AMERICAN DATA NETWORK

Case Study

How One Healthcare System Smartsourced its Data Abstraction Burden to Save Money and Strengthen Focus on their Mission

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THE PROBLEM Challenges of In-House Data Abstraction

Alameda Health System is a premier patient- and family-centered healthcare delivery system located between the San Francisco and San Jose areas in California. Their trauma center and teaching hospital are considered among the best in the country. Alameda's mission is to continually improve health through individual patient experiences by "Caring, Healing, Teaching, Serving All."

When faced with upcoming staffing turnover, Alameda Health System Director of Quality and Outcomes Hazel De Leon, MBA, RN, CPHQ, CPPS, NEA-BC, decided to rethink how to solve the challenge of manual Core Measures data abstraction with an eye towards maximizing the resources of her quality department. In addition to analyzing the hard and soft financial costs of insourcing versus outsourcing in her Cost-Benefit analysis, De Leon also wanted to evaluate how the demands of insourcing impacted her department's goals around quality improvement.

PTO and Extended Leave

One of the most impactful pain points that caused operational challenges at Alameda Health System involved PTO and extended leave, according to De Leon. Events such as illness, vacation, or temporary leave put a strain on resources as existing staff couldn't always handle the extra workload. De Leon recalls vividly the last time this challenge occurred. "I needed to pull from my team whose regular job is not abstraction. They needed to get back up to speed on some of the measures. And even myself, I needed to do abstraction because our primary person, our full-time person, was out on leave for an extended time. And even though I had another person, they could not commit to additional days," De Leon said. "So definitely that is a big consideration because all of a sudden I needed to engage two of my other team members to get back into abstraction, and even myself, to cover that full-time person doing it."

On top of diverting the focus of multiple team members, unplanned or even planned absences can cause a backlog to pile up if the team isn't able to cover the abstraction workload on top of all their other duties. And as quality teams know, it's much easier to confer with clinicians regarding opportunities for improvement when a patient case is recent and top-of-mind.

Competing Priorities

It's no surprise that many staff wear multiple hats in healthcare. Data abstractors are no different and often shoulder a variety of other obligations. At Alameda Health System, the Quality Team serves as second responders to survey readiness. Survey activities by accreditation bodies pulled team members away from



planned duties and therefore delayed data abstraction.

But perhaps the biggest organizational impact of competing priorities with regard to in-house data abstraction lurks in the office of department leadership. Any amount of time spent managing the manual data abstraction process is time not spent on bigger picture strategic work like scrutinizing the quality data to identify areas of improvement, designing initiatives to drive change, and monitoring and measuring success.

Varying Levels of Specialization

Having access to a team of experts with a variety of specialists is one of the biggest benefits of outsourcing. This is even more valuable in situations like De Leon's, in which she oversees abstraction for the main facility and two community hospitals. Typically with an in-house team, each facility has a point-person to conduct its abstraction. However, one facility may have more Sepsis experience while another facility excels in a different area. In all-toocommon cases like this, insourcing makes it difficult to distribute expertise across all facilities.

Constantly Changing Demands

De Leon cited that getting up to speed on the measure updates is a revolving hurdle. As demands change, it can be difficult to fluctuate FTEs up and down based on new measure specifications. In facilities where abstraction is only part of a staff member's job duties, they are less likely to stay reliably current on measures specifications like the full-time experts found in an outsourcing partner."

Inter Rater Reliability

De Leon noted that there was also a strong need for an objective, unbiased-eye to conduct Inter-Rater Reliability. In-house IRR can be uncomfortable because staff members are critiquing and correcting their peers. However, IRR is critical to team accuracy and identifying knowledge gaps. Making the time to integrate the extra process of IRR can be a challenge with staff already at capacity.

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Hazel De Leon

System Director of Quality & Outcomes Alameda Health System



THE PATH Overcoming the Barriers

Running Data Abstraction In-House Presents Multiple Challenges

Barrier

Sharing Control of the Process

1

Sometimes department leaders aren't comfortable at first with sharing control of the abstraction process. This is a natural feeling. Many facilities that work with ADN begin by outsourcing just a few measures or registries to get a feel for the process before committing further. Many if not all go on to outsource more of their abstraction burden after experiencing first-hand the relief of outsourcing to a trusted and conscientious partner.

Barrier

2

3

Transitioning from an Internal Team to an External Partner

While the prospect of transitioning one's abstraction process to an external partner has the potential to give pause, De Leon reports that open and timely communication thoroughly alleviates that concern. "I think communication has been wonderful," De Leon said. "ADN has been really responsive. Everyone has been easy to reach. When we reach out for a question, they're very responsive. We have a bi-weekly check-in just to understand any issues or any trends they're seeing." With the right partner in place, Smartsourcing should feel less like outsourcing and more like an extension of your team.

Barrier Misconception of Outsourcing Costs

Too often, hospitals assume it's too expensive to outsource. It's actually quite the opposite. According to most surveys, cost savings is the primary reason for outsourcing. Insourcing has many costs beyond salary and benefits, such as IT and other overhead costs as well as unknown costs. Outsourcing has no unknown costs. Budgeting is reliable and predictable. ADN's per-chart pricing structure equips De Leon to confidently forecast and budget. ADN can provide a free Cost-Benefit Analysis of the annual expenses of insourcing vs outsourcing specific to your facility upon request. Contact us to get your complimentary Cost-Benefit Analysis.



