

Thursday, June 27, 2024

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**RQITA**  
RESOURCE CENTER

**MBQIP Critical Access Hospital Quality  
Improvement: Nebraska CAHs MBQIP  
101**

# Objectives



- Participants will meet the Telligen RQITA team and understand our role in MBQIP
- Participants will be able to identify MBQIP measures, how they are submitted understand the benefits of participation in MBQIP
- Participants will learn what resources and support are available to them

# About Telligen

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**50 years** providing expertise and solutions that produce true, measurable results



Team Telligen is made up of more than **600 clinical and technical** professionals supporting clients nationwide



As a **100-percent employee-owned** company, our employee-owners drive our business, our solutions and share in our success



# The RQITA Team



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# Role of Rural Quality Improvement Technical Assistance Center (RQITA)



The goal of RQITA is to improve quality and health outcomes in rural communities through technical assistance to beneficiaries of Federal Office of Rural Health Policy (FORHP) quality initiatives, which are focused on quality measure reporting and improvement.



RQITA is intended to add expertise related to quality reporting and quality improvement, not to replace technical assistance support already in place.



## Resources and Services

- Monthly Newsletter
- Up-to-date resources, guides and tools
- 1:1 technical assistance
- Learning and action webinar events
- Recorded trainings
- [TASC Rural Center website](#)
- [Telligen RQITA website for quality improvement resources](#)

# Overview of MBQIP



# MBQIP Overview



- What is MBQIP?
  - Medicare Beneficiary Quality Improvement Project (MBQIP) is a Quality improvement (QI) activity under the FORHP funded Medicare Rural Hospital Flexibility (Flex) grant program.
- What is the goal?
  - The goal of MBQIP is to improve the quality of care in CAHs by increasing quality data reporting and driving improvement activities based on the data.
- How is that done?
  - MBQIP achieves its goals by increasing quality data reporting by CAHs and then driving quality improvement activities based on the data.
  - MBQIP provides an opportunity for individual hospitals to look at their own data, measure their outcomes against other CAHs and partner with other hospitals in the state around quality improvement initiatives to improve outcomes and provide the highest quality care to each and every one of their patients.
- What role does MBQIP fulfil?
  - MBQIP establishes a common set of rural-relevant hospital metrics, technical assistance, encouragement, and support.
  - MBQIP provides the ability for FORHP to demonstrate impact of hospital and state-based efforts on a national scale.

# Other quality programs and MBQIP alignment



MBQIP has alignment with CMS quality measures reporting programs. Many quality improvement programs exist for rural facilities. Educational offerings and alignment may be seen within your state.

## Quality Measures Reporting Programs

- CMS Programs:
  - Inpatient Quality Reporting (IQR)
  - Outpatient Quality Reporting (OQR)
  - CMS Star Ratings (HCAHPS/Overall)
  - Medicare Promoting Interoperability Program
- CDC Programs:
  - National Healthcare Safety Network(NHSN)
- State Quality Reporting Programs

## Quality Improvement Programs

- Hospital Quality Improvement Contractors (HQIC)
- Quality Improvement Network-Quality Improvement Organizations (QIN-QIO)
- Quality Payment Program Small, Underserved & Rural Support (QPP SURS)



