

QIOs Meet with Providers to Showcase Best Practice "Change Packages"

The quality improvement organizations (QIOs) selected to carry out a pilot project directed by the Centers for Medicare & Medicaid Services (CMS) to establish "evidence-based change packages" for improving care have initiated provider education sessions across several states. The results of these short-term projects will aid CMS in preparing for execution of the QIOs' latest work action agenda, the "8th Scope of Work."

As lead QIO, the Delmarva Foundation held its first meeting with providers on the best practices "change packages" late in March. QIOs from Tennessee, New York, Washington, Idaho, Michigan, Utah, Virginia, Louisiana, and Rhode Island also have held meetings, aiming to establish best practices for reducing acute-care hospitalization rates in home health care.

An analysis of Outcome and Assessment Information Set (OASIS) data from the April 2003 through March 2004 period shows that approximately 28 percent of all home care episodes ended with an acute-care hospitalization. In addition, studies have shown that many of these hospital admissions are avoidable.

Delmarva has identified five "change domains" that will be used to improve acute care hospitalization:

- Promoting patient self-management;
- Implementing evidence-based practices and guidelines;
- Using systems and technology to promote effectiveness and efficiency;
- Improving care delivery systems / mobilizing community resources; and
- Creating a culture of quality.

Strategies associated with each domain are geared toward one of four stages of care a patient may be receiving. For instance, a strategy used to "promote patient self-management" would be different at the start of care than later during the care episode. These strategies are broken down further into action steps that agencies can utilize based on their specific needs.

Quality Insights of Pennsylvania also recently held its first meeting for providers to introduce its plans for implementing the "Quality Medication Administration Project" (Q-MAP). Quality Insights was selected as the sole QIO involved in the project for providers across Pennsylvania.

Recent OASIS data have shown that the national average for home care patients who improve in their management of oral medication is 39 percent. That rate is considered well below an acceptable level for this quality outcome measure.

Quality Insights presented elements of its "change package," including tools that assist providers with assessment and intervention strategies aimed at improving medication management. **Specific tools have been designed for:**

- Patient medication assessment;
- Staff assessment of medication non-adherence;
- Patient self-assessment for medication management;
- Medication teaching/instruction;
- Medication simplification;
- Medication compliance aides; and
- Oral medications care planning.

Patient needs can be identified and interventions employed appropriately using tools from Quality Insights' change package. The materials will be available online at www.qipa.org.

The hospitalization reduction and medication administration projects are intended to give providers the tools required to effect change in improving outcomes. Successes under the program will be studied and shared, and the "change packages" that prove to have a positive impact on targeted goals will be made available to all QIOs for provider use.