

MaineHealth

MaineHealth Knowledge Connection

Operations Transformation

Spring 6-11-2024

MaineHealth Medical Group Report Inventory

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Authors

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Last Updated: 1/30/2024

Executive Sponsor: Natisa Dill

Facilitator: Holly Ward

Operations Transformation

Team Members: Robin Lozinski, Stephanie Lepine, Shawn McGlaughlin White, Tracey Shaw, Elizabeth Andrews, Sheila Adell

Problem/Impact Statement

Variation of Epic Quality Reports being used across MHMG following the merge of Coastal, Mountain and Southern region quality departments resulting in unnecessary variation.

Increased Administrative Burden

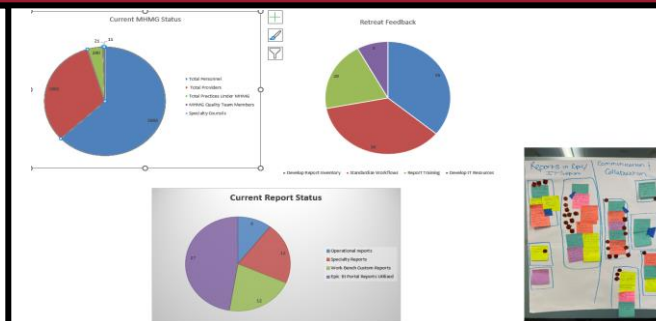
Reporting Errors

Scope

- IN SCOPE: EPIC Reports Currently Being Utilized
- OUT OF SCOPE: Analytics timing, non-epic reports, any reports we aren't aware of

Baseline Metrics/Current State

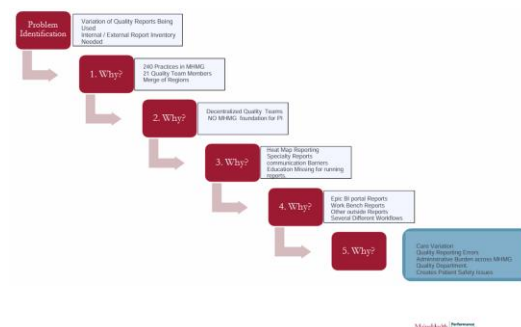
- Practices merged under MHMG 240
- MHMG Quality Staff 21
- 11 Specialty Counsels
- Providers in the Medical Group 1,882
- Personnel 3,666
- Total Number of varied reports being currently used across the system
- Quality Retreat Feedback / Concerns From May



Goal/Objective

- Develop an inventory of Standard Reports that align with key quality metrics and develop associated training materials
- Create a list of Contacts that staff can reach out to with questions about reports
- Identify any specialty specific reports that can be standard across MHMG

Root Cause Analysis



Countermeasures

- Implemented a Charter
- Workgroup Meetings x 2 weeks
- Group effort on researching current reports
- Stakeholder feedback
- Ongoing Management

