Meaningful Use of Patient-Generated Data

**CAPE REGIONAL MEDICAL CENTER
DSRIP PROJECT UPDATE**

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Meaningful Use of Patient-Generated Data in EHR

Goals Include

- Promote patient engagement through various means, including the integration of patient-generated data into clinical care documentation and quality measures
- Referral coordination between providers
- Shared decision making
- Adherence reporting-Blood Pressure, Eye exams , Lipids, Foot Exam, AIC
- Collaborative Care
- Shared Care Plans
- Team Outcomes
- Data analysis
- Clinical improvement
- Population focused improvement

Electronic Measures vs. Manual Abstraction

Manual Abstraction

- Data Documented in patient record (Capture)
- Manual Review by abstraction/coding staff (Interpret)
- Data manually extracted and calculated for reporting(Calculate)

Transformed into measure specifications

- Data must be codified (Codify)
- Structured data must be entered in EHR by clinician (Capture)
- Electronically extracted data for calculations and reporting(Calculate)

Collaboration

DSRIP Team Members

Care Management

Quality Improvement

Information Technology

External Partners IT

Cape Physicians Nurse Navigators

Health Care Providers

Outpatient Diabetes Center

Administration

Key Steak Holders

Community Partners

Challenges

Multiple Documentation Systems-Fragmented
Difficult for Care Management

Allscripts Profession EHR

NUANCE

Allscripts /Profession EHR

MEDITECH

Soarian®

Cape Regional Medical Center (CRMC)- Meditech, Soarian

CRMC Care Management – Allscripts Care Management

Cape Regional Physicians Association- Allscripts /Professional Practice

Emergency Department- Allscripts/ED

Quality Improvement- Outside Vendor

Diabetes Education- Soarian for Inpatients
Outpatients transitioning to Soarian

Cape Regional Physician Association Nurse Navigators

Allscripts/ED

Allscripts Care Management

Meaningful Use EHR

•Eliminating manual data abstraction and labor costs which can enable a the CRMC DSRIP Project to redistribute resources to improve care

 •Eliminating the inaccuracy of manual data identification, abstraction and measures calculation

•Preparing for future electronic submissions

 •Understanding measure failures and isolating gaps in care with timely, detailed analytics that have been integrated into hospital workflows

 •Quantifying outcomes for an entire patient population instead of a patient sampling

Identification of Needs Consistent Real Time Data

GOAL: INITIATE CHANGE FOR PATIENT IMPROVEMENT

Reaching out for additional services to meet our needs

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The Capture Tool

In an effort to improve care coordination and better inform the staff members of both CRMC and their reporting partner, CRPA, CRMC outpatient clinic shall be implementing the Capture Tool, more specifically, Capture's ability to absorb, normalize, and real-time reporting to effectively manage the DSRIP population. NJHitec shall be setting up real-time data feeds at each of the hospital and reporting partner practices to provide the DSRIP participants with real-time numerator and denominator data. This will give CRMC the ability to effectively reach out to those target patients and intervene as clinically necessary. Since the Capture Tool is also present in the reporting partner practices, this tool will also serve to inform CRMC and its reporting partner when a DSRIP patient has been seen or even if a numerator had been performed. In an effort to save cost and provide better, timely, and accurate care, the Capture tool provides CRMC with the most up-to-date numerator and denominator data, as well as, consolidates DSRIP data across the entire DSRIP network.
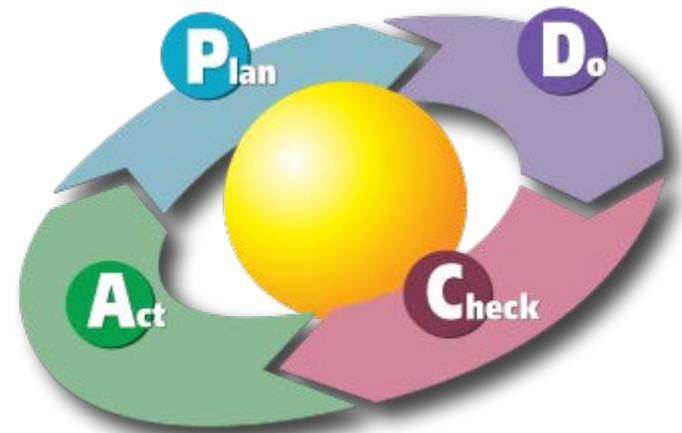
Real Time Data Collection

PERFORMANCE MONITORING

UNDERSTANDING DATA WORK FLOW
WHAT THE DATA REPRESENTS
HOW TO MAKE DATA MEANINGFUL

Best Practice

Project Implementation Update

- Partners: Cape Regional Physician Associates

- Education and Training: Diabetic Foot Assessment
  - Conducting Exam
  - Documenting Exam in the Allscripts EHR

Project Implementation Update

Processes

- Educate provider team on conducting diabetic foot exam
- Purchase of tools needed to perform and distribute to practices
- Educate providers on documentation in Allscripts EHR

Barriers

- Scheduling time with providers during high influx of patients
- Assuring the comprehensive exam is done with accuracy
- Improving the 60 "clicks" required to document in EHR

Project Implementation Update

- Data Abstraction Problematic
- NJHiTech has teamed with our CRPA IT department recently to help with data abstraction tool
- Downloaded Data was not "CLEAN" as it did not represent providers accurately (if primary care was outside of CRPA, specialists would be named)
- Manual abstracted data, based on 2014 attribution list has Diabetic Foot exams being done on 35 of 218 eligible or 16% of the time year to date
- Education on exams began in June/July of 2015: data moving forward will be more helpful to determine if providers are implementing foot exams.

Thank You !

Questions