Maximizing the Power of Your Data

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Objectives

- Explore selected LTC Trend Tracker reports & features including:
 re-hospitalization, five-star predictor, quality measures and others
- Understand how to interpret the data contained in key reports and how to formulate that data into meaningful and actionable stories and plans.
- ✓ Hear case examples how members they use the information provided through LTC Trend Tracker to enhance their ability to meet organizational goals and priorities.



LTCtrendtracker YOUR QUALITY & PERFORMANCE SOLUTION

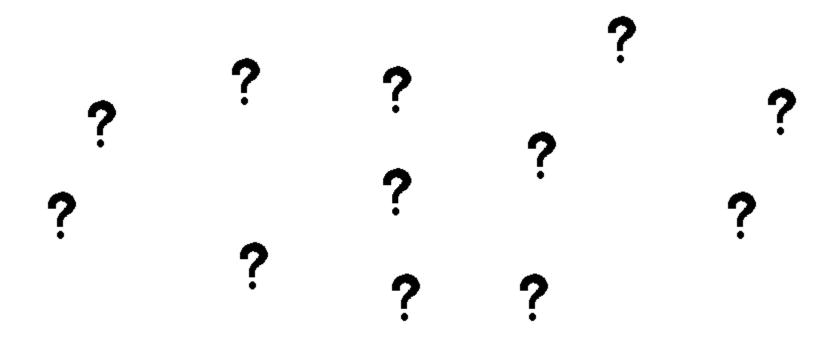
AHCA Quality Metrics Survey History Resident Characteristics Your Member Staffing Information Resource Cost Report & Medicare Utilization **CMS Five Star Rating**

www.ltctrendtracker.com





Ask Questions

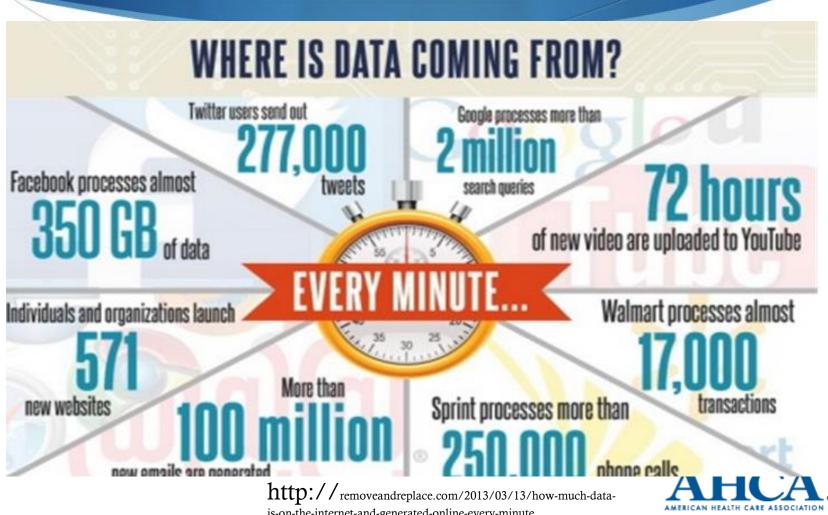




Data



Data out on the internet



is-on-the-internet-and-generated-online-every-minute

Data that you collect

- ✓ MDS
- Resident, family, staff satisfaction
- ✓ Turnover data
- ✓ Clinical
- Survey

- Financial Data
- Census
- √ Workers Comp
- Rehospitalization
- ✓ RUG info



2011 and 2012 MDS Submissions

 $\sqrt{2011} - 19,660,164$ $\sqrt{2012} - 20,045,185$



These reports become public

- ✓ Resident Census and Condition Report
- Application for MCR and MCD
- ✓ QM Report
- ✓ Cost Report
- ✓ Survey Report



What people know about you

- ✓ Five Star
- ✓ ProPublica— can read your 2567
- √ Hospitals track your data
- Yelp
- ✓ Google



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Home → Nursing Home Compare



Official Nursing Home Compare Data

These are the official datasets used on the Medicare.gov Nursing Home Compare Website provided by the Centers for Medicare & Medicaid Services. These data allow you to compare the quality of care at every Medicare and Medicaid-certified nursing home in the country, including over 15,000 nationwide.

Download All Data

Microsoft Access Database

Updated: Jul 3, 2013

© CSV Flat Files – Revised

Updated: Jul 3, 2013

Supporting Documentation

- About Nursing Home Compare Downloadable Database PDF (216KB)
- About Inspections Results PDF (143KB)
- About the Nursing Home Ratings PDF (89KB)
- About the Nursing Home Residents PDF (106KB)
- About the Nursing Home Staff PDF (93KB)
- Nursing Home Compare Flat Files Revised Format Download -PDF (321KB)
- Measure Dates Link to Dataset

What hospitals know about you

- Readmission Rate
- Responsiveness to inquires
- ✓ Clinical Outcomes
- ✓ Five Star Rating
- ✓ Cost Report Data



How often do you look?

- ✓ Five Star Data?
- ✓ Resident Condition and Census Report
- ✓ QM Report
- ✓ QI Report
- ✓ Application for MCR and MCD



Do you look at your five star preview report

✓ Do you know what your rating is prior to it coming out?



ACOs and Data

- ✓ ACOs want to see data comparison
 - Five Star
 - Outcomes
 - Survey
 - Staffing
 - Clinical



LTC Trend Tracker and ACOS

- ✓ Clinical Outcomes
 - Restraint utilization
 - Pressure Ulcer
 - Vaccine
- Risk Adjusted Rehospitalization
- ✓ Five Star
- ✓ Operation-- Survey



Data and Referral Sources

- ✓ Referral Sources want to see outcome
- ✓ Show trends over time
- ✓ Comparison against peers
- ✓ Determine your market needs, market share
- Regulatory, clinical and staffing



Medicare Outcomes

- ✓ Rehospitalization Rates are lower
- ✓ Trends in return home are X%
- ✓ Specialization units



QAPI and Data



QAPI Meetings





QAPI Basics

- ✓ 5 elements of for QAPI
- 1. Design and Scope
- 2. Governance and Leadership
- 3. Feedback, Data Systems and Monitoring
- 4. Performance Improvement Projects
- 5. Systematic Analysis and Systemic Action



Feedback, Data Systems, and Monitoring

- Monitor care and services
- ✓ Process for feedback using performance indicators
- Monitor wide range of care processes and outcomes
- Review findings against facility benchmarks
- ✓ Track, investigate and monitor adverse events
- ✓ Implement plans to prevent recurrence



Benchmarking

- ✓ Use LTCT for external and internal
- ✓ Allows you to check your performance to others
- ✓ Are you higher or lower than your peers?
- ✓ The basis for your QAPI program



LTCTT and QAPI

- ✓ Use in Element 3– Feedback, Data Systems and Monitoring
 - Benchmarking
 - Look at historical trends
 - Set your goals
 - Print Graphs or download data into excel for correlation analysis

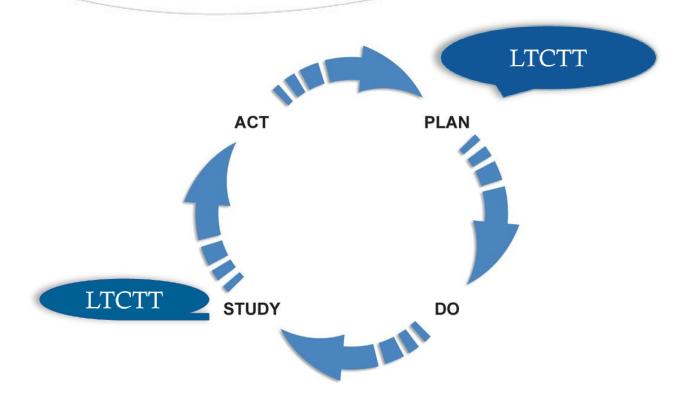


QAPI Meetings

- ✓ CASPER Reports—Staffing, Survey History, Resident Characteristic Reports
- ✓ NH QM
- ✓ Five Star Reports
- ✓ Cost Report
- Medicare Utilization Report
- Rehospitalization Report



PDSA





Frame the problem

- ✓ 1. Recognition
- ✓ 2. review previous findings



Communicate results

- ✓ Communicate the results of the issue
- ✓ Present action



How do you solve?

- ✓ You collect data
- ✓ And analysis the data



Why is data important?

- ✓ Allows you to set priorities on what you are going to work on
- ✓ Allow you to track and trend the good things in your building
- Essential to QAPI



Stuff you already do

- ✓ Frame the problem
- ✓ Solve the problem
- ✓ Communication and acting on the results



Stand Up Meetings

✓ What data do you collect at Stand up?



