

Carolina Kids Individual Clinician Performance Summary Report, 2016

As part of its continuous quality improvement initiatives, Carolina Kids Pediatrics provides a result summary of recent quality improvement projects to our patients and their families. This is a summary of individual clinician quality improvement initiatives from late 2015 to early 2017.

INFLUENZA VACCINATION: *The practice sought to improve rates of flu vaccination among children less than 2 to over 80% for all providers using patient outreach, including social media postings.*

Measurement Period	Performance Measurement	Group Goal
<u>Robert Foor:</u>		
8/1/2016 – 9/15/2016	85%	>80%
10/1/2016 – 11/15/2016	80%	>80%
12/1/2016 – 1/15/2017	89%	GOAL MET
<u>Christian Nechyba:</u>		
8/1/2016 – 9/15/2016	83%	GOAL MET
10/1/2016 – 11/15/2016	82%	GOAL MET
12/1/2016 – 1/15/2017	83%	GOAL MET
<u>Jeff Tanaka:</u>		
8/1/2016 – 9/15/2016	73%	>80%
10/1/2016 – 11/15/2016	76%	>80%
12/1/2016 – 1/15/2017	85%	GOAL MET
<u>Leanna Willey:</u>		
8/1/2016 – 9/15/2016	67%	>80%
10/1/2016 – 11/15/2016	76%	>80%
12/1/2016 – 1/15/2017	94%	GOAL MET
<u>Stephanie Dagen:</u>		
8/1/2016 – 9/15/2016	50%	>80%
10/1/2016 – 11/15/2016	100%	GOAL MET
12/1/2016 – 1/15/2017	100%	GOAL MET

NUTRITIONAL COUNSELING FOR CHILDREN & ADOLESCENTS: *Although the practice always sought to include nutritional guidance at all well visits, we sought to include more structured, standardized counseling on nutrition in our clinic notes and clinic summaries posted on the patient portal. The 0% during baseline indicates that this newer, more structured nutrition information was not introduced into our clinic notes until the beginning of 2016.*

Measurement Period	Performance Measurement	Group Goal
<u>Robert Foor:</u>		
8/15/2015 – 12/30/2015	0%	>25%
1/1/2016 – 6/30/2016	65%	>75%
7/1/2016 – 12/31/2016	100%	GOAL MET

Christian Nechyba:

8/15/2015 – 12/30/2015	0%	>25%
1/1/2016 – 6/30/2016	68%	>75%
7/1/2016 – 12/31/2016	100%	GOAL MET

Jeff Tanaka:

8/15/2015 – 12/30/2015	0%	>25%
1/1/2016 – 6/30/2016	71%	>75%
7/1/2016 – 12/31/2016	100%	GOAL MET

Leanna Willey:

8/15/2015 – 12/30/2015	0%	>25%
1/1/2016 – 6/30/2016	70%	>75%
7/1/2016 – 12/31/2016	100%	GOAL MET

Stephanie Dagen:

8/15/2015 – 12/30/2015	0%	>25%
1/1/2016 – 6/30/2016	86%	GOAL MET
7/1/2016 – 12/31/2016	100%	GOAL MET

ADHD FOLLOW-UP CARE FOR CHILDREN PRESCRIBED ADHD MEDICATION: *The practice sought to achieve increased follow up for children newly diagnosed with ADHD in accordance with new guidelines, including at least one clinic visit within 30 days after starting medication, and at least 2 other clinic visits in the following 9 months.*

Measurement Period	Performance Measurement	Group Goal
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Robert Foor:

8/15/2015 – 12/30/2015	100%	GOAL MET
1/1/2016 – 6/30/2016	100%	GOAL MET
7/1/2016 – 12/31/2016	100%	GOAL MET

Christian Nechyba:

8/15/2015 – 12/30/2015	71%	>80%
1/1/2016 – 6/30/2016	96%	>98%
7/1/2016 – 12/31/2016	100%	GOAL MET

Jeff Tanaka:

8/15/2015 – 12/30/2015	80%	>80%
1/1/2016 – 6/30/2016	93%	>98%
7/1/2016 – 12/31/2016	100%	GOAL MET

Leanna Willey:

8/15/2015 – 12/30/2015	80%	>80%
1/1/2016 – 6/30/2016	88%	>98%
7/1/2016 – 12/31/2016	100%	GOAL MET

Stephanie Dagen:

