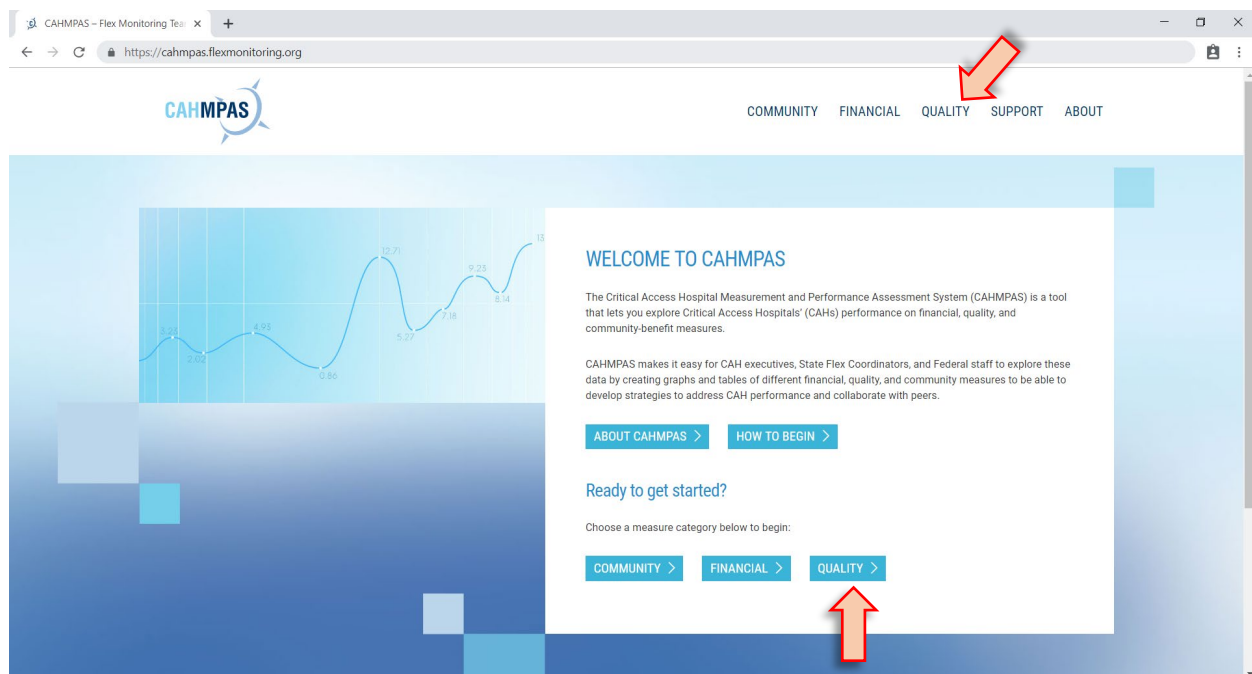


## Step-by-step CAHPAS Guide for Quality Improvement Data

This document provides a step-by-step guide to using CAHPAS to create data reports for quality improvement data. Step-by-step guides for financial and community data are available [here](#).

