Bridge Quality Dashboard

(Visual representation of the Bridge Quality Dashboard with notes on the Overview Tab)

The Overview tab contains general release and organizational information.

A link is provided to the Population Health website containing information such as measure definitions, eligible patient populations, exclusions, exceptions, metric calculations, and data sources.

Tabs at the top of the Dashboard enable a variety of views of the data.

Bridge Quality Dashboard Overview

Overview Tab

- Breast Cancer Screening (annually, 40-75 years)
- Colorectal Cancer Screening (50-75 years)
- Diabetes Eye Exam (annual)
- Diabetes: HbA1c Control <3 (18-75 years)
- Influenza Immunization (6 months and older)
- Pneumococcal Vaccination (65 and older)
- High Risk Medications (no high-risk medication prescribed)
- Adult BMI Assessment (18 and older)

Measures reflect qualifying patients 01/01/2016 - 09/30/2016.

Patient Compliance Rate Hierarchies:
- VUMC
- PCC
- Clinic
- Clinician
- Primary Care

Counting:
Distinct visits at each hierarchy level are counted. A patient is only counted once at the VUMC level. A patient could be counted in multiple PCCs or Clinics depending on their visits, however, they are never counted more than once in any distinct PCC or Clinic. Based on this counting method, keep in mind that numbers will not add up from one level to another.

Patient Detail Report:
For those with access to patient level data, a Patient Detail Report can be generated that shows every patient who has at least one gap in care and for which measures they are noncompliant.

Data:
This dashboard only reflects internal Vanderbilt data and does not reflect payer/claims data.
### VUMC Population Health Measures Tab

The VUMC Population Health Measures Tab provides a comprehensive view of various health measures across the VUMC system. The table includes measures such as Adult BMI Assessment, Breast Cancer Screening, Colorectal Cancer Screening, Diabetes Eye Exam, Diabetes HbA1c, High Risk Medications, Influenza Immunization, and Pneumococcal Vaccination.

#### Overall VUMC Performance

<table>
<thead>
<tr>
<th>Measure</th>
<th>Compliant Patients</th>
<th>Eligible Patients</th>
<th>PCT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult BMI Assessment</td>
<td>228,665</td>
<td>287,991</td>
<td>79%</td>
</tr>
<tr>
<td>Breast Cancer Screening</td>
<td>22,383</td>
<td>101,614</td>
<td>22%</td>
</tr>
<tr>
<td>Colorectal Cancer Screening</td>
<td>26,445</td>
<td>134,001</td>
<td>20%</td>
</tr>
<tr>
<td>Diabetes Eye Exam</td>
<td>3,370</td>
<td>25,182</td>
<td>13%</td>
</tr>
<tr>
<td>Diabetes HbA1c</td>
<td>7,671</td>
<td>9,050</td>
<td></td>
</tr>
<tr>
<td>High Risk Medications</td>
<td>63,506</td>
<td>69,901</td>
<td>91%</td>
</tr>
<tr>
<td>Influenza Immunization</td>
<td>98,671</td>
<td>141,097</td>
<td>70%</td>
</tr>
<tr>
<td>Pneumococcal Vaccination</td>
<td>54,340</td>
<td>75,489</td>
<td></td>
</tr>
</tbody>
</table>

#### PCC Performance

<table>
<thead>
<tr>
<th>Measure</th>
<th>Compliant Patients</th>
<th>EligiblePatients</th>
<th>PCT</th>
</tr>
</thead>
<tbody>
<tr>
<td>BEHAVIORAL HEALTH</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult BMI Assessment</td>
<td>3,416</td>
<td>4,200</td>
<td>80%</td>
</tr>
<tr>
<td>Breast Cancer Screening</td>
<td>344</td>
<td>1,350</td>
<td>25%</td>
</tr>
</tbody>
</table>

- **Filters** allow customized views by Measure and PCC.
- **Year-to-date data; refreshed monthly and displayed for a calendar year.**
- **Measure data** can be viewed comprehensively for all of VUMC or by PCC.
- **Numbers and percentages** reflect eligible VUMC patients that have obtained recommended clinical care.
Clinic and Clinician Tab

Data can be filtered by Measure, PCC, Clinic Group, Epic Department, or Clinician

Missed Opportunities shows total patient visits that occurred in the measurement period by patients with unaddressed clinical care opportunities

Measure data can be viewed for a clinic or for an individual clinician

Hovering over a data bar will open a drop down with links to Measure Definitions or a detailed patient report. Clicking the Patient Detail Report link will open the Patient Detail Report tab and show the names of eligible patients who have NOT taken advantage of the clinical care opportunities
The primary care tab contains a subset of the larger data set in the Dashboard. The focus of this tab is on Primary Care, which is the emphasis of VUMC's Quality Pillar Goal.

Filters allow customized views by Measure and Epic Department ID. Only EPIC department IDs representing Primary Care Clinics have been included.

Measure data can be viewed for Primary Care overall or by EPIC Department ID.
Patient Detail Report

The Patient Detail Report tab is blank until a selection is made from another tab by clicking the Patient Detail Report link within a pop up box.

When populated, the list includes names and MRNs of patients who have not taken advantage of the recommended care opportunities.

For more information about the Bridge Quality Dashboard in Tableau, please contact Courtney Smith (courtney.m.smith.1@vanderbilt.edu)