KHC Hospital Improvement Innovation Network

September 26, 2018
10 to 11 a.m. CT

HIIN Goals:
By September 2018, hospitals in the KHC HIIN will achieve 20% reduction in all-cause harm and 12% reduction in readmissions.

Agenda

- Welcome and Announcements
- Milestone 8 and Data Update
- HIIN Extension
- Resources
- Upcoming Events
Introductions

Kansas Healthcare Collaborative

Michele Clark  
Program Director  
mclark@khconline.org

Eric Cook-Wiens  
Data and Measurement Director  
ecook-wiens@khconline.org

Chuck Duffield  
Performance Improvement Manager  
cduffield@khconline.org

Kendra Tinsley  
Executive Director  
ktinsley@khconline.org

Falls Prevention Awareness Week  
September 22-28, 2018

NCOA Resources

Fall Prevention Center of Excellence Resources
HRET HIIN Falls Resources

- 2018 Change Package
- Top Ten Checklist
- Teach-Back Tool
- STOP to START Improving Fall Injuries

Faces of Sepsis™
Presented by Sepsis Alliance
https://vimeo.com/95766160
Sepsis Resources

• HRET HIIN Sepsis and Septic Shock Change Package
• HRET HIIN Sepsis and Septic Shock Top Ten Checklist
• Promote Safety Across the Board: Date of Last Septic Event Poster

http://www.hret-hiin.org/topics/sepsis.shtml

KHC HIIN Data and Progress Update

• KHC HIIN Progress to Date
• Data submission schedule

Eric Cook-Wiens
MPH, CPHQ
Data and Measurement Director
Kansas Healthcare Collaborative
ecook-wiens@khconline.org
(785) 235-0763 x1324
Current Progress (as of 9/20/2018)

- 16% improvement in total harm (most recent month compared to baseline)
- 2,316 harms prevented
- 182 lives saved
**Keeping on Pace toward HIIN goals**

**HRET HIIN Milestone #8 Criteria**

- **Data Submission:**
  HIIN data are complete and current – October 2016 through May 2018

- **Achievement:**
  Hospitals met HIIN reduction goals in at least 4-5 topics, preferably 8 or more.

  *The Milestone 8 deadline was August 28.*

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**HRET HIIN**

**Milestone #8 at State Level**

**Tier 1**

- **Data Submission**
  - 70-89% of hospitals submit complete and timely data for at least 70% of each hospital’s applicable measures

- **Achievement**
  - At least 60% of hospitals have achieved goals in 4-7 topics

**Tier 2 (stretch goal)**

- **Data Submission**
  - 90-100% of hospitals submit complete and timely data for at least 70% of each hospital’s applicable measures

- **Achievement**
  - At least 60% of hospitals have achieved goals in 8 or more topics

*The KHC HIIN was eligible for Milestone #8 by achieving previous Milestones.*
Milestone #8

HRET HIIN

Milestone #8 at State Level

Tier 1

Data Submission

✓ 70-89% of hospitals submit complete and timely data for at least 70% of each hospital's applicable measures

KHC HIIN = 80%

Achievement

✓ At least 60% of hospitals have achieved goals in 4-7 topics*

99%

of KHC HIIN hospitals met goals in 4+ topics

Tier 2 (stretch goal)

Data Submission

• 90-100% of hospitals submit complete and timely data for at least 70% of each hospital's applicable measures

Achievement

✓ At least 60% of hospitals have achieved goals in 8 or more topics*

83%

of KHC HIIN hospitals met goals in 8+ topics

*Achieved HIIN goal in one or more outcome measure for eligible topic(s)

KHC HIIN Hospitals Meeting Year 2 Improvement Goals in ALL Applicable Topics* through May 2018

Anderson County Hospital
Ellinwood District Hospital
Gove County Medical Center
Grisell Memorial Hospital District One
Lane County Hospital
Mercy Hospital Columbus
Rawlins County Health Center
Satanta District Hospital
Sheridan County Health Complex

*Achieved HIIN goal in one or more outcome measure for each eligible topic
### KHC HIIN Honor Roll