Project Name: MHMG Report Inventory Charter																		
Facilitators:	Molly Ward	Start Date:	Dec-2022															
Executive Sponsors:	Natasha Dhill	Completion Date:	May-2023															
Process Owner:	3.021MG Quality Improvement Specialists	Revision Date:	3.14.2024															
Project Team:	Robin Lesciano, Stephanie Larsen, Sharon McGowan/White, Tracy Starr, Angela Gagne, Elizabeth Andersson, Shasha Jindal																	
Business Case	<p>Project Goals</p> <ul style="list-style-type: none"> 1. Develop an inventory of standard Reports that align with our quality system and develop standard training materials. 2. Standardize report content and format across Regions 3. Evaluation of workload across 4. Eliminate Chart Usage 5. Create a list of IT requests 3. Identify "Transfer" specific reports that can be standard across the Quality Team. 4. Identify current workload across the practices. 																	
Problem Statement:	<p>Estimated Benefits</p> <p>Creating an inventory of reports that will be standard across the Quality Team will increase the consistency of the reports. Reduce duplicate reports across the regions. Reduce resources across the regions of the reports that will be tracked. Decrease Administrator Lead Time Teams</p>																	
Scope (In & Out):	<p>Scope (In & Out):</p> <ul style="list-style-type: none"> IN SCOPE: - Compiling an inventory of all prior reports for quality measures for Administrator Training OUT OF SCOPE: - Analysis of reports for changes needed. Any reports that are not areas of In-Region 																	
Project Milestones	<table> <thead> <tr> <th>Phase</th><th>Deliverable</th><th>Target Completion Date</th></tr> </thead> <tbody> <tr> <td>Initiating</td><td>Define project goals, forming administrative group</td><td>December 2022</td></tr> <tr> <td>Planning</td><td>Review current reporting across the regions, identifying reports to be standard and use the New Quality Measures</td><td></td></tr> <tr> <td></td><td>Identify current workload across the practices and all the Quality Team for Evaluation</td><td>March 2023</td></tr> <tr> <td>Implementing</td><td>Review Teams Current Quality Reports and Form an initial report groups</td><td>April - May 2024</td></tr> </tbody> </table>			Phase	Deliverable	Target Completion Date	Initiating	Define project goals, forming administrative group	December 2022	Planning	Review current reporting across the regions, identifying reports to be standard and use the New Quality Measures			Identify current workload across the practices and all the Quality Team for Evaluation	March 2023	Implementing	Review Teams Current Quality Reports and Form an initial report groups	April - May 2024
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Outcomes

[illegible]

What is the MMHQ Internal Quality Report Inventory?

The Quality Report Inventory is a means to make public all available quality reports, the schedule for publishing and their distribution. It is a point of reference for all potential report requestors who are looking for data on any Quality Metric. The Report Inventory includes reference to the Region(s) it is available to. Whether or not it is a heat map measure, The metric report supports, literatures for Awards or Peds, report description, and Location and schedules. This tool will be available on the shared Teams Channel as a starting point for Quality Team Members to go prior to acting on any new report request or inquiry about quality reporting. The Report Inventory is organized by metric. Reports can be found in the Internal Quality Reports Tab.

Tips and Tricks Analytics

This tab displays a simple process map for running and filtering reports, a link to the report workbench exercise booklet, and several slides to navigate the Analytics Catalogue. It should be utilized by staff having difficulty running or filtering reports.

Primary Care Metrics Adult and Primary Care Metrics Pediatric									
2017	2018	2019	2020	2021	2022	2023	2024	2025	2026

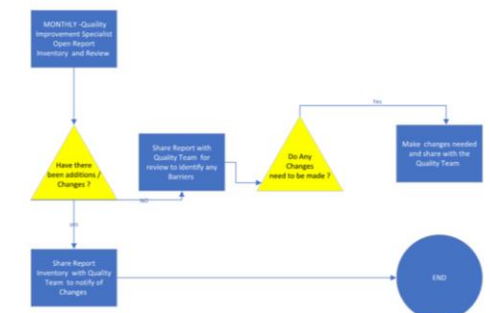
This tab contains a process map for how the inventory will be managed.

INTRODUCTION Time and Tide Analysis Internal Quality Reports



Next Steps

- Roll out Internal Report Inventory to the MHMG Larger team
- Monthly Management to identify any changes or additions Needed
- Resending Monthly to capture new staff
- Begin / Continue work with Specialty inventory



Problem/Impact Statement

Variation of Epic Quality Reports being used across MHMG following the merge of Coastal, Mountain and Southern region quality departments resulting in inconsistent workflows and processes. This can lead to inconsistent care and outcomes of Quality Data we report.

