2010 Clinical Quality Priorities

By Juanita Cone, MD, MPH, Chief of Population Care, Prevention and Health Promotion

Six months ago, Senior Leadership announced the 2010 clinical quality goals. Mid-year is a good time to take a look at what they are, where we are, and what’s needed to achieve our targets by year-end. The goals focus on risk factors for cardiovascular disease; which factors (when uncontrolled) lead to heart attacks, strokes, blindness, kidney and heart failure. Everyone who works at KPGA ought to know the clinical quality goals by heart. They are located on the KPGA intranet home page and are updated monthly. Click here to read more on the Quality Web site.

We have been able to take full advantage of the retinal eye cameras at Panola, Southwood, and Gwinnett. Members at nearby medical facilities are NOW going to these centers to have their annual diabetes eye exam. Five hundred eighty eye photographs were taken during the month of June! This is the highest number of tests performed since the cameras were installed. We will surpass our goal at this pace! Keep scheduling patients. Here’s the message to our members: Diabetic retinopathy can be treated and blindness prevented with annual diabetes eye screenings.

Performance in LDL-cholesterol management is improving but NOT at a pace that will reach the year-end goals. Most patients only need one titration to move them to goal. Treat the undertreated! Think Simvastatin 80mg each time a patient with CAD or diabetes is seen for an office visit. Remind them that statin therapy helps keep their arteries clean.

Finally, diabetes and blood pressure control still need our steadfast attention. The key is “Treat to Target.” In a few days, clinicians will receive a new, laminated treat to target pocket-card. The card provides a succinct view of getting patients to goal efficiently and effectively.

• Share the card with the clinical support staff.
• Use every opportunity to make appropriate changes in medications.
• Refer to our CVD team who are experts at teaching patients self-titration.
• Be creative. Use the RAR refill process to titrate medications.
• Use nurse visits to follow up blood pressure.

One life saved or one complication prevented is the reason Senior Leadership chose cardiovascular disease as the Clinical Quality Targets in 2010.
Vaccines--Still the most effective health option

By Ianthia Smith, PA-C, Pediatric HEDIS/GRITS Immunization Coordinator

The widespread use of vaccines has resulted in dramatic decreases in the spread of many infectious diseases worldwide, making them the most successful and cost-effective health tool in saving lives. Because of vaccines, smallpox has been completely eradicated, polio is very close to becoming a disease of the past and chickenpox is no longer considered a routine rite of passage for children. Even some cancers caused by Hepatitis B and HPV can now be prevented by vaccines. It is ironic that the very success of today’s vaccinations has lead to underappreciation of their value to our health. Because most people have never been affected by or known anyone to be affected by the diseases vaccines prevent, some groups have developed a false sense of security or have developed fears about the safety of vaccines which outweigh their fear of the diseases they prevent. Both of these misperceptions have led to pockets of reduced immunization rates and a rise in diseases such as pertussis, measles, mumps and rubella that have been well-controlled in the developed world for many decades. In reality, these diseases are merely a plane ride away.

Every dollar invested in a vaccine dose saves $2-$27 in health expenses. In the not so distant future we may see vaccines that prevent malaria, AIDS and tuberculosis.

Over the past decade, vaccine safety has become a growing concern. Before vaccines are made available to the public, research is scrutinized and many studies are performed on thousands of patients before approval is granted by the FDA. After FDA approval vaccines continue to be tracked by the CDC through the Vaccine Adverse Event Reporting System (VAERS). Continuous monitoring through VAERS provides another safety checkpoint to insure the quality of vaccines. Learning more about vaccines can be confusing - much information and unfortunately, misinformation, is available through the internet, television and printed media. Reliable sites for vaccine information include these Web sites:

Immunization Action Coalition: www.immunize.org
Centers for Disease Control: www.cdc.gov/vaccines/vpd-vac/default.htm
Children’s Hospital of Philadelphia: www.chop.edu/parents
Institute for Vaccine Safety: www.vaccinesafety.edu
Why Should I Immunize My Child: www.cispimmunize.org/fam/why.html
American Academy of Pediatrics: www.cispimmunize.org
National Network for Immunizations: www.immunizationinfo.org

The book, Do Vaccines Cause That?! by Martin G Myers and Diago Pineda, addresses concerns about vaccine safety. The most important thing you can do to protect you and your family’s health is talk to your doctor to ensure you and your family have received all age-appropriate immunizations. Vaccine recommendations for children, adults, women, travelers and other groups can be found at www.cdc.gov/vaccines/recs/schedules.

References:
www.ghtcollection.org/files/VAC_vacc_history_fs.pdf
Do Vaccines Cause That?! by Martin G Myers and Diago Pineda.

Medicare 101 Seminars

Medicare 101 seminars are offered to anyone interested in learning about Medicare and how it works. The KP Medicare Sales department is conducting free seminars twice a month at select medical centers on Tuesdays from 10am to 12pm. Some of the topics discussed include:
- History of Medicare
- Medicare ABCD
- Who is eligible?
- When/How to apply
- Medicare plans
- Q&A

There will also be representatives available with information on our KP Senior Advantage plan.