



## Vermont Child Health Improvement Program



**VCHIP**

Vermont Child Health Improvement Program  
UNIVERSITY OF VERMONT COLLEGE OF MEDICINE

# VCHIP Care Coordination Collaborative

June 4, 2024

# Speakers & Facilitators



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# Today's Objectives

- Describe past VCHIP Care Coordination Collaborative work
- Summarize our current focus and engagement opportunity
- Participate in discussions to advance the development of an IT infrastructure that supports timely access to Shared Plans of Care (SPoC)





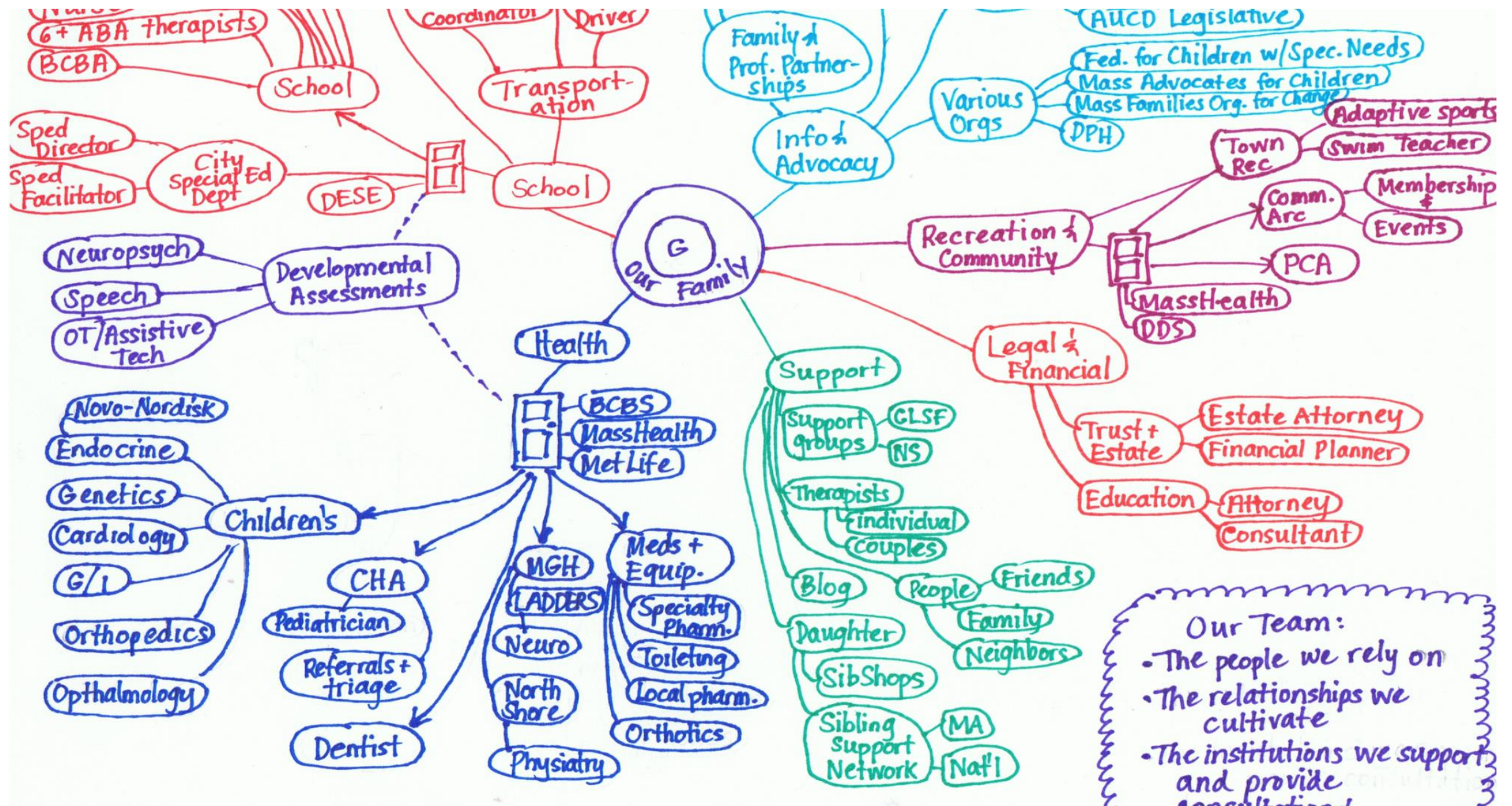
# Our Why

The number (%) of Vermont patients by the number of Children's Specialty Clinics visited and their PMCA categorization<sup>a</sup>, 2020

