

KHC Hospital Improvement Innovation Network

September 25, 2019
10 to 11 a.m. CT

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



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








Introductions

Special Guests



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Kansas Healthcare Collaborative



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September 25, 2019

Agenda

- Welcome and Announcements
- HIIN Data and Measures Update
- AHA Age-Friendly Initiative - 4M Framework (Mobility, Mentation, Medication, and What Matters)
- HIIN Resources and Upcoming Events



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Announcements and Updates

KHC Announcements and Updates

- Observances and Resources
- Antibiotic Stewardship Posters – KHC will add your hospital logo!
- HIIN continuing through March 31, 2019 and next steps
- Milestone 14 Update

Michele Clark
MBA, CPHQ, CPPS, ABC
Program Director
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Announcements and Updates

Fall Prevention Week September 23-27, 2019



Falls Free®
National Council on Aging

Learn more at:

- [NCOA.org/FallPrevention](https://www.ncoa.org/fallprevention)
- [NCOA Evidence-based Falls Prevention Programs](#)
- [Community-based falls prevention presentation toolkit](#)

Evidence-Based Falls Prevention Programs: Saving Lives, Saving Money

THE CHALLENGE: Older Adult Falls in the U.S.

- 1 in 4 Americans aged 65+ falls each year
- Every 1.3 seconds, an older adult is treated in the emergency room for a fall
- Every 10 minutes, an older adult dies from a fall



Falls Are Common

- In 2015, the total cost of fall injuries was \$34 billion (78% paid by Medicare)
- This total cost may reach \$67.2 billion by 2020
- Even falls without injury can cause fear of falling, leading to physical decline, depression, and social isolation



Falls Are Costly

Falls in adults aged 65+ are the leading cause of head injuries and broken hips

THE SOLUTION: Proven Community-Based Programs

A Matter of Balance
Evidence-based program to reduce fear of falling and increase activity among older adults in the community.

- 97% of participants feel more comfortable talking about their fear of falling
- 99% of participants plan to continue exercising
- \$188 savings in unplanned medical costs per Medicare beneficiary

Otago Exercise Program
Individual program of muscle strengthening and balance exercises prescribed by a physical therapist for frail older adults living at home (aged 60+).

- 35% reduction in falls rate
- \$429 net benefit per participant*
- 127% ROI**

Stepping On
7-week program that offers older adults living in the community proven strategies to reduce falls and increase self-confidence.

- 30% reduction in falls rate
- \$134 net benefit per participant
- 64% ROI

Tai Chi: Moving for Better Balance***
Balance and gait training program of controlled movements for older adults and people with balance disorders.

- 55% reduction in falls rate
- \$530 net benefit per participant
- 509% ROI



Falls Free®
National Council on Aging
Learn more about these and other proven programs at [ncoa.org/FallPrevention](https://www.ncoa.org/fallprevention)

Sources: Chandrahasekhar, S., Shewchuk, C., Poonawalla, D., Kishor, S., et al. (2016). A cost-benefit analysis of the Otago exercise program for older adults. *Journal of Aging and Health*, 28(10), 1611-1621.
*Based on program in November 2012. The Centers for Medicare & Medicaid Services. *Reimbursement for Community-based exercise and prevention programs*. (2018). Retrieved from <https://www.cms.gov/medicare/coverage/policies/downloads/2018-01-01-coverage-determinations-community-based-exercise-and-prevention-programs.pdf>
**Based on the "The Otago Exercise Program" study.
***Based on the "Tai Chi: Moving for Better Balance" study.

Download poster at: <https://d2mkcg26uvvg1cz.cloudfront.net/wp-content/uploads/2017-Evidence-Based-Falls-Programs-Infographic.pdf>

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Announcements and Updates

HRET HIIN Falls Resources



- [Falls Change Package](#)
- [Top Ten Checklist](#)
- [Teach-Back Tool](#)
- [STOP to START Improving Fall Injuries](#)
- [Falls Process Discovery Tool](#)
- [Additional falls resources](#)

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Announcements and Updates



SEPSIS AWARENESS MONTH

2019 | **SEPTEMBER**
SEPSIS SAY SEPSIS
SAVE LIVES
SEPSISAWARENESSMONTH.ORG



Take T.I.M.E. to help save lives.
<https://www.sepsis.org/about/its-about-time/>

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Announcements and Updates

HRET HIIN

New Sepsis Podcast Series Is Now Available

The Health Research and Educational Trust has released a new sepsis podcast series in preparation for Sepsis Awareness Month.

