

Quality:

When in Doubt, Check it Out!

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Director of Quality Improvement

NCAL[®]
NATIONAL CENTER FOR ASSISTED LIVING

Objectives

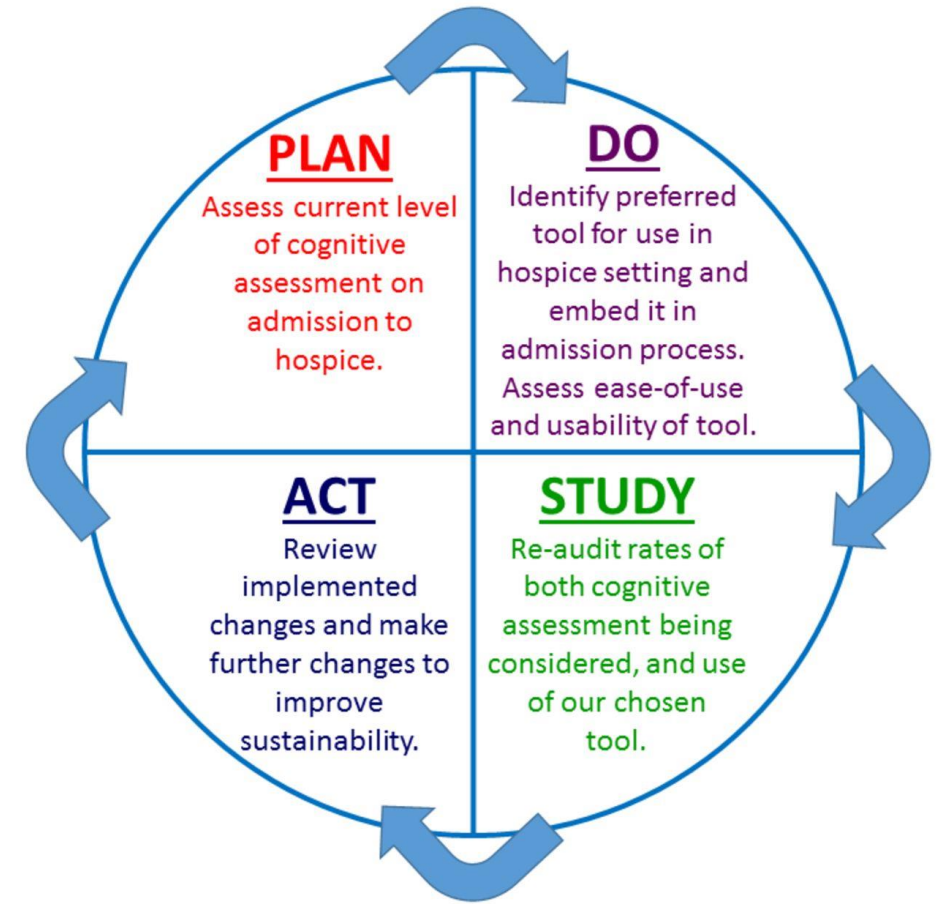
- Explain the importance of data in telling your quality story.
- Explain the core concepts of quality improvement to improve outcomes.
- Discuss how to engage teams in organization-wide quality improvement efforts.

Why is collecting
data important to
Assisted Living?



Why Should I Collect Data?

- Performance improvement
- Superior outcomes
- Regulatory current and future demands



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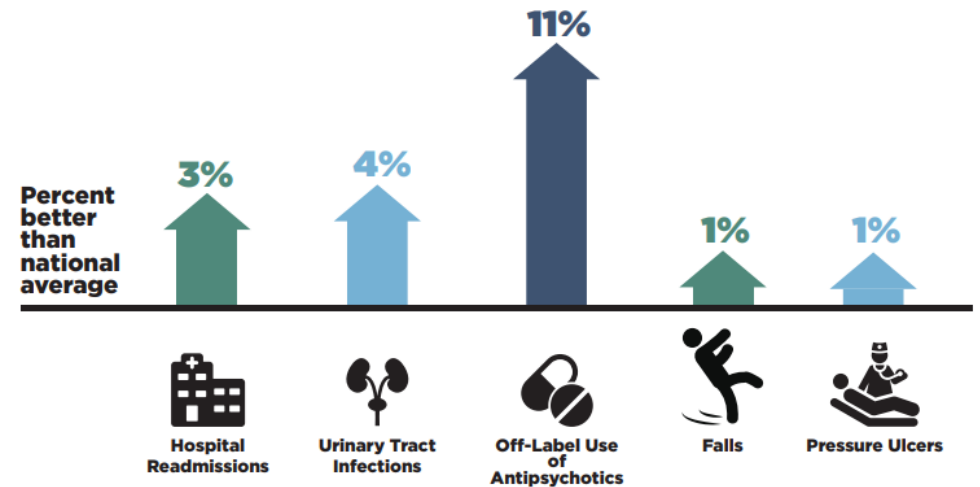
Performance Improvement

- **Increase efficiency and effectiveness of performance improvement system**
- Validate and secure links between continuous improvement, quality, and customer satisfaction
- Link mission, goals and customer expectations
- Assess and maximize organization's strengths
- **Apply systematic approaches that produce consistent results**
- Drive progressive changes

Organizations that Participate in Quality Improvement Efforts Achieve Superior Outcomes

- 30-day hospital readmissions
- Off-label use of antipsychotics
- Occupancy rates
- Operating margin
- Staffing
- Quality Metrics
- Survey
- Falls
- UTIs

Quality Performance Measures ⁱ



Regulatory Current and Future Demands

- Organizations who participate in quality improvement efforts that include data collection are **better prepared for survey**
- **ALs who participate are ahead of the regulatory curve** by incorporating quality assurance and performance improvement (QAPI) into daily operations
- QAPI and National Quality Awards **utilize systematic approach to organizational performance** and focus on leadership, responding to staff and customers, and demonstrating results through data
- Shows organization's **commitment to continuous quality improvement** efforts



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The Power of Data in Telling Your Story



Telling & “Selling” your Story

Why?

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- Important that stakeholders know
 - Who you are
 - What you do
 - You provide quality of care and services
 - You can back up your words with data to support it
- Anecdotal information is no longer sufficient
- **People** (stakeholders, regulators, referral sources, etc.) **need to see results**
- Words alone may be considered empty unless you can support them with data

Using Data to Tell Your Story

- **Data storytelling definition –**
 - Concept of building compelling narrative based on data that helps you tell your story and influence and inform your stakeholders.
- **Data storytelling is like human storytelling but provides added benefits of deeper insights and supporting evidence.**
 - Uses charts and graphs – data
 - Complicated information is simplified
 - Stakeholders can engage with your content and make decisions quicker and more confidently



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Benefits of Data Storytelling



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- Data story can move a person to take action
- Effective data can have positive impact on people and your organization
- Added value through data support
- Highlights essential key points
- Provides human touch to your data
- Offers value to your stakeholders
- Builds credibility

