# Quality in Michigan Rural Health is Stronger Together

Michigan Value Collaborative Northern/Rural Health

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### Michigan Critical Access Hospital Quality Network

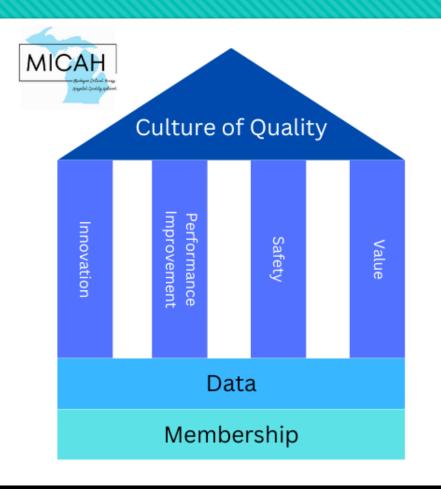
- Established in 2001
- 37 CAHs in Michigan: ALL participate in the MICAH QN Voluntarily
- Transparency and Data Sharing
- Networking through list serve, Virtual Meetings, and Face to Face Meetings
- Nationally Recognized as Leaders in Quality
  - Health Resources and Services Administration (HRSA)Federal Office of Rural Health Policy(FORHP) Top 10 State Quality Ranking Awards implemented in 2015
    - OCriteria: Reporting Compliance Rates and Levels of Quality Improvement in CAHs
    - O Michigan has been in the Top 10 annually since 2015 (8 years in a row since the conception of the award!)

### Michigan Critical Access Hospital Quality Network Infrastructure and Connections

- Recognized as Quality Partners across the State and Nationally
  - Michigan Center of Rural Health: the glue to our success
  - O MHA: Keystone Projects, Advisory Boards, Safety Initiatives, Person & Family Engagement
  - O BCBSM: Pay for Performance Peer Group V
  - Superior Health Quality Alliance: IPRO Hospital Quality Improvement Contract (HQIC)/Governors Award
  - Institute for Healthcare Improvement (IHI)-Patient Safety and Quality
  - O CMS: 5 Star Ratings, Framework for Health Equity
  - Stratis Health: Rural Quality Improvement Technical Assistance (RQITA): Advisory Boards, National Virtual Quality Improvement Mentors, MBQIP
  - iMPROve Health: participates in strategy meetings, GAE
- Vision: MICAH QN will be known as a statewide and national leader in the measurement of healthcare quality for CAHs

### MICAH QN- A Path Forward:

MICAH QN Executive Committee: SWOT, Membership Survey, Alignment with National Priorities



## Innovation/Alignment of Future State of CAHs To ensure that all MI CAHs are poised to succeed in the future state of the CAH Model

- O Maximizing Talent from Membership
- Ensuring MICAH QN is represented on appropriate National and State Committees
- Understanding the Future State of CAHs
  - Meaningful Quality Initiatives
  - CMS Framework in Rural settings
  - CMS 5 Star Methodology
  - Challenges for CAHs Related to Quality/Safety

#### Performance Improvement

To ensure that each MI CAH thoroughly understands CAH quality reporting and views the MICAH QN as a resource for Performance Improvement tools

- Data Management Analysis
  - O MBQIP (Medicare Beneficiary Quality Improvement Project) Measures
    - Areas of Focus: Patient Safety/Inpatient, Outpatient Care, Patient Engagement, and Care Transitions
  - Resources for Collection and Submission
  - O Building Performance Improvement Capacity in MI CAH's (Project Management Tools/LEAN tools, CQI, etc.

# Safety To ensure that the MICAH QN fosters and measures a Culture of Safety within each MI CAH

- Leverage the Culture of Safety Survey
- Provide Targeted Education on Key Areas of Harm
  - Workplace Violence
  - O Just Culture
  - O High Reliability

# Value of MICAH QN To ensure the sustainability and viability of the MICAH QN

- Provide valuable resources to each MICAH QN Member
- Ensure CAH Leadership understands the value of the MICAH QN
- Showcase MICAH QN
  - O Poster Presentations at state and national venues
  - Annual Report on the success and share with MI CAH Leadership and Partners across the state

#### Priorities in Healthcare for Rural Michigan

- Improving affordable access to care
- Quality care
- SDOH-community partnerships to enhance resources
- Impact of COVID
  - Financial performance
  - Competing priorities-what about quality
  - Workforce challenges-burnout, violence, wellness
  - Inpatient volumes/acuity-staff competencies
- O How do we do more with less
  - O Productive and excellent care with the lowest resources possible
- Meaningful benchmarking
  - Outpatient quality metrics
  - O CMS-delayed and focus on inpatient

No CAH Left Behind!

