KHC Hospital Improvement Innovation Network

December 19, 2018
10 to 11 a.m. CT

HIIN Goals:
By March 2020, hospitals in the KHC HIIN will achieve 20% reduction
in all-cause harm and 12% reduction in readmissions.

Kansas Healthcare
Collaborative

KANSAS MEDICAL SOCIETY
Established 1859

KHA

American Hospital Association

HRET

623 SW 10th Ave. ● Topeka, KS 66612 ● (785) 235-0763 ● www.khconline.org

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Agenda

- Welcome and Announcements

- HIIN Milestone 10, Data and Measures Update

- *Featured Topic: Workplace Violence*

- HIIN Resources and Upcoming Events

Slide 3 — Introductions

Special Guests

Laura Castellanos
Associate Director
American Hospital Association
Center for Health Innovation

Deborah Stern
Senior Vice President of Clinical Services
and General Council
Kansas Hospital Association

Kansas Healthcare Collaborative

Michele Clark
Program Director
mclark@khconline.org

Eric Cook-Wiens
Data and Measurement Director
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Chuck Duffield
Performance Improvement Mgr.
cduffield@khconline.org

Kansas Healthcare Collaborative 3

Slide 4 — Announcements

Accelerating Progress in Health Disparities

- **Introduction to the 7 new metrics for Health Disparities**
  November webinar recording featuring Kristin Preihs, HRET, is available in KHC HIIN education archive

- HRET HIIN Health Disparities Webinar Series available. See recordings at www.hret-hiin.org.

- A new Health Disparities LISTSERV® is now open.

- Institute for Diversity Issue Brief 3:
  Connecting the Dots: Value and Health Equity
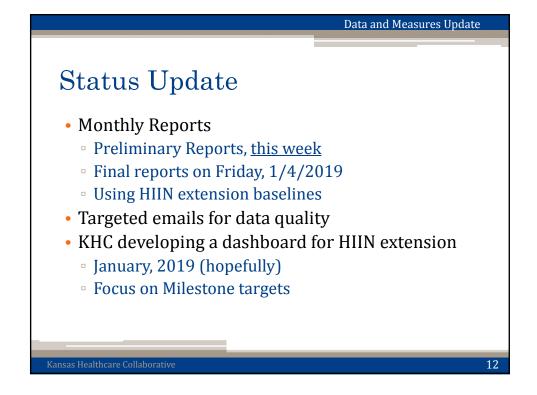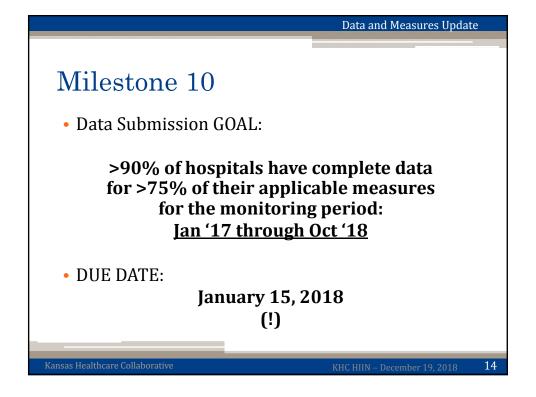 https://www.aha.org/system/files/2018-11/value-initiative-issue-brief-3-equity.pdf
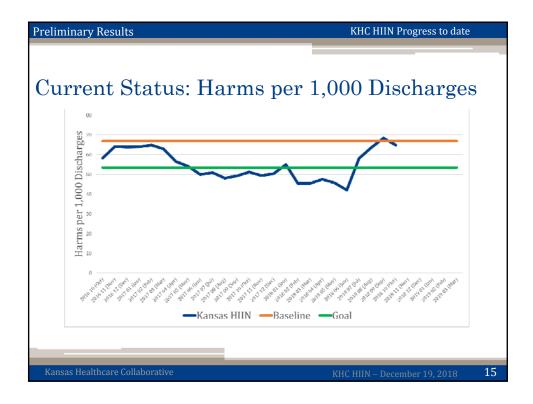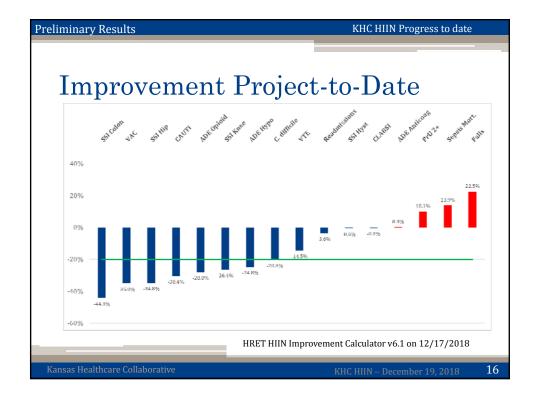
Kansas Healthcare Collaborative 4

