



What Did We Really Accomplish? Improving Compliance & Documentation of Core Measures for JACHO

Carondelet Health Network
Tucson, Arizona
September 2009



OUR MISSION | EXCEPTIONAL MEDICINE · EXCEPTIONAL CARE



Who We Are

- ***Julie A. Jenkins RN, MSN, CCRN***

Education Coordinator

Tucson Heart Hospital

Network Education & Professional Practice

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- ***Kurt Remmert RN***

Solution Delivery Manager

CTG HealthCare Solutions

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Our Hospitals

- St. Mary's Hospital
 - 402 Bed hospital
 - Phase 1 Implementation
 - Orders/Clinical Documentation (minimal)
 - Results Viewing/PathNet/RadNet
 - PharmNet (paper MAR)
 - Scheduling/Profile
 - <http://www.carondelet.org/information/csm.aspx>





Our Hospitals

- St. Mary's Hospital
- St. Joseph Hospital
 - 478 Bed hospital
 - Phase 1 Implementation
 - Orders/Clinical Documentation (minimal)
 - Results Viewing/PathNet/RadNet
 - PharmNet (paper MAR)
 - Scheduling/Profile
 - <http://www.carondelet.org/information/csj.aspx>





Our Hospitals

- St. Mary's Hospital
- St. Joseph Hospital
- Holy Cross Hospital
 - 74 beds plus 10 bassinets.
 - Phase 1 Implementation
 - Orders/Clinical Documentation (minimal)
 - Results Viewing/PathNet/RadNet
 - PharmNet (paper MAR)
 - Scheduling/Profile
- <http://www.carondelet.org/information/chc.aspx>





Our Hospitals

- St. Mary's Hospital
- St. Joseph Hospital
- Holy Cross Hospital
- Tucson Heart Hospital
 - 60 Bed
 - Phase 2 Implementation
 - Orders/Clinical Documentation/IView
 - Results Viewing/FirstNet/PathNet/RadNet/
 - PharmNet/Scheduling/Profile
 - <http://www.tucsonhearthospital.com/>





Overview Statistics

Carondelet Statistics

Total Discharge	42167
Total Patient Days	192070
Average LOS	3.75
Total OP Visits	459937
Total ED Visits	175552
Total IP Surgeries	10958
Total OP Surgeries	17505
Total Newborns	3804



Tucson Heart Hospital

- Phase 2 Conversion
- PowerChart/FirstNet – November 14th, 2008
 - Orders
 - Results
 - Documents
 - PowerForms
 - IView
 - Facility Wide Depart Process



Initial Design Process

- Part of a National Health Network
- “Gold Standard” design base
 - Data exchange between ministries
 - Share documentation build
 - Standardized processes
 - Minimal localization
- Wide clinical use of IView
- Minimal Tasking
 - Non-standard processes



Current Design Process

- Much more local build
- Concurrence with all 4 facilities
 - Based on urgency of change
 - Services provided



Core Measures

- Core Measure Indicators
 - Acute MI TJC - Core AMI 1-5
 - Congestive Heart Failure TJC - Core HF 1-4
 - Pneumonia TJC - Core PN 2-4
 - SCIP TJC - Core SCIP



Core Measures Statistics

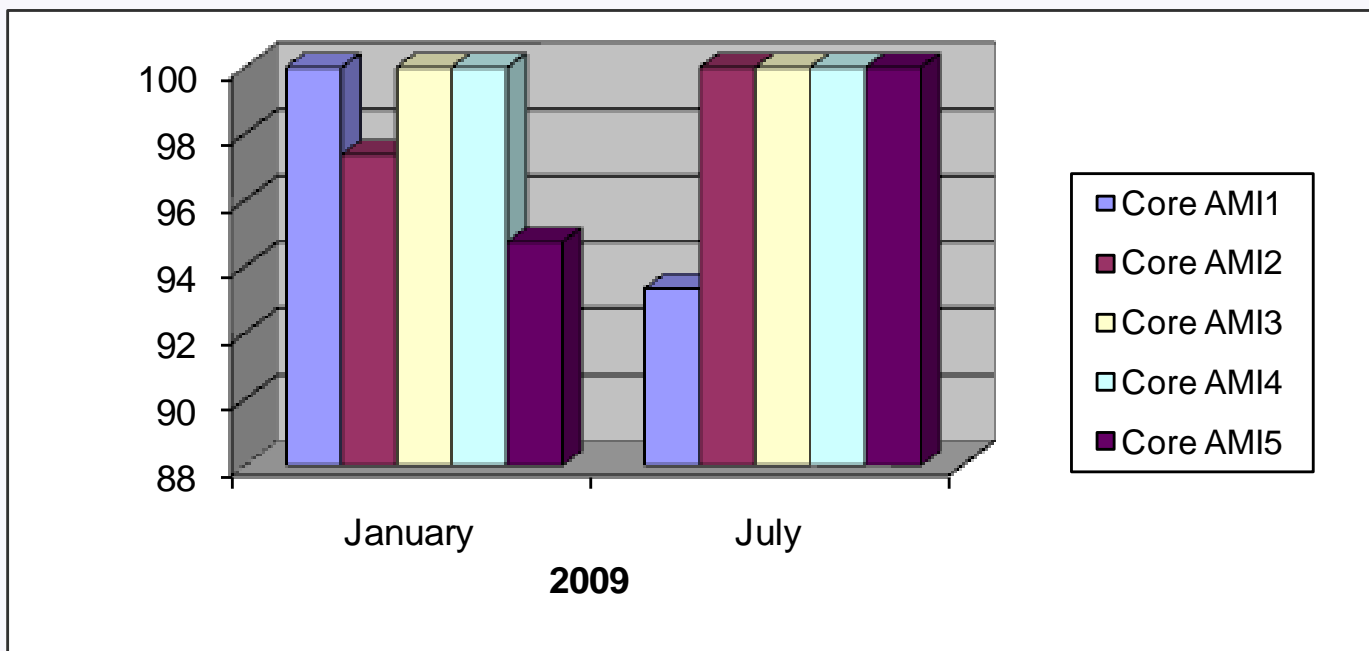
- Core Measure Indicator
 - Acute MI TJC - Core AMI 1-5

