

Florida Hospital Wauchula

**Our Critical
Access Quality
Challenge**



Florida Hospital Wauchula

- ▶ **Small community hospital in central Florida**
- ▶ **First designated Critical Access Hospital in Florida in 2000**
- ▶ **First hospital to be accredited by The Joint Commission as a Critical Access Hospital in Florida.**
- ▶ **13,000 ER visits per year**
- ▶ **Hospitalist program started in 2004**
- ▶ **Electronic medical record – 2006**
- ▶ **No Wait ER – 2010**
- ▶ **CPOE – September 2010**

Florida Hospital Wauchula

Our Quality Journey

**Various Programs were implemented
Done by the Director of PI and a few
others**

**Discussed at PI Council (a few Directors
and VPs)**

Was there improvement?

Call to Change

The bar wasn't moving.
Nothing was changing.
Could we keep calling it
improvement?

Asking the hard questions

Is our program working?

What needs to change?

Are we ready to change?

Are the right persons involved?

How will we handle feedback?



But we're different!

The number challenge is very real

Small town word-of-mouth is very real

If we don't do it perfectly, everyone will know

**The number is not a
number ..**

It is a person



Our Reportable Data includes

- ▶ Abstracted Data
 - Heart Failure
 - Pneumonia
 - Heart Attack/Chest Pain: Inpatient & Outpatient
 - Stroke
- ▶ HCAHPS
- ▶ Administrative Data collected and reported by or to CMS
 - Readmissions
 - Mortality
 - Outpatient Imaging
 - Hospital Acquired Conditions
 - AHRQ Patient Safety Indicators
 - AHRQ Inpatient Quality Indicators
 - Meaningful Use Performance
- ▶ Projects that are not used for our patient population
 - Children's Asthma
 - Surgical Care Improvement

Pneumonia Process of Care Measures

Pneumonia is a serious lung infection that causes difficulty breathing, fever, cough and fatigue. These measures show some of the recommended treatments for pneumonia. [Read more information about pneumonia care.](#) [Learn why Pneumonia Process of Care Measures are Important.](#)

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	<p>FLORIDA HOSPITAL WAUCHULA 222 W. CARLTON RD WAUCHULA, FL 33673 (888) 773-3101</p> <p>Critical Access 26.7 miles</p> <p>Map & Directions </p> <p>Add To My Favorites </p>
Pneumonia Patients Assessed and Given Pneumococcal Vaccination	100% ¹
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotic	100% ¹
Pneumonia Patients Given Smoking Cessation Advice/Counseling	100% ¹
Pneumonia Patients Given Initial Antibiotic(s) within 8 Hours After Arrival	100% ¹
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	100% ¹
Pneumonia Patients Assessed and Given Influenza Vaccination	88% ¹

¹ The number of cases is too small to be sure how well a hospital is performing.

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Critical Access
 26.7 miles

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Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital (a lower number of minutes is better)

70 Minutes ^{1, 2}

Average number of minutes before outpatients with chest pain or possible heart attack got an ECG (a lower number of minutes is better)

5 Minutes ²

Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival (higher numbers are better)

0 patients ^{2, 7}

Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival (higher numbers are better)

91% ²

Heart Attack Patients Given Aspirin at Arrival

100% ^{1, 2}

Heart Attack Patients Given Aspirin at Discharge

100% ^{1, 2}

Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)

100% ^{1, 2}

Heart Attack Patients Given Smoking Cessation Advice/Counseling

0 patients ^{2, 7}

Heart Attack Patients Given Beta Blocker at Discharge

100% ^{1, 2}

Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival

0 patients ^{2, 7}

Heart Attack Patients Given PCI Within 90 Minutes Of Arrival

Not Available ⁵

Heart Failure Process of Care Measures

Heart failure is a weakening of the heart's pumping power. With heart failure, your body doesn't get enough oxygen and nutrients to meet its needs. These measures allow some of the process of care provided for most adults with heart failure. [Read more information about heart failure. Learn why Heart Failure Process of Care Measures are Important.](#)

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	<p>FLORIDA HOSPITAL WAUCHULA 533 W CARLTON RD WAUCHULA, FL 33973 (863) 773-3101</p> <p>Critical Access 24.7 miles</p> <p>Map & Directions </p> <p>Add To My Favorites </p>
Heart Failure Patients Given Discharge Instructions	50% ^{1,2}
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	100% ^{1,2}
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	0 patients ^{2,3}
Heart Failure Patients Given Smoking Cessation Advice/Counseling	0 patients ^{2,3}

¹ No patients met the criteria for inclusion in the measure calculation.

² The number of cases is too small to be sure how well a hospital is performing.

³ Data was collected during a shorter time period (fewer quarters) than the maximum possible time for this measure (One quarter equals three months.)

Heart Failure Process of Care Measures

Heart failure is a weakening of the heart's pumping power. With heart failure, your body doesn't get enough oxygen and nutrients to meet its needs. These measures allow some of the process of care provided for most adults with heart failure. [Read more information about heart failure.](#) [Learn why Heart Failure Process of Care Measures are Important.](#)

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i The number of cases is too small (fewer than 25) to reliably tell how well the hospital is performing. [Click here for more information.](#)

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Heart Failure Patients Given Smoking Cessation Counseling	0 patients ^{1,2}

So why do this?

