

Montana Outcomes Project

Overview

The Montana Outcomes Project started in 2005 as a collaborative effort between the Montana Association of Cardiac and Pulmonary Rehabilitation (MACVPR) and the Cardiovascular Health Program (CVH) within the Montana Department of Public Health and Human Services. The goal of the project was to provide a complete out-of-the-box outcomes program and to provide data management and support to participating programs. The data support includes developing aggregate regional means for each indicator to be used for benchmarking purposes. The benchmarking of data allows programs to identify areas to focus quality improvement activities with the ultimate goal of improving patient care. Data is collected on a quarterly basis. The quarter schedule breakdown is as follows:

- Quarter 1 January-March – data due in July
- Quarter 2 April-June – data due in October
- Quarter 3 July-September – data due in January
- Quarter 4 October-December data due in April

The indicators being tracked are as follows:

Demographics:

- Age
- Sex
- Gender
- Race/Ethnicity*
- Number of Visits

Health Domain:

- SF-36 version 2
- Dartmouth Coop

Clinical Domain:

- Blood pressure at goal*
- BMI
- LDL at goal
- Usage of lipid lowering medications
- Duke activity status index (DASI)
- A1C test for patients with diabetes
- Patient Health Questionnaire 9 (PHQ-9)
- Antiplatelet/anticoagulation therapy utilization*

Behavioral Domain:

- Smoking status
- Cessation/Quit Line referral*
- Dietary Fat Screen
- Dietary sodium screen*

Service Domain:

- Patient satisfaction
- Completion rate

*Indicates a new indicator or change in definition of the indicator.

Indicator Definitions

Health

Health surveys/QOL tools

- + SF-36 version 2 and the Dartmouth COOP - programs can use either tool (not both).
- + Evaluation: percent change in pre to post scores.
- + Survey should be administered prior to the first exercise session (pre) and prior to discharge (post) from Phase II cardiac rehab.

Clinical

Blood pressure at goal

- + Evaluation: percentage of patients who meet goal criteria for blood pressure control and measure changes in pre to post BP values.
 - o Patients with diabetes and/or chronic kidney disease, the goal is <130/80; for all other patients, the goal is <140/90.
- + The average of the first and last 3 resting or pre-exercise blood pressures will be used to determine if the patient meets control criteria and the % change pre to post.
- + Patient should be in a seated position w/out legs crossed. Blood pressure should be taken in the arm that elicits the highest historical reading. Blood pressure measurement should taken after a five-minute period in which the patient is sitting quietly.

Body mass index (BMI)

- + Evaluation: percent change in pre to post BMI.
 - o Patients with a BMI of <25 will not be included in the analysis.
- + Height (inches) and weight (pounds) in stocking feet need to be obtained at the first and weight only at last the exercise session.

Low density lipoprotein (LDL) at goal

- + Evaluation: percentage of patients who meet goal criteria for LDL control.
 - o Goal is <100mg/dL.
- + **Only LDL values measured post hospitalization are to be reported.**

Lipid lowering medication (LLM) utilization

- + Evaluation: percentage of patients who are taking prescription medications to reduce their blood lipid level.
- + Medication usage as well as any contraindications to LLM are collected at the initial visit and updated prior to program completion.

Antiplatelet/anticoagulation medication utilization

- + Evaluation: Percentage of patients who are taking medications in this class
- + Medication usage as well as any contraindications are collected at the initial visit and updated prior to program completion.

Duke activity status index (DASI)

- + Evaluation: percent change in pre to post MET values.
- + Survey should be administered prior to the first exercise session and prior to discharge from Phase II cardiac rehab.

Glycated hemoglobin (A1C)

- ✚ Evaluation: percentage of patients who have diabetes and have had an A1C measured within six months of entry into cardiac rehab.

Patient Health Questionnaire – Depression Screen (PHQ-9)

- ✚ Evaluation: percent change in pre to post scores.
- ✚ Survey should be administered prior to the first exercise session and prior to discharge from Phase II cardiac rehab.

Behavioral

Smoking status

- ✚ Evaluation: percentage change in pre to post smoking rates and for those that smoke the percentage of patients referred to smoking cessation services
- ✚ Smoking status should be evaluated at the initial interview and prior to the patient being discharged from cardiac rehab.
 - Pre smoking status is defined as – smoking status one month prior to their cardiac event.
 - Post smoking status is defined as – smoking status during the last half of their cardiac rehab.

Dietary Fat Screener

- ✚ Evaluation: percent change in pre to post scores.
- ✚ Survey should be administered prior to the first exercise session and prior to discharge from Phase II cardiac rehab.
 - **Post test should focus on the patient's diet history over the past month, not the past year as indicated on the survey.**

Sodium Screener

- ✚ Evaluation: percent change in pre to post scores.
- ✚ Survey should be administered prior to the first exercise session and prior to discharge from Phase II cardiac rehab.

Service

Patient satisfaction

- ✚ Evaluation: patient satisfaction score.
- ✚ Survey should be administered prior to the patient being discharged from cardiac rehab.

Program completion rate

- ✚ Evaluation: percentage of patients who complete cardiac rehab.
- ✚ Completion rate is determined by:
 - **The patient completing 12 or more sessions.**
 - **The patient completing all approved visits allowed by their insurance carrier.**

Data Entry

Utilize the **Patient Tracking Form** to enter the data within the Excel spreadsheet as the “Patient Tracking Form” follows the spreadsheet in sequential order making data entry quick and easy. It may be helpful initially to enter the data into the spreadsheet in an ongoing fashion. Example – once a patient exits Phase II, enter the individual patient’s data from the **Patient Tracking Form** into the Excel spreadsheet. After you are more familiar with the data entry, you could enter the data on a monthly or even quarterly basis. It is usually a good idea to designate a person to be responsible for data entry and to make sure each patient has completed all necessary paperwork.

Data Submission

At the end of the reporting quarter, you will be notified by e-mail when your spreadsheet is due and the dates that need to be included. Your spreadsheet is usually due within the first 10 days of the following quarter. Once you have entered all the patients within the quarter, you need to go to your File menu and “save as” that quarter. Example – in January after you have entered all the patients due that quarter (patients that started between July-Sept), “save as” “July-Sept09.” Next you will need to delete all the names in column B. Simply highlight the first name on your spreadsheet and drag your mouse down column B (holding in the left mouse key). Once all the names are highlighted, press the “delete” button. This will delete all of the names on your spreadsheet. Next, go to File menu and save as “July-Sept09nonames.” This is the file that you will attach to an e-mail and send to the CVH program for analysis. The reason for this is to keep all data received by the CVH program free of all patient identifying data. This helps reinforce patient confidentiality. Please e-mail the spreadsheet to: mmcnamara@mt.gov

Feedback:

The CVH program will provide you with feedback for each indicator being tracked. The feedback will include a demographic and diagnosis table a table that addresses the mean survey scores and two figures. The figures will include all the indicators within each domain. Your individual data will be plotted against the regional mean – in some cases, your data will be plotted against your state or AACVPR affiliate. You will receive your feedback within six weeks of data submission.