### Choosing a data type

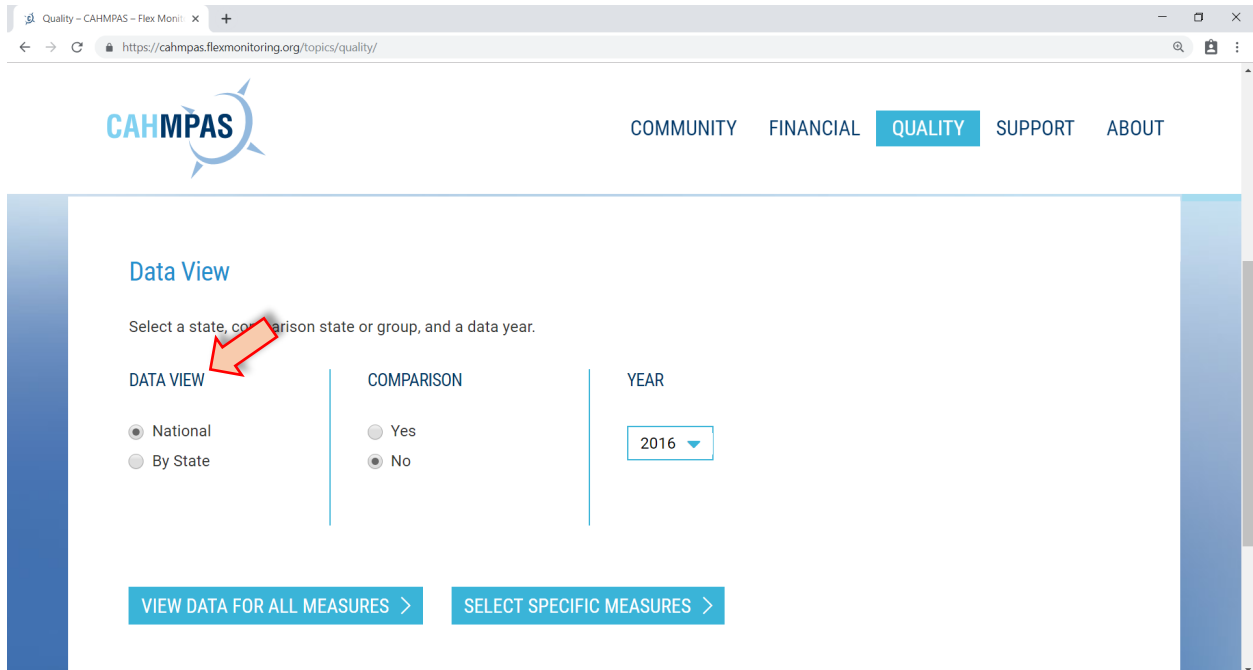
Using the navigation tool bar at the top of the screen or the link on the homepage, select “Quality” to explore the quality data.



## Pick data view

Once you have navigated to the quality data page, select national data or specify which state's data you are interested in.

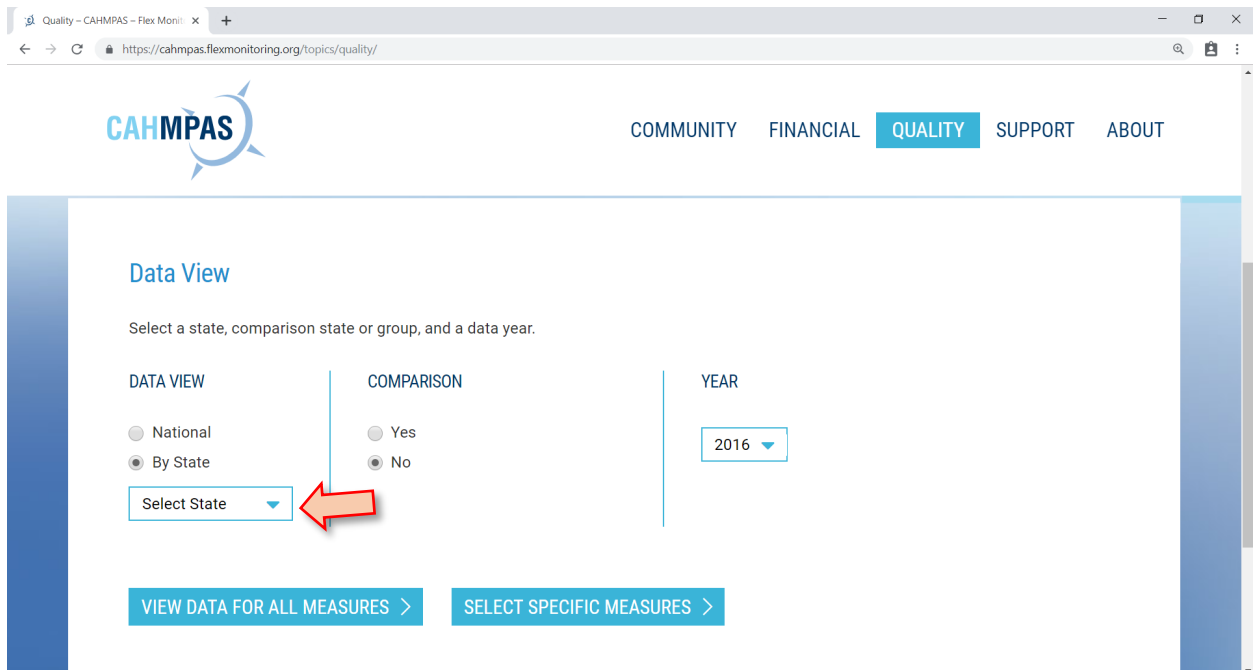
### SELECT NATIONAL:



The screenshot shows the CAHMPAS website's Quality Data View page. The URL is <https://cahmpas.flexmonitoring.org/topics/quality/>. The page has a navigation bar with links for COMMUNITY, FINANCIAL, QUALITY (highlighted), SUPPORT, and ABOUT. The main content area is titled "Data View" and includes the instruction "Select a state, comparison state or group, and a data year." Below this, there are three columns: DATA VIEW, COMPARISON, and YEAR. In the DATA VIEW column, the "National" radio button is selected, and a red arrow points to it. In the COMPARISON column, the "No" radio button is selected. In the YEAR column, a dropdown menu shows "2016". At the bottom, there are two buttons: "VIEW DATA FOR ALL MEASURES >" and "SELECT SPECIFIC MEASURES >".

