Advancing Assisted Living Leadership – It's Time to Level Up!

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Module 6 – The Power of Data and Quality

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Objectives

After viewing this module, the learner will be able to:

- Describe the importance of collecting, analyzing, and utilizing data to drive opportunities for improvement.
- Explain how to use LTC Trend Tracker to track and trend data.
- Establish a process for moving your organization towards improvement of quality care and services through the Quality Award journey to excellence.

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Why is Data Important?

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Why Should Assisted/Senior Living Communities Collect Data?

- **Performance Improvement** – data drives progressive changes while increasing efficiency and effectiveness of systems and processes
- **Superior Outcomes** – tracking data helps you improve areas of opportunity leading to improvements in outcomes (falls, UTIs, survey, staffing, occupancy rates, hospitalization, antipsychotic use)
- **Regulatory and Future Demands** – better prepared for survey and are ahead of regulatory curve through utilization of systematic approaches to organizational performance and commitment to continuous quality improvement efforts

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The "Why" – What can your data tell you?

- High quality care will always deliver long range success
- Data matters more than ever before
- Embrace change – for it is the only constant we have.

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Power of Storytelling Through Data

- People (stakeholders, residents, family members, regulators, referral sources, etc.,) need to see results
- Words alone may be considered empty unless you have data to support it
- Stakeholders need to know
  - What you do and who you are
  - What services you provide
  - How you ensure quality of care
  - That you can back up your words with data that supports your anecdotal information

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Data Storytelling – What is it?

- Concept of building compelling narrative based on data that help you tell your story and influence and inform your stakeholders.
- Adds benefits of deeper insights and supporting evidence
- Builds credibility
- Data can define the purpose of your story
- Data visualization (through charts, graphs, and visual displays) can provide context and articulate insights while improving stakeholder engagement

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Why Should ALs use Data Storytelling?

- Narrative, visuals, and data in storytelling creates an emotional response.
- Emotion plays a role in decision-making
- Linking emotional context and hard data means influencing others
- When narrative, visuals, and data are integrated successfully you have created data storytelling that can influence people and drive outcomes.

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Data Analysis and Conveying your Message to Stakeholders

Identify what data you are going to collect

Analyze the data – what trends stand out

How does the data analysis support your overall mission/goals?

Convey your message to your stakeholders using your data to back up your words

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Reducing Risk of Federal Regulatory Oversight Through Data Tracking of Quality Metrics

- Collecting data on your own, prior to regulation requiring it, means being in front of potential future regulations
- Collecting data isn't enough
- What are you doing with the data?
- How are you using data to improve performance and outcome measures?
- Data supports evidence that you are making improvements before regulation requires you to do it.

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Regulatory Perspective

- 33 states have made regulatory changes in the last 3 years
- Many of the state regulatory changes include the collecting of quality metrics/measures and we are seeing the same push from CMS
- Questions to ponder:
  - Why don't we want federal regulations?
  - What is the big deal?
  - We have state regs, what's the difference?
- Federal regulations is the piece that will impact everything <u>poorly</u> if it becomes reality. – Just look at SNFs.

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We Don't Have Federal Regulation – So, Let's Keep it at Bay

- **Although we haven't seen significant changes in state regulatory perspective, we know conversations about it occur, so we can't ignore it**
  - Don't be reactive – be proactive – learn from SNFs

- Example – fall case; medications
  - Big in risk management and easily measurable in AL
  - Insurance companies interested in regulatory performance and regulatory outcomes
  - Federal regulation will increase this ten-fold

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Demonstrating and Establishing Quality

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Track, Trend, Analyze, & Utilize Data for Quality Improvement Efforts

- Data is key component in any quality improve process.
- What is your quality improvement process?
- Is your quality improvement process formalized?
  - If not, write it down and convey it to your entire team.
  - Train team members on how to use the process.
  - Get team members engaged on PIPs.
  - Review your data – what is it telling you?

