South Central HIINergy Partners

Six states partnering for quality and patient safety through the Hospital Improvement Innovation Network

The New Frontier in Quality and Patient Safety: Equity and Diversity

September 27, 2017

Welcome and opening remarks

- Agenda
- Introductions
- Announcements

South Central HIINergy Partners Agenda

- Welcome and overview
- HIINergizing for the next frontier: Equity and Diversity
- Hospital Feature: Kearny County Hospital
- AHA #123forEquity Campaign
- Resources for Equity and Diversity
- Upcoming events and opportunities
- Q&A, Next Steps
- Contact us

Hospital Improvement Innovation Network
Introducing . . .

Michele Clark, MBA, CPHQ, CPPS, ABC
Program Director
Kansas Healthcare Collaborative

Karen Kendrick, RN, MSN
Director of Clinical Initiatives
Texas Hospital Association

Jackie Conrad RN, BS, MBA, RCC
Improvement Adviser
Cynosure Health

Benjamin Anderson, MBA
Chief Executive Officer
Kearny County Hospital

Kendal Carswell, LMSW, LCAC
Program Director
Kearny County Hospital

Webinar features

- We encourage everyone to utilize the chat box to give a response or to ask a question.
- The presentation handout can be downloaded from the pod below. Highlight the file and then click download.
Purpose

The South Central HIINergy Partners is a group of six geographically proximal state hospital associations (SHA) that have partnered together to create synergy and an enriched virtual learning experience for participating HIIN hospitals as we work together with shared aims in achieving a 20% reduction in all-cause harms and a 12% reduction in all-cause readmissions.

Creating HIINergy together!

<table>
<thead>
<tr>
<th>State</th>
<th>Number of Hospitals in HIIN</th>
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<tbody>
<tr>
<td>Arkansas</td>
<td>57</td>
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<tr>
<td>Kansas</td>
<td>118</td>
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<tr>
<td>Louisiana</td>
<td>99</td>
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<tr>
<td>Missouri</td>
<td>73</td>
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<tr>
<td>Oklahoma</td>
<td>46</td>
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<tr>
<td>Texas</td>
<td>132</td>
</tr>
<tr>
<td>TOTAL</td>
<td>525</td>
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</table>
Let’s hear from you

We are glad you have joined us. Which is your state?
- Arkansas
- Kansas
- Louisiana
- Missouri
- Oklahoma
- Texas

Creating HIINergy together!

Bi-monthly HIINergy webinars take place on 4th Wednesdays from 10 to 11 a.m. CT.

<table>
<thead>
<tr>
<th>2017 Schedule</th>
<th>Tentative HIIN Topics</th>
<th>State Lead</th>
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<tr>
<td>January 25</td>
<td>Getting Started</td>
<td>Arkansas</td>
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<td>March 22</td>
<td>Up Campaign</td>
<td>Oklahoma</td>
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<tr>
<td>May 24</td>
<td>Patient and Family Engagement</td>
<td>Louisiana</td>
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<td>July 26</td>
<td>Transforming Care at the Bedside</td>
<td>Texas</td>
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<td><strong>September 27</strong></td>
<td><strong>Equity and Diversity</strong></td>
<td><strong>Kansas</strong></td>
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<tr>
<td>November 15</td>
<td>Sepsis</td>
<td>Missouri</td>
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Why I’m HIIN: Harvey, Irma, and then Maria . . .

Marks first time two Atlantic Category 4 hurricane landfalls have occurred in the U.S. the same year — Make it three with the U.S. territory of Puerto Rico.
AHA Message: Hurricane Harvey and How You Can Help
www.aha.org/content/17/170829-president-special-message.pdf

South Central HIInergy Partners September 27, 2017

Healthcare Toolkit
Public Toolkit
Media Toolkit
A Recap of “the most useful thing presented” in:
**Transforming Cultures for Safety**
HIINergy Webinar held August 2, 2017

- View recording here
- Handout here
- Bedside Shift Report Tools

**What to do in huddles, shift report checklist**
- Ways to implement change of culture
- Real scenarios and processes
- All was helpful

