

Public Health Performance Management Centers for Excellence

QUALITY IMPROVEMENT STORYBOARD



LOCAL TRIBE/HEALTH DEPARTMENT NAME: Clark County Public Health
 ADDRESS: 1601 E Fourth Plain Blvd, Vancouver, WA, 98666
 PHONE NUMBER: 360-397-8182
 SIZE: 78.15 FTE
 POPULATION SERVED: 442,800
 PROJECT TITLE: Latent Tuberculosis Treatment Evaluation & Improvement

Definitions:

CCPH: Clark County Public Health, **LTBI:** Latent Tuberculosis Infection, **eDOT:** electronic Directly Observer Therapy

PLAN

Identify an opportunity and Plan for Improvement

1. Getting Started

Our overall goal was to improve LTBI treatment completion rates while containing or decreasing treatment costs. As of 2011, CCPH was spending approximately \$1,600 to treat each LTBI case and only 71% of patients were completing treatment.

AIM Statement

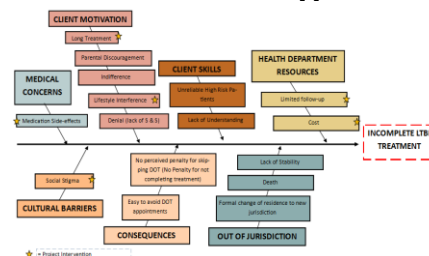
To decrease the number of people who develop active Tuberculosis through the timely and efficient treatment of latent Tuberculosis infection (LTBI).

2. Assemble the Team



Our team from left to right: **Monica Czapla** (Program Manager), **Jeff Sogo** (Public Health Nurse), **Josh VanOtterloo** (CSTE Epi Fellow), **Alan Melnick** (Health Director/Health Officer), **Derel Glashower** (Epidemiologist)

3. Examine the Current Approach



The team used root-cause analysis to determine factors leading to LTBI treatment incompleteness. A key component was client motivation, particularly long treatment regimens and lifestyle interference.

4. Identify Potential Solutions

The following potential changes were identified:

- Encourage 12 week LTBI treatment regimen
- Offer eDOT treatment method
- Lend clients eDOT hardware

5. Develop an Improvement Theory

IF we:

- Encourage 12 week regimen
- Provide eDOT option
- Lend some clients eDOT hardware

THEN:

- LTBI Treatment completion rates will improve
- Costs for the department will decrease
- Resources will be liberated for other TB objectives

DO

Test the Theory for Improvement

6. Test the Theory

Data collection process was developed, including chart abstractions, combining data into a single LTBI client database.

12 Week Treatment Regimen and eDOT had been recently implemented. Employed the lending of tablet hardware for LTBI clients using eDOT method.

CHECK

Study Results of the Test

7. Study the Results

- Treatment completion rates reached 100% in 2013 and 2014 YTD
- Treatment costs decreased approximately \$900 per patient completing LTBI treatment.

ACT

Standardize the Improvement and Establish Future Plans

8. Standardize the Improvement or Develop New Theory

Formalized data collection, process guidance, tablet protocols, and consent forms. 12 week treatment and eDOT now preferred method of care for LTBI patients at CCPH.

9. Establish Future Plans

- Improve data collection
- Patient satisfaction surveys
- Roll into program assessment
- Share success with others