KHC HIIN Falls Sprint

A targeted focus among Kansas hospitals on preventing Falls with Injury

October 2018 – March 2019

UP CAMPAIGN

WAKE UP → GET UP → SOAP UP → SCRIPT UP

SEDATION AND OPIOID SAFETY PLANS | PROGRESSIVE MOBILITY FOR ALL PATIENTS | HAND HYGIENE | OPTIMIZE INPATIENT MEDICATIONS

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21 Kansas Hospital Sprinters

- Clara Barton Hospital
- Coffey County Hospital
- Ellsworth County Medical Center
- F.W. Huston Medical Center
- Greenwood County Hospital
- Hillsboro Community Hospital
- Hodgeman County Health Center
- Jewell County Hospital
- Lawrence Memorial Hospital
- Mitchell County Hospital Health Systems
- Norton County Hospital

- Olathe Medical Center
- Osborne County Memorial Hospital
- Phillips County Hospital
- Rush County Memorial Hospital
- Scott County Hospital
- South Central Kansas Medical Center
- Sumner County Hospital District No. 1
- Washington County Hospital
- Wichita County Health Center
- William Newton Hospital

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KHC HIIN Data Update

- Status Update
- Measure Dictionary Update v2.3
- HIIN Milestone 10
- Worker Safety Measures
- Data submission schedule

Eric Cook-Wiens
MPH, CPHQ
Data and Measurement Director
Kansas Healthcare Collaborative
ecook-wiens@khconline.org
(785) 235-0763 x1324

Kansas Healthcare Collaborative   KHC HIIN – December 19, 2018   11

Data and Measures Update

Status Update

- Monthly Reports
  - Preliminary Reports, this week
  - Final reports on Friday, 1/4/2019
  - Using HIIN extension baselines
- Targeted emails for data quality
- KHC developing a dashboard for HIIN extension
  - January, 2019 (hopefully)
  - Focus on Milestone targets

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Measure Dictionary Update

- Version 2.3
- See change log for a list of updates

https://www.khconline.org/files/KHC-HIIN-Measures-Dictionary.pdf

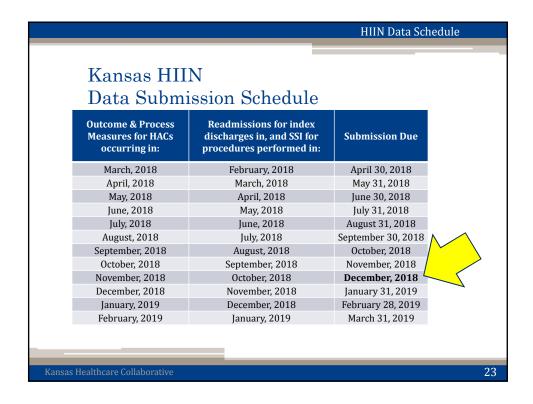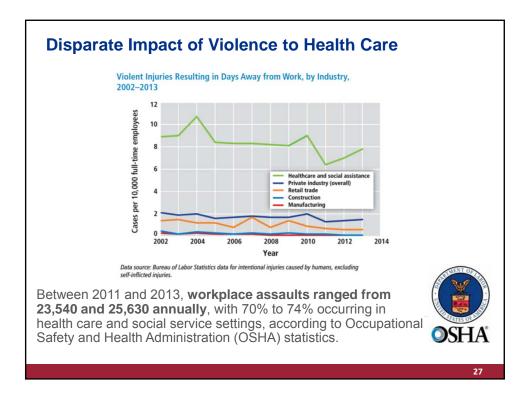HRET HIIN Improvement Calculator v6.0 on 11/21/2018

