Advancing Excellence in America's Nursing Homes

Getting Started with the Advancing Excellence Hospitalization Goal

Session 1: The basics

June 27, 2013

CFMC ISO 9001 Certified

Goals for Session 1

1. Understand how and why to register for the Campaign

2. Become familiar with the mechanics of the AE Hospitalizations Tracking Tool (Excel), the specific data required to complete the tool, how to enter data, and how to check your data.

3. Know the kind of information produced by entering required fields only and how to use it.

Poll

Are you registered for the Advancing Excellence in America's Nursing Homes Campaign?

- Yes
- No

Advancing Excellence in America's Nursing Homes

About the Campaign

National, Voluntary, Aligned

Registered Participant

⇨ Register/Update Profile

⇨ Select Goals

Active Participant

⇨ Submit Data

www.nhqualitycampaign.org

Advancing Excellence in America's Nursing Homes

Why Register AND Enter Data?

Only those who register and enter data can participate fully in the Campaign:

- ⇨ Instant access to trend graphs of your progress over time
- ⇨ Access to comparative data at state and national level
- ⇨ Let consumers know you're dedicated to quality care

www.nhqualitycampaign.org

Advancing Excellence in America's Nursing Homes

Quality Improvement Resources for NINE Goals

Hospitalizations	Staff Stability	Pressure Ulcers
Medications *Antipsychotics*	Consistent Assignment	Infections *C. difficile*
Mobility	Person-Centered Care	Pain Management

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Organizational Goals

Hospitalizations	Staff Stability	Pressure Ulcers
Medications *Antipsychotics*	Consistent Assignment	Infections *C. difficile*
Mobility	Person-Centered Care	Pain Management

Today's Goal

Hospitalizations	Staff Stability	Pressure Ulcers
Medications *Antipsychotics*	Consistent Assignment	Infections *C. difficile*
Mobility	Person-Centered Care	Pain Management

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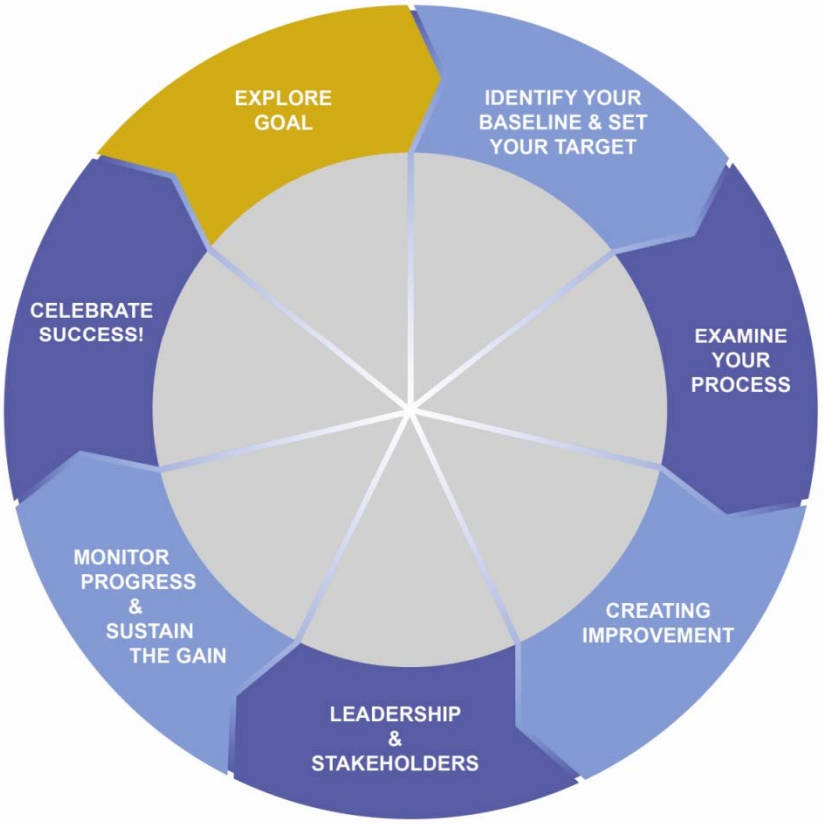
Poll

Have you tried downloading or using the AE Safely Reduce Hospitalizations Tracking Tool yet?

