Strategies for Success Self-Assessment Tool

Expanded HHVBP Model

March 2023

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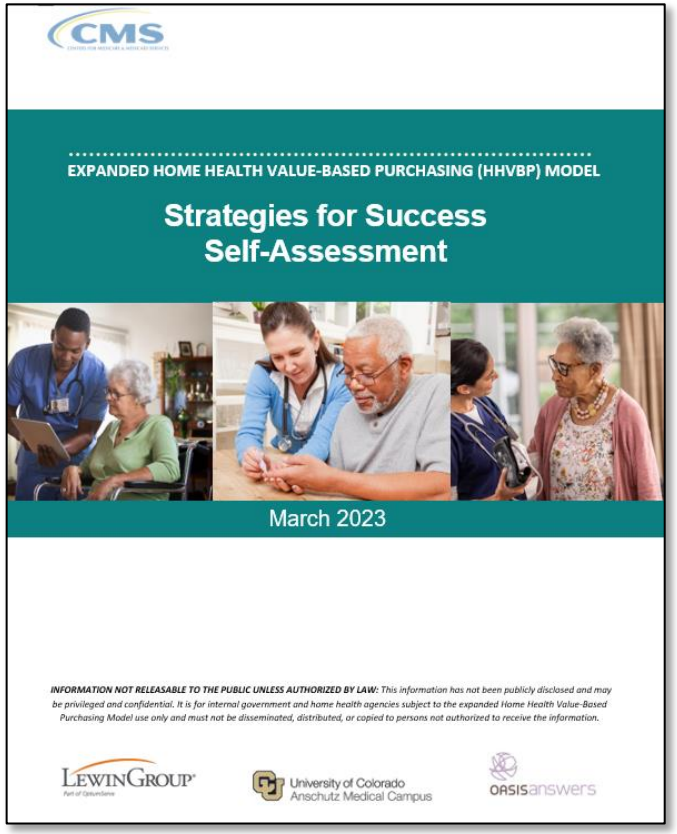
Agenda



- Benefits of using self-assessment for quality improvement
- Expanded HHVBP Model self-assessment
  - Strategies for Success
  - Action plan
- Other expanded Model resources

Available for download on the Expanded HHVBP Model Webpage: https://innovation.cms.gov/innovation-models/expanded-home-health-value-based-purchasing-model

Self-Assessment for Quality Improvement

Benchmark Definition

The **benchmark** is the mean of the top decile (90th percentile) of all HHAs' performance scores on the specified quality measure during the Model baseline year (CY 2022), calculated separately for the larger and smaller-volume cohorts. CMS uses the benchmark for calculating both the achievement score and the improvement score.

Achieving Benchmark Performance

- Expanded HHVBP Model establishes benchmarks based on actual performance achieved by top 10% of HHAs nationally.
- HHA performance at or approaching the benchmark is produced by consistent and reliable application of clinical science and known care practices.
- Quality improvement experience suggests that a small number of high-leverage practices will account for most of the variation in HHA quality performance.
- HHAs may be able to improve performance by identifying and correcting critical gaps in their application of science and care practices.

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Identifying Strategies for Success

- Health services research – home health, other settings
- Original HHVBP Model evaluation results
- Care standards
  - Medicare Home Health Conditions of Participation (CoPs)
  - Medicare benefits
  - Standards of practice[1]
- Expert opinion

Conditions of Participation require HHAs to develop, implement, evaluate, and maintain an effective, ongoing, HHA-wide, data-driven Quality Assessment and Performance Improvement (QAPI) program

[1]Home Health Nursing: Scope and Standards of Practice, 2nd Ed; American Nursing Association.

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On Self-Assessment

- As a quality improvement activity, the purpose of self-assessment is learning, not judgement.
- Mindful engagement in self-assessment activities reflects personal, professional, and organizational strengths – including curiosity, a growth mindset, confidence, and openness to change.

