Agenda

- Introductions and Announcements
  - Summary results: Annual Influenza Immunization Survey of Health Care Personnel
  - Update on HEN 2.0 and PTN

- Patient and Family Engagement
  - Summary of CMS PFE Metrics #1-5
  - A closer look at PFE Metric #1

- 2015 Kansas HEN Data and Measures Update

- Wrap up
  - Resources and Upcoming Events
  - Discussion / Questions
Presenters

Cheryl Ruble, MS, RN, CNS
Improvement Advisor
Cynosure Health
San Mateo, CA

Eric Cook-Wiens, MPH
Data and Measures Manager
Kansas Healthcare Collaborative
Topeka, KS

Michele Clark, MBA, CPHQ, ABC
Program Director
Kansas Healthcare Collaborative
Topeka, KS

Announcements:

► 2014-15 Summary Results: Kansas Health Care Personnel Influenza Immunization Survey

► Practice Transformation Network (PTN)

► Hospital Engagement Network (HEN 2.0)
Polling Question #1

Which one of the following weeks will National Infection Prevention Week and Healthcare Quality Week be observed?

a) October 4-10  
b) October 11-17  
c) October 18-24  
d) October 25-31

Survey Summary Results:
2014-15 Influenza Immunization of Health Care Personnel (HCP)

- Surveyed all IPPS and CAH Kansas hospitals (141)  
  - Critical Access = 84  
  - IPPS = 57 (43 ACU, 14 surgical centers)
- Online survey conducted July 8 – August 20, 2015  
- Seventh annual survey, survey is newly aligned with NHSN HCP Influenza Immunization module  
- 100% response rate for intervention portion of survey  
- 91.4% response rate for HCP data portion  
  - 79 completed KHC online survey  
  - 51 hospitals conferred NHSN data to KHC  
  - 11 hospitals did not confer NHSN
Survey Summary Results:
2014-15 Influenza Immunization of Health Care Personnel

What is the HCP immunization rate?

- **Kansas Goal**: 100%
- **91.0%** (State)
- **90.4%** (National)

By Facility Type

- **IPPS**: 93.5%
- **CAH**: 81.8%

Includes all four HCP categories.
Data reflects responses by 91.4% of all Kansas IPPS and CAH hospitals.
Summary Results:

What is Kansas HCP immunization rate?

By Employee Group

<table>
<thead>
<tr>
<th>Employee Group</th>
<th>HCP</th>
<th>LIP</th>
<th>Volunteers</th>
<th>Contractors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immunization Rate</td>
<td>92.5%</td>
<td>76.8%</td>
<td>94.2%</td>
<td>90.3%</td>
</tr>
</tbody>
</table>

Percent of hospitals responding to each HCP category:
HCP (91.4%), LIP (87.9%), Volunteers and Contractors (88.6% each)

Summary Results:

1. What proportion of Kansas hospitals have a condition-of-employment policy?
2. What is the difference in immunization rates among hospitals with a policy compared to those without?

Condition of Employment Policy?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>36.9%</td>
<td>60.3%</td>
<td>2.8%</td>
</tr>
</tbody>
</table>

Immunization Rate with/without Policy

<table>
<thead>
<tr>
<th>IPPS</th>
<th>CAH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>95.0%</td>
<td>90.0%</td>
</tr>
<tr>
<td>96.0%</td>
<td>71.7%</td>
</tr>
</tbody>
</table>

Reflects data from 91.4% of Kansas hospitals
Summary Results:

How does policy impact rates of specific HCP groups?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCP</td>
<td>97.2%</td>
<td>85.7%</td>
</tr>
<tr>
<td>LIP</td>
<td>83.5%</td>
<td>68.2%</td>
</tr>
<tr>
<td>Volunteers</td>
<td>96.1%</td>
<td>91.6%</td>
</tr>
<tr>
<td>Contractors</td>
<td>93.8%</td>
<td>87.8%</td>
</tr>
</tbody>
</table>

Percent of hospitals responding to each HCP category:
HCP (91.4%), LIP (87.9%), Volunteers and Contractors (88.6% each)

Summary Results:

Which promotion strategies are most used to enhance HCP influenza immunization?

