

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

Reporting Form Instructions

Dates Reports are Due

DPH systems submit this report to the State twice a year:

DY 6 (6-month)	March 2, 2011
DY 6 (year-end)	May 15, 2011
DY 7 (6-month)	March 31, 2012
DY 7 (year-end)	September 30, 2012
DY 8 (6-month)	March 31, 2013
DY 8 (year-end)	September 30, 2013
DY 9 (6-month)	March 31, 2014
DY 9 (year-end)	September 30, 2014
DY 10 (6-month)	March 31, 2015
DY 10 (year-end)	September 30, 2015

Use of This Reporting Form

All DPH systems must use this Reporting Form template for reports starting May 15, 2011. For the year-end report, DPH systems will include the year-end narrative, the year-end report, and reattach the previously submitted 6-month report. The State reserves its right to modify the Reporting Form as experience is gained with its use. The State is looking for DPHs to include as much detail as possible in their narrative responses throughout the Reporting Form. Given the timeframe the State has to review and make payment, the State will exercise its right to further review the submitted Reporting Forms even after payment is made and, if necessary, recoup payment if it is determined on further review that a milestone was not met.

DPH systems should follow the instructions at the top of each tab for completing the form. DPH systems must complete information for items marked "*" for every project and every milestone included in the DPH's plan for that DY. Regardless of whether there is any progress made on a particular milestone, DPH systems must include ALL of the milestones included in their plans for that DY in the Reporting Form and report progress or no progress so that the form appropriately calculates the total denominator of the achievement values for purposes of accurate payment. DPH systems should not include any milestones from any other DYs other than the DY for which the report is due.

For milestones that can receive partial payment (e.g., the milestone is "achieve 90% compliance with the bundle"), please complete the numerator and denominator information for that milestone, and include the targeted achievement under "DY Target" for calculation of a 0, 0.25, 0.5, 0.75, or 1 achievement value. For an "all-or-nothing" milestones (e.g., the milestone is "join a sepsis collaborative"), please use the "yes/no" drop-down menu and under "DY Target" enter "yes". For some milestones that are "yes/no," but are also the reporting of data (e.g., the milestone is "report baseline data"), it may make sense to use the "yes/no" drop-down menu, under "DY Target" enter "yes", and include the actual data in the numerator and denominator for reporting purposes only (the payment will be based on selecting "yes" or "no").

For each applicable milestone, in addition to providing an in-depth description of how the milestone was achieved, please also provide an in-depth description of why a milestone was not achieved or only partially achieved, for the purposes of understanding systemic issues/patterns. If DPH systems are reporting at the 6-month mark and a milestone is partially met or not achieved because it will be more fully achieved by the year-end of the DY, the DPH system may note that it is on track to meet the milestone within the DY. As stated above, the State is looking for DPHs to include as much detail as possible in their narrative responses throughout the Reporting Form.

For the DY's 6-month (or first) semi-annual reporting period, the completion of certain milestones may warrant full payment, while others may be eligible for only up to 50% payment. Given that the Reporting Form does not have the ability to determine this, DPH systems must apply the appropriate calculation to the applicable milestones' achievement value(s). For example, if a milestone is "reporting of data only" (e.g., Category 3) and requires 12 months of data in order to receive payment but the DPH system has only 6 months of data available, they would be eligible for 50% completion (i.e., the DPH system would multiply the 'achievement value' by .5) by the semi-annual report deadline.

Payment amounts are in Total Computable (i.e., federal incentive and non-federal share provided by DPHs). Indicate all payment amounts as a whole number (i.e., do not round, do not show in millions with decimals). For the 6-month report (first semi-annual report of the DY), DPHs would not have received any prior funding for the DY and therefore should enter "0" for all of the DPH's projects under: "Incentive Funding Already Received in DY."

This reporting form is counting all of those milestones that are **required** for all DPHs in Categories 3-4 in DY7 currently. The reporting form will need to be revised accordingly for future DYs to also automatically count required milestones for those DYs.

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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

* DPH SYSTEM:	Kern Medical Center
* REPORTING YEAR:	DY 7
* DATE OF SUBMISSION:	3/31/2012

Total Payment Amount

This table sums the eligible incentive funding amounts. Please see the following pages for the specifics.

* Instructions for DPH systems: Please input the DPH System Name, Reporting DY & Date. Everything else on this tab will automatically populate.

Category 1 Projects - Incentive Funding Amounts	
Expand Primary Care Capacity	\$ 2,143,750.00
Increase Training of Primary Care Workforce	\$ -
Implement and Utilize Disease Management Registry Functionality	\$ -
Enhance Interpretation Services and Culturally Competent Care	\$ 2,572,500.00
Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities	\$ -
Enhance Urgent Medical Advice	\$ 4,287,500.00
Introduce Telemedicine	\$ -
Enhance Coding and Documentation for Quality Data	\$ -
Develop Risk Stratification Capabilities/Functionalities	\$ -
Expand Capacity to Provide Specialty Care Access in the Primary Care Setting	\$ -
Expand Specialty Care Capacity	\$ 2,286,666.67
Enhance Performance Improvement and Reporting Capacity	\$ -
TOTAL CATEGORY 1 INCENTIVE PAYMENT:	\$ 11,290,416.67
Category 2 Projects	
Expand Medical Homes	\$ 2,418,721.95
Expand Chronic Care Management Models	\$ -
Redesign Primary Care	\$ 2,956,215.72
Redesign to Improve Patient Experience	\$ -
Redesign for Cost Containment	\$ -
Integrate Physical and Behavioral Health Care	\$ 3,224,962.60
Increase Specialty Care Access/Redesign Referral Process	\$ -
Establish/Expand a Patient Care Navigation Program	\$ 3,628,082.93
Apply Process Improvement Methodology to Improve Quality/Efficiency	\$ -
Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation	\$ -
Use Palliative Care Programs	\$ -
Conduct Medication Management	\$ -
Implement/Expand Care Transitions Programs	\$ -
Implement Real-Time Hospital-Acquired Infections (HAIs) System	\$ -
TOTAL CATEGORY 2 INCENTIVE PAYMENT:	\$ 12,227,983.19
Category 3 Domains	
Patient/Care Giver Experience (required)	\$ 1,206,562.50
Care Coordination (required)	\$ 1,206,562.50
Preventive Health (required)	\$ 1,206,562.50
At-Risk Populations (required)	\$ 1,206,562.50
TOTAL CATEGORY 3 INCENTIVE PAYMENT:	\$ 4,826,250.00
Category 4 Interventions	
Severe Sepsis Detection and Management (required)	\$ 1,260,416.67
Central Line Associated Blood Stream Infection Prevention (required)	\$ 1,260,416.67
Surgical Site Infection Prevention	\$ -
Hospital-Acquired Pressure Ulcer Prevention	\$ 1,134,375.00
Stroke Management	\$ -
Venous Thromboembolism (VTE) Prevention and Treatment	\$ 1,279,322.92
Falls with Injury Prevention	\$ -
TOTAL CATEGORY 4 INCENTIVE PAYMENT:	\$ 4,934,531.25
TOTAL INCENTIVE PAYMENT	\$ 33,279,181.11

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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: Kern Medical Center

REPORTING YEAR: DY 7

DATE OF SUBMISSION: 3/31/2012

Year-End Narrative

This narrative summarizes the DSRIP activities performed in the reporting demonstration year.

* Instructions for DPH systems: Please complete the narrative for year-end reports. The narrative must include a description of progress made, lessons learned, challenges faced, other pertinent findings and participation in shared learning. The State is looking for as much detail as possible.

Summary of Demonstration Year Activities

Summary of DPH System's Participation in Shared Learning

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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

Category 1 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.

* Instructions for DPH systems: Do not complete, this tab will automatically populate.

- The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
- The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75, 0.5, 0.25 or 0.
- The red boxes indicate Total Sums.

Category 1 Projects

Expand Primary Care Capacity

Process Milestone:	Implement a nurse triage software system to assist nurses in determining the acuity of patients	YES
Achievement Value		1.00
Process Milestone:	Hire and train at least 2 additional primary care nurses	-
Achievement Value		1.00
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	Provide 20% of patients that request urgent appointments, an appointment in the primary care clinic (instead of having to go to the ED or an urgent care clinic) within 3 calendar days of request.	0.31
Achievement Value		0.50
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		\$ 2,572,500.00
Total Sum of Achievement Values:		2.50
Total Number of Milestones:		3.00
Achievement Value Percentage:		83%
Eligible Incentive Funding Amount:		\$ 2,143,750.00
Incentive Funding Already Received in DY:		\$ -
Incentive Payment Amount:		\$ 2,143,750.00

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Category 1 Summary Page

Increase Training of Primary Care Workforce

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

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Category 1 Summary Page

Implement and Utilize Disease Management Registry Functionality

Process Milestone:	Expand registry report services to provide on-demand, operational, and historical capabilities, inclusive of reports to care providers, managers, and executives.	No
<i>Achievement Value</i>		-
Process Milestone:	Conduct staff training for at least 10 staff on populating and using the registry.	No
<i>Achievement Value</i>		-
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 2,572,500.00
Total Sum of Achievement Values:		-
Total Number of Milestones:		2.00
Achievement Value Percentage:		0%
Eligible Incentive Funding Amount:		\$ -
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ -

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Category 1 Summary Page

Enhance Interpretation Services and Culturally Competent Care

Process Milestone:	Train 50% of direct patient care staff and/or providers in inpatient area to appropriately utilize health care interpreters (via video, phone, or in person).	0.83
<i>Achievement Value</i>		1.00
Process Milestone:	Develop and implement a training program for 10 "champions" to improve cultural competency.	0.20
<i>Achievement Value</i>		-
Process Milestone:	Develop a plan to expand the interpreter technology to additional patient care areas within the hospital and its outpatient clinics	Yes
<i>Achievement Value</i>		1.00
Process Milestone:	Improve language access through a 5% increase from baseline in qualified interpreter encounters per month.	26.16
<i>Achievement Value</i>		1.00
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 3,430,000.00
Total Sum of Achievement Values:		3.00
Total Number of Milestones:		4.00
Achievement Value Percentage:		75%
Eligible Incentive Funding Amount:		\$ 2,572,500.00
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 2,572,500.00

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Category 1 Summary Page

Collect Accurate Race, Ethnicity, and Language (REAL) Data to Reduce Disparities

Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	NA
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		[]
Eligible Incentive Funding Amount:		[]
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		[]

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Category 1 Summary Page

Enhance Urgent Medical Advice

Process Milestone:	Inform and educate an additional 5,000 (10,000 total) patients on the nurse advice line.	Yes
<i>Achievement Value</i>		1.00
Process Milestone:	Develop and distribute 5,000 patient-focused educational newsletters with proactive health information and reminders based on nurse advice line data/generated report identifying common areas addressed by the nurse advice line and topics searched for in the Health Information Library.	Yes
<i>Achievement Value</i>		1.00
Process Milestone:	-	-
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	Increase in the number of patients that accessed the nurse advice line by 10% over baseline established in Year 1.	0.50
<i>Achievement Value</i>		0.50
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 5,145,000.00
Total Sum of Achievement Values:		2.50
Total Number of Milestones:		3.00
Achievement Value Percentage:		83%
Eligible Incentive Funding Amount:		\$ 4,287,500.00
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 4,287,500.00

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Category 1 Summary Page

Introduce Telemedicine

Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		[]
Eligible Incentive Funding Amount:		[]
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		[]

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Category 1 Summary Page

Enhance Coding and Documentation for Quality Data

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

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Category 1 Summary Page

Develop Risk Stratification Capabilities/Functionalities

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

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Category 1 Summary Page

Expand Capacity to Provide Specialty Care Access in the Primary Care Setting

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

DSRIP Semi-Annual Reporting Form

Category 1 Summary Page Expand Specialty Care Capacity

Process Milestone:	Conduct a specialty care gap analysis based on community need by assessing specialty clinic supply and demand, capacity and productivity.	0.50
<i>Achievement Value</i>		0.50
Process Milestone:	Establish 3 specialty care guidelines for the high impact/most impacted medical specialties identified in the gap analysis.	0.67
<i>Achievement Value</i>		0.50
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	Based on results of gap analysis, increase the number of specialist providers and/or clinic hours available for at least 2 high impact/most impacted medical specialties identified in the gap analysis.	Yes
<i>Achievement Value</i>		1.00
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 3,430,000.00
Total Sum of Achievement Values:		2.00
Total Number of Milestones:		3.00
Achievement Value Percentage:		67%
Eligible Incentive Funding Amount:		\$ 2,286,666.67
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 2,286,666.67

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Category 1 Summary Page

Enhance Performance Improvement and Reporting Capacity

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: Kern Medical Center

REPORTING YEAR: DY 7

DATE OF SUBMISSION: 3/31/2012

Category 2 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.