8/15/2015 – 12/30/2015	N/A	>80%
1/1/2016 – 6/30/2016	100%	GOAL MET
7/1/2016 – 12/31/2016	100%	GOAL MET

APPROPRIATE TREATMENT FOR CHILDREN WITH URI: *This measures whether antibiotics are used judiciously and only when evidence of bacterial infection is present in children with upper respiratory illnesses (URIs).*

Measurement Period	Performance Measurement	Group Goal
<u>Robert Foor:</u>		
10/15/2016 – 11/15/2016	83%	>95%
11/15/2016 – 12/15/2016	100%	GOAL MET
12/15/2016 – 1/15/2017	100%	GOAL MET
<u>Christian Nechyba:</u>		
10/15/2016 – 11/15/2016	87%	>95%
11/15/2016 – 12/15/2016	94%	>95%
12/15/2016 – 1/15/2017	100%	GOAL MET
<u>Jeff Tanaka:</u>		
10/15/2016 – 11/15/2016	90%	>95%
11/15/2016 – 12/15/2016	91%	>95%
12/15/2016 – 1/15/2017	100%	GOAL MET
<u>Leanna Willey:</u>		
10/15/2016 – 11/15/2016	91%	>95%
11/15/2016 – 12/15/2016	97%	GOAL MET
12/15/2016 – 1/15/2017	97%	GOAL MET
<u>Stephanie Dagen:</u>		
10/15/2016 – 11/15/2016	96%	GOAL MET
11/15/2016 – 12/15/2016	91%	>95%
12/15/2016 – 1/15/2017	89%	>95%

SCREENING FOR CLINICAL DEPRESSION IN ADOLESCENTS: *The practice sought to improve routine screening for depression in all adolescents.*

Measurement Period	Performance Measurement	Performance Goal
<u>Robert Foor:</u>		
8/1/2016 – 8/30/2016	19%	>75%
10/1/2016 – 10/31/2016	16%	>75%
11/1/2016 – 11/30/2016	58%	>75%
<u>Christian Nechyba:</u>		
8/1/2016 – 8/30/2016	20%	>75%
10/1/2016 – 10/31/2016	67%	>75%
11/1/2016 – 11/30/2016	45%	>75%
<u>Jeff Tanaka:</u>		
8/1/2016 – 8/30/2016	44%	>75%
10/1/2016 – 10/31/2016	33%	>75%
11/1/2016 – 11/30/2016	47%	>75%
<u>Leanna Willey:</u>		
8/1/2016 – 8/30/2016	31%	>75%

10/1/2016 – 10/31/2016	42%	>75%
11/1/2016 – 11/30/2016	83%	GOAL MET
<u>Stephanie Dagen:</u>		
8/1/2016 – 8/30/2016	14%	>75%
10/1/2016 – 10/31/2016	16%	>75%
11/1/2016 – 11/30/2016	22%	>75%

PRIMARY CARIES PREVENTION INTERVENTION AS OFFERED BY PCPs: *The practice initiated fluoride varnish in children once teeth erupt until their 2 year well check to decrease the prevalence of early tooth decay prior to the establishment of routine dental visits. As the practice began performing fluoride varnish in spring 2016, we expect performance to improve gradually over the next several years.*

<u>Measurement Period</u>	<u>Performance Measurement</u>	<u>Group Goal</u>
<u>Robert Foor:</u>		
1/1/2016 – 2/15/2016	0%	>5%
4/15/2016 – 5/30/2016	5%	>10%
7/1/2016 – 8/15/2016	3%	>10%
<u>Christian Nechyba:</u>		
1/1/2016 – 2/15/2016	0%	>5%
4/15/2016 – 5/30/2016	15%	GOAL MET
7/1/2016 – 8/15/2016	12%	GOAL MET
<u>Jeff Tanaka:</u>		
1/1/2016 – 2/15/2016	0%	>5%
4/15/2016 – 5/30/2016	6%	>10%
7/1/2016 – 8/15/2016	6%	>10%
<u>Leanna Willey:</u>		
1/1/2016 – 2/15/2016	0%	>5%
4/15/2016 – 5/30/2016	3%	>10%
7/1/2016 – 8/15/2016	5%	>10%
<u>Stephanie Dagen:</u>		
1/1/2016 – 2/15/2016	0%	>5%
4/15/2016 – 5/30/2016	8%	>10%
7/1/2016 – 8/15/2016	8%	>10%