# What is the Benefit of MBQIP to Critical Access Hospitals (CAHs)?



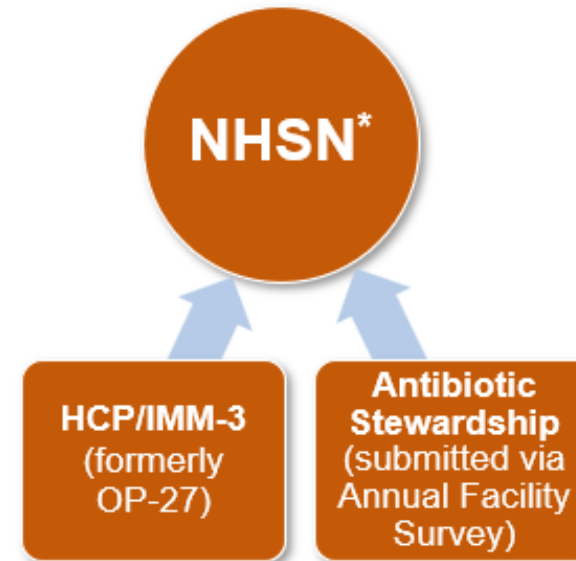
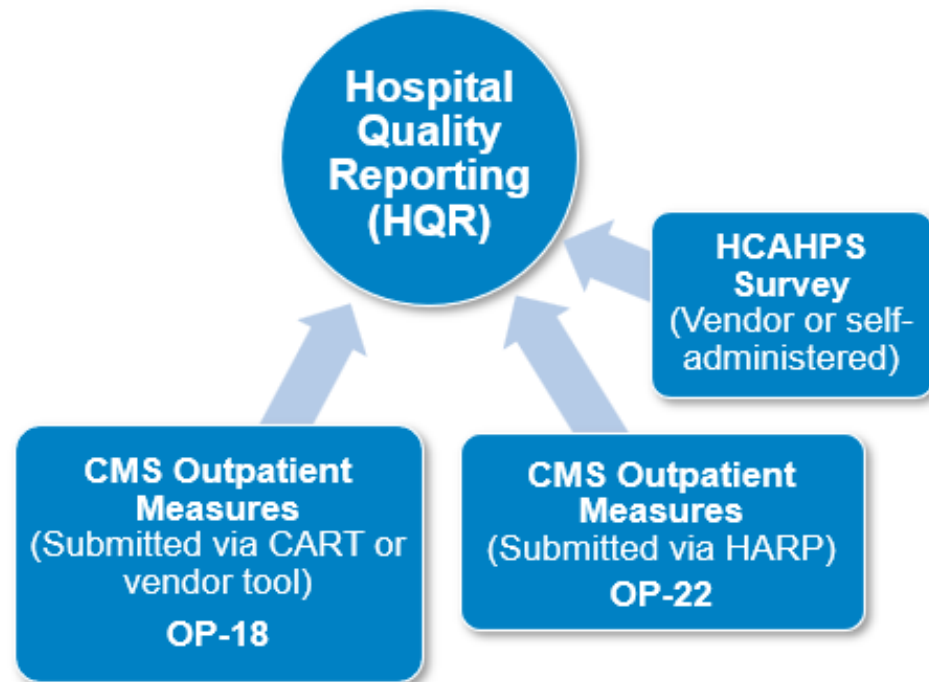
- **Demonstrate value and quality of care to the community**
- Engage in quality improvement initiatives with rural peers and experts
  - Improve patient experience
  - Empowering persons and clinicians to make decisions about their healthcare
- Establish a common set of rural-relevant measures for quality improvement (patient safety, patient experience, care coordination, emergency department)
  - Data that drives action
  - Rural-relevant benchmarking
- Increase hospital-level capacity for participating in federal and state reporting programs
  - Value-based payment programs
- Access to Flex program resources and assistance
- For those participating in Small Rural Hospital Improvement Program (SHIP), MBQIP is a required priority area
- Aligns with CAH conditions of participation

# Current Core MBQIP Measures



Core MBQIP Measures			
Patient Safety/Inpatient	Patient Engagement	Care Transitions	Outpatient
<p><b>HCP/IMM-3 (formerly OP-27):</b> Influenza Vaccination Coverage Among Healthcare Personnel (HCP)</p> <p><b>Antibiotic Stewardship:</b> Measured via the Centers for Disease Control and Prevention National Healthcare Safety Network (CDC NHSN) Annual Facility Survey</p>	<p><b>Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)</b></p> <p>The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics:</p> <ul style="list-style-type: none"> <li>• Communication with Doctors</li> <li>• Communication with Nurses</li> <li>• Responsiveness of Hospital Staff</li> <li>• Communication about Medicines</li> <li>• Discharge Information</li> <li>• Cleanliness of the Hospital Environment</li> <li>• Quietness of the Hospital Environment</li> <li>• Transition of Care</li> </ul> <p>The survey also includes screener questions and demographic items. The survey is 29 questions in length.</p>	<p><b>Emergency Department Transfer Communication (EDTC)</b> One composite; eight elements</p> <ul style="list-style-type: none"> <li>• <b>All EDTC Composite</b></li> <li>• Home Medications</li> <li>• Allergies and/or Reactions</li> <li>• Medications Administered in ED</li> <li>• ED provider Note</li> <li>• Mental Status/Orientation Assessment</li> <li>• Reason for Transfer and/or Plan of Care</li> <li>• Tests and/or Procedures Performed</li> <li>• Test and/or Procedure Results</li> </ul>	<p><b>Emergency Department (ED) Throughput</b></p> <ul style="list-style-type: none"> <li>• <b>OP-18:</b> Median Time from ED Arrival to ED Departure for Discharged ED Patients</li> <li>• <b>OP-22:</b> Patient Left Without Being Seen</li> </ul> <p>*The AMI Outpatient measures, OP-2 and OP-3 are being removed by the center for Medicare &amp; Medicaid Services (CMS) following submission of Quarter 1 2023 data.</p>

