

**PPC 8: Performance Reporting and Improvement
Element A: Measures of Performance**

CHC-B has, for years, tracked many measures of performance and has had a robust Quality Improvement Plan. We track many measures for clinical process, clinical outcome, service data, and patient safety for our Federal Health Plan, our Quality Improvement Plan, and various grants we report on. We have participated in the Collaboratives and report monthly to the national website on the measures for diabetes, cardiovascular disease, asthma and depression. Most of the data we report on both a clinic and provider level. Many reports show the various benchmarks or national goals for comparison. Provider teams receive monthly lists of patients who are not in compliance with each measure. Provider teams utilize this data during team meetings and POD meetings to make improvement plans. The screen prints below are just some of the various reports and graphs that we run and report each month or annually depending on the requirement:

Item 1: Clinical process (e.g., % of women 50+ with mammograms or childhood vaccination rates.

Federal Health Plan Goal - CANCER (Mammograms)

Increase the % of female patients age 42 and over who recieved a mammogram in the measurement year or the prior two years from 60% to 65%

10/31/2010

DUE 7/31/2011

Women 42 and over w/Medical Visit	982	Current HPC	GOAL
Women 42+ w/Mammo in last 2 years	595	61%	65%

PCP	#	%
T	73	74%
S	239	67%
I	170	65%
	73	60%
	105	60%
	112	52%
	93	51%
	99	51%
Other	18	44%

POD	#	%
POD	502	63%
POD	462	58%
Other	18	44%

Comparisons:
General US Population: 71%
Low Income Population: 58%
Commercial Ins: 70%
Medicaid: 51%

*Mammography screening for women ages 50 to 69 can reduce breast cancer mortality by up to 35 percent through early detection.
 *A mammogram can detect about 85 percent of breast cancers in women without symptoms.

REPORT CRITERIA		Assessment date: 3/30/2010
Provider site name:	H (123abc)	
Age range:	From 25 to 35 months as of 7/1/2010	
Selected series/antigens:	4:3:1:3:3:1:4 (4DTaP, 3Polio, 1MMR, 3HIB, 3HepB, 1Var, 4PCV)	
Compliance:	<input type="checkbox"/> By age: 0 months <input checked="" type="checkbox"/> By date: 3/30/2010	
Additional criteria:	<input checked="" type="checkbox"/> Apply ACIP Recommendations (valid doses only) <input checked="" type="checkbox"/> Apply four-day grace period <input type="checkbox"/> Limited by	
Missed opportunities are defined as:	On LAST immunization visit	

IMMUNIZATION STATUS (based on user-selected criteria)

Note: For a report listing specific patients, choose Lists under the Standard Reports tab.

36	# of patient records selected	Total # of Patient Records Assessed 36
0	# of patients moved or gone elsewhere (MOGE)	
36	Total # of Patient Records Assessed	

(minus)

Immunizations Complete

Immunization Status		# of patients	% of patients
Received immunizations by assessment date:	03/30/2010	32	89%
Late up-to-date - received immunizations but NOT by:	03/30/2010	0	0%
Up-to-date and complete by:	03/30/2010	32	89%

Immunizations NOT Complete

Immunization Status	# of patients	% of patients
Missed opportunities to administer vaccine (as defined in report criteria)	3	8%
No missed opportunities but NOT eligible for immunization as of assessment date	0	0%
No missed opportunities; eligible; last visit <12 months ago	1	3%
No missed opportunities; eligible; last visit >= 12 months ago	0	0%
Total patients not complete by assessment date	4	11%

Bring Patients Up-To-Date

Of patients NOT complete, # of patients who could be brought up-to-date with 1 additional visit: 1 of 4

Immunizations Needed	# of patients	% of patients
1	1	3%
2	0	0%
3	0	0%
4+	0	0%
Total patients up-to-date with one additional visit	1	3%

Federal Health Plan Goal - PAP SMEARS (CANCER)

Increase the % of female patients age 21-64 who received one or more Pap Smears in the measurement year or one of the two prior years from 85% to 90%

