

HUDSON HEADWATERS HEALTH NETWORK

THE ROAD TO DIABETES RECOGNITION

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WE DO ALL THAT

- *Already involved with Diabetes Collaborative*
- *Adopted Evidence-Based Clinical Guidelines for the Treatment of Diabetes in December 2008*

WHAT DID THE DATA SHOW-June 2009

Standard	Points		# Met	% Met	Score
HbA1c Poor Control >9.0%	15	< or = 15%	34	17%	0
HbA1c Control <7.0%	10	> or = 40%	87	44%	10
Blood Pressure \geq 140/90 mm Hg	15	< or = 35%	54	27%	15
Blood Pressure Control <130/80 mm Hg	10	> or = 25%	75	38%	10
Retinal Screening	10	> or = 60%	84	42%	0
Smoking Status & Cessation Advice	10	> or = 80%	192	96%	10
LDL \geq 130	10	< or = 37%	24	12%	10
LDL <100	10	> or = 36%	113	57%	10
Nephropathy Assessment	5	> or = 80%	147	74%	0
Foot Examination	5	> or = 80%	127	64%	0
	100				65

WHERE TO BEGIN

- **We need a Plan and we need to communicate with ALL staff regarding Review Results and Action Plan**
- **CHCANYS provides assistance**

THE PLAN

EMPOWER NURSING

- Nurses re-educated to have the patient remove his/her socks and shoes at every visit before provider enters the exam room to be ready for your assessment (DFE).
- Monofilament available in exam room
- Nurses trained to conduct and document the exam

Nursing Role

- Nurses pre-filled laboratory requisition slips for provider review and signature (based upon already established Network standing orders for diabetic care).
- Urine cups available for immediate collection if the patient is due for microalbumin testing.

WE ARE ALL PART OF THE TEAM

- Revised Diabetes Flow Sheet and asked Support Staff to take a more active role in evaluation of the patient's health care maintenance needs:
 - Enter pertinent data into Diabetes Flow Sheet.
 - Pre-visit Planning to pre-screen charts one to two days before a visit to identify needs, get necessary data, etc for the visit.
 - Flagged charts with a yellow dot on the outside (unless the chart cover is already yellow) to identify them as diabetic charts.

Support Staff Role

- Front Office Staff to assist with referrals for retinopathy screening and tracking feedback from the specialist office when not in chart.

PROVIDER EDUCATION

- A **Diabetic Foot Exam (DFE)** is an assessment of the feet conducted with the patient's shoes and socks removed to assess for sores, circulation, and sensation. Statements such as “Extremities negative, No CCE, No edema, etc” are NOT sufficient proof that a DFE has been done. Of course, monofilament or other sensory testing is not expected at each visit, but needs to be documented at least annually. A podiatrist's progress note qualifies as a DFE. Common sense dictates that patients remove shoes and socks at each visit.

PROVIDER EDUCATION

Nephropathy screening:

Urine microalbumin testing (UMA) annually. If a urinalysis or office dipstick shows proteinuria, then charts qualify as having passed the nephropathy screen. **HOWEVER**, if a urinalysis or dipstick shows no albumin, then we have not passed this criteria unless we have also done a UMA within the last year.

OTHER CHANGES

Revision of Progress Note to include a section to document Diabetic Foot Exam (DFE).

COMMUNICATION

Outline: What Defines Recognition

Discuss: How Do We Plan to get There

Define: What is "MY" Role?

MEDICAL STAFF

- **Memo sent to all Medical Staff outlining:**
 - 1. Why Recognition was important to the Network**
 - 2. How the Network scored on initial review**
 - 3. Individual Provider Report Card**
 - 4. What the Plan was and what was expected of them**

