

Tennessee Hospice Organization QAPI Snapshot

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Introducing your state QAPI Compliance and Benchmarking Program

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The QAPI CoP

What Does it Actually Say?

- ▶ **Measure all facets of performance – 360°**
- ▶ **Make measurable improvement in areas that matter**
- ▶ **Demonstrate quality care**
- ▶ **Document board-driven leadership**
- ▶ **Demonstrate involvement throughout staff**

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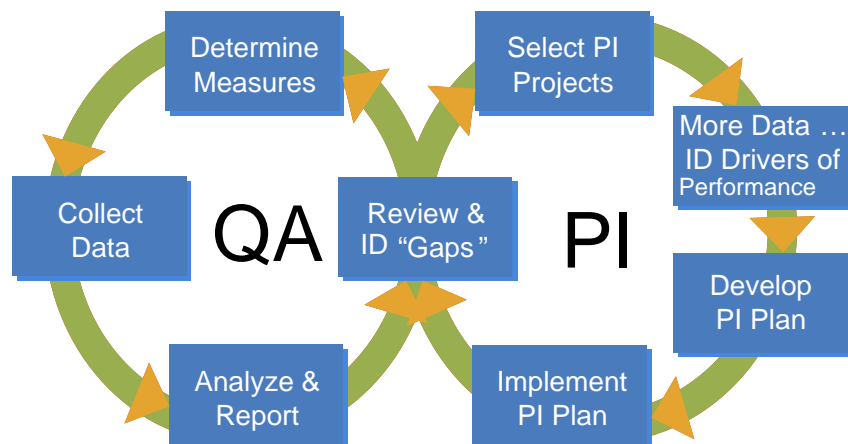
The Proposed QAPI CoP

What Do You Need to Do?

- ▶ **Select a full complement of measures**
- ▶ **Monitor patient care and agency performance regularly**
- ▶ **Monitor and Manage your Adverse Events**
- ▶ **Compare with your own and industry benchmarks**
- ▶ **Manage care delivery and organizational improvement**
- ▶ **Conduct PIPs when necessary**

QAPI – Some Basics

The QAPI Process



QAPI Snapshot

What is QAPI Snapshot?

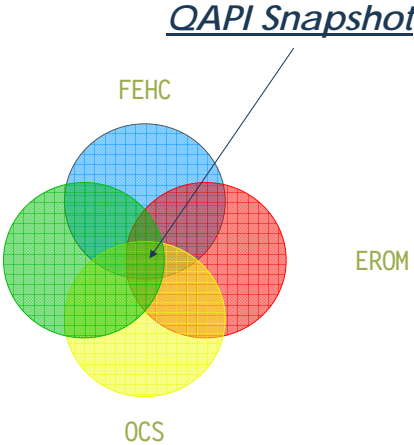
- ▶ **Comprehensive, strategically selected grouping of measures for QAPI Compliance**
 - Clinical, Operational, Satisfaction
- ▶ **Web-based**
 - Easy online data submission
 - Report access
- ▶ **Executive Dashboard and Tabular Reports**
 - Annual report for strategic direction and target-setting
 - Quarterly reports for tracking and process management
- ▶ **Free OCS QAPI Help Desk for ongoing support**