DUE 7/31/2011

10/31/2010

Pts age 21+ w/pap in last 3 years	1254	Current HPC	GOAL
Women 21+ w/Medical Visit in last year	1565	80%	90%

PCP	# of Pts	%
S	235	86%
B	220	85%
C	342	82%
C	122	80%
T	115	79%
C	108	79%
F	245	76%
S	165	75%
Other	13	15%

POD	#	%
POD	670	82%
POD	882	79%
Other	13	15%

COMPARISONS:
 General US Population: 82%
 Low Income Population: 58%
 CHC's: 61%
 National CHC Ave: 56.9%

Increased pap smear screening has resulted in a major overall decline in cervical cancer incidence and mortality over the past several decades, with mortality rates dropping in some large populations by up to 80 percent.

Federal Health Plan Goal - PNUEMOVAX

Increase the % of adults 65+ with appropriate pneumovax coverage to 80%.

DUE 7/31/2011

10/31/2010

Pts 65 and older	354	Current HPC	GOAL
Pts w/ Pnuemovax	287	81%	80%

PCP	# of Pts	%
S	84	88%
G	65	85%
B	63	81%
S	20	80%
S	41	78%
F	20	75%
Cl	19	74%
T	34	74%
Other	8	63%

POD	# of Pts	%
Satellite POD	212	85%
Main POD	134	76%
Other	8	63%

Item 2 Clinical outcomes (e.g., HbA1c levels for diabetics).

Federal Health Plan Goal - DIABETES (A1c Control)

