

QUALITY IMPROVEMENT
IN A COMMUNITY
HEALTH CENTER- OR,

**ALLHEART- YOU'VE
CREATED A MONSTER!**



Jim Schultz, MD, MBA, FAAFP, DiMM

ALLHeart Symposium,

Huntington Beach, CA

March 2, 2017





7535



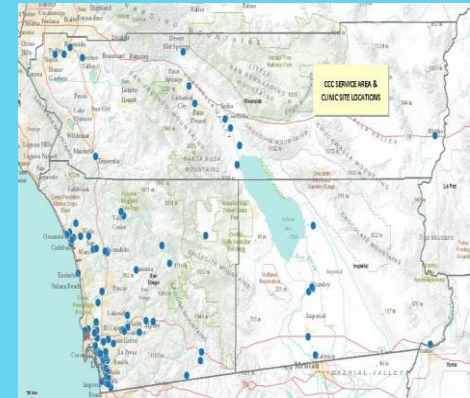
**Council of
Community Clinics**



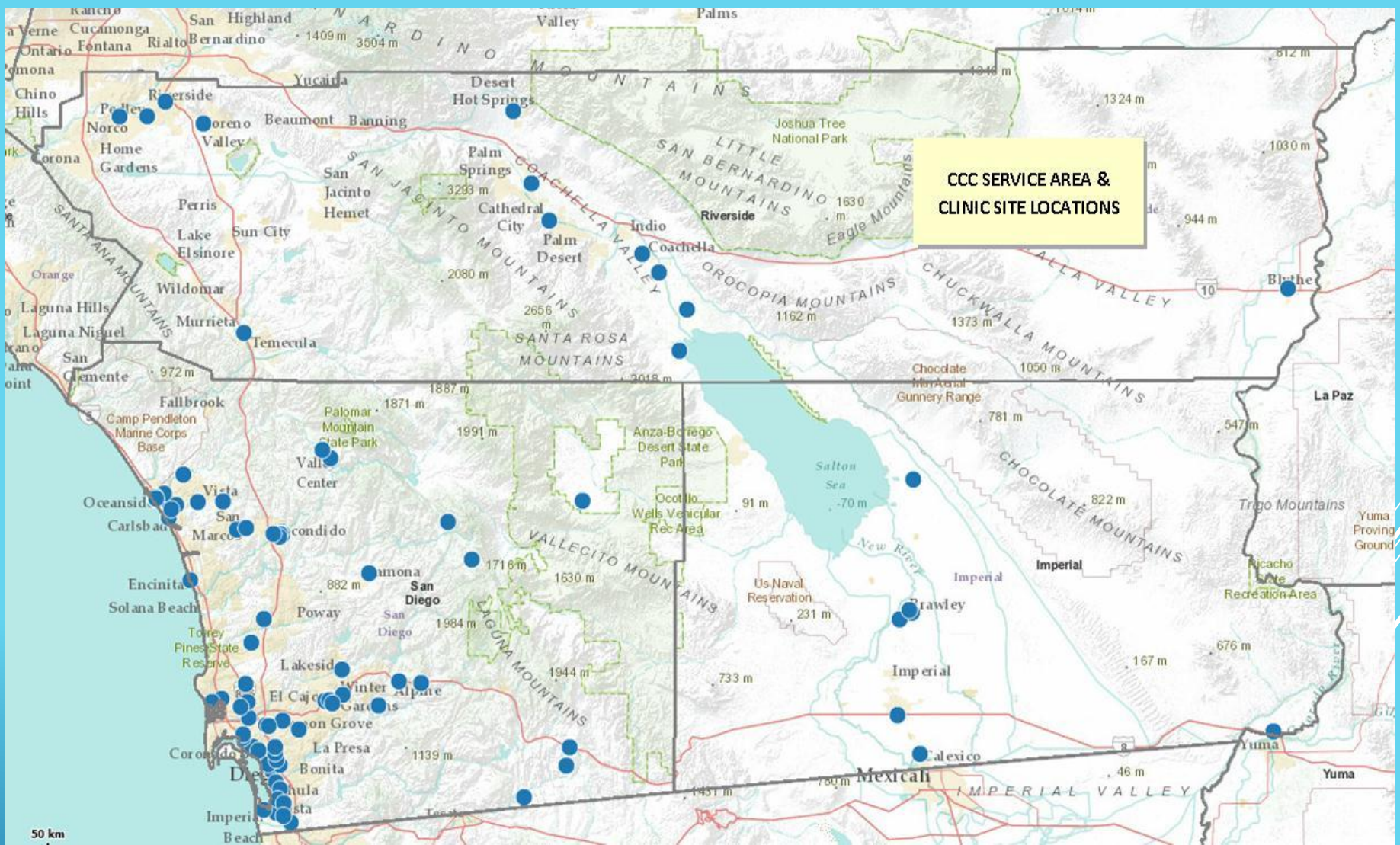
**35 Years of Leadership to
the Healthcare Community**



- ▶ 18 not-for-profit private 501 c3 organizations plus IHS
- ▶ >130 sites
- ▶ >900,000 patients served annually
- ▶ >2,000,000 encounters annually
- ▶ >650 Medical Staff
- ▶ No county hospital in SD
- ▶ No county (primary or specialty) clinics in SD
- ▶ Geographic managed care for Medicaid
- ▶ Border county, >180,000 undocumented immigrants with **no health insurance possibilities**



COMMUNITY HEALTH CENTERS IN SAN DIEGO COUNTY- THE 'SAFETY NET'



HCP SITES



2016 stats:

11 sites/2 counties

67,000 patients

21,000 patients < 18 y/o

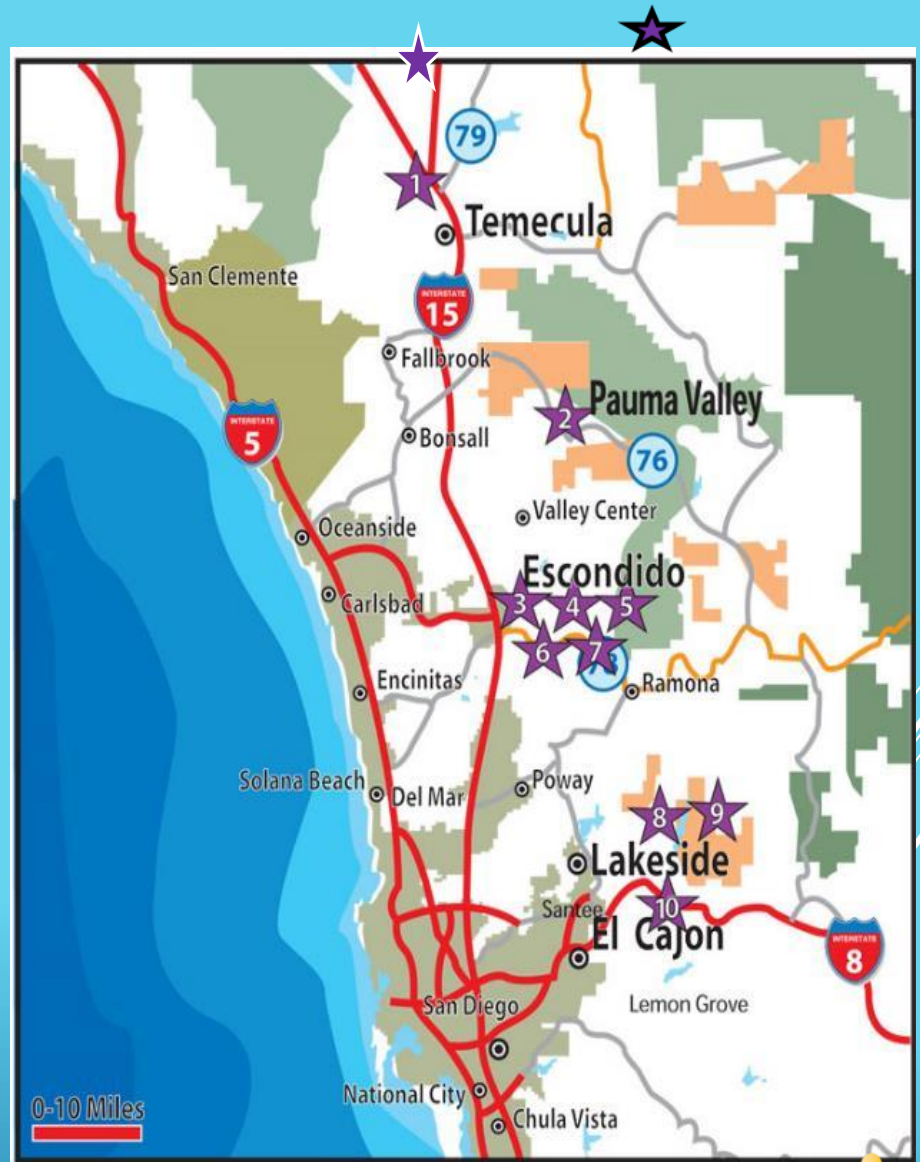
275,000 visits

20,000 BH only visits

>40 FTE medical providers

**10 primary care sites, all
PCMH-3 accredited except
new Menifee/Hemet
-All with embedded BH**

3 Dental sites



NEIGHBORHOOD HEALTHCARE



- ▶ PPS payment= \$x per visit with MD/NP/PA/PhD/DDS only
- ▶ Minimal P4P/incentive \$ (exception: CHG 2016)
- ▶ DHCS licensing requirement for facilities
- ▶ Federal grant Support
 - ▶ Must take all comers
 - ▶ Must charge a sliding fee but not be a barrier
- ▶ 98% <200% FPL
- ▶ MediCal HMO
- ▶ 30%→ 8-10% unfunded
- ▶ 50% non-English-speaking (Spanish, Chaldean/Arabic)

ENVIRONMENTAL FACTORS





QUALITY IMPROVEMENT LEGACY

Date	Problems	Date	Problems
	Hep C refer to lab 4/1A - patient Hiatal Hernia chronic Pancreatitis E pancreati Seizure Disorder - gentk + phenytoin (resolved.) Depression / Anxiety - Dr. Wilcox H/o Heavy Alcohol (Denies Alcoholism)		Rx → ↑ HCV RNA 06/23/08
	"Chronic Pain Syndrome" 2° pancreati		LDL Target: <100
7/04	creatinine 1.8 (1.3 9/17/07)	Date	Surgeries/Procedures/Hospitalization
8/04	lost mod QTc E Anaphylaxis!	7/10/04	Head CT: ⊖
10/07	H/o Domestic Violence & spouse self		multiple ABD surgeries
3/17/06	CA T		SAPEL/UPPEP = WNL
7/06	LIVER LESION / AFP ⊕ → repeat CT/MRI ⊖ NO MASS 9/07		IMMUNOFIXATION = ESSENTIALLY WNL
7/06	colonoscopy	1970'S	thyroidectomy (BSC/ok/ok)
10/31/06	CD T	12/04	s/p Cholecystectomy
	LTBI VNH 5/07 → 2 of completed	3-06	genitit exam WNL
1907	↑ alk phos	6-08	facial abscess (pac)
7-08	DM 2		