- Yes
- No

Advancing Excellence in America's Nursing Homes

The Campaign: Circle of Success

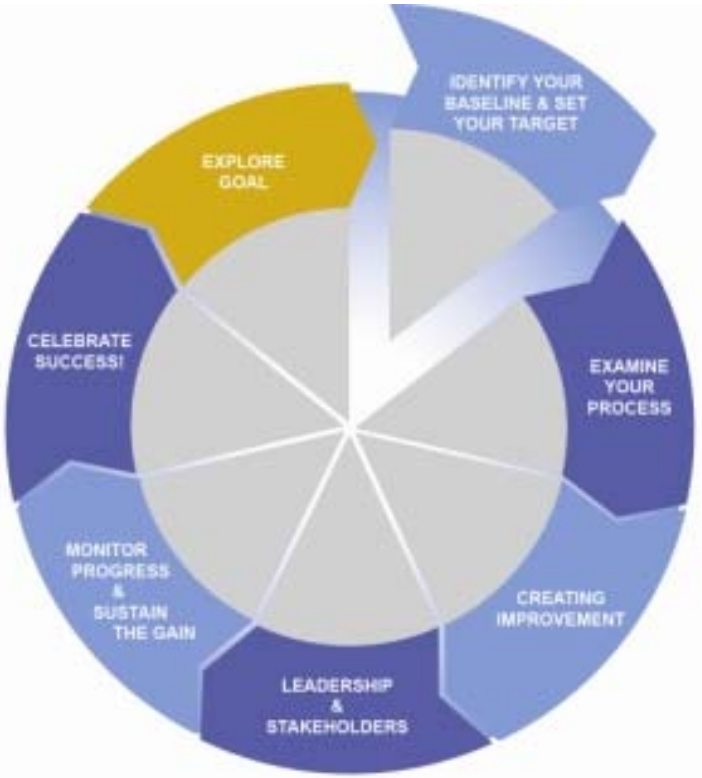


Advancing Excellence in America's Nursing Homes

Data and the Quality Improvement Process

Month 1

How do I know where I am?



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Required Fields Month 1 Homework

For Residents Recently Discharged from Hospital

- Resident name
- Date discharged from hospital
- Status on admission to nursing home from hospital (Part A, Other)

For Residents Transferred to Hospital

- Resident name
- Purpose of nursing home stay
  (PAC-type Care/Chronic Long Term Care)
- Date of transfer to hospital
- Outcome of transfer

For Your Home (or the group within your home you are tracking)

- ADC (or mid-month census) by purpose of stay

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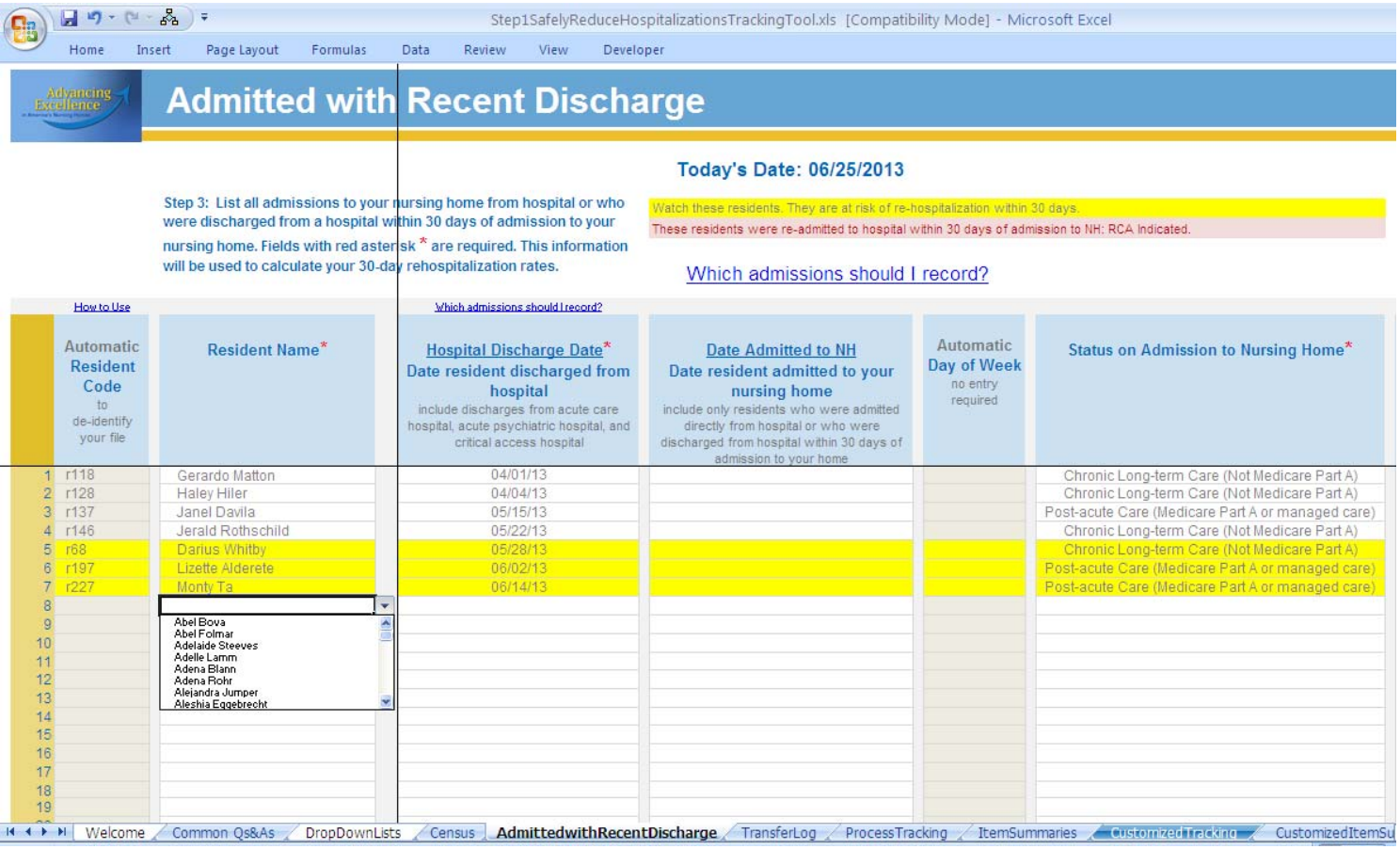
Homework 1 Information