Increase the % of patients with diabetes whose last A1c is <= 9 from 79% to 85%

DUE 7/31/2011

10/31/2010

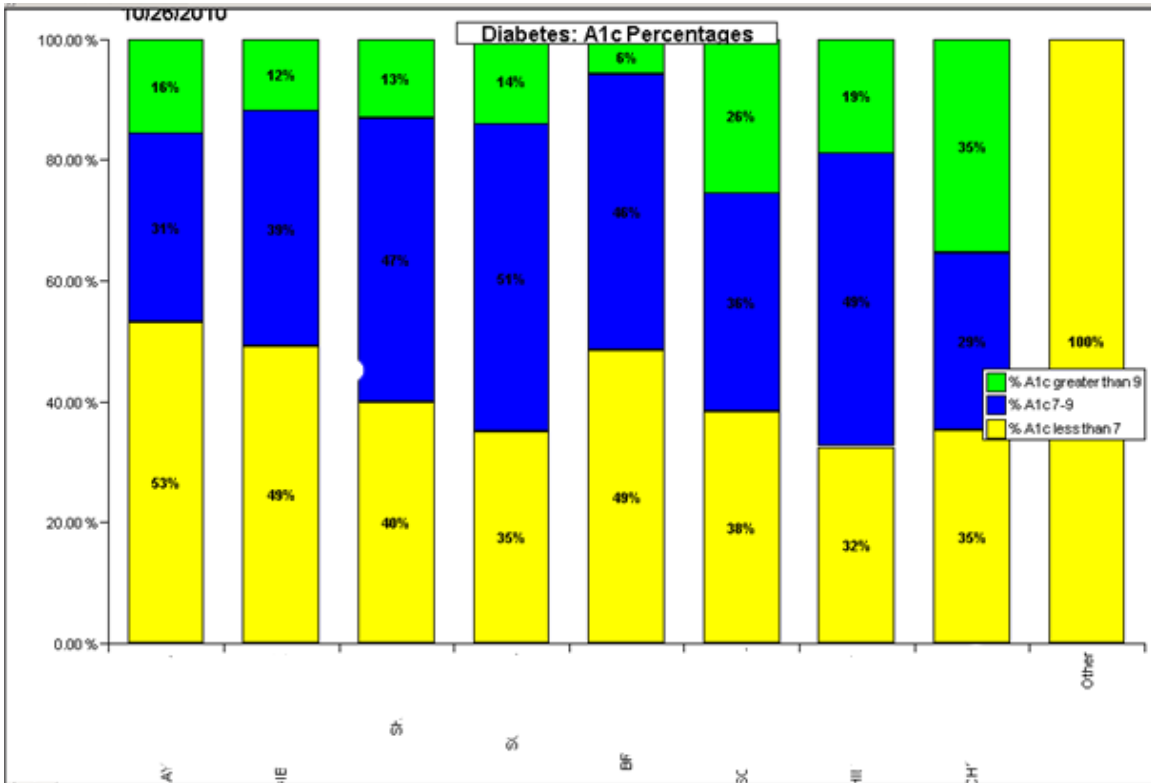
Baseline 6/30/08 = 76%

DM Patients	446	Current HPC	GOAL
Patients with A1c <=9	381	85%	85%

PCP	# of Pts	%
Other	1	100%
E	69	94%
C	59	88%
S	131	88%
B	51	86%
M	33	82%
H	38	79%
C	45	76%
C	19	68%

