SPLIT
Shared Practice Learning and Improvement Tool
Overview

- What is SPLIT?
- How to Get Your Site Enrolled
  - For Practices
  - For PTOs
- How to get to SPLIT
- How to use SPLIT (Demo)
  - Practices
  - PTOs
- Q&A
- Contacts
What is SPLIT?

- SPLIT = Shared Practice Learning and Improvement Tool (SPLIT)

- SPLIT keeps track of how well your practice is doing on key building blocks of advanced healthcare delivery.

- SPLIT is a single place to update important practice information for the initiative, fill out SIM assessments, submit clinical quality measures, and review summary reports.
Practice Assessments on SPLIT

◆ Fill out these assessments with your team:
  ▪ Data Quality Assessment – Baseline and every 6 months
  ▪ IPAT – Baseline and yearly
  ▪ Milestone Activity Inventory – Baseline and every 6 months
  ▪ Practice Monitor – Baseline and every 6 months

◆ Complete individually:
  ▪ Clinician and Staff Experience Survey – Baseline and yearly

◆ Once finished with first four assessments, complete as a team:
  ▪ Practice Improvement Plan – Baseline and every 6 months
    ▪ Must complete the IPAT, Milestone Activity Inventory, and the Practice Monitor prior to filling out the Practice Improvement Plan.

◆ Field Notes – Populated by PFs and CHITAs
  ▪ Complete for every meeting with practices
  ▪ Submitted cross-cutting communication and progress monitoring
<table>
<thead>
<tr>
<th>Assessment Name</th>
<th>Purpose</th>
<th>Who Fills It Out</th>
<th>Responsible for Reporting</th>
<th>Timing</th>
<th>Time to Complete (Minutes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Home Practice Monitor</td>
<td>Practice self-assessment of level of implementation of core aspects of advanced primary care</td>
<td>Practice team led by PF</td>
<td>Practice Champion</td>
<td>Baseline &amp; every 6 months</td>
<td>60</td>
</tr>
<tr>
<td>IPAT</td>
<td>Assesses current methods BHI along levels of coordination, co-location and integration</td>
<td>Practice champion</td>
<td>Practice Champion</td>
<td>Baseline &amp; annually</td>
<td>10</td>
</tr>
<tr>
<td>Clinician and Staff Experience Survey</td>
<td>Individual provider and staff survey that assesses two subscales – Clinician and Staff Experience and Burnout</td>
<td>All members of Practice</td>
<td>Each practice member</td>
<td>Baseline &amp; annually</td>
<td>15</td>
</tr>
<tr>
<td>SIM Milestone Activity Inventory</td>
<td>Assesses practice's current implementation of SIM milestone activities, helps identify gaps and prioritizes practice's next steps</td>
<td>Practice team led by PF</td>
<td>Practice team approves draft, PF submits final</td>
<td>Baseline &amp; every 6 months</td>
<td>60</td>
</tr>
<tr>
<td>Data Quality Assessment</td>
<td>Assesses practice's current state of data quality including accuracy of data element capture, validity of CQM reports and desired next steps for HIT</td>
<td>Practice HIT champion led by CHITA</td>
<td>CHITA</td>
<td>Baseline &amp; every 6 months</td>
<td>60</td>
</tr>
<tr>
<td>Practice Improvement Plan</td>
<td>SMART goals related to practice transformation as it relates to milestone activities. Can be done at same time as inventory</td>
<td>Practice team led by PF</td>
<td>PF</td>
<td>Baseline &amp; every 6 months</td>
<td>15</td>
</tr>
<tr>
<td>Field Notes</td>
<td>Document interactions between practice and PF, CHITAs, and possibly Regional Health Connectors. Includes summary of topics discussed and next steps.</td>
<td>PF, CHITA, or RHC</td>
<td>PF, CHITA, or RHC</td>
<td>Every significant interaction (meeting, call, email exchange)</td>
<td>5-15</td>
</tr>
<tr>
<td>Clinical Quality Measures</td>
<td>Track patient and process outcomes reported by practices</td>
<td>Practice champion</td>
<td>Practice Champion</td>
<td>Every calendar quarter starting Q2 2016</td>
<td>Variable</td>
</tr>
</tbody>
</table>
Your practice will receive a Welcome email from SPLIT on **2/18/16**

- Create a SPLIT user account
- Provide a complete list of your practice staff and clinicians (use attached spreadsheet)
- This email is sent to the primary SIM practice contact. If it is not the right person, there are instructions to have us notify someone else.
Practice administrators can:
- invite other practice members to join SPLIT,
- update practice information and the practice's member roster,
- fill out and submit final versions of the SIM assessments,
- view summary reports at any time.