Top 5 Most Frequently Used Methods

<table>
<thead>
<tr>
<th>Method</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education on risks/benefits</td>
<td>77.3%</td>
</tr>
<tr>
<td>Send reminders</td>
<td>63.1%</td>
</tr>
<tr>
<td>Campaign/advertise</td>
<td>61.0%</td>
</tr>
<tr>
<td>Report rates to hospital admin.</td>
<td>60.0%</td>
</tr>
<tr>
<td>Track and target</td>
<td>44.7%</td>
</tr>
</tbody>
</table>

96.9% response rate
Summary Results:

What type of documentation is acceptable?

<table>
<thead>
<tr>
<th>Documentation</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note from person/org that administered vaccine</td>
<td>67%</td>
</tr>
<tr>
<td>Receipt or other proof of purchase</td>
<td>60%</td>
</tr>
<tr>
<td>Insurance claim</td>
<td>32%</td>
</tr>
<tr>
<td>Signature of HCW on standard form attesting to vaccination</td>
<td>30%</td>
</tr>
<tr>
<td>Handwritten stmt or email from HCW</td>
<td>16%</td>
</tr>
</tbody>
</table>

Next Steps

Protect your patients, workers and everyone visiting your facility. Immunize health care personnel against influenza.

- KHC will soon release 2014-15 statewide survey summary.
- Visit online toolkit at www.khconline.org.
Transforming Clinical Practice Initiative (TCPI)
A Service Delivery Innovation Model


Kansas Practice Transformation Network information and recorded webinar at:
www.khconline.org/kansas-ptn-overview

Proposed Hospital Onboarding

HEN 2.0: Announcement Pending
First 90 Days (upon award)

- Hospital commitment letter signed by Hospital Executive and Quality Director
- Work on all applicable core topic areas, as well as operational metrics and other focus areas as needed
- Renew QHI data agreement, confer NHSN rights to updated KHC groups
- Baseline data submission (if not already provided)
- Needs Assessment (online)
- Team onboarding with HEN 2.0 program
- KHC site visit with hospital quality/leadership team
  - Develop an individualized action plan

See August 2015 Kansas HEN Webinar Archive at:
www.khconline.org/general-education-archive#hen
Patient and Family Engagement:

► Defining PFE
► Why PFE?
► CMS: 5 key PFE strategies
► A closer look at planning checklists (PFE Metric #1)
► Resources

Defining Patient and Family Engagement

“Patient and family engagement [is defined] as patients, families, their representatives, and health professionals working in active partnership at various levels across the health care system – direct care, organizational design and governance, and policy making – to improve health and health care.”

Carman et al., 2013, *Health Affairs*

Source: HPOE Webinar, Improving Patient and Family Engagement in U.S. Hospitals, September 15, 2015
Patient and Family Engagement 5 Best Practice Metrics

**Point of Care**
- Planning checklist for patients known to be coming to the hospital.
- Conducting shift change huddles and bedside reporting with patients and family members in all feasible cases.

**Policy and Protocol**
- Designation of an accountable leader in the hospital who is responsible for PFE.
- Hospital has an active PFAC or other committees where patients are represented.

**Governance**
- Hospital has one or more patient representatives serving on the hospital Board of Directors.

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**PfP Hospitals’ Progress in Patient and Family Engagement, February 2013 – June 2014**

Source: CMS, QualityNet, December 2014
Patient and Family Engagement Metrics

- Kansas HEN (1/2015)
- National Partnership for Patients (9/2014)

Prior to admission, does your staff provide and discuss a planning checklist with every patient that has a scheduled admission, allowing questions or comments from the patient or family?

Hospitals conduct shift change huddles and do bedside reporting with patients and family members in all feasible cases.

Hospital has a dedicated person or functional area that is proactively responsible for patient and family engagement and systematically evaluates PFE activities.

Hospital has an active PFAC or at least one former patient that serves on a patient safety or quality improvement team.

Hospital has at least one or more patient(s) who serve on a governing or leadership board and serves as a patient representative.