* Instructions for DPH systems: Do not complete, this tab will automatically populate.

- The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
- The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75, 0.5, 0.25 or 0.
- The red boxes indicate Total Sums.

Category 2 Projects		
Expand Medical Homes		
Process Milestone:	Put in place policies and systems to enhance patient access to the medical home	Yes
<i>Achievement Value</i>		1.00
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	Assign at least 1500 of eligible patients (where eligible is defined as eligible for Kern County's LIHP program) to medical homes.	0.80
<i>Achievement Value</i>		0.75
Improvement Milestone:	At least 40% of new patients assigned to medical homes will be contacted for their first patient visit within 120 days.	0.80
<i>Achievement Value</i>		0.50
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 3,224,962.60
Total Sum of Achievement Values:		2.25
Total Number of Milestones:		3.00
Achievement Value Percentage:		75%
Eligible Incentive Funding Amount:		\$ 2,418,721.95
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 2,418,721.95

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Expand Chronic Care Management Models

Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
DY Total Computable Incentive Amount:		<input type="text" value="\$ -"/>
Total Sum of Achievement Values:		<input type="text" value="-"/>
Total Number of Milestones:		<input type="text" value="-"/>
Achievement Value Percentage:		<input type="text"/>
Eligible Incentive Funding Amount:		<input type="text"/>
Incentive Funding Already Received in DY:		<input type="text" value="\$ -"/>
<u>Incentive Payment Amount:</u>		<input type="text"/>

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Redesign Primary Care

Process Milestone:	Implement patient visit redesign in primary care clinics	0.75
<i>Achievement Value</i>		0.75
Process Milestone:	Implement the patient-centered scheduling model in primary care clinics	1.00
<i>Achievement Value</i>		1.00
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	Implement practice management system	Yes
<i>Achievement Value</i>		1.00
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 3,224,962.60
Total Sum of Achievement Values:		2.75
Total Number of Milestones:		3.00
Achievement Value Percentage:		92%
Eligible Incentive Funding Amount:		\$ 2,956,215.72
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 2,956,215.72

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Redesign to Improve Patient Experience

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Redesign for Cost Containment

Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
DY Total Computable Incentive Amount:		<input type="text" value="\$ -"/>
Total Sum of Achievement Values:		<input type="text" value="-"/>
Total Number of Milestones:		<input type="text" value="-"/>
Achievement Value Percentage:		<input type="text"/>
Eligible Incentive Funding Amount:		<input type="text"/>
Incentive Funding Already Received in DY:		<input type="text" value="\$ -"/>
<u>Incentive Payment Amount:</u>		<input type="text"/>

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Integrate Physical and Behavioral Health Care

Process Milestone:	Train at least 20 additional (35 total) primary care clinicians on primary care management of behavioral health conditions	No
Achievement Value		-
Process Milestone:	Co-locate behavioral health and primary care, as measured by at least 2 behavioral health providers in primary care clinics.	Yes
Achievement Value		1.00
Process Milestone:	Development of a tracking mechanism of referrals from primary care providers to on-site behavioral health professionals.	Yes
Achievement Value		1.00
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		\$ 4,837,443.90
Total Sum of Achievement Values:		2.00
Total Number of Milestones:		3.00
Achievement Value Percentage:		67%
Eligible Incentive Funding Amount:		\$ 3,224,962.60
Incentive Funding Already Received in DY:		\$ -
Incentive Payment Amount:		\$ 3,224,962.60

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Increase Specialty Care Access/Redesign Referral Process

Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Process Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		[]
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		[]
Eligible Incentive Funding Amount:		[]
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		[]

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Establish/Expand a Patient Care Navigation Program

Process Milestone:	Increase patient engagement, by completing 5 patient engagement initiatives.	0.60
Achievement Value		0.50
Process Milestone:	Expand program to include ED Navigator, who educates patients on importance of primary care; connects patients to a new Primary Care Clinic and/or assists patient in getting following appointment with established PCP.	Yes
Achievement Value		1.00
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Process Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
Improvement Milestone:	-	N/A
Achievement Value		
DY Total Computable Incentive Amount:		\$ 4,837,443.90
Total Sum of Achievement Values:		1.50
Total Number of Milestones:		2.00
Achievement Value Percentage:		75%
Eligible Incentive Funding Amount:		\$ 3,628,082.93
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 3,628,082.93

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Apply Process Improvement Methodology to Improve Quality/Efficiency

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Improve Patient Flow in the Emergency Department/Rapid Medical Evaluation

Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
DY Total Computable Incentive Amount:		<input type="text" value="\$ -"/>
Total Sum of Achievement Values:		<input type="text" value="-"/>
Total Number of Milestones:		<input type="text" value="-"/>
Achievement Value Percentage:		<input type="text"/>
Eligible Incentive Funding Amount:		<input type="text"/>
Incentive Funding Already Received in DY:		<input type="text" value="\$ -"/>
<u>Incentive Payment Amount:</u>		<input type="text"/>

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Use Palliative Care Programs

Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
DY Total Computable Incentive Amount:		<input type="text" value="\$ -"/>
Total Sum of Achievement Values:		<input type="text" value="-"/>
Total Number of Milestones:		<input type="text" value="-"/>
Achievement Value Percentage:		<input type="text"/>
Eligible Incentive Funding Amount:		<input type="text"/>
Incentive Funding Already Received in DY:		<input type="text" value="\$ -"/>
<u>Incentive Payment Amount:</u>		<input type="text"/>

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Conduct Medication Management

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Implement/Expand Care Transitions Programs

Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Process Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
Improvement Milestone:	-	<input type="text" value="N/A"/>
<i>Achievement Value</i>		<input type="text"/>
DY Total Computable Incentive Amount:		<input type="text" value="\$ -"/>
Total Sum of Achievement Values:		<input type="text" value="-"/>
Total Number of Milestones:		<input type="text" value="-"/>
Achievement Value Percentage:		<input type="text"/>
Eligible Incentive Funding Amount:		<input type="text"/>
Incentive Funding Already Received in DY:		<input type="text" value="\$ -"/>
<u>Incentive Payment Amount:</u>		<input type="text"/>

DSRIP Semi-Annual Reporting Form

Category 2 Summary Page

Implement Real-Time Hospital-Acquired Infections (HAIs) System

Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Process Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
Improvement Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

Category 3 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.

* Instructions for DPH systems: Do not complete, this tab will automatically populate.

- The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
- The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75, 0.5, 0.25 or 0.
- The red boxes indicate Total Sums.

Category 3 Domains

Patient/Care Giver Experience (required)

Undertake the necessary planning, redesign, translation, training and contract negotiations in order to implement CG-CAHPS in DY8 (DY7 only)

Yes

Achievement Value

0.50

Report results of CG CAHPS questions for "Getting Timely Appointments, Care, and Information" theme to the State (DY8-10)

N/A

Numerator: Number of patients in population expiring during current month hospitalization with sepsis, severe sepsis or septic shock and/or an infection and organ dysfunction.

Denominator: Number of patients identified in the population that month with sepsis, severe sepsis or septic shock and/or an infection and organ dysfunction.

Achievement Value

Report results of CG CAHPS questions for "How Well Doctors Communicate With Patients" theme to the State (DY8-10)

N/A

Achievement Value

Report results of CG CAHPS questions for "Helpful, Courteous, and Respectful Office Staff" theme to the State (DY8-10)

N/A

Achievement Value

Report results of CG CAHPS questions for "Patients' Rating of the Doctor" theme to the State (DY8-10)

N/A

Achievement Value

Report results of CG CAHPS questions for "Shared Decisionmaking" theme to the State (DY8-10)

N/A

Achievement Value

DY Total Computable Incentive Amount:

\$ 2,413,125.00

Total Sum of Achievement Values:

0.50

Total Number of Milestones:

1.00

Achievement Value Percentage:

50%

Eligible Incentive Funding Amount:

\$ 1,206,562.50

Incentive Funding Already Received in DY:

\$ -

Incentive Payment Amount:

\$ 1,206,562.50

DSRIP Semi-Annual Reporting Form

Category 3 Summary Page Care Coordination (required)

Report results of the Diabetes, short-term complications measure to the State (DY7-10)	<input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="0.50"/>
Report results of the Uncontrolled Diabetes measure to the State (DY7-10)	<input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="0.50"/>
Report results of the Congestive Heart Failure measure to the State (DY8-10)	<input type="text" value="N/A"/>
<i>Achievement Value</i>	<input type="text" value=""/>
Report results of the Chronic Obstructive Pulmonary Disease measure to the State (DY8-10)	<input type="text" value="N/A"/>
<i>Achievement Value</i>	<input type="text" value=""/>
DY Total Computable Incentive Amount:	<input style="border: 2px solid red;" type="text" value="\$ 2,413,125.00"/>
Total Sum of Achievement Values:	<input style="border: 2px solid red;" type="text" value="1.00"/>
Total Number of Milestones:	<input style="border: 2px solid red;" type="text" value="2.00"/>
Achievement Value Percentage:	<input style="border: 2px solid red;" type="text" value="50%"/>
Eligible Incentive Funding Amount:	<input style="border: 2px solid red;" type="text" value="\$ 1,206,562.50"/>
Incentive Funding Already Received in DY:	<input style="border: 2px solid red;" type="text" value="\$ -"/>
<u>Incentive Payment Amount:</u>	<input style="border: 2px solid red; background-color: #f08080;" type="text" value="\$ 1,206,562.50"/>

Preventive Health (required)

Report results of the Mammography Screening for Breast Cancer measure to the State (DY7-10)	<input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="0.50"/>
Reports results of the Influenza Immunization measure to the State (DY7-10)	<input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="0.50"/>
Report results of the Child Weight Screening measure to the State (DY8-10)	<input type="text" value="N/A"/>
<i>Achievement Value</i>	<input type="text" value=""/>
Report results of the Pediatrics Body Mass Index (BMI) measure to the State (DY8-10)	<input type="text" value="N/A"/>
<i>Achievement Value</i>	<input type="text" value=""/>
Report results of the Tobacco Cessation measure to the State (DY8-10)	<input type="text" value="N/A"/>
<i>Achievement Value</i>	<input type="text" value=""/>
DY Total Computable Incentive Amount:	<input style="border: 2px solid red;" type="text" value="\$ 2,413,125.00"/>
Total Sum of Achievement Values:	<input style="border: 2px solid red;" type="text" value="1.00"/>
Total Number of Milestones:	<input style="border: 2px solid red;" type="text" value="2.00"/>
Achievement Value Percentage:	<input style="border: 2px solid red;" type="text" value="50%"/>
Eligible Incentive Funding Amount:	<input style="border: 2px solid red;" type="text" value="\$ 1,206,562.50"/>
Incentive Funding Already Received in DY:	<input style="border: 2px solid red;" type="text" value="\$ -"/>
<u>Incentive Payment Amount:</u>	<input style="border: 2px solid red; background-color: #f08080;" type="text" value="\$ 1,206,562.50"/>

DSRIP Semi-Annual Reporting Form

Category 3 Summary Page

At-Risk Populations (required)

Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State (DY7-10)	Yes
<i>Achievement Value</i>	0.50
Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10)	Yes
<i>Achievement Value</i>	0.50
Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State (DY8-10)	N/A
<i>Achievement Value</i>	
Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State (DY8-10)	N/A
<i>Achievement Value</i>	
Report results of the Pediatrics Asthma Care measure to the State (DY8-10)	N/A
<i>Achievement Value</i>	
Report results of the Optimal Diabetes Care Composite to the State (DY8-10)	N/A
<i>Achievement Value</i>	
Report results of the Diabetes Composite to the State (DY8-10)	N/A
<i>Achievement Value</i>	
DY Total Computable Incentive Amount:	\$ 2,413,125.00
Total Sum of Achievement Values:	1.00
Total Number of Milestones:	2.00
Achievement Value Percentage:	50%
Eligible Incentive Funding Amount:	\$ 1,206,562.50
Incentive Funding Already Received in DY:	\$ -
<u>Incentive Payment Amount:</u>	\$ 1,206,562.50

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

Category 4 Summary Page

This table is the summary of data reported for the DPH system. Please see the following pages for the specifics.

* *Instructions for DPH systems: Do not complete, this tab will automatically populate.*

- The black boxes indicate Milestone achievements, either "yes/no", or the actual achievement # or %.
- The blue boxes show progress made toward the Milestone ("Achievement Value") of 1.0, 0.75, 0.5, 0.25 or 0.
- The red boxes indicate Total Sums.

