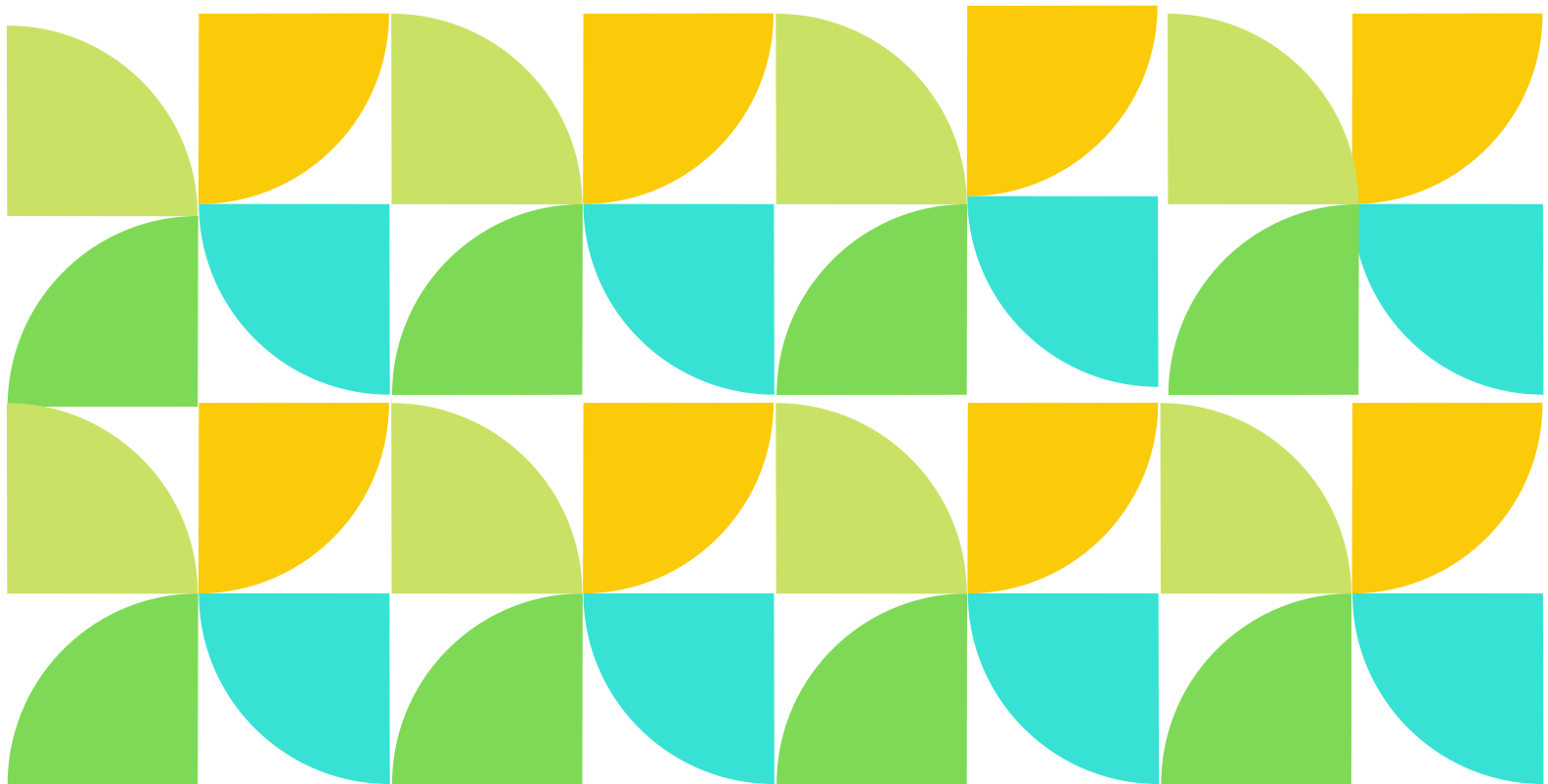


# CONTINUOUS QUALITY IMPROVEMENT

Indicators and Thresholds



Child  Adolescent  
HEALTH CENTER PROGRAM



# Common CQI Indicators and Thresholds Used in CAHCs Medical

Summary/Problem List Complete*.....	90-95
Annual Comprehensive Physical Exam +.....	70-90
Physical Exam Recommended .....	90
Medication Reconciliation* .....	90
Risk Assessment Current/Annual+.....	90
Date of Last Physical Exam Documented.....	90

