

Whew! Auditing 180 CDS' Queries is a Workout but Worth the Effort

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Andrea Eastwood, MAS, RHIA, is a health information management (HIM) professional with over 25 years of experience in both acute and ambulatory care settings. She has worked at Trinity Health for the past 25 years at the corporate office and hospital setting in various leadership roles, including CDI, HIM, care coordination, case management, and cancer program leadership. In her current role as system director for clinical encounter and documentation excellence, she is responsible for CDI program leadership and oversight across both inpatient and observation CDI. Eastwood has presented on CDI topics at multiple national conferences.

One of the Largest Catholic Health Care Systems in the Nation

\$21.5B

In Revenue

26

States

1.3M*

Attributed Lives

\$1.4B*

Community Benefit Ministry

123K

Colleagues

8.3K

Employed Physicians
and Clinicians

26.6K

Affiliated Physicians

88

Hospitals**

17

Clinically Integrated
Networks

135

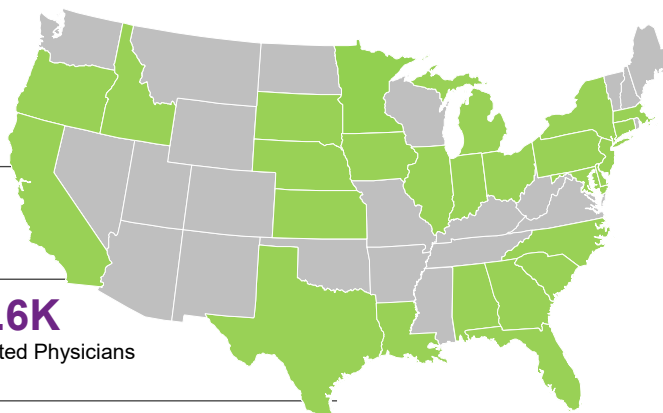
Continuing
Care Locations**

24

PACE Center
Locations**

136

Urgent Care
Locations**



FY22 data recast to include MercyOne 9.1.2022 acquisition, unless noted. *Trinity Health FY22 data. **Owned, managed or in JOAs or JVs.

Version: 11.1.22

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Trinity Health's Promise: What We Must Deliver

Trinity Health is a Catholic, **mission-driven health organization** that provides comprehensive and coordinated **health and well-being services** through a **network of organizations and partnerships** for our members - colleagues, physicians and people in communities - across the United States.

Trinity Health provides care for *all* in
body, mind and spirit, demonstrating that:


We Listen

We Partner in Achieving Health Goals


We Make It Easy



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Our Culture




Our Mission

We, Trinity Health, serve together in the spirit of the Gospel, as a compassionate and transforming healing presence within our communities.



Our Core Values


- Reverence
- Commitment to Those Who Are Poor
- Safety
- Justice
- Stewardship
- Integrity



Our Actions


As a Trinity Health colleague, I will:

- Listen to understand.
- Learn continuously.
- Keep it simple.
- Create Solutions.
- Deliver outstanding service.
- Own and speak up for safety.
- Expect, embrace and initiate change.
- Demonstrate exceptional teamwork.
- Trust and assume goodness of intentions.
- Hold myself and others accountable for results.
- Communicate directly with respect and honesty.
- Serve every person with empathy, dignity and compassion.
- Champion diversity, equity and inclusion.



Our Promise

We Listen.
We Partner.
We Make it Easy.




Our Vision


We will be the most trusted health partner for life.

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Learning Objectives



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Learning Objectives

- At the completion of this educational activity, the learner will be able to:
 - Understand how Trinity Health approached auditing its 180 CDSs across 42 CDI programs.
 - Understand how to select audit criteria, criteria weighting, and audit scoring.
 - Understand the timeline and work effort involved in conducting quarterly CDI audits.
 - Outline appropriate training and education needed based on audit results.
 - Identify the benefits of an active auditing program.
 - Implement a query audit program that can be scaled to a site's or organization's needs.

