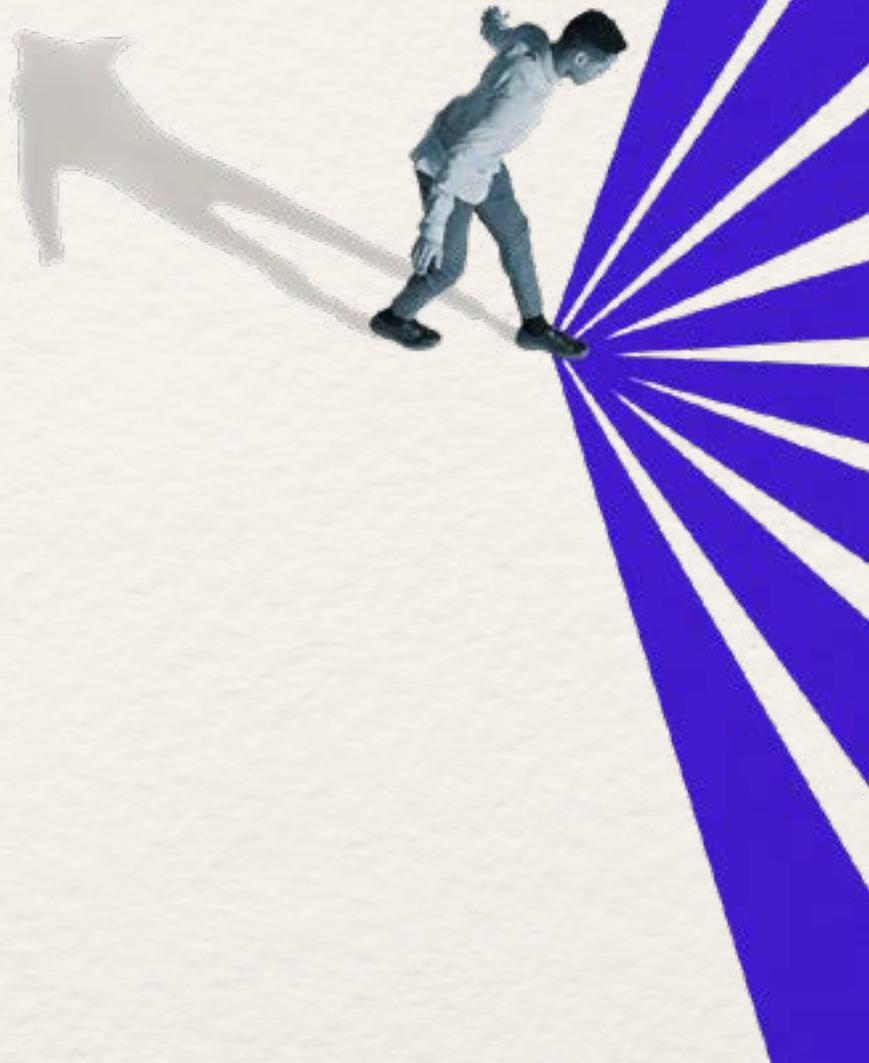QCentrix

Sharp Healthcare improves compliance by double digits

Introduction

Sharp HealthCare is one of California's largest non-profit hospital systems including four acute- care and three specialty hospitals in San Diego, two affiliated medical groups and a health plan.

Motivated by the opportunity to improve data integrity, Sharp HealthCare embarked on a centralization effort within the quality department. Sharp was driven to centralize due to documented data variations within the different system sites and a lack of visibility to system performance. Q-Centrix implemented its core measure solution over the course of 2012.

Challenges

› Human resources: stretched thin and backlogged

- Abstraction was lagging behind, distracting the entire quality department and some service lines

- Changing regulations were difficult for abstractors to keep up with

- Pulling in senior staff resources to help took them away from their other critical tasks

- Abstractors spent most of their time putting numbers in charts rather than improving patient care

› Process changes needed

- Processes were variable and inefficient

- The reporting cycle was several months, meaning memos to providers were being sent out months after the patient was discharged

› Fear around changes and costs

- The fear factor was greatest around workforce reduction – not only for those whose positions are eliminated, but among employees who fear the cuts will continue

- Sharp staff needed to build trust with third party vendor to be sure that their internal process changes would be followed by all abstractors

- If the solution wasn't budget neutral, it would never get the CEO's support – and that was crucial to managing such a big change

Solutions

## Making the business case: counting the opportunity costs

- After calculating abstraction volumes and minutes needed to complete each chart, costs for the 6.4 full time equivalent (FTE) staff would be high

- Quality team members, including some directors, were spending time helping abstraction, and by calculating their higher wages, that would be another 5 FTEs

- The key factor in the decision was whether bringing in a partner would solve the human resources challenges without raising costs.

- Staffing costs showed that the third party vendor solution could lower costs while increasing clinical data integrity

Process improvements propel focus towards clinical data management improvements

- Investing time in standardizing processes would be required no matter what method Sharp chose to achieve centralization

- With better processes in place, abstractors could focus on improving care in real-time

The transition: overcoming the barriers

- Some abstractors were retrained and now use their expertise to introduce meaningful protocols that they are able to enforce.