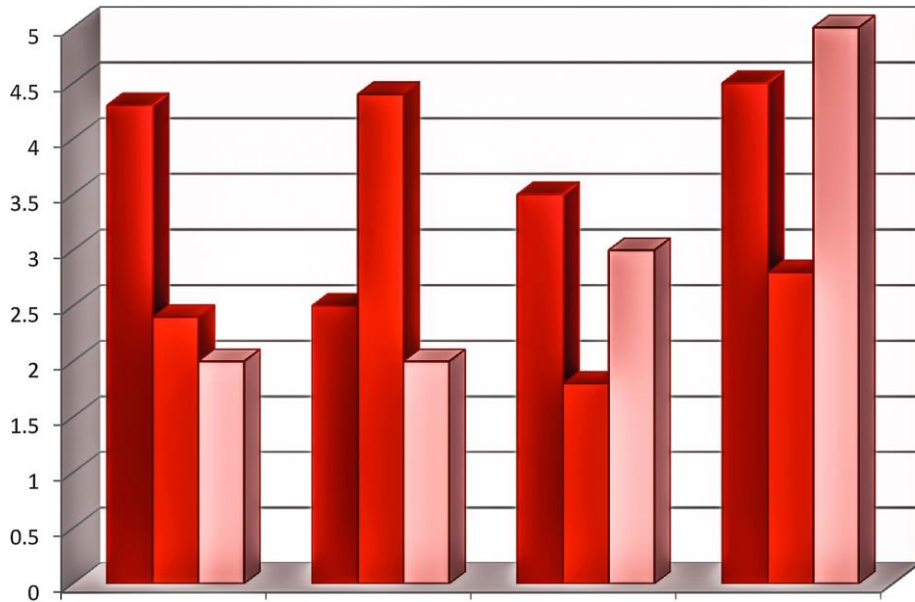
Ensuring your Data Storytelling is Valuable

- Think about your organization
 - What do you want to “prove”?
- **Collect the data**
 - How?
 - Answer - LTC Trend Tracker
- **Define the purpose** of your story
 - Use data you gathered to write the goal in one sentence
- Think about what you want to say
 - Using data to support
- Create a goal for your stakeholders
 - What action do you want them to take?



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Data Visualization in Data Storytelling



- **Data visualization** can help:
 - To reveal trends
 - Provide context and articulate insights
 - Streamline data so stakeholders, regulators, referral sources can process information
 - Improve stakeholder engagement in your organization
- Where can I get the visuals?
 - Answer - LTC Trend Tracker

Data Storytelling Elements

- **Build your narrative**
 - Tell your story and use your data as a supporting pillar
 - Help your audience understand your point of view
- **Use visuals to enlighten**
 - Visuals educate stakeholders on your narrative
 - Connecting visuals (charts, graphs, etc.) to narrative engages stakeholders with “hidden insights” that support your narrative
 - Show granular and high-level data so stakeholders appreciate your organization
- **Show data to support**
 - Your narrative offers enlightenment supported by tangible data



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Why use Data Storytelling Elements?



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- **Narrative, visuals, and data in storytelling creates emotional responses.**
 - Emotion plays role on decision-making.
 - **Linking emotional context and hard data means influencing others.**
- ❖ When narrative, visuals, and data are integrated successfully you have created data storytelling that can influence people and drive outcomes.

Where and What Data to Collect?

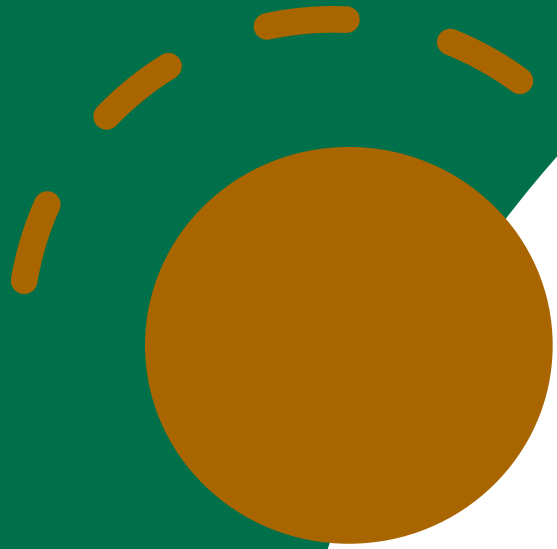
- Data is all around us, but we frequently forget to capture it.
- LTC Trend Tracker can help
- Track:
 - NCAL Measures
 - AL Turnover and Retention
 - CoreQ AL Survey Data



Tracking Data via LTC Trend Tracker

- NCAL Measures
 - Hospital admissions/readmissions
 - Off-label use of antipsychotics
 - Occupancy rates
- AL Turnover & Retention:
 - All staff turnover & drill down options
 - All staff retention & drill down options
- CoreQ AL Survey Data
 - Resident response rate & satisfaction rating
 - Family response rate & satisfaction rating

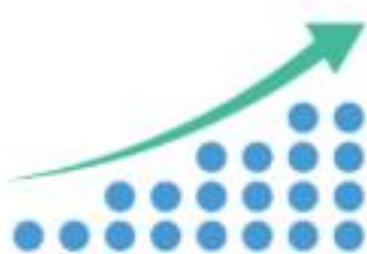




Functionalities of LTC Trend Tracker for AL Users

Added Bonus - Goal Setting

- Account Administrators who have access to Assisted Living Communities can set goals for their users.
 - Users can select their own goals on their dashboards but cannot modify organization goals.
- Goals are set per individual community.
- Reflected in the table located on the dashboard.

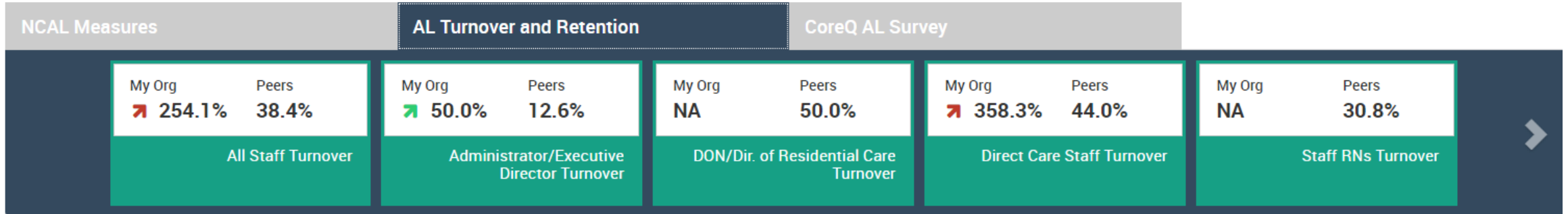


What are Permissions?

User Role	Permission
<input type="checkbox"/> Allowed to Upload RUGs Data	Upload Edit Download RUGs Data
<input type="checkbox"/> Allowed to Edit Turnover Data	Upload Edit Turnover Data
<input type="checkbox"/> Allowed to View the Cost Report	View Medicare Cost Report Info
<input type="checkbox"/> Allowed to View the RUGs Report	View RUGS (report, data download, upload edit RUGs data, dashboard metrics)
<input type="checkbox"/> Allowed to View the Turnover Report	View Turnover (report, data download, dashboard metrics)

<input type="checkbox"/> Allowed to list and report on SNF centers	View CASPER Other Can view dashboard View CASPER Citation View CASPER NHC View NHC QMs View AHCA QMs Can list and report on SNF centers View Five Star
<input type="checkbox"/> Allowed to list and report on AL centers	Can view dashboard Can list and report on AL centers View AL Quality Measures (report, data download, dashboard metrics)
<input type="checkbox"/> Allowed to Upload NCAL Measures Data	Can upload AL Quality Measures data

My Dashboard Quick View



www.ahcancal.org/ltctt

Dashboard

Export to PDF Modify Dashboard

User:
Login ID: ptruscott@ncal.org
Organization: AHCA Administrative Organization

Selection Criteria:
My Buildings: ██████████ (9 Currently Active Buildings).
Peers: Peers in Entire Nation; No peer type restriction; Centers from My Org are not included in peer group (9432 Currently Active Buildings).