Self-Assessment Tools for the Expanded HHVBP Model

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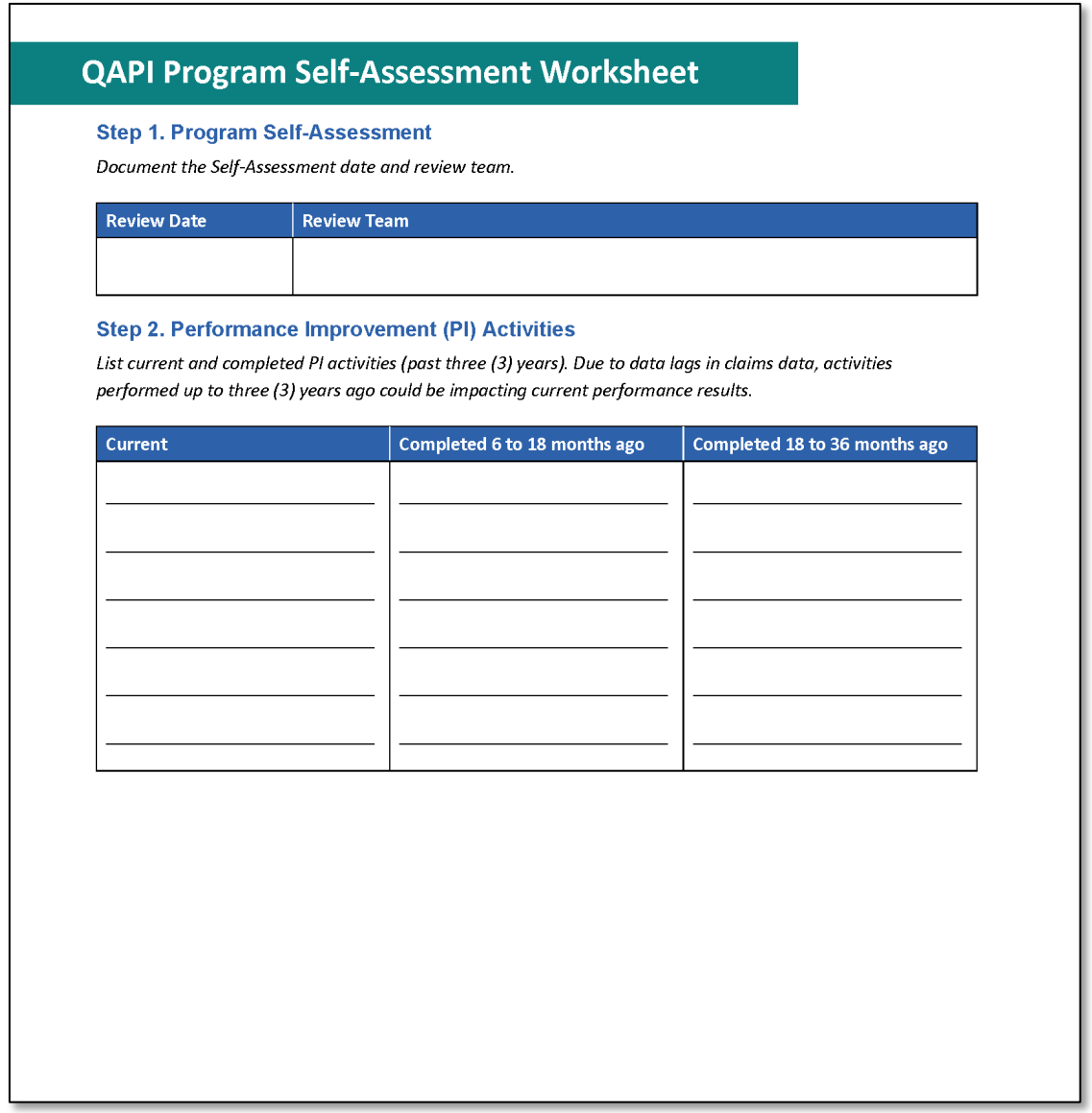
Quality Assessment and Performance Improvement (QAPI) Program Self-Assessment



QAPI Program Self-Assessment Worksheet

Step 1. Program Self-Assessment

Document the Self-Assessment date and review team.

Review Date	Review Team

Step 2. Performance Improvement (PI) Activities

List current and completed PI activities (past three (3) years). Due to data lags in claims data, activities performed up to three (3) years ago could be impacting current performance results.

