



VNA, An Affiliate of the Wyoming Valley Health Care System

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Summary of Project

The VNA, An Affiliate of Wyoming Valley Health Care System— was facing a frightening uphill battle. On January 1, 2003, the home health program took a look back at the performance of the agency in 2002 and found a net loss of \$128,500. Upon digging deeper into this problem, the agency found that their average SOC case weight was below the national norm and the total average number of visits per case was substantially above both the national and regional norms. To make the situation more complex, they also discovered that their scores in quality outcomes were not meeting expectations.

Their goal for the coming year was evident: achieve financial turnaround and improve quality outcomes in targeted areas.

Project Description

Ann Russin took over the role of Executive Director three years ago, having been with the agency for many years. One of Ann's first actions as Executive Director was to pull together an interdisciplinary team to form a management group. This group would provide the direction for the significant financial turnaround they were expected to achieve in a very short time. The management team's first objective, after defining issues, was to dissect these issues, one piece at a time.

To provide context for that research, the team relied heavily on benchmark data. Analyzing this data helped them to realize that many of their assumptions regarding their agency and patients were not accurate. This understanding laid the groundwork for creating a plan that would have a meaningful impact upon the company's operations.

Armed with the data, and a new understanding of their performance, the agency redesigned several operational and clinical processes. Ann focused on one basic question with clinical staff—"Are we receiving equitable reimbursement for each patient?" In addition, attention was dedicated to improving and standardizing fundamental operations, such as OASIS accuracy, and maintaining consistent communication with the clinicians.

Project Process and Key Elements of Success

- Define fundamental, core problems
- Set course of action to achieve performance goals
 - ✦ Clinician re-education on OASIS assessment tool

- ✦ 100 percent review of admissions, including face-to-face reviews with manager/clinicians
- ✦ Bi-Weekly Care Conferences with clinicians
- ✦ Use data to analyze root cause of the problems
 - ▶ OBQI Team analyzed and chose two targeted areas for improvement with outcomes
 - ▶ Improvement in Transfers
 - ▶ Improvement in Oral Medications

OCS Tools Used to Support the Project

- Executive Summary Report
 - ✦ Used to identify problem areas and monitor progress quarterly
- Bubble Graph
 - ✦ Used to compare performance to other OCS clients
- OCS-OASIS
 - ✦ Assessment Statistics Report
 - ▶ Used to look at SOC, ROC, and other assessments to review case weight data and assess accuracy of reimbursement rates, taking into account any adjustments during the episode
 - ✦ Patient Outcome Report
 - ▶ Used for targeted chart review

Project Results:

Ann's direction and leadership lead to the successful turnaround of the bleak financial picture the agency faced in 2003. At the end of 2004 the VNA reviewed its performance and realized a positive net income of \$57,000. Thanks to more accurate OASIS data, timeliness of billing increased and quality outcomes scores improved, resulting in a Tier 3 Quality Award for Leadership in Quality from the Pennsylvania QIO, Quality Insights.

In addition to achieving financial and clinical success, Ann found that an unexpected result of the agency's focus on using OCS data to evaluate and track performance was "elevating clinical staff's awareness of what monitoring, tracking and process change can do to improve all aspects of our agency". The tenured staff came to learn, over a one-year time period, how critical understanding the mix of data between clinical/operations/financial departments was to the ongoing success and survival of the agency.