My Org ↗ **254.1%** [Show Details](#)
Peers **38.4%** [View Report](#)

All Staff Turnover

My Org → **0.0%** [Show Details](#)
Peers **27.5%** [View Report](#)

Hospital Readmissions

My Org **NA** [Show Details](#)
Peers **81.0%** [View Report](#)

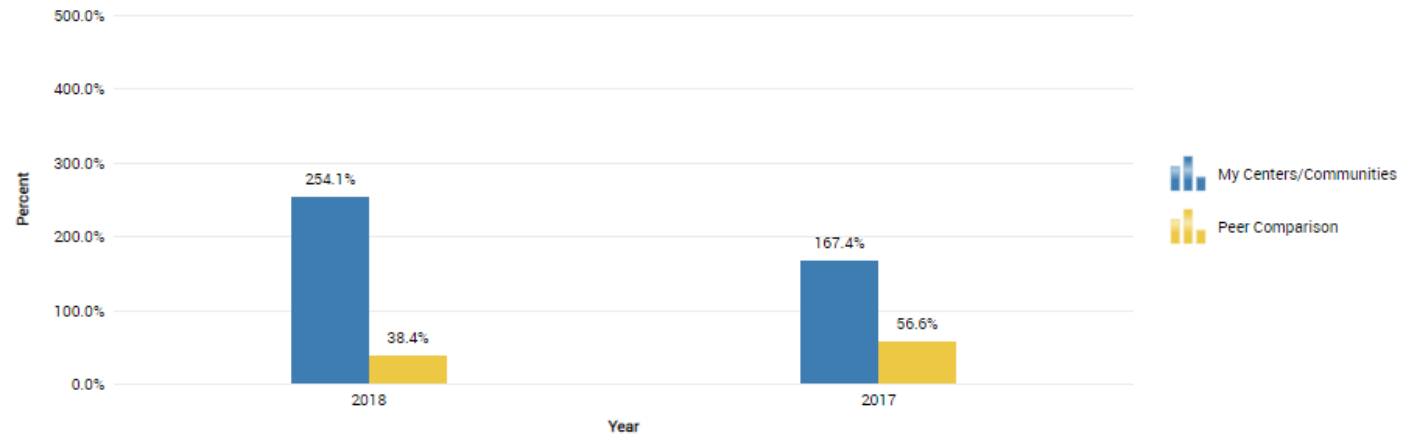
Resident Satisfaction Rating

My Org ↘ **80.4%** [Show Details](#)
Peers **77.2%** [View Report](#)

Occupancy Rate

All Staff Turnover

All Staff Turnover by Year



All Staff Turnover by Building

Due to minimum sample size restrictions, building-level detail is not available for this metric

[SET GOALS](#)

Dashboard quick view

Myths and Truths about LTC Trend Tracker

Myth	Truth
It takes hours to upload data.	Data upload only takes a few minutes, even on a slow computer.
I have to create a spreadsheet to capture data for upload.	The spreadsheet is already created with everything you need and can easily be downloaded for data entry.
I don't have time to do data capture or upload.	The process is simple, the rewards are major. Data helps draw customers, stave off federal regulation and oversight, and engages stakeholders and referral sources.

Quick screenshots on upcoming slides to show value of using LTC Trend Tracker

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 - NCAL Measures Upload
 - Multiple User/Buildings Upload
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- 📄 Manage Publications
- 📄 Publications Administration
- 📊 COVID-19 Data

NCAL Measures File Upload

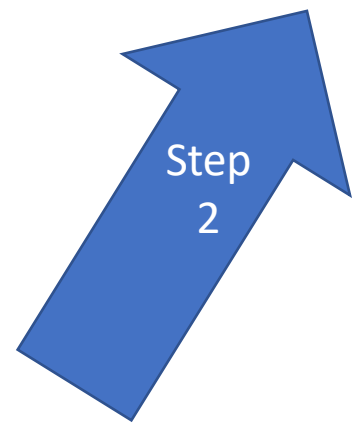
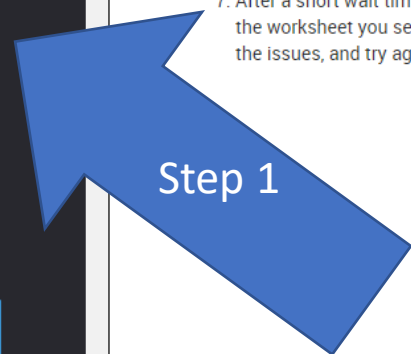
📄 Select a file (NCAL Measures Uploads must be in a Microsoft Excel file)

📄 Upload
📁 Browse ...

📄 DOWNLOAD NCAL MEASURES TEMPLATE

Instructions for uploading NCAL Measures

1. Download the NCAL Measures upload template by clicking on the "Download NCAL Measures Template" button. Make note of the location on your computer where the file was saved.
2. After the download completes, open the file.
3. Enter your data into the worksheet. As you do this, you may find it helpful to reference the Help documentation, found on www.ltc trend tracker.com under "Resource Center."
4. When you are finished entering your data, save the file, and make note of the location on your computer where it was saved.
5. Return to the "NCAL Measures File Upload" screen. Click "Browse" to select the file to upload. In the window that pop-ups, locate the file that you saved in Step 4. Click on the file name, and select "Open."
6. The pop-up window should close, and you should be on the "NCAL Measures File Upload" screen with the name of the file displayed on the screen. Click on the button that says "Upload" to upload this file. If you selected the wrong file, you can click on the button that says "Remove" and return to step 5.
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NEW!
COVID-19

Steps to download excel spreadsheets for data entry and upload

LTC Trend Tracker: Quality Measure Data Upload for Assisted Living

- 1. Each row should represent one month's worth of data. Enter the month as a number (e.g. Enter "05" to represent May) and the year as four digits (e.g. "2016")
- 2. If you have multiple communities, complete one row per community per month.
- 3. For each assisted living community, enter its NCAL ID and enter the community's name. The NCAL ID can be found at https://www.ahcancal.org/research_data/trendtracker/Pages/Register.aspx
- 4. This is for Assisted Living Residents only
- 5. Enter your data:

The number of residents in the community on the last day of the month

Hospital Admissions Data: the number of residents who spent the night in a hospital

Off-Label Antipsychotic Drug Use: the number of residents with off-label antipsychotic drug use

Hospital Readmissions: the number of residents admitted to AL directly from a hospital and the number of those residents sent back to the hospital within 30 days.

NCAL ID	Community Name	Vendor Name	Year	Month	# of residents in the community on the last day of the month	Hospital Admissions	Off-Label Antipsychotic Drug Use	Hospital Readmissions	
						# of residents who spent the night in a hospital	# of residents with off-label antipsychotic drug use	# of residents admitted to AL directly from a hospital	# of residents sent back to the hospital within the next 30 days

Sample spreadsheet to capture AL QM data – admissions/readmissions, off-label antipsychotics



Registration

Multi-Facility Organization

A "multi-facility" organization is any group (two or more) of facilities under common ownership (registration must be done by the corporate office).

REGISTER

Individual Facility/Owner

An "individual facility" is any facility that is NOT part of a multi-facility organization (if your organization has two or more facilities please have your corporate office register).

