



IHS Innovation Projects

The Indian Health Service (IHS) Innovation Projects are part of an ongoing quality improvement (QI) effort to address some of the social determinants of health, such as education, transportation, housing and employment.

Recipients — recognized Patient Centered Medical Home (PCMH) sites — are given funds to develop advanced QI projects; they become role models and peer advisors for other sites. The project is the first of its kind to support IHS, Tribal and Urban Indian (I/T/U) sites in addressing social factors that affect overall health.

PROJECT DIRECTIVES

Project proposals must address:

- Which social determinants will be addressed.
- \checkmark How the project will meet the identified need.
- How the pilot project works within the framework of the PCMH model of care.

- How QI methods will be used to address the need.
- The community-based component.
- What measures, reporting process and timeline will be used to track outcomes.





2017–2018 RECIPIENTS

Uintah-Ouray Service Unit Fort Duchesne, UT

IHS ambulatory care clinic serving 4,200 patients in Northeastern Utah.

CHALLENGE

Limited clinic hours and transportation issues prevent many patients from being able to access care when they need it.

PROJECT
Nurse Call Line

Elko Service Unit Elko, NV

IHS ambulatory care center serving 7,139 patients across a large region of Northeastern Nevada.

CHALLENGE

The geography and high-desert weather make travel difficult; patients also have limited access to educational opportunities and technology.

PROJECT

Health Literacy/Personal Health Record (PHR) Access



Uintah-Ouray Service Unit (U&O)

Fort Duchesne Health Center

PROJECT: NURSE CALL LINE

Create a Nurse Call Line for after-hours phone access to timely care advice and to address transportation and economic impediments to visiting the clinic.

IMPLEMENTATION

- » The nurse call line opened on December 5, 2017.
- » U&O had 93 callers in the first nine months with 82 calls answered. Of those, 18 were told to visit the ER; 11 were advised to go to the clinic for the next available appointment. The rest were referred to home-based care and outpatient follow-up as needed and avoided ER visits.
- » A survey shows patient satisfaction has been over 90%.
- » U&O plans to continue the nurse call line contract, maintain funding and advertising the service and continue to provide case management to callers.

STEPS TO REPLICATE THE PROJECT

- » Create a Scope of Work (SOW) statement.
- » Send the SOW out to bid and select a vendor.
- » Coordinate with your office of Information Technology (IT) for all call details to be downloaded into patients' electronic health records (EHRs) for clinic access.
- » Advertise the service to the community (radio, flyers, promotional items) and educate patients about the call line when they visit the clinic.
- » Assign a Clinical Care Coordinator to case manage the phone calls.



Elko Service Unit

Southern Bands Health Center

PROJECT: HEALTH LITERACY/PHR ACCESS

Provide public-access laptops, technical support and technology education using an approved PCMH health literacy model to promote use of the IHS Personal Health Record (PHR), which allows patients to access medical records and communicate with their care team.

IMPLEMENTATION

- » Staff prepared literacy training and community outreach materials and promoted the project at a community health fair. Internet-access health kiosks were installed.
- The team will continue promoting the project, signing up patients, conducting health literacy and computer trainings and providing ongoing technical support.
 Staff will track and report results.

STEPS TO REPLICATE THE PROJECT

Phase 1: Planning and preparation.

- » Procure equipment and train staff.
- Print training and promotional materials.
- » Coordinate with your IT office to prepare computer systems and pro vide internet capabilities, ensuring access to all authorized programs.

Phase 2: Community training.

- » Provide training for community partners, including Community Health Representatives (CHR) and Health Directors.
- » Implement communication and outreach to promote the project.

Phase 3: Implementation.

- » Continue to register and train patients.
- » Monitor PHR registration data and track numbers of patients using the system. Report data to the Quality Control/Medical Care Evaluation Committee and Governing Board.