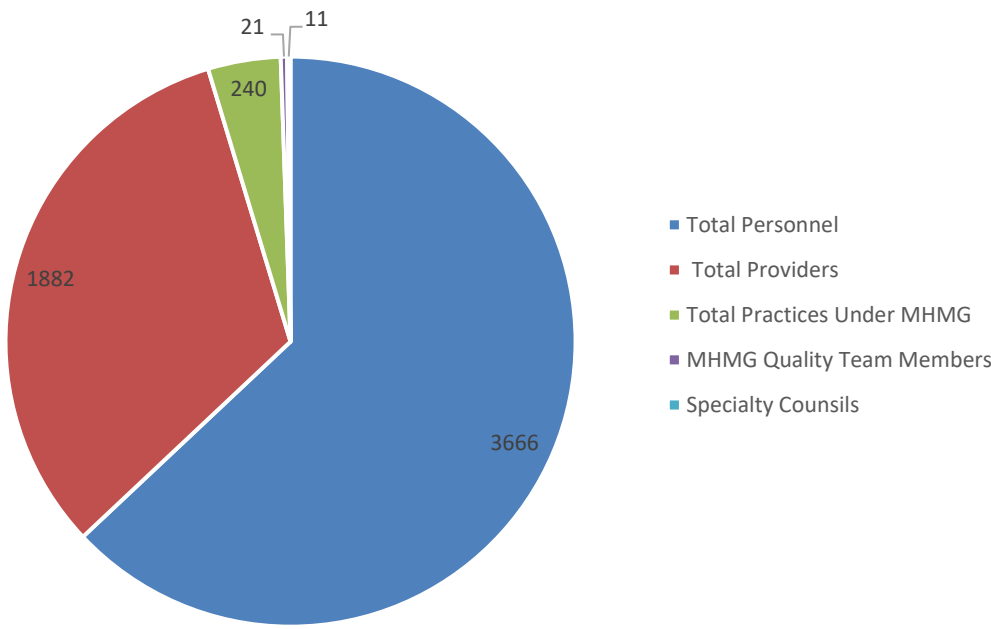
Scope

IN SCOPE: EPIC Reports Currently Being Utilized

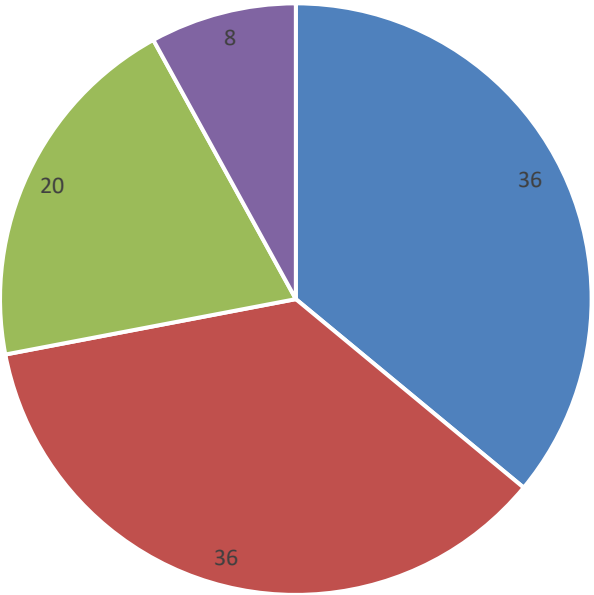
Out of Scope: Analytics timing, non-epic reports, any reports we aren't aware of

