OASIS Alert

Benchmarking: BECOME DATA-SAVVY TO BOOST YOUR CARE AND PROFITS

As hundreds of third- and fourth-string athletes will tell you, there's a lot to be learned from the bench.

Benchmarking can be an extremely useful tool for home health agencies. "Benchmark data can be used for performance improvement efforts, to market strong programs, to demonstrate an agency's current performance and how it compares to their peers' and to identify and learn from best practices," to name just a few of the potential benefits, explains **Christine Lang**, product manager at Seattle-based **Outcome Concept Systems Inc.**

But agencies can accomplish these goals only if they understand the benchmark data and know how to use them. Agencies easily can feel confused and bogged down by endless strings of percentages, so it's important to know which of those numbers are important and how to best employ them to the agency's advantage.

First and foremost, make sure the data are worth your time. "The data must be consistent and clean," Lang emphasizes. Fortunately, OASIS is a "tremendous tool" when it comes to gathering useful data, she says. That's because it provides a means through which agencies submit consistent, standardized data that can be the basis for meaningful benchmarks. "The industry has only begun to grasp what we can learn from this information," Lang tells **Eli**.

Also, make sure you're looking at plenty of data, Lang says. "The size and breadth of the benchmark data warehouse is directly related to the usefulness of the data," she explains. That means it might be a waste of your time to compare yourself against data from only a couple of agencies, because the analysis wouldn't be "statistically valid."

Further, you should use the most up-to-date data available, Lang says. It won't do you much good to compare yourself to ancient averages. Benchmarking data should be updated at least quarterly, so you can track your results through time and keep tabs on your progress, she counsels.

Finally, keep in mind that while you want to have plenty of data to go on, you aren't limited to national averages. "Flexible benchmarking provides comparisons above and beyond the national norm, such as geographical and characteristic-based standards," Lang notes. Comparing yourself to similar agencies is a good way to focus your outcome-based quality improvement efforts, she advises.

Use Data From Several Sources

OBQI and adverse event reports are good places for HHAs to start, according to OCS. But ideally agencies should supplement those reports with more flexible, frequent and comprehensive reports. Numerous private benchmarking vendors offer these more sophisticated analysis tools.

Once you have the data you'll be using as a benchmark against which to compare your agency, the fun can begin.

Usually, you'll want your averages to be in the same ballpark with the national data, says consultant **Patti Johnston** with **Positive Outcomes** in The Woodlands, TX.

An agency's ultimate goal should be to meet or improve on the benchmarking data by implementing processes to bring about that positive change, Johnston explains. For example, if your agency has an average of 36 skilled nursing visits in a 60-day period, but the data you're comparing yourself to shows an average of 25 visits, you'll want to figure out what's causing the discrepancy and how you can narrow the gap, Johnston offers.

But before you work yourself into a fit over a vast difference between your agency's information and the benchmarking data you're using, make sure the two really are comparable. The difference simply could be due to the differences in the types of patients your agency cares for, Lang notes. "By comparing and contrasting like subsets of patients, agencies can get a more accurate picture of their performance."