

The Power of Benchmarks

Using Benchmarks to Drive Hospice Performance Improvement

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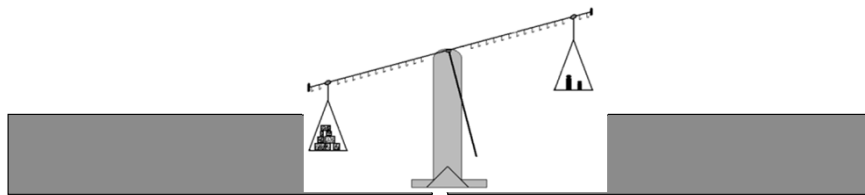
National Association for Home Care & Hospice
2015 Financial Management Conference & Exposition

Objectives

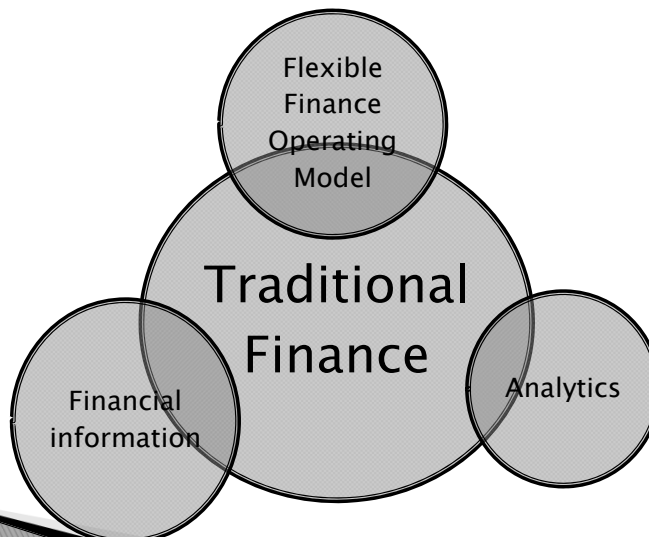
- ▶ Identify the key performance indicators that drive success in Hospice
- ▶ Delineate Benchmarks for your agency
- ▶ Determining Performance Improvement opportunities from Benchmarks
- ▶ Implementing Performance Improvement Initiatives using Benchmarking efforts

“The Incredible Balancing Act”

- ▶ Profitable Growth
- ▶ Quality of Earnings
- ▶ New Regulation
- ▶ Reimbursement pressures
- ▶ Financial and Operational Risk
- ▶ Management of the capital structure
- ▶ Cost efficiencies



Financial Role Has Evolved



Definition vs. Objectives of Benchmarks

A measurement of the quality of an organization's policies, products, programs, strategies, etc., and their comparison with standard measurements, or similar measurements of its peers.

Definition

www.businessdictionary.com

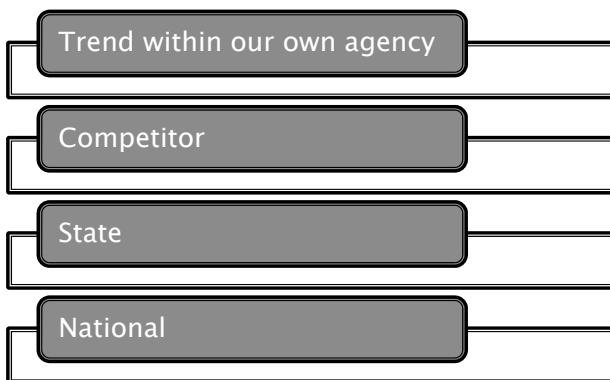
- 1) To determine what and where improvements are called for
- 2) To analyze how other organizations achieve their high performance levels
- 3) To use this information to improve performance

Objectives

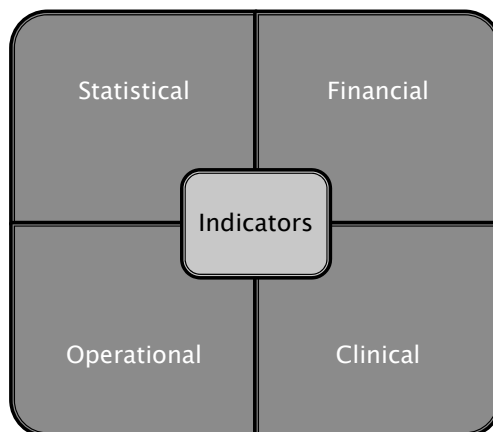
Where do we get our Hospice Benchmarks?