DIABETES REVIEW FOR 1/01/2008-11/30/2008

PROVIDER: DR A

Patient Account Number	Diabetes Flow Sheet Used	A1C	A1C <7	A1C 7-9	A1C>9	Systolic	Diastolic	Comp Foot Exam	Dilated Eye Exam	Lipid Profile	LDL	Nephropathy Assess	Smoker Status Assessed	ACE/ARB Inhibitor
127177	No	Yes		8.6		130	68	No	Yes	Yes	48	Yes	Yes	Yes
126886	No	Yes	6.6			112	64	No	No	Yes	59	Yes	Yes	Yes
112538	No	Yes	6.9			104	70	Yes	Yes	Yes	79	Yes	Yes	Yes
125775	No	Yes		7.2		130	72	Yes	No	Yes	84	Yes		Yes
126129	No	Yes	5.5			120	82	Yes	Yes	Yes	88	Yes	Yes	Yes
79483	No	Yes	6.6			138	84	Yes	Yes	Yes	129	Yes	Yes	Yes
156107	No	Yes			9.2	122	70	No	Yes	Yes	131	No	Yes	Yes
170273	No	Yes	5.6			110	78	Yes	Yes	Yes	152	Yes	Yes	Yes
95317	No	No			X	124	70	No	Yes	No		Yes	Yes	No

Network Mean

% Using Flow Sheet	A1C in 2008	A1C <7	A1C 7-9	A1C>9	BP <130/80	BP >140/90	Comp. Foot Exam	Dilated Eye Exam	Lipid Profile	LDL >130	LDL <100	Nephropathy Assess	Smoker Status Assessed	ACE/ARB
35%	90%	45%	31%	24%	56%	16%	35%	28%	84%	35%	49%	60%	92%	70%

Your Results

% Using Flow Sheet	A1C in 2008	A1C <7	A1C 7-9	A1C>9	BP <130/80	BP >140/90	Comp. Foot Exam	Dilated Eye Exam	Lipid Profile	LDL >130	LDL <100	Nephropathy Assess	Smoker Status Assessed	ACE/ARB
0%	89%	56%	22%	22%	78%	0%	56%	78%	89%	22%	56%	89%	89%	89%

NCQA Diabetes Recognition Benchmarks

	A1C <7	A1C>9	BP <130/80	BP >140/90	Comp. Foot Exam	Dilated Eye Exam	LDL >130	LDL <100	Nephropathy Assess	Smoker Status Assessed
Threshold	40%	≤15%	25%	≤35	80%	60%	≤37%	36%	80%	80%
Weight	10	15	10	15	5	10	10	10	5	10

Score Needed for Recognition = 75

Your Score: **85**

CONGRATULATIONS

Highlighted results are those that meet the benchmark for NCQA Recognition

COMMUNICATION

- Held Meetings with Nurse Leaders and Front Office Managers
- Attended Systems Meetings at the Health Center Level

NOW WE'RE READY- November 2009

Standard	Points		# Met	% Met	Score
HbA1c Poor Control >9.0%	15	< or = 15%	32	16%	0
HbA1c Control <7.0%	10	> or = 40%	71	36%	0
Blood Pressure >=140/90 mm Hg	15	< or = 35%	56	28%	15
Blood Pressure Control <130/80 mm Hg	10	> or = 25%	74	37%	10
Retinal Screening	10	> or = 60%	97	49%	0
Smoking Status & Cessation Advice	10	> or = 80%	194	97%	10
LDL >=130	10	< or = 37%	13	7%	10
LDL <100	10	> or = 36%	127	64%	10
Nephropathy Assessment	5	> or = 80%	177	89%	5
Foot Examination	5	> or = 80%	166	83%	5
	100				65

AREAS OF IMPROVEMENT

- **Nephropathy Assessment:
Improved to 89%**
- **Foot Examinations: Improved to
83%**
- **Only 5 patients in the review group
had not had a hemoglobin A1c done
in the 14 month review period
compared to 10 in June**

WHERE WE LOST POINTS

- **HbA1c Poor Control > 9.0 %- we were at 16%, only get credit if \leq 15 %**
- **HbA1c Control < 7.0% - we were at 36%, only get credit if \geq 40%**

MORE WORK TO BE DONE

- **Developed Test Results Form and reworked workflow between Front Office and Medical Staff to identify patients' needs and obtain missing reports**
- **Adopted standard form to give to patients to bring to their retinopathy screening**
- **Patient Outreach-CHCANYS
AmeriCorps Volunteer**

WHAT MORE CAN WE DO

- Nursing trained to take a subsequent Blood Pressure if initial blood pressure was elevated (Rule Out White Coat Syndrome)
- One-on-One Provider Meetings conducted to review Report Cards and provide mentoring
- Letter to Eye Care Providers to send us results of diabetic retinopathy screening

