

Optimizing PointRight Solutions for NMVBP Success

Maria Arellano MS, RN, RAC-CT
August 27, 2020

PointRight[®]

Use Analytics to Improve Post-Acute &
Long-Term Care Performance



Objectives:

Attendees will be able to:

- Discuss why MDS accuracy is critical to their success in the NMVBP program.
- List 2 strategies that can be used to positively impact the quality measures evaluated in the NMVBP program.
- Identify 3 ways these program tools can be incorporated effectively into their facility's routine.

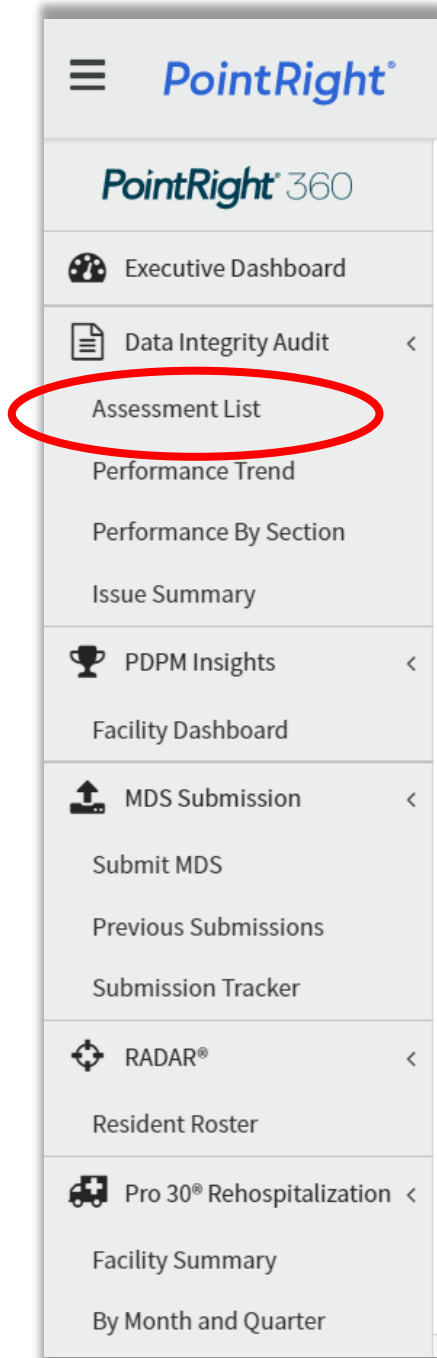
NMVBP Program Goals

The Nursing Facility Value Based Purchasing Program goal is to improve quality of care, reduce avoidable hospitalizations, and optimize health for all New Mexico Medicaid members receiving services in nursing facilities by 2023.

PointRight® Goal: Deliver proactive solutions to help providers meet the NMVBP program goals

PointRight Solutions for NMVBP Participants

- ✓ Data Integrity Audit (DIA) – Comprehensive MDS audit tool to ensure MDS accuracy
 - PDPM Insights – Key insights into your PDPM success
- ✓ RADAR – Care management tools to proactively address individualized risks
 - Pro 30 Rehospitalization – Monitor and manage rehospitalization outcomes
- ✓ PointRight and CMS Quality Measures – Robust QM toolkit to monitor and manage QM outcomes.



Access all solutions from
left hand menu

MDS Accuracy – Data Integrity

Location: Southwest Skilled Health Care Center (DD-PRSW6) (Change)

Maria Arellano MA
Tuesday 8/18/2020

Executive Dashboard / DIA: / DIA: Assessment List

DIA: Assessment List

Show all ARDs from: Last 90 Days Search Assessments

Click on the + sign to view Real-Time Feedback

Showing 1 to 14 of 14 items

+ Name	↑ DOB	Gender	MRN	Room #	ARD	OBRA	PPS	Submission Date	Submitted By	Number of Issues
+ EUCHCH, KVMCXG	05/12/1924	Male	300586	107	05/29/2020	Entry	None	06/18/2020 10:04:07 PM	User, PointRight	0
+ HWSJW, CAIXF	05/06/1931	Male	300701	117	05/30/2020	Discharge: Return Not Anticipated	None	06/18/2020 10:25:21 PM	User, PointRight	3 ⚠
+ IRXKQYEV, WHTHP	04/17/1931	Female	300688	112	05/21/2020	Quarterly	None	06/18/2020 10:07:16 PM	User, PointRight	3 ⚠
+ KMPE, UZBGRA	06/16/1941	Male	300698	120	05/21/2020	Death in Facility	None	06/18/2020 10:24:44 PM	User, PointRight	0
+ KMPE, UZBGRA	06/16/1941	Male	300698	120	05/21/2020	None	5-Day	06/18/2020 10:24:46 PM	User, PointRight	18 ⚠
+ RTJD, DSYMS	10/05/1931	Male	300706	120	05/30/2020	Admission	5-Day	06/18/2020 10:25:53 PM	User, PointRight	9 ⚠
+ RTJD, DSYMS	10/05/1931	Male	300706	120	05/23/2020	Entry	None	06/18/2020 10:25:51 PM	User, PointRight	0
+ TYAZSQ, FYIYUG	09/05/1933	Female	300692	106	05/30/2020	Quarterly	None	06/18/2020 10:07:49 PM	User, PointRight	1 ⚠
+ TYAZSQ, FYIYUG	09/05/1933	Female	300692	106	05/26/2020	None	PPS Discharge	06/18/2020 10:07:46 PM	User, PointRight	0