	Non-Chronic		Non-Complex Chronic		Complex Chronic		TOTAL
	N	%	N	%	N	%	N
1 clinic	2,284	38%	2,182	37%	1,481	25%	5,947
2 clinics	214	23%	290	32%	407	45%	911
3 clinics	38	16%	56	24%	143	60%	237
4+ clinics	11	10%	15	13%	87	77%	113

a. PMCA Categories are (1) Complex Chronic: Affecting more than 1 body system and either progressive or malignant; (2) Non-Complex Chronic: Only 1 body system is affected; (3) Non-Chronic: No progressive nor malignant conditions, mostly or all acute visits and preventative care

Simon, T. D., Haaland, W., Hawley, K., Lambka, K., & Mangione-Smith, R. (2018). Development and Validation of the Pediatric Medical Complexity Algorithm (PMCA) Version 3.0. *Academic pediatrics*, 18(5), 577–580. <https://doi.org/10.1016/j.acap.2018.02.010>



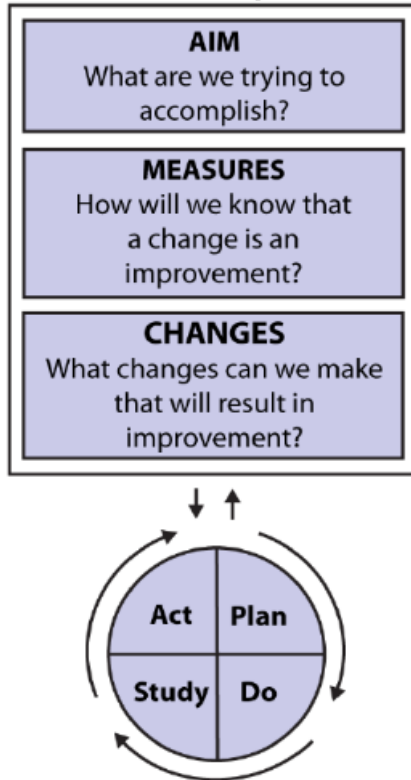
**Our Team:**

- The people we rely on
- The relationships we cultivate
- The institutions we support and provide

