

FY 2016 GPRA Update

Program Directors' Meeting
October 15, 2015

Agenda

Topic
1. Integrated Data Collection System (IDCS): GPRA Data Mart Update/Discussion
2. FY 2015 CA GPRA Results
3. Lake County Indian Health : Ernesto Padilla

Integrated Data Collection System (IDCS)

Discussion/Question

IDCS

- Beginning in FY 2018, GPRA data will be reported through the Integrated Data Collection System Data Mart at the National Data Warehouse
- Dear Tribal Leader Letter dated September 23, 2015 was sent out in addition to IDCS Fact Sheet and survey link
- Feedback is requested by October 31, 2015 via email at consultation@ihs.gov or via mail to Mr. Robert McSwain, Deputy Director (address is on DTLL letter)

IDCS

- IDCS is a centralized web-based performance data mart that provides secure, on-demand reports at the service unit, Area, and National levels
- IDCS allows non-RPMS tribal and urban health clinic data to be included in national GPRA data
 - Tribal health programs can opt out of having their data included
- Performance data will be included in the monthly data exports that are already sent in to the NDW (although additional data fields will need to be included in the exports)

IDCS

Table 1. Comparison of the Resource and Patient Management System's (RPMS) Clinical Reporting System (CRS) and the Integrated Data Collection System Data Mart (IDCS DM)

	RPMS CRS		IDCS DM
Data Source	Measure logic searches local RPMS servers for performance results	➡	Uses all data exported to the NDW for performance calculations (RPMS, non-RPMS, Fiscal Intermediary)
Denominator Population	CRS defined Active Clinical Population	➡	IHS User Population
Focus	National performance results include RPMS data only	➡	National performance results represent I/T/U data submitted to the NDW
Logic	RPMS patches containing CRS logic updates installed on local RPMS servers	➡	Programmed centrally, measure logic can be changed quickly within IDCS DM
Report Frequency	Q2, Q3, Q4 for national aggregation from the local site ->Area Office -> National	➡	Run each quarter for national GPRA results, OR users run on-demand reports as needed
Reporting Year	July 1 – June 30	➡	Fiscal Year – October 1 – September 30
Reports	Locally run on RPMS server	➡	On-demand web based Service Unit, Area and National level reports
Results	Based on patient registration and clinical data housed in the local RPMS server	➡	Calculations are based on the patient no matter where the care was received

IDCS

- Benefits:
 - Non-RPMS sites can be included in official GPRA results
 - Reduces burden at facility level as sites no longer have to run and submit quarterly or end-of-year GPRA reports- this will be done at national level
 - National results can be monitored more frequently as data is refreshed at the NDW on a weekly basis (currently national results can only be monitored quarterly)
 - GPRA year will be the same as the fiscal year (Oct 1 - Sept 30)
- Limitations:
 - Measure performance will decline
 - User population denominator is much larger than Active Clinical Population
 - Data included in results is limited to data that is exported (CRS can search entire RPMS database and packages; only certain data fields are exported to NDW)



Questions/Comments??