Current	Completed 6 to 18 months ago	Completed 18 to 36 months ago

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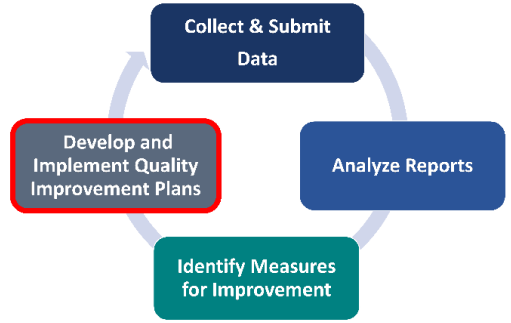
How to use Existing Quality Assessment and Performance Improvement (QAPI) Processes to Support Improvement in Expanded HHVBP Model

DEVELOP AND EXECUTE QUALITY IMPROVEMENT PLANS

The next phase of the QI Cycle is to develop and implement quality improvement plans (**Exhibit 10**). HHAs may consider including one to two of the expanded HHVBP Model measures in their upcoming quality improvement priorities. These measures may align goals, timeframes for implementation of activities, measure-specific interventions, communication of quality improvement activities and feedback loops with current agency QI programs and processes.

Exhibit 10. Develop and Implement QI Plans



The S.M.A.R.T goal framework may be a tool to assist agencies with developing improvement plans that are clear, realistic, measurable, and will drive change. Goals should be:

- **S**pecific (simple, sensible, significant)
- **M**easurable (meaningful, motivating)
- **A**chievable (agreed, attainable)
- **R**elevant (reasonable, realistic, and resourced, results-based)
- **T**ime-bound (time-based, time-limited, time/cost limited, timely, time-sensitive)

A goal-setting worksheet is available to assist HHAs with the S.M.A.R.T goal framework. In addition, the Quality Improvement Organizations/Lake Superior Quality Innovation Network published the QAPI Written Plan How-To Guide that provides instructions on the design and implementation of improvement plans. Included in the *How-To Guide* is a list of planning resources, such as the Prioritization Worksheet for Performance Improvement Projects (PIP) and the PIP Launch Check List.

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Quality Measure Category-Focused Performance Improvement

Measure Category Self-Assessment Worksheet

This worksheet provides details on each step in the two-step assessment process. An example of how to complete the self-assessment process using this worksheet is available in the section, Measure Category Self-Assessment – Example (p. 6).

Step 1. Performance Profile

To summarize your agency's current performance, follow the instructions below:

1. Open your most recent IPR or APR and refer to the column labeled "Your HHA's Percentile Ranking Within Your HHA's Cohort" in the Care Points tab.
2. For each measure, record the result shown in the "Your HHA's Percentile Ranking Within Your HHA's Cohort" column by marking an "X" in the **Performance Profile Table (Exhibit 1)**. For example, if your IPR says you are ≥75 for Discharged to Community, place an "X" in the corresponding column of the Performance Profile Table for that measure.
3. For the OASIS-based and HHCAHPS Survey-based categories, indicate the average or typical performance with an "X" in the grey row (this does not need to be exact).
4. Note that, unlike the measures in other categories, analysis of HHA performance and improvement in national samples suggests that the two (2) claims-based measures may have different drivers. These measures are analyzed separately; no average or typical performance is recorded for this category.
5. Leave blank if the measure or category is not reported.

Exhibit 1. Performance Profile Table

Categories and Measures	Your HHA's Percentile Ranking Within Your HHA's Cohort (Located in Care Points Tab on IPR or APR)			
	<25	25-49	50-74	≥75
OASIS-based Measures				
Discharged to Community				
Improvement in Dyspnea				
Improvement in Management of Oral Medications				
Total Normalized Composite (TNC) Change in Mobility				
Total Normalized Composite (TNC) Change in Self-Care				
Claims-based Measures (analyzed separately)				
Acute Care Hospitalizations				
Emergency Department Use Without Hospitalization				
HHCAHPS Survey-based Measure Components				
Care of Patients				
Communications Between Providers and Patients				
Specific Care Issues				
Overall Rating of Home Health Care				
Willingness to Recommend the Agency				