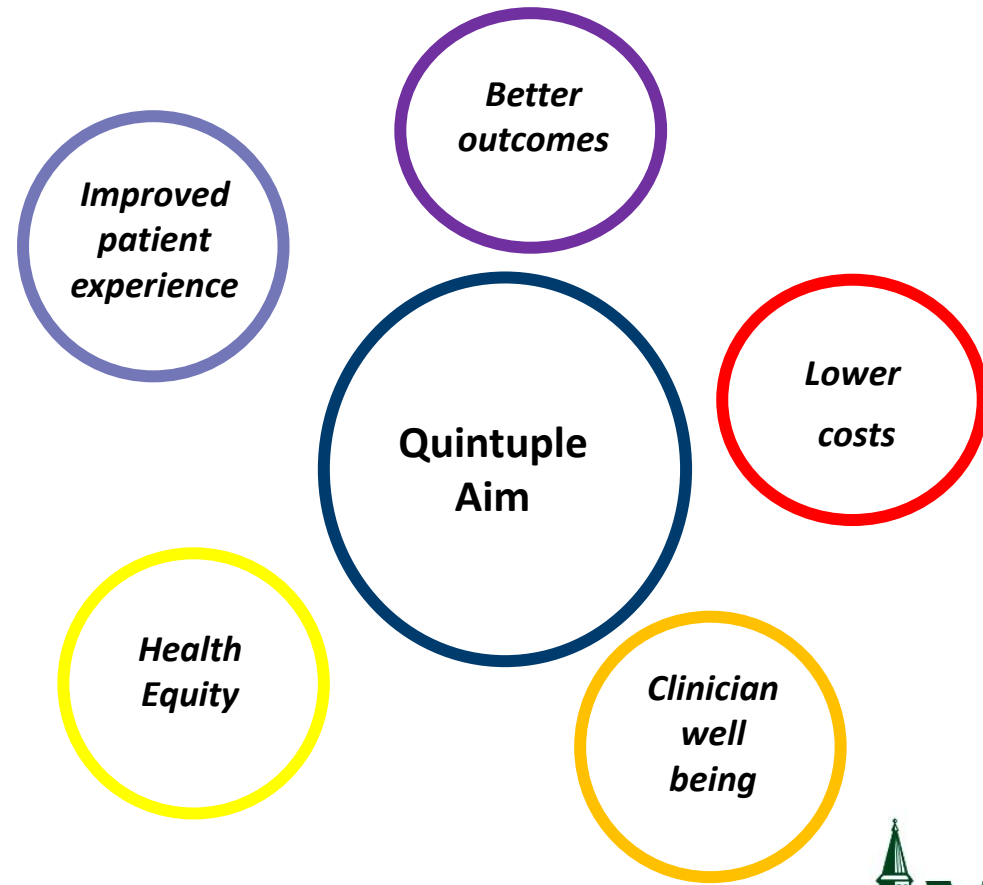


# Our Quality Framework

## The Model for Improvement



© 2012 Associates in Process Improvement



Nundy S, Cooper LA, Mate KS. The Quintuple Aim for Health Care Improvement: A New Imperative to Advance Health Equity. *JAMA*. 2022;327(6):521–522. doi:10.1001/jama.2021.25181

# VCHIP Care Coordination Collaborative

Several Care Coordination Collaborative Meetings were facilitated by the VCHIP team between March 2022 through November 2022. These collaborative meetings brought together interdisciplinary partners to advance our shared vision of optimizing care coordination services for children and youth with special health needs.

# Priority Areas

- Improved communication
- Efficient and effective use of technology
- Leveraging data to monitor progress





# Shared Plans of Care

- Continues to be of interest to many collaborators
- Supports improved communication and coordination
- Many care coordinators are doing this work
- Information continues to be fragmented or siloed.



# Barriers to Shared Plans of Care (SPoC)

Identified by the VCHIP Care Coordination Collaborative participants:

- Time
- Provider engagement
- Ownership & maintaining
- Documentation
- Financial support
- **Sharing the SPoC or other health information across systems**
- **Technology to support timely access to information**