FY 2015 GPRA Results: California Area

FY 2015 GPRA Results: California Area

2015 Final GPRA Dashboard					
	California Area 2015 Final	California Area 2014 Final	National 2015 Final	National 2015 Target	2015 Final Results - California Area
DIABETES					
Diabetes Dx Ever	11.1%	10.9%	14.4%	N/A	N/A
Documented A1c	86.0%	84.3%	84.7%	N/A	N/A
Good Glycemic Control	50.3%	48.8%	47.4%	47.7%	Met
Controlled BP <140/90	63.0%	62.9%	62.5%	63.8%	Not Met
LDL Assessed	72.6%	70.6%	73.3%	71.8%	Met
Nephropathy Assessed ^a	58.4%	49.8%	62.0%	60.0%	Not Met
Retinopathy Exam	48.0%	51.2%	61.3%	60.1%	Not Met
DENTAL					
Dental Access	41.5%	40.5%	29.2%	27.9%	Met
Sealants	18.3%	16.9%	16.3%	14.1%	Met
Topical Fluoride	31.1%	30.8%	29.4%	26.4%	Met
IMMUNIZATIONS					
Influenza 65+	52.5%	55.7%	65.4%	67.2%	Not Met
Pneumococcal Vaccination 65+ ^a	76.8%	77.4%	84.9%	85.7%	Not Met
Childhood IZ	59.2%	58.3%	73.3%	73.9%	Not Met
PREVENTION					
Pap Screening ^a	46.4%	45.4%	54.9%	54.6%	Not Met
Mammography Screening	46.0%	42.9%	54.5%	54.8%	Not Met
Colorectal Cancer Screening	31.2%	30.7%	38.6%	35.2%	Not Met
Tobacco Cessation	41.5%	38.9%	52.1%	46.3%	Not Met
Alcohol Screening (FAS Prevention)	57.2%	54.8%	66.6%	66.7%	Not Met
DV/IPV Screening	58.6%	55.7%	63.6%	61.6%	Not Met
Depression Screening	61.3%	57.5%	67.4%	64.3%	Not Met
CVD-Comprehensive Assessment	47.0%	41.9%	55.0%	47.3%	Not Met
Prenatal HIV Screening	72.3%	71.4%	86.6%	86.6%	Not Met
Childhood Weight Control ^b	21.7%	22.6%	21.8%	N/A	N/A
Breastfeeding Rates	60.8%	55.6%	35.7%	29.0%	Met
Controlling High Blood Pressure (MH) ^c	55.6%	57.2%	58.5%	59.5%	Not Met
^a Measure logic revised in FY 2014 ^b Long-term measure as of FY 2009, next reported in FY 2016 ^c New measure reported by federal and tribal programs as of FY 2014 Measures in red are GPRAMA measures					Measures Met = 6 Measures Not Met = 16

FY 2015 Final California Tribal GPRA Results

CA programs performed better on 18 of 22 measures in 2015 compared to 2014:

Measure	FY 2015 Q4	FY 2014 Q4	% Improvement
Nephropathy Assessed	58.4%	49.8%	8.6%
Breastfeeding Rates	60.8%	55.6%	5.2%
Comprehensive CVD Assessment	47.0%	41.9%	5.1%
Depression Screening	61.3%	57.5%	3.8%
Mammography	46.0%	42.9%	3.1%
DV/IPV Screening	58.6%	55.7%	2.9%
Tobacco Cessation	41.5%	38.9%	2.6%
Alcohol Screening (FAS Prevention)	57.2%	54.8%	2.4%
LDL Assessed	72.6%	70.6%	2.0%
Sealants	18.3%	16.9%	1.4%
Good Glycemic Control	50.3%	48.8%	1.5%
Dental Access	41.5%	40.5%	1.0%
Pap Screening	46.4%	45.4%	1.0%
Prenatal HIV Screening	72.3%	71.4%	0.9%
Childhood Immunizations	59.2%	58.3%	0.9%
Colorectal Cancer Screening	31.2%	30.7%	0.5%
Topical Fluorides	31.1%	30.8%	0.3%
Controlled BP <140/90	63.0%	62.9%	0.1%

FY 2015 Final California Tribal GPRA Results

CA programs performed worse on 4 of 22 measures in 2015 compared to 2014:

Measure	FY 2015 Q4	FY 2014 Q4	% Decrease
Retinopathy Exam	48.0%	51.2%	3.2%
Influenza 65+	52.5%	55.7%	3.2%
Controlling High Blood Pressure (MH)	55.6%	57.2%	1.6%
Pneumococcal Vaccination 65+	76.8%	77.4%	0.6%

- 16 of 22 measures were below the national IHS average

FY 2015 Final California Urban GPRA Results

- Urban programs report on 16 measures that have targets
- Among urban programs - the # of measures “Met” ranged from 0 to 13
- On average, CA urban health programs performed below the national urban average on 10 of 16 measures
- On average, CA urban programs improved on 6 of 16 measures in 2015 compared to 2014
 - Breastfeeding Rates: Improved by 17.0%
 - Prenatal HIV Screening: Improved by 13.6%

