

OREGON DHS SBHC KEY PERFORMANCE MEASURES (KPMs)

Goal: SBHCs are committed to high-quality, age appropriate, accessible health care for school-age children. To ensure this goal, SBHCs are targeting KPMs.

Implementation:

Year 1 (SY 2006-2007) introduction to the tool and will be time for sites to identify local system issues that may challenge completion and/or accurate data collection.

Year 2 (SY 2007-2008) will be used to identify baseline targets for sites and Statewide goals will be set accordingly.

Year 3 (SY 2008-2009) will be full KPM implementation and % compliance will be tied to county contracts. Progress should be demonstrated yearly and meet statewide target goal by 2009, otherwise funding may be reduced.

Method:

Random Chart audit of 20% of total charts of students seen 3 or more times this SY **OR** 30 charts of students seen 3 x or more this SY – *whichever number is greater*

Sentinel Condition	State Goal	Resources Needed	Markers	Measurement
1. Risk Assessment ¹	Complete risk assessment done <i>every service year (SY)</i> after 3 visits	<ul style="list-style-type: none"> ➤ Risk assessment tool (may be embedded in other clinic forms)¹. ➤ Written process on how to complete risk assessment including positive and negatives for each. ➤ May add question on if PE done in last 2 years. 	15% of charts with completed risk assessment done during this service yea. If a patient declines this service despite education, the chart will be excluded from the measurement calculation for this measure.	Number of completed risk assessments completed divided by the number of charts audited, equaling the percent in compliance.
2. Comprehensive Physical Exam ²	Complete Physical exam <i>every 2 years</i> after child has been seen 3 times in one SY	<ul style="list-style-type: none"> ➤ Age appropriate comprehensive physical exam form². ➤ Necessary equipment available to complete exam. 	15% of charts with completed comprehensive physical exam done by SBHC or completed release of information and receipt of primary care provider's exam notes that was conducted within the last 2 years. If failed attempts have been made and documented x3 to get the notes OR a patient refused services, these patient charts will be excluded from the measurement calculation for this measure.	Number of completed comprehensive physical exam completed divided by the number of charts audited, equaling the percent in compliance.
3. BMI	At least 1 recording of BMI for children seen at least 3 times in the SBHC in <i>one SY</i> .	Standard height for weight charts and CDC Standard Growth Charts with BMI calculations (may be downloaded from CDC website)	25% of charts with BMI calculated during this service year. If a patient declines this service despite education, the chart will be excluded from the measurement calculation for this measure.	Number of charts with calculated BMI completed divided by the number of charts audited, equaling the percent in compliance.

¹ **Age appropriate risk assessment (AARA)** includes 12 categories: dental; injury; diet and exercise; substance abuse and passive exposure; abuse; family relationships; school; friends; emotional health, and sexuality.

² **Comprehensive Physical Exam (CPE)** includes medical, family and social history; review of systems; vital signs; EENT, cardiovascular, respiratory, abdominal, GU, musculoskeletal (including scoliosis check as appropriate) and gross neurological examinations. Laboratory and other diagnostics as indicated; Review of immunizations; Complete summary assessment and plan (if child is healthy, document this) include anticipatory guidance/health education/counseling as indicated. STD screening and/or Pap, should either be performed or referred as history and/or exam determines.