Indicator	January	July
Core AMI1 - Aspirin at arrival	100	93.333
Core AMI2 - Aspirin prescribed at discharge	97.368	100
Core AMI3 - ACEI or ARB for LVSD	100	100
Core AMI4 - Adult smoking cessation advice/counseling	100	100
Core AMI5 - Beta blocker prescribed at discharge	94.737	100



Core Measures Statistics

- Core Measure Indicator
 - Acute MI TJC - Core AMI 1-5





Core Measures Statistics

- Core Measure Indicator
 - Congestive Heart Failure TJC - Core HF 1-4

Indicator	January	July
Core HF1 - All Discharge Instructions	76.471	90
Core HF1a - Activity instructions at discharge	100	100
Core HF1b - Diet instructions at discharge	97.059	100
Core HF1c - Follow-up instructions at discharge	100	100
Core HF1d - Medications instructions at discharge	91.176	90
Core HF1e - Symptoms worsening instructions at discharge	100	100
Core HF1f - Weight monitoring instructions at discharge	85.294	100
Core HF2 - Evaluation of LVS Function	100	100
Core HF3 - ACEI or ARB for LVSD	75	91.667
Core HF4 - Adult smoking cessation advice/counseling	100	100



Core Measures Statistics

- Core Measure Indicator
 - Congestive Heart Failure TJC - Core HF 1-4



100
90
80
70
60
50
40
30
20
10
0

January

2009

July

Core HF1
Core HF1a
Core HF1b
Core HF1c
Core HF1d
Core HF1e
Core HF1f
Core HF2
Core HF3
Core HF4



Core Measures

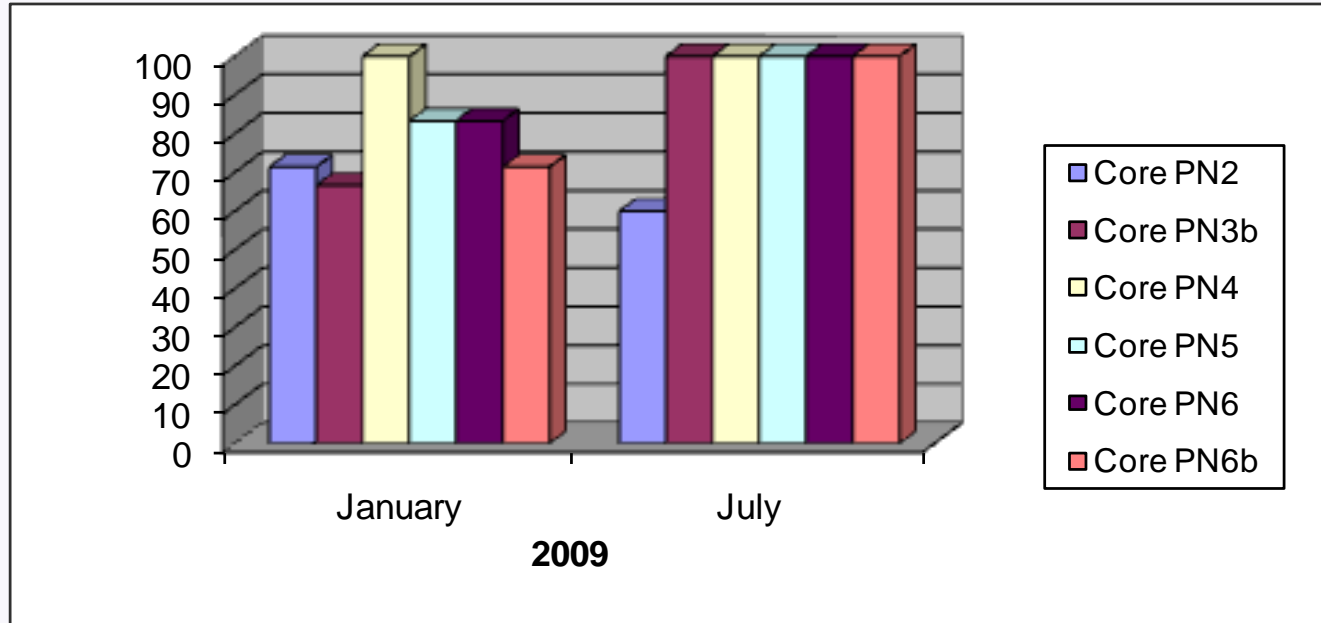
- Core Measure Indicators
 - Pneumonia TJC - Core PN 2-6

Indicator	January	July
Core PN2 - Pneumococcal Vaccination	71.429	60
Core PN3b - Blood culture in ED prior to initial antibiotic	66.667	100
Core PN4 - Adult smoking cessation advice/counseling	100	100
Core PN5 - Mean time to antibiotics (minutes)	97	88.33
Core PN5c - Antibiotic within 6 hours of arrival	83.333	100
Core PN6 - Antibiotic selection for ICU/non-ICU patients	83.333	100
Core PN6b - Antibiotic selection for Non-ICU patients	71.429	100



