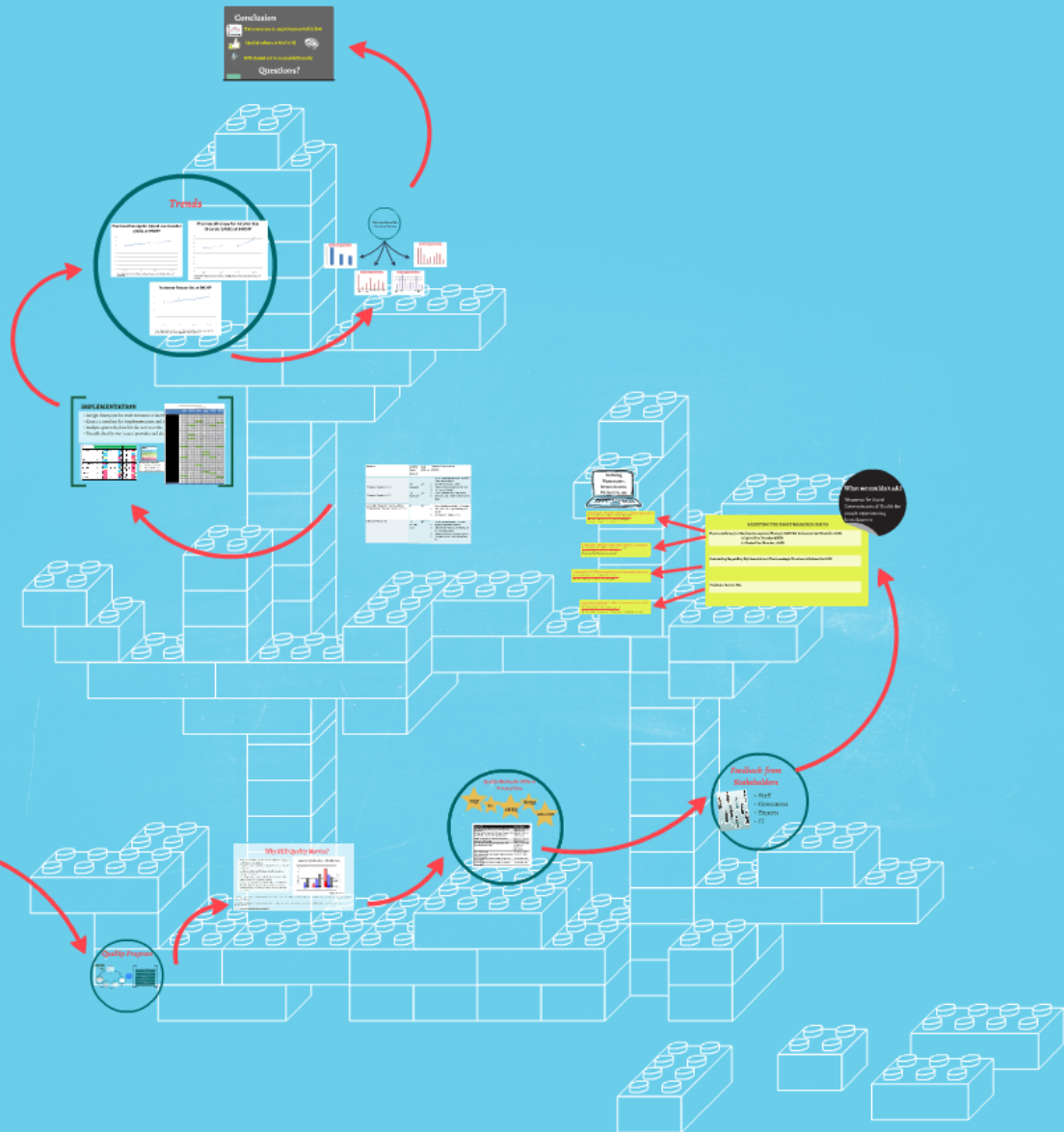


BOSTON HEALTH CARE for the HOMELESS PROGRAM
SINCE 1984

MEASURING WHAT MATTERS

Creating and adopting quality metrics to address Substance Use Disorders (SUDs)

Sanju Nembang
Quality Data Analyst
BHCHP





MEASURING WHAT MATTERS

Creating and adopting quality metrics to address Substance Use Disorders (SUDs)

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IMPLEMENTATION

- Assign champion for
- Create a timeline for
- Analyze quarterly
- Stratify data by site

Site	Q1	Q2	Q3	Q4
Site 1	10	12	15	18
Site 2	8	10	12	15
Site 3	5	7	9	11
Site 4	3	4	5	6

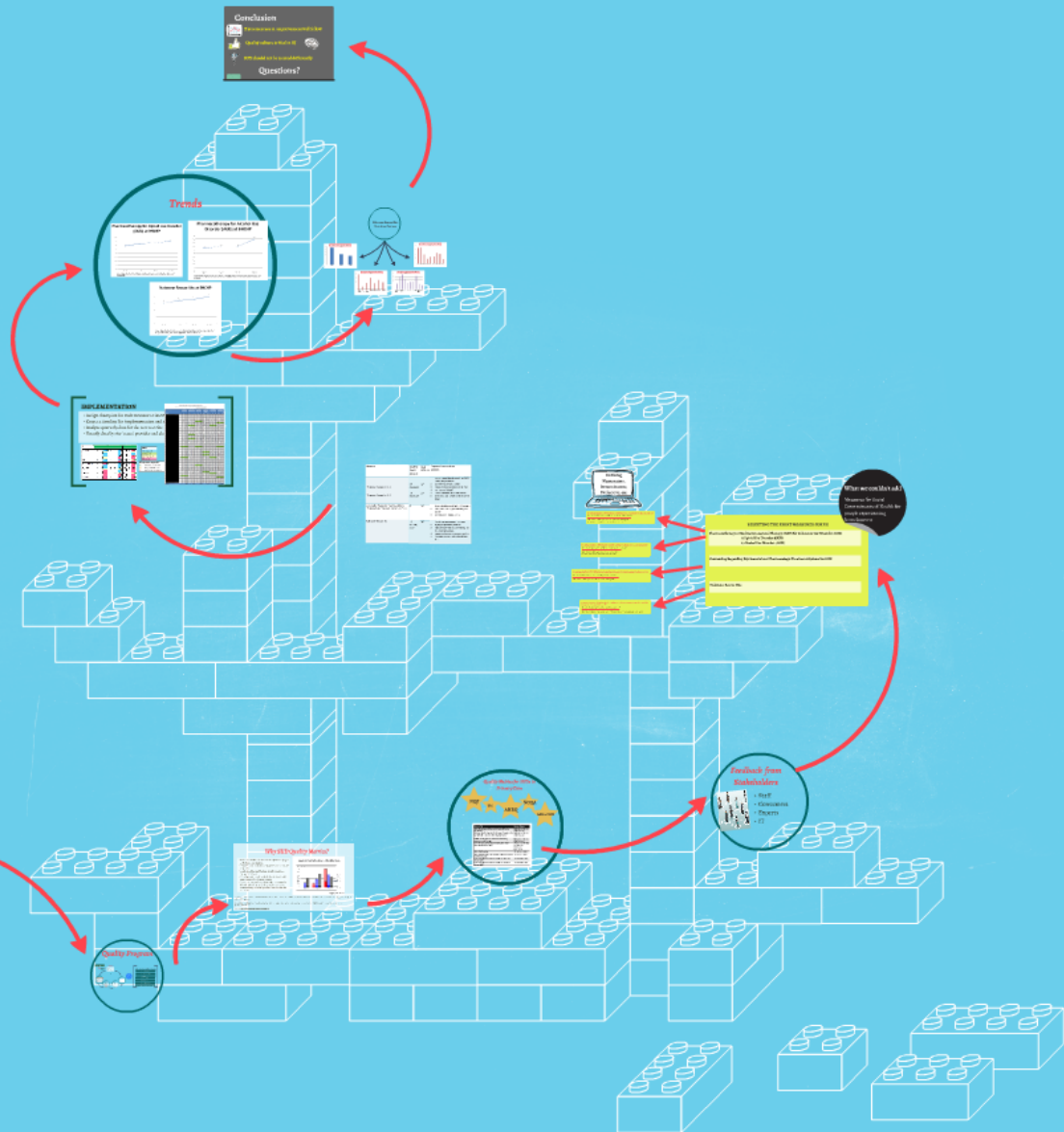
quality program
overview

BOSTON HEALTH CARE for the HOMELESS PROGRAM
SINCE 1984

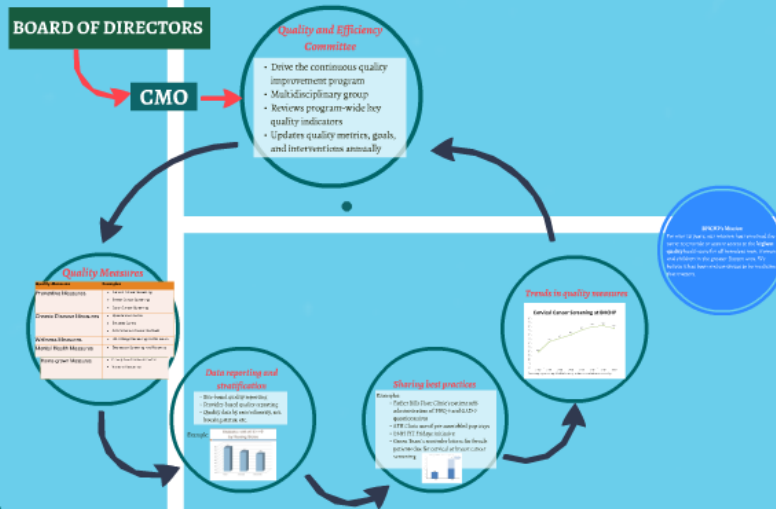
MEASURING WHAT MATTERS

Creating and adopting quality metrics to address Substance Use Disorders (SUDs)

Sanju Nembang
Quality Data Analyst
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Quality Program



Basic tenets of a quality initiative

Collection of data for baseline

Recognition of need to improve

Nurse champion to take lead

Team-based approach to care

Motivation and incentives

Clinical reminders using EHR

Data reporting by site, teams, and individual clinicians

BHCHP's Mission

For over 30 years, our mission has remained the same: to provide or assure access to the **highest quality** health care for all homeless men, women and children in the greater Boston area. We believe it has been and continues to be medicine that matters.