Lake County Tribal Health

FY 2015 GPRA High Performer

Lake County Tribal Health: 2015 GPRA Dashboard

2015 Final GPRA Dashboard						
	Lake County 2015 Final	Lake County 2014 Final	California Area 2015 Final	National 2015 Final	National 2015 Target	2015 Final Results - Lake County
DIABETES						
Diabetes Dx Ever	11.5%	11.6%	11.1%	14.4%	N/A	N/A
Documented A1c	92.7%	89.8%	86.0%	84.7%	N/A	N/A
Good Glycemic Control	51.7%	48.8%	50.3%	47.4%	47.7%	Met
Controlled BP <140/90	51.7%	50.6%	63.0%	62.5%	63.8%	Not Met
LDL Assessed	86.5%	71.1%	72.6%	73.3%	71.8%	Met
Nephropathy Assessed ^a	81.5%	67.5%	58.4%	62.0%	60.0%	Met
Retinopathy Exam	64.6%	57.8%	48.0%	61.3%	60.1%	Met
DENTAL						
Dental Access	49.2%	43.8%	41.5%	29.2%	27.9%	Met
Sealants	23.4%	17.2%	18.3%	16.3%	14.1%	Met
Topical Fluoride	36.7%	37.7%	31.1%	29.4%	26.4%	Met
IMMUNIZATIONS						
Influenza 65+	91.3%	73.0%	52.5%	65.4%	67.2%	Met
Pneumococcal Vaccination 65+ ^a	98.9%	93.3%	76.8%	84.9%	85.7%	Met
Childhood Iz	82.8%	59.0%	59.2%	73.3%	73.9%	Met
PREVENTION						
Pap Screening ^a	44.8%	36.4%	46.4%	54.9%	54.6%	Not Met
Mammography Screening	56.9%	23.1%	46.0%	54.5%	54.8%	Met
Colorectal Cancer Screening	41.8%	22.0%	31.2%	38.6%	35.2%	Met
Tobacco Cessation	66.2%	44.4%	41.5%	52.1%	46.3%	Met
Alcohol Screening (EAS Prevention)	75.4%	58.2%	57.2%	66.6%	66.7%	Met
DV/IPV Screening	74.9%	57.2%	58.6%	63.6%	61.6%	Met
Depression Screening	76.5%	62.4%	61.3%	67.4%	64.3%	Met
CVD-Comprehensive Assessment	72.5%	36.5%	47.0%	55.0%	47.3%	Met
Prenatal HIV Screening	90.6%	50.0%	72.3%	86.6%	86.6%	Met
Childhood Weight Control ^b	18.3%	28.0%	21.7%	21.8%	N/A	N/A
Breastfeeding Rates	100%	0.0%	60.8%	35.7%	29.0%	Met
Controlling High Blood Pressure	41.5%	37.1%	55.6%	58.5%	59.5%	Not Met
^a Measure logic revised in FY 2014 ^b Long-term measure as of FY 2009, next reported in FY 2016 <i>Results in italics represent measures with fewer than 20 patients in the denominator; use caution when interpreting these results.</i> Measures in red are GPRAMA measures						Measures Met = 19 Measures Not Met = 3

Lake County Tribal Health 2015 Improvement

- Improved on 21 of 22 measures in 2015 compared to 2014
- Largest improvements:

Measure	FY 2015 Result	FY 2014 Result	% Improvement
Breastfeeding Rates	100%	0.0%	100%
Prenatal HIV Screening	90.6%	50.0%	40.6%
Comp CVD Assessment	72.5%	36.5%	36.0%
Mammography	56.9%	23.1%	33.8%
Childhood Immunizations	82.8%	59.0%	23.8%
Tobacco Cessation	66.2%	44.4%	21.8%
Colorectal Cancer Screening	41.8%	22.0%	19.8%
Influenza 65+	91.3%	73.0%	18.3%
DV/IPV Screening	74.9%	57.2%	17.7%
Alcohol Screening	75.4%	58.2%	17.2%
LDL Assessed	86.5%	71.1%	15.4%
Depression Screening	76.5%	62.4%	14.1%
Nephropathy Assessment	81.5%	67.5%	14.0%



