot spotting of Queens to identify high prevalence areas.	A. Simmons K. Fung	 Package
6.	Questions & Open Discussion	Team	-
7.	Adjourn	-	-

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Project 3.d.ii - Pediatric Asthma Project

Project Committee Meeting

August 9, 2017 1:00 pm-2:00 pm ET

Attendees: K. Fung (NYP/Q), H. Jabbar, MD (NYPQ), C. Gugliemo (Asthma Coalition), E. Fardella-Roveto, NP (St. Mary's) C. Duffy (St. Mary's), A. Simmons (NYPQ), J. Lavin (MHPWQ), M. D'Urso (NYPQ), G. Sabogal, MD (Advanced Pediatrics PC), W. Lao, MD (Advanced Pediatrics PC), J. Faison (NYPQ), M. Hay (NYPQ), L. McConnell (NYPQ)

Topic	Discussion	Actions
Agenda:	• Welcome • Review & Approve Minutes • DY3Q4 Deliverables • Actively Engaged Patients • Quality Metric Reference Documents • Rapid Cycle/ Quality Data	• N/A
2. Review Minutes:	• Review and approved minutes from 8/9/2017 meeting.	• Meeting minutes were unanimously approved.
3. DY3Q4 Deliverables: M. Hay	*Milestone# 5:* Ensure coordinated care for asthma patients includes social services and support. *Metric 5.3:* PPS has assembled a care coordination team that includes the use of a nursing staff, pharmacist, dieticians and community health workers to address life style changes, medication adherence, health literacy issues, and patient self- efficiency and confidence in self-management. *Minimum Documentation:* Document of process and workflow including resources at each stage of the workflow.	• The PMO will schedule a meeting with CCMP to find out more information about their pediatric Health Home services. • The PMO will also use St. Mary's as a resource to train pediatric partners on care coordination.

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Topic	Discussion	Actions
	Next Steps: <u>Coordinate an Interdisciplinary Care Team</u> • Using the bottom up referral process, the PMO will work to coordinate referrals to the Community Care Management Partners. Community Care Management partners will train the remaining pediatric partners on the importance of linking qualifying patients to Health Homes. • The PMO will coordinate with St. Mary's to provide in-services on care coordination with the Asthma PPS partners. C. Duffy will confirm whether medicaid patients have a co-pay for Home Care Assessments. **Current Status:** The PMO will address this agenda item at the next Asthma Meeting. **(9-13-17)**	
	• The PMO will create a packet for Pharmacist with laminated visual instructions, educational pamphlet with DSRIP referral information. ***Current Status:*** ACQ completed the educational tool kit for the pharmacist in the PPS. The tool kit will be used to train and educate pharmacy partners on asthma and DSRIP referral information. ***Next Steps:*** • ACQ will educate/train all Pharmacy PPS partners. • The PMO will collect training materials, sign in sheets and number of staff trained. ***Patient Needs:*** • Healthify is a care coordination application used to identify CBO's that address social needs and coordinate referrals with community partners.	• The PMO will create the DSRIP referral template and include the document in the education tool kit. • N/A • The PMO will present the Asthma education documents on 9-13-17.

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Topic	Discussion	Actions
	Next Steps: • ACQ will work with MHPWQ to create a consent and screening form to refer children in the school system to the asthma program.	
4. Actively Engaged Patients H. Jabbar, MD, K. Fung	The PMO will collaborate with ACQ and St. Mary's and create a strategy to refer patients to the asthma center as clinically indicated. ***Next Steps:*** • The PMO will work with Clinical leads to create the Care Pathway to refer patients to the asthma center. ACQ and St. Mary's Home Care will train providers on the home assessment referral process. ***Current Status:*** ACQ has completed the scripts for providers to use to refer patients for a home assessment. ***Next Steps:*** • The PMO will coordinate with ACQ to train asthma partners on the home assessment referral process. • The PMO will collect training materials, sign in sheets and number of staff trained. • The PMO will create a workflow that will depict where the attending will suggest where the patient should go for treatment after leaving the ED.	• The PMO will present the Care Pathway workflow on 9-13-17. • The PMO will create a timeline for when the patient navigator would start working in the ED. • ACQ will present the training scripts for providers to the committee on 9-13-17.
5. Rapid Cycle/Quality Data K. Fung	• **Rapid Cycle:** Hot Spotting data was presented to highlight the Pediatric Attributed Members (under 19yo) who have a diagnosis of asthma in Queens, PQI 15, PDI 14, medication management, and asthma medication ratio. The committee is able to identify high prevalence areas in Queens with asthma patients.	• The PMO will reach out to MHPWQ to receive the list of schools with asthma patients.

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Topic	Discussion	Actions
	Next Steps: • Dr. Jabbar and Kim will target schools with high prevalence of poorly controlled asthma patients utilizing the hot spotting data. • The PMO will continue to work with Dr. Jabbar to connect with providers to influence the areas of high utilizer asthma patients in queens.	
6. Questions & Open Discussion	• The next PMO meeting the committee will continue action planning and review quality metrics for this project. • The Committee requested the asthma meeting should be extended.	• N/A
7. Adjourn		• N/A