Category 4 Interventions

Severe Sepsis Detection and Management (required)

Compliance with Sepsis Resuscitation bundle (%)	0.67
<i>Achievement Value</i>	0.50
Sepsis Mortality (%)	N/A

Numerator: Number of patients in population expiring during current month hospitalization with sepsis, severe sepsis or septic shock and/or an infection and organ dysfunction.

Denominator: Number of patients identified in the population that month with sepsis, severe sepsis or septic shock and/or an infection and organ dysfunction.

<i>Achievement Value</i>	
Optional Milestone: <u>Implement the Sepsis Resuscitation Bundle</u>	Yes
<i>Achievement Value</i>	1.00
Optional Milestone: <u>Report at least 6 months of data collection on Sepsis Resuscitation Bundle to SNI for purposes of establishing the baseline and setting benchmarks</u>	Yes
<i>Achievement Value</i>	1.00
Optional Milestone: _____ -	N/A
<i>Achievement Value</i>	
Optional Milestone: _____ -	N/A
<i>Achievement Value</i>	
Optional Milestone: _____ -	N/A
<i>Achievement Value</i>	
Optional Milestone: _____ -	N/A
<i>Achievement Value</i>	

DY Total Computable Incentive Amount:	\$ 1,512,500.00
Total Sum of Achievement Values:	2.50
Total Number of Milestones:	3.00
Achievement Value Percentage:	83%
Eligible Incentive Funding Amount:	\$ 1,260,416.67
Incentive Funding Already Received in DY:	\$ -
<u>Incentive Payment Amount:</u>	\$ 1,260,416.67

DSRIP Semi-Annual Reporting Form

Category 4 Summary Page

Central Line Associated Blood Stream Infection Prevention (required)

Compliance with Central Line Insertion Practices (CLIP) (%)		0.90
<i>Achievement Value</i>		0.50
Central Line Bloodstream Infection (Rate per 1,000 patient days)		N/A
<i>Achievement Value</i>		
Optional Milestone:	<u>Implement the Central Line Insertion Practices (CLIP)</u>	Yes
<i>Achievement Value</i>		1.00
Optional Milestone:	<u>Report at least 6 months of data collection on CLIP to SNI for purposes of establishing the baseline and setting benchmarks.</u>	Yes
<i>Achievement Value</i>		1.00
Optional Milestone:	<u>-</u>	N/A
<i>Achievement Value</i>		
Optional Milestone:	<u>-</u>	N/A
<i>Achievement Value</i>		
Optional Milestone:	<u>-</u>	N/A
<i>Achievement Value</i>		
Optional Milestone:	<u>-</u>	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 1,512,500.00
Total Sum of Achievement Values:		2.50
Total Number of Milestones:		3.00
Achievement Value Percentage:		83%
Eligible Incentive Funding Amount:		\$ 1,260,416.67
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 1,260,416.67

DSRIP Semi-Annual Reporting Form

Category 4 Summary Page

Surgical Site Infection Prevention

Rate of surgical site infection for Class 1 and 2 wounds (%)

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

DY Total Computable Incentive Amount:

\$ -

Total Sum of Achievement Values:

-

Total Number of Milestones:

-

Achievement Value Percentage:

Eligible Incentive Funding Amount:

Incentive Funding Already Received in DY:

\$ -

Incentive Payment Amount:

Hospital-Acquired Pressure Ulcer Prevention

Prevalence of Stage II, III, IV or unstagable pressure ulcers (%)

0.05

Achievement Value

0.50

Optional Milestone: Share data, promising practices, and findings with SNI to foster shared learning and benchmarking across the California public hospitals.

Yes

Achievement Value

1.00

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

Optional Milestone: _____ -

N/A

Achievement Value

DY Total Computable Incentive Amount:

\$ 1,512,500.00

Total Sum of Achievement Values:

1.50

Total Number of Milestones:

2.00

Achievement Value Percentage:

75%

Eligible Incentive Funding Amount:

\$ 1,134,375.00

Incentive Funding Already Received in DY:

\$ -

Incentive Payment Amount:

\$ 1,134,375.00

DSRIP Semi-Annual Reporting Form

Category 4 Summary Page

Stroke Management

Discharged on Antithrombotic Therapy		N/A
<i>Achievement Value</i>		
Anticoagulation Therapy for Atrial Fibrillation/Flutter		N/A
<i>Achievement Value</i>		
Thrombolytic Therapy		N/A
<i>Achievement Value</i>		
Antithrombotic Therapy by End of Hospital Day 2		N/A
<i>Achievement Value</i>		
Discharged on Statin Medication		N/A
<i>Achievement Value</i>		
Stroke Education		N/A
<i>Achievement Value</i>		
Assessed for Rehabilitation		N/A
<i>Achievement Value</i>		
Stroke mortality rate		N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

DSRIP Semi-Annual Reporting Form

Category 4 Summary Page

Venous Thromboembolism (VTE) Prevention and Treatment

VTE Prophylaxis (%)		N/A
<i>Achievement Value</i>		
Intensive care unit VTE prophylaxis (%)		N/A
<i>Achievement Value</i>		
VTE patients with anticoagulation overlap therapy (%)		N/A
<i>Achievement Value</i>		
VTE patients receiving unfractionated heparin with dosages/platelet count monitoring (%)		N/A
<i>Achievement Value</i>		
VTE discharge instructions (%)		N/A
<i>Achievement Value</i>		
Incidence of potentially preventable VTE (%)		N/A
<i>Achievement Value</i>		
Optional Milestone:	<u>Implement the VTE prevention program</u>	Yes
<i>Achievement Value</i>		1.00
Optional Milestone:	<u>Report at least 6 months of data collection on VTE process measures to SNI for purposes of establishing the baseline and setting benchmarks.</u>	Yes
<i>Achievement Value</i>		1.00
Optional Milestone:	<u>Report the 5 VTE process measure data to the State.</u>	0.50
<i>Achievement Value</i>		0.50
Optional Milestone:	<u>-</u>	N/A
<i>Achievement Value</i>		
Optional Milestone:	<u>-</u>	N/A
<i>Achievement Value</i>		
Optional Milestone:	<u>-</u>	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ 1,535,187.50
Total Sum of Achievement Values:		2.50
Total Number of Milestones:		3.00
Achievement Value Percentage:		83%
Eligible Incentive Funding Amount:		\$ 1,279,322.92
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		\$ 1,279,322.92

DSRIP Semi-Annual Reporting Form

Category 4 Summary Page

Falls with Injury Prevention

Prevalence of patient falls with injuries (Rate per 1,000 patient days)		N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
Optional Milestone:	-	N/A
<i>Achievement Value</i>		
DY Total Computable Incentive Amount:		\$ -
Total Sum of Achievement Values:		-
Total Number of Milestones:		-
Achievement Value Percentage:		
Eligible Incentive Funding Amount:		
Incentive Funding Already Received in DY:		\$ -
<u>Incentive Payment Amount:</u>		

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 1: Expand Primary Care Capacity

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Expand Primary Care Capacity	
DY Total Computable Incentive Amount:	* <input type="text" value="\$ 2,572,500.00"/>
Incentive Funding Already Received in DY:	* <input type="text" value="\$ -"/>
Process Milestone: <u>Implement a nurse triage software system to assist nurses in determining the acuity of patients</u> <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="checkbox"/> YES
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text" value="YES"/>
<div style="border: 1px solid black; padding: 5px;"> Achievement of this milestone was based on the metric of signing the vendor contract. In July 2011, evaluated three different software vendors for the nurse triage system. Once selecting the vendor, we determined the scope of work and vendor requirements needed for the project. The vendor contract was signed in on November 15, 2011 between LVM Systems and the County. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text" value="YES"/>
<i>Achievement Value</i>	<input type="text" value="1.00"/>
Process Milestone: <u>Hire and train at least 2 additional primary care nurses</u> <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="checkbox"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text" value="Yes"/>
<div style="border: 1px solid black; padding: 5px;"> Two additional primary care nurses were hired specifically to support the expansion of the primary care clinics and assist with triaging patients needing urgent appointments. One nurse was hired in August 2011, while another was hired in October 2011. Since being hired, they have been trained on the electronic medical record, the workflows and nursing needs of pediatrics, medicine, family medicine, and OB/GYN clinics, and scheduling of appointments. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="1.00"/>

DSRIP Semi-Annual Reporting Form

Category 1: Expand Primary Care Capacity

<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div>

DSRIP Semi-Annual Reporting Form

Category 1: Expand Primary Care Capacity

Improvement Milestone:	Provide 20% of patients that request urgent appointments, an appointment in the primary care clinic (instead of having to go to the ED or an urgent care clinic) within 3 calendar days of request. <i>(insert milestone)</i>		
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)		*	3,572.00
Denominator (if absolute number, enter "1")		*	11,403.00
Achievement			0.31
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:		*	
<p>The numerator for this measure is the number of patients provided an urgent appointment within 3 days, and the denominator is the number of patients triaged as needing a primary care appointment within three days. The achievement value is 50% to reflect that the goal has been reached for six out of the 12 months of the DSRIP reporting year. Because we began collecting this measure prior to nurse triage software and protocols being in place, in the denominator, we had to include all patients who requested a same day appointment. We also only provided same day appointments, because our clerks were not nurses who could determine which patients could be seen in one day versus three days. For each day, scheduling clerks would fill out the number of patients who called asking for a same-day appointment for a primary care clinic, and the number of patients who were able to be scheduled. Each clinic supervisor tabulated the numerator and denominator in monthly stats logs. The results were compiled at the end of each month in a monthly dashboard. For each individual month, the results were also above 20% each month. In September, we had a nurse practitioner leave who saw primarily same day patients. During these months, methods to resolve the issue were discussed weekly, and included changing one 3rd year resident's schedule to see same-day appointments only on specific days. Later, the addition of another internal medicine provider, and another Physician's Assistant helped keep the number above goal value.</p>			
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone		*	20%
Achievement Value			50%

Improvement Milestone:	<hr/> <i>(insert milestone)</i>		
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)		*	
Denominator (if absolute number, enter "1")		*	
Achievement			N/A
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:		*	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone		*	
Achievement Value			

Improvement Milestone:	<hr/> <i>(insert milestone)</i>		
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)		*	
Denominator (if absolute number, enter "1")		*	
Achievement			N/A
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:		*	

DSRIP Semi-Annual Reporting Form

Category 1: Expand Primary Care Capacity

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	*
<i>Achievement Value</i>	

DSRIP Semi-Annual Reporting Form

Category 1: Expand Primary Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 1: Implement and Utilize Disease Management Registry Functionality

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Implement and Utilize Disease Management Registry Functionality	
DY Total Computable Incentive Amount:	* <input type="text" value="\$ 2,572,500.00"/>
Incentive Funding Already Received in DY:	* <input type="text" value="\$ -"/>
Process Milestone: Expand registry report services to provide on-demand, operational, and historical capabilities, inclusive of reports to care providers, managers, and executives.	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="No"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text" value="No"/>
<div style="border: 1px solid black; padding: 5px; min-height: 60px;"> In November 2011, the Board of Supervisors approved the purchase of a more robust registry than was in place at KMC which will enable KMC to have much expanded reporting capability. It will also enable data to be fed into the system automatically from our practice management and EMR systems, as opposed to being manually entered. This will improve the sustainability of the program. The documentation of a reporting plan is currently being drafted, and will be complete by the end of the reporting year for DY7. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="-"/>
Process Milestone: Conduct staff training for at least 10 staff on populating and using the registry.	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="No"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text" value="No"/>
<div style="border: 1px solid black; padding: 5px; min-height: 60px;"> Training for ten staff will take place during the implementation process for the new registry system, which will be complete by the end of the reporting year for DY7. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="-"/>

DSRIP Semi-Annual Reporting Form

Category 1: Implement and Utilize Disease Management Registry Functionality

<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>

DSRIP Semi-Annual Reporting Form

Category 1: Implement and Utilize Disease Management Registry Functionality

<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>

DSRIP Semi-Annual Reporting Form

Category 1: Implement and Utilize Disease Management Registry Functionality

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 1: Enhance Interpretation Services and Culturally Competent Care