POD	# of Pts	%
Other	1	100%
Satellite POD	259	90%
Main POD	186	80%

Comparison: Other CHC's in Medical Home Ave 77%

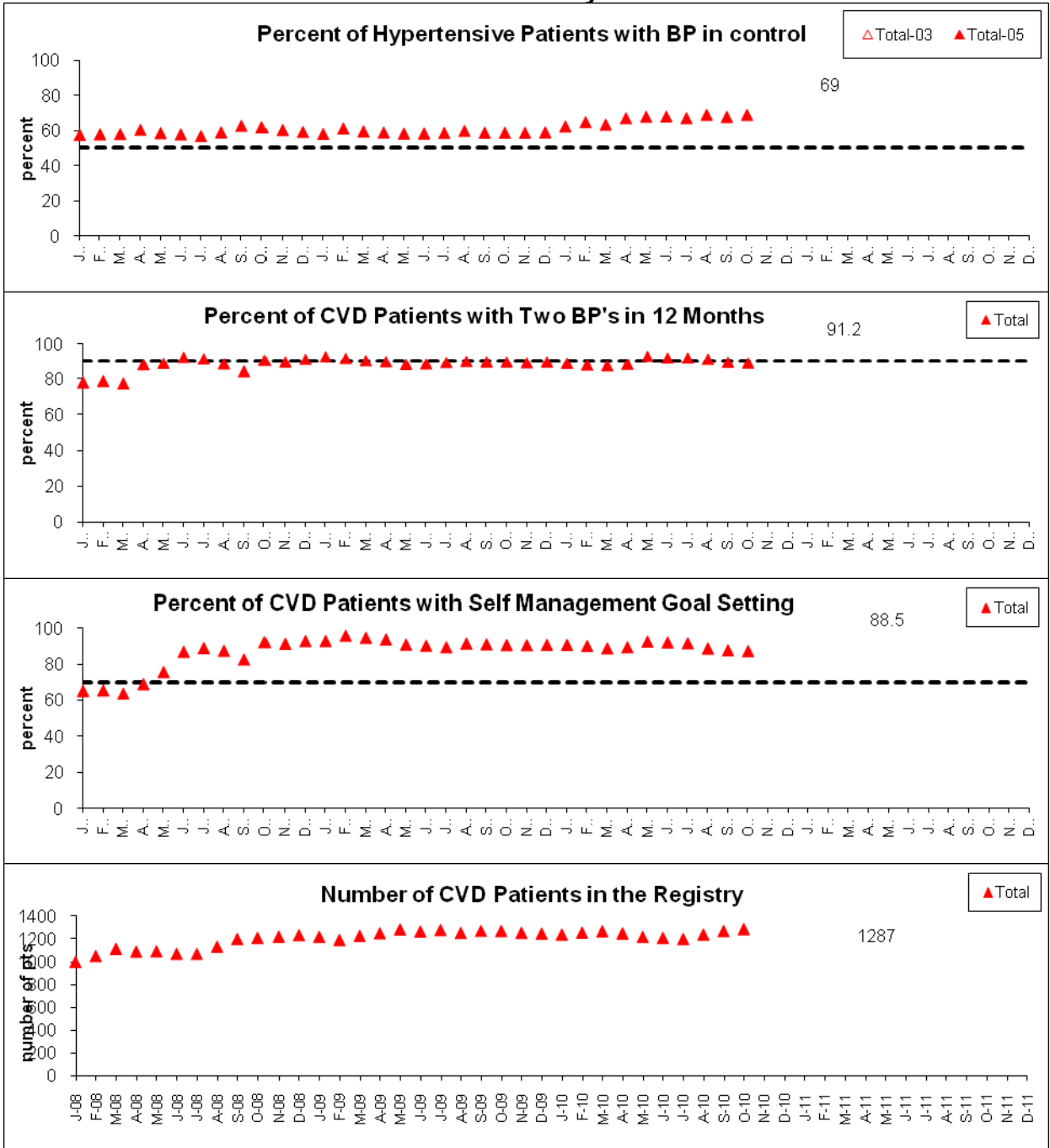


Measures of CVD Population

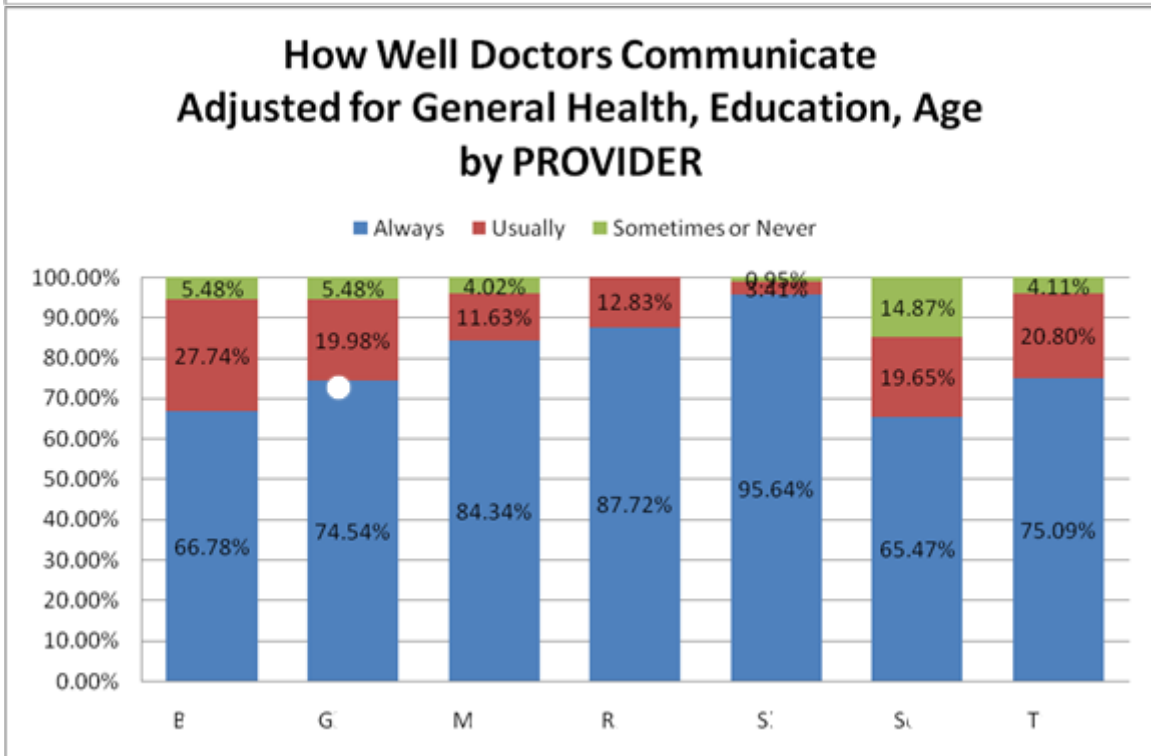
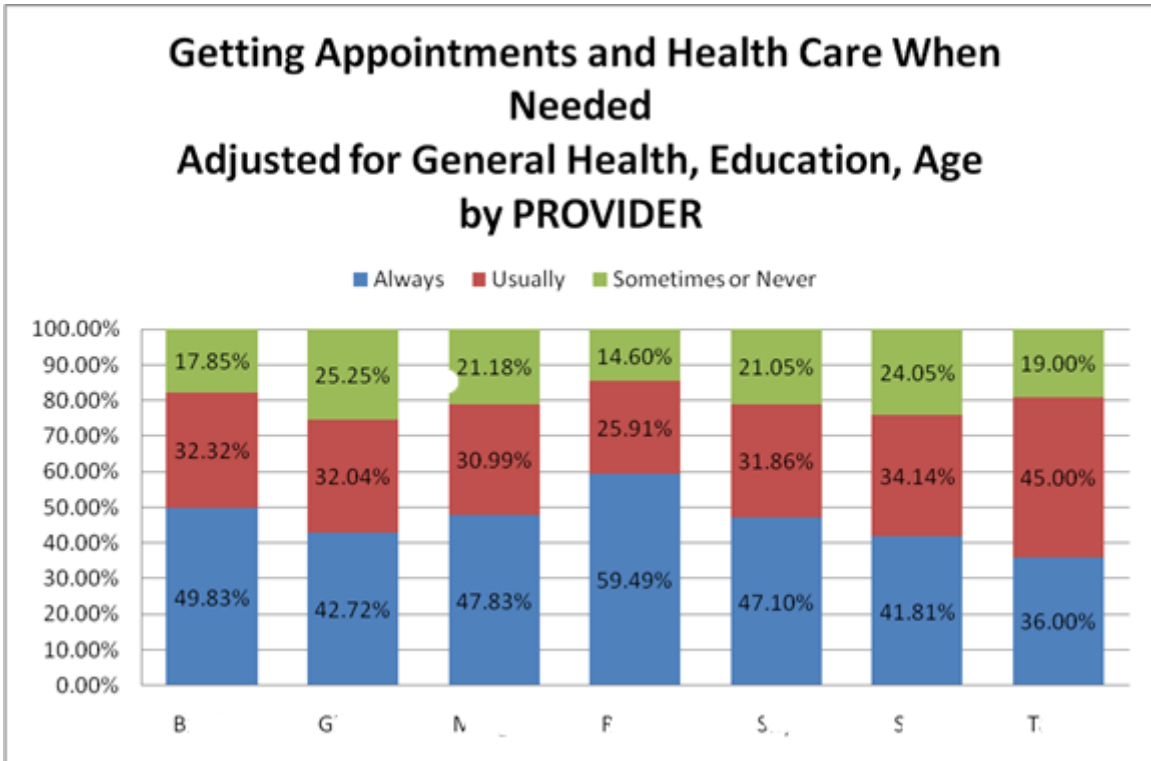
For Measurement Period Ending: 10/31/2010