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Our Query Audit Journey

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Previous Query Audit Overview

- Prior to FY22, the Health Ministries conducted an annual audit of their CDSs queries
- The objective of the audit and the audit timeline was outlined by the System Office
- An audit tool was provided to all the sites and contained the audit criteria and scoring for each audited element
- The audit consisted of ten randomly selected queries per CDS for queries placed within the last three months
- A minimum of one query audit was to be completed by each site on an annual basis

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Previous Query Audit Observations and Outcomes

- The majority of the CDSs scored at or above the 95% passing threshold
- System Office spot checking of audit findings indicated inconsistency in how the audit criteria was applied/scored from site to site, resulting in varied audit results
- Some Health Ministries lagged in completing the audit according to the outlined schedule
- Some sites requested assistance from the System Office due to lack of ability to complete the audit at the site level
- There were inconsistencies in sharing the results of the audits with the individual CDSs
- The sites were responsible for addressing query education if a need was identified from the audit
- The annual audit sample per CDS represented <1% of all queries written

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Previous Query Audit – What We Learned

We felt there was value in conducting query audits and in providing feedback to our CDSs; however, we felt we could improve on the process specific to:

- Having greater consistency in how the audit criteria was applied and scored
- Conducting more frequent audits
- Meeting timelines for completing the audits
- Consistency in sharing the results with the CDSs
- Finding a way to collate the query audits results across all the sites

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New Query Audit Process

- We decided the System Office CDI Team would perform quarterly query audits across all 180 CDSs in FY22
- The audits would be conducted by the System Office CDI Manager and the System Office CDS Float Pool team of six CDSs
- The audits were comprised of 10 randomly selected queries per CDS each quarter
- Auditing for a site was completed by the same auditor for each quarter whenever possible
- Each individual audit result had a second-level review to reduce as much audit variability as possible

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New Query Audit Observations

- The query audit tool was updated to summarize individual and team scores as well as identify specific criteria for follow-up education
- The new query audit process took approximately 6–8 weeks to complete the 10-case query review for all of the 180 CDSs across Trinity Health—very labor intensive
- Collating and sharing the results took an additional 2–4 weeks
- The System Office was able to conduct three query audits in FY22
- The audit population represented approximately 4% of CDS queries written

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New Query Audit Tool

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The Query Audit Tool Was Updated and Included Three Main Components

Cells in columns C, D and E automatically populate. Please don't adjust the formulas.

QUERY REVIEW SUMMARY			
Query Reviews	Average	CDS Score	Follow Up/Action Plan
CDS #1	90.3	EDUCATION	
CDS #2	95.3	PASS	
CDS #3	95.7	PASS	
CDS #4	95.0	PASS	
CDS #5	97.9	PASS	
CDS #6	96.6	PASS	
CDS #7	94.5	EDUCATION	
-			
-			
-			
-			
-			
-			

TEAM SUMMARY		
TEAM AVERAGE SCORE	95.0	PASS

SCORING LEGEND	
PASS >= 95.00	
ADDITIONAL EDUCATION < 95.00	

- Individual CDS's Score
- Team Summary Score
- Auto populates from the results of each CDS's audit

Tab for Each Individual CDS's Audit Details

Query Review Summary Tab

The Individual CDS Tab Tracked the Details of Each CDS's Audit

[illegible]

Twenty query elements were evaluated across four areas of focus:

- Appropriateness of the query
- Query template and format
- Query follow-up and closure
- CDI impact

Each element was weighted, and if the element was not met, a point deduction was made.

The Individual CDS Tab

- 10 cases audited
- Tracked the specific account number
- The scoring of each element
- Notes from the auditor when point deductions were made

Appropriateness of the Query

- If the query was found to be leading, a 100-point deduction is made, and no further elements of the query were audited
- The query was also evaluated to determine the appropriateness of its timing

Appropriateness of Query	1. Is query posed in a non-leading way? <i>If query is leading, entire query fails and no further questions need to be reviewed.</i>	100
	2. Is the query appropriate for patient clinical presentation and timing (i.e. too soon or after documentation has been provided)?	6

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Query Template and Format

Query template and format	3. Is the appropriate query format used? (i.e. open-ended, multiple choice, yes/no type)(If No, reconsider this as a possible leading query?)	2
	4. Was the query language clear and concise and was the question posed to the provider easy to understand?	6
	5. Was the content of the clinical indicators, treatment, risk factors relevant and comprehensive to describe the patient scenario for which the query is being asked?	6
	6. Was the query format professional and free from punctuation, spelling, abbreviations and grammar errors and were sources within the record cited as appropriate? (citations should include document dates when there are multiple like documents, i.e. PN, Consults, etc.)	6
	7. Query Template -- was the most appropriate template used by the CDS? (i.e. specificity vs. clarification query template)	2
	8. Was the query template customized to the patient scenario for which the query is being asked (i.e. chemo induced anemia for non-cancer patient has been removed)?	2
	9. If a multiple choice query was used to query for specificity or clinical validation of a diagnostic term already documented by a provider, were clinically significant and reasonable options provided, over-and-above clinically unable to determine, unknown, etc. <i>(N/A only if not a multiple choice format query)</i>	10
	10. Does the query in the EMR include the name and phone number of the individual initiating the query?	4
	11. Did the query in the CDI software and the EMR and match?	2

