

Using Quality Data to Close Gaps in Care

Idaho Primary Care Clinic Puts Process in Place to Screen Hypertension (HTN) Patients for Chronic Kidney Disease (CKD)

Problem

Patients with diagnosed HTN at the Keystone Center for Geriatrics were not routinely screened for CKD.

Action

Comagine Health is working with Keystone on two aims:

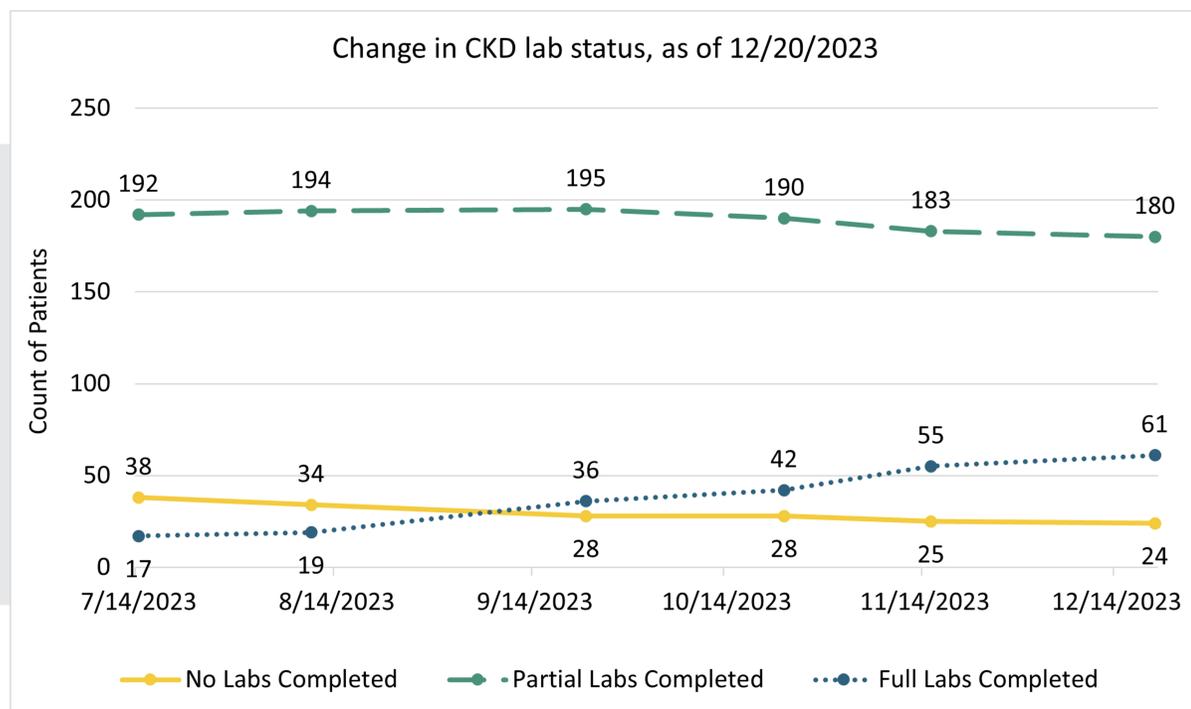


Increase the number of patients with hypertension who have been fully screened for CKD with an eGFR and UACR by 50% by July 2024



Of the patients with hypertension who have been fully screened for CKD with an eGFR and UACR, 100% will have an evaluation of the lab results documented in the EHR.

To support the quality improvement work, the QIN-QIO created a bidirectional IT portal for the clinic to enter their patient data (DUAs and BAAs were executed). Each month, the clinic enters patient data, including values for estimated glomerular filtration rate (eGFR) and urine albumin creatinine ratio (UACR). The QIN-QIO supports the clinic in reviewing the data and designing iterative improvement plans through the Plan-Do-Study-Act (PDSA) cycles. Examples of the PDSA cycles that the QIN-QIO supported include collecting urine samples from patients in the clinic (August 2023), upgrading the EMR to a supported version (September 2023), and working with the lab to develop a kidney profile test with eGFR and UACR viewable in one location that the clinic can routinely order (December 2023).



Recommended Intervention Decisions for Patients with Complete Labs for CKD



This heat map is included in the reports shared with Keystone and is modeled after the KDIGO heat map. It indicates how many patients fall into each recommended intervention decision category for patients with complete labs for CKD (both eGFR and UACR). The heat map stratifies patients by CKD diagnosis status (yes/no) so that the clinic staff can quickly determine if there are patients who may need to be diagnosed with CKD. The KDIGO heat map categorization can also direct clinicians on whether they should continue monitoring patients for CKD or refer them to a specialist.

Results

In July 2023, 6.9% of patients with HTN at Keystone had received full CKD labs (defined as eGFR and UACR). By December 2023, the clinic tripled their rate and has now ordered full CKD labs for 23% of all patients with HTN. This has resulted in 12 new CKD diagnoses. Keystone receives monthly reports that allow them to monitor progress as it relates to PDSA cycles. For example, in August 2023, their PDSA cycle resulted in an increase in patients with full labs from 19 to 36 and continues to climb. Reports also include information about UACR and eGFR categorization and recommended intervention decisions based on the KDIGO heat map pictured above. ▲

Questions about this project? Contact Kate Drummond at kdrummond@comagine.org.