



Transporting CAHs Towards Value Through Quality Improvement ND Flex Program

June 23, 2015



Center *for*
Rural Health

The University of North Dakota
School of Medicine & Health Sciences

Objectives

- Demonstrating pathways for engaging CAHs in quality improvement efforts
- Determine methods for leveraging data to inform development of quality initiatives
- The impact on the Medicare Rural Hospital Flexibility (Flex) Program



North Dakota



Rugby the Geographical Center of North America

Critical Access Hospitals

Jamestown Regional Medical
Center, Jamestown, ND



- Staff have multiple responsibilities
- Hospital Reporting is different from tertiary
- Cost based reimbursement- Medicare
- Conditions of Participation-Appendix W
 - Survey Protocol, Regulations and Interpretive Guidelines for Critical Access Hospitals (CAHs) and Swing-Beds in CAHs
 - *(Rev. 110, 04-11-14)*
 - <http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions.html>



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Flex and ND CAH Quality Network

The mission of the Network is to support ongoing performance improvement of North Dakota's Critical Access Hospitals

- Virtual Library of Shared Tools
- Conditions of Participation
- DON Mentorship Program
- Quarterly Newsletter
- CAH Event Reporting
- State Stroke Program
- Medicare Beneficiary Quality Improvement Program (MBQIP)

