

CMS Hospice Rural Demonstration

Domains, Indicators, and Resources for Measurement V.11 – FINAL 5-26-06

Area	Domain	Suggested Quality Indicators	Brief description of measurement	Resources/ Data Source
Patient Outcomes	Patient comfort/symptom management	Average pain severity on admission and after 1 day and 2 days of care for patients who: <ul style="list-style-type: none"> • Report on admission that they are not satisfied with pain management ; • Report (or have assessed) pain ≥ 6 on admission (whether satisfied or not); • Have a medication change for pain due to admission assessment. 	Assess pain on admission using 0-10 VAS, Faces, FLACC, PAINAD scale For patients who fit criteria: <ul style="list-style-type: none"> • Flag chart and follow-up at 1 day with reassessment including pain scale • If patients are still not below 6 or still do not report satisfaction, follow-up at 2 days Data will be collected from charts	Nursing assessment Nursing visit notes
	Patient Safety	Quarterly number of selected occurrences per 100 patient-days - aggregated for: <ul style="list-style-type: none"> • All patients (both sites) • Care centers (Haven Hospice) • Demo and Non-demo patients (both sites) 	Aggregate data on occurrences; rate is # occurrences/100 patient days A checklist will be developed to use in team meeting to facilitate identification and recording of incidents.	Occurrence report logs
Processes of Care	Admission/ Assessment	Quarterly LOS – % patients with LOS ≤ 3 days and > 180 days	Record admit and discharge time and date for each patient; calculate LOS in days	Haven – Misys Sanctuary – Patient Roster
		Percentage of patients for whom the time from election to completion of the comprehensive assessment is ≤ 5 days (Will also calculate frequencies for 1, 2, 3, 4, 5 and >5 days; and mean # days)	Aggregate data from admission and visit logs; calculate time intervals for each patient and average; calculate percentage with time of 4 days or less ; calculate mean and frequency by days to complete	Haven – Scanned form completed by HIM staff Sanctuary – Patient Roster
	Communication and care coordination	Percentage of “families” reporting “Always” on item D5 of the FEHC: how often the family was kept informed about the patient’s condition	Use FEHC per standard protocol (Haven) Use SHH satisfaction survey with item identical to FEHC (Sanctuary)	Family Evaluation of Hospice Care (Core items)
Operations	Human resources	<ul style="list-style-type: none"> • Monthly (or quarterly) turnover rates (FT/PT) include volunteers in core patient care positions 	Aggregate/calculate rate from HR /payroll records	HR/payroll records
		<ul style="list-style-type: none"> • Monthly or quarterly vacancy rates ; include volunteers in core patient care positions 	Aggregate/calculate data from HR records	HR/payroll records
Hospice Services	Volunteers	<ul style="list-style-type: none"> • Volunteer hours (patient care) 	Quarterly calculation of direct patient care volunteer hours (visits and administration) as a percentage of total patient care hours	HR/payroll and volunteer records