**Met Year 2 Improvement Goals in ALL BUT ONE Applicable Topics (88-99%) through May 2018**

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>Hospital Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allen County Regional Hospital</td>
<td>Miami County Medical Center</td>
</tr>
<tr>
<td>Anthony Medical Center</td>
<td>Newton Medical Center</td>
</tr>
<tr>
<td>Ashland Health Center</td>
<td>Rice County District Hospital</td>
</tr>
<tr>
<td>Cheyenne County Hospital</td>
<td>Russell Regional Hospital</td>
</tr>
<tr>
<td>Coffey County Hospital</td>
<td>Sabetha Community Hospital</td>
</tr>
<tr>
<td>Comanche County Hospital</td>
<td>Saint John Hospital</td>
</tr>
<tr>
<td>Hillsboro Community Hospital</td>
<td>St. Luke Hospital &amp; Living Center</td>
</tr>
<tr>
<td>Hutchinson Regional Medical Center</td>
<td>Scott County Hospital</td>
</tr>
<tr>
<td>Meade District Hospital</td>
<td>Trego County-Lemke Memorial Hospital</td>
</tr>
<tr>
<td>Mercy Hospital Columbus</td>
<td>Wichita County Health Center</td>
</tr>
</tbody>
</table>

### Preliminary Results

**KHC HIIN Hospitals Meeting HIIN Improvement Goals through May 2018**

<table>
<thead>
<tr>
<th>Measure</th>
<th>Hospitals Meeting Goal for at Least 1 Measure (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Readmissions</td>
<td></td>
</tr>
<tr>
<td>Falls</td>
<td></td>
</tr>
<tr>
<td>C. Diff</td>
<td></td>
</tr>
<tr>
<td>Work Safety</td>
<td></td>
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<tr>
<td>ADE</td>
<td></td>
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<tr>
<td>VTE</td>
<td></td>
</tr>
<tr>
<td>CAUTI</td>
<td></td>
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<tr>
<td>SSI</td>
<td></td>
</tr>
<tr>
<td>MRRO</td>
<td></td>
</tr>
<tr>
<td>Sepsis</td>
<td></td>
</tr>
<tr>
<td>VAE</td>
<td></td>
</tr>
<tr>
<td>CLABSI</td>
<td></td>
</tr>
<tr>
<td>Pressure Ulcers</td>
<td></td>
</tr>
</tbody>
</table>
5 Patient and Family Engagement Metrics: Measuring Hospital Successes

- **Governance**: Patient and Family Advisor on Board
- **Point of Care**: Shift Change Handoff, Bedside Reporting
- **Policy and Protocol**: PFAC or Representative on Quality Improvement Team

### KHC HIIN Hospitals Implementing PFE Metrics

**Progress in Kansas since HEN 1.0**

- **PFE #1**: Planning checklist prior to scheduled admission
- **PFE #2**: Shift-change handoff and bedside reporting
- **PFE #3**: Dedicated person or functional area for PFE
- **PFE #4**: PFAC or one or more patients who serve on QI committee/team
- **PFE #5**: One or more patients who serve on governing or leadership board as patient representative

[KHC HIIN Progress to Date](#)
**KHC HIIN**

**Hospitals Implementing PFE Metrics**

<table>
<thead>
<tr>
<th>Number of PFE Metrics Met</th>
<th>Number of Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 or more</td>
<td>95 (80%)</td>
</tr>
<tr>
<td>2 or more</td>
<td>87 (73%)</td>
</tr>
<tr>
<td>3 or more</td>
<td>76 (64%)</td>
</tr>
<tr>
<td>4 or more</td>
<td>66 (55%)</td>
</tr>
<tr>
<td>All 5</td>
<td>40 (34%)</td>
</tr>
</tbody>
</table>

Out of 119 Facilities responding

*Congratulations for your continued commitment to meeting the five PFE Metrics to improve patient safety!*

