

Documenting the Patient Education Protocols and Codes					
Disease, State, Illness or Condition	Topic Discussed	Level of Understanding:	Time	Provider Initials	Behavior Goal
Diabetes (DM)	Exercise (EX)	Good (G)	XX Min	XYZ Provider	GS: Pt. to walk 5/wk/30m/day
DM	EX	G	10 Min	XYZ	GS: Pt. to walk 5/wk/30m/day
Level of Understanding					
Good (G)	Fair (F)	Poor (P)	Refuse (R)	Group (Gp)	
Verbalizes understanding. Verbalizes decision or desire to change (plan of action indicated).	Verbalizes need for more education. Undecided about making a decision or a change.	Does not verbalize understanding. Refuses to make a decision or needed changes.	Refuses Education	Education provided in group. Unable to evaluate individual response	
Able to return demonstrate correctly	Return demonstration indicates need for further teaching.	Unable to return demonstrate			
Behavior Goal					
Goal Set (GS)	Goal Met (GM)	Goal Not Met (GNM)			
State a plan; State a plan how to maintain at least one ____; Write a plan of management; Plan to change ____; A plan to test ____ (blood sugar); Choose at least one change to follow ____; Demonstrate ____ and state a personal plan for ____; Identify a way to cope with ____;	Behavior Goal Met	Behavior Goal Not Met			

To view the complete Patient Education Protocols and Codes Manual, visit:

[www.ihs.gov](http://www.ihs.gov).

Click on Nationwide Programs and Initiatives, look in the upper right-hand corner, and then click on the link to the Patient Education Protocols and Code Manual. You may down-load this pamphlet from the link.

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CRS

Clinical Reporting System

## Patient and Family Education Protocols and Codes (PEPC)

for the

**Clinical Reporting System (CRS)**

**Version 5.0**

**FY 2005 Clinical Indicators**

**11th Edition  
January 2005**

This brochure is intended to explain the importance of documentation and coding of patient education in the IHS and to raise awareness of how GPRA/CRS searches the RPMS system looking for data to populate GPRA/CRS statistics.

The documentation and tracking of Patient Education is an integral part of the IHS Clinical Reporting System. Go to [www.ihs.gov](http://www.ihs.gov) under Nationwide Programs and Initiatives and look in the upper right-hand corner – there you will see the link to the IHS Patient Education Protocols and Codes (PEPC).

The CRS Clinical Reporting system is an RPMS (Resource and Patient Management System) software application designed for national reporting as well as local and Area monitoring of Clinical GPRA and developmental indicators.

The Government Performance and Results Act (GPRA) require Federal Agencies to report annually on how the agency measured up against the performance targets set in its annual plan. IHS GPRA indicators include measures for clinical prevention and treatment, quality of care, infrastructure, and administrative efficiency functions. The CRS Clinical Reporting System is the reporting tool used by the IHS Office of Planning and Evaluation to collect and report clinical performance results annually to the Department of Health and Human Services (DHHS) and to Congress.

Each year, an updated version of CRS software is released to reflect changes in the logic descriptions of the different denominators and numerators. CRS is intended to eliminate the need for manual chart audits for evaluating and reporting clinical indicators. Administrative and clinical users will be able to review individual or all indicators at any time, and can:

- Identify potential data issues in their RPMS, i.e., missing or incorrect data;
- Monitor their site's performance against past national performance and upcoming goals;
- Identify specific areas where the facility is not meeting the indicator in order to initiate business process or other changes;
- Quickly measure impact of process changes on indicators;
- Identify areas meeting or exceeding indicators to provide lessons learned.

In addition to striving to meet GPRA/CRS data, IHS data is also extrapolated to determine if the agency is meeting *Healthy People 2010* and *HEDIS* Indicators:

## Nutrition and Exercise Education for At Risk Patients

### Indicator Topic

Nutrition and Exercise Education for At Risk Patients

### General Definition

In RPMS, how many Patients were provided with:

- Nutrition Education
- Exercise Education
- Other related Education

### Documentation Required

Patient Education:  
Any Medical Nutrition Counseling (MNT)  
Any Nutrition Education-Nutrition Code (N)  
Any Obesity Education-Obesity Code (OBS)  
Any Exercise Education - Exercise Code (EX)  
Any Education on Lifestyle Adaptation (LA)

## Comprehensive CVD Related Assessment

### Indicator Topic

Comprehensive CVD Related Assessment

### General Definition

Patients 46 years of age+ and  
Diabetic and non-Diabetic

- w/LDL in past 5 years
- BMI Calculated
- w/Blood Pressure Values taken twice past 2 years
- Screened/counseling/ diagnosed with depression or anxiety disorders at any time during report period

### Documentation Required

Patient Education:  
See Tobacco Education listed above  
Any Medical Nutrition Counseling (MNT)  
Any Nutrition Education-Nutrition Code (N)  
Any Obesity Education-Obesity Code (OBS)  
Any Exercise Education-Exercise Code (EX)  
Any Education on Lifestyle Adaptation (LA)