Polling Question

What type of “planned” admissions does your hospital typically have? (select all that apply)

a) Childbirth
b) Surgery
c) Planned procedure
d) Other (type examples into chat)
e) None
Polling Question

Does your hospital have a checklist for planned admissions that staff use?

a) Yes, it’s a great one!
b) Yes, but it’s minimal and not PFE focused
c) No
d) Not sure

What is Patient & Family Engagement (PFE)?
Metric #1: Planning checklist for patients known to be coming to the hospital

“Prior to admission, does your staff provide and discuss a planning checklist with every patient that has a scheduled admission, allowing questions or comments from the patient or family”
Patient & Family
Engagement

KANSAS HEALTHCARE COLLABORATIVE

ONE WAY

KANSAS HEALTHCARE COLLABORATIVE
Patient & Family Engagement

SHARE

Why?
Patient & Family Engagement

Checklist

Kansas Healthcare Collaborative, www.khconline.org
Pre-Admission Checklist: PFE Focused

- Cultural & spiritual practices – what’s important to them
- Primary spoken language – will an interpreter be needed?
- How would they like to be addressed
- Primary contact or DPA
  - Can information be shared with contact
- Discussion on what to expect day of admission and hospital stay and how to prepare
Pre-Admission Checklist: PFE Focused

- Who’s to be included in their care (caregiver) – is there someone important to them that they want involved in healthcare decision making, discharge preparations/education
- Anticipated discharge needs – someone to help them post-discharge, meds, office visits, stairs, meals...
- What would they like to share – questions, concerns, preferences, what is important to them

Polling Question

Does your hospital have a discharge checklist that staff use?

- a) Yes, it’s a great one!
- b) Yes, but it’s minimal and not PFE focused
- c) No
- d) Not sure
Metric 1 Checklist: Key Elements Discharge Planning

- Patients/families included as full partners
- Discussion on preventing problems at home
- Educate in plain language
- Assess how well care team has explained and next steps – use teach back
- Listen and honor patient/family goals, preferences, observations, and concerns

AHRQ’s Guide to Patient and Family Engagement in Hospital Quality and Safety

Discharge Planning: Setting the Patient Up for Success

Pre-admission  Hospitalization  Discharge
AHRQ’s Guide to Patient and Family Engagement in Hospital Quality and Safety

IDEAL Discharge Planning Checklist

How to do this?

- Frontline staff
- PDSA
- Patient feedback
Next Steps….

- Check to see what is current practice now
- Review for PFE Ideal Discharge elements
- Invite staff to help with incorporating Ideal Discharge Planning checklist elements
- Ask patient and family advisors what’s important to them and when in the process would it be most helpful

Polling Question

What are you going to do by next Tuesday? (select all that apply)

a) Check to see what we have now
b) Review current practices for PFE and Ideal DC planning elements
c) Invite staff and other key persons to PDSA
d) Other (type examples into chat)
“There’s Not One Right Answer”

PFE Resources

Partnership for Patients Healthcare Communities’
PFE Master Classes (archive)

See Master Class 6
PFE and Discharge Planning Checklists
01-27-2014

- Master Class 2: Patient and Family Advisory Councils 05-10-2013
- Master Class 3: Shift Change Huddles at the Bedside 09-23-2013
- Master Class 4: Staff Assigned to PFE 10-21-2013
- Master Class 5: Patients on Governing Board 11-25-2013
- Master Class 6: PFE and Discharge Planning Checklists 01-07-2014
- Master Class 7: Engaging the Family Caregiver at the Point of Care 03-24-2014
- Master Class 8: Health Literacy 03-24-2014
- Master Class 9: Medication Management and Rehospitalizations 04-21-2014
- Patient and Family Advisory Councils 07-23-2012
- Patient and Family Centered Care at Dignity Health 02-27-2012
PFE Resources