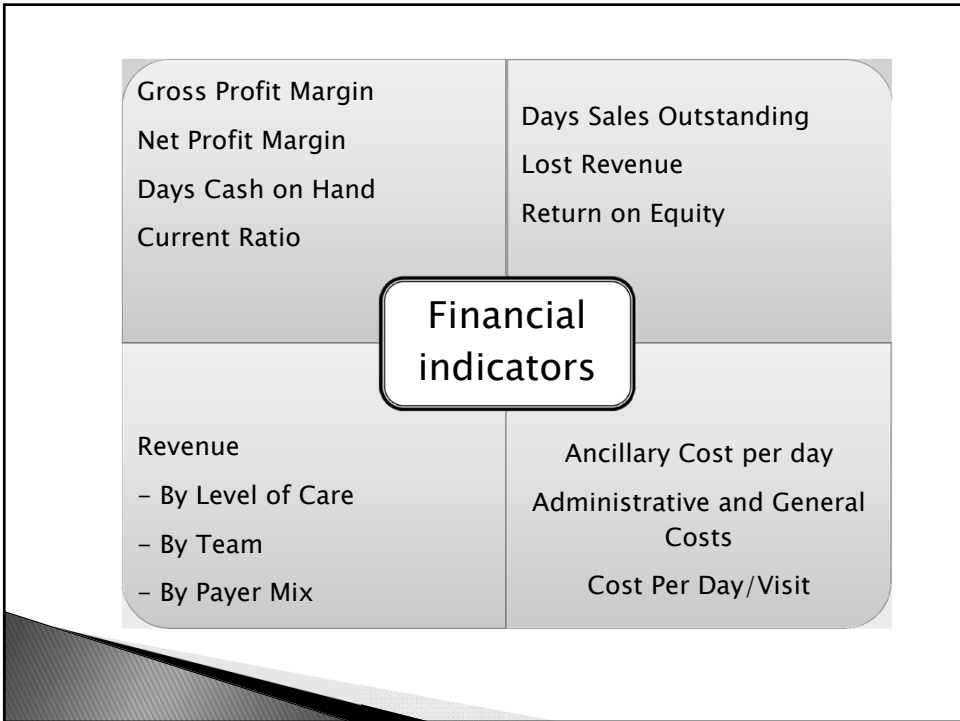
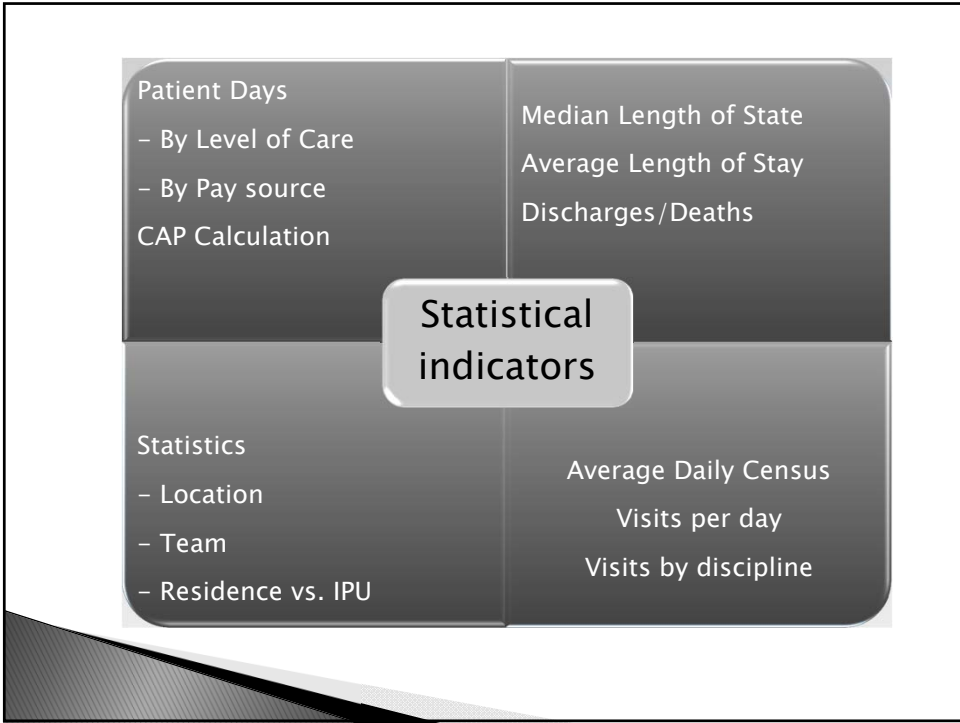
- ▶ CMS Quality Measures
- ▶ CMS Cost Report database
- ▶ National & State Surveys
- ▶ NHPCO website
- ▶ Benchmarking software

