

MAHQ Quarterly

Maine Association for Healthcare Quality
maineahq.org

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A key concept of Operational Excellence is the "Gemba" or going to the place where value is created.

Staff track and report on their Key Performance Indicators (KPI) on a daily basis.

"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel."

Maya Angelou

Operational Excellence Goes to Where the Work Happens

by Suneela Nayak, Director of Operational Excellence, Maine Medical Center;
Jeff Gregory, Project Manager, Maine Medical Center

John Toussaint, CEO of the ThedaCare Center for Healthcare Value has observed, "Teaching frontline staff to apply a standard process to solving problems encourages, excites, and engages them in ways I never imagined." Continuous improvement in the form of Operational Excellence involves a disciplined daily process of gathering data and assessing performance on key metrics selected with the intent of providing immediate corrective action or follow-up.

In this model, front-line staff is responsible for data collection, analysis and visual presentation every day. Both staff and leaders are responsible for reviewing the data and engaging in problem solving. Leaders are responsible for supporting staff by providing appropriate resources as issues arise.

The daily focus of Operational Excellence engages front-line staff and leadership in the responsibility and accountability for daily work, and creates sustainable infrastructure for doing so. This involves Daily Huddles and Gemba walks: The Daily Huddle gives leaders an opportunity to review

key measures across the organization and identify needs or concerns from the previous 24-48 hours, and the daily Gemba Walk where leaders learn about progress on Key Performance Indicators (KPI) for each department.

The Gemba Walk, one of the main components of Operational Excellence, has leaders 'going to the place where value is created'. The original Japanese term comes from *gembutsu*, which means "real thing." In the hospital or practice setting, this is where patients and families use our services. Additionally, this is a time when leaders are able to engage staff, understand their work, coach and remove barriers that prevent them from doing their job effectively and efficiently.

The Key Performance Indicators are metrics selected by front-line Care teams, and can involve measures of safety, quality, experience, finance or growth.

MAHQ Fall Program

Save the Date!!

Monday
November 2nd

Maine Health
Facility
110 Free St
Portland
04101

Register at
maineahq.org

MAINE AHQ
Maine Association for Healthcare Quality



Webinar

Quality Improvement and Emotional Intelligence: What's the Connection?

Massachusetts's AHQ

Monday October 19th, 2015
12-1pm

Introduction to the concept of emotionally and behaviorally intelligent leadership (EQ/BQ) and how to begin using these leadership skills in the context of improvement initiatives.

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Link: www.mahq.org

the nation, Medicare Administrative Contractor's jurisdiction, and state. The statistics in PEPPER cannot identify the presence of improper Medicare payments; however, they can help a provider determine when their statistics differ from those of most providers.

PEPPERS are available to short-term and long-term acute care hospitals, critical access hospitals, inpatient psychiatric facilities, inpatient rehabilitation facilities, partial hospitalization programs, skilled nursing facilities, hospices and home health agencies. Each type of PEPPER includes three years of claims data, with the target areas customized for each provider type.

HOW IS PEPPER USED?

PEPPER facilitates the utilization of trended data in decision-making and quality improvement efforts. PEPPER assists organizations with focused reviews on key target areas based on CMS and OIG (national) priorities.

A Compliance Committee or Performance Improvement (PI) Team that reviews PEPPER may include staff from QI, health information management/coding, utilization review, finance, administration and the medical staff. Review of PEPPER statistics may prompt a provider to conduct focused audits of medical records. The goals of the review are to ensure that the patient's condition was documented clearly in the medical record, that the patient care delivered was necessary and that the diagnoses, procedures and/or services were correctly documented and billed.

HOW CAN QA/PI PROFESSIONALS LEARN MORE?

The PEPPERresources.org website includes information about PEPPER [distribution](#), as well as recorded PEPPER training sessions, PEPPER users' guides, sample reports, and national comparative data. Users may submit questions about accessing or utilizing PEPPER through the Help Desk.

In summary, the PEPPER Team encourages QI staff to utilize PEPPER as part of a well-rounded compliance plan.

Reducing Incorrect Payments and Improving Patient Care Through PEPPER

From National Association for Healthcare Quality

Quality Improvement (QI) professionals in healthcare organizations play key roles in coordinating federal compliance initiatives, including reviews of the provider-specific report known as the Program for Evaluating Payment Patterns Electronic Report (PEPPER). PEPPER supports the Office of the Inspector General (OIG) and Centers for Medicare & Medicaid Services (CMS) initiative to "reduce the likelihood of improper Medicare payments", and assists organizations with reviewing resource utilization and ensuring medically necessary care.

PEPPER

TMF Health Quality Institute is contracted with CMS to develop, produce and distribute PEPPERS (comparative data reports based on Medicare claims statistics) as free educational tools. In PEPPER, a provider's billing statistics in areas that have been identified as at risk for improper Medicare payments ("target areas") are compared to aggregate statistics for



Got News? We need articles/photos for future MAHQ Quarterly newsletters. If you have anything that you would like to share from the world of healthcare quality, please send to Jeff Gregory, MAHQ Communication Chair @ gregoi@mmc.org

Be sure to check us out on Facebook!