How to Use to LTC Trend Tracker



Benefits of LTC Trend Tracker

- ✓ AHCA member resource
- Benchmarking against your peers
- ✓ Increases efficiency saves you time
- ✓ Data in one central place pulled using Medicare number



Data Sources

Data for reports uploaded by AHCA for centers (identified by their Medicare provider number)

Report	Data Source
CASPER Reports	Collected at time of survey
Cost Report	Full cost report submitted to your MAC
Five-Star and Quality Measures	Nursing Home Compare
Medicare Patient Days by RUG Category	LTC Trend Tracker participants
AHCA Metrics	MDS 3.0
Antipsychotic	MDS 3.0
Turnover and Retention	Annual AHCA Skilled Nursing Staffing Report



Peer Group Selection

1) Pick Your Area

- ✓ National
- ✓ State
- ✓ County
- ✓ City
- ✓ Zip Code
- Develop a custom peer group

2) Pick Your Peer Group

For Profit Not for Profit

Chain Facility

Single Facility

CCRC

Veterans Homes

All Peers



Reports



AHCA Quality Metrics

- √ Rehospitalization
- ✓ Discharge to Community
- ✓ Length of Stay



How Risk Adjustment Works

Provider A Low Acuity

- ✓ 100 admissions in a year
- ✓ Monthly d/c to hospital 10
- Actual Rehospitalization rate10%
- ✓ Risk adjusted rate 25%

Provider B High Acuity

- ✓ 100 admissions in a year
- ✓ Monthly d/c to hospital 25
- Actual Rehospitalization rate25%
- ✓ Risk adjusted rate 10%



Risk-Adjusted Rate

✓ Uses logistic regression (a statistical method that can adjust for multiple clinical characteristics [e.g., age and gender] at the same time)

 $\left(\begin{array}{c}
\text{Actual Rehospitalization} \\
\text{Expected rehospitalization}
\end{array}\right) X \text{National} \\
\text{Average} = \text{Adjusted} \\
\text{Rate}$



Data Source

- ✓ MDS 3.0
- ✓ Over a 12-month period
- ✓ Based on admission assessment (5 day or OBRA)
- ✓ Discharge assessment



Rehospitalization Data

- ✓ MDS 3.0-based measure
- PointRight Pro 30 Pro 10 Pro 1

- Adjusted rate
- Expected rate
- Actual rate
- ✓ Use in telling your story to hospitals
- ✓ Benchmark your Rehospitalization to your peers



Risk Adjustment Variables Used

✓ Demographic

- Age >65
- Male
- Medicare as Primary Payor

√ Functional Status

- Total Bowel Incontinence
- Eating dependent
- Needs 2 person assistance in ADLs
- Cognitive Impairment (Dementia)

PointRight Pro 30"

Prognosis

- End Stage prognosis poor
- Recently rehospitalized
- Hx of Respiratory Failure
- Receiving Hospice Care

Clinical Conditions

- Daily pain
- Pressure Ulcer Stage >2 (split into 4 variables)
- Venous Arterial Ulcer
- Diabetic Foot Ulcer



Risk Adjustment Variables Used (continued)

Diagnoses

- Anemia
- Asthma
- Diabetes Mellitus
- Hx of Viral Hepatitis
- Hx of Septicemia
- Hx of Heart Failure
- Hx of Internal bleeding

Services & treatments

- Dialysis
- Insulin prescribed
- Ostomy care
- Cancer Chemotherapy
- Receiving Radiation Therapy
- Continue to receive IV Medication
- Continue to receive oxygen
- Continued tracheostomy care





Rehospitalization How to interpret your results

	Jun-13	Sep-13	Dec-13	Mar-14	Jun-14
Actual Rehospitalization	21.10%	21.00%	23.60%	22.60%	20.90%
Expected Rehospitalization	22.10%	22.30%	23.50%	22.70%	22.10%
Ratio (actual/expected)	0.95	0.94	1.00	1.00	0.95
Risk Adjusted Rehospitalization	18.60%	18.40%	17.90%	17.70%	16.70%

- ✓ How do I compare to others? look at risk adjusted results
- ✓ Are you getting better? look at your actual results
- ✓ Are you admitting sicker patients? look at your expected
- ✓ Are you admitting more or less than expected? look at your actual to expected ratio



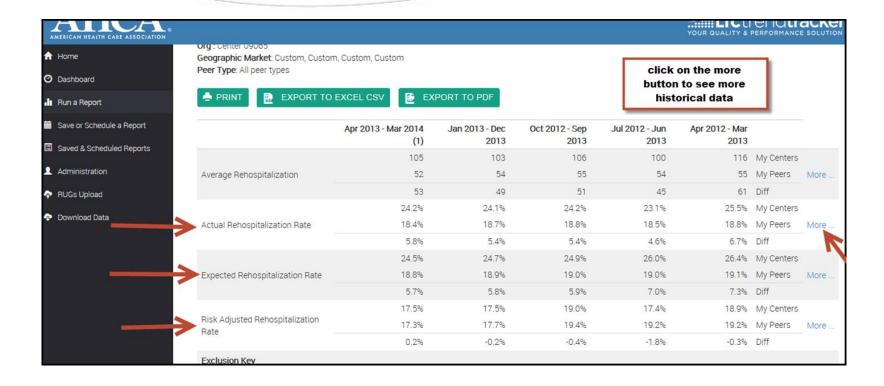
How to interpret your results

	Jun-13	Sep-13	Dec-13	Mar-14	Jun-14
Actual Rehospitalization	21.10%	21.00%	23.60%	22.60%	20.90%
Expected Rehospitalization	22.10%	22.30%	23.50%	22.70%	22.10%
Ratio (actual/expected)	0.95	0.94	1.00	1.00	0.95
Risk Adjusted Rehospitalization	18.60%	18.40%	17.90%	17.70%	16.70%

Risk adjusted is getting better but your actual & expected have not

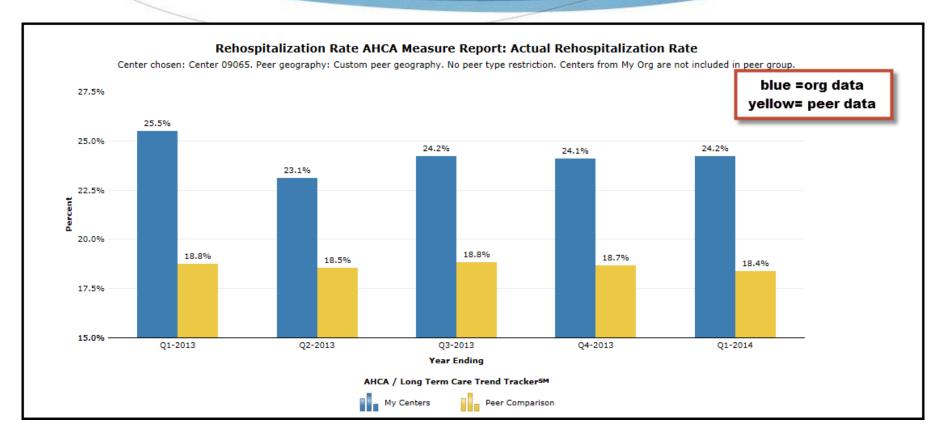
- Means you are doing better compared to others but you are not improving much
- Your admissions have about the same acuity over time (e.g. they are not sicker in Jun 2014 compared to Jun 2013 based on expected rate)
- Your ratio is 1.0 or less meaning you send fewer patients back to the hospital then expected (this is why your risk adjusted value is 3-4% points less than your actual (21% vs 18%)- however you still have room to do better since your ratio is close to 1.0 most of the time.

Rehospitalization Report



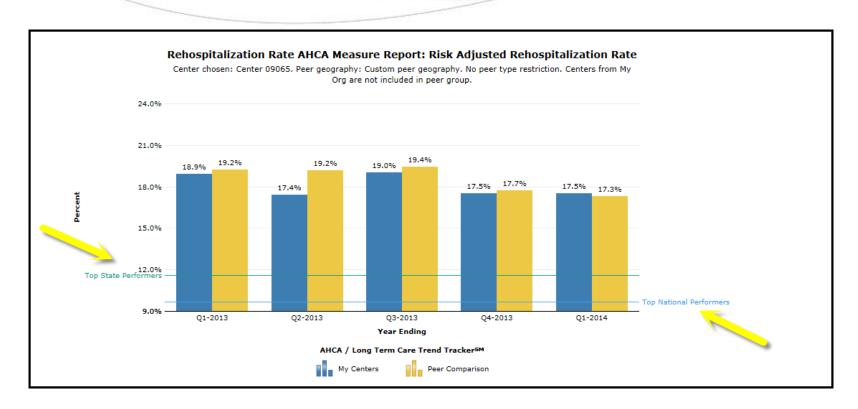


Actual Rehospitalization





Risk Adjusted Trend







Percentile info

	Q1 2013	Q2 2013	Q3 2013	Q4 2013	Q1 2014
My Centers	18.9%	17.4%	19.0%	17.5%	17.59
Peers	20.8%	20.9%	20.6%	18.6%	18.59
Center Ranking					
Center State Ranking	38%	30%	37%	41%	429
Center National Ranking	61%	50%	63%	65%	669
National Comparison					
Top Performer (Nation)	10.8%	10.7%	10.7%	9.7%	9.79
90th Percentile (Nation)	24.3%	24.0%	23.9%	21.8%	21.69
75th Percentile (Nation)	20.9%	20.8%	20.7%	18.8%	18.69
50th Percentile (Nation)	17.5%	17.3%	17.3%	15.7%	15.59
25th Percentile (Nation)	14.0%	13.9%	13.9%	12.6%	12.59
10th Percentile (Nation)	10.7%	10.6%	10.6%	9.7%	9.69
State Comparison					
Top Performer (State)	13.5%	13.4%	13.0%	11.4%	11.69
90th Percentile (State)	28.5%	28.9%	28.2%	26.0%	25.69
75th Percentile (State)	25.0%	25.1%	24.6%	22.6%	21.69
50th Percentile (State)	20.8%	21.0%	20.2%	18.3%	18.69
25th Percentile (State)	17.2%	16.4%	16.6%	14.5%	14.59
10th Percentile (State)	13.9%	13.7%	12.8%	11.3%	11.49