**Patient Safety Huddles:** 20 indicators in 20 minutes.
Can’t wait to get started on this! ~ Texas

**Coordination team and safety huddles**
Tools!

***Polling Question***
Select any new action you took after participating in Aug. 2 HIINergy webinar:

- Implemented ideas for patient safety huddles
- Implemented ideas for bedside shift reports
- Implemented ideas for white boards
- Implemented ideas for UP Campaign
- Set new goals for transforming culture
- Shared information with others
- Dag nab it! I missed this webinar. Will watch the recording.
**HIIN Readmissions Challenge**

**Take A Dive, Interview Five**

- Identify 5 or more patients in the hospital that have been recently readmitted.
- Interview five patients/caregivers using the ASPIRE 2 tool.
- Aggregate interview results using the Readmission Case Review Analysis tool.
- Analyze responses for new insight regarding “why” patients soon returned to the hospital.
- Share what you learned with HIINergy Partners using the SurveyMonkey link below.

**Tools You Can Use**

- ASPIRE 2 Tool
  [www.hret-hiin.org/resources/display/aspire-tool-2-readmission-review-tool](www.hret-hiin.org/resources/display/aspire-tool-2-readmission-review-tool)
- Readmissions Case Review Analysis Tool
  [www.hret-hiin.org/resources/display/readmission-case-review-and-analysis](www.hret-hiin.org/resources/display/readmission-case-review-and-analysis)
- Hospital Feedback Survey
  [https://www.surveymonkey.com/r/hiin-readmissions-dive](https://www.surveymonkey.com/r/hiin-readmissions-dive)

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**Polling Question**

Describe where you are in the readmissions challenge:

- First I have heard of it
- Discussing with our team
- In process of beginning interviews
- Have conducted a few interviews already
- Have completed interviews
The next frontier: Equity and Diversity

Objectives

- Learn the broadest definitions of diversity and inclusion
- Introduce the drivers of disparities
- Understand the basic elements of culturally competent healthcare and its connection to outcomes
- Recognize how unconscious bias can impact patient provider interactions, provider decision making and health outcomes

Presented by:
Jackie Conrad
Improvement Advisor
Cynosure Health

Diversity
Inclusion

Inclusion

Exclusion

Segregation

Integration

Hospital Improvement Innovation Network
Equity

Equity is not the same as equality. Those with the greatest need and least resources require more, not equal, effort and resources to equalize opportunities.

Equity means everyone has a fair and just opportunity to be as healthy as possible.

Health Equity Means reducing and ultimately eliminating disparities in health and the determinants that adversely affect marginalized groups.
Drivers of Disparity

- Race
- Ethnicity
- Language
- Income
- Insurance
- Education
- Housing
- Religion
- Disability status
- Veteran status
- Appearance
- Age
- Gender
- Gender Identification
- Sexual Orientation
- Immigration Status
- Geographical location

Health Disparity Impacts Health Conditions

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<th>Health Condition and Specific Example</th>
<th>Index in Selected Populations</th>
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<tr>
<td></td>
<td>African American</td>
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<tr>
<td>Infant mortality rate, per 1,000 live births</td>
<td>5.9</td>
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<tr>
<td>Cancer mortality rate, per 100,000</td>
<td>199.3</td>
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<tr>
<td>Lung cancer, age-adjusted death rate</td>
<td>38.3</td>
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<tr>
<td>Female breast cancer, age-adjusted death rate</td>
<td>18.7</td>
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<tr>
<td>Coronary heart disease mortality, rate per 100,000</td>
<td>206</td>
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<tr>
<td>Stroke mortality, rate per 100,000</td>
<td>58</td>
</tr>
<tr>
<td>Diabetes diagnosed, rate per 100,000</td>
<td>36</td>
</tr>
<tr>
<td>End-stage renal disease, rate per 1,000,000</td>
<td>218</td>
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</table>

NOTE: DSU, data are statistically unreliable; DNA, data have not been analyzed.
Disparity is worsening

What about Implicit Bias?
Unconscious bias impacts

Patient and provider interactions

Provider decision making

Health outcomes
Culturally Competent Care

Three Key Steps Toward Cultural Competency

1. **Community Survey**
   - The hospital or health care system analyzes demographic data to determine the composition of the local community and the hospital’s patient population. With this analysis, the hospital or care system can conduct targeted surveys to determine the needs for specific communities.

