

WORKING QUALITY IMPROVEMENT INTO CONTRACTS

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Agenda

- Focus of quality at committee meetings
- Including quality measures in OPPE
 - Quality expectations and measures throughout internal and external contracts
- Conducting annual evaluations of external contracts



Focus of Quality at Committee Meetings

- Quality is a standing agenda item at all committee meetings, including the governing board meeting.
- A quality packet is presented at all committee meetings and emailed to employees monthly.
 - Joint Commission Measures
 - CMS Measures
 - Harms Data/NHSN
 - HCAHPS
- Quality data from the packet is posted on every unit (process boards) for quick reviews.

Including Quality Measures in OPPE

- Discussions at committee meetings and reviews of quality data, prompt OPPE components.
- Additions to OPPE are a decision with provider input on performance areas requiring improvement or noted drift.
- Sepsis is the most current addition to OPPE.
- HCAHPS is always a component, but the categories change.

Confidential Pursuant to Michigan State Law MCL 333.20175, 333.21513, 333.21515, 331.531, 331.532, 331.533 and any other State or Federal Laws related to Confidentiality.	Patient Care			Practice Based Learning Improvement		Systems Based Practice		Medical Clinical Knowledge		Interpersonal Communications (HCAHPS % Top Box)			Professionalism	
	< 5	> 2	> 7%	> 0	<60%M/<30%L/R	≥ 3/yr	> 4 days	<5	<8	< 66%	< 66%	< 66%	< 50%	≥ 1/yr
	Number of PATIENT ADMITS (HIM)	Inpatient deaths YTD (HIM)	Inpatient 30 day readmissions YTD (Case Mgr)**	Peer Review Level 3, 4 or 5 (Med Staff Coord)	MU Compliance-CPOE %Med/Lab/Rad orders (IT)	Medical Records # of delinquency warnings (HIM)	Average length of stay (in days) YTD (HIM)	# of Sepsis not diagnosed/added to problem list with qualifying criteria	# of Sepsis bundles missing elements	Listen carefully (Physician Practice Director)	Understandable Explanations (Physician Practice Director)	Courtesy/Respect (Physician Practice Director)	Meeting Attendance - (Med Staff Coord) Full Staff, Medical	Complaints Received (Med Staff Coord)
Physician Name														

Quality Expectations and Measures Throughout Internal and External Contracts

- Internal Contracts

- Engagement Section has “Quality Initiatives” section which reads: “Physician agrees to fully support Employer’s and Hospital’s overall quality improvement and quality assurance initiatives, including, but not limited to HCAHPS, Core Measures, HARMS Reduction efforts, PI Projects, the Physician Quality Reporting Initiative, any applicable regulatory or accrediting body standards, and any other quality programs.”
- Orientation time with Quality Director

- External Contracts

- Quality Section includes verbiage surrounding accreditation requirements, participation in committee meetings and following recommendations of the Medical Staff and the Governing Board, participation in quality assessments and development of PI projects, and any other quality initiatives applicable.

Conducting Annual Evaluations of External Contracts

- Joint Commission Contract Services LD.04.03.09 states: “Care, treatment, and services provided through contractual agreement are provided safely and effectively.”

EP 6: “Leaders monitor contracted services by evaluating these services in relation to the hospital’s expectations.”

- We do this on an annual schedule, the requirement is at least annually.

EP 7: “Leaders take steps to improve contracted services that do not meet expectations.”

- The Joint Commission requires action to be taken if expectations are not met, action could include:
 - Increased monitoring of the service
 - Consultation to the contractor
 - Renegotiation of the contract terms

Contracted Entity:

UPHSB Manager:

Brief Description of Scope of Contract/Service:

Is the Contractor accredited by the Joint Commission: Yes No NA

CRITERIA	HOW MEASURED?	HOW TRACKED?
Quality/Performance of Service	FOR EACH CRITERION, PLEASE INCLUDE QUANTIFIABLE DATA FOR MEASUREMENT AND ESTABLISH A BENCHMARK/GOAL FOR EACH	
Timeliness of Service		
Efficiency and Accuracy of Service		
Appropriate/Competent Staffing		
Adherence to UPHSB Policies		
Maintains rights and confidentiality of all people		
Compliance with performance reporting expectations		
Participates in meetings as requested		
Overall Satisfaction		

Reviewer Signature _____ Date _____

Administrator Signature _____ Date _____



Thank you

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