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Enhance Interpretation Services and Culturally Competent Care	
DY Total Computable Incentive Amount:	* <input style="border: 1px solid yellow;" type="text" value="\$ 3,430,000.00"/>
Incentive Funding Already Received in DY:	* <input style="border: 1px solid yellow;" type="text" value="\$ -"/>
Process Milestone: Train 50% of direct patient care staff and/or providers in inpatient area to appropriately utilize health care interpreters (via video, phone, or in person).	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input style="border: 1px solid yellow;" type="text" value="562.00"/>
Denominator (if absolute number, enter "1")	* <input style="border: 1px solid yellow;" type="text" value="679.00"/>
Achievement	<input style="border: 1px solid black;" type="text" value="0.83"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input style="border: 1px solid yellow;" type="text"/>
<div style="border: 1px solid black; min-height: 40px; margin: 5px 0;"> HCIN team developed and completed "How to use Interpretative Services" education for both licensed RN/LN staff and Medical Staff faculty. As of December 2011 562/679 =82% have completed education. Education is ongoing. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input style="border: 1px solid yellow;" type="text" value="0.50"/>
<i>Achievement Value</i>	<input style="border: 1px solid blue;" type="text" value="1.00"/>
Process Milestone: Develop and implement a training program for 10 "champions" to improve cultural competency.	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input style="border: 1px solid yellow;" type="text" value="2.00"/>
Denominator (if absolute number, enter "1")	* <input style="border: 1px solid yellow;" type="text" value="10.00"/>
Achievement	<input style="border: 1px solid black;" type="text" value="0.20"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input style="border: 1px solid yellow;" type="text"/>
<div style="border: 1px solid black; min-height: 40px; margin: 5px 0;"> The Interpretative Service team selected the U.S. DHHS - Minority Health Service program for initial training of the 10 Cultural "Champions". Two "champions" have completed the certificate program. Team is actively recruiting staff to participate in " cultural competency champions" program. Completion of "champions" education is scheduled for April 2012. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input style="border: 1px solid yellow;" type="text" value="1.00"/>
<i>Achievement Value</i>	<input style="border: 1px solid blue;" type="text" value="-"/>

DSRIP Semi-Annual Reporting Form

Category 1: Enhance Interpretation Services and Culturally Competent Care

<p>Process Milestone: <u>Develop a plan to expand the interpreter technology to additional patient care areas within the hospital and its outpatient clinics</u> <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement <input style="width: 100px;" type="text" value="Yes"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text" value="Yes"/></p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>The Interpretive services team completed an inventory in DY6. After analysis, 26 video units, 29 polycom phones and 22 Panasonic phones will need to be purchased to increase technology to patient care areas within the hospital and outpatient clinics. This will allow KMC to reach an increase of more than 5% from baseline in DY8 and then 10% from baseline in DY9. In addition the IS department has completed the wireless requirements and has updated all available video units' software. Staff can immediately put the unit into use. This has increased interpretive services equipment access by 50% without any purchase of equipment.</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text" value="yes"/></p> <p style="text-align: right;"><i>Achievement Value</i> <input style="width: 100px;" type="text" value="1.00"/></p>	
<p>Process Milestone: <u>Improve language access through a 5% increase from baseline in qualified interpreter encounters per month.</u> <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text" value="1,935.00"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text" value="1,533.75"/></p> <p>Achievement <input style="width: 100px;" type="text" value="26.16"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>We account for the increase in use from baseline in DY6 to HCIN team development and completion of "How to use Interpretive Services" education for both licensed RN/LN staff and Medical Staff faculty. As of December 2011 562/679 =82% have completed education. Education is ongoing. In addition, organization went wireless with EMR which allowed the use of the wireless feature of video units. This has increased staff access to interpretative services by 50%.</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text" value="0.50"/></p> <p style="text-align: right;"><i>Achievement Value</i> <input style="width: 100px;" type="text" value="1.00"/></p>	
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement <input style="width: 100px;" type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 80px; margin: 5px 0;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p style="text-align: right;"><i>Achievement Value</i> <input style="width: 100px;" type="text"/></p>	

DSRIP Semi-Annual Reporting Form

Category 1: Enhance Interpretation Services and Culturally Competent Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 1: Enhance Interpretation Services and Culturally Competent Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

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DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 1: Enhance Urgent Medical Advice

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

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- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
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Enhance Urgent Medical Advice	
DY Total Computable Incentive Amount:	* <input type="text" value="\$ 5,145,000.00"/>
Incentive Funding Already Received in DY:	* <input type="text" value="\$ -"/>
Process Milestone: Inform and educate an additional 5,000 (10,000 total) patients on the nurse advice line. (insert milestone)	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input checked="" type="checkbox" value="Yes"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text" value="Yes"/>
<div style="border: 1px solid black; padding: 5px;"> <p>In August 2011, Kern Medical Center mailed a memo regarding the 24/7 Nurse Line and Health Information Library to 6868 patients. KMC also added this information to the welcome letter of the Low Income Health Program (LIHP) program members enrolled in Kern County. On average this information is mailed to 300-500 patients each month.</p> <p>The 24-hour Nurse Helpline Program utilizes Registered Nurse Counselors who assess callers' symptoms to assist them in determining the appropriate health care action to take. With the use of an extensive clinical database of health information and care guidelines, callers receive advice, education and counseling to meet a wide variety of health care concerns. Callers also have access to a Health information Library with prerecorded information on over 1,000 health related topics. Five hundred-fifty topics are now available in Spanish.</p> </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="1.00"/>
Process Milestone: Develop and distribute 5,000 patient-focused educational newsletters with proactive health information and reminders based on nurse advice line data/generated report identifying common areas addressed by the nurse advice line and topics searched for in the Health Information Library. (insert milestone)	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input checked="" type="checkbox" value="Yes"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text" value="Yes"/>
<div style="border: 1px solid black; padding: 5px;"> <p>KMC mailed Fall and Winter patient focused educational newsletters to over 6,000 patients each quarter. In August 2011, the newsletter focused on the following information:</p> <ul style="list-style-type: none"> • Flu Shots: When and where to get flu shots; the benefits of getting a flu shot and when someone should not get the vaccine • Check-up on your health: Focused on preventative tests like cholesterol, blood pressure, diabetes, colorectal cancer, breast cancer, cervical cancer and osteoporosis </div>	

DSRIP Semi-Annual Reporting Form

Category 1: Enhance Urgent Medical Advice

• Public Health Clinics: Emphasized that public health helps maintain the safety and health of the local community by providing health education, immunizations, family planning services, HIV counseling/screening, etc.

In November 2011, the newsletter focused on the following information:

- Preventing Pre-diabetes: Identified patient risk for pre-diabetes; tips to help treat and prevent diabetes
- Diabetic Eye Screenings: Listed potential eye problems with diabetes and how to protect your eyes
- 4 Steps to Holiday Health: 1) Eat well, 2) Move more, 3) Get your rest, and 4) Keep your spirits up
- Stress: Signs of too much stress and how to help alleviate stress

Next upcoming Newsletters are scheduled for February and May 2012.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

* Yes

Achievement Value

1.00

DSRIP Semi-Annual Reporting Form

Category 1: Enhance Urgent Medical Advice

<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement █</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p><i>Achievement Value</i> █</p>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement █ N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p><i>Achievement Value</i> █</p>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement █ N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p><i>Achievement Value</i> █</p>

DSRIP Semi-Annual Reporting Form

Category 1: Enhance Urgent Medical Advice

<p>Improvement Milestone: <u>Increase in the number of patients that accessed the nurse advice line by 10% over baseline established in Year 1.</u> <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text" value="6.00"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text" value="12.00"/></p> <p>Achievement <input style="width: 100px;" type="text" value="0.50"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>For this milestone, KMC must increase access over baseline by 10% over the entire DSRIP year. Current increase is 74%. In the early months of DSRIP, KMC noticed a large fluctuation in the month-to-month increase. Once the 24/7 Nurse Line memo was mailed to all members, KMC saw a direct increase to the number of calls we received. Additionally, now that the memo is sent to all new LIHP members, we have seen the increase stabilize and grow with each month.</p> <p>KMC monitors the following key results:</p> <ul style="list-style-type: none"> • Total # of calls • Total # of symptom based calls are broken down into the following categories <ul style="list-style-type: none"> o Were advised to call 911 now o Were advised to go to the emergency room o Were advised to see their physician within now, 4 hrs, 24 hrs, 72 hrs, 2 weeks o Was advised to call poison control o Were assisted by the receiving home care advice <p>KMC also looks at leading triage guidelines utilized, customer services, direct savings and demographic information of patients calling the nurse line. This information helps determine what topics we include in our Quarterly Patient Education Newsletter.</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text" value="1.00"/></p> <p><i>Achievement Value</i> <input style="width: 100px;" type="text" value="0.50"/></p>	
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement <input style="width: 100px;" type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p><i>Achievement Value</i> <input style="width: 100px;" type="text"/></p>	
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement <input style="width: 100px;" type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>	

DSRIP Semi-Annual Reporting Form

Category 1: Enhance Urgent Medical Advice

	*
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	
<i>Achievement Value</i>	

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Category 1: Enhance Urgent Medical Advice

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 1: Expand Specialty Care Capacity

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Expand Specialty Care Capacity	
DY Total Computable Incentive Amount:	* <input style="border: 1px solid yellow;" type="text" value="\$ 3,430,000.00"/>
Incentive Funding Already Received in DY:	* <input style="border: 1px solid yellow;" type="text" value="\$ -"/>
Process Milestone: Conduct a specialty care gap analysis based on community need by assessing specialty clinic supply and demand, capacity and productivity.	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input style="border: 1px solid yellow;" type="text" value="2.00"/>
Denominator (if absolute number, enter "1")	* <input style="border: 1px solid yellow;" type="text" value="4.00"/>
Achievement	<input style="border: 1px solid black;" type="text" value="0.50"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input style="border: 1px solid yellow;" type="text"/>
<div style="border: 1px solid black; padding: 5px;"> For the first half of the demonstration year, KMC drafted the scope of work for the gap analysis and vetted with appropriate stakeholders. Originally, we tried to go through a consultant for the analysis but there were multiple delays and issues so we will conduct the gap analysis in-house. The gap analysis will look at current KMC capacity, specialty clinic utilization, productivity and throughput, community need assessment and 2014 capacity outlook. The KMC capacity and specialty clinic productivity analysis is complete and the community needs assessment and 2014 health reform capacity outlook is underway. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input style="border: 1px solid yellow;" type="text" value="1.00"/>
<i>Achievement Value</i>	<input style="border: 1px solid blue;" type="text" value="0.50"/>
Process Milestone: Establish 3 specialty care guidelines for the high impact/most impacted medical specialties identified in the gap analysis.	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input style="border: 1px solid yellow;" type="text" value="2.00"/>
Denominator (if absolute number, enter "1")	* <input style="border: 1px solid yellow;" type="text" value="3.00"/>
Achievement	<input style="border: 1px solid black;" type="text" value="0.67"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input style="border: 1px solid yellow;" type="text"/>
<div style="border: 1px solid black; padding: 5px;"> Besides primary care, KMC currently operates several specialty clinics, which include medicine specialties, orthopedics, eye, surgery and surgery specialties, and OB-GYN clinics. Since KMC is the only county hospital in Kern County, it is the primary source of specialty care for the safety net population. Wait times for high-demand specialties such as endocrinology and neurology clinic are 6.5 and 5.5 months respectively. Referral guidelines have been shown to reduce unnecessary referrals to specialty clinics, reduce wait times for patients who do need to see a specialist, and increase patient satisfaction. </div>	

DSRIP Semi-Annual Reporting Form

Category 1: Expand Specialty Care Capacity

First, we developed a template for providers to use in creating their specialty care guidelines. Then we worked with the KMC Referral Workgroup to prioritize the specialty care guidelines from a KMC and community perspective. The goal of the KMC Referral Workgroup is to streamline the process for referring patients into specialty clinics from the community and KMC primary care clinics.