Baseline Metrics/Current State

Current MHMG Status

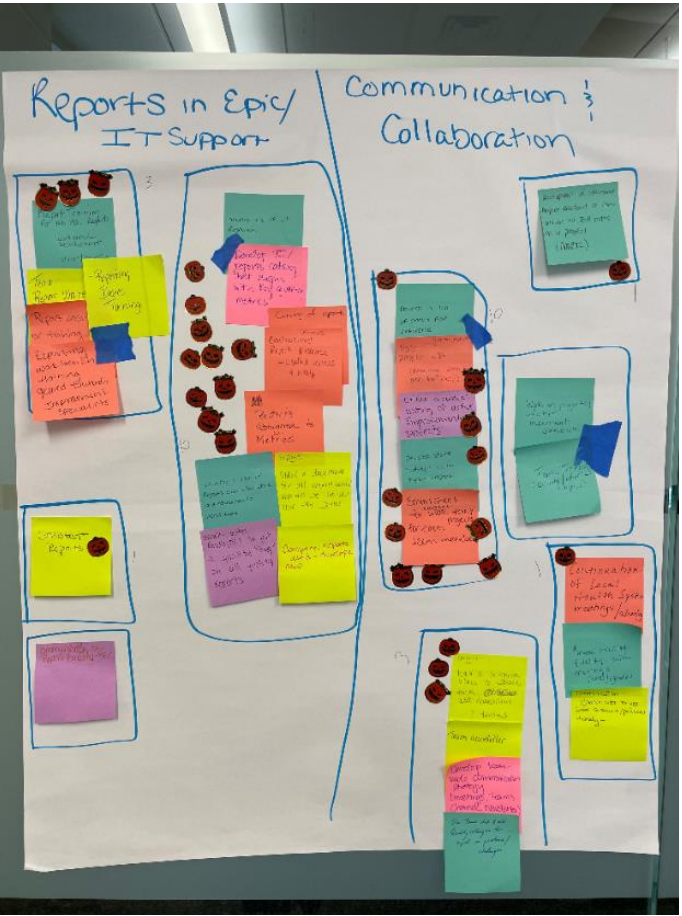
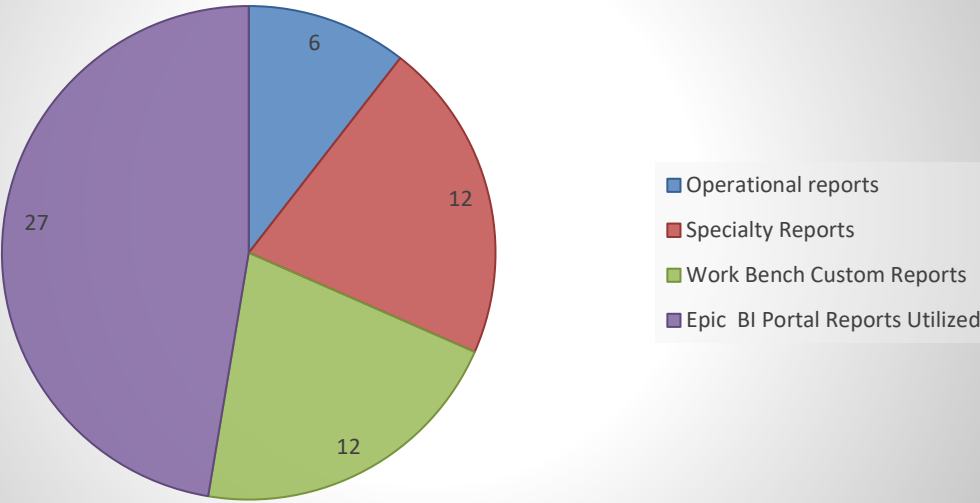


Retreat Feedback



■ Develop Report Inventory ■ Standardize Workflows ■ Report Training ■ Develop IT Resources

