Practice:	**Sample Practice**
Topic:	**Asthma**
Practice ID:	194836768173
Contact:	#N/A
QIC:	Sample
Report Period:	Aug-10
Last Practice Contact:	1/1/2010
Date of Final Report:	

AIM

Enter the team aim statement:	

PRACTICE ASSESSMENTS for August 2010		Notes
Overall Team Assessment	1.0 - Forming team	
Team Engagement	0 - No activity	
Leadership	1 - Single champion	

CHANGE ASSESSMENTS for August 2010		Notes
Implement Electronic Database (Registry) ☑	1 - Selected	
• Select, install registry or EHR to identify patients	1 - Planning	
• Develop registry workflow & assign team roles	1 - Planning	
• Populate registry with patient demographic data	0 - No activity	
• Enter patient clinical data	0 - No activity	
• Produce reports on measures	0 - No activity	
• Use Registry to manage patients, population	0 - No activity	
Develop a template for planned care ☑	0 - No Activity	
• Select template or create flowsheet	0 - No activity	
• Determine staff workflow to support use of template	0 - No activity	
• Use template with all patients	0 - No activity	
• Make sure registry populated each time template used	0 - No activity	
• Monitor use of template	0 - No activity	
Self-Management Support ☑	0 - No Activity	
• Obtain patient education materials	0 - No activity	
• Determine staff workflow to support SMS	0 - No activity	
• Provide training to staff in SMS techniques	0 - No activity	
• Set patient goals collaboratively	0 - No activity	
• Document & monitor patient progress toward goals	0 - No activity	
• Link with community resources	0 - No activity	
Use Asthma Protocol ☑	0 - No Activity	
• Assess and document asthma severity and control	0 - No activity	
• Prescribe appropriate asthma medications & monitor overuse of beta agonists	0 - No activity	
• Use Asthma Management plans	0 - No activity	
• Establish visit frequency protocol	0 - No activity	
• Assess and treat co-morbidities	0 - No activity	
• Assess, counsel, and prevent exposure to environmental triggers	0 - No activity	

Practice:	**Sample Practice**

Date	Note

PRACTICE ASSESSMENT

Overall Team Assessment

0.5 - Intent to Participate	Practice has completed application and participated in informational call but the practice aim has not been customized nor has the QI team been formed.
1.0 - Forming Team	An aim statement has been completed and reviewed. Individuals have been assigned to QI Team, but no work has been accomplished yet.
1.5 - Planning for the Project Has Begun	Team is engaged in planning improvement activities but no testing has begun.
2.0 - Activity, But No Changes	Initial testing cycles for team learning and planning have begun. For example, testing has started on measurement, data collection, study of processes, surveys, etc.
2.5 - Changes Tested, But No Improvement	Initial cycles for testing changes have begun and some PDSA results have been studied.
3.0 - Modest Improvement 2 Areas	Successful tests of changes have been completed for up to 2 high-leverage changes. Some improvements have been noted in run charts, monthly data, and monitoring data in at least 2 change areas.
3.5 - Improvement 3 Areas	Improvement toward project goals is demonstrated in at least 3 change areas.
4.0 - Significant Improvement	Practice-wide implementation has begun for all components of the change package. Testing and implementation is occurring in all 4 high-leverage change areas. Progress in monthly measures of at least 50% can be seen in monthly reports.
4.5 - Sustainable Improvement	Data on IPIP measures begins to indicate sustainability of changes and improvements across the practice.
5.0 - Outstanding Sustainable Results	Implementation cycles have been completed and all project goals and expected results have been accomplished. Organizational changes have occurred to support permanent improvements.

Team Engagement

0 - No Activity	No improvement activity exists.
1 - Occasional Meetings	Occasional meetings or discussion regarding improvement but no organization-wide understanding of improvement work or aim exists.
2 - Regular Meetings	Improvement team communicates regularly (through meetings, huddles, email, memos, etc) to plan tests & discuss results. Improvement team can describe project aim and measures.
3 - Active Engagement	Improvement team is planning and discussing multiple tests simultaneously and communicates findings to each other. Improvement progress is communicated to entire office staff. Most staff can describe improvement aim and measures. Improvement team participates in collaborative activities such as conference calls and listserv.

Leadership

0 - No Support	No management or leadership support for improvement work exists.
1 - Single Champion	A manager or physician champion is involved but no organized improvement structure exists. "Try & see approach" is the norm for improvement activities.
2 - Special Projects	A leader who supports improvement activities is identified, temporary tasks and roles to support improvement are assigned to staff, and some coordination of aim among projects exists (when multiple projects).
3 - Organizational Integration	QI work is integrated into daily routines, roles to support improvement are assigned, and performance evaluations are tied to improvement activities. Leadership for improvement exists to select and launch new improvement efforts (e.g., identifying aim, assigning team).

Sampling Methods (dropdown in Edit/Add Practice dialog)	
Convenience Sample	Charts selected for review each month; not a systematic random sample.
Random Chart Review	Charts selected for review using a systematic sampling method (e.g. random number table), so that all patient charts are equally likely to be reviewed.
Registry/EHR Incremental	Patients are added to a registry or EHR system as the patients appear for visits.
Registry/EHR Pilot Population	All patients in a pilot population are pre-loaded into the registry or EHR system at the beginning of participation.
Registry/EHR Total Population	All patients in the practice are pre-loaded into the registry or EHR system at the beginning of participation.

