



Tool

Example of Performance Improvement Plan for Acute Care Hospitalizations

QAPI regulations mandate at least one Performance Improvement Plan (PIP) yearly.
This example looks at one of our toughest areas to improve - rehospitalizations.



100 Home Health Way, State Name, 10000

Agency Performance Improvement Plan Reducing Rehospitalizations 2024

Problem(s): _____

- Increased utilization rate of hospitals, now above the national average
- Agency is rarely notified by patient/family before going to emergency department with non-life threatening events.
- Patient/family reinforcement education is inconsistent as to who, when, and how to call agency vs. 911.
- Noted increase of rehospitalizations over weekends

Data Source: Home Health Compare and Five Star Preview Reports

Baseline Data Results: Hospitalization Rate is 14.7, in the FIVE STAR preview from January 2024. This is up two percent from the last time CMS provided the data in the October 2023 STAR Preview.

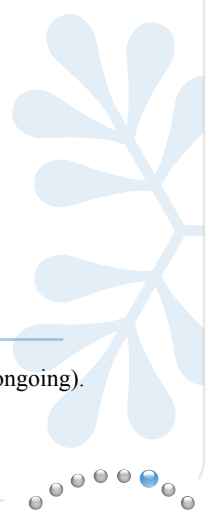
Expected Outcome: Decrease number of 60-day episodes ending in hospitalization to 12.7 as of January 2025, as evidenced by risk-adjusted ACH Rate on CMS Five Star Preview Reports.

Interventions: _____

- Ensure all patients understand the availability of the Agency on weekends and evenings, and how to reach the staff. Consider “a Test call” at SOC.
- Provide a *Call Me First Poster* to every patient.
- Instruct all staff including the on-call staff, on how to use the poster and to reinforce it on every visit by every discipline.
- Call high-risk patients on Fridays to ensure they have tools needed, questions answered and not facing any changes in symptoms.
- Anticipate specific needs and request PRN visits upfront.
- Focus on increased medical management of chronic diseases with teaching, tools, PRN medications, etc.

Barriers: _____

- Process to get printed copies of the “Call Me First” poster to staff for new and existing patients (initially and ongoing).
- Established habits by some patient population to go to ER for routine health care needs





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PDSA Cycle:

STAGE	ACTIONS
PLAN:	<ul style="list-style-type: none"> ○ Customize the “Call Me First” Poster <ul style="list-style-type: none"> ○ Agency logo, phone number, etc.
DO:	<ul style="list-style-type: none"> ○ Select one champion to test “Call Me First” Poster with five patients (existing or new) <ul style="list-style-type: none"> ○ Provide education on purpose, how to use, ideas of where to place the poster in patient’s home, etc. ○ Gather feedback on the tool and ideas for patient/family education ○ Provide phone calls to all high-risk patients on Fridays, to ensure they know when to call the Agency over weekend ○ QA Peer review on all transfers to ensure all appropriate steps were taken to avoid rehospitalizations.
STUDY:	<ul style="list-style-type: none"> ○ Refine the “Call Me First” Poster with the Agency’s phone number in a larger font size
ACT:	<ul style="list-style-type: none"> ○ Test English version with five patients

Monitor Plan:

Monitor Five Star preview reports data for reduction, increase, or plateau of the ACH rate over the next 12 months.

NOTE: Each PDSA cycle is unique, depending on the problem statement and the allowance of implementation and data lag time.

If improvement is sustained, continue to monitor each month. If there is no reduction or a small reduction in your rate, re-assess other underlying factors and add interventions.

Five Star Preview Quarterly Report:

MONTH & YEAR	PERCENTAGE
January 2024	<u>14.7</u> %
April 2024	<u>13.5</u> %
July 2024	<u>13</u> %
October 2024	_____ %
January 2025	_____ %
April 2025	_____ %

