

## CAREWare Use for Quality Management – Philadelphia EMA

Philadelphia Department of Public Health

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## Philadelphia EMA

- Nine counties, two states
- >9800 Medical patients in CARE funded system
- Parts A, B, C, and D all use RW CAREWare
- Decentralized deployment at >75 agencies
- CAREWare used as basis of Part A QM since 2002

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## Indicators Tracked Include:

- Retention
- CD4 and VL testing
- Not recommended regimens
- PCP, MAI prophylaxis
- PPD
- PAP
- PCRS referrals
- Outreach - completed referrals to medical care

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## Use of CAREWare for QM

- Data must be in CAREWare
  - Provider responsibility to enter their data in their local database
- Get data out in a useful format
  - QM data extracted using custom reports and/or data extraction program (local programming)
  - Central data analysis with standard statistical software
  - Reports returned to providers

*New functionality in CAREWare will replace some of the external data extraction and analysis*

- Act on the data

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## Responding to data reports

- Review of individual charts for clients not meeting indicators
- Selection of areas for quality improvement plans for each agency, monitoring of success of plans
- Trigger provider agency chart reviews and monitoring visits
- Basis of funding decisions in procurement
- Information used in planning process

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## Data Quality

- Plan for first year data quality issues – data in charts but not in CAREWare
- Targeted chart reviews
- Decision making based on reported data
- Provider ownership of data

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## Sample Results

- Monitoring system-wide performance
- Provider level quality improvement
- Comparison of provider performance

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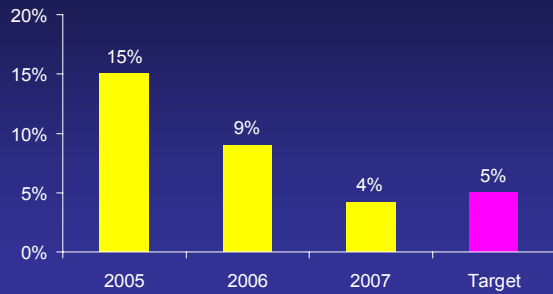
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## Percent receiving a PHS not recommended regimen - EMA Aggregate



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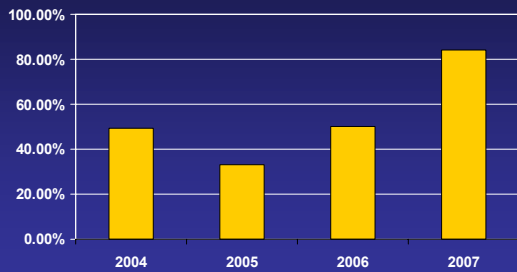
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## PAP Performed – Individual Provider Agency Data



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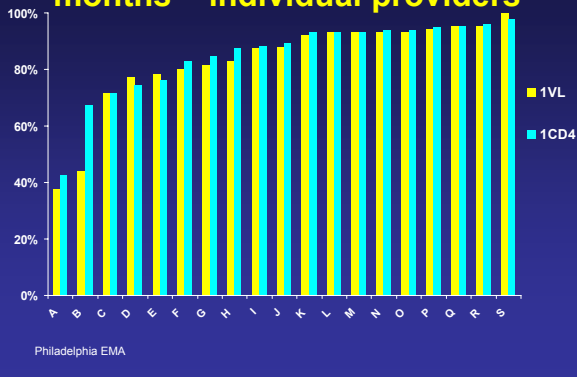
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## 1 CD4 & 1 Viral Load in Last 12 months – individual providers




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## Factors Influencing Success

- Dedicated data entry staff
  - Use of encounter forms for data collection
  - Local training, TA, and manuals for CW use
  - Peer to peer learning experiences
  - Ensure providers have timely access to own data in useful format
  - Ensure CAREWare provider data useful for client management
  - Start simple, have multiyear plan
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