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Basics of Performance Improvement Process

- Plan
  - The test/observation including the plan for collecting data
  - State the objective and make predictions about what will happen and why
  - Develop plan to test the change (who, what, when, where, what data to collect)
- Do
- Study
- Act

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Basics of Performance Improvement Process

- Plan
- Do
  - Try out the test on a small scale – N of 1 (1 person, 1 resident, 1 hall, 1 shift, etc.)
  - Carry out the test
  - Document problems and unexpected observations
  - Begin analysis of the data
- Study
- Act

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Basics of Performance Improvement Process

- Plan
- Do
- Study
  - Set aside time to analyze the data and study the results (what is the data telling you?)
  - Complete the analysis of the data
  - Compare the data to your predictions
  - Summarize and reflect on what was learned
- Act

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Basics of Performance Improvement Process

- Plan
- Do
- Study
- Act
  - Refine the change, based on what was learned from the test
  - Determine what modifications should be made
  - Prepare a plan for the next test

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PDSA Sample Worksheet

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PDSA Sample Worksheet

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PDSA Sample Worksheet

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Determine the Root Cause of a Problem - RCA

- Determines what happened, why it happened, how it happened
- Tenant/family/staff interviews
- 5 "Why's"
- Cause-and-effect diagrams (aka fishbone)
  - Equipment/supply factors, environmental factors, rules/policy/procedure factors, people/staff factors
- Process flow charts
  - Write out the process – where are the gaps

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RCA – 5 Why's Example

- Problem statement – Falls happened in shower room
- Why? – Why did the fall happen?
  - Water on the floor.
- Why? – Why was there water on the floor?
  - Air conditioner was leaking water.
- Why? – Why was the air conditioner leaking water.
  - Because the drain tube was clogged.
- Why? – Why was the drain tube clogged?
  - It had calcium build up and a crack in it
- Why? – Why was there calcium build up and a crack in the tube?
  - No process for checking condition of drain tubes and/or air conditioner parts unless broken.

- RCA – no process/system for checking air conditioner drain tubes
- Solution – Develop process/system

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Can Do Attitude – Yes, YOU CAN!

- What are 3-4 things to do in within the next year to further improve your organization?
- Make a list and write it down
- Talk it over with your team
- Make it a priority
- Take one step at a time
- Keep moving forward – if at first you don't succeed – try, try again

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**Can Do Attitude –
Yes, YOU CAN!**

- Mindset of "There is always room for improvement!"
- Baldrige is a great foundation to start to improving processes
- Quality Journey – "…Because the journey matters!"
- LTC Trend Tracker and Quality Awards journey can help

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LTC Trend Tracker

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Resource You Need to Succeed

- LTC Trend Tracker →
  www.ltctrendtracker.com
  - NCAL Measures
    - Hospital admissions
    - Hospital readmissions
    - Off-label use of antipsychotics
    - Occupancy rates
  - AL Turnover & Retention
  - CoreQ AL Survey

Need Help? Help@LTCTrendTracker.com

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Myths and Truths about LTC Trend Tracker

Myths	Truth
It takes hours to upload data.	Data upload only takes a few minutes, even on a slow computer.
I have to create a spreadsheet to capture data for upload.	The spreadsheet is already created with everything you need and can easily be downloaded for data entry.
I don't have time to do data capture or upload.	The process is simple, the rewards are major. Data helps draw customers, stave off federal regulation and oversight, and engages stakeholders and referral sources.

