

THE CENTER FOR WELLNESS



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INTRODUCTION

Welcome to February!

In this month's newsletter, the Quality department will highlight heart health awareness and the recommendations to improve. As a reminder, due to COVID-19's continued presence, it is important to ensure patients are exercising precaution and leading a healthy lifestyle especially as it pertains to the heart. Because many health centers have opened up their facilities, it is important to remind people to schedule appointments with their providers to ensure quality health.

Now, more than ever, it is important to perform screenings for various health measures as awareness has encouraged people to seek out help and resources. In addition, with vaccinations being made available, we encourage people to get vaccinated when possible.





Heart Health

Awareness

HEART HEALTH AWARENESS

Heart attack and stroke continue to kill more people in the U.S. than any other cause, disproportionately affecting African Americans.

The **National Association of Community Health Centers (NACHC)** has partnered with Centers for Disease Control and Prevention to support the Million Hearts® initiative by implementing strategies for health centers to improve performance in three key areas:

- Improving Blood Pressure Control in African Americans
- Improving Cholesterol Management
- Expanding Use of Self-Measured Blood Pressure Monitoring

Recommendations for Community Health Centers include:

- Register for the Million Hearts® Learning Lab – a bi-monthly learning series focused on cardiovascular disease prevention and management. Next session on March 16th at 3 p.m. ET.
- Use the new suite of tools to address Statin Therapy for

High-Risk Patients available here including the Improving Use of Statin Therapy Roadmap.

- Use the Improving Blood Pressure Control for African Americans Roadmap to focus on the most impactful evidence-based interventions to improve hypertension outcomes and reduce disparities.
- Use the revised version of the Choosing a Home Blood Pressure Monitor At-A-Glance Comparison Tool to learn more about validated home arm-cuff monitors.
- Join the Million Hearts® national SMBP Forum – a quarterly webinar to connect with experts and hear from organizations implementing SMBP across the country. Next session is scheduled for March 10th at 1 p.m. ET.
- Watch the Collaborative Care Models for Improving Hypertension Control Through SMBP Monitoring to learn about best practices used in nine health centers to improve use of SMBP.

(For more information click on NACHC link in e-mail!)

HYPERTENSION GRANT SPOTLIGHT

National Hypertension Control Initiative Supplemental Funding for Health Centers (NHCI-HC)

We are pleased to announce that Henry J Austin Health Center (HJAHC) has received funding for a grant! The department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA) and the Office of minority (OMH) are partnering through the national Hypertension Control Initiative: Addressing Disparities among Racial and Ethnic Minority Population (HTN Initiative).

The purpose of the funding is to:

- Increase provider and staff engagement in implementing evidence-based practices
- 3-year funding received up front for NHCI-HC activities through the end of the FY 2023 H80 budget period

The grant requirements are to:

- Fully participate in training and technical assistance (T/TA) activities offered in support of NHCI-HC award
- Conduct outreach and engage patients with uncontrolled hypertension to participate in the hypertension initiative
- Ensure access to and support use of Bluetooth or wireless-enabled SMBP devices for a majority of patients with hypertension, and use their data to inform hypertension treatment plans
Collect and share data to support participation in initiative evaluation and reporting activities



SPOTLIGHT (CONT.)

(HRSA goals are pictured below)

- Aspirational

- Concrete

- Measurable

- Achievable

DECREASE

- Disengaged patients living with HTN
- Systolic and diastolic BP levels among patients with HTN
- Mortality rates for hypertensive heart disease, stroke and ischemic heart disease
- County-level estimates of emergency department visits for hypertension crisis
- County-level rates of hospital discharges for hypertension crisis

INCREASE / IMPROVE

- HTN Medication Adherence
- Number of health centers with $\leq 80\%$ controlled HTN
- # of patients screened for HTN
- Patient education, knowledge, understanding of HTN – SDoH lens
- Culture change around workflow, treatment protocols, SMBP-based strategies for patient engagement
- Health and Digital literacy
- Years of Healthy Life Expectancy



On Friday February 11th, **Preeti Bhandari**, Programs and Research Coordinator and **Uzo Achebe**, Quality Improvement assistant, worked to prepare labels, package and add postage stamps for over 130 blood pressure monitor cuffs. These cuffs are to be mailed and tracked, via the **Quality Team**, as per the HRSA grant requirements. Below are some pictures of the packing.