Discharge to Community

- ✓ Determine how you compare in your d/c to community rate
- ✓ Private home, apartment, board/care, assisted living, or group home as indicated on MDS discharge assessment
- ✓ Uses MDS Data from the d/c assessment



Discharge to Community Report

	Jan 2013 - Dec 2013 (1)	Oct 2012 - Sep 2013	Jul 2012 - Jun 2013	Apr 2012 - Mar 2013	Jan 2012 - Dec 2012		
	141	132	126	124	132	My Centers	
Average Annual Discharge to Community	95	94	93	93	92	My Peers	More
oommunity	46	38	33	31	40	Diff	
Actual Discharge to Community Rate	61.0%	57.9%	59.4%	57.9%	60.0%	My Centers	
	54.7%	54.4%	54.1%	54.1%	54.1%	My Peers	More
	6.3%	3.5%	5.3%	3.8%	5.9%	Diff	
	62.0%	61.8%	61.4%	62.3%	62.1%	My Centers	
Expected Discharge to Community rate	58.3%	58.2%	58.0%	57.9%	58.0%	My Peers	Mor
rate	3.7%	3.6%	3.4%	4.4%	4.1%	Diff	
	61.7%	58.4%	58.6%	56.3%	58.5%	My Centers	
Risk-Adjusted Discharge to Community rate	58.8%	58.1%	56.6%	56.8%	56.8%	My Peers	More
Community rate	2.9%	0.3%	2.0%	-0.5%	1.7%	Diff	
Exclusion Key							

NA(1) - Small Sample Size



Discharge to Community

✓ The measure is risk adjusted using 59 variables in six domains: demographic, functional status, prognosis, clinical conditions, clinical treatments, and clinical diagnoses



Discharge to Community

- ✓ Determine how you compare in your d/c to community rate
- ✓ Private home, apartment, board/care, assisted living, or group home as indicated on MDS discharge assessment
- ✓ Uses MDS Data from the d/c assessment



How to use DC to Community

- See how you are doing on your dc rate to home and other nonclinical settings
- ✓ It can also tell you if you are sending more or fewer than expected individuals back to the community given the clinical characteristics of the population of individuals admitted to your center
- ✓ Use negotiations with hospitals, Manage Care organizations and others.



Sample Report

	73.0%	71.3%	70.9%	72.4%	75.2%	My Centers	
Actual Discharge to Community Rate	58.8%	58.8%	58.6%	58.6%	58.3%	My Peers	More
	14.2%	12.5%	12.3%	13.8%	16.9%	Diff	
	66.8%	67.0%	66.0%	67.4%	68.9%	My Centers	
Expected Discharge to Community rate	59.1%	59.2%	59.0%	59.0%	58.8%	My Peers	More
. dec	7.7%	7.8%	7.0%	8.4%	10.1%	Diff	
	68.7%	66.6%	67.0%	65.0%	66.0%	My Centers	
Risk-Adjusted Discharge to Community rate	62.9%	62.5%	62.0%	60.5%	60.5%	My Peers	More
community rate	5.8%	4.1%	5.0%	4.5%	5.5%	Diff	

How do I compare to others? – look at risk adjusted results

How do I compare to myself – look at your actual results

Are you admitting sicker patients? – look at your expected



LOS Metric

- ✓ LOS is a popular measure, particularly among payors (e.g. MCOs) and in new payment models (e.g. ACOs)
- ✓ LOS is **not** a quality measure;
 - Rather, LOS can be used as an efficiency measure, which needs to be interpreted in the context of other quality measures, for example
- ✓ There are <u>multiple</u> ways to calculate LOS



Issues to consider when measuring LOS

- ✓ What is end date?
 - What do you do with individuals who are rehospitalized?
 - Do you include individuals who die?
 - How do you count LOS for people who don't go home?
- ✓ How do you deal with patients who are an outlier with very long LOS that can skew the results?
- How many people must be included in the measure to have stable results over time?
- ✓ How do you risk adjust for differences in patient acuity?
 - "My patients are sicker than yours."



Calculating AHCA's Length of Stay (LOS)

- Calculated only for <u>new</u> admissions to a nursing center from a hospital.
 - New admissions are defined as any admission from a hospital with no prior SNF stay in the 100 days prior to the admission MDS assessment. (this matches the discharge to community measure)
- ✓ Each person's LOS is calculated based on the number of days between their admission and "*final*" discharge from the Center.
 - Final discharge is defined as being discharged back to the community
 - If they are not discharged from the center within 120 days from admission they are assigned a LOS of 120 days no matter how long they stay past 120 days.

What happens when a person is rehospitalized?

- ✓ When an individual has an interruption in service (e.g. rehospitalization) that is **10 days or less**, their LOS before <u>and</u> after rehospitalization are added together.
- ✓ When an individual has an interruption in service that is **greater** than 10 days; their LOS ends on the day of interruption (e.g. discharge to the hospital).
 - The LOS following their readmission is not counted in these cases.

AHCA LOS Metrics

- #1 Total Median LOS in days for all admissions
- #2 Another way to look at LOS besides calculating the total LOS in days is to look at how many people stay for certain periods of time
 - How many have LOS of 7 or fewer days
 - How many have LOS of 14 or fewer days
 - How many have LOS of 20 or fewer days
 - How many have LOS of 45 or fewer days



% Staying 7, 14, 20 or 45 days or fewer

Numerator:

number of individuals with a LOS of XX days or fewer

Denominator:

All residents admitted from an acute hospital to a center over the prior 12 months and who did not have a prior stay in a nursing center for the prior 100 days; and did not die before XX days following admission.

- $\sqrt{}$ XX = either 7, 14, 20, or 45 days
- Example: The percentage staying 14 days or fewer is calculated by dividing the number of individuals with LOS 14 days or fewer by the total number of admissions from a hospital that did not have a prior stay in a SNF within the 100 days of admission and did not die before 14 days



LOS Report in LTC Trend

Tradron

	Apr 2013 - Mar 2014	Jan 2013 - Dec 2013	Oct 2012 - Sep 2013
	(1)	04112010 Dec 2010	ОСС 2012 ОСР 2010 С
Length of Stay in Context with PAC Measures			
	25.2	25.4	24.7
Median Length of Stay – risk Adjusted	22.0	21.4	21.1
Discharge to Community Risk Adjusted	61.2%	60.5%	60.0%
Discharge to Community Risk Adjusted	70.0%	69.9%	68.9%
30 day Rehospitalizations (PointRight Pro 30) Risk Adjusted	15.7%	15.9%	17.5%
be day remorphism (1 omeragni 110 bo) rada riajusted	14.2%	14.4%	16.2%
Summary of Risk Adjusted Length of Stay Metrics			
Number of Centers	8,529	8,665	8,444
Number of Centers	136	140	138
Overall Median Length of Stay	25.2	25.4	24.7
Overall Median Length of Stay	22.0	21.4	21.1
% Staying for 7 or Fewer Days	10.4%	10.6%	10.7%
% Staying for 7 of Fewer Days	9.0%	9.4%	9.6%
% Staying for 14 or Fewer Days	22.7%	23.2%	23.4%
% Staying for 14 of 1 ewel Days	21.9%	22.4%	23.2%
% Staying for 20 or Fewer Days	38.7%	39.1%	39.1%
a Staying for 20 of Fewer Days	41.2%	42.0%	42.9%
% Staying for 45 or Fewer Days	68.6%	68.7%	68.7%
a Staying for 45 of Fewer Days	78.2%	78.7%	78.9%

LOS Report in LTC Trend Tracker

ummary of Risk Adjusted Length of Stay Metric	cs							
Number of Centers	5	5	5	5	5	My Centers		
Number of Centers	816	821	807	811	808	My Peers		
Overall Median Length of Stay	22.2	23.8	24.5	24.1	24.6	My Centers	More	
retail Median Length of Stay	23.8	23.8	23.5	24.1	24.1	My Peers	More	
6 Staying for 7 or Fewer Days	19.0%	17.4%	16.1%	16.2%	16.8%	My Centers	More	
	12.6%	13.0%	13.4%	13.7%	14.1%	My Peers		
% Staying for 14 or Fewer Days	26.2%	26.5%	26.3%	26.1%	26.8%	My Centers	The desired	
% Staying for 14 or Fewer Days	25.4%	26.2%	26.5%	26.7%	26.9%	My Peers	More	
% Chaving for 20 or Favor Dave	43.1%	42.1%	41.5%	40.8%	41.1%	My Centers	Mara	
% Staying for 20 or Fewer Days	41.8%	42.2%	42.1%	42.4%	42.4%	My Peers	More	
9: Staying for 45 or Fower Days	70.8%	69.4%	68.6%	68.3%	68.2%	My Centers	More	
Staying for 45 or Fewer Days	70.9%	70.9%	70.5%	70.7%	70.7%	My Peers		



