Performance Dashboards as an Integral Part of a Continuous Internal Quality Improvement Program

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Learning Objectives

• Develop Internal Quality Control (IQC) processes to optimize organizational performance
• Learn how to present complex, robust data using interactive dashboards
• Learn how to develop provider-friendly, specific, actionable reports
Goals

• Develop a Continuous Internal Quality Improvement Program
• Enable leadership and team members to efficiently manage all 11SOW projects and make appropriate decisions on organizational performance
11SOW Dashboard Framework

- Recruitment targets
- Performance measures
- Learning and action network (LAN) evaluation measures
- Financial performance measures
- Human resource measures
Internal Quality Control
Corporate Processes

• Developed to maintain reliable and accurate information in the IDIQ dashboard
• Timely and reliable information with multi-level IQC
• Responsibilities of involved parties: Multi-state Optimization Group (MOG), multi-state analysts (MSA), multi-state leads, state QIN directors, and project teams
IQC Structure

- Project team
- Multi-state analyst (MSA)
- Dashboard master
- Multi-state Optimization Group (MOG)
- Multi-state leads
- State QIN directors
IDIQ Dashboard Use and Cycle

• Tracked overall IDIQ and state performance; tracked progress by aims/tasks; identified areas of attention, if any attention needed
• Primary customers: leadership, MOG, Contracting Officer Representative (COR)
• Frequency of updates: monthly
11 SoW Recruitment

% of Recruitment Goal Achieved

- Nevada
- New Mexico
- Oregon
- Utah

Select State(s):
- Nevada
- New Mexico
- Oregon
- Utah

Select Task(s):
- B1
- B2
- B4
- C1
- C2
- C3
- D1
- F1
- G1

Goal Met:
- No
- Yes
- Interim Target

7/30/2015

EXTENDING OUR REACH: Innovation, Efficacy, and Collaboration
## 11 SOW Recruitment

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### Select State:
- Nevada
- New Mexico
- Oregon
- Utah

### Select Task(s):
- B1
- B2
- B4
- C1
- C2
- C3
- D1
- F1
- G1

7/30/2015

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**EXTENDING OUR REACH:** Innovation, Efficacy, and Collaboration
### 11 SOW Evaluation Measures

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**State(s):**
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**Task(s):**
- B1
- B2
- B4
- C1
- C2
- C3
- D1
- F1
- G1

**Year 2 Goal:**
- No
- Yes

**Goal Met:**
- ✔️ Yes
- ❌ No

**8/28/2015**

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**EXTENDING OUR REACH:** Innovation, Efficacy, and Collaboration
Specific Tasks: Dashboards and Provider Reports

• Customers:
  – Dashboards: project team, managers and coordinators
  – Provider reports: project team, providers

• Goals: To create process measures and interim targets for measures to closely track progress toward goals; identify risk of failure and take appropriate remedial action

• Frequency of updates – as new data become available
Reducing Healthcare-Acquired Conditions in Nursing Homes

Composite Score Report, Data through February 2015

XYZ Facility

Your data at a glance:

- Your facility's current composite score: 12.91
- State composite score: 10.53

Composite score over time, lower is better. Your Facility (blue), State (orange):

- Values Target @ 0

Proportion of composite score from each measure:

The Composite Score comprises 13 National Quality Forum Endorsed long-stay quality measures. Which one(s) are driving your score? Look for the measure(s) with the highest percentages. Lower is better.

Data Source: MDS 3.0
Each month of data represents the previous 6 months. For example, the data for July include February through July. When the data are shown over time, as in the graph above, you are seeing a rolling 6-month timeframe.

For more information on the measures, visit www.healthinsight.org and look for the right and for your facility's current composite score, the data shown are the most recent 6-month timeframe available.

Healthinsight

Nevada: (702) 385-9933
New Mexico: (505) 992-0996
Utah: (801) 892-0155

EXTENDING OUR REACH: Innovation, Efficacy, and Collaboration
Reducing Healthcare-Acquired Conditions in Nursing Homes

XYZ Facility

These graphs represent your facility's rates over time for each of the 13 measures that constitute the composite score. The influenza and pneumonia immunization measures have been reversed so that for all graphs, lower is better.

ADL

Antipsychotics

Catheter

Depression

Falls

Incontinence

Pain

Pressure Ulcers

Restraints

UTI

Weight Loss

HealthInsight

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Utah: (801) 892-0155
Reducing Healthcare-Acquired Conditions in Nursing Homes

XYZ Facility

This ranking shows your facility's composite score in relation to all of the nursing facilities in your state.
Community Specific Reports

- Data and drivers for community
- Use case for C.3 recruitment
Readmission Rate & Number of Discharges by Discharge Location

- Hospice
- SNF
- HHA
- Home

Number of Patients Discharged

Readmissions Rate

0% 5% 10% 15% 20% 25%
Readmission Rate per 1,000 FFS Beneficiaries by Disease

- AMI: 8.46
- CHF: 18.12
- Chronic Kidney Disease: 16.7
- COPD: 14.31
- Diabetes Mellitus: 23.74
- Pneumonia: 21.41

EXTENDING OUR REACH: Innovation, Efficacy, and Collaboration
Sharing Success Recruitment Stories
Questions?

• Contact:
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  gpriloutskaya@healthinsight.org
  Phone: 505-998-9765