



To: KHC HIIN hospitals and other QHi Users
From: Sally Othmer, KHA
Date: June 25, 2019
Re: Measure set updates for HIIN and HEN

Our QHi team and staff at the Kansas Healthcare Collaborative have been working together in recent weeks to review and shorten the list of measures in Quality Health Indicators (QHi) that are needed related to the current Hospital Improvement Innovation Network (HIIN) initiative, especially previous versions of the project, known as HEN 1.0 and HEN 2.0.

We are writing to notify you of the changes we plan to make in QHi as of August 1, 2019, which we believe could potentially reduce burden in data collection and reporting by retiring measure sets no longer needed for the current CMS patient safety initiative, currently known as the HIIN.

Meanwhile, the measures that are no longer needed for the HIIN are still accessible in QHi should your hospital wish to continue tracking certain processes and outcomes that are important to your hospital's quality and patient safety program.

We will review this information during the upcoming KHC HIIN Monthly Webinar to be held this Wednesday, June 26, from 10 to 11a.m. Please register here to join the conversation: <https://www.khconline.org/31-event-descriptions/439-khc-hiin-webinar-6-26-19>. This session will be recorded and posted to the [KHC Education Archive](#).

Background

The individual measures that have been identified by KHC as no longer essential or expected for the current HIIN initiative are listed in the table below. You may notice that most of the measures are from earlier Hospital Engagement Network (HEN) projects, which were conducted between 2012 to 2016. (The HEN 1.0 and HEN 2.0 measure sets remained in QHi for hospital use, while the new HIIN measure set was added in October 2016 for the initiative that will continue through March 2020.)

What will happen on August 1?

In an effort to reduce unnecessary reporting burden and to clean up our growing list of measure sets, all HEN 1.0 and HEN 2.0 measure sets will be removed from QHi on August 1. The measures contained within those measure sets will remain in the QHi Library for collection, however, all references to old KHC HEN measure sets (Kansas Hospital Engagement Network 1.0 Measure Set, Kansas Hospital Engagement Network 2.0 Measure Set) will be removed.

What can hospitals do?

We recommend you take the following steps (prior to August 1) to insure you are collecting the appropriate current KHC HIIN measures, removing those measures you need not collect while keeping



any prior HEN measures that are meaningful and useful to your facility. (See the table below for the list of measures that will be removed from the KHC HEN/HiIN measure program.) Contact KHC if you have any questions about which [HiIN measures](#) you need to continue tracking.

If there are individual measures in the HEN 1.0 or HEN 2.0 measure sets that you wish to continue tracking, here are the steps to take:

Go to Administration/Measures Selection

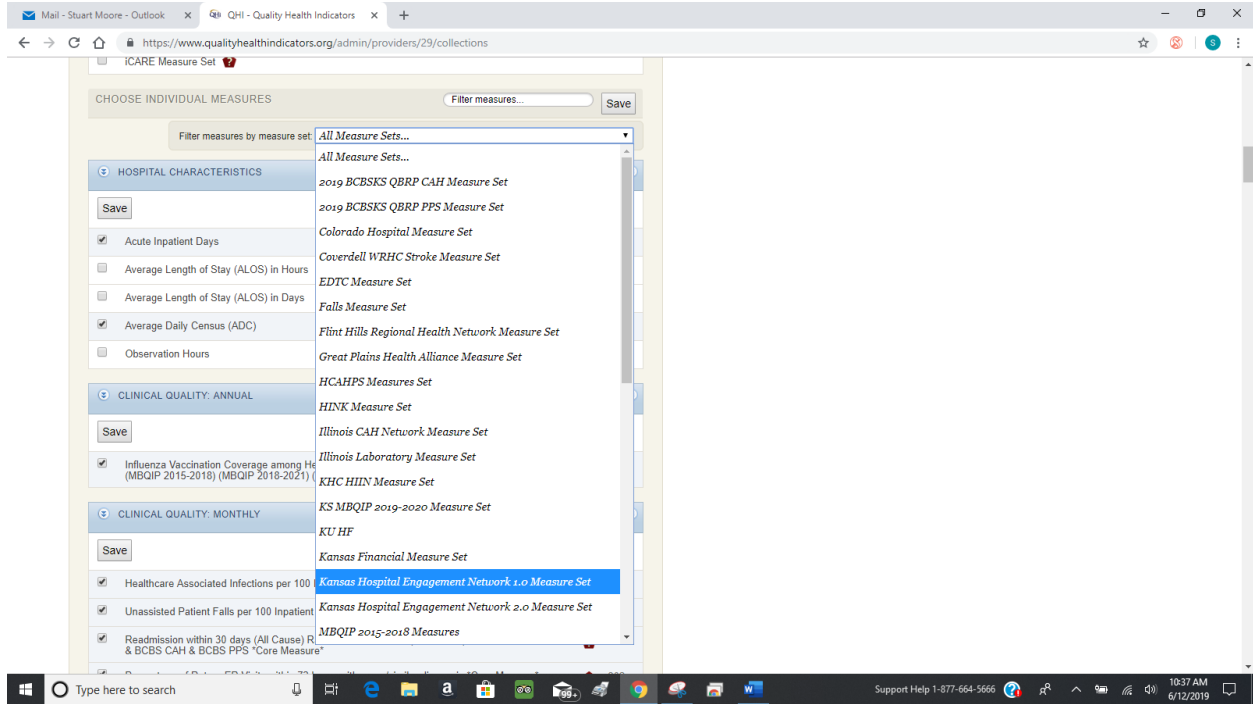
1. Deselect prior HEN measure sets by deselecting the check box adjacent to the following measure sets:
 - Kansas Hospital Engagement Network 1.0 Measure Set
 - Kansas Hospital Engagement Network 2.0 Measure Set
- a. Click Save
 - i. This will REMOVE all measures contained in these measure sets.