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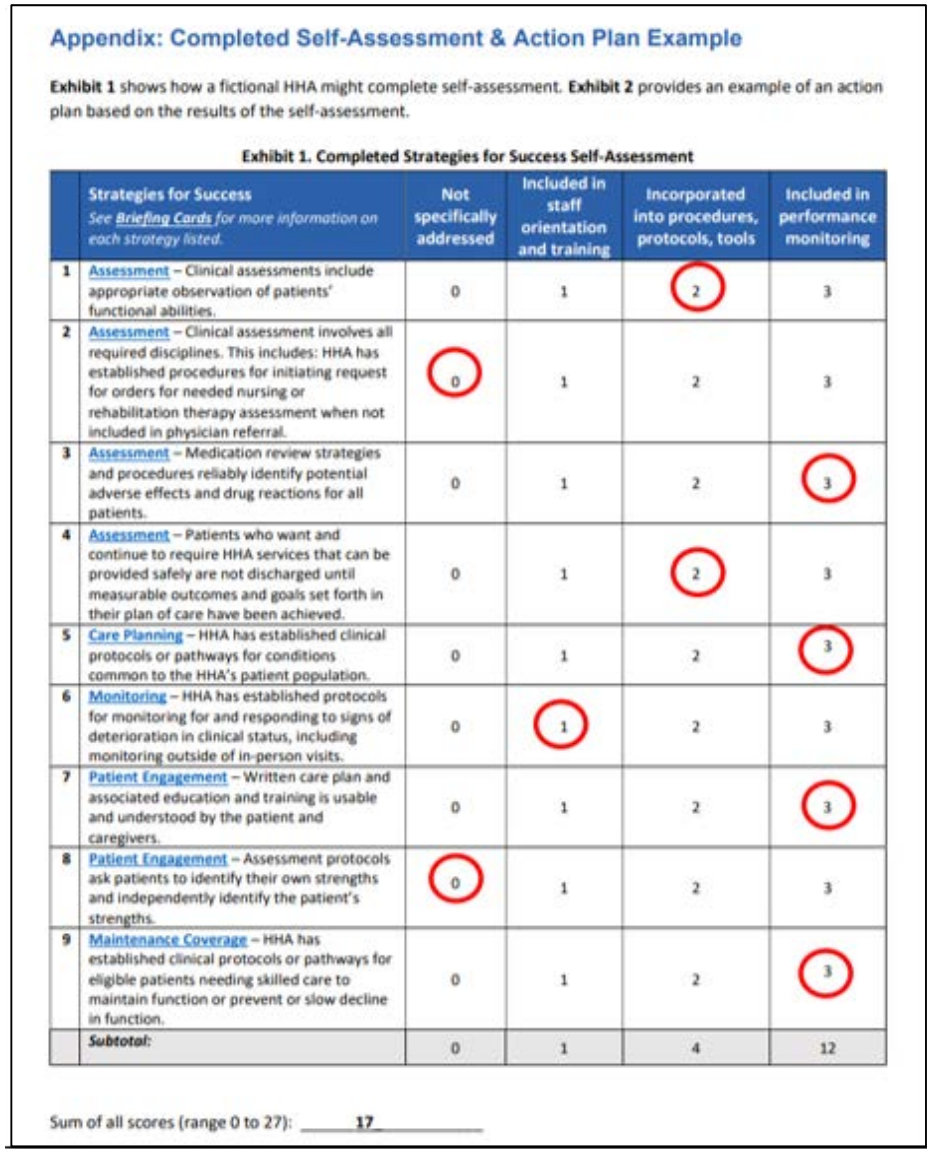
Strategies for Success Self-Assessment Tool



Appendix: Completed Self-Assessment & Action Plan Example

Exhibit 1 shows how a fictional HHA might complete self-assessment. **Exhibit 2** provides an example of an action plan based on the results of the self-assessment.

