**QI Activity Scenarios**

Primary Care/Specialty Care

Your organization is establishing a new primary care clinic. Physicians will need capability to make referrals for specialty care as they come up.

Chronic Care

Your organization has decided to develop a care management program for identified high risk patients based on needs assessment. This program may include care coordination, outreach, or medication therapy.

Patient Navigation

Your organization would like to implement programs for patient navigators to connect uninsured and underinsured chronic and mental ill patients with healthcare services in the community.

Behavioral Health

**Scenario 1**

Your organization provides a variety of Behavioral Health Services; the majority of your services are utilized to capacity. Individual therapy sessions, however pose a unique challenge in that despite being scheduled to capacity, on average, therapy sessions experience a 40% no-show rate.

**Scenario 2**

Individuals with severe mental illness have high rates of comorbid medical illness and higher mortality rates than the general population. Despite this, medical illness is undetected and undertreated. Within your organization the amount of individuals with comorbid medical conditions is particularly high. Your clinical team currently takes vital signs, inquires about access to primary care services, provides patient education on the importance of addressing primary care needs as well as behavioral health disorders and makes referrals to primary care providers and services when appropriate. However, despite organizational efforts, your patients continue to experience higher than average mortality rates due to comorbid medical conditions.

EC Utilization

A large share of patients seeking care at your organization’s Emergency Department are there for conditions treatable through primary care. To reduce this occurrence, your organization has opened a new urgent care clinic and is directing walk-ins to the Emergency Department there. After four months of this intervention taking place, however, the average length of stay in the Emergency Department has not declined.