MDS Accuracy – Data Integrity

The screenshot displays the PointRight software interface for MDS Accuracy – Data Integrity. The top navigation bar shows the user is Maria Arellano on Tuesday 8/18/2020, located at Southwest Skilled Health Care Center (DD-PRSW6). The main content area is titled "DIA: Assessment List" and includes a search filter for "Last 90 Days" and a search term "zep". A blue banner prompts the user to "Click on the + sign to view Real-Time Feedback". Below this, a table shows one row of assessment data for resident ZEPKQW, IRMOQ, with a QM alert for "Falls (Surveyor)". The detailed view for "Issue G32" is shown, including a description of a coding error, an explanation of why it is an issue, and resolving instructions. A resolution section offers options like "No Action", "Change MDS", and "Explanation", with a "Documentation Complete" checkbox and a "Clear All" button.

Location: Southwest Skilled Health Care Center (DD-PRSW6) (Change)

Maria Arellano
Tuesday 8/18/2020

Executive Dashboard / DIA: / DIA: Assessment List

DIA: Assessment List

Show all ARDs from: Last 90 Days zep

Click on the + sign to view Real-Time Feedback

Showing 1 to 1 of 1 rows

	Name	DOB	Gender	MRN	Room #	ARD	OBRA	PPS	Submission Date	Submitted By	Number of Issues
-	ZEPKQW, IRMOQ	01/01/1932	Male	300677	106	05/31/2020	Quarterly	None	06/18/2020 10:05:39 PM	User, PointRight	3

QM Alerts

- Falls (Surveyor)

Issue G32

Description:

- Coding Error: Resident was assessed for balance while walking (G0300B) yet the walking activity did not occur (G0110C1 and G0110D1).

Why this is an issue:

- If the resident was able to walk for the balance assessment, then walking would not be coded as "Activity did not occur" in G0110B.

Resolving the issue:

- The balance assessment instructions in the RAI v.3.0 manual (pp. G-26 & G-27) are based on the resident's actual performance during the 7-day lookback period. If the transfer activity did not occur, the balance assessment would be coded as "8" (p.G- 29).

Resolution

No Action

Change MDS

Explanation

Resident only walked in the therapy room (not in the room or the corridor) for the entire lookback period.

