



Washington State
Hospital Association



MBQIP

Hospital Reporting

July 9, 2015

**Kim Kelley, MSW, Critical Access Hospital Program Manager, Community Health Systems,
Washington State Department of Health**

Linda Michel, Director Rural Quality/Performance Improvement, WSHA

Objectives

- Have robust discussion on challenges associated with implementing and collecting data for Emergency Department Transfer Communication (EDTC) measures.
- Hear from one hospital their experience on using the tool and strategies that helped them be successful.
- Answer questions related to the measure and it's associated timelines.

Numerator: Number of patients transferred to another healthcare facility whose medical record documentation indicated that all of the patient elements were communicated in an appropriate timeframe

Denominator: All patients transferred to another healthcare facility

ED Transfer Communication Measure

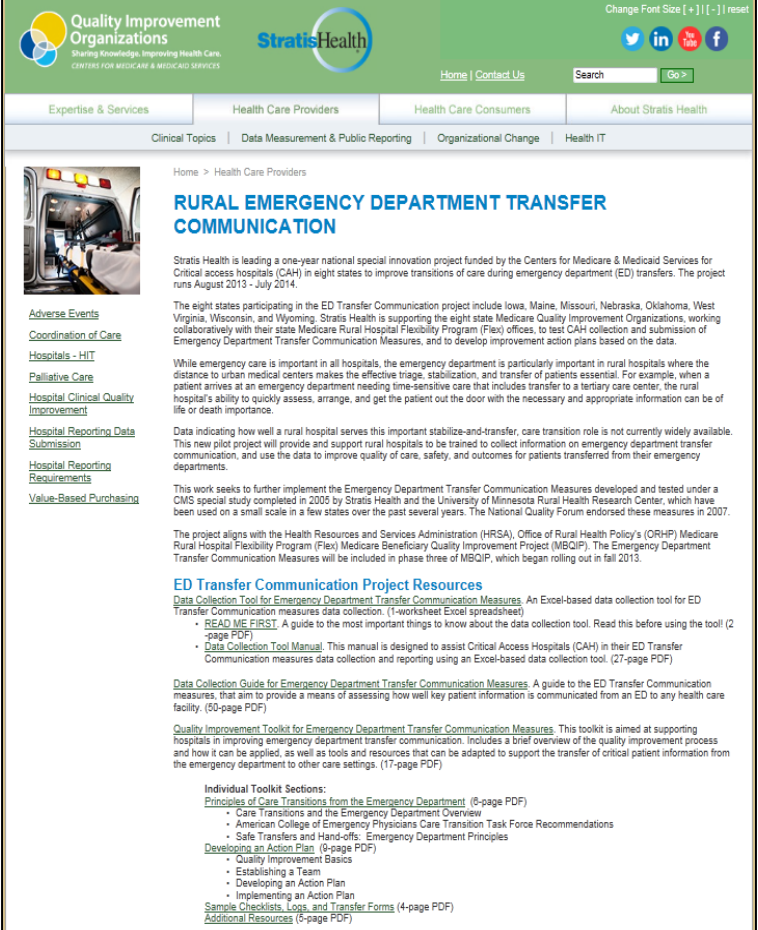
Measure ID#	Measure Short Name
EDTC -1	Administrative Communication
EDTC -2	Patient Information
EDTC -3	Vital Signs
EDTC -4	Medication Information
EDTC -5	Physician or practitioner generated information
EDTC -6	Nurse generated information
EDTC -7	Procedures and Tests

ED Transfer Communication Measures

Free resources for EDTC Measure on the Stratis Health website, including:

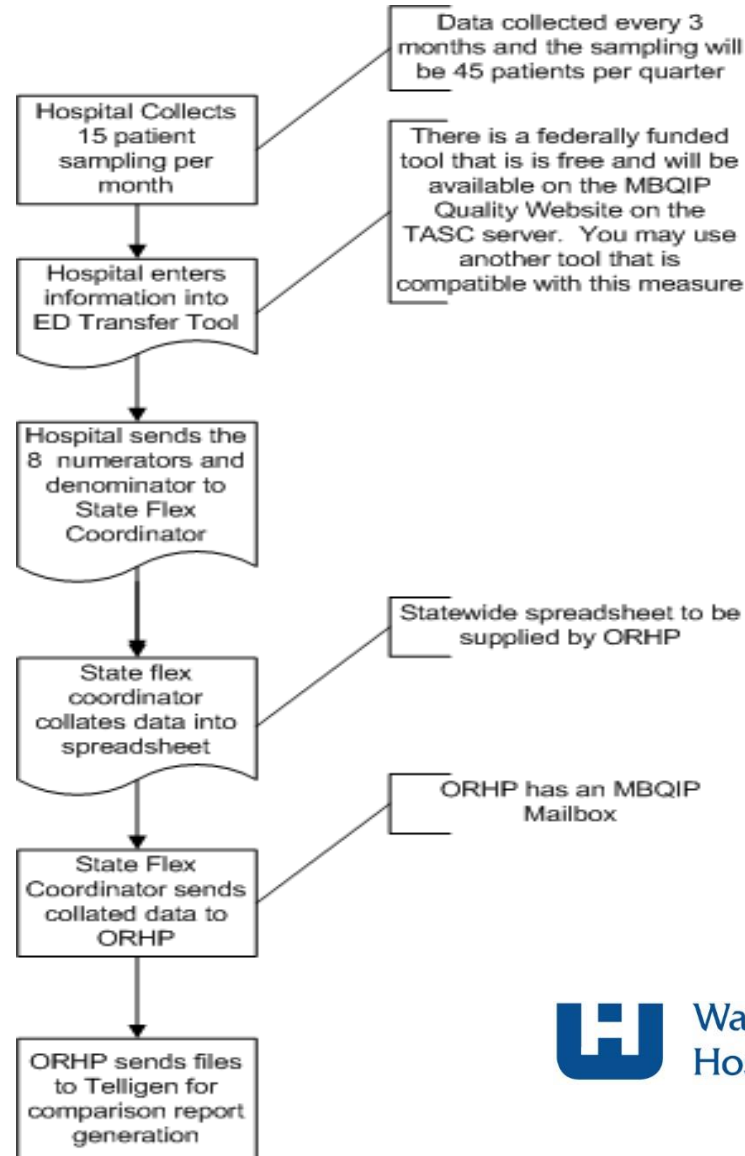
- Data collection tool and manual
- EDTC measure guide
- Quality Improvement toolkit
- Using the tool for MBQIP reporting