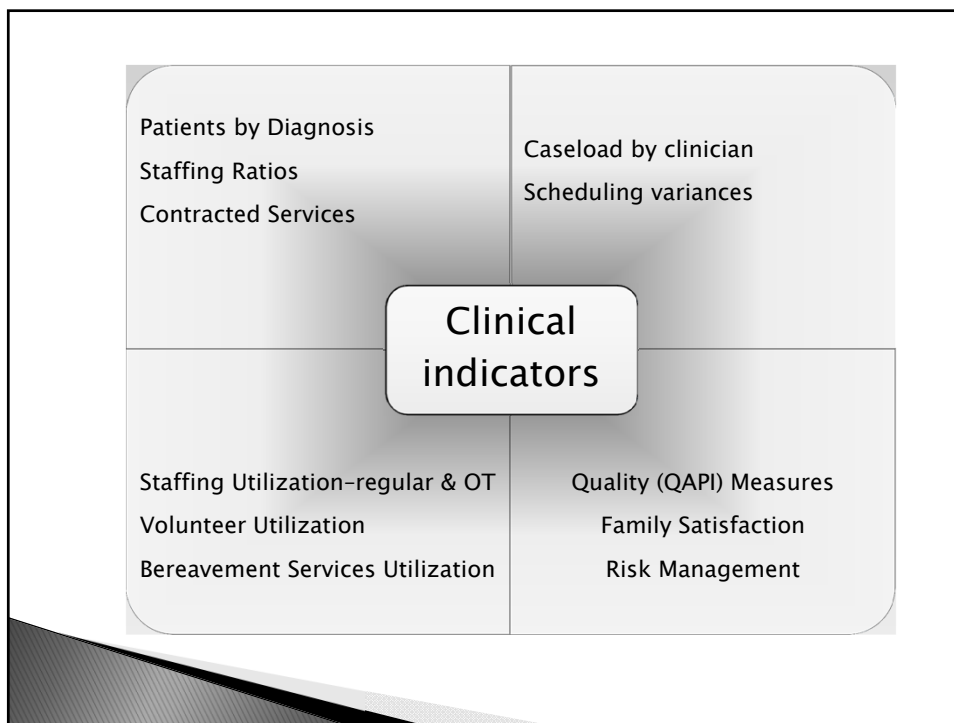
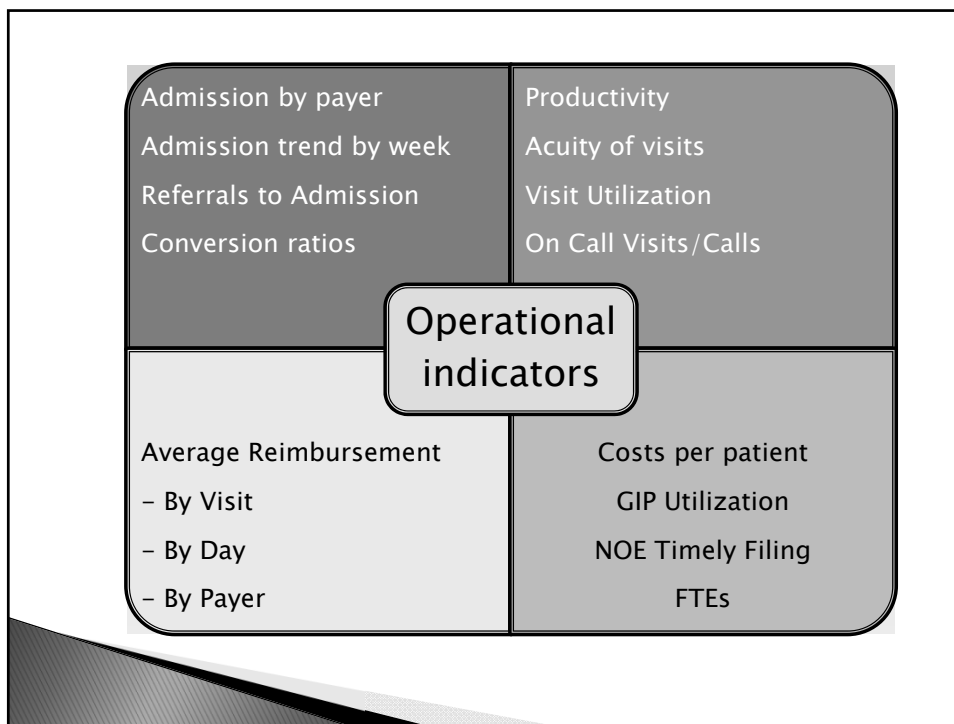
Who do we compare ourselves to in Hospice?



What data do we benchmark in Hospice?







How do we choose?

