

Prepared for Board meeting September 26, 2022

## **Quality Metrics**



Clinical Measure	Where we are	Where we were	Change	Goal	At Goal?	Comment
Uncontrolled Diabetes	21.1%	21.6%	Improving	20%	FALSE	Nice decrease
Hypertension Control	65.8%	64.6%	Improving	60%	TRUE	Nice increase - again
Cervical Cancer Screening Rate	48.4%	48.5%	Worsening	35%	TRUE	Tiny decrease
Breast Cancer Screening Rate	64.4%	64.3%	Improving	60%	TRUE	Tiny increase
Colorectal Cancer Screening Rate	52.9%	53.4%	Worsening	47%	TRUE	Small decrease
2 Year Old Vaccination Rates	26.7%	25.8%	Improving	30%	FALSE	Moderate increase
Well Child Visit 3-21	52.9%	51.6%	Improving	55%	FALSE	Big increase
Well-Child Visits, 30 months	44.6%	43.9%	Improving	50%	FALSE	Nice increase
Depression Screening Rates	69.6%	69.5%	Improving	60%	TRUE	Tiny increase
Diabetic Eye Exams	30.7%	29.8%	Improving	30%	TRUE	Moderate increase
Diabetic Kidney Screening	63.2%	64.7%	Worsening	80%	FALSE	Moderate decrease - again
HIV screening	47.6%	47.2%	Improving	30%	TRUE	Small increase
Good-sized changes in pediatric measures						
Most everything improving Will need to monitor diabetic kidney screening						

## Quality Improvement Committee

#### Last meeting -

August 23, 2022

Minutes distributed

#### Next meeting -

October 25, 2022





# Peer Review Results Spring 2022

## Peer Review



#### **Methods**

- Twice per year
- Every provider reviews 10 charts of a peer provider
- Specialty reviews specialty (FM→FM, Peds→Peds)
- Same general time frame
- Reviews and results are confidential and reviewed by CMO
- Results requiring action items are communicated directly to provider and director of department
- Summary of results presented to both QI Committee and to the board of directors

## Peer Review



#### Areas of focus

- History pertinent to Chief Complaint
- Diagnosis consistent with history and exam
- Medical decision-making process apparent
- Appropriate diagnostic tests
- Standard abbreviations
- Appropriate consultations
- Appropriate treatment
- Follow-up scheduled
- Medication and allergy lists updated
- Relevant health education presented
- Billing review

## Peer Review



#### End result of review

- Compliance with medical standards
  - Yes, No or Reservations
- Comments regarding management, outcomes, issues, concerns and general negative or positive impressions
- Chief Medical Officer review and recommendations
  - Email to every provider summarizing results
  - Directed email or conversation with department head about specific findings
  - Action items including more frequent reviews and/or additional training

## Peer Review Spring 2022



#### **Results**

- 38 out of 39 providers reviewed, 1 review was lost
- Providers **non-compliant** with standards of care and documentation = 0
- Providers passing with **Reservation** regarding standards of care = 0
- Providers with no issues found at all = 11

## Peer Review Spring 2022



### Issues found from most prevalent to least:

- 1. Coding issues mostly under-coding
- 2. Missing documentation of patient education
- 3. Med and allergy lists not obviously up to date
- 4. Documenting appropriate follow-up
- 5. Specific clinical suggestions/concerns
- 6. Appropriate treatment for problem
- 7. Incorrect diagnosis code or incorrect diagnosis order
- 8. History in note related to complaints

## Peer Review Spring 2022



#### **Action items:**

- No increased rate of review for any provider
- *Every provider* will receive an email with the summary of PR findings, including any specific clinical items that were identified
- General email will go out, addressing most common findings and some easy solutions
- Will continue to work on providing coding resources and feedback



# Risk Management

## Risk Management Committee

Meeting August 23, 2022

Minutes distributed



Next meeting -

October 18, 2022

## Risk Management



Currently undergoing

"Focused Educational Opportunity"

with HRSA regarding risk management policies and procedures

Evaluating and suggesting edits in

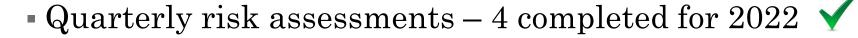
- Risk Management Plan
- Risk Management Training Plan
- Lab Tracking Policy and Procedure

## Risk Management Goals



- Risk Management Plan
- Regular Risk Management Committee meetings







Risk Management Training plan in place





## **Action Items**



## Appointment and granting of privileges none

### **Update**

HIV grant application unsuccessful Another grant opportunity is pending