## Prenatal HIV Testing and Education

### Indicator Topic

Prenatal HIV Testing and Education

### General Definition

All pregnant patients receiving counseling or patient education about HIV in past 20 months

### Documentation Required

Patient Education:  
HIV-C Complications  
HIV-CUL Cultural/Spiritual Aspects of Health  
HIV-DP Disease Process

HIV – FU	Follow-up
HIV – HM	Home Management
HIV – HY	Hygiene
HIV – L	Patient Information Literature
HIV – LA	Lifestyle Adaptations
HIV – M	Medications
HIV-MNT	Medical Nutrition Therapy
HIV – N	Nutrition
HIV – P	Prevention
HIV – PN	Prenatal
HIV – S	Safety and Injury Prevention
HIV – SM	Stress Management
HIV – TE	Tests
HIV – TX	Treatment

## Alcohol Screening (FAS Prevention) Indicator - BH Group

### Indicator Topic

FAS Prevention

### General Definition

RPMS will search RPMS data for statistics on the number of Female Patients (ages 15-44) screened for alcohol use by CAGE, alcohol-related diagnosis or received alcohol counseling or patient education

CAGE Questions:

Have you been **Concerned** about your alcohol use?

Have you ever been **Angry** when your alcohol use is discussed?

Have you ever felt **Guilty** about your alcohol use?

Do you need alcohol to give you **Energy** to start the day?

Concern, Anger, Guilt, Energy

### Documentation Required

- 1) Health Factor – results of CAGE
- 2) and/or Alcohol Screening,

3) alcohol-related diagnosis,	
4) and/or Patient Education:	
All Patient Education Codes containing:	
• CD (Chemical Dependency)	
• AOD (Alcohol and Other Drugs)	
CD/AOD-C Complications	
CD/AOD-CC Continuum of Care	
CD/AOD-CUL Cultural/Spiritual aspects of health	
CD/AOD-DP Disease Process	
CD/AOD-EX importance of Exercise	
CD/AOD-FU Follow-up	
CD/AOD-L Patient Information Literature	
CD/AOD-LA Lifestyle Adaptations	
CD/AOD-M Medications	
CD/AOD-MNT Medical Nutrition Therapy	
CD/AOD-N Nutrition	
CD/AOD-P Prevention	
CD/AOD-PLC Placement	
CD/AOD-SCR Screening	
CD/AOD-SM Stress Management	
CD/AOD-TE Tests	
CD/AOD-WL Wellness	

## Intimate Partner (Domestic) Violence Screening

### Indicator Topic

Intimate Partner (Domestic) Violence Screening

### General Definition

RPMS will be searched for data on the number of Patients screened for or diagnosed with Intimate Partner (Domestic) Violence Screening:

- Patients with an IPV/DV exam
- Patients with an IPV/DV related diagnosis
- Patients provided with IPV/DV counseling or patient education

### Documentation Required

Patient Education:
DV-CUL Cultural/Spiritual Aspects of Health
DV-DP Disease Process
DV-FU Follow-up
DV-L Patient Information Literature
DV-P Prevention
DV-LA Lifestyle Adaptations
DV-PSY Psychotherapy
DV-S Safety
DV-SCR Screening
DV-SM Stress Management
DV-TX Treatment

## Healthy People 2010

HP 2010 presents a comprehensive, nationwide health promotion disease prevention agenda under the direction of the U.S. Department of Health and Human Services (DHHS). HP 2010 performance indicator definitions and related targets are used by many healthcare organizations, including the IHS, as the basis for its own clinical performance measures.

## HEDIS

Health Plan Employer Data and Information Set (HEDIS®) HEDIS is a set of standardized performance measures originally designed to ensure that purchasers and consumers have the information they need to reliably compare the performance of managed health care plans. HEDIS has evolved into focusing on healthcare prevention standards.

### IHS CRS Indicators are further characterized by type:

Process Indicators	Activities and health services that contribute to reducing mortality and morbidity Examples – construction of clinics, identification of prevalence of disease, patient satisfaction surveys
Impact Indicators	Scientific evidenced-based link to improved health outcomes by reducing risk factor of mortality or morbidity Examples – immunizations, dental sealants, safe drinking water, cancer screenings
Outcome Indicators	Directly related to reducing mortality or morbidity relative to a disease or condition that program(s) addresses Examples – reducing prevalence of obesity, diabetic complications, unintentional injuries
Treatment Categories	Dabetes, cancer, behavioral health, oral health, accreditation, and medications
Prevention Categories	Public health nursing, immunization, injury prevention, behavioral health, cardiovascular disease, obesity, tobacco use, and HIV.