Median and 7 days or fewer

Median Length of Stay							
Actual Length of Stay	27.6	29.3	29.9	29.8	30.8	My Centers	More
Actual Length of Stay	34.3	33.9	34.2	34.5	34.7	My Peers	WOIE
Expected Length of Stay	30.9	30.5	30.4	30.7	31.0	My Centers	More
Expected Length of Stay	32.8	32.7	32.6	32.6	32.6	My Peers	WOIE
Risk Adjusted Length of Stay	22.2	23.8	24.5	24.1	24.6	My Centers	More
	23.8	23.8	23.5	24.1	24.1	My Peers	WOIE
Length Of Stay 7 or fewer Days							
Actual %	11.7%	11.1%	10.1%	10.1%	10.4%	My Centers	More .
Actual %	10.1%	10.4%	10.7%	10.8%	10.9%	My Peers	WOIE.
Expected %	6.0%	6.3%	6.4%	6.5%	6.5%	My Centers	More
Expected %	8.3%	8.3%	8.3%	8.3%	8.3%	My Peers	WOIE
Risk Adjusted %	19.0%	17.4%	16.1%	16.2%	16.8%	My Centers	More.
Historia de la companya de la compan	12.6%	13.0%	13.4%	13.7%	14.1%	My Peers	WOIC.



How to interpret your results

✓ How do I compare to others? – look at risk adjusted results

✓ How do I compare to myself – look at your actual results

✓ Are you admitting sicker patients? – look at your expected



How to read your results

Median LOS	Q2-2013		Q3-2013	Q4 2013	Q1-2014
Actual		31	31	24	24
Expected		30.5	29.9	29.3	30.2
Risk Adjusted		25.4	25.9	20.5	19.9

- ✓ How do I compare to others? look at risk adjusted results,
- ✓ How do I compare to myself − look at your actual results
- ✓ Are you admitting sicker patients? look at your expected, acuity has changed marginally



Median LOS

Median Length of Stay									
Actual Length of Stay	27.6	2	29.3	29.9	29.8	30	.8	My Centers	More
Actual Echyth of Stay	34.3	3	33.9	34.2	34.5	34	.7	My Peers	MOIC
Expected Length of Stay	30.9	3	80.5	30.4	30.7	31	.0	My Centers	More
Expected Length of Stay	32.8	3	32.7	32.6	32.6	32	.6	My Peers	More
Risk Adjusted Length of Stay	22.2	2	23.8	24.5	24.1	24	.6	My Centers	More
HISK AUJUSTEU LETIGUT OF STAY	23.8	2	23.8	23.5	24.1	24	.1	My Peers	More



LOS 7 days for fewer

Length Of Stay 7 or fewer Days							
Actual %	11.7%	11.1%	10.1%	10.1%	10.4%	My Centers	More
Actual 10	10.1%	10.4%	10.7%	10.8%	10.9%	My Peers	Wore
Expected 9/	6.0%	6.3%	6.4%	6.5%	6.5%	My Centers	More
Expected %	8.3%	8.3%	8.3%	8.3%	8.3%	My Peers	More
Risk Adjusted %	19.0%	17.4%	16.1%	16.2%	16.8%	My Centers	More
RISK Adjusted %	12.6%	13.0%	13.4%	13.7%	14.1%	My Peers	Wore

How do I compare to others? – look at risk adjusted results, Risk Adjustment is going up

Are you getting better? – look at your actual results- Actual Rates are going up

Are you admitting sicker patients? – look at your expected, acuity has changed marginally



Trends up or down

- ✓ Discharge to Community- a higher number is better
- ✓ Rehospitalization— a lower number is better
- ✓ LOS- is up to the provider to make this decision



Overall Five-Star Rating

- ✓ Compare ranking in categories:
 - Overall Rating
 - Health Inspection Rating
 - Direct Care Staffing Rating
 - Registered Nurse Staff Rating
 - CMS Quality Measure Data



Five Star Rating Reports

- ✓ 3 Reports
- ✓ Overall, Staffing and QM Report
- ✓ QM-- Identify focus QMs for quality improvement
- Predict impact of QM improvements on Five-Star QM Rating
- ✓ Predict Staffing Five Star Rating



Five Star QM Report

- ✓ Look at your current QM Five Star Rating
- ✓ Determine QMs to focus from the Five Star QM Report
- ✓ Look at your current resident population
- Enter your scores and see the affect on your overall QM score
- ✓ Members use this report to see if they will maintain their five star rating



Org : Center 09065 Geographic Market: City Peer Type: All peer types

	Current			Goal		
	Org	Percentile	Percentile	Score	Change	%Change
LS High Risk Pressure Ulcers	11.3%	20	40	8.9%	-2.4%	-21.2%
LS Pain (Adjusted)	13.6%	20	60	7.9%	-5.7%	-41.9%
LS ADL Decline	19.6%	40	40	23.1%	3.5%	17.9%
SS Pain	27.4%	40	40	28.2%	0.8%	2.9%
LS Antipsychotic	22.5%	40	40	26.8%	4.3%	19.1%
LS Catheter (Adjusted)	2.4%	60	60	3.2%	0.8%	33.3%
SS Antipsychotic	1.6%	60	60	2.3%	0.7%	43.7%
LS Physical Restraint	0.6%	60	60	1.9%	1.3%	216.7%
LS Falls with Injury	2.7%	60	60	3.4%	0.7%	25.9%
SS Pressure Ulcers New or Worsened (Adjusted)	0.4%	75	75	0.7%	0.3%	75.0%
LS UTI	2.1%	100	100	2.1%	0.0%	0.0%
Total Percentile Points (Current/Goal):		575	635			
Star Rating (Current/Goal):	**	***	***	**		

Data source: CMS Nursing Home Compare website www.medicare.gov, last updated: Mar 2015





Org : Center 09065 Geographic Market: City		Go	oal		
Peer Type: All peer types	Percentile	Score	Change	%Change	
	40	8.9%	-2.4%	-21.2%	%Change
LS High Risk Pressure Ulcers	60	7.9%	-5.7%	-41.9%	-21.2%
LS Pain (Adjusted)	40	23.1%	3.5%	17.9%	-41.9%
LS ADL Decline	40	28.2%	0.8%	2.9%	17.9%
SS Pain	40		4 20/	10.10/	2.9%
LS Antipsychotic	40	26.8%	4.3%	19.1%	19.1%
LS Catheter (Adjusted)	60	3.2%	0.8%	33.3%	33.3%
SS Antipsychotic	60	2.3%	0.7%	43.7%	43.7%
LS Physical Restraint	60	1.9%	1.3%	216.7%	216.7%
LS Falls with Injury	60	3.4%	0.7%	25.9%	25.9%
SS Pressure Ulcers New or Worsened (Adjusted)					75.0%
LS UTI	75	0.7%	0.3%	75.0%	0.0%
	100	2.1%	0.0%	0.0%	
Total Percentile Points (Current/Goal):					
Star Rating (Current/Goal):	635				
	***	**			
Data source: CMS N					d: Mar 2015
QM Star Rating Predictor: ✓				€RE	SET



Org : Center 09065 Geographic Market: City	Percentile	Score	Change	%Change	
Peer Type: All peer types	20	10.0%	-1.3%	-11.5%	_
	40	12.0%	-1.6%	-11.8%	Change
LS High Risk Pressure Ulcers	40	00.40	0.50/	47.00/	-11.5%
LS Pain (Adjusted)	40	23.1%	3.5%	17.9%	-11.8%
LS ADL Decline	40	28.2%	0.8%	2.9%	17.9%
SS Pain	40	26.8%	4.3%	19.1%	2.9%
LS Antipsychotic					19.1%
LS Catheter (Adjusted)	60	3.2%	0.8%	33.3%	33.3%
SS Antipsychotic	60	2.3%	0.7%	43.7%	43.7%
LS Physical Restraint	60	1.9%	1.3%	216.7%	216.7%
LS Falls with Injury	60	1.5%	1.376	210.770	25.9%
SS Pressure Ulcers New or Worsened (Adjust	60	3.4%	0.7%	25.9%	75.0%
LS UTI	75	0.7%	0.3%	75.0%	0.0%
Total Percentile Points (Current/Goal):	100	2.1%	0.0%	0.0%	
Star Rating (Current/Goal):					
Data source: C/	595				Mar 201
Data source: C/	**				wiai 201
QM Star Rating Predictor: ☑					Т

