azara healthcare

DRVS Data Hygiene Toolkit

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This DRVS Data Hygiene Toolkit was created by OACHC staff to aid health centers in creating their DRVS Data Hygiene Program. The toolkit is comprised of a variety of DRVS tools and resources to be used in your data hygiene and validation activities. The toolkit includes several hyperlinks to additional resources that are identified by clicking on the underlined text. Additionally, a quick video tutorial can be found here and slides from a previous OACHC Azara Workshop on Data Hygiene.

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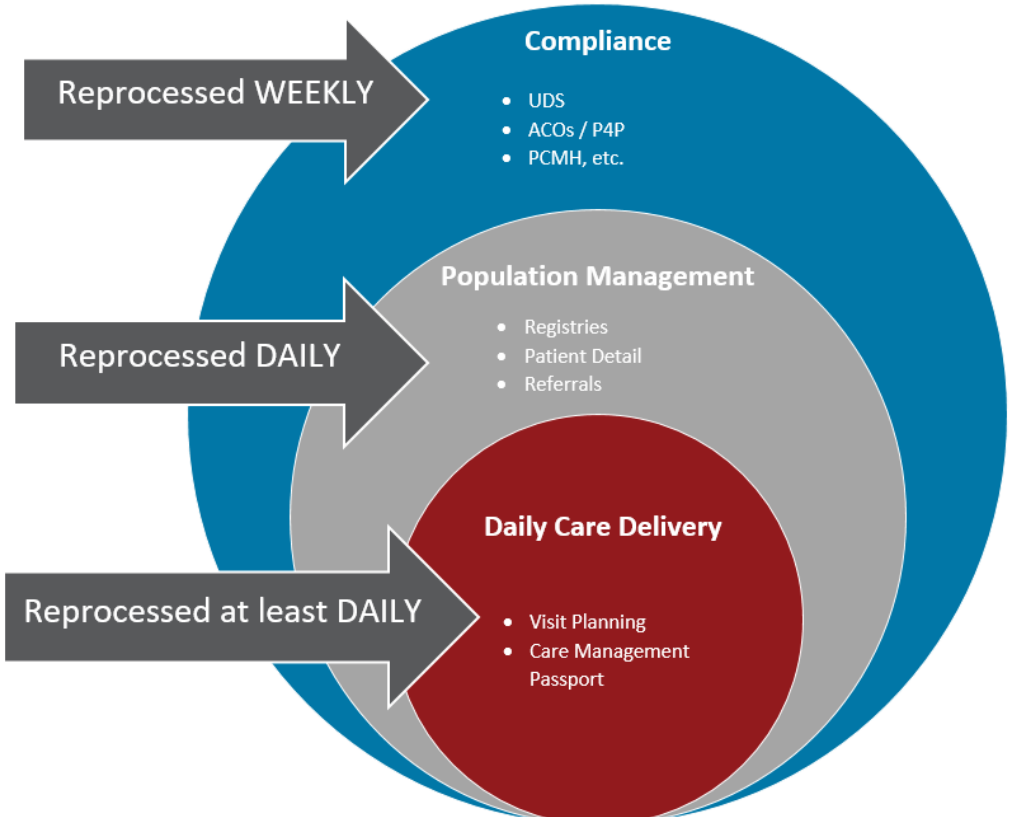
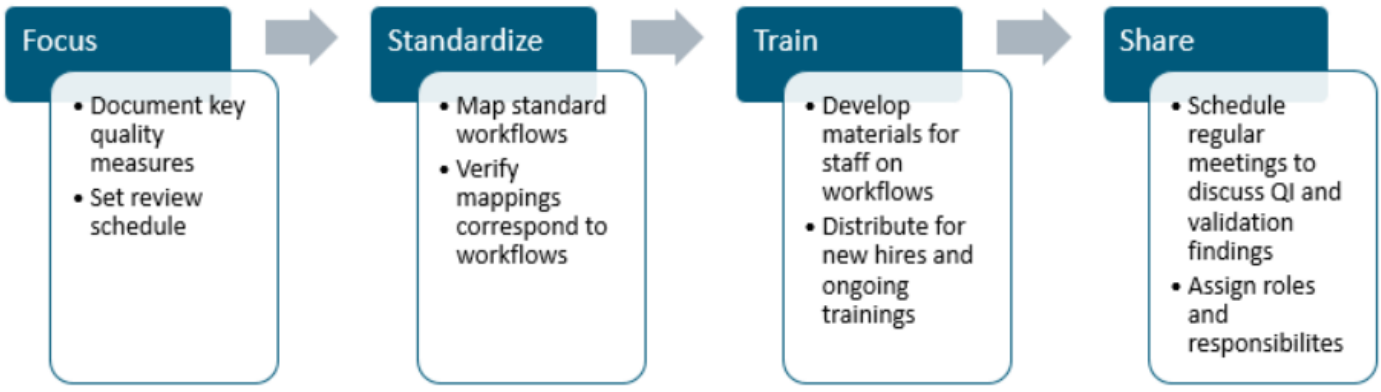
**Any example patient information included in the toolkit is all demo data and is not real patient health information (PHI).