NEWBORN SCREEN PERFORMANCE, DOCUMENTATION & FOLLOWUP: *Although the practice follows up all newborn metabolic screens and hearing screens performed on infants, this information was often filed in “paper” charts. This initiative sought to improve integration of these results in our electronic medical record.*

<u>Measurement Period</u>	<u>Performance Measurement</u>	<u>Performance Goal</u>
<u>Robert Foor:</u>		
8/15/2016 – 10/1/2016	76%	GOAL MET
10/5/2016 – 11/20/2016	79%	GOAL MET

11/25/2016 – 1/5/2017	81%	GOAL MET
<u>Christian Nechyba:</u>		
8/15/2016 – 10/1/2016	57%	>75%
10/5/2016 – 11/20/2016	79%	GOAL MET
11/25/2016 – 1/5/2017	81%	GOAL MET
<u>Jeff Tanaka:</u>		
8/15/2016 – 10/1/2016	60%	>75%
10/5/2016 – 11/20/2016	76%	GOAL MET
11/25/2016 – 1/5/2017	80%	GOAL MET
<u>Leanna Willey:</u>		
8/15/2016 – 10/1/2016	53%	>75%
10/5/2016 – 11/20/2016	78%	GOAL MET
11/25/2016 – 1/5/2017	81%	GOAL MET
<u>Stephanie Dagen:</u>		
8/15/2016 – 10/1/2016	53%	>75%
10/5/2016 – 11/20/2016	87%	GOAL MET
11/25/2016 – 1/5/2017	88%	GOAL MET

AVAILABILITY OF ROUTINE ANNUAL WELL CHECK APPOINTMENTS WITHIN 3 WEEKS

(% of weekdays during measurement period when routine annual well appointment within 3 weeks available) This measure sought to improve availability of non-urgent routine well visit appointments by improving availability of appointment slots for well visits at additional times of day.

<u>Measurement Period</u>	<u>Performance Measurement</u>	<u>Performance Goal</u>
<u>Robert Foor:</u>		
10/1/2016 – 11/15/2016	0/33 = 0%	>50%
1/1/2017 – 2/15/2017	30/33 = 91%	GOAL MET
<u>Christian Nechyba:</u>		
10/1/2016 – 11/15/2016	2/33 = 6%	>50%
1/1/2017 – 2/15/2017	32/33 = 97%	GOAL MET
<u>Jeff Tanaka:</u>		
10/1/2016 – 11/15/2016	3/33 = 9%	>50%
1/1/2017 – 2/15/2017	32/33 = 97%	GOAL MET
<u>Leanna Willey:</u>		
10/1/2016 – 11/15/2016	1/33 = 3%	>50%
1/1/2017 – 2/15/2017	30/33 = 91%	GOAL MET
<u>Stephanie Dagen:</u>		
10/1/2016 – 11/15/2016	5/33 = 15%	>50%
1/1/2017 – 2/15/2017	32/33 = 97%	GOAL MET

Carolina Kids Pediatrics: Practice Level Performance Results Report, 2016

As part of its continuous quality improvement initiatives, Carolina Kids Pediatrics provides a result summary of recent quality improvement projects to our patients and their families. This is a summary of practice-level quality improvement initiatives from late 2015 to early 2017.

INFLUENZA VACCINATION: *The practice sought to improve rates of flu vaccination among children less than 2 to over 80% for all providers using patient outreach, including social media postings.*

<u>Measurement Period</u>	<u>Performance Measurement</u>	<u>Performance Goal</u>
8/1/2016 – 9/15/2016	75.5%	>80%
10/1/2016 – 11/15/2016	78.4%	>80%
12/1/2016 – 1/15/2017	88.4%	GOAL MET

INFLUENZA VACCINATION: STRATIFIED BY SOCIOECONOMIC STATUS (PRIVATE INSURANCE VS. MEDICAID):

<u>Measurement Period</u>	<u>Performance Measurement (Medicaid/Private)</u>	<u>Performance Goal (Medicaid/Private)</u>
8/1/2016 – 9/15/2016	47%/77%	>80%/>80%
12/1/2016 – 1/15/2017	85%/88%	GOAL MET