Basic tenets of a quality initiative

Collection of data for baseline

Recognition of need to improve

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BOARD OF DIRECTORS

CMO

Quality and Efficiency Committee

- Drive the continuous quality improvement program
- Multidisciplinary group
- Reviews program-wide key quality indicators
- Updates quality metrics, goals, and interventions annually

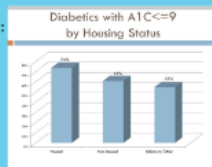
Quality Measures

Quality Measures	Examples
Preventive Measures	<ul style="list-style-type: none"> • Cervical Cancer Screening • Breast Cancer Screening • Colon Cancer Screening
Chronic Disease Measures	<ul style="list-style-type: none"> • Hypertension Control • Diabetes Control • Asthmatics on Appropriate Meds
Wellness Measures	<ul style="list-style-type: none"> • Adult Weight Screening and Follow-up
Mental Health Measures	<ul style="list-style-type: none"> • Depression Screening and Follow-up
Home-grown Measures	<ul style="list-style-type: none"> • Primary Care Provider connection • Naloxone Rescue kits

Data reporting and stratification

- Site-based quality reporting
- Provider-based quality reporting
- Quality data by race/ethnicity, sex, housing status, etc.

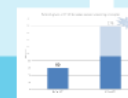
Example:



Sharing best practices

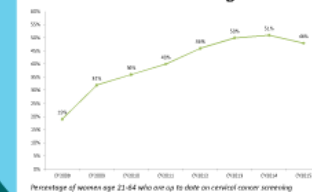
Examples:

- Father Bills Place Clinic's patient self-administration of PHQ-9 and GAD-7 questionnaires
- SFH Clinic use of pre-assembled pap trays
- BMH FIT Fridays initiative
- Green Team's reminder letters for female patients due for cervical or breast cancer screening



Trends in quality measures

Cervical Cancer Screening at BHCHP



Quality and Efficiency Committee

- Drive the continuous quality improvement program
- Multidisciplinary group
- Reviews program-wide key quality indicators
- Updates quality metrics, goals, and interventions annually

Quality Measures

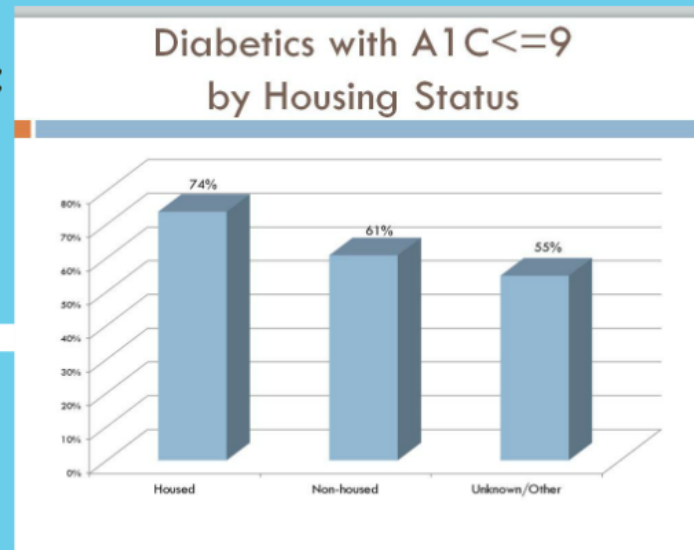
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Data reporting and stratification

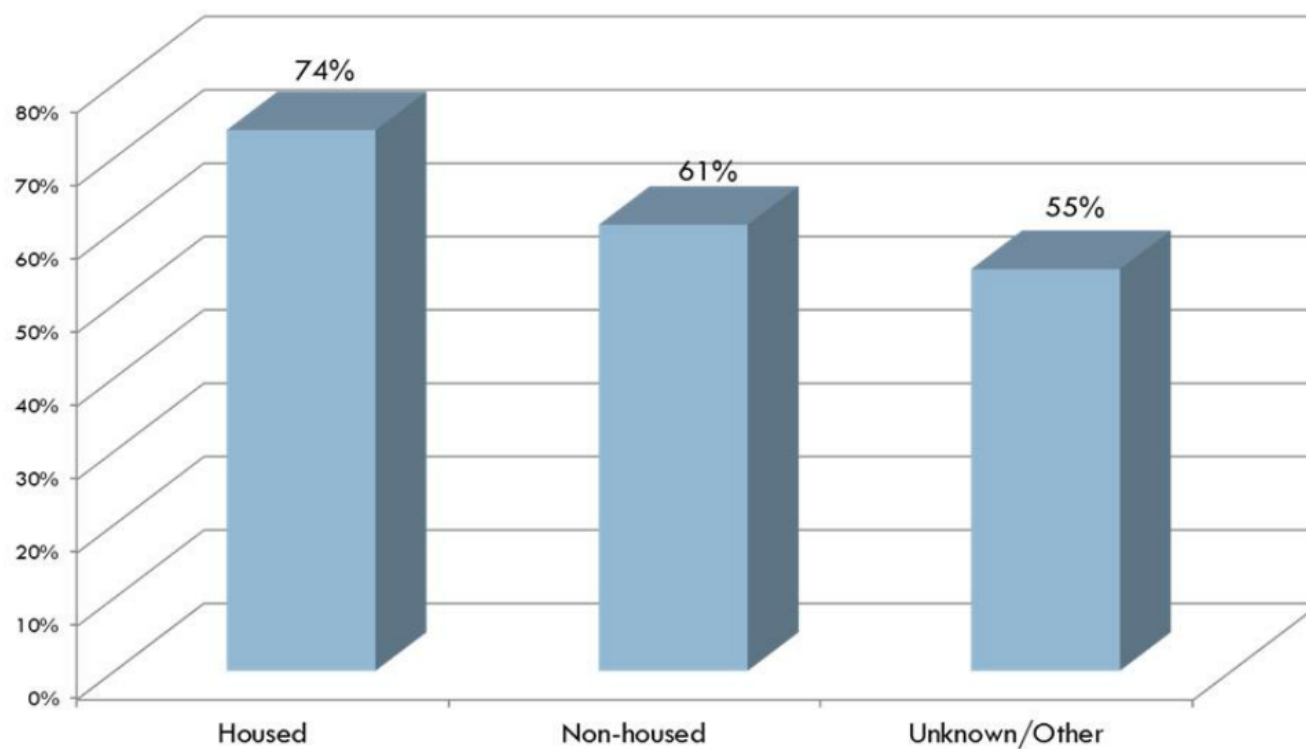
- Site-based quality reporting
- Provider-based quality reporting
- Quality data by race/ethnicity, sex, housing status, etc.

Example:



Example:

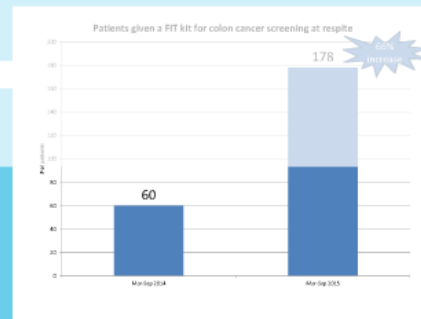
Diabetics with A1C ≤ 9 by Housing Status