Smoking: 1/2 ppd Quit: _____
 EtOH: ⊖ Quit: 12-03
 Drugs: ⊖ Quit: _____
 Occupation: Dentist - SSI pending
 Religion: Baptist
 Primary Language: English (Ch. 2/29/11)
 S M W D G P Ab (Sond. (Raymond))

PREVENTIVE CARE	DATES	
H & P	10/04	
Pap/Pelvic	3/05	s/p hyster
Breast	3/05	1/04
Mammograms	1/06	
Rectal/Prostate		
FOB		
Chem Panel	9/06	
Lipids	10/04	
EKG	10/04	11/04
PPG	10/04	
DV Screen	10/04	

IMMUNIZATIONS	DATES	
Flu	REFUR 12/04	10/07 V. uses
Pneumonia	12/04	
Tetanus/TD	1998 TD '09	
Hepatitis A	10/07 5-08	
Hepatitis B	immune	
Measles/Rubella		

CHARTING 2010- PROBLEM LIST



Wt: 216# 90.1kg	Ht: _____	T 97.8 (o)	BP 112/75	HR 98	RR 20	LMP _____
CC: Prev Dx Stomach pain & ✓ on lab results - S. OK for MA						
HPI: 46 yo ♀ requests AF pain med, vomiting x 2 dys w/ + total gain (curative) Pt filled Vicodin 5/500 T-ii p 06:00 pm 4/10 on 10/24/04, out, needs, AF.						(Saw today) 4x3t = Rheu started from today SMA HCB
PFSH: records reviewed (Hep C genotype ⊕)		Part PH: ⊕ Thyroid problem		Part Soc Hx: _____		
ROS:	- PD saw cardio or urology like ago. started referred. - PD saw GI + needs colonoscopy r embolus 11/23/04 Had diffuse ⊕ CP yesterday, lateral 30 mins, elevation to Darm. Shwats ⊕ p/ps. set up C. A/G, rechecked P 10 minutes	PE:	Gen: wnl Skin: wnl Lymph: wnl Head: wnl Eyes: wnl ENTIM: wnl Neck: wnl Chest: wnl Resp: wnl Card: wnl Abd: wnl GU: wnl Pulses: wnl Rectal: wnl Back: wnl Ext: wnl Neuro: wnl Psych: wnl	Ausc, tachycardic, distant heart sounds [RN ONLY] JVD Elevated JVP ⊕ lower ribs ⊕ ⊕ EKG		
A/P: ⊕ CP episode yesterday stress test ⊕ by cardio soon. ⊕ Urinary incontinence (UTI), PD on uric acid (UA) needs more contact ⊕ depression & starting more ⊕ GAD H/O taper. ⊕ Hep C: GT 4b stable KONGA status PD day 30 ⊕ BU/abnormal colauscopy/EKG ⊕ vicodin 5/500 T-ii p 06:00 pm 4/10 on 10/24/04, out, needs, AF. Zartan 140mg : no B12 pm. And Reforx 20 ATC Re TSH/Thyroid panel in 3-4 weeks						
<input type="checkbox"/> BPO if no better in _____ <input checked="" type="checkbox"/> Recheck / f/u in _____ Pt Ed Material: _____ Health Maint Recd: _____ Lab/XRAY/Refs ordered: _____ Ed material CP reviewed.						

2010 Progress Note



Measure Name	4 STAR Rating Benchmark	5 STAR Rating Benchmark	Current Score	NHC Current Actual Score	Your Current STAR Rating	Members Needed to Reach 4 STAR Goal	Members Needed to Reach 5 STAR Goal	Total Pts In Measure	Total Missing Hits	Compliant 2016
Nephropathy	96.00%	98.00%	98.88%	98.88%	5	0	0	89	1	0
Eye Exam	73.00%	81.00%	88.76%	89.89%	5	0	0	89	9	0
A1c Testing	95.62%	97.08%	98.88%	98.88%	5	0	0	89	1	0
A1c > 9%	24.00%	16.00%	19.10%	16.85%	4	0	3	89	17	2
Controlling High BP	64.00%	75.00%	0.00%	72.66%	3	89	105	139	137	99

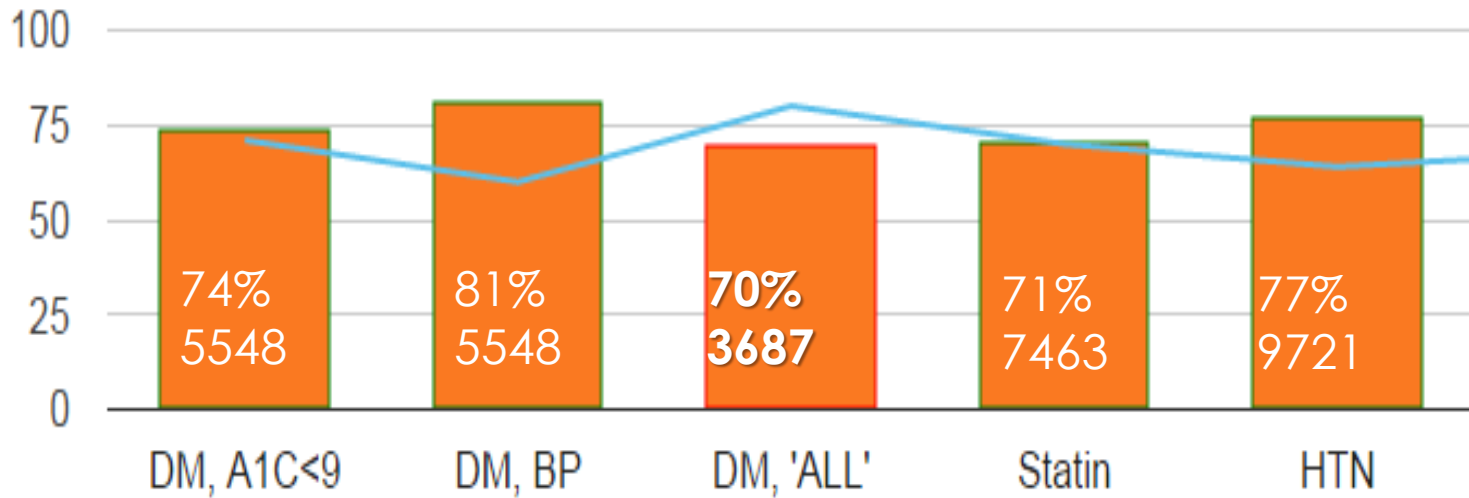
Medi-Cal Measures: Goal – 11 measures at MPL benchmark and 5 measures at HPL benchmarks:

Measure Name	MPL Benchmark	HPL Benchmark	Current Score	NHC Current Actual Score	Your Current Rating	Members Needed to Reach MPL	Members Needed to Reach HPL	Total Patients in Measure	Total Missing Hits	Compliant 2016
A1c > 9% *	52.31%	29.23%	25.38%	23.69%	5	0	0	1123	285	34
Diuretics *	85.18%	92.28%	95.16%	95.52%	5	0	0	558	25	0
Nephropathy *	88.32%	93.56%	95.81%	96.26%	5	0	0	1123	46	0
A1c < 8% *	39.80%	58.39%	63.05%	64.65%	5	0	0	1123	413	29
ACE/ARB *	85.63%	92.13%	95.72%	96.04%	5	0	0	959	38	0
A1c Testing *	82.98%	92.88%	94.66%	94.48%	5	0	0	1123	62	0
Acute Bronchitis	22.12%	38.91%	53.66%	54.88%	5	0	0	82	37	0
Physical Activity *	44.16%	71.53%	72.90%	73.50%	5	0	0	5163	1368	0
Well Child Visits *	64.72%	82.97%	82.23%	83.00%	4	0	15	1941	330	0
Controlling High BP *	46.87%	70.69%	0.00%	72.72%	3	550	830	1173	1155	835
BP Control < 140/90 *	52.26%	75.73%	73.55%	75.60%	4	0	25	1123	292	18
Childhood Imms	64.30%	79.81%	77.88%	78.76%	4	0	7	339	72	0
Eye Exam	44.53%	68.11%	61.18%	62.42%	4	0	78	1123	422	0
Nutrition Counseling *	51.98%	79.56%	76.14%	76.72%	4	0	175	5163	1202	0
Cervical Cancer *	48.18%	69.95%	58.62%	60.01%	4	0	488	4299	1719	0
Postpartum	55.47%	73.61%	61.21%	61.92%	4	0	35	281	107	0
CAP 25m-6y *	84.83%	93.34%	89.16%	89.77%	4	0	97	2297	235	0
Prenatal Care	74.21%	91.00%	83.99%	85.05%	4	0	20	281	42	0
CAP 12m-24m *	93.14%	97.85%	95.41%	96.39%	4	0	8	305	11	0
CAP 7y-11y *	87.91%	96.10%	89.58%	89.81%	4	0	140	2140	218	0
Low Back Pain	69.88%	81.42%	65.36%	67.04%	3	9	29	179	59	0
CAP 12y-19y *	85.84%	94.69%	83.36%	83.90%	3	65	295	2596	420	0

HEDIS DASHBOARD



All Measures (6/22/2016)



QUALITY DASHBOARD



- ▶ **Data:**
 - ▶ OWN IT!
 - ▶ Evidence-based clinical updates **driven by Medical Staff**
 - ▶ right data (valid, relevant, actionable) to right people (those that can do something about it) at the right time in the right format
- ▶ **Practicing to license**
 - ▶ Implication: hiring additional non-provider staff
 - ▶ **TEAMS!**
- ▶ **Reports:**
 - ▶ To individuals
 - ▶ To QM Committees (2- Operational, Clinical)
 - ▶ Co-opetition:
 - ▶ Provider scorecards, unblinded
 - ▶ Site dashboards, unblinded
- ▶ Provide improvement **tools**
- ▶ Data capture- structured data/mapping to reports
- ▶ **Registries**
- ▶ Proactive Office Encounter/ **Huddles**
- ▶ **Don't Let the Doctors Do It- Pop Health Department**



NEIGHBORHOOD HEALTHCARE QUALITY IMPROVEMENT PRINCIPLES





QM Committee Discussions/Ratification
Laminated Clinical Guidelines
Thought leader Summaries
Medical Staff Meetings

