



CASE STUDY

How Finger Lakes Health System Created a Culture of Quality

FINGER LAKES HEALTH SYSTEM *Geneva, NY*

VITALS

Finger Lakes Health System

Location: Geneva, NY, serving Seneca, Wayne & Yates counties

Size: 660-bed

Type: Health System

Facilities: Two hospitals, four long term care facilities, four primary care centers, an ambulatory surgery center and several specialty and teaching centers.

The shift from a fee-for-service to pay-for-performance model has caused hospitals to redefine what it means to be a quality-focused organization. Normally siloed departments of IT, quality, finance and administration have had to embrace a new culture of collaboration to achieve the government mandated quality standards that are now directly tied to revenue. Finger Lakes Health System in Geneva, NY set out to refine their organization's focus through education, collaboration and technology, and create a new culture of quality.

The Challenge

FLHS had two goals: To embrace the Institute for Healthcare Improvement's "Triple Aim¹," and to simplify existing systems and processes. Achieving and sustaining these goals would require an organization-wide cultural shift in perspective toward these two objectives. "It's a pretty tall order to have excellent quality and an exceptional patient experience at a low cost," explains Kathleen Reilly, Director of Quality and Performance Improvement at FLHS, "and it's getting harder and harder to do that."

The underpinning of culture change at FLHS was cross-collaboration, led by a hands-on CEO and a fully committed Board of Directors, up, down and across the org chart. "We understand that culture shift is very complex," admits Reilly. "It can't just be one little piece at a time."

The Solution

Reilly and her staff became a quality improvement team and created a detailed plan of engagement. They identified six key areas where collaboration, education and technology would best impact the culture, and then set forth to engage each area. "In essence, the entire health system [had to] become a learning organization."



1. Breaking down silos

Reilly's team began with breaking down silos between departments, starting with quality and finance. Collaboration was initiated between the departments, and FLHS brought in Medisolv's quality and analytics software suite to support organization-wide access to performance data and shared accountability for quality improvement.

2. Prioritizing programs

Finger Lakes integrated several provider practices over the past few years, then honed their programs to only those they could deliver with the best possible quality of patient care, and with the most positive impact on their community.

3. Engaging providers

Reilly's team created an orientation program that ensures every provider receives in-person instruction on the organization's performance improvement efforts, including: Why the program was developed, performance measures, care management, infection prevention, medication adherence, admissions practices, coding practices and current performance improvement projects. "Also, we in the Performance Improvement department attend all of the medical staff meetings."

4. Measuring what matters

To avoid becoming overwhelmed with data, Reilly and her team focused on monitoring and reducing hospital acquired conditions and readmissions, using Medisolv's ENCOR quality management and RAPID predictive analytics technology to aggregate data from all domains into quality and performance dashboards that help identify risks of early readmission and hospital acquired conditions.

5. Focusing on admissions and transitions

FLHS has long been focused on reducing readmissions. The care management team uses data and reports delivered by Medisolv to predict the likelihood a patient will be readmitted, which then allows them to take preventative measures and deliver more timely care.