Prioritize

What you are evaluating

Why do you want to look at it

Who wants to see the data

When do you want to see the data

How and Where to obtain the data

Create Your Benchmark Dashboard

- ▶ Average Daily Census
- ▶ Patient Days
- ▶ Referrals to Admission Conversion ratio
- ▶ Admission by payer
- ▶ Revenue by payer
- ▶ Average Reimbursement by payer
- ▶ Cost per day
- ▶ FTE
- ▶ Visits by discipline

Performance Improvement

- » Measuring the output of a particular business process or procedure, then modifying the process or procedure to increase the output, increase efficiency, or increase the effectiveness of the process or procedure.

How many ways can you define Performance Improvement Project?

- Identify something that looks like it needs improvement.
- What indicators or measurement?
- What factors may contribute to the situation?
- Who does this information get reported to?
- Who is affected by a performance improvement?
- What may be potential strategies for improvement?
- How do you measure progress?

How many ways can you define Performance Improvement Project?

- ▶ Make it SMART (specific, measurable, achievable, realistic, timeline)
- ▶ Determine the team
- ▶ Designate roles
- ▶ Scheduled reviews
- ▶ Provide training
- ▶ Be visible and transparent

How many ways can you define Performance Improvement Project?

- ▶ Assess problem
- ▶ Corrective action
- ▶ Monitor results
- ▶ Trend results
- ▶ Evaluate outcome(s)

Performance Improvement Project?

Let's see examples

**Hospice
PERFORMANCE IMPROVEMENT PROJECT (PIP)**

LOCATION: [Name of hospice/setting/location] **Date Initiated:** _____

PIP TITLE: _____

Statement of the problem and supporting data:
*State the problem or concern in one sentence.
 Provide data or a description of the information that supports the existence of the problem or concern.
 Use graphs or tables if possible.*

Rationale for conducting the PIP:
State why the issue is important to address in a PIP.

Purpose of the PIP:
Say what you want to accomplish. How will things be different after the PIP is completed and successful?

Goals and Objectives:
What are the things you need to do to complete the PIP? Usually these include reviewing information to better understand the problem, mapping out current procedures, and development and testing of new procedures.

Project Activities:
Exactly what do you plan to do to address the problem?

Project Progress/Findings:
This can take any form. It could be a summary of each step in the process or a summary of what was accomplished each week. The following information should be included.

- Collection or review of any additional data
- Review of current procedures
- A description of planned changes in procedures, forms, contracts, etc.
- Information and results from the pilot study of the new procedures

Project Outcomes:
*Tell what happened. What were the results of the PIP? Did performance improve? Was the improvement maintained over one or more quarters after the PIP?
 Include data graphs or charts if possible.*

Project Completion Date: _____

Example

**Hospice
PERFORMANCE IMPROVEMENT MONITORING AND EVALUATION PLAN** 8009

Date: _____ Scope: _____

Responsibility: Hospice Unit Director, Case Manager, Governing Body, PI Committee

Priority Focus Area	Performance Measures/Outcomes	Related Functions	Benchmark Goal	Data Collection (Methodology)	Integration and Collaboration
Infection Control	- CDC hand hygiene guidelines will be adhered to by all staff	Infection Prevention and Control		Alcohol-based hand rubs will be used by all staff. Also, visual inspection on a random basis by the Hospice Unit Director.	Nursing Medical Staff Infection Control
Staffing	- Overtime due to understaffing - Understaffing as compared to the Hospice's staffing plan - Patient complaints	Rights and Responsibilities of the Individual Human Resources Leadership Provision of Care, Treatment and Service		Data will be collected from time card system, staff Hospice PI d Coordinator designee on a weekly basis. Data will be aggregated, reviewed and reported on a monthly basis to the Hospice Unit Director, and to the PI Committee on a quarterly basis.	Nursing Administration Human Resources Medical Staff

Example

Hospice
PERFORMANCE IMPROVEMENT TRENDING SHEET

8010

Date: _____
PFA = Priority Focus Area *

Performance Measures/Outcomes	Interdepartmental Collaboration	Benchmark	TJC	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
		Goal														
PFA: Infection Control - CDC hand hygiene guidelines will be adhered to by all staff	Nursing Medical Staff Infection Control	I	IC													
PFA: Staffing - Overtime due to understaffing	Nursing Administration Human Resources Medical Staff		RI, HR, LD, PC													
- Understaffing as compared to the Hospice's staffing plan	As above		As above													
- Patient complaints	As above		As above													

Let's do a Performance Improvement Scenario

Summary of Using Benchmarks to Drive Performance Improvement

- ▶ Identify benchmarks for YOUR agency
- ▶ Focus on results
- ▶ Know where and how to compare data
- ▶ Reports that are useful, concise, informative, timely, accurate
- ▶ Use this information to determine what opportunities for change are important
- ▶ Be SMART about it

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