CHANGES

Registry	
0 - No Activity	No activity on registry adoption or use.
1 - Selected	Practice has chosen a registry, but not yet begun using it.
2 - Pr. Demographics	Practice has registry installed on a computer, set up a template, entered demographic data on patients of interest (e.g., diabetes) or has a process outlined to systematically enter the data.
3 - Testing Workflow	Practice is testing process for entering clinical data into registry; not yet using the registry to help with daily care of patients.
4 - Patient Management	All clinical data is entered into the registry and practice is using the registry daily to plan care for patients and is able to produce consistent reports on population performance.
5 - Full Integration	Registry is kept up to date with consistent, reliable processes. Practice has checks and monitors registry processes. Practice uses registry to manage entire patient panel (population).

Planned Care Template	
0 - No Activity	No activity on planned care template.
1 - Template Designed	Practice has a template for planned care but has not yet begun using the template.
2 - Roles Assigned	Clear delineation of staff roles and process flow to support use of template has occurred. Team is starting to test using the template.
3 - Testing Workflow	Team is testing template and ensuring that the process flow is working. May only be occurring in a part of the practice, though could be done across the clinic.
4 - Partial Implementation	Process is implemented across the entire clinic, but practice is still working on consistency throughout clinic. To get a 4, the practice should have a consistent process that works at least in part of the clinic.
5 - Full Implementation	Template is used with every patient with target condition, consistently completed, and entered into the registry. Ongoing monitoring of system to ensure the template is used consistently is occurring.

Protocols	
0 - No Activity	No activity on protocols.
1 - Protocols Identified	Practice has identified protocols as examples and begun the process of customizing the protocols for their own practice.
2 - Planning Testing	Practice has version of template and planning tests of implementation. Often in only one part of the practice, but could be across the entire clinic.
3 - Testing Workflow	Successful testing of the process for using the protocol is occurring. Ongoing implementation and optimization of the process is underway.
4 - Use >= 70% of Encounters	Spread of the process across the entire practice is occurring. The reliability of using the protocol is above 70%.
5 - Use >= 90% of Encounters	Reliability of protocol use is over 90% throughout the entire practice. Ongoing monitoring of the system to ensure that protocols are used consistently is also occurring.

Self-Management Support

0 - No Activity	No activity on self-management support.
1 - Materials On Hand	Practice has obtained patient education materials and handouts to support self-management.
2 - Roles Assigned	Practice has completed a plan for providing self-management support that includes all of the elements indicated in the change package. Staff roles and responsibilities are clearly delineated.
3 - Testing Workflow	Practice actively testing their process for self-management support. All staff involved in self-management support has undergone appropriate training. Patient goal setting and systematic follow-up are being implemented at least in part of the practice.
4 - Implementation 70%	Self-management support is consistently offered. Practice documents self-management goals for patient in the chart or registry, getting performed across the entire practice. Monitoring reliability is occurring.
5 - Implementation 90%	Patients consistently have self-management goals documented, follow-up system is reliable, staff are comfortable providing self-management support. Ongoing monitoring ensures the process is carried out consistently for all patients.

KEY DRIVER DIAGRAM

<u>Outcomes</u>	<u>Key Drivers</u>	<u>Intervention/Change Concepts</u>

Use Registry to Manage Population
- **Identify each affected patient at every visit**
- **Identify needed services for each patient**
- **Recall patients for follow-up**

Implement Registry
- Determine staff workflow to support registry
- Populate registry with patient data
- Routinely maintain registry data
- Use registry to manage patient care & support population management

Improved clinical outcomes for patients with diabetes and asthma

Measures of success:
Diabetes:
- >70% BP < 130/80
- >70% LDL < 100 mg/dl
- <5% A1c greater than 9.0%
- >80% received dilated eye exam
- >90% tested (or treated) for nephropathy
- >90% counseled to stop tobacco use

Asthma:
- >90% control assessed
- >90% with persistent asthma on anti-inflammatory medication
- >90% with influenza vaccination
- >75% with: assessment of control + anti-inflammatory + influenza vaccination

Planned Care
- **Care Team is aware of patient needs and work together to ensure all needed services are completed**

Use Templates for Planned Care
- Select template tool from registry or create a flow sheet
- Determine staff workflow to support template
- Use template with all patients
- Ensure registry updated each time template used
- Monitor use of template

Standardized Care Processes
- **Practice-wide guidelines implemented per condition (asthma, diabetes)**

Employ Protocols
- Select & customize evidence-based protocols for asthma and diabetes
- Determine staff workflow to support protocol, including standing orders
- Use protocols with all patients
- Monitor use of protocols

Self Management Support
- **Realized patient and care team partnership**

Provide Self-Management Support
- Obtain patient education materials
- Determine staff workflow to support SMS
- Provide training to staff in SMS
- Set patient goals collaboratively
- Document & monitor patient progress toward goals
- Link with community resources