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Comparing Outcomes between a C.A.H. and a Tertiary Center



It's what you do with the data that matters

Identify improvement opportunities

Establish accountability

Provide feedback



National Quality Measures & Public Reporting of Data

PROS

- ▶ Transparency
 - Help build community confidence in the CAH
- ▶ Best Practice
 - Allows benchmarking against best performers
- ▶ Motivation
 - Executives
 - Medical Staff
 - Staff

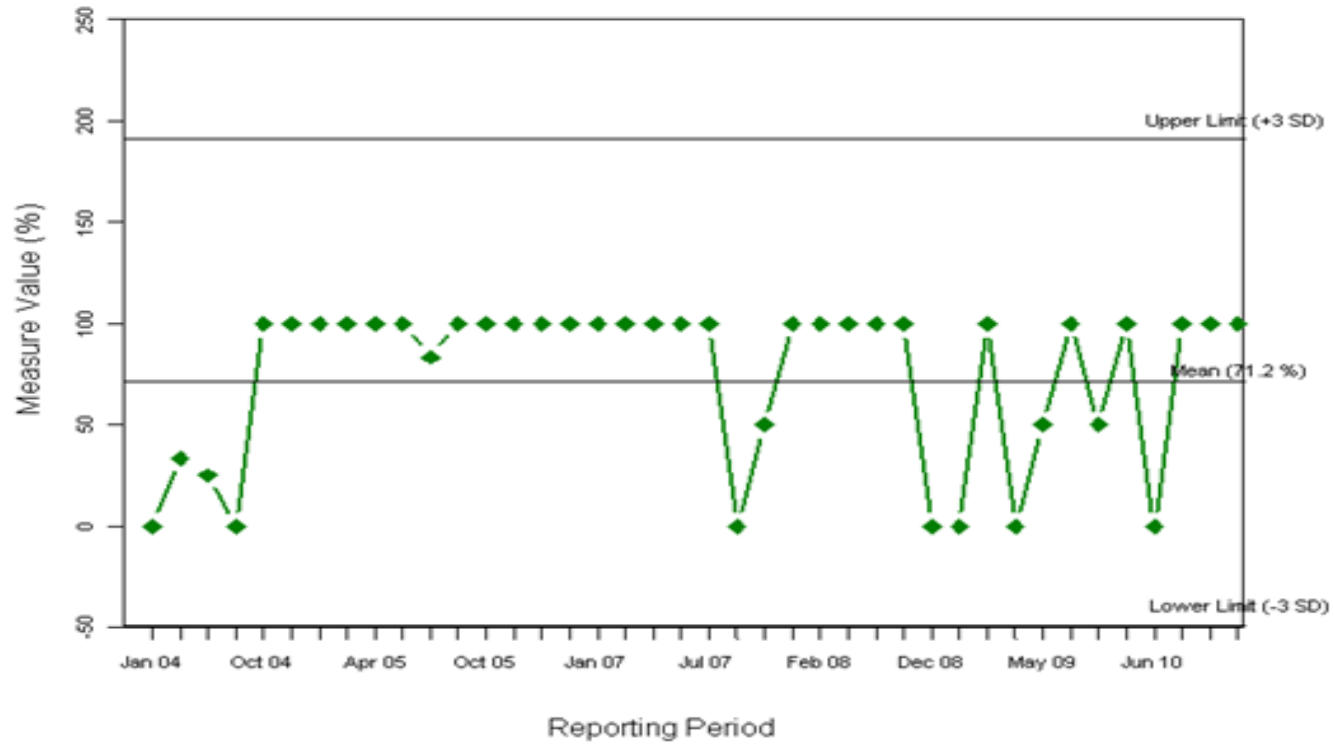
CONS

- ▶ Doesn't provide measures for Rehab patients
 - However, improvements do cross over to this population
- ▶ Statistical Relevance
 - Hard to get a significant p-value with small sample size
- ▶ Utilization of limited resources
 - Can be time consuming
 - Need trained staff to collect data

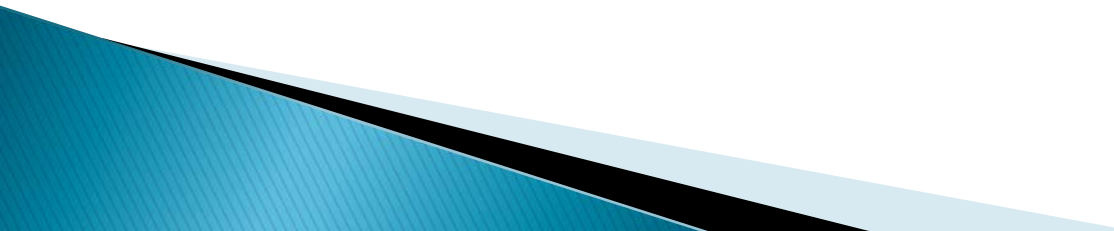
Run Time Chart for Discharge Instructions (HF-1)