Core Measures

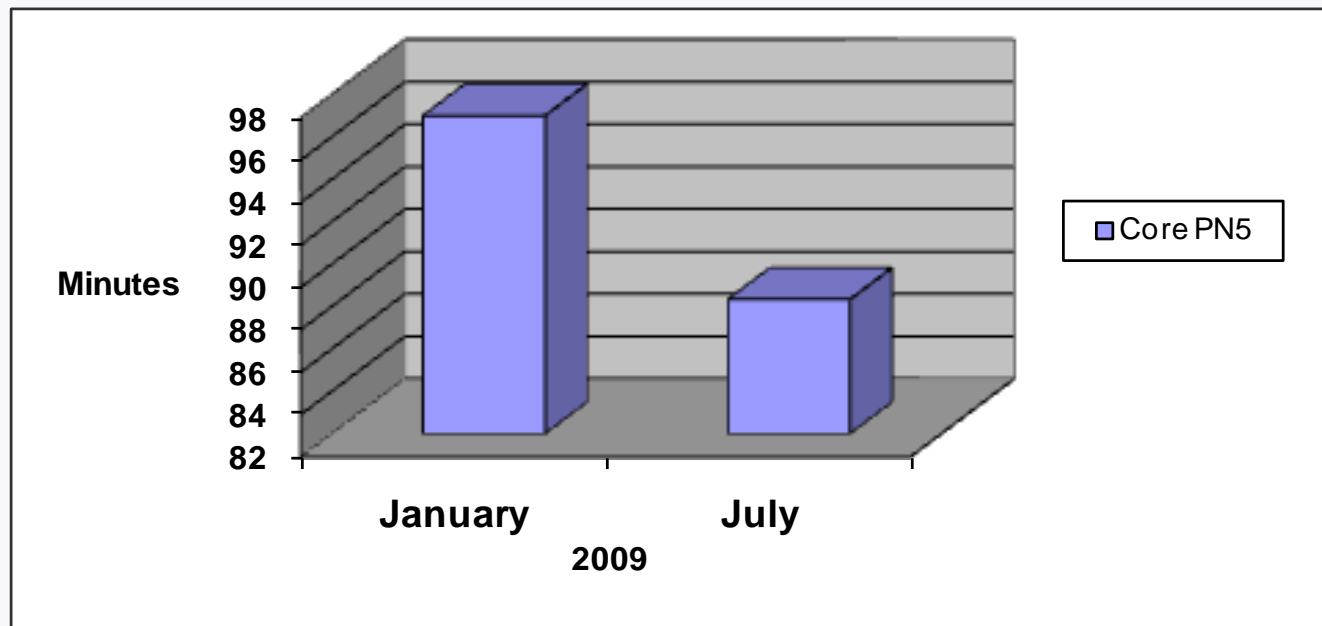
- Core Measure Indicators
 - Pneumonia TJC - Core PN 2-6





Core Measures

- Core Measure Indicators
 - Pneumonia TJC - Core PN 2-5



Less is Better !!



Core Measures

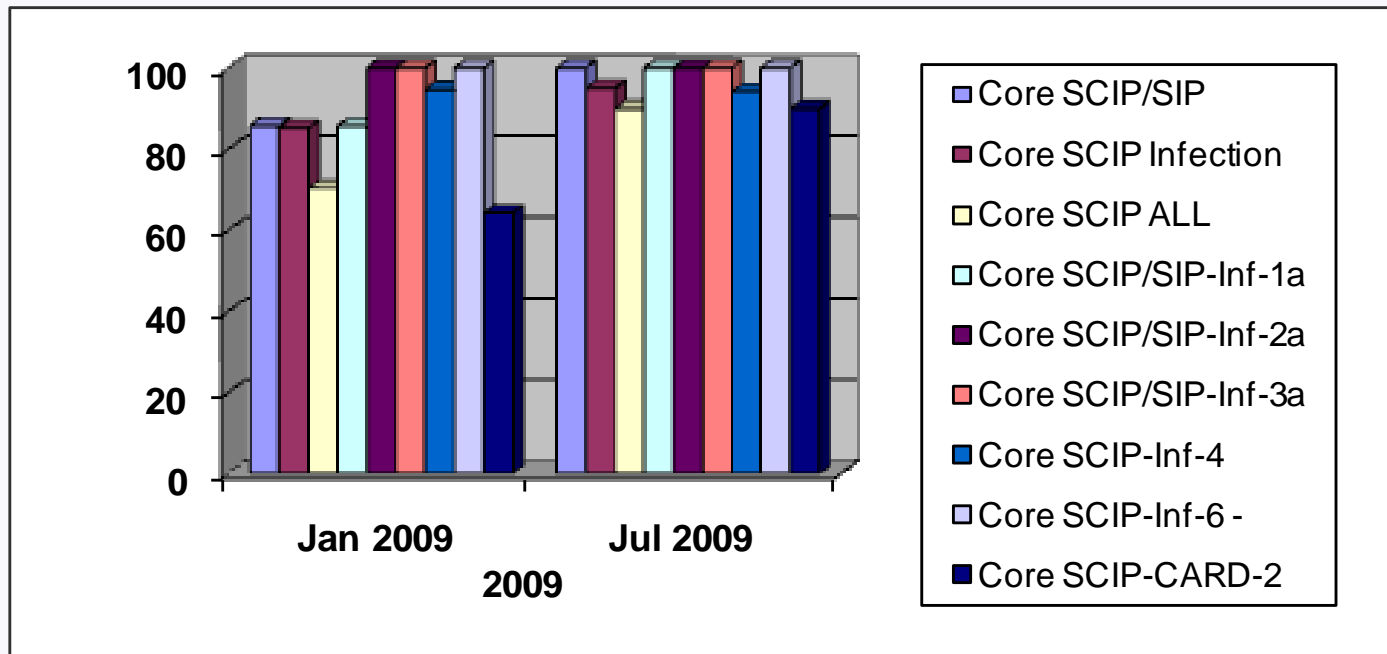
- Core Measure Indicators
 - SCIP TJC - Core SCIP

Indicator	January	July
Core SCIP/SIP-1-2-3 All-or-None Bundle	85.714	100
Core SCIP Infection 1-7 All-or-None Bundle	85.185	95
Core SCIP ALL measures All-or-None Bundle	70.37	90
Core SCIP/SIP-Inf-1a - Antibiotic within 1 hr of incision-Overall	85.714	100
Core SCIP/SIP-Inf-2a - Antibiotic selection-Overall	100	100
Core SCIP/SIP-Inf-3a - Antibiotic disc. within 24 hrs-Overall	100	100
Core SCIP-Inf-4 - Cardiac patients 6am postop serum glucose	94.737	94.118
Core SCIP-Inf-6 - Appropriate hair removal	100	100
Core SCIP-CARD-2 - Beta blocker prior to admission and periop	64.286	90



Core Measures

- Core Measure Indicators
 - SCIP TJC - Core SCIP





Core Measure Issues

- Identification
 - After coding completed reports
 - No concurrent review process
 - Missed 30 day window
- Physician compliance
 - Admission protocols
 - Discharge protocols
- Small denominator
 - Easy “Out of Compliance” issue



Core Measure Process Identification Issue Resolution

- Create PowerForm to identify these Core Measure Patients early on
 - Required fields
 - Based on existing physician documentation
 - Added DTA's (Data Elements) to PAL
- Final Review at Discharge
 - Depart Process
 - Carry Forward Values from current encounter

