Closing Care Gaps
Across the City of Cincinnati:
Thrive at Five Learning Collaborative

Mona Mansour, MD
Grant Mussman, MD
The image shows a bar graph and a map indicating the Medicaid population for children under 5 years of age in the City of Cincinnati. The graph highlights that Together Children's and the Cincinnati Health Department represent approximately 75% of the 0-5 years of age Medicaid population in the City of Cincinnati.

The map displays various clinics and service locations, including Northside, Braxton Cann, CCHMC SBHC, PPC, Millvale, Hopple, Price Hill, and Elm Street. The map is titled "BACKGROUND" and includes a visual emphasis on the phrase "POWERFUL IMPACT IF WE ALL WORK TOGETHER versus as INDEPENDENT CLINICS."
System Level KDD: Thrive at Five Collaborative

Champions: Mona Mansour, MD and Grant Mussman, MD

Vision
Help Cincinnati’s 68,000 children be the healthiest in the nation through strong community partnerships

Mission
Attain community connected primary care (CCPC) in the Greater Cincinnati Area

What are we trying to accomplish?
Thrive at Five Collaborative AIM – increase the percentage of preventive elements given (lead, ASQ, vaccines) from 54% to 65% in 0-27 month children by June 30, 2020.

FY 20

Primary Drivers
The entire health system & community have a shared vision, are engaged and activated, and demonstrate accountability for improving outcomes for families living in poverty
Trust and respect exists between community members and the providers that serve them
There are no economic and psychosocial obstacles to care
Caregivers are healthy
Children and families receive the right care at the right time in the right place (System is capable)
Optimal Clinical Functioning
Care is easy to navigate for families (System connectivity – communication & info sharing)
Proactive Population Management
Models of payment support population management
Data availability and transparency
Families, communities, medical systems activated and equipped to support equity

FY19-20 Improvement Teams

Thrive at Five Collaborative Population Health Focus

- Braxton Cann
- Bobbie Sterne
- Hopple
- Millvale
- Northside
- PPC
- Price Hill
- SBHC CHMC
- SBHC Roll Hill CHD

All Children Thrive Cincinnati
All Children Thrive Cincinnati

DATA ON SEVERAL LEVELS

✓ **Collaborative** - combined CHD and CCHMC data

✓ **By System** – shows the relative contribution of each system to the overall Collaborative

✓ **By Clinic** – each team can chart their work

✓ **Visit Level** – by patient each week
How many Care Gaps are we closing?
Power of improvement science to help teams test small and learn quickly

Transparency of the data plus availability at collaborative, system, and clinic level allowed more effective learning from each other

Data sharing agreement allowed opportunity to take a broader population level view of preventive services care gaps
GREATEST CHALLENGES

❖ **Pace of testing** challenging within systems with limited resources and personnel

❖ Population level data not as helpful for improvement. Visit level will help accelerate our testing/learning moving forward.

❖ **Multiple transitions** in leadership within clinics at both CHD and CCHMC including personnel who received QI training

❖ Better engagement of families in designing and testing interventions
NEXT STEPS

❖ Will look at the measure as a “bundle”

❖ Will enhance the use of Visit Level data

❖ Create Change Package on Immunizations and spread

❖ Continue to build QI capability through ImpactU attendees
Thrive at Five Collaborative Teams

Bobbie Sterne Health Center
Braxton Cann Health Center
CCHMC School Based Health Centers
Hopple Street Clinic
Millvale Health Center
Northside Health Center
Pediatric Primary Care (PPC)
Price Hill Health Center
Roll Hill School Based Health Center

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