



HealthInsight HIIN Onboarding Event: DATA, DATA, DATA

April 12, 2017 | 11 a.m. to noon PT | Noon to 1 p.m. MT



Welcome

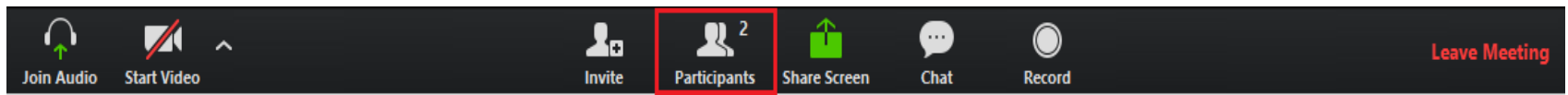
So glad you are able to join us!

This session is being recorded and a copy of the slides will also be posted on the website (www.healthinsight-hiin.org) in the next few days.

Who is on the call? Please indicate your state.

Tips/Reminders for Zoom

- All lines will be muted during the presentation.
- On the menu bar, there is a chat function. Feel free to chat questions and/or comments during the presentation.



- Use video whenever possible (face the camera)
- Identify yourself each time you speak, i.e. “This is Jim from HealthInsight...”

Evaluation

At the end today's presentation you will have an opportunity to complete a survey.

- The survey results help us to improve these sessions to better meet your needs.
- The link to the survey will be shared via the chat box and via a follow-up email.

Agenda

- Welcome *HIIN Director Jim Silva*
- About the Data *HIIN Utah Liaison Linda Egbert*
- Measure Review *HIIN Utah Liaison Sara Phillips*
 - Outcome Measures
 - Process Measures
- REDCap *HIIN Utah Liaison Linda Egbert*
- Report Samples *HIIN Oregon Liaison Laurie Murray Snyder*

Objectives

- Upon completion of this webinar:
 - Participants will be able to state the potential data sources and how the data will be used.
 - Participants will recognize the REDCap reporting system requirements.
 - Participants will recognize the reports that will be available on the website.



Let's Talk About Data

Data in the context of HIIN and this CMS/Partnership for Patients contract:

- Similarities to other CMS or quality reporting requirements
 - Measure sets: Process and outcomes
- Key differences
 - Performance is not publically reported as individual hospitals – only aggregates
 - Performance does not result in any payment adjustment

Let's Talk About Data

- Data sets
 - Strengths and weaknesses
 - Reality of data measures and resource requirements
- Balance of improvement work and data reflecting outcomes

Let's Talk About Data

- Data sources
 - Claims data
 - Medicare claims
 - All-payer claims (insurance companies)
 - What about self-pay patients?
 - Facility (self) reporting
 - NHSN (protocols)
 - CMS “Core Measures” (specifications manual)

So... Data

- Measures for harm topics
 - Definition (HIIN)
 - Numerators and denominators
 - Data source(s)

Measure Summary: 11 Harm Topics

Topic	Measure	Numerator	Denominator	Data Source
Falls	Falls with injury NQF 0202	Number of patient falls with injury (minor or greater)	Number of patient days	Claims and/or self-report
Pressure ulcers	Pressure ulcers: Hospital-acquired stage 3+ PSI 03	Number of patients 18 or older with a secondary diagnosis of PU stage III or IV	Number of admissions	Claims and/or self-report
Pressure ulcers	Pressure ulcers: Hospital-acquired stage 2+ NQF 0201	Number of patients with at least one stage II pressure ulcer	Number of admissions	Claims and/or self-report
Sepsis	Sepsis/septic shock overall rate PSI 13	Number of post-op patients with a secondary diagnosis of sepsis or septic shock	Number of admissions	Claims and/or self-report

Measure Summary: 11 Harm Topics

Topic	Measure	Numerator	Denominator	Data Source
Sepsis	Sepsis/septic shock mortality rate PSI 04C	Number of patients with secondary diagnosis of sepsis or septic shock who expired	Number of admissions	Claims and/or self-report
ADE	Adverse drug events: Opioids	Number of patients treated with an opioid who received naloxone	Number of patients who received opioid	Claims and/or self-report
ADE	Adverse drug events: Anticoagulants	Number of patients receiving warfarin who had an INR > 6	Number of patients receiving warfarin	Claims and/or self-report
ADE	Adverse drug events: Glycemic agents	Number of patients receiving insulin who have a hypoglycemic episode (50 mg/dl or less)	Number of patients receiving insulin	Claims and/or self-report