- AHRQ's Guide to Patient and Family Engagement in Hospital Quality and Safety
  [www.ahrq.gov/professionals/systems/hospital/engagingfamilies/guide.html]
- The Institute for Patient and Family Centered Care. [www.ipfcc.org]
- Institute for Healthcare Improvement. [www.ihi.org]
- The American Hospital Association and Institute for Family Centered Care’s Strategies for Leadership: Advancing the Practice of Patient-and-Family-Centered Care. [www.aha.org/content/00-10/resourceguide.pdf]
- The American Hospital Association and Institute for Family Centered Care’s Strategies for Leadership: Patient-and-Family-Centered Care: A Hospital Self-Assessment Inventory. [www.aha.org/content/00-10/assessment.pdf]

References


Additional References

Kansas HEN Data and Measures Update

- Data Submission Schedule
- Data Reports

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785-235-0763 x1324

### Kansas HEN 2015 Data Submission Schedule

<table>
<thead>
<tr>
<th>Outcome &amp; Process Measures for HACs occurring in:</th>
<th>Readmissions for index discharges in, and SSI for procedures performed in:</th>
<th>Submission Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>December</td>
<td>February 28</td>
</tr>
<tr>
<td>February</td>
<td>January</td>
<td>March 31</td>
</tr>
<tr>
<td>March</td>
<td>February</td>
<td>April 30</td>
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<td>April</td>
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<td>May 31</td>
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<td>May</td>
<td>April</td>
<td>June 30</td>
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<td>July 31</td>
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<td>September 30</td>
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<td>September</td>
<td>August</td>
<td>October 31</td>
</tr>
<tr>
<td>October</td>
<td>September</td>
<td>November 21</td>
</tr>
<tr>
<td>November</td>
<td>October</td>
<td>December 31</td>
</tr>
</tbody>
</table>
**Sample Facility-level HEN Data Report**

**How are cell colors assigned?**

- **Green**
  - A current streak of at least 3 months with zero numerator events, or
  - A reduction from baseline of 40% (20% for readmissions)*, or
  - Rate for the most recent 3 months meets the national benchmark set by CMS or HRET

- **Yellow**
  - Reduction from baseline, but not yet achieving target (40% or 20% for readmissions)*

- **Red**
  - No reduction from baseline*

- **Grey**
  - No data submitted, or
  - Insufficient data: Fewer than 8 monthly data points submitted, or
  - Sparse data: Data is submitted, but there were too few denominator events to evaluate change over time

- **N/A**
  - Inapplicable focus areas for certain facilities (e.g. CLABSI, SSI, OB or VAE)

- **Orange**
  - Most recent submitted data more than 6 months old

*Current performance is determined by most recent 3 months of monitoring data. Baseline performance is determined by the 2011 annual baseline (if available) or by the earliest 3 months of monitoring data.

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**Percentage of Hospitals Achieving Cell Color: Outcome Measures**

(9/08/2015 snapshot)

- ADE:Insulin: 47%
- ADE:Naloxone: 51%
- ADE:Warfarin: 45%
- Falls: 40%
- HAPU: S2: 55%
- HAPU: S3: 68%
- HF:Read.: 51%
- Read.: 84%
- VTE: 84%

- Green: Met 40/20 reduction target, benchmark rate, or an ‘0’ streak
- Yellow: Reduction, but not yet meeting 40/20 target
- Red: No Reduction
- Grey: Insufficient, sparse, or no data

---
Percentage of Hospitals Achieving Cell Color: Infection Outcome Measures
(9/8/2015 snapshot)

- **CAUTI**: 78%
- **CLABSI**: 83%
- **SSI:COLO**: 22%
- **SSI:HYST**: 30%
- **SSI:Opt.2**: 50%

Color Key:
- Green: Met 40/20 reduction target, benchmark rate, or an '0' streak
- Yellow: Reduction, but not yet meeting 40/20 target
- Red: No Reduction
- Grey: Insufficient, sparse, or no data

Percentage of Hospitals Achieving Cell Color: OB Outcome Measures
(9/8/2015 snapshot)

- **EED**: 85%
- **OB:Mssve tx.**: 68%
- **OB:Tot. tx.**: 51%

Color Key:
- Green: Met 40/20 reduction target, benchmark rate, or an '0' streak
- Yellow: Reduction, but not yet meeting 40/20 target
- Red: No Reduction
- Grey: Insufficient, sparse, or no data
Kansas HEN Data Reports

- September report distributed on 9/8/2015
  - Data snapshot is 9/8/2015, for the period ending June 30, 2015
- Overall, results are very similar to the last report

- Next quarterly report: December 2015
- Updated reports are available by request
- If you have trouble with the Sharefile link, let us know, and we can send a PDF.

