



Our Patient-Centered Medical Home (PCMH) model of patient care emphasizes quality of care and evidenced based outcomes. We routinely evaluate our performance in specific areas compared with national benchmarks of care quality. Below are some examples of recent quality improvement (QI) initiatives in our office.

#### **QI Measure 1**

**A percentage of patients, ages 45-85, are not getting a regular A1C as clinically indicated. An A1C is recommended every 3 months for uncontrolled diabetes, and ever 6 months for controlled diabetes).**

8% of our patients, ages 45-85, who have been diagnosed with DMII, have not had an A1C within the last 6 months (10/2/14 - 4/2/15). Our goal became to decrease the percentage of patients who have not had an A1C in 6 months to 5%. As of 4/10/15, 100% of our patients needing an A1C received them in the office.

#### **QI Measure 2**

**In an effort to provide proper care, patients re-admitted to the hospital within 30 days of discharge may benefit from additional resources.**

4% of the patients discharged from the hospital from September 2014 - November 2014 were re-admitted. This number was reduced in December 2014 - February 2015 to 0 patients being re-admitted to the hospital.

#### **QI Measure 3**

**We measured through our patient survey if patients felt that the provider has asked them if they thought a medication was best for them. Patient satisfaction scores reflect a desire for personal input to be considered when adding or discontinuing a prescription.**

When we polled patients November 2014, 17.86% stated that they did not feel like their personal input was considered by the provider when adding or discontinuing a medication. However, when we polled again in April 2015, this number was drastically reduced to 2% of the polled-population.