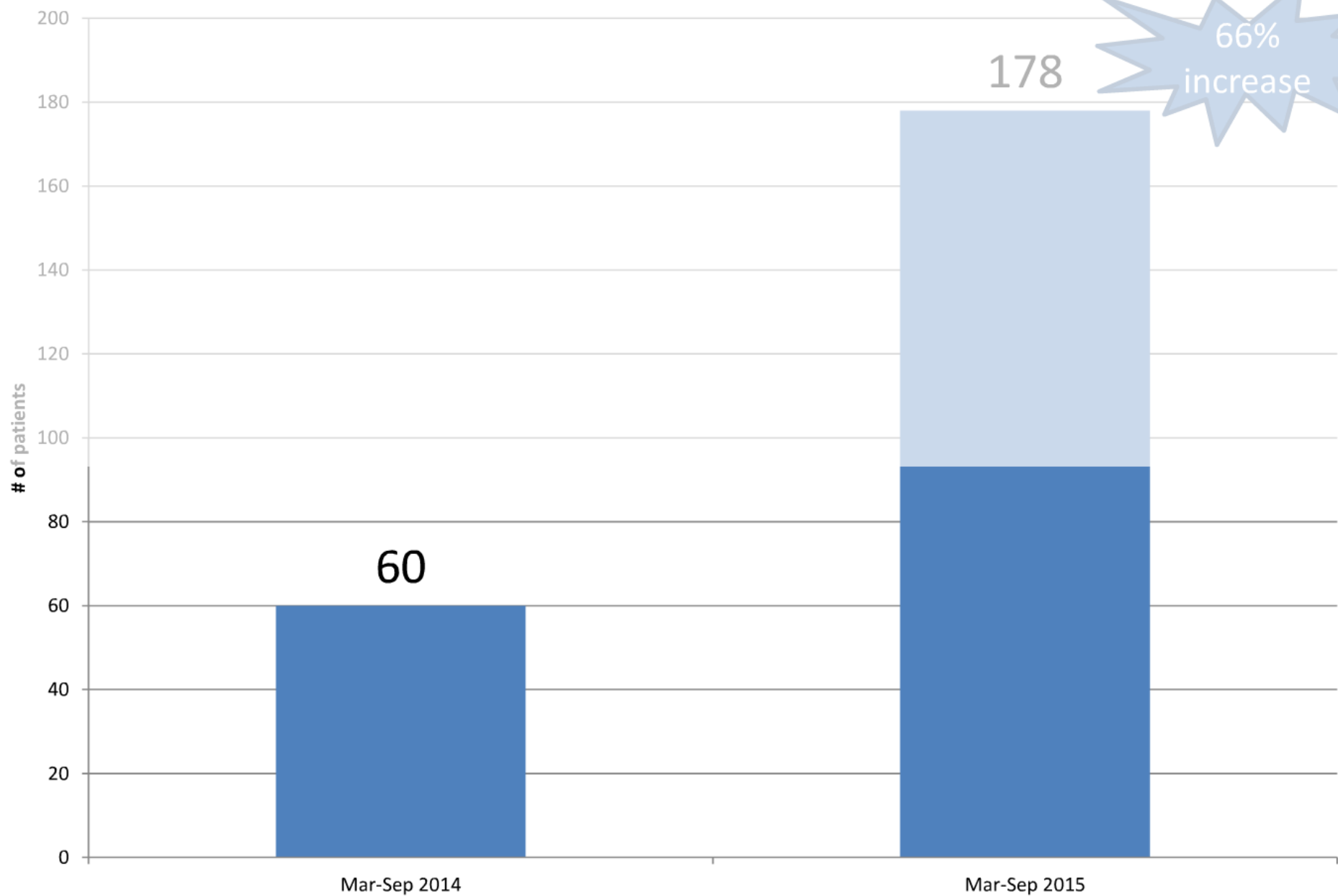
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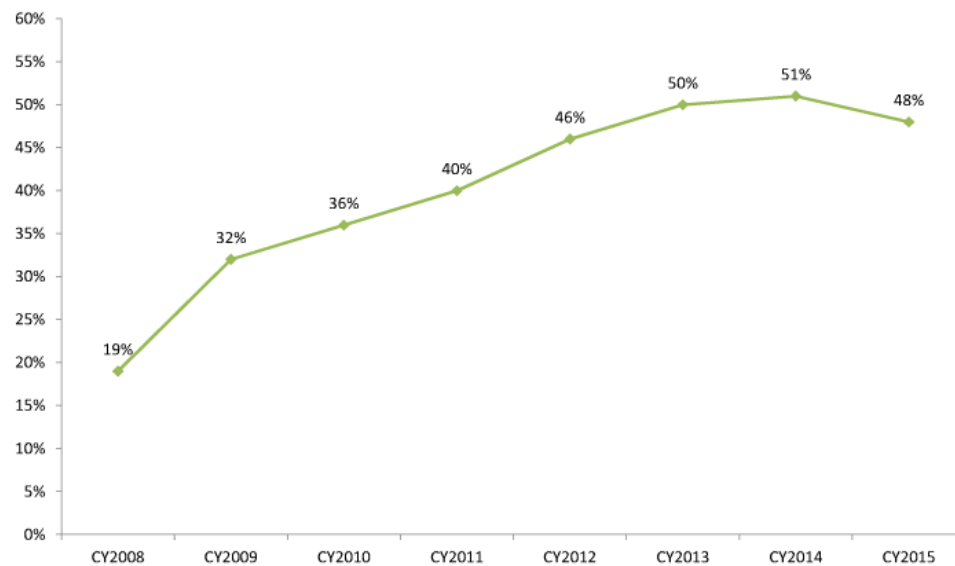


Patients given a FIT kit for colon cancer screening at respite



Trends in quality measures

Cervical Cancer Screening at BHCHP



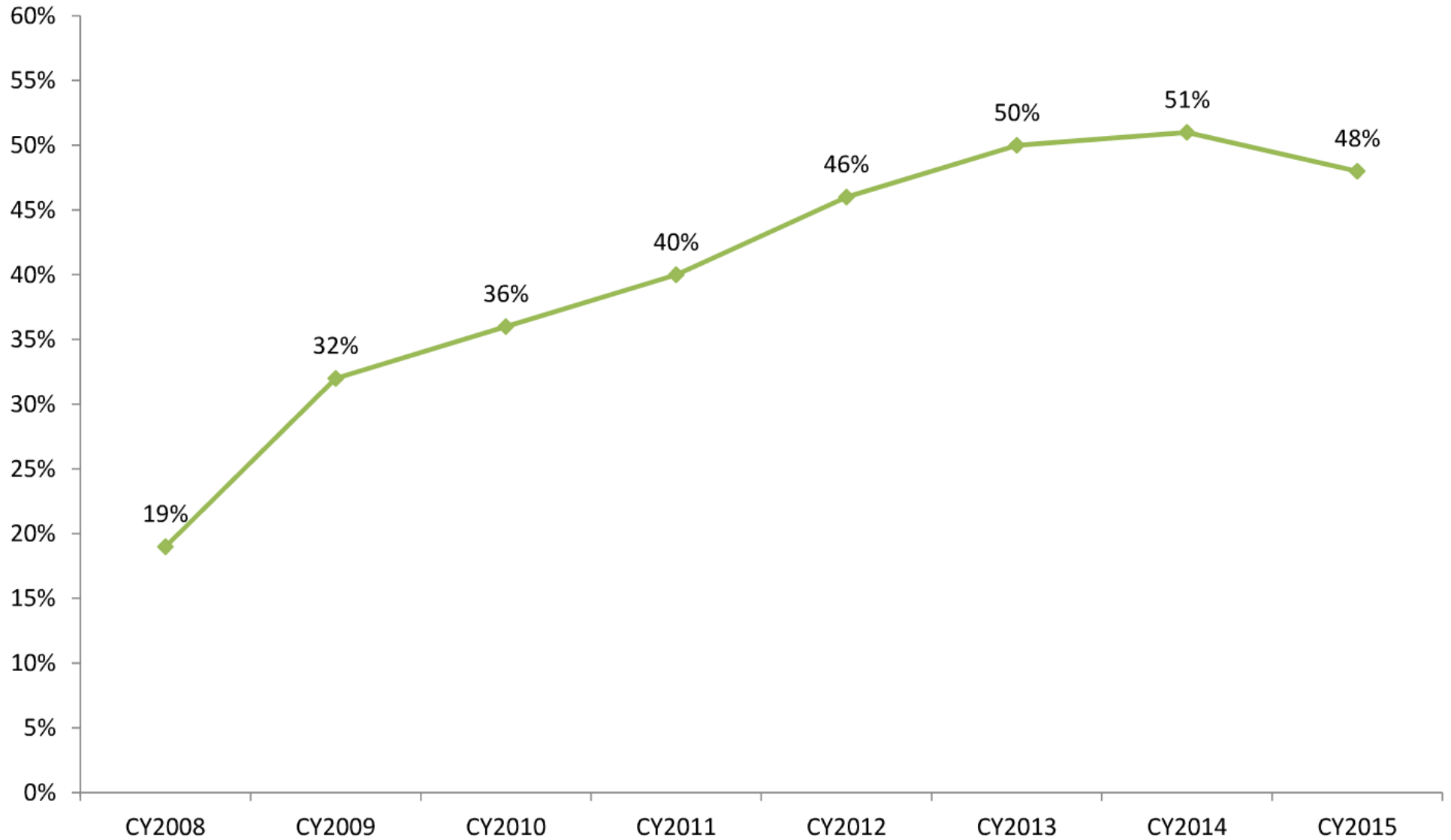
Percentage of women age 21-64 who are up to date on cervical cancer screening

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Cervical Cancer Screening at BHCHP

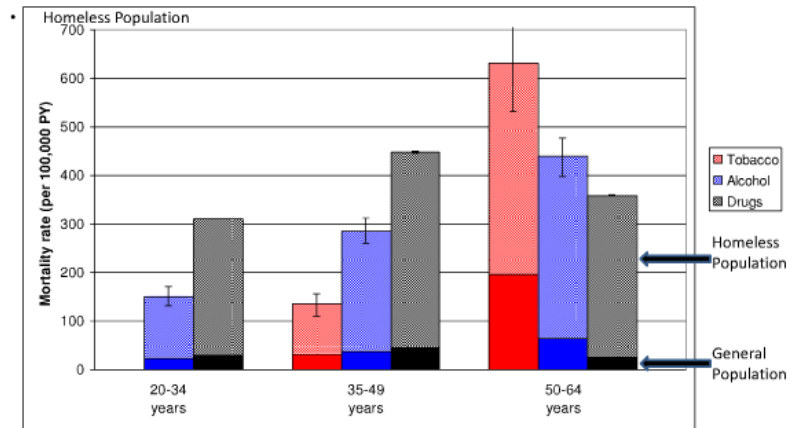


Percentage of women age 21-64 who are up to date on cervical cancer screening

Why SUD Quality Metrics?

- Prevalence of substance use disorders exponentially higher in the homeless population
- Opioid overdose is a leading cause of death in the homeless population.
- Overdoses with opioid pharmaceuticals led to almost 17,000 deaths in 2011.
- Since 1999, opiate overdose deaths have increased 265% among men and 400% among women.
- In 2014, an estimated 1.9 million people had an opioid use disorder related to prescription pain relievers and an estimated 586,000 had an opioid use disorder related to heroin use.