Core Measure On Admission

- On admission

AHTUAZRCTX15 Build Support Folder - Citrix Presentation Server Client
Admission Assessment Adult - BAR, DTS 10001
*Performed on: 07/29/2009 12:20 MST By: Remmert, Kurt William

Core Measure Identification

Is there any indication within the physician documentation that this patient presents with any of the following:

- Acute Myocardial Infarction
- Congestive Heart Failure (CHF)
- Pneumonia
- HOPS
- SCIP
- Unknown
- None

Core Measure Identification

Is there any indication within the physician documentation that this patient presents with any of the following:

- Acute Myocardial Infarction
- Congestive Heart Failure (CHF)
- Pneumonia
- HOPS
- SCIP
- Unknown
- None

General

- Self Care Abil
- Subjective
- Braden Risk
- Adult Primary
- Secondary P.
- FLACC
- Cardiovascul
- CV Detailed
- DVT Risk As
- Respiratory
- Resp Detailed
- Tracheostom
- Alarms
- HEENT
- Gastrointestir
- GI Detailed
- Ostomy Care
- Genitourinary
- Musculoskele
- MS Detailed
- Glasgow Con
- Neurological
- Meas Detailed

Skin Color

- Normal for ethnicity
- Dusky
- Acrocyanosis
- Flushed
- Ashen
- Harlequin color ch
- Black
- Hemosiderin
- Blue
- Jaundiced
- Central cyanosis
- Meconium stained
- Circumoral cyanosis
- Pale
- Cyanotic
- Pallor of face, conjunctiva
- Cyanosis lower extremities
- Pink
- Cyanosis upper extremities
- Red

Moist

- Moist
- Mottled
- Sticky, friable

In Progress



Core Measure On Admission

- On admission Issue

Core Measure Identification

Is there any indication within the physician documentation that this patient presents with any of the following:

<input type="checkbox"/> Acute Myocardial Infarction	<input type="checkbox"/> SCIP
<input type="checkbox"/> Congestive Heart Failure (CHF)	<input type="checkbox"/> Unknown
<input type="checkbox"/> Pneumonia	<input type="checkbox"/> None
<input type="checkbox"/> HOPS	

< [] >

Is there any indication within the physician documentation that this patient presents with any of the following:



Core Measure on Discharge

■ Enterprise Wide Depart Process

Depart Process

Name: DTS9957, BAR **Allergy:** ** No Known Allergies ** **DOB:** 08/28/1962 **PCP:** Aaron, Jack A MD
MRN: D00000035 (AHTU THH MRN) **FIN:** D200812790 (AHTU THH FIN) **Sex:** Female

Templates: CHN Clinical_Summary_20 Clinical Summary | Patient Summary

**Carondelet Health Network
Clinical Discharge Instructions**

PERSON INFORMATION
Name: DTS9957, BAR
Address: 1802 W ST MARYS ROAD TUCSON AZ 85745
Phone: 520-202-2422
Date of Birth: 8/28/1962 12:00 AM
Allergies: No known allergies

MRN: D00000035
FIN#:D200812790

PHYSICIANS
Admitting Physician: Aaron, Jack A MD
Attending Physician: Aaron, Jack A MD
PCP: Aaron, Jack A MD

Home Medications:
Home Meds
atorvastatin (Lipitor 10 mg oral tablet) 1 tab(s), PO (oral), qDay, 30 tab(s)

Patient/family/caregiver verbalizes understanding of instructions given

Options Save/Close



Core Measure on Discharge

■ On Discharge

Core Measure Discharge Review - DTS9957, BAR

*Performed on: 08/05/2009 1302 MST By: Test2, R

Core Measure Discharge Review

Core Measures

Acute Myocardial Infarction Pneumonia SCIP None
 Congestive Heart Failure (CHF) HOPS Unknown

Indicators

Acute Myocardial Infarction <ol style="list-style-type: none">1. ASA within 24 hours before or after arrival2. ASA prescribed on discharge3. Beta Blocker within 24 hours before or after arrival4. Beta Blocker prescribed on discharge5. ACEI or ARB for LVSD6. Adult Smoking Counseling7. Fibrinolysis Therapy within 30 minutes8. Primary PCI within 90 Minutes9. Primary PCI within 120 Minutes	Pneumonia <ol style="list-style-type: none">1. Oxygenation Assessment2. Pneumococcal Screening3. Blood Cultures ICU Patients4. Initial Blood Culture Collected in ER5. Adult Smoking Counseling6. Antibiotic within 6 hours7. Antibiotic within 4 hours8. Antibiotic Selection for ICU/Non-ICU Patients9. Antibiotic Selection for ICU Patients10. Antibiotic Selection for Non-ICU Patients11. Influenza Vaccination	Congestive Heart Failure <ol style="list-style-type: none">1. Evaluation of LVS Function2. ACEI or ARB for LVSD3. Activity Instructions at Discharge4. Diet Instructions at Discharge5. Follow-up Instructions at Discharge6. Medications Instructions at Discharge7. Symptoms Worsening Instructions at Discharge8. Weight Monitoring Instructions at Discharge9. Adult Smoking Counseling
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Pneumonia Vaccine
 Yes No Unknown

Influenza Vaccine
 Yes No Unknown
If no/unknown to vaccine, investigate immunization prior to discharge

In Progress



Core Measure on Discharge

- On Discharge

Core Measure Discharge Review

Core Measures

<input type="checkbox"/> Acute Myocardial Infarction	<input checked="" type="checkbox"/> Pneumonia	<input type="checkbox"/> SCIP	<input type="checkbox"/> None
<input type="checkbox"/> Congestive Heart Failure (CHF)	<input type="checkbox"/> HAPS	<input type="checkbox"/> Unknown	