Measure Summary: 11 Harm Topics

Topic	Measure	Numerator	Denominator	Data Source
VTE	Perioperative PE, DVT, VTE PSI 12	Number of surgical patients who develop a PE or DVT post-operatively	Number of surgical patients > 18	Claims and/or self-report
CLABSI	CLABSI SIR	Number of observed CLABSI	Number of predicted CLABSI	NHSN
CLABSI	Central line utilization ratio	Number of central line days	Number of patient days	NHSN
CAUTI	CAUTI SIR	Number of observed CAUTI	Number of patient days	NHSN
CAUTI	Urinary catheter utilization ratio	Number of urinary catheter days	Number of patient days	NHSN
<i>C. diff</i>	<i>C. diff</i> SIR	Number of observed hospital-onset CDI	Number of predicted hospital-onset CDI	NHSN

Measure Summary: 11 Harm Topics

Topic	Measure	Numerator	Denominator	Data Source
SSI	SSI: Colon, hysterectomy, THA, TKA	Number of observed surgical site infections	Number of predicted surgical site infections	NHSN
VAE	VAE-IVAC rate	Number of infection-related ventilator-associated complications (IVAC)	Number of ventilator days	NHSN
VAE	VAE-VAC rate	Number of infection-related ventilator-associated complications (IVAC) and pneumonia (VAP)	Number of ventilator days	NHSN
Readmissions	Readmission rate	Number of inpatients readmitted within 30 days to the same facility	Number of patient discharges, excluding death	Claims and/or self-report

Additional Measures: Worker Safety and MRSA

Topic	Measure	Numerator	Denominator	Data Source
Worker safety (harm events related to patient handling)	Worker injuries	Number of harm events related to patient handling	Number of FTEs	OSHA Form 3000
Flu vaccination rate	Employee flu vaccination rate	Number of staff receiving the flu vaccine annually	Number of health care workers	NHSN
MRSA	MRSA	Number of hospital-onset MRSA	Number of predicted hospital-onset MRSA	NHSN

Examples of Process Measures

Measure	<u>Process Measure Examples</u> Looking for any interventions in place with readily available data
<i>C. diff</i> (CDI) SIR (facility-wide)	<ul style="list-style-type: none">• Compliance with isolation precautions• Compliance with recommended environmental cleaning• Facility-wide days of antimicrobial therapy
CLABSI SIR (ICU units including NICU) (ICU + select units) central line utilization ratio	Compliance with daily review of central line necessity
CAUTI SIR (ICU units excluding NICU) (ICU + select units) urinary catheter utilization ratio	Compliance with daily review of urinary catheter necessity

Facility Reporting Using REDCap

Hospital Information Resize font: + | -

State <small>* must provide value</small>	<input type="text" value="Utah"/>
Hospital CCN <small>* must provide value</small>	<input type="text"/>
Hospital Name <small>* must provide value</small>	<input type="text"/>

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REDCap Reporting

Close survey

☰ Survey Queue

🔗 Get link to my survey queue

Listed below is your survey queue, which lists any other surveys that you have not yet completed. To begin the next survey, click the 'Begin survey' button next to the title.

Status	Survey Title
✔ Completed	Hospital Information – Submission #1
Begin survey	Injury from falls and immobility – Submission #1
Begin survey	Hospital-acquired Pressure Ulcer prevalence-stage 3+ – Submission #1
Begin survey	Pressure Ulcer (PU) rate-stage 2+ – Submission #1

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REDCap Reporting

NQF 0202

Injury from falls and immobility (all acute care units)

Numerator:

**Number of patient falls with an injury level of minor or greater
(whether or not assisted by a staff member)**

Denominator:


**Number of patient days (acute care inpatient and adult rehabilitation
days)**

Monitoring Period

Measurement Start:

  Today M-D-Y

Measurement End:

  Today M-D-Y

Submit

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Summary and Action Plans

- Monthly coaching call with state liaison to discuss:
 - Data sources (EMR, incident reports) for 11 harm topics
 - Reporting process (database or spreadsheet)
 - Process measures you are currently working on

Questions?



What's Next?

Date/Time	Event	Topic	Sponsor
April 13, 2017 10 a.m.-11 a.m. PT 11 a.m.-noon MT	Pacing call	National Leadership Series: Understanding TCPI Signature Style, Framing Effective Questions	Partnership for Patients (PfP)
April 18, 2017 Noon-1 p.m. PT 1 p.m.-2 p.m. MT	Webinar	Introduction to Patient and Family Engagement Support and the Gateways Program	HealthInsight/ PFCCpartners
April 19, 2017 11 a.m.-noon PT Noon-1 p.m. MT	Webinar	Culture of Safety: Mike Silver	Healthinsight
April 20, 2017 10 a.m.-11 a.m. PT 11 a.m.-noon MT	Pacing call	NCD - Pacing Event: Falls	Partnership for Patients (PfP)
April 27, 2017 10 a.m.-11 a.m. PT 11 a.m.-noon MT	Pacing call	TBD	Partnership for Patients (PfP)

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Thank You!

- For participating with us today!
- For your work to reduce harm to patients.

We want to support you in the best ways possible. **Please take a moment to complete the evaluation.**