Age-Stratified Substance Attributable Rates



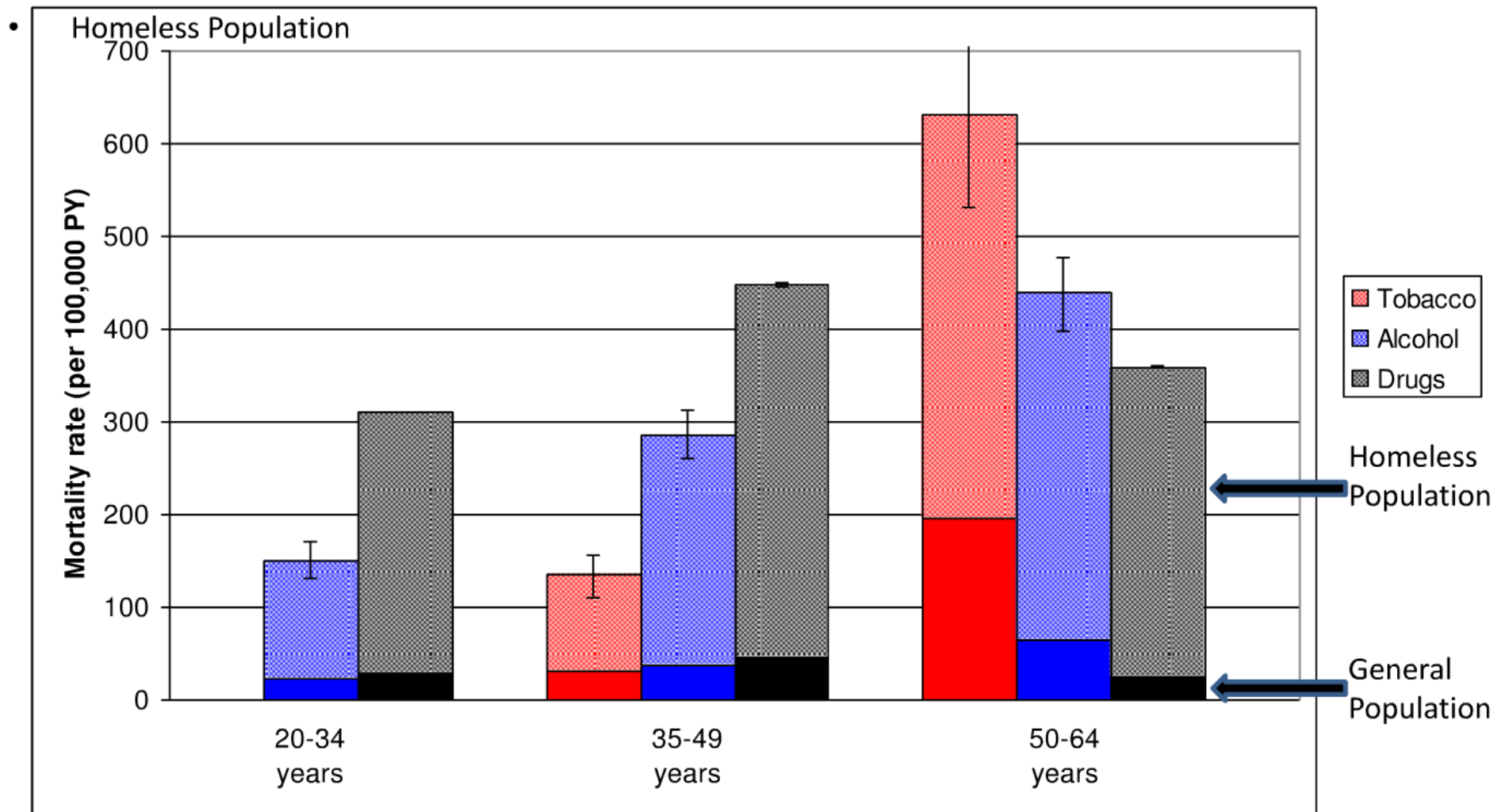
Baggett T, et al. AJPH 2015

Baggett et. al. Tobacco-, Alcohol-, and Drug-Attributable Deaths and Their Contribution to Mortality Disparities in a Cohort of Homeless Adults in Boston. Am J Public Health. 2015 Jun;105(6):1189-97. doi:10.2105/AJPH.2014.302248.

Baggett TP, Hwang SW, O'Connell JJ, et al. Mortality Among Homeless Adults in Boston: Shifts in Causes of Death Over a 15-Year Period. JAMA Intern Med. 2013;173(3):189-195. doi:10.1001/jamainternmed.2013.1604.

SAHMSA: <http://www.samhsa.gov/disorders/substance-use>

Age-Stratified Substance Attributable Rates



Quality Metrics for SUDs in Primary Care

NQF

TJC

AHRQ

NCQA

AMA's PCPI

Measure Title	Measure Steward
Alcohol Screening and Follow-up for People with Serious Mental Illness	National Committee for Quality Assurance
Follow-up after Discharge from the Emergency Department for Mental Health or Alcohol or Other Drug Dependence	National Committee for Quality Assurance
Initiation and Engagement of Alcohol and Other Drug Dependence Treatment (IET)	National Committee for Quality Assurance
Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	AMA-convened Physician Consortium for Performance Improvement
Alcohol Use Screening	The Joint Commission
Alcohol Use Brief Intervention Provided or Offered and Alcohol Use Brief Intervention	The Joint Commission
Percent of patients prescribed a medication for alcohol use disorder (AUD)	The Washington Circle
Percent of patients prescribed a medication for opioid use disorder (OUD)	The Washington Circle

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Percent of patients prescribed a medication for opioid use disorder (OUD)	The Washington Circle

Feedback from Stakeholders



- Staff
- Consumers
- Experts
- IT

Measures for
Determinant
people exper
homelessness

SELECTING THE RIGHT MEASURES FOR US

Pharmacotherapy or Medication Assisted Therapy (MAT) for Substance Use Disorder (SUD)

1) Opioid Use Disorder (OUD)

2) Alcohol Use Disorder (AUD)

Counseling Regarding Psychosocial and Pharmacologic Treatment Options for SUD

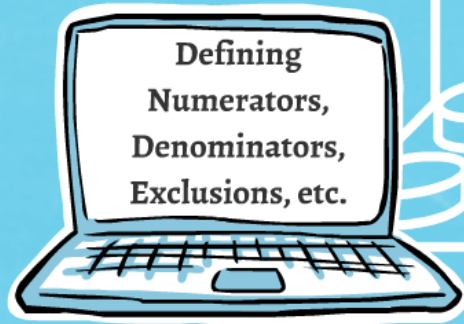
Naloxone Rescue Kits



What we couldn't add

Measures for Social
Determinants of Health for
people experiencing
homelessness

S
rder (SUD)



Percentage of patients with diagnosis of OUD receiving a medication for opioid use disorder

Numerator: Number of patients receiving a medication for opioid use disorder

Denominator: Number of patients with an opioid use disorder diagnosis

Measurement by: Opioid Use Disorder (OUD), Medication, and Prescription for Opioid Use Disorder (OUD Medication)

Percentage of patients with diagnosis of AUD receiving a medication for alcohol use disorder

Numerator: Number of patients receiving a medication for alcohol use disorder

Denominator: Number of patients with an alcohol use disorder

Measurement by: Alcohol Use Disorder (AUD), Medication, and Prescription for Alcohol Use Disorder (AUD Medication)

Percentage of patients with SUD counseled regarding psychosocial and pharmacologic treatment options

Numerator: Number of patients counseled regarding substance use disorder

Denominator: Number of patients with substance use disorder diagnosis

Percentage of patients with opioid use disorder OR history of overdose OR active prescription for an opioid who were prescribed or offered a Naloxone Kit

Numerator: Number of patients prescribed or offered a Naloxone Kit

Denominator: Patients with opioid use disorder OR history of overdose OR active prescription for an opioid

SELECTING THE RIGHT MEASURES FOR US

Pharmacotherapy or Medication Assisted Therapy (MAT) for Substance Use Disorder

- 1) Opioid Use Disorder (OUD)
- 2) Alcohol Use Disorder (AUD)

Counseling Regarding Psychosocial and Pharmacologic Treatment Options for SUD

Naloxone Rescue Kits

Exclusions, etc.



Percentage of patients with diagnosis of OUD receiving a medication for opioid use disorder

Numerator: Number of patients receiving a medication for opioid use disorder

Denominator: Number of patients with an opioid use disorder diagnosis

Pharmacotherapy for Opioid Use Disorder (OUD) : Methadone maintenance, Buprenorphine/ Naltrexone (Suboxone), or Naltrexone (Vivitrol)

Percentage of patients with diagnosis of AUD receiving a medication for alcohol use disorder

Numerator: Number of patients receiving a medication for alcohol use disorder

Denominator: Number of patients with an alcohol use disorder

Pharmacotherapy for Alcohol Use Disorder (AUD) : Disulfiram, Acamprosate (Campral), or Naltrexone (Vivitrol)

Percentage of patients with SUD counseled regarding psychosocial and pharmacologic treatment options

Number of patients counseled regarding substance use disorder

Percentage of patients with diagnosis of AUD receiving a medication for alcohol use disorder

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Numerator: Number of patients prescribed or offered a Naloxone Kit

Denominator: Patients with opioid use disorder OR history of overdose OR active prescription for an opioid

Measure	Baseline Result 2014-15	Goal 2015-16	Proposed Interventions 2015-16
Pharmacotherapy for OUD	28% (844/3029)	35%	<ol style="list-style-type: none"> 1. Institute monthly risk rounds for OBOT teams and prescribers 2. Continue expansion of OBOT 3. Increase Suboxone inductions in BMH 4. Kraft project (Wright) 5. Educate clinicians about naltrexone 6. Create protocol for Vivitrol injections in clinics
Pharmacotherapy for AUD	13% (329/2529)	25%	
Counseling Regarding Psychosocial and Pharmacologic Treatment Options for SUD	0%	35%	<ol style="list-style-type: none"> 1. Create checkbox with link to MI prompts 2. Add to most note types including CM and MA 3. Continued MI training for staff
Naloxone Rescue Kits	15% (475+90/ 3756)	30%	<ol style="list-style-type: none"> 1. Population management for teams 2. Signage in pharmacy windows 3. Improve accessibility of prescribing; put button in more places 4. Increase education for patients and staff 5. Document patients who already have kits

IMPLEMENTATION

- Assign champion for each measure or intervention
- Create a timeline for implementation and rollout
- Analyze quarterly data for the new metrics
- Stratify data by site/ team/ provider and share