## **Process for Developing & Sharing Shared Plan of Care (SPoC)**

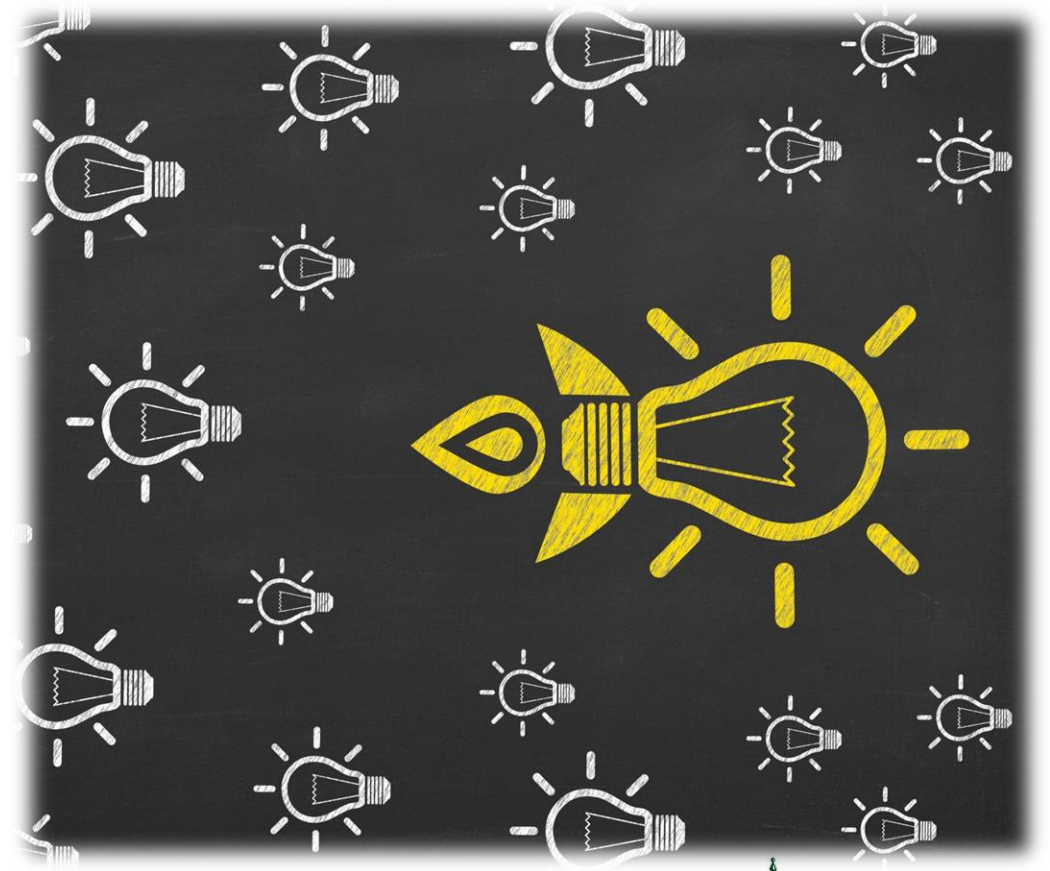




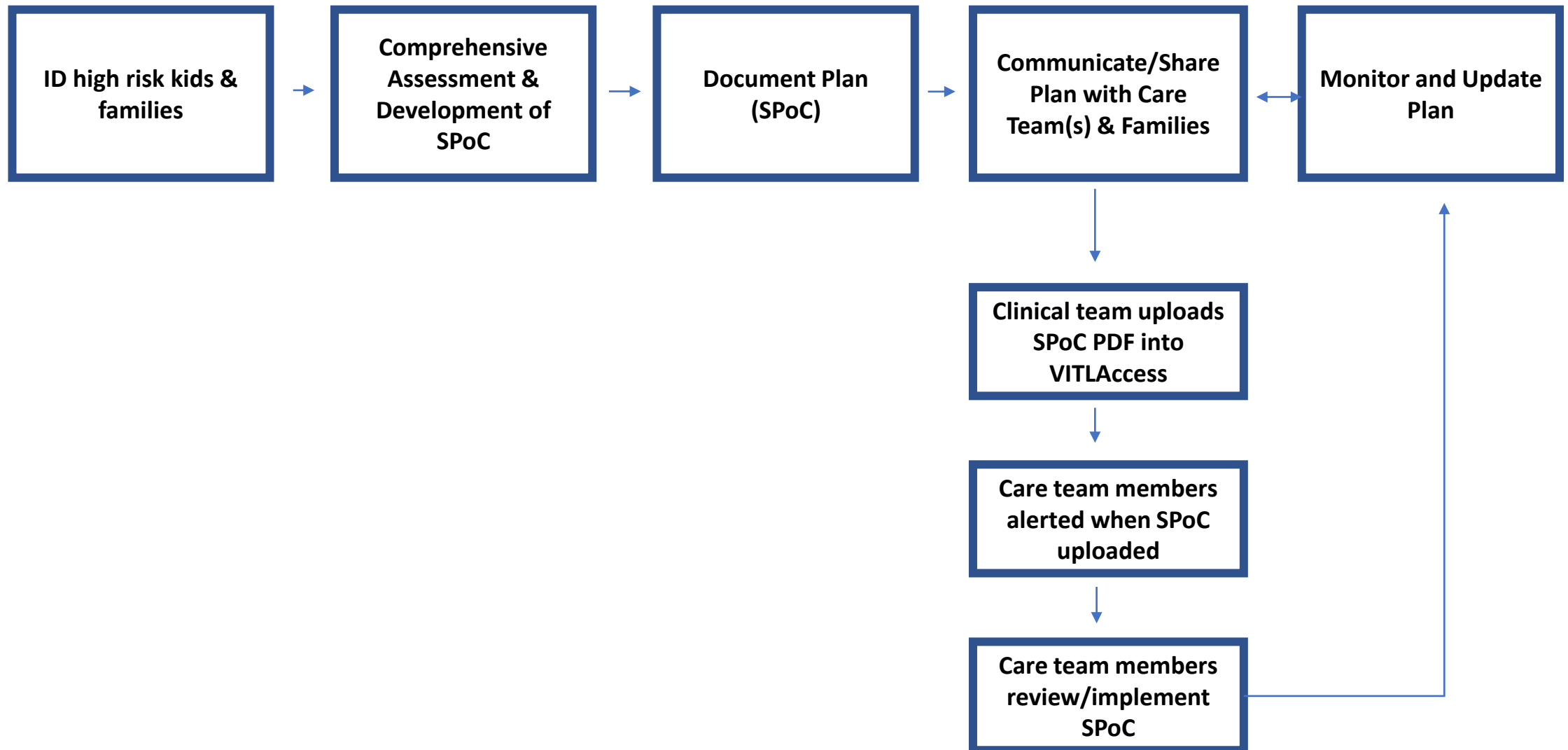
# Opportunity for Innovation

Utilize quality improvement framework to develop a pilot project to:

- Achieve efficiency gains
- Improve the patient and family experience
- Improve provider experience
- Obtain and share data
- Leverage technology and VITL usability to support the development, sharing and accessing Shared Plans of Care