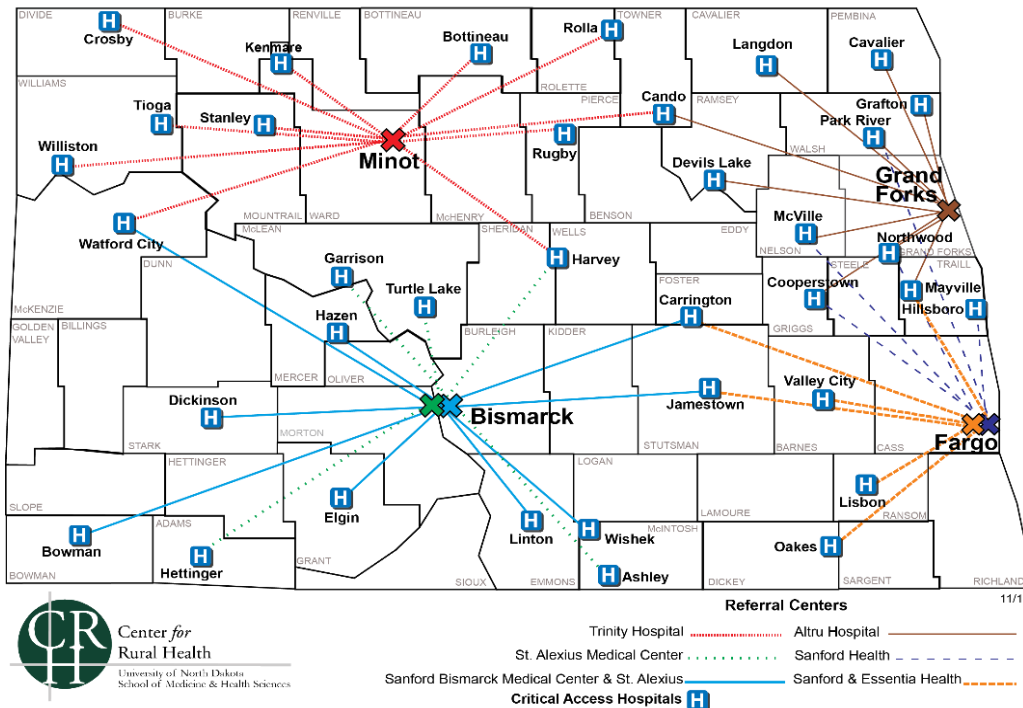


<http://ruralhealth.und.edu/projects/cah-quality-network>

Flex Support to ND Critical