Goal



Staffing Five Star Report

Reported DCS Hours PPD	4.44 4.51	4.44 4.48		My Centers My Peers	More
Expected DCS Hours PPD	3.98	3.98	4.06	My Centers	More
DCS Hours PPD Difference (Reported - Expected)	4.22 0.47	4.23 0.47		My Peers My Centers	More
bos Hours PPD billerence (heported - Expected)	0.30 11.7%	0.25		My Peers My Centers	WOTE
DCS Hours PPD Percent Difference ((Reported - Expected) / Expected)	7.2%	6.0%		My Peers	More
DAL Chaffing Dakin (Danashari, European)	0.66	0.66	0.53	My Centers	



Five Star Staffing Report

RN Staffing Ratio (Reported : Expected)	0.66	0.66	0.53	My Centers	More	
niv Starring hatio (neported : Expected)	0.67	0.64	0.61	My Peers	WOTC	
Reported RN Hours PPD	0.60	0.60	0.54	My Centers	More	
neported his nodis PPD	0.75	0.72	0.68	My Peers	MOIE	
Expected DN Hours DDD	0.91	0.91	1.03	My Centers	More	
Expected RN Hours PPD	1.10	1.11	1.11	My Peers	WOIE	
DN Hours DDD Difference (Departed - Expected)	-0.31	-0.31	-0.49	My Centers	More	
RN Hours PPD Difference (Reported - Expected)	-0.35	-0.39	-0.43	My Peers	More	
DN Hours DDD Dercent Difference ((Deported - Expected) / Expected)	-33.8%	-33.8%	-47.5%	My Centers	More	
RN Hours PPD Percent Difference ((Reported - Expected) / Expected)	-32.7%	-35.9%	-39.4%	My Peers	MOIE	



Five Star Staffing Report

Staffing change needed to gain one star on Staffing Component		
Staff Rating (Current)	****	
Staff Rating (Goal)	****	
Option #1 to Increase Staffing Component by One Star:		
Increase RN Hours PPD by	0.22	
Increase DCS Hours PPD by	0.00	
Staffing change needed to gain one star on <u>OVERALL</u> Five Star Rating		
Overall Rating (Current)	****	
Overall Rating (Goal)	****	
Increase to overall star rating not possible by increasing staffing PPD.		





Quality Measures

- ✓ Compare Quality Measures
 - Exclusive AHCA 1 quarter view
- ✓ Evaluate resident characteristics:
 - Post-Acute Care
 - Chronic Care



Resident Report

- ✓ Based on CASPER data
- ✓ This report can assist you in quality improvement efforts
- ✓ Compare and contrast resident characteristics:
 - 1+ assistance in ADLS
 - Bowel/bladder status
 - Mobility
 - Skin integrity
 - Special care
 - Behaviors
 - Other



Regulatory Reports

- Standard Health Survey, Combined Health Survey, Complaint and Life Safety Code Information
- ✓ Identify the frequency a certain F-Tag or K-Tag was cited
- ✓ Compare percentage of peer centers with the same F-Tag or K-Tag
- Set up organization focus tags
- ✓ See top 15 tags for your state
- Track survey trends in the market



Turnover and Retention Report

- ✓ Information from the annual AHCA Skilled Nursing Staffing survey
- Compare organization's turnover and retention rate to your peers for:
 - Admin
 - DON
 - Staff RN
 - CNA



Cost Report

- Occupancy rates
- ✓ PPD costs for all departments
- ✓ Bad debt
- ✓ Liability insurance costs
- ✓ Staffing compensation costs



Medicare RUG Utilization Report

- ✓ Average number of beds, MCR census, and RUG rate
- ✓ CMI information
- Utilization of therapy levels
- ✓ % of patient days for each major RUG category
- ✓ RUGs are submitted to LTC Trend Tracker by the organizations
- Used in advocacy efforts



Dashboard

- ✓ Color indicates performance trend
- ✓ AHCA Quality Initiative, Post-Acute, Staffing, Regulatory and Five Star
- ✓ Use for QA/PI and Board meetings
- Everyone has the same dashboard (based on user permissions)



O Dashboard

Selected Criteria

Modify Dashboard

Sub Org: Unassigned Centers of 05249; with all peers in the same state as my centers

Username:

ahcademoacct

Organization: Provider Organization 104393

AHCA Member: Ye



	Fiv	e Star
Quality Measures	→ 4.40	4.16
Staffing	7 4.20	3.55
Health Inspection	≥ 3.60	2.87
Overall	→ 4.60	3.59
	My Org	Peers

	My Org	Peers
Number of Citations (Standard)	≥ 5.8	5.9
Number of Citations (Complaint)	7 4.0	3.0
Substandard Quality of Care	→ 0.0%	3.6%
Special Focus Centers	0	2
	9	Survey

	My Org	Peers
Risk Adjusted Rehospitalization	≥ 16.6%	17.7%
Antipsychotic Use	≥ 21.6%	21.9%
DCS Turnover	₹ 61.1%	47.1%
Risk Adjusted Rehospitalization Antipsychotic Use DCS Turnover		

	My Org	Peers
Average Medicare Rate (PPD)		\$453.37
Risk Adjusted Discharge to Community	≥ 62.6%	61.5%
# of Admissions from hospital	405	298

Quality Initiative

Post Acute

Staffing	9	Survey	Post Acute		Long Stay Quality	
	My Org Peers 7 4.53 4.33	My Org Peers → 2.79 2.70	My Org Peers 7 0.47 0.40	My Org Peers № 0.92 0.95	My Org Peers ■ 72.6% 71.9%	
	Total Nursing Services Hours PPD	Total Aides Hours PPD	RN Hours PPD	LPN/LVN Hours PPD	DCS Retention	

Blue Boxes

	My Org	Peers
Overall	→ 4.00	3.64
Health Inspection	→ 2.00	2.86
Staffing	→ 4.00	3.58
Quality Measures	→ 5.00	4.28

My Org	Peers
→ 11.0	5.9
7 6.0	3.1
→ 0.0%	2.8%
0	1
	→ 11.0 7 6.0

	My Org	Peers
Risk Adjusted Rehospitalization	7 22.0%	17.4%
Antipsychotic Use	≥ 29.7%	21.5%
DCS Turnover	₹ 34.5%	45.3%

	My Org	Peers
Average Medicare Rate (PPD)		\$476.15
Risk Adjusted Discharge to Community	¥ 51.8%	62.5%
# of Admissions from hospital	353	342

Quality Initiative

Five Star

Post Acute

Survey



Green Boxes



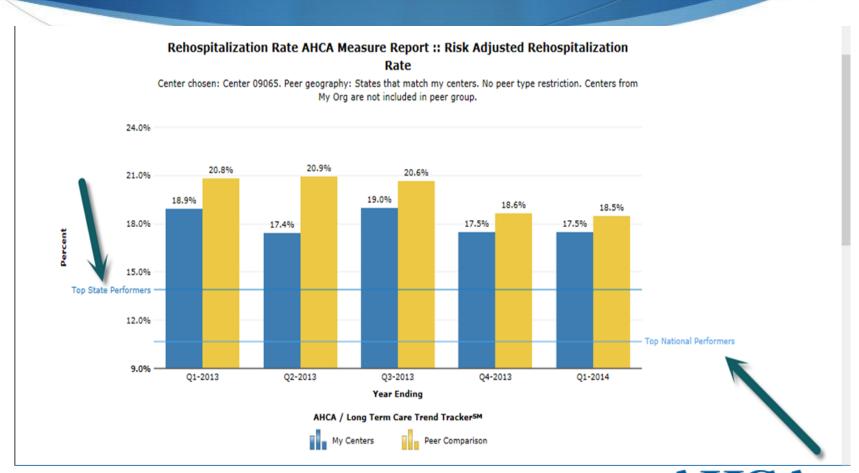


Graphs

- ✓ Bar: less than 5 data elements
- ✓ Line: more than 5 data elements
- ✓ Note Excel has more historical information
- ✓ Some reports show top performers for state and national



Bar Graph

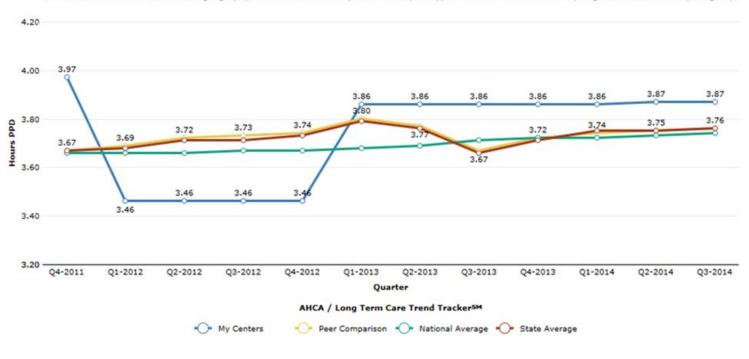




Line Graph

CASPER Staffing Report :: Direct Care Staff Hours PPD

Center chosen: Center 09065. Peer geography: States that match my centers. No peer type restriction. Centers from My Org are not included in peer group.