Lake County Tribal Health

Modern Medicine  *Personalized Care*

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Lake County Dashboard 2014 Final GPRA/GPRAMA Report

2014 Final GPRA Dashboard						
	Lake County 2014 Final	Lake County 2013 Final	California Area 2014 Final	National 2014 Final	National 2014 Target	2014 Final Results - Lake County
DIABETES						
Diabetes Dx Ever	11.6%	11.8%	10.9%	14.0%	N/A	N/A
Documented A1c	89.8%	82.7%	84.3%	85.7%	N/A	N/A
Good Glycemic Control	48.8%	46.3%	48.8%	48.6%	48.3%	Met
Controlled BP <140/90	50.6%	59.3%	62.9%	63.8%	64.6%	Not Met
LDL Assessed	71.1%	55.6%	70.6%	73.4%	73.9%	Not Met
Nephropathy Assessed ¹	67.5%	54.3%	49.8%	60.0%	Baseline	Met
Retinopathy Exam	57.8%	53.7%	51.2%	59.9%	58.6%	Not Met
DENTAL						
Dental Access	43.8%	39.1%	40.5%	28.8%	29.2%	Met
Sealants	17.2%	5.9%	16.9%	14.6%	13.9%	Met
Topical Fluoride	37.7%	26.0%	30.8%	27.9%	26.7%	Met
IMMUNIZATIONS						
Influenza 65+	73.0%	59.5%	55.7%	68.1%	69.1%	Met
Pneumovax 65+ ^a	93.3%	86.9%	77.4%	85.7%	Baseline	Met
Childhood IZ	59.0%	40.0%	58.3%	75.4%	74.8%	Not Met
PREVENTION						
Pap Screening ^a	36.4%	38.9%	45.4%	54.6%	Baseline	Met
Mammography Screening	23.1%	35.1%	42.9%	54.2%	54.7%	Not Met
Colorectal Cancer Screening	22.0%	31.0%	30.7%	37.5%	35.0%	Not Met
Tobacco Cessation	44.4%	37.1%	38.9%	48.2%	45.7%	Not Met
Alcohol Screening (FAS Prevention)	58.2%	35.2%	54.8%	66.0%	65.9%	Not Met
DV/IPV Screening	57.2%	34.3%	55.7%	63.5%	64.1%	Not Met
Depression Screening	62.4%	43.7%	57.5%	66.0%	66.9%	Not Met
CVD-Comprehensive Assessment	36.5%	32.7%	41.9%	52.3%	51.0%	Not Met
Prenatal HIV Screening	50.0%	91.1%	71.4%	88.0%	89.1%	Not Met
Childhood Weight Control ^b	28.0%	34.8%	22.6%	22.8%	N/A ^b	N/A
Breastfeeding Rates	0.0%	16.7%	55.6%	35.1%	29.0%	Not Met
Controlling High Blood Pressure	37.1%	N/A	57.2%	59.5%	Baseline	Met
^a Measure logic revised in FY 2014 ^b Long-term measure as of FY 2009, next reported in FY 2016 <i>Results in italics represent measures with fewer than 20 patients in the denominator; use caution when interpreting these results.</i> Measures in red are GPRAMA measures						Measures Met: 9 Measures Not Met: 13

ON THE ROAD TO IMPROVEMENT...

- ❖ **Executive Director held a Motivational Meeting**
- ❖ **GPRA Coordinator Position Filled, October, 2014**
- ❖ **GPRA Champions Assigned to Individual Measures**
- ❖ **Monthly GPRA Meetings**
- ❖ **GPRA Numbers E-Mailed to All Employees Each Month**
- ❖ **Stats Posted Weekly in Provider Hallway and Nursing Station**
- ❖ **Monthly CRS Patient Lists Printed and Distributed to Champions**

SOME THINGS WE DID TO IMPROVE OUR GPRA MEASURES

- ❖ **Women's Health Day**
- ❖ **Health Fairs**
- ❖ **Diabetic GPRA Day**
- ❖ **Standing Orders**
Diabetics, Flu Shots, Screening Mammograms, Vision
- ❖ **Every Patient, Every Time**

