

Indiana Flex Program

Fiscal Year (FY) 2019 Significant Accomplishments, Best Practices, and Lessons Learned

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Program Area 1: CAH Quality Improvement

The Indiana State Office of Rural Health (SORH) team conducted a swing bed (SWB) initiative to improve and build critical access hospital (CAH) SWB programs in FY 2019. Participation met expectations as a total of 34 hospitals (97%) participated in the initiative. The initiative provided education and guidance on participation, regulatory requirements, quality improvement, marketing, admission criteria, and policies and procedures, using the Minimum Data Set (MDS) as documentation guidelines for CAHs and building an interdisciplinary team. Education topics included quality improvement specific for SWBs, trauma-informed care, payment-driven payment models, comparison of patient health records with the associated detailed bill, and marketing strategies.

The Indiana SORH team also conducted regional education programs. Two education sessions included the CAHs from two major health systems, and two sessions were for the north and south CAH locations. As the project progressed and as COVID-19 impacted the country, they also added education on COVID-19 and associated Centers for Medicare & Medicaid (CMS) SWB waivers. Individual technical assistance (TA) was provided as requested via email, virtual webinar, or onsite.

CAHs were active participants by evaluating and updating admission criteria, improving marketing strategies, building a solid foundation for the SWB program, educating staff, and improving the patient quality of care and transition from the hospital. One CAH identified many improvement areas and temporarily halted SWB admission to implement appropriate identified

improvement strategies. One CAH received state survey approval and initiated a new SWB program for their hospital.

Lessons learned during this project include:

The Indiana SORH team recommends other states implement focused initiatives on CAH SWB programs. Hospitals have expressed their gratitude for the program, and this was the first initiative to be entirely focused on the SWB program. Indiana has continued education into FY 2020 and now has 40 CAH staff members committed to obtaining an SWB Management certificate. All 34 CAHs continue to be engaged and seek TA and guidance.

Program Area 2: CAH Operational and Financial Improvement

With Purdue Health Advisors (PHA), operational and financial improvement took the form of Lean health care training, with twelve respondents (or 38.71%) saying that their CAH received financial or operational improvement through the Indiana Flex Program. PHA provided prep, delivery, and follow-up coaching for Lean training to six CAHs with certified Lean offices to ensure a pipeline of qualified expertise was available to replace turnover or need for increased skill acquisition and trained staff's current skills were sustained. The Indiana Flex Program provided training for 15 Lean practitioners through three cohorts and a customized Gemba coaching.

This year, enrolled organizations were introduced to the Lean service cell and how to advance their skill to execute a Rapid Improvement Event successfully. Their training has evolved into a more customized approach delivered in two sessions at each site. The first session is didactic content followed by their Lean experts facilitating a Rapid Improvement Event so candidates can experience the delivery in person before leading their certifying event.

Lessons learned during this project include:

Self-directed Lean teams can move vertically and horizontally, executing process improvement work aligned with strategic priorities for the enterprise and catalyzing to achieve an unprecedented level of excellence in rural health.

Executive leaders at Franciscan Health in Rensselaer used Lean thinking to cascade communication throughout their organization. The situation required innovation and the constant shifting of services in response to changing advice from the Centers for Disease Control and Prevention (CDC). They

were able to respond and conduct real-time experiments supported by standard work.