


PRIMARY CARE & HOPE CLINIC

Making Clinical Practice Decisions through HIT Utilization


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Five Years Ago

- EMR system still in the box
- All paper charts
- No ability to perform population management
- Quality benchmarks based on time-extensive chart audits

Electronic Medical Records



- Operational January 2007
- No “phase-in”
- Two upgrades
- Added eBO in 2011; advanced software for additional reporting capability

Health and Diabetes Educator

- Received a diabetes grant from State of Tennessee
- Hired Vivian Bossong, Licensed Dietitian/Nutritionist
- Conducts individual and group counseling, leads diabetes management seminars
- Focus on helping patients manage their diabetes through proper nutrition

Population Management for Effective Referrals

- Used EMR registry/reporting to identify patients with targeted conditions who were out of control
- Distributed lists of these patients to providers to consider for referral for nutrition counseling
- Invited these patients and "at-risk" patients to attend her educational opportunities

Outcomes

- Increased % of diabetic patients with most recent A1c <7 from 31% to 51%
- Increased % of diabetic patients with most recent A1c <9 from 65% to 72%
- Increased % of hypertensive patients whose most recent BP was <140/90 from 47% to 54%

Conclusion

Successful outcomes in quality come from

- Setting goals
- Determining benchmarks
- Creating a process for improvement
- Measuring progress

EMR helps your practice

- Know where you are and where you have been
- Be more accurate and intentional about your quality improvement process