Percentile info

	Q1 2013	Q2 2013	Q3 2013	Q4 2013	Q1 2014
My Centers	18.9%	17.4%	19.0%	17.5%	17.5%
Peers	20.8%	20.9%	20.6%	18.6%	18.5%
Center Ranking					
Center State Ranking	38%	30%	37%	41%	42%
Center National Ranking	61%	50%	63%	65%	66%
National Comparison					
Top Performer (Nation)	10.8%	10.7%	10.7%	9.7%	9.7%
90th Percentile (Nation)	24.3%	24.0%	23.9%	21.8%	21.6%
75th Percentile (Nation)	20.9%	20.8%	20.7%	18.8%	18.6%
50th Percentile (Nation)	17.5%	17.3%	17.3%	15.7%	15.5%
25th Percentile (Nation)	14.0%	13.9%	13.9%	12.6%	12.5%
10th Percentile (Nation)	10.7%	10.6%	10.6%	9.7%	9.6%
State Comparison					
Top Performer (State)	13.5%	13.4%	13.0%	11.4%	11.6%
90th Percentile (State)	28.5%	28.9%	28.2%	26.0%	25.6%
75th Percentile (State)	25.0%	25.1%	24.6%	22.6%	21.6%
50th Percentile (State)	20.8%	21.0%	20.2%	18.3%	18.6%
25th Percentile (State)	17.2%	16.4%	16.6%	14.5%	14.5%
10th Percentile (State)	13.9%	13.7%	12.8%	11.3%	11.4%



LTC Trend Tracker and Referral Sources

- ✓ Use the data in the to assist telling your story to the hospitals or referral sources:
 - Turnover and Retention
 - Staffing characteristics
 - Survey history
 - Resident characteristics
 - Medicare utilization
 - Rehospitalization report
 - Five-Star Rating Report



Report Upload Timeline

Report	Uploaded
RUG and Five-Star data	Monthly
CASPER Data	Monthly
NH Compare Quality Measures	Quarterly
Medicare Cost Report	Quarterly



Case Examples



Impact of Five Star changes

- ✓ Track your five star rating over time
- Compare your five star rating against your peers
- ✓ See individual center or company wide data
- ✓ Look at your Five Star Rating
- ✓ Determine the impact of the Feb. 2015 changes



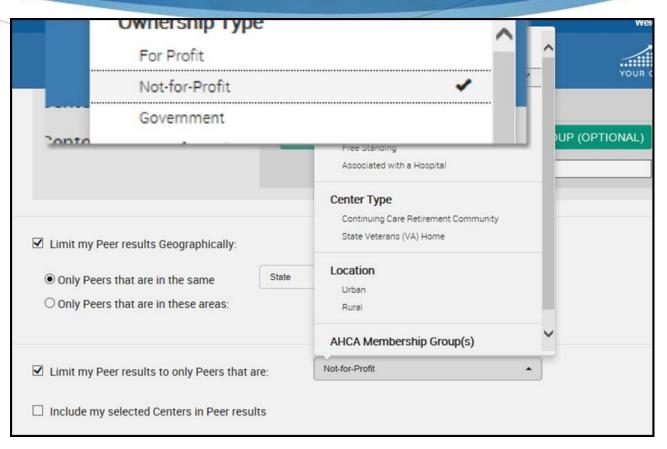
Five Star Rating

Run the report from the pull down menu

Choose a Report:	CASPER Citation Report: Combined Health Survey ▼		
	CASPER Citation Report: Combined Health Survey		
	CASPER Citation Report: Complaint Health Survey	`	
☐ Limit my Centers for w	CASPER Citation Report: Life Safety Survey		
	CASPER Citation Report: Standard Health Survey		
O Limit results by Sub-	CASPER Resident Report		
	CASPER Staffing Report		
	Cost Report		
Five Star Overall Rating Report		3	☐ Unas
-		3	Unas
Five Star Quality Measure Ratio	ng Report		□ Upon
Fire Charlet Chaffing Batter Barre			Unas
Five Star Staffing Rating Repor	π		☐ Unas
	Rehospitalization Rate AHCA Measure Report		

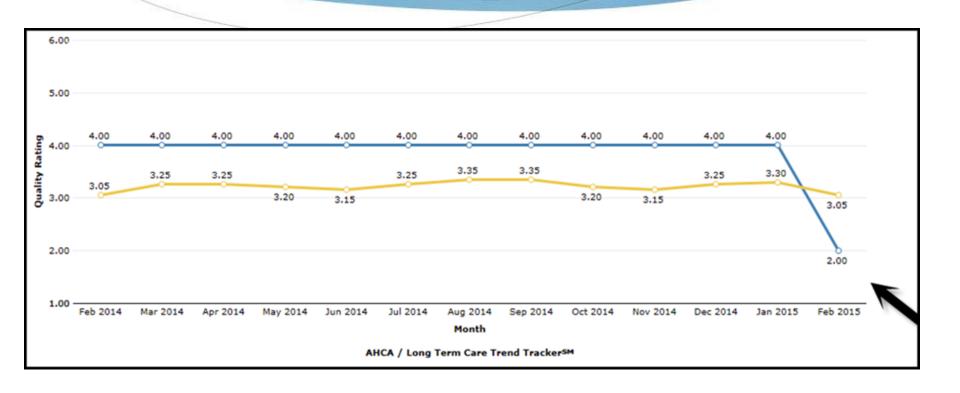


Choose Peer Group





Sample Five Star overall



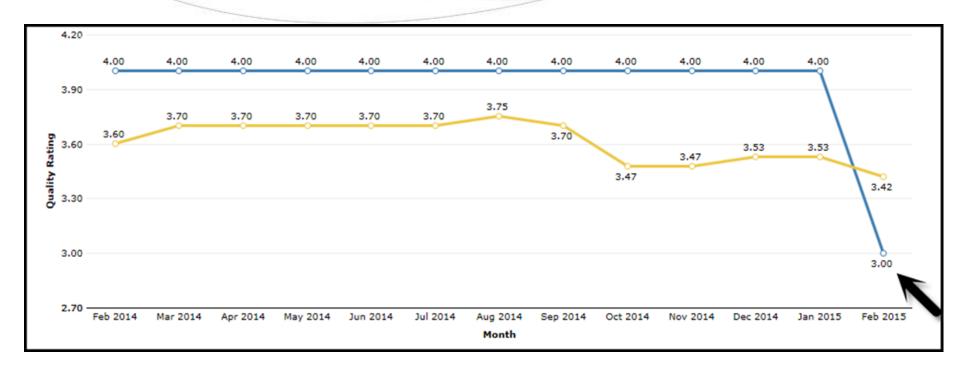


Changes with Staffing

- ✓ Look at Staffing Five Star Report
 - Determine expected vs reported
 - Did you enter the correct data during last survey?
 - What does CMS Expect you to run?
- ✓ Look At CASPER Staffing Report for reported hours



Five Star Staffing Rating







Five Star Staffing Report

	Feb 2015	Feb 2014	Feb 2013		
DOC Staffing Datia (Departed - Expected)	1.02	1.12	1.35	My Centers	More
DCS Staffing Ratio (Reported : Expected)	0.99	0.99	0.98	My Peers	
Reported DCS Hours PPD	4.38	4.44	5.48	My Centers	More
Reported DCS Hours PPD	4.12	4.10	4.06	My Peers	More
Expected DCS Hours DDD	4.28	3.98	4.06	My Centers	More
Expected DCS Hours PPD	4.16	4.15	4.13	My Peers	More
DCS Hours PPD Difference (Reported - Expected)	0.10	0.47	1.42	My Centers	More
DCS Hours PPD Difference (Reported - Expected)	-0.03	-0.05	-0.08	My Peers	WOIE



RN hours

DN Staffing Batio (Departed - Evacated)	0.65	0.66	0.53	My Centers	More
RN Staffing Ratio (Reported : Expected)	0.77	0.75	0.72	My Peers	MOLE
Departed DALLIeure DDD	0.70	0.60	0.54	My Centers	Mara
Reported RN Hours PPD	0.83	0.80	0.78	My Peers	More
Expected RN Hours PPD	1.07	0.91	1.03	My Centers	More



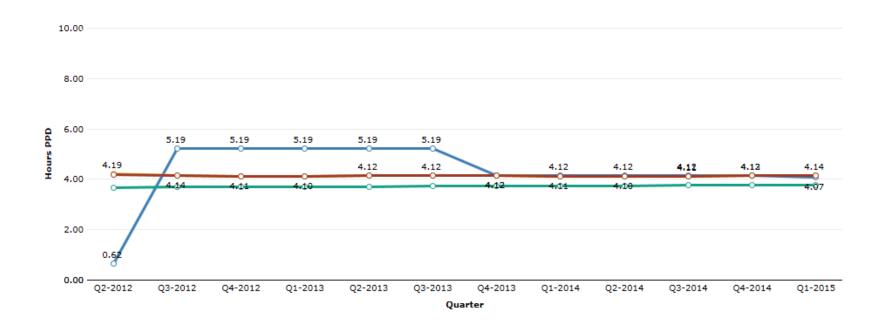
Five Star Staffing Report

Staffing change needed to gain one star on <u>Staffing Component</u>	
Staff Rating (Current)	****
Staff Rating (Goal)	****
Option #1 to Increase Staffing Component by One Star:	
Increase RN Hours PPD by	0.00
Increase DCS Hours PPD by	0.05
Option #2 to Increase Staffing Component by One Star:	
Increase RN Hours PPD by	0.03
Increase DCS Hours PPD by	0.00
Staffing change needed to gain one star on OVERALL Five Star Rating	
Overall Rating (Current)	****
Overall Rating (Goal)	***
Option #1 to Increase Overall Rating by One Star:	
Increase RN Hours PPD by	0.00
Increase DCS Hours PPD by	0.05