DRVS Reporting Hierarchy

Your health centers data in DRVS is reprocessed based on the tiered approach below. Knowing how your data is reprocessed is key to understanding when the data is coming over to aid in your data hygiene activities. To learn more about how your data is processed watch this DRVS Data Processing Quick Tip Clip from the DRVS Help Section.



High Level Overview and Tips for a Successful Data Hygiene Program



DRVS Measure Matrix

The Measure Matrix is used to focus on the most important measures that impact the most grants, organizational priorities, contracts, and QI goals. Each center had a data hygiene adoption session during implementation that focused on creating your Measure Matrix. An example Measure Matrix is included in Figure 1. Review you current measure matrix or create a new one here.

Figure 1: Measure Matrix

Measure Name	UDS	PCA Data Sharing Project	HCCN	Ohio CPC (Medicaid)	Supplemental Substance Use Program - HRSA	Buckeye Health Alternative Payment Model (APM)	Diabetes/ Hypertension 1815 Grant
DM A1c Poor Control	X	X		X			X
DM A1c Good Control						X	
Cervical Cancer Screening	X	X		X		X	
Colorectal Cancer Screening	X	X				X	
HTN BP Control	X	X		X		X	X
Tobacco Assessment and Cessation Advice	X			X			
Asthma Pharmacological Therapy				X			
Depression dx and treatment maintenance	X			X			
Prenatal Trimester of Entry to Care	X	X		X		X	
Postnatal Birthweight	X			X			
Statin Therapy - Prev&Tx CAD	X	X		X		X	X
IVD Use of Aspirin	X						

DRVS Data Hygiene Calendars

The Data Hygiene Calendars are used to schedule your hygiene activities. The Measure Matrix will determine what measures you should put in your Data Hygiene Calendars by what measures are used the most across the various reporting requirements and priorities at your center. Each center had a data hygiene adoption session during implementation that focused on creating your Data Hygiene Calendars. An example is included in Figure 2 and can be downloaded here. The first calendar is broken down month by month to do a deep dive on each measure. The second calendar is broken down by daily, weekly, monthly and quarterly hygiene activities. The activities range from the measures you know need more effort, reviewing registries, mapping administration, and all Azara communications. Figure 3 highlights the steps to start to build your Data Hygiene Calendar. These calendars ensure you are performing your data validation tasks consistently to stay on top of your measures and UDS preparation. It is beneficial to assign data hygiene tasks and responsibilities to multiple teams to create a cross functional data hygiene team. Additionally, utilize your QI meetings to focus and share data hygiene tasks to make the review transparent throughout the health center.

Figure 3: Building Your Data Hygiene Calendar

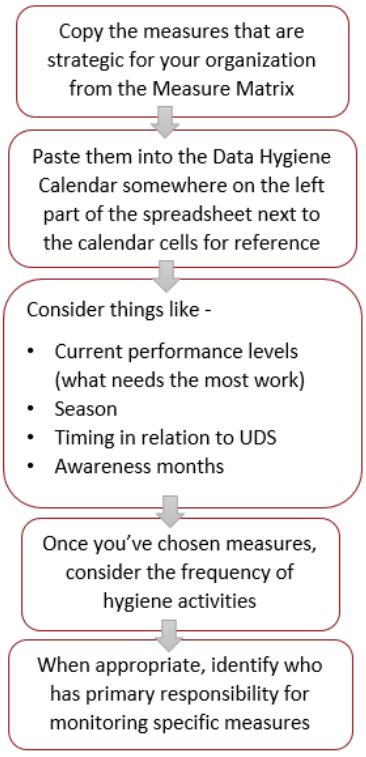


Figure 2: Data Hygiene Calendars

Measure Name	Targets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Infant Well Child Visit 15 mos, Childhood Imms and Dental Sealants													
Colorectal Cancer Screening													
Statin Therapy - Prev&Tx CAD and Aspirin Therapy and Care Coordination													
DM A1c, Foot, Eye, Nephropathy, LDL													
Adult and Child Weight Screening and Counseling (UDS)													
Colorectal Cancer Screening (UDS)													
Adolescent Well Care and Well Child Visits 3-6 yrs													
Depression Screening and Follow up													
Cervical Cancer Screening and Breast Cancer Screening													
HTN BP Control for DM and HTN and Flu - Pneumococcal Imm													
UDS Measure Review (UDS)													
Asthma Pharmacological Therapy													

Hygiene Activites	Daily	Weekly	Monthly	Q1	Q2	Q3	Q4
Prenatal Trimester of Entry (UDS)							
Birthweight (UDS)							
Registries							
Visit Planning Report							
Review Key Scorecards / Dashboards i.e., UDS							
Review Mapping Administration & Clean up Test Patients							
Review Provider Admin and Groups							
Review Data Health Dashboard							
Azara Communication							

DRVS Data Validation Checklists

Knowing where to start when validating your data is the hardest part. Azara has a couple checklists breaking down each data validation activity, suggested staff role, and frequency of the tasks. The first checklist is the Data Hygiene Plan in Figure 4. This plan includes the frequency to review the Measure Matrix, Data Hygiene Calendars and more. The second checklist is the Monthly Checklist in Figure 5. This checklist includes the DRVS tools to be validated each month and the suggested staff member for each staff. All DRVS data validation tools and best practices on using the tools are included on 7 – 15 of the toolkit. You can download the checklists here.