(Pictured: Blood Pressure Cuffs (left, right) mailed in to recipients)

QUALITY MEASURE SATISFACTION



CONTROLLING HIGH BLOOD PRESSURE

Description

Patients 18 - 85 years of age who had a diagnosis of hypertension overlapping the measurement period or the year prior to the measurement period, whose most recent blood pressure was adequately controlled (< 140/90 mmHg) during the most recent encounter of the measurement period.

Patient Identification

Age: 18-85

Diagnosis: Hypertension overlapping the measurement period or any time prior to the measurement period.

Encounter: At least one encounter during the reporting period (CPT: 99202-99205, 99211-99215, 99341-99345, 99347-99350, 99381-99387, 99391-99397, G0438-G0439)

Measure Satisfaction

Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) entered in the corresponding blood pressure fields in the Vitals section during the measurement period.

TOBACCO USE : SCREENING AND CESSATION

Description

Measure identifies patients 18 years of age and older at the beginning of the measurement period who were screened for tobacco use one or more times within measurement period months AND who received cessation counseling intervention if identified as a tobacco user.

Patient Identification

Age: 18 years and older at the start of the measurement period

Encounter: At least 2 office visits identified by billing (CPT: 90791, 90792, 90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521-92524, 92540, 92557, 92625, 96156, 96158, 97161-97163, 97165-97168, 99202-99205, 99211-99215, 99341-99345, 99347-99350) or at least one preventive visit identified by billing (CPT: 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99429 or HCPCS: G0438, G0439) with a FQHC medical visit during the reporting period.

Measure Satisfaction

Measure is satisfied if Patients were screened for tobacco use at least once within measurement period AND who received tobacco cessation intervention if identified as a tobacco user.

Identification of tobacco user: The patient can be identified as a smoker by answering any or all of the following social history questions

1. Do you or have you ever smoked tobacco? (Options: Current every day/ some day smoker, Smoker - current status unknown)
2. Do you or have you ever used any other forms of tobacco or nicotine? (Options: Yes/ No)
3. If yes, answer the question, Do you or have you ever used smokeless tobacco? (Options: Current snuff user/ Currently chews tobacco/ Currently uses moist powdered tobacco)



QUALITY GOALS

Ensuring that heart health measures can be satisfied, we are collaborating and utilizing all our resources to ensure our patients receive quality care. Providers, clinical staff and the Quality team are among our primary resource we use in satisfying tobacco screening and cessation and monitoring and controlling high blood pressure.

In addition, as variants of COVID-19 are present, Henry J. Austin Health Center efforts are continuing to be focused on responding to our patient population needs in COVID-19 testing, providing vaccinations and booster shots.



SCORECARD

Henry J. Austin Health Center's monthly scorecard highlights or year to date (YTD) performance on 14 of our priority quality measures on an organizational level.

The scorecard is a fundamental aid to drive and monitor quality improvement at Henry J. Austin Health Center.

Measure Type	Program	January	February
Breast CA	UDS	31%	37.9%
Cervical CA	UDS	46%	46.8%
Childhood immunizations (fully)	UDS	11%	6.9%
Colorectal CA	UDS	19%	18%
Hypertension	UDS	13%	33.5%
<i>Diabetes</i>	<i>UDS</i>	<i>86%</i>	<i>51.6%</i>
HIV (Screening)	UDS	43%	37%
IVD	UDS	88%	91.2%
Adult BMI	UDS	25%	44.8%
Depression (Follow-Up)	UDS	47%	70.7%
Pediatric Dental Sealants	UDS	20%	36%
Statin Therapy	UDS	79%	86.4%
Tobacco Use	UDS	27%	69.3%
Pediatric BMI & Counseling	UDS	29%	65%

Scorecard Key

Measure type - UDS

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QUOTE OF THE MONTH

"You can't beat a healthy heart!"

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