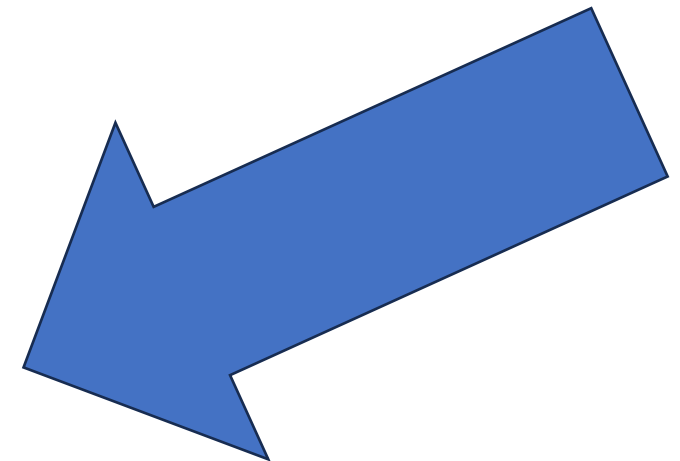
REGISTER

Medicare Provider Number (CCN/FPN) & NCAL ID Look-Up

You will need either an NCAL ID or Medicare Provider Number to register or upload data. You can look up this information using your center/community's zip code. Additionally, [please read this guide](#) prior to registering.

LOOK UP MY INFO

www.ltctrendtracker.com



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NCAL Measures File Upload

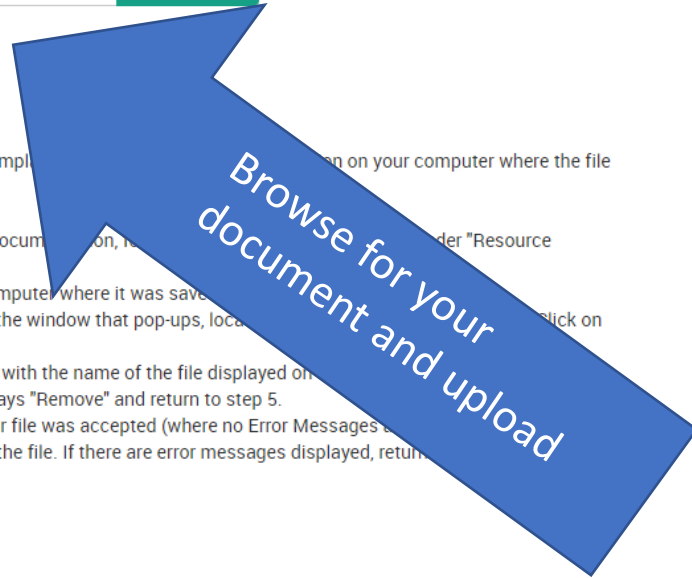
Select a file (NCAL Measures Uploads must be in a Microsoft Excel file)

📄 Upload
📁 Browse ...

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Steps to upload excel spreadsheets for data reports



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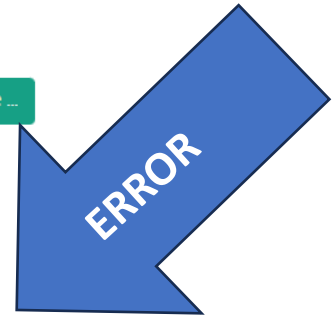
NCAL Measures File Upload

Select a file (NCAL Measures Uploads must be in a Microsoft Excel file)

Upload Browse ...

DOWNLOAD NCAL MEASURES TEMPLATE

CLEAR



Upload NCAL Measures Data Status

Error Message

Line Number 14: The value 'A24897' in "NCAL ID" does not match a value in the system. Please confirm the value and re-upload the file. If the value you entered is correct but generates this error, please contact help@lctrendtracker.com for assistance.

Line Number 15: The value 'A24897' in "NCAL ID" does not match a value in the system. Please confirm the value and re-upload the file. If the value you entered is correct but generates this error, please contact help@lctrendtracker.com for assistance.

Line Number 16: The value 'A24897' in "NCAL ID" does not match a value in the system. Please confirm the value and re-upload the file. If the value you entered is correct but generates this error, please contact help@lctrendtracker.com for assistance.

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NEW!
COVID-19 Dashboard

Access Key Data Today!

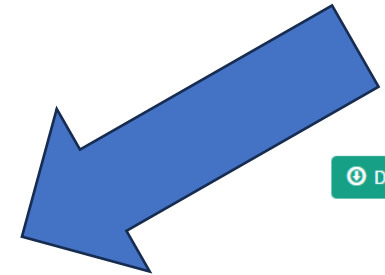
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 Upload Browse ...

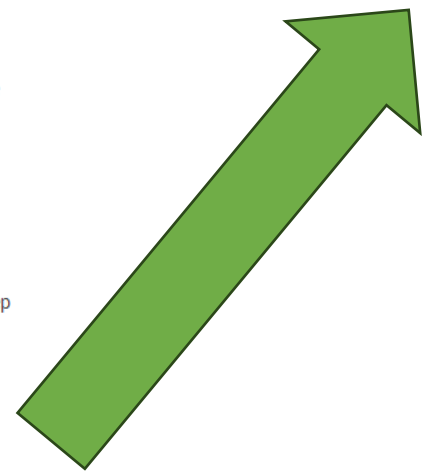
DOWNLOAD NCAL MEASURES TEMPLATE

The file "LTCTT_NCAL_Measures_DataUploadTemplate_SUCCESSFUL.xlsx" is valid and ready to be submitted. Click "Submit As Final" to confirm the loading of file LTCTT_NCAL_Measures_DataUploadTemplate_SUCCESSFUL.xlsx

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SUBMIT AS FINAL





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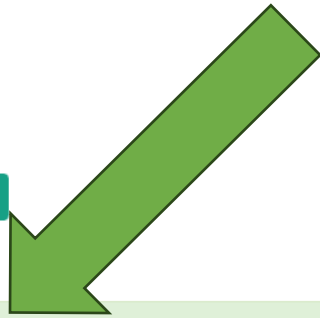
Upload
Browse ...

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File was submitted successfully

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Click on Run a Report

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Run a Report

Configure your Report Criteria

Choose a Report: AL Quality Measures Report

Choose report – AL Quality Measures

Limit my buildings for which I want to see results

Choose Divisions

- Provider Organization 104993
 - Assisted Living
 - Central
 - East Coast Centers
 - West Coast Centers

Limit my buildings if you want to

Choose Building Groups

- California Centers
- Low Performers

Choose Assisted Living Communities

- Community 80215
- Community 73231 (Non-Member)
- Community 74351 (Non-Member)
- Community 70927

Name: SAVE SELECTED CENTERS/COMMUNITIES AS BUILDING GROUP (OPTIONAL)

Limit my Peer results Geographically

- Only Peers that are in the same
- Only Peers that are in these areas:

State as my Centers/Communities

Limit peer results geographically

Limit my Peer results to only Peers that are:

For Profit

Include my selected Centers/Communities in Peer results

Limit my Peer results to Peers with Number of Beds in the range:

Please select one or more Bed Sizes

Run Report

RUN REPORT NOW

CUSTOMIZE REPORT

- Notifications
- Dashboards
- Run a Report
- Save or Schedule a Report
- Saved & Scheduled Reports
- Five-Star QM Predictor Tool
- Value-Based Purchasing Tool
- Manage Building Groups
- Administration
- Upload Data
- Download Data
- Manage Publications
- COVID-19 Data

AL Quality Measures Report

Customize Report

User:
 Login ID: DemoUser
 Organization: Provider Organization 104393

Selection Criteria:
 My Buildings: Provider Organization 104393 (4 Currently Active Buildings).
 Peers: Peers in States that match my centers; Restricted to peers that are For Profit; Centers from My Org are not included in peer group (129 Currently Active Buildings).

