

Prepared for Board meeting July 25, 2022

Quality Metrics



Clinical Measure	Where we are	Where we were	Change	Goal	At Goal?	Comment
Uncontrolled Diabetes	21.7%	21.4%	Worsening	20%	FALSE	Small increase
Hypertension Control	63.5%	62.4%	Improving	60%	TRUE	Nice increase - again
Cervical Cancer Screening Rate	48.7%	48.3%	Improving	35%	TRUE	Small increase
Breast Cancer Screening Rate	62.7%	62.8%	Worsening	60%	TRUE	Tiny decrease
Colorectal Cancer Screening Rate	53.4%	52.9%	Improving	47%	TRUE	Small increase - again
2 Year Old Vaccination Rates	26.9%	23.6%	Improving	30%	FALSE	Big increase
Well Child Visit 3-21	51.5%	51.5%	Worsening	55%	FALSE	Flat
Well-Child Visits, 30 months	43.2%	44.3%	Worsening	50%	FALSE	Moderate decrease
Depression Screening Rates	69.4%	69.1%	Improving	60%	TRUE	Small increase - again
Diabetic Eye Exams	30.3%	30.8%	Worsening	30%	TRUE	Small decrease
Diabetic Kidney Screening	67.1%	67.7%	Worsening	80%	FALSE	Small decrease
HIV screening	47.0%	46.5%	Improving	30%	TRUE	Small increase
Mostly small changes Will investigate 2yo imm rates						

Quality Improvement Committee

Last meeting -

June 28, 2022

Minutes distributed

Next meeting -

August 23, 2022





Risk Management Committee

Meeting June 21, 2022

Minutes distributed



Next meeting -

August 16, 2022



Annual Risk Assessment Report 2022

- Purpose identify most serious risks and mitigating strategies
- Process key staff from all departments provide input and the few most significant risks are targeted with specific action plans
- Reporting report presented to the QI Committee and the Board of Directors



Annual Risk Assessment Report

Most significant risks selected and Risk Score ()

Incorrect or inaccurate coding (8 increased to 12)

- **Risk:** Loss of revenue, medicolegal exposure, compliance exposure. Risk score increase in the past year based on knowledge from finance department of having to write-off certain charges.
- **Mitigating Actions:** Training, audits, reporting. Additional coding training identified and made available to providers, and coding staff to participate in Lunch and Learn activities regarding specific coding topics. Additional system triggers to catch problematic coding situations, e.g., 25 modifier.
- **Reporting/Monitoring**: Billing staff now performing regular random audits of charges by provider. Monthly reporting to providers and key management staff of provider coding trends. Workqueue in system monitored regularly for irregularities by billing staff.



Annual Risk Assessment Report

Power failure (9)

- Risk: loss of patient care and pharmacy services, loss of revenue,
 increased hazards, communications failure
- Mitigating Actions: Many strategies in place (generators, backups, emergency lighting, network outage triggers). Cellular monitoring devices deployed to all sites and all cold storage units have data loggers with notification. TCC generator being added with renovations.
- Reporting/Monitoring: Track and report on power outages regularly.



Annual Risk Assessment Report

Most significant risks selected and Risk Score ()

Epidemic/Pandemic - (9)

- **Risk:** Patient and staff morbidity and mortality, increased expenditures, loss of revenue
- Mitigating Actions: Policy and procedures to limit exposure addressing communication, supplies, patient interactions and staff preparedness. Virtual visits and meetings implemented as well as remote work policy and procedures
- **Reporting/Monitoring**: Emergency Response Team was formed and activated to respond to pandemic. Team will remain intact for periodic updates and increase in activity as needed.



Annual Risk Assessment Report

Site Security (9)

- Risk: Patient and staff safety, patient and staff privacy, damage or theft of company property
- **Mitigating Actions**: Electronic keypads, auto-locking doors, locked clinical areas. Vendor log sheets implemented at all sites. Camera systems in eight sites to eventually be all sites.
- **Reporting/Monitoring**: Log sheets allow for reporting on frequency of vendors into sites. Camera systems provide video documentation for a period of time.



<u>Annual Risk Assessment Report</u>

Network failure (8)

- Risk: loss of patient care and pharmacy services, loss of revenue,
 communications failure
- Mitigating Actions: Network redundancy now in place at all sites.
 Triple redundancy in Greenwood, double redundancy elsewhere.
 Emergency-use onsite backup of vital patient data. Network monitoring devices in place.
- **Reporting/Monitoring**: Track network outages regularly, reporting available if needed.



Annual Risk Assessment Report

Other issues...

Risk Management Goals



- Risk Management Plan
- Regular Risk Management Committee meetings
- Current risk assessment
- Quarterly risk assessments 3 completed for 2022 💉
- Annual Risk Management Report ✓
 Presented July 2022
- Risk Management Training plan in place

Action Items



Appointment and granting of privilegesNone

Other

Approval of Annual Risk Assessment for 2022