The screenshot shows a web interface titled "Collected Measures". At the top, there is a "CHOOSE BY MEASURE SET" section with a "Save" button. Below this is a table of measure sets. The table has a header "MEASURE SETS" and a list of 16 items. Each item has a checkbox and a question mark icon. The "Kansas Hospital Engagement Network 1.0 Measure Set" and "Kansas Hospital Engagement Network 2.0 Measure Set" are checked. The other items are unchecked.

MEASURE SETS
<input type="checkbox"/> Colorado Hospital Measure Set ?
<input type="checkbox"/> EDTC Measure Set ?
<input type="checkbox"/> Falls Measure Set ?
<input type="checkbox"/> Flint Hills Regional Health Network Measure Set ?
<input type="checkbox"/> Great Plains Health Alliance Measure Set ?
<input type="checkbox"/> HCAHPS Measures Set ?
<input type="checkbox"/> HINK Measure Set ?
<input type="checkbox"/> Illinois CAH Network Measure Set ?
<input type="checkbox"/> Illinois Laboratory Measure Set ?
<input type="checkbox"/> KHC HiIN Measure Set ?
<input type="checkbox"/> KU HF ?
<input checked="" type="checkbox"/> Kansas Hospital Engagement Network 1.0 Measure Set ?
<input checked="" type="checkbox"/> Kansas Hospital Engagement Network 2.0 Measure Set ?
<input type="checkbox"/> MBQIP 2015-2018 Measures ?
<input type="checkbox"/> MBQIP 2018-2021 Measures ?
<input type="checkbox"/> MBQIP Phase 1 Measures Set ?

2. From the "Filter by Measure Set" option:
 - a. Select the HEN 1.0 or HEN 2.0 measure set from the drop down
 - i. Each measure contained in the set will be listed
 - ii. Click the box adjacent to each measures you wish to collect within the measure set.

(Note: If all measures in the set apply to your facility, then simply select to collect the measure set.)



3. Review collected measures to insure all those relevant, meaningful and supporting internal initiatives are still part of your collected measures.
 - a. To select individual measures, simply check the box adjacent to the desired measure and click Save.

If you have questions or need assistance with the above, contact Stuart Moore at smoore@kha-net.org. If you have any questions about HIIN measures, contact Eric Cook-Wiens at ecook-wiens@khconline.org or Michele Clark at mclark@khconline.org.



Prior KHC HIIN, HEN 1.0 or HEN 2.0 Measures No Longer Included in the KHC HIIN Program.
*These measures will remain in the QHi Library for **optional** collection but will no longer reference the KHC HIIN or KHC HEN.*

Topic	Measure	Source
ADE	ADE Reporting	HEN 1.0
ADE	Rate of harmful events	HEN 1.0
CAUTI	Catheter Placement in ED	HEN 1.0
CAUTI	Appropriate/inappropriate catheter indication rates	HEN 1.0
Falls	Fall risk assessment completed within 24 hours	HEN 1.0, HEN 2.0
HAPU	Patients with at least one Stage III or Greater Hospital-Acquired Pressure Ulcer (HAPU) <i>(prevalence measure)</i>	HEN 1.0
HAPU	Patients with pressure ulcer risk assessment completed within 24 hours of admission	HEN 1.0, HEN 2.0
HAPU	Patients with skin assessment documented within 24 hours of admission	HEN 1.0, HEN 2.0
OB	Use of standardized tool for scheduling C-sections and induction of labor	HEN 1.0
OB	Documentation of indication prior to induction of labor as part of induction bundle	HEN 1.0
OB	Record review of scheduled C-sections and inductions of labor <39 wks	HEN 1.0
OB	Preeclampsia ICU admissions	HEN 2.0
OB	OB Preeclampsia assessment	HEN 2.0
OB	Obstetrical (OB) Trauma – Vaginal delivery with instrument	HEN 2.0
OB	OB patients at risk for pre-term delivery receiving antenatal steroids	HEN 2.0
OB	Total OB blood transfusions	HEN 1.0
OB	Massive blood transfusions	HEN 1.0, HEN 2.0
OB	OB hemorrhage risk assessment on admission	HEN 1.0
OB	Timely treatment for severe hypertension	HEN 1.0
OB	Early Electric Deliveries ≥ 37 and <39 weeks	HEN 1.0, HEN 2.0
READ	Patients receiving complete discharge education verified by teach-back or other means	HEN 2.0
SSI	Failure to Rescue (AHRQ PSI-04)	HEN 2.0



VAP	Ventilator-Association Pneumonia rate	HEN 1.0
VAE	ICU Ventilator Bundle Use	HEN 1.0
VAE	ABCDEF Ventilator Bundle Compliance	HEN 2.0

Measures ALREADY REMOVED and NO LONGER AVAILABLE in QHi

Topic	Measure	Source
READ	Heart Failure Discharge Instructions	HEN 1.0
SSI	Prophylactic Abx received within one hour prior to surgical incision	HEN 1.0
SSI	Prophylactic Abx Selection for surgical patients	HEN 1.0
SSI	Prophylactic Abx discontinued within 24 hours after surgery end time	HEN 1.0
VTE	Hospital acquired potentially preventable VTE	HEN 1.0, HEN 2.0, KHC HIIN
VTE	VTE warfarin therapy discharge instructions	HEN 1.0, HEN 2.0