

Tis The Season:

Using QAPI for Flu and Pneumonia Vaccination Success

Welcome!

- All lines are muted, so please ask your questions in chat
- For technical issues, chat to the 'Technical Support' Panelist
- Please actively participate in the poll that will pop up on the lower righthand side of your screen at the end of the presentation



We will get started shortly!

JoVonn H. Givens, MPH

TASK ORDER DIRECTOR

JoVonn has been with Alliant since 2005 in various capacities including Evaluation Specialist, Chronic Kidney Disease Theme Manager, and QIN-QIO Deputy Director. She holds a Bachelor of Science degree in Biology from Florida Agricultural and Mechanical University and a Master of Public Health degree from the University of Alabama at Birmingham. She has experience in health education, quantitative and qualitative evaluation methods, and quality improvement. JoVonn received her Six Sigma Green Belt in 2017.

JoVonn enjoys reading, baking, traveling, and crafting in her spare time.

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Julie Kueker, MBA, BS MT (ASCP)

SENIOR QUALITY ADVISOR



About 27 years ago, Julie made the move from medical technology to hospital Quality Management in hospital administration for a large teaching hospital here in Shreveport. After staying there for 9 years learning a lot about quality, she moved to the QIN-QIO work, where she has been ever since. Julie started out in the hospital team but moved to the nursing home team about 15 years ago and has loved working with these providers. Nursing homes are so grateful for any assistance, that it is a pleasure to assist them. Julie's strengths are QAPI, education and helping providers design quality projects that leads to success.

She feels her role will impact health care in a positive way for Louisiana providers as she can continue to assist them on their quality agenda to improve outcomes and the lives of Medicare beneficiaries to which we serve.

Julie enjoys visiting with her grandbaby (soon to be two of them!). In her spare time she likes to travel, antique hunt, read and play the piano.

"All beginnings require that you unlock a new door."

- Rabbi Nachman of Bratslav

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Objectives

- Learn Today:
 - Understand the MDS coding criteria for both the seasonal influenza and pneumococcal vaccine quality measure.
 - Learn MDS coding tips for both vaccination quality measures
 - Identify influenza and pneumococcal vaccination guidelines
- Use Tomorrow:
 - List the QAPI steps for a performance improvement project for vaccination success

CDC: Influenza is a Serious Health Threat for Older Adults

- Influenza can be a serious health threat, especially for people who are vulnerable to serious influenza illness, like older adults and people living with certain chronic medical conditions.
- People aged 65 years and older are at high risk for hospitalization and complications from influenza and account for the majority of influenza hospitalizations and deaths in the United States each year.
- It's estimated that between 70 percent and 85 percent of seasonal influenza related deaths have occurred in people 65 years and older.
- It's estimated that between 50 percent and 70 percent of seasonal influenza-related hospitalizations have occurred among people 65 years and older.

<https://www.cdc.gov/flu/toolkit/long-term-care/importance.htm>

CDC: Guidelines for the Influenza Vaccine

- Routine annual influenza vaccination is recommended for all persons aged ≥ 6 months who do not have contraindications.
- Emphasis should be placed on vaccination of high-risk groups and their contacts/caregivers.
- For the 2020-2021 flu season, providers may choose to administer any licensed, age-appropriate flu vaccine (IIV, RIV4, or LAIV4) with no preference for any one vaccine over another.
- Check the CDC website for updated guidance for the flu vaccine, as needs may change due to the COVID-19 pandemic
 - <https://www.cdc.gov/vaccines/pandemic-guidance/index.html>

CDC: Who Should Get Pneumococcal Vaccines?

CDC recommends pneumococcal vaccination for all children younger than 2 years old and all adults 65 years or older. In certain situations, other children and adults should also get pneumococcal vaccines. Below is more information about who should and should not get each type of pneumococcal vaccine.

