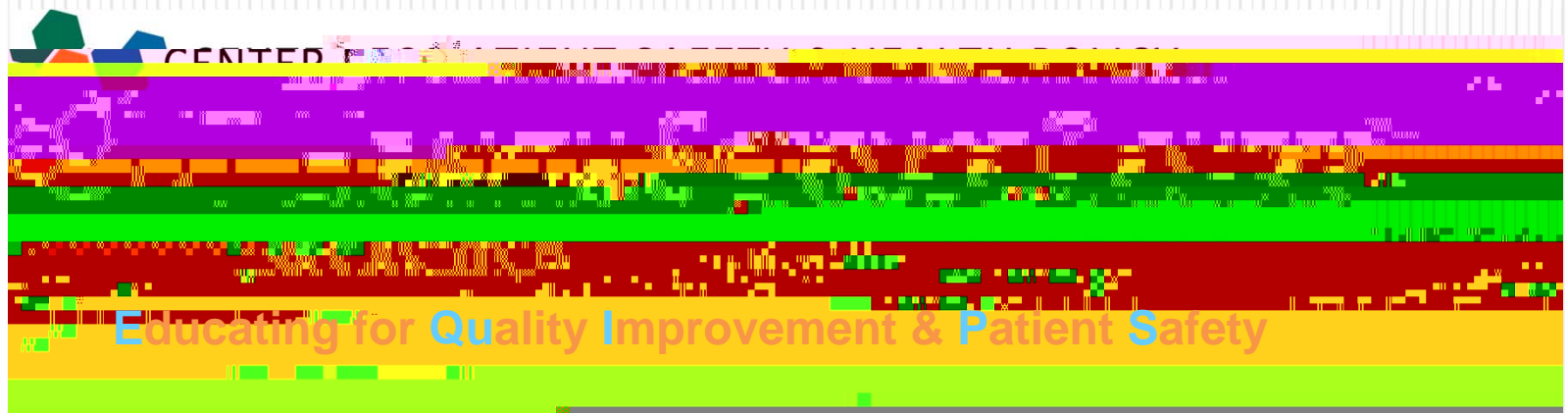


Clinical Safety & Effectiveness Cohort # 8

Overdue Results at Westover Hills



FINANCIAL DISCLOSURE

has no relevant financial relationships with commercial interests to disclose.

financial relationships with commercial interests will be disclosed prior to her presentation.

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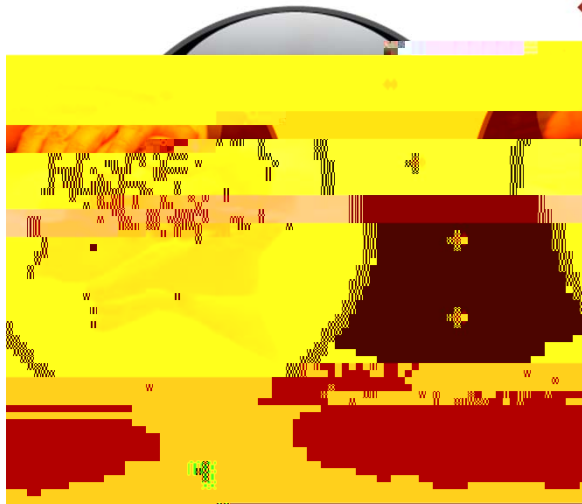
Team Makeup

