

SOUTH CAROLINA OFFICE OF RURAL HEALTH

Investment. Opportunity. Health.

Improving Quality Reporting in Provider-based RHCs

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Webinar Agenda

Quality Improvement Overview Quality Improvement Metrics Quality Improvement Methodology



Triple Aim for Healthcare Improvement

Improve the experience of care, **improve** the health of populations, and **lower** the per-capita cost of care.



Source: http://www.ihi.org/engage/initiatives/TripleAim/Pages/default.aspx



Triple Aim & Value



Source: http://www.ihi.org/engage/initiatives/TripleAim/Pages/default.aspx



Quality Reporting & The 5 Stages of Grief

 Denial → Anger → Depression → Bargaining → Acceptance





Your data is wrong





I'm calling the C-Suite and emailing every email listserve I can find!!!



Bargaining

Why Can't You Just Give Me The Money?



Depression

There's no reason to work on this. We will never meet these ridiculous goals!





WE CAN DO IT!!!



What is the Cure?

Five stages of Grief:

- Denial
- Anger
- Depression
- Bargaining
- Acceptance



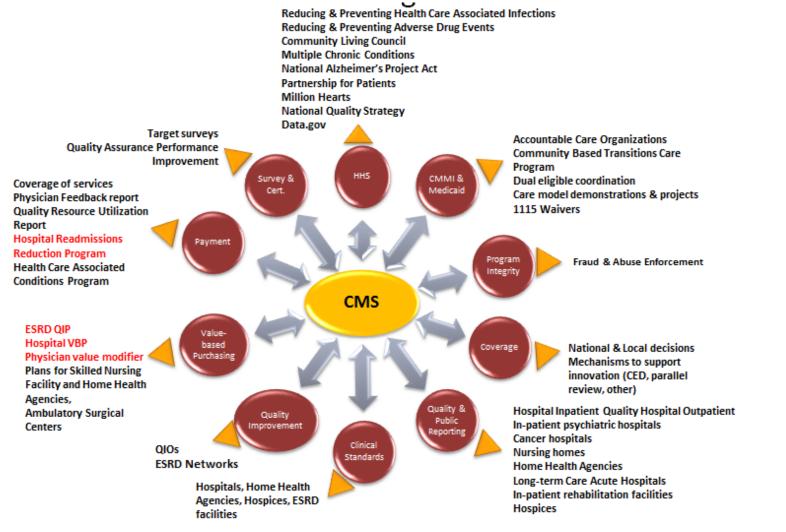
Quality Improvement

A <u>formal approach</u> to the analysis of performance and systematic efforts to improve it:

- Ensures changes are for the better/positive
- Employs data and small tests to identify improvement opportunities
- Based on improvement science, used to raise the standard of excellence
- Best practices & innovation

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Quality Improvement Metrics

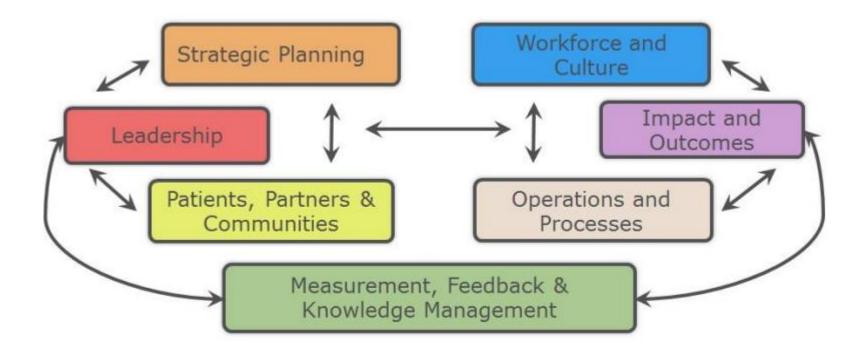


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Picture: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Value-Based-Programs.html