Site	MAT: Alcohol Use Disorder Goal: 25%			MAT: Opioid Use Disorder Goal: 35%			Naloxone Kits Goal: 30%		
	Den	Num	%	Den	Num	%	Den	Num	%
Adult Outreach	288	95	33%	224	90	40%	305	64	21%
BMC Clinic	1145	247	22%	1406	613	44%	1763	524	30%
Casa Esperanza	60	23	38%	140	82	59%	140	91	65%
Family Team	13	4	31%	41	30	73%	63	10	16%
Father Bill's	83	17	20%	46	10	22%	77	8	10%
Home	144	52	36%	69	27	39%	112	33	29%
Kingston	69	18	26%	76	12	16%	89	10	11%
LIS, SEFC, & Southampton	359	53	15%	401	151	38%	476	90	19%
Mass General Hosp	200	68	34%	107	62	58%	161	37	23%
McInnis/Respite	620	197	32%	484	224	46%	791	161	20%
Pine Street Inn	613	135	22%	495	162	33%	682	150	22%
Shattuck	169	28	17%	217	77	35%	282	28	10%
St. Francis House	399	76	19%	467	157	34%	556	143	26%
Transitions	149	24	16%	396	113	29%	402	27	7%
Veterans Shelter	142	18	13%	149	38	26%	179	21	12%
Woods Mullen Shelter	77	12	16%	101	45	45%	137	31	23%

Index :
 exceeding goal
 meeting goal
 w/in 5% of goal
 below goal

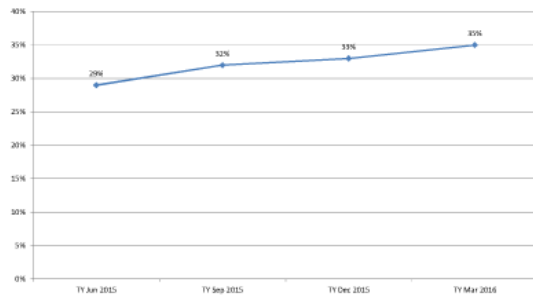
Change since last quarter:
▲ increase by 2% or more
▬ change is less than 2%
▼ decrease by 2% or more

Individual Provider Quality Indicators
 Patients seen by providers for a medical visit from 1/1/2015 to 12/31/2015

Provider Name	Goal: 60% PAP Smear Done			Goal: 43% Mammogram Done			Goal: 70% Diabetes Control			Goal: 60% Blood Pressure Control			Goal: 40% Colon CA Screening			Goal: 30% Naloxone Kits		
	H	D	%	N1	D1	%	N5	D5	%	N6	D6	%	N3	D3	%	N4	D4	%
Colaneri	41	73	56%	22	33	67%	64	97	66%	75	127	59%	135	199	68%	61	242	25%
	30	59	51%	15	34	44%	85	125	68%	102	161	63%	101	202	50%	37	141	26%
	34	66	52%	20	32	63%	27	53	51%	68	108	63%	101	205	49%	31	143	22%
	22	39	56%	11	27	41%	12	17	71%	16	26	62%	21	58	36%	4	20	20%
	81	106	76%	3	6	50%	2	6	33%	16	25	64%	5	9	56%	7	27	26%
	74	103	72%	28	45	62%	60	77	78%	80	142	56%	116	177	66%	109	257	42%
	22	31	71%	16	17	94%	23	31	74%	22	49	45%	47	67	70%	48	82	59%
	51	93	55%	26	44	59%	66	110	60%	118	189	62%	157	281	56%	59	267	22%
	62	73	85%	40	46	87%	48	62	77%	65	109	60%	128	164	78%	67	174	39%
	51	81	63%	8	10	80%	30	54	56%	57	98	58%	69	142	49%	36	205	18%
	6	8	75%	3	3	100%	6	9	67%	8	13	62%	15	20	75%	10	31	32%
	25	45	56%	15	21	71%	36	51	71%	47	76	62%	73	121	60%	33	121	27%
	32	56	57%	17	31	55%	38	54	70%	53	93	57%	64	138	46%	26	112	23%
	43	79	54%	3	4	75%		5	0%	3	9	33%	1	9	11%	7	34	21%
	7	10	70%			n/a	7	9	78%	7	14	50%	6	14	43%	10	23	43%
	47	70	67%	34	45	76%	45	71	63%	83	131	63%	118	182	65%	34	166	20%
	52	92	57%	38	58	66%	62	102	61%	99	160	62%	152	251	61%	55	269	20%
	37	63	59%	14	30	47%	53	74	72%	98	146	67%	140	224	63%	52	232	22%
	55	72	76%	21	28	75%	36	52	69%	45	92	49%	75	119	63%	62	145	43%
	69	133	52%	21	37	57%	43	65	66%	74	141	52%	99	215	46%	80	371	22%
	42	76	55%	22	45	49%	30	41	73%	35	72	49%	61	129	47%	25	94	27%
	10	21	48%	5	9	56%	18	27	67%	28	45	62%	36	76	47%	16	78	21%
	40	60	67%	16	24	67%	47	73	64%	77	121	64%	105	184	57%	53	209	25%
	45	77	58%	22	35	63%	57	89	64%	87	136	64%	131	216	61%	61	257	24%
	35	44	80%	22	31	71%	43	51	84%	53	99	54%	92	131	70%	51	112	46%
	88	163	54%	33	73	45%	68	101	67%	95	156	61%	142	253	56%	55	287	19%
	37	65	57%	19	34	56%	45	69	65%	72	115	63%	100	173	58%	46	177	26%
	37	67	55%	29	44	66%	53	92	58%	82	124	66%	122	198	62%	41	220	19%
	14	27	52%	8	14	57%	16	29	55%	34	47	72%	48	72	67%	13	78	17%
	30	73	41%	19	34	56%	25	49	51%	69	100	69%	101	226	45%	38	164	23%
	40	82	49%	18	39	46%	41	60	68%	69	93	74%	91	150	61%	34	145	23%
	41	74	55%	18	31	58%	52	88	59%	86	155	55%	124	247	50%	46	226	20%
	100	122	82%	6	7	86%	11	18	61%	20	28	71%	25	32	78%	7	53	13%
	11	23	48%	8	14	57%	7	11	64%	19	28	68%	28	61	46%	13	42	31%
	46	68	68%	16	24	67%	36	65	55%	65	101	64%	85	139	61%	47	175	27%
	49	74	66%	24	33	73%	39	57	68%	52	92	57%	90	154	58%	47	165	28%
	47	85	55%	19	41	46%	69	108	64%	96	144	67%	152	235	65%	55	280	20%
	56	107	52%	21	45	47%	85	133	64%	147	249	59%	171	356	48%	115	355	32%
	37	58	64%	18	40	45%	77	98	79%	119	187	64%	198	317	61%	51	241	21%
	56	110	51%	29	52	56%	49	74	66%	76	122	62%	91	223	41%	58	156	37%
	43	76	57%	20	30	67%	52	82	63%	88	130	68%	124	193	64%	49	223	22%
	132	233	57%	66	135	49%	85	130	64%	140	221	63%	195	358	54%	63	323	20%
	34	52	65%	14	21	67%	45	67	67%	70	105	67%	101	162	62%	51	192	27%
	7	14	50%	2	7	29%	9	9	100%	20	24	83%	24	37	65%	5	31	16%
	5	11	45%	7	7	100%	7	12	58%	9	11	82%	21	26	81%	8	24	33%
	14	21	67%	6	9	67%	30	45	67%	51	88	58%	56	139	40%	25	115	22%
	42	55	79%	9	13	69%	32	43	74%	59	84	70%	59	112	53%	79	202	39%
	9	16	56%	4	6	67%	2	2	100%	5	9	56%	9	14	64%	13	27	48%
	21	43	49%	10	14	71%	20	26	77%	29	48	60%	41	76	54%	21	84	25%
	26	44	59%	11	19	58%	33	56	59%	63	110	57%	84	146	58%	41	259	16%
	53	79	67%	18	28	64%	48	79	61%	84	133	63%	107	167	64%	81	290	28%
	57	93	61%	24	40	60%	75	114	66%	136	194	70%	168	294	57%	69	398	17%
Average			60%			63%			65%			62%			57%			27%

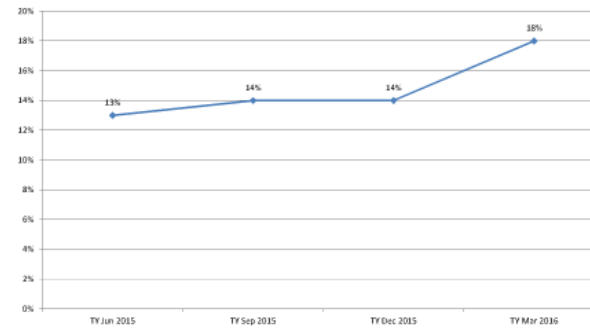
Trends

Pharmacotherapy for Opioid Use Disorder (OUD) at BHCHP



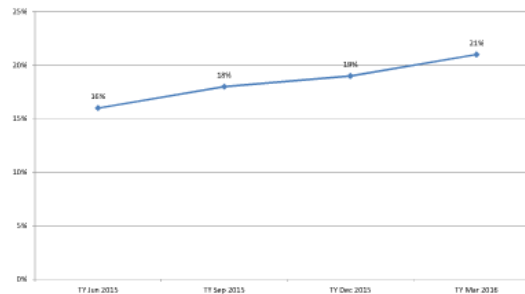
Percentage of patients with diagnosis of OUD receiving a medication for opioid use disorder

