



Mercy Hospital Home Health Agency

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Summary of Project

Mercy Hospital Home Health Agency has invested considerable time, attention, and resources to data-driven performance improvement in the past six years, even before OBQI was a common phrase in the home health industry. The leaders at this agency have become experts at using OASIS data to Plan-Do-Check-Act (PDCA).

In 2005, Mercy decided on a new, very ambitious, OBQI focus—a two-year project to improve the Agency's outcome in improvement in the frequency of pain.

Project Description

When the agency leaders sat down to review and select their new OBQI goals, they brought together a multidisciplinary team made up of administrators, PI Committee members, and representatives from education, clinical supervision, and clinical staff. The team reviewed the agency's outcomes data and identified *that improvement in the frequency of pain* was a measure where the agency was consistently below national and state norms. The team selected this measure not only because of the numbers, but also because pain is such an important component of overall quality of care.

When looking at the data, the team discovered that a lot of patient pain occurred following therapy visits. The agency created and implemented a home exercise program to increase patient strength and endurance to help patients be better prepared physically for therapy and to address the issue of post-therapy pain. The agency's plan of action to better manage patient pain also included OASIS re-education, the development of pain tracking documentation collected and aggregated monthly, revised patient care management (falls program and home exercise programs), and improved pain intervention techniques.

To keep a close eye on progress—to both celebrate success and quickly identify undesired effects of the PI efforts—the team reviewed several specific measures on a quarterly basis. They focused not only on improvement in pain, but also on stabilization of pain, improvement in ADLs, and hospitalization and emergent care for injury due to fall or accident at home. The PI Committee at Mercy says that it was a “no-brainer” to use the quarterly OCS reports instead of the recently enhanced OBQI - CMS

reports because OCS provides a more real-time and trended perspective of performance. The team reviews not only benchmark comparative reports, but also the more immediate and more patient-centered reports, such as the OCS-OASIS Patient Outcome Report. The team posts updated outcomes data for the entire staff to see and celebrate.

Project Results:

While Mercy was only a few months into their Pain OBQI project at the time of the Vision Award decisions, they had already made notable and impressive progress towards their goals. They saw an increase in the percent of patient episodes improved in the frequency of pain, a decrease in the rate of emergent care for injury due to fall or accident at home, and an increase in several ADL improvement measures. When the Florida QIO conducted a follow-up visit, they were impressed with how efficiently and effectively the agency use OCS reports and services to have a real and measurable positive impact on the clinical outcomes of their patients.

With such immediate and exciting success, the team has decided to set its vision even higher. They are aiming to be in the top third (or higher) of providers in this measure, and plan on using the OCS-P4P Preparedness Report to set that target and track its progress.

OCS Tools Used to Support the Project:

- OCS-BBI Reports—Case Mix, Select Clinical Indicators, Quality Tracking, Utilization Summary, Executive Summary, and P4P Preparedness Reports
- OCS-OASIS Reports and Graphs—Mostly the Outcomes Report, Patient Outcome Report, and Completed Assessment Report

Processes Defined and Implemented:

- Identify important goal selection criteria
- Select measure and set goal
- Investigate root causes of performance shortfalls—conduct patient chart reviews to identify trends that are in the notes
- Create change plans to address specific root causes
- Frequently track results of PI activities
- Internally and externally publicize and celebrate success
- Never be complacent, always reach higher