Practice champions can:
- fill out and submit final versions of the SIM team-based assessments,
- view summary reports for the practice at any time.

Practice SPLIT members can:
- fill out (but not submit) SIM assessments filled out by your team,
- view summary reports for the practice at any time.
### Practice Roster

Follow these 5 steps, then save this file with your practice name as the filename, and secure it with a password using your practice’s zip code. To add a password to this file, go to “Save As”, choose “Options”, and enter your practice’s zip code for “Password to open”. When complete, email this file back to support@splitpracticeinnovations.org

#### Step 1: Practice Name

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.L.</th>
<th>Last Name</th>
<th>Email</th>
</tr>
</thead>
</table>

#### Step 2: Practice Organization (if any)

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.L.</th>
<th>Last Name</th>
<th>Email</th>
</tr>
</thead>
</table>

- **Step 3:** List your practice staff who you would like to use the SPLIT website. If one person serves multiple roles, copy their information into other rows as necessary. Add new rows for any role as needed.

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.L.</th>
<th>Last Name</th>
<th>Email</th>
<th>National Provider Identifier (NPI) number (if applicable)</th>
</tr>
</thead>
</table>

- **Step 4:** List the remaining providers and staff in your primary care practice. Add new rows as needed.

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.L.</th>
<th>Last Name</th>
<th>Email</th>
<th>National Provider Identifier (NPI) number (if applicable)</th>
</tr>
</thead>
</table>

- **Step 5:** Provide information on these key practice contacts. If more than one person can serve in the role, copy their role to a new line and add their name and contact information. Add new rows for any role as needed.

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.L.</th>
<th>Last Name</th>
<th>Email</th>
<th>Best phone number</th>
</tr>
</thead>
</table>

  - **Office manager**
  - **Provider champions**
  - **Clinical quality measure leader** (person responsible for monitoring and improving key QM measures)
  - **Other key role** (to include other key personnel)
# Practice Roster

**SPLIT**

Shared Practice Learning and Improvement Tool

Follow these 5 steps, then save this file with your **practice name as the filename**, and **secure it with a password using your practice's zip code**. To add a password to this file, go to "Save As", choose "Options", and enter your practice's zip code for "Password to open". **When complete, email this file back to support-split@practiceinnovationco.org**

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## Step 1:
**Practice Name:**

---

## Step 2:
**Practice Organization (if any):**

---

## Step 3:

List your practice staff who you would like to use the SPLIT website. If one person serves multiple roles, copy their information into other rows as appropriate. Add more rows for any role as needed.

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>Email</th>
</tr>
</thead>
</table>

**SPLIT website practice site administrator(s)**

(can create and approve new practice users on SPLIT, assign SPLIT roles, and update practice profile)

Required to have at least one per practice

**Practice Champion(s)**

(responsible for submitting final assessments, can perform all activities of team members too)

Required to have at least one per practice

**SPLIT Website Practice Members**

(can edit draft assessments, view summary reports, will receive practice member surveys)
## Practice Roster

### Step 4:
List the remaining providers and staff in your primary care practice. Add more rows as needed.

<table>
<thead>
<tr>
<th>Other practice clinicians and staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Will not have access to SPLIT assessments or reports, but will receive practice member surveys for SIM)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>E-mail</th>
<th>National Provider Identifier (NPI) number (If applicable. Please include accurate NPI numbers as they are important for SIM payment reform and evaluation purposes.)</th>
</tr>
</thead>
</table>

### Step 5:
Provide information on these key practice contacts. If more than one person can serve in the role, copy their role to a new line and add their name and contact information. If one person serves multiple roles, copy their contact information for all applicable roles.