Stella Koretsky, MD, Medical Director - Westover Hills

Jeanette Hernandez, Clinic Manager - Westover Hills

Valerie Works-Gomez - Director, HIM - UT Medicine

John Cange - Director, EpicCare - UT Medicine



Glen Lam, Reporting Analyst - UT Medicine

Jarrold Power, EpicCare - UT Medicine

Tim Davis, HIM Mgr. - UT Medicine

Eli Mendiola, HIM Supv. - UT Medicine

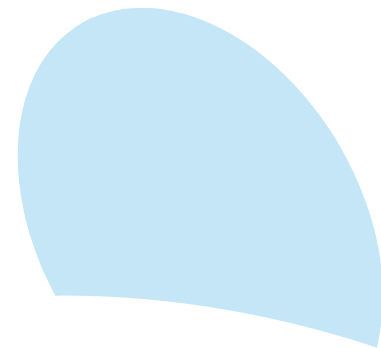
Cindy Escalera, MA - Westover Hills

Efrain Esqueda, LVN - Westover Hills

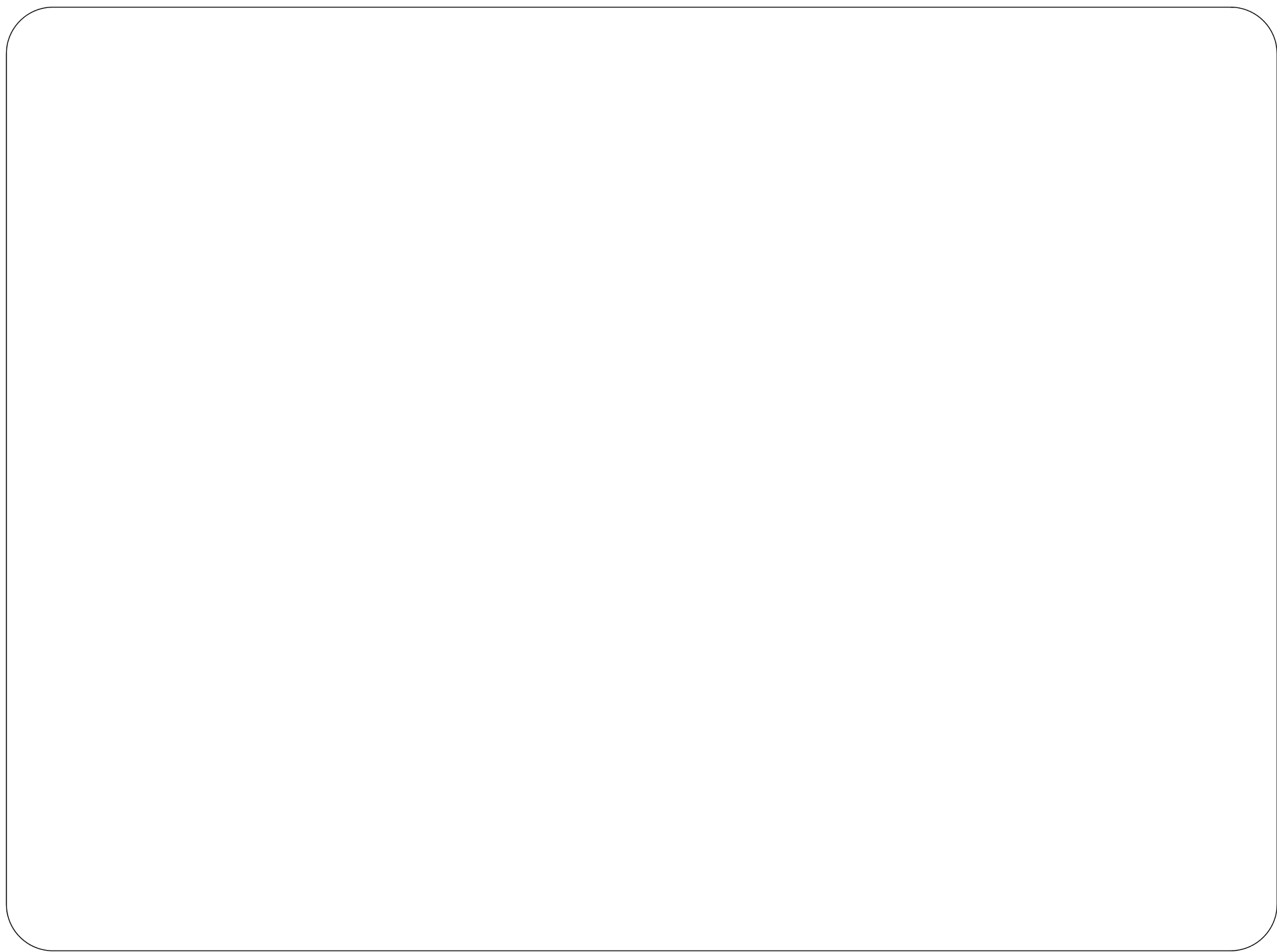
Roxanne Gonzales, MA - Westover Hills

AIM Statement

Reduce Overdue Results at Westover Hills Family Medicine clinic by 80% by September 30th, 2011