Pharmacotherapy for Alcohol Use Disorder (AUD) at BHCHP



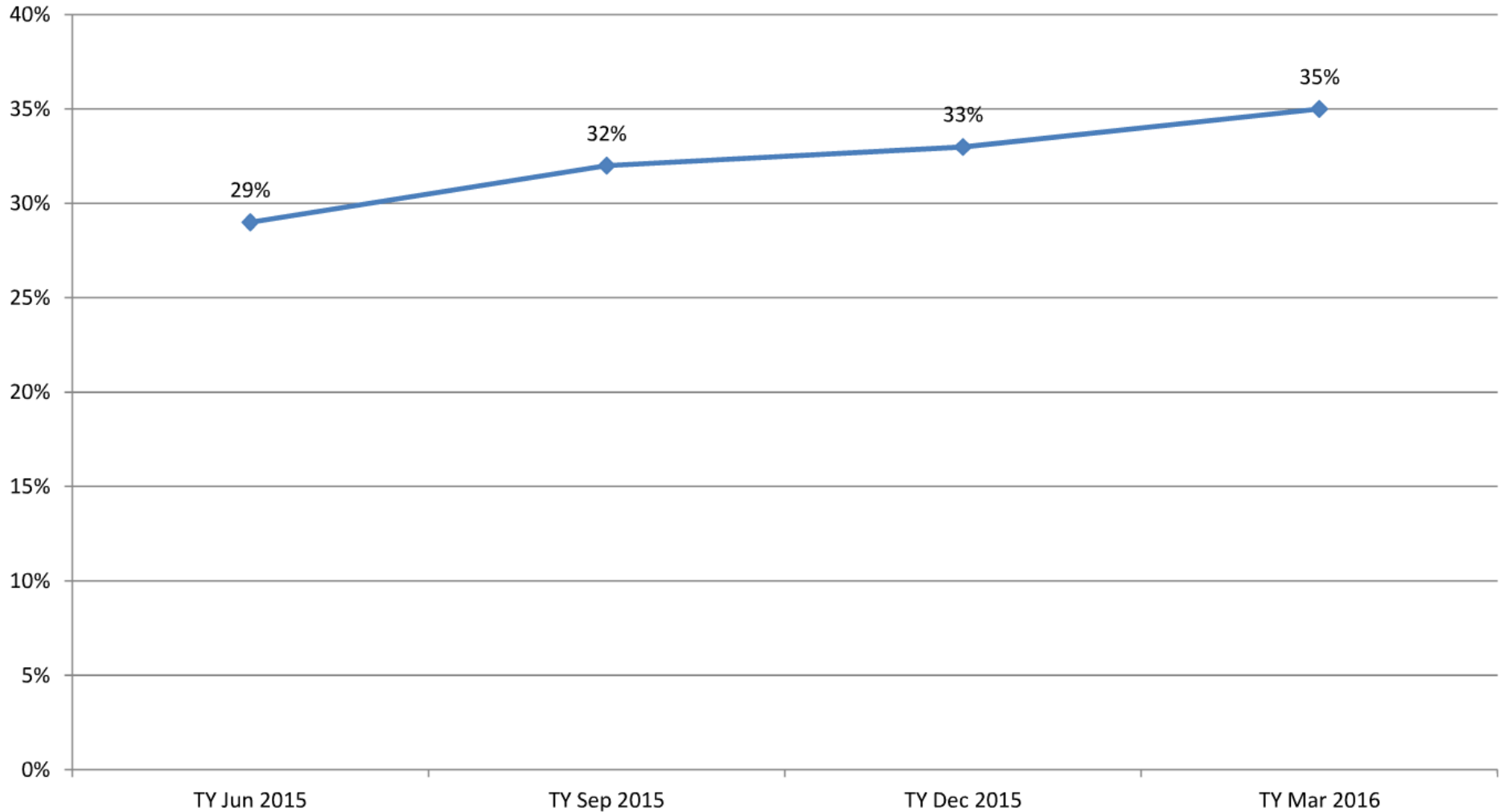
Percentage of patients with diagnosis of AUD receiving a medication for opioid use disorder

Naloxone Rescue Kits at BHCHP



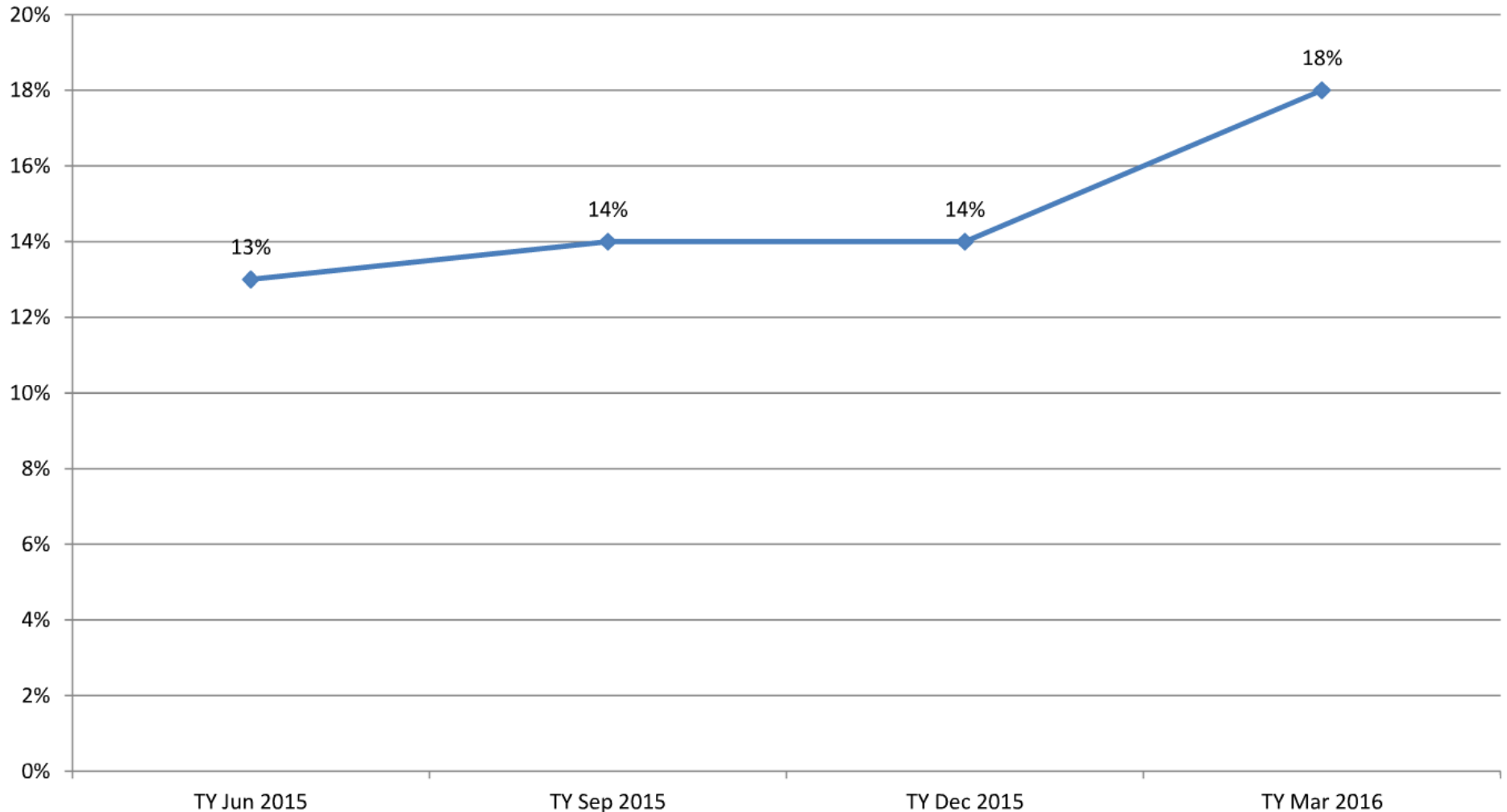
Percentage of patients with OUD or history of overdose or active prescription for an opioid who are prescribed or offered a naloxone rescue kit

Pharmacotherapy for Opioid Use Disorder (OUD) at BHCHP



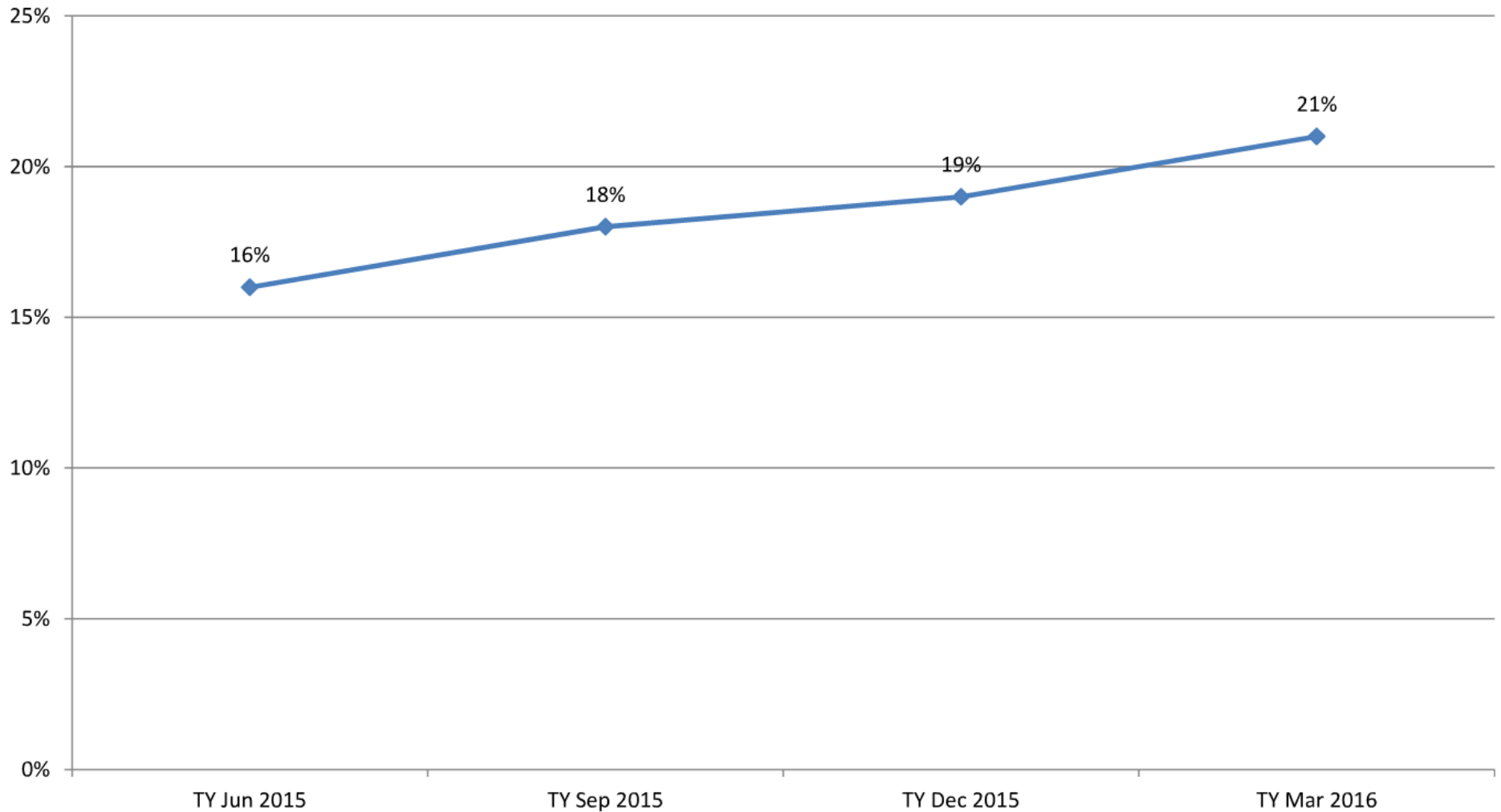
*Percentage of patients with diagnosis of **OUD** receiving a medication for opioid use disorder*