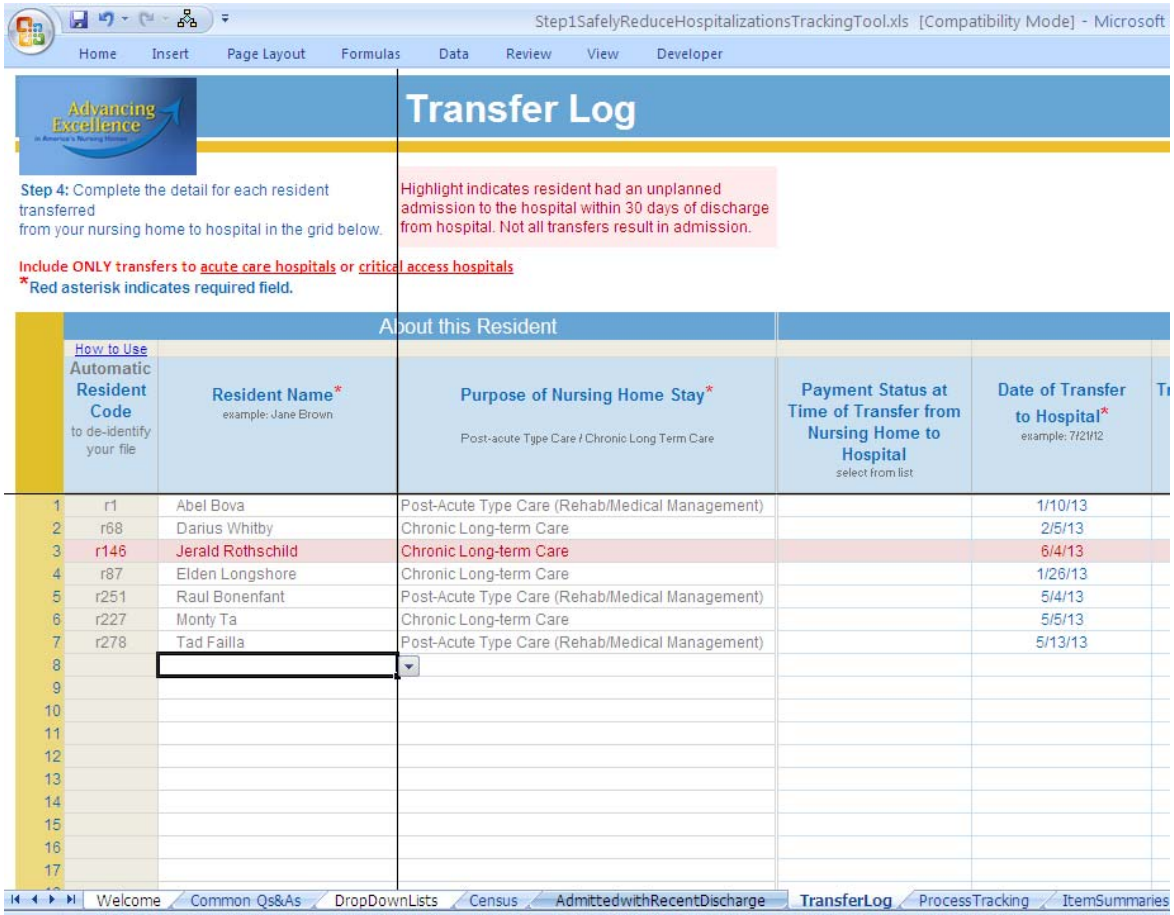
Entering data the first month doesn't JUST get us our outcome measures.

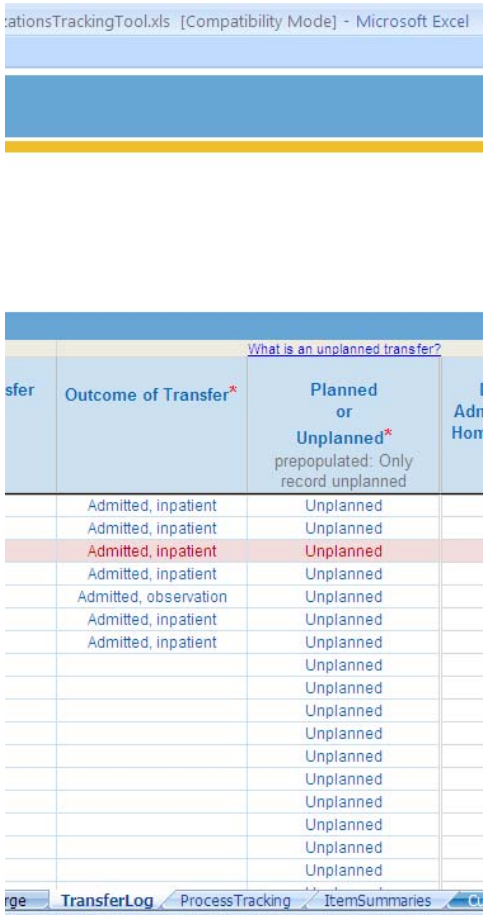
Enter data on a daily basis, and use this sheet to identify residents at risk for a 30-day readmission.

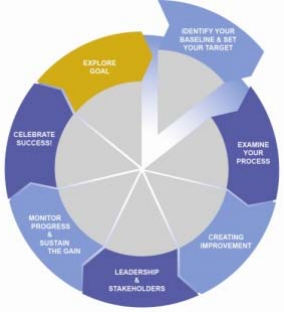
Residents highlighted yellow are on your 'Daily Hospital Walking Rounds.'