# Core MBQIP Measures Reporting



\*National Healthcare Safety Network

†Emergency Department Transfer Communication

# Additional MBQIP Measures



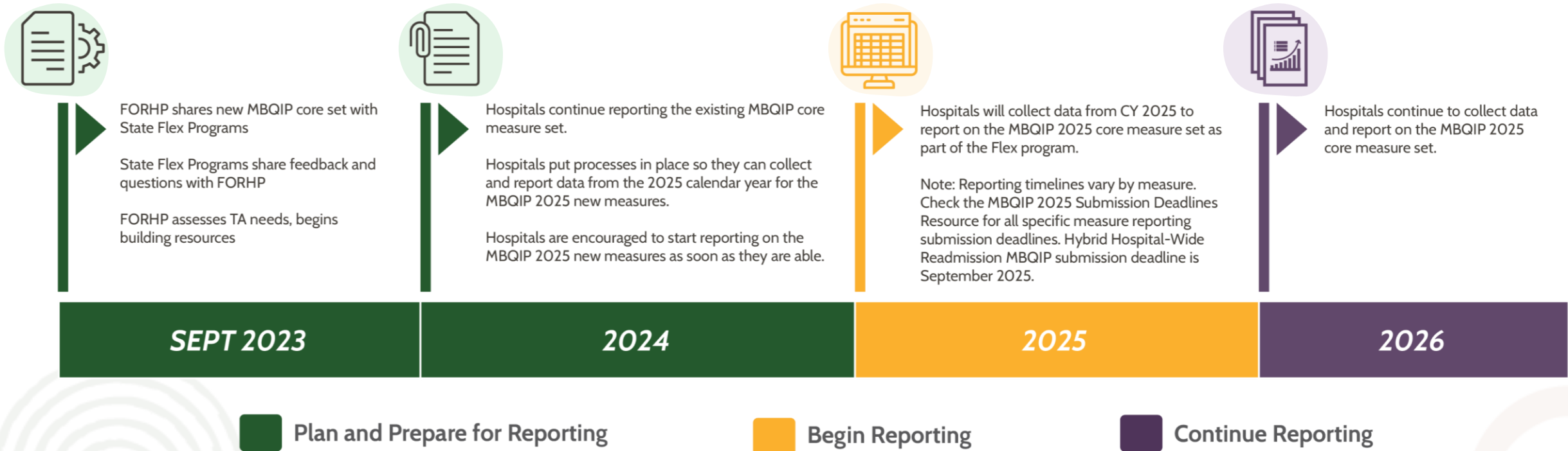
Suggested Additional Quality Measures for Flex Improvement Activities				
Global Measures	Patient Safety	Patient Experience	Care Coordination	Emergency Department
<p>Quality Improvement Basics</p> <p>Quality Related Certification</p>	<p>Antibiotic Use (AU)</p> <p>COVID Vaccination</p> <p>Healthcare-Associated Infections (HAI)</p> <p>Perinatal Care</p> <ul style="list-style-type: none"> <li>• Birthing-Friendly Hospital Designation</li> <li>• PC-01: Elective Delivery</li> <li>• PC-05: Exclusive Breast Milk Feeding (eCQM)</li> </ul> <p>Falls</p> <ul style="list-style-type: none"> <li>• Falls with Injury</li> <li>• Patient Fall Rate</li> <li>• Screening for Future Fall Risk</li> </ul> <p>Adverse Drug Events (ADE)</p> <ul style="list-style-type: none"> <li>• Opioids</li> <li>• Glycemic Control</li> <li>• Anticoagulant Therapy</li> </ul> <p>Patient Safety Culture Survey</p> <p>Inpatient Influenza Immunization</p> <p>eQMs</p> <ul style="list-style-type: none"> <li>• VTE-1: Venous Thromboembolism Prophylaxis</li> <li>• ED-2: Median Admit Decision Time to ED Departure Time for Admitted Patients</li> </ul>	<p>Emergency Department Patient Experience</p> <p>Swing Bed Patient Experience</p> <p>Clinic Group CAHPS</p>	<p>Discharge Planning</p> <p>Medication Reconciliation</p> <p>Swing Bed Care</p> <p>Claims-Based Measures: The following Measures are automatically calculated for hospitals using Medicare Administrative Claims Data</p> <ul style="list-style-type: none"> <li>• Complications</li> <li>• Hospital Return Days</li> </ul> <p>Global Malnutrition Composite Score (eCQM)</p>	<p>OP-40: ST-Segment Elevation Myocardial Infarction (eCQM)</p> <p>Chest Pain/Acute Myocardial Infarction</p> <p>ED Throughput</p> <ul style="list-style-type: none"> <li>• Door to Diagnostic Evaluation by a Qualified Medical Professional</li> </ul> <p>American Heart Association Get with the Guidelines (Stroke, Heart Failure, AMI)</p>