SOME THINGS WE DID TO IMPROVE OUR GPRA MEASURES

- ❖ **Working Patient Lists**
Phone Calls, Letters
- ❖ **Chart Audits**
Prepare Next Days Appointments and Patient Needs
- ❖ **ICare Daily Patient Reports**
- ❖ **Blood Pressure Monitor Program**
- ❖ **Live, Eat and Breath GPRA**

Lake County Dashboard 2015 Final GPRA/GPRAMA Report

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Tobacco Cessation	66.2%	44.4%	41.5%	52.1%	46.3%	Met
Alcohol Screening (if AS Prevention)	75.4%	58.2%	57.2%	66.6%	66.7%	Met
DV/IPV Screening	74.9%	57.2%	58.6%	63.6%	61.6%	Met
Depression Screening	76.5%	62.4%	61.3%	67.4%	64.3%	Met
CVD-Comprehensive Assessment	72.5%	36.5%	47.0%	55.0%	47.3%	Met
Prenatal HIV Screening	90.6%	50.0%	72.3%	86.6%	86.6%	Met
Childhood Weight Control ^b	18.3%	28.0%	21.7%	21.8%	N/A	N/A
Breastfeeding Rates	100%	0.0%	60.8%	35.7%	29.0%	Met
Controlling High Blood Pressure	41.5%	37.1%	55.6%	58.5%	59.5%	Not Met
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<i>Good Glycemic Control</i>	51.7%	48.8%	50.3%	47.4%	47.7%	Met
Controlled BP <140/90	51.7%	50.6%	63.0%	62.5%	63.8%	Not Met
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CVD-Comprehensive Assessment	72.5%	36.5%	47.0%	55.0%	47.3%	Met
Prenatal HIV Screening	90.6%	50.0%	72.3%	86.6%	86.6%	Met
Childhood Weight Control ^b	18.3%	28.0%	21.7%	21.8%	N/A	N/A
Breastfeeding Rates	100%	0.0%	60.8%	35.7%	29.0%	Met
Controlling High Blood Pressure	41.5%	37.1%	55.6%	58.5%	59.5%	Not Met
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ROOM FOR IMPROVEMENT...

THREE MEASURES NOT MET

❖ Pap Smears

4 Women's Health Days Planned

October, February, April and May

❖ Controlled Blood Pressure <140/90

Blood Pressure Monitor Program

Collaboration between Medical, PH & Nutritionist

❖ Controlling High Blood Pressure – Million Hearts

Blood Pressure Monitor Program

Collaboration between Medical, PH & Nutritionist

LCTHC 2016 Monthly GPRA Report

	# Patients Needed to Achieve 100%	# Patients Needed to Achieve Target	As of 7/1/16	Jun-16	May-16	Apr-16	Mar-16	Feb-16	Jan-16	Dec-15	Nov-15	Oct-15	Sep-15	Aug-15	Jul-15	Final 2015	MT Target (based on 16 Sept. to 2015)
DIABETES																	
Good Glycemic Control <8	107	22											34.4%	27.2%	22.6%	51.7%	49.5%
Controlled BP <140/90	105	46											35.6%	27.9%	12.2%	51.1%	65.0%
Statin Therapy to Reduce CVD Risk***													45.4%	34.7%	24.3%	N/A	baseline
Nephropathy Assessed	105	40											35.6%	21.8%	19.1%	80.9%	61.1%
Retinopathy Assessed	153	88											6.1%	3.4%	0.0%	64.0%	61.6%
DENTAL																	
Dental Access	1510	136											20.8%	16.6%	11.5%	49.1%	29.3%
Sealants	527	14											11.9%	12.0%	12.1%	23.4%	14.8%
Topical Fluoride-pts	604	140											4.3%	4.3%	4.4%	36.7%	28.3%
IMMUNIZATIONS																	
Influenza 6mo - 17 yrs ***													0.0%	0.0%	0.0%	N/A	baseline
Influenza 18+ ***													0.0%	0.0%	0.0%	N/A	baseline
Pneumovax 65+	7	0											92.6%	91.7%	92.6%	97.8%	87.3%
Childhood IZ	34	23											22.7%	23.3%	22.0%	82.8%	76.8%
PREVENTION																	
Pap Screening	215	60											37.1%	36.6%	36.8%	44.9%	55.6%
Mammography Screening	51	4											51.0%	46.7%	44.8%	56.9%	55.9%
Colorectal Cancer Screening	193	19											28.3%	26.6%	26.8%	41.3%	38.7%
Tobacco Cessation	147	0											48.6%	36.4%	24.2%	65.8%	49.1%
Alcohol Screening	184	72											45.7%	32.5%	20.7%	75.2%	baseline
DV/IPV Screening	171	55											43.8%	32.0%	21.1%	74.9%	baseline
Depression Screening	411	104											52.3%	42.3%	28.5%	76.4%	67.2%
Controlling High Blood Pressure (MH)	77	29											35.3%	41.9%	39.3%	41.3%	60.6%
CVD-Comprehensive Assess - 22 yrs+	30	9											25.0%	17.9%	6.1%	72.5%	53.3%
HIV Screening - 13 - 64 yrs + ***													0.0%	0.0%	0.0%	N/A	baseline
Childhood Weight Control*	29	7											29.3%	24.1%	33.3%	18.5	22.8%
Breastfeed Rates @ 2mos	5	0											37.5%	37.5%	37.5%	100.0%	29.0%

