

DATA-DRIVEN RESULTS FOR BETTER PATIENT OUTCOMES



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Quality improvement initiatives require consistent and timely review of clinical performance—but it's not always easy to gather and sort through the data to get the answers you need.

FIND THE ACTIONABLE INFORMATION HIDING IN YOUR PATIENT DATA

Battelle WayFinder™ QI Dashboard puts current hospital quality data at your fingertips to help you achieve better patient outcomes and improved reimbursement rates. WayFinder is a cloud-based quality improvement analytics tools that uses a variety of statistical models and techniques to organize, display and analyze AHRQ, CMS and other quality indicators.



With WayFinder, you can:

- Analyze performance trends and make concrete hospital improvement plans
- Set hospital performance benchmarks and measure progress towards quality goals
- Easily compare your hospital's performance against peers in your system, state and nationwide
- Predict your performance and take proactive steps to improve patient outcomes and financial returns
- Identify specific patients who experienced adverse events within your system, and whether they were at high or low risk for experiencing the event based on their characteristics
- Develop plans for risk stratification for patients to help avoid adverse events before they occur.



What We Track

- **Number of Adverse Events:** Determine the number of adverse events that occurred on a quarterly or annual basis for a particular quality indicator, including AHRQ Quality Measures and CMS cause-specific readmission measures.
- **Overall Proportion of Preventable Adverse Events:** Discover what proportion of a hospital's adverse events are potentially preventable.
- **Days of Care Due to Adverse Events:** Discern how many extra days of care are attributable to specific adverse events and see associated costs.
- **Performance Compared to Multiple Benchmarks:** Determine how your hospital's performance on specific indicators/adverse events compares to other similar hospitals in your region or nationally.
- **CMS Dollars at Risk:** Understand the financial impact of your quality indicator scores and make meaningful changes to improve reimbursement rates.

- **Performance on CMS/AHRQ-Based Calculations:**

Answer how a hospital's overall performance derived from its own hospital encounter data compares with its performance derived by factoring in CMS/AHRQ-based evaluation factors.

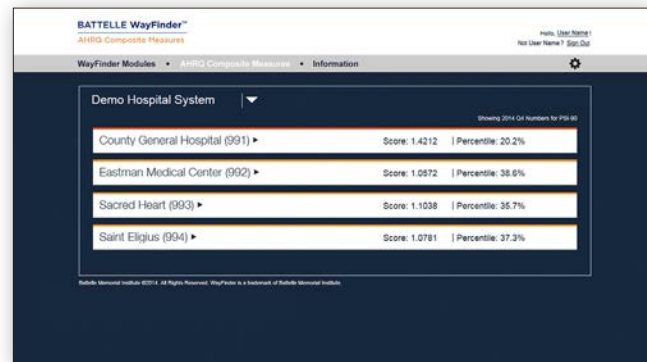
Coming Soon

- **Between-Hospital Readmission Measures:** Assess your exposure to costs associated with readmission events that occur within other hospitals after a patient is discharged from your system.
- **Performance on CDC National Healthcare Safety Network (NHSN) Measures:** Track hospital-associated infections, blood safety errors, infection control adherence rates and other important hospital safety process measures according to NHSN guidelines.
- **Subpopulations of Interest:** Track trends over time within different subpopulations of interest such as gender, age or race/ethnicity.

TRACK RECENT CLINICAL PERFORMANCE

With WayFinder, you can eliminate the “seven-quarter lag” common to AHRQ reports and get current information that reflects what is happening in your hospital now. Now you can review expected vs. observed performance in real time and make timely decisions to improve CMS reimbursement rates and patient outcomes.

- **AHRQ Quality Indicator Reports:** Monitor performance on quality indicators including IQI, PSI, PDI, NQI and PQI.
- **Charts and Data Export:** Export data and charts to share and store important and informative performance results.
- **Trend Data:** View quarterly trends of patients at risk, observed, predicted, and preventable cases.



VIEW EACH INDICATOR IN DETAIL

WayFinder makes it easy to not only see your data, but also understand it. You can review specific adverse event details, including days of care and associated costs, and see the proportion of adverse events that were potentially preventable.

- Data Snapshots:** Snapshots of information and insight are provided as preventability indices and ranks; CMS dollars at risk; quality indicator-specific estimates; expected, predicted and preventable rates for adverse events; days of care; and costs and associated performance scores.