<table>
<thead>
<tr>
<th>Office manager</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>E-mail</th>
<th>Best phone number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Provider champion</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>E-mail</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Clinical quality measure leader (person(s) responsible for submitting SIM CQM's quarterly)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>E-mail</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Other SIM contact (to receive official SIM communications)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>E-mail</th>
</tr>
</thead>
</table>
A note about National Provider Identification Numbers

- NPI’s are required by payers participating in SIM and the SIM evaluator.
- Important to provide a complete and accurate list of providers and their NPI’s for payers.
- Many payers are waiting for this information prior to reaching out to practices to discuss potential Alternative Payment Model opportunities.
How to Get Your Site Enrolled (for PTOs)

- You will receive a Welcome email from SPLIT
  - Create a SPLIT user account
  - Provide a complete list of your members (use attached spreadsheet)
  - This email is sent to the primary SIM PTO contact. If it is not the right person, there are instructions to have us notify someone else.
PTO administrators can:
- invite other members to join SPLIT,
- update your organization’s information and member roster,
- fill out and submit field notes for matched practices,
- fill out and submit SIM assessments with matched practices,
- view summary reports for the PTO and matched practices at any time.

PTO team members identified as Practice Facilitators (PFs) or Clinical Health Information Technology Advisors (CHITAs) can:
- fill out and submit field notes for assigned practices,
- fill out and submit SIM assessments with assigned practices,
- view summary reports at any time for the PTO and any assigned practices.
Follow these 2 steps, then save this file with your organization name as the filename, and secure it with a password using your organization's zip code.

To add a password to this file, go to "Save As", choose "Options", and enter your organization's zip code for "Password to open". When complete, email this file back to support-split@practiceinnovationco.org

<table>
<thead>
<tr>
<th>First Name</th>
<th>M.I.</th>
<th>Last Name</th>
<th>E-mail</th>
<th>Phone (work)</th>
<th>Phone (mobile)</th>
<th>Possible Role(s) in PTO</th>
<th>Practice Facilitator (PF)</th>
<th>Clinical Health Information Technology Advisor (CHITA)</th>
<th>Regional Health Connector (RHC)</th>
<th>Administrator for SPLIT website (can add and edit PTO staff accounts, can respond to practice match requests)</th>
</tr>
</thead>
<tbody>
<tr>
<td>example</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>John</td>
<td>C</td>
<td>Doe</td>
<td><a href="mailto:john@mypto.com">john@mypto.com</a></td>
<td>555-555-5555</td>
<td>555-888-8888</td>
<td>X</td>
<td>X</td>
<td>X</td>
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</tr>
</tbody>
</table>
Your email address will be your username.
Finding SPLIT website after creating an account

Go to practiceinnovationco.org and click on SPLIT icon.
Payment reform, population management, care coordination, integrated behavioral health – whether your practice is well on its way to implementing new models of care, or just beginning its journey, the SPLIT can help.

The Shared Practice Learning and Improvement Tool (SPLIT) keeps track of how well your practice is doing on key building blocks of advanced healthcare delivery. The tools, developed by national practice change experts, will help highlight strengths, identify areas of need, and prioritize next steps.

With so many competing demands on a healthcare practice, the SPLIT is designed with your needs in mind. Its flexible and interactive design is intuitive to use, and the reports automatically keep members of your practice transformation support team up to date, cutting down on wasted meetings and emails.

If you would like to learn more about SPLIT, please contact the SPLIT support team at sim-split@practiceinnovationco.org.

For technical support, please email support-split@practiceinnovationco.org.

