



CAH Quality Improvement and Care Transitions Project

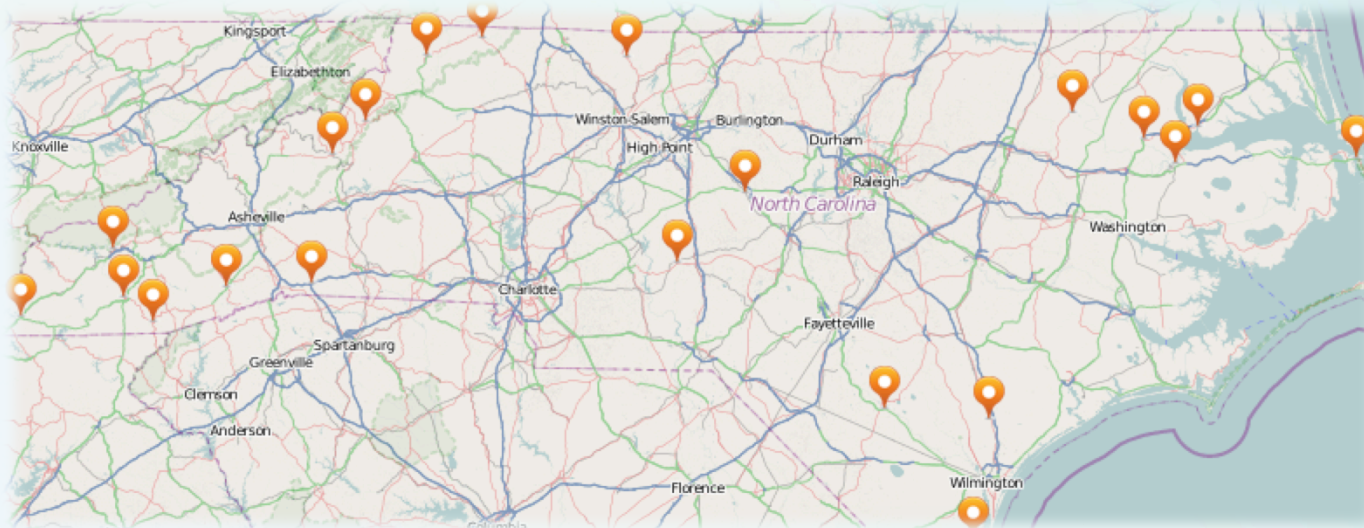
Informational Webinar



North Carolina
Quality Center

CAH Quality Improvement and Care Transitions Project

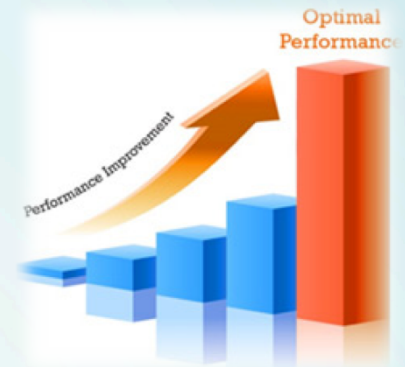
Provide support to critical access hospitals for quality improvement, quality reporting, performance improvements, and benchmarking



Project Goals

Improve CAH performance in the following areas:

- Inpatient Core Measures as defined by MBQIP
- Outpatient Core Measures as defined by MBQIP
- Patient Satisfaction/HCAHPS Scores
- Select Care Transition Measures as defined by MBQIP
 - Emergency Department Transfer Communication
 - Discharge Planning
 - Medication Reconciliation



The Collaborative Model

- Focused, time-limited learning system bringing together hospital teams to seek improvement in a focused topic area
- Structure where teams report on methods and results, collectively reflect on lessons learned and provide support and encouragement for making further changes
- Facilitated networking and access to experts in the field via regular content/networking webinars, in-person learning sessions, and coaching calls/on-site visits

Collaborative Methods

- Establish multidisciplinary improvement teams
 - Assess current processes and performance
 - Identify gaps and opportunities for improvement
 - Lead testing, implementation and spreading of changes
- Provide access to training and education
 - Quality improvement basics and action planning
 - Best practices and subject matter experts
- Provide guidance on data tracking and reporting
 - MBQIP measures
 - Process measures
- Support Teams through coaching
 - Individual and group calls
 - On-site visits