2. **Community Engagement**
   - The hospital or health care system communicates survey findings to community members and determines priorities. This information serves as the basis for staff education.

3. **Staff Education**
   - Working with community feedback and survey data, the hospital or care system educates staff on the importance of cultural competence and the particular cultural needs of patients with whom staff interact each day.


Framework for Health Care Organizations to Improve Equity

1. Make health equity a strategic priority
   - Demonstrate leadership commitment to improving equity at all levels of the organization
   - Secure sustainable funding through new payment models

2. Develop structure and processes to support health equity work
   - Establish a governance committee to oversee and manage equity work across the organization
   - Dedicate resources in the budget to support equity work

3. Deploy specific strategies to address the multiple determinants of health on which health care organizations can have a direct impact
   - Health care services
   - Socioeconomic status
   - Physical environment
   - Healthy behaviors

4. Decrease institutional racism within the organization
   - Physical space: Buildings and design
   - Health insurance plans accepted by the organization
   - Reduce implicit bias within organizational policies, structures, and norms, and in patient care

5. Develop partnerships with community organizations
   - Leverage community assets to work together on community issues related to improving health and equity

Kearny County Hospital
Equity & Diversity

Benjamin Anderson, MBA, MHCDS
Chief Executive Officer
Kendal Carswell, LMSW, LCAC
Program Director

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital
Lakin, Kansas
What is KCH? An Original “Medical Home”

Kearny County Hospital

• Physical Therapy
• X-Ray
• Emergency Room
• Cardiac Rehabilitation
• Respiratory Rehabilitation
• Laboratory
• Surgery
• Obstetrics
• Business Office
• Swing Bed
• Specialty Outreach Services

Family Practice Clinic
Lakin and Deerfield, KS
5 Physicians
1 Nurse Practitioner

Ear, Nose, Throat and Allergy Clinic
Lakin, Junction, and Scott City, KS
1 Physician
1 Physician Assistant

“Enriching the lives of our Families, Friends, and Neighbors”
Kearny County Hospital

Lakin, Kansas

KCH Serves 20,000 Patients from 20+ Counties in KS, CO and OK

“Enriching the lives of our Families, Friends, and Neighbors”
Kearny County Hospital

Lakin, Kansas
We serve a very diverse population. (originating from all over the world)

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital

Lakin, Kansas
A New Network

Kearny County Hospital
Lakin, Kansas

Our International Service Sites

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital
Lakin, Kansas
Our International Service Sites

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital
Lakin, Kansas

A Baby Boom!

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital
Kearny County Hospital– Lakin, Kansas
“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital

Kearny County Hospital– Lakin, Kansas

Just When We Thought We Were Really Cool…

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital

Kearny County Hospital– Lakin, Kansas
…We Remembered Our Impact During the Last Decade.

"Enriching the lives of our Families, Friends, and Neighbors"
Kearny County Hospital
Kearny County Hospital– Lakin, Kansas

What makes you so special?

Elizabeth Teisberg, TDI Faculty

"Enriching the lives of our Families, Friends, and Neighbors"
Kearny County Hospital
Kearny County Hospital– Lakin, Kansas
Well…

“We know our patients by name!”

“Knowing your patients’ names doesn’t equal great outcomes. It means you know your patients’ names.”

“Well…”

“People drive up to 90 miles to deliver a baby in our hospital!”

“What are their alternatives?”

“Enriching the lives of our Families, Friends, and Neighbors”

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Kearny County Hospital–Lakin, Kansas
Well…

“We’re a key access point!”

“Access to what?”

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Kearny County Hospital– Lakin, Kansas
“Enriching the lives of our Families, Friends, and Neighbors”
Kearny County Hospital
Kearny County Hospital– Lakin, Kansas
“We often ask patients, ‘how did we do?’”

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Kearny County Hospital– Lakin, Kansas

“What should we be asking?”

“Enriching the lives of our Families, Friends, and Neighbors”

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“Enriching the lives of our Families, Friends, and Neighbors”
Kearny County Hospital
Kearny County Hospital– Lakin, Kansas

Emergency Department Dilemma
“How are you?”

