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Flex



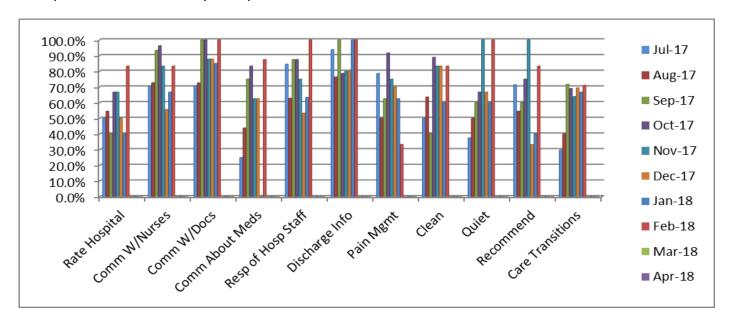




Welcome back to the Wyoming Flex *Quality Improvement Matters* newsletter! **CONGRATULATIONS!!!** Wyoming Critical Access Hospitals (CAHs) achieved 15 out of 15 CAHS for reporting MBQIP measures: EDTC, Inpatient, and Outpatient. The ability to use data to target areas for improvement requires the data being collected and reported. WE DID THIS!!! Keep up the great work!

Medicare Rural Hospital Flexibility Program (Flex)

How are SHIP Grant Funds Being Used? Hot Springs County Memorial Hospital (HSCMH) uses the vendor Press Ganey to support their HCAHPS surveys as well as ED-CAHPS surveys. They choose to do both because of higher emergency department (ED) volume and many ED patients are admitted so their care experience is reflected in HCAHPS scores. Below is a chart reflecting changes in their HCAHPS scores as well as a description of work underway to improve scores.



"We consistently have a small sample size which does make meaningful evaluation challenging however we continue to work to make improvements. We have continued to utilize "Quiet Zones" to decrease the noise level in our patient care areas and the "No Pass Zone" to ensure that all staff are empowered and expected to answer call lights if they are in the immediate area. During the current year, we consistently utilized leader rounding with patients to ensure that patient needs are met. In addition, the Environmental Staff instituted use of AIDET and Key Words at Key Times to ensure that the cleanliness of the patient's rooms met patient expectations. The monetary support we will receive via the SHIP grant is very helpful for our small Critical Access Hospital (CAH). On behalf of HSCMH, we thank you for partnering with us to support our community in the delivery of excellent healthcare."—Shelly Larson, CHFP

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Medicare Beneficiary Quality Improvement Project (MBQIP)

MBQIP—HCAHPS Update: Why HCAHPS Survey Response Rates Matter. The Wyoming Medicare Rural



Hospital Flexibility (Flex) Program tracks and reports CAHs' Hospital Consumer Assessment of Healthcare Provider and Systems (HCAHPS) survey findings to support them in HCAHPS improvement. Most recently, we have added survey response rates to our data tracking. According to NRC Health, the national HCAHPS survey response rate is 29%. For 4Q17-3Q18,

Wyoming CAHs' survey response rate was 26% ranging from a low of 17% to a high of 53% across all CAHs. So, why does response rate matter? Because patients want to tell us about their care experience and we want to provide the best care experience possible. In addition, recent studies have shown higher response rates positively impact scores. Below are evidence-based recommendations from the Hospital Quality Institute to improve response rates:

- Timing: Patients surveyed sooner after discharge are more likely to respond and give higher scores. Optimal practice involves hospitals sending daily information on eligible discharges to their HCAHPS vendors.
- Language: Limited-English proficient (LEP) patients often do not respond to surveys because they are not administered in their preferred language. Spanish-speaking patients as a group tend to contribute higher scores on the HCAHPS survey yet are significantly less likely to respond. Hospitals should provide their vendors with information on the preferred language of patients eligible for discharge and ensure that vendors in turn administer the survey in the patients' preferred languages

Survey Response Rates By CAHs Around the State



- Convey the importance of giving feedback: Hospitals should consider developing an awareness campaign to give patients clear messages about why it is important to give feedback by completing the HCAHPS survey.
- **Survey method**: Surveys administered via telephone tend to result in higher response rates, particularly among younger patients, LEP patients and populations with lower levels of literacy. Many patients no longer have landline phones, making it essential for hospitals to capture their mobile phone numbers.
- Optimizing the vendor relationship: Most HCAHPS survey vendors can recommend and deploy effective
 solutions to increase survey response rates, many at low additional costs. Hospitals, particularly those
 with response rates lower than 25 percent, are encouraged to engage their vendors and discuss options
 for achieving higher response rates. This may include setting a minimum response rate threshold as a
 contractual performance requirement.
- **Sample size**: In addition to improving their response rates, hospitals are encouraged to examine the adequacy of their sample size. Surveying the entire census of patients eligible for discharge is the preferred method, which tends to result in more reliable HCAHPS data. This is particularly important for smaller-size hospitals.
- Source: https://www.calhospital.org/cha-news-article/analysis-finds-hcahps-response-rates-matter

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Peer-to-Peer Sharing.