Homework 1 Information

Entering data the first month doesn't JUST get us our outcome measures for the first month. Transfers highlighted in RED are 30-day readmissions. These deserve a special look.





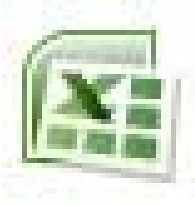


Homework 1 Information How do I know where I am?

1. **30-Day Readmission Rate**
2. **Hospital Admission Rate**
3. **Rate of Transfers to ED Only**
4. **Rate of Transfers Resulting in Observation Stay**

February 2013			
Status at Time of Admission from Hospital			
	Post-Acute Care	Chronic Long Term Care (non-Medicare)	All Residents
Number of Residents with Date of Discharge from Hospital in This Month	13	17	30
30-Day Readmission Rate percent of those readmitted to hospital within 30 days of the date of discharge from hospital	30.8%	29.4%	30.0%
Purpose of Stay at Time of Transfer to Hospital			
	Post-Acute Care	Chronic Long Term Care	All Residents
Resident Days This Month Your ADC x the number of days in the month	1092	3080	4172
Hospital Admission Rate per 1000 resident days	2.7	4.5	4.1
Rate of Transfers to Emergency Department Only per 1000 resident days	2.7	2.3	2.4
Rate of Transfers Resulting in Observation Stay per 1000 resident days	2.7	1.6	1.9

The Tracking Tool



AE_SafelyReduceHospitalizationsTrackingTool.xls

AE_SafelyReduceHospitalizationsINSTRUCTIONS.xls

www.NHQualityCampaign.org

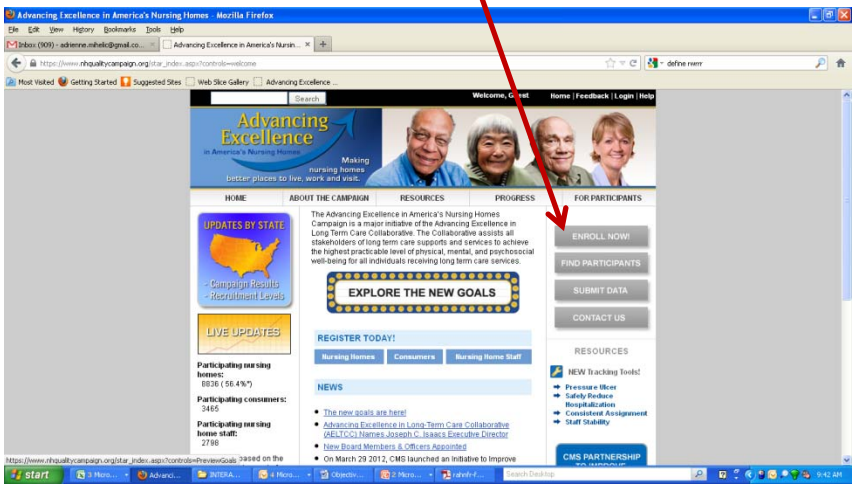
Homework

Goals & Homework

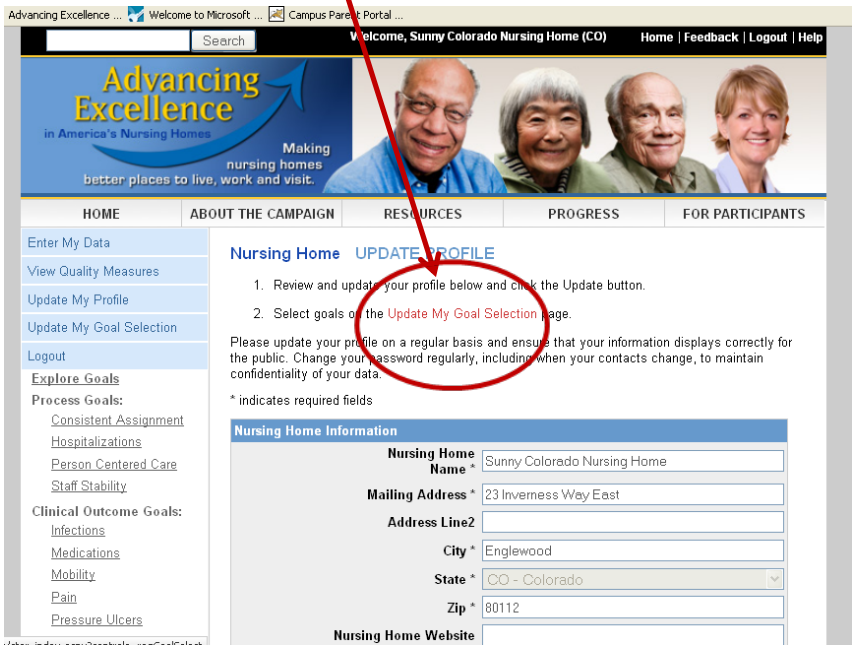
Session 1	Homework 1 (due 7/18/13)
Understand how and why to register for the Campaign	Register and select goals
Become familiar with the mechanics of the AE Hospitalizations Tracking Tool (Excel), the specific data required to complete the tool, how to enter data and how to check data entry.	Download the Hospitalizations Tracking Tool. Enter ONLY required fields for each transfer i. Check count of residents admitted with recent discharge ii. Check counts of residents transferred
Know the kind of information produced by entering required fields only and how to use this.	Look at your results each day. i. Who is yellow (At Risk) ii. Who is red (Readmitted) iii. Outcomes

Register & Select Goals

To register for the campaign, go to the AE Homepage:
www.nhqualitycampaign.org
Click on the Enroll Now button, and follow the instructions.



