

# Quality Counts

Arizona Home Health Quality Initiative

## In This Issue

Culture, Creativity, and Collaboration . . .	2
New Best Practice Tool Available. . . . .	2
Transitional Care Coordination . . . . .	2
Our STAR Performers . . . . .	3
CMS Announces Payment Changes . . .	3
Culture Surveys . . . . .	3
Oral Medication Resources . . . . .	4
Influenza Vaccine Reminder . . . . .	4
Fall 2006 Resources . . . . .	4
HSAG Contact Information . . . . .	4

## NEW! Tip of the Month

**HSAG's home health staff is busy finding resources to help home health agencies implement best practices in their quality improvement efforts.**

**Look for helpful monthly tips in your e-mail box starting this month!**

## Immunizations

### *The ACH connection*

Immunizations can directly impact acute care hospitalization rates and reduce morbidity, especially in the elderly populations and those at-risk patients. More than 1.4 million people are hospitalized each year for pneumonia and more than 200,000 for influenza. Every year nearly 80,000 die from vaccine-preventable influenza and pneumonia in the United States, despite the availability of effective vaccines. Some 50 to 80 percent of these deaths—most of which occur in persons more than 65 years of age—could be prevented with timely and widespread vaccination.

Home health agencies should be assessing all of their patients for immunization status, determining which patients need to be immunized, and working to ensure that all of the agency's eligible patients get both the influenza and pneumococcal vaccines. Does your agency have a process in place to track if each eligible patient that desires the influenza and pneumococcal vaccinations receives them? Do patients know where to go to get the vaccines?

Designate a member of your staff as an "Immunization Champion." Have them access the Immunization Toolkit on MedQIC where they can find information, tracking tools, and other resources to help your agency establish an immunization protocol and improve patient care.

*(Continued on page 2)*

### **November is National Home Care and Hospice Month**

Celebrate the wonderful work you're doing! The National Association of Home Care and Hospice (NAHC) has developed three key messages for this year. They include "Home Care: Compassionate Health Care Delivered to Your Doorstep," "Hospice: Completing the Circle of Life with Love and Dignity," and Home Care Aide Week: Healing Hands, Loving Hearts." Visit NAHC's Web site, [http://www.nahc.org/mediaPR\\_110106.html](http://www.nahc.org/mediaPR_110106.html), for more information.

Home health agencies are encouraged to work with Health Services Advisory Group (HSAG) to increase immunization rates and keep patients healthy. Don't let your patients become a statistic. Ensure that they are immunized. It's the right thing to do!

If you have questions on how to implement and track an immunization protocol, please contact Pam Sensky, RN, HSAG Clinical Quality Specialist, at 602.745.6330 or at [psensky@azqio.sdps.org](mailto:psensky@azqio.sdps.org).

*Source: Quality Insights of Pennsylvania (PA QIO, 2006)*

## Culture, Creativity, and Collaboration

### One agency's success in reducing ACH

McKean County Visiting Nurses Association & Hospice—a home health agency in Pennsylvania—stepped out of the box to work collaboratively with a local medical center to reduce its acute care hospitalization (ACH) rate and keep patients at home.

The agency was experiencing undesirable publicly reported outcomes, high staff turnover, and unfavorable hospitalization rates—closely linked to other care settings. Something had to change.

Although the agency transformed its undesirable outcomes and staff turnover through various strategies including consistent OASIS coding, rewards/recognition, evaluating organizational culture, and supporting collaboration among staff, its ACH rate was not improving enough. The agency decided to host a collaborative luncheon and invite key leaders from various departments of a local medical center

to brainstorm and create open communication. The home health agency then prioritized, investigated, and implemented as many of these collaborative ideas as possible.

Ultimately, the agency reduced staff turnover from 51 percent to 21 percent, reduced ACH by 7 percent in the last year, and improved medication management by 10.5 percent. The entire Transformational Grand Rounds success story will be posted on MedQIC, <http://www.medqic.org>, in the near future.

## Transitional Care Coordination

### What agencies can do

“Care transitions” refers to the movement patients make between health care practitioners and settings as their conditions and care needs change during the course of a chronic or acute illness (Coleman, 2003). Transitional care, which encompasses both the sending and the receiving aspects of the transfer, is essential for persons with complex needs (American Geriatrics Position Statement, 2006).

Avoidable hospitalizations may be decreased with the provision of coordinated transitional care that is based on a comprehensive plan of care and the availability of health care practitioners who are well trained in chronic care and have current information about the patient's goals, preferences, and clinical status.

Agencies can play an active role by:

- Developing a quality improvement organizational culture that values and supports coordinated transitional care.
- Ensuring routine/structured application of comprehensive discharge planning, plus post-discharge support for older inpatients with complex diseases to optimize the transition from acute hospital care to home.
- Ensuring interdisciplinary coordinated care planning occurs collaboratively with patients and/or caregivers.
- Ensuring effective ongoing communication occurs across all disciplines with physicians involved in the patient's treatment plan.

### New Best Practice Tool Available

Are you interested in saving time? Do you want to stay focused when doing chart audits? Do you want to find root causes of issues within your agency?

If so, contact Caralyn Williams, MAOM, HSAG Quality Improvement Specialist, at 602.745.6284 or at [cwilliams@azqio.sdps.org](mailto:cwilliams@azqio.sdps.org) for a copy of the new Best Practice Tool CD and instructions.

The following best practices can be modified by agencies to meet the needs of their patient populations.

- Develop a collaborative, effective communication process with hospital discharge planners.
- Include an assessment of medication discrepancies in patient medication assessments at SOC/ROC using the [Medication Discrepancy Tool](#).
- Introduce the [SBAR](#) communication tool to staff and teach them how to use it.