OR

### SELECT STATE:



The screenshot shows the same CAHMPAS website's Quality Data View page. The URL is <https://cahmpas.flexmonitoring.org/topics/quality/>. The page has a navigation bar with links for COMMUNITY, FINANCIAL, QUALITY (highlighted), SUPPORT, and ABOUT. The main content area is titled "Data View" and includes the instruction "Select a state, comparison state or group, and a data year." Below this, there are three columns: DATA VIEW, COMPARISON, and YEAR. In the DATA VIEW column, the "By State" radio button is selected, and a red arrow points to the "Select State" dropdown menu below it. In the COMPARISON column, the "No" radio button is selected. In the YEAR column, a dropdown menu shows "2016". At the bottom, there are two buttons: "VIEW DATA FOR ALL MEASURES >" and "SELECT SPECIFIC MEASURES >".

## Pick a comparison state or group and a data year

You can compare any state to another state, states in the same HRSA region, or states with a similar number of Critical Access Hospitals. This is an optional step.

The screenshot shows the 'Data View' section of the CAHMPAS website. The page has a header with the CAHMPAS logo and navigation links: COMMUNITY, FINANCIAL, QUALITY (highlighted), SUPPORT, and ABOUT. Below the header, the 'Data View' section contains the instruction 'Select a state, comparison state or group, and a data year.' There are three main sections: 'DATA VIEW', 'COMPARISON', and 'YEAR'. In the 'DATA VIEW' section, the 'By State' radio button is selected, and 'Illinois' is chosen from the dropdown. In the 'COMPARISON' section, the 'Yes' radio button is selected, and 'California' is chosen from the dropdown. In the 'YEAR' section, '2016' is selected from the dropdown. Two red arrows point to the 'Yes' radio button and the 'California' dropdown. At the bottom, there are two buttons: 'VIEW DATA FOR ALL MEASURES >' and 'SELECT SPECIFIC MEASURES >'.

**Data View**

Select a state, comparison state or group, and a data year.

**DATA VIEW**

☐ National  
☒ By State

Illinois

**COMPARISON**

☒ Yes  
☐ No

California

**YEAR**

2016

[VIEW DATA FOR ALL MEASURES >](#) [SELECT SPECIFIC MEASURES >](#)

Next, select a data year.

This screenshot is identical to the previous one, showing the 'Data View' section of the CAHMPAS website. The 'DATA VIEW' section has 'By State' selected with 'Illinois' chosen. The 'COMPARISON' section has 'Yes' selected with 'California' chosen. The 'YEAR' section has '2016' selected. A red arrow now points to the '2016' dropdown in the 'YEAR' section. The buttons at the bottom remain the same: 'VIEW DATA FOR ALL MEASURES >' and 'SELECT SPECIFIC MEASURES >'.

**Data View**

Select a state, comparison state or group, and a data year.

**DATA VIEW**

☐ National  
☒ By State

Illinois

**COMPARISON**

☒ Yes  
☐ No

California

**YEAR**

2016

[VIEW DATA FOR ALL MEASURES >](#) [SELECT SPECIFIC MEASURES >](#)

## Selecting measures

You can move to the results page and see all of the data available by selecting “View Data for All Measures” or you can refine the output by clicking “Select Specific Measures.”

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https://cahmpas.flexmonitoring.org/topics/quality/

CAHMPAS

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### Data View

Select a state, comparison state or group, and a data year.

**DATA VIEW**

☐ National  
☒ By State

Illinois

**COMPARISON**

☒ Yes  
☐ No

California

**YEAR**

2016

**VIEW DATA FOR ALL MEASURES >** **SELECT SPECIFIC MEASURES >**

Entire measure categories like “MBQIP Core Measures” or “HCAHPS Measures” can be selected. Or you can choose individual measures such as IMM-2 or OP-18.