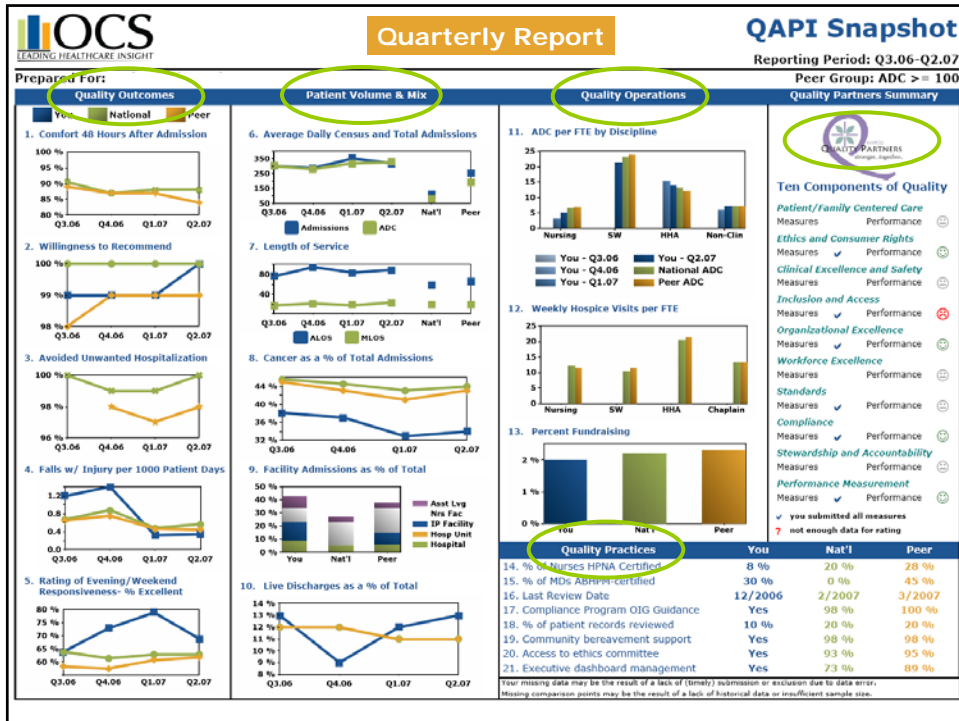


QAPI Snapshot Measures

Measure Overview

- ▶ **Measures are defined based on four sources**
 - NHPCO National Data Set (NDS)
 - NHPCO Family Evaluation of Hospice Care (FEHC)
 - NHPCO End Result Outcome Measures (EROM)
 - OCS Hospice Comprehensive Benchmark