Kansas Healthcare Collaborative   KHC HIIN – September 26, 2018   13

Milestone 10

- Data Submission GOAL:

**>90% of hospitals have complete data
for >75% of their applicable measures
for the monitoring period:
Jan '17 through Oct '18**

- DUE DATE:

**January 15, 2018
(!)**

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Preliminary Results — KHC HIIN Progress to date

Current Status: Harms per 1,000 Discharges

Kansas Healthcare Collaborative — KHC HIIN – December 19, 2018 — 15

Preliminary Results — KHC HIIN Progress to date

Improvement Project-to-Date

HRET HIIN Improvement Calculator v6.1 on 12/17/2018

Kansas Healthcare Collaborative — KHC HIIN – December 19, 2018 — 16

Preliminary Results	Worker Safety

Harm Events Related to Workplace Violence

Kansas Healthcare Collaborative — 21

	Worker Safety

Harm Events Related to Workplace Violence
Poll

- What is behind the increasing rate of workplace violence events in 2018?
  - ○ Violence events <u>have become more common</u> in the last year
  - ○ Have **not** <u>noticed an increase</u> in violence events in my hospital
  - ○ The rate is the same, just being documented more consistently
  - ○ Not Sure
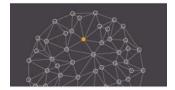- Put observations in chat

Kansas Healthcare Collaborative — 22

Kansas HIIN
Data Submission Schedule

Outcome & Process Measures for HACs occurring in:	Readmissions for index discharges in, and SSI for procedures performed in:	Submission Due
March, 2018	February, 2018	April 30, 2018
April, 2018	March, 2018	May 31, 2018
May, 2018	April, 2018	June 30, 2018
June, 2018	May, 2018	July 31, 2018
July, 2018	June, 2018	August 31, 2018
August, 2018	July, 2018	September 30, 2018
September, 2018	August, 2018	October, 2018
October, 2018	September, 2018	November, 2018
November, 2018	October, 2018	**December, 2018**
December, 2018	November, 2018	January 31, 2019
January, 2019	December, 2018	February 28, 2019
February, 2019	January, 2019	March 31, 2019

HIIN Data Schedule

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Workplace Violence: A National Perspective
Wednesday, December 19, 2018

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Disparate Impact of Violence to Health Care

Violent Injuries Resulting in Days Away from Work, by Industry, 2002–2013

Data source: Bureau of Labor Statistics data for intentional injuries caused by humans, excluding self-inflicted injuries.

Between 2011 and 2013, **workplace assaults ranged from 23,540 and 25,630 annually**, with 70% to 74% occurring in health care and social service settings, according to Occupational Safety and Health Administration (OSHA) statistics.

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Violence in health care facilities is a present issue

Table 2: Examples of Workplace Violence Incidents Reported by the Health Care Workers We Interviewed

Health care facilities	Examples of reported workplace violence incidents
Hospitals with emergency rooms	• Worker hit in the head by a patient when drawing the patient's blood and suffered a concussion and a permanent injury to the neck • Worker knocked unconscious by a patient when starting intravenous therapy on the patient
Psychiatric hospitals	• Worker punched and thrown against a wall by a patient and had to have several surgeries. As a result of the injuries, the worker was unable to return to work • Patient put worker in a head-lock, and worker suffered neck pain and headaches and was unable to carry out regular workload • Patient broke health care worker's hand when the health care worker intervened in a conflict between two patients
Residential care facilities	• Patient became upset after being deemed unfit to return home and attacked the worker • Worker hit in the head by a patient and suffered both physical and emotional problems as a result of the incident
Home health care services	• Worker attacked by patient with dementia and had to defend self • Worker was sexually harassed by a patient when the patient grabbed the worker while rendering care

Source: GAO analysis of information from discussion groups with health care workers. GAO-16-11

Source: Government Accountability Office report, Workplace Safety and Health: Additional Efforts Needed to Help Protect Health Care Workers from Workplace Violence. March 2016.

