

Performance Monitoring for California Facilities

4 Tools in Real Time that will ensure your facility is eligible for QASP payments

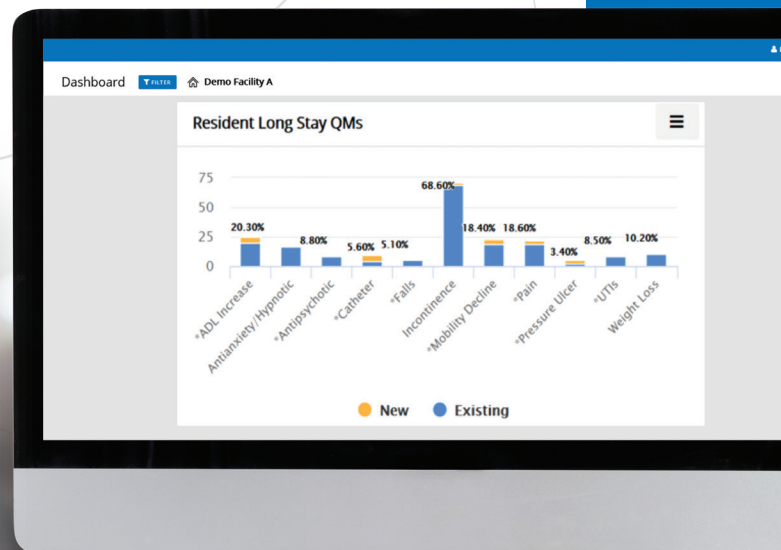
Proactive clinical interventions are critical to implementing a quality improvement program. In California, skilled nursing facilities are encouraged and incentivized to implement quality improvements. Medi-Cal is the primary payer of more than two-thirds of the skilled nursing days in the state. The Quality and Accountability Supplemental Payment Program (QASP) was developed to financially reward facilities based on a set of criteria that assigns a score based on quality of care.

How can Real Time help you achieve the highest quality of care score to be eligible for QASP payments?

Identify residents with potential QM issues - in real time: Real Time enables the clinical team to be proactive with care and mitigate the issue.

Real Time gives you the power to know what's going on right now, in real time which residents are:

- » Reporting moderate to severe pain
- » Experiencing incidents of incontinence
- » Are developing a urinary tract infection
- » Are at risk for pressure ulcers



Avoid Unnecessary Hospital Readmissions with Real Time's Live Clinical Alerts



Using Real Time's live clinical alerts empowers the clinical team to know what's going on every day, with every resident, in real time. This proactive approach provides clinical insights that help the team intervene sooner and prevent residents from declining to a point where a return to the hospital is necessary. Scouring the nursing notes, Real Time takes this one step further and provides the clinical team with a tool that acts like a virtual quality assurance nurse. The Key Word Alert report looks for 250+ words that may have been documented and alerts the clinical team, so they can intervene, provide appropriate care and avoid a possible readmission.



Keyword Search Detail Date: 07/05/2018 Search

<< 1 of 32 Pages >>

Resident	Keyword	Keyword Phrase	Unit	Room	Date of Note	Author
Glücksler, Charles (3224)	Fracture	Lactulose as ordered 2 Fall Ammonia level is elevated and may be related Will continue to monitor 3 Lumbar compression Causes Pelvic pain body Continue Neuro Discharge and following with urtho 4 Osteopenia Continue calcium 5 Chronic lower b ack pain	D	43-1	7/4/2018 3:30:00 PM	Alexi Asst
Alainz, Alison (3524)	Suicidal	Difficulty or painful urination Flank pain Change in frequency Urgency Skin Color change Rash itching Wound Psoriasis Hallucinations Anxiety Depression Causes Abandon Hematological Enlarged glands Easy bleeding Easy bruising Easy bruising Musculoskeletal joint pain Back pain Gait problems joint swelling Myalgias Neurological Dizziness	D	44-2	7/4/2018 6:49:00 PM	Alexi Asst
Saam, Sam (3633)	Smoke	Self at medication of meds No Mood status Deteriorated Easily altered No Non drug interventions attempted effective likes to sit outside utilizes Causes program attends a few activities Needs routine respect or psychosocial function was spending more time in his room through	D	48-2	7/4/2018 1:51:00 PM	Silvana Chavouite
Langley, Stan (4033)	Fracture	Interaction with the following orders Alprazolam Tablet BR MD Dose 1 tablet by mouth one time a day related to Causes OF UNSPECIFIED PART OF NECK OF RIGHT FEMUR INITIAL ENCOUNTERS FOR CLOSED Causes 572.001A Severity Mild interaction Pharmacologic effects	D	53-2	7/4/2018 10:09:46 PM	Royal Chwal
Wheeler, Stan (420)	Wheeling	limited conversation Denies SOB congestion PHD orthopedic abdominal pain CP palpitations dizziness light-headedness or any other complaints Heated to have Causes throughout however he denies any respiratory concerns He continues to smoke frequently throughout the day Tolerating his PD exchanges	A	01-1	7/4/2018 3:01:00 PM	Alexi Asst



Real Time's Live Clinical Alerts

ADL vs MDS Score Rollup Detail Date: 07/04/2018 Search

Resident Name	Unit Name	Room Bld	ADL Date/Time	Bed Mobility		Transfer		Eating		Toileting		Score Variance	ADL BRGS IV Score	BRGS IV End-Split	Last MDS ADL R Score
				Self	Support	Self	Support	Self	Support	Self	Support				
Glücksler, Charles (3224)	D	43-1	07/04/2018	3+	3+	4+	3+	4+	3+	4+	3+	16	16	C	0
Current MDS				1	1	1	1	1	1	1	1				
Mable, Emey (3209)	D	53-1	07/04/2018	2+	2	3+	2	1	2	3+	2	5	7	B	2
Current MDS				1	2	1	2	1	2	1	2				

ADLs Trending Higher or Lower than the Last MDS

Using ADL scores as documentation is entered via the point of care software, Real Time provides you with a live view of how ADL scores are trending and compares them with the last MDS score. This allows you to see quickly and easily which residents may be declining, requiring more help and may be possible candidates for additional therapy.

Which Residents are at Highest Risk for Readmission?

Real Time's CARD Readmission Risk Score is a formula to help identify each resident's risk for readmission to the hospital. The formula is based on clinical alerts, length of stay, prior hospitalizations and active diagnoses/co-morbidities. See which residents are at highest risk for readmission, and why, at the click of the mouse.



Real Time will Help you Manage Your Quality Improvement Program to Ensure You are Eligible for QASP Payments

Real Time Medical Systems is a simple application that sits on top of a LTPAC's existing electronic medical record (EMR). Real Time directly extracts your EMR data to provide live financial, clinical and readmission alerts and dashboards. Contact us today to learn more.