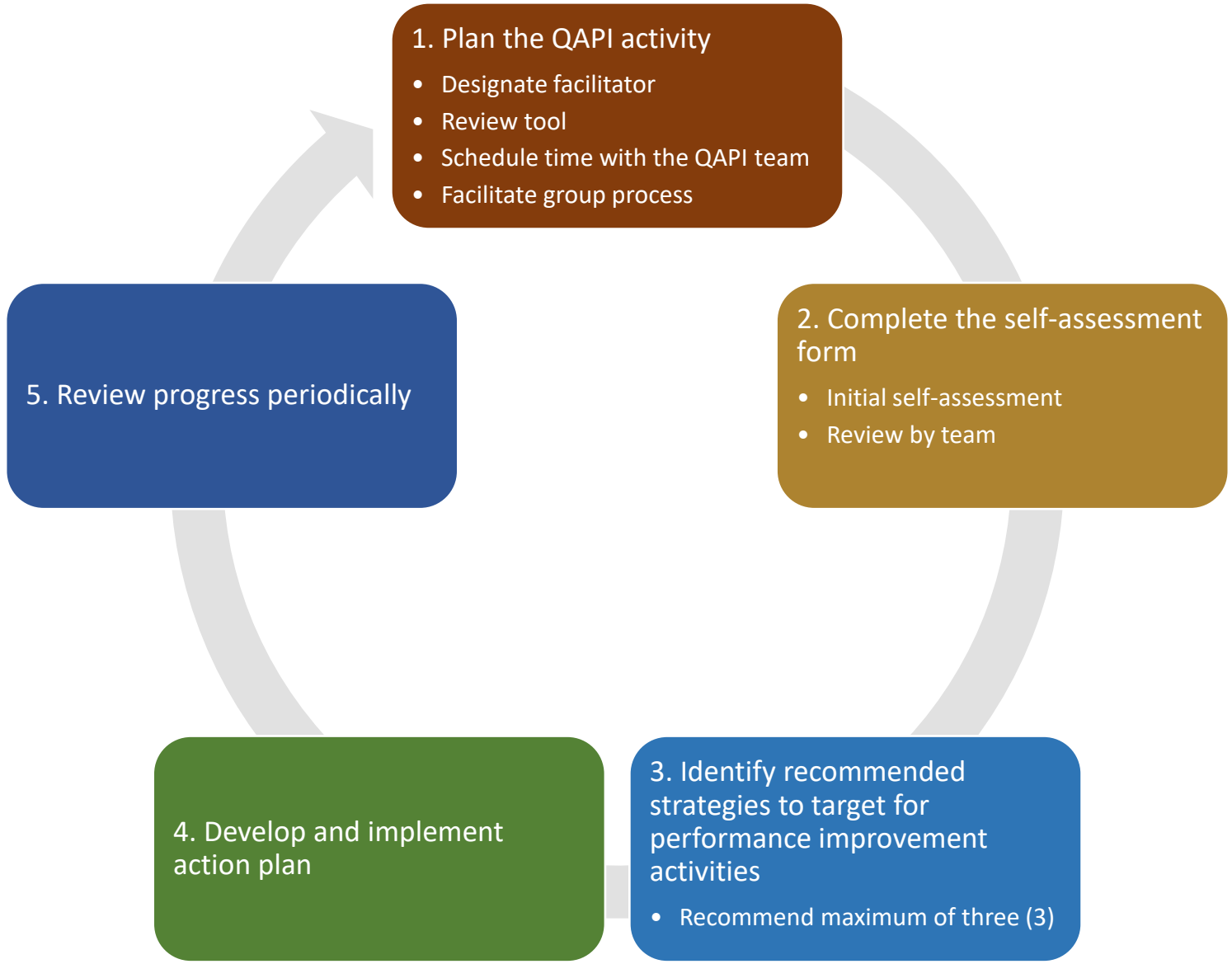
Exhibit 1. Completed Strategies for Success Self-Assessment

	Strategies for Success *See Briefing Cards for more information on each strategy listed.*	Not specifically addressed	Included in staff orientation and training	Incorporated into procedures, protocols, tools	Included in performance monitoring
1	Assessment – Clinical assessments include appropriate observation of patients' functional abilities.	0	1	**2**	3
2	Assessment – Clinical assessment involves all required disciplines. This includes: HHA has established procedures for initiating request for orders for needed nursing or rehabilitation therapy assessment when not included in physician referral.	**0**	1	2	3
3	Assessment – Medication review strategies and procedures reliably identify potential adverse effects and drug reactions for all patients.	0	1	2	**3**
4	Assessment – Patients who want and continue to require HHA services that can be provided safely are not discharged until measurable outcomes and goals set forth in their plan of care have been achieved.	0	1	**2**	3
5	Care Planning – HHA has established clinical protocols or pathways for conditions common to the HHA's patient population.	0	1	2	**3**
6	Monitoring – HHA has established protocols for monitoring for and responding to signs of deterioration in clinical status, including monitoring outside of in-person visits.	0	**1**	2	3
7	Patient Engagement – Written care plan and associated education and training is usable and understood by the patient and caregivers.	0	1	2	**3**
8	Patient Engagement – Assessment protocols ask patients to identify their own strengths and independently identify the patient's strengths.	**0**	1	2	3
9	Maintenance Coverage – HHA has established clinical protocols or pathways for eligible patients needing skilled care to maintain function or prevent or slow decline in function.	0	1	2	**3**
	Subtotal:	0	1	4	12

Sum of all scores (range 0 to 27): **17**

Strategies for Success Self-Assessment Tool Overview

Instructions for *Strategies for Success Self-Assessment Tool*



Recommended Strategies

Assessment

1. Clinical assessments include appropriate observation of patients' functional abilities
2. Clinical assessment involves all required disciplines. This includes: HHA has established procedures for initiating request for orders for needed nursing or rehabilitation therapy assessment when not included in physician referral.
3. Medication review practices and procedures reliably identify potential adverse effects and drug reactions for all patients.
4. Patients who want and continue to require HHA services that can be provided safely are not discharged until measurable outcomes and goals set forth in their plan of care have been achieved.

