Readmissions and Health Disparities Cohort

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Making Health Care Better Together

Hospital Quality Improvement

Welcome from all of us!

COLLABORATORS:
Alabama Hospital Association
Alliant Health Solutions
Comagine Health
Georgia Hospital Association
KFMC Health Improvement Partners
Konza
Readmission Cohort

Melody "Mel" Brown, MSM

**Patient Safety Manager**

Melody has over 40 years of health care experience, including varied roles at Alliant Health Solutions working on the CMS contract for the Quality Innovation Network-Quality Improvement Organization (QIN-QIO). As the patient safety manager, her focus has been on coaching hospitals and nursing homes on all facets of health care quality improvement.

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Learning Objectives

• Learn Today:
  • Introduction to Readmission and Health Disparities Cohort structure
  • Understanding of expectations
    • From subject matter experts
    • From QI coach
    • From hospitals

• Use Tomorrow:
  • Access available tools and resources to implement targeted interventions
Health Equity Is Getting Rid of Inequalities or Unfair Differences in How People Are Given Health Care

*Equality* means treating everyone the same to achieve the same result. However, this approach only works if everyone is starting from the same status. Not all of our members start from the same status. In fact, they experience *health inequities*, or avoidable differences in health outcomes.

*Equity*, on the other hand, is giving people what they need in order to achieve the same result. It’s commonly referred to as ‘leveling the playing field.’ Equity is needed before attaining true equality.
Alliant HQIC Trends – Quality Implications (Sample)

Reduce 30-day Readmissions:
- Increase in Native American
- Followed by Hispanic population

Alliant HQIC:
- 150 hospitals in 13 states
Source:
- CMS Medicare Claims
National Trends – Social Determinants of Health

• One in 10 Americans live in poverty with the inability to afford health care, healthy food and housing
• Social determinants of health (SDOH) include: Safe housing, transportation and neighborhoods
• Income, education level, job opportunities
• Access to nutritious foods and physical activity
• Language and literacy skills

Healthy People 2030
Active Community Engagement

- Faith
- Fellowship
- Family
- Financial/food, medications, home
- Follow-up
Targeted Interventions: Readmissions and Health Disparities

• Complete the Health Equity Organizational Assessment (HEOA)
• Locate and review your hospital’s Community Health Needs Assessment (CHNA)
• Risk assessment conducted properly upon admission
• Assess social determinants of health (SDOH) upon admission
• Utilizes a Health Equity Leadership approach to drive awareness and change
Cohort Structure

• Targeted cohort members have been identified based on data
• Alliant supplies quantitative data
• Hospital supplies qualitative data – make it your program
  • What is happening in your building
  • What are your pain points around these topics
• Use quantitative and qualitative data to identify interventions
• Apply interventions in 1:1 dialogue based on barriers
• 30-day focus plans – small, fast tests of change
Expectations of QI Coach/Alliant SMEs

- Monthly 1:1 focus call with the QI coach for cohort intervention only
  - SME will attend as invited
- Monthly review of data – portal access
- PDSA review and implementation with each coaching call
- Provide timely resources for specified interventions

Drop into chat what you expect or need from the QI Coach/SME
Expectations for Hospitals

• Attend monthly 1:1 coaching calls for specific cohort topics
• **Access portal data during coaching calls**
• Brainstorm barriers for deficiencies based on available data (Fishbone)
• With the QI coach, use barriers to determine a potentially successful intervention
• Implement intervention using the rapid cycle (30-day) PDSA
• Continue rapid cycle improvement until the change is embedded and implement additional interventions to amplify success
What’s in Our Toolbox?

• Fishbone diagram
• PDSA template/examples/recordings
• QI Boot Camp series
• Coaching package
• HQIC website resources
• Portal access
• Monthly newsletter
• 1:1 coaching
• Access to subject matter experts
Fishbone Diagram

- Problem = Head of the Fish
  - Determined based on quantitative data
- Bones = major categories of contributors to the problem
  - Determined based on qualitative data
PDSA Template

HQIC SMALL TEST OF CHANGE WORKSHEET
(PDSA Cycle Template)

Model for improvement: Three questions for improvement
1. What are we trying to accomplish (aim)?
2. How will we know that change is an improvement (measured)?
3. What change can we make that will result in an improvement (ideas, changes, things)?

Goal: Overall goal you would like to reach – use SMART goals: Specific, Measurable, Acceptable, Decisive, and Time-based.

Plan: Overall goal you would like to reach – list your action steps along with person(s) responsible and time line.

- What is the objective of the test?
- What do you predict will happen and why?
- What change will you make?
- Who will be involved (eg, care unit, floor, department)?

Test of change
What are you going to do?
What will the test tell us?

What were the results?
What exactly are we going to do?

Study
What were the results?
What exactly are we going to do?

Plan
What were the results?
What exactly are we going to do?

Do
What were the results?
What exactly are we going to do?

List the tasks needed to set up this test of change.

Predict what will happen when the test is carried out.
What measures will you use to determine if the prediction is successful.

Predictions versus actual results for this test of change.
Measures for predictions include a measure for each prediction.

II. DO: Describe what actually happened when you ran the test of change.
- Implement the change
- Try out the test on a small scale
- Carry out the test

- Document problems and unexpected outcomes
- Debrief the team with lessons learned

III. STUDY: Describe the measured results and how they compared to the predictions (set aside time to analyze the data and study the results and determine if the change resulted in the expected outcome)
- Summarize all of the data
- Compare the data to your predictions
- Look for unintended consequences, surprises, successes, failures,

IV. ACT: Describe what changes to the plan will be made for the next cycle from what you learned (if the results went as you had predicted, you don’t need to make the change once you have validated it).
- Adapt: modify the changes and repeat
- Modify: implementing changes in your organization to address the changes in your organization to additional residents, staff, visits.
Quality Improvement Basics Boot Camp

• Three-part series
• Tools/recordings available on the Alliant HQIC website
• Series focus:
  • Quality improvement models and tools
  • Process improvement
  • Developing a quality improvement team/who should be at the table
  • Resources to be shared
Portal Access
Monthly HQIC Newsletter

- Timely journal articles on all HQIC topics
- Links to registrations for our educational events
- Success stories from top-performing hospitals
- Latest news from CMS
- Linked on HQIC website
Month Six Sharing

- What top five intervention was implemented at your hospital?
- PDSA examples
- Barriers faced
- How were barriers overcome
- Lessons learned
- Best practices
Resource Links

• QI Tools:
  • PDSA Template
  • Fishbone Template

• Coaching Packages
  • Readmissions

• HQIC Website:
  • Opioid Stewardship
  • Medication Safety/Adverse Drug Event

• Portal:
  • Portal Instructions
  • Portal Registration and Multifactor Authentication
  • Portal Navigation and Feature Overview

• QI Boot Camp Series:
  • Session 1
  • Session 2
  • Session 3
Key Takeaways

• Learn Today:
  • Understand Readmission and Health Disparities Cohort structure
  • Understand new HQIC Cohort structure
  • Understand expectations for SMEs, QI coaches and hospitals

• Use Tomorrow:
  • Use available resources to implement positive change in your hospital for readmissions

How will this change what you do? Please tell us in the poll…
Questions?

Email us at HospitalQuality@allianthealth.org or call us 678-527-3681.
HQIC 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

Quality of Care Transitions
- Convene community coalitions
- Identify and promote optical care for super utilizers
- Reduce community-based adverse drug events
Upcoming Events

QI coaches will be scheduling 1:1 calls soon!

Readmissions SME:
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Making Health Care Better Together

Thank you for joining us!
How did we do today?

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