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https://cahmpas.flexmonitoring.org/topics/quality/

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### Refine Measures

Select a single measure category (e.g., Outpatient Measures) and/or one or more individual measures (e.g., OP-27) for which you'd like to see results.

**MEASURE CATEGORY**

Select Measure Category

**MEASURES**

Select Measure

**ADD TO MEASURE LIST >**

**SELECTED MEASURE(S)**

- No selections; all available measures will be displayed in the generated outputs

**VIEW REFINED DATA >**

After a measure category or individual measure is selected from the drop down menu, click “Add to List” to include it in the results.

The screenshot shows the 'Refine Measures' page on the CAHMPAS website. The page has a header with the CAHMPAS logo and navigation links: COMMUNITY, FINANCIAL, QUALITY (highlighted), SUPPORT, and ABOUT. Below the header, the 'Refine Measures' section contains instructions: 'Select a single measure category (e.g., Outpatient Measures) and/or one or more individual measures (e.g., OP-27) for which you'd like to see results.' There are two main sections: 'MEASURE CATEGORY' and 'MEASURES'. The 'MEASURE CATEGORY' section has a dropdown menu currently set to 'MBQIP Core Measures'. The 'MEASURES' section has a dropdown menu currently set to 'HCAHPS Composite 1 – Communi'. To the right of this dropdown is a blue button labeled 'ADD TO MEASURE LIST >'. Below the 'MEASURES' section is a 'SELECTED MEASURE(S)' section which currently displays 'No selections; all available measures will be displayed in the generated outputs'. At the bottom of the form are two buttons: 'VIEW REFINED DATA >' and 'CLEAR SELECTIONS >'. A red arrow points to the 'ADD TO MEASURE LIST >' button.

If you add a measure or measure category you do not want, click “Remove” next to the measure in the Measures Selections list. Or, click the “Clear Selections” button to remove all of the added measures.

This screenshot shows the 'Refine Measures' page after a measure has been added. The 'MEASURE CATEGORY' dropdown remains 'MBQIP Core Measures'. The 'MEASURES' dropdown remains 'HCAHPS Composite 1 – Communi'. The 'ADD TO MEASURE LIST >' button is still present. The 'SELECTED MEASURE(S)' section now lists 'HCAHPS Composite 1 – Communication with nurses' with a blue 'Remove' link next to it. A red arrow points to the 'Remove' link. Another red arrow points to the 'CLEAR SELECTIONS >' button at the bottom of the form.

Once you have finalized the measures, click “View Refined Data” to view the selected data.

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https://cahmpas.flexmonitoring.org/topics/quality/

CAHMPAS

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### Refine Measures

Select a single measure category (e.g., Outpatient Measures) and/or one or more individual measures (e.g., OP-27) for which you'd like to see results.

MEASURE CATEGORY

MBQIP Core Measures

AND/OR

MEASURES

HCAHPS Composite 1 - Communi

ADD TO MEASURE LIST >

SELECTED MEASURE(S)

- HCAHPS Composite 1 - Communication with nurses [Remove](#)

VIEW REFINED DATA > CLEAR SELECTIONS >

## Viewing results

The Data Summary page contains all of the outputs for the measures you selected. If you would like to modify the selected state, year, or measures, use the tool bar at the top of the Data Summary page to click “Edit” to change the Selected Measures or Data View.

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https://cahmpas.flexmonitoring.org/topics/quality/?view\_data=yes&s1\_data\_view=national&s1\_state=234&s1\_compare=no&s1\_peer\_group\_national=&s1\_peer\_group\_state=227&s1\_data\_year=222&s2\_m...

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DATA VIEW: National IN: 2016

EDIT >

SELECTED MEASURES: All Available Measures

EDIT >

### DATA SUMMARY:

National - 2016

AVAILABLE OUTPUTS

- [CAH Participation in Hospital Compare, 2016 \(N=1,343\)](#)
- [Percent of CAHs Reporting HCAHPS Survey Data, 2010-16](#)
- [State Rankings of CAH Reporting Rates for Inpatient Quality Measures, 2016](#)
- [State Rankings of CAH Reporting Rates for Outpatient Quality Measures, 2016](#)
- [Inpatient and Outpatient Process of Care Results for Patients Discharged from Reporting CAHs, 2016](#)
- [Median Time to Patients Receiving Recommended Care at CAHs, 2016](#)

A list of available outputs is featured at the top of the Data Summary page. Click on any of the available outputs to jump down the page to that output. From here, you can also print all of the outputs using the “Print All” button.