Azara Support Team hosted a series of themed UDS session in 2020. Each session focused on a subset of the UDS reports and highlights common mapping and data issues. The Support Team created Validation Checklists for each UDS Table in DRVS. You can find the recording of these webinars as well as the checklists in DRVS Help.

Figure 4: Data Hygiene Plan Checklist

Activity	Frequency	Assignee(s)	Complete
Measure Matrix Review and update the Measure Matrix with new measures or changes to existing contracts. Update focused scorecard, as needed	Yearly	QI Director	
Data Hygiene Calendars Review and update calendars to account for health center initiatives, new measures, etc.	Yearly	QI Director	
Scorecard Review Review your centers focused measure scorecard for questionable values	Monthly	QI Director and/or QI Analyst	
Measure Review Utilizing the Measure Analyzer, and other DRVS Tools, review any measures that need additional validation	Monthly or as needed	QI Analyst or Subject Matter Expert	
Checklist Review Review all areas of the monthly checklist for discrepancies	Monthly	QI Analyst	

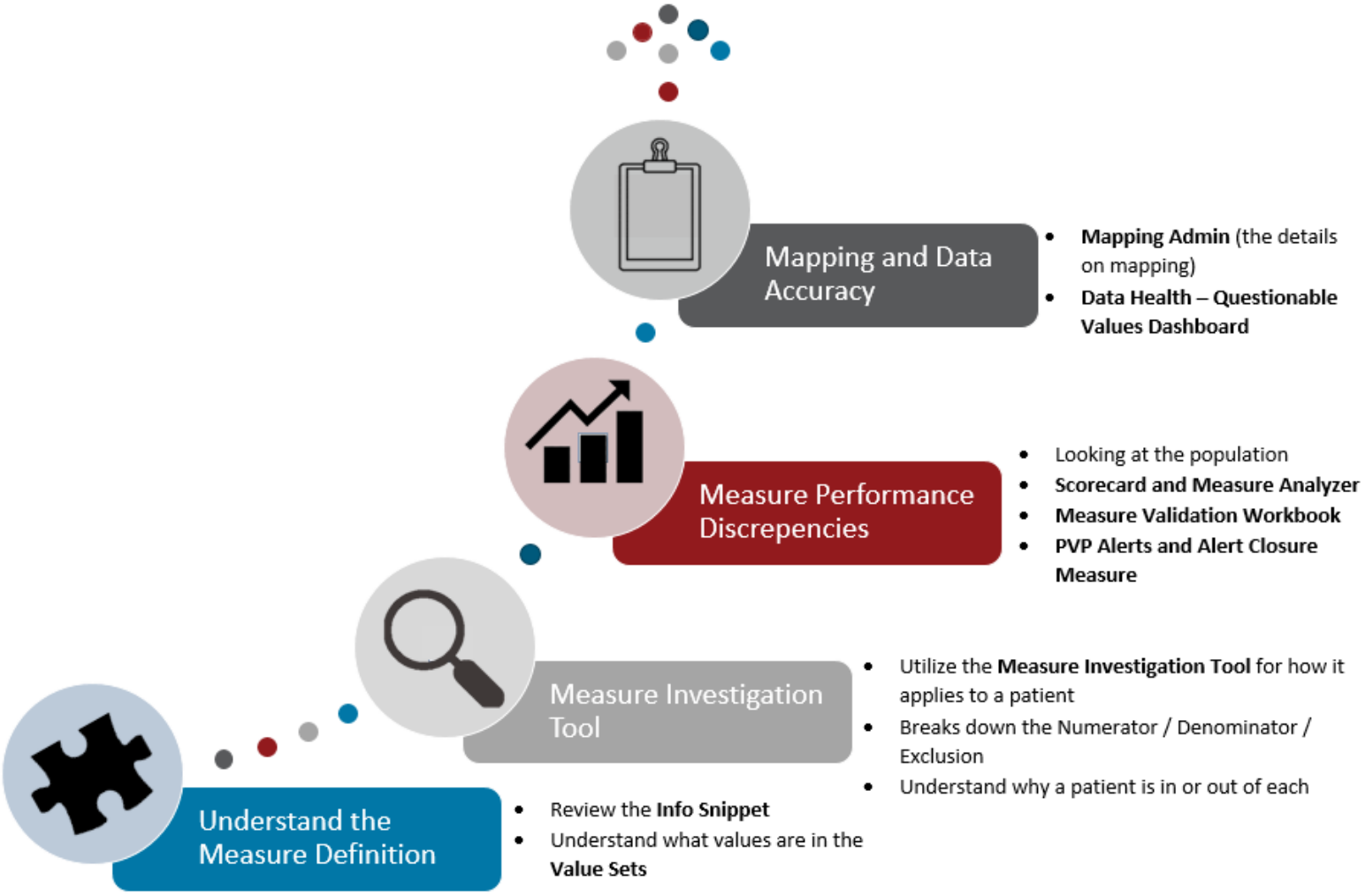
Figure 5: Monthly Checklist

Item	Description	Assignees(s)	Complete
Scorecard Review	Review your centers focused measure scorecard for questionable values. Verify Targets are correct and make updates or create new as required	QI Director	
Measure Specific Analysis	Utilizing the Measure Analyzer, and other DRVS tools, review any measures that need additional investigation	QI Analyst or Subject Matter Expert	
Provider Administration	Review providers listed in provider administration • Active Status • Update provider groups • Include in filter in 4-cut	DRVS Administrator	