Measure	Count	Avg or Percent
Total # CVD Patients	1301	
Hypertensive Patients (No DM) with Appropriate BP Control	504	82.89 %
Hypertensive Patients (With DM) with Appropriate BP Control	188	56.29 %
CVD Patients with 2 BP's in the Last 12 Months	1116	85.78 %
Documentation of Self-Management Goal Settings	1111	85.40 %
CVD + CAD Patients with Appropriate Fasting Lipid Profile Documented	122	9.38 %
CVD + Dyslipidemia Patients with Appropriate Fasting Lipid Profile Documented	803	61.72 %
CVD + HTN Patients with Appropriate Fasting Lipid Profile Documented	911	70.02 %
Patients with LDL Cholesterol Level Treated to Goal	874	67.18 %
Aspirin or Other Antithrombotic Agent Use	117	83.57 %
ACE Inhibitor/ARB Use	103	94.50 %
ACE Inhibitor/ARB Use - CVD Patients with DM	62	56.88 %
Beta Blocker Use	86	61.43 %
Depression Screening	833	64.03 %
Patients with 2 HbA1c's in the Last 12 Months (at least 3 months apart)	356	88.12 %
Weight Reduction	242	23.29 %
Exercise	38	2.92 %
Patients Who Are Current Smokers	219	20.18 %