PCV13

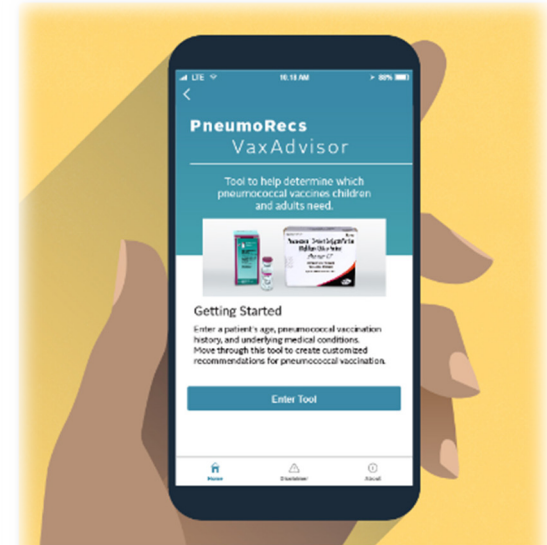
- CDC recommends PCV13 for
- All children younger than 2 years old
- People 2 years or older with certain medical conditions
- Adults 65 years or older also can discuss and decide, with their clinician, to get PCV13.

PPSV23

- CDC recommends PPSV23 for
- All adults 65 years or older
- People 2 through 64 years old with certain medical conditions
- Adults 19 through 64 years old who smoke cigarettes

CDC: Mobile App for Vaccination Recommendations

- The ***PneumoRecs VaxAdvisor*** mobile app helps vaccination providers quickly and easily determine which pneumococcal vaccines a patient needs and when.
- The app incorporates recommendations for all ages so internists, family physicians, pediatricians, and pharmacists alike will find the tool beneficial.



PneumoRecs VaxAdvisor is available for download on iOS and Android mobile devices.

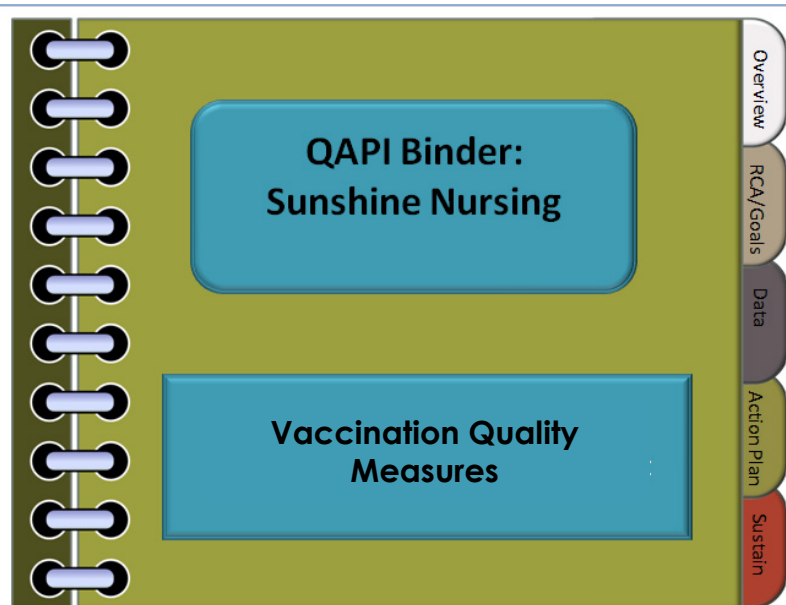
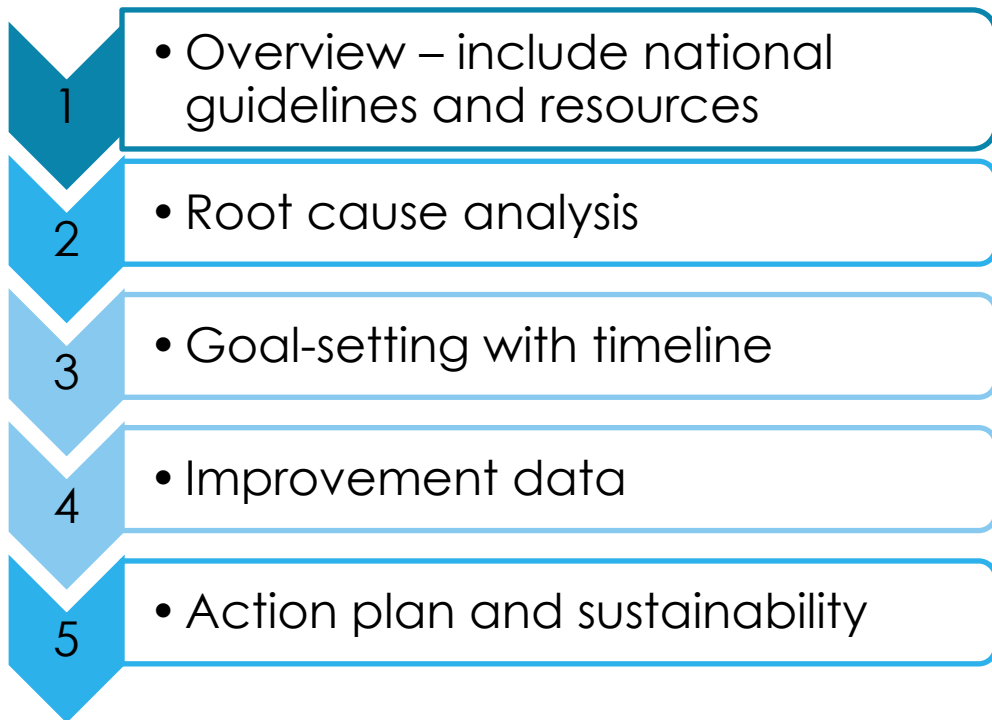
<https://www.cdc.gov/vaccines/vpd/pneumo/hcp/pneumoapp.html>