## Asthma Care and Documentation

History Completed .....	90-100
Diagnosis and Severity on Problem List.....	95
Severity Specified .....	95
Annual Medication Assessment .....	90-100
Asthma Action Plan+ .....	90-100
Influenza Immunization Administered....	95-100
Triggers Identified .....	100
Persistent Asthma Prescribed Steroids* ....	100
Utilization of SMART Therapy.....	90-100

## BMI >85% Care and Documentation

BMI % on Problem List.....	95
Nutrition and Physical Activity Education/ Counseling*+ .....	100
Screen Time Counseling .....	85
Complete Medical/Family History .....	85
Lab Work Completed.....	80
Lab Work Ordered.....	80
Comprehensive Physical Exam Recommended .....	85
Stage of Change Assessed and Documented.....	90
Blood Pressure Screen.....	100
Letter to Parent.....	90
Referral to Registered Dietitian.....	100

## Immunizations

Immunizations Reviewed & Discussed.....	90
Immunization Letter to Parent.....	80
HPV Immunization Offered to All Clients....	90
Increase HPV Immunization Completion Rate.....	80

## Tobacco Use and Vaping

Tobacco Use Assessed*.....	90-100
Cessation Counseling and Documentation*+.....	70- 90

## Peer/Medical Reviews

Assessment/Plan Related to Chief Complaint.....	90-100
System Review & Physical Exam Related to Chief Complaint.....	90-100
Education and Counseling Complete.....	90-100
Clinical Diagnosis and Decision-Making Appropriate.....	100
Lab Work Documented.....	100
Abnormal Lab Follow-Up.....	90
Appropriate Referral and Follow-Up.....	90

## Pregnancy/STI

STI Testing Ordered+.....	90-100
Screening for STI Risk.....	90-100
Abstinence & STI/Pregnancy Prevention Documentation.....	100
HIV Testing between 16-18 years of Age..	100
Screen for IPV/Sexual Coercion.....	90
3 month Follow-Up for POS Chlamydia.....	90
Education on Healthy Relationships/IPV....	100
Increased EPT Rate.....	80-100
PEP & PrEP Prescribed with POS STI....	80-100
Pregnancy Prevention/Risk Reduction Plan.	90
Pregnancy Prevention/Counseling & Referral Completion.....	90
Completion of Reproductive Plan.....	80



# Common CQI Indicators and Thresholds Used in CAHCs

## Mental Health



Clinical Diagnosis & Decision-Making Documented.....	100
Consent Signed.....	90
Entries Dated and Timed.....	90
Progress Made Toward Goal .....	90
90-Day Review/Discharge Summary Complete .....	90
Progress Note/Self-Report by Second Visit .....	90
Treatment Plan by Third Visit .....	90
Treatment Plan Current .....	90
Client Identifies Self as Improving .....	90
Jointly Developed Goals/Plan .....	90
Goals Based on Intake Summary .....	90
DSM Documented & Consistent with Assessment .....	90

## Mental Health Process



Consent Signed .....	100
Minor Consent Signed.....	90
Insurance Information Documented.....	90
HIPAA Rights/Rights & Responsibilities Documented.....	90
Documents Scanned in Chart .....	90
DSM Documented & Consistent with Assessment .....	90

Key: "\*" Meaningful Use Indicator. "+" CAHC Program Quality Measure  
Please note: All thresholds are percentages



# Common CQI Projects Used in CAHCs

## Immunizations

Increased HPV Immunization Rate  
Increased Influenza Immunization Rate  
Increased COVID-19 Immunization Rate

## Pregnancy/STI

Increased EPT Rate  
Increased Influenza Immunization Rate  
Increased COVID-19 Immunization Rate

## Primary Care/MH Care

Increased Risk Assessment Completion Rate  
Increased Documented Counseling on Risks  
Increased Well-Child Exams Completed Onsite  
Increased MH Screening Scores

## Process

Decreased Appointment No-Show Rate  
Decreased Client Wait Time  
Increased Well-Child Exams Completed Onsite  
Decreased Referral Time Between Medical & MH Providers

