



# Improve Healthcare Performance Scores with a Culture of Quality

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Quality is constantly on the mind of risk and quality managers and executives in facilities both large and small. Not just because they want the best possible care for their patients. Quality as measured through performance scores can also affect a facility's star rating and funding from government agencies. Worse still, the very task of tracking and reporting quality can actually waste precious time, resources and finances without improving quality at all.

Let's explore some of the costs and problems associated with measuring quality and how to find a reporting system that will improve your performance score, save valuable time and money, and increase your healthcare performance score and revenue.

## | The Cost of Quality

According to a 2016 Health Affairs report, medical practices spend \$40,069 per physician each year reporting quality measures to Medicare, Medicaid and private payers totaling \$15.4 billion annually.

Reporting quality also costs time. Facilities spend 15.1 hours per week per physician reporting quality measures. Of that time, physicians spend 2.6 hours each week with rest of the work being handled by nurses and medical assistants. Nearly 12 of those hours are spent just entering data into medical records for quality reporting.

Here are some other alarming statistics presented in the report:

- **80%** of practices spent more time managing quality than 3 years earlier
- **50%** felt managing quality measures is a significant burden
- **27%** thought those measures accurately tracked quality care

Despite the overwhelming time and cost associated with tracking quality, Facilities simply have no choice. The Medicare Access and CHIP Reauthorization Act (MACRA) reimburses physicians based on a composite performance score, 30% of which is based on quality measures that are not clinically relevant.

## | The Problem With Quality

Some of the confusion with the thousands of competing quality measures established by government agencies and private initiatives comes down to one simple question: how do you define quality? Traditionally, the healthcare industry has tried to assess quality from three different angles:

- **Experience:** Are patients satisfied with the quality of care they receive?
- **Measures:** Are providers following established guidelines for appropriate care?
- **Outcome:** How do the patients ultimately fare?

While the first two types of metrics are relatively easy to measure, it's hard to know what impact they have on patient care quality. A hospital can give a patient a prescription, but there's no way to know if the patient has filled it or followed the hospital's post-care protocols.

Nonetheless, there are indications that establishing standardized performance measures can indicate improved patient health. HealthGrades collected data from 40 million Medicare discharges between 2007-2009 and assigned ratings based on 26 measures related to mortality and complication rates. Hospitals were then rated from one to five stars based on how well they scored.





The overall results were revealing. The study shows that if all hospitals operated at a five-star level, U.S. healthcare system would have saved the lives of over 230,000 Medicare beneficiaries over those three years. The study also revealed that patients treated by five-star facilities:

- Had a **72%** lower risk of dying
- Reduced their risk by **53%** overall
- Were **57%** less likely to die within 30 days of being discharged

Adjusted risk can also affect some of the

assumptions of these findings, such as factoring in the health conditions of different populations, access to preventative health-care, etc. Chris Murray, MD, DPhil, director, Institute for Health Metrics and Evaluation, believes that combining process measures with adjusted risk is the best option for accurately assessing quality.

“I think the pendulum went way away from risk-adjusted outcomes to process measures too much, and we need to have a mixed combination,” Murray says. “The world is getting better at predicting rehospitalization, predicting death from attributes

of the patient. If you can do a better job at risk adjustment, you can do a better job on identifying quality.”

## | A Culture of Quality

Tracking performance measures certainly seems to be key to accurately assessing the quality of a facility and the overall health of its patients. However, following evidence-based protocols and processes alone does not ensure quality.

A 2011 Annals of Internal Medicine study examined 30-day mortality rates for heart-attack patients published on the CMS Hospital Compare website. Site visits and interviews with 160 medical staff members, revealed that high-performing hospitals were characterized by an “organizational culture” that supported efforts to improve care across the hospital. Everyone from management to the medical staff was fully invested in quality improvement. The study showed that the staff “reported the presence of physician champions and empowered nursing staff, pharmacist involvement in patient care, and high qualification standards for all staff.”

If we look back at the statistics for the amount of time and money organizations spend reporting quality measures, we can see the importance of implementing a quality improvement system that’s intuitive, easy to use, and involves participation of all levels of accountability.

## Better Performance Tracking

The tool at the core of tracking performance measures is the incident or event report. This is where managers and executives can learn whether or not protocols are being followed as well as discover gaps and issues in patient care. These reports can then be used to plot trends and generate performance reports and help managers create plans for improving quality.

Unfortunately, most event reporting systems simply report problems and don't do anything to offer solutions. They can offer a snapshot of a single event that occurred, but not why or how often this event occurs or any other factors about it happened in the first place. There's just simply not enough information, just static data without any insights.

An upgraded reporting system allows you to:

- Empower everyone involved in event reporting to be a part of improving quality and patient care instead of just entering data
- Encourage clinical staff to fill out event reports because they no longer fear being called out, or worse, don't believe that it will do anything to help improve patient care

- Give reporters notifications when an issue is resolved or moved to the appropriate department
- Deliver real-time data to help spot troubling trends so the appropriate parties can be proactive about addressing potential issues before they become problems or events
- Present insights instead of numbers that show changing trends and what's being done to improve quality and patient care

An event reporting tool that does the number crunching and turns data into insights allows everyone involved to be truly engaged in their profession. Instead of getting

bogged down in mechanics and analysis, everyone is freed to work on tasks that make a difference they can actually see.

A simple and intuitive event reporting system doesn't just shift the focus from reporting events to taking actions that can help prevent them, it also creates a culture of quality across the whole organization.

### Here's what a culture of quality in a clinical setting can do:

- Clinical staff view event reports not as a dreadful obligation, but real tools that will make their jobs easier and improve the safety of the patients under their care.

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- Quality and risk managers have staff motivated to create reports and attend meetings where real plans of action can be discussed and implemented.
- Executives can see the results of the combined efforts of each department in improving the safety and quality of care the entire facility is delivering.

Upgrading event reporting creates a culture of quality that improves accountability, reduces events, uses limited time and resources to make a difference and improves patient care and an organization's reputation and rating.

## ActionCue Clinical Intelligence

Ready to upgrade your reporting system and improve the performance and rating of your organization? ActionCue CI offers event reporting, quality management and performance improvement tracking integrated in one easy-to-use online platform.

This innovative software has helped hospitals in 24 states identify event trends and accurately track all clinical operating performance measures, leading to more effective performance improvement plans, reduced

organization workload and better patient care.

Here are just a few ActionCue CI features risk and quality managers enjoy:

- **Real-time dashboards**
- **Collaborative workspace**
- **Integrated PI action plans**
- **Statistical event summaries**
- **One-click AHRQ-CF submission**



To learn more about ActionCue CI, visit **pristacorp.com** or call **512-266-7126** to schedule a no-obligation 30-minute demo.