

Quality Improvement: Bartram

Immunization Measure		
Measure 1: Influenza vaccination	1. Measure selected for improvement; reason for selection	As a pediatric practice, our patients are considered to be one of the more vulnerable patient populations when it comes to the Flu virus. For this reason, we feel that it is important to continually focus on improving our numbers with regards to patients that receive this important immunization
	2./3. Baseline performance measurement; numeric goal for improvement (QI 01)	<p>Baseline Start Date: 10/18/2016</p> <p>Baseline End Date: 12/1/2016</p> <p>Baseline Performance Measurement: 54%</p> <p>Numeric Goal: to increase our baseline from 54% to 60%</p>
	4. Actions taken to improve and work toward goal; dates of initiation (QI 08)	<p>Action: To improve accessibility Flu Clinics were provided at all locations. Visits are for flu shots only and will be a nurse only visit.</p> <p>Date Action Initiated: 10/18/2017</p>
	5. Re-measure performance	<p>Start Date: 10/18/2017</p> <p>End Date: 12/1/2017</p> <p>Performance Re-measurement: 48%</p>
	6. Assess actions; describe improvement	No improvements were noted. A possible reason for the lack of improvement could be that there was only one Flu Clinic provided at the Bartram location or a larger population of patients did not want to receive the flu vaccination. Our patients could also have received free flu vaccinations from their local pharmacies.

Behavioral Health Measure

Measure 2: ADHD Management	1. Measure selected for improvement; reason for selection	As uncontrolled ADHD can result in negative impacts in other areas of our patient lives, we feel it is important to improve compliance with ADHD Management.
	2./3. Baseline performance measurement; numeric goal for improvement (QI 01)	<p>Baseline Start Date: 6/1/17</p> <p>Baseline End Date: 7/3/2017</p> <p>Baseline Performance Measurement:</p> <p>5.41%</p> <p>Numeric Goal (% or #): 10% increase from baseline</p>
	4. Actions taken to improve and work toward goal; dates of initiation (QI 08)	<p>Action: A Quality Metrics team member developed a new internal ADHD patient tracking system, with the assistance of the pop-up reminders that are embedded in the EMR for patients' due/overdue ADHD maintenance visit, to ensure compliance with maintenance.</p> <p>Date Action Initiated: 07/05/2017</p> <p>Additional Actions: Insurance companies put in place a monetary incentive for Angel Kids Pediatrics and our providers to ensure appropriate ADHD maintenance.</p>
	5. Re measure performance	<p>Start Date: 09/01/2017</p> <p>End Date: 12/01/2017</p> <p>Performance Re measurement (% or #):</p> <p>31.13%</p>
	6. Assess actions; describe improvement.	During the three month re measurement period from September 2017 to December 2017, there was a 25.72 increase in the number of patients who received ADHD management plans at their maintenance visit.

Preventative care Measure

Measure 3: Nutrition Counseling for Children	1. Measure selected for improvement; reason for selection	As obesity is becoming a bigger problem in our country and the impacts of obesity reach into many areas of a patient's health, we feel that it is imperative to increase education to improve our patients' ability to make healthy nutritional choices.
	2./3. Baseline performance measurement; numeric goal for improvement (QI 08)	<p>Baseline Start Date: 05/01/2017</p> <p>Baseline End Date: 06/01/2017</p> <p>Baseline Performance Measurement: 89.57%</p> <p>Numeric Goal: 5% increase from baseline</p>
	4. Actions taken to improve and work toward goal; dates of initiation (QI 08)	<p>Action: Providers were made aware of their clinical quality measures and the actions that needed to be taken to improve their performance. Providers were instructed to begin providing nutritional counseling at each well child check and include the ICD-10 code in the rendered services so that the report could be pulled to check progress.</p> <p>Date Action Initiated: 06/01/2017</p> <p>Additional Actions: Insurance companies put in place a monetary incentive for Angel Kids Pediatrics and for our providers to ensure appropriate health screening.</p>
	5. Re measure performance (QI 12)	<p>Start Date: 07/03/2017</p> <p>End Date: 08/03/2017</p> <p>Performance Re measurement : 93.36%</p>
	6. Assess actions; describe improvement. (QI 12)	Although we did not meet the numeric goal, there was a 3.79% improvement. The patient population also increased by 90 patients during the re-measurement period.