The Baldrige Framework

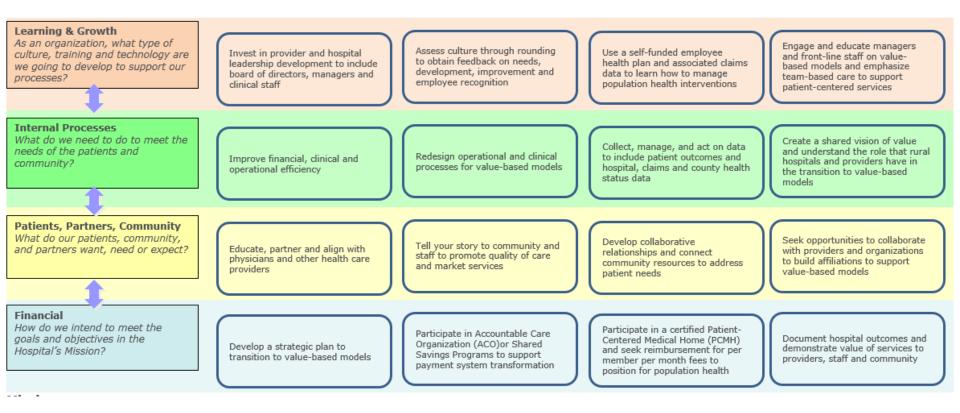


Creating a Blueprint for CAH Performance Excellence

Picture: https://idph.iowa.gov/Portals/1/Files/WICPortal/Resources_13_2013_WIC_Contractor_s_Meeting_QI_Presentation.pdf



Hospital Transition to Value Strategy Map



https://www.ruralcenter.org/sites/default/files/Value-Based%20Strategy%20Map%20Template%208%201%2017.docx



Hospital Transition to Value Balanced Scorecard

Learning and Growth

What skills, training and technology needs to be improved to support key processes? What training, resources and support do staff need to work effectively?

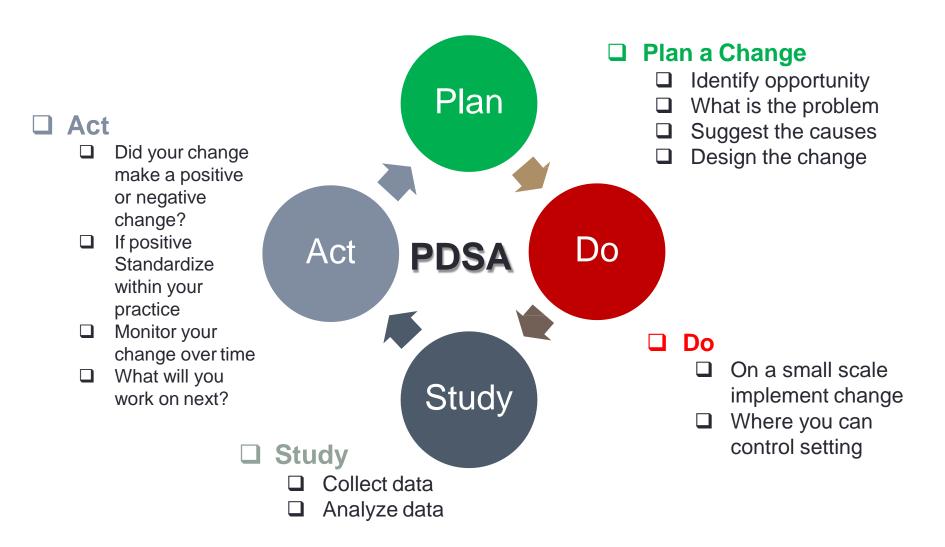
What	Action Plan	How		Who	When	Results					
Strategic Objective: What is the strategy to achieve?	Initiative(s): What actions are needed to achieve objective?	Measure: What indicator is required to track and monitor the objective?	Target: For each indicator, what performance level is required to achieve the objective?	Responsible: Team member to track and report measure.	Frequency: How often to report measure?	Qtr. 1	Qtr. 2	Qtr. 3	Qtr. 4	Annual Avg.	Trend: Show graph to indicate change over time

https://www.ruralcenter.org/sites/default/files/Value-

Based%20Balanced%20Scorecard%20Template%208%201%2017_0.docx



Plan, Do, Study, Act



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PDSA – Before You Begin

Aim

Measures

Ideas

What are we trying to accomplish?			
How will we know that a change is an improvement?			
What changes can we make that will result in improvement?			