THE SOLUTION Benefits of Smartsourcing

Smartsourcing Data Abstraction Improves Accuracy, Stability and Business Focus



Accuracy and Deadline Predictability

De Leon reiterated that as a system leader, performance predictability is paramount. "I know there's predictability of when they'll be done with the abstraction," she said. That coupled with ADN's overall client-wide accuracy rates of 98.38% Data Element Agreement Rate (DEAR) and 99.80% Category Assignment Agreement Rate (CAAR) are some of the many reasons Alameda continues to outsource to ADN.



Seamless Performance Despite Turnover or Absences

By outsourcing manual data abstraction, De Leon conveyed she now has peace of mind that performance interruptions due to unexpected leave or turnover are a thing of the past. "It gives me a sense of comfort that the work will carry on because there's a team assigned to the account. And if one is out they'll be able to redistribute," De Leon said. "And it's not something I have to directly manage."



Improved Business Focus

One of the biggest gains is that outsourcing the manual data abstraction process allows the team to focus on using the data to improve care quality. "Having a partner such as ADN that is specialized in this allows us to free up our time and brainpower to do other things that are a priority for our organization," De Leon said. Since outsourcing, Alameda has been able to accomplish more performance improvement projects, notably a huge enhancement of their peer review process that moved them to a more Just Culture scoring system. Additionally, more attention was able to be focused on certain PSI-90 conditions, which often require intense review before they are finalized in coding.



FREE RESOURCE

Cost-Benefit Analysis Template

FACILITY NAME & DEPT:						DATE:					
PROPOSED SERVICE:						COMPLETED BY:					
As the average annual hospital turnover is 17.8%, this mo the likely costs before an abstractor retires or unexpected						VIEW C	HA	RT GRAP	HIC	<u>></u>	
QUANTITATIVE ANALYSIS		YEAR 1		YEAR 2		YEAR 3		YEAR 4		TOTAL	
HARD COSTS											
Salary*	\$	113,240.00	\$	115,504.80	\$	117,814.90	\$	120,171.19	\$	466,730.89	
Benefits/Taxes	\$	47,882.47	\$	48,840.12	\$	49,816.92	\$	50,813.26	\$	197,352.78	
IT Costs (Hardware/Software/Maintenance/etc)** (1)	\$	7,569.00	\$	7,671.10	\$	7,774.58	\$	7,879.46	\$	30,894.14	
tional) Overhead Costs (travel, space/equipment/supplies for office, etc.)									\$	-	
TOTAL HARD COSTS	\$	168,691.47	\$	172,016.02	\$	175,406.40	\$	178,863.91	\$	694,977.81	
SOFT COSTS											
Management Time Cost***	\$	19,956.00	\$	20,355.12	\$	20,762.22	\$	21,177.47	\$	82,250.81	
Turnover/Recruiting/Hiring/Training Costs (2)	\$	11,093.75	\$	11,093.75	\$	11,093.75	\$	11,093.75	\$	44,375.00	
Unknown****		???		???		???		???	\$	-	
SOFT COSTS	\$	31,049.75	\$	31,448.87	\$	31,855.97	\$	32,271.22	\$	126,625.81	
TOTAL INSOURCING COSTS	\$	199,741.22	\$	203,464.89	\$	207,262.37	\$	211,135.13	\$	821,603.62	
TOTAL OUTSOURCING COSTS			\$		s	-	\$		s	-	

An Easy to Use Template to Create Cost-Benefit Analysis in Under Three Minutes

American Data Network provides Core Measures & Registry Data Abstraction Services to reduce the burden on your facility so you can focus on proactive quality management. ADN's <u>Insourcing Cost-Benefit Analysis Template</u> will enable you to make a data-driven decision on whether outsourcing is right for your facility.

DOWNLOAD



About ADN

Healthcare Data Applications & Services that Give You Answers

For more than 25 years, American Data Network (ADN), which is also the parent company to its Patient Safety Organization (ADNPSO), has worked with large data sets from various sources, aggregating and mining data to identify patterns, trends, and priorities within the clinical, financial, quality and patient safety arenas. ADN developed the Quality Assurance Communication (QAC) application, with which hospitals, clinics, rehabs, and other providers record and manage patient safety events. By entering events into ADN's QAC application and submitting them to ADNPSO, information is federally protected and thereby privileged and confidential. These protections provide a safe harbor to learn from mistakes and improve patient safety.

You give us <mark>data</mark>. We give you <mark>answers</mark>.

We are proud to serve... Client feedback

Hear what our customers say it's like to partner with us.

"Working with ADN has been nothing but a pleasure. My questions and or concerns are always addressed timely by an attentive team member with kindness and professionalism."

Melanie Hedges Draper

Core Measures Coordinator, Baptist Health Medical Center - Hot Spring County

"I appreciate that your team is so knowledgeable and thorough. I absolutely do not regret my decision to go with ADN! Thanks!"

Marsha Donaldson

Quality & Performance Improvement Manager, Martin Health

To learn more, contact Susan Allen at sallen@americandatanetwork.com or (501) 225-5533.