**KHC HIIN**

**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>July 2018</td>
<td>June 2018</td>
<td>August 31, 2018</td>
</tr>
<tr>
<td>August 2018</td>
<td>July 2018</td>
<td>September 30, 2018</td>
</tr>
<tr>
<td>September 2018</td>
<td>August 2018</td>
<td>October 31, 2018</td>
</tr>
<tr>
<td>October 2018</td>
<td>September 2018</td>
<td>November 30, 2018</td>
</tr>
<tr>
<td>November 2018</td>
<td>October 2018</td>
<td>December 31, 2018</td>
</tr>
<tr>
<td>December 2018</td>
<td>November 2018</td>
<td>January 31, 2019</td>
</tr>
<tr>
<td>January 2019</td>
<td>December 2018</td>
<td>February 28, 2019</td>
</tr>
<tr>
<td>February 2019</td>
<td>January 2019</td>
<td>March 31, 2019</td>
</tr>
</tbody>
</table>
Health Research & Educational Trust

HIIN Extension!

Woot!

Through March 27, 2019 (with an optional additional year through March 2020)

1,600 hospitals in 34 states

Since the start of HIIN in September of 2016, together we have achieved $625 million in saving to health care, 63,840 fewer harms, and 5,023 lives saved by HRET HIIN.
What is your proudest accomplishment in the HIIN project thus far?

- Patient and Family Engagement
- Falls Reduction
- Readmission Reduction
- Antibiotic Stewardship
- CAUTI Reduction
- CLABSI Reduction
- Sepsis Reduction
- Improved Data Collection Strategies
- Bedside Huddles
- Other

Important Themes

- Advance care to meet or exceed the top 25% of providers. (Getting to zero.)
- Rising all boats.
  - High quality care in all settings.
- Power of the collaborative.
- Transparency to support improvement.
- Clear and consistent strategy.
- Meet hospitals where they are.
Proven Solutions Taken to a New Level

- Strategic topic concentration events on the most challenging areas of safety.

- Skill building, networking, and access to subject matter experts to implement evidence-based best practices.

Expansion – Next Level

- **Spread** plan to a broad range of HIIN hospitals on work related to “other topics”
  - Opioid Stewardship
  - Patient and Family Engagement
  - Disparities
  - Diagnostic Error
  - Age Friendly (by member request)
  - Burden Reduction/Burnout (by member request)

Could change based on budget
Expansion – Next Level

- **Address disparities**
  - Collect, validate, and stratify data, communicating findings/opportunities
  - Four topics
    - Readmissions is one of the four topics
  - Include addressing organizational infrastructure that may have contributed to disparity
  - Monthly data, progress, challenges, how obstacles were overcome

Expansion – Next Level

- **Evaluate the relationship between PFE and quantifiable harm reduction – HRET level**
Expansion – Next Level

- **Timely data** to inform hospital quality improvement efforts and for CMS
  - Submission Rate - 85% for eligible hospitals
  - Real-time Data - Submit each month for data two months prior
    - i.e. Submit in July for data from May
    - Readmissions submit for April
  - Submit data in monthly increments

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Expansion – Next Level

- Update **baseline** periods against which to compare progress on harm reduction
  - CY 2015 for NHSN SIR and rate measures
  - October 1, 2015-September 30, 2016 for AHRQ PSI measures
  - Harm events patient handling 4Q2016
  - Harm events workplace violence 2014
  - HRET evaluating other baselines
Expansion – Next Level

- Review of all measures with CMS, eg, relevance to rural hospitals.
- Core topics will be mostly the same. HRET is considering another VAP measure, “Possible VAP.”

- Wide range of collaborative relationships with multiple organizations and stakeholders
  - Engagement and sharing with community

Next Milestones

- Data submission
- Improvement
- Plus PFE and Disparity Metrics

More information will be available by end of October
Resources and Upcoming Events

Michele Clark
Program Director
Kansas Healthcare Collaborative
mclark@khconline.org
(785) 235-0763 x1321
The KHC’s Hand Hygiene Collaborative is offered to help hospitals track and improve hand hygiene within their facilities. Participation includes easy-to-use, mobile software provided at no cost to each hospital for observation-based measurement.

Next collaborative learning session will be held Friday, November 9, at 11 a.m. CT.