Consensus specialty care guidelines were created through collaboration between primary care providers and specialists to delineate different levels of care and referral processes for each specialty area. Guidelines outline which diagnostic procedures need to be ordered and completed before a specialty consult, as well as indicate if and when a patient needs to be referred to a specialist. This demonstration year, the following guidelines have been created and finalized: Orthopedics and Rheumatology guidelines. Next Steps: Cardiology.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

*

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 1: Expand Specialty Care Capacity

<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p>Achievement Value </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p>Achievement Value </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p>Achievement Value </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>

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Category 1: Expand Specialty Care Capacity

<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Based on results of gap analysis, increase the number of specialist providers and/or clinic hours available for at least 2 high impact/most impacted medical specialties identified in the gap analysis.</p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) _____</p> <p>Denominator (if absolute number, enter "1") _____</p> <p>Achievement Yes</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: Yes</p> <div style="border: 1px solid black; padding: 5px; min-height: 60px;"> <p>Due to long wait times for the KMC Cardiology and Endocrinology clinics, KMC has hired a Chief of Cardiology and Endocrinologist. Endocrinology had a 6.5 month wait time for new or routine patients, by hiring another Endocrinologist, all patients are now seen within 1-2 weeks of requesting a visit.</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone _____</p> <p><i>Achievement Value</i> 1.00</p>	<p>* <input style="width: 100%;" type="text"/></p> <p>* <input style="width: 100%;" type="text"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="Yes"/></p> <p>* <input style="width: 100%;" type="text" value="Yes"/></p> <p>* <input style="width: 100%;" type="text" value="Yes"/></p> <p>* <input style="width: 100%;" type="text" value="1.00"/></p>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) _____</p> <p>Denominator (if absolute number, enter "1") _____</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; padding: 5px; min-height: 60px;"> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone _____</p> <p><i>Achievement Value</i> *</p>	<p>* <input style="width: 100%;" type="text"/></p> <p>* <input style="width: 100%;" type="text"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="N/A"/></p> <p>* <input style="width: 100%;" type="text"/></p> <p>* <input style="width: 100%;" type="text"/></p> <p>* <input style="width: 100%;" type="text"/></p>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) _____</p> <p>Denominator (if absolute number, enter "1") _____</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; padding: 5px; min-height: 60px;"> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone _____</p> <p><i>Achievement Value</i> *</p>	<p>* <input style="width: 100%;" type="text"/></p> <p>* <input style="width: 100%;" type="text"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="N/A"/></p> <p>* <input style="width: 100%;" type="text"/></p> <p>* <input style="width: 100%;" type="text"/></p> <p>* <input style="width: 100%;" type="text"/></p>

DSRIP Semi-Annual Reporting Form

Category 1: Expand Specialty Care Capacity

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 2: Expand Medical Homes

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Expand Medical Homes	
DY Total Computable Incentive Amount:	* <input type="text" value="\$ 3,224,962.60"/>
Incentive Funding Already Received in DY:	* <input type="text" value="\$ -"/>
Process Milestone: Put in place policies and systems to enhance patient access to the medical home	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input checked="" type="checkbox" value="Yes"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text" value="Yes"/>
<div style="border: 1px solid black; padding: 5px;"> <p>We wrote, received approval for and implemented several policies and systems to improve patient access to medical home.</p> <p>1) We put in place systems for enhanced phone access by re-designing the patient appointment phone line. This allows calls for any clinic to go to the next available scheduler, instead of only being directed to one phone extension. In addition, we purchased reporting software that enables supervisors to monitor the phone lines in real-time. Every month, reports are prepared and shared with the staff that show the average time patients are on hold, the number of abandoned calls, and productivity per scheduler.</p> <p>2) We implemented a primary care dashboard that is presented every month to the department chairs and executive team on key efficiency and access measures for ongoing quality improvement.</p> <p>3) The following access policies were also approved:</p> <ul style="list-style-type: none"> a. Pre-visit calls and responsibilities b. Policy on providing aftercare instructions c. Policy on providing appointments d. Same day access and triage policy e. Medication refills policy </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text" value="Yes"/>
<i>Achievement Value</i>	<input type="text" value="1.00"/>
<hr/>	
Process Milestone:	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="checkbox" value="N/A"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>

DSRIP Semi-Annual Reporting Form

Category 2: Expand Medical Homes

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 2: Expand Medical Homes

<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>N/A</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>N/A</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p>N/A</p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p> <p><input style="width: 100%; height: 20px;" type="text"/></p>

DSRIP Semi-Annual Reporting Form

Category 2: Expand Medical Homes

<p>Improvement Milestone: Assign at least 1500 of eligible patients (where eligible is defined as eligible for Kern County's LIHP program) to medical homes. <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>KMC's goal is to establish a "home base" for patients, where patients have a health care team that is tailored to the patient's health care needs, coordinates the patient's care, and proactively provides preventive, primary, routine and chronic care, so that patients may see their health improve, rely less on costly ED visits, incur fewer avoidable hospital stays, and report a greater patient experience of care. As of December 2011, KMC has assigned 1198 eligible patients (where eligible is defined as eligible for Kern County's LIHP program) to a medical home.</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i></p>	<p><input style="width: 100%;" type="text" value="1,198.00"/></p> <p><input style="width: 100%;" type="text" value="1,500.00"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="80%"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%;" type="text" value="100%"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="0.75"/></p>
<p>Improvement Milestone: At least 40% of new patients assigned to medical homes will be contacted for their first patient visit within 120 days. <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>A process was put in place for patients newly assigned to one of KMC's primary care clinics. The definition of "assigned" for this milestone were patients enrolled in the Kern Medical Center Health Plan, who were assigned to a medical home in one of KMC's clinics as of July 2011. During the first week of each month, a report would be run of all patients who were assigned the previous month, with their name, date of birth, phone number, address and clinic they were assigned to. Each clinic supervisor would assign their staff to either call or send reminder letters for each patient assigned and document the date the contacts were made.</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i></p>	<p><input style="width: 100%;" type="text" value="242.00"/></p> <p><input style="width: 100%;" type="text" value="302.00"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="0.80"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%;" type="text" value="0.40"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="50%"/></p>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i></p>	<p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text" value="N/A"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%;" type="text"/></p> <p><input style="width: 100%; background-color: #cccccc;" type="text"/></p>

DSRIP Semi-Annual Reporting Form

Category 2: Expand Medical Homes

Improvement Milestone: _____ <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="N/A"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>
<i>Achievement Value</i>	<input type="text"/>

Improvement Milestone: _____ <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="N/A"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>
<i>Achievement Value</i>	<input type="text"/>

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 2: Redesign Primary Care

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Redesign Primary Care	
DY Total Computable Incentive Amount:	* <input type="text" value="\$ 3,224,962.60"/>
Incentive Funding Already Received in DY:	* <input type="text" value="\$ -"/>
Process Milestone: <u>Implement patient visit redesign in primary care clinics</u> <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text" value="0.75"/>
Denominator (if absolute number, enter "1")	* <input type="text" value="1.00"/>
Achievement	<input type="text" value="0.75"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; padding: 5px;"> The metric is to implement the four components of redesign: (1) Establish method to collect and report cycle time at least monthly, (2) Compare cycle time to other potential measures of efficiency; (3) Map patient visits from beginning to end to determine how time in the clinic is spent, and to identify any bottlenecks in the visit process, and (4) Conduct a series of tests on the visit model, debrief thoroughly, and refine the model. In July, a cycle time policy was written and cycle time measuring was implemented in every clinic. A new reporting template for reporting clinic stats was also designed and rolled out, on which cycle time as well as productivity and no-show rates are measured monthly for each of the primary care clinics. All of these productivity metrics are reported and presented to the medical staff and clinic supervisors every month. The third step of the process is to shadow in the clinics. The project manager and clinic director shadowed ten patients through the clinics and mapped out bottlenecks in the flow. The implementation of improvements to the flow are already being implemented and included a new process for nursing attendants to record med lists and vitals prior to the patient getting in the room, redesigning the physician order templates on the electronic medical record to be easier to use, and creating assignments for all staff in the clinic. The final model and testing of the model is currently being designed and refined, taking into consideration a new practice management system. </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text" value="1.00"/>
<i>Achievement Value</i>	<input type="text" value="0.75"/>
<hr/>	
Process Milestone: <u>Implement the patient-centered scheduling model in primary care clinics</u> <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text" value="2.00"/>
Denominator (if absolute number, enter "1")	* <input type="text" value="2.00"/>
Achievement	<input type="text" value="1.00"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; padding: 5px;"> The milestone included the completion of two phases of the redesign project: (1) Record, document, and examine random patient calls so that staff are able to experience the process of trying to make an appointment from the patient's perspective, (2) Call patients in advance to confirm their appointments, pre-register patients, update insurance and demographic information, – and if it makes sense, reschedule the appointment if there is a better time for the patient. For the first measure, we implemented a programming change to our phone system that allows supervisors in </div>	

DSRIP Semi-Annual Reporting Form

Category 2: Redesign Primary Care

each clinic area to listen in on patient calls for patients who call in to the scheduling line trying to schedule an appointment. A qualitative data collection tool was used for the listener to rate the call and rate whether they felt the patients were receiving what they needed and were satisfied with the appointment they were given. For the second measure, we hired somebody solely dedicated to call patients in advance of their appointments and remind them of their appointments. She will also reschedule patients if necessary. Our registration staff also pre-register all of the patients.

We also continued to re-design scheduling by re-creating our scheduling process through the practice management system, which allows schedulers to book patients into any open time slot, as opposed to specific time slots reserved for only certain types of appointments. The practice management system also includes a "scheduling by request" option, that allows schedulers to search for appointments that meet the specific needs of the individual.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

*

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 2: Redesign Primary Care

<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p>Achievement Value </p>	<p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p>
<p>Process Milestone: <u>Implement practice management system</u> <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement Yes</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>Completion for this milestone was the documentation of a signed vendor contract. On October 10, 2011, the Board of Supervisors approved the implementation of the McKesson Practice Management System, which has since been implemented in all of KMC's outpatient clinics.</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p>Achievement Value 1.00</p>	<p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p>
<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p>Achievement Value </p>	<p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p> <p style="text-align: center;">* <input style="width: 100%;" type="text"/></p>

DSRIP Semi-Annual Reporting Form

Category 2: Redesign Primary Care

<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid yellow; width: 100%; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid blue; width: 100%; height: 20px;"></div>

DSRIP Semi-Annual Reporting Form

Category 2: Redesign Primary Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 2: Integrate Physical and Behavioral Health Care

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Integrate Physical and Behavioral Health Care

DY Total Computable Incentive Amount: *

Incentive Funding Already Received in DY: *

Process Milestone: Train at least 20 additional (35 total) primary care clinicians on primary care management of behavioral health conditions
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

With the implementation of the Low Income Health Program (LIHP), counties across California have the opportunity to fully integrate physical and behavioral health services and providers under one plan. In an effort to combine county services and care coordination among safety net physical and behavioral health providers, Kern Medical Center (KMC) shall create a Physical and Behavioral Health Integration Committee, composed of county/community experts, key stakeholders, and primary care, mental health and substance abuse providers that would convene with the goal of creating an opportunity for collaboration, integration, coordination and continuity of care for patients transitioning between both systems. The committee shall be tasked with determining how to continually improve the care and quality of services provided to LIHP members that struggle with both physical and behavioral health issues.

In an effort to provide training and education to both physical and behavioral health providers, the Physical and Behavioral Health Integration Committee will plan and host a county wide Physical and Behavioral Health Integration Conference. There are three main goals of the conference:

- 1) Focus on integration of Physical and Behavioral Health in Patient Centered Medical Homes
- 2) Educate providers on Mental Health and/or Substance Abuse (MHSA) transfer of care protocols, referral flags, assessments, and medication management
- 3) Review national models, lessons learned and opportunities for collaboration

A Behavioral Health Coordinator was hired and started on November 1st. The first collaboration meeting took on place 1/24/2012 and the training is scheduled for May.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: Co-locate behavioral health and primary care, as measured by at least 2 behavioral health providers in primary care clinics.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

In an effort to integrate physical and behavioral health, we have implemented AUDIT-C screening in our Family

DSRIP Semi-Annual Reporting Form

Category 2: Integrate Physical and Behavioral Health Care

Medicine clinic and have co-located two behavioral health providers at this location, a Certified Alcohol and Drug Counselor-II and a Licensed Marriage and Family Therapist. At registration, patients are given a five question alcohol and drug use questionnaire to complete. Questions 1 – 3 address frequency of alcohol use and questions 4 – 5 addresses frequency of drug use; both range from 0 – 6. A man who scores a 5 and a woman scores a 4 would be considered a positive screen. The highest score possible is a 24. Nursing staff forward the questionnaires to the Behavioral Health Integration staff. Behavioral Health Integration staff review the questionnaires and flag those with high scores. They contact the patients to offer substance abuse services, including further assessment and evaluation, to determine the level of services needed. Patients will either: 1) Meet with BH staff for one brief encounter; 2) Meet with BH staff for a series of follow up encounters; or 3) be referred to Kern County Mental Health – GATE Team for more intense substance abuse services/treatment.