Documentation Complete

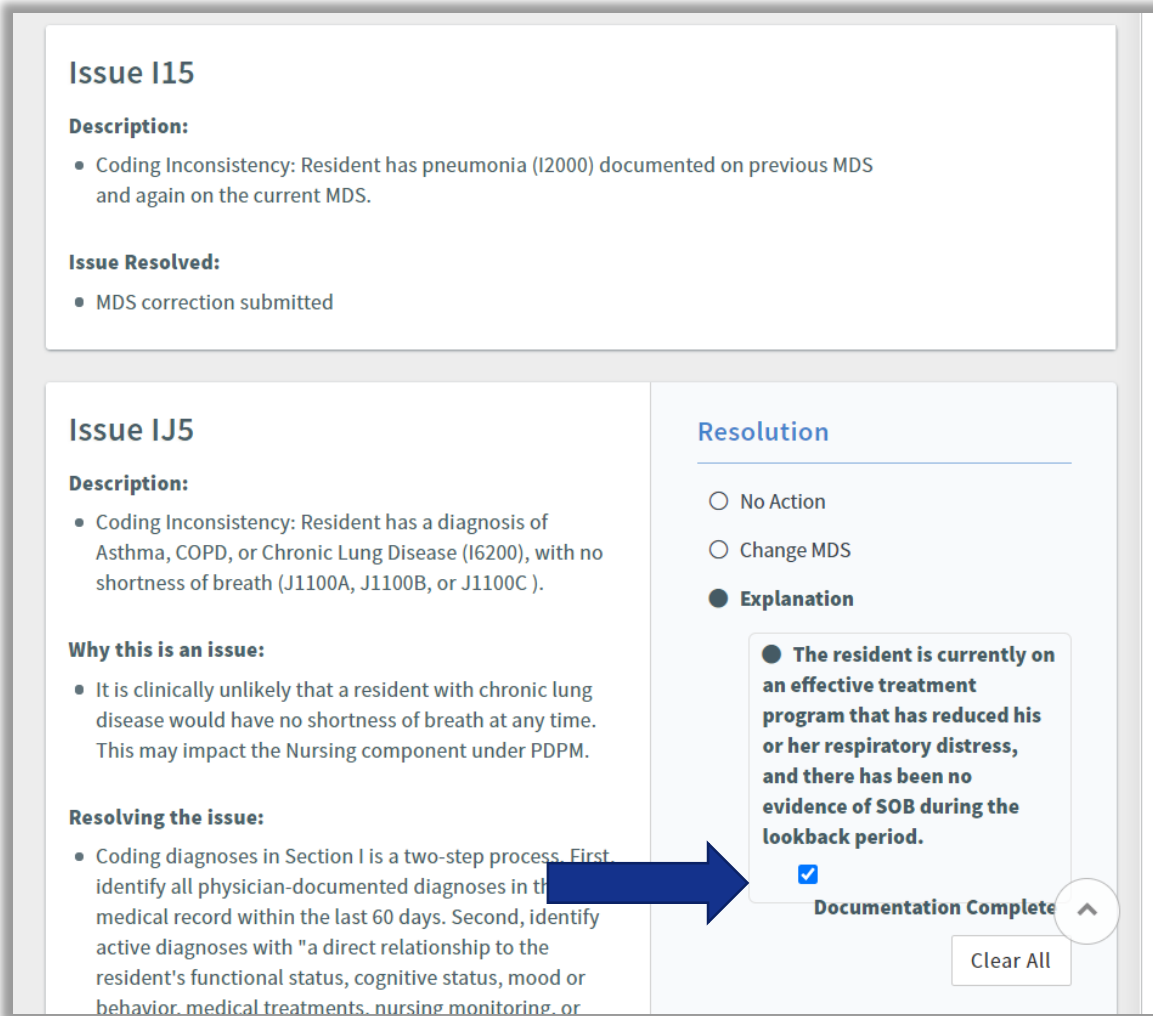
Clear All

Ask A Question

MDS Accuracy – Data Integrity

The screenshot displays the PointRight software interface for MDS Accuracy – Data Integrity. The top navigation bar includes the PointRight logo, the location "Southwest Skilled Health Care Center (DD-PRSW6)", and the user "Maria Arellano" with a date of "Tuesday 8/18/2020". The left sidebar lists various modules such as Executive Dashboard, Data Integrity Audit, PDPM Insights, MDS Submission, RADAR®, Pro 30° Rehospitalization, PointRight® QM, CMS Reported QM, and NMVBP. The main content area is titled "DIA: Assessment List" and shows a search filter for "zep" over the "Last 90 Days". A blue banner prompts the user to "Click on the + sign to view Real-Time Feedback". Below this, a "QM Alerts" box highlights "Incontinence", "Pain", and "Weight Loss". The "Issue G25" section provides a detailed description: "Coding Inconsistency: Resident has poor balance during surface to surface transfers (G0300E) yet does not require weight bearing assistance with transfers (G0110B1)". It also explains why this is an issue, how to resolve it by referring to coding guidelines, and provides resolution options: "No Action", "Change MDS", and "Explanation". The "Explanation" section is selected, showing that the resident required weight bearing assistance only once or twice during the 7-day lookback period, and that the documentation is complete. A "Clear All" button is located at the bottom right of the resolution section.