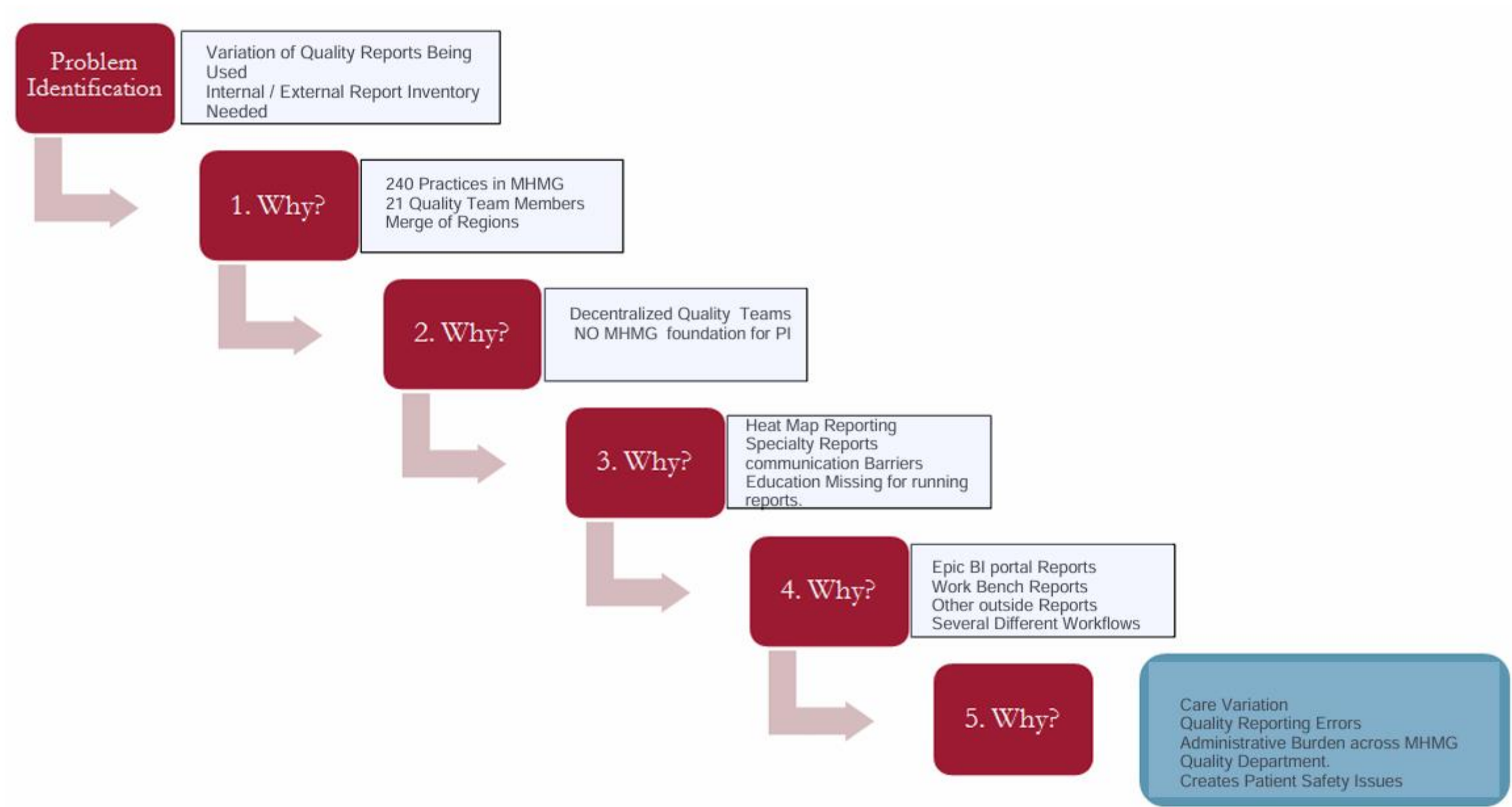
Current Report Status



Goal/Objective


1. Develop an Internal (quality department) inventory of Standard Reports that align with key quality metrics by May 2024
2. Develop an External (front line staff/ providers) inventory of standard reports
3. Develop associated training materials
4. Create a list of Contacts that staff can reach out to with questions about reports
5. Identify any specialty specific reports that can be standard across MHMG

