



Defining Excellence

Program Purpose:

Defining Excellence will identify suitable measures, as well as define and benchmark program performance for all long term care settings in Michigan. These data gathering and analysis activities lay the foundation for understanding performance, identifying global opportunities, identifying best practices and promoting improvement. In addition, performance information can lay the groundwork for thinking about organizational future, core products, and capabilities.

Overall Goals

- Foster the use of documented evidence in the evaluation of quality and effectiveness as related to survey criteria, Michigan state policy and federal regulation, as well as development of benchmarks, indicators, and measures.
- Describe a multi-dimensional picture of outcomes and effectiveness for MAHSA member programs, not relying solely on a select number of clinical indicators or federally driven survey criteria.
- Assist in making MAHSA member aging services and nursing home care at the level of the very best in the nation

Objectives

- Develop, maintain, and analyze Michigan and national data on an ongoing basis
- Leverage current state and national initiatives to assist in meeting MAHSA member performance goals
- Accurately benchmark member performance and identify best practice
- Identify the current state of performance process capability by members
- Foster use of documented evidence and data for all evaluations of long term care quality and effectiveness
- Develop focused and effective education and technical assistance

Structure

Defining Excellence works to access the very best in performance thinking for Michigan long term care. A small, highly-involved Clinical Workgroup will drive and champion the initiative. The proposed Clinical Workgroup will include MAHSA members and other invited stakeholders.

Strategy

MAHSA will utilize a continuing improvement strategy to identify, understand, address, and evaluate issues that affect member performance. A technical assistance and education plan will be developed on an annual basis to address these challenging issues. In addition, as part of the overall MAHSA strategic and operational planning processes being developed, member quality and performance outcomes will be considered a major factor in evaluation of MAHSA overall effectiveness. Project outcomes will be reviewed, evaluated, and reported annually to Clinical Workgroup who will make recommendations

Defining Excellence most importantly will allow identification of best member practice and high performers. Best practices will be identified and shared as they emerge during the improvement process through conferences, technical assistance projects, and networking.

General Process

The core of MAHSA's Defining Excellence for Michigan Project is information. We are working with My InnerView to help provide standardized customer satisfaction, employee satisfaction and other performance measures to those members who wish to be program Early Adopters. Early Adopters will be focusing on skilled nursing home data, but there are plans to extend across the entire long term care continuum of programs in 2008.

Initially using nursing home data, members will input specific information into the web-based electronic My InnerView system on a monthly basis. This data will include measures related to clinical outcomes, state survey information, annual (and short term resident) customer satisfaction survey information about quality of life, annual employee satisfaction data, and defined custom metrics. Universal custom metrics will be developed by the Clinical Workgroup; however, some individual facility metrics may be developed as well.

Information should be entered into the My InnerView web-based system by the 10th calendar day of each month for the preceding month. Members will then have the opportunity to pull reports that reviews their performance against several difference comparison groups: peer clusters, MAHSA members, My InnerView users in Michigan and nationally.

Quarterly data will be summarized and submitted to the Clinical Workgroup for review and recommendations. A report with recommendations will be submitted to the Clinical Workgroup quarterly as well. The Clinical Workgroup will advise on the direction of performance monitoring, technical assistance and improvement activities, education

and training, and other pertinent issues. A Clinical Workgroup report will be submitted to the Board outlining recommendations annually. The report will also inform the MAHSA Annual Education and Training Plan, Public Policy Initiatives, and MAHSA Annual Long Term Care Report as pertinent.

The Clinical Workgroup will analyze trends and develop recommendations to validate the core issues around member performance. Non-clinical issues that appear pertinent will be forwarded to work groups developed for a given topic when needed. The Clinical Workgroup will make recommendations about priorities for education, training, and technical assistance products. Summary findings will be integrated into MAHSA's Annual Performance Report as indicated. Reports will be available to members on the MAHSA website and, when appropriate may be published as well.

Depending on the nature of member issues, MAHSA may develop a performance improvement initiative to address educational, training, and other needs related to process improvement structures and practices.

The Clinical Workgroup and Clinical Workgroup will evaluate the high level outcomes for clinical and other performance. Reports will benchmark member performance as possible against Centers for Medicare and Medicaid GPRG goals, Advancing Excellence in Michigan goals, and other targets as appropriate.

Benefits

- 1) Individual users can benchmark performance against MAHSA members, state, and national providers monthly on a wide range of performance benchmarks
- 2) MAHSA members can use more broad and integrated measures of performance to describe their programs, beyond survey and MDS data.
- 3) MAHSA members can also identify and compare measures that we know are more relevant indicators of performance, such as facility-acquired pressure sores and measures that include only residents continuously under the home's care for measurements of change over time.
- 4) Better understanding of the range of MAHSA member performance and best practices can quickly identify educational and networking opportunities.
- 5) Consistent tools for consumer and employee satisfaction make Clinical easier.
- 6) MAHSA will be able to publish performance data that are more meaningful and valid measures of quality to consumers and families.

- 7) Providers will be well positioned for any pay for performance initiatives.
- 8) MAHSA can identify and focus on best practices.
- 9) MAHSA can better continue its discussions with CMS regarding the appropriateness of some of the NHQIs.
- 10) Specific data gathering and analysis will position members for any pay for performance initiatives.

The My InnerView Package

My InnerView offers evidence-based management tools to enable long-term care leaders to directly enhance quality of life and quality of care for their residents, families and staff, while achieving financial success.

The My InnerView Quality Profile presents the essential areas of performance in a usable format, identifying organizational benchmarks with peers, state, and national providers. The Quality Profile includes organization-submitted information about clinical outcomes as well as Survey and Certification information. MAHSA, with a group of member clinicians and Early Adopters, will identify an additional 30 metrics that will more accurately measure member performance. Consistent reporting of these metrics across MAHSA members will enhance our ability to document and publish the non-profit difference.

Resident satisfaction surveys will be conducted and summarized by My InnerView annually, although some facilities may opt to do resident satisfaction shortly after discharge for short term residents. Resident satisfaction surveys include relevant quality of life factors that are critical for this population. Employee satisfaction surveys will also be conducted and summarized by My InnerView annually. The first national report on employee satisfaction was just completed in 2006, and can be viewed from www.myinnerview.com.

Organizations will input their data by the tenth day of each month for activities from the preceding month. Time for data input is considered minimal, although it is expected that organizations will have ready access to the required data. Reports are generated by the organization from website. My InnerView then provides unlimited access to its website to view data, Clinical, surveys, tools, as well as online education and training materials.

Aggregate reports, and facility level data, will be accessed by MAHSA staff in order to evaluate and identify benchmarks and educational opportunities. My InnerView also has a series of tools to assist providers in looking at internal opportunities. You might want to peruse their website listed above to get a sense of their products.

What Do MAHSA Members Get?

Defining Excellence will provide to MAHSA members a coordinated program that will provide:

- A consistent method of integrating high level performance measures within a single report system
- Access to risk management tools specifically related to My InnerView benchmarks
- Ability to review individual performance against peer clusters and other groups
- Improved MAHSA education and member service planning based on pertinent member data
- Improved MAHSA ability to identify and publish the not-for-profit difference

There can be no compromise on quality.
MAHSA aims to assist members in making
Michigan long term care and aging services
The best in the nation.....