6. Benchmarking and analysis

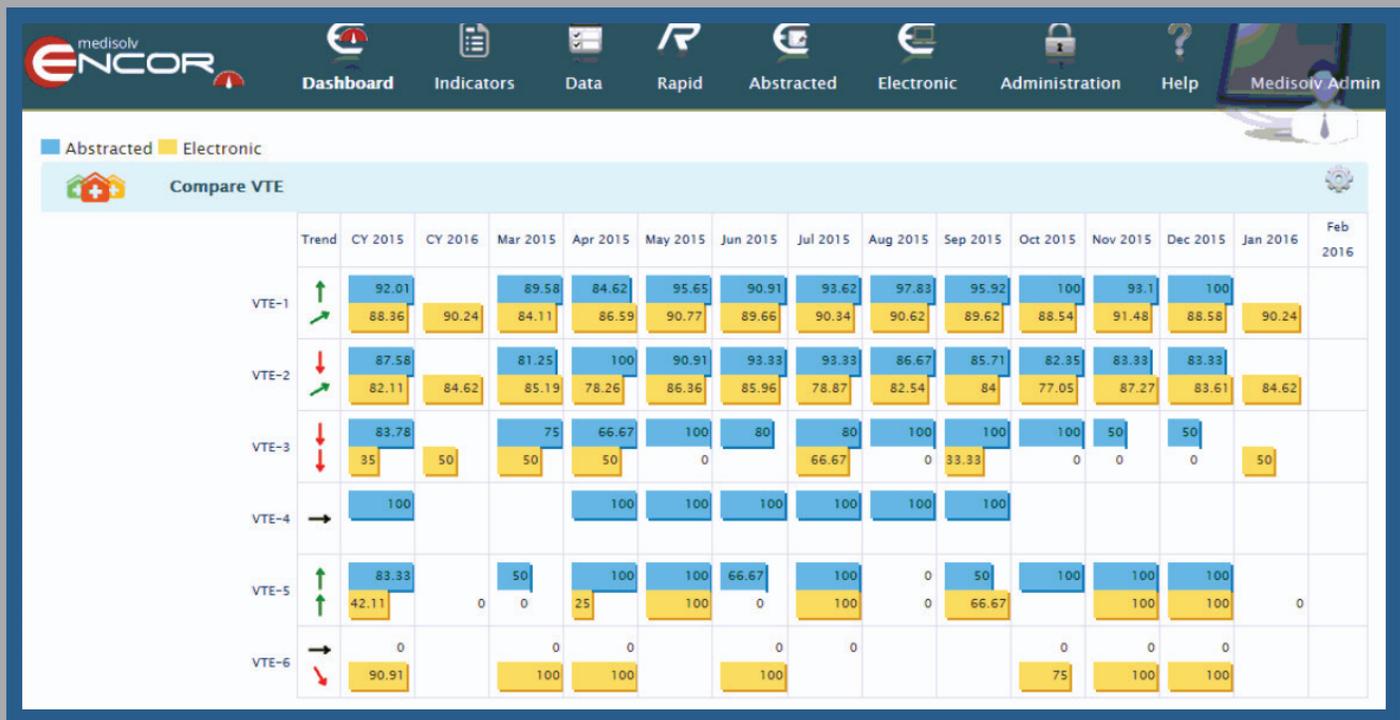
Reilly and her team use benchmarking to help them plan future improvement projects. Internal benchmarks help measure the progress of current programs.

ENCOR's dashboard displays abstracted performance measure data with electronic quality measure data. This unique comparison helps the team immediately identify performance gaps.



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- Kathleen Reilly, Director of Quality and Performance Improvement, Finger Lakes Health System



Dashboard of e-Measures and Abstracted measures displayed together. Abstracted measures are indicated in blue, electronic measures are yellow. The red and green Trend arrows indicate the direction of measure performance.

Results

“In the three years that hospitals have been subject to value-based purchasing incentives, our hospital has performed above the national total performance score.” Reilly notes the FLHS investment in Medisolv’s quality solutions continues to pay off in receiving full reimbursements each year, and has never been penalized for hospital acquired conditions or readmissions penalty.

Conclusion

Reilly highlights five recommendations for other health organizations looking to change their culture:

1. Connect the dots internally and externally
2. Monitor quality and safety reports in real time for performance improvement
3. Advance internal quality initiatives and achieve high performance on external reporting
4. Partner with a comprehensive quality improvement vendor
5. Successfully participate in other Medicare initiatives with quality components

But, the catalyst for Finger Lakes has been Medisolv. “We’re fortunate to have a single platform within our health system focused on pay-for-performance measures with data for us to look at that’s refreshed every day.”

¹http://www.ihl.org/engage/initiatives/TripleAim/Documents/BeasleyTripleAim_ACHEJan09.pdf