MDS Accuracy – Data Integrity



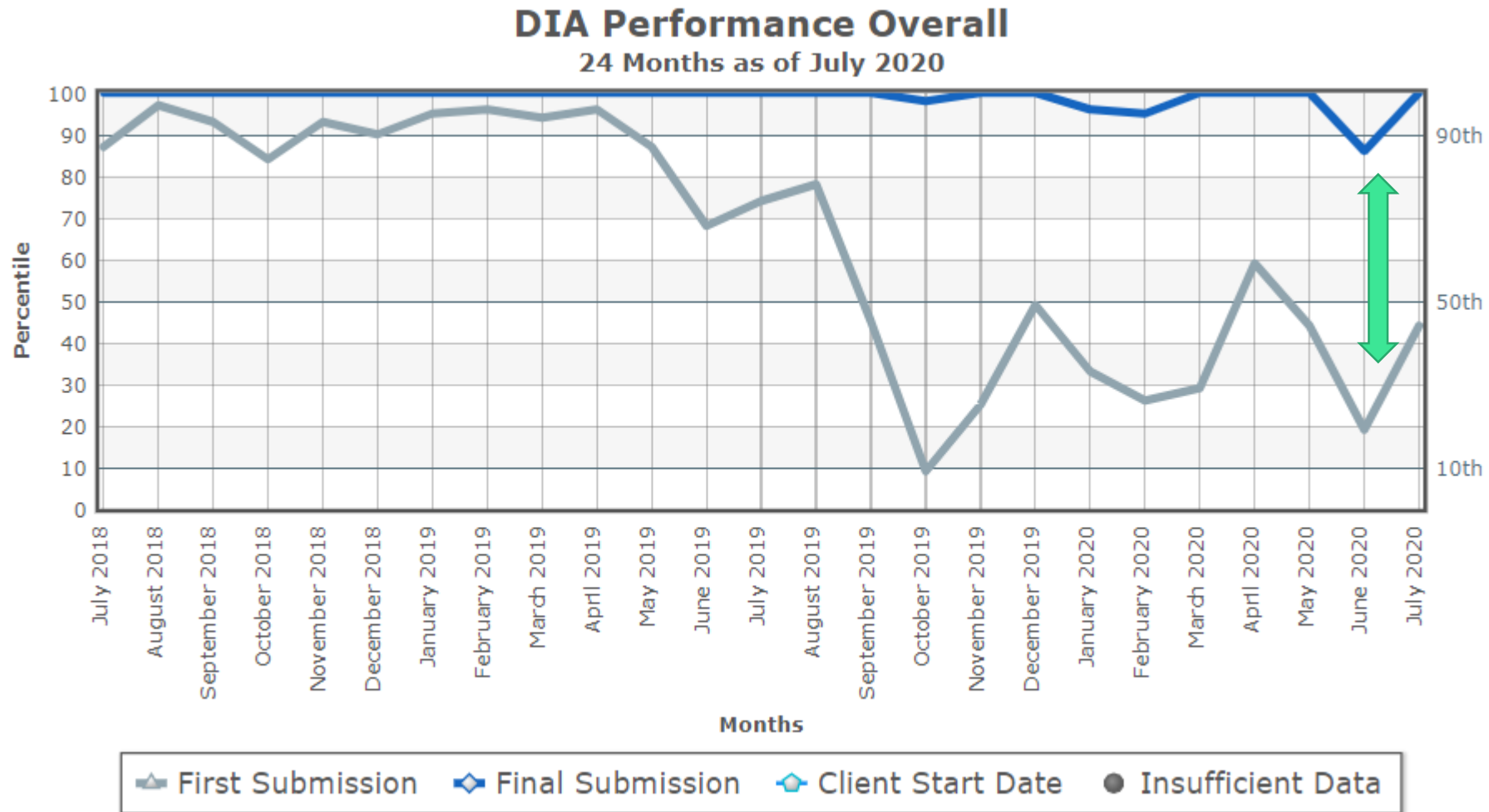
The screenshot shows a user interface for resolving MDS issues. It features two main panels. The top panel, titled 'Issue I15', contains a 'Description' section with a bullet point: 'Coding Inconsistency: Resident has pneumonia (I2000) documented on previous MDS and again on the current MDS.' Below this is an 'Issue Resolved' section with a bullet point: 'MDS correction submitted'. A large blue arrow points from the left towards this panel. The bottom panel, titled 'Issue IJ5', contains a 'Description' section with a bullet point: 'Coding Inconsistency: Resident has a diagnosis of Asthma, COPD, or Chronic Lung Disease (I6200), with no shortness of breath (J1100A, J1100B, or J1100C)'. Below this is a 'Why this is an issue' section with a bullet point: 'It is clinically unlikely that a resident with chronic lung disease would have no shortness of breath at any time. This may impact the Nursing component under PDPM.' Below that is a 'Resolving the issue' section with a bullet point: 'Coding diagnoses in Section I is a two-step process. First, identify all physician-documented diagnoses in the medical record within the last 60 days. Second, identify active diagnoses with "a direct relationship to the resident's functional status, cognitive status, mood or behavior, medical treatments, nursing monitoring, or...'. To the right of the 'Resolving the issue' section is a 'Resolution' section with three radio button options: 'No Action', 'Change MDS', and 'Explanation'. The 'Explanation' option is selected. Below these options is a text box containing the text: 'The resident is currently on an effective treatment program that has reduced his or her respiratory distress, and there has been no evidence of SOB during the lookback period.' Below the text box is a checked checkbox and the text 'Documentation Complete'. A 'Clear All' button is located at the bottom right of the 'Resolution' section. A large blue arrow points from the 'Resolving the issue' section towards the 'Documentation Complete' checkbox.

Resolving MDS Issues

When corrected MDS has been submitted, issue will resolve

If resolution is an explanation, be sure to check that documentation is present in the EHR, then check Documentation Complete Box

IDT Performance in MDS Accuracy



Monitor team performance and MDS accuracy

In the period from 07/01/2020 to 07/31/2020

Percentile: 100

Assessments Audited: 115

Percent assessments submitted more than once: 94%

Percentage of Assessments with Issues:

Average Number of Issues per Assessment:

Average Issues per MDS with Issues:

First Submission: 65%

First Submission: 1.86

First Submission: 2.85

Final Submission

Final Submission

Final Submission

Before Explanations: 64%

Before Explanations: 1.71

Before Explanations: 2.66

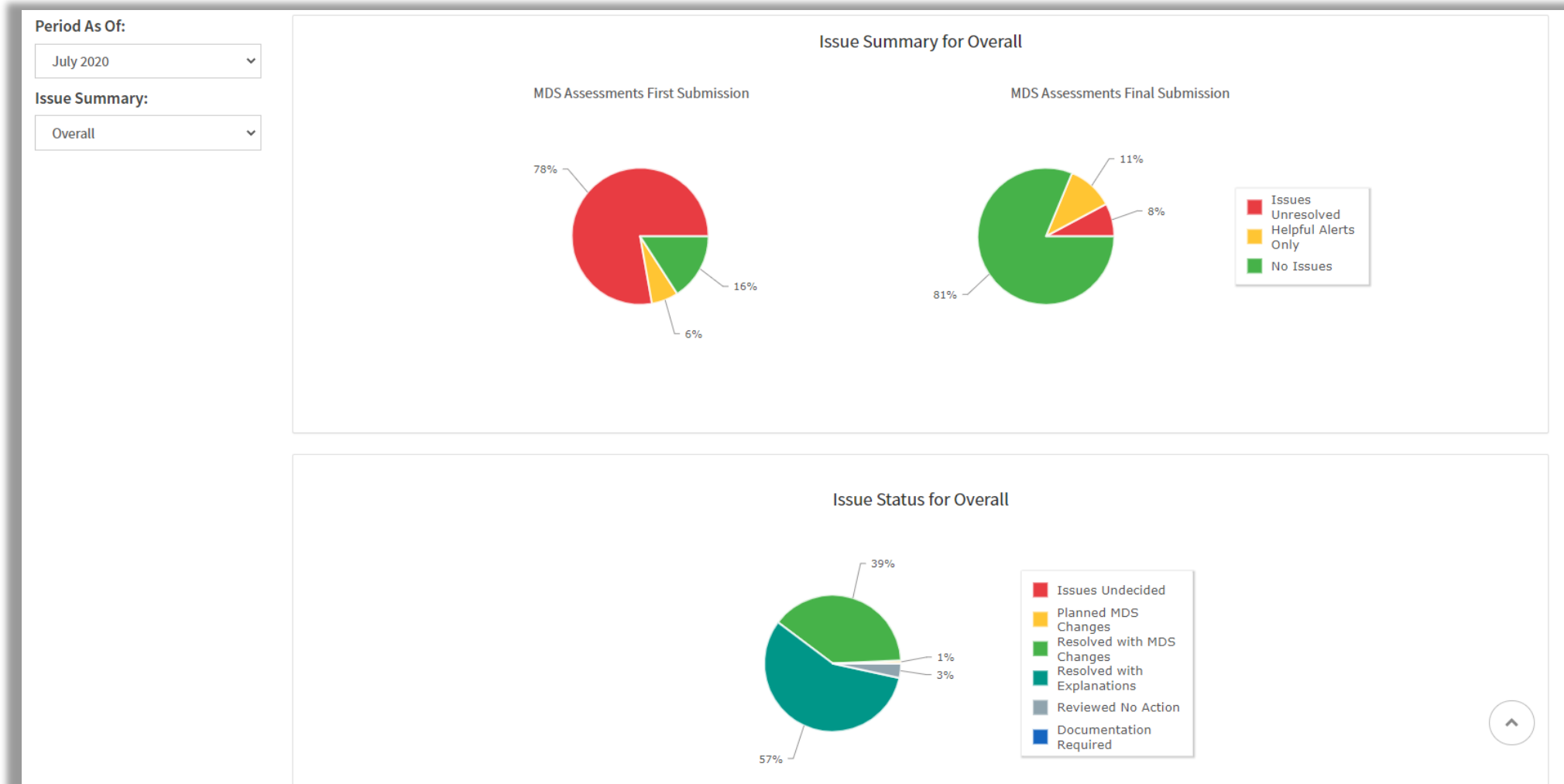
Final Submission: 10%






Final Submission: 0.11

Final Submission: 1.18



Insight into how MDS issues are resolved



 RADAR® <
Resident Roster
 Pro 30® Rehospitalization <
Facility Summary
By Month and Quarter
Trend Graph
Resident Roster
Cumulative Observed Rate
 PointRight® QM <
Facility Summary
Trend Graph
Resident Roster
 CMS Reported QM <
Facility Summary
Trend Graph
 Help <
Questions & Answers
Online Training



Navigate to RADAR > Resident Roster

RADAR – Care Management Solution

The screenshot displays the PointRight 360 interface for the RADAR Resident Roster. The top navigation bar includes the PointRight logo, a location selector for 'PR West 1 (DD-PRW1)', and user information for Maria Arellano. The left sidebar lists various modules such as Executive Dashboard, Data Integrity Audit, PDPM Insights, MDS Submission, RADAR, and Pro 30 Rehospitalization. The main content area is titled 'RADAR®: Resident Roster' and features a search filter for the date '11/01/2019'. Below the search bar, there are expandable sections for 'Current Residents', 'Recently Discharged Residents', and a 'Legend'. The legend defines risk levels: LOW (green square), MEDIUM (yellow square), and HIGH (red square). It also includes icons for 'Decline' (downward arrow) and 'Improvement' (upward arrow). A red text note at the bottom of the legend states: 'MM/DD/YYYY: MDS Correction was submitted'.