Root Cause Analysis




Outcomes

Tips and Tricks - The Epic Analytics Catalog

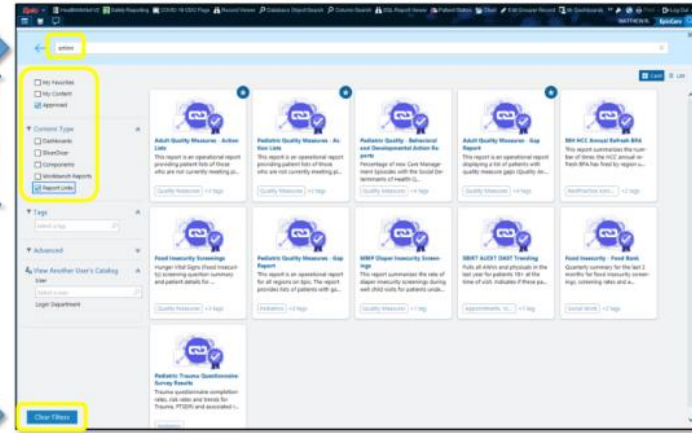
**Helpful Tips!**

1. Use the search box

2. Apply filters as needed

3. Remember to "Favorite" 

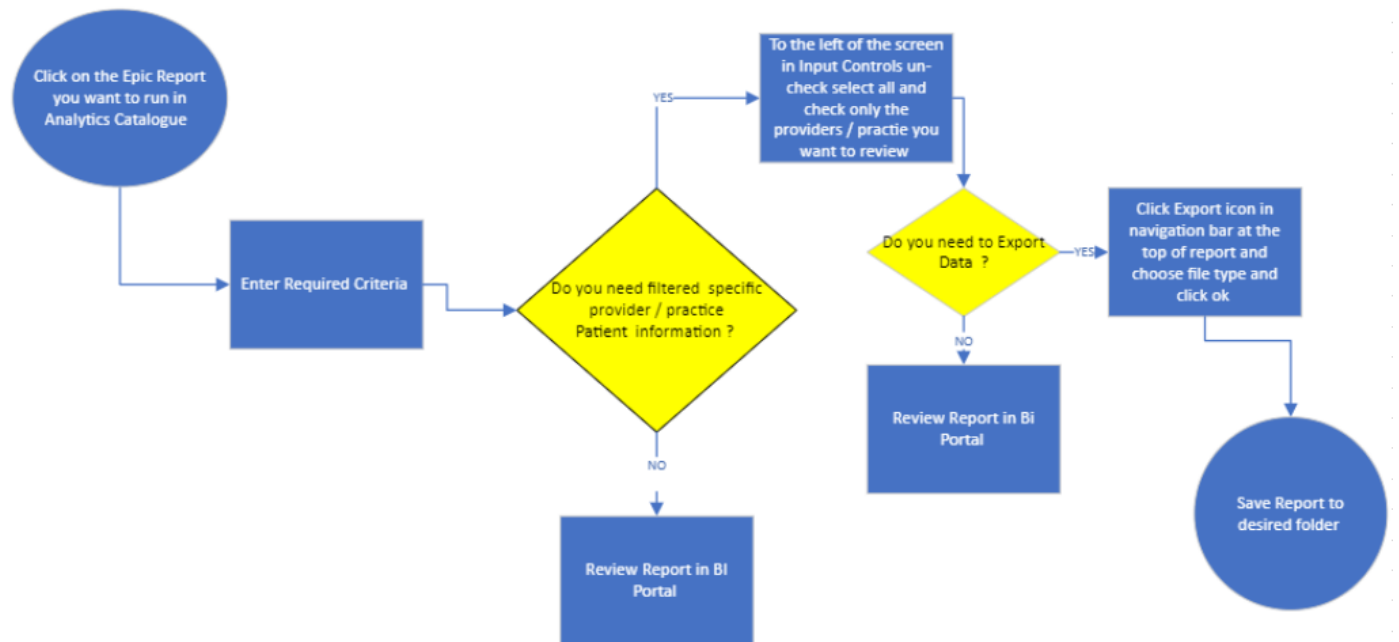
4. Clear filters as needed



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TIP: Type less to find more – Example: Type “tele” to find various telehealth reports