Cohorts	Update manual cohorts	DRVS Administrator	
Mapping Administration	• Race/Ethnicity • Unmapped Items	DRVS Administrator	
Income	Review UDS data to be sure income and family size are being collected accurately	QI Analyst	
Data Health Dashboards	Review Data Health Dashboards for data discrepancies and aim to resolve them	QI Analyst	
Gap List Review	Distribute gap lists to providers for review	QI Analyst and Provider	
Azara Communications	Review communication from Azara for measure/product changes and upcoming webinars. Distribute throughout the health center appropriately	QI Analyst	
OACHC Communications	Review communications and Slack updates from OACHC on upcoming ODIP User Groups and trainings	QI Analyst	

DRVS Tools to Assist in your Data Hygiene Activities

Azara's overview graphic in Figure 6 reviews how to begin your deep dive approach on validation with the tools available in DRVS. This section will break down all the DRVS tools to understand the details and how to use each tool.

Figure 6: Overview of DRVS Tools



Info Snippets and Value Sets

The Info Snippet, in Figure 7, can be found in all reports and measures to help you understand what data you are reviewing. The Info Snippet is the “i” icon on measures and reports. This defines the measure definition, the numerator, denominator, and exclusions of all measures.

Value Sets, in Figure 8, can be found in the measure analyzer. This helps to understand the values that qualify patients for the numerator, denominator, or exclusions of the measure. In the Code System column you can find the different types of data that make up the measure for easy transparency.

Figure 7: Info Snippet

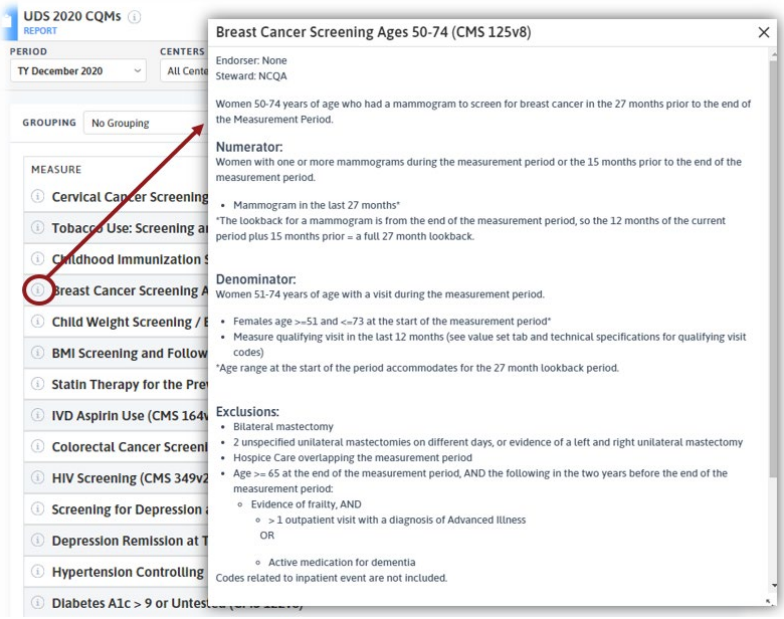
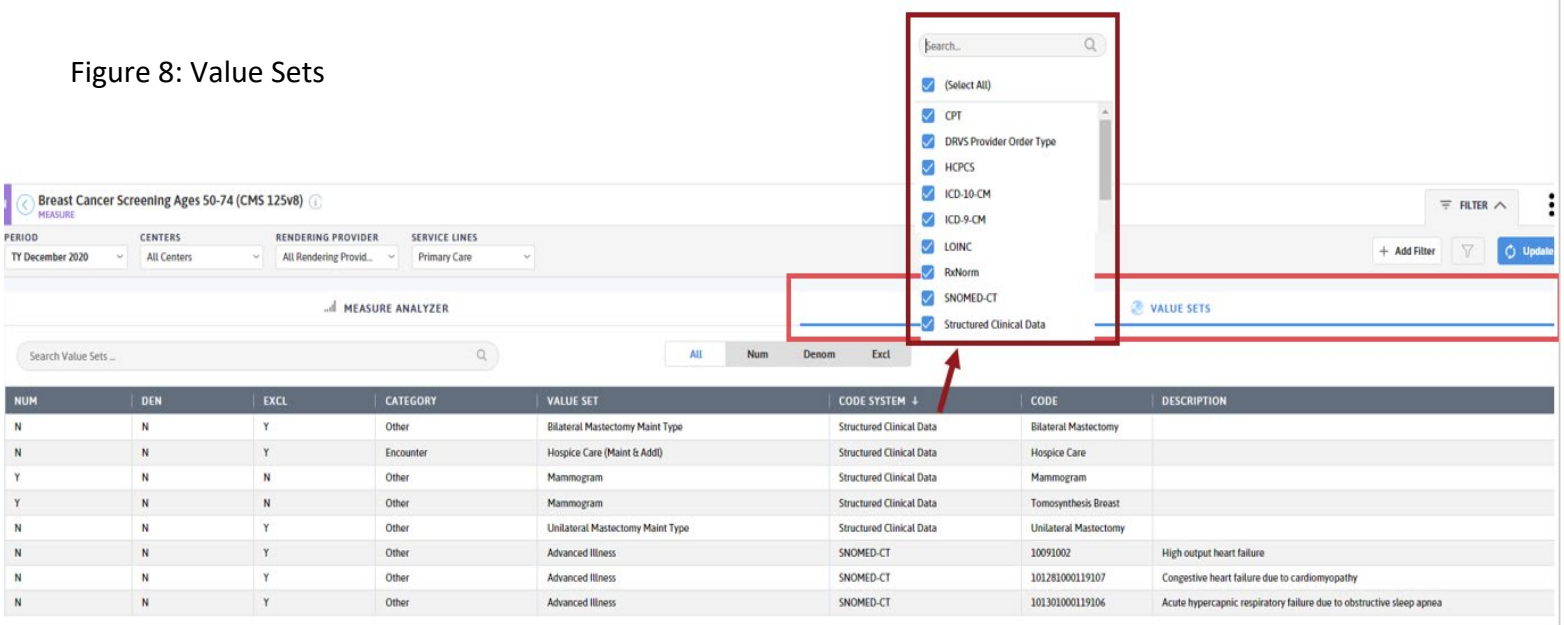