Performance Measure Detail

OCS
LEADING HEALTHCARE INSIGHT

QAPI Snapshot

You National Median Peer Median

| Performance Measures | You | | | | National Median | | | | Peer Median | | | |
|---|-------|-------|-------|-------|-----------------|-------|-------|-------|-------------|-------|-------|-------|
| | Q3.06 | Q4.06 | Q1.07 | Q2.07 | Q3.06 | Q4.06 | Q1.07 | Q2.07 | Q3.06 | Q4.06 | Q1.07 | Q2.07 |
| Quality Outcomes | | | | | | | | | | | | |
| Comfort within 48 hours of admit | | | | | 91% | 87% | 88% | 88% | 89% | 87% | 87% | 84% |
| % Avoided Unwanted Hospitalizations | | | | | 100% | 99% | 99% | 100% | | 98% | 97% | 98% |
| Falls with injury/1000 Patient Days | 1.2 | 1.4 | 0.3 | 0.3 | 0.7 | 0.9 | 0.5 | 0.0 | 0.7 | 0.8 | 0.5 | 0.5 |
| % Caregivers Willing to Recommend | 99% | 99% | 100% | 100% | 100% | 100% | 100% | 100% | 98% | 99% | 99% | 99% |
| % Caregivers Rating wknd/eve response excellent | 69% | 78% | 84% | 74% | 69% | 67% | 68% | 68% | 64% | 63% | 66% | 67% |
| Patient Volume and Mix | | | | | | | | | | | | |
| ADC | 302 | 280 | 317 | 328 | 71 | 74 | 81 | 79 | 191 | 201 | 195 | 194 |
| Total Admissions | 301 | 286 | 354 | 318 | 108 | 120 | 122 | 108 | 279 | 306 | 274 | 251 |
| Average Length of Service | 77 | 95 | 84 | 89 | 52 | 56 | 59 | 58 | 63 | 61 | 65 | 65 |
| Median Length of Service | 17 | 21 | 18 | 23 | 18 | 17 | 17 | 18 | 18 | 16 | 16 | 18 |
| Cancer % of Total Admissions | 38% | 37% | 33% | 34% | 46% | 45% | 43% | 44% | 45% | 43% | 41% | 43% |
| % of Patients Admitted by Location | | | | | | | | | | | | |
| Home | 55% | 54% | 54% | 57% | 62% | 60% | 57% | 58% | 52% | 47% | 53% | 51% |
| IP Facility | 16% | 20% | 16% | 14% | 11% | 3% | 0% | 0% | 12% | 12% | 6% | 9% |
| Hospice Unit | 9% | 9% | | | 0% | 0% | 0% | 0% | 10% | 9% | 1% | 0% |
| Hospital | 0% | 0% | 11% | 9% | 3% | 4% | 3% | 5% | 5% | 5% | 6% | 0% |
| Nursing Facility | 14% | 11% | 12% | 11% | 18% | 15% | 18% | 18% | 10% | 18% | 18% | 19% |
| Assisted Living Facility | 6% | 6% | 7% | 9% | 5% | 4% | 3% | 4% | 5% | 4% | 4% | 4% |
