

**Corvette Community Clinic
Key Performance Indicator Dashboard**

Key Performance Indicator	Reporting Frequency	Target Value	1st Qtr	Change to Target	2nd Qtr	Change to Target	3rd Qtr	Change to Target	4th Qtr	Change to Target	YTD	Change to Target
Utilization of Services/Access												
% of Providers Meeting Established Productivity Standards:												
Internal Medicine	Quarterly	90%	66%	↓	88%	↔	68%	↓	70%	↓	73%	↓
Family Practice	Quarterly	90%	91%	↑	79%	↓	87%	↔	80%	↓	84%	↓
Pediatrics	Quarterly	90%	106%	↑	117%	↑	101%	↑	100%	↑	106%	↑
OB/GYN	Quarterly	90%	174%	↑	183%	↑	180%	↑	174%	↑	178%	↑
Mid-level (APN)	Quarterly	90%	71%	↓	66%	↓	106%	↑	100%	↑	86%	↔
Social Services	Quarterly	90%	121%	↑	106%	↑	138%	↑	110%	↑	119%	↑
Nutrition	Quarterly	90%	143%	↑	146%	↑	137%	↑	120%	↑	137%	↑
% of Missed Appointments	Quarterly	<20%	20%	↔	17%	↑	15%	↑	12%	↑	16%	↑
% of Missed Appointments with Completed Follow-Up	Quarterly	75%	50%	↓	45%	↓	52%	↓	66%	↓	53%	↓
% of referrals that are completed	Quarterly	50%	32%	↓	35%	↓	51%	↑	50%	↑	42%	↓
Satisfaction												
Number of employee complaints	Quarterly	< 2 mo	0	↑	0	↑	5	↑	4	↑	9	↑
% of patients with overall satisfaction rates of "very satisfied" or "satisfied"	Quarterly	95%	93%	↔	95%	↑	95%	↑	90%	↔	93%	↔
% of patients who would recommend CCC to a friend on relative	Quarterly	95%	94%	↔	96%	↑	96%	↑	92%	↔	94%	↔
% of providers with overall satisfaction rates of "very satisfied" or "satisfied"	Semi-Annually	80%	78%	↔			80%	↑			79%	↔
% of providers overall satisfied with quality of services provided	Semi-Annually	90%	86%	↔			88%	↔			87%	↔
% of providers who would recommend CCC as a place to work	Semi-Annually	80%	76%	↔			86%	↑			81%	↑
% of employees with overall satisfaction rates of "very satisfied" or "satisfied"	Semi-Annually	80%	66%	↓			84%	↑			75%	↔
% of employees who would recommend CCC as a place to work	Semi-Annually	80%	72%	↓			84%	↑			78%	↔
Clinical Care												
Diabetes												
% patients with diabetes with A1c ≤ 7%	Quarterly	50%	8%	↓	14%	↓	32%	↓	40%	↓	24%	↓
% of patients with diabetes with A1c ≤ 9%	Quarterly	75%	16%	↓	17%	↓	20%	↓	20%	↓	18%	↓
% of patients with diabetes with BMI < 30	Quarterly	≥38%	44%	↑	38%	↑	42%	↑	34%	↔	40%	↑
% of patients with diabetes who have a controlled BP of 130/80	Quarterly	>40%	36%	↔	34%	↓	32%	↓	44%	↑	37%	↔
Cardiovascular Disease												
% of patients with HTN who have a controlled BP of 140/90	Quarterly	78%	66%	↓	68%	↓	64%	↓	74%	↔	68%	↓
Prenatal Care												
% of pregnant women starting prenatal care in the 1st trimester	Quarterly	82%	82%	↑	78%	↔	84%	↑	93%	↑	84%	↑
% of low birth weight babies	Quarterly	< 2%	1%	↑	1%	↑	0%	↑	1%	↑	1%	↑
Obesity												
% of adults with BMI < 30	Quarterly	≥38%	55%	↑	40%	↑	35%	↔	34%	↔	41%	↑
% of children over age of 2 who are obese or severely obese	Quarterly	25%	35%	↑	33%	↑	33%	↑	31%	↑	33%	↑
Preventive Health												
% of children ≤ 2 with appropriate immunizations documented	Quarterly	90%	86%	↓	67%	↓	54%	↓	72%	↓	70%	↓
% of children and adolescents who receive preventive dental screening	Quarterly	57%	38%	↓	0%	↓	0%	↓	55%	↔	23%	↓
% of women ages 24 -64 with documented cervical cancer screening	Quarterly	66%	23%	↓	40%	↓	24%	↓	66%	↔	38%	↓
% of adult patients who are screened for depression	Quarterly	50%	35%	↓	40%	↓	55%	↑	78%	↑	52%	↑
Safety/Risk Management												
Number of patient complaints	Quarterly	< 3 mo.	0	↑	0	↑	1	↑	4	↑	5	↑
% of patient complaints resolved in a timely manner	Quarterly	100%	na	na	na	na	100%	↑	95%	↔	98%	↔
Number of adverse occurrences (Incidents)	Quarterly	< 2 mo	2	↔	3	↔	1	↑	4	↑	10	↑
% of incidents completed within 14 business days	Quarterly	90%	100%	↑	100%	↑	100%	↑	100%	↑	100%	↑
% of LIPs with current CCC credentialing/privileging status	Quarterly	90%	100%	↑	100%	↑	77%	↓	88%	↔	91%	↑
% of Other Licensed Prof. with current CCC credentialing/privileging status	Quarterly	90%	33%	↓	29%	↓	54%	↓	78%	↓	48%	↓
% of providers who score at least 90% on Medical Record Keeping Review	Quarterly	90%	86%	↔	90%	↑	72%	↓	94%	↑	86%	↔
% of providers who score at least 90% on Medical Record Content Peer Reviews	Quarterly	90%	84%	↓	78%	↓	88%	↔	96%	↑	87%	↔
% of CCC staff completing annual infection control education/training	Annually	100%			100%	↑					100%	↑
% of panic value abnormal lab results reported to providers within 1 hour	Quarterly	90%	96%	↑	92%	↑	89%	↔	96%	↑	93%	↑
% of overall compliance with clinic maintenance monitoring	Quarterly	80%	78%	↓	82%	↑	83%	↑	92%	↑	84%	↑
Financial												
Total cost per patient	Quarterly	≤ 10% incr	\$645	↑	\$574	↑	\$612	↑	\$595	↑	\$607	↑
Medical cost per medical encounter	Quarterly	≤ 10% incr	\$200	↓	\$186	↔	\$175	↑	\$190	↓	\$188	↔
Change in net assets to expense ratio	Quarterly	> 5%	5.0%	↔	1.0%	↓	9.0%	↑	12.0%	↑	6.8%	↑
Working capital to monthly expense ratio	Quarterly	> 4%	6.0%	↑	-2.1%	↓	3.2%	↓	7.6%	↑	3.7%	↔
Long term debt to equity ratio	Quarterly	< 0.5%	1.0%	↓	0.5%	↑	0.2%	↑	0.4%	↑	0.5%	↔

Legend:
 nr=not reported; nd=not due; na=not applicable; Boldface font=HRSA required measure
 Green color-meets or exceeds goal; yellow=within 5 percentage points of goal; and red= more than 5 percentage points of goal.
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