THIRD TIME IS A CHARM

April 2010 We achieve recognition

- Had to apply online
- New point system gave credit for patients whose A1C was <8
- Got a better handle on Retinopathy Exams through Patient Outreach (AmeriCorps Volunteer)

SUSTAINABILITY IN A TIME OF CHANGE

- Conversion to an Electronic Medical Record
- Transformation to a Patient Centered Medical Home Model of Care

PRE-VISIT PLANNING/SELF MANAGEMENT SUPPORT

Diabetes Flow Sheet

https://athenonet.athenahealth.com/?browserwidth=1280&browserheight=800 - athenaCollector v10.9 - Windows Internet Explorer

athenaNet. home patient calendar clinicals billing reports admin research help logout 866-265-7922 find patient 91000314 by id go

Chart: (68yo F) #91000314 minichart quickview prev next recent inbox

my view: all facsheet health history flowsheets x Diabetes Hypertension

[Print Flowsheet](#)

CAD	Add	Smoking Status	Formerly	Notes	quit 45 yrs. ago
ACE/ARB	LISINAPRIL 20 MG TAB	Smoking - How much?	None	Notes	
Antithrombotics	ASPIR-81	Last Eye Exam	7/20/10	Dr Hite	
Statin	SIMVASTATIN 40 MG TAB	Notes	TARGET GOALS: Hgb A1C<7		

09/30/2010

BP / / Total Chol A1C

Weight lbs oz Refused Out of Range Trig Microalbumin

BMI LDL Microalb/Cr

HDL BUN/Cr

Date	BP	Weight	BMI	Total Chol	Trig	LDL	HDL	A1C	Microalbumin	Microalb/Cr	BUN/Cr	
09/23/2010	132/64 sitting L arm	137 lbs	21.5									edit
09/09/2010	154/82 sitting L arm	139 lbs	21.8									edit
08/24/2010	116/80 sitting L arm	135 lbs	22.3									edit
08/16/2010				159 MG/DL	68 MG/DL	69 MG/DL	76 MG/DL	6.5 %			17	edit
03/23/2010	138/66 sitting L arm	141 lbs	22.2					6.9	0.75			edit
01/25/2010				145	69	63				6		edit

[Save](#) [Cancel](#)

[Return To Office \(next: 03/23/2011 unscheduled\)](#) [Create New Orders](#) [Create Patient Case](#)

dreimann Health Center at Broad Street - Primary Care 0 0 0 tasks

Trusted sites | Protected Mode: Off 100%

8:27 AM

HPI NURSING TEMPLATE

Diabetes Self Care HPI Template

The screenshot shows the athenaNet interface for configuring a History of Present Illness (HPI) template. The browser address bar shows the URL: <https://athenonet.athenahealth.com/?browserwidth=1280&browserheight=800>. The page title is "History of Present Illness Templates".

Template Configuration:

- Template Name: Diabetes Self Care
- Sex: both
- Age range: [] through [] years
- Specialty: All Selected
- Ordering: 1
- Rollup: N
- Note: []

Diabetes Self Care Preview:

Diabetes Self Care

HPI

▶ Self Care: checks blood pressure at home , monitoring glucose , seeing eye doctor yearly , checking feet regularly , does not check blood pressure at home , not monitoring home glucose , not seeing eye doctor yearly , not checking feet regularly , barriers to self care exist addtl notes

Notes: []

Buttons:

Table:

Specialty	Name	Sex	Age	Note	Ordering	Rollup
	dreimann			Health Center at Broad Street - Primary Care	0	0

System tray: Done, Trusted sites | Protected Mode: Off, 10:44 AM

QUALITY MANAGEMENT

Patient Face Sheet

The screenshot displays the AthenaNet patient face sheet for a patient with ID 91000314. The interface includes a navigation bar with options like 'home', 'patient', 'calendar', 'clinicals', 'billing', 'reports', 'admin', 'research', and 'help'. The patient's name is (68yo F) #91000314. The 'Quality Management' section shows a table of measures and their status, all of which are 'Satisfied'. The 'Past Medical History' section lists various conditions such as 'BACKGROUND RETINOPATHY', 'CEREMOSIS', 'HYPERTENSION', and 'MIGRAINES'. The 'Problems' section lists several medical issues with associated codes and descriptions.