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Template Download Steps

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Spreadsheet Upload Steps
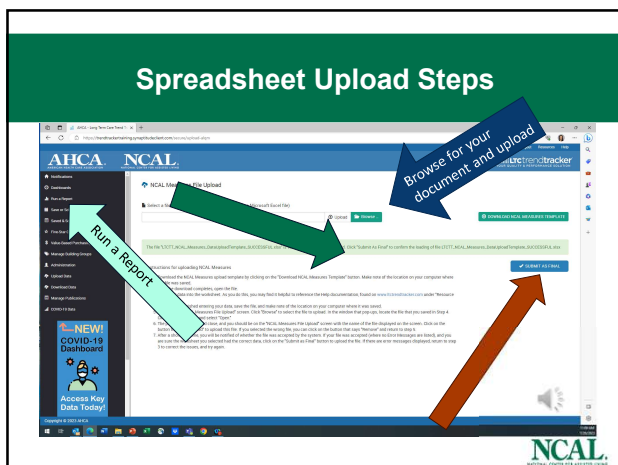
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AHCA/NCAL's National Quality Award & the Journey to Excellence

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Quality Award Program

NATIONAL QUALITY AWARD PROGRAM
Inspiring Excellence Since 1996

The AHCA/NCAL Quality Award is based on the Baldrige Performance Excellence Framework and helps centers achieve and sustain performance excellence:
1. Bronze—Commitment to Quality
2. Silver—Achievement in Quality
3. Gold—Excellence in Quality

Advantages

Outside perspective

Learning from feedback

Team building

Becoming stronger and more resilient

Focus on results

Recognition and pride

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Systems Based Continuous Quality Improvement

The Role of Core Values and Concepts

The Baldrige Criteria build on **core values and concepts**

which are embedded in **systematic processes...** (Criteria categories 1–6)

yielding **performance results** (Criteria category 7).
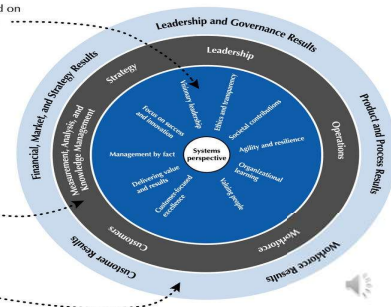
From Baldrige Performance Excellence Program. 2021. *2021–2022 Baldrige Excellence Framework: Proven Leadership and Management Practices for High Performance.* Gaithersburg, MD: U.S. Department of Commerce, National Institute of Standards and Technology. https://www.nist.gov/baldrige.

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Bronze – Commitment to Quality

- **Sample Question**
- Describe your principal customer groups. In addition to residents, identify, up to three other principal customer groups. Identify the important requirements that each of these principal customer groups has of your organization. Identify the processes that your organization uses to learn of these important customer requirements.

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Silver – Achievement in Quality

- **Sample Question**
- **3.1 Customer Expectations**
  How does the applicant listen to its current patients/residents and other customers?

  How does the applicant determine health care services to meet their needs?
- **3.2 Customer Engagement**
  How does the applicant build relationships with patients/residents and other customers?

  How does the applicant determine satisfaction and engagement?
- **7.2**
- *Provide your customer focused performance results.*

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Gold – Excellence in Quality

- **Sample Question**

3.1 Customer Expectations: How do you listen to your patients and other customers and determine health care services to meet their needs? (40 pts.)

a. Listening to Patients and Other CUSTOMERS

(1) Current Patients and Other CUSTOMERS How do you listen to, interact with, and observe patients and other CUSTOMERS to obtain actionable information? HOW do your listening methods vary for different patient groups, other CUSTOMER groups, or market SEGMENTS? HOW do your listening methods vary across the stages of patients' and other CUSTOMERS' relationships with you? HOW do you seek immediate and actionable feedback from patients and other CUSTOMERS on the quality of HEALTH CARE SERVICES, patient and other CUSTOMER support, and transactions?