At first, the SPLIT will be open to members of practices participating in the Colorado State Innovation Model and their matched Practice Transformation Organizations. If you are working with SIM practice, click on the "Enroll Now" button to get started.
How to Use SPLIT Demo (Practice)
Nothing found

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**Integrated Practice Assessment Tool (IPAT)**
Expected by 2016-04-01

- **Start**
  - 0% complete

---

**Data Quality Assessment**
Expected by 2016-04-01

- **Start**
  - 0% complete

---

**Medical Home Practice Monitor**
Expected by 2016-04-01

- **Start**
  - 0% complete

---

**Practice Improvement Plan**

Nothing found
To-Do List

Overdue

Nothing found

Due

Practice Improvement Plan
Expected by 2016-04-01
Start
0% complete

Clinician and Staff Experience Survey
Expected by 2016-04-01
Start
0% complete

SIM Milestone Activity Inventory Overview
Expected by 2016-04-01
Start
0% complete

Upcoming

Nothing found
Medical Home Practice Monitor

Please consider how fully each item has been implemented or functions in your practice. Fill in the circle that best reflects the completeness of implementation in your practice. If you rate something as a 4, it means it is now routine across the entire practice. A rating of 1, 2, or 3 means that the statement is only done sometimes, or only in part, or not by everyone in the practice.

1. ENGAGED LEADERSHIP

a. Practice leaders support innovation and are willing to take risks and tolerate occasional failures in order to improve.
   Not at all
   Not at all
   Not at all
   Not at all
   Not at all
   Completely
   Comments

b. A culture of shared leadership has been created, with everyone sharing responsibility for change and improvement in the practice.
   Not at all
   Not at all
   Not at all
   Not at all
   Completely
   Comments

c. The practice has a shared vision for practice transformation that everyone understands and supports.
   Not at all
   Not at all
   Not at all
   Completely
   Comments

d. Practice leaders proactively remove organizational barriers to change and improvement.
   Not at all
   Not at all
   Not at all
   Completely
   Comments

2. DATA DRIVEN IMPROVEMENT

a. Our practice has a sustainable, effective quality improvement team that meets regularly and deals effectively with challenges.
Please consider how fully each item has been implemented or functions in your practice. Fill in the circle that best reflects the completeness of implementation in your practice. If you rate something as a 4, it means it is now routine across the entire practice. A rating of 1, 2, or 3 means that the statement is only done sometimes, or only in part, or not by everyone in the practice.

1. ENGAGED LEADERSHIP

   a. Practice leaders support innovation and are willing to take risks and tolerate occasional failures in order to improve.
      Not at all 0 1 2 3 4 Completely 1 Comments

   b. A culture of shared leadership has been created, with everyone sharing responsibility for change and improvement in the practice
      Not at all 0 1 2 3 4 Completely 0 Comments

   c. The practice has a shared vision for practice transformation that everyone understands and supports.
      Not at all 0 1 2 3 4 Completely 0 Comments

   d. Practice leaders proactively remove organizational barriers to change and improvement
      Not at all 0 1 2 3 4 Completely 0 Comments

2. DATA DRIVEN IMPROVEMENT

   a. Our practice has a sustainable, effective quality improvement team that meets regularly and deals effectively with challenges
Medical Home Practice Monitor

Please consider how fully each item has been implemented or functions in your practice. Fill in the circle that best reflects the completeness of implementation in your practice. If you rate something as a 4, it means it is now routine across the entire practice. A rating of 1, 2, or 3 means that the statement is only done sometimes, or only in part, or not by everyone in the practice.

1. ENGAGED LEADERSHIP

a. Practice leaders support innovation and are willing to take risks and tolerate occasional failures in order to improve.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Completely</th>
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</table>

1 Comments

b. A culture of shared leadership has been created, with everyone sharing responsibility for change and improvement in the practice

<table>
<thead>
<tr>
<th>Not at all</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Completely</th>
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0 Comments

c. The practice has a shared vision for practice transformation that everyone understands and supports.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Completely</th>
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</tbody>
</table>

0 Comments

d. Practice leaders proactively remove organizational barriers to change and improvement

<table>
<thead>
<tr>
<th>Not at all</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Completely</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

0 Comments

2. DATA DRIVEN IMPROVEMENT

a. Our practice has a sustainable, effective quality improvement team that meets regularly and deals effectively with challenges

<table>
<thead>
<tr>
<th>Not at all</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Completely</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

0 Comments
# Medical Home Practice Monitor

Please consider how fully each item has been implemented or functions in your practice. Fill in the circle that best reflects the completeness of implementation in your practice. If you rate something as a 4, it means it is now routine across the entire practice. A rating of 1, 2, or 3 means that the statement is only done sometimes, or only in part, or not by everyone in the practice.