Care Planning

5. HHA has established clinical protocols or pathways for conditions common to the HHAs patient population.

Monitoring

6. HHA has established protocols for monitoring for and responding to signs of deterioration in clinical status, including monitoring outside of in-person visits.

Patient Engagement

7. Written care plan and associated education and training is usable and understood by the patient and caregivers.
8. Assessment protocols ask patients to identify their own strengths and independently identify the patient's strengths.

Maintenance Coverage

9. HHA has established clinical protocols or pathways for eligible patients needing skilled care to maintain function or prevent or slow decline in function.

Briefing Card – Example One (1)

Assessment:	***Clinical assessment involves all required disciplines. This includes: HHA has established procedures for initiating request for orders for needed nursing or rehabilitation therapy assessment when not included in physician referral.***
Situation	Patients may have needs for skilled care beyond those included in their care plan that are either not identified by home health clinicians or not accessed through care coordination efforts with the referring physician.
Background	Through interactions with patients in their homes, home health clinicians gain a unique perspective on the patient's health and care needs. Home health clinicians – including nurses and therapists – are in an ideal position to identify potential needs for skilled care from other disciplines beyond those included in the original physician referral.
Assessment	Unmet skilled care needs can significantly and negatively impact patient outcomes and HHA operations.
Recommendation	HHAs should establish procedures to ensure that initial and ongoing patient assessments identify needs for skilled care beyond those included in the current care plan. This should include: • Interdisciplinary orientation and education that promotes understanding the roles and functions of other clinical disciplines. • Assessment procedures that include identification of potential unmet skilled care needs. • Care coordination procedures to effectively communicate assessment findings to referring physicians to approve additions or modifications to the care plan.

Briefing Card – Example Two (2)

Care Planning:	***HHA has established clinical protocols or pathways for conditions common to the HHAs patient population.***
Situation	Reliable individual and interdisciplinary team performance, and improved patient and caregiver communication can be achieved though standardization of common tasks and clinical activities.
Background	While every patient's care needs are unique, an HHA's patient population will have common conditions, with aspects of care that can be standardized.
Assessment	Failure to use clinical protocols or pathways can negatively impact patient outcomes, patient experience, and HHA operations.
Recommendation	HHAs incorporate clinical protocols or pathways for conditions seen in their patient population and institutionalize their use. This would include: • Development or adoption of clinical protocols or pathways. • Orientation and education on clinical protocols or pathways and expectations for their use. • Incorporation of clinical protocols or pathways into procedures, tools, and patient education and training resources.

Questions to Consider

- For each strategy, examine its integration into:

Orientation and training	Procedures, protocols, tools	Performance monitoring

Creating an Action Plan

- Identify top three (3) strategies for success
- Identify what changes will be made
- Designate who is responsible for owning these changes
- Assign a timeline
- Reassess as needed

Strategies for Success	What changes will we make?	Who is responsible?	When will this be completed?
1.	*In our orientations & trainings…*		
	In our procedures, protocols, & tools…		
	In our performance monitoring…		
2.	*In our orientations & trainings…*		
	In our procedures, protocols, & tools…		
	In our performance monitoring…		
3.	*In our orientations & trainings…*		
	In our procedures, protocols, & tools…		
	In our performance monitoring…		