The GATE Team provides assessment and placement of individuals referred for notable substance abuse problems including co-occurring disorders. There is no charge for the assessment and referral. Additionally, in December 2011, KMC implemented a screening process for all patients admitted to the hospital. During intake, patients are asked about their alcohol and drug use/abuse. If they have a positive screen, a consult is automatically sent to the GATE team representative. The GATE team representative meets with the patient on the inpatient floor to complete an assessment and screen for appropriate services. We feel this inpatient is screening is vital for coordinating services prior to a patients discharge from the hospital.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

* Yes

Achievement Value

1.00

DSRIP Semi-Annual Reporting Form

Category 2: Integrate Physical and Behavioral Health Care

Process Milestone: Development of a tracking mechanism of referrals from primary care providers to on-site behavioral health professionals.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

A Project Manager and Behavioral Health Coordinator met with all KMC and Kern County Mental Health (KCMH) stakeholders to develop and implement a tracking mechanism for all mental health referrals. A policy was drafted and vetted for review by all stakeholders. Referrals are tracked through KMC's electronic medical record and the KCMH's Anasazi system. Additionally, we have reporting metrics that are shared with a larger stakeholder group which include the following metrics:

1. Number of referrals and from which primary care providers
2. Number of Crisis Inpatient Referrals for PEC, 3B and Inpatient Psychiatric Unit
3. Total clients assessed
4. Average days from referral to assessment
5. Average days/time for completing assessment
6. Disposition of referrals: treatment or refer back to PCP

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Process Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 2: Integrate Physical and Behavioral Health Care

<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>

DSRIP Semi-Annual Reporting Form

Category 2: Integrate Physical and Behavioral Health Care

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 2: Establish/Expand a Patient Care Navigation Program

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Establish/Expand a Patient Care Navigation Program	
DY Total Computable Incentive Amount:	* <input style="border: 1px solid yellow;" type="text" value="\$ 4,837,443.90"/>
Incentive Funding Already Received in DY:	* <input style="border: 1px solid yellow;" type="text" value="\$ -"/>
Process Milestone: <u>Increase patient engagement, by completing 5 patient engagement initiatives.</u> <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input style="border: 1px solid yellow;" type="text" value="3.00"/>
Denominator (if absolute number, enter "1")	* <input style="border: 1px solid yellow;" type="text" value="5.00"/>
Achievement	<input style="border: 1px solid black; background-color: #cccccc;" type="text" value="0.60"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input style="border: 1px solid yellow;" type="text"/>
<div style="border: 1px solid black; padding: 5px;"> Five Patient Engagement Initiatives: 1) Redesign Patient Guide: KMC's patient guide was old and lacking valuable information for patients. We formed a committee to evaluate the current patient guide and develop the content for a new patient guide, which provides information about KMC's hospital services, financial information, privacy rights, outpatient/discharge information, health education, etc. The committee went through a three month review process and approved the final draft of the guide in December. The guide will be printed in English and Spanish and provided to all patients admitted in the hospital. 2) Hospital Campus Map and Sign Redesign Project: In an effort to better guide patients around the hospital campus, KMC partnered with Bakersfield College's graphic design department and had new campus maps created for patients, as well as, new signs to better guide patients around the hospital campus. 3) Physical and Behavioral Health Integration Initiative: This initiative will help form a Physical and Behavioral Health Integration Committee, composed of county experts, key stakeholders, and primary care, mental health and substance abuse providers that would convene with the goal of creating an opportunity for collaboration, integration, coordination and continuity of care for patients transitioning between both systems. 4) Launched the Patient Experience Transformation (PEXT) Initiative: The PEXT Initiative is a partnership of leaders and staff from California public hospital systems, the California Health Care Safety Net Institute (SNI), and nationally-recognized patient experience experts at ExperiaHealth that aims to help California public hospitals measure, understand and improve their patients' experience of care. KMC attend monthly webinars, attends off-site conferences and holds a local quarterly PEXT Initiative Committee meeting. KMC has also identified our Chief Medical Officer as our "Chief Experience Officer", leading this initiative. Furthermore, at the Annual Medical Staff Meeting, the guest speaker was Dr. Susan Stangl, Associate Clinical Professor at UCLA. She is a Family Medicine physician who developed a curriculum for teaching medical students "Interpersonal Skills" and has many workshops on the subject. Additionally, she conducts workshops in doctor-patient communications and improving patient satisfaction for all newly hired clinicians and clinicians with poor patient satisfaction scores. 5) Information desk/greeter for KMC Primary Care location and the installation of health education TVs for the waiting room to focus on preventive care and self-management tips </div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input style="border: 1px solid yellow;" type="text" value="1.00"/>
<i>Achievement Value</i>	<input style="border: 1px solid blue; background-color: #cccccc;" type="text" value="0.50"/>
Process Milestone: <u>Expand program to include ED Navigator, who educates patients on importance of primary care; connects patients to a new Primary Care Clinic and/or assists patient in getting following appointment with established PCP.</u> <i>(insert milestone)</i>	

DSRIP Semi-Annual Reporting Form

Category 2: Establish/Expand a Patient Care Navigation Program

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)

*

Denominator (if absolute number, enter "1")

*

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

*

Patients are often most at risk of facing difficulty navigating the health care system once they leave the emergency department. Patients often present to the ED for non-urgent conditions that could have been treated in a primary care setting. Although estimates vary, up to 49% of emergency department visits are for avoidable causes. To help patients better navigate the system, we hired an ED Care Coordinator. The ED Care Coordinator educates patients about the importance of primary care, as well as, coordinates with other community clinics and the county primary clinics to provide appointment slots that can be given to the patient upon discharge from the emergency department.

All policies and training materials were completed for the ED Navigator Program and the ED Care Coordinator was hired in December 2011.

KMC will monitor the following:

- Percent of patient seen by the EDCC while the EDCC was working
- Number of appointment slots provided by each community clinic
- Number of patients without a primary care provider who received education about a primary care provider in the ED
- Number of patients without a primary care provider who were referred to a primary care provider in the ED
- Number of patients without a primary care provider who are given a scheduled primary care provider appointment
- Number of patients with a primary care provider who are given a scheduled primary care provider appointment
- Number of patients referred for financial screening and/or KMCHP application started in ED
- Evaluate impact of program on IP/ER utilization: Quarterly, request list of all ER visits for that month and flag patients who have received some level of EDCC intervention. Compare rates of:
 - o ER re-utilization
 - o ER re-use within 72 hours of last visit
 - o IP admissions

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

*

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 2: Establish/Expand a Patient Care Navigation Program

<p>Process Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> </p>	<div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px; background-color: #cccccc;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>
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DSRIP Semi-Annual Reporting Form

Category 2: Establish/Expand a Patient Care Navigation Program

<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement <input type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> <input type="text"/></p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text" value="N/A"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p>
<p>Improvement Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement <input type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> <input type="text"/></p>	<p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text" value="N/A"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p> <p><input type="text"/></p>
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DSRIP Semi-Annual Reporting Form

Category 2: Establish/Expand a Patient Care Navigation Program

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Improvement Milestone: _____
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

Category 3: Patient/Care Giver Experience (required)

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*). Note: for DY8, data from the last 2 quarters shall suffice.

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Patient/Care Giver Experience (required)

DY Total Computable Incentive Amount: * \$ 2,413,125.00

Incentive Funding Already Received in DY: * \$ -

Undertake the necessary planning, redesign, translation, training and contract negotiations in order to implement CG-CAHPS in DY8 (DY7 only)

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available): * Yes

A positive patient/caregiver experience is essential, especially in the outpatient setting, for its ability to impact both quality and cost of care. Research indicates that increased satisfaction and improved communication between providers and patients has been shown to increase compliance with treatment plans, especially among patients with chronic diseases.

After much research, vendor presentation and various quotes, KMC selected to contract with Press Ganey as our CGCAHPS and HCAHPS vendor moving forward. KMC is positioning themselves for the best outcome and product by contracting with Press Ganey.

- Besides home-grown non-vendor models, Press Ganey is the most widely used vendor among California Public Hospital systems and academic facilities like KMC.
- Under DSRIP, KMC must follow common survey mode/type, sampling, aggregation and reporting protocols defined by DHCS. These protocols are unique and specific to California Public Hospitals. It will be required that a vendor not only meets these requirements but fully understand the risks, protocols and timelines set forth by DHCS in DSRIP.
- The American Medical Group Association (AMGA) has selected Press Ganey as its official collaborator for its Accountable Care Organization (ACO) patient experience surveying and improvement services.
- Press Ganey has the largest database of all vendors with over 100,000 Physicians in our CGCAHPS database. NRC and other do not even have half that. This is very important to gain accurate benchmarking.

Next Steps

1. Vendor Contract goes to the Kern County Board of Supervisors on March 27, 2012
2. Provider/Staff information and training on online tool will start flowing in April/May

Achievement Yes

Achievement Value 0.50

Report results of CG CAHPS questions for "Getting Timely Appointments, Care, and Information" theme to the State (DY8-10)

Top-box score composite of all questions within this theme from all returned surveys: Enter the percentage of responses that fell in the most positive response category *

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

DSRIP Semi-Annual Reporting Form

Category 3: Patient/Care Giver Experience (required)

Achievement	N/A
Achievement Value	

Report results of CG CAHPS questions for “How Well Doctors Communicate With Patients” theme to the State (DY8-10)

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the most positive response category *

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement	N/A
Achievement Value	

Report results of CG CAHPS questions for “Helpful, Courteous, and Respectful Office Staff” theme to the State (DY8-10)

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the most positive response category *

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement	N/A
Achievement Value	

Report results of CG CAHPS questions for “Patients’ Rating of the Doctor” theme to the State (DY8-10)

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the response categories 9 and 10 *

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement	N/A
Achievement Value	

DSRIP Semi-Annual Reporting Form

Category 3: Patient/Care Giver Experience (required)

Report results of CG CAHPS questions for “Shared Decisionmaking” theme to the State (DY8-10)

Top-box score composite of all questions within this theme from all returned surveys:
Enter the percentage of responses that fell in the most positive response category

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

N/A

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: Kern Medical Center

REPORTING YEAR: DY 7

DATE OF SUBMISSION: 3/31/2012

Category 3: Care Coordination (required)

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

* The yellow boxes indicate where the DPH system should input data

 The black boxes indicate Milestones and will automatically populate and flow to summary sheets

 The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Care Coordination (required)

DY Total Computable Incentive Amount: * \$ 2,413,125.00

Incentive Funding Already Received in DY: * \$ -

Report results of the Diabetes, short-term complications measure to the State (DY7-10)

Data Collection Source * Data warehouse

Numerator * 2.0

Denominator * 407.0

Rate 0.5

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

KMC did multiple rounds of communication to the KMC Medical Executive Committee and Quality Council regarding the DSRIP Category 3 Measures being collected. We worked closely with our Information Systems staff and data analysts to maximize the data being pulled from the KMC system. Below is a summary of our semi-annual data analysis. A more detailed interpretation of the data and analysis will be provided in the annual report.

Numerator

Step 1: From Denominator, number of patients who had an Inpatient visit = 45

Step 2: From Step 1, number of patients who had an ICD-9 Principal Diagnosis Code for Short-Term Diabetes (25010, 25011, 25012, 25013, 25020, 25021, 25022, 25023, 25030, 25031, 25032, 25033) = **2**

Denominator

Step 1: Number of patients age 18-75 with diabetes = 3,022

Step 2: From Step 1, number of patients who had a PCP visit from 7/1/11-12/31/11 = 1,213

Step 3: From Step 2, number of patients who had two or more PCP visits from 7/1/11-12/31/11 = **407**

Achievement Yes

Achievement Value 0.50

Report results of the Uncontrolled Diabetes measure to the State (DY7-10)

Data Collection Source * Data warehouse

Numerator * 1.0

Denominator * 407.0

Rate 0.2

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

KMC did multiple rounds of communication to the KMC Medical Executive Committee and Quality Council regarding the DSRIP Category 3 Measures being collected. We worked closely with our Information Systems staff and data analysts to maximize the data being pulled from the KMC system. Below is a summary of our semi-annual data analysis. A more detailed interpretation of the data and analysis will be provided in the annual report.

