The STATE of Texas

Current Data

2023 FORHP FLEX Program Critical Access Hospital Quality Improvement Bootcamp

Texas Hospital Association Foundation

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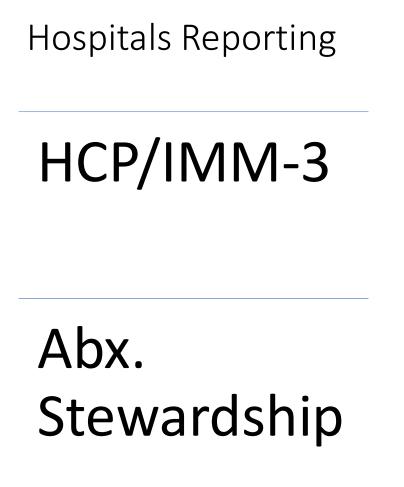
Current Medicare Beneficiary Quality Improvement Project (MBQIP) Measures

MBQIP measures are divided into two categories:

- Core MBQIP Measures are those that all state Flex Programs are expected to support. Reporting on these measures contributes towards a CAH's Flex eligibility requirements.
- Additional MBQIP Measures are those that state Flex Programs can elect to support in addition to the Core measures, particularly in alignment with other partners
 or initiatives. While these measures are also rural relevant, they may not be as widely applicable across all CAHs. The MBQIP Measures resource includes a list of
 potential additional measures, but that list is not meant to be exhaustive. Flex programs can propose to work on other quality improvement topics within the four
 MBQIP domains. If there is not a nationally standardized or standardly reported measure currently available, Flex programs can propose a data collection
 mechanism.

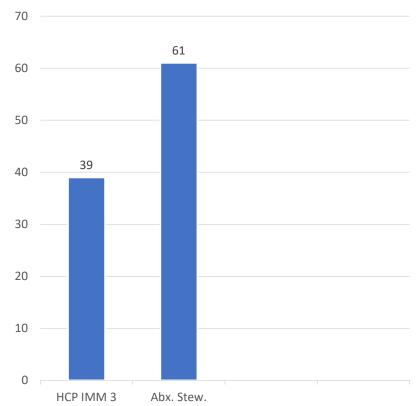
Core MBQIP Measures										
Patient Safety/Inpatient	Patient Engagement	Care Transitions	Outpatient							
HCP/IMM-3 (formerly OP-27): Influenza Vaccination Coverage Among Healthcare Personnel (HCP) Antibiotic Stewardship: Measured via Center for Disease Control National Healthcare Safety Network (CDC NHSN) Annual Facility Survey	Patient Engagement Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics: Communication with Doctors Communication with Nurses Responsiveness of Hospital Staff Communication about Medicines Discharge Information Cleanliness of the Hospital Environment Quietness of the Hospital Environment Transition of Care The survey also includes screener questions and demographic items. The survey is 29 questions in length.	Care Transitions Emergency Department Transfer Communication (EDTC) 1 composite; 8 elements • All EDTC Composite • Home Medications • Allergies and/or Reactions • Medications Administered in ED • ED provider Note • Mental Status/Orientation Assessment • Reason for Transfer and/or Plan of Care • Tests and/or Procedures Performed • Test and/or Procedure Results	AMI: • OP-2: Fibrinolytic Therapy Received within 30 minutes • OP-3: Median Time to Transfer to another Facility for Acute Coronary Intervention ED Throughput • OP-18: Median Time from ED Arrival to ED Departure for <i>Discharged</i> ED Patients • OP-22: Patient Left Without Being Seen							

Influenza and Antibiotic Stewardship



88 Critical Access Hospitals in Texas

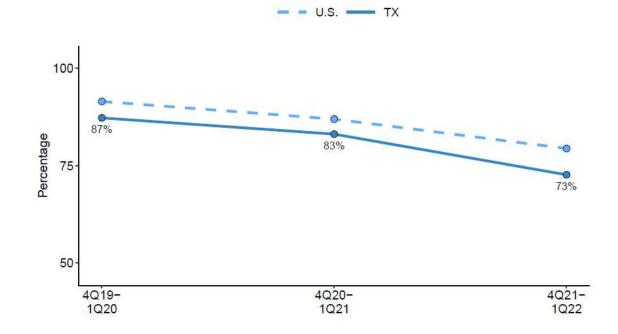
1Qtr22 CAHs Reporting



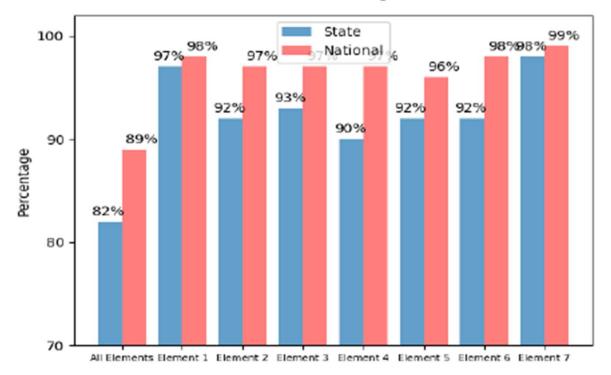
State-Level Patient Safety/Inpatient and Outpatient MBQIP Core Measures Report Quarter 2 - 2022