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There is a cost to hospitals preventing and responding to violence

WILLMAN RESEARCH REPORT
Cost of community violence to
hospitals and health systems
Report for the American Hospital Association

July 30, 2017

◼ Milliman

- "Overall, we estimated that proactive and reactive violence response efforts cost U.S. hospitals and health systems approximately **$2.7 billion in 2016.** This includes $280 million related to preparedness and prevention to address community violence, $852 million in unreimbursed medical care for victims of violence, $1.1 billion in security and training costs to prevent violence within hospitals, and an additional $429 million in medical care, staffing, indemnity, and other costs as a result of violence against hospital employees."

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Limited data and reporting is available on violence in health care facilities

Table 1: Federal Data Sets with National Data on Nonfatal Workplace Violence in Health Care Facilities.

Agency	Data Set	Types of workplace violence cases reported from this data set	Source
Department of Labor's Bureau of Labor Statistics (BLS)	Survey of Occupational Injuries and Illnesses (SOII)	Nonfatal workplace violence-related injuries requiring workers to take days off from work	*Employers:* BLS surveys a nationally representative sample of employers (about 230,000 establishments).
Department of Health and Human Services' National Institute for Occupational Safety and Health (NIOSH)	National Electronic Injury Surveillance System-Work Supplement (NEISS-Work)	Nonfatal workplace violence-related injuries treated in hospital emergency departments	*Hospitals:* NIOSH collects data from a nationally representative sample of 67 U.S. hospital emergency departments. Coders at participating hospitals review all emergency department records to capture nonfatal work-related injuries.
Department of Justice's Bureau of Justice Statistics (BJS)	National Crime Victimization Survey (NCVS)	Nonfatal assault against employed persons age 16 or older that occurred while they were at work or on duty [a]	*Individuals:* BJS surveys a nationally representative sample of about 90,000 households, comprising nearly 160,000 individuals.

Source: GAO review of agency data documentation. | GAO-16-11

[a]Note: In this report, we are reporting a subset of cases captured in the National Crime Victimization Survey. For details, see appendix I.

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Source: Government Accountability Office report, Workplace Safety and Health: Additional Efforts Needed to Help Protect Health Care Workers from Workplace Violence. March 2016.

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Challenges from the field

- Lack of a standard definition and collection of data
  - "The Bureau of Labor statistics and the National Institute for Occupational Safety and Health are among several federal agencies devoted to the collection of statistics on workplace violence, and their *results are disparate*. In addition, inconsistency in defining categories of violence compromise reliability among studies"
- Lack of evidence-based violence prevention programs
  - "Proving that prevention programs are efficacious and cost-effective requires scientific experimentation, and designing such experiments has proved to be challenging. Without standardized definitions, it will remain difficult for researchers to combine or compare data, assess interventions, and detect temporal changes."
- A Culture of Fear
  - "Nurses have cited *fear of retribution* from supervisors, the complexity of the legal system and disapproval of administrators as barriers to the reporting of workplace violence."
  - "Providers are sometimes *uncertain what constitutes violence*, since they often believe that their assailants are not responsible for their actions in such cases."
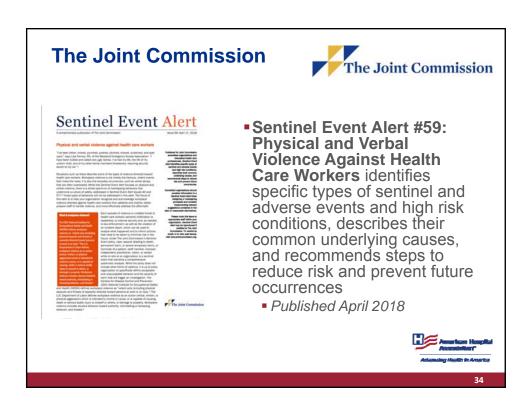
Source: Phillips, James P., M.D., "Workplace Violence Against Health Care Workers in the United States". The New England Journal of Medicine. April 28, 2016.
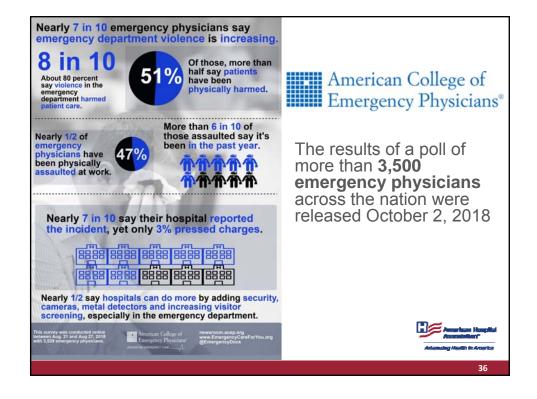
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Congress working to address this crisis in 2018…