MEDICAL STAFF EDUCATION-
THE STARTING POINT





Workflow Changes

Procedure Generation

MA Training

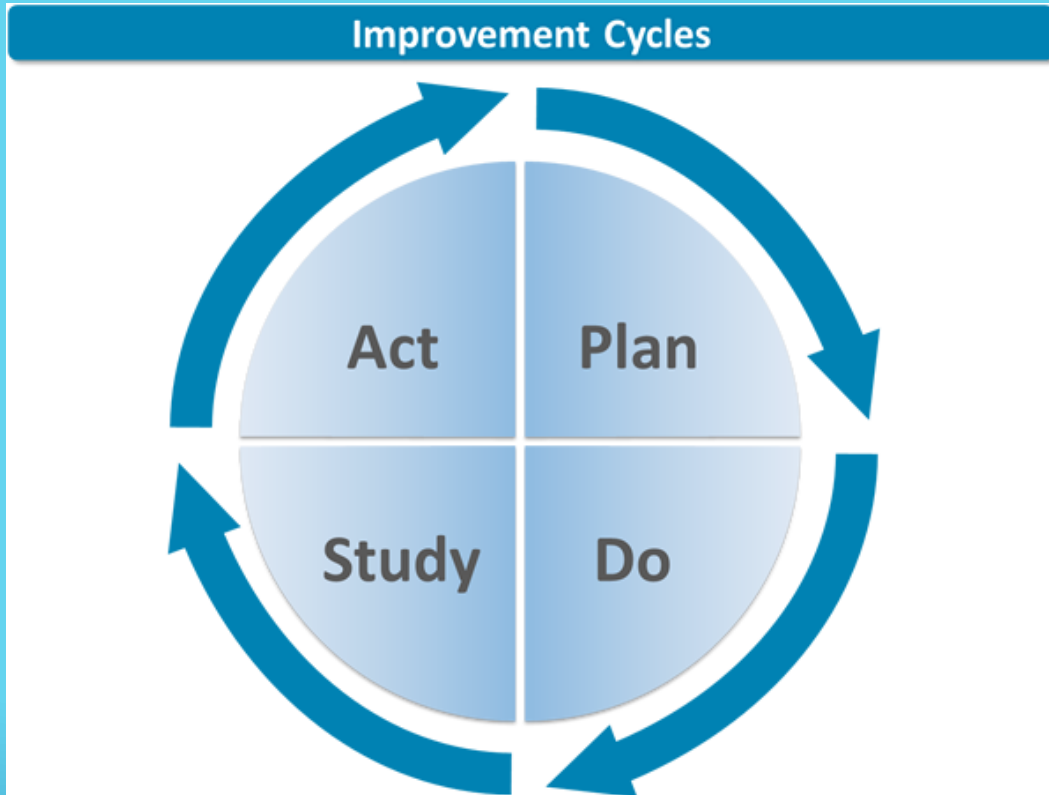
Clinical Team Leaders

Template changes/Data Fields

Site Meetings- Med Staff, RNs, MAs

Feedback/Reports

THE RIGHT PEOPLE-
CLINICAL QM COMMITTEE



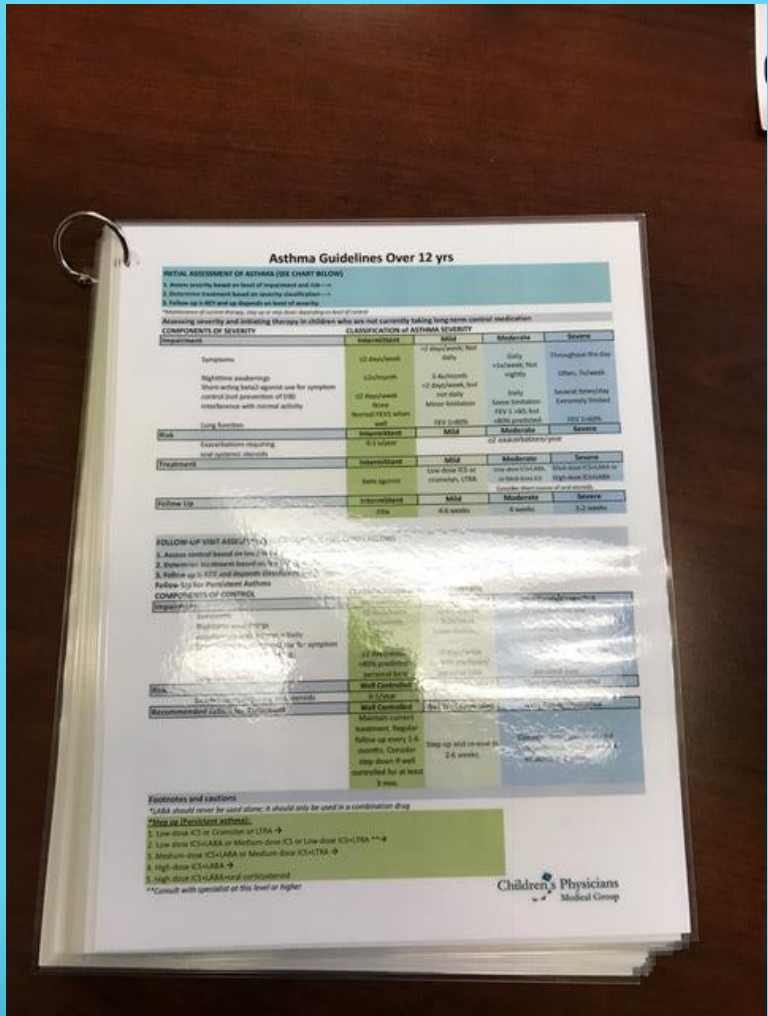
TO THE RIGHT PEOPLE (WITH
THE RIGHT TOOLS)



- ▶ Validated before consumption
- ▶ The right data
- ▶ To the right people
- ▶ At the right time
- ▶ In the right format
- ▶ Actionable

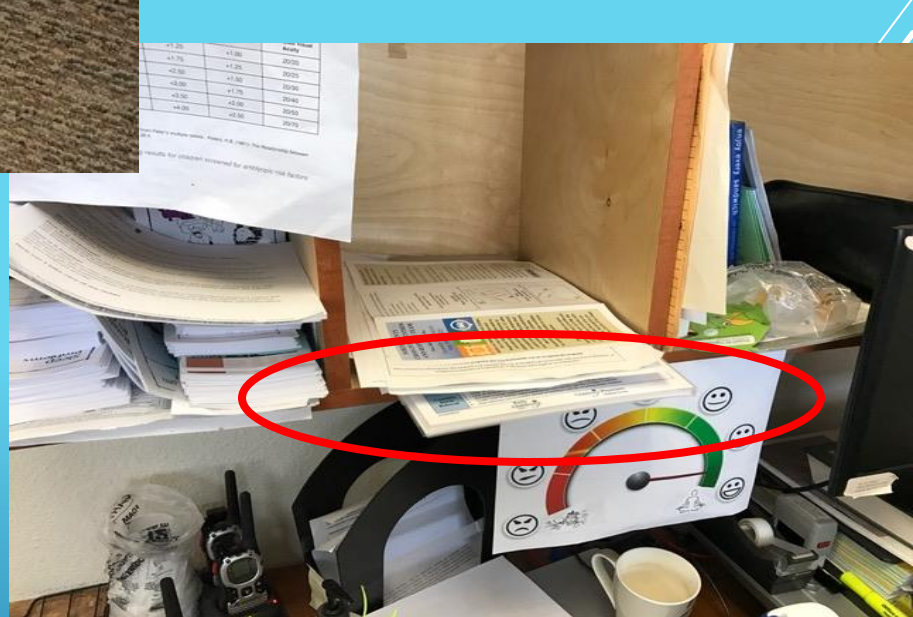
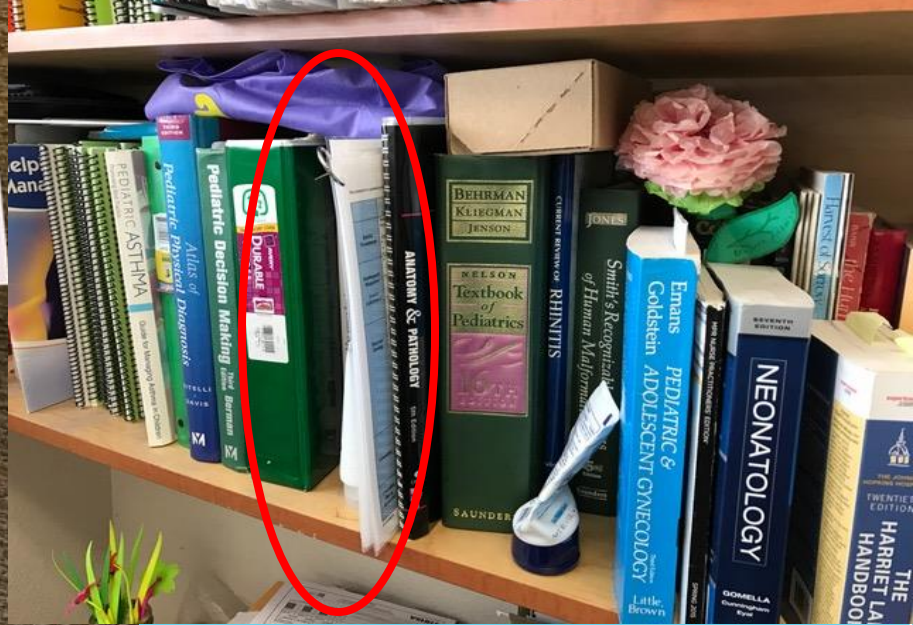
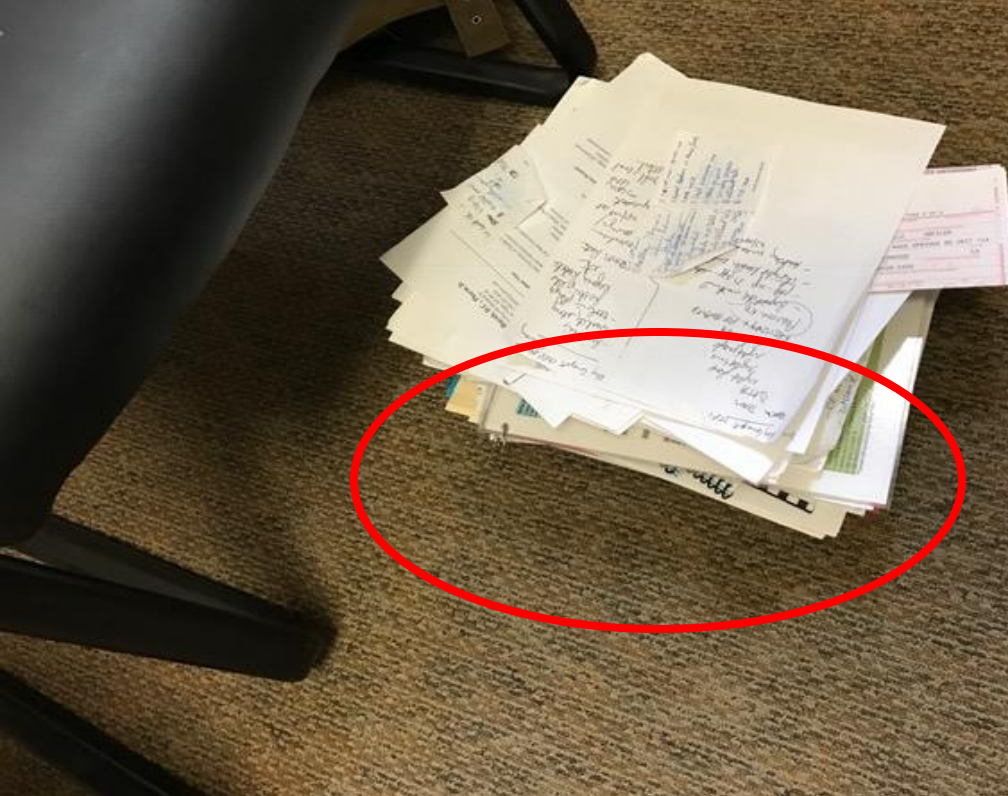
NHCARE DATA CHARACTERISTICS





CLINICAL PRACTICE GUIDELINES- THE RIGHT INFORMATION





CLINICAL PRACTICE
GUIDELINES- WHERE ARE THEY?