- PRINT
- EXPORT TO EXCEL CSV
- EXPORT TO PDF

NCAL Measures

One Quarter Rolling Window

	Jan 2023 - Mar 2023	Oct 2016 - Dec 2016	Jul 2016 - Sep 2016	Apr 2016 - Jun 2016	
--	---------------------	---------------------	---------------------	---------------------	--

NCAL Measures	Jan 2023 - Mar 2023	Oct 2016 - Dec 2016	Jul 2016 - Sep 2016	Apr 2016 - Jun 2016	
Number of Communities	1	1	2	3	My Centers
	NA	50	98	95	My Peers
+ Hospital Admissions	9.3%	7.9%	10.5%	5.7%	My Centers
	NA	6.5%	6.1%	6.9%	My Peers
					More ...
- Hospital Readmissions	NA	50.0%	25.0%	41.7%	My Centers
	NA	41.6%	37.4%	36.6%	My Peers
					More ...

NCAL ID	Community Name	Number of residents sent back to the hospital within the next 30 days		Number of residents admitted to AL directly from a hospital		Hospital Readmissions	
		Jan 2023 - Mar 2023	Oct 2016 - Dec 2016	Jan 2023 - Mar 2023	Oct 2016 - Dec 2016	Jan 2023 - Mar 2023	Oct 2016 - Dec 2016
A24894	Community 60215	0		0		NA	
A26744	Community 73231 (Non-Member)						
A04911	Community 74251 (Non-Member)						
A23356	Community 76927		1		2		50.0%

Warning: data in the drill down could be newer than data displayed on your report.

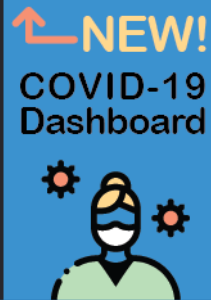
EXPORT TO EXCEL CSV

	Jan 2023 - Mar 2023	Oct 2016 - Dec 2016	Jul 2016 - Sep 2016	Apr 2016 - Jun 2016	
+ Occupancy Rate	94.6%	86.4%	86.0%	76.2%	My Centers
					More ...

NEW!
 COVID-19 Dashboard

Access Key Data Today!

- Notifications
- Dashboards
- Run a Report
- Save or Schedule a Report
- Saved & Scheduled Reports
- Five-Star QM Predictor Tool
- Value-Based Purchasing Tool
- Manage Building Groups
- Administration
- Upload Data
- Download Data
- Manage Publications
- Publications Administration
- COVID-19 Data



AL Quality Measures Report

[← GO BACK TO REPORT](#)

NCAL Measures - Occupancy Rate - One Year Rolling Window

User:

Login ID: ptruscott@ncal.org
Organization: AHCA Administrative Organization

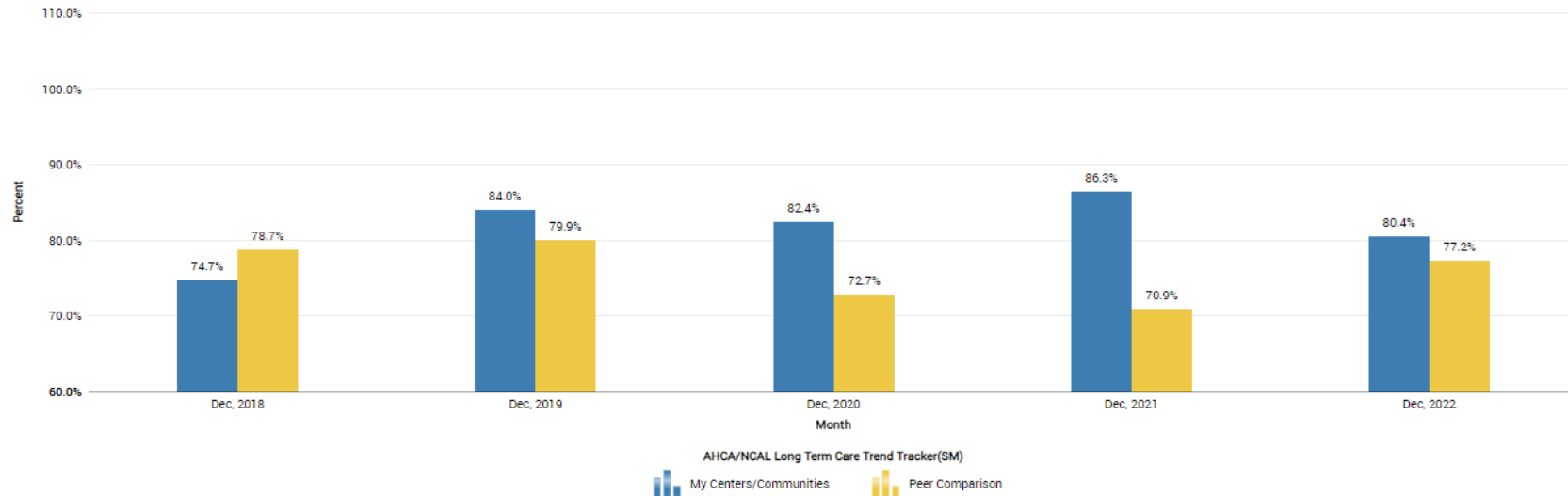
Selection Criteria:

My Buildings: ██████████ (9 Currently Active Buildings).
Peers: Peers in Entire Nation; No peer type restriction; Centers from My Org are not included in peer group (9432 Currently Active Buildings).

- [PRINT](#)
- [EXPORT TO EXCEL CSV](#)
- [EXPORT CHART](#)

AL Quality Measures Report: NCAL Measures - Occupancy Rate - One Year Rolling Window

My Buildings: Bee Hive Homes (9 Currently Active Buildings). Peers: Peers in Entire Nation; No peer type restriction; Centers from My Org are not included in peer group (9432 Currently Active Buildings).



Checklist for Submitting Data

- ✓ Download the data entry sheet
- ✓ Enter data and make sure to save it
- ✓ Upload data and make sure you receive the message data was uploaded successfully
- ✓ Go to report, run report, and make sure to customize at bottom and choose monthly, hospital readmissions, and off-label use of antipsychotics as measures
- ✓ You will see your current month's data
 - ✓ If you don't see your data, then your upload wasn't successful – which we will talk about on the next slide

I Don't See My Data?????????

HELP!!!!!!

- ✓ Double check the upload sheet and make sure you have the correct month and year
- ✓ Make sure you are using upload excel file and NOT download file
- ✓ Try to upload the excel file again and check data
- ✓ If it is still not there, send an email to help@ltctrendtracker.com explaining the problem and attach your upload sheet – and screen shots, if possible.



Added Bonus of LTC Trend Tracker –
Your AL Top-Line Report

Your Assisted Living Top-Line



Publication: 2022 - 1st Quarter

AL QUALITY MEASURES

Hospital Readmissions 100% Jun'21-May'22	Hospital Admissions 5.0% Jun'21-May'22
CoreQ Resident Satisfaction NO DATA Jun'21-May'22	CoreQ Family Satisfaction NO DATA Jun'21-May'22
Off-Label Use of Antipsychotics 2.5% Jun'21-May'22	

AL OPERATIONAL MEASURES

AL Aide Turnover NO DATA 2021	Overall Staff Turnover NO DATA 2021
Occupancy Rate 51.1% Jun'21-May'22	

WHAT DOES THIS DATA MEAN?

Learn more about your performance over time relative to the national average on the **following pages**. Benchmark your performance to other peer groups, like your state, on LTC Trend Tracker.

Source: LTC Trend Tracker (June 9, 2022). National data represents up to 255 communities for a given quarter. Exact sample size for each measure available on LTC Trend Tracker.