DISCOVERIES – June to September, 2011

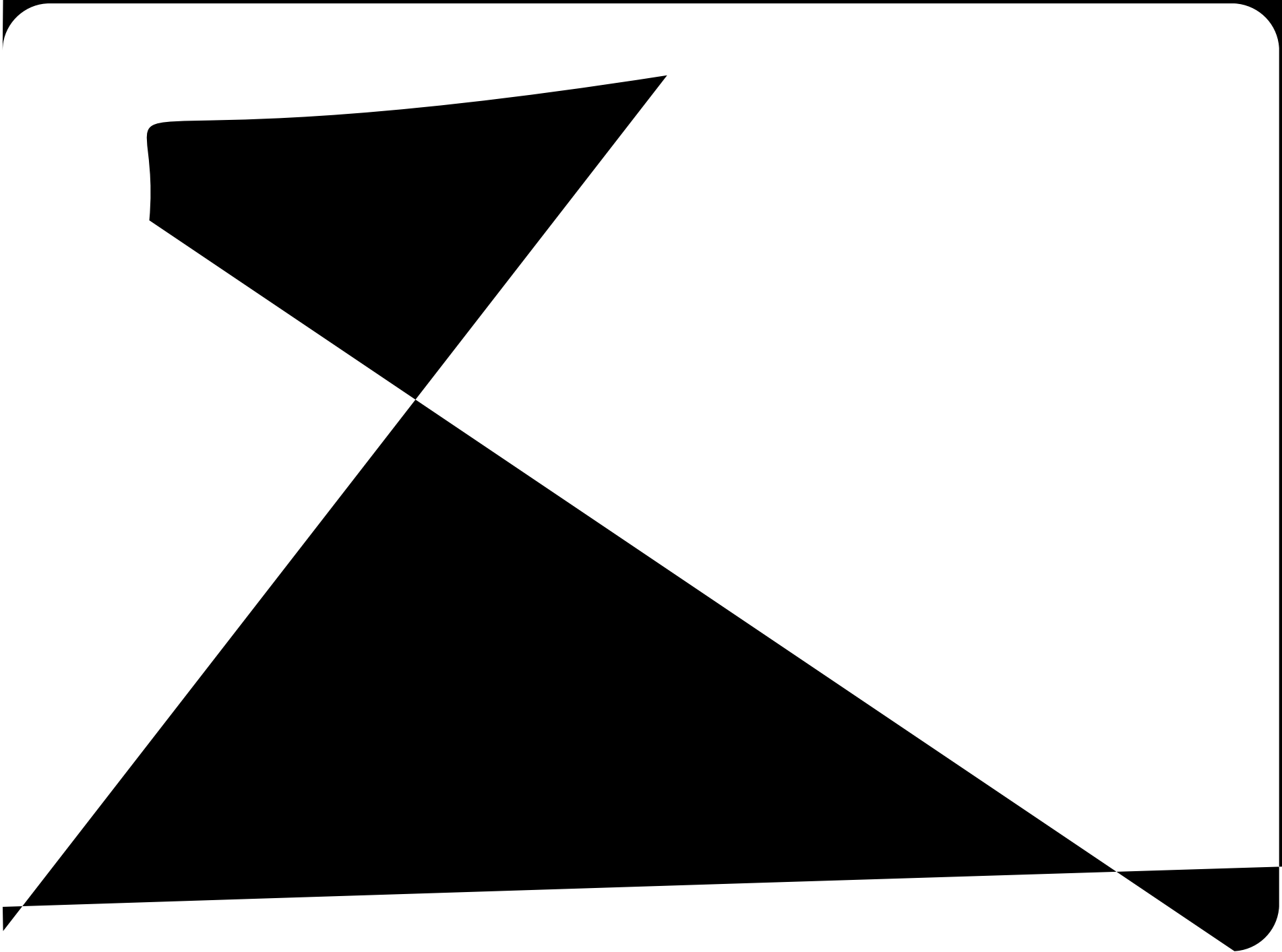
- H&H vs. CBC issue
- BUN vs. Chem confusion
- Duplicate tests/results: Quest error, provider error
- Physicians not changing Expected Date default ('today')
- "Result Notes" column header is not about Results – creates confusion
- Clinic staff not always resulting same-day POC tests/procedures (causes ODR for same-day tests)
- Clinic staff not 'working' ODR messages
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Interventions

Imaging / HIM Interventions: 6/25/11

1. Establish Productivity Standards for HIM Document Imaging Services
Scan TAT of 72 hours or less -- 400 clinical documents /8 hr. day to meet required
2. Improve document delivery: WH Clinics to UT Med HIM via UTM Courier
3. Reduce Provider-to-HIM handoffs so Provider handles one result via in-basket

EpicCare Applications: 7 /15/11

1. Increase reliability of ODR data and message delivery by correcting message delivery settings (releasing ~5,000 ODR 'held' in error to clinic pools)

Westover Hills Clinical Operations:

1. Establish 'cleanup' process by clinical staff to reduce # ODR. 6/24/11
2. Institutionalize process, maintain manageable levels of ODR: 9/1/11
3. Train physicians & staff to understand order types, expected dates. 9/1/11