Casper Staffing Report





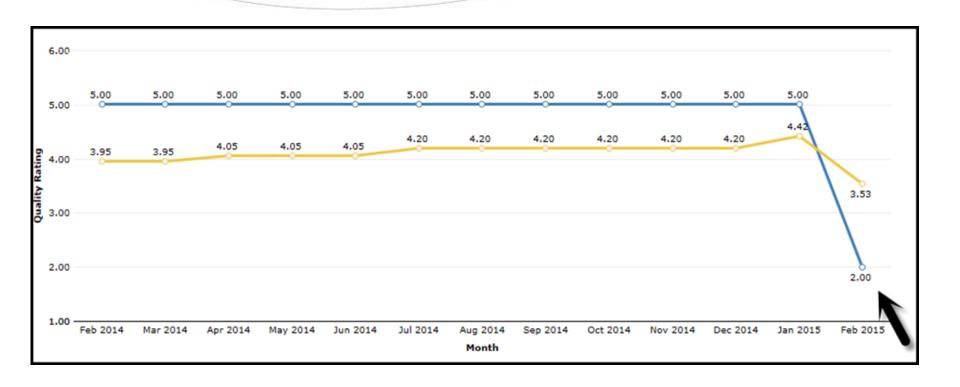


Changes with QM

- ✓ Use the Five Star QM Report to determine what changes you need to make
- ✓ Look at QM report to determine where your Five Star QMS changed



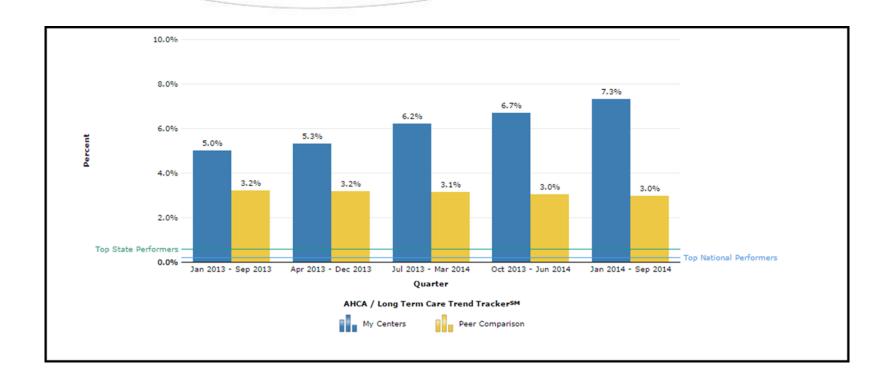
Five Star QM Rating





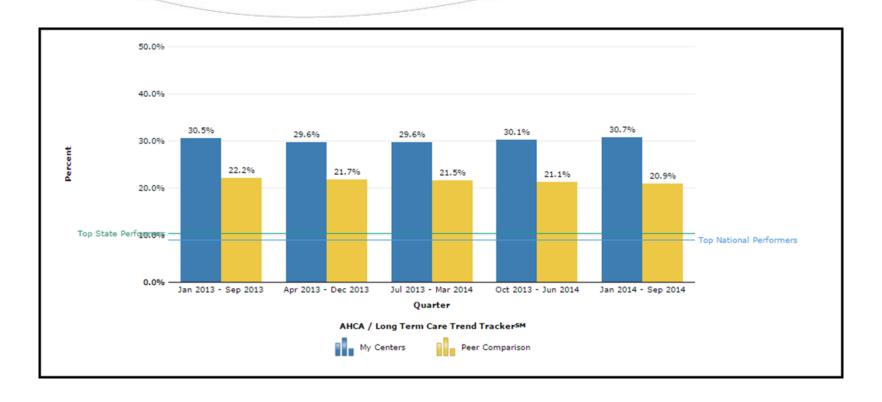


SS Stay Antipsychotic





LS Antipsychotic





Five Star QM Report

- ✓ Look at your current QM Five Star Rating
- ✓ Determine QMs to focus from the Five Star QM Report
- ✓ Look at your current resident population
- Enter your scores and see the affect on your overall QM score
- ✓ Members use this report to see if they will maintain their five star rating



Org : Center 09065 Geographic Market: City Peer Type: All peer types

	Current		Goal			
	Org	Percentile	Percentile	Score	Change	%Change
LS High Risk Pressure Ulcers	11.3%	20	40	8.9%	-2.4%	-21.2%
LS Pain (Adjusted)	13.6%	20	60	7.9%	-5.7%	-41.9%
LS ADL Decline	19.6%	40	40	23.1%	3.5%	17.9%
SS Pain	27.4%	40	40	28.2%	0.8%	2.9%
LS Antipsychotic	22.5%	40	40	26.8%	4.3%	19.1%
LS Catheter (Adjusted)	2.4%	60	60	3.2%	0.8%	33.3%
SS Antipsychotic	1.6%	60	60	2.3%	0.7%	43.7%
LS Physical Restraint	0.6%	60	60	1.9%	1.3%	216.7%
LS Falls with Injury	2.7%	60	60	3.4%	0.7%	25.9%
SS Pressure Ulcers New or Worsened (Adjusted)	0.4%	75	75	0.7%	0.3%	75.0%
LS UTI	2.1%	100	100	2.1%	0.0%	0.0%
Total Percentile Points (Current/Goal):		575	635			
Star Rating (Current/Goal):	**	***	***	**		

Data source: CMS Nursing Home Compare website www.medicare.gov, last updated: Mar 2015





Org : Center 09065 Geographic Market: City					
Peer Type: All peer types	Percentile	Score	Change	%Change	
	40	8.9%	-2.4%	-21.2%	%Change
LS High Risk Pressure Ulcers	60	7.9%	-5.7%	-41.9%	-21.2%
LS Pain (Adjusted)	40	23.1%	3.5%	17.9%	-41.9%
LS ADL Decline	40	28.2%	0.8%	2.9%	17.9%
SS Pain	40		4 20/	10.19/	2.9%
LS Antipsychotic	40	26.8%	4.3%	19.1%	19.1%
LS Catheter (Adjusted)	60	3.2%	0.8%	33.3%	33.3%
SS Antipsychotic	60	2.3%	0.7%	43.7%	43.7%
LS Physical Restraint	60	1.9%	1.3%	216.7%	216.7%
LS Falls with Injury	60	3.4%	0.7%	25.9%	25.9%
SS Pressure Ulcers New or Worsened (Adjusted)					75.0%
LS UTI	75	0.7%	0.3%	75.0%	0.0%
	100	2.1%	0.0%	0.0%	
Total Percentile Points (Current/Goal):					
Star Rating (Current/Goal):	635				
	***	**			
Data source: CMS N					d: Mar 2015
QM Star Rating Predictor: ✓				€RE	SET



Org : Center 09065 Geographic Market: City	Percentile	Score	Change	%Change	
Peer Type: All peer types	20	10.0%	-1.3%	-11.5%	_
	40	12.0%	-1.6%	-11.8%	Change
LS High Risk Pressure Ulcers	40	00.40	0.50/	47.00/	-11.5%
LS Pain (Adjusted)	40	23.1%	3.5%	17.9%	-11.8%
LS ADL Decline	40	28.2%	0.8%	2.9%	17.9%
SS Pain	40	26.8%	4.3%	19.1%	2.9%
LS Antipsychotic					19.1%
LS Catheter (Adjusted)	60	3.2%	0.8%	33.3%	33.3%
SS Antipsychotic	60	2.3%	0.7%	43.7%	43.7%
LS Physical Restraint	60	1.9%	1.3%	216.7%	216.7%
LS Falls with Injury	60	1.5%	1.376	210.770	25.9%
SS Pressure Ulcers New or Worsened (Adjust	60	3.4%	0.7%	25.9%	75.0%
LS UTI	75	0.7%	0.3%	75.0%	0.0%
Total Percentile Points (Current/Goal):	100	2.1%	0.0%	0.0%	
Star Rating (Current/Goal):					
Data source: C/	595				Mar 201
Data source: C/	**				wiai 201
QM Star Rating Predictor: ☑					Т