RADAR – Descriptive, Predictive and Complexity Scales

PointRight 360

Location: PR West 1 (DD-PRW1) (Change)

Maria Arellano MA Tuesday 8/18/2020

Executive Dashboard / RADAR® / RADAR®: Resident Roster

RADAR®: Resident Roster

12/11/2019 Search

Reference Guide

Current Residents

Showing 1 to 25 of 86 rows 25 rows per page

Resident Information								Descriptive Scales (Impairment)				Predictive Scales (Risk)				Complexity	
Name	Room Number	ARD	OBRA	PPS	Admission Date	Level of Care		ADL	Cognition	Mood	Pain	Falls	Pressure Ulcer	Hospitalization	Mortality	Return to SNF	Discharge Planning
+ Atco, Qkubiik	006	08/29/2019	None	14-Day	08/16/2019	Custodial		Yellow	Green Up	Green	Green	Green Up	Red Down	Red Down	Green Down	Red	77
+ Atqbvsysl, Wcnuujr	006	10/05/2019	Admission	None	09/28/2019	Custodial		Yellow	Green	Green Down	Green	Green	Yellow Down	Green Up	Red Down	Red	38
+ Cdswwspfyz, Kuosliu	006	10/05/2019	Admission	None	09/28/2019	Custodial		Yellow	Green	Green	Green	Green	Yellow	Green	Red	Red	38
+ Cxue, Tybrjfcz	018	11/07/2019	Quarterly	None	08/01/2019	Custodial		Yellow	Yellow Down	Green	Green	Red Down	Green	Yellow Up	Green Up	Red	56
+ Cyelrw, Ugan	009	09/10/2019	Quarterly	None	06/04/2019	Custodial		Yellow	Green	Green	Green No	Green	Yellow	Green Up	Green Up	Red	2
+ Dpcnfcir, Jkcoog Hospice	027	09/04/2019	Admission	None	08/28/2019	Custodial		Yellow	Red	Green	Green	Yellow	Yellow	Green	Red	Red	88
+ Ecuazeh, Unthv	021	12/02/2019	Quarterly	None	08/19/2019	Custodial		Yellow Up	Red	Green Up	Green	Red Down	Red	Yellow	Green Up	Red	67
+ Grzbow, Hduyt Hospice	034	08/29/2019	Admission	None	08/23/2019	Custodial		Yellow	Red	Green	Yellow	Red	Red	Green	Red	Red	100
+ Jatdbphs, Kbxl	037	09/17/2019	Quarterly	None	09/18/2015	Custodial		Yellow	Green	Green	Green	Green Down	Yellow Down	Yellow Down	Green	Red	21
+ Jdqd, Daa	036	11/15/2019	Quarterly	None	03/05/2015	Custodial		Yellow	Green	Green	Green	Green	Red	Green	Green	Red	33
+ Lzhymzg, Yxcrnjz	040	09/03/2019	Annual	None	08/30/2017	Custodial		Yellow	Red	Green	Green	Green Up	Green	Yellow Down	Green	Red	50
+ Ml, Oley Hospice	005	10/03/2019	Admission	None	09/26/2019	Custodial		Red	Yellow	Green	Green	Green	Red	Green	Red	Yellow	81
+ Pruevjgpc, Ltgwz	016	11/11/2019	Admission	None	11/05/2019	Custodial		Green No	Green	Green	Yellow	Green	Green No	Green	Green	Red	9



Gender: Female
 DOB: 1/18/1924 | 96 Y/O
 Marital Status: Widowed

Location: PR West 1
 SNF Admit Date: 04/30/2020
 Level of Care: Custodial | 2 months

Source: [MDS \(5/6/2020\)](#)
[MDS History](#)

Activities of Daily Living

HERE'S WHY

Medium Impairment

MDS Items that Contribute to Impairment

- ADL Score: 8

G0110 Activity	Independent	Supervision	Assistance	Dependent	Less than Three Times	Did Not Occur	Max Staff Support
Bed Mobility	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Transfer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Walking in Room	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Walking in Corridor	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Locomotion on Unit	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Locomotion off Unit	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Dressing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Eating	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Toilet Use	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Personal Hygiene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person
Bathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One Person

RADAR – Descriptive, Predictive and Complexity Scales

Identifying specific risk and contributing factors leads to Person Centered Care

PointRight 360

Location: PR West 1 (DD-PRW1) (Change) Maria Are Tuesday 8/18

Executive Dashboard / RADAR® / RADAR®: Resident Roster

RADAR®: Resident Roster

11/01/2019 Search Reference Guide

Current Residents

Showing 1 to 25 of 77 rows 25 rows per page

Resident Information								Descriptive Scales (Impairment)				Predictive Scales (Risk)				Complexity	
Name	Room Number	ARD	OBRA	PPS	Admission Date	Level of Care		ADL	Cognition	Mood	Pain	Falls	Pressure Ulcer	Hospitalization	Mortality	Return to SNF	Discharge Planning
Arqjet, Iprjiq	003	07/20/2019	None	14-Day	05/19/2019	Custodial		↓	↓	↓	↓	↓	↓	↑	↓	↓	21
Asv, Kmk	034	10/18/2019	Quarterly	None	07/13/2019	Custodial		↑	↑	↓	↓	↑	↓	↓	↓	↓	81
Atqbvsysl, Wcnuujr	006	10/05/2019	Admission	None	09/28/2019	Custodial		↓	↓	↓	↓	↓	↓	↑	↓	↓	38
Cdswspfyz, Kuosiu	006	10/05/2019	Admission	None	09/28/2019	Custodial		↓	↓	↓	↓	↓	↓	↓	↓	↓	38
Cyelrw, Ugan	009	09/10/2019	Quarterly	None	06/04/2019	Custodial		↓	↓	↓	⊘	↓	↓	↑	↑	↓	2
Dhqaxbri, Mfgd	010	07/23/2019	Quarterly	None	08/19/2015	Custodial		↓	↑	↓	↓	↓	↓	↓	↓	↓	67
Dpcnfcir, Jkcog Hospice	027	09/04/2019	Admission	None	08/28/2019	Custodial		↓	↓	↓	↓	↓	↓	↓	↓	↓	88
Ebvqkm, Ebfvr Hospice	031	10/10/2019	Admission	None	10/04/2019	Custodial		↓	↓	↓	↓	↓	↓	↓	↓	↓	50