(2) Potential Patients and Other CUSTOMERS How do you listen to potential patients and other CUSTOMERS to obtain actionable information? HOW do you listen to former, competitors', and other potential patients and other CUSTOMERS to obtain actionable information on your HEALTH CARE SERVICES, patient and other CUSTOMER support, and transactions, as appropriate?

b. Patient and Other CUSTOMER Segmentation and Service Offerings

(1) Patient and Other CUSTOMER Segmentation How do you determine your patient and other CUSTOMER groups and market SEGMENTS? HOW do you

- use information on patients, other CUSTOMERS, markets, and HEALTH CARE SERVICE offerings to identify current and anticipate future patient and other CUSTOMER groups and market SEGMENTS; and
- determine which patient and other CUSTOMER groups and market SEGMENTS to emphasize and pursue for business growth?

(2) Service Offerings How do you determine HEALTH CARE SERVICE offerings? How do you

- determine patient, other CUSTOMER, and market needs and requirements for HEALTH CARE SERVICE offerings;
- identify and adapt HEALTH CARE SERVICE offerings to meet the requirements and exceed the expectations of your patient and other CUSTOMER groups and market SEGMENTS; and
- identify and adapt service offerings to enter new markets, to attract new patients and other CUSTOMERS, and to create opportunities to expand relationships with current patients and other CUSTOMERS, as appropriate?

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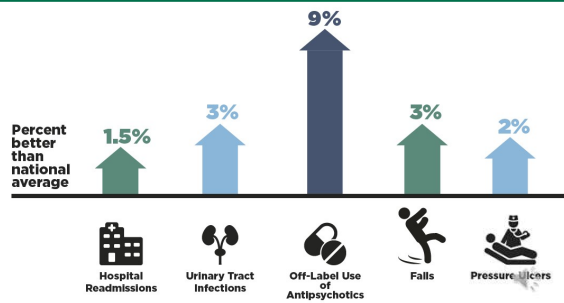
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AHCA/NCAL National Quality Award
www.ahcancal.org/Quality

- Organizational Profile
  - Organizational Environment
  - Organizational Relationships
  - Organizational Situation
- Leadership
  - Senior Leadership
  - Governance & Societal Contributions
- Strategy
  - Strategy Development
  - Strategy Implementation
- Customers
  - Customer Expectations
  - Customer Engagement

- Measurement, Analysis, & Knowledge Management
  - Measurement, Analysis, Review, & Improvement of Organizational Performance
  - Information & Knowledge Management
- Workforce
  - Workforce Environment
  - Workforce Engagement
- Operations
  - Work Processes
  - Operational Effectiveness
- Results – Organizational Performance
  - Healthcare and process
  - Customer, workforce, leadership, governance
  - Financial, market, strategy, comparative

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Quality Measure Performance

Percent better than national average

- Hospital Readmissions: 1.5%
- Urinary Tract Infections: 3%
- Off-Label Use of Antipsychotics: 9%
- Falls: 3%
- Pressure Ulcers: 2%

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Business Outcomes

Occupancy Rate
- 75% Quality Awards
- 70% The Nation

Operating Margin
- Quality Awards: -5.6%
- The Nation: -6.7%

Staff Turnover

	Quality Awards	The Nation
All Nurses %	52%	54%
Registered Nurses %	49%	53%
Administrators #	0.68	0.80

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Quality Award Analysis
Conducted by Brown University

- Analysis to determine correlation between outcomes for QA recipient's vs non-recipients
- Examined outcomes both before and after the onset of COVID-19 pandemic
- Saw lower rates of all outcomes among awardees vs non-awardees
  - Better hospitalization, re-hospitalization, and emergency department rates
  - 5.3% lower relative risk of emergency department use for awardees compared to residents in non-awardee communities
- Residents in awardee centers were on average older and less likely to be dually eligible
- CONCLUSIONS: Study suggests that industry-associated QA may reflect better outcomes among AL residents

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Resources

- For LTC Trend Tracker Questions: help@ltctrendtracker.com
- LTC Trend Tracker Website: www.ltctrendtracker.com

- For Quality Award Questions: QualityAward@ahca.org
- Quality Award Website: www.ahcancal.org/quality

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Thank You!

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