**DATA SUMMARY:**  
National – 2016

**AVAILABLE OUTPUTS**

- CAH Participation in Hospital Compare, 2016 (N=1,343)
- Percent of CAHs Reporting HCAHPS Survey Data, 2010-16
- State Rankings of CAH Reporting Rates for Inpatient Quality Measures, 2016
- State Rankings of CAH Reporting Rates for Outpatient Quality Measures, 2016
- Inpatient and Outpatient Process of Care Results for Patients Discharged from Reporting CAHs, 2016
- Median Time to Patients Receiving Recommended Care at CAHs, 2016
- Structural Quality Measures Reported by CAHs, 2016
- State Rankings of HCAHPS Participation Rates for CAHs, 2016
- Completed HCAHPS Surveys among CAHs Reporting Data, 2010-16
- Detail of HCAHPS Survey Completion Rates among CAHs Reporting Data, 2016
- Critical Access Hospitals by Number of Completed HCAHPS Surveys and Hospital Admissions, 2016
- Number of Completed HCAHPS Surveys and Response Rates for CAHs, 2016
- HCAHPS Results for CAHs by State, 2016

**PRINT ALL >**

At the bottom of each individual output is a “Return to Summary” button that will bring you back to the list. Each output has the option to be printed individually using the “Print” button at the bottom of the output.

**CAHMPAS**

**CAH Participation in Hospital Compare, 2016 (N=1,343)**

Period	Inpatient (%)	Outpatient (%)
13Q2-14Q1	86.4	54.0
14Q2-15Q1	84.7	50.7
2015	84.2	67.1
2016	85.6	60.2

1. N value refers to most recent data (2016). Prior years' N values are as follows: Q3Q2-14Q1, 1,338; 14Q2-15Q1, 1,336; 2015, 1,332.  
Note: Bars with multiple years list rates for periods offset by one quarter, from April to the following March. Q1 2015 data are included in both the "2014-15" and "2015" rates.

**RETURN TO SUMMARY >** **PRINT >**

**Percent of CAHs Reporting HCAHPS Survey Data, 2010-16<sup>a</sup>**

Year	Percent (%)
2010	38.0
2011	41.3
2012-13	49.0
2013-14	59.0
2014-15	70.6
2015	75.8
2016	81.2

a. Data for 2012 Q1 are unavailable due to Federal government shutdown. Bars with multiple years list rates for periods offset by one quarter, from April to the following March. Q1 2015 data are included in both the "2014-15" and "2015" rates.

**RETURN TO SUMMARY >** **PRINT >**

Data from individual tables can also be downloaded as an Excel spreadsheet using the “Download XLS” button.

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https://cahmpas.flexmonitoring.org/topics/quality/?view\_data=yes&s1\_data\_view=national&s1\_state=234&s1\_compare=no&s1\_peer\_group\_national=&s1\_peer\_group\_state=227&s1\_data\_year=222&s2\_m...

CAHMPAS

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### Median Time to Patients Receiving Recommended Care at CAHs, 2016

Green: Significantly better than rate for all other CAHs nationally (p<.05)  
Red: Significantly worse than rate for all other CAHs nationally (p<.05)

Measure	Description	CAHs reporting	Median Minutes <sup>1</sup>
ED-1b†	Median time from ED admission to ED departure for admitted patients	651	202.0
ED-2b†	Admit decision time to ED departure time for admitted patients	651	47.0
OP-18b†	Median time from ED arrival to ED departure for discharged patients	724	104.5
OP-1†	Median time to fibrinolysis	342	32.0
OP-20†	Median time from door to diagnostic evaluation	725	17.0
OP-21†	Median time to pain management for long bone fracture	697	45.0
OP-3b†	Median time to transfer to another facility - acute coronary intervention	414	66.8
OP-5†	Median time to ECG	757	7.5

1. Median number of minutes to receiving recommended care (lower is better for all median time measures)  
\* Insufficient data to calculate rate (<25 patients).  
† MBOIP core measure FY 2018-21 (this table shows Hospital Compare data)  
‡ MBOIP additional improvement measure FY 2018-21 (this table shows Hospital Compare data)

RETURN TO SUMMARY > PRINT > **DOWNLOAD XLS >**

For more information or to ask a question related to CAHMPAS, please contact us at: [monitoring@flexmonitoring.org](mailto:monitoring@flexmonitoring.org)

**Flex Monitoring Team**

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