Stitch in Time: Enabling Change Using Computers

Innovative Uses of Information Technology Helping Providers to Care

The Quadruple Aim: Working Together, Achieving Success

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### Stitch in Time: Enabling Change Using Computers: Innovative Uses of Information Technology Helping Providers to Care

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OBJECTIVES: Stitch in Time

• Discuss innovative tools to help **focus providers and clinical staff** on preventive health measures recommended to be assessed at every patient care visit.

• Explain to clinical staff representatives and to providers how printing of automated Stitch in Time forms at the beginning of each day for all scheduled patients at every command clinic makes a difference in the consistency of care provided.
OBJECTIVES: Stitch in Time

- Discuss how simple tools using the concepts of **consistency** in preventive health counseling with the demand of time efficiency for providers of care to create an easy and workable solution to helping our clinics achieve high scores for preventive health metrics.
What is a Stitch in Time? ... a reminder.

• Naval Hospital Jacksonville **automated** the collection of data *and* printing of a Stitch in Time provider reminder to help focus preventive care for our patients at every clinic visit.

• The form consolidates information from CHCS, AHLTA, and the Population Health Navigator. Data is extracted *every night* keeping the form up to date placed into a format easy to print each morning by front desk staff for every scheduled patient encounter across the command.

• Using accessible manufactured resources such as .NET and SQL Server reporting services we pre-processed the data into consolidation locations enabling easy to print reports.
Provider reminders do work.

AHRQ survey from 2008 showed 74% of the studies of preventive healthcare reminders reported a positive impact.

Computer systems, however, were not statistically superior to manual reminder systems. A string tied to the providers finger may work best.
Front desk staff clicks one button to print.
Identify, then diagnose and treat.

- Shares clinical workload, helps nurses and ancillary staff identify what preventive clinical measures a patient needs.

- Complements the medical home concept: do for each patient what they need most.

- Sets the tone / provides a focus for medical home implementation.
A *Systems Approach* to care, it facilitates standardization.

- Enables every clinic to have more clearly established and measurable goals.

- Standardizes the care provided to a much greater degree than relying on the consistency of providers to remember to focus on all preventive care areas.
The Clinical Portal supports the Stitch in Time.
Uses Pop Health Navigator data with yesterday’s lab results.
Quick access to patient-centered resources.
Providers and nurses can review data.
Quick Search finds patient, identifies chronic conditions.
“Chart chit” collects the diabetes vital signs in one spot.
Providers can at-a-glance see LDL, GFR, and A1C.
Metrics matter.
Diabetes A1c Reminder

Dear [First Name],

Your records show that you meet criteria for treatment of diabetes or that you may be at risk of becoming diabetic. Staying healthy with diabetes requires preventive tests. One of those important blood tests is an A1c. Your A1c should be checked every 3-6 months. It shows your average blood sugar over the past three months.

Your fasting labs have been ordered.

WHAT SHOULD MY A1c BE?

People without diabetes have an A1c between 4 & 6%. We recommend a goal of 6.5% for most people with diabetes.

WHY IS THE A1c IMPORTANT?

Studies show that keeping your A1c near normal will reduce your risks of diabetes complications. When your A1c is high, there are increased risks for complications that can affect your kidneys, eyes, heart, feet and other parts of your body.

Nylene Tinajero, RN
Central Appointments
904-542-4677

Patient-centered, Quality Healthcare
Naval Hospital Jacksonville Florida
Letters help our providers speak to our patients.
We use the Clinical Data Mart to show our providers their data.
Tobacco Cessation: Numbers allow real disease management.
We stay with the patient, send letters, audiocare.

Quitting tobacco can be very hard, but with help, you can do it!

Dear [Name],

Congratulations on your decision to stop using tobacco products! We have received a referral indicating your desire to quit. The use of smoked and/or smokeless tobacco is a leading cause of preventable death and disease in our country.

Quitting tobacco may be the most difficult, yet most rewarding thing that you will do in your entire life. The Naval Hospital at Jacksonville and your provider are here to help you.

We offer different programs and aids in helping you 'kick the habit'. Please call our Tobacco Cessation Coordinator to make an appointment to discuss one of the most important decisions of your life.

Brooke Keen, RN
904-542-5262

Good luck with your effort. We are proud of you for giving it a try.
We measure SABA Ratios to better determine asthma risk.
Clinical Data Mart gives us metrics to make decisions with.

- Allows precise tracking % of pregnant Moms who have been immunized for seasonal Flu (53.1% as of 17 December!).

- Room to grow: using CDM to pull data to push adult immunizations.
Growing still: Creative uses of CDM.

• Clinical Data Mart (CDM): Rates of change in BMI for Healthy Weight consults. Can help to more precisely manage our Wellness programs.

• Does SHIPSHAPE class help patients to lose weight?

• Does an internet based program to follow patients enrolled to Healthy Weight help?
Many Hands Make Light Work

Questions?

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