*Childhood weight control has been removed from GPRA Measures. It is an IHS Long Term Measure. Reported every 3 years, 2016 will be next reporting year.

*** New Measures added for GPRA FY 2016

National Target Met
 <10% To Meet Goal
 >10% To Meet Goal

DATE: 10/1/15

MEASURE	CHAMPIONS	CURRENT %	SAME TIME LAST YEAR %	2016 NATIONAL TARGET
Good Glycemic Control <8	Megann & Emilia	34.4%	28.3%	49.5%
Controlled BP<140/90	Kristina & Jessica	35.6%	43.3%	65.0%
Statin Therapy to Reduce CVD Risk	Emilia & Cyndy	45.4%	26.8%	Baseline
Nephropathy Assessed	Megann & Michelle	35.6%	26.8%	61.1%
Retinopathy Assessed	Jessica & Vicki	6.1%	22.0%	61.6%
DENTAL				
Dental Access	Tashina & Stacy	20.8%	26.7%	29.3%
Sealants	Tashina & Stacy	11.9%	11.4%	14.8%
Topical Fluoride-pts	Tashina & Stacy	4.3%	15.9%	28.3%
IMMUNIZATIONS				
Influenza 6mo - 17 yrs ***	Kathy & Alejandra	0.0%	N/A	Baseline
Influenza 18+ ***	Cyndy & Rebecca	0.0%	N/A	Baseline
Pneumovax 65+	Cyndy & Rebecca	92.6%	90.5%	87.3%
Childhood IZ	Kathy & Alejandra	22.7%	26.7%	76.8%
PREVENTION				
Pap Screening	Mary & Kathy	37.1%	30.6%	55.6%
Mammography Screening	Mary & Elva	51.0%	10.0%	55.9%
Colorectal Cancer Screening	Heather & Michelle	28.3%	25.2%	38.7%
Tobacco Cessation	Maria, Adrienne, Tony	48.6%	22.8%	49.1%
Alcohol Screening	Maria, Adrienne, Daphne	45.7%	45.2%	Baseline
DV/IPV Screening	Vicki & Robin	43.8%	42.5%	Baseline
Depression Screening	Vicki & Merrill	52.3%	45.2%	67.2%
Controlling High Blood Pressure (MH)	Kristina & Teresa	35.3%	44.9%	60.6%
CVD-Comprehensive Assess	Teresa & Heather	25.0%	14.0%	53.3%
HIV Screening - 13 - 64 yrs ***	Kristina & Cyndy	0.0%	N/A	Baseline
Childhood Weight Control	Kathy & Emily	29.3%	N/A	22.8%
Breastfeed Rates @ 2mos	Mary & Elva	37.5%	66.7%	35.8%

IT TAKES A TEAM!