To select new goals, log in to the AE Website, and click 'Update My Goal Selection.'



Forgot your password?

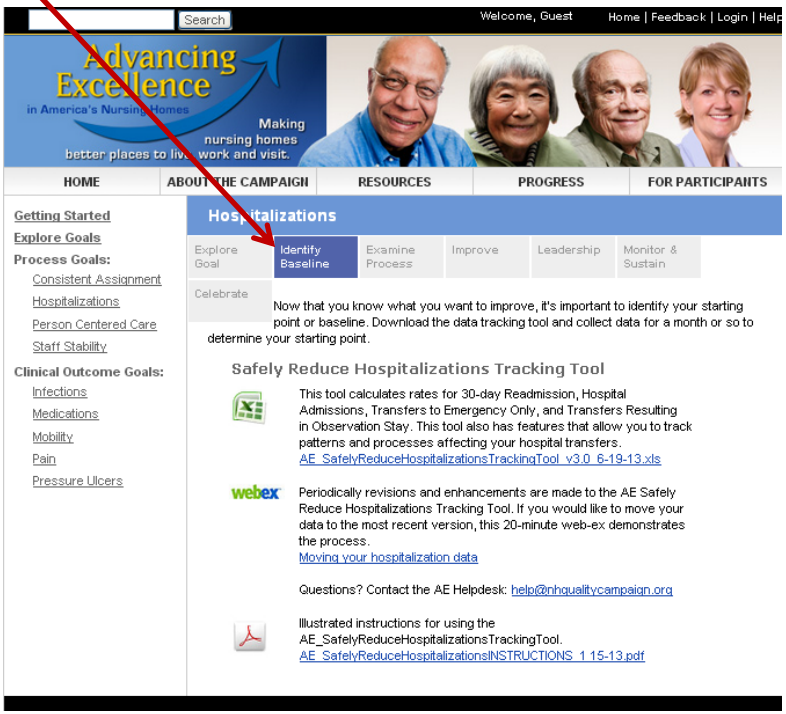
- Try the automatic help on the login screen
- Contact your QIO (link from the log-in page to find your QIO contact)
- help@nhqualitycampaign.org

Find Tracking Tool

From the AE Homepage:
www.nhqualitycampaign.org
Click on the marquee.

Find goal-specific material through the left-side navigation pane.