http://www.stratishealth.org/providers/ED_Transfer.html



The screenshot shows the Stratis Health website page for "RURAL EMERGENCY DEPARTMENT TRANSFER COMMUNICATION". The page features a navigation menu with categories like "Expertise & Services", "Health Care Providers", and "Health Care Consumers". The main content area includes a header image of an ambulance, a list of links for "Adverse Events", "Coordination of Care", "Hospitals - HIT", "Palliative Care", "Hospital Clinical Quality Improvement", "Hospital Reporting Data Submission", "Hospital Reporting Requirements", and "Value-Based Purchasing". The main text describes a one-year national special innovation project funded by the Centers for Medicare & Medicaid Services for Critical Access Hospitals (CAH) in eight states to improve emergency department (ED) transfers. It lists participating states (Iowa, Maine, Missouri, Nebraska, Oklahoma, West Virginia, Wisconsin, and Wyoming) and mentions the Medicare Rural Hospital Flexibility Program (Flex) offices. The text explains the importance of emergency care in rural hospitals and the need for effective triage, stabilization, and transfer of patients. It also mentions a data collection tool and manual, a quality improvement toolkit, and individual toolkit sections for care transitions and emergency department overview. The page includes a search bar and social media links for Twitter, LinkedIn, YouTube, and Facebook.

Data collection and reporting workflow



EDTC Measures Timeline

Quarters are identical to Hospital Compare, but with different submission deadlines

June 1, 2015 Download EDTC Data Collection Tool

June 1-30, 2015 Practice tool, call Susan w/questions

July 1, 2015 Start data collection

Quarter	Data Collection	Report Due to Flex	Report Due to ORHP
3Q- 2015	July 1 – Sept. 30, 2015	Oct. 15, 2015	Oct. 31, 2015
4Q - 2015	Oct. 1 – Dec. 31, 2015	Jan. 15, 2016	Jan. 31, 2016
1Q - 2016	Jan. 1 – Mar. 31, 2016	Apr. 15, 2016	Apr. 30, 2016
2Q - 2016	Apr. 1 – June 30, 2016	Jul. 15, 2016	July 31, 2016
3Q – 2016	Jul. 1 – Sept. 30, 2016	Oct. 15, 2016	Oct. 31, 2016
4Q – 2016	Oct. 1 – Dec. 31, 2016	Jan 15, 2017	Jan 31, 2017

Beth Armstrong
Quality Analyst
Ocean Beach Hospital and Medical Clinics

- Downloading the Reporting Tool
- Entering data
- Transfer Check-off List
- Staff Education
- Speed bumps or road blocks





OCEAN BEACH HOSPITAL ED Transfer Communication Checklist

When complete scan this checklist into the Medical Record

If addressed and information is not available, not applicable, or denied, write "N/A";

If not addressed, or information was omitted, leave blank

If any data is missing from the potential data source, include it as an additional page in the transfer documents

<input checked="" type="checkbox"/>	Check that each element is provided or communicated	Potential data source
	Nurse to Nurse communication – the ED nurse communicated with the nursing staff at the receiving facility	Patient chart report
	Physician to Physician communication – the ED physician discussed the patient’s condition with the physician at the receiving facility	Patient chart report
	Patient’s name, address, age, gender	Facesheet
	Contact information of family member/significant other/friend	Facesheet
	Patient insurance information	Facesheet
	Vital signs	Patient chart report
	Medications administered in the ED	Patient chart report
	Allergies/Reactions	Patient chart report
	Home Medications	Patient chart report
	History and Physical	Patient chart report
	Reason for Transfer/ Plan of Care	Patient chart report
	Nursing notes	Patient chart report
	Sensory status (impairments)	Patient chart report
	Catheters/IV	Patient chart report
	Immobilizations	Patient chart report
	Respiratory support	Patient chart report
	Oral restrictions	Patient chart report
	Tests/procedures performed (labs, radiology, etc.)	Patient chart report
	Tests/procedures results (labs, radiology, etc.)	Patient chart report

Critical Access Hospitals serve an important care transition role of stabilize-and-transfer. Better communication can enable faster time to treat the patient. The standardized ED Transfer Communication data set is endorsed by the National Quality Forum and adopted by the Medicare Beneficiary Quality Improvement Project (MBQIP), of which OBH is a participant.

Focus for call on August 20, 2015

Quarter 4 Inpatient Measure

Imm-2 Influenza Immunization

HCAHPS



Other **Added** Measures in Quarter 4, 2015

Outpatient

- OP-20: Door to diagnosis evaluation by a qualified medical professional
- OP-21: Median time to pain management for long bone fracture
- OP-22: Patient left without being seen
- OP-27 HCP: Influenza vaccination coverage among healthcare personnel

Discontinued Measures in Quarter 4, 2015

Outpatient

- OP 4: Aspirin at arrival in ED

Inpatient

- PN-6b: Initial ABX Selection for CAP
- HF-2: Evaluation of LVS Function

