# Root Cause Cooks May Meeting Takeaways

## Takeaways from Valley Health Center PDSA Presentation:

- Valley described their PDSA on using RNs to outreach to patients with HTN and uncontrolled BP – they had a clinician champion with dedicated time to see patients for HTN follow-up but the appointments were underused with unfilled slots and no-shows.
    - Their goal/prediction was to reach 50% of patients that were outreached to by the RN PDSA.
- 6 RNs called 10 patients each over 1 week for a total of 60 patients:
    - 42 were successfully contacted (65%)
        - 26 appointments were made with the dedicated clinician champion or RN (62% of those contacted).
        - 7 declined appointments, 4 had already scheduled, 5 had other issues (ex. eligibility, assignment, medical urgency).
    - They had a full schedule and only 1 no-show at the following dedicated clinician champion's HTN clinic.
- The team used an Excel spreadsheet for tracking after cleaning up the columns to be more easy to use, creating drop-downs to be more efficient, and putting the spreadsheet on Sharepoint to be updated in real-time.
    - They also tried Microsoft Copilot to organize the resulting data, which was helpful.
- They got qualitative feedback from RNs documenting comments from patients on the tracker spreadsheet while doing outreach. Patients were interested in completing RN visits in real time and were happy that they were being contacted.
    - RNs reported higher level of satisfaction in role and feeling appreciated.
- Next steps: Their team is working on creating a specific RN visit type for better tracking, and updating their process for addressing acute needs (ex. coordinating hospitalization follow-up) identified on the outreach calls.

## Actions that were helpful for success:

- Working with care team members effectively for outreach:
    - Found that it was challenging for RNs when they were often on the phone with patients but this wasn't accounted for on their schedule. Responded by restructuring the RN schedule to add visibility to phone calls.
    - Created scripts and updated their outdated HTN policy which helped RNs feel supported with clear instructions and workflows.
    - Collaborated with RNs to get their buy-in.
    - Reviewed and shared resources on proper BP measurement and documentation from American Heart Association with the RN team.
    - Frequently communicated updates and instructions to the RNs.

- Quick PDSAs – This PDSA happened over 5 business days/1 week. The preparation took longer and lots of work went into planning to maximize effectiveness, but the scale of the PDSA to test it was very quick.
- Being flexible – pivoting to offering RN appointments more when finding that patients could not come in when the clinician champion had dedicated HTN clinics available. Offering to complete the RN visit immediately when patients are available on the outreach call to do HTN education and follow up their BP.
- Targeting a strategic population to outreach to – focused on patients seen within the last 3-6 months to get most engagement.