AHCA/NCAL NATIONAL QUALITY AWARDS PROGRAM

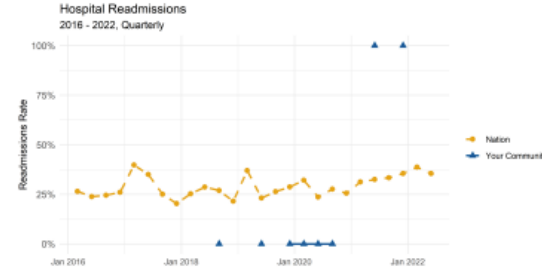


Congratulations on being a Bronze recipient. Continue the journey to Silver and remain an active recipient, [download the application today!](#)

www.LTCTrendTracker.com | help@LTCTrendTracker.com



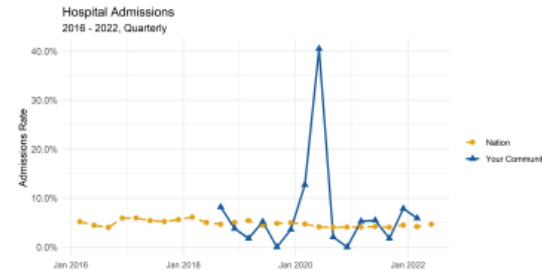
Reduce Hospitalizations



Measure (Source):	Hospital Readmissions (LTC Trend Tracker)
Numerator Definition	Number of residents sent back to the hospital within 30 days of admission from the hospital
Denominator Definition	Number of residents admitted to the community directly from the hospital.

Here is a summary of hospital readmission data submitted for the last five quarters.

	2021-Q2	2021-Q3	2021-Q4	2022-Q1	2022-Q2
Months of Data	3	3	3	2	NA
Numerator	1	0	1	0	NA
Denominator	1	0	1	0	NA
Rate	100%	NA%	100%	NA%	NA%



Measure (Source):	Hospital Admissions (LTC Trend Tracker)
Numerator Definition	Number of residents who spent the night in a hospital (includes both admitted and observation stays)
Denominator Definition	Number of residents in the community.

Here is a summary of hospital admission data submitted for the last five quarters.

	2021-Q2	2021-Q3	2021-Q4	2022-Q1	2022-Q2
Months of Data	3	3	3	2	NA
Numerator	3	1	4	2	NA
Denominator	55	57	51	34	NA
Rate	5.5%	1.8%	7.8%	5.9%	NA%

Your AL Top Line Report



Increase Satisfaction



Here is a summary of CoreQ Resident Satisfaction data submitted for the last four quarters.

	2020Q4-2021Q3	2021Q1-2021Q4	2021Q2-2022Q1	2021Q3-2022Q2
Survey Date				
Numerator	NA	NA	NA	NA
Denominator	NA	NA	NA	NA
Rate	NA%	NA%	NA%	NA%

Measure (Source):	CoreQ Resident Satisfaction (LTC Trend Tracker)
Numerator Definition:	Number of resident respondents with an average score greater to or equal to 3.0 on all the CoreQ questions
Denominator Definition:	Number of valid resident responses



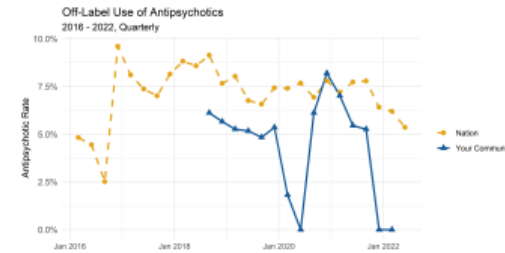
Here is a summary of CoreQ Family Satisfaction data submitted for the last four quarters.

	2020Q4-2021Q3	2021Q1-2021Q4	2021Q2-2022Q1	2021Q3-2022Q2
Survey Date				
Numerator	NA	NA	NA	NA
Denominator	NA	NA	NA	NA
Rate	NA%	NA%	NA%	NA%

Measure (Source):	CoreQ Family Satisfaction (LTC Trend Tracker)
Numerator Definition:	Number of family respondents with an average score greater to or equal to 3.0 on all the CoreQ questions
Denominator Definition:	Number of valid family responses



Reduce Off-Label Antipsychotics



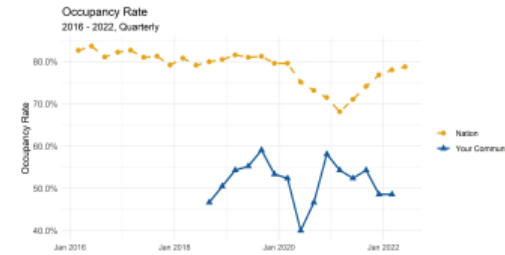
Here is a summary of off-label antipsychotic data submitted for the last five quarters.

	2021-Q2	2021-Q3	2021-Q4	2022-Q1	2022-Q2
Months of Data	3	3	3	2	NA
Numerator	3	3	0	0	NA
Denominator	55	57	51	34	NA
Rate	5.5%	5.3%	0%	0%	NA%

Measure (Source):	Off-Label Antipsychotics (LTC Trend Tracker)
Numerator Definition:	Number of residents with an off-label antipsychotic drug prescribed
Denominator Definition:	Number of residents in the community



Occupancy Rate



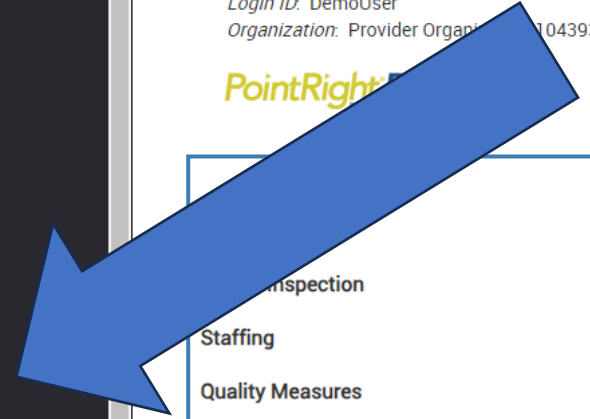
Here is a summary of occupancy data submitted for the last five quarters.

	2021-Q2	2021-Q3	2021-Q4	2022-Q1	2022-Q2
Months of Data	3	3	3	2	NA
Numerator	55	57	51	34	NA
Denominator	105	105	105	70	NA
Rate	52.4%	54.3%	48.6%	48.6%	NA%

Measure (Source):	Occupancy Rate (LTC Trend Tracker)
Numerator Definition:	Number of residents in the community
Denominator Definition:	Number of beds

Your AL Top Line Report

- Notifications
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- Download Data
- Manage Publications
- Subscribe to Publications
- View and Download Publications
- COVID-19 Data



Dashboard

Modify Dashboard

Dashboard updates may be available. Click to refresh now!

User: Login ID: DemoUser Organization: Provider Organization 104393

Selection Criteria: My Buildings: Provider Organization 104393 (5 Currently Active Buildings). Peers: Peers in States that match my centers; Restricted to peers that are For Profit; Centers from My Org are included in peer group (661 Currently Active Buildings).