CDC: Importance of Immunization Services During the COVID-19 Pandemic

- Ensuring that routine vaccination is maintained or reinitiated during the COVID-19 pandemic is essential for protecting individuals and communities from vaccine-preventable diseases and outbreaks.
- Routine vaccination prevents illnesses that lead to unnecessary medical visits, hospitalizations and further strain the healthcare system.
- For the upcoming influenza season, influenza vaccination will be paramount to reduce the impact of respiratory illnesses in the population and resulting burdens on the healthcare system during the COVID-19 pandemic.
- Communicating the importance of vaccination to residents and caregivers as well as the safety protocols and procedures outlined in the CDC guidance can help provide reassurance to those who may otherwise be hesitant to present for vaccination visits.

<https://www.cdc.gov/vaccines/pandemic-guidance/index.html>

QAPI Project: Reaching Vaccination Goals



Getting Started: Where Does the Vaccination Data Come From?

How you answer
questions on the MDS 3.0
Resident Assessment
Instrument



MDS 3.0 Quality Measures
USER'S MANUAL
(v13.0)

Effective January 1, 2020

Data Determines Your Project Destination



- Tells you where you are to set goals
- Defines what improvement looks like

- Let's you see the facts of the issue
 - Current Status
 - Leaves emotion out of it
- Shows you where you excel and what improvements need to be made

Getting Started: Always Start with Your Data


Quality Measure Label	Short/Long Stay	CMS ID	NQF ID	CASPER	NHC	Five Star	Provider Preview
Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine	Long	N020.02.00	0683	No	Yes	No	Yes
Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine	Long	N016.01.00	0681	No	Yes	No	Yes
Residents Who Received the Seasonal Influenza Vaccine	Long	N017.01.00	0681A	No	No	No	Yes
Residents Who Were Offered and Declined the Seasonal Influenza Vaccine	Long	N018.01.00	0681B	No	No	No	Yes
Residents Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	Long	N019.01.00	0681C	No	No	No	Yes
Residents Who Received the Pneumococcal Vaccine	Long	N021.02.00	0683A	No	No	No	Yes
Residents Who Were Offered and Declined the Pneumococcal Vaccine	Long	N022.02.00	0683B	No	No	No	Yes
Residents Who Did Not Receive, Due to Medical Contraindication, the Pneumococcal Vaccine	Long	N023.02.00	0683C	No	No	No	Yes

The Language of Data: Nursing Home Compare

Flu and pneumonia prevention measures - Long-stay residents			
Percentage of long-stay residents who needed and got a flu shot for the current flu season. <i>Higher percentages are better.</i>	100.0%	97.6%	96.0%
Percentage of long-stay residents who needed and got a vaccine to prevent pneumonia. <i>Higher percentages are better.</i>	97.2%	97.6%	93.9%

MDS Quality Measure Label

- Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine
- Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine

Table 2-12
MDS 3.0 Measure: Percent of Residents Assessed and Appropriately
Given the Seasonal Influenza Vaccine (Long Stay) 
 (NQF #0681) (CMS ID: N016.02)


Measure Description

The measure reports the percent of long-stay residents who are assessed and/or given, appropriately, the influenza vaccination during the most recent influenza season.