Numerator

DSRIP Semi-Annual Reporting Form

Category 3: Care Coordination (required)

Step 1: From Denominator, number of patients who had an Inpatient visit = 45
 Step 2: From Step 1, number of patients who had an ICD-9 Principal Diagnosis Code for Uncontrolled Diabetes (25002, 25003) = 1
Denominator
 Step 1: Number of patients age 18-75 with diabetes = 3,022
 Step 2: From Step 1, number of patients who had a PCP visit from 7/1/11-12/31/11 = 1,213
 Step 3: From Step 2, number of patients who had two or more PCP visits from 7/1/11-12/31/11 = **407**

Achievement

Yes

Achievement Value

0.50

Report results of the Congestive Heart Failure measure to the State (DY8-10)

Data Collection Source

*

Numerator

*

Denominator

*

Rate

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

N/A

Achievement Value

Report results of the Chronic Obstructive Pulmonary Disease measure to the State (DY8-10)

Data Collection Source

*

Numerator

*

Denominator

*

Rate

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

N/A

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: Kern Medical Center

REPORTING YEAR: DY 7

DATE OF SUBMISSION: 3/31/2012

Category 3: Preventive Health (required)

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*

* The yellow boxes indicate where the DPH system should input data

The black boxes indicate Milestones and will automatically populate and flow to summary sheets

The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Preventive Health (required)

DY Total Computable Incentive Amount: * \$ 2,413,125.00

Incentive Funding Already Received in DY: * \$ -

Report results of the Mammography Screening for Breast Cancer measure to the State (DY7-10)

Data Collection Source * Data warehouse

Numerator * 906.0

Denominator * 2,887.0

Rate 31.4

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

KMC did multiple rounds of communication to the KMC Medical Executive Committee and Quality Council regarding the DSRIP Category 3 Measures being collected. We worked closely with our Information Systems staff and data analysts to maximize the data being pulled from the KMC system. Below is a summary of our semi-annual data analysis. A more detailed interpretation of the data and analysis will be provided in the annual report.

Numerator

Step 1: From Denominator, number of patients who had a mammogram screen for breast cancer from 7/1/2010-12/31/2011 = **906**

Denominator

Step 1: Number of Female patients age 50-74 who had a PCP visit from 7/1/11-12/31/11 = 4,340

Step 2: From Step 1, number of patients who had two or more PCP visits from 7/1/11-12/31/11 = **2,887**

Achievement Yes

Achievement Value 0.50

Reports results of the Influenza Immunization measure to the State (DY7-10)

Data Collection Source * Electronic medical record (EMR)

Numerator * 1,310.0

Denominator * 5,332.0

Rate 24.6

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

KMC did multiple rounds of communication to the KMC Medical Executive Committee and Quality Council regarding the DSRIP Category 3 Measures being collected. We worked closely with our Information Systems staff and data analysts to maximize the data being pulled from the KMC system. Below is a summary of our semi-annual data analysis. A more detailed interpretation of the data and analysis will be provided in the annual report.

Numerator

DSRIP Semi-Annual Reporting Form

Category 3: Preventive Health (required)

Step 1 From Denominator, number of patients who received an Influenza Immunization from 9/1/2011-12/31/11 = **1,310**
Denominator
Step 1: Number of patients age 50 or older who had a PCP visit from 7/1/11-12/31/11 = 8,435
Step 2: From Step 1, number of patients who had two or more PCP visits from 7/1/11-12/31/11 = **5,332**

Achievement

Yes

Achievement Value

0.50

Report results of the Child Weight Screening measure to the State (DY8-10)

Data Collection Source

*

Numerator

*

Denominator

*

Rate

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

N/A

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 3: Preventive Health (required)

Report results of the Pediatrics Body Mass Index (BMI) measure to the State (DY8-10)

Data Collection Source

*

Numerator

*

Denominator

*

Rate

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

Achievement Value

Report results of the Tobacco Cessation measure to the State (DY8-10)

Data Collection Source

*

Numerator

*

Denominator

*

Rate

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

Category 3: At-Risk Populations (required)

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*). For the last two measures, which are both diabetes composite measures, please follow the instructions on specifically how to calculate the composite measures (available based on NQF endorsement).*

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

At-Risk Populations (required)

DY Total Computable Incentive Amount: * \$ 2,413,125.00

Incentive Funding Already Received in DY: * \$ -

Report results of the Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (<100 mg/dl) measure to the State (DY7-10)

Data Collection Source * Data warehouse

Numerator * 217.0

Denominator * 407.0

Rate 53.3

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

KMC did multiple rounds of communication to the KMC Medical Executive Committee and Quality Council regarding the DSRIP Category 3 Measures being collected. We worked closely with our Information Systems staff and data analysts to maximize the data being pulled from the KMC system. Below is a summary of our semi-annual data analysis. A more detailed interpretation of the data and analysis will be provided in the annual report.

Numerator

Step 1: Number of patients who had an LDL-C test from 7/1/11-12/31/11 = 3,521

Step 2: From Denominator, number of patients who had an LDL-C test from 7/1/11-12/31/11 = 293

Step 3: From Step 2, number of patients who had most recent LDL-C level in control (less than 100 mg/dl) from 7/1/11-12/31/11 = **217**

Denominator

Step 1: Number of patients age 18-75 with diabetes = 3,022

Step 2: From Step 1, number of patients who had a PCP visit from 7/1/11-12/31/11 = 1,213

Step 3: From Step 2, number of patients who had two or more PCP visits from 7/1/11-12/31/11 = **407**

Achievement Yes

Achievement Value 0.50

Report results of the Diabetes Mellitus: Hemoglobin A1c Control (<9%) measure to the State (DY7-10)

Data Collection Source * Data warehouse

Numerator * 254.0

Denominator * 407.0

Rate 62.4

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

KMC did multiple rounds of communication to the KMC Medical Executive Committee and Quality Council regarding the DSRIP Category 3 Measures being collected. We worked closely with our Information

DSRIP Semi-Annual Reporting Form

Category 3: At-Risk Populations (required)

Systems staff and data analysts to maximize the data being pulled from the KMC system. Below is a summary of our semi-annual data analysis. A more detailed interpretation of the data and analysis will be provided in the annual report.

Numerator

Step 1: Number of patients who had an A1c test from 7/1/11-12/31/11 = 2,980

Step 2: From Denominator, number of patients who had an A1c test from 7/1/11-12/31/11 = 336

Step 3: From Step 2, number of patients who had most recent A1c level in control (less than 9%) from 7/1/11-12/31/11 = **254**

Denominator

Step 1: Number of patients age 18-75 with diabetes = 3,022

Step 2: From Step 1, number of patients who had a PCP visit from 7/1/11-12/31/11 = 1,213

Step 3: From Step 2, number of patients who had two or more PCP visits from 7/1/11-12/31/11 = **407**

Achievement

Yes

Achievement Value

0.50

Report results of the 30-Day Congestive Heart Failure Readmission Rate measure to the State (DY8-10)

Data Collection Source

*

Numerator

*

Denominator

*

Rate

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

N/A

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 3: At-Risk Populations (required)

Report results of the Hypertension (HTN): Blood Pressure Control (<140/90 mmHg) measure to the State (DY8-10)

Data Collection Source	* <input type="text"/>
Numerator	* <input type="text"/>
Denominator	* <input type="text"/>
Rate	<input type="text"/>

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement	<input type="text" value="N/A"/>
Achievement Value	<input type="text"/>

Report results of the Pediatrics Asthma Care measure to the State (DY8-10)

Data Collection Source	* <input type="text"/>
Numerator	* <input type="text"/>
Denominator	* <input type="text"/>
Rate	<input type="text"/>

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement	<input type="text" value="N/A"/>
Achievement Value	<input type="text"/>

Report results of the Optimal Diabetes Care Composite to the State (DY8-10)

Data Collection Source	* <input type="text"/>
Numerator	* <input type="text"/>
Denominator	* <input type="text"/>
Rate	<input type="text"/>

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement	<input type="text" value="N/A"/>
Achievement Value	<input type="text"/>

DSRIP Semi-Annual Reporting Form

Category 3: At-Risk Populations (required)

Report results of the Diabetes Composite to the State (DY8-10)

Data Collection Source

*

Numerator

*

Denominator

*

Rate

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement

Achievement Value

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: Kern Medical Center

REPORTING YEAR:

DATE OF SUBMISSION:

Category 4: Severe Sepsis Detection and Management (required)

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Severe Sepsis Detection and Management	
DY Total Computable Incentive Amount:	* \$ 1,512,500.00
Incentive Funding Already Received in DY:	* \$ -
Compliance with Sepsis Resuscitation bundle (%)	
Numerator	* 50
Denominator	* 75
% Compliance	0.67
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
<p>The timeframe for numerator and demoninator is July 2011 thru December 2011. With the assistance of designated RN Staff Kern Medical Center has developed auditing tools and processes to collect data in real time and provide feedback to staff on performance. Kern Medical Center has submitted 6 months of data to Safety Net Insititute(SNI). Kern Medical Center is working with SNI to establish our Sepsis Resuscitation Bundles baseline and benchmarks for DY8 reporting. Mortality rate will be reported in DY8 as set forth in our plan.</p>	
DY Target (from the DPH system plan, if appropriate)	* 0.50
% Achievement of Target	0.50
<i>Achievement Value</i>	0.50
Sepsis Mortality (%)	
Numerator	*
Denominator	*
% Mortality	N/A
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
<i>Achievement Value</i>	
Optional Milestone: Implement the Sepsis Resuscitation Bundle	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	*
Denominator (if absolute number, enter "1")	*
Achievement	Yes

DSRIP Semi-Annual Reporting Form

Category 4: Severe Sepsis Detection and Management (required)

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

*

Sepsis multidisciplinary team met biweekly July thru December of 2011. The following was completed: 1) a gap analysis of current processes for detecting and treating severe sepsis with report; 2) Developed a formalized inter-professional "Severe Sepsis Treatment Protocol" with physician order set placed in Electronic Medical Record and approved policy and procedure; 3) Participated in all scheduled collaborative meetings/webinars over the past 6 months for the time period July 1, 2011 - December 31, 2012 with required submission of data per collaborative schedule; 4) Developed/completed Severe Sepsis education of licensed RN/LVN and Medical Staff faculty. As of December 14, 2011 539/594 = 91% have completed education. Goal 85% . Education is ongoing.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

*

Achievement Value

Optional Milestone: Report at least 6 months of data collection on Sepsis Resuscitation Bundle to SNI for purposes of establishing the baseline and setting benchmarks

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)

*

Denominator (if absolute number, enter "1")

*

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

*

Six months of Sepsis Resuscitation Bundle data for time period February 2011 thru July 2011 was submitted to Safety Net Institute on December 22, 2011.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

*

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)

*

Denominator (if absolute number, enter "1")

*

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

*

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

*

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)

*

Denominator (if absolute number, enter "1")

*

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown

DSRIP Semi-Annual Reporting Form

Category 4: Severe Sepsis Detection and Management *(required)*

menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

Achievement Value

DSRIP Semi-Annual Reporting Form

Category 4: Severe Sepsis Detection and Management (required)

Optional Milestone: _____ <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="N/A"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>
<i>Achievement Value</i>	<input type="text"/>

Optional Milestone: _____ <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="N/A"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>
<i>Achievement Value</i>	<input type="text"/>

DSRIP Semi-Annual Reporting Form

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DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)

DPH SYSTEM: Kern Medical Center

REPORTING YEAR: DY 7

DATE OF SUBMISSION: 3/31/2012

Category 4: Central Line Associated Blood Stream Infection (CLABSI) (required)

Below is the data reported for the DPH system.

* Instructions for DPH systems: Please type in all of your DY milestones for the project below and report data in the indicated boxes (*).

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Central Line Associated Blood Stream Infection

DY Total Computable Incentive Amount: * \$ 1,512,500.00

Incentive Funding Already Received in DY: * \$ -

Compliance with Central Line Insertion Practices (CLIP) (%)

Numerator * 92.00

Denominator * 102.00

% Compliance 0.90

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Time frame for numerator and denominator is July 2011 thru December 2011. With the assistance of designated RN Staff Kern Medical Center has developed auditing tools and processes to collect data in real time and provide feedback to staff on performance. Kern Medical Center has submitted 6 months of data to Safety Net Institute(SNI). Kern Medical Center is working with SNI to establish our CLABSI baseline and set our benchmarks for DY8 reporting.