For more information, visit: [www.khconline.org/initiatives/hiin-initiatives/hand-hygiene-collaborative](http://www.khconline.org/initiatives/hiin-initiatives/hand-hygiene-collaborative)

I attest that our hospital is participating in the KHC HIIN collaborative to improve hand hygiene within our organization. Our facility will use the KHC-sponsored software tools for this project.

The incentive will be earned if the provider is submitting monthly hand hygiene surveillance data to the KHC HIIN.

Questions?
Contact Misty Burgen
Provider Program Specialist
Blue Cross and Blue Shield of Kansas
Phone: (785) 291-6593
Email: misty.burgen@bcbsks.com
New HRET HIIN Change Package
Diagnostic Error


Use Antibiotics Wisely Week

• When: November 12 - 18, 2018
• Resources and posts to share at: UseAntibioticsWisely.org
  Or contact KHC for more info.

Taking antibiotics when they are not needed can actually hurt your health. It increases risk of later getting an infection that resists antibiotic treatment.

#UseAntibioticsWisely
In the spring of 2018, the Partnership for Patients Person and Family Engagement Contractor (PFEC) conducted a pilot of a sample preadmission planning checklist (PFE Metric 1) with four hospitals in the New Jersey Hospital Association (NJHA) Hospital Improvement Innovation Network (HIIN).

All hospitals reported benefits to using the checklist for patients, care partners, and staff. The key takeaways for successfully using the checklist included:

- Customize the checklist for different patient populations.
- Make the checklist available in different formats, including a trifold brochure.
- Be sure to adequately train hospital clinicians and staff to use the checklist with patients and families.
- Bundle the checklist with existing processes and patient education materials to avoid additional burden for patients.

A summary of the pilot, English and Spanish versions of the checklist, and additional guidance on how to implement the checklist can be found here:

https://www.healthcarecommunities.org/ResourceCenter?CategoryID=838953&EntryID=127911

Partnership for Patients
PFE #1: Sample Preadmission Planning Checklist Pilot Results

Save the date

Partnership for Patients
October PFE #2 Event:

Revisiting Shift Change Huddles and Bedside Reporting: Two New Perspectives

Thursday, October 11
12:00 to 1:00 p.m. CT

To register, please click on the following link and follow the instructions on the registration page:

https://secure.confertel.net/tsRegisterD.asp?course=68601105
New KHC HIIN Falls Sprint to Launch

Join us for our next KHC HIIN webinar for the launch of our new **KHC HIIN Falls Sprint** featuring Jackie Conrad, Cynosure Health

**Wednesday, October 24**
10:00 to 11:00 a.m.

[https://www.khconline.org/events/hiin-events](https://www.khconline.org/events/hiin-events)

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New! Falls Delirium Fishbowl Series

Recruitment for the new falls delirium fishbowl series is now underway! HRET HIIN is seeking up to five hospitals interested in testing new strategies and receive customized quality improvement coaching.

The series will consist of four webinars starting in October and run through January. Interested hospitals must submit an application by Friday, Sept. 28:

[https://www.surveymonkey.com/r/fallsfishbowl](https://www.surveymonkey.com/r/fallsfishbowl)
**New! C. difficile Sprint**

The HRET HIIN is now recruiting for the Fall 2018 Clostridium difficile infections (CDI) Sprint. The purpose of the CDI Sprint is to assist participants in using Q.I. techniques to assess root causes and themes of healthcare-onset CDI and the impact of culturing practices.

This program will take place over the course of 6-8 weeks starting Oct. 17. It is ideal for the person completing the recruitment survey to be familiar with the organization’s *C. difficile* specimen collection and antibiotic prescribing practices.

If interested, please complete the recruitment survey by Friday, Sept. 28. [https://www.surveymonkey.com/r/CDISprintRecruitment](https://www.surveymonkey.com/r/CDISprintRecruitment)

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**New! Multi-Visit Patients (MVPs) Readmissions webinar series**

The HRET HIIN recently launched a new readmissions webinar series introducing “The MVP Method” by Amy E. Boutwell, MD, MPP, to focus on identifying and addressing “drivers of utilization.”