	My Org	Peers
Inspection	→ 3.00	3.23
Staffing	→ 2.00	2.72
Quality Measures	↗ 4.20	3.63
	→ 4.00	3.48
Five-Star		

	My Org	Peers
Number of Citations (Standard)	↘ 4.6	5.0
Number of Citations (Complaint)	↘ 1.4	1.0
Substandard Quality of Care	↘ 0.0%	6.9%
Special Focus Centers	0	3
Survey		

	My Org	Peers
SS Rehospitalization PointRight® Pro 30™	↘ 18.9%	19.7%
Antipsychotic Use	↗ 11.7%	14.1%
DCS Turnover (SNF only)	↗ 34.5%	34.5%
LS Hospitalization PointRight® Pro Long Stay™	↘ 17.3%	17.8%
Quality Initiative		

	My Org	Peers
Risk Adjusted Discharge to Community	↘ 60.8%	61.0%
Risk Adjusted Median Length of Stay	22.6	25.4
SNF RM	↗ 20.2%	20.3%
Post Acute		

NEW!
COVID-19 Dashboard

Select a Publication:
 Do not subscribe to this publication for any of my buildings
 Subscribe only for selected buildings and divisions

Your AL Top-Line
-- Select a Publication --
Your Top-Line
Your Resident Profile
Your AL Top-Line ✓
Your Quality Initiative Progress
Your PAC Scorecard (Coming Soon)

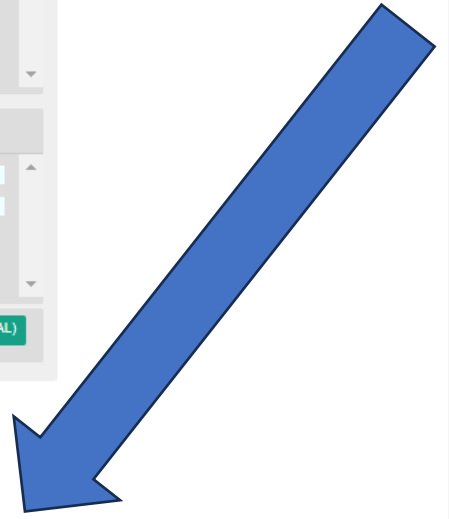


Choose Divisions
 Provider Organization 104393
 Assisted Living
 Central
 East Coast Centers
 West Coast Centers

Choose Building Groups
 California Centers
 Low Performers

Choose Assisted Living Communities
 Community 60215
 Community 76927
Name:

Select method of report download links in e-mail notifications
 Bundle All: E-mail will contain one link that will download a bundle with all your publication documents
 Bundle by Division: E-mail will contain separate publication bundle links, one for each division
 Do not Bundle: E-mail will contain individual links, one for each building



-NEW!
COVID-19
Dashboard
Access Key
Data Today!

Contact Information for LTC Trend Tracker

For LTC Trend Tracker Questions:

help@ltctrendtracker.com

LTC Trend Tracker Website:

www.ltctrendtracker.com

Quality
Improvement
to
Improve
Outcomes



Telling Your Story Through Esteemed Recognition

- **Great way to show** residents, family members and community at-large an organization's **commitment to continuous quality improvement**
- Receive promotional packet for marketing purposes
- Featured by AHCA/NCAL in national press release and website
- Recognized at AHCA/NCAL Annual Convention & Expo



TELL
YOUR
STORY

Quality Award Fast Facts

Active Quality Award recipients (2021)



BRONZE

Commitment to Quality

1,885 total awards



SILVER

Achievement in Quality

683 total awards



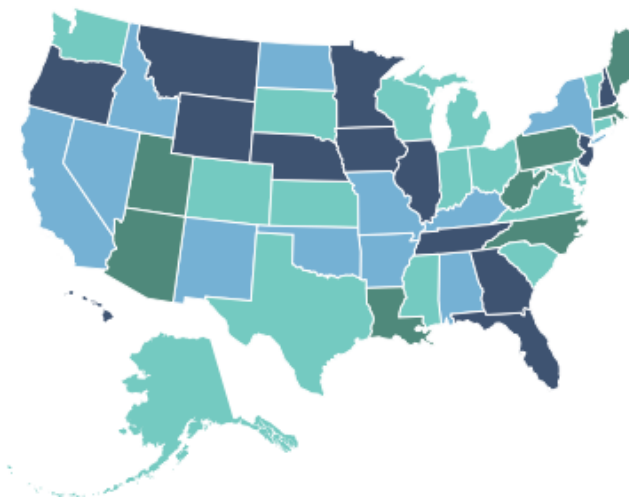
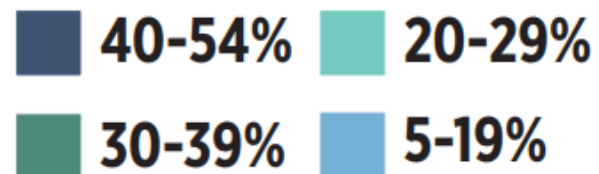
GOLD

Excellence in Quality

49 total awards

Where the Awardees Are

Percent of AHCA/NCAL Members Receiving a Quality Award



What is the Value of the Quality Award Program?

- **An outside perspective** – trained examiners spend over 100 hours reviewing each application
- **Learning from feedback** – each applicant receives objective written assessments of its strengths and opportunities for improvement based on nationally recognized Baldrige Criteria for Performance Excellence
- **Team building** – pursuing common goal motivates staff, resulting in energized improvement efforts
- **Becoming stronger and more resilient** – anticipate, prepare for, and recover from disasters, emergencies, disruptions, etc., by working through application process, results in enhanced workforce, customer engagement, organizational productivity, and community well-being during times of change
- **A focus on results** – Organizations determine most critical areas to measure, create value for key stakeholders, and improve performance in customer engagement, process performance, and health care outcomes.
- **Recognition and pride** – external acknowledgement of high-performing centers is the perfect information to share with your hospitals, stakeholders, and referral providers

Want to Find Out More?



<https://www.ahcancal.org/Quality/National-Quality-Award-Program>

We Have the Resources To Help You Succeed!

AHCA/NCAL National Quality Award

www.ahcancal.org/Quality

- Organizational Profile
 - Organizational Environment
 - Organizational Relationships
 - Organizational Situation
- Leadership
 - Senior Leadership
 - Governance & Societal Contributions
- Strategy
 - Strategy Development
 - Strategy Implementation
- Customers
 - Customer Expectations
 - Customer Engagement
- Measurement, Analysis, & Knowledge Management
 - Measurement, Analysis, Review, & Improvement of Organizational Performance
 - Information & Knowledge Management
- Workforce
 - Workforce Environment
 - Workforce Engagement
- Operations
 - Work Processes
 - Operational Effectiveness
- Results – Organizational PERFORMANCE in all KEY areas
 - Health care and PROCESS RESULTS
 - Customer RESULTS
 - Workforce RESULTS
 - Leadership and GOVERNANCE RESULTS
 - Financial, market, and strategy RESULTS
 - Organizational PERFORMANCE levels relative to other organizations

2024 Quality Award Program Deadlines

Intent to Apply

- November 16, 2023 at 8pm EST

Application

- January 25, 2024 at 8pm EST



<https://www.ahcancal.org/Quality/National-Quality-Award-Program>

A group of five diverse young adults (three women and two men) are gathered around a table in a bright, modern office setting. They are all looking intently at a laptop screen, which is the focus of their attention. The woman in the center, with long blonde hair, is smiling and clapping her hands together. The man on the left is pointing at the screen. The woman on the right has long, wavy blonde hair and is also looking at the screen. The man on the far right is wearing a red and black plaid shirt. The woman on the far right is wearing a blue denim jacket. The background shows a window with blinds, suggesting a bright, airy environment. The overall mood is collaborative and engaged.

Engaging Teams in Quality Improvement Efforts

How to Engage Teams In Quality Improvement Efforts?



Ask your team members to list the steps to make a peanut butter and jelly sandwich.

The results and responses might surprise you.

Engagement by teams provides greater insight into the challenges faced in daily operations.

Take Away from the PB&J Exercise?