Access Hospitals (CAHs) for Quality Improvement

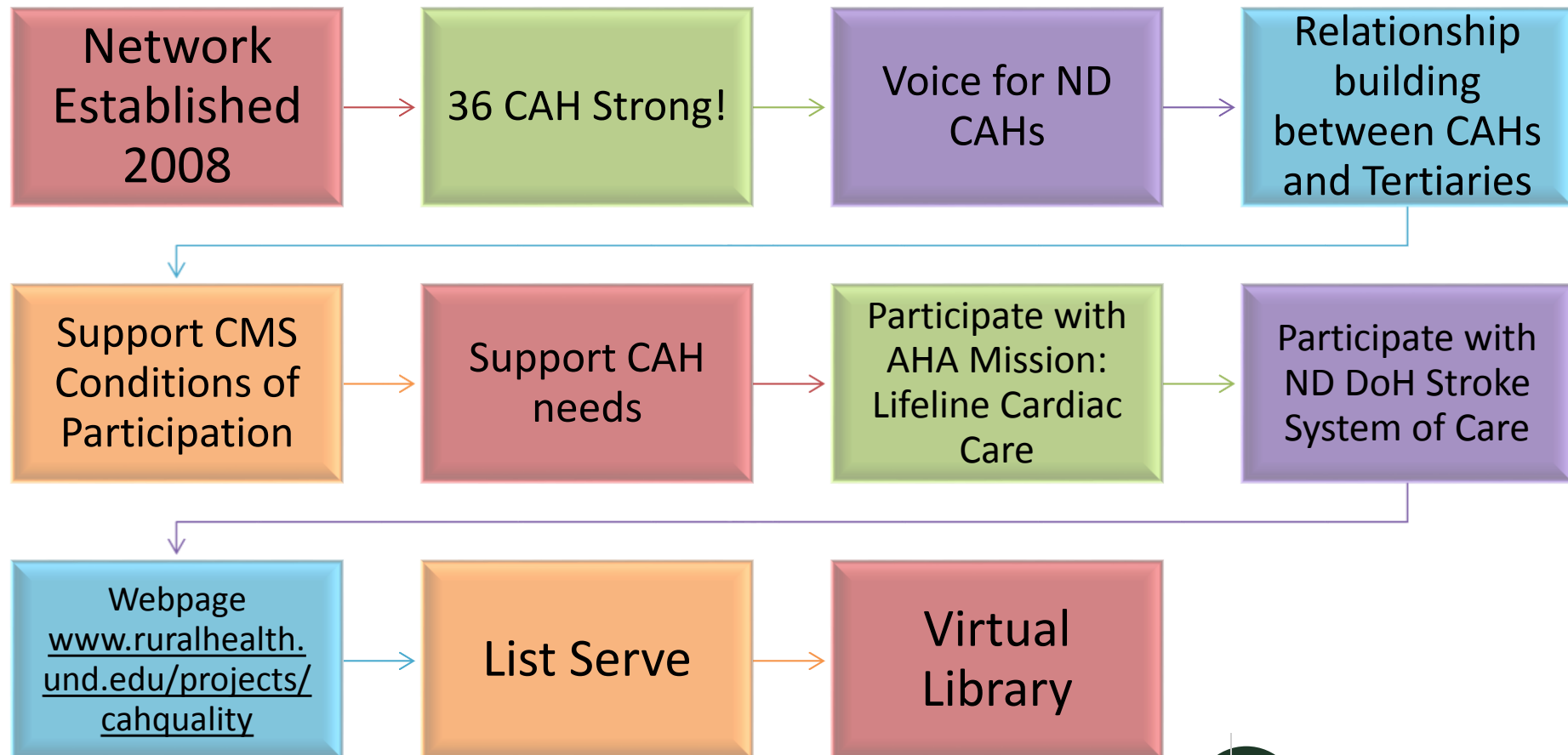
Collaboration with Large and Small Hospitals