## Proposed Pilot Process for Developing & Sharing Shared Plan of Care (SPoC)



# VCHIP-VITL Pilot Vision

- Partner with collaborative participants to
  - Design workflows
  - Gain consensus on SPoC elements
  - Integrate patient and family voice in design and implementation
  - Align efforts across organizations





# VCHIP – VITL Pilot

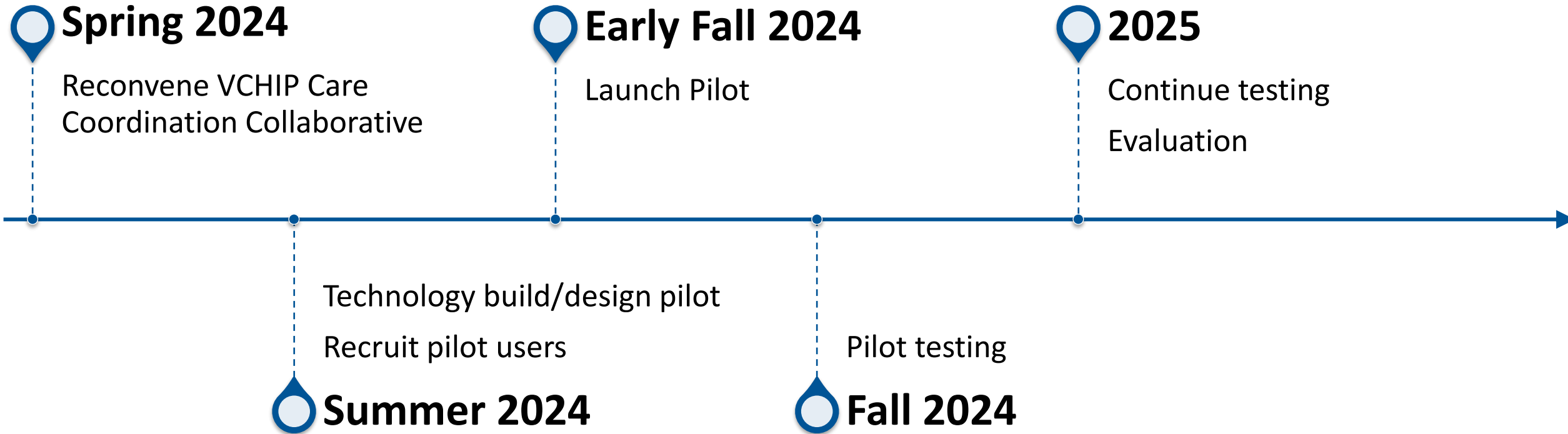
## What do we hope to achieve?