The Tracking Tools and instructions are located in the Identify Baseline area

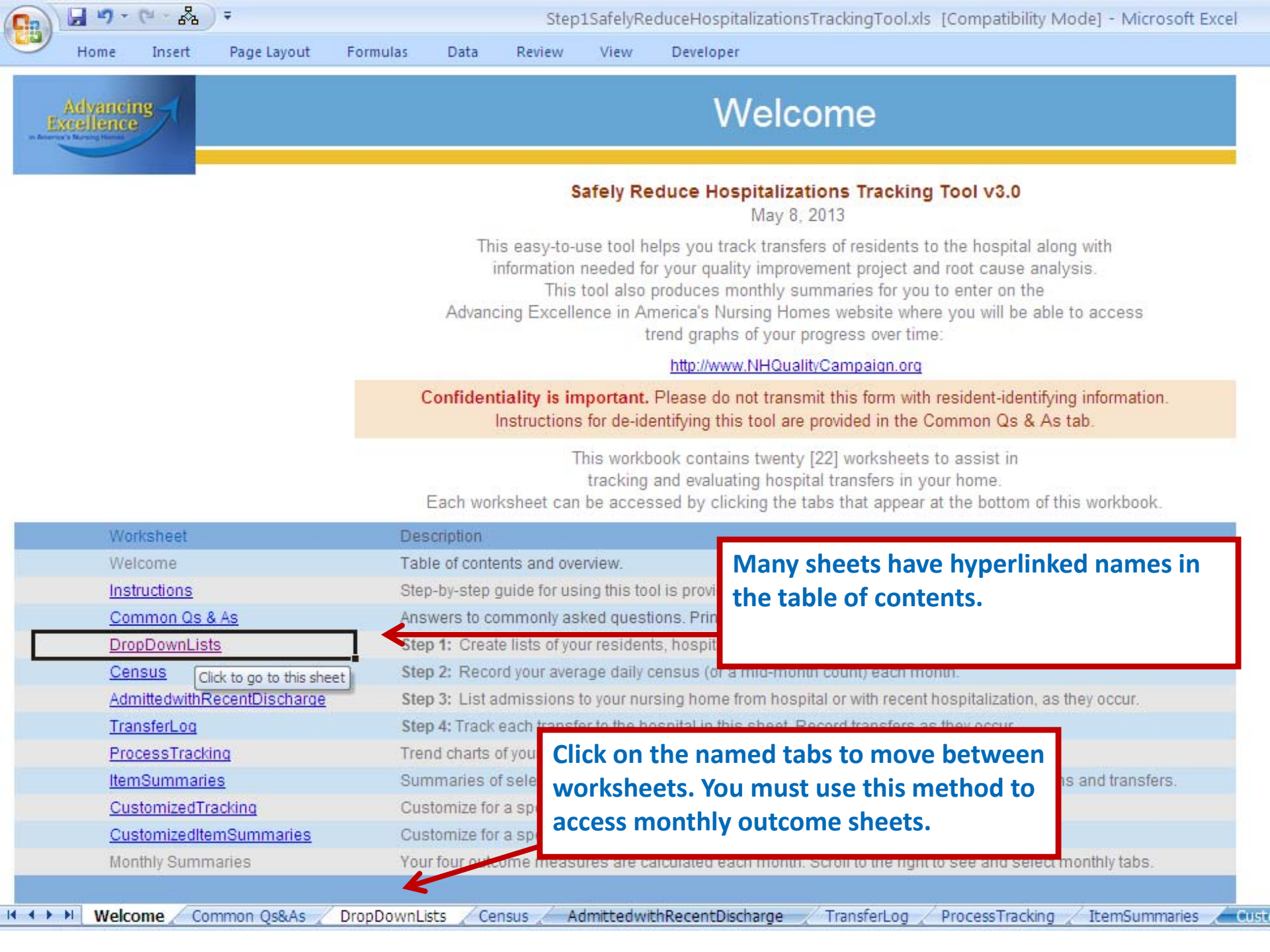


Right click and select open hyperlink to go to this page:
Identify Baseline

Download Tool **and** Instructions

Click on the blue file name to open/download file. SAVE the Excel file to your computer.

Print Instructions for easy reference while working with the Excel file.


Step1SafelyReduceHospitalizationsTrackingTool.xls [Compatibility Mode] - Microsoft Excel
Home
Insert
Page Layout
Formulas
Data
Review
View
Developer
Advancing Excellence
Welcome
Safely Reduce Hospitalizations Tracking Tool v3.0
May 8, 2013
This easy-to-use tool helps you track transfers of residents to the hospital along with information needed for your quality improvement project and root cause analysis. This tool also produces monthly summaries for you to enter on the Advancing Excellence in America's Nursing Homes website where you will be able to access trend graphs of your progress over time:
http://www.NHQualityCampaign.org
Confidentiality is important. Please do not transmit this form with resident-identifying information. Instructions for de-identifying this tool are provided in the Common Qs & As tab.
This workbook contains twenty [22] worksheets to assist in tracking and evaluating hospital transfers in your home. Each worksheet can be accessed by clicking the tabs that appear at the bottom of this workbook.
Worksheet
Description
Welcome
Table of contents and overview.
Instructions
Common Qs & As
DropDownLists
Census
Click to go to this sheet
AdmittedwithRecentDischarge
TransferLog
ProcessTracking
ItemSummaries
CustomizedTracking
CustomizedItemSummaries
Monthly Summaries
Step 1: Create lists of your residents, hospit
Step 2: Record your average daily census (
Step 3: List admissions to your nursing home from hospital or with recent hospitalization, as they occur.
Step 4: Track each
Many sheets have hyperlinked names in the table of contents.
Click on the named tabs to move between worksheets. You must use this method to access monthly outcome sheets.
Welcome
Common Qs&As
DropDownLists
Census
AdmittedwithRecentDischarge
TransferLog
ProcessTracking
ItemSummaries

DropDownLists

Step 1
In the columns below, type or paste lists of:
A Hospitals from which you receive admissions.
B Clinicians who order transfers to hospital from your nursing home.
C Names of residents in your nursing home.
D Your residents' health care plans
These lists will create dropdown lists in subsequent sheets.
You may add to these lists at any time.

Look! Click here for instructions on copying and pasting your lists from another source.

Instructions on Copying & Pasting Names from another Excel workbook, Word or other document

Click to access. There are two responses related to this topic.

	Admitted from	Clinicians	Residents	Medicare Insurance Plan
	Beginning at row a5, add the names of acute care hospitals from which you receive admissions.	In the spaces below, list the clinicians who order transfers to hospital from your nursing home.	In the spaces below, list the residents in your nursing home. This will ensure that their names appear consistently throughout this workbook.	regular fee-for-service vs. a managed care plan Beginning at row p2, list your residents' managed care plans. This will ensure that their names appear consistently throughout this workbook.
a1	Home		r1	p1 Regular Medicare Fee-for-Service
a2	Assisted		r2	p2
a3	Other Nu		r3	p3
a4	Other		r4	p4
a5			r5	p5
a6			r6	p6
a7			r7	p7
a8			r8	p8
a9			r9	p9
a10			r10	p10
a11			r11	p11
a12			r12	p12
a13			r13	p13
a14		c14	r14	p14
a15		c15	r15	p15
a16		c16	r16	p16
a17		c17	r17	p17
a18		c18	r18	p18
a19		c19	r19	p19
a20		c20	r20	p20
a21		c21	r21	p21
a22		c22	r22	p22

For this first homework, only enter resident names. Enter names of all residents in house, and add any new admissions during the month. You may copy and paste this from another source.

Census

Step 2

- At the **end** of each month, enter your average daily census (ADC) for the month.
- If you are tracking transfers for only part of your home and/or do not have your ADC by stay type, you may use your census on the 15th day of the month.

NOTE: Whether you use ADC or census, this number should reflect the number of residents in the specified type of care during the month. It is not the same as 'paid beds.'