Pharmacotherapy for Alcohol Use Disorder (AUD) at BHCHP



*Percentage of patients with diagnosis of **AUD** receiving a medication for opioid use disorder*

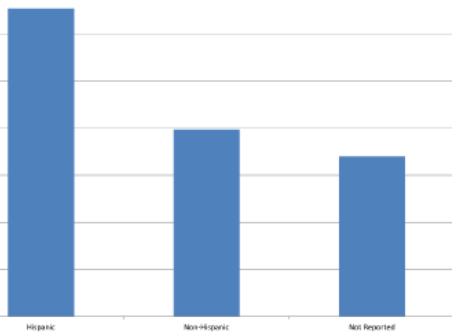
Naloxone Rescue Kits at BHCHP



Percentage of patients with OUD or history of overdose or active prescription for an opioid who are prescribed or offered a naloxone rescue kit

Naloxone Rescue Kits Data Stratification

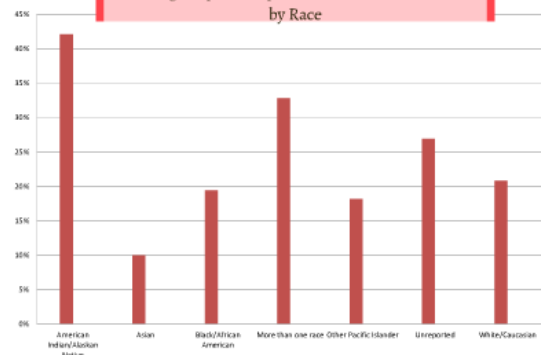
Percentage of patients prescribed or offered Naloxone by Ethnicity



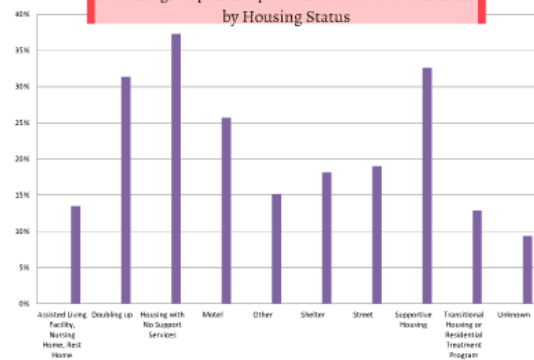
Percentage of patients prescribed or offered Naloxone by Care Team



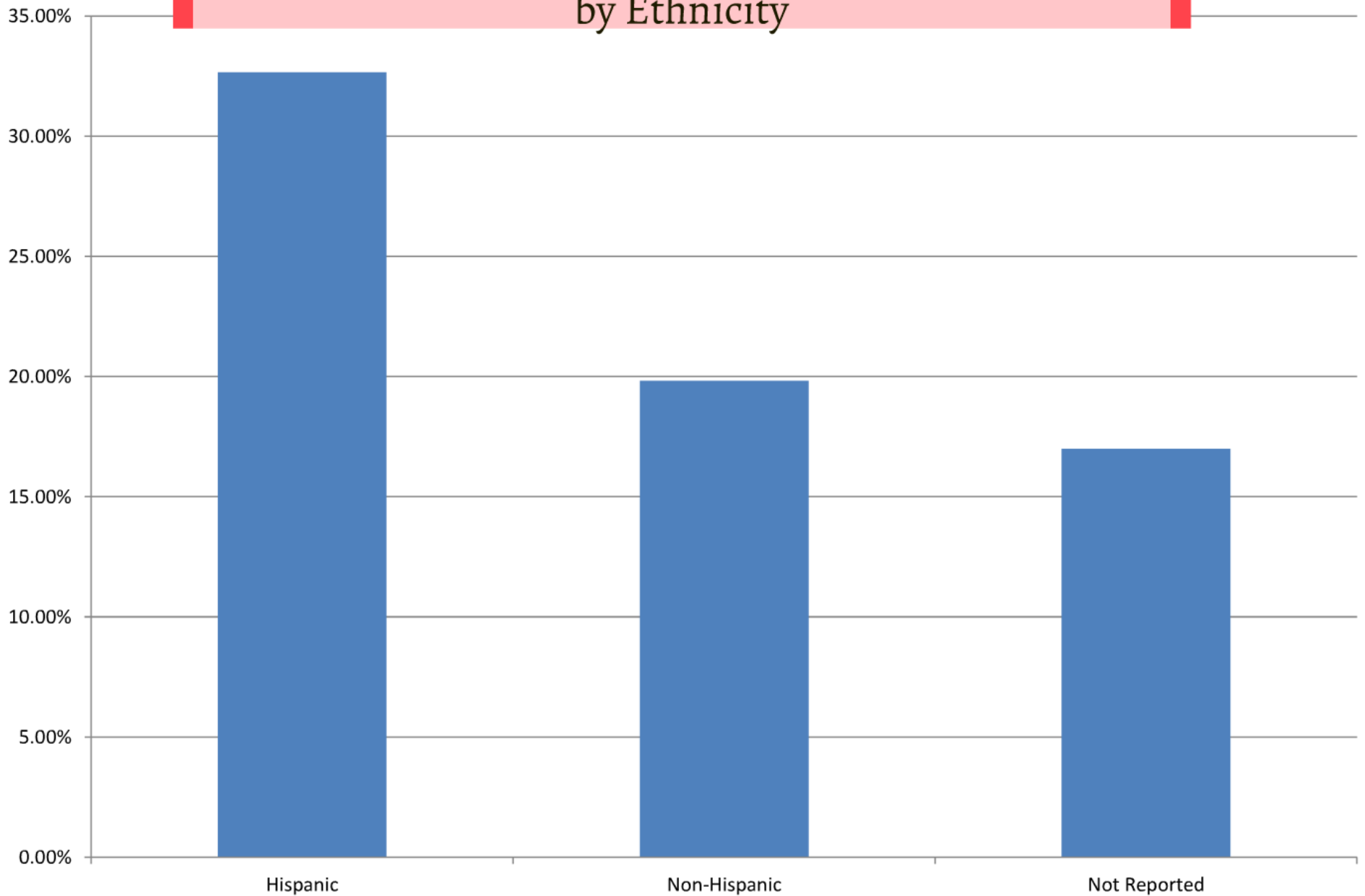
Percentage of patients prescribed or offered Naloxone by Race



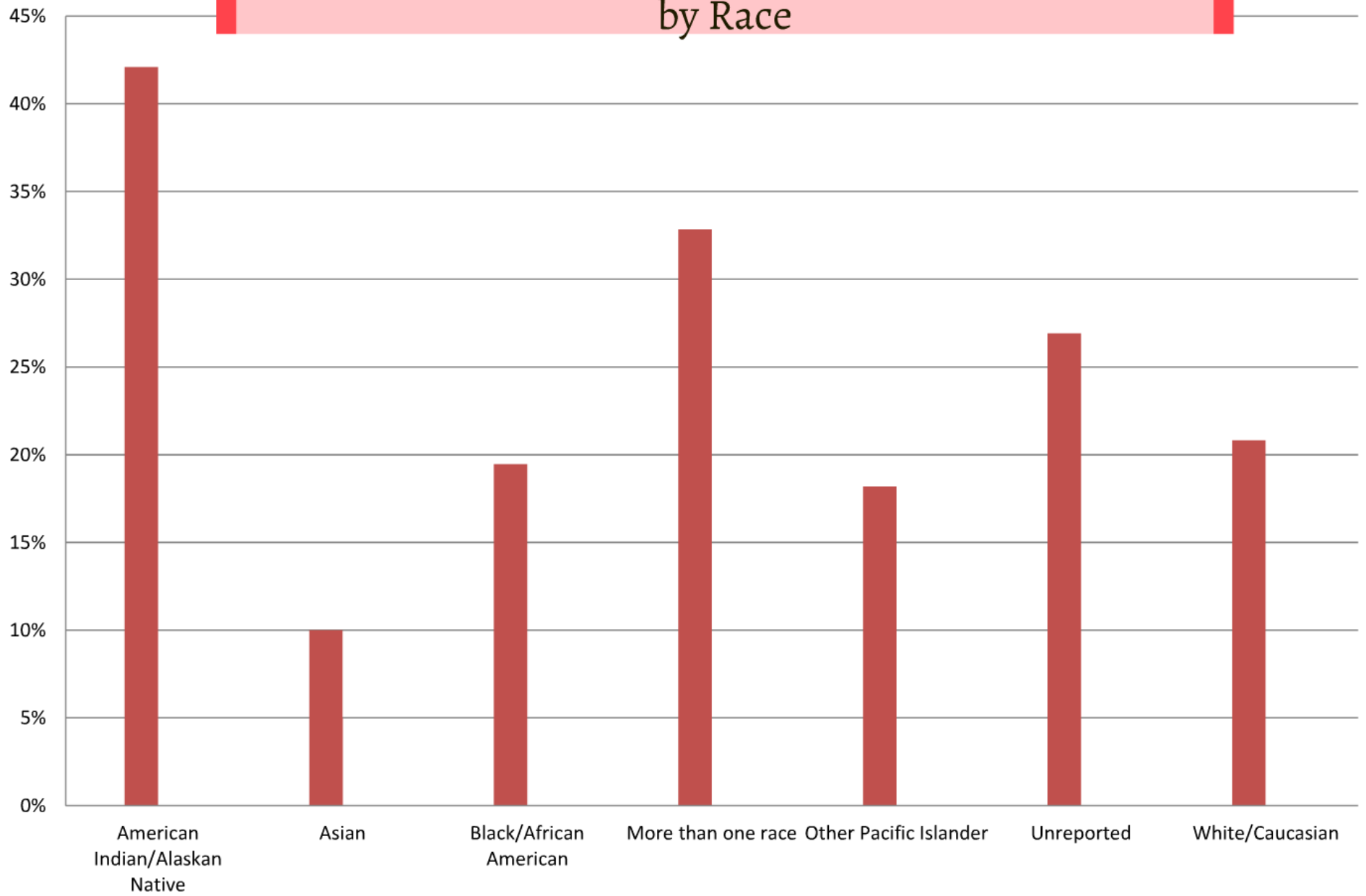
Percentage of patients prescribed or offered Naloxone by Housing Status