Demographics

Patient Name: [Redacted]
Sex: [Redacted]
DOB: [Redacted]
Address: [Redacted]
City/State/Zip: [Redacted]
Home Phone: [Redacted]
Usual Provider: DANIEL WAY, MD
Insurance: [Redacted]

Quality Management

Measure	Status
Blood Pressure Control in Diabetes	Satisfied
Blood Pressure Control in Hypertension	Satisfied
Colorectal Cancer Screening	Satisfied
Diabetic Foot Exam	Satisfied
Hemoglobin A1c Control	Satisfied
LDL-C Control	Satisfied
Ophthalmologic Examination	Satisfied
Screening Mammography	Satisfied
Tobacco Use Inquiry	Satisfied
Urine Protein Testing	Satisfied

Past Medical History

Eye or vision problems: **Y - BACKGROUND RETINOPATHY**
Ear or hearing problems: **Y - CEREMOSIS**
Hypertension: **Y**
Coronary artery disease: **Y - 3/06 Negative Stress Test, 3/09 Negative**
Nuclear Scan
Heart disease - other: **Y - Mild MR, Mild AI**
Peptic ulcer disease: **Y**
Diverticulitis: **Y**
Diabetes: **Y**
Hyperlipidemia: **Y**
Headache: **Y - MIGRAINES**
Hospitalizations: **Y**
Notes: **ENDOMETRIOSIS, RECURRENT YEAST INFECTION**

Problems

- Candidiasis; of unspecified site (112.9)
- Diabetes 2 (z) (250.00)
- Hyperlipidemia (z) (272.4)
- Anemia (z) (285.9)
- Migraine with aura; without mention of intractable migraine without mention of status migrainosus (346.00) - VISUAL AURA
- Cataract (z) (366.9)
- Hypertension, essential (z) (401.9)
- Peptic ulcer, site unspecified; acute with hemorrhage; without mention of obstruction (533.00)
- Diverticulosis (z) (562.10)
- Diverticulitis (z) (562.11)
- Constipation, unspecified (564.00)

The Devil's in the Detail

Quality Management Section—Full view—Visit History

The screenshot displays the AthenaNet Quality Management interface for a patient named (68yo F) #91000314. The interface is viewed in Internet Explorer and shows a list of medical measures with their status, due dates, results, and notes. The measures listed include Urine Protein Testing, Diabetic Foot Exam, Breast Cancer Screening, LDL-C Control, Hemoglobin A1c Control, Blood Pressure Control in Diabetes, Blood Pressure Control in Hypertension, Colorectal Cancer Screening, Ophthalmologic Examination, and Tobacco Use Inquiry. Each measure is marked as 'Satisfied' and includes a date and a result or note. The interface also shows sections for Patient's Providers and Patient's Pharmacies, along with a search bar and a 'Jotter' button.

Measure Name	Status	Due Date	Result	Notes
Urine Protein Testing	Satisfied	01/25/2011	Microalbumin Screening Performed: 0.75 MCG/ML	MICROALBUMIN, RANDOM URINE, 01/25/2010 add note
Diabetic Foot Exam	Satisfied	02/04/2011	✓ Patient was given a foot exam during reporting period	02/04/2010 add note
Breast Cancer Screening	Satisfied	07/08/2011		MAMMOGRAM, SCREENING, 09/08/2010 add note
LDL-C Control	Satisfied	08/16/2011	Most recent LDL-C value: 69 mg/dl	LIPID PANEL, 08/16/2010 add note
Hemoglobin A1c Control	Satisfied	08/16/2011	Most recent HgA1C value: 6.5 %	HEMOGLOBIN A1C, 08/16/2010 add note
Blood Pressure Control in Diabetes	Satisfied	09/23/2011	Most recent blood pressure: 132/64	OFFICE VISIT 09/23/2010 add note
Blood Pressure Control in Hypertension	Satisfied	09/23/2011	Most recent blood pressure: 132/64	OFFICE VISIT 09/23/2010 add note
Colorectal Cancer Screening	Satisfied	01/17/2012	Colonoscopy	01/17/2003 add note
Ophthalmologic Examination	Satisfied	07/20/2012	✓ Patient was tested for Diabetic Retinal Disease Test Result: NEGATIVE	07/20/2010 add note Dr Hite
Tobacco Use Inquiry	Satisfied	09/23/2012		OFFICE VISIT 09/23/2010 add note