

## RHPI Project 101:

## RHPI Approach to Performance Improvement

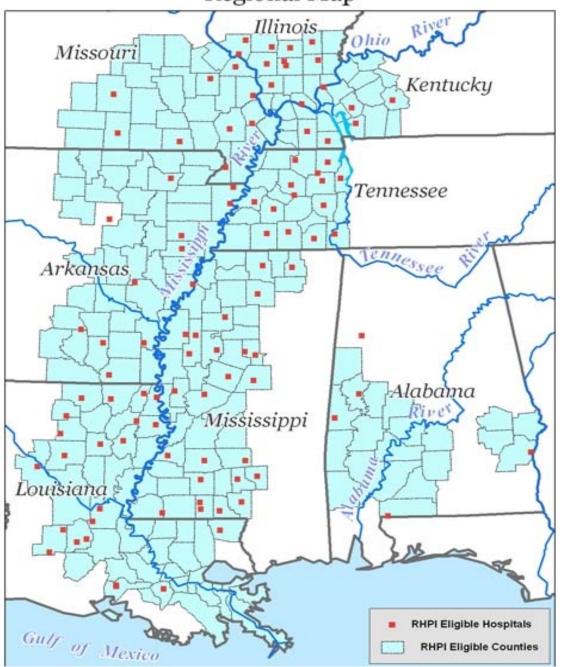
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RHPI Project is a program of Mountain States Group, Inc.

## **RHPI Project Goals**

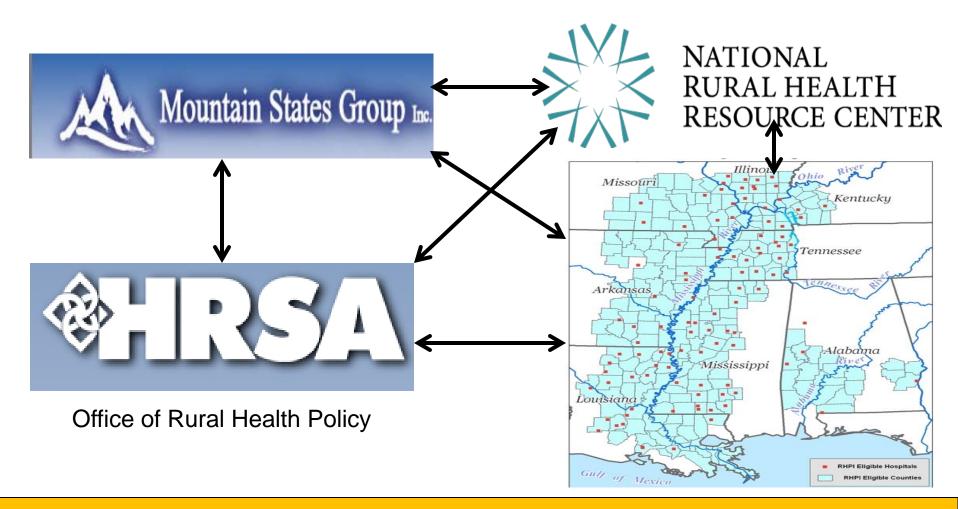
To improve and sustain the financial, operational and clinical performance of rural hospitals in the Delta Region.

Rural Hospital Performance Improvement Project Regional Map



RHPI serves rural hospitals <200 beds in **Delta Regional** Authority (DRA) counties / parishes in 8 state region





Purpose: to provide Performance Improvement technical assistance and sustainability trainings to state partners & hospitals

## **RHPI Project Goals**

RHPI Project provides comprehensive and ongoing technical assistance to Delta eligible hospitals through:

- 1. On-site Consultations
- 2. Feedback Assessments
- 3. Session in Sustainability Trainings

### **Available Onsite Consultation Services**

Balanced Scorecard (BSC)

**Board Training and Strategic Planning** 

**Business Office Operations Assessment** 

Charge Master Coding Review & Mapping Analysis

**Community Engagement** 

Cost Report and Compliance Assessment

**Customer Service Training** 

**ED Operational Assessment** 

Leadership Development & Mid-Level Management Training

**Lean Process Planning** 

Master Site Planning

Performance Improvement Assessment

**Primary Care Options Assessment** 

Recovery Audit Contractor (RAC) Preparedness Review

Revenue Cycle Management Assessment

Staffing Analysis and Performance Evaluation

# RHPI selects projects where the hospital CEO will:

- Be actively involved and engaged in the project
  - RHPI works directly with the CEO and does not accept a "hospital representative"
- Facilitate the consultation to implement performance improvement recommendations

#### **CEO Should Facilitate the On-site Project by:**

- 1. Taking a lead role in the project
- 2. Scheduling on-site visit dates early while developing SOW
- 3. Building awareness of the project with hospital Board and staff
- 4. Providing necessary data to the consultant in a timely manner
- 5. Allocating adequate time for an effective and efficient on-site visit
- 6.Ensuring the project moves toward completion according to planned timetable
- 7. Reviewing the preliminary report in a timely manner
- 8. Providing appropriate feedback to the consultant to finalize the report
- 9.Implementing initial recommendations immediately to support a successful project
- 10. Documenting project success with the PM and RHPI staff

## Post Consultation: Documentation of Outcomes

Project Assistant works directly with the CEO **post** project to document outcomes

- A post consultation interview call is performed about
   6 9 months following the consultation to evaluate
   the adoption status of the recommendations
- Future funding will depend on documentation of project success with implementing recommendations and demonstrating outcomes

## Post Consultation: Documentation of Outcomes

- **Objective:** to report the hospital's progress in implementing consultant recommendations by:
  - Documenting successes and lessons learned
  - Demonstrating how the project is sustained
  - Assisting the hospital in developing strategic next steps to further sustain performance gains
  - Important to note: not all recommendations can / may be implemented for various reasons



## **Sustainability Trainings Include:**

- State trainings
- Webinar trainings
- HIT State Partner Support
- Performance Management Group (PMG) calls

## Sessions in sustainability

## RHPI approach is to support state partners and their hospitals through:

- Skill building to support PI
- Leadership & management education
- Peer-to-peer education



Most resources for hospital quality and performance improvement are designed for large, urban facilities. HQRA tools were created for Critical Access Hospitals and other small, rural hospitals by experts working in rural health.

#### **Participating States**



## Lessons Learned:

- CEO must become "change agent" for a culture of quality
- Board must re-define its role to focus on quality and performance improvement
- Organizational structure must often change so QI isn't just "another thing" (new positions, committees, etc.)
- Clinical managers must also be fully engaged and be provided tools to manage quality



### **Program Contact Information:**

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