**2022-2023 GRANT YEAR AWARD CRITERIA**

The MT Flex/PIN Quality Award was developed by the MT Performance Improvement Network (PIN) to recognize MT Critical Access Hospitals (CAH) and their efforts in improving quality within their organization. By meeting the criteria outlined in this document, MT CAHs demonstrate leadership, community, willingness to share with peers, and a commitment to improvement.

Hospitals must meet all criteria during the grant year to qualify for an award. The Flex Grant Year is September 1, 2022 through August 31, 2023. MT Flex team will track each hospital’s progress in meeting criteria.

**CAH QUALITY PROGRAM OF THE YEAR**

Open to all Critical Access hospitals within the MT Flex Program. MT CAHs must submit an online application (open late summer) that provides a description of the CAH’s Quality Program, quality initiatives and outcomes data, and discussion of collaboration and sharing efforts with in the CAH, community, or state.

* Applications will be reviewed and voted on by a panel of MHA Staff Members.
* Quality Program of the Year recipient will receive on-stage recognition by MHA President and photo op during the Montana Healthcare Conference General Session.

**PIN QUALITY IMPROVEMENT AWARDS**

MT CAHs must meet a set of three criteria laid out by the MT Flex Program in order to be eligible to apply. Included with winning a PIN Quality Improvement Award, is announcement at the Montana Healthcare Conference, recognition in the PIN Newsletter, PIN Website, and MHA Weekly News Report, and plaque with facility name and date of award. Plaques are distributed and pictures taken at the DON/QIC Regional Meetings held in October. Press kit, press release and photos taken at regional meetings provided for hospital marketing.

**Please contact the MT Flex Team with any questions or needs for assistance:**

|  |  |  |
| --- | --- | --- |
| Jack King | Jennifer Wagner | Lindsay Konen |
| Flex Director | Rural Hospital Improvement Coordinator | Flex Program Specialist |
| 406.457.8016 | 406.457.8000 | 406.457.8002 |
| jack.king@mtha.org | jennifer.wagner@mtha.org | lindsay.konen@mtha.org |

**CRITERIA INFORMATION AND DETAILS**

**CRITERIA #1: PERFORMANCE IMPROVEMENT**
Submit baseline and outcomes data to show improvement targeted to at least one (1) improvement goal. CAHs are encouraged to select from the MBQIP or PIN Benchmarking measure/topic listed below. Performance improvement data must be submitted via online platform, and applications will open late summer of 2023.

Performance improvement may also include sustaining high improvement or scores that exceed national benchmarks. On the project report, please provide insight into work done during the course of the year to ensure high performance.

|  |  |
| --- | --- |
| MBQIP | PIN Benchmarking |
| Outpatient ED Throughput (OP-18) | Return to ED in 72 hours |
| Emergency Department Transfer Communications (EDTC) | First Time C-Section Rate |
| Readmission Rate (30-day all cause) | Operational Cost per Adjusted Patient Day |
| Adverse Drug Events | Facility-wide Falls with Injury |
| Hospital Acquired Infections | Facility-wide Pressure Ulcer  |
| Swing Bed Quality Metrics | Days Cash on Hand |
| Discharge & Care Transitions | Days in Accounts Receivable |
| HCHAPS  | Operational Cost per Adjusted Patient Day |

**CRITERIA #2: COMPLETE AND CONSISTENT DATA REPORTING**

Meet data reporting requirements for both MBQIP and PIN Benchmarking data programs.

|  |  |  |  |
| --- | --- | --- | --- |
| Program | Quarters | Due Dates | Measures |
| MBQIP | 2Q-20223Q-20224Q-20221Q-2023 | Nov 1, 2022Feb 1, 2023 May 1, 2023Aug 1, 2023 | Complete reporting MT’s Four for Four Program by reporting four MBQIP measures for four quarters indicated. (visit [mtpin.org](http://www.mtpin.org) for detailed MBQIP info!)  |
| PIN Benchmarking | 2Q-20223Q 20224Q 20221Q 2023 | Sep 15, 2022Dec 15, 2022Mar 15, 2023Jun 15, 2023 | Complete reporting of all measures for PIN Benchmarking domains for all quarters indicated (visit [mtpin.org](http://www.mtpin.org) for detailed PIN reporting info!) |

**CRITERIA #3: ENGAGEMENT AND SHARING WITH MT CAHS**

To meet criteria, CAHs must participate in a **minimum of two** activities listed below.

|  |  |  |
| --- | --- | --- |
| ACTIVITY | Dates | Completion Requirement |
| Facility Spotlight in the PIN Quarterly Newsletter | Nov, Feb, May, Aug | Submit article relating to project, event, or process that other CAHs can learn from and implement |
| Regional Meetings | Oct 2022 | Present and share facility quality improvement projects with background, measures, interventions, outcomes & follow-up plan |
| Office Hours | Monthly | Present to peers during Flex Office Hours.  |
| QI Showcase at the MHA Health Summit | Apr 2023 | Present and share facility quality improvement projects with background, measures, interventions, outcomes & follow-up plan. |
| QI Roots | All year | Meet specified project completion requirements set by QI Roots program. Must participate in activities and complete assigned tasks.  |
| QI Champions | All Year | Must apply to be a part of the cohort and commit to requirements of the program. Must participate in activities and complete assigned tasks.  |
| Lean Certification Program  | All Year | Complete all modules with practical applications/homework and attend live coaching calls. |
| Lean Internship Program | Spring/Summer 2023 | Completion of application, followed by coordination of MSU students on site to complete project.  |
| Financial & Operational Improvement Project (FOIP) | All Year | Meet specified project completion requirements set by FOIP program. Must participate in activities and complete assigned tasks.  |