KQIP Recommendation

[Link to recommendation document]

KQIP recommends all Kansas hospitals use NHSN for tracking HAI and HCP Immunization.

CDC's standardized definitions should be used to promote and assess progress.

**Bold goal:** 100% of Kansas hospitals (including CAHs) will actively use NHSN by January 1, 2016.
Number of Kansas Facilities on NHSN reporting to the Kansas HAI Reporting Group

<table>
<thead>
<tr>
<th>Type of Facility</th>
<th># Reporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute Care</td>
<td>53 of 54 (98%)</td>
</tr>
<tr>
<td>Critical Access</td>
<td>28 of 84 (33%)</td>
</tr>
<tr>
<td>Total</td>
<td>81 of 138 (59%)</td>
</tr>
</tbody>
</table>

With the ease of the new, secure, online sign-up system and in-state technical support, expert assistance is available to help your hospital begin using NHSN.

For assistance, contact Joey Scaletta or Robert Geist, KDHE, (jscaletta@kdhe.ks.gov or 785-296-4090) or Nadyne Hagmeier, KFMC (nhagmeier@kfmc.org or 800-432-0770 x374).

Announcements & Updates

- KHC Summit on Quality
- Upcoming Events
- Resources
- Contacts

For more information contact:

Michele Clark
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Kansas Healthcare Collaborative
mclark@khconline.org
785-235-0763 x1321
Announcements

SEVENTH ANNUAL SUMMIT ON QUALITY
October 16, 2015
Wichita Marriott
Nationally-recognized keynote speakers address harm avoidance, physician burn-out
Exciting breakout sessions featuring successful quality improvement initiatives at Kansas facilities
Poster session highlighting Kansas research

For event details, see KHC’s website:
www.khconline.org/summit-on-quality

Announcements

Kansas Healthcare Collaborative

Leadership in Quality Award
Nominations Deadline Extended to September 25
Visit our Summit on Quality page for nomination forms

For event details, see KHC’s website:
www.khconline.org/summit-on-quality
Upcoming Partner Events:

October 2, 2015 • 12 – 1 pm CT
Enhancing Hospital Discharge Data
More information and link to register (free):
www.hpoe.org/resources/hpoe-live-webinars/2663

October 15, 2015 • Wichita, Ks.
KARQM Educational Program
For more information or to register, contact the Kansas Hospital Association, (785) 233-7436

October 23, 2015 • Independence, Mo.
Greater Kansas City APIC Conference
Infection Prevention and Control: Rapid & Radical Response
Link to register:
http://community.apic.org/greaterkansascity/home

Upcoming KHC Events

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Details</th>
</tr>
</thead>
</table>
| October 16 | 7th Annual Summit on Quality
              Wichita Marriott                                                             |
| October 22 | Kansas PFAC Collaborative
              Coaching Session                                                              |
| October 28 | Kansas HEN Webinar                                                            |
| November 18 (tentative) | Kansas HEN 2.0 Kickoff Event
              KaMMCO Conference Center, Topeka                                               |

Pre-register at www.khconline.org
Kansas HEN Webinar Archive

Access recordings and handouts at www.khconline.org

See General Education Archive.

2015
August  Preview to Hospital Engagement Network, HEN 2.0
June    Health Care Personnel Influenza Immunization
May     Hospital quality report cards and honor rolls
April   Transforming Clinical Practice Initiative
March   Early Elective Delivery Prevention: Taking It to the Next Level
February Patient and Family Engagement, Introduction to Kansas PFAC Collaborative
January Celebrating Successes, Olathe Health System’s approach to performance excellence

Contact Us

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