

## **Community Health Care Association of New York State**

Obesity Initiative for NYC (8 Participants will be selected)

CHCANYS has received support to launch several quality initiative programs. The obesity initiative will use a clinical "Train the Trainer" model that supports the dissemination of best practices and lessons learned from a mentor CHC to CHCs in New York City with previous experience in a HRSA sponsored Collaborative. Faculty with expertise on obesity and exercise will work with selected health centers. The Obesity Initiative will use an evidenced-based approach and the concepts of planned care using the Care Model as a quality framework. CHCANYS will work with health center to develop strategies to support community outreach efforts, link to existing NYC programs that promote exercise, as well as support health centers in reviewing current diabetes registries to identify patients living with diabetes that are overweight or obese. The initiative will run from December 2007 to June 2008.

Cardiovascular Initiative for NYC (2 Participants will be selected)

CHCANYS will expand their current work with the New York State Healthy Heart Program to recruit two New York City community health centers to spread from diabetes to cardiovascular disease. The goal of the CVD initiative is to develop spread strategies and intensify comprehensive cardiovascular disease (CVD) management and prevention strategies for an eighteen (18) month period starting January 2008 and ending June 2009. Health centers with previous HRSA or NYC collaborative experience with the Care Model will use concepts from the national cardiovascular collaboratives spread strategies for CVD.

Download and review terms of participation. If you agree to terms and would like to participate, complete online application and send a copy of SIGNED terms of participation to initiatives@chcanys.org

#### APPLICATION FOR QUALITY INITIATIVE

Please check which initiative you are applying for:						
	Obesity New York City Initiative limited to eight (8) participating centers					
	CVD New York City Initiative limited to two (2) health centers					

Prepared by: Wanda Montalvo

11/1/2007

#### Selection Criteria:

11/1/2007

### Health Center Alignment and Sponsorship

- 1. Successfully completion of a HRSA/BPHC Health Disparities Collaborative Phase 1 learning year
- 2. Alignment with the vision and aim for the HRSA/BPHC Health Disparities Collaborative
- 3. Adoption of the Care Model, Rapid Cycle Improvement (i.e. Model for Improvement) as part of health center's quality framework
- 4. Evidence to demonstrate the mechanism to sustain and spread the improvement process
- 5. Qualified designated staff charged with leading the improvement process at the health center (i.e. process leader, QI coordinator/director,)
- 6. Reporting alignment with HRSA/BPHC Health Disparities demonstrating growth in patient registry and improved clinical outcomes
- 7. Health center demonstrates Quarterly Reporting Compliance as evidenced by the Health Disparities National Reporting site (www.hdnr.org) "Compliance Report Log" over the past one to three years

Health Center/ Org	UDS/BCRR#:		
Person completing	g application:		
Name:		Title:	
Phone:	email		
Key contact pe on this applicat	•	lead role for the quality initiative	e the the health center has selected
Name:		Title:	
Phone:	email		
Total number of de	elivery sites:	Total number of providers:	
A Backgroup	d Information (no	ot scored):	
	•		HC Health Disparities Collaborative?
O YES O N	IO		
• .	•	RSA/BPHC collaborative, what ives, Check all that apply):	was your condition(s) of focus? (If
Diabetes Diabetes A3. Has your		Asthma ☐ Cardiovascular ☐ Cipated in a local NY State or C	-
O YES O N	NO		
If yes, condition	n of focus at time of	participation:	
A4. Total numb	per of patients track	ed in patient registry or EHR as of	October 1, 2007:
repared by: Wan	da Montalvo		

# Important: Please submit excel file(s) for key measures reported on selected conditions showing trended data overtime (i.e. RUN CHART) to <a href="mailto:initiatives@chcanys.org">initiatives@chcanys.org</a>

A5. Total number of staff who are trained support spread (includes MD, NP, PA, nu	and understand the Care Model, Model for Improvement, and can tritionist, social worker, case managers):
A6. Total number of satellites you hope t	o engage in this quality initiative in your system:
A6. The participation in this clinicapply):	cal Initiative has been approved and supported by: (Check all that
Executive Director Medical	Director Sr. Management Team (i.e. CFO, COO, CNO)
B. Technology Capacity C	Questions (not scored)
B1. Computer available for daily	team use in the clinical area? O YES O NO
B2 Team members have direct	access to the Internet and individual email at the health center:
O YES O NO	
B3. Our Health Center uses the following	Medical Management Software:
C. Application Narrative:	
C1. Explain why your health center is interested in participating in the selected clinical Initiative?	
C2. If your health center has an ongoing effort focusing on the selected topic, what are the major challenges? Are you working with adult population or pediatrics?	
C3. What need(s) have you identified in your organization that you believe will be supported by participating in CHCANYS clinical quality initiative?	
C4. Describe how the use of the Care Model and Model for Improvement fits into your health center's strategic plan?	
C5. Describe how this clinical initiative will be supported and sustained as part of your health center's Quality/ Performance Improvement Program?	

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C6. Describe 1-2 major accomplishments that led to system improvement in your health center? (i.e. Care Model, PDSA cycles, use of QI benchmarks, competency training, EHR)	
C7. Describe strategies that led to major clinical improvement in outcome/process measures as part of your HRSA/BPHC Health Disparities work or other effort?	
C8. How is the health center's staff structured to lead QI work and disseminate best practice changes?	
C9. Describe how your leadership team will support the staff in successful participation (i.e. attend training, participate in conference calls, meet reporting requirements, ability to meet on regular basis)	

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