If you need assistance implementing any of these strategies, please contact Caralyn Williams, MAOM, HSAG Quality Improvement Specialist, at 602.745.6284 or at [cewilliams@azqio.sdps.org](mailto:cewilliams@azqio.sdps.org).

## Our STAR Performers

### *Agencies are Setting Targets-Achieving Results*

A big “thank you” to all of our STAR performers that have created a STAR Web site account and set their targets for publicly reported quality measures. These agencies are using STAR to view their quality mea-

sure trend reports; compare performance to state and national peers; select confidential, performance based targets; and track agency achievement over time.

In addition to all of these benefits, agencies can use the STAR Web site to understand OASIS measures, definitions, and assessment strategies for all publicly reported quality measures. It is recommended that agencies update their STAR goals quarterly by logging on to <http://www.hhqi-star.org> and going to the My Target Setting tab.

If you have not created a STAR account, contact Caralyn Williams, MAOM, Quality Improvement Specialist, at 602.745.6284 or at [cewilliams@azqio.sdps.org](mailto:cewilliams@azqio.sdps.org).

## Culture Surveys

### *Remeasurement time is coming!*

HSAG will once again be fielding the Culture Change Survey as part of a culture change quality improvement effort. The survey focuses on basic processes and infrastructure that impact the ability of agencies to adopt, implement, and sustain best practices. In March 2006, the survey was distributed to home health agencies throughout Arizona and baseline data was collected. In early 2007, the survey will be redistributed so remeasurement data can be collected.

Agencies that initially submitted surveys to HSAG received guidance in interpreting their results and understanding how their agency’s ability to incorporate best practices affected their quality improvement efforts. Agencies learned how the survey questions related to organizational culture domains such as organizational learning, leadership, teamwork, communication, information management, patient-centered care, and care coordination.

Agencies were asked to share survey results with staff and encourage discussion to identify a priority area for improvement. For example, lower scores identified weaker areas in the agency’s organizational culture and created staff discussion to identify specific processes that needed to be targeted.

## **CMS Announces Payment Changes**

### *CMS Announces Payment Changes for Medicare Home Health Services and Certain Durable Medical Equipment*

Earlier this month the Centers for Medicare & Medicaid Services (CMS) announced a 3.3 percent market basket increase for Medicare payment rates for home health services for calendar year 2007. The home health prospective payment system (HH PPS) annual update will bring an estimated additional \$410 million in wage-adjusted payments to home health agencies next year.

“CMS is dedicated to ensuring high quality home health care for our Medicare beneficiaries,” said Leslie V. Norwalk, Esq., Acting Administrator of CMS, which oversees the Medicare HH PPS. “This rule rewards home health agencies that continue to report quality data and also provides beneficiaries with access to more affordable oxygen equipment.”

Visit <http://www.cms.hhs.gov/apps/media/press/release.asp?Counter=2040> to view the entire press release.

## Oral Medication Resources

### Q-MAP learning sessions available on MedQIC

Five Quality Medication Administration Project (Q-MAP) learning sessions are now available on MedQIC. Learn how to provide a standardized approach to evaluating:

- Patient ability to administer medications.
- The presence and possible underlying causes of medication nonadherence.
- Patient knowledge and ability related to the Improvement in Management of Oral Medications outcome measure.
- Complex medication regimens and simplification.
- Appropriate selection of medication compliance aids based on identified patient skills/deficits.

Visit <http://www.medqic.org> for more information.

### Influenza Vaccine Reminder

Visit <http://www.cms.hhs.gov/MLN/MattersArticles/downloads/SE0667.pdf> for more information about Medicare's coverage of adult immunizations and educational resources.

### Fall 2006 Resources on MedQIC

#### SBAR Series

Situation-Background-Assessment-Recommendation package designed to improve communication.

#### ACH Clinical Resource Kit

Patient-centered tools and resources organized by best practices.

#### Home Telehealth Reference 2006/2007

Resources designed to assist agencies with improving processes for home health teletriage.

#### Immunization Toolkit 2006

Resources featuring current information and resources for influenza and pneumococcal immunizations.

#### ACH Promotional Package

Resources and tools to assist agencies in promoting ACH improvement with physicians, other medical professionals, and the general public.

Visit MedQIC's home health section at <http://www.medqic.org> for more information and downloadable resources for your home health agency.

## HSAG Home Health Team Contact Information

Mary Fermazin, MD, MPA Vice President, Health Policy & Quality Measurement <a href="mailto:mfermazin@hsag.com">mfermazin@hsag.com</a> 602.745.6207	Joe Bestic, NHA, BA Director, Home Health & Nursing Homes <a href="mailto:jbestic@azqio.sdps.org">jbestic@azqio.sdps.org</a> 602.745.6205	Caralyn E. Williams, MAOM Quality Improvement Specialist <a href="mailto:cwilliams@azqio.sdps.org">cwilliams@azqio.sdps.org</a> 602.745.6284
Pam Sensky, RN Clinical Quality Specialist <a href="mailto:psensky@azqio.sdps.org">psensky@azqio.sdps.org</a> 602.745.6330	Dawn Williams, BS Communications Project Manager <a href="mailto:dwilliams@azqio.sdps.org">dwilliams@azqio.sdps.org</a> 602.745.6316	Colleen Angotti Administrative Assistant II <a href="mailto:cangotti@azqio.sdps.org">cangotti@azqio.sdps.org</a> 602.745.6295

Visit HSAG's Home Health Quality Initiative (HHQI) Web site at <http://hhqi.hsag.com>

This material was prepared by Health Services Advisory Group, Inc. (HSAG), the Medicare Quality Improvement Organization for Arizona, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.