- ▶ Development of technology solutions that **embed** **guidelines** within current EHRs

IN THE RIGHT PLACE, AT THE
RIGHT TIME



AT THE 'RIGHT' TIME



Alerts

Alerts Stats Pend Inre

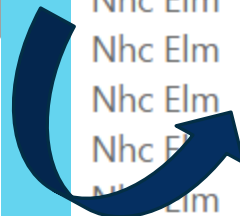
SMITH, JOHN (age:70)
 CVD, HTN, Cvd risk: NA (Clinical ASCVD)

BP: 1/6/17 173/112
 A1C: none
 LDL: 11/20/15 57
 Statin: Rec On
 Asa: Rec On
 Cr: 1.25 11/29/16
 K: 4 11/29/16
 BMI z: 1/6/17
 Nut/Act z: 1/6/17
 CRC: 1/16/17 colonoscopy
 PHQ2/9: 11/29/16 none
 Alcohol: 11/29/16
 Drug: 1/3/17
 Imms due: Zoster
 Tobacco: Assessed

Updated: seconds ago UI:7 Rx

Facility	PCP	ref_date	Referring Provider
Nhc Elm	Chow,Byron	4/20/2016	Chow,Byron
Nhc Elm	Chow,Byron	7/26/2016	Chow,Byron
Nhc Elm	Chow,Byron	8/28/2015	Chow,Byron
Nhc Elm	Chow,Byron	1/8/2016	Chow,Byron
Nhc Elm	Chow,Byron	2/1/2016	Chow,Byron
Nhc Elm	Chow,Byron	6/15/2016	Chow,Byron

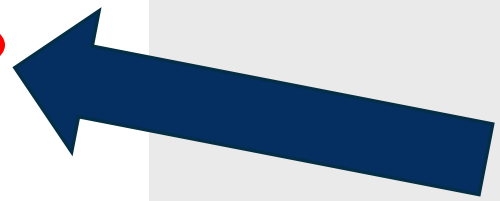
Wt(kg) 25.04 2/15/17
 BMI% z: 10/28/16
 Nut/Act z: 2/15/17
 Food Insec: 10/28/16
 Imms due: UTD
 CPE: 2/15/17



AT THE 'RIGHT' TIME-
 REAL TIME POINT OF CARE
 ACTIONABLE AND PT-SPECIFIC DATA-
 SMART ALERTS



- Registry
- Hedis Grid
- Measures**
- Disparities
- Time
- Outreach
- Z-Scores
- InreachMisses
- ▶ Provider Dashboards
- FIT Incentive
- FIT Actions
- Breastfeeding
- Retinal
- TCPI
- HPV
- Diabetes
- CMMI



ACNE REF

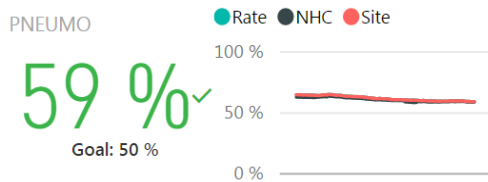
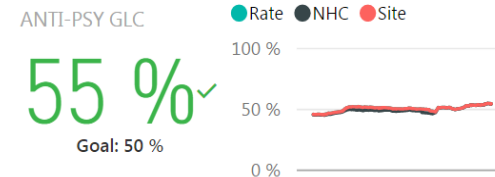
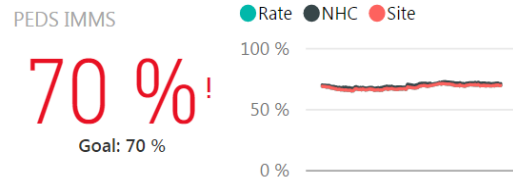
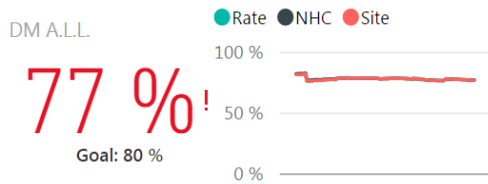
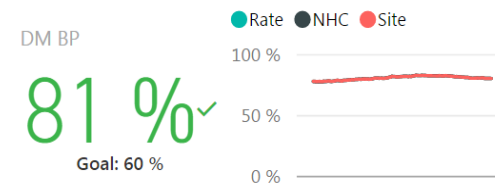
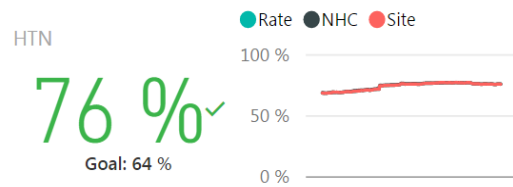
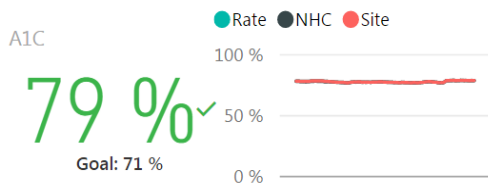
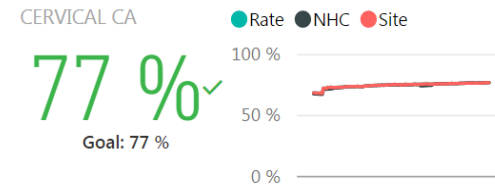
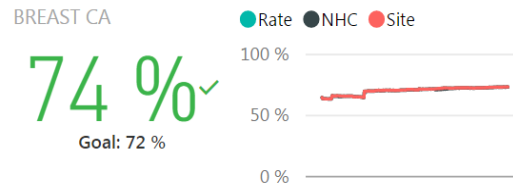
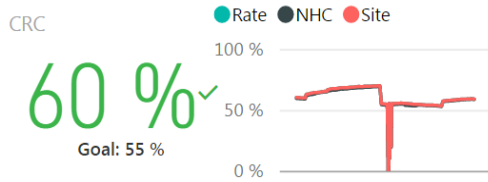
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CURRENT PERFORMANCE-
COMPREHENSIVE ACCURATE
REAL TIME DATA TO ANYONE IN
3 CLICKS



CLINICAL DASHBOARD

Last Refresh
2/20/2017



NOTES:
- To get NHC org average, unselect
- Refreshed weekly

QUALITY DASHBOARD



Dashboards

Specialty: Provider: Measures: Hide unimplemented measures

Measure	2/2016	3/2016	4/2016	5/2016	6/2016	7/2016	8/2016	9/2016	10/2016	11/2016	12/2016	1/2017	YTD	Target	Peer Avg
Productivity	3.12	2.05	2.73	3.18	2.74	2.97	2.75	2.38	2.24	3.42			2.76	2.50	2.29
Notes locked <48h		100%	87%	72%	100%	71%		100%	71%	76%	69%	100%	84%	85%	85%
Sent Rxs	100%	100%	98%	96%	98%	95%		93%	98%	94%	100%	100%	98%	95%	94%
Depression Screening	92%	96%	93%	93%	95%	91%		98%	95%	92%	94%	90%	94%	92%	92%
CRC screening	56%	64%	59%	62%	68%	65%	63%	62%	60%	60%	65%	68%	63%	56%	57%
Breast CA screening	74%	73%	74%	70%	71%	78%	78%	68%	66%	66%	64%	62%	70%	72%	71%
Cervical CA screening	75%	71%	74%	73%	74%	73%	81%	82%	84%	81%	79%	74%	77%	77%	75%
DM: A1C < 9	79%	69%	68%	67%	56%	75%	73%	77%	75%	76%	78%	79%	73%	71%	75%
DM: A1C < 8	67%	69%	63%	68%	65%	62%	70%	59%	65%	61%	60%	58%	67%	66%	66%
HTN at goal	74%	83%	81%	78%	85%	90%	85%	87%		88%	81%	84%	83%	64%	77%
Anti-psy: glucose	0%	0%	43%	50%	50%	50%	60%	75%	75%	57%	63%	43%	47%	50%	64%
Alcohol Screening	95%	96%	98%	95%	98%	94%		96%	97%	94%	97%	94%	96%	93%	93%
DAST Screening	0%	0%	0%	0%	0%	0%		27%	94%	92%	97%	94%	37%	34%	35%

QUALITY DASHBOARD- INDIVIDUAL MED STAFF



ZSCORES

Overall Ranking by Z-Scores (deviation from mean)

Ranking	Provider/Clinic	Overall	a1c (Goal 71%)	htn (Goal 64%)	crc (Goal 56%)	mam (Goal 72%)
1	Nhd Grand	4.18	0.46 (76.1%)	0.71 (80.7%)	1.55 (69.9%)	1.1 (73.8%)
2	Nhd Elm	4.05	0.24 (74.5%)	0.47 (77.9%)	1.31 (67.6%)	1.27 (75.4%)
3	Nhd Valley Parkway	3.12	-0.08 (69.5%)	0.39 (76.9%)	0.69 (61.8%)	1.12 (74.1%)
4	Nhd El Cajon	2.26	0.72 (82.2%)	0.23 (75.1%)	0.71 (62.0%)	0.83 (71.4%)
5	Nhd Date St BH	2.13	1.68 (97.6%)	-0.07 (71.6%)	0.64 (61.4%)	1.22 (74.9%)
6	Nhd Menifee	1.25	0.37 (76.6%)	1.21 (86.4%)	-0.9 (46.8%)	-0.11 (63.2%)
7	Nhd Lakeside	1.01	0.26 (74.9%)	0.87 (79.0%)	-0.33 (63.2%)	0.19 (65.7%)
8	Nhd Temecula	0.58	0.24 (74.6%)	0.92 (78.5%)	-0.74 (46.4%)	-0.22 (62.2%)
9	Nhd Hemet	0	-0.19 (67.7%)	-0.1 (71.3%)	-0.6 (49.7%)	-0.44 (60.2%)
10	Nhd Palms	-4.17	-0.82 (63.4%)	-0.76 (65.6%)	-0.83 (47.5%)	-1.23 (53.2%)