Carry Forward Value



Core Measure on Discharge

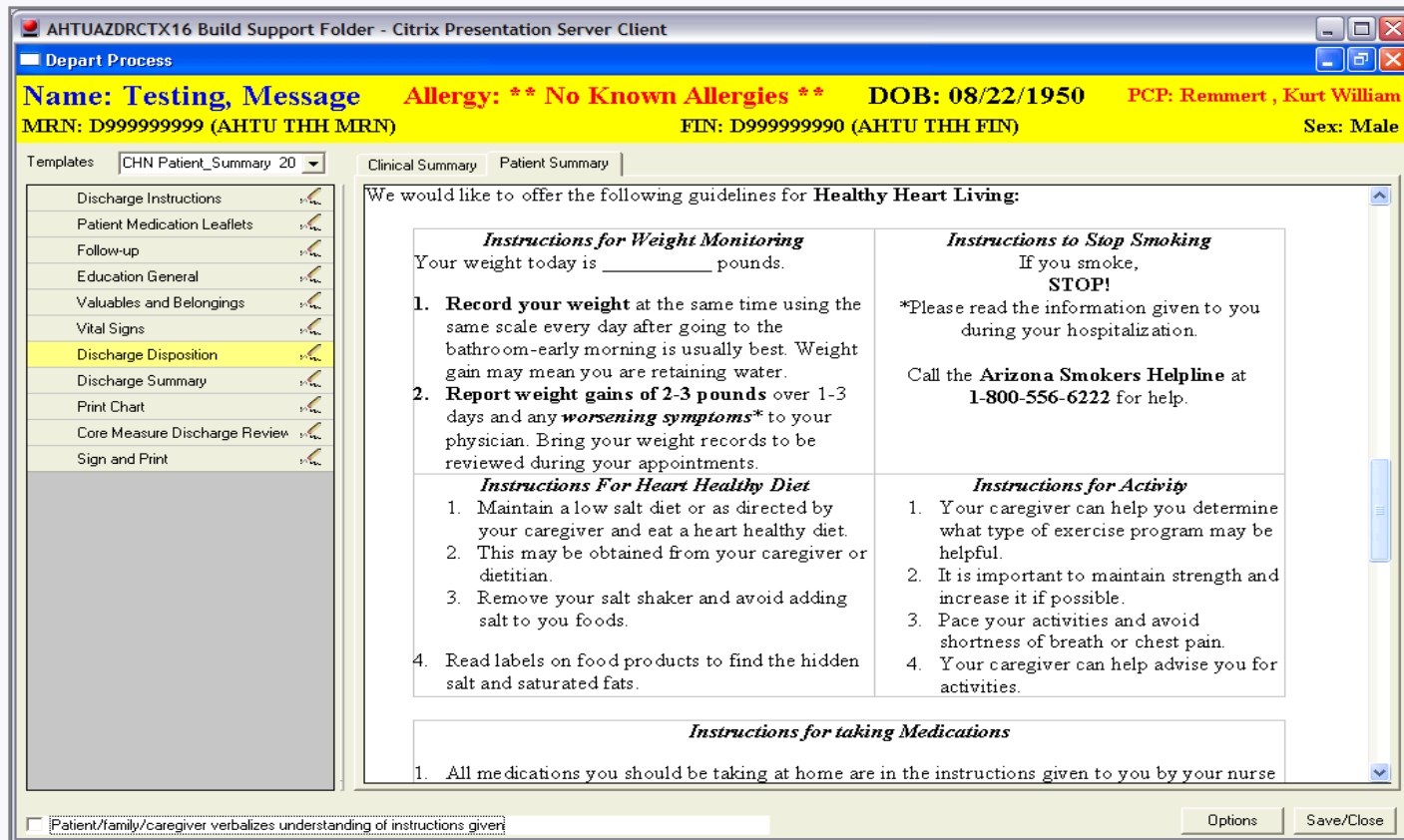
■ On Discharge

Indicators		
Acute Myocardial Infarction	Pneumonia	Congestive Heart Failure
<ol style="list-style-type: none">1. ASA within 24 hours before or after arrival2. ASA prescribed on discharge3. Beta Blocker within 24 hours before or after arrival4. Beta Blocker prescribed on discharge5. ACEI or ARB for LVSD6. Adult Smoking Counseling7. Fibrinolysis Therapy within 30 minutes8. Primary PCI within 90 Minutes9. Primary PCI within 120 Minutes	<ol style="list-style-type: none">1. Oxygenation Assessment2. Pneumoccal Screening3. Blood Cultures ICU Patients4. Initial Blood Culture Collected in ER5. Adult Smoking Counseling6. Antibiotic within 6 hours7. Antibiotic within 4 hours8. Antibiotic Selection for ICU/Non-ICU Patients9. Antibiotic Selection for ICU Patients10. Antibiotic Selection for Non-ICU Patients11. Influenza Vaccination	<ol style="list-style-type: none">1. Evaluation of LVS Function2. ACEI or ARB for LVSD3. Activity Instructions at Discharge4. Diet Instructions at Discharge5. Follow-up Instructions at Discharge6. Medications Instructions at Discharge7. Symptoms Worsening Instructions at Discharge8. Weight Monitoring Instructions at Discharge9. Adult Smoking Counseling

Core Measure specific indicators for review and confirmation

Core Measure on Discharge

■ On Discharge Patient Education



AHTUAZRCTX16 Build Support Folder - Citrix Presentation Server Client

Depart Process

Name: Testing, Message Allergy: ** No Known Allergies ** DOB: 08/22/1950 PCP: Remmert, Kurt William
MRN: D999999999 (AHTU THH MRN) FIN: D999999990 (AHTU THH FIN) Sex: Male

Templates: CHN Patient_Summary 20

Clinical Summary Patient Summary

We would like to offer the following guidelines for **Healthy Heart Living**:

<p>Instructions for Weight Monitoring</p> <p>Your weight today is _____ pounds.</p> <ol style="list-style-type: none">1. Record your weight at the same time using the same scale every day after going to the bathroom-early morning is usually best. Weight gain may mean you are retaining water.2. Report weight gains of 2-3 pounds over 1-3 days and any worsening symptoms* to your physician. Bring your weight records to be reviewed during your appointments.	<p>Instructions to Stop Smoking</p> <p>If you smoke, STOP!</p> <p>*Please read the information given to you during your hospitalization.</p> <p>Call the Arizona Smokers Helpline at 1-800-556-6222 for help.</p>
<p>Instructions For Heart Healthy Diet</p> <ol style="list-style-type: none">1. Maintain a low salt diet or as directed by your caregiver and eat a heart healthy diet.2. This may be obtained from your caregiver or dietitian.3. Remove your salt shaker and avoid adding salt to you foods.4. Read labels on food products to find the hidden salt and saturated fats.	<p>Instructions for Activity</p> <ol style="list-style-type: none">1. Your caregiver can help you determine what type of exercise program may be helpful.2. It is important to maintain strength and increase it if possible.3. Pace your activities and avoid shortness of breath or chest pain.4. Your caregiver can help advise you for activities.

