**BUSINESS GUIDE** 

## The Top 5 KPIs

for Improved Facility Outcomes





All long-term care (LTC) facilities should outline specific business goals, ensuring they are consistently improving their practices and patients are receiving the best, most efficient care. By leaning on their pharmacy partners, facilities can identify key performance indicators (KPIs) and create roadmaps to reach these benchmarks while staying within the regulatory guidelines from the Centers for Medicare and Medicaid (CMS). Through our own research and experience, Omnicare has identified the top five KPIs every facility should focus on:

## Top five KPIs for facilities:

- 1. Readmission Rate: When a patient is released from a postacute nursing facility stay, they should be healthy enough to remain in their home and care for themselves. If a resident returns to the hospital within 30 days of discharge, this could affect the facility's star rating and they may incur potential payment reductions. Readmission rates can be lowered by:
  - Prioritizing patient transition from hospital to facility
  - Implementing medication regimen reviews for all new patients to optimize safety and prevent complications
  - Holding regular patient assessments throughout their LTC stay
  - Enhancing staff training on patient discharge procedures
- 2. Psychotropic Utilization Rates: CMS also grades facilities on their use of psychotropic medication across four classes: antipsychotics, antidepressants, anxiolytics and sedative hypnotics. To minimize unnecessary psychotropic medication use, partners can assist facilities by:
  - Utilizing consultant pharmacists to ensure patients or residents are receiving the lowest dose for the shortest amount of time, which can be accomplished through gradual dose reduction (GDR)
  - · Identifying safer alternatives for residents, especially those with cognitive disorders, through partnership with the consultant pharmacist
- 3. Antibiotic Usage Rate: CMS enacted Phase 1 of its antibiotic stewardship rules in 2017, a three-phase program over the course of 2017-2019, to promote and ensure antibiotic stewardship in long-term care facilities. A robust antibiotic stewardship program that tracks and records infection rates helps facilities work towards compliance and meet standards set by CMS State Operations Manual Appendix PP, while prioritizing care and lowering infection rates throughout the facility. A few best practices when analyzing antibiotic usage rates are:

**Readmission Rate Example:** 

If a resident is diabetic and the facility doesn't implement the appropriate medication regimen upon discharge, the

resident may need to return to the

hospital.



- · Tracking and recording infection rates, including the total number of residents on antibiotics, new admissions, new antibiotic starts post admission, rate of new start and total days of therapy
- Using the medication regimen review process to ensure appropriate antibiotic choice and monitor dose and duration of therapy
- · Hosting antibiotic stewardship meetings with the interdisciplinary team
- 4. Fall Rate: All facilities should work to reduce fall rates among their residents to mitigate serious injury and prevent additional harm. Through a dedicated fall prevention program, facilities can achieve lower fall rates by:
  - · Assessing current fall rates and finding ways to improve outcomes
  - · Identifying residents who are at an increased risk of falls and utilizing medication regimen reviews through your consultant pharmacist to ensure appropriate medication use

- · Working with families to help them understand how to prevent falls for a resident
- 5. Medication Adherence: CMS star ratings identify quality measures that insurance plans must achieve to receive maximum reimbursements. One quality measure is medication adherence. Adherence for all medication is important, and CMS specifically targets three classes of drugs: angiotensin-converting enzyme (ACE) inhibitors and angiotensin receptor blockers (ARBs), HMG-COA reductase inhibitors (statins) and select diabetes medications. These classes of medications are targeted by CMS to ensure timely refill dates because delayed treatment of cardiovascular conditions and diabetes can often lead to rehospitalization and increased cost of healthcare. Facilities can target medication adherence by:
  - · Ensuring prescription refills are ordered in a timely manner and taken as prescribed by working with the pharmacy and the consultant pharmacist
  - · Utilizing technology to maximize medication adherence



 Working with your pharmacy to identify effective processes and automatic reporting to give back more time to your staff

## **Achieving Your Goals with Omnicare**

Having dedicated business goals in place can help ensure facilities are meeting the needs of their patients while also striving to operate as efficiently and effectively as possible. Our strong history of service excellence and innovative pharmacy solutions underscores our ability to successfully execute business goals, continually pivoting and striving for excellence.

We know the value of a trustworthy, qualified pharmacy partnership. With our clinical and operational expertise, we can help you deliver on your promises to your staff, residents and families.

Because we know what matters most is providing the best care possible – and with Omnicare, you can.

Contact us today to get started on your path to better pharmacy care omnicare.com/contact-us/request-a-consultation.



It takes a child one year to acquire independent movement and ten years to acquire independent mobility. An old person can lose both in a day.

- Bernard Isaacs, Professor of Geriatric Medicine