	Enter Average Daily Census for PAC-type Care*	Enter Average Daily Census for Chronic LTC-type Care*	Combined Average Daily Census for the Month Calculated for You	Days in this Month	Resident Days this Month ADC x The Number of Days in the Month Calculated for You
January 2013	37.0	112.0	149.0	31	4619
February 2013	39.0	110.0	149.0	28	4172
March 2013	38.0	105.0	143.0	31	4433
April 2013	40.0	110.0	150.0	30	4500
May 2013			0.0	31	0
June 2013			0.0	30	0
July 2013			0.0	31	0
			0.0	31	0
			0.0	30	0
			0.0	31	0
			0.0	30	0
			0.0	31	0

At the end of each month, fill in your average daily census for Post Acute and Long-Term

Admitted with Recent Discharge

Today's Date: 05/07/2013

Step 3: List all admissions to your nursing home from hospital or who were discharged from a hospital within 30 days of admission to your nursing home. Fields with red asterisk * are required. This information will be used to calculate your 30-day rehospitalization rates.

Watch these residents. They are at risk of re-hospitalization within 30 days.

These residents were re-admitted to hospital within 30 days of admission to NH: RCA Indicated.

Which admissions should I record?

How to Use | Which admissions should I record?

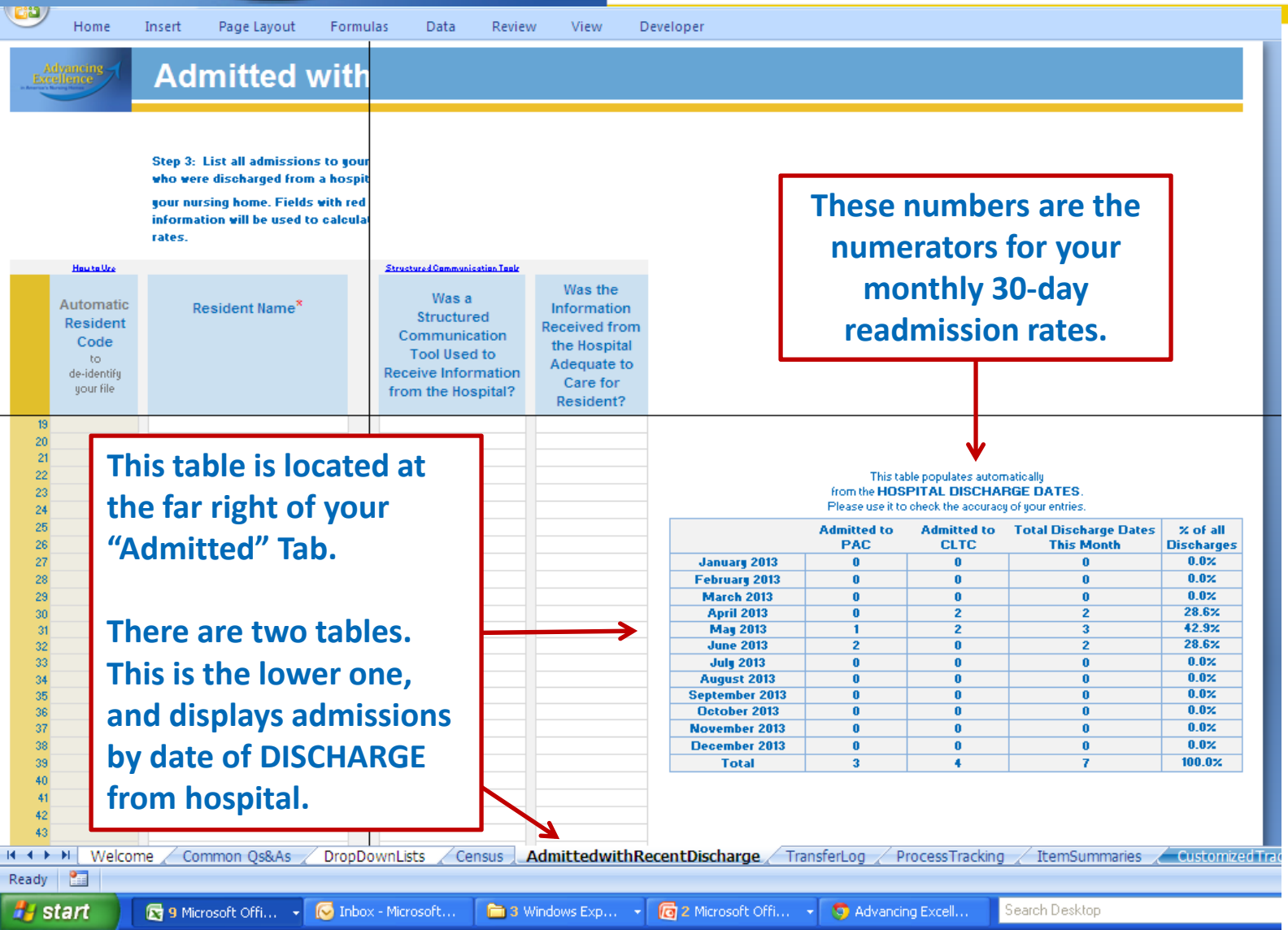
	Automatic Resident Code to de-identify your file	Resident Name*	Hospital Discharge Date* Date resident discharged from hospital include discharges from acute care hospital, acute psychiatric hospital, and critical access hospital	Date Admitted to NH Date resident admitted to your nursing home include only residents who were admitted directly from hospital or who were discharged from hospital within 30 days of admission to your home	Automatic Day of Week no entry required	Status on Admission to Nursing Home*
1	r206	Gerardo Matton	04/01/13			Chronic Long-term Care (Not Medicare Part A)
2	r134	Haley Hiler	04/04/13			Chronic Long-term Care (Not Medicare Part A)
3	r105	Janel Davila	04/22/13			Post-acute Care (Medicare Part A or managed care)
4	r18	Jerald Rothschild	04/10/13			Chronic Long-term Care (Not Medicare Part A)
5	r29	Darius Whitby	01/30/13			Chronic Long-term Care (Not Medicare Part A)
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						

Resident's Name
Select from dropdown list or enter name exactly as it appears on the drop down list.