- The focus of this section is to evaluate query quality:
 - Was the query in the correct format (multiple choice, open-ended, yes/no)?
 - Was the query clear to the provider?
 - Was the query professional and free from punctuation, grammar, spelling errors?
 - Was the correct template used for what was being queried ?
 - Were elements of the template tailored to the specific query need?
 - Does the query contain the CDS's contact information?
 - Did the query in the CDI software and electronic medical record match?

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Query Follow-Up and Closure

12. Did the CDS take follow up steps and document actions to obtain query response from the provider?	3
13. Did the CDS complete the Provider Response Field accurately in the CDI Software?	5
14. Did the CDS complete the Response Date and Time fields accurately in the CDI Software?	2
15. Was the query closed within 3 days of the response (no longer in pending status)?	1

- This section of the audit assessed query follow-up and closure elements:
 - Did the CDS take steps to follow-up on the query, and were those steps documented in their notes?
 - Was the query accurately closed in the CDI software, noting the correct provider response and date/time the query was responded to?
 - Was the query closed within 3 days of receiving the response?

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CDI Impact

CDI Impact	16. Was the Baseline Diagnosis/Px accurate for the query posed?	5
	17. Is the Anticipated Result accurate for the query posed?	2
	18. Is the Actual Result accurate for the query posed?	5
	19. Is the Primary Grouper Impact accurate?	5
	20. Is the Secondary Grouper Impact accurate? If no secondary impact = 0	2

- Our CDI software tracks the impacts of the CDS's queries, and this section of the audit evaluates if the CDS completed the required elements correctly to track the impact
- Higher point deductions are noted for elements that have great significance on impact tracking

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The Query Review Summary Tab Identifies Audit Education Concepts For Individuals and Teams



UPDATE

This spreadsheet will auto populate from the individual CDS tabs		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	Total Query Results	Score
CDS #1	FIN#	100	6	2	6	6	2	2	2	10	4	2	3	2	2	1	5	2	5	5	2		
Case 1	0	0	0	0	0	0	0	0	0	0	4	N/A	N/A	0	0	0	0	0	0	0	0	4	
Case 2	0	0	0	0	0	0	0	0	0	0	4	N/A	0	0	0	0	0	0	0	0	0	4	
Case 3	0	0	0	0	0	0	0	0	0	0	0	N/A	0	0	0	0	0	0	0	0	0	0	
Case 4	0	0	0	0	0	0	0	0	0	0	4	N/A	N/A	0	0	0	0	0	0	0	0	4	
Case 5	0	0	0	0	0	0	0	0	0	0	4	N/A	N/A	0	0	0	0	0	0	0	0	4	
Case 6	0	0	0	0	0	6	6	0	2	0	4	N/A	3	0	0	0	0	0	0	0	0	21	
Case 7	0	0	0	2	0	6	0	2	2	0	4	N/A	0	0	0	0	0	0	0	5	0	21	
Case 8	0	0	0	0	0	6	6	0	2	0	0	N/A	N/A	0	0	0	0	0	0	0	0	8	
Case 9	0	0	0	0	0	6	6	0	0	N/A	4	N/A	N/A	0	0	0	5	0	0	0	0	21	
Case 10	0	0	0	0	0	6	6	0	0	0	4	N/A	N/A	0	0	0	5	0	0	0	0	21	
																						Average	21
CDS #2																							
Case 1	0	0	0	0	0	0	0	0	2	0	4	N/A	0	0	0	0	0	0	0	0	0	6	
Case 2	0	0	0	0	0	0	0	0	2	0	4	N/A	0	0	0	0	0	0	0	0	0	6	
Case 3	0	0	0	0	0	0	0	0	2	0	4	N/A	0	0	0	0	0	0	0	0	0	6	
Case 4	0	0	0	0	0	0	0	0	2	0	4	N/A	0	0	0	0	0	0	0	5	0	11	
Case 5	0	0	0	0	0	0	0	0	0	0	4	N/A	0	0	0	0	0	0	0	0	2	6	
Case 6	0	0	0	0	0	0	0	0	0	0	4	N/A	N/A	0	0	0	0	0	0	0	0	4	
Case 7	0	0	0	0	0	0	0	0	0	0	4	N/A	4	N/A	N/A	0	0	0	0	0	0	4	
Case 8	0	0	0	0	0	0	0	0	0	0	N/A	4	N/A	N/A	0	0	0	0	0	0	0	4	
Case 9	0	0	0	0	0	0	0	0	0	0	0	N/A	N/A	0	0	0	0	0	0	0	0	0	
Case 10	0	0	0	0	0	0	0	0	0	0	0	N/A	N/A	0	0	0	0	0	0	0	0	0	
																						Average	