Measure Specifications

Numerator

Residents meeting any of the following criteria on the selected influenza vaccination assessment:

1. Resident received the influenza vaccine during the most recent influenza season, either in the facility (O0250A= [1]) *or* outside the facility (O0250C = [2]); *or*
 2. Resident was offered and declined the influenza vaccine (O0250C = [4]); *or*
 3. Resident was ineligible due to medical contraindication(s) (O0250C = [3]) (e.g., anaphylactic hypersensitivity to eggs or other components of the vaccine, history of Guillian-Barré Syndrome within 6 weeks after a previous influenza vaccination, bone marrow transplant within the past 6 months).
- 

Denominator

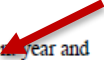
All long-stay residents with a selected influenza vaccination assessment. This includes all residents who have an entry date (A1600) on or before March 31 of the most recently completed influenza season and have an assessment with a target date on or after October 1 of the most recently completed influenza season (i.e., the target date must fall on or between October 1 and June 30), except those with exclusions.

Exclusions

Resident's age on target date of selected influenza vaccination assessment is 179 days or less.

Notes

This measure is only calculated once per 12-month influenza season which begins on July 1 of a given year and ends on June 30 of the subsequent year and reports data for residents who were in the facility for at least one day during the target period of October 1 through March 31.



Covariates

Not applicable.

Drilling Down to the Nursing Home Compare Influenza Quality Measure

The way you answer these questions on the MDS determines your quality measure rate on Nursing Home Compare

MDS Numerator Questions: O0250 A [1], O0250 C [2,3,4]

O0250. Influenza Vaccine - Refer to current version of RAI manual for current influenza vaccination season and reporting period

Enter Code

A. Did the resident receive the influenza vaccine *in this facility* for this year's influenza vaccination season?

0. No → Skip to O0250C, If influenza vaccine not received, state reason
1. Yes → Continue to O0250B, Date influenza vaccine received

B. Date influenza vaccine received → Complete date and skip to O0300A, Is the resident's Pneumococcal vaccination up to date?

Month		Day		Year			

O0250A = 1

Enter Code

C. If influenza vaccine not received, state reason:

1. Resident not in this facility during this year's influenza vaccination season
2. Received outside of this facility
3. Not eligible - medical contraindication
4. Offered and declined
5. Not offered
6. Inability to obtain influenza vaccine due to a declared shortage
9. None of the above

O0250C=2
O0250C=3
O0250C=4

OR

O0250C = 2

Nursing Home Compare Influenza Denominator

- All long-stay residents (CDIF ≥ 101 days) with a selected influenza vaccination assessment, except those with exclusions
 - Exclusions: Resident's age on target date of selected influenza vaccination assessments is 179 days or less



Remember: This measure is only calculated once a year. The target period of October 1 of the prior year to June 30 of the current year and reports for the October 1 through March 31 influenza season.

Tips to Remember

- This measure is only calculated once per 12-month influenza season which begins on July 1 of a given year and ends on June 30 of the subsequent year and reports data for residents who were in the facility for at least one day during the target period of October 1 through March 31.
- See MDS 3.0 RAI Manual section O0250 Influenza Vaccine for coding examples

Drilling Down to the Nursing Home Compare Pneumococcal Quality Measure

MDS 3.0 Measure: Percent of Residents Assessed and Appropriately
Given the Pneumococcal Vaccine (Long Stay)
(NQF #0683) (CMS: N020.02)

Measure Description
This measure reports the percent of long-stay residents whose pneumococcal vaccine status is up to date.
Measure Specifications
<i>Numerator</i> Residents meeting any of the following criteria on the selected target assessment: <ol style="list-style-type: none">1. Have an up to date pneumococcal vaccine status (O0300A = [1]); <i>or</i>2. Were offered and declined the vaccine (O0300B = [2]); <i>or</i>3. Were ineligible due to medical contraindication(s) (e.g., anaphylactic hypersensitivity to components of the vaccine; bone marrow transplant within the past 12 months; <i>or</i> receiving a course of chemotherapy within the past two weeks) (O0300B = [1]).
<i>Denominator</i> All long-stay residents with a selected target assessment.
Covariates
Not applicable.

The way you answer these questions on the MDS determines your quality measure rate on Nursing Home Compare

MDS Numerator Questions: O0250 A [1], O0250 C [2,3,4] (continued)

O0300. Pneumococcal Vaccine	
Enter Code <input type="text"/>	A. Is the resident's Pneumococcal vaccination up to date? 0. No → Continue to O0300B, If Pneumococcal vaccine not received, state reason 1. Yes → Skip to O0400, Therapies O0300A=1
Enter Code <input type="text"/>	B. If Pneumococcal vaccine not received, state reason: 1. Not eligible - medical contraindication O0300B=1 2. Offered and declined 3. Not offered

O0300B = 2

Nursing Home Compare Pneumococcal Denominator



- All long-stay residents
- (CDIF \geq 101 days) with
- a selected target assessment

There are no exclusions for this quality measure

Does the Data Show a QAPI Opportunity?