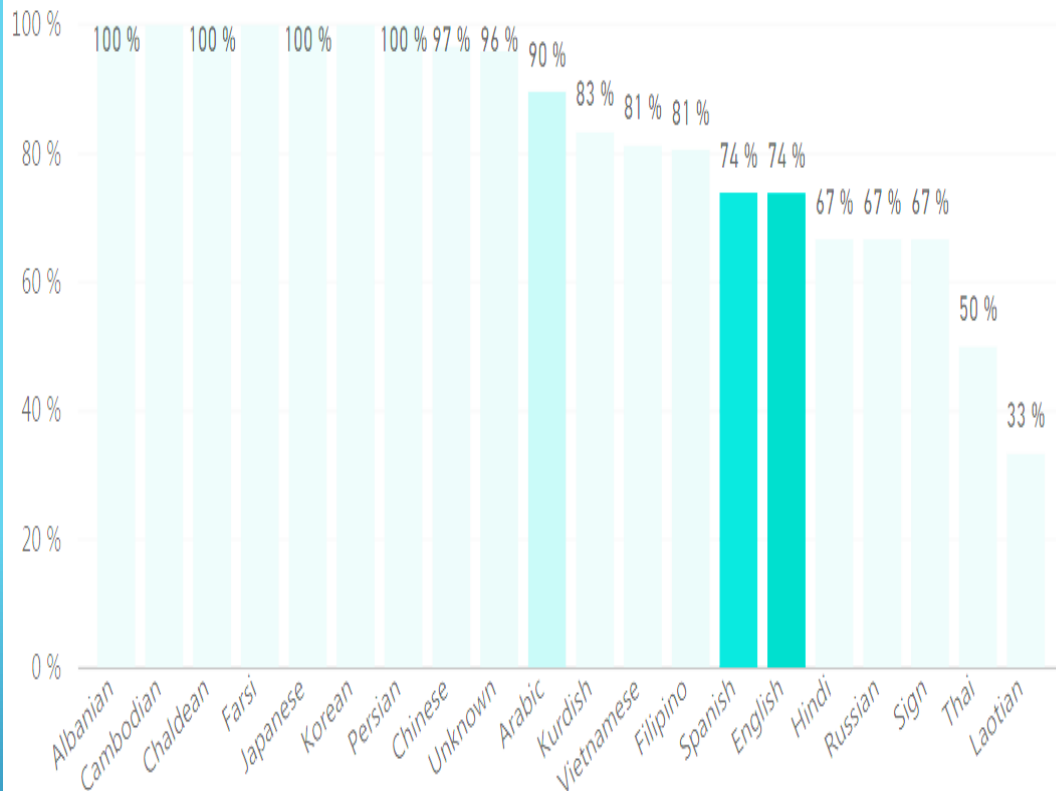
1	Ana J Popoca-Logue, PMHNP	3.45	1.28 (100.0%)	0.97 (96.3%)	0.32 (59.4%)	0.66 (82.8%)	0.22 (69.2%)
2	Elizabeth T. Kerlick, PA	3.42	1.28 (100.0%)	1.15 (100.0%)	1.77 (100.0%)	1.27 (100.0%)	-2.06 (0.0%)
3	Cristina Shoukry, NP	3	0.31 (76.6%)	0.49 (86.4%)	0.92 (76.1%)	0.68 (83.4%)	0.6 (80.9%)
4	Ruth Bravo, NP	2.84	0.25 (75.0%)	0.26 (81.5%)	0.81 (73.1%)	0.77 (86.1%)	0.75 (85.3%)
5	Dorothy Liu, MD	2.66	0.89 (90.6%)	0.23 (80.9%)	0.61 (67.6%)	0.39 (75.3%)	0.54 (79.0%)
6	Rakesh R. Patel, MD	2.5	0.52 (81.5%)	0.36 (83.6%)	0.77 (72.1%)	0.54 (79.5%)	0.31 (72.0%)
7	Karin R. Schiff, MD	2.31	0.46 (80.2%)	0.25 (81.3%)	0.83 (73.7%)	0.33 (73.6%)	0.44 (76.0%)
8	DEAN TASHER, MD	2.3	0.72 (86.4%)	0.25 (81.3%)	0.89 (75.5%)	0.28 (72.2%)	0.16 (67.4%)
9	Margaret K Chen, MD	2.27	0.4 (78.8%)	0.34 (83.1%)	0.61 (67.6%)	0.42 (76.3%)	0.5 (77.9%)
10	Xochitl C Flores, PA	2.06	0.78 (87.8%)	0.14 (78.9%)	0.19 (56.0%)	0.33 (73.6%)	0.63 (81.7%)
11	Shannon M Bagnasco, FNP	1.96	0.44 (79.7%)	0.27 (81.8%)	0.5 (64.6%)	0.29 (72.5%)	0.45 (76.3%)
12	Jean Miller, FNP	1.95	0.03 (69.7%)	0.24 (81.1%)	0.61 (67.5%)	0.47 (77.6%)	0.6 (80.9%)
13	Lindsay L Summers, PA	1.84	0.32 (76.7%)	0.24 (81.0%)	0.43 (62.5%)	0.35 (74.1%)	0.51 (78.0%)
14	James H. Schultz, MD	1.82	0.39 (78.4%)	0.41 (84.6%)	0.45 (63.2%)	0.01 (64.7%)	0.55 (79.3%)
15	Kulin Tantoc, MD	1.76	0.14 (72.4%)	0.01 (76.4%)	0.62 (67.9%)	0.45 (77.0%)	0.54 (79.0%)
16	Paige A Thiermann, MD	1.72	0.67 (85.2%)	-0.15 (73.0%)	0.49 (64.3%)	0.4 (75.7%)	0.31 (71.9%)
17	Caroline Negron, NP	1.71	-0.01 (68.7%)	0.25 (81.3%)	0.48 (64.0%)	0.46 (77.2%)	0.54 (78.9%)
18	Stephanie N Chow, PA	1.67	0.21	-0.04	0.68	0.41	0.41

QUALITY DASHBOARD-FRIENDLY COMPETITION

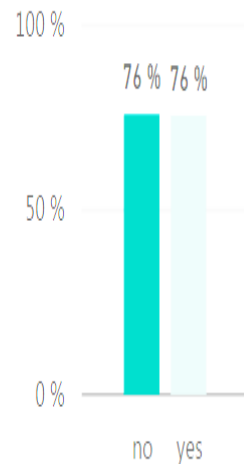


DM A1C <9 & W/I 1y

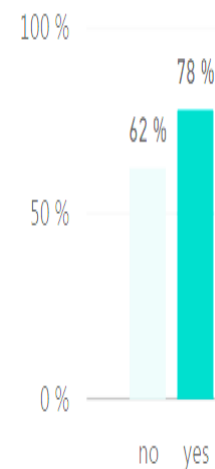
LANGUAGE



SMI



INSURED



language

- (Blank)
- Albanian
- Arabic
- Cambodian
- Chaldean
- Chinese
- English
- Farsi
- Filipino
- Hindi
- Japanese
- Korean
- Kurdish
- Laotian
- Persian
- Russian
- Sign

