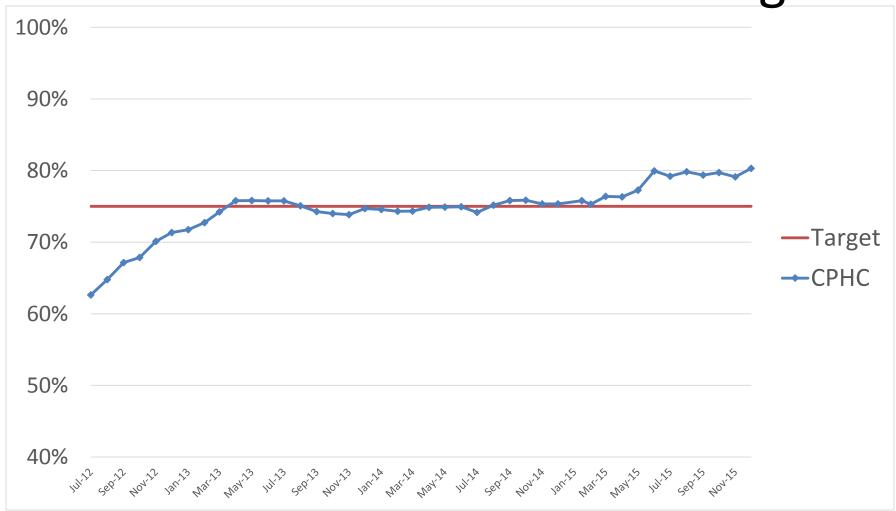


Quality Measures

	СРНС		СОРС		HEDIS M-Cal	HEDIS M-Care	HEDIS Comm
	2014 Q2	2015 Q2	2014 Q2	2015 Q2	2015	2015	2015
Cancer Screening							
Breast (50-74)	74.3%	75.0%	71.0%	75.5%	71%	82%	80%
Cervical (21-65)	84.3%	83.9%	73.3%	72.9%	76%		82%
Colorectal (50-75)	74.9%	80.0%	65.0%	65.2%		77%	72%
DM Care							
HbA1c Test in past 12 mos.	90.2%	92.9%	84.3%	85.4%	91%	96%	94%
HbA1c <8	75.7%	76.7%	60.6%	60.3%	59%	77%	68%
HbA1c >9	7.5%	7.5%	13.4%	14.1%	28%	10%	19%
BP <140/90	83.4%	83.9%	60.8%	69.4%	75%	69%	75%
Urine Alb/Cr in past 12 mos.	80.2%	84.5%	59.4%	65.5%	87%	95%	90%
PCV23 ever	82.3%	82.3%	79.0%	77.18%			
Eye exam in past 24 mos.	76.9%	78.2%	62.9%	57.9%	70%	82%	74%
Foot exam in past 12 mos.	75.8%	86.8%					
Clinical Preventive Services							
*BP <140/90	86.4%	81.9%	79.0%	63.9%	69%	77%	72%
Smoking Status Documentation in past 12 mos.	86.2%	89.4%	77.6%	79.5%			
Smoking Cessation Intervention in past 24 mos.		91.4%		18.5%	81%	92%	86%
Depression Screening ever (>18)	67.7%	75.2%	26.4%	27.0%			
HIV antibody testing at least once	85.4%	89.6%	63.4%	70.3%			

