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| INFORMATION MANAGEMENT AND PERFORMANCE IMPROVEMENT (IMPI) | | | | NO. 23 | |
| POLICY:  Winning Wheels, Inc. has an information management and performance improvement system (IMPI), which includes data collected on the needs of persons served, other stakeholders, the business needs of the organization, and allows for comparative analysis. Data collection includes persons served, including persons admitted to the program, and includes those who do not complete the program and those who were determined to be ineligible for admission to the program. The information management and performance improvement system is based on the organizational plan, which incorporates the analysis of internal and external information and reports, analysis of strengths, weaknesses, opportunities and threats (including legislative), actions taken based on this analysis, and involves information gleaned from other pertinent sources (e.g. assessments of individual program quality). The IMPI enables the organization to identify the outcomes of its programs, the satisfaction of those persons served, and the follow-up on outcomes achieved by those persons served. Emphasis is placed on the aggregate outcomes of each person served in a specific program. The information is gathered and analyzed to assist the organization and the program to determine their success in achieving and maintaining appropriate and desirable outcomes, and is utilized to create new programs as needed, and to improve, modify or delete existing programs. Analysis includes comparison with internal / historical data and comparable external data, when available.  PROCEDURE:  The IMPI is ongoing, is reviewed annually at a Board of Directors meeting, and utilizes information gleaned via the following mediums:   1. Admissions criteria (MDS/RAI; Baseline assessments from clinical disciplines; initial program plan; initial discharge evaluation) 2. A strengths/weaknesses analysis and review of services offered (e.g. CIIRP, Brain Injury Residential Rehabilitation, O.T., P.T., Recreational Therapy; Voc. Services; Dietary; Cognitive Rehabilitation; Transportation; Developmental Training; Social Services / Psychosocial; Restorative Nursing; Speech & Language Pathology; Medical Records; Environmental Services) 3. Predicted Outcomes / Measurable Objectives (Department specific and industry-wide comparisons, correlated with individual program plans and ongoing quality assessment measures) – (i.e. Care Watch / eHealth Data Solutions Analysis / Nursing Home Star Site) 4. Specification of the time for which each measure is applied. 5. Priority ranking or weighting of objectives. 6. Measures of effectiveness and efficiency (Timeliness of objective attainment, outcomes of individual program plans; Quality Assurance studies and outcomes; Resident Rap / Resident Satisfaction Interviews, Budget comparisons, review of monthly financial statements, etc.) 7. Follow-up Information (Discharge Follow-up Log & Questionnaires; recidivism data; system collects and compares data at admission, discharge and post-discharge) 8. Information on referrals of persons not accepted into the program (ineligible for admission tracking log). 9. Community-wide needs assessment(s). 10. Risk management reports. 11. Fiscal reports and analysis of reimbursement changes.   l. Satisfaction surveys and questionnaires. | | | | | |
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| Through the use of the system, the following information is maintained on an ongoing basis:   1. Characteristics/Demographic information regarding the persons served (e.g. diagnoses) 2. Lengths of stay 3. Service access   The analysis of the information gathered enables Winning Wheels, Inc. to determine when performance is less than acceptable, to identify the reasons why performance fell below the acceptable level, and to follow up on and monitor corrective actions performed at specific times, the results of which will be documented.  Winning Wheels, Inc. assures that relevant internal and external stakeholders, as well as organizational personnel, are given the information necessary to effectively utilize the results of the information and outcomes management/ongoing program evaluation system. Mechanisms for communicating such information include, but are not limited to: Annual Resident Rap (persons served), Annual program evaluation with Board of Directors (stakeholders), Annual Department Head Strategic Planning Meeting (personnel), and quarterly review of program evaluation data during Quality Assurance / Quality Improvement Committee meetings (personnel). Input from funding/referral sources is solicited regularly, and is utilized in planning. Input from cooperative interagency planning, evaluations from professional education programs, and information from recognized leaders in rehabilitation is solicited regularly and incorporated into the planning and program improvement process.  Educational efforts are provided on an ongoing basis as necessary to assure that relevant personnel are provided with the information necessary for them to understand the value of outcomes measurement, collect data accurately and efficiently and interpret and use such data correctly. | | | | | |
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