Completed example in the Appendix

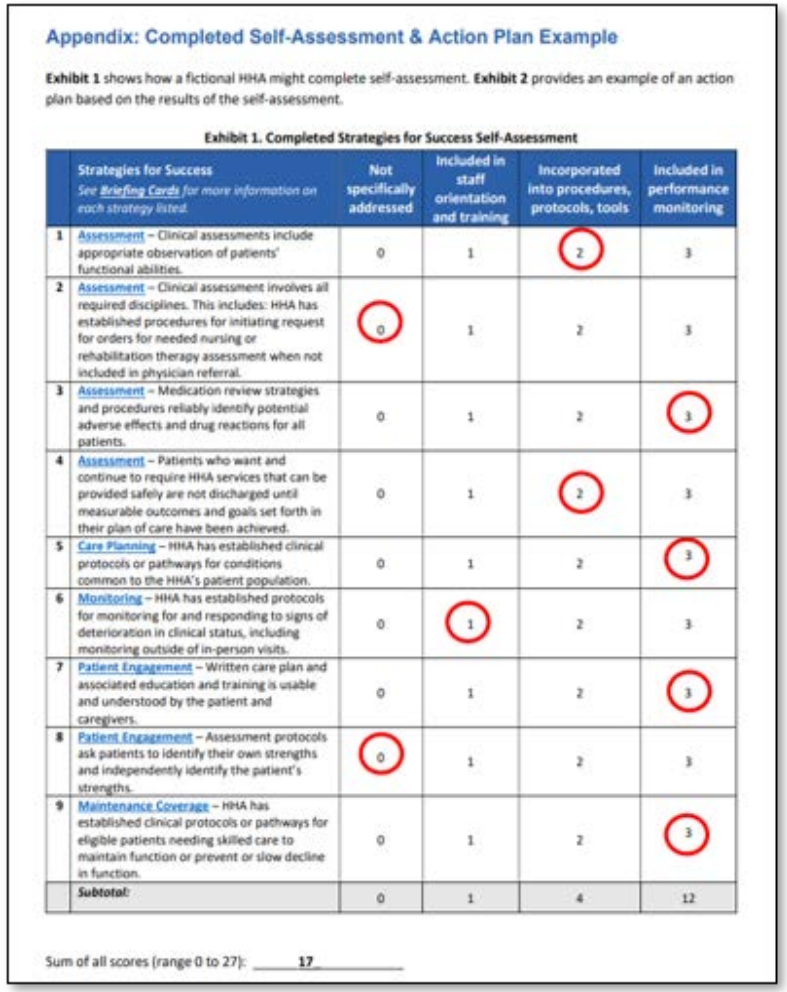


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Exhibit 2. Completed Action Plan: Strategies Selected for QAPI Activities

Strategies for Success	What changes will we make?	Who is responsible?	When will this be completed?
(1) Assessment – Clinical assessments include appropriate observation of patients' functional abilities.	***In our orientations & trainings…*** For managers and supervisors – how to monitor staff performance on clinical assessment, especially observation of patients' functional abilities. ***In our procedures, protocols, & tools…*** Incorporate observation and feedback of staff performance into assessment procedures. ***In our performance monitoring…*** Observe a sample of current staff performance, monitor periodically to determine whether additional action is required.	Manager	30 days (XX/XX/XX)
(2) Assessment – Clinical assessment involves all required disciplines. This includes: HHA has established procedures for initiating request for orders for needed nursing or rehabilitation therapy assessment when not included in physician referral.	***In our orientations & trainings…*** Identify best practices for involving all required disciplines; integrate into orientation and training; update current staff. ***In our procedures, protocols, & tools…*** Work with staff to add consideration of other disciplines into assessment tools; develop SBAR tool for communicating with ordering physicians; incorporate interdisciplinary approach messaging into provider relations communications. ***In our performance monitoring…*** Incorporate consideration of other disciplines into assessment and care planning quality assurance activities; monitor to determine whether additional action is required.	Manager	90 days (XX/XX/XX)
(8) Patient Engagement – Assessment protocols ask patients to identify their own strengths and independently identify the patient's strengths.	***In our orientations & trainings…*** Identify best practices for patient strengths identification; integrate into orientation and training; update current staff. ***In our procedures, protocols, & tools…*** Work with staff to integrate patient strengths identification into assessment tools and documentation. ***In our performance monitoring…*** Incorporate patient strengths identification into assessment and care planning quality assurance activities; monitor to determine whether additional action is required.	Manager	90 days (XX/XX/XX)

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Expanded HHVBP Model Resources