- H.R. 5223 Health Care Workplace Violence Prevention Act introduced by Rep. Khanna (D-CA) on March 8, 2018

- H.R. 7141 Workplace Violence Prevention for Health Care and Social Service Workers Act, introduced by Rep. Courtney (D-CT) on November 15, 2018

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What other organizations are saying?

American College of Emergency Physicians®

NNHVIP
THE NATIONAL NETWORK OF HOSPITAL-BASED
VIOLENCE INTERVENTION PROGRAMS

ENA
EMERGENCY NURSES ASSOCIATION

ANA

CURE
VIOLENCE

The Joint Commission

50 IAHSS
International Association for Healthcare Security & Safety
celebrating 50 years 1968 - 2018

AmericanCollege of
HealthcareExecutives
for leaders who care®

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The Joint Commission

The Joint Commission

Sentinel Event Alert

- **Sentinel Event Alert #59: Physical and Verbal Violence Against Health Care Workers** identifies specific types of sentinel and adverse events and high risk conditions, describes their common underlying causes, and recommends steps to reduce risk and prevent future occurrences
  - *Published April 2018*

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The Joint Commission

The Joint Commission

Sentinel Event Alert

- **Sentinel Event Alert #60: Developing a Reporting Culture**
identifying and reporting unsafe conditions before they can cause harm, trusting that other staff and leadership will act on the report, and taking personal responsibility for one's actions are critical to creating a safety culture.
  - *Published December 2018*

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Nearly **7 in 10** emergency physicians say **emergency department violence** is **increasing.**

8 in 10
About 80 percent say **violence** in the emergency department **harmed patient care.**

51%

Of those, more than half say **patients** have been **physically harmed.**

Nearly **1/2** of emergency physicians have been physically **assaulted** at work.

47%

More than **6 in 10** of those assaulted say it's been **in the past year.**

Nearly **7 in 10** say their hospital **reported the incident,** yet only **3% pressed charges.**

Nearly **1/2** say hospitals can do more by adding **security, cameras, metal detectors and increasing visitor screening,** especially in the emergency department.

This survey was conducted online between Aug. 21 and Aug 27, 2018 with 3,539 emergency physicians.

American College of Emergency Physicians
ADVANCING EMERGENCY CARE

newsroom.acep.org
www.EmergencyCareForYou.org
@EmergencyDocs

American College of Emergency Physicians®

The results of a poll of more than **3,500 emergency physicians** across the nation were released October 2, 2018

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American Nurses Association

- According to a 2014 ANA survey of **3,765** registered nurses and nursing students, **43%** of respondents have been verbally and/or physically threatened by a patient or family member of a patient while at work.
- July 2015 released a position statement on Incivility, Bullying and Workplace Violence.

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Emergency Nurses Association

- ENA states that violence in emergency departments has reached epidemic levels and emergency nurses are particularly vulnerable

- ENA offers a Workplace Violence Toolkit and a few online Workplace Violence Course, providing 1.13 contact hours of CNE

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Hospital-based Violence Intervention Programs

- Violence is preventable, and trauma centers and emergency rooms have a golden moment of opportunity at the hospital bedside to engage with a victim of violence and to stop the cycle of violence. The Network's purpose is to strengthen existing programs and help develop similar programs in communities across the country.

- Cure Violence stops the spread of violence by using the methods and strategies associated with disease control – detecting and interrupting conflicts, identifying and treating the highest risk individuals, and changing social norms – resulting reductions in violence of up to 70%.