Quality Measure	Weight	Count	Lower	Score	Upper
PSI-00: Patient Safety for Selected Indicators		311.3	0.33	1.06	2.13
PSI-12: Postoperative Pulmonary Embolism or Deep Vein Thrombosis F	0.49	191.0	0.45	1.14	2.10
PSI-15: Accidental Puncture or Laceration Rate	0.23	726.0	0.26	0.90	1.80
PSI-13: Postoperative Sepsis Rate	0.14	15.0	0.39	1.08	2.04
PSI-3: Pressure Ulcer Rate	0.04	123.0	0.00	1.06	4.04
PSI-6: Iatrogenic Pneumothorax Rate	0.03	704.0	0.57	1.16	1.91
PSI-14: Postoperative Wound Dehiscence Rate	0.03	23.0	0.31	1.00	2.00
PSI-7: Central Venous Catheter-Related Blood Stream Infection Rate	0.03	576.0	0.00	0.78	3.21
PSI-8: Postoperative Hip Fracture Rate	0.00	83.0	0.49	1.12	1.95

Name	Quality Measure	Percentile	Performance Adverse Events	Preventable Adverse Events	Proportion Preventable Adverse Events	CMS Dollars at Risk
83	NIQ-1 - Neonatal Iatrogenic	26.0%	0.0	0.0	1.00	
42	NIQ-2 - Neonatal Mortality	45.4%	0.3	0.1	0.19	
66	PSI-11 - Postoperative Resp.	57.4%	0.8	0.0	0.00	
96	PSI-1 - Accidental Punctur...	47.9%	0.0	0.0	0.81	
72	IQI-19 - Hip Fracture Morta...	44.4%	0.2	0.1	0.30	
74	IQI-18 - Heart Failure Mort...	50.2%	1.0	0.3	0.29	
74	PSI-3 - Pressure Ulcer Rat...	64.8%	0.0	0.0	0.96	
78	PSI-5 - Iatrogenic Pneumot...	37.7%	0.0	0.0	0.89	(\$497)
86	IQI-15 - Acute Myocardial I...	28.3%	0.2	0.0	0.25	
86	IQI-18 - Gastrointestinal I...	39.9%	0.3	0.1	0.30	
86	IQI-32 - Acute Myocardial I...	28.0%	0.2	0.1	0.26	
84	PSI-10 - Postoperative Phys...	45.9%	0.1	0.0	0.50	
704	PSI-14 - Postoperative Woun...	41.9%	0.0	0.0	0.45	(\$497)
86	IQI-14 - Hip Replacement Mo...	34.1%	0.0	0.0	0.49	
86	PSI-8 - Postoperative Hip...	44.1%	0.0	0.0	0.45	(\$497)

COMPARE OTHER HOSPITALS AND HEALTH SYSTEMS

Compare your hospital's performance to multiple hospital peer groups, including high performers. With WayFinder, you can benchmark your hospital's performance within your system, your state and nationally. Track based on the number of preventable adverse events or the costs and extra days of care associated with those events.

REDUCE RISKS WITH MEANINGFUL DATA

WayFinder helps you monitor the patient encounters that drive your quality scores. Meaningful, easy-to-understand reports let you identify the most preventable events so you can determine the changes that will have the maximum impact on patient outcomes and quality scores.

- **Data for Root Cause Analysis:** Identify the events with the lowest associated risk for adverse outcomes and the data that support root cause analysis.
- **RiskFinder Feature:** Logic trees provide actionable information on patient adverse event population characteristics, such as primary diagnosis, on the measure-specific pages. These analyses help stratify your patients at risk of experiencing harm, helping your teams provide additional care to avoid adverse events and their associated costs.



Who should use WayFinder?

We created WayFinder to support hospitals, hospital systems, hospital associations and membership organizations, and other organizations working to improve healthcare quality.

- Quality Departments
- Department Chairs
- CFOs
- Chief Compliance Officers
- Data Scientists/Analytics Teams
- Clinical Departments
- CMOs
- CMIOs/Chief Transformation Officers

Ready to learn more?

Contact us to find out how the **Battelle WayFinder™ QI Dashboard** can help you improve healthcare and financials at your hospital.

solutions@battelle.org

www.battelle.org/WayFinder

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For demonstration purposes, the hospital names are fictional; however, the data shown represents results from real patient encounter data across a sample of hospitals with similar characteristics.

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It can be done