Colorectal Cancer Screening

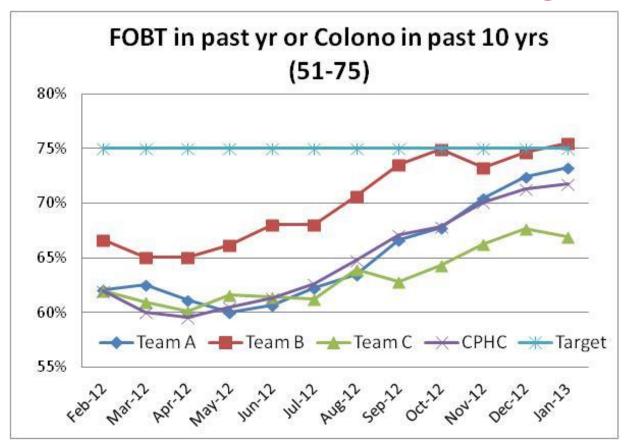


Behavior change: patient, provider, MEA

Levers of change: mission, enhanced staff experience, incentives

Getting back to basic: patients, not percentages

Colorectal Cancer Screening

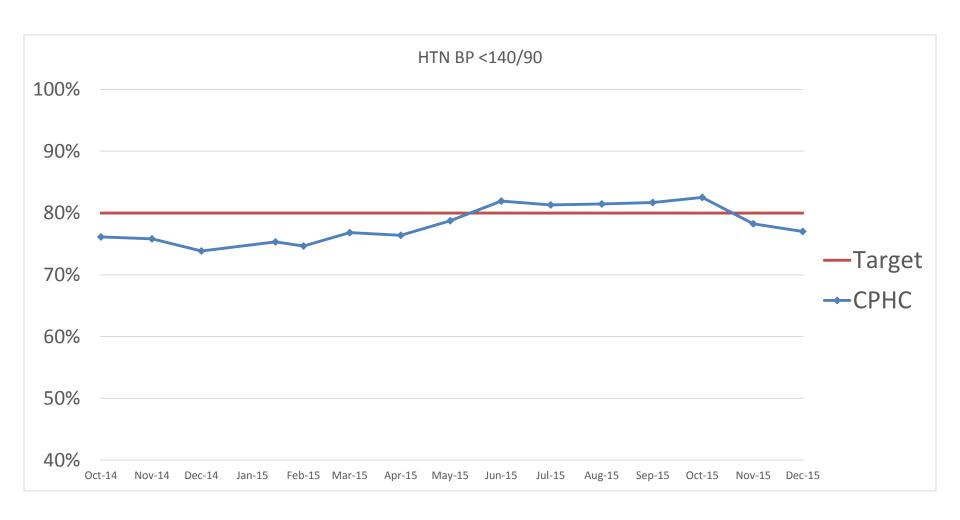


- In-service in June: FIT message and advantage
- Focused outreach: eCW search of pts given FIT but now past due date or not returned within one month
- Sustainability: routine data monitoring and feedback through monthly Clinical Care Team meetings

Denominator

- As important as numerator, sometimes neglected
- Workflow to actively and proactively remove pts (e.g. transferred to another system, pts who acquired Covered CA) to ensure the fidelity of our empanelment
- Improved pt safety, more efficient outreach, cleaner data

Hypertension

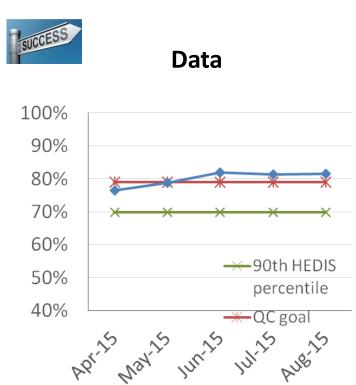




By August 2015, percentage of CPHC patients with HTN being at goal* will increase to at least 79%.

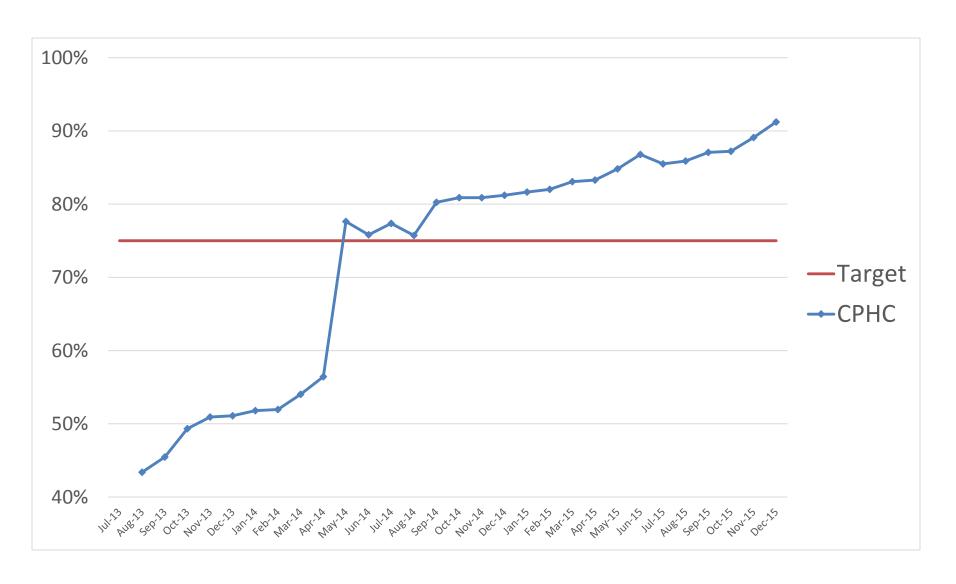
*BP <140/90 for all pts age 18-59 and pts age 60-85 with DM BP <150/90 for pts age 60-85 without DM

