Facilitating Improved Cardiovascular Health in Health System Operated Primary Care Practices

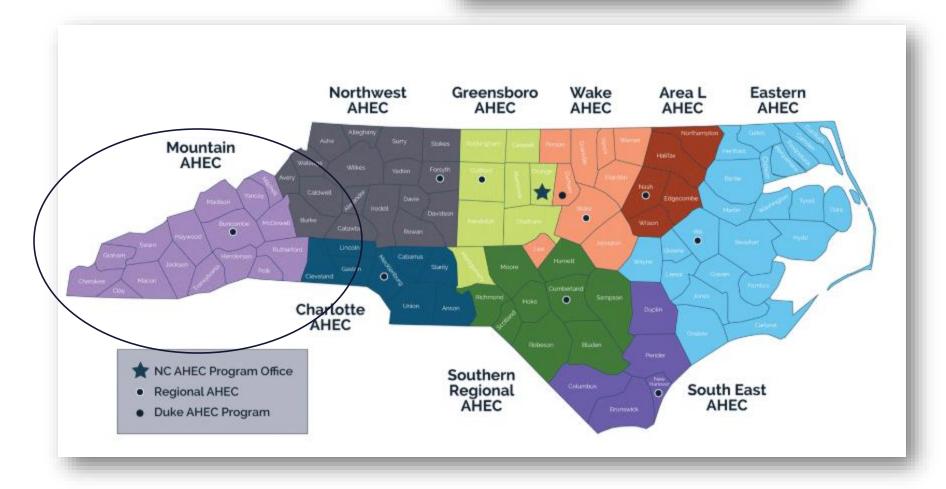
MAHEC Health Innovation Partners

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Who Are We?





What Matters to You?







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Challenge



Increase Knowledge Improve Care Process Improve Health

Clinics

Measure Choice
QI Team Structure
Workflow Changes
Intra-Clinic Reporting

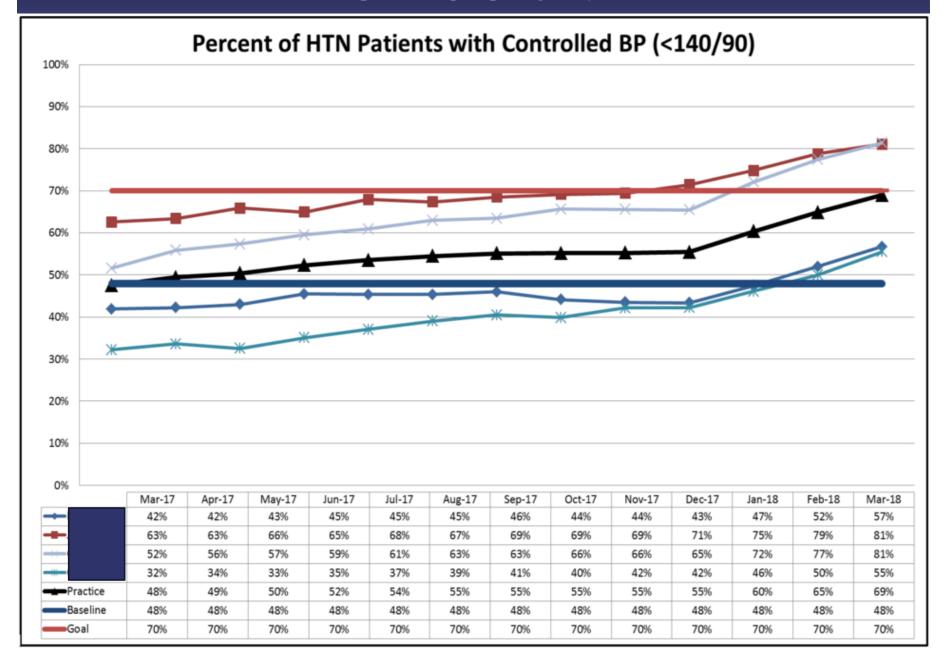
Health System
Common Measure
EHR Standardization
Education on Evidence
Inter-Clinic Reporting

Individualized Practice Facilitation

- * Kick-Off Meeting
- * Initiation of Monthly QI Team Meetings
 - Review action items and changes from previous month
 - * Review measure data by provider
 - * Discuss staff and provider education needs
 - * Develop improvement ideas
 - * Drive PDSAs



Clinic Chart



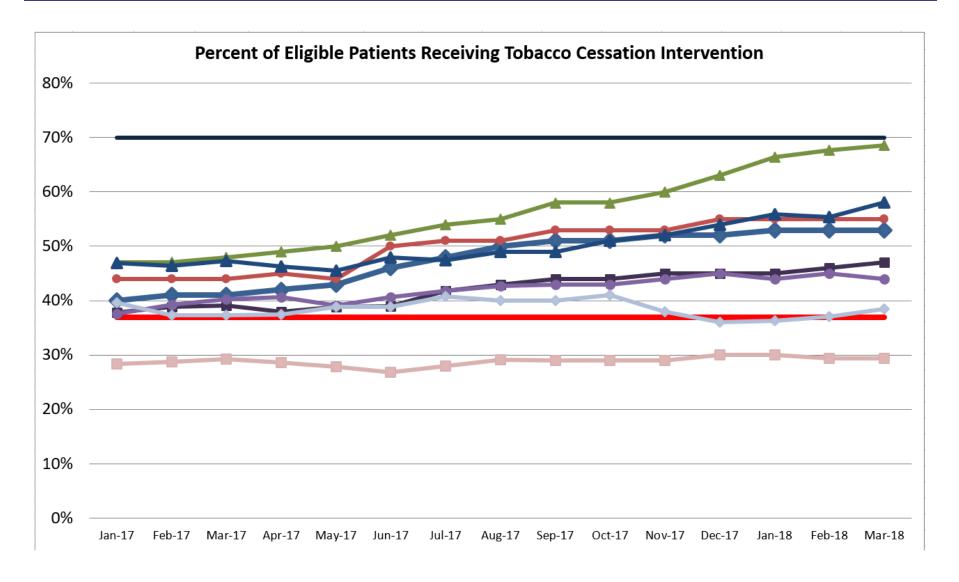
Leveraging the Collective

* Quarterly All-Practice Collaborative

- * Review the inter-clinic charts
- * Discuss and share ideas, especially high performers
- * Evidence Education:
 - * Ambulatory BP Monitoring
 - * The Utility of Risk Scores
 - * Population Health and Using the EHR Dashboard
 - * Discussing ASCVD Risk Scores with Patients
 - * E-cigarette Update
 - * 2017 ACC-AHA Hypertension Guidelines
 - * Health Healthy Nutrition and Exercise



Group Chart



Outcomes



patients with high BP that was not controlled now have it under control







Heart Health NOW!

Increased percentage of patients who received smoking cessation counseling during a primary care visit

Among patients with an ASCVD* risk score greater than 10% who were not taking a statin or aspirin,

started taking a statin (16.5%)



aspirin

*Atherosclerotic Cardiovascular Disease