- The increase in job satisfaction for those remaining on the quality team far outweighed the fear

- The learning process took less than three months, with Sharp reaching a level of trust with the Q-Centrix abstractors and the new procedures

- The business case was clear: third party collaboration would lower costs while increasing the data integrity and timeliness
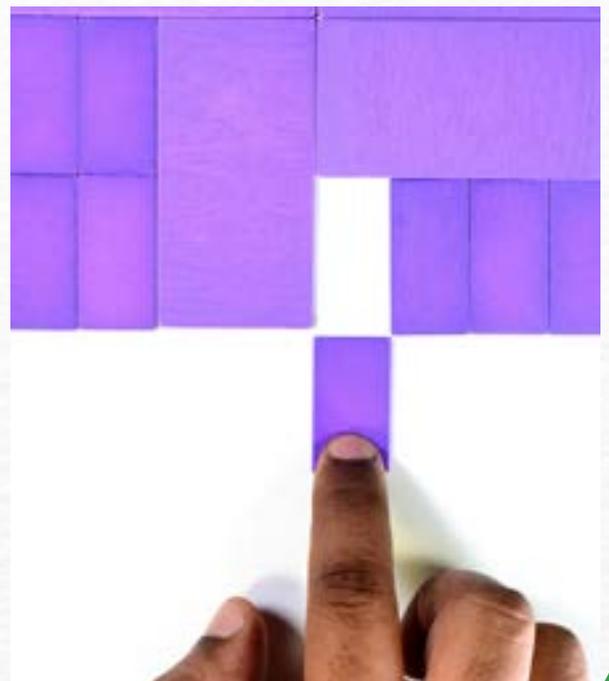
Impact

Improving quality: from box-checking to patient outcomes

The centralization system aligned decision-making, implemented clinical data governance efforts and engaged Q-Centrix as a partner to standardize workflow, team and quality assurance. As a result of the centralization efforts, the organization improved compliance for CMS by as much as 42% in 2 years.

Sharp has standardized its processes and cut its reporting cycle from several months to just seven weeks. It has also raised its quality rating for value-based purchasing from around 95% in 2013 to 99.6% last year.

The biggest gains, however, came from freeing up Sharp's in-house team to focus on improving the quality of patient care – an important shift as the regulatory emphasis moves from processes to outcome measures.

Outsourcing data abstraction transformed Sharp's quality department. When the nurses first started seeing quality people on the units, they were surprised. The providers were used to getting letters six months after discharge, pointing out what they had forgotten to do, which did little to improve the care.

That has changed. The quality team has now built up constructive relationships with nurses and physicians. They help educate them, using the faster data feedback on core measures. But they are also working with the units to introduce new rules, checklists and automatic alerts that help care-givers to prevent fall-out before it takes place.

Improved Compliance

CMS
42%
in 2 years

Rased Quality Rating
### 95%
In 2013 to

Rased Quality Rating
99.6%
last year

A Collaborative Experience for Sharp

Sharp had a positive experience working with the Q-Centrix team to revise their processes and move to incorporating a third party collaborator into their workflow. Q-Centrix was able to produce clinical data outcomes, get the data onto the dashboard quicker, and respond immediately to any questions or issues. Q-Centrix proved to be a more efficient way to absorb new tasks, which keeps costs under control. Sharp staff reported that the Q-Centrix team did what they promised, getting better documentation capture, and the close working relationship made the Q-Centrix team feel like employees rather than a separate entity.

Q-Centrix helped Sharp HealthCare to:

- Raise quality rating for value-based purchasing

- Improve performance in patient care

- Become more agile in a fast-changing regulatory environment

- Boost job satisfaction in the quality department

- Keep costs under control despite the changing demands
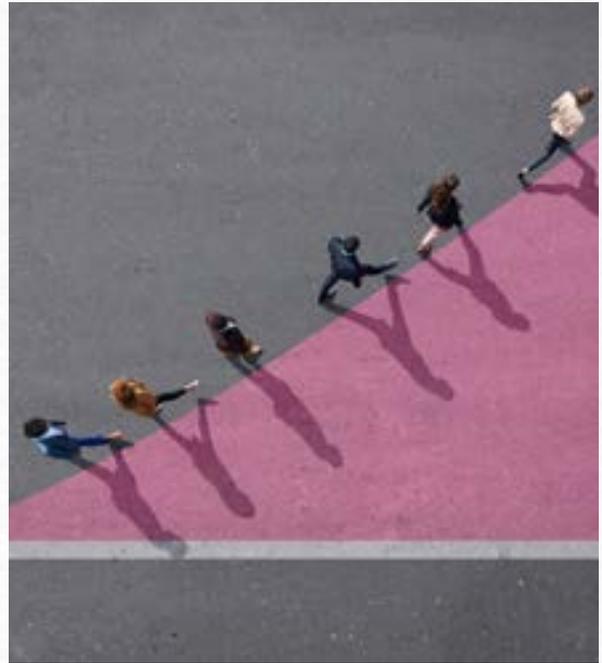
Conclusion:

Future-proofing health care: resource reallocation made simple

Centralization achieved by using a third party vendor solution allowed Sharp to stay on top of changes in regulations, flexing to accommodate changing needs according to the regulatory guidelines. Eliminating the need for training due to rule changes took away a big headache for the quality department. The agility and the ability to focus on improving patient outcomes are crucial as federal rules increasingly shift toward monitoring readmission and mortality rates. Shifting the focus towards quality improvements while managing costs and boosting job satisfaction made the effort to change valuable for the institution, the quality department staff, the clinical staff, and the patients.

About Q-Centrix

Q-Centrix® aims to improve the quality of patient care in the U.S. through the use of its market-leading technology platform, Q-Apps®, the industry's largest team of clinical quality data experts and its information and analytics assets. Processing in excess of 2 million data transactions annually, Q Centrix partners with hundreds of health care providers offering enterprise clinical quality data solutions, including quality data capture, surveillance, measure calculations, analysis, reporting, and consulting solutions. Q-Centrix's growth equity partner is TPG Growth, a premier, global private equity growth firm. For more information about Q Centrix, visit www.q-centrix.com.

QCentrix

1 N Franklin | Chicago, IL 60606
q-centrix.com