smi

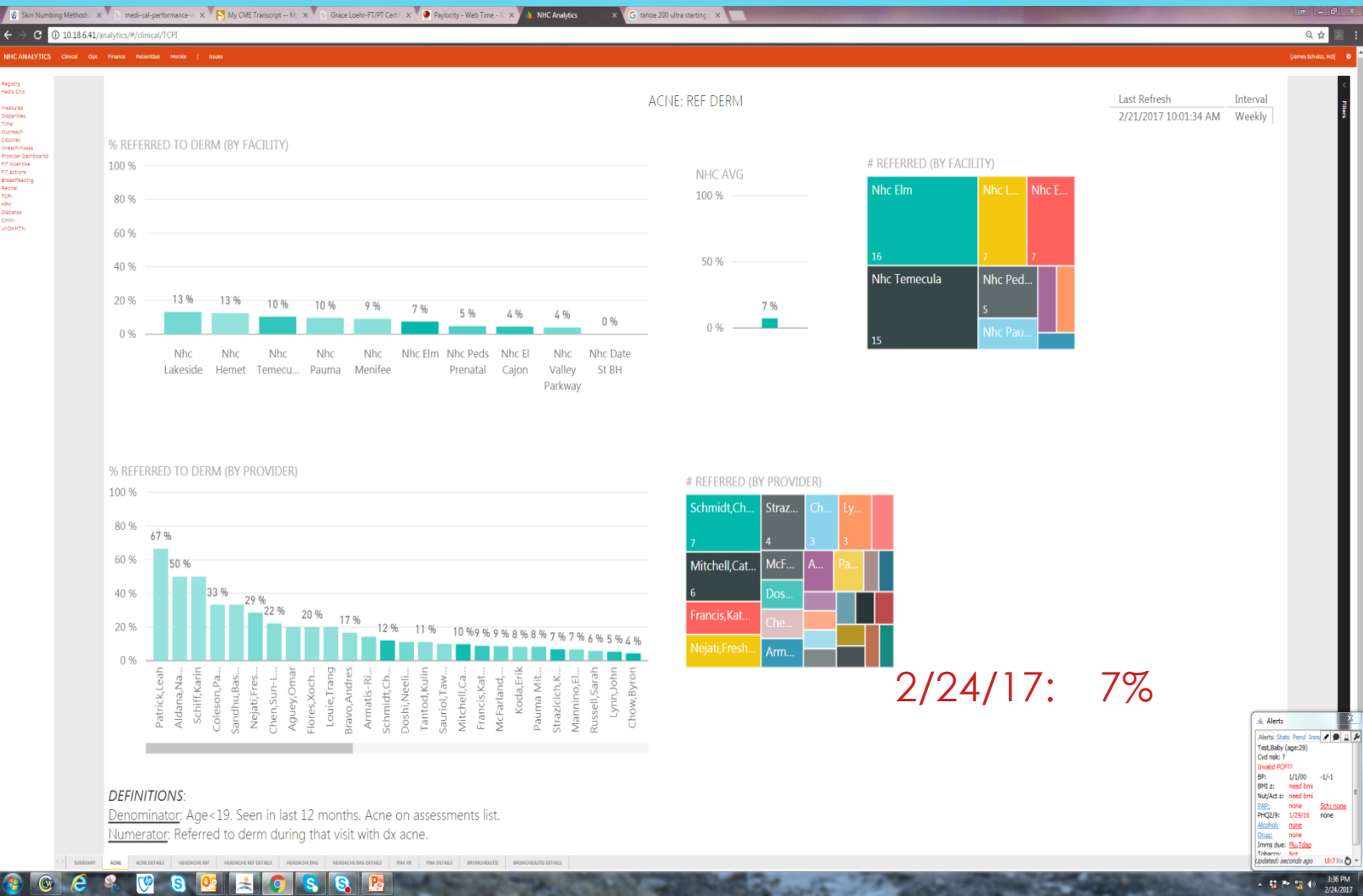
- (Blank)
- no
- yes

insured

- (Blank)
- no
- yes



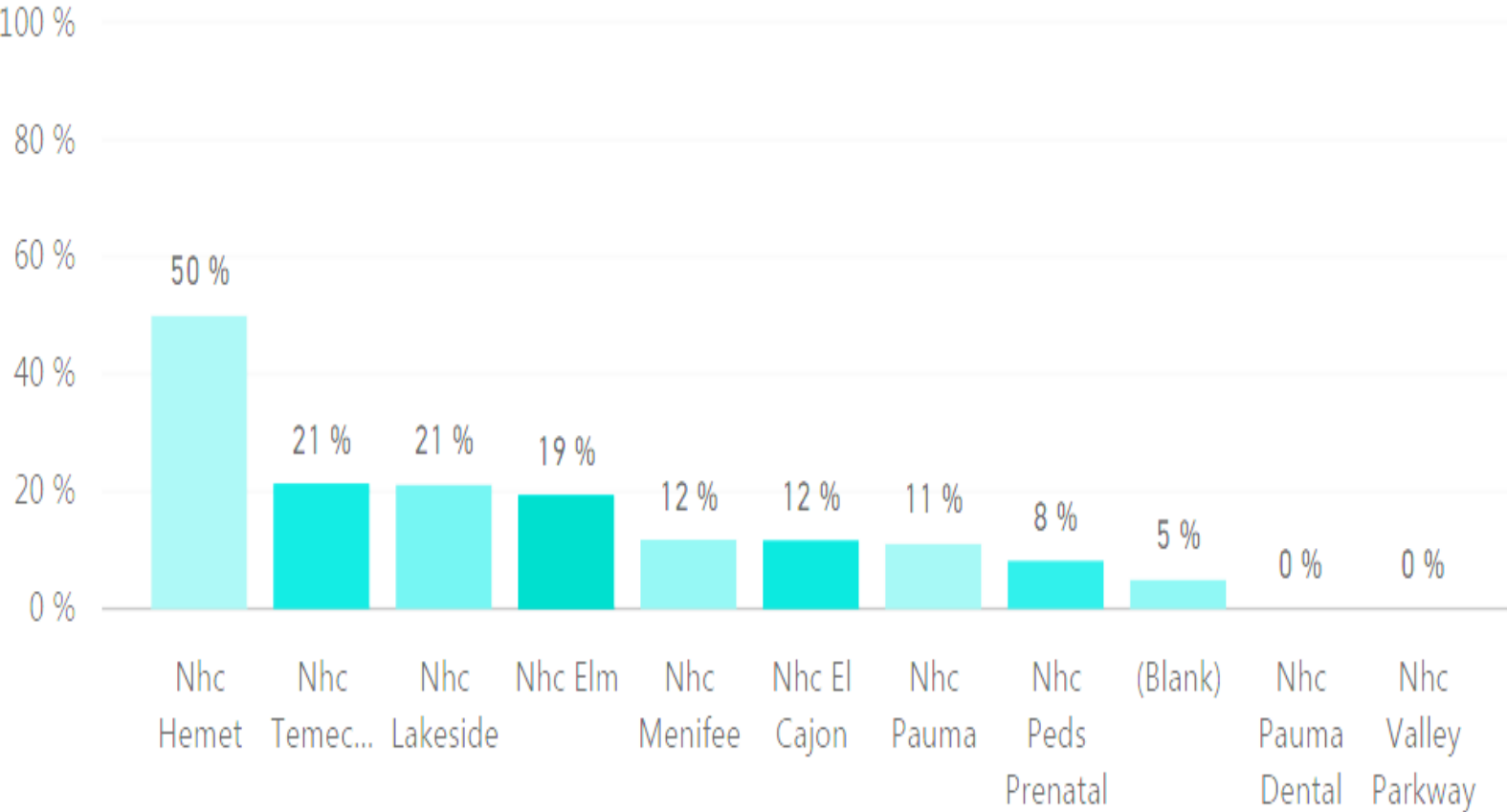
QUALITY DASHBOARD- DISPARITIES (DM EXAMPLE)



THE 'RIGHT' DATA- ACNE REFERRALS TO DERMATOLOGY



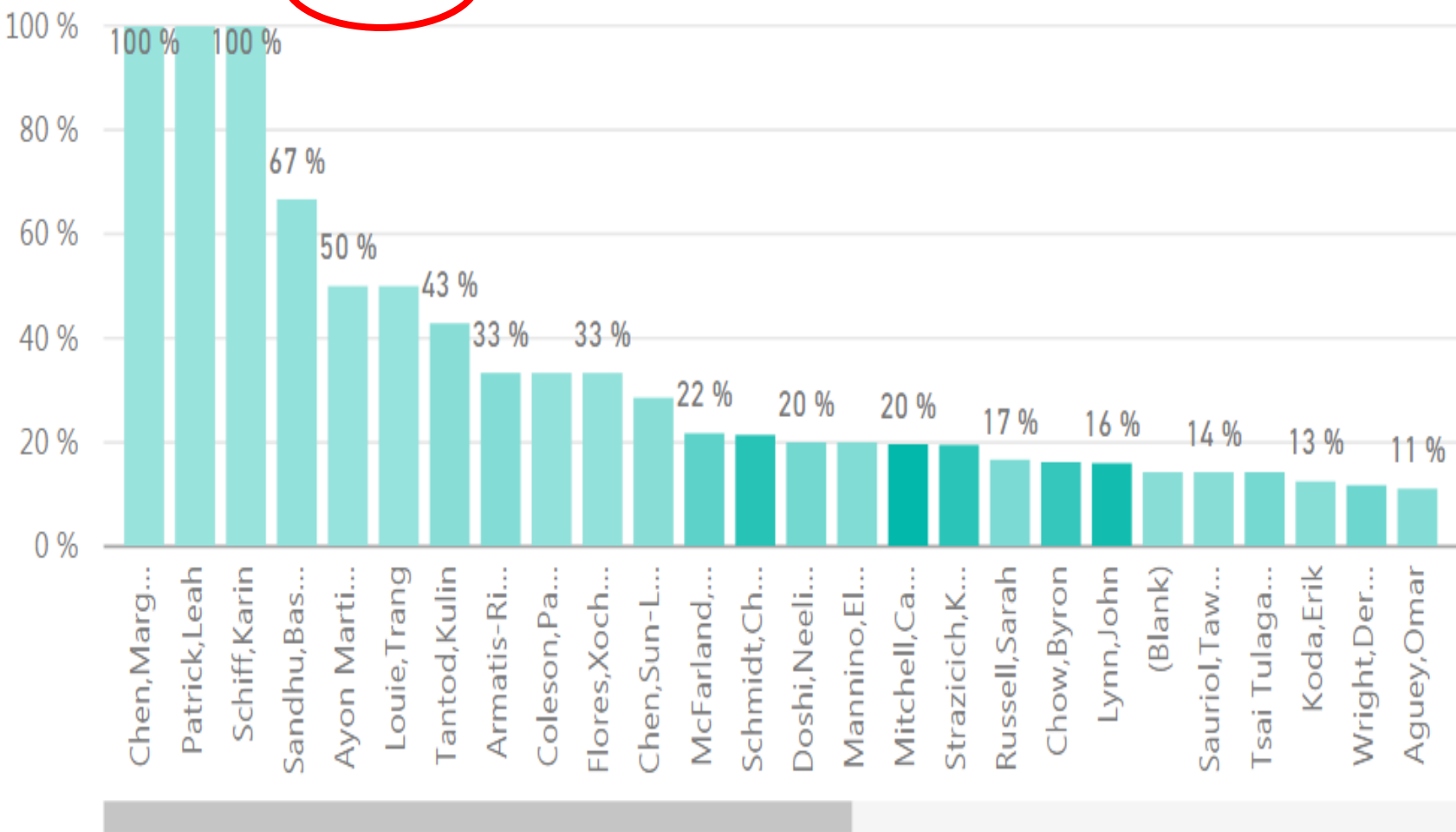
% REFERRED TO DERM (BY FACILITY)



THE 'RIGHT' DATA- ACNE
REFERRALS TO DERMATOLOGY



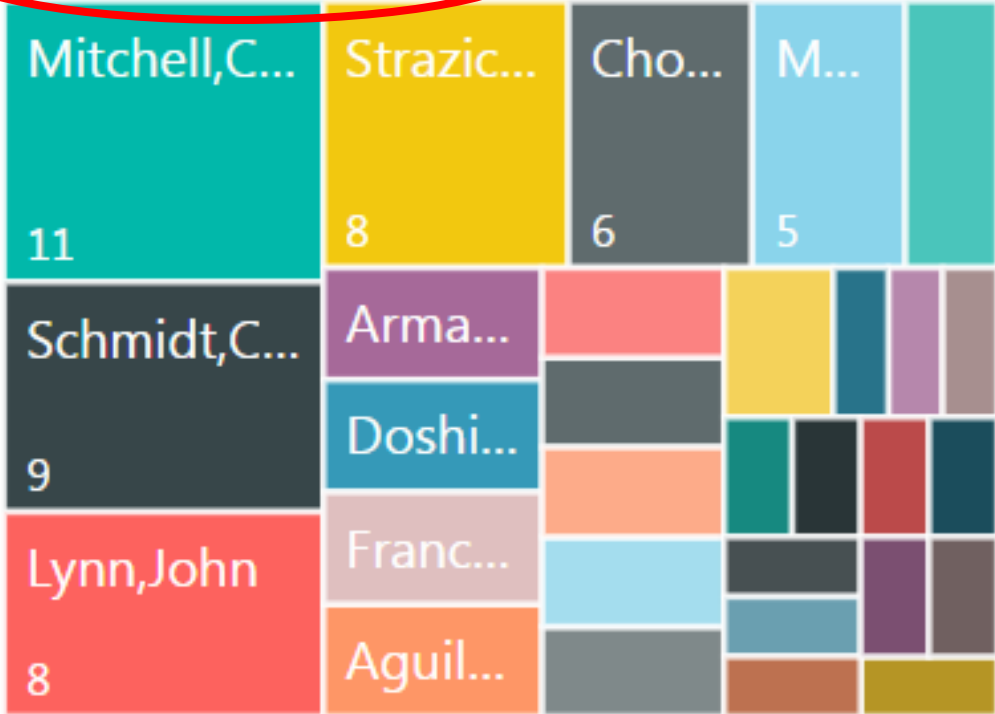
% REFERRED TO DERM (BY PCP)