Mortality: ATQBVSYSL, WCNUUJR



Gender:	Female	Location:	PR West 1	Source:	MDS (10/5/2019)
DOB:	9/2/1940 79 Y/O	SNF Admit Date:	09/28/2019		MDS History
Marital Status:	Never married	Level of Care:	Custodial 2 months		

Mortality

HERE'S WHY

High Risk

MDS Items that Contribute to Risk

- Extensive or total assistance for transfer (G0110B1)
- Extensive or total assistance for locomotion on unit (one person assist) (G0110E1, G0110E2)
- Assistance for eating (G0110H1)
- Always incontinent of bowel (H0400)
- Cancer, either with or without metastasis (I0100)
- Physician documentation of life expectancy of less than six months (J1400)

Other Factors to Consider

- Hospice (O0100K2)
- Life expectancy of less than 6 months (J1400)

Comprehensive Resident Summary

Care planning, care transitions, inform resident/family

PointRight 360

Location: PR West 1 (DD-PRW1) (Change)

Maria Arellano MA
Tuesday 8/18/2020

Executive Dashboard / RADAR® / RADAR®: Resident Roster

RADAR®: Resident Roster






11/01/2019 Search

Reference Guide

Current Residents

Showing 1 to 25 of 77 rows 25 rows per page

Resident Information								Descriptive Scales (Impairment)				Predictive Scales (Risk)				Complexity	
Name	Room Number	ARD	OBRA	PPS	Admission Date	Level of Care		ADL	Cognition	Mood	Pain	Falls	Pressure Ulcer	Hospitalization	Mortality	Return to SNF	Discharge Planning
+ Arqjet, Iprjq	005	07/20/2019	None	14-Day	05/19/2019	Custodial		↓	↓	↓	↓	↓	↓	↑	↓	↓	21
+ Asv, Kmk	034	10/18/2019	Quarterly	None	07/13/2019	Custodial		↑	↑	↓	↓	↑	↓	↓	↓	↓	81
+ Atqbvsys, Wcnuujr	006	10/05/2019	Admission	None	09/28/2019	Custodial		↓	↓	↓	↓	↓	↓	↑	↓	↓	38
+ Cdswnpfyz, Kuosfiu	006	10/05/2019	Admission	None	09/28/2019	Custodial		↓	↓	↓	↓	↓	↓	↓	↓	↓	38
+ Cyelrw, Ugan	009	09/10/2019	Quarterly	None	06/04/2019	Custodial		↓	↓	↓	⊘	↓	↓	↑	↑	↓	2
+ Dhqaxbri, Mfgd	010	07/23/2019	Quarterly	None	08/19/2015	Custodial		↓	↑	↓	↓	↓	↓	↓	↓	↓	67
+ Dpcnfcir, Jkcog Hospice	027	09/04/2019	Admission	None	08/28/2019	Custodial		↓	↓	↓	↓	↓	↓	↓	↓	↓	88
+ Ebvqmq, Ebfvr Hospice	031	10/10/2019	Admission	None	10/04/2019	Custodial		↓	↓	↓	↓	↓	↓	↓	↓	↓	50

 RADAR® <
Resident Roster
 Pro 30® Rehospitalization <
Facility Summary
By Month and Quarter
Trend Graph
Resident Roster
Cumulative Observed Rate
 PointRight® QM <
Facility Summary
Trend Graph
Resident Roster
 CMS Reported QM <
Facility Summary
Trend Graph
 Help <
Questions & Answers
Online Training



Navigate to PointRight Quality Measures

- Facility Summary
- Resident Roster

- PointRight 360
- Executive Dashboard
- Data Integrity Audit
- Assessment List
- Performance Trend
- Performance By Section
- Issue Summary
- PDPM Insights
- Facility Dashboard
- MDS Submission
- Submit MDS
- Previous Submissions
- Submission Tracker
- RADAR*
- Resident Roster
- Pro 30* Rehospitalization
- Facility Summary
- By Month and Quarter
- Trend Graph
- Resident Roster
- Cumulative Observed Rate
- PointRight® QM
- Facility Summary
- Trend Graph
- Resident Roster
- CMS Reported QM
- Facility Summary

