



SBHC Key Performance Measures

March 9, 2016



Agenda

Key Performance Measures

- Background and 2015-16 changes
 - Eligible population
 - Core and Optional measures
- Chart audit requirements: documentation/submission
 - Audit process
 - Audit tracking sheet
- Sample audit tracking sheet
- Deschutes county collaboration

Key Performance Measures

- SBHCs are committed to high-quality, age appropriate, accessible health care for school-age children.
- Currently in 6th full year of KPM tracking inclusion in SBHC certification standards.
- Measures revised in 2014-15; implementation began this year;
2 pilot years over the 2015-16 and 2016-17 school years
- Each SBHC conducts an annual chart audit to assess their progress in meeting the measures.

Eligible Population for KPMs

Any SBHC client in the target age range is eligible to be included in the chart audit, unless stated otherwise (no longer clients seen 3 times or more).

- Includes physical, behavioral/mental, dental health visits, immunization-only and nurse-only visits
- Any visit that gets submitted to the SPO in the encounter data report is included in the chart audit
- Excludes “touch” visits, such as brief check-in for a Band-Aid or cough drop.

Exclusions: Client/parent refuses

Unsuccessful attempt to get other provider documentation

Core and Optional KPMs

Core Measures

- 1.) Well-Care Visit
- 2.) Comprehensive Health Assessment

Optional Measures

- 1.) Adolescent Immunizations
- 2.) Chlamydia Screening
- 3.) Depression Screening
- 4.) Nutrition Counseling
- 5.) Substance Use Screening

Optional Measures

- During the spring before the start of a new biennium, SBHCs are required to select in the Operational Profile- KPM tab which one of the five optional KPMs they intend to track.
- The SBHC will track and audit their chosen Optional measure for 2 years.

Measures Selected for 2015-17	# of SBHCs
Adolescent Immunization	9
Chlamydia Screening	19
Depression Screening	28
Nutrition Counseling	11
Substance Use Screening	10

Chart Audit

SBHC will audit 20% of charts from the eligible population of 5-21 year-old students.

- Minimum audit of 30 charts and maximum of 50.
- If SBHC has fewer than 30 eligible charts, then all charts must be audited.
- SBHC can audit the same selection of charts for each KPM as long as the eligible populations are the same (well visit, health assessment and nutrition screening)
- Chart audit results will not be submitted by the SBHC for the Optional Immunization measure (this data will come to the SPO from the ALERT program staff)

Chart Audit: Process & Tracking Sheet

SBHCs must submit to the SPO a description of their **chart audit process** and a copy of the **audit results tracking sheet** by 10/1 of each year (starting 10/1/2016).

- Audit Process: Explanation of how the SBHC identified patient charts eligible for the audit, how they obtained their data and calculated the percentage compliance for each measure.
- Audit Tracking Sheet: SBHCs will provide a list of patient IDs for each audited chart and whether they met the measure or if the chart was excluded.

Chart Audit: Tracking Sheet Submission

Each SBHC will document and submit the following for each audited chart:

- Patient ID (actual MRN or SBHC assigned patient ID)
- Coding on tracking sheet must indicate:
 - Compliance
 - Non-compliance
 - Refused/Excluded
 - Not reviewed

If MRN is used, SBHC must send tracking sheet via secure email

Chart Audit – Results Tracking Sheet

Screenshot of sample submission

	A	B	C	D	E	F
1	SBHC name	Patient ID	Core - Well Visit	Core - Health Assess	Optional Measure	Comments
2	Your sbhc	ptid1	Compliance	Refused/Excluded	Non-compliance	
3	Your sbhc	ptid12	Non-compliance	Compliance	Compliance	
4	Your sbhc	ptid13	Compliance	Compliance	Not reviewed	
5	Your sbhc	ptid24	Compliance	Compliance	Compliance	
6	Your sbhc	ptid26	Refused/Excluded	Compliance	Refused/Excluded	
7	Your sbhc	ptid36	Compliance	Compliance	Compliance	
8	Your sbhc	ptid37	Non-compliance	Non-compliance	Non-compliance	
9	Your sbhc	ptid44	Compliance	Refused/Excluded	Non-compliance	
10	Your sbhc	ptid49	Non-compliance	Compliance	Compliance	
11	Your sbhc	ptid51	Compliance	Refused/Excluded	Not reviewed	
12	Your sbhc	ptid55	Compliance	Compliance	Compliance	

Submit MRN or dummy PT ID (SBHC must document the actual MRN and dummy ID for reference)

KPM results annual deadline

- By October 1st, each SBHC must submit KPM audit results in the web-based Operational Profile (Melanie Potter will host a webinar in August/September on Operational Profile updates and submissions - KPM entries will be addressed)
- Each SBHC must submit both the chart audit process and audit results tracking sheet via email to the SPO
- If an SBHC is out of compliance for any KPM, a waiver must be submitted via the Operational Profile. An Action Plan should include steps to get the SBHC into compliance.

Technical Assistance Calls for Optional KPMs

>> Poll question

The SPO has considered offering one group conference call for each Optional KPM topic in the Spring – total of 5 calls.

SBHC staff can call in and ask any questions they have about the Optional measure, brainstorm with other SBHCs on ways to perform the chart audit, document the results on the tracking sheet, etc.

SPO staff will plan to review how SBHCs will document the audit results and submit them by the October 1st deadline.

Questions??

Deschutes county collaboration

- County public health department led a collaborative effort with multiple SBHCs, medical sponsors and their mental health providers.
- A workflow was developed to increase the completion rate of the comprehensive physical or documentation that it took place with an outside provider.
- Brief questionnaire was developed to ask either the parent or the client about the presence of a regular provider, time frame of their most recent well-visit and dental visit and if assistance is needed to coordinate their health care.

Questions??

Reference documents – KPM Section on the SPO website will be updated the end of March

All SBHC data requirements are listed on our website:

www.healthoregon.org/sbhc

Data requirements tab is located on the left side of website:

[link to SBHC Data Requirements](#)

Contact info for data questions:

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Contact Us

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