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What Are We Trying To Accomplish?

AIM: A specific, measurable, time-sensitive statement of expected results of an improvement process.

Actionable and Useful Aims

- Quantifiable answer to the question above
- Provide rationale & importance to patient, practice and community
- Specifies the target population and time period

Bringing Aim into Focus

- Know thy measure
- Brainstorming
- Frontline input
- Best Practices/Bright Spots
- Change packages/Implementation guide



PDSA – Before You Begin

Aim What are we trying to accomplish? How will we know Measures

Ideas

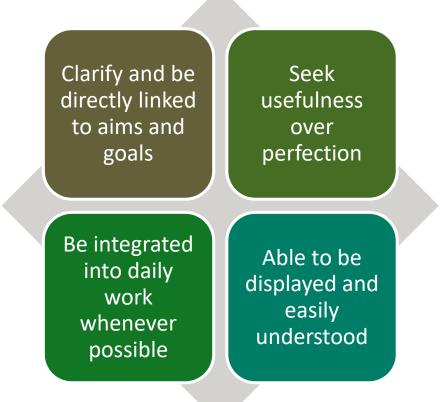
that a change is an improvement? What changes can we

make that will result in improvement?



How Will We Know The Change is an Improvement?

MEASURES: Measures are indicators of change. They are the cornerstone to incremental quality improvement and also ensure change is sustained.



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Where to Measure

- Use your Own Data
 - Electronic Medical Records
 - Practice Management System
 - o Billing system
 - Chart reviews
 - Patient feedback
- Use National Data Sources
 - Blue Cross Blue Shield Health Index
 - o <u>CMS Data Navigator</u>
 - Health System Data Center
 - o Kaiser State Health Facts
 - <u>National Ambulatory Medical Care Survey (NAMCS);</u>
 <u>National Hospital Ambulatory Medical Care Survey (NHAMCS)</u>
 - o <u>Rural Data Portal</u>



PDSA – Before You Begin

Aim

Measures

Ideas



What changes can we make that will result in improvement?



What are we trying to accomplish?

How will we know that a change is an improvement?

"If you are unable to understand the cause of a problem, it is impossible to solve it."

-Naoto Kan -

- Perceived Process (What we think is happening)
 - Reality Process (What is really happening)
- Ideal Process (efficient, effective, measurable and <u>reliable</u> <u>process</u>)

Improvement Strategies

- Eliminate Waste hand-offs
- Improve Work Flow order process
- Optimize Inventory availability of vaccines
- Change the Work Environment
- Enhance the Producer/Customer Relationship patient engagement
- Manage Variation one system, one practice
- Design systems to avoid mistakes -- huddles
- Focus on the Product or Service

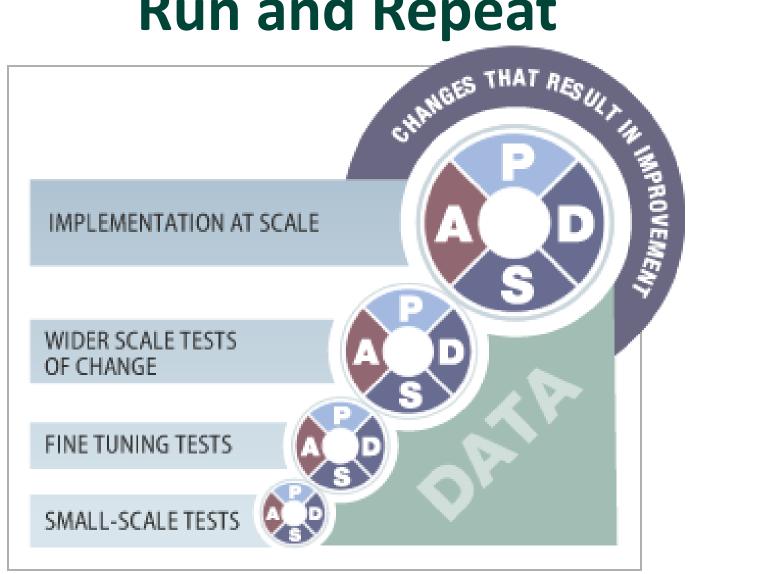


Selecting Ideas to Test

- Direct link to the aim
- Likely impact of the change (Avoid low-impact changes.)
- Potential for learning
- Feasibility
- Logical sequencing
- Series of tests that will build on one another
- Scale of the test (e.g., 3 times NOT 30)
- Shortness of the cycle (1 week NOT 1 month)
- Size of the group (to start smaller is better)