Collaborative Learning Network – Year 1

Enroll Hospitals Convene ED Improvement Teams

Outpatient Core Measures	Care Transitions	Immunization	HCAHPS & Patient Family Engagement
<ul style="list-style-type: none"> • Conduct Assessment • Training/Education <ul style="list-style-type: none"> ○ QI Basics ○ Establishing an Improvement Team (including patient/family advisors) ○ Developing an Action Plan 	<ul style="list-style-type: none"> • Conduct Assessment • Capture Current ED Transfer Processes Communications • Evaluate Processes for Improvement Opportunities <ul style="list-style-type: none"> ○ Prioritize Opportunities ○ Develop Action Plans ○ Include Patient/Family Advisors on Improvement Teams 	<ul style="list-style-type: none"> • Review Hospital Policies and Practices • Conduct Gap Analysis • Identify Areas for Improvement • Training/Education <ul style="list-style-type: none"> ○ Best Practices ○ Policy and Practice Development (involve patient/family advisors) 	<ul style="list-style-type: none"> • Review HCAHPS Scores • Assist in Interpretation of HCAHPS Scores • Inventory Current PFE Practices • Training/Education <ul style="list-style-type: none"> ○ Connection Between HCAHPS Scores and PFE

Collaborative Learning Network – Year 2

Outpatient Core Measures	Care Transitions	Immunization	HCAHPS & Patient Family Engagement
<ul style="list-style-type: none"> Review Processes for Managing AMI Pts. Evaluate Processes for Improvement Opportunities Prioritize & Develop Action Plans <ul style="list-style-type: none"> Improve OP-1, OP-2, OP-3 and OP-5 Measures Share Performance on Measures Training/Education <ul style="list-style-type: none"> Best Practices Identifying Areas for Improvement, Developing Action Plans, and Implementing Improvements 	<ul style="list-style-type: none"> Implement Action Plans Track Submission and Performance of Measures Share Improvements within the Learning Network Training/Education <ul style="list-style-type: none"> Intermediate Quality Improvement Strategies 	<ul style="list-style-type: none"> Monitor Adherence to Policies and Best Practices Training/Education <ul style="list-style-type: none"> Effective Communication on Immunization Topics Introduction to “Learning from Defects” Analysis Tool <ul style="list-style-type: none"> Understand What Happened When Policy Was Not Followed Identify Improvement Opportunities 	<ul style="list-style-type: none"> Offer Individual Coaching on Engaging Patients and Families to Improve Immunization Rates, HCAHPS and Required Outpatient Core Measures <ul style="list-style-type: none"> Directed toward C-Suite Executives and Accountable Line Staff Review of Best Practices for Improving HCAHPS Scores <ul style="list-style-type: none"> Identify and Implement Two Best Practices

Collaborative Learning Network – Year 3

Outpatient Core Measures	Care Transitions	Immunization	HCAHPS & Patient Family Engagement
<ul style="list-style-type: none"> • Monitor Measures • Spread Involvement from Management of AMI Patients to All Patients • Shift Focus to Pain Management and Prevention of Patients Leaving Without Being Seen <ul style="list-style-type: none"> ○ OP-20, OP-21, OP-22 • Share Performance on Measures with Collaborative • Continue Emphasis on Inclusion of Patient/Family Advisors on the Improvement Team 	<ul style="list-style-type: none"> • Sustain Improvements <ul style="list-style-type: none"> ○ Standardize processes and tools for long-term continuous improvement • Complete Second Round of Process Maps for ED Transfer Communication <ul style="list-style-type: none"> ○ Analyze for Additional Improvement Opportunities • Conduct Assessment of Discharge Planning and Medication Reconciliation • Share Best Practices 	<ul style="list-style-type: none"> • Monitor Adherence to Hospital Policies • Monitor Adherence to Following Best Practices • Encourage and Support Analysis of Cases That Do Not Follow Policy 	<ul style="list-style-type: none"> • Assist with Sustaining Best Practices Implemented in Yr. 2 • Implement an Additional Best Practice • Plan for Long-Term Sustainability

Why Participate?

- Opportunity to collaborate and network with other hospitals
- Analysis of MBQIP measures
- Expert coaching at no cost
- Enhance your current quality improvement activities
- Spread and sustain the LEAN work you have done

Next Steps

- Register your hospital for this collaborative learning network at:
<https://www.surveymonkey.com/r/HKBMHFC>

Contacts

Debbie Hunter

Performance Improvement Specialist

dhunter@ncha.org

919-677-4103

Christi Beals

Project Manager

cbeals@ncha.org

919-677-4136