## 1. ENGAGED LEADERSHIP

<table>
<thead>
<tr>
<th>Item</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Practice leaders support innovation and are willing to take risks</td>
<td>Not at all</td>
</tr>
<tr>
<td>and tolerate occasional failures in order to improve.</td>
<td>0</td>
</tr>
<tr>
<td>b. A culture of shared leadership has been created, with everyone</td>
<td>Not at all</td>
</tr>
<tr>
<td>sharing responsibility for change and improvement</td>
<td>1</td>
</tr>
<tr>
<td>c. The practice has a shared vision for practice transformation</td>
<td>Not at all</td>
</tr>
<tr>
<td>that everyone understands and supports.</td>
<td>2</td>
</tr>
<tr>
<td>d. Practice leaders proactively remove organizational barriers</td>
<td>Not at all</td>
</tr>
<tr>
<td>to change and improvement.</td>
<td>3</td>
</tr>
</tbody>
</table>

## 2. DATA DRIVEN IMPROVEMENT

<table>
<thead>
<tr>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Our practice has a sustainable, effective quality improvement</td>
</tr>
<tr>
<td>team that meets regularly and deals effectively with challenges</td>
</tr>
</tbody>
</table>
**Medical Home Practice Monitor**

Please consider how fully each item has been implemented or functions in your practice. Fill in the circle that best reflects the completeness of implementation in your practice. If you rate something as a 4, it means it is now routine across the entire practice. A rating of 1, 2, or 3 means that the statement is only done sometimes, or only in part, or not by everyone in the practice.

### 1. Engaged Leadership

<table>
<thead>
<tr>
<th>Item</th>
<th>Rating Options</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Practice leaders support innovation and are willing to take risks and tolerate occasional failures in order to improve.</td>
<td>0, 1, 2, 3, 4</td>
<td></td>
</tr>
<tr>
<td>b. A culture of shared leadership has been created, with everyone sharing responsibility for change and improvement in the practice</td>
<td>0, 1, 2, 3, 4</td>
<td></td>
</tr>
<tr>
<td>c. The practice has a shared vision for practice transformation that everyone understands and supports.</td>
<td>0, 1, 2, 3, 4</td>
<td></td>
</tr>
<tr>
<td>d. Practice leaders proactively remove organizational barriers to change and improvement</td>
<td>0, 1, 2, 3, 4</td>
<td></td>
</tr>
</tbody>
</table>

### 2. Data Driven Improvement

<table>
<thead>
<tr>
<th>Item</th>
<th>Rating Options</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Our practice has a sustainable, effective quality improvement team that meets regularly and deals effectively</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Medical Home Practice Monitor

Please consider how fully each item has been implemented or functions in your practice. Fill in the circle that best reflects the completeness of implementation in your practice. If you rate something as a 4, it means it is now routine across the entire practice. A rating of 1, 2, or 3 means that the statement is only done sometimes, or only in part, or not by everyone in the practice.

### 1. ENGAGED LEADERSHIP

<table>
<thead>
<tr>
<th>Item</th>
<th>Rating 0</th>
<th>Rating 1</th>
<th>Rating 2</th>
<th>Rating 3</th>
<th>Rating 4</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Practice leaders support innovation and are willing to take risks and tolerate occasional failures in order to improve.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. A culture of shared leadership has been created, with everyone sharing responsibility for change and improvement in the practice</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>c. The practice has a shared vision for practice transformation that everyone understands and supports.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Practice leaders proactively remove organizational barriers to change and improvement</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### 2. DATA DRIVEN IMPROVEMENT

<table>
<thead>
<tr>
<th>Item</th>
<th>Rating 0</th>
<th>Rating 1</th>
<th>Rating 2</th>
<th>Rating 3</th>
<th>Rating 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Our practice has a sustainable, effective quality improvement team that meets regularly and deals effectively with challenges</td>
<td></td>
<td></td>
<td></td>
<td></td>
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Medical Home Practice Monitor

Please consider how fully each item has been implemented or functions in your practice. Fill in the circle that best reflects the completeness of implementation in your practice. If you rate something as a 4, it means it is now routine across the entire practice. A rating of 1, 2, or 3 means that the statement is only done sometimes, or only in part, or not by everyone in the practice.