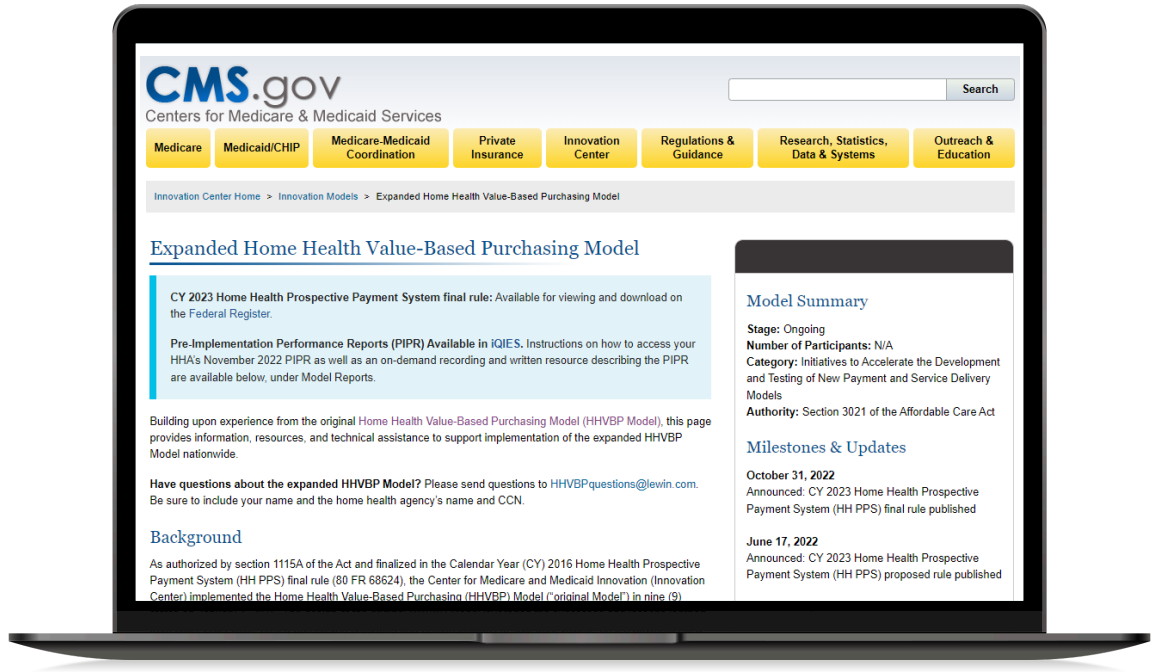
Expanded HHVBP Model Help Desks

HHVBP Model Help Desk	iQIES Help Desk
Questions related to implementation, measures, resources, HHVBP performance feedback report content, or other questions related to the expanded HHVBP Model. Email: HHVBPquestions@lewin.com	Technical questions related to Internet Quality Improvement Evaluation System (iQIES) platform registration, navigation, or assistance with accessing reports. Email: iQIES@cms.hhs.gov Phone: 1 (800) 339-9313 Webpage: iQIES Help
When sending an email to either help desk, please include the following information: • Your first and last name • Email address • CCN(s) or Facility ID (do not include Taxpayer Identification Number (TIN)) • Facility/agency name and address • If CCN or Facility ID is unknown, please include facility/agency name and zip code	

Home Health Quality Reporting Program Help Desks	
Home Health Quality Help Desk	**Home Health CAHPS**
Questions related to: Home Health Quality, including Care Compare (excluding HHCAHPS), OASIS coding and OASIS documentation, quality reporting requirements & deadlines, data reported in quality reports, measure calculations, Quality of Patient Care Star Rating (excluding suppression requests), public reporting, risk adjustment, and Quality Assessment Only (QAO)/Pay for Reporting (P4P). Email: homehealthqualityquestions@cms.hhs.gov	Questions related to the Home Health CAHPS Survey or the Patient Survey Star Ratings. Email: hhcahps@rti.org Phone: 1 (866) 354-0985

Staying Connected Checklist

- Visit and bookmark the Expanded HHVBP Model webpage
- Review the Expanded HHVBP Model YouTube playlist for all recorded content
- Subscribe to the HHVBP Expanded Model listserv by entering your email address on the contact form, then select "Home Health Value-Based Purchasing (HHVBP) Expanded Model" from the Innovations list. To ensure you receive expanded Model communications via email, please add "cmslists@subscriptions.cms.hhs.gov" to your email safe sender list.
- Access and review the reports available in iQIES in the "HHA Provider Preview Reports" folder
- Contact the HHVBP Help Desk with questions: HHVBPquestions@lewin.com



Thank you!