Instructions for taking Medications


1. All medications you should be taking at home are in the instructions given to you by your nurse

Patient/family/caregiver verbalizes understanding of instructions given

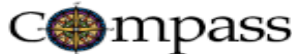
Options Save/Close

Core Measure Training

■ “Hot Sheets”



Admit/Transfer



This HOT Sheet covers changes that will be implemented on June 23, 2009

Core Measure Identification

NEW! A new field has been added to the Adult Admission Assessment and the Outpatient Admission Assessment. The new field, which appears in the General section (shown below), requires you to indicate if physician documentation identifies any of the listed core measures. **IMPORTANT:** Selection of a Core Measure must be based on physician documentation.

<input type="checkbox"/> Supine <input type="checkbox"/> Teatful <input type="checkbox"/> Suspicious <input type="checkbox"/> Guarded <input type="checkbox"/> Other:	<input type="checkbox"/> Cooperative <input type="checkbox"/> Crying <input type="checkbox"/> Cursing <input type="checkbox"/> Fearful <input type="checkbox"/> Forgetful <input type="checkbox"/> Hostile <input type="checkbox"/> Inappropriate	<input type="checkbox"/> Screaming/cries <input type="checkbox"/> Singing <input type="checkbox"/> Sleeping <input type="checkbox"/> Threatening <input type="checkbox"/> Withdrawn <input type="checkbox"/> Other:	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unable to assess
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Acceptable Pain Intensity: 8


Skin Color <input type="checkbox"/> Normal for ethnicity <input type="checkbox"/> Acrocyanosis <input type="checkbox"/> Ashen <input type="checkbox"/> Black <input type="checkbox"/> Blue <input type="checkbox"/> Central cyanosis <input type="checkbox"/> Circumoral cyanosis <input type="checkbox"/> Cyanotic <input type="checkbox"/> Cyanosis lower extremities <input type="checkbox"/> Cyanosis upper extremities	<input type="checkbox"/> Dusky <input type="checkbox"/> Flushed <input type="checkbox"/> Harlequin color change <input type="checkbox"/> Hemosiderin <input type="checkbox"/> Jaundiced <input type="checkbox"/> Meconium stained <input type="checkbox"/> Pale <input type="checkbox"/> Pallor of lips, conjunctiva <input type="checkbox"/> Pink <input type="checkbox"/> Red	<input type="checkbox"/> Ruddy <input type="checkbox"/> Sallow <input type="checkbox"/> White <input type="checkbox"/> Other:	Skin Temperature <input type="radio"/> Warm <input type="radio"/> Cool <input type="radio"/> Cold <input type="radio"/> Hot
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Skin Description <input type="checkbox"/> Normal for ethnicity <input type="checkbox"/> Blochy <input type="checkbox"/> Clammy <input type="checkbox"/> Diaphoretic <input type="checkbox"/> Dry <input type="checkbox"/> Fragile <input type="checkbox"/> Glistening red <input type="checkbox"/> Moist <input type="checkbox"/> Mottled <input type="checkbox"/> Sticky, friable	<input type="checkbox"/> Translucent <input type="checkbox"/> Other:
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------

Core Measure Identification

Is there any indication within the physician documentation that this patient presents with any of the following:

<input type="checkbox"/> Acute Myocardial Infarction <input type="checkbox"/> Congestive Heart Failure (CHF) <input type="checkbox"/> Pneumonia <input type="checkbox"/> HOPS	<input type="checkbox"/> SCIP <input type="checkbox"/> Unknown <input type="checkbox"/> None
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------






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Core Measure Training


■ “Hot Sheets”



Tucson Heart Hospital
The Heart Hospital
A Division of Providence

Discharge

This HOT Sheet covers changes that will be implemented on June 23, 2009



Core Measure Identification

NEW! In addition to the Core Measure Identification field that has been added to the Admission Assessments, a new section has been added to the Depart Process **for inpatients**. The Core Measure Discharge Review section enables you to review the completion of Core Measure indicators where appropriate. This section is required to be completed.

The CORE Measures indicator can be updated here by anyone at any time during the patient stay as new diagnostic information becomes available from the physician documentation.


■ Depart Process


Name: **Testing, Message** Allergy: **** No Known Allergies **** DOB: **09/22/1959**
MRN: **D00000000 (ARTU LTRN MRN)** PID: **D00000000 (ARTU LTRN PID)**

Templates | DRG Group Summary | Discharge Summary | Patient Summary

Discharge Instructions ✓ Patient Medication List ✓ Follow-up ✓ Education General ✓ Vitamins and Supplements ✓ Heat Signs ✓ Discharge Discharge ✓ Discharge Gateway ✓ Post Discharge ✓ Core Measure Discharge Review ✓ Sign and Print ✓	<p style="text-align: center;">Carondelet Health Network Clinical Discharge Instructions</p> <p>PERSON INFORMATION Name: Testing, Message</p> <p>MRN: D00000000</p> <p>WEVID: 00000000</p>
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NOTE: The Core Measure Discharge Review form (shown below) **WILL NOT PRINT** when you complete and print the patient summary.







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Core Measure Training

■ “Hot Sheets”