Run and Repeat





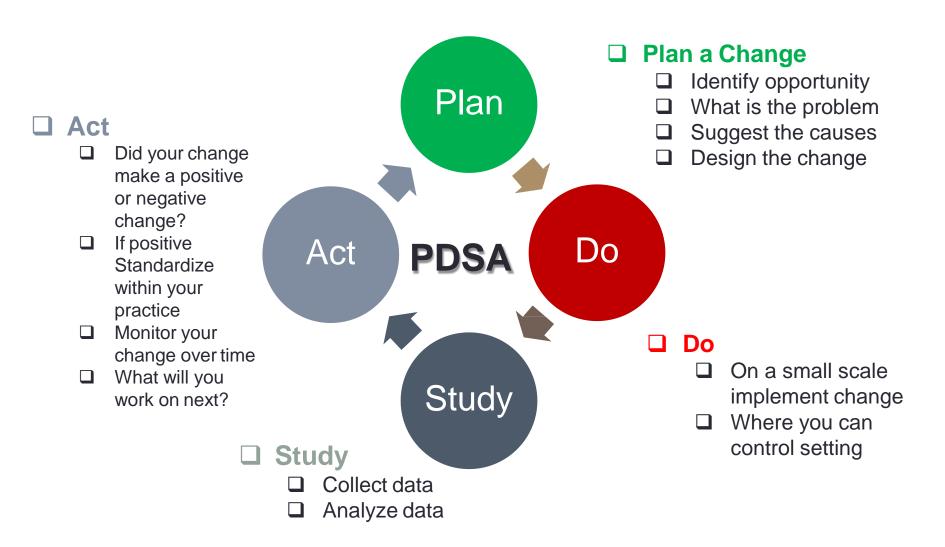
Key Points for PDSA Cycles

- Always document the questions you want to address and make a prediction prior to doing a PDSA
- Do initial cycles on smallest scale possible

 Think baby steps...a "cycle of one" usually best
 "Failed" cycles are good learning opportunities when small
- Learn from "failed" tests:
 - o Was test conducted well?
 - Does the change tested need modification in our setting?
 - o Were measures sufficient to detect improvement?
 - o Was prediction/theory wrong?



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SHIP Purchasing Menu

Value-Based Purchasing (VBP) Investment Activities

Activities that support improved data collection to facilitate quality reporting and improvement. **Refer** to <u>SHIP Resources</u> and <u>SHIP 2019 Allowable</u>

Investments

A. Quality reporting data collection/related training (e.g. eCQM implementation)

B. HCAHPS data collection process/related training

C. Efficiency or quality improvement training in support of VBP related initiatives

D. Provider-Based Clinic Quality Measures Training

E. Alternative Payment Model and Merit-Based Incentive Payment Training



SHIP Purchasing Menu

Accountable Care Organization (ACO) or Shared Savings Investment Activities

Activities that support the development or the basic tenets of ACOs or shared savings programs. **Refer to** SHIP Resources **and** SHIP 2019 Allowable

Investments.

A. Computerized provider order entry hardware/software and/or training

B. Pharmacy services implementation

C. Disease registry training and/or

software/hardware

D. Efficiency or quality improvement training in

support of ACO or shared savings related initiatives

E. Systems performance training

F. Mobile health hardware and/or software

G. Community paramedicine training and/or

hardware/software installation/use

H. Health Information Technology Training for

Value and ACOs



SHIP Purchasing Menu

Payment Bundling (PB) or Prospective Payment System (PPS) Investment Activities

Activities that improve hospital financial

processes. Refer to SHIP Resources and SHIP

2019 Allowable Investments.

A. ICD-10 software

B. ICD-10 training

C. Efficiency or Quality Improvement Training in support of PB or PPS related initiatives

D. S-10 Cost Reporting Training

E. Pricing Transparency Training



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