The 3 required fields are marked with a red asterisk.

Type in date, but use dropdown lists for name and status on admission.

Check numbers admitted with recent discharge



Home Insert Page Layout Formulas Data Review View Developer

Transfer Log

Step 4: Complete the detail for each resident transferred from your nursing home to hospital in the grid below.

Highlight indicates resident had an unplanned admission to the hospital within 30 days of discharge from hospital. Not all transfers result in admission.

Include ONLY transfers to acute care hospitals or critical access hospitals

*Red asterisk indicates required field.

	About this Resident							What is an unplanned transfer?
	How to Use							
	Automatic Resident Code to de-identify your file	Resident Name* example: Jane Brown	Purpose of Nursing Home Stay* Post-acute Type Care / Chronic Long Term Care	Payment Status at Time of Transfer from Nursing Home to Hospital select from list	Date of Transfer to Hospital* example: 7/21/12	Outcome of Transfer*	Planned or Unplanned* prepopulated: Only record unplanned
1	r213	Abel Bova	Post-Acute Type Care (Rehab/Medical Management)		1/10/13	Admitted, inpatient	Unplanned
2	r191	Alvera Wire	Post-Acute Type Care (Rehab/Medical Management)		1/10/13	Admitted, inpatient	Unplanned
3	r274	Aurora Noblitt	Chronic Long-term Care		2/8/13	Admitted, inpatient	Unplanned
4	r194	Bryanna Damico	Chronic Long-term Care		2/2/13	Admitted, inpatient	Unplanned
5	r203	Cedric Mcmasters	Chronic Long-term Care		2/3/13	Admitted, inpatient	Unplanned
6	r273	Conception Aden	Chronic Long-term Care		2/1/13	Admitted, inpatient	Unplanned
7	r29	Darius Whitby	Chronic Long-term Care		2/5/13	Admitted, inpatient	Unplanned
8	r249	Donny Mehl	Chronic Long-term Care		2/3/13	Admitted, inpatient	Unplanned
9	r219	Elden Longshore				Admitted, inpatient	Unplanned
10	r223	Emmett Mcbride				Admitted, inpatient	Unplanned
11	r153	Florine Shock				Admitted, inpatient	Unplanned
12	r279	Georgiana Andres				Admitted, inpatient	Unplanned
13	r251	Glenda Cardella				Admitted, inpatient	Unplanned
14	r247	Ignacio Retherford				ED visit only	Unplanned
15	r245	Jc Raffield				ED visit only	Unplanned
16	r93	Jonna Weitzman				ED visit only	Unplanned
17	r172	Julienne Mcalpine	Chronic Long-term Care		2/15/13	ED visit only	Unplanned

The 4 required fields are marked with a red asterisk.

Type in date, but use dropdown lists for name and status on admission.

Census | AdmittedwithRecentDischarge | TransferLog | ProcessTracking | ItemSummaries | CustomizedTracking | CustomizedItemSummaries | January 2013 | Febr

Ready

Average: 114.2470101 Count: 11263 Sum: 496746

There are two tables on each monthly tab. For now, we just want to check the numbers – numerators and denominators – on the lower table.

Numerators and Denominators			
Status at Time of Admission from Hospital			
	Post-Acute Care	Chronic Long Term Care (non-Medicare)	All Residents
Number of Residents with Date of Discharge from Hospital in This Month	2	0	2
Number of Residents Discharged from Hospital this Month Who were Readmitted to Hospital within 30 Days of the Date of Discharge	0	n/a	0
Purpose of Stay at Time of Transfer to Hospital			
	Post-Acute Care	Chronic Long Term Care	All Residents
Resident Days This Month Your ADC x the number of days in the month	0	0	0
Number of Transfers* Resulting in Inpatient Admission to the Hospital	n/a	n/a	n/a
Number of Transfers* Resulting in Emergency Department Visit Only	n/a	n/a	n/a
Number of Transfers* Resulting in Observation Stay	n/a	n/a	n/a

* Unplanned transfers only

Monthly outcome data are on individual tabs to the far right of the workbook. Use these arrow buttons to scroll across tabs until you can see them.

You will be checking numbers in both the June and July tabs.

The Tracking Tool

AE_SafelyReduceHospitalizationsTrackingTool.xls

Advancing Excellence in America's Nursing Homes

help@nhqualitycampaign.org

Resources

www.nhQualityCampaign.org

Click Resources, and then Webinars

Campaign and Website Overview

Hospitalization Goal Overview

Carol J. Scott
Field Operations Manager
Advancing Excellence
cscott@leadingage.org
816-830-0094

Adrienne Mihelic, PhD
Advancing Excellence HelpDesk
CFMC
help@nhqualitycampaign.org

Advancing Excellence in America's Nursing Homes

Thank You

For making our nursing homes better places to live, work, and visit!