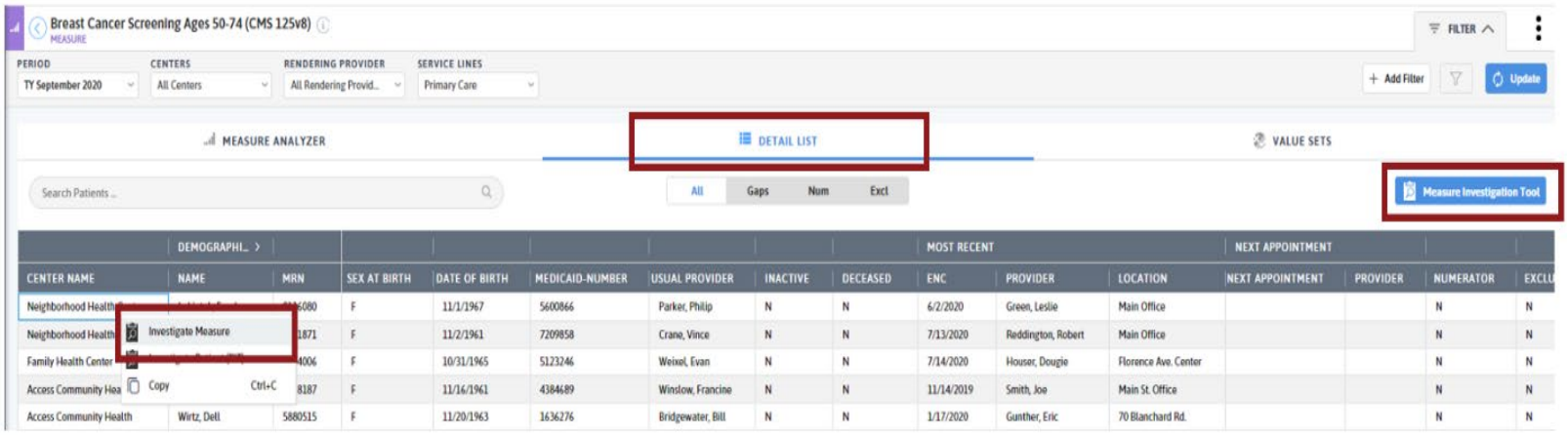
Figure 8: Value Sets



Measure Investigation Tool

The Measure Investigation Tool is designed to investigate why a patient is or is not meeting the criteria of the components of a measure. The tool identifies the specific criteria as to why a patient is in the numerator, denominator, or exclusions. You can view the Measure Investigation Tool, in Figure 9, in the Detail List of all measures by right clicking on any patients name or by the Measure Investigation Tool button in the top right is the Detail List if you want to understand why a patient is not in the measure criteria.

Figure 9: Measure Investigation Tool - Access



Measure Investigation Tool Examples – Cervical Cancer Screening:

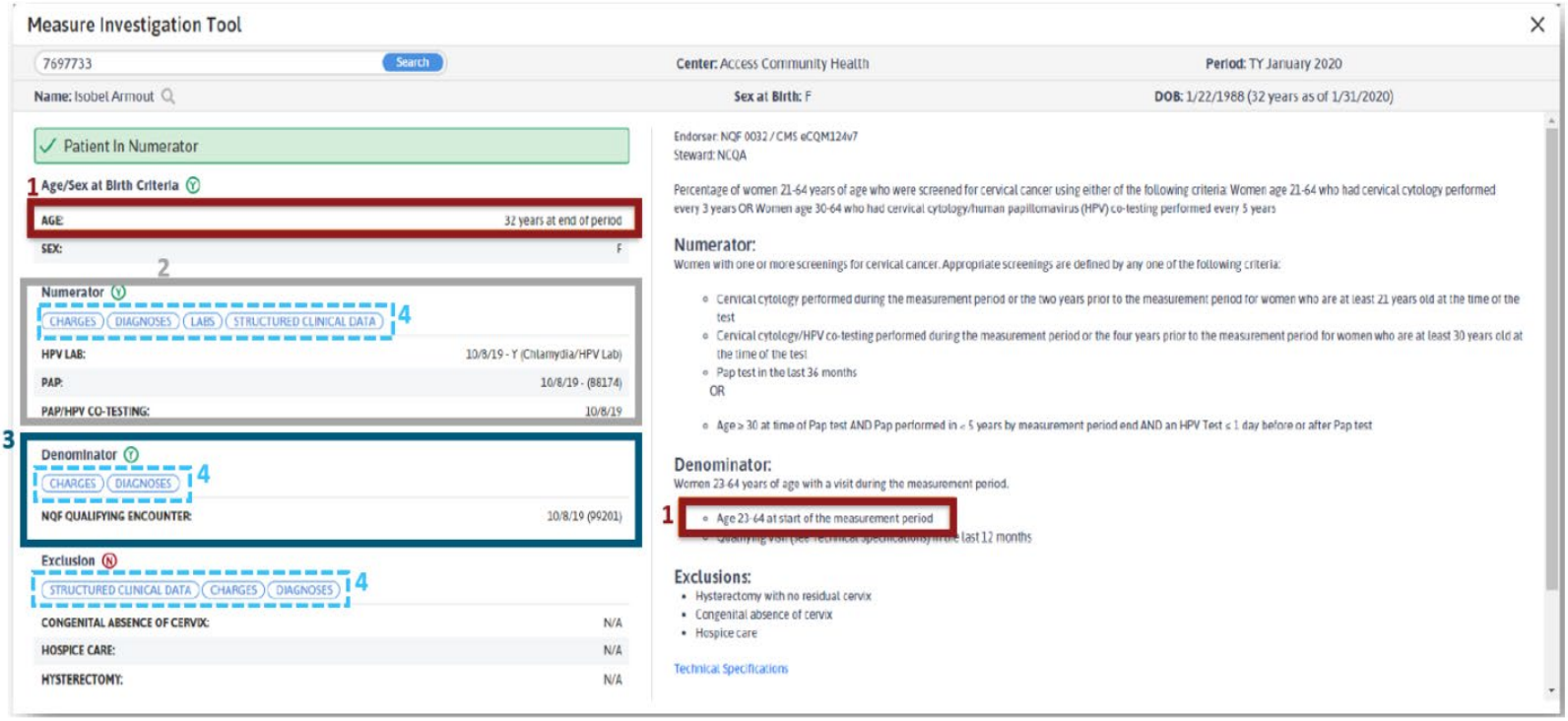
1. Patient Eligibility: The Measure Investigation Tool will show what criteria is being pulled to make the patient eligible. The patient must be 23-64 at the start of the measurement period for the cervical cancer screening measure. In this example the patient is 32 years old and will be included.

2. Patient in Numerator: For this demo patient, she has had a HPV lab and PAP within the 12 month timeframe and will be included in the numerator.

3. Patient in the Denominator: The demo patient had a qualifying encounter on 10/8/19 and is within the age range so she will also be included in the denominator.

4. Sourcing the Data: The blue tabs display the types of data that count for each section. Clicking on each tab will display all the eligible values, charges, diagnoses, labs or structured clinical data, pulled from the EMR.

Figure 10: Measure Investigation Tool - Example



Scorecards and Measure Analyzer

Scorecards give health centers the big picture view of the measures performance. It is helpful to utilize a scorecard for your focused measures to review frequently within your data hygiene plan. The Measure Analyzer goes one step further to do a deeper analysis on a particular measure. While reviewing your focused scorecard or measure it is helpful to analyze and think about the following:

What could be wrong with the data? :

1. Has your health center added/removed any providers or locations?
2. Are there any new workflows that could not be mapped?
3. Incorrect “qualifying encounter’ definition and encounter service line mappings
4. New lab or name change of labs that Azara might not be picking up

Analyzing the data and identifying opportunities for improvement:

1. Add in a baseline period to your reports to see how your numbers have changed.
2. Review numerator and denominators to see if the numbers are to be expected.
3. Try to understand what is happening with the data based on what you know about your health center. For example, recent staff turnover, new workflows or templates, new labs, or any QI projects in the works.
4. Review the value sets and patient detail to see what is pulling into the measure.