ED Survey
- Social Needs
- Home Environment
- Mental Health
- Care History
- Substance Use
- Faith Needs / Preferences

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Kearny County Hospital
Lakin, Kansas
Language Spoken in the Home

- English: 80%
- Spanish: 19%
- Other: 1%

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital

Kearny County Hospital
Lakin, Kansas
“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital
Lakin, Kansas

Finding Out What Matters to Patients
Community-Based Participatory Research Survey

- How do you define health / wellness?
- What services are you aware of that help improve your health / wellness?
- What services would you like to see more of, that would help improve your health and wellness?

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital
Lakin, Kansas
“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital

Lakin, Kansas

2016 County-Wide, 12-Question Survey

If all responses were from Lakin and Deerfield

Overall County Response Rate

Did not respond
Responded

35.50%
64.50%
85.13%
14.86%

Which healthcare services do you think/know are available?

- Assisted Living Communities
- Nursing Home Care
- Dementia/Alzheimer Disease Care
- Physical Therapy
- In-Home Care
- Obstetrical/Prenatal Care
- Emergency Care
- Acute Hospital Care
- Preventive Care
- Hospice Care
- Family Medicine Clinic
- Ambulance Service
- Medical Equipment Resources
- Diabetes Support
- High-risk Obstetrical Care
- Breastfeeding Support
- Nutrition/Diet Counseling

N (White) = 559
N (Hispanic) = 236
Which additional healthcare services would you like to see offered?

- Early Detection Works Program
- Weight Management Coaching
- Family Medicine Clinic
- Preventive Care
- Ambulance Service
- Physical Therapy
- Drug and Alcohol Abuse
- Diabetes Support
- Nutrition/Diet Counseling
- Emergency Care
- Support for Caregivers
- Mental Health Services
- High-risk Obstetrical Care
- Health Information and...

N (White) = 517
N (Hispanic) = 227

Kansas Health Foundation: HCI Grant

Improving Health Equity
Authentically engage and include affected community members
Increase engagement with local & state policy makers
Increase community civic engagement
Health issues addressed through policy and systems interventions
Increase community capacity to address health equity issues

“Enriching the lives of our Families, Friends, and Neighbors”

Kearny County Hospital
Lakin, Kansas
GROUP EXERCISE

OUTCOME NEEDS IMPROVEMENT?

ARE THE STAKEHOLDERS?

ARE OPPORTUNITIES TO SHARE?

ISN’T IT ALREADY HAPPENING?

DO WE MEASURE ITS SUCCESS?

DO WE EXPECT TO SEE PROGRESS?

Kearny County Hospital
Lakin, Kansas

Questions?
Comments?
What are your takeaways?

“Enriching the lives of our Families, Friends, and Neighbors”
Kearny County Hospital
Lakin, Kansas
Take the Pledge

#123forEquity Campaign to Eliminate Health Care Disparities

Jackie Conrad
Improvement Advisor
Cynosure Health

Organizations Pledged

Arkansas . . . 18
Kansas . . . . 14
Louisiana . . 15
Missouri . . . 63
Oklahoma . . 10
Texas . . . . . . 123

www.equityofcare.org/pledge/pledge-map.dhtml
#123 for Equity Pledge Goals

- Increase collection and use of REaL data
- Increase cultural competency training
- Increase diversity in leadership and governance
- Improve and strengthen community partnerships
Highlighted Resources

Health Equity Report
- Key steps to advancing health equity

IHI White Paper: Achieving Health Equity
- A Guide for Healthcare

WIHI Webinar Handout: Pursuing health Equity with Curiosity

HPOE Equity of Care Tool Kit
- How to collect and use disparity data

#123forEquity: A Toolkit for Achieving Success and Sharing Your Story

HRET HIIN LISTSERV®
Health Care Disparities
A forum for sharing best practices and peer-to-peer discussion specifically related to efforts to eliminate health-care disparities and to promote equity of care.
Join the LISTSERVE at https://www.surveymonkey.com/r/S6C6KWN

Polling Question

Let us hear from you about the Pledge

► First I have heard of it
► Our hospital has already taken the pledge
► Reviewing information
► Discussing with hospital leaders
► We plan to take the pledge this year
Next Steps