Clear communication is important

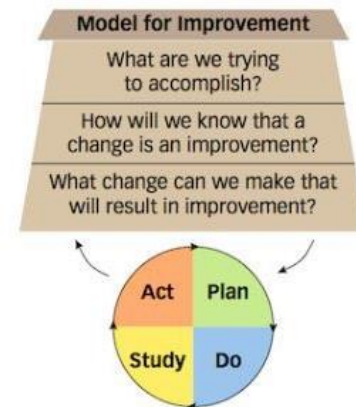
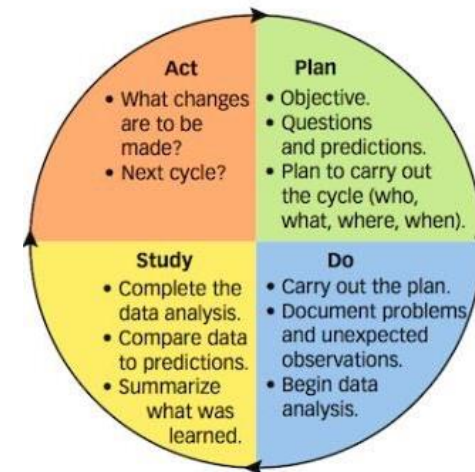
Pay attention to details

Be flexible – look at situations in different ways

Don't make simple things complicated

Quality Improvement and Engaging Your Team

- **Get the right people on the bus** to help with your quality improvement efforts (leadership/champions)
- It takes **everyone playing their part** for quality improvement
- Where to start?
 - Plan Do Study/Check Act (PDSA/PDCA)
 - Commonly used quality improvement tool
 - Others include
 - Root Cause Analysis (5 Whys)
 - Flow Charts
 - Many others!
 - Works with any quality improvement project



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PDSA: Plan

Step 1: Plan

Plan the test or observation, including a plan for collecting data.

- State the objective of the test.
- Make predictions about what will happen and why.
- Develop a plan to test the change. (Who? What? When? Where? What data need to be collected?)

Plan-Do-Study-Act Cycle (PDSA) Plan-Do-Check-Act Cycle (PDCA)



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PDSA: Do

Plan-Do-Study-Act Cycle

(PDSA)

Plan-Do-Check-Act Cycle
(PDCA)



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Step 2: Do

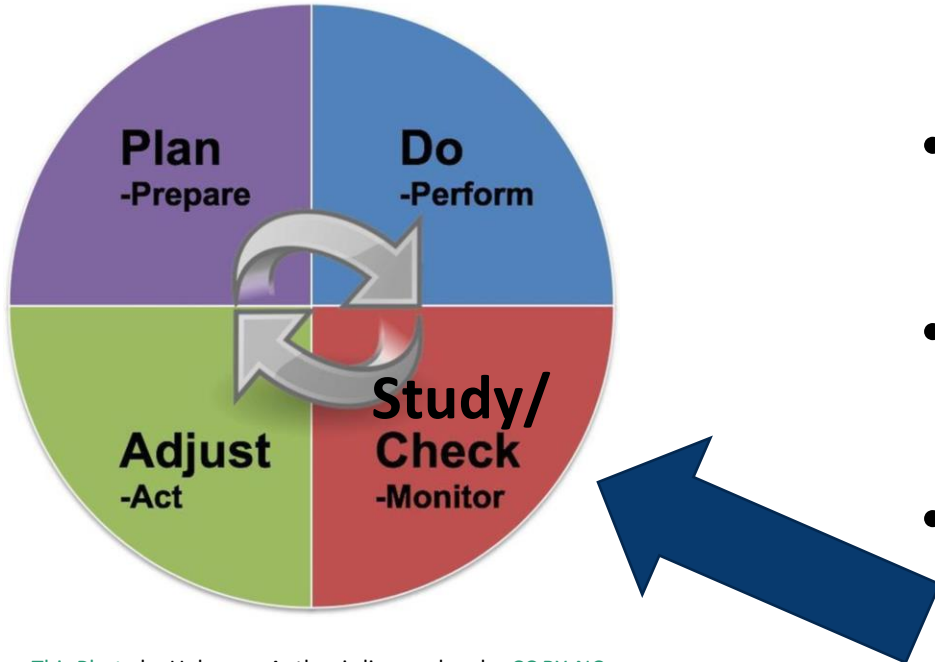
Try out the test on a small scale.

- Carry out the test.
- Document problems and unexpected observations.
- Begin analysis of the data.

PDSA: Study

Plan-Do-Study-Act Cycle (PDSA)

Plan-Do-Check-Act Cycle (PDCA)



Step 3: Study/Check

Set aside time to analyze the data and study the results.

- Complete the analysis of the data.
- Compare the data to your predictions.
- Summarize and reflect on what was learned.

PDSA: Act

Step 4: Act/Adjust

Refine the change, based on what was learned from the test.

- Determine what modifications should be made.
- Prepare a plan for the next test.

Plan-Do-Study-Act Cycle (PDSA) Plan-Do-Check-Act Cycle (PDCA)



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RCA: 5 Why's Example

- Problem statement – Falls happened in shower room
- Why? – Why did the fall happen?
 - Water on the floor.
- Why? – Why was there water on the floor?
 - Air conditioner was leaking water.
- Why? – Why was the air conditioner leaking water.
 - Because the drain tube was clogged.
- Why? – Why was the drain tube clogged?
 - It had calcium build up and a crack in it
- Why? – Why was there calcium build up and a crack in the tube?
 - No process for checking condition of drain tubes and/or air conditioner parts unless broken.
- RCA – no process/system for checking air conditioner drain tubes
- Solution – Develop process/system

What is Your Data Telling You?



Demonstrate good clinical care/outcomes?



Low readmission rates?



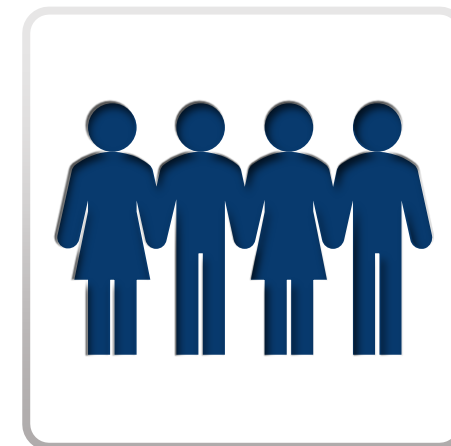
Excellent customer experience scores?



Staff stability?

Share Your Outcomes

- **Share outcomes** with staff, residents and families
- **Show progress** in the break room
- **Talk about outcomes** at meetings, resident and family council
- **Share with other providers, referral sources, etc.**



Looking Ahead...



High quality care will always deliver long range success.



Data matters more than ever before.



Embrace change. It is the only constant we have.

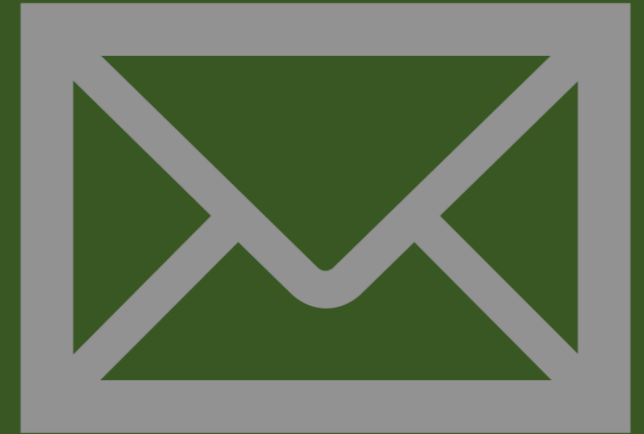
Thank You!

Any Questions?

Contact Information

Pamela Truscott – ptruscott@ncal.org

LTC Help Desk – help@lctrendtracker.com





IMPROVING LIVES *by*
DELIVERING SOLUTIONS *for*
QUALITY CARE