DY Target (from the DPH system plan) * 0.50

% Achievement of Target 0.50

Achievement Value 0.50

Central Line Bloodstream Infection (Rate per 1,000 patient days)

Numerator *

Denominator *

Infection Rate N/A

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

DY Target (from the DPH system plan) *

% Achievement of Target N/A

Achievement Value

Optional Milestone: Implement the Central Line Insertion Practices (CLIP)
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

DSRIP Semi-Annual Reporting Form

Category 4: Central Line Associated Blood Stream Infection (CLABSI) (required)

Achievement

Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

* Yes

CLABSI multidisciplinary team met biweekly July thru December 2011. The following was completed: 1) gap analysis of our current processes for inserting/maintaining central lines with report; 2) Developed a formalized inter-professional Central -line Treatment Protocol with physician order set placed on Electronic Medical Record and revision of policy and procedure; 3) Participated in all scheduled collaborative meetings/ webinars over past 6 months July 1, 2011 - December 31, 2012 with required submission of data per collaborative schedule. 4) Developed and completed CLIP and CLABSI education for both licensed RN/LN staff and Medical Staff faculty. As of December 2011 539/679 =85% have completed education. Goal is 85%. Education is ongoing.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

*

Achievement Value

1.00

DSRIP Semi-Annual Reporting Form

Category 4: Central Line Associated Blood Stream Infection (CLABSI) (required)

<p>Optional Milestone: Report at least 6 months of data collection on CLIP to SNI for purposes of establishing the baseline and setting benchmarks. <div style="text-align: center; border-bottom: 1px solid black; margin-top: 5px;"> <i>(insert milestone)</i> </div> </p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement Yes</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>Six months of CLIP and CLABSI data for time period June 2011 thru Nov 2011 was submitted to Safety Net Institute on December 22, 2011. As reported to SNI - CLIP compliance - 21/140 = 15%; and CLABSI rate 7/3967 = 1.76</p> </div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p style="text-align: right;"><i>Achievement Value</i> 1.00</p>
<p>Optional Milestone: _____ <div style="text-align: center; border-bottom: 1px solid black; margin-top: 5px;"> <i>(insert milestone)</i> </div> </p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p style="text-align: right;"><i>Achievement Value</i> </p>
<p>Optional Milestone: _____ <div style="text-align: center; border-bottom: 1px solid black; margin-top: 5px;"> <i>(insert milestone)</i> </div> </p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) * <input style="width: 100px;" type="text"/></p> <p>Denominator (if absolute number, enter "1") * <input style="width: 100px;" type="text"/></p> <p>Achievement N/A</p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: * <input style="width: 100px;" type="text"/></p> <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone * <input style="width: 100px;" type="text"/></p> <p style="text-align: right;"><i>Achievement Value</i> </p>

DSRIP Semi-Annual Reporting Form

Category 4: Central Line Associated Blood Stream Infection (CLABSI) (required)

<p>Optional Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement <input type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>	<input type="text"/> <input type="text"/> <input type="text" value="N/A"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i></p>	<input type="text"/> <input type="text"/>
<p>Optional Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement <input type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>	<input type="text"/> <input type="text"/> <input type="text" value="N/A"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i></p>	<input type="text"/> <input type="text"/>

DSRIP Semi-Annual Reporting Form

CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 4: Hospital-Acquired Pressure Ulcer Prevention

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Hospital-Acquired Pressure Ulcer Prevention	
DY Total Computable Incentive Amount:	* <input type="text" value="\$ 1,512,500.00"/>
Incentive Funding Already Received in DY:	* <input type="text" value="\$ -"/>
Prevalence of Stage II, III, IV or unstagable pressure ulcers (%)	
Numerator	* <input type="text" value="25.00"/>
Denominator	* <input type="text" value="491.00"/>
Prevalence (%)	<input type="text" value="0.05"/>
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
Timeframe for numerator and denominator is July 2011 - December 2011. With the assistance of designated RN Staff Kern Medical Center has developed auditing tools and processes to collect data in real time and provide feedback to staff on performance. Kern Medical Center has submitted data to SNI. DY 8 target is 5.5%.	
DY Target (from the DPH system plan)	* <input type="text" value="50.00%"/>
% Achievement of Target	<input type="text" value="0.50"/>
<i>Achievement Value</i>	<input type="text" value="0.50"/>
Optional Milestone: Share data, promising practices, and findings with SNI to foster shared learning and benchmarking across the California public hospitals.	
<i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="Yes"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	
* <input type="text" value="Yes"/>	
Kern Medical Center submitted data , promising practicies and findings to SNI on December 22, 2011. Kern Medical Center shared 12 issues that we had experienced with the promising practicies implemented to improve patient safety and quality of care. To highlight a few of the promising practicies the organization has implemented new products, equipment (i.e. beds) , policy revisions to keep current with best practice, implmentation of skin champions to increase expertise in the organization, education for licensed and nursing attendant, increase prevalence studies (monthly), implmentation of standardized measurement routines, hourly rounding.	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>
<i>Achievement Value</i>	<input type="text" value="1.00"/>

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Category 4: Hospital-Acquired Pressure Ulcer Prevention

<p>Optional Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement <input type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> <input type="text"/></p>	<input type="text"/> <input type="text"/> <input type="text" value="N/A"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Optional Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement <input type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> <input type="text"/></p>	<input type="text"/> <input type="text"/> <input type="text" value="N/A"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Optional Milestone: _____ <i>(insert milestone)</i></p> <p>Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *</p> <p>Denominator (if absolute number, enter "1") *</p> <p>Achievement <input type="text" value="N/A"/></p> <p>If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p>DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *</p> <p><i>Achievement Value</i> <input type="text"/></p>	<input type="text"/> <input type="text"/> <input type="text" value="N/A"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

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Category 4: Hospital-Acquired Pressure Ulcer Prevention

Optional Milestone: _____ <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="N/A"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>
<i>Achievement Value</i>	<input type="text"/>

Optional Milestone: _____ <i>(insert milestone)</i>	
Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	<input type="text" value="N/A"/>
If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:	* <input type="text"/>
<div style="border: 1px solid black; height: 80px; width: 100%;"></div>	
DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone	* <input type="text"/>
<i>Achievement Value</i>	<input type="text"/>

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CA 1115 Waiver - Delivery System Reform Incentive Payments (DSRIP)
 DPH SYSTEM: Kern Medical Center
 REPORTING YEAR: DY 7
 DATE OF SUBMISSION: 3/31/2012

REPORTING ON THIS PROJECT: *

Category 4: Venous Thromboembolism (VTE) Prevention and Treatment

Below is the data reported for the DPH system.

* *Instructions for DPH systems: Please select above whether you are reporting on this project. If 'yes', please type in all of your DY milestones for the project below and report data in the indicated boxes (*).*

- * The yellow boxes indicate where the DPH system should input data
- The black boxes indicate Milestones and will automatically populate and flow to summary sheets
- The blue boxes show progress made toward the Milestone ("Achievement Value") and will automatically populate and flow to summary sheets

Venous Thromboembolism (VTE) Prevention and Treatment	
DY Total Computable Incentive Amount:	* \$ <input style="border: 1px solid yellow;" type="text" value="1,535,187.50"/>
Incentive Funding Already Received in DY:	* \$ <input style="border: 1px solid yellow;" type="text" value="-"/>
VTE Prophylaxis (%)	
Numerator	* <input style="border: 1px solid yellow;" type="text"/>
Denominator	* <input style="border: 1px solid yellow;" type="text"/>
% Compliance	<input style="border: 1px solid black;" type="text" value="N/A"/>
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
<div style="border: 1px solid black; height: 60px;"></div>	
DY Target (from the DPH system plan)	* <input style="border: 1px solid yellow;" type="text"/>
% Achievement of Target	<input style="border: 1px solid yellow;" type="text" value="N/A"/>
<i>Achievement Value</i>	<input style="border: 1px solid blue;" type="text"/>
Intensive care unit VTE prophylaxis (%)	
Numerator	* <input style="border: 1px solid yellow;" type="text"/>
Denominator	* <input style="border: 1px solid yellow;" type="text"/>
% Compliance	<input style="border: 1px solid black;" type="text" value="N/A"/>
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
<div style="border: 1px solid black; height: 60px;"></div>	
DY Target (from the DPH system plan)	* <input style="border: 1px solid yellow;" type="text"/>
% Achievement of Target	<input style="border: 1px solid yellow;" type="text" value="N/A"/>
<i>Achievement Value</i>	<input style="border: 1px solid blue;" type="text"/>
VTE patients with anticoagulation overlap therapy (%)	
Numerator	* <input style="border: 1px solid yellow;" type="text"/>
Denominator	* <input style="border: 1px solid yellow;" type="text"/>
% Compliance	<input style="border: 1px solid black;" type="text" value="N/A"/>
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	

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Category 4: Venous Thromboembolism (VTE) Prevention and Treatment

DY Target (from the DPH system plan)	* <input style="width: 100%;" type="text"/>
% Achievement of Target	<input style="width: 100%;" type="text" value="N/A"/>
<i>Achievement Value</i>	<input style="width: 100%; background-color: #cccccc;" type="text"/>
<hr/>	
VTE patients receiving unfractionated heparin with dosages/platelet count monitoring (%)	
Numerator	* <input style="width: 100%;" type="text"/>
Denominator	* <input style="width: 100%;" type="text"/>
% Compliance	<input style="width: 100%; background-color: #cccccc;" type="text" value="N/A"/>
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
DY Target (from the DPH system plan)	* <input style="width: 100%;" type="text"/>
% Achievement of Target	<input style="width: 100%;" type="text" value="N/A"/>
<i>Achievement Value</i>	<input style="width: 100%; background-color: #cccccc;" type="text"/>
<hr/>	
VTE discharge instructions (%)	
Numerator	* <input style="width: 100%;" type="text"/>
Denominator	* <input style="width: 100%;" type="text"/>
% Compliance	<input style="width: 100%; background-color: #cccccc;" type="text" value="N/A"/>
Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):	
DY Target (from the DPH system plan)	* <input style="width: 100%;" type="text"/>
% Achievement of Target	<input style="width: 100%;" type="text" value="N/A"/>
<i>Achievement Value</i>	<input style="width: 100%; background-color: #cccccc;" type="text"/>

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Category 4: Venous Thromboembolism (VTE) Prevention and Treatment

Incidence of potentially preventable VTE (%)

Numerator	* <input type="text"/>
Denominator	* <input type="text"/>
Incidence (%)	N/A

Provide an in-depth description of milestone progress. (If no data is entered, then a 0 Achievement Value is assumed for applicable DY. If so, please explain why data is not available):

Achievement Value

Optional Milestone: Implement the VTE prevention program
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

VTE multidisciplinary team met biweekly July thru December 2011. The following was completed: 1) gap analysis of our current processes for assessment and prophylactic treatment with report; 2) Developed a formalized inter-professional VTE Prevention/Treatment Protocol with physician order set placed in Electronic Medical Record and revision of policy and procedure; 3) Participated in all scheduled collaborative meetings/ webinars over past 6 months July 1, 2011 - December 31, 2012 with required submission of data per collaborative schedule. 4) Developed and completed VTE education for both licensed RN/LN staff and Medical Staff faculty. As of December 2011 539/679 =85% have completed education. Goal is 85%. Education is ongoing.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

Achievement Value

Optional Milestone: Report at least 6 months of data collection on VTE process measures to SNI for purposes of establishing the baseline and setting benchmarks.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text"/>
Denominator (if absolute number, enter "1")	* <input type="text"/>
Achievement	Yes

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

Six months of VTE data for time period June 2011 thru Nov 2011 was submitted to Safety Net Institute on December 22, 2011. As reported to SNI - VTE Prophylaxis (%) - 625/3004 = 21%; Intensive Care unit VTE Prophylaxis (%) - 31/32 = 97%; VTE patient with anticoagulation overlap therapy (%) 14/21=67%; VTE patients receiving unfractionated heparin with dosages/platelet count monitoring (%) 7/10= 70%; VTE discharge instructions (%) 9/20=45%

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone

Achievement Value

Optional Milestone: Report the 5 VTE process measure data to the State.
(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here)	* <input type="text" value="1.00"/>
Denominator (if absolute number, enter "1")	* <input type="text" value="2.00"/>
Achievement	0.50

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved:

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Data reporting timeframe is July 2011 thru December 2011. VTE Prophylaxis (%) 625/3004 = 21%; Intensive Care unit VTE Prophylaxis (%) 33/34=97%; VTE patient with anticoagulation overlap therapy (%) 9/15=60%; VTE patients receiving unfractionated heparin with dosages/platelet count monitoring (%) 5/7=71%; VTE discharge instructions (%) 9/15 = 60%.

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

Optional Milestone: _____

(insert milestone)

Numerator (if N/A, use "yes/no" form below; if absolute number, enter here) *

Denominator (if absolute number, enter "1") *

Achievement

If "yes/no" as to whether the milestone has been achieved, select "yes" or "no" from the dropdown menu, and (if "yes") provide an in-depth description of how the milestone was achieved: *

DY Target (from the DPH system plan) or enter "yes" if "yes/no" type of milestone *

Achievement Value

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Category 4: Venous Thromboembolism (VTE) Prevention and Treatment