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KHA Workplace Violence Initiatives

Deborah F. Stern, RN, JD
Kansas Hospital Association
December 19, 2018

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KHA Workplace Violence Activities

- Focus group convened
- Workplace violence defined
- Survey developed and distributed
- Data analysis of survey results
- Next Steps based on survey results

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KHA Workplace Violence Focus Group

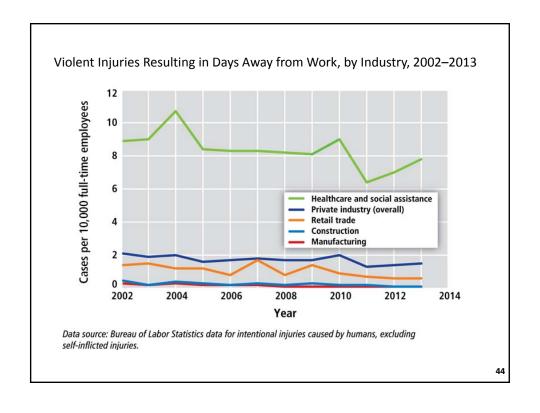- Multi-stakeholder group including nursing, quality, safety, emergency department, EMS, HR met in June 2018
- Reviewed environmental scan
- Developed definition of workplace violence
- Tested workplace violence survey
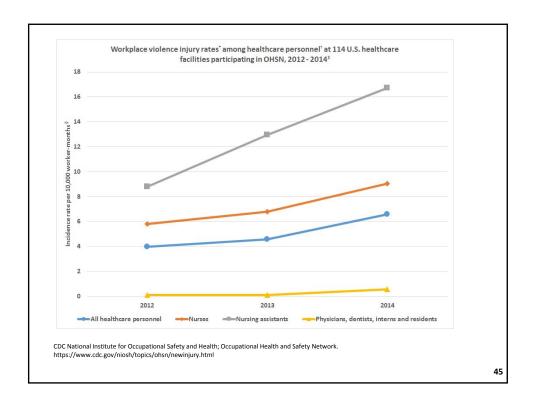- Provided input on education and resource needs

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Environmental Scan

Violent Injuries Resulting in Days Away from Work, by Industry, 2002–2013

Data source: Bureau of Labor Statistics data for intentional injuries caused by humans, excluding self-inflicted injuries.

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Workplace violence injury rates* among healthcare personnel† at 114 U.S. healthcare facilities participating in OHSN, 2012 - 2014‡

CDC National Institute for Occupational Safety and Health; Occupational Health and Safety Network.
https://www.cdc.gov/niosh/topics/ohsn/newinjury.html

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Patients are the largest source of violence in healthcare settings, but not the only source

Figure. Healthcare Worker Injuries Resulting in Days Away from Work, by Source

Source: Occupational Safety and Health Administration. Workplace violence in healthcare: understanding the challenge. 2015 Dec [cited 2017 Mar 29]. https://www.osha.gov/Publications/OSHA3826.pdf

MS17417

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Prevalence of workplace violence

- **Workplace violence injuries for inpatient healthcare workers are 5 times higher than private sector workers**
  2016 General Accounting Office

- **Violence is vastly underreported**

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KHA Workplace Violence Definition

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Workplace Violence Defined

Adapted from MHA definition and developed with input from KHA focus group

- *An act or threat of violence involving an explicit or implicit challenge to personal safety, wellbeing or health; and/or, other threatening disruptive behavior that occurs within health care facilities. The term "workplace violence" shall not include lawful acts of self-defense or the defense of others. Workplace violence includes, but is not limited to the following:*
  - *The threat or use of physical force, sexual assault, battery, harassment, bullying or intimidation, which may be verbal or non-verbal, against a caregiver or employee that results in, or has a high likelihood of resulting in injury, psychological trauma or stress, regardless of whether the employee sustains a physical injury;*

  - *An incident involving the threat or use of a firearm or other weapon, including the use of common objects as weapons, regardless of whether the employee sustains an injury.*

  - *An incident involving a patient, operating under an acute mental illness, significant cognitive impairment or an acute medical condition, who may be unable to understand the effects or the results of their actions. This type of incident is still considered a reportable event.*

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Kansas Emergency Nurses Association and Kansas Hospital Association Surveys

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Kansas Emergency Nurses Association (KANA) Survey Comments - 2018

- Reason for workplace violence – 54% behavioral health, drugs/alcohol
- Violence is part of the job – 18%
- Left nursing due to workplace violence – 5%

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KHA Workplace Violence Survey

- Sent to all KHA member hospitals (124) in September 2018
  - Directed to CEOs, Risk Managers, CNOs and HR Personnel
- Responses received from 251 individuals
  - 109 unique hospitals; and
  - rural health clinics, medical offices, and long term care units

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KHA 2018 Survey Result Highlights

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Respondents by hospital type

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Frequency of workplace violence committed by patients, visitors, students, inmates, or any others for whom the organization provides services?