Vaccinations Quality Measures Can Reach 100%

- Goal 1: *100% of our residents will be assessed /offered the influenza vaccination annually*
- Goal 2: *100% of our residents will be assessed /offered if appropriate the pneumococcal vaccination upon admission*

If not getting 100%? Why?

- Could there be a coding error?
- Misunderstanding of the Quality Measure intent?
- Lack or incomplete vaccination screening /tracking system?
- System breakdown?
- Perform chart audits to ensure documentation in EVERY chart

Steps for your Performance Improvement Project

- Establish baseline of your quality measure
- Set your project goals –100%
- Root Cause Analysis
 - Find out why your rate is not at goal
- Form a Multi-disciplinary team
- Work guided by the Plan-Do-Study-Act (PDSA) cycle
- Track resident vaccination status
- Keep the goal and progress in the forefront
- Communicate status /celebrate successes

Problem Statement

Environmental

Staff/People

Equipment/Supplies

Rules/Policies/Procedures

Facility Name: _____ CCN: _____

This material was prepared by Alliant and modified by Alliant Quality, the quality improvement group of Alliant Health Solutions (AHS), the Alliant Quality Improvement Network. Quality Improvement Organization for Alliant Health, Georgia, Kentucky, Louisiana, North Carolina, and Tennessee, works in partnership with the Center for Healthcare & Health Services (CHHS), an agency of the U.S. Department of Health and Human Services. The content presented does not necessarily reflect CHHS policy. Healthcare Facility: 120000-000000-000 1/1/2020 10:20:00

www.alliantquality.org

Questions



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Objectives Check In!



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Complete this sentence in Chat: *I will...*

CMS 12th SOW Goals



Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings



Chronic Disease Self-Management

- ✓ Increase performance on ABCS clinical quality measures (i.e., aspirin use, blood pressure control, cholesterol management, cardiac rehab)
- ✓ Identify patients at high-risk for developing kidney disease & improve outcomes
- ✓ Identify patients at high risk for diabetes-related complications & improve outcomes



Quality of Care Transitions

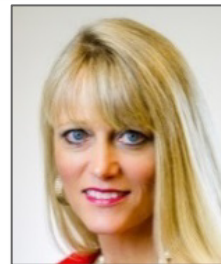
- ✓ Convene community coalitions
- ✓ Identify and promote optimal care for super utilizers
- ✓ Reduce community-based adverse drug events



Nursing Home Quality

- ✓ Improve the mean total quality score
- ✓ Develop national baselines for healthcare related infections in nursing homes
- ✓ Reduce emergency department visits and readmissions of short stay residents

Making Health Care Better *Together*



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Have You Pledged Your Commitment?

Join Alliant Quality >1500 Facilities Strong



Kentucky 213	North Carolina 277
Tennessee 211	Georgia 261
Alabama 132	Florida 246
Louisiana 197	

<https://www.alliantquality.org/news/space-agreement/>

The Southern Partners Action Collaborative for Excellence (SPACE) is a cooperative project between Alliant Quality and nursing homes. As a SPACE participant, your facility agrees to participate with Alliant Quality, the quality improvement group of Alliant Health Solutions (AHS), which is the Medicare QIO for Alabama, Florida, Georgia, Kentucky, Louisiana, North Carolina, and Tennessee and their partners.



Upcoming Events

Nursing Homes

Tuesdays, 2pm ET/1pm CT

Community Coalitions

Thursdays, 12:30 pm ET/11:30am CT

November 17 th , 2020: Prevention/Management of C diff	October 29 th , 2020: Critical Vaccines in a Critical Time: Tools and tips for increasing immunization rates in your community
December 15 th ,2020: Preventing Healthcare Acquired Infections	November 19 th , 2020: How Medication Reconciliation can Reduce Hospital Utilization and Readmissions
January 2020: TBD	December 17 th , 2020: Gear up for the New Year! Positioning your Organization to Gather, Track, and Use Data in 2021

Making Health Care Better *Together*



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