

 HAWAII HEALTH SYSTEMS C O R P O R A T I O N "Touching Lives Everyday" Policies and Procedures	Department: Legal	Policy No.: ADM 0011
	Issued by: Quality Council	Revision No.: N/A
Subject: <i>Corporate Policy and Procedure for Reporting and Processing Long Term Care Quality Indicators to the Quality Council</i>	Approved by: Thomas M. Driskill, Jr. President & CEO	Effective Date: 12/19/01
		Supersedes Policy: N/A
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I. PURPOSE:

- A. To provide instructions to Hawaii Health Systems Corporation (HHSC) long term care (LTC) facilities for accessing Center for Medicare Medicaid Services (CMS) Facility Quality Indicator Reports.
- B. To provide instructions to HHSC LTC facilities for reporting HHSC Quality Indicators.
- C. To ensure reporting consistency among the HHSC LTC facilities that provide reliable & comparative information that can be used for HHSC systemic performance improvement activities.

II. POLICY:

- A. All HHSC LTC facilities will access CMS Facility Quality Indicator Reports monthly & will send the percentile rank scores contained on the Facility Quality Indicator Profile to the Director of Quality Assurance and Corporate Compliance.
- B. Each facility will develop policies and procedures for internally processing of CMS QI data.
- C. Each facility will submit a quarterly report to the Quality Council (Attachment 1).

III. PROCEDURES:

A. Analytic Reporting System Access

1. The Facility Champion and/or designee will access the Analytic Reporting System on the website at least once a month.
2. On the desktop, click on the *IBM Globler Dialer* icon.

3. Select:

- Select your log in profile and press *Connect*
- Click on "*Private Intranet*"
- Click on "*HI-MDS*"
- Click on "*Start Communicator*"
- Click "*MDS*"
- Click "*Submissions page*"

4. Click on *Analytic Reports*

- Enter user name and password then click *OK*
- Start Report Request System and click on "*Add All*"
 - Facility Quality Indicator Profile
 - Facility Characteristics
 - Resident Level Quality Indicator Summary
 - Resident Listing
 - Data Submission Summary
 - Assessment Summary
- Select date range or use default 6 (six) months

5. Press "*next*"

6. Select either "*display reports on line*" or "*run reports to see later*"

7. Then click on "*submit*"

B. Facility Specific QI Processing

Monitoring of Centers for Medicare and Medicaid Services (CMS) Analytic Report

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1. Review Facility Characteristics Report
2. Review the Facility Quality Indicator Profile
 - Note the Sentinel Health Events, i.e., fecal impaction, dehydration, pressure ulcers (low risk)

- Note all Quality Indicators that are flagged (at the 90th percentile) and
 - Note all unflagged Quality Indicators at the 75th percentile or greater
3. Verify accuracy
 - Match QI definition (in QI Matrix) against the MDS items in the definition
 - Use the MDS from which the QI reports were generated (See the MDS date listed on Resident Summary QI Report)
 - Match the MDS items that have flagged the QI against information other than the MDS to verify that the MDS accurately reflected the resident's condition during the assessment period.
 - Use the clinical record or other written source interviews with staff and residents, and/or observations.
 - Correct any error found, following correction policy if necessary.
 4. Prioritize areas of concern
 - Sentinel Health Event
 - QI flagged (90%-tile)
 - QI > 75%-tile
 5. Develop action plan for each QI of concern or
 6. Document in the medical record if flag is unavoidable
 7. Report results of review, accuracy check, and action plan to the HHSC Quality Council when requested to do so.

Attachment: 1. ADM 0011 (121901) Atch1

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