

BTE Program Supports Practice Quality Improvement Efforts

By Albany Medical College's Goodman Diabetes Service

DIABETES CARE LINK

Albany Medical College's Goodman Diabetes Service has a long-standing commitment to quality care. Three of our physicians, Matthew Leinung, Daniel Lee, and James Desemone, first achieved recognition with distinction in 2000 from NCQA's Diabetes Provider Recognition Program (DPRP). In 2003, these original three physicians renewed their recognition, along with two of their colleagues, Mary Luidens and Mary Ellen Ehlers. Now, through Bridges to Excellence, our practice and others who achieve DPRP performance recognition are able to obtain rewards that reinforce the commitment we all have to quality diabetes care.

How do we use DPRP to help improve our quality of care?

Obtaining DPRP performance recognition is more than just obtaining a "piece of paper". The performance recognition process has played a very important role in our quality improvement efforts:

- ◆ We've learned from the process and our data and we are improving the care we deliver. For example, during the audit process, we realized that some

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procedures and laboratory tests were simply overlooked. Although each of the physicians used the ADA clinical practice recommendations, lack of systemization

translated into missed opportunities. So we instituted a paper/pen flow sheet which is completed by physicians, residents, and educators at each visit. These data are not entered or retrievable except by a medical record audit, so we are in the midst of implementing an electronic diabetes registry.

- ◆ The recognition process quickly gave structure and definition to our quality improvement program. We didn't spend months trying to agree on what to

measure, or when or how to measure it. Dr. Jim Desemone reports, "We all agreed that those measures were the critical ones, so we were vested in the program right from the beginning".



Daniel Lee, MD; James Desemone, MD; Mary Luidens, MD; and Mary Ellen Ehlers, MD

- ◆ It supports our team approach. Although the DPRP program is physician-focused, we work as a team. And teamwork is essential to meeting the standards. This is true not only in providing care, but in completing the application and using the data to guide and evaluate our quality improvement efforts. Division meetings, which involve faculty, residents, and staff include information and discussion about our clinical data and quality improvement goals, and how we are going to meet our goals.

Bridges to Excellence rewards support our quality improvement efforts.

Dr. Matthew Leinung, Head of the Division of Endocrinology & Metabolism at AMC, summed it up: "The program supports good clinical care. The addition of monetary compensation affirms the value of quality assurance to administrators and that is important!"