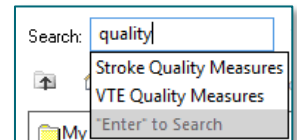
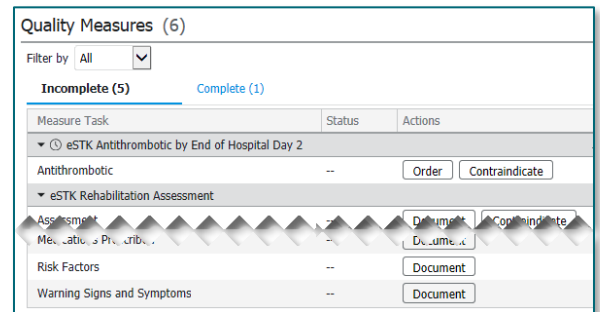


The Joint Commission/CMS has established a common set of National Hospital Inpatient Quality Measures that allow for standardized quality care to all inpatients. The goal of tracking these standards is to provide real-time feedback for clinicians regarding any actions that need to be taken prior to discharge.

## Quality Measures

This component is visible on the Nurse and Provider Views in PowerChart. The tool is a guide for actionable items to be completed prior to discharge.

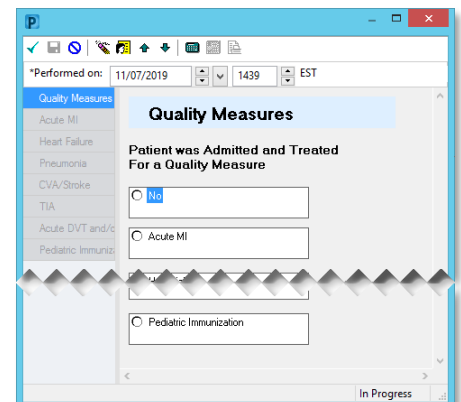
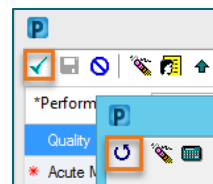
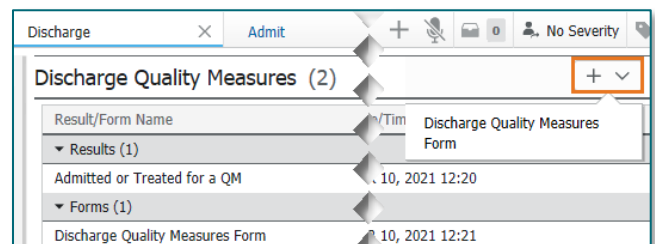
- As the tasks are documented, the measure will be moved to the **Complete** tab and a green checkmark will be seen next to the measure title.
- When specific PowerPlans are initiated, such as Stroke Hemorrhagic Module, the Stroke and VTE Quality Measures are populated on the **Quality Measures** component.
  - If a PowerPlan does not contain the imbedded measures, the provider can place a single-line order to activate the component.



## Discharge Quality Measures Form

Discharge Quality Measures are a required component of the Discharge MPage. To access the form, click the drop down to the right of the header and the form name will be displayed.

- Once the form is open, the provider can select the radio button of any pertinent diagnosis.
  - A secondary window will open with questions specific to the diagnosis. Once the answers are entered, providers will click the return button and **Sign** the form. The red asterisk will become a green checkmark.

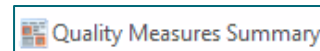


**NOTE:** A Discern alert will fire if the Discharge Order is placed without satisfactory documentation. Providers can click the link in the alert to document a contraindication or place orders.

## Quality Measures Summary

The tool acts as a checklist for quality measure-related documentation. It will also assist in quantifying the healthcare process and outcomes while offering high-quality care. The components retrieve data from the clinical workflow, such as ordering, medication administration, documentation of allergies and problems, or other structured documentation. As the documentation occurs in the patient chart, the applicable tasks in the component are completed. The incomplete tasks remain in the component.

➤ Click the **Quality Measures Summary** button in the toolbar.



➤ When the summary page is opened, all columns will be collapsed. Click the + at the top of the column to expand.

Quality Measures Status: All					
- HBIPS			+	+	+
Inpatient	Discharge	Status	SLB	TOB	JMM
N/A	N/A	N/A			
N/A	N/A	N/A			
○ ○ Assess					

- VTE orders will automatically be placed on all patients over 18 years of age and the status will default to **Ordered**.

- Icons will display indicating the status of the measure, as well as which section has outstanding tasks, Inpatient and/or Discharge.



- Full blue circles indicate a completed measure.
- Partial circles are seen when some documentation has been completed.
- Empty circles are incomplete.
- Timeclock icon signifies a time-sensitive measure needs to be completed.

➤ Click the + beside the patient's name to expand for more details.

[-] TESTING, HARRY L		10/10/1955	295510853
Age: 65	Room/Bed: B591/02	Location: 5BLA	Attending Patient
Years	Physician: TEST MD,	Arrival: 02/17/2021	Nurse Assigned: 03:50
	PROVIDER		Surgical Length Of Stay: 57 Days
Reason for Visit:			

➤ If information is missing, the reviewer will contact the provider. Providers can click the hyperlink to assess the documented information, such as medication and results, and determine if a Quality Measure is appropriate to order.

- If the patient does not clinically meet the qualifications, providers can opt to select a **Do Not Initiate** option of **Not Clinically Relevant** or **Primary Physician Request**.

**NOTE:** Providers will have the ability to filter the summary by changing the List or Condition dropdown selections.