Conference takeaways. Hear from your peers and learn about their experiences and lessons learned through participating in Flex funded conferences, workshops, and trainings. If you would like more information, please contact Kyle Cameron.

The WyPCA Conference—Star Valley. "During the recent conference in Casper, information was presented on the opioid crises in Wyoming. The speaker discussed information from the "Telling the Story of Opioid Use in Wyoming" report. Overall, the data went according to

my expectation. Wyoming is not experiencing the epidemic like the rest of the nation. This confirmed to me that we live in a fairly safe, sheltered place, for which I am grateful. Then the data about prescribing habits was presented. I began to set-up and take note. "One county in Wyoming prescribes more opioids than people in the county." What? That can't be right. Then I saw where my county fell on the scale. Wow! We need to look into this! Since returning from the conference, I have shared the research document with others throughout the organization. We are working on ways to change our prescribing habits. I encourage everyone to get a copy of the 'Telling the Story of Opioid Use in Wyoming' report from www.uwyo.edu/wysac. With review and discussion, it may help keep your community safer from the crises gripping the nation." Thank you—Amy Johnson, QI Director

The 2018 Immunization Conference—Powell Valley. "The conference started this year on updating the rules and regulations changes, with Mandatory entering of vaccines of all ages into the Wyoming State Registry. The two new required vaccines for pre-school and licensed day-cares of rotavirus vaccines, and 4 doses of pneumococcal for school age children. We also learned more useful information about adolescent vaccines meningococcal ACWY with doses at 11 years of age and 16 for a booster dose. MenB giving 2 doses at 16 years of age and booster 12 months later. We also learned more about HPV9, how important it is in prevention of several types of cancer, to prevent before adolescents are exposed to the virus, higher immunity rate when given at ages 11 years to 14 years so only 2 doses are required. Increase noted in oropharyngeal cancers from HPV as well as cancers such as anal, penal, cervical and genital warts. Does not require direct sexual intercourse to spread virus. We got to meet Tamika, a cervical cancer survivor, who is telling her story of HPV to help encourage people to have their children vaccinated. It was a very well, fast two days of learning." Thank you—Becky LeMasters, LPN

The 16th Annual Western Flex Conference—Star Valley. "The conference was filled with a lot of information that helps in making strategic decisions. I always enjoy the policy and legislative updates. The sessions that review policy and legislation help keep me informed of all the issues currently facing healthcare today. Sometimes it is hard to keep up with it all and attending a conference now and again is a good place to bring it all together. It's also of great importance to hear the questions others may have because they are facing the same challenges and how they are addressing them. It was good to be made aware of resources available to rural healthcare to help fight against the crisis that face us such as opioid abuse and mental health. The statistical information that is presented always brings it back to home. I like how this conference addresses CAH and rural issues directly. The review of payment models is always good and where we are at with those. The financial statistics as presented by western CAH hospitals I have always found useful. I'm able to compare our organization with others in our region and similar size and see where we are succeeding and where we need improvement. One of the most beneficial things from the conference is the networking with others. This is such a great opportunity to meet new people and reacquaint with colleagues and compare challenges and solutions." Thank you—Chad Turner, CFO

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The 2018 Immunization Conference—Powell Valley. "The conference has grown every year and the knowledge I gained was invaluable. There was a speaker who shared her personal experience with cervical cancer as a result of the HPV virus and was able to discuss the devastating effects of being told she would need a radical hysterectomy at the age of 25. It was an emotional story that brought home the need to educate the public about the importance of the HPV vaccine for our children. There were sessions that discussed vaccine hesitancy and how to engage our patients in those important conversation with concrete tools. It was also clear how important the state is taking our vaccination rates and the importance of Wyoming Immunization Registry (WyIR. It was reported that as of February, 2018, all providers that give vaccinations are to be reporting in the WyIR. This extends further than those that receive Vaccines for Children, but for any vaccinations, adult or otherwise. As an Infection Preventionist and employee health nurse the conference provided some great information to bring back to my facility. I am so appreciative for the Flex grant funding that allowed me to attend." Thank you—Michelle Hoyt, RN, BSN

National Academy of Ambulance Compliance (NAAC)—Memorial Hospital of Converse County. "I recently had the opportunity to get my certification in ambulance coding through the NACC. During the six weeks I was able to learn how much Medicare plays a part in the ambulance world. For the past four years, I have been billing for our ambulance and before I did not know anything about Medicare. Once I finished my certification I understood more about Medicare i.e. how and why they pay what they do and the rules that come along with it. I think it is important for hospitals to have people trained the right way to understand the coding and billing for ambulances and make sure that we are getting the correct reimbursement from payers. I just want to thank you for giving me the opportunity to be able to learn more about ambulance coding and billing." Thank you—Michelle Ibarra

Flex Program Calendar

Educational Webinars—2018. Below is a list of upcoming events related to education and/or training for the Wyoming Flex Program Activities.



- ◆ QI Roundtable: July 12th @ 10 am—11 am
- ◆ QI Roundtable: August 9th @ 10 am—11 am
- ◆ The 2018 Wyoming Quality Conference: August 8th & 9th in Cheyenne, WY.

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