Root Causes	PDSA/Changes				
Timely titration of meds	 Team based care empower RN to use standing order based on our BP Bring it Down Algorithm during BP triage visit consult PharmD, POD, or PCP as needed 				
Correct BP measurement by MEA	Refresher for MEA on BP measurement				
Patients with uncontrolled BP who have not returned in more than a year	Patient denominator clean up				
Understanding the impact of BP control on CVA prevention	In-service provided to all staff showing NTT for one CVA prevented in 10 years				

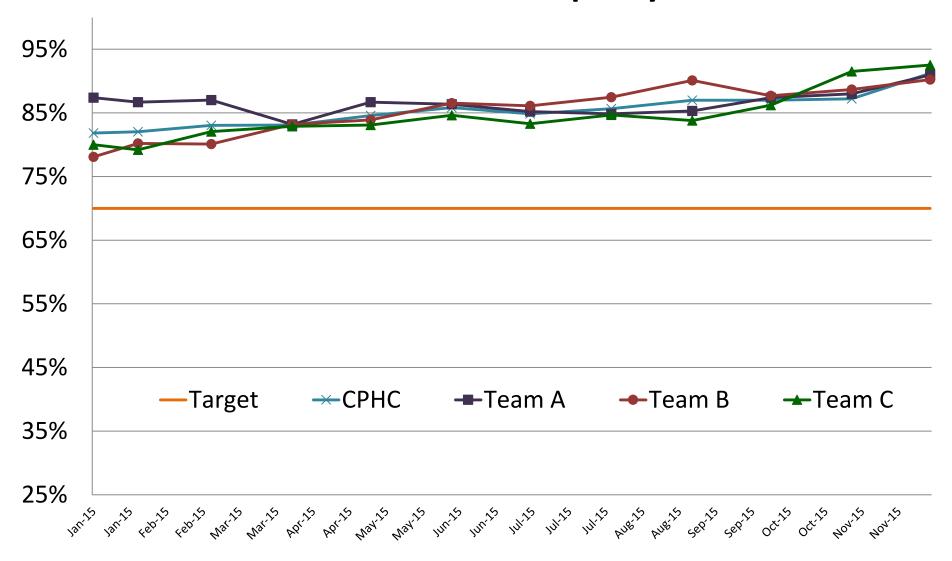


April 2015 Baseline for CPHC was 76%

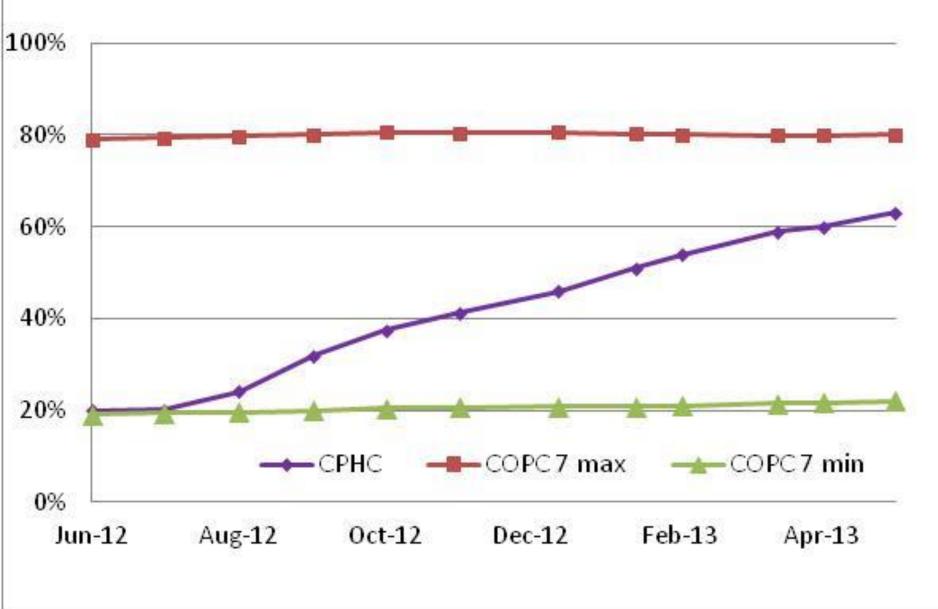
DM Foot Exam



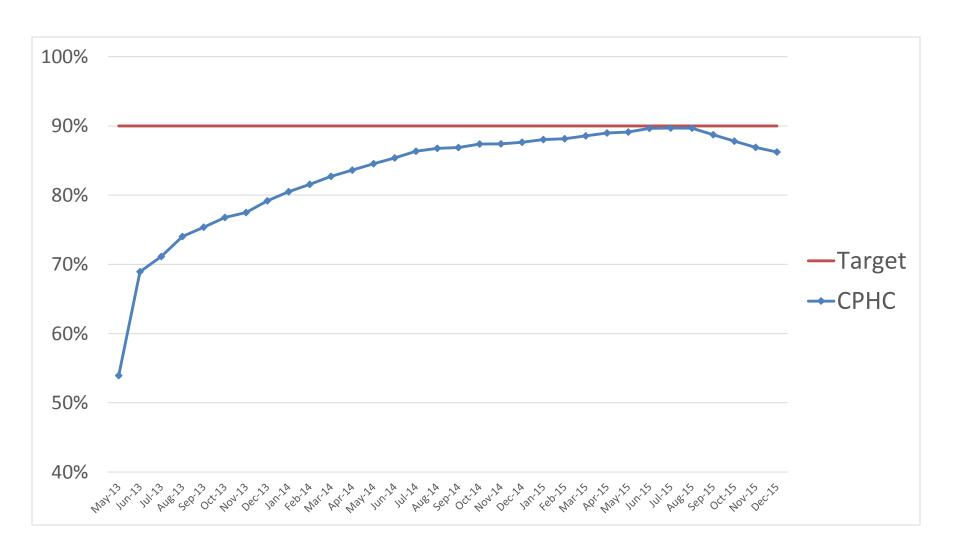
DM Foot Exam in past yr



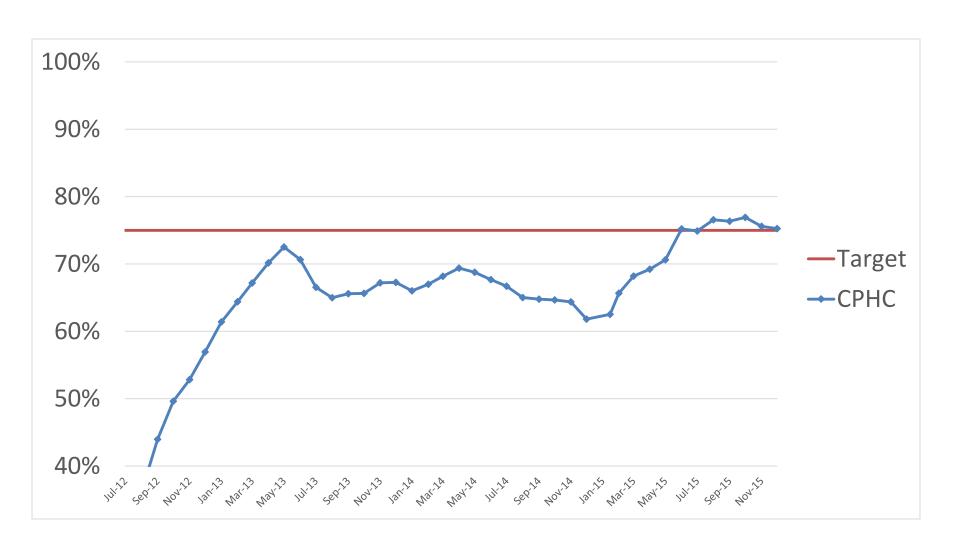


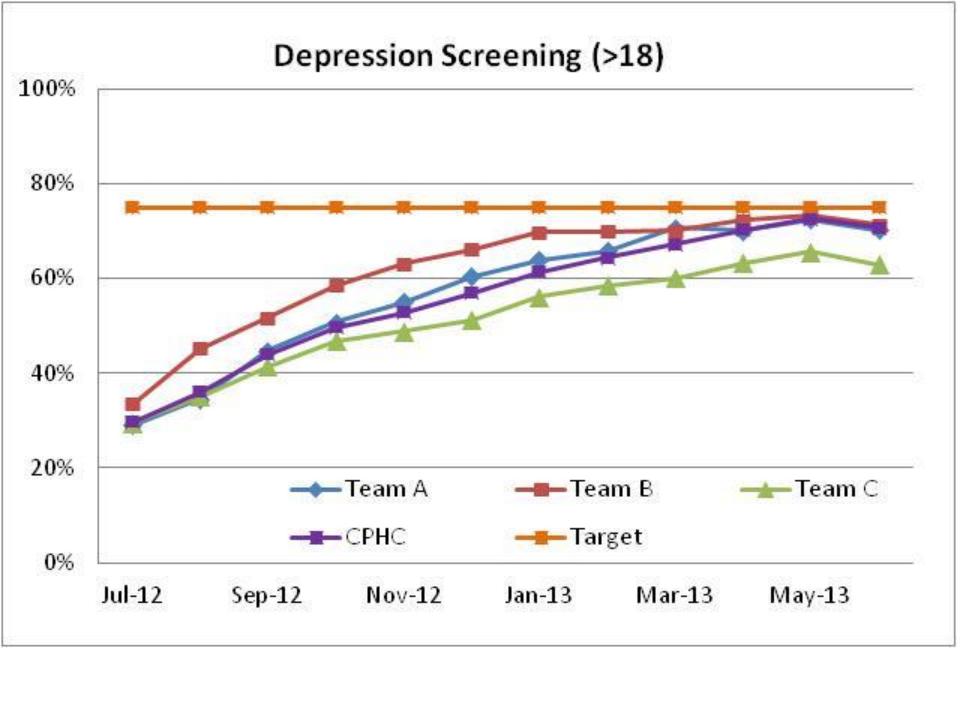