North Dakota Critical Access Hospitals & Referral Centers



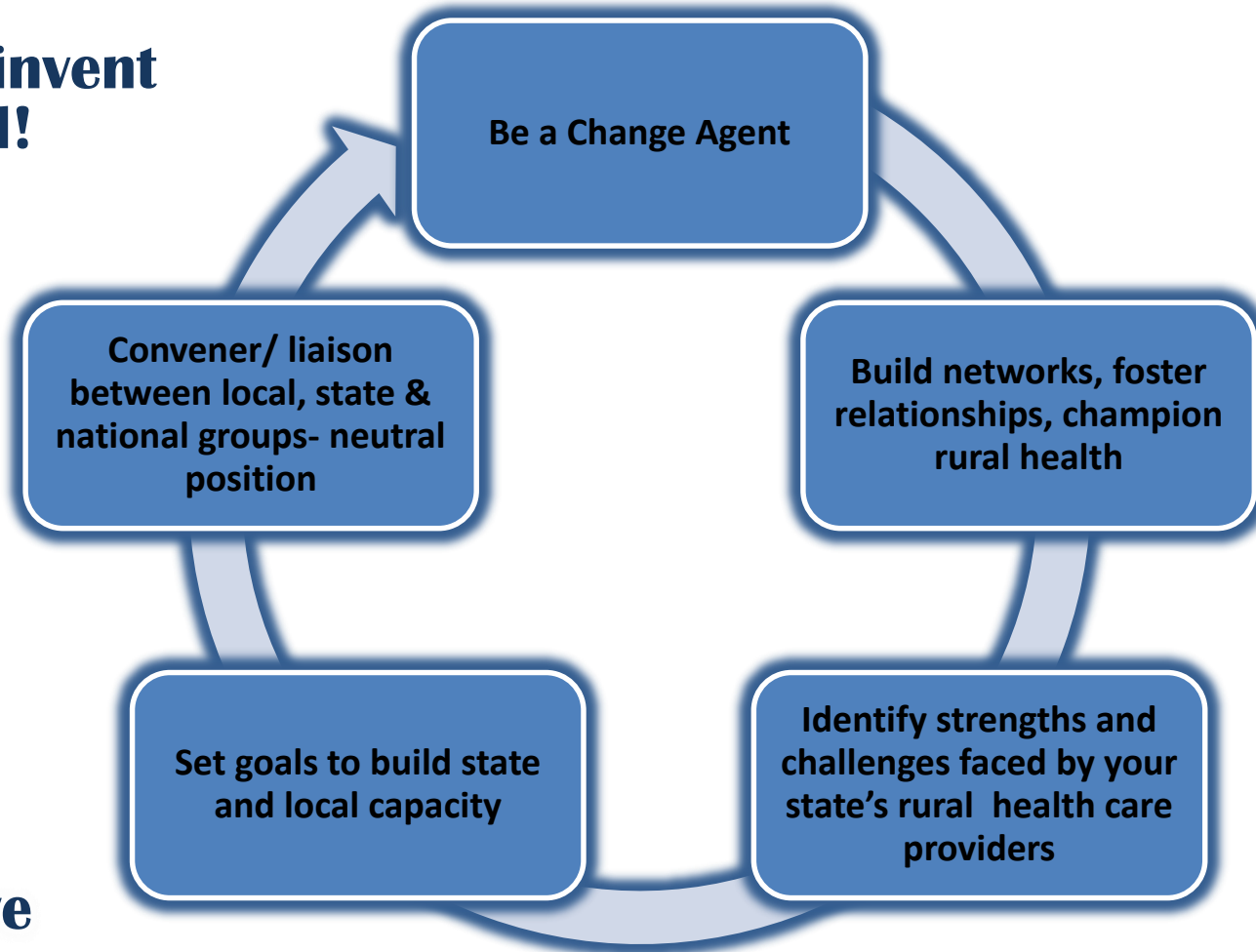
- ND 36 Critical Access Hospitals
- ND 6 Tertiaries
- Form relationships
- Onsite visits
- Connect hospitals with each other
- Support education opportunities