 <p>Tucson Heart Hospital The Heart Institute A Division of Carondelet Health Network</p>	<h2>Discharge</h2>	
<h3>Healthy Heart Living Education</h3> <p>NEW! The information sheet shown below will now automatically print for every patient (inpatient and ED) as part of the Patient Summary in the Depart Process.</p>		
<p>Carondelet Health Network has three accredited Chest Pain Centers through the Society of Chest Pain Centers: Tucson Heart Hospital, St. Mary's Hospital, and St. Joseph's Hospital.</p> <p>We would like to offer the following guidelines for Healthy Heart Living:</p>		
<p>Instructions for Weight Monitoring</p> <p>Your weight today is _____ pounds.</p> <ol style="list-style-type: none"> Record your weight at the same time using the same scale every day after going to the bathroom-early morning is usually best. Weight gain may mean you are retaining water. Report weight gains of 2-3 pounds over 1-3 days and any <i>worsening symptoms</i>* to your physician. Bring your weight records to be reviewed during your appointments. 	<p>Instructions to Stop Smoking</p> <p>If you smoke, STOP!</p> <p>*Please read the information given to you during your hospitalization.</p> <p>Call the Arizona Smokers Helpline at 1-800-556-6222 for help.</p>	
<p>Instructions For Heart Healthy Diet</p> <ol style="list-style-type: none"> Maintain a low salt diet or as directed by your caregiver and eat a heart healthy diet. This may be obtained from your caregiver or dietitian. Remove your salt shaker and avoid adding salt to your foods. Read labels on food products to find the hidden salt and saturated fats. 	<p>Instructions for Activity</p> <ol style="list-style-type: none"> Your caregiver can help you determine what type of exercise program may be helpful. It is important to maintain strength and increase it if possible. Pace your activities and avoid shortness of breath or chest pain. Your caregiver can help advise you for activities. 	
<p>Instructions for taking Medications</p> <ol style="list-style-type: none"> All medications you should be taking at home are in the instructions given to you by your nurse at discharge. Please take this list with you and show it to your physician at your next visit. Do not take “over the counter” or herbal medications without physician approval. Contact your Primary Care Physician for routine medication renewals. 		
<p>* <i>Worsening symptoms include:</i> 1) Increased shortness of breath with routine activity 2) Puffy, swollen legs, ankles, or feet 3) Dry, nagging cough 4) Poor appetite or nausea</p>		



Core Measure Training

- Super Users On-Site with Implementation
 - Daily “Huddle”
 - On the unit during the day for specific questions





Using the PAL

- Patient Access List (PAL)
 - Identify key monitored data elements
 - Concurrent review for managers/QA Staff
 - Real time fix

PowerChart Organizer for Remmert, Kurt William

Task Edit View Patient Chart Links Options Patient List Help

Patient Access List Patient List Multi-Patient Task List Carondelet.org Word

Tear Off Attach Change Charges Charge Entry Exit Calculator Ad-hoc PM Conversation Explorer Menu Label Reprint Request A Chart

Recent Name

Patient Access List Print 0 minutes ago

E-Pod ***Encounter Specific*** Shift: 05 August 2009 7:00 MST - 05 August 2009 19:00 MST

VIP	MD	Visit Reason	Braden	Fall Risk	Ht	Wt	AD	AD Follow/ Religious P Clergy to	Core Indicator
		ANGINA	17	6	177.80 cm	100.4 kg	Yes	Lutheran	Congestive Heart Failu
	Pena, Juan C USA		21	0	170.18 cm	92.6 kg	Yes	Yes - Consult Roman Cath	None
		USA	21	1	170.18 cm	74.0 kg	Yes	Yes - Consult None	Acute Myocardial Infar
	hinson, Jerry If /CONTROLL		22	1	0.00 cm	70.0 kg	No	No Roman Cath	Acute Myocardial Infar
	hinson, Jerry I USA		21	1	172.72 cm	77.1 kg	No	Yes - Nurse p Won't Disclo	Acute Myocardial Infar



Using the PAL

August 2009 19:00 MST	
Core Indicator	
Congestive Heart Failu	
None	
Acute Myocardial Infar	
Acute Myocardial Infar	
Acute Myocardial Infar	

Quality staff can investigate the “None” patients as well as review compliance for the patients that fall into Core Measure indicators



Using the PAL

- This PAL is given to:
 - All Nursing Managers
 - Quality Management Staff
 - Social Services
 - Case Managers



Core Measure Process Physician Compliance Resolution

- Paper Based once patient identified
 - Admission requirements identified
 - Discharge requirement identified
 - Attached to existing paper chart for all Core Measure Indicators

Example: CHF



Core Measure Process Small Denominator Resolution

- Some things just can't be fixed





Additional Monitored Indicators

- Advance Directive TJC – RI.1.2.4



Advanced Directive

- Advance Directive
 - Part of Admission History
 - Carry Forward from previous encounters
 - Added Review of Information question
 - Required
 - Inpatient and Emergency encounters
 - Use of conditional logic based on response