Patient Visit Planning Alerts and Alert Closure Measure

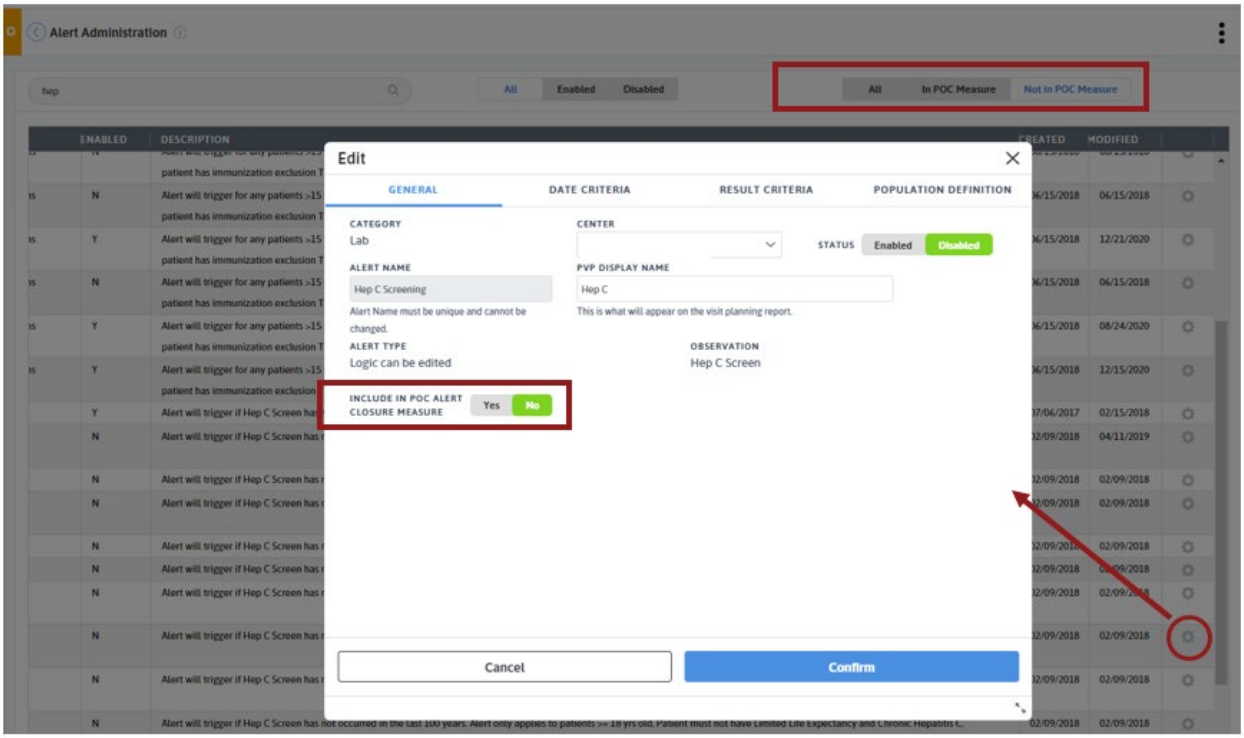
Alerts on the Patient Visit Planning (PVP) report are designed to provide a reminder and drive actions to meet specific quality performance measures for preventive and chronic care management of your patients. These alerts let the clinical team know what might be missing, overdue, out of range, or due soon. In regards to your Data Hygiene Plan, it is helpful to review the alerts, ensure all are turned on that need to be and staff are aware of the expected workflows since these alerts directly impact a variety of quality measures. Check out DRVS Alert Administration Guide in the DRVS Help Section.

DRVS Approach to Implementing Alerts for Your Organization:

- Review available alerts and enable those that align with organization goals and are high priority.
- Engage the clinical leadership in decisions to customize alerts
    - Due Soon time frame e.g., 2 weeks, 1 month, 6 months before observation is due
    - Appropriate look back time for an observation
    - Appropriate result criteria
    - Correct message text to show e.g., missing, overdue.
- Create standing actions/orders to support actions to be taken when an alert is triggered.
- Educate the team on alert definitions and roles and responsibilities associated with addressing the alerts.
- Export and print the alerts as a reference when training care teams to help the care team understand how the alert works.
- Contact support if an alert is not triggering as expected based on the information and mapping of data from your electronic health record

The Alert Closure – Point of Care (POC) measure calculates the percentage of alerts on the PVP report that are closed by the end of the week of the appointment for which they fired. Azara identifies Point of Care (POC) Alerts as those able to be closed by the end of the visit; alerts like colorectal or breast cancer screening that require an outside test, procedure, lab result, etc. are not included by default as they typically cannot be completed at the time of the visit. Users can, however, control which alerts are included in this measure through the Alert Administration page (Figure 11).

Figure 11: Alerts Included in Alert Closure Measure



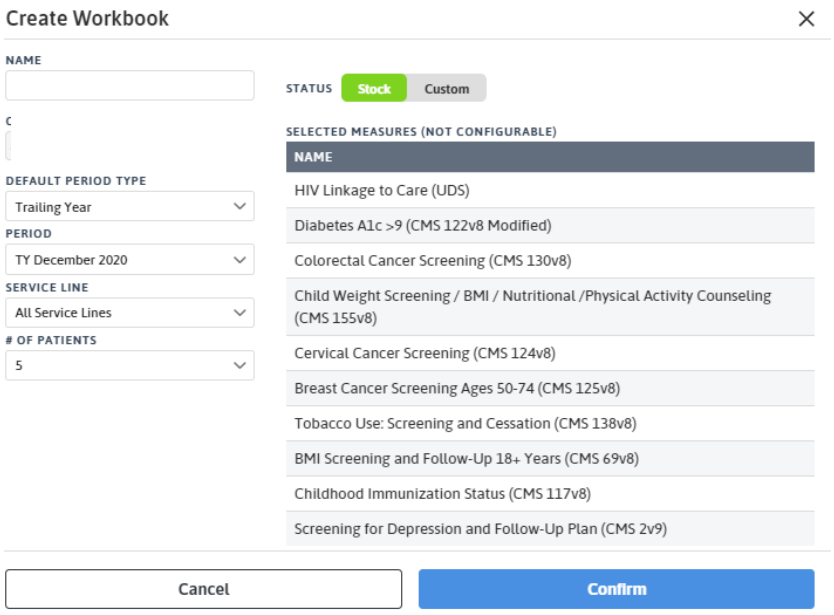
Ensure your data is accurate for this measure:

- Alerts must be enabled on the PVP report to be included in the denominator of this measure. If an alert is shown as included in the POC Alert Closure Measure on the Alert Administration page but the alert itself is Disabled on the PVP report, that alert will not be included in the denominator of this measure. The PVP status overrides POC Alert Closure status.
- This measure requires accurate and complete appointment status mappings.
- The denominator of this measure includes alerts from all appointment service lines, not just primary care. A dentist or behavioral health provider is less likely to complete an alert like BMI or A1c. Filter to either the Primary Care Service line or a specific provider/provider group.

Measure Validation Workbook

The Measure Validation Workbook can be created as needed to validate a select number of patients in the numerator, denominator, and exclusion of particular measures strategic to your health center. DRVS Administrators can access the workbook through the Admin tab on the left navigation bar in DRVS.

Figure 12: Measure Validation Workbook



Understand and Review the Mapping Administration

Regularly reviewing mappings of your center's EHR information to DRVS standard values is a crucial component of regular data hygiene and a necessary step in ensuring data accuracy and maintaining trust in DRVS. The Mapping Administration allows you to view how key data from your EHR is mapped to DRVS standard values and used in measures, registries, filters, grouping and alerts. This section allows users to see how non-coded data (like smoking status, nutritional counseling, and depression screenings) from the EHR is integrated in the warehouse for use in DRVS and make mapping changes in real time. Special attention should be paid whenever there are updates or changes to EHR workflows, e.g., using a different field to enter smoking status, new lab names, etc. No values should be left unmapped—everything should be mapped to a DRVS standard value, including Archive, Ignore, and Do Not Load. Check out the DRVS Mapping Administration Guide, in the Help Section under User Guides, to review more about the structure, how to investigate unmapped items, and a table of mapping categories.

Try it in Practice:

1. Navigate to the mapping admin

2. Select structured clinical data

3. Look for unmapped items. What should be mapped?

4. Now Review UDS data elements within the structured clinical data category (mammograms, nutritional and physical activity counseling and/or BMI follow up, colonoscopy etc). Anything unmapped or anything that looks suspicious?

2

MAPPING CATEGORY	UNMAPPED EHR VALUES
Migrant Status	0
Race	0
Service Line	0
Sexual Orientation	0
Structured Clinical Data	111

3

MAPPED DRVS VALUE	COUNT	SOURCE EHR TEXT
Unmapped	587	Social History | Gender identity?
Unmapped	521	Social History | Assigned sex at birth?
Unmapped	517	Social History | Sexual orientation?
Unmapped	251	Social History | Pronouns
Unmapped	21	Patient Assertion | ASSERTIONDATE_WELLVISIT
Unmapped	15	QM | Uniform Data System 2020 - Provider Level | Breast Cancer Screening
Unmapped	13	Social History | Relationship status

5. Now navigate to the Requires Action tab in mapping admin to review all data that is currently not mapped

5

UDS | Requires Action | All

MAPPING CATEGORY	UNMAPPED EHR VALUES
Billable Encounter	45
Financial Class	6
Patient Interaction	45
Prenatal Visit	45
Provider Specialty	1
Provider Type	1
Refugee Status	1
Structured Clinical Data	111
Telehealth Encounter	3
Veteran Status	2

6. Finally, review the DRVS Values with 0 Count. This will show all DRVS values that have no data mapped from you EHR. If you think that there should be data coming over from your EHR to be mapped to any of these values, submit a support ticket.

6

Mapped DRVS Values 65 | DRVS Values with 0 Count 446

MAPPED DRVS VALUE	DISTINCT COUNT
Anal Sexual Activity	0
Anxiety Screen	0
Appetite Assessment	0
Asthma Control Test	0
Asthma Self Management	0
Asthma Severity	0
BMI Follow-Up Plan	0
CHLAM-GON	0
Chlamydia	0
Clinical Summary	0
Colectomy	0
Dental Eval	0
Diabetes Self Management	0

Data Health Dashboards

DRVS has two Data Health Dashboards in DRVS, Data Health Questionable Values and Data Health Lab Volumes included in Figure 13. The Data Health Questionable Values dashboard enables you to easily identify data entry errors that impact a variety of your measures. The Data Health Lab Volumes dashboard enables you to quickly check if your health centers lab volumes look accurate or to be expected. Ideally, these dashboards are to be ran on a weekly basis to keep up with the potential data entry errors. Utilize the email function to email these dashboards to your email and remind you to check them on a weekly basis. Watch the DRVS Quick Tip Clip on Managing Email Subscriptions in the DRVS Help Section.

Figure 13: Data Health Dashboards