# MBQIP Core Measure Set



MBQIP Core Measure Set				
Current Measures in <b>black</b> (for reporting data from calendar years 2023 and 2024)				
MBQIP 2025 Core Measure Set (adding in the <b>additional orange measure</b> reporting data by calendar year 2025)				
Global Measures	Patient Safety	Patient Experience	Care Coordination	Emergency Department
<p><b>±CAH Quality Infrastructure</b> (annual submission)</p> <p><b>Hospital Commitment to Health Equity</b> (annual submission)</p>	<p><b>*HCP/IMM-3:</b> Influenza Vaccination Coverage Among Healthcare Personnel (HCP) (annual submission)</p> <p><b>*Antibiotic Stewardship:</b> Measured via Center for Disease Control National Healthcare Safety Network (CDC NHSN) Annual Facility Survey (annual submission)</p> <p><b>Safe Use of Opioids (eCQM)</b> (annual submission)</p>	<p><b>*Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)</b> (quarterly submission):</p> <p>The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics:</p> <ul style="list-style-type: none"> <li>• Communication with Doctors</li> <li>• Communication with Nurses</li> <li>• Responsiveness of Hospital Staff</li> <li>• Communication about Medicines</li> <li>• Discharge Information</li> <li>• Cleanliness of the Hospital Environment</li> <li>• Quietness of the Hospital Environment</li> <li>• Transition of Care</li> </ul>	<p><b>Hybrid Hospital-Wide Readmission</b> (annual submission)</p> <p><b>Social Drivers of Health Screening</b> (annual submission)</p> <p><b>Social Drivers of Health Screening Positive</b> (annual submission)</p>	<p><b>*Emergency Department Transfer Communication (EDTC)</b> (quarterly submission):</p> <p>The following eight elements roll up into a single composite result:</p> <ul style="list-style-type: none"> <li>• Home Medications</li> <li>• Allergies and/or Reactions</li> <li>• Medications Administered in ED</li> <li>• ED provider Note</li> <li>• Mental Status/Orientation Assessment</li> <li>• Reason for Transfer and/or Plan of Care</li> <li>• Tests and/or Procedures Performed</li> <li>• Test and/or Procedure Results</li> </ul> <p><b>*OP-18:</b> Median Time from ED Arrival to ED Departure for Discharged ED Patients (quarterly submission)</p> <p><b>*OP-22:</b> Patient Left Without Being Seen (annual submission)</p>

# MBQIP Implementation Timeline for State Flex Programs for the 2025 MBQIP Core Measure Set



# Reporting Channels for 2025 MBQIP Measures



## Hospital Quality Reporting (HQR)

- ★ Hospital Commitment to Health Equity
- ★ Hybrid Hospital Wide Readmissions
- ★ Safe Use of Opioids-Concurrent Prescribing
- ★ Screening for Social Drivers of Health
- ★ SDOH Screening Positive
- HCAHPS Survey (vendor or self-administered)
- CMS Outpatient Measures (submitted via HARP) OP-22
- CMS Outpatient Measures (submitted via CART or vendor tool) OP-18

[Medicare Beneficiary Quality Improvement Project \(MBQIP\) 2025 Measure Core Set Information Guide \(telligen.com\)](#)

## FMT Qualtrics Platform

- ★ CAH Quality Infrastructure

## NHSN

- Antibiotic Stewardship
- Influenza Vaccination Coverage Among Healthcare Personnel (HCP)

## State Flex Office

- Emergency Department Transfer Communication

# MBQIP Data Submission Deadlines contains submission deadlines for the 12 MBQIP measures

[Medicare Beneficiary Quality Improvement Project \(MBQIP\) Data Submission Deadlines \(telligen.com\)](#)

Submission Process and Deadlines <sup>1,2</sup>													
Measure ID	Description	MBQIP Domain	Reported To	Encounter Period									
				Q3 / 2023 Jul - Sep	Q4 / 2023 Oct - Dec	Q1 / 2024 Jan - Mar	Q2 / 2024 Apr - Jun	Q3 / 2024 Jul - Sep	Q4 / 2024 Oct - Dec	Q1 / 2025 Jan - Mar	Q2 / 2025 Apr - Jun	Q3 / 2025 Jul - Sep	Q4 / 2025 Oct - Dec
HCP/IMM-3 <sup>4</sup>	Influenza vaccination coverage among health care personnel	Patient Safety	NHSN	N/A	May 15, 2024 (Q4 2023 - Q1 2024 aggregate)	N/A	N/A	May 15, 2025 (Q4 2024 - Q1 2025 aggregate)	N/A	N/A	May 15, 2026 (Q4 2025 - Q1 2026 aggregate)		
Antibiotic Stewardship	CDC NHSN Annual Facility Survey	Patient Safety	NHSN	March 1, 2024 <sup>5</sup> (CY 2023 data)			March 3, 2025 <sup>5</sup> (CY 2024 data)				March 2, 2026 <sup>5</sup> (CY 2025 data)		
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	Patient Experience	HQR via Vendor	January 3, 2024	April 3, 2024	July 3, 2024	October 2, 2024	January 2, 2025	April 2, 2025	July 2, 2025 anticipated	October 1, 2025 anticipated	January 7, 2026 anticipated	April 1, 2026 anticipated
EDTC <sup>6</sup>	Emergency Department Transfer Communication	Emergency Department	Submission process directed by state Flex Program	October 31, 2023	January 31, 2024	April 30, 2024	July 31, 2024	October 31, 2024	January 31, 2025	April 30, 2025	July 31, 2025	October 31, 2025	January 31, 2026
OP-18	Median time from ED arrival to ED departure for discharged ED patients	Emergency Department	HQR via Outpatient CART/ Vendor	February 1, 2024	May 1, 2024	August 1, 2024	November 1, 2024	February 1, 2025	May 1, 2025	August 1, 2025	November 1, 2025	February 1, 2026	May 1, 2026
OP-22	Patient left without being seen	Emergency Department	HQR Secure Portal	May 15, 2024 (CY 2023 data aggregate)			May 15, 2025 (CY 2024 data aggregate)				May 15, 2026 (CY 2025 data aggregate)		