Advance Directive Statistics

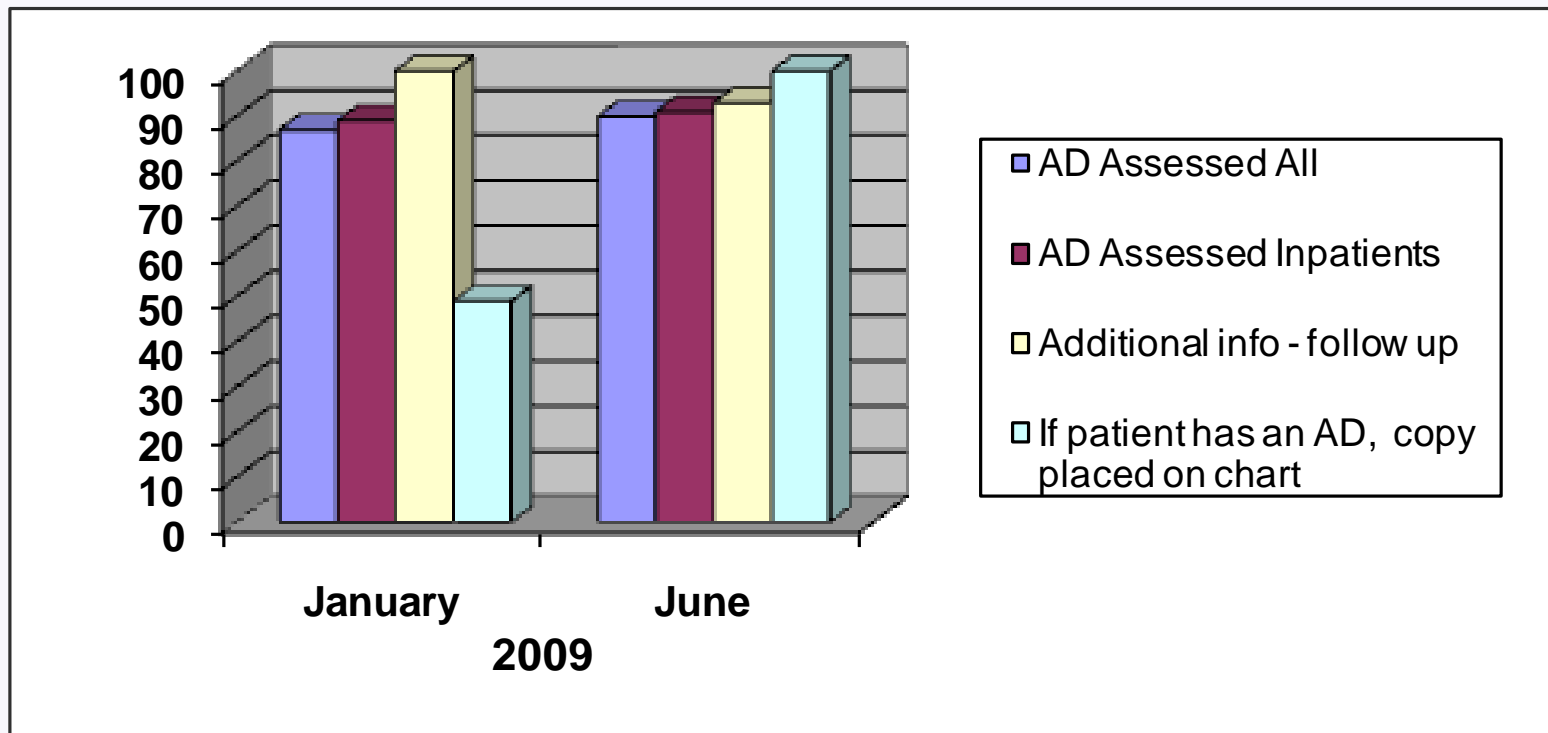
- Advanced Directive TJC – RI.1.2.4

Indicator	January	June
Nursing assess if patient has an AD	87	90
Inpatients Only	89	91
Additional info - follow up	100	93
If patient has an AD, documentation is made that a copy is placed on the chart	49	100



Advance Directive Statistics

■ Advanced Directive TJC – RI.1.2.4





Advance Directive PowerForm

- Advanced Directive on admission

AHTUAZDRCTX15 Build Support Folder - Citrix Presentation Server Client

Admission History Adult AHTU - BAR, DTS 10001

*Performed on: 07/29/2009 12:30 MST By: Remmert, Kurt William

Advance Directive

Advance Directives Yes Unknown No

Unknown Reason

- Patient unable to verbalize
- Parent/caregiver not available
- Other:

Type of Advance Directives

- Durable Medical/Healthcare Power of Attorney
- Living Will or Directive to Dr./Family/Surrogate
- Mental Health Treatment
- Organ/Tissue Donation
- Out of Hospital Do-Not-Resuscitate order
- Other:

Location of Advance Directives

- Copy obtained from previous records
- Copy placed on paper chart
- Family to bring in copy from home
- Scanned into EMR
- Unable to obtain copy
- Other:

Advance Directives Date

Patient Wishes to Update/Receive Further Information

- No
- Yes - Nurse provided
- Yes - Chaplain provided
- Yes - Consult

Documenting "Yes-Consult" enters a consult per hospital policy.

Medical Durable Power of Attorney Name

Contact Number for Attorney

Alternate Representative

Contact Number for Alternate

Medical Durable Power of Attorney Activated Yes No

In Progress



Advance Directive PowerForm

- If Yes, Type and Location become available and required



Advance Directive PowerForm

- If No, "Patient Wishes To Update/Receive Further Information" becomes required

Admission History Adult AHTU - BAR, DTS 10001

Performed on: 07/29/2009 1230 MST By: Remmert, Kurt William

Advance Directive

Advance Directives Yes Unknown No

Unknown Reason

Patient unable to verbalize
 Parent/caregiver not available
 Other:

Type of Advance Directives

Durable Medical/Healthcare Power of Attorney
 Living Will or Directive to Dr./Family/Surrogate
 Mental Health Treatment
 Organ/Tissue Donation
 Out of Hospital Do-Not-Resuscitate order
 Other:

Location of Advance Directives

Copy obtained from previous records
 Copy placed on paper chart
 Family to bring in copy from home
 Scanned into EMR
 Unable to obtain copy
 Other:

Advance Directives Date

Patient Wishes to Update/Receive Further Information No Yes - Consult Yes - Nurse provided Yes - Chaplain provided

Documenting "Yes-Consult" enters a consult per hospital policy.

Medical Durable Power of Attorney Name

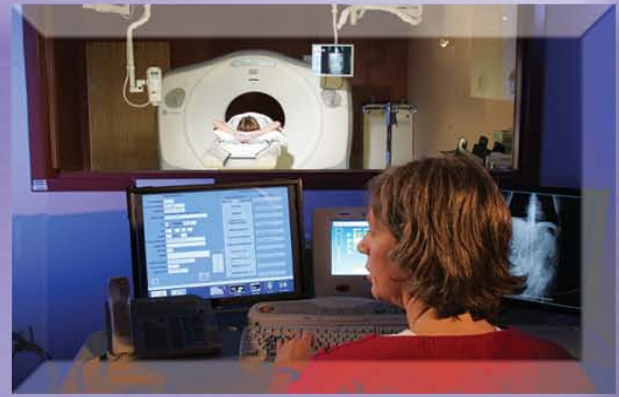
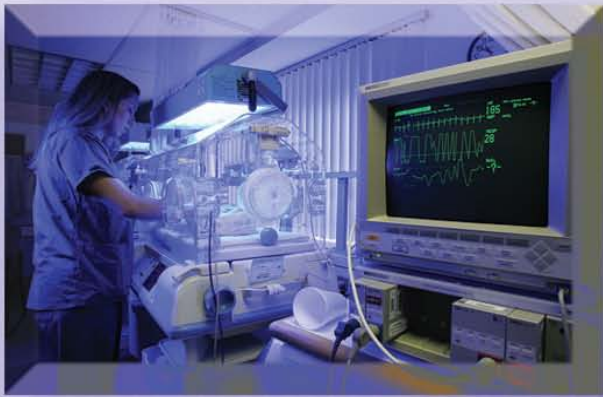
Contact Number for Attorney

Alternate Representative

Contact Number for Alternate

Medical Durable Power of Attorney Activated Yes No

Invalid date & time: Both date & time must be entered In Progress



Questions?



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