HIV Screening



Depression Screening





Quit smoking rates

	Smoking Status of Those Completed 3 Classes									
	Referral received	Attended	Completed 3 Classes	F/U appt	Medications/N RT	Quit	Decreased	Relapse	Final Quit	%
1st Series: 5/29/2014-6/12/2014	16	12	6	5	5	4	1*	1	3	50 %
2nd Series: 7/16/2014 - 7/30/2014	9	1	0	1	1	0	0	0	0	NA
3rd Series: 9/18/2014 - 10/2/2014	7	1	1	0	0	0	0	0	0	0%
4th Series: 10/8/2014 - 10/22/2014	5	1	0	1	0	0	0	0	0	NA
5th Series: 11/8/2014 - 11/22/2014	10	4	2	2	1	0	1**	0	0	0%

^{*} decreased from 15 cig/day to 3-4 cig/day

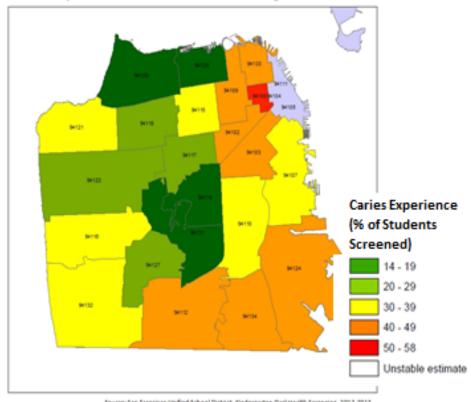
^{**} decreased from 7 cig/day to 2-4 cig/day

Children Oral Health

Figure 5: Certain San Francisco neighborhoods have 2-3 times more children with caries

Chinatown
North Beach
Nob Hill/Russian Hill/Polk
Tenderloin
South of Market
Bayview/Hunter's Point
Visitation Valley
Excelsior
Portola

Caries experience in San Francisco Kindergarteners



Source: San Francisco Unified School District, Kindergarten Oral Health Screening, 2012-2013.

Children Oral Health





- Goal to eliminate health disparity
- SF Oral Health Collaborative
- Chinatown COH Task Force
- FV in PC, Community Ed, Outreach
- Engage media, schools, health fairs
- %kindergarteners with caries
- %age 1-6 with FV in last 6m
- %age 1-6 with DV in past yr





QI Lessons Learned

- Back to Basic: Patients, not percentages
- Same system design may produce different results due to differences in execution
- Investment in front line staff
- Don't forget the denominator
- Transparency and accountability
- CQI culture and infrastructure a must
- Celebrate success