# MBQIP Data Reports

- State Flex Programs are responsible for distributing CAH reports to their CAHs
- Reports grouped by domain:
  - Patient Safety/Inpatient and Outpatient
  - Patient Experience (HCAHPS)
  - Care Transitions (EDTC)
- Format:
  - PDF for each CAH

# Example EDTC CAH Report

## Hospital-Level Care Transition Core Measures/EDTC Report

Quarter 4 - 2023

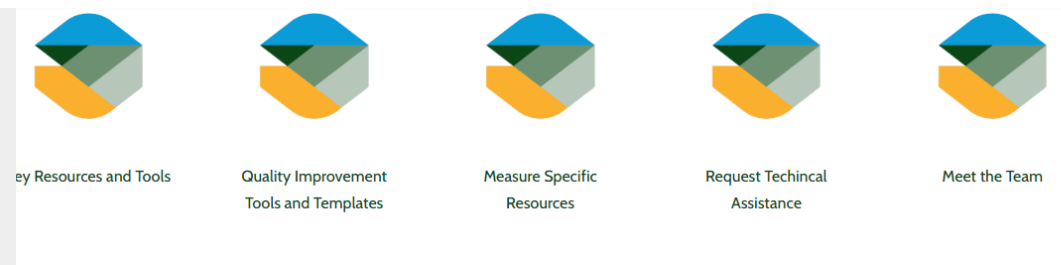
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MBQIP Quality Measure	Your Hospital's Performance by Quarter					State Current Quarter			National Current Quarter		Benchmark
	Q1 2023	Q2 2023	Q3 2023	Q4 2023	Aggregate for All Four Quarters	# CAHs Reporting	Average Current Quarter	90th Percentile	# CAHs Reporting	Average Current Quarter	Average Current Quarter
EDTC-All Composite	67%	57%	76%	87%	71%	77	87%	100%	1,195	92%	100%
Home Medications	78%	86%	85%	94%	86%	77	93%	100%	1,195	95%	100%
Allergies and/or Reactions	74%	76%	88%	90%	82%	77	93%	100%	1,195	97%	100%
Medications Administered in ED	96%	81%	97%	100%	93%	77	95%	100%	1,195	97%	100%
ED Provider Note	96%	100%	97%	100%	98%	77	91%	100%	1,195	96%	100%
Mental Status/Orientation Assessment	96%	92%	100%	100%	97%	77	94%	100%	1,195	97%	100%
Reason for Transfer and/or Plan of Care	96%	100%	100%	100%	99%	77	96%	100%	1,195	98%	100%
Tests and/or Procedures Performed	96%	95%	97%	100%	97%	77	95%	100%	1,195	97%	100%
Tests and/or Procedures Results	93%	97%	97%	100%	97%	77	94%	100%	1,195	97%	100%
Total Medical Records Reviewed (N)	N=27	N=37	N=34	N=31	N=129	N=3,634			N=51,575		

# MBQIP Resources



# [www.Telligen.com/RQITA](http://www.Telligen.com/RQITA)



The Rural Quality Improvement Technical Assistance (RQITA) Resource Center was created to help rural healthcare organizations overcome challenges and improve healthcare and quality of care using data, measurement and improvement activities. Through RQITA support, Telligen aims to assist small rural and critical access hospitals in improving health outcomes in rural communities across the United States. RQITA Resource Center staff provide technical assistance for rural healthcare organizations to expand capacity in quality improvement and ensure success in future models based on high-quality, high-value patient care.

Telligen supports small, rural healthcare organizations by:

- Expanding capacity to use data for quality improvement
- Providing technical assistance to improve the use of health information technology and related quality measurement and improvement efforts
- Supporting implementation of quality measures, measure reporting and rural-relevant measures
- Identifying and disseminating evidence-based strategies for quality improvement



## Key Resources and Tools

MBQIP Measures



Data Reporting



## Quality Improvement Tools and Templates

Quality Improvement Workbook



TeamSTEPPS



Plan-Do-Study-Act Tools



Medical Errors



## Measure Specific Resources

### Patient Safety

Adverse Drug Events	+
Antibiotic Stewardship	+
CDC AUR Measure	+
eQOMs	+
Falls	+

Healthcare-Associated Infections (HAI)	+
Patient Safety Culture Survey	+
Perinatal Care	+
Safe Use of Opioids Concurrent Prescribing	+
Vaccinations	+