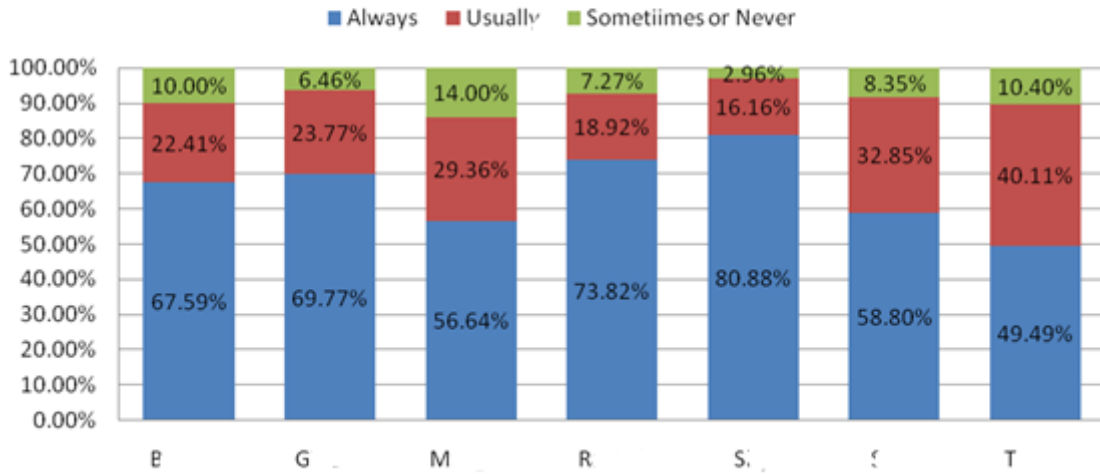
CHC-B Community Health Ctr



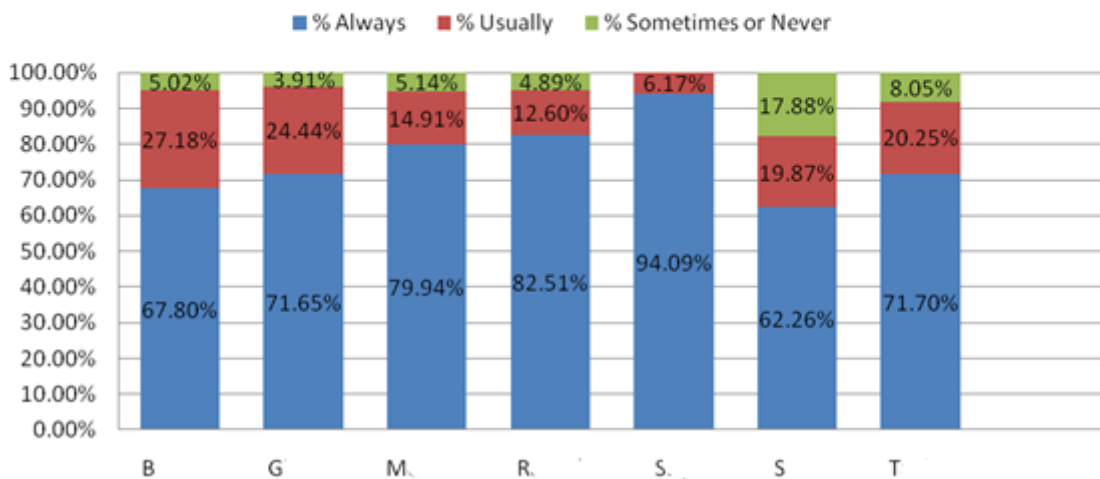
Item 3: Service data (e.g., backlogs or wait times).



Courteous and Helpful Staff (q24,q25) Adjusted for General Health, Education, Age by PROVIDER



How often did someone followup to give you lab test results Adjusted for General Health, Education, Age by PROVIDER



Item 4: Patient safety issues (e.g., medication errors).

Our QI Program looks at timeliness and appropriateness of exams, medications, testing, patient instructions, follow-up etc.

