MICAH Quality Network

DECEMBER 2010

“A leader is someone you choose to follow to a place you wouldn’t go alone”

Joel Barker, Futurist
MICAH Product Lines 36 Facilities

- Patient Registrations: 1,786,841
- Emergency Patients: 289,399
- Urgent Care: 95,320
- Outpatient Infusion: 30,326
- Transfers to another Hospital: 12,568
- Observation Patients: 10,402
System Map of: MICAH Quality Network

Input
- Environment
- Equipment

Guidelines & Models
- People

Processes
(The work we do)
- Structured Meetings
- Communicate to CAH
- Measure Development
- Data Reporting
- Benchmarking
- Best Practice Review
- Recognition Program
- Annual CAH Survey

Output Feedback
- Web Data Reports
- QCAH List-serve
- Finance Support for QA Software & HCAHPS
- Export Data to CMS, MHA Transparency, BCBS P4P
- Member Specific Quality Reports with Benchmarking
- Quarterly Newsletter
- Annual Awards Program
- MICAH Transfer Measures

Measurement and Feedback (How will we know?)
- Customer Feedback

Process Feedback
- Executive Committee
- Committee Members
- MCRH CAH Liaison
- BCBS

Outputs
(products and services)
- Patients
- Hospital CEOs
- MPRO
- MHA
- Leapfrog
- CMS
- HRSA
- Executive Committee
- Committee Members
- MCRH CAH Liaison
- BCBS

Customers
(internal and external)

Aim and Purpose of the System
Support Local Quality Leaders. Improve the performance of the CAH Members. Promote the value of CAH in the continuum of care.
Aim and Purpose of the MICAH Quality Network System: a subsystem of Michigan Center for Rural Health

Support Local Quality Leaders
Improve the Performance of the Member CAHs
Promote the Value of CAHs in the Continuum of Care.
Processes
(The work we do)

Structured Quality Quarterly Meetings

Communicate Information to CAH Quality Staff

Measure Development, Definition, Credibility

Automatic Data Reporting to CMS & BCBS
Support for P4P
Distribute Aggregated Results
Support CMS Warehouse & Compare

Best Practice Review, Presentation, Education

PI Education

Quality Recognition Program

Annual CAH Survey
Outputs
(products and services)

Web Based Data Reports

QCAH List-serve

Finance Support for QA Software & HCAHPS

Export Data to CMS, MHA Transparency, BCBS P4P

Member Specific Quality Reports with Benchmarking

Quarterly Newsletter

Annual Awards Program

MICAH Certified Transfer Measures
Customers
(internal and external)

Internal
- Executive Committee
- Committee Members
- MCRH CAH Liaison

External
- Patients
- Hospital CEOs
- MPRO
- MHA
- Leapfrog
- CMS
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- BCBS
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**Processes**
- Structured Meetings
- Communicate to CAH
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- Data Reporting
- Benchmarking
- Best Practice Review
- Recognition Program
- Annual CAH Survey

**Outputs**
- Web Data Reporting
- QCAH List-serve
- Finance Support for QA
- Software & HCAHPS
- Export Data to CMS,
- MHA Transparency, BCBS P4P
- Member Specific Quality Reports with
- Benchmarking
- Quarterly Newsletter
- Annual Awards Program
- MICAH Transfer Measures

**Customers**
- Patients
- Hospital CEOs
- MPRO
- MHA
- Leapfrog
- CMS
- HRSA
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- BCBS

**MCRH, State Office of Rural Health**
Provides Flex/SHIP Grant
Funding & Staff Support
System Map of: MICAH Quality Network

**Input**
- Environment
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- People

**Processes**
- Structured Meetings
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- Measure Development
- Data Reporting
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**Outputs**
- Web Data Reporting
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**Customers**
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**MPRO, CMS-QIO Provides Quality Consultation & Annual Award Support**
System Map of: MICAH Quality Network

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Output Feedback
- Process Feedback
- Output Feedback

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MHA, Core Options Data Vendor
Provides Data Definition and Submission Support to CMS, BCBS P4P
## Feedback for MICAH Quality Network