Accomplishments of Network



Flex Team Work and Communication

**Don't re-invent
the wheel!**

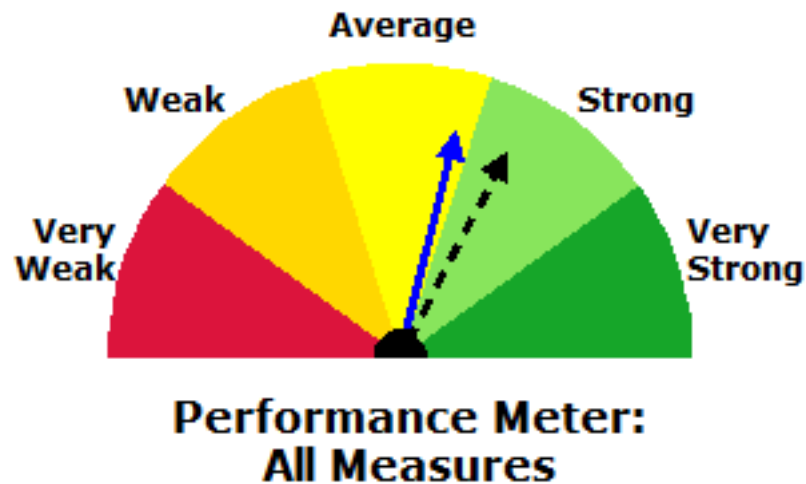


**Be
proactive**

Be Familiar with Your States Data

State Snapshots- The Agency for Healthcare Research and Quality <http://statesnapshots.ahrq.gov>

Overall Health Care Quality for North Dakota



Hospital Compare



- Hospital Compare <http://www.medicare.gov/hospitalcompare>
 - Inpatient and Outpatient hospital reported data
 - Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)

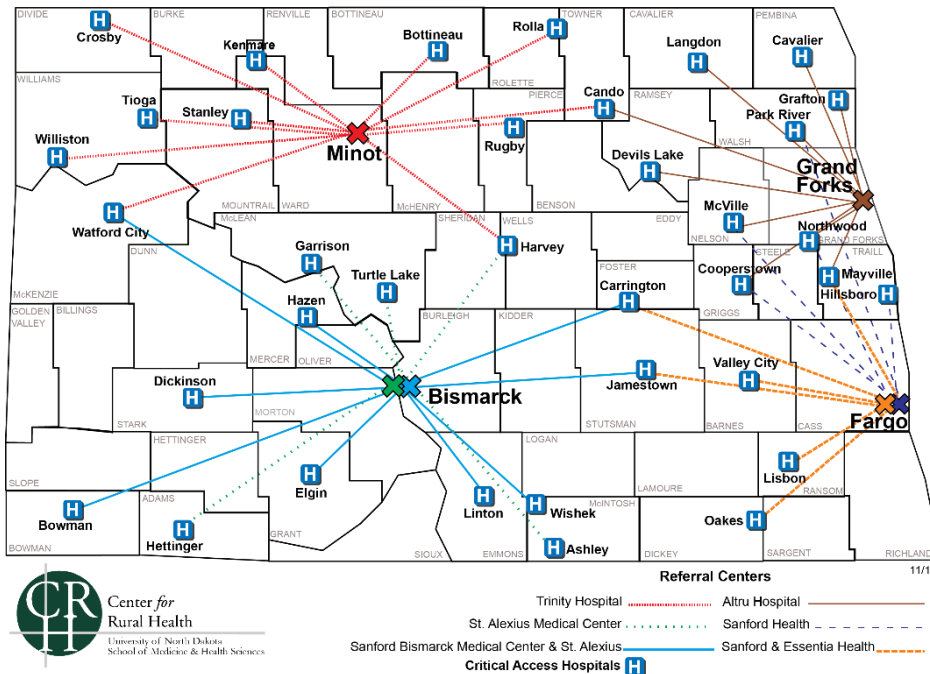
- QualityNet- Established by CMS, provides QI news, resources and data reporting tools
 - www.qualitynet.org