**CHC-B Community Health Center, Inc
Medical QI - Results of Peer Chart Audit**

****The QI Plan specifies that the average rating must be at least 3.5 on the 4.0 scale.**

	GROUP	A	B	C	D	E	F	G
Appropriate History Taken	3.78	4.00	3.90	3.60	3.60	4.00	3.60	4.00
Drug Allergies or NKDA Noted	3.77	3.70	3.70	3.50	4.00	3.70	4.00	3.70
Exam Appropriate	3.65	3.90	3.60	3.80	3.70	3.50	3.40	3.60
Appropriate Diagnostic test(s) ordered	3.74	3.88	3.33	3.56	3.89	3.78	4.00	4.00
H&P and testing support diagnosis	3.85	3.80	3.90	3.80	3.80	3.80	4.00	4.00
Medications are appropriate	3.74	3.70	3.80	4.00	3.67	3.70	3.56	3.60
Patient instructions are appropriate	3.62	4.00	4.00	3.80	2.60	4.00	3.30	3.70
Follow-up & time frame is appropriate	3.53	4.00	4.00	3.80	2.80	2.80	3.80	3.80
Referral(s) appropriate	3.72	3.50	4.00	4.00	3.00	4.00	3.83	4.00
Diagnosis in chart matches ESB	3.98	4.00	4.00	4.00	3.90	4.00	4.00	4.00
Jan 1-2010	3.74							
September-09	3.91							

Additionally, we receive notifications about medication safety from other sources:

MEDICAL CENTER HOME HEALTH
4th DRIVE
FAX #

Facsimile physician notification

To: Dr. _____ From: M. _____, OR., RN
Fax: _____ Phone: _____
Phone: _____ Date: 10/24/10
Patient: _____ Pages: 8 (including cover)

URGENT

We are required by regulation to assess patients receiving home health services for any drug interactions or duplicate drug therapy and to notify the physician.

The following issues were identified:

- Drug interactions noted at "serious or severe level".
spiro lactone - Lisinopril Please see attached information.
- Duplicate drug therapy identified. _____

Please call or complete below and fax back your decision about the above or any new medication orders.

Thank you.

Changes to medications? _____ YES _____ NO



Patient Name [REDACTED]
 Date of Birth [REDACTED]
 Control Number [REDACTED]
 (Please refer to this patient-specific Control Number when corresponding with Medco.)

- Requested Actions:**
- ✓ Review the enclosed therapeutic considerations.
 - ✓ Consider the information provided in the claims history.
 - ✓ Make any warranted changes in therapy.

Considerations for Your Review

I. Safety: Drug Age Consideration with CYCLOBENZAPRINE HCL.

Our claims record suggests that your older patient is receiving CYCLOBENZAPRINE HCL. Muscle relaxants may adversely affect mental alertness and physical coordination, and are generally poorly tolerated in older patients. Dizziness and drowsiness associated with these agents may contribute to an increased risk of falls. Please weigh the potential risks versus benefits of therapy for your patient.

Reference(s):

1. ASHP: Centrally-Acting Skeletal Muscle Relaxants, AHFS Drug Info 2007, Sec 12:20 04, GK McEvoy, Ed
2. Fick DM, Cooper JW, Wade WE, et al. Updating the Beers Criteria for Potentially Inappropriate Medication Use in Older Adults. Arch Intern Med. 2003;163:2716-2724.
3. APHA GERIATRIC DOSAGE HANDBOOK 13th ED, 2007 LEXI-COMP, CLEVELAND

Rx Profile

Consideration	Date of Service	Drug Description	Strength	Qty	Days Supply	Prescriber	Pharmacy Name Phone Number
1	04 13 10	CYCLOBENZAPRINE HCL	10 MG	30	30		PHCY #
	04 09 10	LISINAPRIL	20 MG	30	30		PHCY #
	03 23 10	COLESTIPOL HCL	1 G	60	30	PHYSICIAN #1	PHCY #
	03 18 10	IPRATROPIUM BROMIDE	21 MCG	30	29		PHCY #
	03 18 10	FLUTICASONE PROPIONATE	50 MCG	16	30		PHCY #
	03 09 10	HYDROCHLOROTHAZIDE	12.5 MG	90	90	PHYSICIAN #1	PHCY #
	03 08 10	LISINAPRIL	20 MG	30	30		PHCY #