- Improve the communication among care teams
- Improve coordination for patient and families
- Improve care team experience
- Obtain and share data in a timely way

## What do we hope to learn?

- Priority areas for future infrastructure design
- How to share appropriate health information with all care team members
- Prevent inappropriate sharing of health information

# Anticipated Timeline







# Long-term interoperability goal

- Long-term, we imagine providers and patients being able to create, view, and update shared plans of care that have content from collaborators across organizations, without leaving their own EHRs or preferred tools
- This would require:
  - Advancements in national data standards
  - Modifications of data contributors' EHRs and workflows
  - Building more data contribution connections into VITL
  - Exploration of how to deliver this kind of data into EHRs
  - Data governance work

# Shorter-term explorations

- Consider using existing tools, and
- Consider extending those tools to offer new functionality that supports the work of care teams, and
- Learn from these explorations: construct “small tests of change” that help advance the long-term vision

# VITLAccess

- VITL's clinical portal, providing access to the data contributed to the Vermont Health Information Exchange by hospitals, FQHCs, independent practices
- Access is possible for all HIPAA-covered entities
- Already contains some of the information that is part of a shared plan of care (e.g. demographics, diagnoses, medications, allergies)
- Consider building additional functionality in VITLAccess to enable care team members to directly contribute shared care plan documents or data elements



# VITLAccess – sample chart

Clinician Dashboard

Patient Charts

Patient Charts

CHDRZZZTEST, CHDREIGHT (M, 56)

DOB: 03/03/1968

Demographics

Address: 880 8th St, La Jolla, CA 92038, USA

Sources: All

Summary

All Results

Allergies

Documents

Medication

Problems

Problems

Active

Search for Problem/Condition or Code

Onset Date: All

Filter(s) active - to view additional data adjust search criteria or filter(s), or reset to all

Problem/Condition	Code	Onset Date	Resolved Date	Status	Source
Asymptomatic varicose veins of unspecified lower extremity	I83.90 ICD-10	05/26/2020		Active	Community Health Centers of Burlington
Disorder of the skin and subcutaneous tissue, unspecified	L98.9 ICD-10	04/27/2020		Active	Community Health Centers of Burlington
Body mass index (BMI) 30.0-30.9, adult	Z68.30 ICD-10	10/28/2019		Active	Community Health Centers of Burlington
Other specified diseases of blood and blood-forming organs	D75.89 ICD-10	10/29/2018		Active	Community Health Centers of Burlington
Alcohol use, unspecified with unspecified alcohol-induced disorder	F10.99 ICD-10	10/29/2018		Active	Community Health Centers of Burlington
Encounter for general adult medical examination without abnormal findings	Z00.00 ICD-10	04/23/2018		Active	Community Health Centers of Burlington
Mild cognitive impairment, so stated	G31.84 ICD-10	10/23/2017		Active	Community Health Centers of Burlington
Unspecified cataract	H26.9 ICD-10	09/05/2017		Active	Community Health Centers of Burlington
Unspecified glaucoma	H40.9 ICD-10	09/05/2017		Active	Community Health Centers of Burlington
Benign lipomatous neoplasm, unspecified	D17.9 ICD-10	10/13/2015		Active	Community Health Centers of Burlington
Type 2 diabetes mellitus without complications	E11.9 ICD-10	10/13/2015		Active	Community Health Centers of Burlington
Essential (primary) hypertension	I10 ICD-10	10/13/2015		Active	Community Health Centers of Burlington
Hyperlipidemia, unspecified	E78.5 ICD-10	10/13/2015		Active	Community Health Centers of Burlington

Medication

Date Written: All

Active

Filter(s) active - to view additional data adjust search criteria or filter(s), or reset to all

Medication	Dose	Provider	Status	Route	Start/End Dates	Date Written	Source
METOPROLOL			Active	ORAL	Start: 10/15/2021 00:00 End:	10/15/2021 00:00	Community Health Centers of Burlington