1. ENGAGED LEADERSHIP

   a. Practice leaders support innovation and are willing to take risks and tolerate occasional failures in order to improve.
      Not at all  0  1  2  3  4  Completely

   b. A culture of shared leadership has been created, with everyone sharing responsibility for change and improvement in the practice.
      Not at all  0  1  2  3  4  Completely

   c. The practice has a shared vision for practice transformation that everyone understands and supports.
      Not at all  0  1  2  3  4  Completely

   d. Practice leaders proactively remove organizational barriers to change and improvement.
      Not at all  0  1  2  3  4  Completely

2. DATA DRIVEN IMPROVEMENT

   a. Our practice has a sustainable, effective quality improvement team that meets regularly and deals effectively with challenges.
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      | Complete  | 1 |

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      Comments:  

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As the Practice Champion, you can submit the assessment.
# Assessments

<table>
<thead>
<tr>
<th>Survey</th>
<th>Baseline</th>
<th>6 month</th>
<th>12 month</th>
<th>18 month</th>
<th>24 month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Home Practice Monitor</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
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<tr>
<td>IPAT</td>
<td>View</td>
<td></td>
<td>View</td>
<td>View</td>
<td>View</td>
</tr>
<tr>
<td>SIM Milestone Activity Inventory</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
</tr>
<tr>
<td>Data Quality Assessment</td>
<td>View</td>
<td>View</td>
<td>View</td>
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</tr>
<tr>
<td>Clinician &amp; Staff Experience Survey</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
</tr>
<tr>
<td>Practice Improvement Plan</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
<td>View</td>
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</tbody>
</table>

## Clinician and Staff Experience Survey

- **Baseline**
- **12 month**
- **24 month**
How to Use SPLIT Demo (PTO)
To-Do List

Overdue

- Nothing found

Due

- Integrated Practice Assessment Tool (IPAT)
  Expected by 2016-04-01
  Start
  37% complete

- Data Quality Assessment
  Expected by 2016-04-01
  Start
  51% complete

- Practice Improvement Plan
  Expected by 2016-04-01
  Start
  0% complete

Upcoming

- Medical Home Practice Monitor
  Open 2016-08-01

Field Notes

New

- Started on 2016-02-15
  Resume
  0% complete

- Started on 2016-02-15
  Resume
  0% complete

- Started on 2016-02-16
  Resume
  0% complete

- Started on 2016-02-16
  Resume
  0% complete
Field Notes

1. Your role: [Check all that apply]
   - Practice Facilitator
   - CHITA

2. Your Organization:

3. Your Name:

4. Clinic ID and Name:
6. Meeting/Contact Description [Check all that apply]

- Regular QI Team meeting
- Clinic leadership meeting
- Practice-wide meeting (all staff and clinicians)
- IT/EHR/Technical support staff only
- System-level meeting (e.g., system-level director, officer)
- Kickoff meeting (i.e., initial facilitation visit)
- Practice assessment completion meeting
- Other type of contact or meeting (briefly describe):

7. Was the meeting/contact canceled or missed? [Check only one]

- Yes
- No
Administrative functions on SPLIT to allow Practice site administrators and PTO administrators to add new members and adjust their roles.

PTO administrators will also be able to assign your own PFs and CHITAs to matched practices.
Please type your questions in the chat window.
Contacts

Kyle Knierim, MD CHES Assistant Director
kyle.knierim@ucdenver.edu | 720.588.3118

Maggie Dunham, HIT Program Manager
maggie.dunham@ucdenver.edu | 303.724.9384

Practice Innovation Colorado Website:
http://www.practiceinnovationco.org

For technical support:
support-split@practiceinnovationco.org

Thank You!