THE 'RIGHT' DATA- ACNE
REFERRALS TO DERMATOLOGY

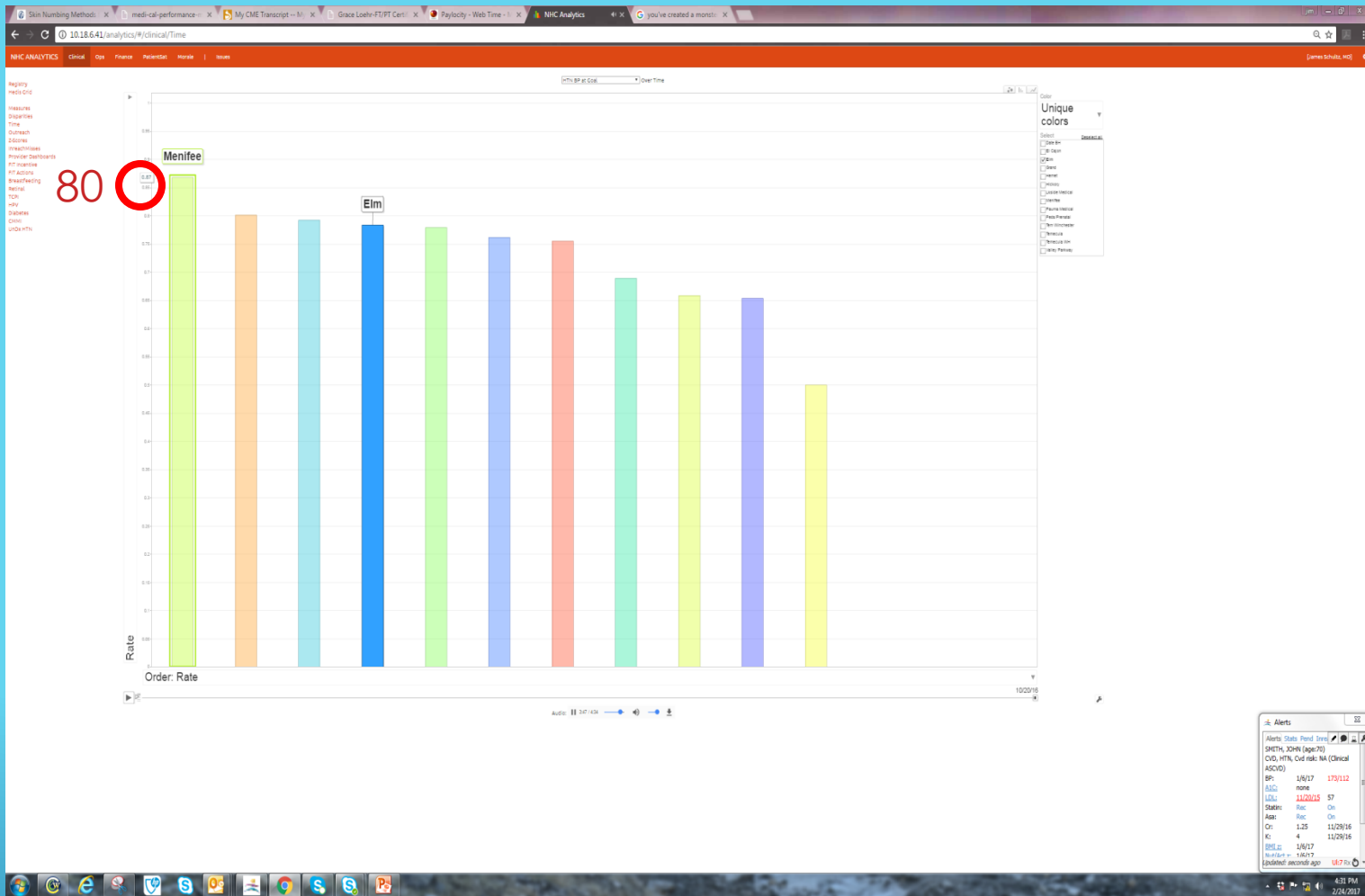


REFERRED (BY PCP)



THE 'RIGHT' DATA- ACNE REFERRALS TO DERMATOLOGY





THE 'RIGHT' DATA-TRENDING (HTN CONTROL)



Facility	PCP	ref_date	Referring Provider
Nhc Elm	Mitchell,Cathy		
Nhc Valley Parkway	Miller,Jean		
Nhc Elm	Mitchell,Cathy		
Nhc El Cajon	Lynn,John		
	x-Wade Kempiak,Kristen		
Nhc Elm	Mitchell,Cathy		
Nhc El Cajon	Lynn,John		
Nhc Lakeside	McFarland,Nathan		
Nhc Elm	Chow,Byron		
Nhc Lakeside	McFarland,Nathan		
Nhc Peds Prenatal	Sanchez,Selmira		
Nhc Elm	Strazicich,Karla		
Nhc Peds Prenatal	Aguilar,Edita		
Nhc Peds Prenatal	Sanchez,Selmira		
Nhc El Cajon	Lynn,John		
Nhc Peds Prenatal	Doshi,Neelima	10	

Filter by

Referring Provider	PCP
<input type="text"/>	<input type="text"/>
<input type="checkbox"/> (Blank)	<input type="checkbox"/> (Blank)
<input type="checkbox"/> Aguey,Omar	<input type="checkbox"/> Aguey,Omar
<input type="checkbox"/> Aguilar,Edita	<input type="checkbox"/> Aguilar,Edita
<input type="checkbox"/> Aldana,Nancy	<input type="checkbox"/> Armatis-Rivera,Lind..
<input type="checkbox"/> Armatis-Rivera,Linds...	<input type="checkbox"/> Ayon Martinez,Carl..
<input type="checkbox"/> Ayon Martinez,Carlos	<input type="checkbox"/> BH,Only
<input type="checkbox"/> Bravo,Andres	<input type="checkbox"/> Bishop,Melissa
<input type="checkbox"/> Chen,Sun-Ling	<input type="checkbox"/> Chen,Margaret
<input type="checkbox"/> Chow,Byron	<input type="checkbox"/> Chen,Sun-Ling
<input type="checkbox"/> Coleson,Pamela	<input type="checkbox"/> Chow,Byron
<input type="checkbox"/> Doshi,Neelima	<input type="checkbox"/> Coleson,Pamela
<input type="checkbox"/> Flores Xochitl	<input type="checkbox"/> Daley,Semise

(account # deleted)

TO THE 'RIGHT' PEOPLE- REGISTRY



Search: Due for Breast Cancer Screening

Last appt Next appt	Hits	Our Data	Actions	Note
Last appt: Jan 18, 2017 Next appt:	Colon Cancer, Breast Cancer, Pre-diabetes, FIT pending	Mam: none	<p>Called : (Colon Cancer,Breast Cancer) <Maricruz Garcia 02/01/2017 8:47AM></p> <p>Mailed : (Colon Cancer) <Maricruz Garcia 10/25/2016 11:24AM></p> <p>Mailed : (Colon Cancer)</p>	Note: TE created <Manzo,Alexandra 2/1/2017 8:48AM>
Last appt: Feb 13, 2017 Next appt: Feb 20, 2017	Breast Cancer, FIT pending	Mam: none		Note: none
Last appt: Feb 15, 2017 Next appt: Feb 22, 2017	Breast Cancer, Cervical Cancer, A1C < 8	Mam: 7/25/2013	Called : (Breast Cancer,Cervical Cancer) <Graciela Ruiz 08/24/2016 3:07PM>	Note: none
Last appt: Feb 15, 2017	Colon Cancer, Breast Cancer, Cervical Cancer	Mam: 7/13/2013		Note:

REGISTRY: MULTI-COMPONENT 'ONE CALL DOES ALL'

(Hidden columns: Acct #, name, DOB, PCP)



Patients With Undiagnosed Hypertension Hiding in Plain Sight

Hilary K. Wall, MPH¹; Judy A. Hannan, RN, MPH¹; Janet S. Wright, MD¹

[+] Author Affiliations

JAMA. 2014;312(19):1973-1974. doi:10.1001/jama.2014.15388.

Text Size: A A A

Article References

Extract

This Viewpoint discusses the need to improve hypertension control to reduce preventable myocardial infarctions and strokes.

According to the 2011-2012 National Health and Nutrition Examination Survey (NHANES), a nationally representative, cross-sectional survey of the noninstitutionalized US population that combines interviews and physical examinations, 1 of 3 US adults (estimated at approximately 71 million people) has high blood pressure and almost half of these individuals (48.2%) do not have their blood pressure under control.¹ Closer examination of the population with uncontrolled blood pressure reveals that 36.2% (estimated at approximately 13 million people) are neither aware of their hypertension nor taking antihypertensive medications.¹

Topics

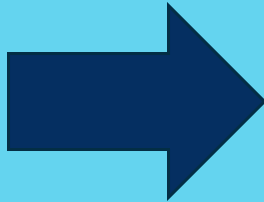
JAMA The Journal of the
American Medical Association

Nov 19, 2014
Vol 312,
Number 19

HIDING IN PLAIN SIGHT (HIPS)



Health Center Name: Neighborhood Healthcare		Month of Measurement																	
		Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16
Monitoring of Hypertension	Number of patients in denominator with a HTN diagnosis (401.* or I10)	10306	10423	10457	10499	10526	10501	10530	10554	10612	10585	10322	8821						
	Number of adult patients with 1+ medical visits in the past 12 months	36942	37245	37378	37322	37612	37809	37989	38314	38551	38802	37761	31296						
	Hypertension Prevalence	27.9%	28.0%	28.0%	28.0%	28.0%	27.8%	27.7%	27.5%	27.5%	27.3%	27.3%	28.2%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Number of patients in denominator with at least one Stage 2 BP reading or at least two Stage 1 BP readings	772	767	785	792	805	787	758	779	790	860	819	544						
Management of Hypertension	Number of adult patients without a HTN diagnosis (401.* or I10-I15.*) with 1+ medical visits in the past 12 months	26631	26817	26916	27016	27081	27302	27454	27755	27937	28345	27675	22490						
	Undiagnosed Hypertension	2.9%	2.9%	2.9%	2.9%	3.0%	2.9%	2.8%	2.8%	2.8%	3.0%	3.0%	2.4%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Number of patients in denominator with controlled HTN	6570	6690	6809	6889	6949	6951	6979	7057	7117	7128	7008	5907						
	Number of adult HTN patients (401.* or I10) with 1+ visits	9146	9254	9284	9349	9352	9308	9324	9375	9425	9478	9319	7825						
Diagnosed Cohort	Blood Pressure Control - NCF 0018	71.83%	72.29%	73.34%	73.69%	74.30%	74.68%	74.85%	75.27%	75.51%	75.21%	75.20%	75.49%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Number of patients in denominator with controlled HTN	5489	5539	5641	5688	5723	5768	5783	5808	5820	5793	5738	5738						
	Number of adults with hypertension diagnosis (401.* or I10) identified at baseline	7584	7587	7582	7582	7575	7574	7566	7565	7561	7555	7551	7543						
	Diagnosed Cohort - Hypertension Control	72.38%	73.01%	74.40%	75.02%	75.55%	76.16%	76.43%	76.77%	76.97%	76.68%	76.25%	76.07%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Number of patients in denominator with Stage 1 HTN	1547	1507	1434	1393	1369	1336	1336	1331	1299	1300	1323	1349						
	Number of adults with hypertension diagnosis (401.* or I10) identified at baseline	7584	7587	7582	7582	7575	7574	7566	7565	7561	7555	7551	7543						
	Diagnosed Cohort - Stage 1 Hypertension	20.40%	19.86%	18.91%	18.37%	18.07%	17.64%	17.66%	17.59%	17.18%	17.21%	17.52%	17.88%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Number of patients in denominator with Stage 2 HTN	548	541	507	501	483	470	447	426	442	462	470	456						
	Number of adults with hypertension diagnosis (401.* or I10) identified at baseline	7584	7587	7582	7582	7575	7574	7566	7565	7561	7555	7551	7543						
	Diagnosed Cohort - Stage 2 Hypertension	7.23%	7.13%	6.69%	6.61%	6.38%	6.21%	5.91%	5.63%	5.85%	6.12%	6.22%	6.05%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Undiagnosed Cohort	Average total SBP among patients in the denominator	150.58	146.07	143.70	142.29	141.46	140.47	139.63	139.14	139.27	138.99	138.86	138.79						
	Number of patients in the diagnosed cohort who are identified as having Stage 1 or Stage 2 hypertension at baseline.	2095	2095	2092	2091	2088	2087	2083	2083	2082	2082	2082	2082						
	Average total DBP among patients in the denominator	86.59	84.80	83.51	83.19	82.83	82.18	81.75	81.68	81.97	81.62	81.30	81.30						
	Number of patients in the diagnosed cohort who are identified as having Stage 1 or Stage 2 hypertension at baseline.	2095	2095	2092	2091	2088	2087	2083	2083	2082	2082	2082	2082						
Undiagnosed Cohort	Number of patients in denominator with 1+ follow-up visit(s) on or after 2/1/2015		129	188	235	263	294	305	318	325	332	339	343						
	Number of patients identified as potentially undiagnosed for HTN on 1/31/2015		491	491	491	491	491	491	491	491	491	491	491						
	Undiagnosed Cohort - Follow-up Visit	#DIV/0!	26.3%	38.3%	47.9%	53.6%	59.9%	62.1%	64.8%	66.2%	67.6%	69.0%	69.9%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
	Number of patients in denominator who received a HTN diagnosis on or after 2/1/2015		10	14	16	17	18	18	20	22	23	27	27						
Undiagnosed Cohort	Number of patients identified as potentially undiagnosed for HTN on 1/31/2015 with at least 1+ follow-up visit		129	129	129	129	129	129	129	129	129	129	129						
	Undiagnosed Cohort - Hypertension Diagnosis	#DIV/0!	7.8%	10.9%	12.4%	13.2%	14.0%	14.0%	15.5%	17.1%	17.8%	20.9%	20.9%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!