Maintain CAHs Publicly Reporting Data to Hospital Compare

- MBQIP streamline efforts –avoid duplication
- Quarterly technical assistance webinars, video conference or onsite visits
- Benchmark statewide and individual CAH data
 - Newsletters, list serve, media blast for CAHs
- Highlight high performers and share best practices

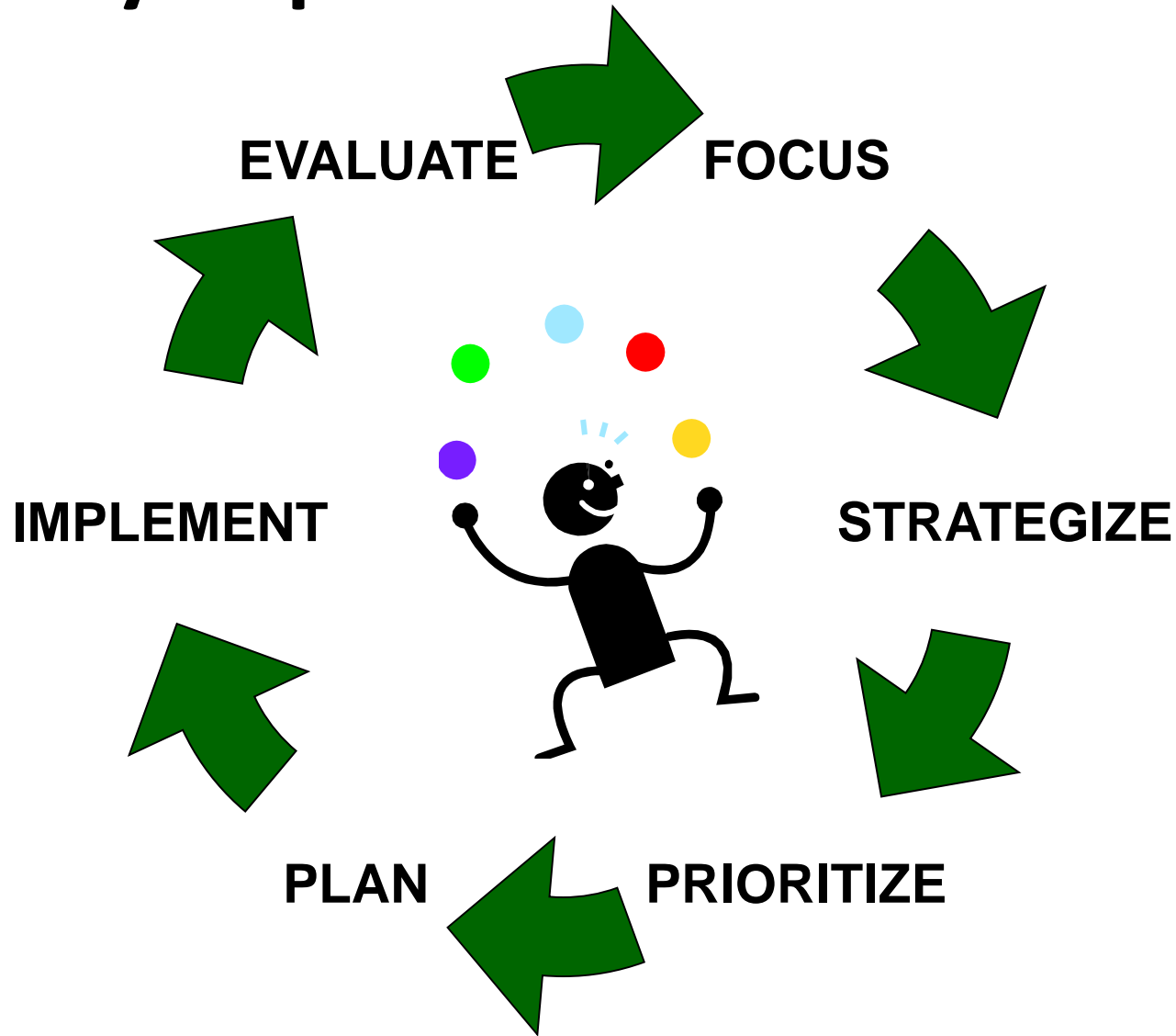
Quality Improvement Efforts

North Dakota Critical Access Hospitals & Referral Centers



- Host quarterly region meetings by quadrants (NW, SW, NE, SE)
- 3 by webinar/video conference
- 1 All regions in person meeting
 - Learn and share best practices