PHASE 1 Internal Quality REPORT INVENTORY 2024							
Search for tools, help, and more (Alt + Q)							
File Home Insert Share Page Layout Formulas Data Review View Automate Help Draw							
Calibri (Body) 11 A B I U L Font Color Background Color General \$ % ° 00 00 00							
Report Name (filterable for Peds/ Adult)	Report Description	Region	Heat Map	Measure	Report Source	How Often Report Refreshes	How Often Staff Run
MH Open Orders	The MaineHealth Open Orders report includes all future, standing, and normal open orders that were ordered during the selected date range. The report is filterable by region, ordering department, and authorizing provider, among others.	available for all regions		All open orders for multiple measures / tests	AC/BI Launch pad	on open	Monthly
MH Claims-Based Clinical Gap Closure	This report matches MHACO claims to the MMP Quality Analytics panel to find quality measure gaps in Epic. These gaps are procedures that were billed out by non-Epic providers and are not reflected in the patient chart in Epic.	available for all regions	yes	All Quality Measures	AC/BI Launch pad		Monthly
MHMG Primary Care Pediatric Metrics Dashboard	Streamlined and interactive dashboard to support MHMG primary care initiatives around quality metrics. This solution has been implemented to replace the Adult and Pediatric Primary Care Metrics Workbooks. This dashboard incorporates both adult and pediatric metrics into one solution and leverages the new regionalization strategy of MaineHealth. Users can view measure performance by region, local health system (LHS), department, and provider.	available for all regions	yes	<div>Metric<ul style="list-style-type: none">Adult BillAdvance Care PlanningAnnual Wellness VisitBreast Cancer ScreeningCervical Cancer ScreeningDepression Screening and Follow Up PlanDiabetes Eye ExamDiabetes Health Risk ControlDiabetes Kidney HealthDiabetes Medication TherapyDocumentation of Severe ObesityFalls AssessmentFoot Injury Screening - AdultHypertension BP ControlHypertension BP Re-checkHypertension BP Re-check Follow UpInfluenza VaccinationLong Acting Insulin ProtocolLow Severity ED VisitsSafe Opioid Prescribing</div>	Power BI	Monthly	Monthly



What is the MHMG Internal Quality Report Inventory?

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Primary Care Metrics Adult and Primary Care Metrics Pediatric

These two tabs are for reference of each of the quality metrics currently being worked on with descriptions of each.

Inventory Management

This tab contains a process map for how the inventory will be managed.

Next Steps

- Roll out Internal Report Inventory to the MHMG Larger team.
- Monthly Management to identify any changes or additions are needed.
- Resending Monthly to capture new staff
- Begin / Continue work with Specialty inventory
-

Region	Heat Map	Measure	Report	Report Description	Report Source	How Often Report Refreshes	How Often Staff Run Report	Person/Title Responsible for the Report Run	Parties involved in Patient Outreach/follow-up
available for all regions	YES	Diabetes Treatment HBA1C >9 , colon cancer screening , breast cancer screening , advance care planning , adult bmi , dm eye exam , dm kidney health , dm statin therapy ,htn control, safe opioid prescribing, depression screening , falls assessment , flu vaccination , substance abuse screening	Adult Quality Measures -Action Lists	This report is an operational report providing patient lists of those who are not currently meeting primary care quality measures.	BI Portal	on open	Monthly	Improvement	Medical Assistants, PHCC
available for all regions		Annual Wellness Visit	Annual Wellness Visits Operational Report	This report includes lists of patients overdue for an annual wellness visit (AWV) with gap summaries by department and provider, patients turning 65 years of age during the selected date range, and patients with a completed AWV during the	BI Portal		Monthly	Pop Health	Pop Health, Practice Staff

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External reports

WorkBench Report

operational report

Specialty

Imp reports

FHP reports

mmp reports

SMHC