Allergies

Print

Allergen	Reaction	Comment	Date	Status	Source
Observed no known allergies at 2020/05/26	Reaction: propensity to adverse reactions		05/26/2020	Active	Community Health Centers of Burlington

Vital signs

Documents

Created: All

Imported Date: All

Print selected result(s)

Type	Description	Status	Imported Date	Print Options	Created	Source
Summarization of episode note	Fictitious Health Center Clinical Summary Summarization of episode note	Final	07/10/2023 10:43	<input type="checkbox"/>	05/27/2021 21:46	Community Health Centers of Burlington

All Results

Date: All

Status: All

Final

Filter(s) active - to view additional data adjust search criteria or filter(s), or reset to all

Test	Alert	Provider	Date	Status	Source
Office Visit: office visit-DM flu			05/26/2020 09:35	Final	Community Health Centers of Burlington
Lab Report: Hepatitis C			04/23/2020 14:52	Final	Community Health Centers of Burlington
Ab w Rflx HCV PCR			04/21/2020 19:00	Final	Community Health Centers of Burlington
Lab Report: Comprehensive Metabolic Panel			04/16/2019 13:46	Final	Community Health Centers of Burlington
Lab Report: Basic Metabolic Panel, Direct			04/23/2018 13:25	Final	Community Health Centers of Burlington
Lab Report: LDL Cholesterol, Vitamin B12			11/01/2017 13:57	Final	Community Health Centers of Burlington
Lab Report: Syphilis Serology (RPR)			10/31/2017 13:50	Final	Community Health Centers of Burlington
Lab Report: Complete Blood Count No Diff, ESR			10/31/2017 13:45	Final	Community Health Centers of Burlington
Lab Report: TSH (W/Ref FT4), Vitamin B12			04/07/2017 07:45	Final	Community Health Centers of Burlington
Lab Report: Comprehensive Metabolic Panel, Lipid 2			10/17/2016 07:40	Final	Community Health Centers of Burlington
Lab Report: PSA, Screening			10/28/2014 11:08	Final	Community Health Centers of Burlington
Clinical Lists Update: Lab Results					

Immunizations

Administered Date: All

Print

Immunization	Administered Date	Dose	Refused	Refusal Reason	Body Site	Source
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# VITLAccess – categories of data

Summary	All Results ✕	Allergies ✕	Documents ✕	Medication ✕	Problems ✕
Problems					Documents
Medication					All Results
Allergies					Immunizations
Vital signs					Family History
Encounters					Social History
Insurances					Patient Relationships
Procedures					
Equipment Devices					



# What are we proposing?

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No more faxing!

Faster and more reliable communication.

Promoting team-based care.

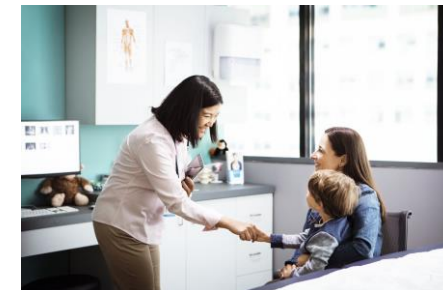
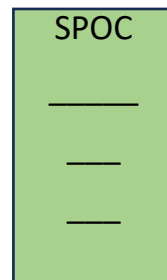
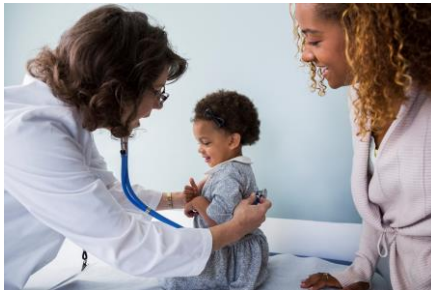




# How are we going to do this?



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Health

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Information

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Exchange

Shared Plans of  
Care



# Shared Plans of Care



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Holistic

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Inclusive

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Evolution

## Discussion Questions

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What do ***you need*** for this pilot to be successful?

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Who else should be ***included?***

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What ***patient populations*** should be prioritized?



