Electronic Health Records: Case Study

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PHYSICIAN PROFILE

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Leveraging Your EHR to Monitor and Improve Center Performance

Quality measurement is nothing new to Dr. Sharon Schutte-Rodin. Dr. Schutte-Rodin is the Clinical Outcomes Program Director and CPAP Program Director at the Penn Sleep Centers, University of Pennsylvania Perelman School of Medicine. Historically, her center has measured interscorer reliability and patient satisfaction in compliance with the AASM accreditation requirements. But Dr. Schutte-Rodin's recent energies are focused on full scale electronic health record (EHR) integration, which is revolutionizing the way her center measures quality of patient care and quality of workflow operational processes.

Using Epic's patient portal, mypennmedicine, sleep patients complete a branching sleep e-questionnaire at baseline and at return visits. Questionnaire data become patient reported outcomes (PRO's) with repeated measures utility. The Penn Sleep Q allows patients to directly enter their PRO data for "smartphrase" use in office visit notes. These PRO data also are auto-exported daily from Epic for quality and outcomes uses. The most recent effort has been to integrate CPAP data with Epic. The seamless linking of programs like Encore Anywhere and AirView with EHR systems like Epic has historically been a challenge that is being achieved at Penn Sleep. CPAP data integration with Epic consolidates previously disconnected databases and softwares within the patient's EHR for both visit use and as a centralized dataset.

Dr. Schutte-Rodin has been able to improve operational outcomes using data exports from her EHR which help her better understand internal processes. For example, automated daily exports of sleep study orders show the average time it takes for an order to move through various steps: study request; completion of precertification; scheduling of studies and visits; CPAP ordering; followup. Using this information, Dr. Schutte-Rodin and her team can determine where bottlenecks occur and areas for potential improvement. As another example, daily Epic auto-exports of the new PAP order date and the next visit date are used to ensure that new PAP patients are seen within the required 30-90 day visit window.

The recommendations and tactics described in the AASM Sleep case studies reflect the best practices of AASM members and are not the official position or policy of the AASM.

KEY TAKEAWAYS: FIND OUT WHAT YOUR EHR CAN DO FOR YOU

- All EHRs include some level of data variables that can be used with smartphrases in office visit notes or exported, tracked, and reviewed for patient care quality, operational quality, and other outcomes.
- EHR's frequently allow list building, metric tracking, and disease-specific patient instructions. Patient portals increase patient access and may allow EHR lists to e-send patient reminders and questionnaires.
- Using your EHR data may allow measurements as simple as tracking the number and type of visits and diagnosis, to more complex use of chronic disease PRO's and adherence to therapies.