Reporting Period From: 01/2004 To: 12/2010
Records for Analysis : Only completed records

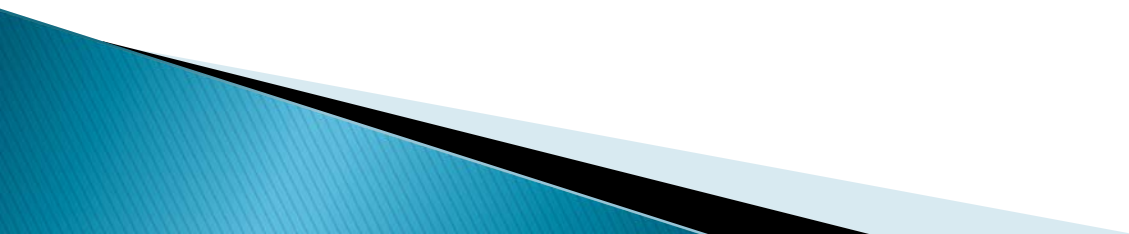
Sample Size = 115; Completed Sampled Cases = 115



Let's do something different -

- ▶ Team leader – staff closest to the issue
 - ▶ Members – those who administer the measures
 - ▶ Facilitator – PI Director
 - ▶ Physician advisor – has to be onboard with changes needed
 - ▶ Executive Champion
- 

Rapid Cycle Improvement



A select topic - goal

The right team

Measurements

Successes

Time frame

And

**We post the current
scores in our
hallways!**



Improvement Activities

- ▶ Performance is monitored routinely
- ▶ Each outlier is reviewed to identify source of defect
- ▶ Information is analyzed to determine plan of action
 - Process
 - Why did the defect occur
 - Did the system work as expected
 - Does the process need to be changed
 - People
 - Trend among individual, role, or location
 - Is training effective?
 - Is this a performance issue?

Feedback

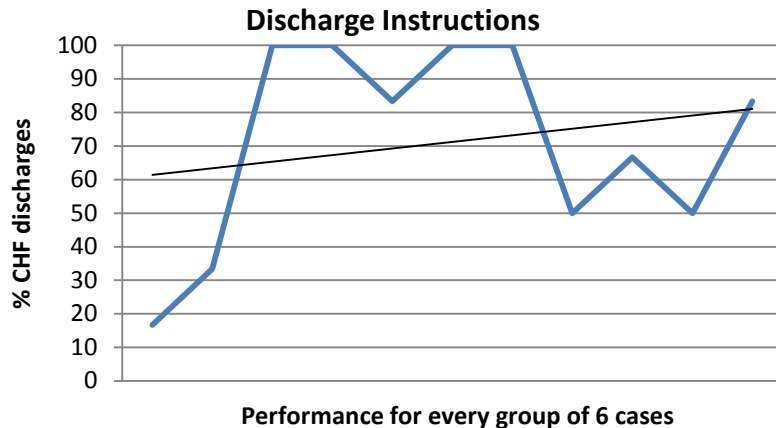
▶ Recognize Improvement Efforts and Celebrate Successes

- Improvement teams report (both successes and failures) to the Quality Committee of the Governing Board and Division Leadership meetings
- Team members are recognized with a Team Pin to wear

▶ Recognize and intervene for degradation of performance

- Changes in performance triggers reviews to identify cause of variation and initiate additional changes as needed

Options for Analyzing Small Sample Sizes

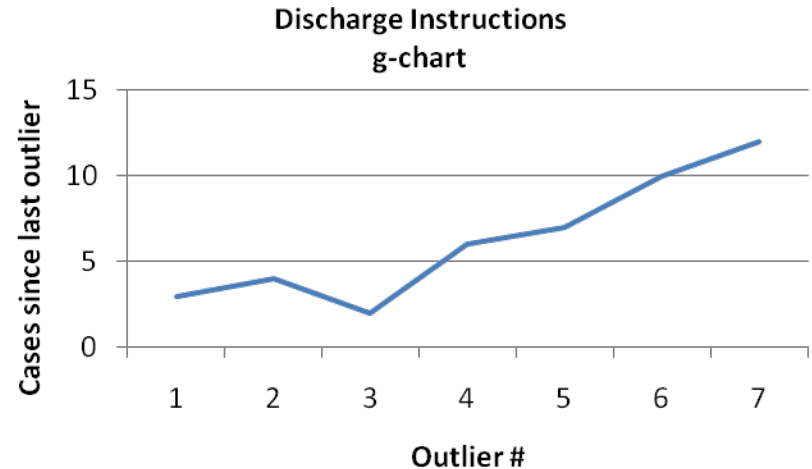


Modify the p-chart or u-chart frequency

- Expand the time from monthly to quarterly or semiannually
- Define the groups by the number of cases (every 5 cases, every 10 cases)

This can provide data but may lead to significant delays between reports to team members

Control limits can be used to perform analysis and show a change in performance



Utilize a g-chart

- Rather than graphing performance (such as 90%), the chart graphs the number of cases or time between defects

This tool can be used and updated on a monthly basis or after each case depending on the needs of the facility

Florida Hospital Wauchula

We ROCK!!!