### Patient Experience

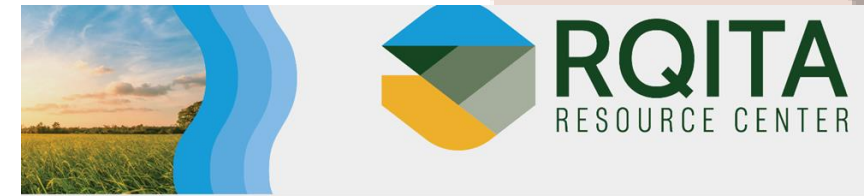
HCAHPS	+
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Emergency Department Patient Experience	+
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### Care Coordination

Claims-Based Measures	+
Discharge Planning	●
<ul style="list-style-type: none"><li>Resources and Tools To Improve Discharge and Transitions of Care and Reduce Readmissions (<a href="http://ahrq.gov">ahrq.gov</a>)</li><li>Re-Engineered Discharge (RED) Toolkit (<a href="http://ahrq.gov">ahrq.gov</a>)</li></ul>	

Medication Reconciliation	●
<a href="#">Medication Reconciliation Change Pathway</a>	
Social Drivers of Health	+
Swing Bed Care	+



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[www.Telligen.com/rqita](http://www.Telligen.com/rqita)

# Medicare Beneficiary Quality Improvement Project (MBQIP) | National Rural Health Resource Center (ruralcenter.org)



Services & Innovation About Events Programs Resources 

Home / Program / TASC / Toolkit

## Medicare Beneficiary Quality Improvement Project (MBQIP)

The Medicare Beneficiary Quality Improvement Project (MBQIP) is a quality improvement activity under the Medicare Rural Hospital Flexibility (Flex) program of the Health Resources and Services Administration's (HRSA) Federal Office of Rural Health Policy (FORHP).

State Flex Program Key Resources

General Quality Improvement Resources

Data Reporting and Use

Care Transitions

Outpatient

Patient Engagement

Patient Safety/Inpatient

Frequently Asked Questions

The goal of MBQIP is to improve the quality of care provided in critical access hospitals (CAHs), by increasing quality data reporting by CAHs and then driving quality improvement activities based on the data. This project provides an opportunity for individual hospitals to look at their own data, measure their outcomes against other CAHs, and partner with other hospitals in the state around quality improvement initiatives to improve outcomes and provide the highest quality care to each and every one of their patients.

This toolkit provides an overview of the goals, expectations, and measures for MBQIP, as well as resources for reporting and quality improvement initiatives.

### In This Toolkit

Toolkit

#### State Flex Program Key Resources

This list includes key resources for State Flex Programs implementing and supporting the Medicare Beneficiary Quality Improvement Project (MBQIP).

Toolkit

#### General Quality Improvement Resources

This list includes quality improvement resources that can be used across a variety of project topic areas.

Toolkit

#### Data Reporting and Use

These resources provide information about how to submit Medicare Beneficiary Quality Improvement Project (MBQIP) data and how to interpret data reports in order to inform quality improvement efforts.

Toolkit

#### Care Transitions

These resources focus on quality improvement for care transitions.

Toolkit

#### Outpatient

These resources focus on quality improvement for outpatient hospital services, primarily those provided in the emergency department (ED).

Toolkit

#### Patient Engagement

These resources focus on quality improvement related to the patient experience.

Toolkit

#### Patient Safety/Inpatient

These resources focus on quality improvement related to patient safety and inpatient care.



Toolkit

#### Frequently Asked Questions

View answers to frequently asked MBQIP programmatic, reporting, and data questions.