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Figure 4. HCP/IMM-3 Trends in Texas and All CAHs Nationally Healthcare workers given influenza vaccination



Current Survey Year



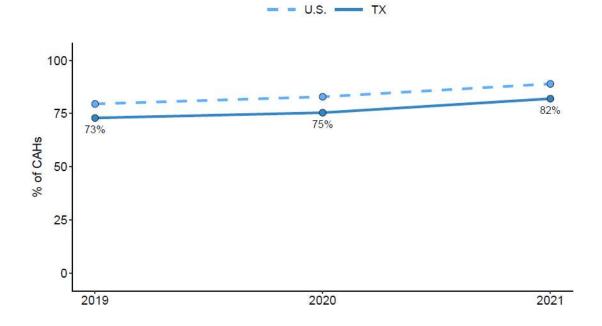
Outcomes Abx. Stewardship-Annual

Only 61 hospitals reporting

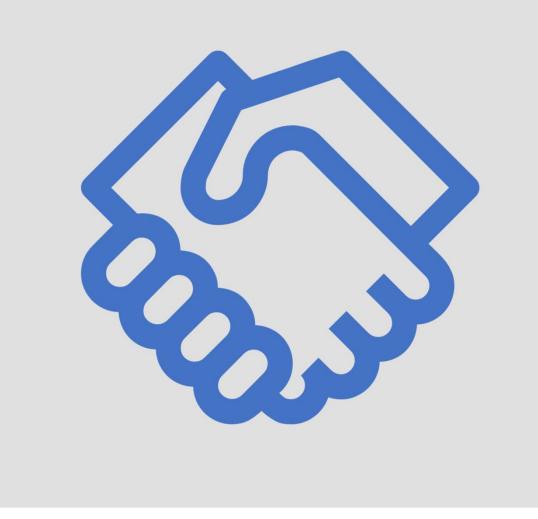
State-Level Patient Safety/Inpatient and Outpatient MBQIP Core Measures Report Quarter 2 - 2022

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Figure 5. Antibiotic Stewardship Trends in Texas and All CAHs Nationally CAHs fulfilling the seven antibiotic stewardship core elements



Texas

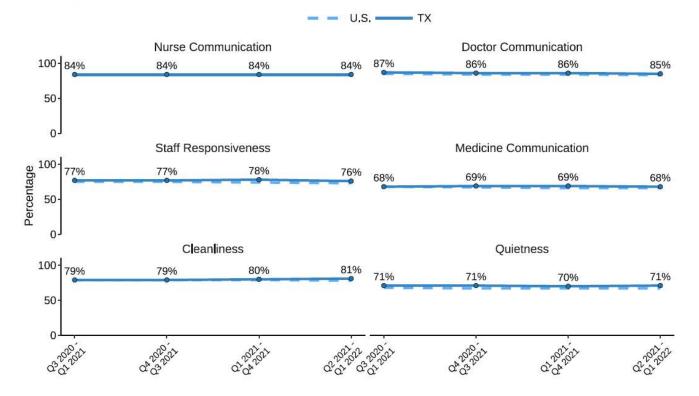


Pt. Engagement

HCAHPS-75 CAHs reporting

Most Current Data-1Qtr22 State-Level Patient Experience Core Measures/HCAHPS Report Current Reporting Period: Q2 2021 - Q1 2022

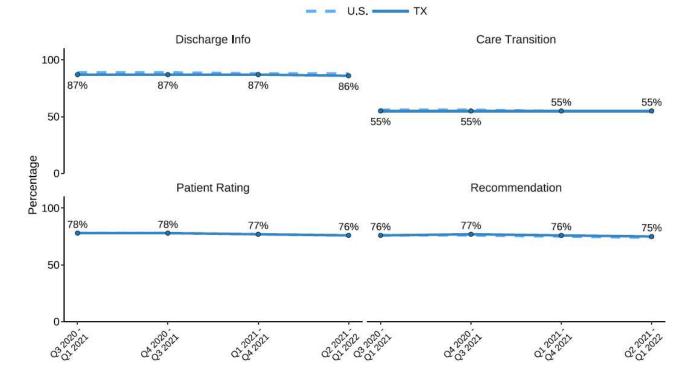
HCAHPS Trends in Texas and All CAHs Nationally