Quality Improvement



Create a Process for Reporting

- Identify process to improve
- Identify a champion
- Identify reporting tool
 - template – customized tool
- Develop facility protocols- process to utilize reports
- CAH implementation and buy-in

Creating a Culture of Reporting

- Monthly meetings
- Share data with staff and hospital board
- Streamline reporting
- Identification of “Best Practices”
- Shared protocol/policy development
- Peer sharing

Benefits of Reporting

- Awareness of safety issues and trends
- Enhanced quality of care and patient safety
- Accuracy and timeliness of data
- Ease of communication between departments

Review Data for Quality Improvement

- Run reports – use to improve
- Where can improvement be made?
- Where are you doing well?
- When are particular events occurring?
- In which department?
- Is appropriate follow-up done?
- Ask if preventive measures being followed?

Quality Improvement Examples

- Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) or another clinical topic
 - Analyze data
 - Identify high and low performers
 - Group for peer to peer learning
 - Focus area for improvement- group

Data January 2014 – March 2014

31 CAH Reports Submitted to Network

n range: 0-80

Quiet

1. During this hospital stay, how often was the area around your room quiet at night?

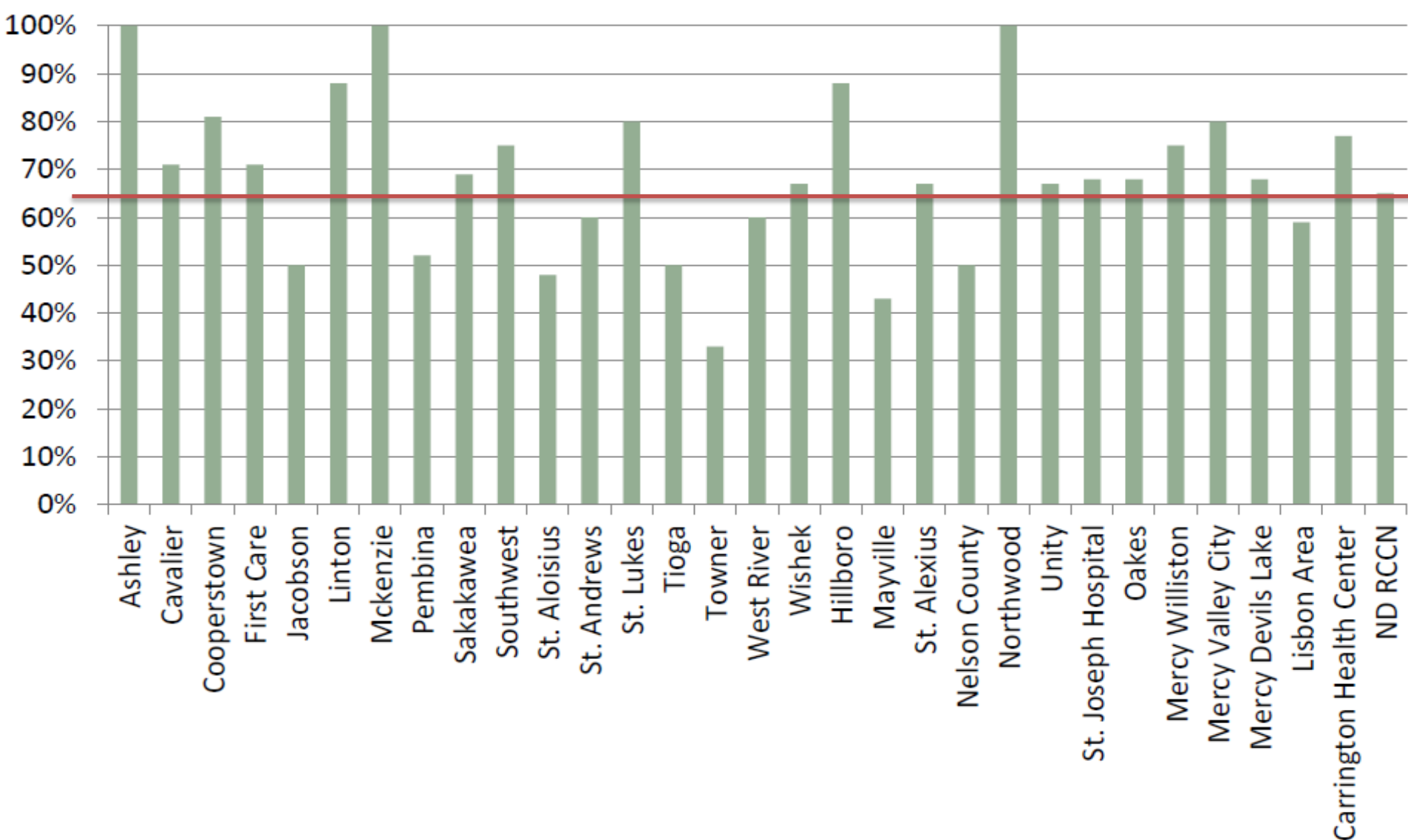
3	Usually
4	Always

Comparing patient quality factors between North Dakota and the National average

	NORTH DAKOTA AVERAGE	NATIONAL AVERAGE
Patients who reported that their nurses "Always" communicated well	76%	79%
Patients who reported that their doctors "Always" communicated well	79%	82%
Patients who reported that they "Always" received help as soon as they wanted	67%	67%
Patients who reported that their pain was "Always" well controlled	68%	71%
Patients who reported that staff "Always" explained about medicines before giving it to them	61%	64%
Patients who reported that their room and bathroom were "Always" clean	70%	73%
Patients who reported that the area around their room was "Always" quiet at night	60%	61%
Patients who reported that YES, they were given information about what to do during their recovery at home	86%	85%
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	63%	70%
Patients who reported YES, they would definitely recommend the hospital	66%	71%



Quiet at Night: Percent “Always”