# MBQIP Key Resources



Resource	
<p><b>Webpage: TASC MBQIP Website</b> Contains archived resources for MBQIP for the previous 6 core measures. Contains linkages to new resources.</p>	<p><a href="https://www.ruralcenter.org/programs/tasc/mbqip">https://www.ruralcenter.org/programs/tasc/mbqip</a></p>
<p><b>Webpage: Telligen RQITA Website</b> Host of MBQIP resource, QI tools, and guides for all 12 core measures and additional measures</p>	<p><a href="http://www.telligen.com/rqita">www.telligen.com/rqita</a></p>
<p><b>Webpage: State Flex Program Key Resources</b></p>	<p><a href="https://www.ruralcenter.org/resources/state-flex-program-key-resources">https://www.ruralcenter.org/resources/state-flex-program-key-resources</a></p>
<p><b>Webpage: MBQIP Data Reporting</b></p>	<p><a href="https://www.telligen.com/rqita/data-reporting/">https://www.telligen.com/rqita/data-reporting/</a></p>
<p><b>MBQIP Measures and Additional Measures</b></p>	<p><a href="https://www.telligen.com/wp-content/uploads/2024/03/MBQIP_Measures_20240228_508.pdf">https://www.telligen.com/wp-content/uploads/2024/03/MBQIP_Measures_20240228_508.pdf</a></p>
<p><b>MBQIP 2025 Information Guide</b> Contains MBQIP measure details and reporting information </p>	<p><a href="https://www.telligen.com/wp-content/uploads/2024/04/MBQIP-2025-Information-Guide_v2.1_508.pdf">https://www.telligen.com/wp-content/uploads/2024/04/MBQIP-2025-Information-Guide_v2.1_508.pdf</a></p>
<p><b>MBQIP 2025 Overview Webinar</b> Recorded webinar of the 6 new MBQIP measures which details measure specification and submission details</p>	<p><a href="https://www.telligen.com/rqita/future-of-mbqip-webinar/">https://www.telligen.com/rqita/future-of-mbqip-webinar/</a></p>
<p><b>MBQIP Quality Reporting Guide</b> Contains data submission details for reporting and getting setup in reporting systems for MBQIP </p>	<p><a href="https://www.ruralcenter.org/resources/data-reporting-and-use#quality-reporting-guide">https://www.ruralcenter.org/resources/data-reporting-and-use#quality-reporting-guide</a></p>
<p><b>MBQIP Data Submission Deadlines</b> (updated monthly)</p>	<p><a href="https://www.ruralcenter.org/resources/data-reporting-and-use#data-submission-deadlines">https://www.ruralcenter.org/resources/data-reporting-and-use#data-submission-deadlines</a></p>
<p><b>MBQIP 2025 Submission Deadlines</b> Contains new measure submission deadline overviews</p>	<p><a href="https://www.telligen.com/wp-content/uploads/2024/04/MBQIP-2025-Information-Guide_v2.1_508.pdf">https://www.telligen.com/wp-content/uploads/2024/04/MBQIP-2025-Information-Guide_v2.1_508.pdf</a></p>
<p><b>Data Submission Guides for 6 new measures</b></p>	<p>Each measure section on <a href="http://www.Telligen.com/RQITA">www.Telligen.com/RQITA</a> contains Data Submission Guides which includes tips to get started, resources, and step-by-step submission instructions</p>

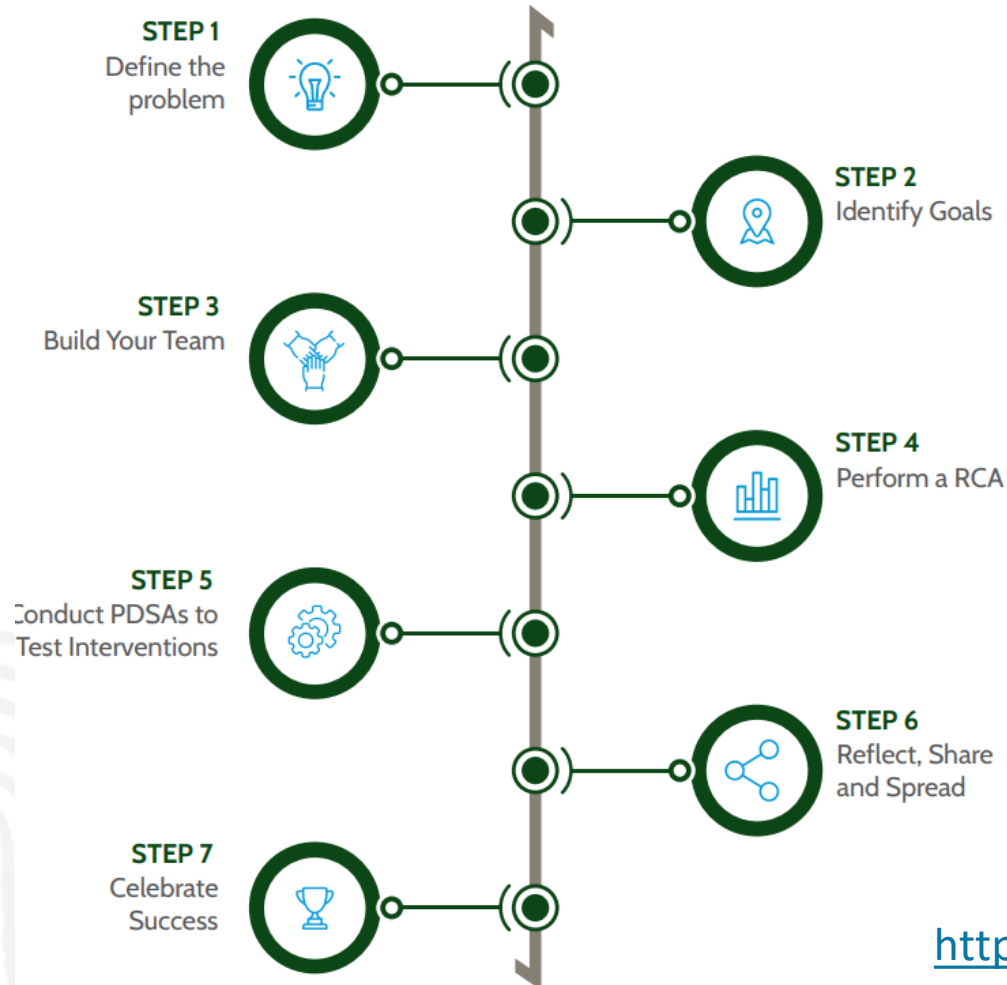
# RQITA Services



- Monthly Newsletter
- Up-to-date resources, guides and tools
- 1:1 technical assistance
- Recorded trainings
- Assistance in understanding measures and how to improve performance in CAHs
- Assistance in understanding measure specifications and reporting mechanisms
- Quality improvement skill development, training, and tools
- Developing and implementing efficient and effective improvement strategies and interventions
- Assistance in tracking the outcomes of quality improvement efforts and spreading of best practices
- Presentations for hospitals (measures, submissions, quality improvement, etc.)



