FLEX QI Project – QHi Support

The Flex Quality Improvement Project asks states to specifically help CAHs connect quality measures to improvement in clinical outcomes—demonstrating impact on a specific measure area. CAHs can implement initiatives with groups or cohorts of CAHs to support quality reporting and improvement based on needs.

To operationalize the FLEX QI Project:

- Participating states may select any MBQIP core measure/measure component for their Flex QI Project that aligns with current hospital/state priorities. This is the recommended approach for states with minimal CAH capacity, since data collection is already addressed through the core MBQIP measure reporting.
- States have flexibility to include all hospitals or a sub-group of hospitals within a state
  - Must have 2 or more CAHs involved in project
- Flex QI Project must align with one of the MBQIP quality domains
  - Patient Safety/Inpatient, Outpatient Care, Patient Engagement, or Care Transitions

How can QHi help?

QHi is an enterprise-wide benchmarking program specifically designed to meet the needs of rural facilities.

QHi supports:

- The data/measures to be collected
  - The QHi Library of Indicators contains measures from:
    - CMS (easy upload of CART monthly submissions)
    - MBQIP
      - EDTC (easy upload of Stratis tool report)
    - NHSN
    - NQF
    - Self-Defined
  - Monthly collection and reporting the selected measure data
    - Upload CMS and EDTC measure data
    - Networks upload NHSN data on behalf of hospitals
    - Self-report through easy to use customized data entry options
    - Data is immediately available for reporting
  - Benchmarking
    - Compare against self-defined peer groups based on Network or hospital characteristics

QHi participants

- Collect, track and trend monthly data in real time that is pertinent to their unique environment
- Evaluate current performance, identify and reach out to best practice organizations to integrate successful solutions;
- Participate in a nationally recognized initiative to demonstrate healthcare quality in rural America
- Do not simply gather numbers. Benchmarking provides the opportunity to use interventions already built and tested by others, reducing the costs of making significant advances in the quality of care.

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