Register at
www.hret-hiin.org/events

Upcoming Events

<table>
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<tr>
<th>Date/Time</th>
<th>Topic</th>
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<tr>
<td>October 3</td>
<td>HRET HIIN Year 1 Virtual Event</td>
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<tr>
<td>11:00 am - 12:00 pm</td>
<td>Our Successes: The Journey, Lessons Learned and Celebration</td>
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<tr>
<td>October 5</td>
<td>HRET HIIN Malnutrition Virtual Event</td>
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<tr>
<td>October 11</td>
<td>HRET HIIN QI Fellowship</td>
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<tr>
<td>11:00 am - 12:00 pm</td>
<td>Foundational Track</td>
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<tr>
<td>October 11</td>
<td>HRET HIIN QI Fellowship</td>
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<tr>
<td>12:30 - 1:30 pm</td>
<td>Accelerating Improvement Track</td>
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<tr>
<td>October 19</td>
<td>HRET HIIN Falls Virtual Event</td>
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<td>11:00 am - 12:00 pm</td>
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<tr>
<td>October 26</td>
<td>HRET HIIN WAKE UP Virtual Event</td>
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<tr>
<td>11:00 am - 12:00 pm</td>
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All times are Central Time (CT).
In case you missed it...
Visit topic-specific pages at www.hret-hiin.org

The following event recordings have been posted to the HRET HIIN website:

- The Sepsis Continuum: Overcoming Barriers and Create Momentum (Sept. 7) | [View here]
- AHA’s Physician Leadership Forum | Building High-Value Care Bridges (Aug. 15) | [View here]
- Readmissions | Reduce Readmissions Fishbowl #4 (Aug. 10) | [View here]
- QI Fellowship – Patient Shadowing: A Treasure Chest for Improvement (Aug. 9) | [View here]
- “Those Darn Humans!” Change Would Be So Easy If It Weren’t for All the People (Aug. 3) | [View here]
- PFE Fellowship – Final Report and Sustainability (Aug. 2) | [View here]

2017 Quality Improvement Fellowships

Reminders:

- Last webinar for the two tracks is Nov. 8.
- Final project summary is due Oct. 15. (Mail to hiin@aha.org)
- Meet attendance requirements by Nov. 8:
  - Foundational fellowship: 10 out of 14 sessions
  - Accelerated fellowship: 9 out of 12 sessions
(Recorded sessions are available at ABQAURP’s website.)
2017 Patient and Family Engagement Fellowship

Reminders:

- Last webinar for this group was Sept. 20.
- Final report is due Sept. 29.
- Meet attendance requirements by Sept. 29. At least 7 out of 10 Fellowship sessions. Recorded sessions are available at [ABQAURP's website](http://www.abquap.org).
- Be sure action plan and orientation planning guide, organizational assessment and (optional) PDSA form have been submitted to tanyalord@comcast.net.

Reminders

- Data through August 2017 (July for Readmissions)
  **Due by September 30**
- HRET HIIN Readmissions Challenge
  **Interview 5, Analyze, and Share**
  **Due by September 30**
- Consider new SNAP Opportunity
  **Sepsis – Rural/CAH and Receiving Hospitals**
Evaluation

Your feedback is very important to us! Please take 2-3 minutes to evaluate this webinar:

https://www.surveymonkey.com/r/HIINergy-9-27-17
State Contacts

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<tr>
<th>Arkansas Hospital Association</th>
<th>Missouri Hospital Association</th>
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<tbody>
<tr>
<td>Pam Brown</td>
<td>Jessica Stultz</td>
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<tr>
<td><a href="mailto:pbrown@arkhospitals.org">pbrown@arkhospitals.org</a></td>
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<tr>
<td>501-224-7878</td>
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<tr>
<th>Kansas Healthcare Collaborative</th>
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<tbody>
<tr>
<td>Michele Clark</td>
<td>Patrice Greenawalt</td>
</tr>
<tr>
<td><a href="mailto:mclark@khconline.org">mclark@khconline.org</a></td>
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<tr>
<td>Michelle Smith</td>
<td>Karen Kendrick</td>
</tr>
<tr>
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