The recording is now available at [http://www.hret-hiin.org/resources/display/hret-hiin-readmissions-max-mvp-webinar-recruitment-webinar](http://www.hret-hiin.org/resources/display/hret-hiin-readmissions-max-mvp-webinar-recruitment-webinar)

Hospitals can participate in the six-part webinar series, which starts October 5 and ends March 20. If interested in joining the cohort, send an email by October 1 to Jordan Steiger at HRET, jsteiger@aha.org.
## MVP Program Schedule

### MVP Webinar Series

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friday, October 5</td>
<td>11-12 CT</td>
<td></td>
</tr>
<tr>
<td>Friday, November 9</td>
<td>11-12 CT</td>
<td></td>
</tr>
<tr>
<td>Friday, December 7</td>
<td>11-12 CT</td>
<td></td>
</tr>
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<td>Friday, January 4</td>
<td>11-12 CT</td>
<td></td>
</tr>
<tr>
<td>Friday, February 1</td>
<td>11-12 CT</td>
<td></td>
</tr>
<tr>
<td>Friday, March 1</td>
<td>11-12 CT</td>
<td></td>
</tr>
<tr>
<td>Friday, March 20</td>
<td>11-12 CT</td>
<td></td>
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</table>

### MVP Implementation Cohort

<table>
<thead>
<tr>
<th>Date</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>October: Coaching Calls*</td>
<td>Oct 17, 18, 19</td>
</tr>
<tr>
<td>November: Workshops</td>
<td>Nov 14, 15, 16</td>
</tr>
<tr>
<td>December: Coaching Calls</td>
<td>Dec 12, 13, 14</td>
</tr>
<tr>
<td>January: Workshops</td>
<td>Jan 16, 17, 18</td>
</tr>
<tr>
<td>February: Coaching Calls</td>
<td>Feb 13, 14, 15</td>
</tr>
<tr>
<td>March: Coaching Calls</td>
<td>Mar 13, 14, 15</td>
</tr>
</tbody>
</table>

*coaching calls = 45 minutes

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### Upcoming Events

**Thursday, Sept. 27**

**2018-19 Flu Vaccination Campaign kick-off**

The CDC invites everyone to tweet messages about flu prevention and why you choose to vaccinate using the hashtag #FightFlu. The Twitterstorm is scheduled for 9 am to 1 pm CT. Retweet messages posted by your peers, #CDCflu and @NFIDvaccines.

- [Register to tune in to the NFID press conference](9 am CT, 9/27)
- [FAQs: 2018-19 Influenza Season](

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Kansas Healthcare Collaborative
Upcoming Webinars

AHA/HRET Institute for Diversity and Health Equity
Resiliency, Aging and the Personal Determinants of Health
September 27 ● 12:00 - 1:00pm
Register here:

HRET HIIN: Reducing Diagnostic Errors: Leading Practices
October 4 ● 11:00am - 12:00pm
Register here:
http://hret.adobeconnect.com/diagnostic-error-20181004/event/registration.html

KHA: QHi Back to Basics Session
October 4 ● 2:00 to 1:00pm
Register here:
https://ccreadytalk.com/r/m22s04sma46r&eom

All times listed are Central Time.

Upcoming Events

Upcoming Webinars

HRET HIIN: Readmissions | MVP Webinar Series #1
October 5 ● 11:00am to 12:00pm
Register here:
http://hret.adobeconnect.com/readmissions-20181005/event/registration.html

HRET HIIN: Falls Delirium Fishbowl
October 15 ● 11:00am - 12:00pm
Register here:
http://hret.adobeconnect.com/falls-20181018/event/registration.html

HRET HIIN: MDRO Session 1
October 18 ● 1:00 - 2:00pm
http://hret.adobeconnect.com/mdro-20181018/event/registration.html

CMS Office of Minority Health
Mapping Medicare Disparities (MMD) Tool
October 25 ● 12:00 - 1:00pm
http://hret.adobeconnect.com/health-disparities-20181025/event/registration.html
Please provide feedback to this webinar
Let us know your next steps.
https://www.surveymonkey.com/r/KHC-HIIN-092618
Your HIIN Contacts

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Contact us anytime:
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Connect with us on:
- KHCqi
- @KHCqi
- KHCqi

For more information:
→ KHConline.org