CASE STUDY

American HealthTech®

Aloha Nursing Rehab Centre'

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LeadingAge™ CAST
center for aging services technologies

The LeadingAge Center for Aging Services Technologies (CAST) is focused on accelerating the development, evaluation and adoption of emerging technologies that will transform the aging experience. As an international coalition of more than 400 technology companies, aging-services organizations, businesses, research universities and government representatives, CAST works under the auspices of LeadingAge, an association of 6,000 not-for-profit organizations dedicated to expanding the world of possibilities for aging.

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Aloha Nursing Rehab Centre and American HealthTech: Continuous Improvements, Continuous Innovations

Categories

Clinical Decision Support Systems

Analytic Tools

Organization Name

Aloha Nursing Rehab Centre

Organization Type

SNF, ICF, Hospice, Respite, Adult Day Wellness

Organization Description

Aloha Nursing Rehab Centre (ANRC) is a tranquil oasis nestled beneath the majestic Ko'olau Mountains overlooking beautiful Kaneohe Bay. This relaxing, restful retreat has lush landscaping with outdoor water features and covered lanais.

Aloha Nursing Rehab Centre is a 140-bed nursing home, offering targeted services for skilled rehab patients, intermediate care, hospice (both respite and in house placement), and an Adult Day Wellness program. Residents enjoy daily exercise programs as well as social, educational, and cultural activities in a safe and structured environment. Committed to quality service proving Peace of Mind to residents and family alike, ANRC relies on state-of-the-art software to provide decision making support.

Project Description

"Our Vision is to be the best nursing facility in Hawaii," states Executive Director Charlie Harris, "and we knew we had an opportunity to empower staff with great tools to get the job done." Quality resident outcomes are center stage, but managing the many benchmarks and data points has become a major task.

For over two decades, American HealthTech (AHT) has been ANRC's solution partner with an integrated system for accounting, clinical, financial reporting, and interoperability with strategic partners. "Continuous improvement requires continuous innovations, and AHT contributes to great performance across our business units," offers Harris. To deliver on its mission, ANRC wraps services around each resident, and technology is the fabric that holds processes together. Every loose thread is addressed with continuous improvement and staff engagement.

Implementation Approach

Aloha Nursing & Rehab Centre (ANRC) has partnered with AHT for over two decades. During this time, ANRC has received comprehensive support and services throughout the years as they continue making improvements to get the most out of their investment. Optimizing the AHT tools was a natural progression for ANRC since they are continually seeking to utilize technology to improve quality of care. As a true technology partner, AHT guided staff during training, go-live support and services during and after implementation. Support continues to be provided online or onsite to ensure staff is knowledgeable with AHT technology and continue optimizing the usage. Additionally, ANRC has a dedicated Director of Clinical Information Systems who oversees training & implementation and continually monitors usage and optimization of the system.

Outcomes

Highlighted results

- Launched Quality Assurance and Performance Improvement (QAPI) well in advance of CMS regulations. Use AHT CMS Reports and Outcome Reporting to monitor quality goals on the fly – no reason to wait for monthly or quarterly CMS updates! We use Smart Charting and Care Planning to implement performance improvement plan (PIP) for specific resident improvements - real life charting and data collection to enact a plan-do-study-act (PDSA) rapid cycle improvement as often as necessary.

- Used AHT's HIPAA Compliant Electronic Health Record to successfully navigate 2014 Medicare Administrative Contractor (MAC) Audits without slowing down day to day operations.

- Adopted AHT Compliance Center Notifications to streamline interdepartmental communications while reducing potential HIPAA violations.

- Actively using embedded General Equivalency Mappings (GEM) and ICD Crosswalk for ICD-10 prep.

- Implemented live charting in AHT by physicians, nurse practitioners, Hospice Providers and even Psychologist.

Outcomes Report, CMS Reporting and QAPI

How do you succeed in reviewing data for 125 residents 24 hours a day? You use the tools available! Before, we had lots of data but no decisions; raw data doesn't mean anything unless you can use it. Now with Outcomes Reporting, we identify specific readmission patterns by hospital and produce graphic representations of readmission data by hospital, diagnosis, length of stay, quality indicator and more. It doesn't matter how good a job we do if we can't prove it with data. Outcomes Reporting is one of our frequent "go to" tools.

We rolled out a QAPI initiative that literally transformed our Quality Assurance program. We've mobilized all five elements of QAPI, and aligned with national goals for Advancing Excellence. We use Outcomes Reporting in AHT to conduct root cause analyses, measure results, and track progress for QAPI. With Outcomes Reporting we are a stronger, more proactive team in our quest for quality. Data-driven decisions are better than ever. AHT even allows us to export critical information for upload into AHCA's LTC Trend Tracker software.

Pain Management

We even take on items that are not high enough to trigger a state-monitored Quality Measure, but are vital to achieving our QAPI goals. Pain is a great example. We thought we had pain under control. But we were relying on diffused, dated MDS assessments which can be hard to interpret. When we pulled up our pain data in Outcomes Reporting, we saw higher than expected incidences of active pain. That was an eye opener. We immediately re-trained staff and have successfully managed to keep our Pain Quality Indicators well below national percentiles.   We're looking at our "Falls" and "Behaviors Affecting Others" data now and hope to enjoy even more success in the future.

Recovery Audit Contractor (RACs) and Medicare Administrative Contractors (MACs)

How do you respond to over 100 requests for Additional Development Records in 5 months when you're still trying to care for residents on a day to day basis? You use the tools available in the AHT EHR. The Resident Health Records allows us to identify exactly what information each Additional Development Request (ADR) is requesting, export that information to a PDF for encrypting and burning onto a CD. When you look at requests that end up being up to 800 pages long, avoiding the copy and "snail mail" route is the only logical solution to save resources – labor, copying, and even postage!

eChart

At a glance, we rely on graphs to monitor trends in weight, pulse rates, BP, and more. The familiar chart-like tabs help make staff more comfortable accessing information. Physicians enjoy the vitals reports we produce on their residents, as well as a 360 degree view of their condition.

Challenges and Pitfalls to Avoid

If you're just starting out, it's important to have a plan – and an EHR provider you can trust to stay ahead of the curve. Ensure your team is ready for this big change and communicate the benefits, but you have to start now. Have a roadmap to get you from the beginning phase to the finish line, working with your EHR provider. Continue to make improvements with advanced EHR modules, like analytics, reporting, dashboards and decision support tools and features your provider offers to improve your understanding of, and ability to improve, your quality scores and outcomes; this would help you maximize return on your investment. You're in this together for the long haul.

Lessons Learned/Advice to Share with Others

It's not just about reporting today's outcomes – we need to make an informed decision about tomorrow's outcomes based on today performance. We have to demonstrate ongoing continuous improvement – QAPI is all about the PDSA cycle. Outcomes Reporting, in conjunction with other operational clinical reports, give us real-time data for real-time decision-making. Outcomes Reporting allows the management team to get important overall results and dive deep into day to day details to ensure we are offering quality care and

producing real results to move us forward.

Your flow of referral business has always depended on your relationship with your acute care partners, but now you need to know your readmission, Quality Improvement (QI), and Quality Management (QM) numbers because you can rest assured they have your numbers at their finger tips. You must be ready to produce outcomes reports to market to your partners, continuously improve, and report your results to them. Understanding and marketing your outcomes is a critical part of today's SNF business.