

Baseline Data Locations

- Remember baseline data is often dated and does not demonstrate the activities of the current grant cycle.
- When looking at hospital selection for use of funds, consider trended data if using funds for concurrent years in same activity to identify an indicator for improvement.

Activity	Data Source(s)
Quality reporting data collection/related training or software	MBQIP measures from FORHP reports (dated) Real-time quality improvement measures to advance VBP outcomes
HCAHPS data collection process/related training	HCAHPS is within MBQIP reports Can acquire vendor real-time data but may be burdensome on hospital, keep it simple such as a specific domain to improve, sustainable training methods with all staff, suggest avoid star ratings and possibly response rates when volumes are too low.
Efficiency or quality improvement training in support of VBP related initiatives	Real-time data collection Patient safety data through the AHRQ Safety Survey repository Immunizations and Antibiotic Stewardship on MBQIP (again a bit dated on reporting) Look at any quality training such as Lean, PDSA, IHI quality training etc. rather than actual quality data
Provider-Based Clinic quality measures education	MIPS reported data https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/physician-compare-initiative/Quality-Data-and-Physician-Compare-PCMH-recognition-and-quality-improvement PCMH recognition and quality improvement Any CAHPS efforts to improve (CG CAHPS only provides annual data from year prior) https://cahpsdatabase.ahrq.gov/cahpsidb/CG/about.aspx https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/CAHPS/MIPS
Alternative Payment Model and Quality Payment Program training/education	MIPS reported data Self-reported data Any ACO engagement and performance improvement efforts
Other data sources Rural Center Population Health Toolkit https://www.ruralcenter.org/population-health-toolkit/data	Care Compare: https://data.medicare.gov/data/hospital-compare County Health Rankings (data released 2020) http://www.countyhealthrankings.org/explore-health-rankings/rankings-data Dartmouth Health Atlas https://atlasdata.dartmouth.edu/downloads/general#medicare_reimbursements Area Health Resources Files https://data.hrsa.gov/data/download US Census (currently 2017 data released in 2019) https://www.census.gov/programs-surveys/acs/

Writing Your SHIP Outcomes

Hints:

- Number and/or percent of hospitals assisted, staff trained etc. are process measures
- Consider adding pre-/post-test in process measures
- When designing your outcome measure, ask yourself “Did the funds show hospital improvement in selected activity?”

Process = how well you are delivering change (# staff trained)

Outcome = Proof of impact of the change delivered

The table below are some examples of questions/thoughts to help inspire you to write achievable and measurable outcomes to demonstrate the value of the SHIP funds for our rural hospitals.

Activity Selected	Ask Yourself...
HCAHPS	Were measures all reported successfully? Did vendor provide any additional education/training? Any staff training provided? Did they have a baseline to improve upon such as “improve discharge instructions by 3%” or ‘Discharge instruction currently at 87% with goal of >90%’
Quality reporting, data collection and/or related training or software	Did they not report prior to SHIP funds? Are they purchasing any new software to assist in quality reporting? Or use of vendor to report? Types of training provided and knowledge test (pre-/post-) or certification achieved?
Provider-based clinic quality measures Value-Based Purchasing	What was done prior, if anything? Achieve 100% reporting in one measure? Any successful implementation of PCMH? Lean activities? CAHPS measures? Participation in Stroudwater clinic measures? QHI clinic measures (such as blood pressure management) Any commercial payer activities? Certification in RHC practice management through NARHC.
ACO Investment Accountable Care Organizations	All ACOs will have quality improvement measures Unfortunately, need to ask each hospital an area of improvement and baseline data to build upon (again if looking at concurrent years for ACO ask for one measure to improve upon and not just the ACO participation itself).
PPS/PB Investment Activity Payment Bundling (PB)/Prospective Payment System (PPS)	ICD-10 is it training? Certification such as ARHPC coder certification? When selecting quality improvement, what efficiency is being improved? Consultant assisted training? Software or tools such as e-coder?

Use the resource tools provided on the rural center assistance page:

Cheat Sheets

[SHIP Performance Management/Program Evaluation Guide](#)

[NCC 21 Grant Guidance Materials](#)