NUTRITIONAL COUNSELING FOR CHILDREN & ADOLESCENTS: *Although the practice always sought to include nutritional guidance at all well visits, we sought to include more structured, standardized counseling on nutrition in our clinic notes and clinic summaries posted on the patient portal. The 0% during baseline indicates that this newer, more structured nutrition information was not introduced into our clinic notes until the beginning of 2016.*

<u>Measurement Period</u>	<u>Performance Measurement</u>	<u>Performance Goal</u>
8/15/2015 – 12/30/2015	0%	>25%
1/1/2016 – 6/30/2016	69.6%	>75%
7/1/2016 – 12/31/2016	99.9%	GOAL MET

ADHD FOLLOW-UP CARE FOR CHILDREN PRESCRIBED ADHD MEDICATION: *The practice sought to achieve increased follow up for children newly diagnosed with ADHD in accordance with new guidelines, including at least one clinic visit within 30 days after starting medication, and at least 2 other clinic visits in the following 9 months.*

<u>Measurement Period</u>	<u>Performance Measurement</u>	<u>Performance Goal</u>
8/15/2015 – 12/30/2015	74.1%	>80%
1/1/2016 – 6/30/2016	93.3%	>98%
7/1/2016 – 12/31/2016	100%	GOAL MET

APPROPRIATE TREATMENT FOR CHILDREN WITH URI: *This measures whether antibiotics are used judiciously and only when evidence of bacterial infection is present in children with upper respiratory illnesses (URIs).*

Measurement Period	Performance Measurement	Performance Goal
10/15/2016 – 11/15/2016	90.9%	>95%
11/15/2016 – 12/15/2016	94.4%	>95%
12/15/2016 – 1/15/2017	97.7%	GOAL MET

SCREENING FOR CLINICAL DEPRESSION IN ADOLESCENTS: *The practice sought to improve routine screening for depression in all adolescents.*

Measurement Period	Performance Measurement	Performance Goal
8/1/2016 – 8/30/2016	25.9%	>75%
10/1/2016 – 10/31/2016	32.4%	>75%
11/1/2016 – 11/30/2016	51%	>75%

ASTHMA ASSESSMENT: *This measure evaluated what percentage of patients with significant, persistent asthma had a review of their individual treatment plan within the past year.*

Measurement Period	Performance Measurement	Performance Goal
7/15/2016 – 8/15/2016	88.2%	>95%
9/1/2016 – 10/1/2016	91.7%	>95%
10/15/2016 – 11/15/2016	100%	GOAL MET

PRIMARY CARIES PREVENTION INTERVENTION OFFERED BY PCPS: *The practice initiated fluoride varnish in children once teeth erupt until their 2 year well check to decrease the prevalence of early tooth decay prior to the establishment of routine dental visits. As the practice began performing fluoride varnish in spring 2016, we expect performance to improve gradually over the next several years.*

Measurement Period	Performance Measurement	Performance Goal
1/1/2016 – 2/15/2016	0%	>5%
5/1/2016 – 6/15/2016	7.8%	>10%
7/1/2016 – 8/15/2016	8.1%	>10%

NEWBORN SCREENING: *Although the practice follows up all newborn metabolic screens and hearing screens performed on infants, this information was often filed in “paper” charts. This initiative sought to improve integration of these results in our electronic medical record.*

Measurement Period	Performance Measurement	Performance Goal
8/15/2016 – 10/1/2016	53.3%	>75%
10/5/2016 – 11/20/2016	55%	>75%
11/25/2016 – 1/5/2017	80%	GOAL MET

AVAILABILITY OF ROUTINE ANNUAL WELL CHECK APPOINTMENTS:

(% of weekdays during measurement period when routine annual well appointment within 3 weeks available) This measure sought to improve availability of non-urgent routine well visit appointments by improving availability of appointment slots for well visits at additional times of day.

Measurement Period	Performance Measurement	Performance Goal
10/1/2016 – 11/15/2016	0%	>50%
1/1/2017 – 2/15/2017	97%	GOAL MET

IMPLEMENTATION OF TEXT MESSAGING/PORTAL MESSAGING APPOINTMENT REMINDERS:

(% of appointment reminders provided by text/portal messaging instead of by telephone) The practice sought to transition from primarily providing appointment reminders by telephone to primarily providing reminders by text message/patient portal message:

Measurement Period	Performance Measurement	Performance Goal
10/1/2016 – 11/1/2016	0%	>20%
1/1/2017 – 1/31/2017	27%	>20%