MBQIP Open Call for Minnesota Critical Access Hospitals (CAHs)

April 5, 2023
1:00 – 2:00 p.m.

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Happy Spring!

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Agenda

- Discuss the latest MBQIP reports data submission for the Core MBQIP measures

- Review how to access MBQIP data reports

- Reminder about data submission dates

- Quality Improvement Tool or Resource of the Month

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Stratis Health Project Team

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MBQIP Data Reports

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Core MBQIP Measures Reminder

Core MBQIP Measures			
Patient Safety/Inpatient	*Patient Engagement*	*Care Transitions*	*Outpatient*
HCP/IMM-3 (formerly OP-27): Influenza Vaccination Coverage Among Healthcare Personnel (HCP) **Antibiotic Stewardship:** Measured via Center for Disease Control National Healthcare Safety Network (CDC NHSN) Annual Facility Survey	**Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)** *The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics:* • Communication with Doctors • Communication with Nurses • Responsiveness of Hospital Staff • Communication about Medicines • Discharge Information • Cleanliness of the Hospital Environment • Quietness of the Hospital Environment • Transition of Care *The survey also includes screener questions and demographic items. The survey is 29 questions in length.*	**Emergency Department Transfer Communication (EDTC)** *1 composite; 8 elements* • **All EDTC Composite** • Home Medications • Allergies and/or Reactions • Medications Administered in ED • ED provider Note • Mental Status/Orientation Assessment • Reason for Transfer and/or Plan of Care • Tests and/or Procedures Performed • Test and/or Procedure Results	**AMI:** • **OP-2:** Fibrinolytic Therapy Received within 30 minutes • **OP-3:** Median Time to Transfer to another Facility for Acute Coronary Intervention **ED Throughput** • **OP-18:** Median Time from ED Arrival to ED Departure for *Discharged* ED Patients • **OP-22:** Patient Left Without Being Seen

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MBQIP Data Reporting Status

- Q3 2022 Outpatient AMI and ED-throughput: 73 out of 77 reporting, up from 72 in Q2 2022
  - 2 of the CAHs were also non-reporters in Q2 2022
  - 2 CAHs reported in the last quarter

- Q4 2022 EDTC: 75 reporting, down 1 from last quarter
  - Had been steady at 76 CAH's reporting

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MBQIP Data Reports

➤ Address what they are

➤ Address why you should be looking at them

➤ Demo how to find them

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MBQIP Data Submission

MBQIP Data Reporting Deadlines Coming up

- EDTC Q1 2023 due April 30
- AMI and ED Throughput Q4 2022 due May 1
  - AMI measures – continue to submit data through Q1 2023 encounters
- 2022 data for OP-22 due May 15
- HCP-IMM for the Q4 2022-Q1 2023 flu season due May 15

How to make sure your data submission was accepted and not rejected

After your data is submitted you should get confirmation that the data was received. To check and make sure the data was accepted and not rejected, run the Case Status Summary Report. This report is run from the HQR portal. To Run the Case Status Summary Report:

1. Log in to HQR via your HARP account.
2. Under the **Dashboard** on the left-hand side of the screen, select **Data Results** and **Chart Abstracted**.
3. Select the **File Accuracy** tab.
4. Under **Program** chose **OQR** (Outpatient Quality Reporting).
5. Under **Report** select **Case Status Summary**.
6. Under Encounter Quarter select the quarter for the data you have just submitted.
7. Click on **Export CSV**. Your report will appear in an Excel format showing the number of cases that made it to the warehouse for each measure submitted and the number accepted and/or rejected.

If your Case Status Summary Report shows that cases have been rejected, run the Submission Detail Report. This report will show you why your cases have been rejected. Correct the errors and resubmit those cases. Follow the above steps but select **Submission Detail** as your report.

If your Case Status Summary Report shows no data fits the criteria, then the data you submitted did not make it to the warehouse. Something must have gone wrong with your submission so try again.

Do not wait until right before the data due date to submit and check on your data. If you have rejected cases, you will want to have time to correct the errors and resubmit. Once the due date has passed, no further data will be accepted for the quarter.

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OP-22 Data Submission

- Last year 74 CAHs submitted OP-22
- Check out the April issue of MBQIP Monthly for directions on submitting OP-22
- You can check to make sure your OP-22 measure data was accepted at this link:

  https://www.qualityreportingcenter.com/en/hospital-oqr-program/data-dashboard/lookup-tools/

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HCP Measure Submission

- Last flu season, 65 CAHs reported HCP data

- A Checklist for enrolling in the National Healthcare Safety Network (NHSN) and submitting Influenza Vaccination Coverage Among Healthcare Personnel (HCP) measure data can be found at this link:

  https://www.qualityreportingcenter.com/globalassets/2023/01/iqr/iqr_fy2025_nhsnhcpsubmission_checklist_cdc_vfinal508ff.pdf

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QI Tool of the Month

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QI Resource Reminder

- QIMentorsPIErecipe-printable.pdf (stratishealth.org)

- Quality Improvement Basics - Stratis Health

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Next Steps

- Work with Stratis Health to determine and correct reporting issues before next due dates in April-May
- Will be contacted by Robyn in April
- **Next call: July 12, 2023, 1-2pm CT**
  Meeting Registration – Zoom
- MBQIP Website: Minnesota Critical Access Hospital Reporting and Improvement Assistance - Stratis Health

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Thank you!

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