# Quality Improvement Project Design



Interactive Worksheets Included in this Workbook	
<a href="#">Five Whys Worksheet</a>	The Five Whys is a simple problem-solving technique that helps to get to the root of a problem quickly.
<a href="#">Root Cause Analysis (RCA) Pathway</a>	This interactive step-by-step guide is used for completing a root cause analysis.
<a href="#">Fishbone Diagram Worksheet</a>	The fishbone diagram is a tool to help the root cause analysis team identify the causes and effects of an event and get to the root cause.
<a href="#">PDSA Worksheet</a>	This worksheet will guide you through the steps to conduct a Plan-Do-Study-Act (PDSA) process or cycle.
<a href="#">Sustainability Decision Guide</a>	This is a resource to help leaders or teams determine if the interventions and changes they are making are sustainable.
<a href="#">PIP Documentation</a>	This tool is for documenting and summarizing Performance Improvement Project (PIP) activities.
<a href="#">Community Coalition Charter</a>	The Community Coalition Charter helps coalitions to outline their motivating vision, shared purpose, members, meeting norms, schedule, etc.
<a href="#">Team Charter</a>	A project charter clearly establishes the goals, scope, timing, milestones and team roles and responsibilities for a PIP.

<https://www.telligen.com/rqita/quality-improvement-workbook/>

# Improving Outcomes for MBQIP Measures

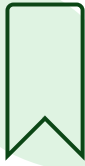


Quality staff can assist hospitals in improving outcomes for MBQIP measures through quality improvement (QI) initiatives in CAHs.

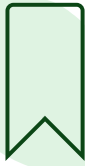
Interactive Worksheets Included in this Workbook	
<a href="#">Five Whys Worksheet</a>	The Five Whys is a simple problem-solving technique that helps to get to the root of a problem quickly.
<a href="#">Root Cause Analysis (RCA) Pathway</a>	This interactive step-by-step guide is used for completing a root cause analysis.
<a href="#">Fishbone Diagram Worksheet</a>	The fishbone diagram is a tool to help the root cause analysis team identify the causes and effects of an event and get to the root cause.
<a href="#">PDSA Worksheet</a>	This worksheet will guide you through the steps to conduct a Plan-Do-Study-Act (PDSA) process or cycle.
<a href="#">Sustainability Decision Guide</a>	This is a resource to help leaders or teams determine if the interventions and changes they are making are sustainable.
<a href="#">PIP Documentation</a>	This tool is for documenting and summarizing Performance Improvement Project (PIP) activities.
<a href="#">Community Coalition Charter</a>	The Community Coalition Charter helps coalitions to outline their motivating vision, shared purpose, members, meeting norms, schedule, etc.
<a href="#">Team Charter</a>	A project charter clearly establishes the goals, scope, timing, milestones and team roles and responsibilities for a PIP.



<https://www.telligen.com/rqita/quality-improvement-workbook/>



# Quality Reporting Center



# Quality Net

- **Subscribe to Email Listservs**
  - HARP Notify
  - Quality Net Notifications
  - CART Notifications (if you use CART)
  - HIQR and HOQR
- **Locate Measure Specification Manuals**
- **CART Tool**
- **Register for HARP account**

The screenshot shows the Quality Reporting Center homepage. At the top, there is a navigation bar with the logo and menu items: Events Calendar, Inpatient, Outpatient, ASC, SNF VBP (highlighted), and Events on Demand. Below the navigation bar is a banner image of healthcare professionals. The main content area includes a welcome message, three columns of navigation links for Inpatient, Outpatient, and ASC, and two sections for upcoming events: 'Upcoming Inpatient Events' (listing a December 9, 2023 event on Severe Sepsis) and 'Upcoming HOQR/ASCOR Events' (listing 'No Events'). A footer section states the center's role as the national support contractor for various quality reporting programs.

The screenshot shows the QualityNet website homepage. It features a search bar at the top, a 'Welcome to QualityNet!' banner with a 'Subscribe to Email Updates' button, and a 'Recent News' section with two articles from August 2023. Below the news section is a search prompt 'I am looking for quality information associated with...' followed by a grid of facility type icons: Hospitals - Inpatient, Hospitals - Outpatient, Hospitals - Rural Emergency, Ambulatory Surgical Centers, PPS-Exempt Cancer Hospitals, ESRD Facilities, and Inpatient Psychiatric Facilities.



Questions?



# RQITA

## RESOURCE CENTER

# Thank You!

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