### Measurement and Feedback (How will we know?)

<table>
<thead>
<tr>
<th><strong>Process Measures</strong></th>
<th><strong>Output Measures</strong></th>
<th><strong>Customer Measures</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting Participation</td>
<td>CAH Performance on selected Measures</td>
<td>Ongoing participation</td>
</tr>
<tr>
<td># Core Option Users</td>
<td>BCBS P4P participation</td>
<td>MPRO –MHA Feedback</td>
</tr>
<tr>
<td># List-serve Users</td>
<td># Submitting Data to CMS MHA</td>
<td>Flex Dollar Support</td>
</tr>
<tr>
<td>MHA/MPRO participation</td>
<td>% Participating CAHs</td>
<td>CEO Feedback</td>
</tr>
<tr>
<td>CAH Distribution by Reported Measure</td>
<td></td>
<td>BCBS P4P Certification</td>
</tr>
</tbody>
</table>

### Diagram

```
Input

Processes

Output Feedback

Process Feedback

Output

Customers
```

Customer Feedback
ED Transfers

2Q09 – 1Q10

Total Patients: 12,147
Min Patients: 88
Max Patients: 861
ED Transfers

TRO-6: Vital Signs (BP/P/R) Within 15 Minutes of Transfer
Opportunity for Critical Access Hospital Transparency

- Michigan critical access hospitals that are publishing ED Transfer data on the MHA’s MI Hospital Inform web site (http://www.mihospitalinform.org) are demonstrating their commitment to public accountability to consumers.
Outpatient Measures

0.00% 10.00% 20.00% 30.00% 40.00% 50.00% 60.00% 70.00% 80.00% 90.00% 100.00%

OP-7 68.00% 66.94% 92.42% 95.63% 43.96% 32 12 12

OP-6 Value

OP-5c 12

OP-5b 12

OP-4c 92.42%

OP-4b 95.63%

OP-3 78

OP-2 43.96%

OP-1 32

2Q09 – 1Q10
## Inpatient

<table>
<thead>
<tr>
<th>Measures (2Q10)</th>
<th># Facilities Collecting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute Myocardial Infarction (AMI)</td>
<td>18</td>
</tr>
<tr>
<td>Heart Failure (HF)</td>
<td>26</td>
</tr>
<tr>
<td>Pneumonia (PN)</td>
<td>31</td>
</tr>
<tr>
<td>Surgical Care Improvement Project (SCIP)</td>
<td>20</td>
</tr>
<tr>
<td>Percent of patients who reported that their nurses &quot;Always&quot; communicated well</td>
<td>MIACH (16)Avg.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>MIACH (16) Avg.</td>
<td>78%</td>
</tr>
<tr>
<td>Same as National Average</td>
<td>77%</td>
</tr>
<tr>
<td>Higher Than National Average</td>
<td>79%</td>
</tr>
<tr>
<td>Lower Than National Average</td>
<td>77%</td>
</tr>
</tbody>
</table>

Percent of patients who reported that their doctors "Always" communicated well:

- MIACH (16) Avg. | 78% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who reported that they "Always" received help as soon as they wanted:

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who reported that their pain was "Always" well controlled:

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who reported that staff "Always" explained about medicines before giving it to them:

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who reported that their room and bathroom were "Always" clean:

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who reported that the area around their room was "Always" quiet at night:

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who reported that they were "Always" given information about what to do during their recovery at home:

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest):

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |

Percent of patients who reported "YES" on the question: "Would you definitely recommend the hospital?"

- MIACH (16) Avg. | 80% | 80% |
- Same as National Average | 77% | 80% |
- Higher Than National Average | 79% | 80% |
- Lower Than National Average | 77% | 80% |
CAHs & Transitions of Care
Readmissions

Are you participating in the MiSTARR or other readmission reduction project?
Number of Responses = 30

Yes 27%
No 73%
CAHs & Transitions of Care STEMI Projects

Do you participate in a cardiac STEMI project?
Number of Responses = 29

- Yes: 55%
- No: 45%
Transitions of Care
STEMI Projects

Participating With

• Sparrow Health System (2)
• Mid Michigan Medical Center
  • Munson Medical (3)
  • Spectrum Health (5)
• Covenant Healthcare (2)
  • St. Mary’s – Saginaw
• Marquette General Hospital
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