Executive Dashboard / PointRight® QM / Facility Summary

PointRight® QM: Facility Summary

Date Range: May 2020 To July 2020 View

Assessments: Include All Exclude PPS That Are Not Medicare Part A

Short-Stay MDS-Based

+	Measure	Numerator	Denominator	Observed Rate	Adjusted Rate	PointRight® National Average	PointRight® National Percentile
+	Falls with Major Injury	0	4	0%		0.9%	0
+	Pain	0	5	0%		11.2%	0
+	New or Worsened Pressure Ulcers (QRP)	0	4	0%		2.0%	0
+	Improvement in Function	2	2	100%	100	69.1%	0
+	Influenza Vaccine	7	8	87.5%		87.1%	68
+	Pneumococcal Vaccine	7	8	87.5%		84.0%	62
+	Antipsychotic	0	3	0%		1.9%	0
+	Functional Assessment and Goals	4	4	100%		98.2%	0

Long-Stay MDS-Based

+	Measure	Numerator	Denominator	Observed Rate	Adjusted Rate	PointRight® National Average	PointRight® National Percentile
+	Falls (Surveyor)	14	44	31.8%		43.3%	20
+	Falls with Major Injury	2	44	4.5%		2.9%	79
+	Pain	0	25	0%	0%	6.1%	0
+	Pressure Ulcers (High-Risk Residents)	2	28	7.1%		9.0%	46
+	UTI	0	33	0%		2.4%	0
+	Incontinence (Low-Risk Residents)	5	11	45.5%		50.7%	41

Digging deeper into QM's

PointRight® Location: PR West 1 (DD-PRW1) (Change) Maria Arellano Tuesday 8/18/2020 MA

Pressure Ulcers (High-Risk Residents) (LS)

Facility Name: PR West 1 (DD-PRW1)
 Reporting Period: May 2020 - Jul 2020
 Displaying: Residents who triggered for the QM

Name	Room	ARD
PTKT, NVMWV	2 035-B	03/11/2020
XXACX, HMQP	1 004-A	02/12/2020

Showing 1 to 2 of 2 rows

Category	Count	Percentage	PointRight® National Percentile
Lower Rates are better.			
Physically Restrained Percentage of long-stay residents who were physically restrained.	1	2.4%	100

Expand + to see QM details

See your QM's flagged at 75th percentile or higher = survey risk

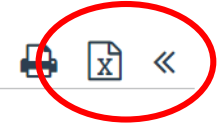
Drill into numerator to see residents who trigger QM

Check MDS Accuracy

- PointRight 360
- Executive Dashboard
- Data Integrity Audit
- Assessment List
- Performance Trend
- Performance By Section
- Issue Summary
- PDPM Insights
- Facility Dashboard
- MDS Submission
- Submit MDS
- Previous Submissions
- Submission Tracker
- RADAR
- Resident Roster
- Pro 30 Rehospitalization
- Facility Summary
- By Month and Quarter
- Trend Graph
- Resident Roster
- Cumulative Observed Rate

Executive Dashboard / PointRight QM / PointRight QM: Resident Roster

PointRight QM: Resident Roster



Date Range: To

Residents: Active Discharged

Assessments: Include All Exclude PPS That Are Not Medicare Part A

Short-Stay

Showing 1 to 1 of 1 rows

Resident Name	DOB	ARD	OBRA	PPS	Room	Falls with Major Injury	Pain	New/Worse PU (QRP)	Imp Function	Flu Vacc	Pneu Vacc	Antipsychotic	Functional Assessment and Goals	Total
AKOZJP, GYOIZDEP	06/02/1956	02/27/2020	None	5-Day	1001-B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2

Long-Stay

Showing 1 to 10 of 44 rows 10 rows per page



Resident Name	DOB	ARD	OBRA	PPS	Room	Falls	Falls with Major Injury	Pain	PU High Risk	UTI	Incont Low Risk	Catheter	Restraints	ADL Decline	Worse Movement	Weight
ORPAHDE, SKZV	03/22/1933	03/29/2020	Quarterly	None	1010-A	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PNQGGNACDSYL, CNDPNK	03/09/1934	03/10/2020	Significant Change	None	1016-A	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECUAEZH, UNTHV	01/20/1927	03/12/2020	Quarterly	None	2020-B	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EEXHNJOZ, LKRNQ	04/01/1963	04/13/2020	Annual	None	1004-B	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Path to NMVBP Success

- Accurate MDS Data = [Data Integrity Audit](#)
- Managing resident risk factors and preventing decline and hospitalizations - [RADAR](#)
- Proactively addressing quality measure trends and triggered residents – [PointRight Quality Measures](#)
- Monitor your [NMVBP P4P Scorecard](#) to manage your progress in the program.

PointRight NMVBP Tutorials

Training tutorials on each PointRight solution available at:

[PointRight NMVBP On Demand Learning Channel](#)

Watch for **Virtual Office Hours Sessions!**

- 30 minute private sessions to review areas you want to cover
- Review your data together with a PointRight team member
- Get specific training on what you need

- Watch for emails from PointRight for Virtual Office Hours schedule

QUESTIONS?

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