Goal



Risk Meetings

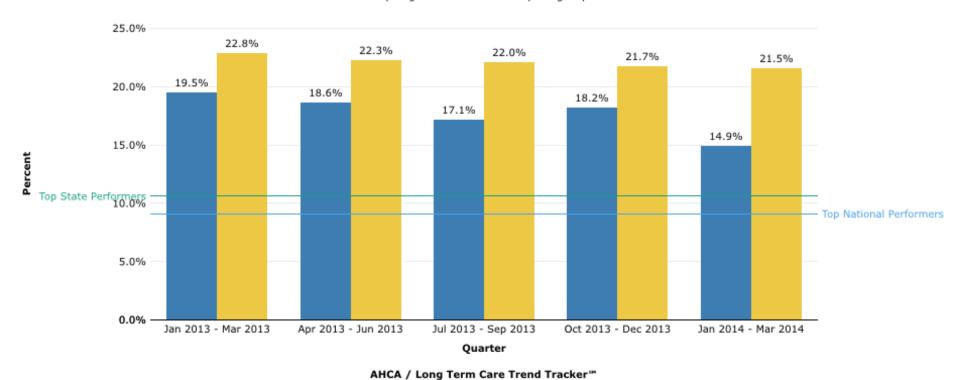
- ✓ Identify areas of greatest risk—
 - Use clinical systems
 - Review current 671 for comparison
 - Evaluate Trends from peers
- Review Trends with Medical Director and Consultant Pharmacist



Tracking Center Level Progress

Quality Measure (All) Report: LS Antipsychotic Medication - 1 Quarter View

Center chosen: Center 95225. Peer geography: States that match my centers. No peer type restriction. Centers from My Org are not included in peer group.



Peer Comparison

My Centers

FusionCharts XT Trial

671 and 672 Report

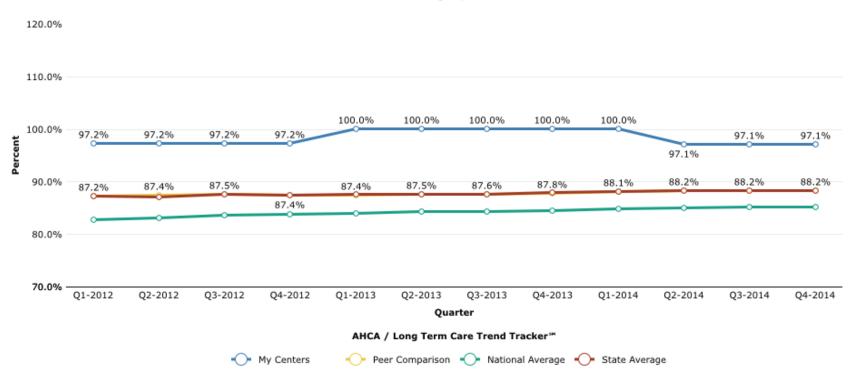
- ✓ Run your current 671 and 672 report
- ✓ Look at the Resident Characteristics and Staffing Reports
- ✓ Did anything change? Census change?
- ✓ If so why? Did your acuity go up? Did the type of residents you admit change?
- ✓ Did your peer groups change?
- ✓ Have staffing levels changed?



Sample Graph

CASPER Resident Report: 1+ Assist: Transferring

Center chosen: Center 95225. Peer geography: States that match my centers. No peer type restriction. Centers from My Org are not included in peer group.

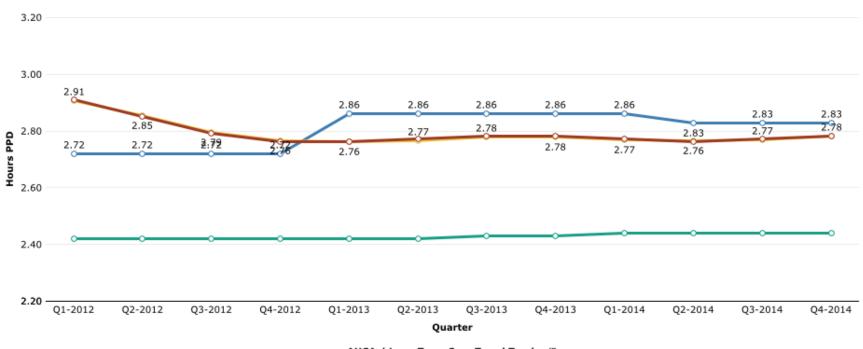




Sample Chart

CASPER Staffing Report: Total Aides Hours PPD

Center chosen: Center 95225. Peer geography: States that match my centers. No peer type restriction. Centers from My Org are not included in peer group.



AHCA / Long Term Care Trend Tracker™





Dashboard

- ✓ Color indicates performance trend
- ✓ AHCA Quality Initiative, Post-Acute, Staffing, Regulatory and Five Star
- ✓ Use for QA/PI and Board meetings
- Everyone has the same dashboard (based on user permissions)



Sample QI box

	My Org	Peers	
Risk Adjusted Rehospitalization	7 17.6%	18.0%	
Antipsychotic Use	7 23.0%	21.3%	
DCS Turnover	≥ 14.9%	25.7%	
	Quality Initiative		

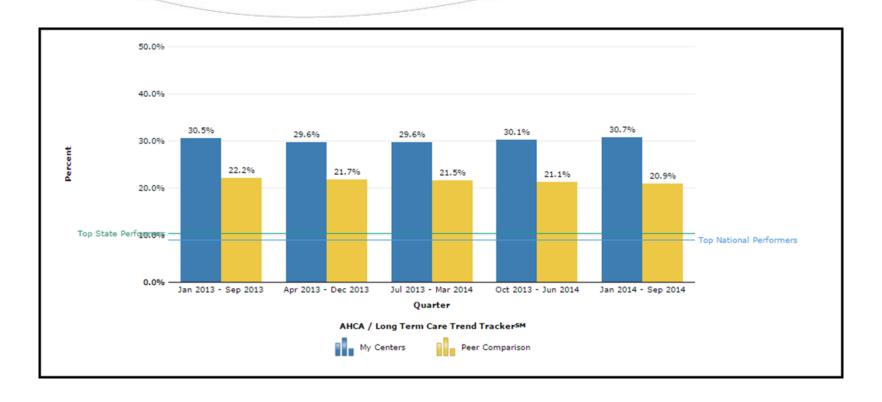


Dashboard and QAPI

- ✓ Member uses the dashboard to track performance over time
- ✓ Notices that Antipsychotic data has a "red arrow"
- Runs the QM report and data download
- ✓ Reviews Clinical tracking systems
- ✓ Determines action and follow --- Root Cause Analysis



LS Antipsychotic





Finding Percentiles

- ✓ Need to know the center percentile for rehospitalization
- ✓ Determine Ranking by selecting the more button
- ✓ Look at current practices to see what changes you need to make to get to the next percentile level



Percentile info

	Q1 2013	Q2 2013	Q3 2013	Q4 2013	Q1 2014
My Centers	18.9%	17.4%	19.0%	17.5%	17.59
Peers	20.8%	20.9%	20.6%	18.6%	18.59
Center Ranking					
Center State Ranking	38%	30%	37%	41%	429
Center National Ranking	61%	50%	63%	65%	669
National Comparison					
Top Performer (Nation)	10.8%	10.7%	10.7%	9.7%	9.79
90th Percentile (Nation)	24.3%	24.0%	23.9%	21.8%	21.69
75th Percentile (Nation)	20.9%	20.8%	20.7%	18.8%	18.69
50th Percentile (Nation)	17.5%	17.3%	17.3%	15.7%	15.59
25th Percentile (Nation)	14.0%	13.9%	13.9%	12.6%	12.59
10th Percentile (Nation)	10.7%	10.6%	10.6%	9.7%	9.69
State Comparison					
Top Performer (State)	13.5%	13.4%	13.0%	11.4%	11.69
90th Percentile (State)	28.5%	28.9%	28.2%	26.0%	25.69
75th Percentile (State)	25.0%	25.1%	24.6%	22.6%	21.69
50th Percentile (State)	20.8%	21.0%	20.2%	18.3%	18.69
25th Percentile (State)	17.2%	16.4%	16.6%	14.5%	14.59
10th Percentile (State)	13.9%	13.7%	12.8%	11.3%	11.49



LTCTT and Referral Sources

- ✓ Use the data in the to assist telling your story to the hospitals or referral sources:
 - Turnover and Retention
 - Staffing characteristics
 - Survey history
 - Resident characteristics
 - Medicare utilization



Summary of LTC Trend Tracker

- ✓ LTC Trend Tracker provides members with Clinical, Quality, 5-Star, Staffing and Financial Data
- ✓ *FREE* AHCA member service
- ✓ Use in QAPI, Marketing and discussions with hospitals.



National Patient Safety Organization for Assisted Living (PSO)

- ✓ NCAL's partnership with the New Jersey Hospital Association
- ✓ Collects data on:
 - hospital readmissions
 - off-label use of antipsychotics
 - medication errors
 - falls and fall assessments
 - pressure ulcers
 - pain management, and more

Contact:

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Summary

- ✓ You are already collecting data
- Referral Sources are making decisions based on your information
- ✓ Use LTC Trend Tracker as a resource



Contact Info

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