EDTC QI Open Call for Minnesota Critical Access Hospitals (CAHs)

November 15, 2023 11:00 a.m. – 12:00 p.m.



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EDTC Measure Focus 2023

- · EDTC measure reporting and quality improvement
 - Data review
 - Abstraction for accuracy
 - Process improvement
 - EDTC Open Calls focused calls with all CAHs to problem solve/topics on data documentation and process improvement, best practice sharing and lessons learned
 - Targeted technical assistance
- EDTC QI Open Calls

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Today's Agenda:

- Lakewood Health System Process for EDTC
- Open Discussion
- Lessons Learned on Best Practices Document Now on the Website: <u>Minnesota Critical Access Hospital Reporting</u> and <u>Improvement Assistance - Stratis Health</u>

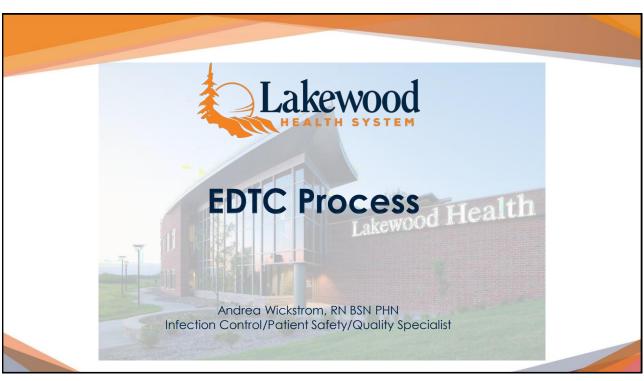


Lakewood Health System

EDTC Process



4



Tips for Accurate Data Gathering

- Read and use the Data Specifications Manual
- Highlight main points
- Ask questions
- Have the manual by you when gathering data
- Search in the patient's chart
- Make sure you have the most updated version of the manual



6

Things to remember...

- MD notes
- Nursing notes
- Media tab
- Encounter vs Notes tabs
- Informed consent for ROI
- Shared EMR



Data Elements

• ED Provider Note

Does not need to be signed !!!!

Notes for Abstraction:

Provider note must include, at a minimum:

- Reason for the current ED encounter (medical complaint or injury)
- · History of present illness or condition
- · A focused physical exam
- Relevant chronic conditions, though chronic conditions may be excluded if the patient is neurologically impaired/altered



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8

Data Elements (cont.)

Mental Status/Orientation Assessment

Notes for Abstraction:

Acceptable documentation includes but is not limited to:

- Alert
- Oriented
- Comatose
- Confused
- Demented
- Unresponsive
- Any Coma/Stroke Scale (e.g., Glasgow coma scale)
- Any mental status/orientation exam, scale, or assessment

Use the available scales (Glasgow etc) and flowsheets (neuro etc).





Data Elements (cont.)

Tests and/or Procedures Results

Notes for Abstraction:

- If facilities have a shared electronic health record, then tests and procedure results are considered sent, select yes.
- If results are not sent and facilities do not share electronic health records, then
 documentation must include a plan to communicate results to select yes.
- If no plan to communicate results, select no.



10

Data Elements (cont.)

- Documentation needs to show HOW results will get to the transfer facility, but no proof that results were sent is needed
- "Results will be faxed to transfer facility"
- Needs documentation stating "Send results to ..."
- Pending labs: notes showing facility has a plan to communicate results

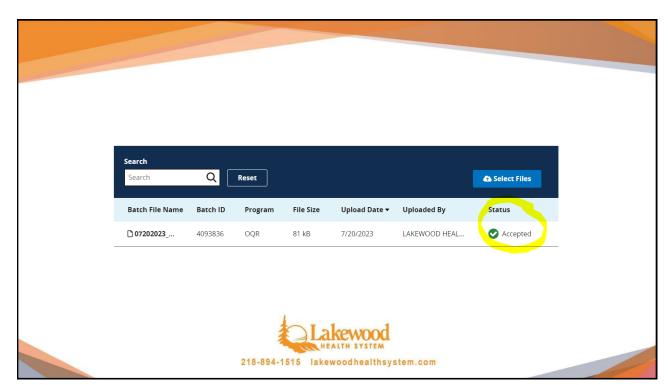


ED Throughput and ED STK

- Measures added in CART tool and submitted in QualityNet/HQR
- Make sure data submission was accepted and not rejected
- Include this step as a routine for data abstraction
- Wait for the HQR email stating file processing is complete and RUN THE REPORT in HQR.



12





14

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:

- Log in to HQR via your HARP account.
- Under the Dashboard on the left-hand side of the screen, select Data Results and Chart Abstracted.
- Select the File Accuracy tab.
 Under Program chose OQR (Outpatient Quality Reporting).
 Under Report select Case Status Summary.
- Under Encounter Quarter select the quarter for the data you have just submitted.
- 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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16

Reminders

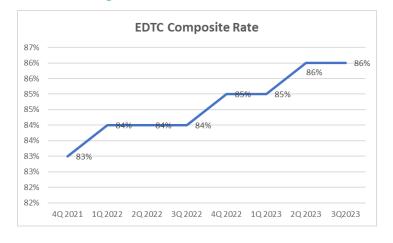
- Submit data and run the reports as early as you can so you have time to fix issues that may arise
- Make sure you have the right version of CART. They can be found in QualityNet.
- Read and use the Hospital Outpatient Specifications Manuals (CMS.gov/QualityNet)





18

EDTC Composite Rate - Statewide



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EDTC Best Practices Lessons Learned

Now on the Website:

Minnesota Critical Access Hospital Reporting and Improvement Assistance - Stratis Health

 Living document so new lessons will be added as you learn and share new process improvement practices

20

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20

EDTC Actions Going Forward

- Great work done EDTC composite score raised across the board
- · Continue to work on it the goal is continuous improvement
 - Review your CAH's EDTC, especially the individual components
 - Abstraction accuracy
 - Process improvement on components affecting the score EDTC best practices as a starting point
 - 1:1 calls continue with everyone to talk through issues

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Open Discussion

- Sharing other practices or issues that were not mentioned
- · Ask Robyn anything

22

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22

Open Discussion cont.

- How can we best serve your work on EDTC measure going forward?
- · What would you like more, less of?
- · What else would you like us to know?

See you again soon!

Thank you!

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