



Chief Medical Officer's Report

Prepared for Board meeting November 27, 2023

Quality Metrics



Clinical Measure	Where we are	Where we were	Change	Goal	At Goal?	Comment
Uncontrolled Diabetes	19.2%	18.9%	Worsening	20%	TRUE	Small increase
Hypertension Control	64.3%	65.3%	Worsening	60%	TRUE	Moderate decrease
Cervical Cancer Screening Rate	46.2%	46.9%	Worsening	35%	TRUE	Small decrease
Breast Cancer Screening Rate	57.6%	61.7%	Worsening	60%	FALSE	Big decrease
Colorectal Cancer Screening Rate	47.0%	52.7%	Worsening	47%	FALSE	Huge decrease - report issue?
2 Year Old Vaccination Rates	11.5%	12.6%	Worsening	30%	FALSE	Small decrease - again
Well Child Visit 3-21	53.6%	53.1%	Improving	55%	FALSE	Nice increase - again
Well-Child Visits, 30 months	42.6%	43.4%	Worsening	50%	FALSE	Small decrease
Depression Screening Rates	73.3%	72.1%	Improving	60%	TRUE	Nice increase - again
Diabetic Eye Exams	21.9%	20.6%	Improving	30%	FALSE	Moderate increase
Diabetic Kidney Screening	73.3%	72.0%	Improving	80%	FALSE	Big increase
HIV screening	49.3%	49.3%	Improving	30%	TRUE	Tiny increase

**Mixed changes again - investigating CRC and Breast rates
Reporting correction and plan for 2yo rates**

Quality Improvement Committee

Last meeting –

August 22, 2023 - minutes submitted

Next meeting -

December 12, 2023 – Oct cancelled

Ongoing Outcomes:

Correct PCP assignment in Peds project

Site-specific quality projects

Childhood immunization rates





Peer Review Results

Spring 2023

Peer Review



Methods

- Twice per year
- Every provider reviews 10 charts of a peer provider
- Specialty reviews specialty (FM→FM, Peds→Peds)
- Same general time frame
- Reviews and results are confidential and reviewed by CMO
- Results requiring action items are communicated directly to provider and director of department
- Summary of results presented to both QI Committee and to the board of directors

Peer Review



Areas of focus

- History pertinent to Chief Complaint
- Diagnosis consistent with history and exam
- Medical decision-making process apparent
- Appropriate diagnostic tests
- Standard abbreviations
- Appropriate consultations
- Appropriate treatment
- Follow-up scheduled
- Medication and allergy lists updated
- Relevant health education presented
- Billing review

Peer Review



End result of review

- Compliance with medical standards
 - Yes, No or Reservations
- Comments regarding management, outcomes, issues, concerns and general negative or positive impressions
- Chief Medical Officer review and recommendations
 - Email to every provider summarizing results
 - Directed email or conversation with department head about specific findings
 - Action items including more frequent reviews and/or additional training

Peer Review Spring 2023



Results

- 36 out of 39 providers reviewed, 1 reviewed twice, 2 reviewers never completed
- Providers **non-compliant** with standards of care and documentation = 0
- Providers passing with **Reservation** regarding standards of care = 0
- Providers with no issues found at all = 9

Peer Review Spring 2023



Issues found from most prevalent to least:

1. Coding issues – mixed, but mostly under-coding
2. Missing documentation of patient education
3. Med and allergy lists not obviously up to date
4. Documenting appropriate follow-up
5. Proper diagnosis tied to history and physical
6. Obtaining consult when needed

Peer Review Spring 2023



Action items:

- No increased rate of review for any provider
- Email to each provider with the summary of PR findings, including any specific clinical items that were identified
- General email will go out, addressing most common findings and some easy solutions
- Will continue to work on providing coding resources and feedback



Risk Management

Risk Management Committee

Meeting October 17, 2023

Minutes submitted

Next meeting –

December 19, 2023



Outcomes:

Vendor sign-in sheets

“Two sets of eyes” med admin procedure

Improved training completion rate – 90.2% YTD

Risk Management Goals



- Risk Management Plan ✓
- Regular Risk Management Committee meetings ✓
- Current risk assessment ✓
- Quarterly risk assessments – 5 completed for 2023 ✓
- Annual Risk Management Report – ✓

Presented July 2023

- Risk Management Training plan in place ✓



Action Items

Appointment and granting of privileges

Dr. John Benson, floating physician

Documents for Board Approval

None