Overall Prevalence:
27.5%

HIDING IN PLAIN SIGHT (HIPS)- NHC RESULTS

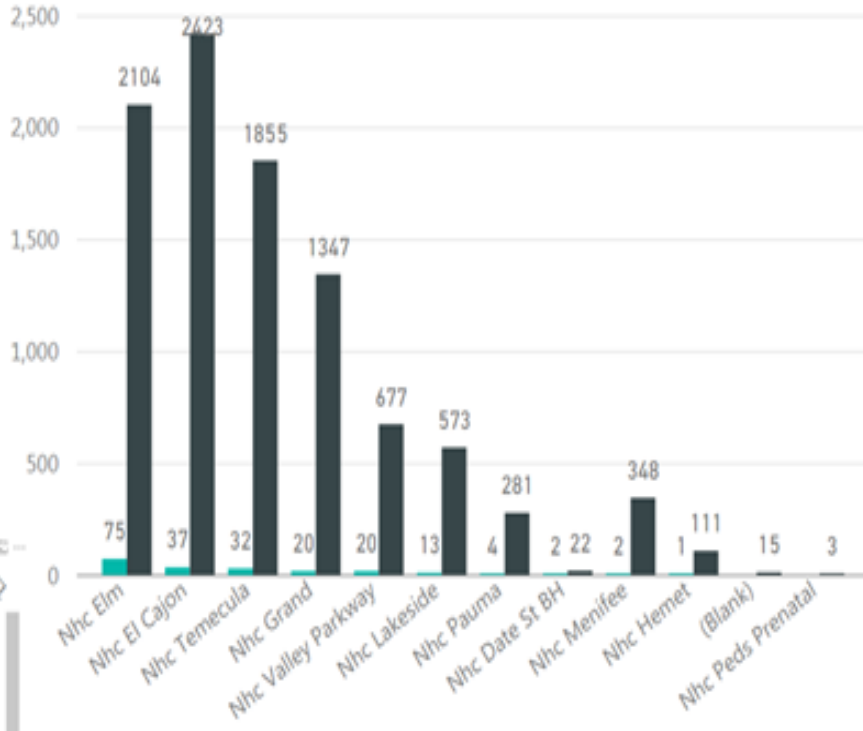


UN DX HTN

BY FACILITY

(age > 18, not dx HTN (Million Heart definition), 2 or more BPs > 140/90 in the last 6 months)

● Count of undx htn ● Count of dx htn



UNDX HTN

206

HTN

9759

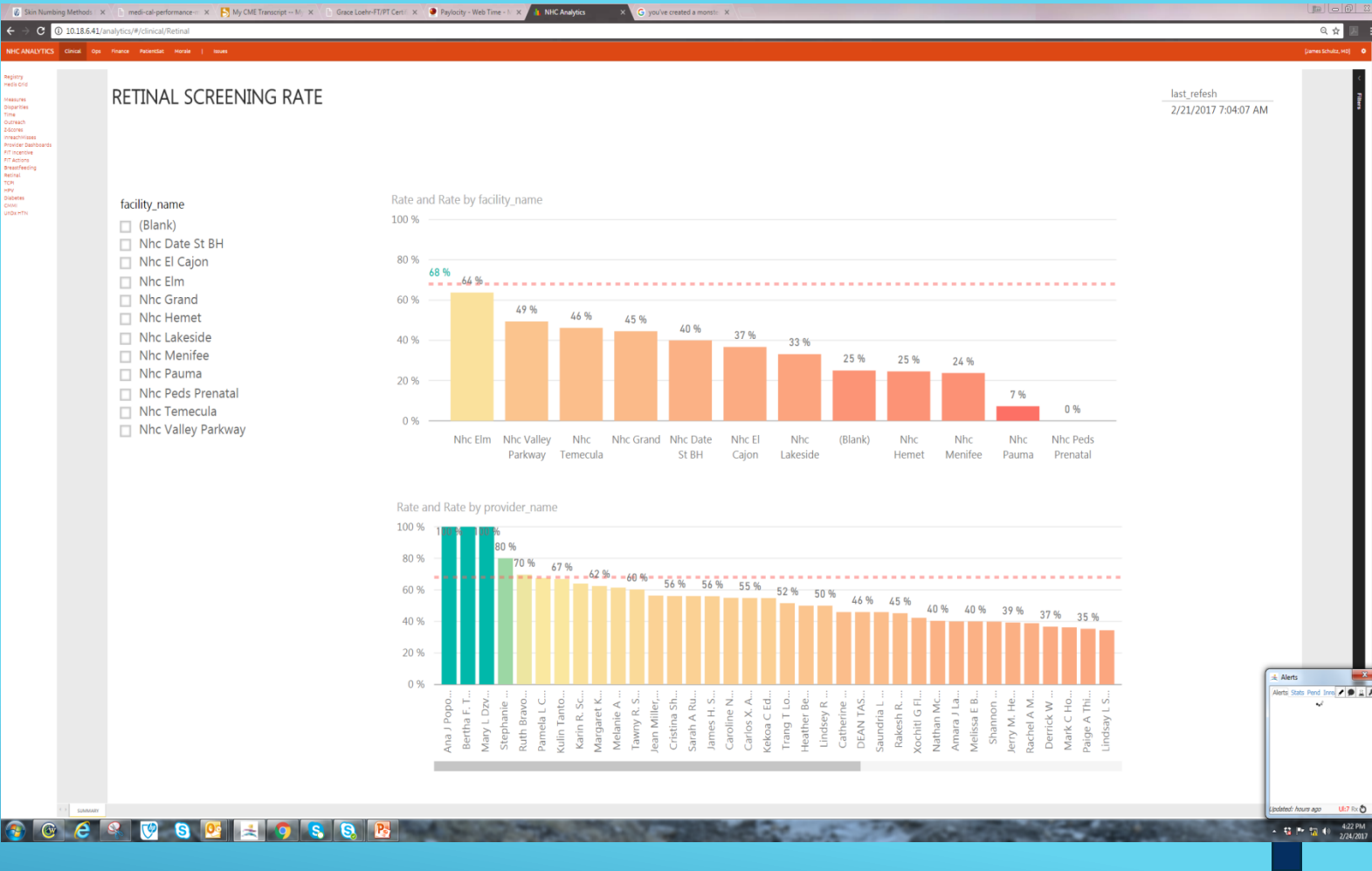
undx : dx

2.11%



HIPS: UNDIAGNOSED HTN RATE (3/1/17)





INNOVATION: DIABETIC RETINAL SCREENING WITH MA PHOTOGRAPHERS/ CLOUD READING





\$1.2M

THE RIGHT PEOPLE- WORKING
TO THE TOP OF THEIR LICENSE





SUMMARY

Shingo-La,
Indian Himalayas
16,750'

- ▶ **Data:**
 - ▶ OWN IT! USE IT!
 - ▶ right data (valid, relevant, actionable) to right people (those that can do something about it) at the right time in the right format
- ▶ **Practicing to license**
 - ▶ Implication: hiring additional non-provider staff
 - ▶ TEAMS!
- ▶ **Reports:**
 - ▶ To individuals
 - ▶ To QM Committees (2- Operational, Clinical)
 - ▶ Co-opetition:
 - ▶ Provider scorecards, unblinded
 - ▶ Site dashboards, unblinded
- ▶ Provide improvement tools
- ▶ Data capture- structured data/mapping to reports
- ▶ Registries
- ▶ Proactive Office Encounter/Huddles
- ▶ **Don't Let the Doctors Do It- Pop Health Department**



NEIGHBORHOOD HEALTHCARE QUALITY IMPROVEMENT PRINCIPLES



- ▶ Summary:
 - ▶ Leadership Commitment- Medical and Administrative
 - ▶ Teams
 - ▶ Data- ownership, use, integrity/validation, delivery
 - ▶ Investment Philosophy
 - ▶ Make the right thing the easiest thing (or, make it hard to NOT do the right thing)

KEYS TO QUALITY IMPROVEMENT- HOW TO MOVE THE NEEDLE





myCARE Patient Portal



As a patient, you have access to your myCARE portal. You can access medical records, schedule an appointment, or view lab results. If you have already received your login information from Neighborhood Healthcare, you can [login here](#).

[Read More](#)

Services & Programs



Neighborhood Healthcare has many different services, programs, and classes to keep you and your family healthy. Healthy Families means healthy communities.

[Read More](#)

Find a Health Center



Neighborhood Healthcare has been providing medical services to community members since 1969. Over the last 45 years, Neighborhood Healthcare has expanded to nine health centers in five cities and two different counties.

[Read More](#)

Our Latest News



Success Stories



Poway Capital Campaign



Alerts 32

Alerts: Status: Pending: Error

SMITH, JOHN (Age:70)

CVD, HTN, Cvd risk: NA (Clinical ASCVD)

1/6/17 173/112

BP:

1/6/17 11/29/16 57

ESR:

Status: Pac On On

Age: Pac On On

Cvt: 1:25 11/29/16

K: 4 11/29/16

BSL: 1/6/17

Created on: 1/6/17

Updated: success: ago 16.9 sec

4:33 PM 2/24/2017

- ▶ Jim Schultz, MD, MBA, FAAFP, DiMM
- ▶ jims@nhcare.org
- ▶ www.nhcare.org





Testa Village'
Jammu-Kashmir,
Indian Himalayas
~14,000'