## CRS/GPRA Tobacco Assessment

Indicator Topic	General Definition	Documentation Required
Tobacco Use Assessment	To determine Tobacco use, the RPMS system will search for data on Tobacco Screening via Health Factor Indicators: Providers must ask "Do you Use Tobacco Products?" and then document the patient response using the Health Factors.	1) Tobacco Health Factors: Ceremonial Use Non-tobacco user Current smoker: Then ask: Cigarette/day ____ Current smokeless: Then ask: Cans of snuff/wk ____ Cessation Smoker Then ask: (when) Quit date ____ Cessation Smokeless Then ask: (when) Quit date ____ Previous (ex) Smoked for ____ years previous Previous (ex) Smokeless for ____ years / months Smoke Free Home Smoker in Home Current Smoker and Smokeless Exposure to Environmental Tobacco Smoke (ETS)
	In addition to searching for Tobacco Health Factors, the RPMS system will be searched for data to determine if any patient education was provided on tobacco education: i.e., it will search RPMS for Patient Education Codes containing TO (TO is the mnemonic for Tobacco)	2) Patient Education Codes for Tobacco TO - C Tobacco Complications TO - CUL - Cultural/Spiritual of Health TO - DP Tobacco Disease Process TO - EX Tobacco and importance of Exercise TO - FU Tobacco Follow-up TO - L Tobacco Patient Information Literature TO - LA Tobacco Lifestyle Adaptations TO - M Tobacco Medications TO - QT Tobacco Quit TO - RTC - Readiness to Change TO - SHS Tobacco & Second Hand Smoke TO-SM - Stress Management
	In addition to searching for Health Factors and patient education, RPMS will be searched for Patients who have received counseling on: • tobacco cessation (TO-QT) • tobacco cessation medications (TO-M) • or identified as having Quit Tobacco (TO-QT)	3) Patient Education Counseling on: <ul style="list-style-type: none"><li>• tobacco cessation TO-QT (Tobacco Quit)</li><li>• tobacco and Lifestyle Adaptations TO-LA (Tobacco &amp; Lifestyle Adaptations)</li><li>• tobacco cessation medications TO-M (Tobacco Cessation Medications)</li></ul>

## Medication Education

### Indicator Topic

Medication Education

#### General Definition

Active patients with any medications dispensed at their facility with medication education

### Documentation Required

- Patient Education:
- M - DI Drug Interaction
- M - FU Follow-up
- M - I Information
- M - L Patient Information Literature
- M - PRX Medication dispensed to Proxy

## Depression/Anxiety Screening

### Indicator Topic

Depression/Anxiety Screening

#### General Definition

In RPMS, the number of Patients screened for or counseled about depression OR diagnosed with depressive/ anxiety/ adjustment disorders

#### Documentation Required

In RPMS, 5 Areas of Patient Education are searched:  
Depression/Suicidal Behavior/General Anxiety Disorder/Behavioral Health/ Postpartum Depression

#### Depression:

- DEP-CUL Cultural/Spiritual Aspects of Health
- DEP-DP Disease Process
- DEP-EX Exercise
- DEP-FU Follow-up
- DEP-L Patient Information Literature
- DEP-M Medications
- DEP-PSY Psychotherapy
- DEP-SCR Screening
- DEP-SM Stress Management
- DEP-WL Wellness

#### Suicidal Behavior:

- SB-CUL Cultural/Spiritual Aspects of Health
- SB-FU Follow-up
- SB-L Patient Information Literature
- SB-PSY Psychotherapy
- SB-SCR Screening
- SB-SM Stress Management
- SB-TX Treatment
- SB-WL Wellness

#### General Anxiety Disorder:

- GAD-C Complications

GAD-CUL Cultural/Spiritual Aspects of Health

GAD-DP Disease Process

GAD-EX Exercise

GAD-M Medications

GAD-SM Stress Management

GAD-TX Treatment

#### Behavioral and Social Health:

- BH-ADL Activities of Daily Living
- BH-ANA Abuse and Neglect, Adult
- BH-ANC Abuse and Neglect, Child
- BH-CM Case Management

BH-CUL Cultural/Spiritual Aspects of Health

BH-DP Disease Process

BH-EX Exercise

BH-FU Follow-up

BH-HOU Housing

BH-IR Information and Referral

BH-L Patient Information Literature

BH-M Medications

BH-PLC Placement

BH-RI Patient Rights and Responsibilities

BH-SM Stress Management

BH-TE Tests

BH-TH Therapy

BH-TLM Tele-Mental Health

BH-TR Transportation

BH-WL Wellness

#### Postpartum Depression:

- PDEP-DP Disease Process
- PDEP-FU Follow-up
- PDEP-LA Lifestyle Adaptations
- PDEP-L Patient Information Literature
- PDEP-M Medications
- PDEP-MNT Medical Nutrition Therapy
- PDEP-N Nutrition
- PDEP-SM Stress Management
- PDEP-TX Treatment