| Live discharges as a % of Total Discharges | 13% | 9% | 12% | 13% | 12% | 12% | 11% | 11% | 12% | 12% | 11% | 11% |
| Quality Operations | | | | | | | | | | | | |
| % of total revenue from fundraising | | | | | 2% | | 0% | 2% | | | | 2% |
| ADC per FTE by Discipline | | | | | | | | | | | | |
| Nursing | | | | | 3.2 | 3.1 | 6.5 | 5.8 | 0.0 | 6.6 | 5.9 | 6.9 |
| Social | | | | | 16.2 | 13.8 | 11.0 | 11.2 | 11.3 | 13.3 | 10.2 | 10.0 |
| HHA | | | | | 27.3 | 44.1 | 58.6 | 55.3 | 52.1 | 56.6 | 56.2 | 56.6 |
| Chaplain | | | | | 262.3 | 170.3 | 260.6 | 246.8 | 275.8 | 269.7 | 250.4 | 253.6 |
| Physician | | | | | 6.1 | 7.4 | 7.1 | 6.9 | 6.0 | 7.3 | 6.1 | 7.0 |
| Nonclinical | | | | | 1.7 | 2.0 | 2.2 | 2.2 | 2.2 | 2.1 | 2.2 | 2.1 |
| Weekly Visits per FTE by Discipline | | | | | | | | | | | | |
| Nursing | | | | | 12.8 | 11.7 | 12.4 | 12.2 | 13.2 | 13.2 | 11.9 | 11.5 |
| Social | | | | | 10.4 | 10.7 | 11.4 | 10.5 | 12.4 | 11.2 | 11.4 | 11.5 |
| HHA | | | | | 21.6 | 21.2 | 20.0 | 20.3 | 21.1 | 19.6 | 19.9 | 21.5 |
| Chaplain | | | | | 14.1 | 13.9 | 13.1 | 13.2 | 14.3 | 13.9 | 13.8 | 13.3 |
| Physician | | | | | 4.9 | 5.5 | 3.7 | 4.6 | 4.9 | 7.9 | 6.2 | 9.4 |
| Nonclinical | | | | | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| Quality Practices | | | | | | | | | | | | |
| % of physicians ABHPM-certified | 64% | 29% | 30% | 0% | 0% | 2% | 1% | 0% | | 50% | 50% | 45% |
| % of nurses HPNA-certified | 15% | 15% | 8% | 0% | 0% | 23% | 20% | 20% | | 28% | 30% | 28% |
| Routine patient record review % | 10% | 10% | 10% | 10% | 23% | 15% | 20% | 20% | | 20% | 20% | 20% |
| Compliance meeting OIG Guidance | Yes | Yes | Yes | Yes | 100% | 95% | 99% | 98% | 100% | 97% | 98% | 100% |
| Date of last review against standards | 12/06 | 12/06 | 12/06 | 6/06 | 8/06 | 1/07 | 3/07 | | | 8/06 | 1/07 | 3/07 |
| Bereavement to community | Yes | Yes | Yes | Yes | 98% | 98% | 97% | 98% | 97% | 95% | 98% | 98% |
| Ethics committee access | Yes | Yes | Yes | Yes | 92% | 94% | 91% | 93% | 100% | 100% | 97% | 95% |
| Executive dashboard for PM | Yes | Yes | Yes | Yes | 50% | 58% | 69% | 73% | 100% | 74% | 87% | 89% |