Texas

State-Level Patient Experience Core Measures/HCAHPS Report Current Reporting Period: Q2 2021 - Q1 2022

HCAHPS Trends in Texas and All CAHs Nationally (continued)



Texas

Care Transitions

EDTC-61 CAHs reporting Most Current Data-3Qtr22

Care Transitions Outcomes

Quarter 3 - 2022

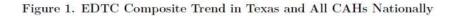
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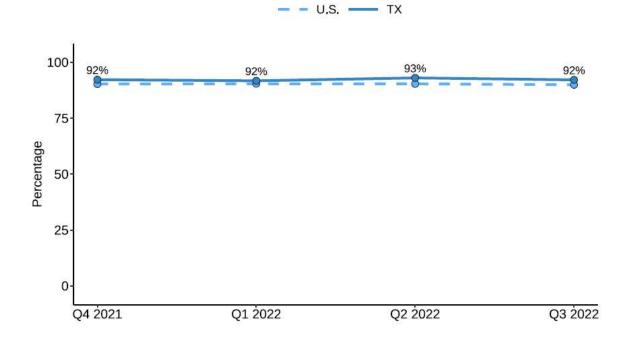
		Your State's Performance by Quarter				State Current Quarter			National Current Quarter		Bench- mark	
	MBQIP Quality Measure	Q4 2021	Q1 2022	Q2 2022	Q3 2022	Aggregate for All Four Quarters	# CAHs Report- ing	Average Current Quarter	90th Per- centile	# CAHs Report- ing	Average Current Quarter	Average Current Quarter
EDTC-All	Composite	92%	92%	93%	92%	92%	63	92%	100%	1,175	90%	100%
	Home Medications	94%	94%	96%	95%	95%	63	95%	100%	1,175	94%	100%
	Allergies and/or Reactions	96%	97%	98%	98%	97%	63	98%	100%	1,175	96%	100%
	Medications Administered in ED	97%	98%	98%	98%	98%	63	98%	100%	1,175	96%	100%
	ED Provider Note	96%	97%	98%	98%	97%	63	98%	100%	1,175	95%	100%
	Mental Status/Orientation Assessment	97%	97%	98%	98%	97%	63	98%	100%	1,175	96%	100%
	Reason for Transfer and/or Plan of Care	98%	98%	99%	99%	99%	63	99%	100%	1,175	97%	100%
	Tests and/or Procedures Performed	98%	98%	99%	99%	99%	63	99%	100%	1,175	96%	100%
	Tests and/or Procedures Results	98%	98%	99%	99%	98%	63	99%	100%	1,175	96%	100%
	Total Medical Records Reviewed (N)	N=2,158	N=2,163	N=2,319	N=2,394	N=9,034	N=2,394	4 N=49,873				

"N/A" indicates that no CAH data were submitted for this state.

State-Level Care Transition Core Measures/EDTC Report Quarter 3 - 2022

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Outpatient Metrics

Most Current Data-2Qtr22

State-Level Patient Safety/Inpatient and Outpatient MBQIP Core Measures Report Quarter 2 - 2022

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Figure 1. OP-2 Trends in Texas and All CAHs Nationally Fibrinolytic therapy received within 30 minutes



State-Level Patient Safety/Inpatient and Outpatient MBQIP Core Measures Report Quarter 2 - 2022

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Figure 2. OP-3b Trends in Texas and All CAHs Nationally Median time to transfer to another facility - acute coronary intervention (lower is better)



State-Level Patient Safety/Inpatient and Outpatient MBQIP Core Measures Report Quarter 2 - 2022

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Figure 3. OP-18b Trends in Texas and All CAHs Nationally Median time from ED arrival to ED departure for discharged patients (lower is better)



Measures Under Consideration

Measures Under Consideration

- Antimicrobial Use and Resistance (AUR) Options
- Electronic Clinical Quality Measure (eCQM) Outpatient
 - ST-Segment Elevation Myocardial Infarction (STEMI) (OP-40)
- Electronic Clinical Quality Measures (eCQMs) Inpatient
 - o Global Malnutrition Composite Score (GMCS)
 - <u>Safe Use of Opioids Concurrent Prescribing (Safe Use of Opioids)</u>
 - Venous Thromboembolism Prophylaxis (VTE-1)
- Hospital Commitment to Health Equity
- Hybrid Hospital-Wide All Cause Readmissions (Hybrid HWR)
- <u>Screening for Social Drivers of Health</u>
- <u>Screen Positive for Social Drivers of Health</u>
- <u>Sepsis (SEP-1)</u>

Questions???