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Type of workplace violence experienced in the responding facility

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Initiator of violence according to respondents

Day of the week workplace violence occurs at your facility?

Time of day of workplace violence occurrence at your facility?

In your opinion what are the 3 most important measures that would reduce violence in your workplace?

Training and Education	129
Security Staff	43
Behavioral Health	26
Communication	13
Legal/Legislative	13

Next Steps

- Report survey results to member hospitals
- Develop education and training resources for 2019
  - Provide web-based de-escalation training for use with new employees and for staff in-services
  - Provide face-to-face de-escalation training across the state

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Questions?

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Resources and Upcoming Events

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Kansas Healthcare Collaborative

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Announcements

Antimicrobial Stewardship:
Patient Education Resources

11" x 17"
Poster

#UseAntibioticsWisely

Download at:
UseAntibioticsWisely.org

Or request laminated copies:
Phil Cauthon
KHC Communications Director
pcauthon@khconline.org

DO YOUR PART TO REDUCE ANTIBIOTIC RESISTANCE
Know the facts.

WHAT YOU CAN DO

More info and resources at
UseAntibioticsWisely.org

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Don't forget your Change Packages!

Change packages include a menu of strategies, change concepts and specific, actionable items that any hospital can implement to improve the quality of patient care.

One package for each topic!
www.hret-hiin.org

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Upcoming Webinars

See more HRET HIIN events at
www.hret-hiin.org/events/index.dhtml

HRET HIIN: Measuring What Works to Achieve Health Equity
December 19 ● 12:30pm - 1:30pm
Register here:
http://hret.adobeconnect.com/health-disparities-20181219/event/registration.html

HRET HIIN: Falls Fishbowl #3
December 20 ● 11:00 am - 12:00pm
Register here:
http://hret.adobeconnect.com/falls-20181220/event/registration.html

HRET HIIN: Readmissions | MVP Webinar #4
January 4, 2019 ● 11:00 am – 12:00pm
Register here:
http://hret.adobeconnect.com/readmissions-20190104/event/registration.html

All times listed are Central Time.

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Upcoming Webinars

See more HRET HIIN events at
www.hret-hiin.org/events/index.dhtml

HRET HIIN: Falls Fishbowl #4
January 17, 2019 ● 11:00am - 12:00pm
Register here:
http://hret.adobeconnect.com/falls-20190117/event/registration.html

HRET HIIN: CAUTI Fishbowl #2
January 22 ● 11:00am - 12:00pm
Register here:
http://hret.adobeconnect.com/cauti-fishbowl-20190122/event/registration.html

HRET HIIN: ADE Relay Summary
January 31, 2019 ● 11:00am - 12:00pm
Register here:
http://hret.adobeconnect.com/ade-20190131/event/registration.html

Kansas Healthcare Collaborative   All times listed are Central time.   69

Upcoming KHC Webinars

KHC HIIN: PFAC Collaborative – Track 2 "Mini-Fellowship"
January 8, 2019 ● 1:00pm - 2:00pm
The link to register for this webinar has been shared with hospitals participating in this Collaborative. For information, contact Chuck Duffield, cduffield@khconline.org or call (785) 235-0763 x1327.

KHC HIIN: Monthly Webinar
January 23, 2019 ● 10:00am - 11:00 am
Register here:
https://khconline.adobeconnect.com/khc-hiin-01-23-19/event/registration.html

KHC HIIN: Falls Prevention Sprint – Session #4
January 24, 2019 ● 10:00am - 11:00 am
The link to register for this webinar has been shared with hospitals participating in this Sprint. To view past sesssions, visit the KHC HIIN Educational Archive. For information, contact Michele Clark, mclark@khconline.org or call (785) 235-0763 x1321.

See more Kansas events at
https://www.khconline.org/events/full-events-list

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