Current Period Highlighted

| OCS LEADING HEALTHCARE INSIGHT | | Quality Partners Detail | | | | QAPI Snapshot | | | |
|---|------------|-------------------------|--------|--------------------------------------|-------|--------------------------------------|-------|-------------------------------|------------|
| Prepared For: | | Your Performance | | National 25 th Percentile | | National Median (50 th %) | | Reporting Period: Q3.06-Q2.07 | |
| Peer Group: ADC >= 100 | | You | | Nat'l | | You | | Nat'l | |
| Quality Partners Components | Q2.07 | Q2.07 | Q2.07 | Q2.07 | Q2.07 | Q2.07 | Q2.07 | Q2.07 | Q2.07 |
| | Percentile | 25th | 50th | 25th | 50th | Percentile | 25th | 50th | Percentile |
| Patient/Family Centered Care | ☺ | | | | | | | | |
| Average Length of Service | 88.5 | 88.4 | 41.8 | 58.0 | | | | | |
| Median Length of Service | 23.0 | 73.6 | 13.0 | 18.0 | | | | | |
| % Caregivers rating eve/wknd response excellent | 74 % | 69.5 | 62 % | 68 % | | | | | |
| % Caregivers Willing to Recommend | 100 % | 100.0 | 98 % | 100 % | | | | | |
| % Avoided unwanted hospitalizations | | | 98 % | 100 % | | | | | |
| Ethics and Consumer Rights | ☺ | | | | | | | | |
| Access to ethics committee | Yes | | 93 % | 93 % | | | | | |
| Clinical Excellence and Safety | ☺ | | | | | | | | |
| Comfort within 48 hours of admit | | | 81 % | 88 % | | | | | |
| % Avoided unwanted hospitalizations | | | 98 % | 100 % | | | | | |
| Falls with injury/1000 patient days | 0.3 | 37.9 | 0.1 | 0.6 | | | | | |
| Inclusion and Access | ☺ | | | | | | | | |
| Median Length of Service | 23.0 | 73.6 | 13.0 | 18.0 | | | | | |
| % Patients admitted in a facility | 43 % | 54.9 | 27 % | 42 % | | | | | |
| Bereavement to community | Yes | | 98 % | 98 % | | | | | |
| Cancer % of Total Admissions | 34 % | 11.9 | 38 % | 44 % | | | | | |
| Organizational Excellence | ☺ | | | | | | | | |
| % Caregivers willing to recommend | 100 % | 100.0 | 98 % | 100 % | | | | | |
| Executive dashboard for PM | Yes | | 73 % | 73 % | | | | | |
| Workforce Excellence | ☺ | | | | | | | | |
| % Caregivers rating eve/wknd response | 74 % | 69.5 | 62 % | 68 % | | | | | |
| ADC per FTE by Discipline | | | | | | | | | |
| Nursing | 5.1 | 25.0 | 5.1 | 6.6 | | | | | |
| Total | 2.0 | 33.0 | 1.9 | 2.3 | | | | | |
| Weekly Visits per FTE by Discipline | | | | | | | | | |
| Nursing | | | 10.1 | 12.2 | | | | | |
| Social | | | 8.8 | 10.5 | | | | | |
| HHA | | | 17.0 | 20.3 | | | | | |
| % of physicians ABHPM-certified | 30 % | 59.5 | 0 % | 0 % | | | | | |
| % of nurses HPNA-certified | 8 % | 37.1 | 1 % | 20 % | | | | | |
| Standards | ☺ | | | | | | | | |
| Routine patient record review % | 10 % | 32.4 | 10 % | 20 % | | | | | |
| Date of last review against standards | 12/2006 | 36.30 | 6/2006 | 2/2007 | | | | | |
| Compliance | ☺ | | | | | | | | |
| Live discharges as a percent of total | 13 % | 63.6 | 9 % | 11 % | | | | | |
| Average Length of Service | 88.5 | 88.4 | 41.8 | 58.0 | | | | | |
| Routine patient record review % | 10 % | 32.4 | 10 % | 20 % | | | | | |
| Compliance meeting OIG Guidance | Yes | | 98 % | 98 % | | | | | |
| Stewardship and Accountability | ☺ | | | | | | | | |
| Average Length of Service | 88.5 | 88.4 | 41.8 | 58.0 | | | | | |
| ADC per FTE by Discipline | | | | | | | | | |
| Nursing | 5.1 | 25.0 | 5.1 | 6.6 | | | | | |
| Total | 2.0 | 33.0 | 1.9 | 2.3 | | | | | |
| Weekly Visits per FTE by Discipline | | | | | | | | | |
| Nursing | | | 10.1 | 12.2 | | | | | |
| Social | | | 8.8 | 10.5 | | | | | |
| HHA | | | 17.0 | 20.3 | | | | | |
| Performance Measurement | ☺ | | | | | | | | |
| % of all measures reported | 89 % | 68.4 | 50 % | 81 % | | | | | |
| Agency Characteristics | | You | Nat'l | Peer | | | | | |
| Agency Type | | | | | | | | | |
| Freestanding | Yes | 43 % | 61 % | | | | | | |
| Home Health | | 24 % | 16 % | | | | | | |
| Hospital | | 34 % | 23 % | | | | | | |
| Nursing Facility | | 0.0 | | | | | | | |
| Ownership | | | | | | | | | |
| Not-profit | Yes | 87 % | 94 % | | | | | | |
| For Profit | | 6 % | 6 % | | | | | | |
| Government | | 7 % | | | | | | | |
| Operate Inpatient | Yes | 31 % | 58 % | | | | | | |