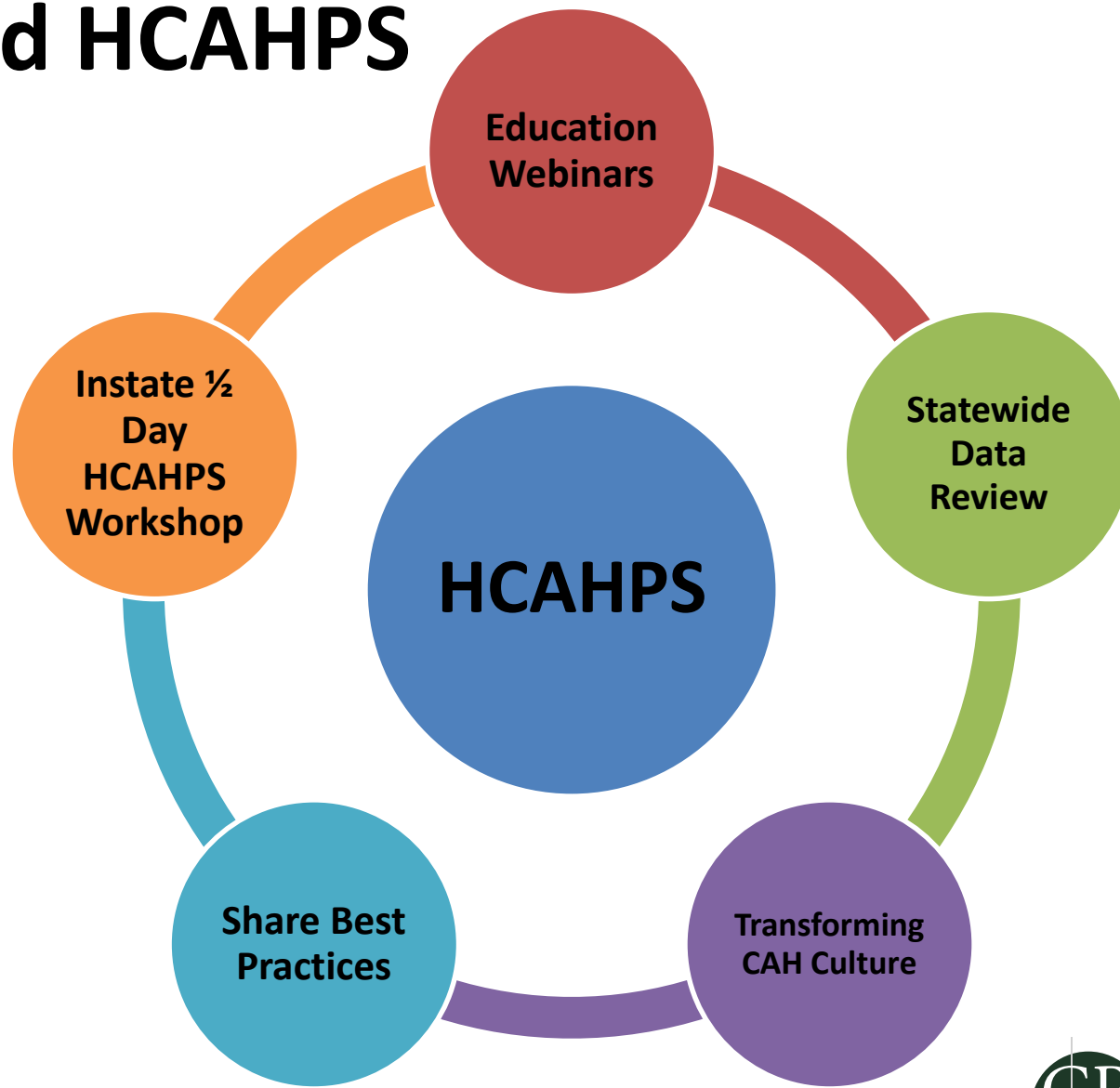
Quiet at Night Strategies

HCAHPS Question:

During this hospital stay, how often was the area around your room quiet at night?

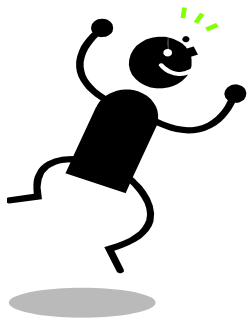
- Elimination of Overhead
- White Noise Machines/Headsets for Patients
- Sleeping Mask, Ear Plugs for Patient
- Noise Awareness Campaign
- Carpeted Corridors

Flex and HCAHPS



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Congratulations to Carrington Health Center!

3 Year High Performer on Bundle of Care for Heart Failure (HF)

- HF-1 Discharge Instructions
- HF-2 Evaluation of LVS Function
- HF-3 ACEI or ARB for LVSD



high
FIVE!

Congratulations! NRHA Top 20

WRRMC-Hettinger- Overall

Sanford Mayville- Quality

TCMC-Cando-Quality

AMC-Ashley-Patient Satisfaction

FCHC-Park River-Patient Satisfaction

TMC-Tioga-Patient Satisfaction

Top 20 CAH awards held at National Rural
Health Association (NRHA) CAH Conference
Sept 30-Oct 2 in Kansas City



How can improvement be made?

As a Network or Flex Coordinator:

- Use the data to compare across facilities
- Identify areas for improvement statewide
- Notice who is doing something right
- Share best practices and protocols

Quality Improvement (QI) Activity

- Encourage CAHs to develop strategies to measure quality and collect data
- Provide technical assistance
- Offer education on related QI topics
- Assist CAHs in data collection efforts and how to manage their data
- Offer peer to peer and statewide sharing opportunities



Thank you and Questions



Contact information

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