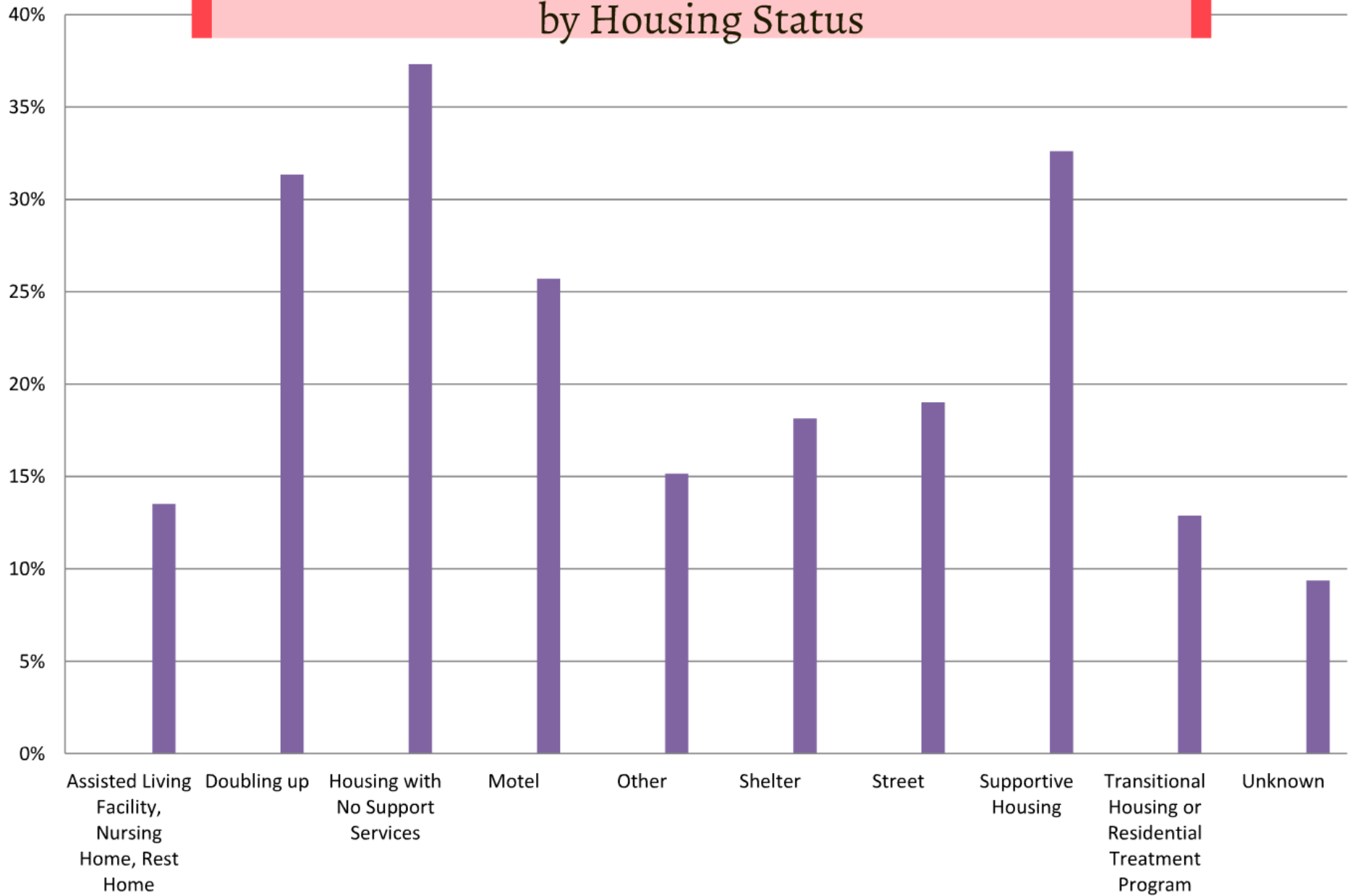
Percentage of patients prescribed or offered Naloxone by Ethnicity



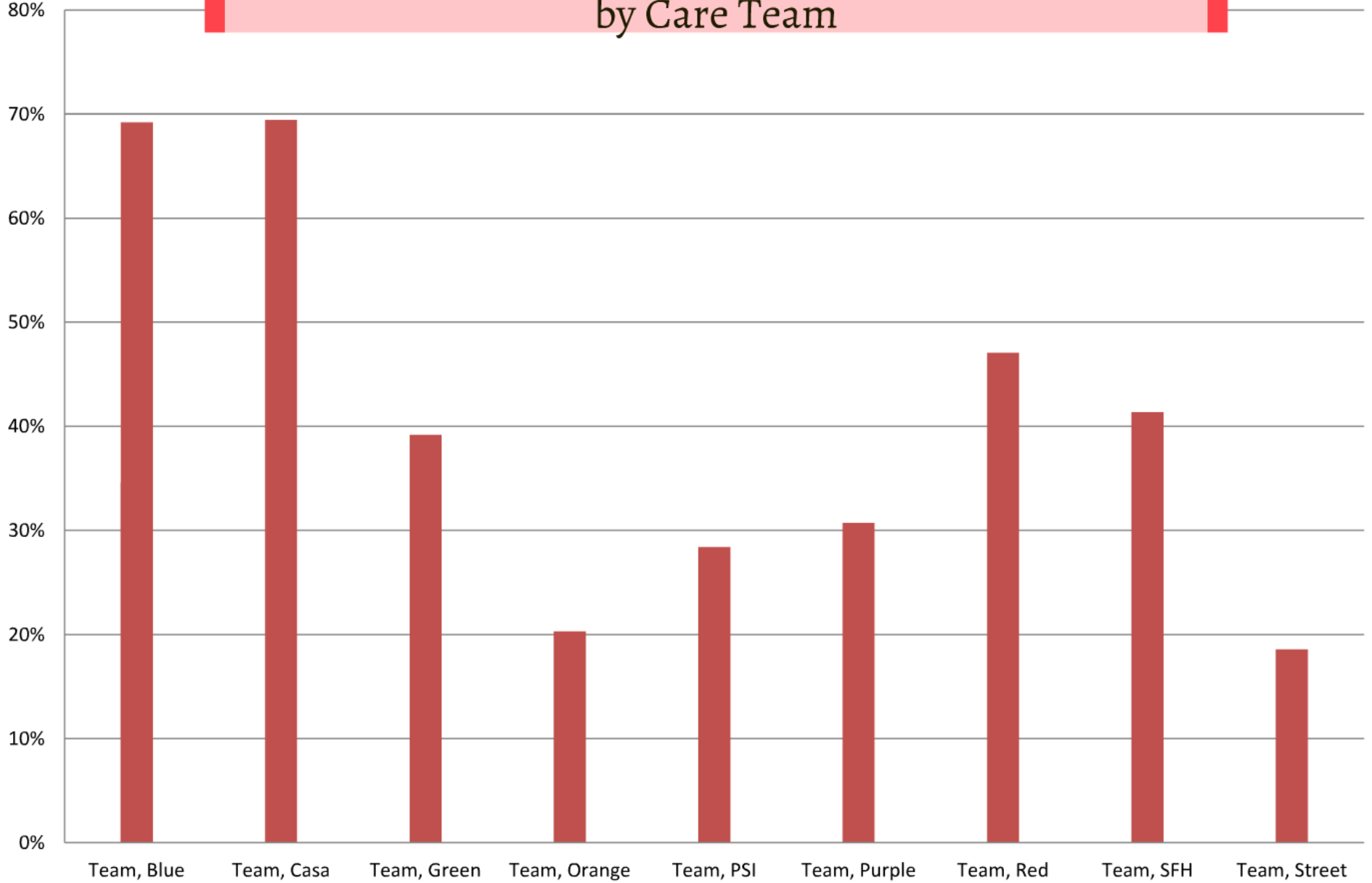
Percentage of patients prescribed or offered Naloxone by Race



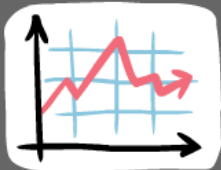
Percentage of patients prescribed or offered Naloxone by Housing Status



Percentage of patients prescribed or offered Naloxone by Care Team



Conclusion



If you measure it, improvement will follow



Quality culture is vital in QI



SUD should not be treated differently

Questions?