OCS QAPI Snapshot Web Page

- ▶ **Secure Login**
 - Enter through Client Login area of OCS website
 - Unique username and password (agency level)
 - Secure **HTTP** connection
- ▶ **Data Submission**
 - A simple online form
 - Select the desired survey
 - Links to detailed definitions for each data element
- ▶ **Report Access**
 - Select and download reports you wish to review
 - Reports available for each quarter you submit data
- ▶ **Snapshot Interpretation Guide**

QAPI Snapshot Login

From Client Login, select "Hospice", then click on Login to QAPI Snapshot button

Click the appropriate button below to access the OCS Secure Hospice Server.

- Login to Hospice PeerForum
- Login to PeerForum Survey
- Login to QAPI Snapshot

CMS Visit Reporting Guide
Download your copy compliments of
HOSPICE Leaders Project™

QAPI Snapshot Login



Welcome to the login page for the OCS QAPI Snapshot

| | |
|-----------|--------------------------------------|
| Agency ID | <input type="text"/> |
| Password | <input type="password"/> |
| Login | <input type="button" value="Login"/> |

Please use this Login button, not the Enter key on your keyboard.

Enter Agency ID & Password

Click Login button on screen to access surveys and reports

QAPI Snapshot Survey Selection



OCS QAPI Snapshot

| Available Surveys |
|--|
| Q1.08 OCS QAPI Snapshot Survey |
| 2007 OCS QAPI Snapshot Survey |
| Q4.07 OCS QAPI Snapshot Survey |
| Q3.07 OCS QAPI Snapshot Survey |
| Q2.07 OCS QAPI Snapshot Survey |
| Q1.07 OCS QAPI Snapshot Survey |
| 2006 OCS QAPI Snapshot Survey |
| 2005 OCS QAPI Snapshot Survey |

Click on survey link to begin entering data

QAPI Snapshot Data Entry

Navigation links for jumping to sections to review or complete

Submit or Save below before navigating away from this page.

[INSTRUCTIONS, Q&A](#) [STAFFING OUTCOMES](#)
[ORGANIZATIONAL PROFILE](#)
[VOLUME](#)

Lyndon's Test Hospice Agency name Q1.08 OCS QAPI Snapshot Survey Last Modified: N/A

INSTRUCTIONS, Q&A

Q1.08 OCS QAPI Snapshot Survey
 Submission Deadline: May 7, 2008

Thank you for being part of the OCS QAPI Snapshot program. This is the **Q1.08 OCS QAPI Snapshot Survey**. Please read all instructions and notes carefully.

GENERAL NOTES

Help - If you have questions about the online submission process or any other aspect of the QAPI Snapshot program, please call the OCS QAPI Help Desk at 603.795.4802 or email QAPI@ocsys.com, and we will be happy to assist you.

Data Submission - Be sure to save your data on each page before moving on to a new page to ensure that it is submitted to the database.

Zero Values vs. Empty Fields - It is important that we differentiate between a response of zero (0) and no response. You should not enter a zero if a question is not applicable to your organization or you cannot obtain the appropriate data.

Selected survey and date last modified

QAPI Snapshot Data Entry

The screenshot shows the OCS web application interface for data entry. At the top left is the OCS logo with the tagline 'LEADING HEALTHCARE INSIGHT'. To the right of the logo are navigation links: 'INSTRUCTIONS_OBA', 'ORGANIZATIONAL PROFILE', 'VOLUME', and 'STAFFING OUTCOMES'. A red instruction reads: 'Submit or Save below before navigating away from this page.' The main form area contains several input fields: 'Nursing Facility', 'Residential Care Setting', a highlighted 'TOTALS' section, a 'CANCER' dropdown menu, and 'Cancer Admissions'. Each field has an information icon (i) to its right. A 'Save and Continue' button is located below the form. A green callout box with an arrow pointing to the button contains the text: 'Always save before moving away from page or leaving computer!'. Below the form, there are two lines of red text: 'Please be patient after clicking submit. It may take a few seconds to process your data.' and 'If you have questions, please feel free to call OCS at 603.795.4802.' The browser's address bar at the bottom shows 'Internet'.

QAPI Snapshot

Features and Benefits

- ▶ **Uniform State Specific QAPI Measures**
- ▶ **Full QAPI Compliance**
- ▶ **Easy Submission and Report Access**
- ▶ **Free Support**
- ▶ **In line with NHPCO National Data Set**
- ▶ **In line with Family Evaluation of Hospice Care**

*Join the over 700 hospices
using QAPI Snapshot!*

Logistics of Participation

A Simple, Well-supported Process

- ▶ **Upon registration, you receive an email from OCS, including:**
 - *Your agency's unique username and password*
 - Survey soft copies, measure descriptions, and data definitions
 - OCS key contact information
- ▶ **Determine internal data sources and reporting process**
- ▶ **Submit quarterly data for as much of 2008 as possible**

Pricing

- ▶ **Based per Provider Number**
 - \$1,450
- ▶ **Fee includes**
 - 1 year participation with Tennessee Hospice Organization's QAPI Snapshot Program
 - Agency wide participation for QAPI Impact Web seminar (1.5 CEUs)
 - Free Support & Report Interpretation
 - Ensured QAPI Compliance!

For More Information

Please Call
888.325.3396
Or Email
hospice@ocsys.com