- The Query Review Summary Tab autopopulates with the results of each individual CDS's audit

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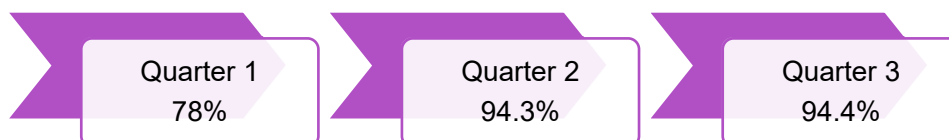
New Query Audit Results



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New Query Audit Results

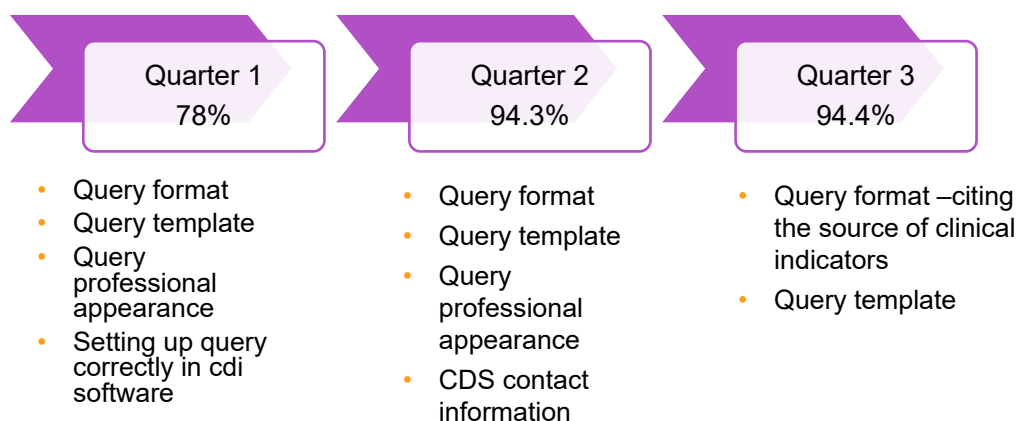
- We were able to complete three audits in FY22 across our 180 CDSs.
- We were just short of our goal of 95% by the end of the FY; however, were pleased we were able to sustain the improvements made in Quarter 2.



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New Query Audit Observations



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Post-Audit Education

- The System Office outlined and provided education after each audit and at the end of the three audits for individuals that did not show improvement or who had a decline in audit results
- Education after each audit was focused on ensuring the CDSs understood the elements being audited
- The year-end education consisted of two levels:
 - Level I – Query formatting, correct template use, query follow up and closure, CDI impact elements
 - Level II – Compliant query practices
 - Query Education Level I and II modules were created and placed in our education system
 - CDSs who had not achieved a score of 95% across any of the three audits or who declined in audit scores were required to take both levels

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New Query Audit Challenges

- Quarter 1 audit scores were lower than previous years, resulting in mixed acceptance of the audit results
- Some CDI leaders did not share the results timely with the CDS colleagues and did not provide feedback to improve audit scores for the next quarter for some CDSs
- Process was labor intensive and took 8–10 weeks to complete an audit cycle

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New Query Audit Improvements

- Improved consistency in how the audit criteria was applied and scored as a result of the System Office conducting the audits, resulting in acceptance of audit results as we progressed through Quarter 2
- The updates made to the Audit Tool offered the ability to easily capture scores across all 180 CDSs as well as identify criteria elements for individual and team education
- Follow-up education outlined by the System Office had more structure, was completed timely, and was tracked through our education system.
- We feel the new query audit process was an overall success

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Thank you.

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