Podcast topics:

- **Pre-Hospital Sepsis Recognition and Treatment**
- **Fluid Management for Sepsis**
- **Post-op Sepsis SNAP Learnings**
- **Post-Op Sepsis Syndrome**
- **Future of Sepsis**

Click here to access the Sepsis Podcast Series:
<http://www.hret-hiin.org/resources/display/sepsis-podcasts>

To access tools referenced during this podcast series, visit the HRET HIIN [Sepsis web page](#) and view the HRET HIIN [Sepsis Change Package](#).

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Announcements and Updates

Antibiotic Awareness Week • Nov. 18-24

<https://www.cdc.gov/antibiotic-use/week/get-involved.html>



Facebook.com/KHCqi

Twitter/KHCqi

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Announcements and Updates

Antibiotic Awareness Week • Nov. 18-24

Posters Available from KHC!



English

Spanish

Antibiotic awareness posters available to download, print, and display in your facility.

11"x17" PDFs available in both in English and Spanish.

→ **KHOnline.org/antibiotics**

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Announcements and Updates

Customized posters

NEW! Email your logo to Phil:
→ pcauthon@khconline.org

We will email you posters in both languages customized with your own logo.




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Announcements and Updates

Antibiotic Awareness Week • Nov. 18-24

Social media images and sample posts for the entire week also available for your use at:
→ KHConline.org/antibiotics

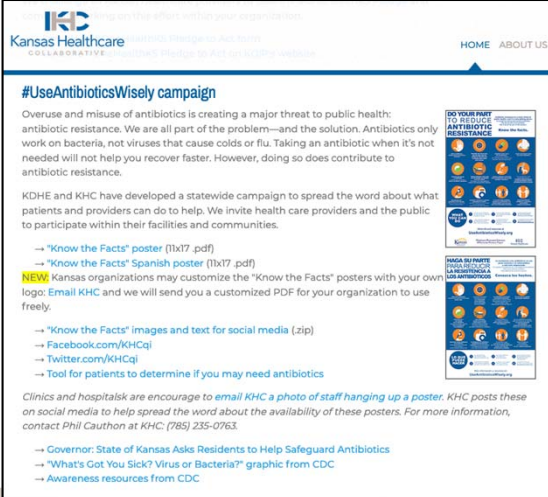
Or you can share KHC's posts at:
Facebook.com/KHCqi
Twitter/KHCqi



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Announcements and Updates

Antibiotic Awareness Week • Nov. 18-24



All materials
available at:

→ KHOnline.org/antibiotics

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Announcements and Updates

It's official!

CMS Continues HIIN through March 31, 2020

- Continuing our work to improve quality and patient safety
- Individualized support to hospitals in all HIIN topics
- Age Friendly Health Initiative
- Rapid Cycle Process Improvement Collaborative
- Opioid Stewardship
- Sharing our story
- Meeting Milestones toward HIIN “20/12” goals


Contact Michele or Chuck at KHC for more information or assistance.

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Announcements and Updates

It's official!
CMS Continues HIIN through March 31, 2020

NEXT STEPS:



Action Requested:
Sign updated QHi Addendum →
by Friday, Sept. 27!
Return to Stuart Moore
at Kansas Hospital Association
smoore@kha-net.org
 (785) 276-3104

ADDENDUM
QHI HOSPITAL INFORMATION SHARING AGREEMENT
 Kansas Healthcare Collaborative
 Hospital Improvement Innovation Network

(Participating Hospital) is a collaborating partner with the Kansas Healthcare Collaborative (KHC) in the Health Research and Educational Trust (HRET) Hospital Improvement Innovation Network (HIIN), and data submission is a requirement for hospital participation. During the term of the KHC HIIN program and for as long as Participating Hospital continues to participate in the KHC HIIN, Participating Hospital will submit timely data for all eligible topics according to the definitions and parameters of the identified measures for this national quality improvement and patient safety program supported by the Centers for Medicare and Medicaid Services (CMS) Center for Clinical Standards and Quality (CCSQ).

WHEREAS, Quality Health Indicators (QHIs) is a data collection and benchmarking system selected by KHC for the collection and reporting of data for the KHC HIIN; and

WHEREAS, Participating Hospital has previously signed a QHI Information Sharing Agreement (Agreement) with the Kansas Hospital Education & Research Foundation (KHREF);



THEREFORE, this Addendum to the Agreement between Participating Hospital and KHREF allows data submitted to QHI by Participating Hospital, as well as administrative data from the State Inpatient Database, for all measures addressed by the KHC HIIN program to be shared, transmitted, imported and reported on Participating Hospital's behalf with and among the KHC and its subcontractors, Kansas Hospital Association (KHA), AHA, HRET, CCSQ, and their respective data systems. No patient level data will be collected by QHI.

In addition, please "opt in" by checking the boxes below to allow the following permissions for the KHC HIIN to serve your facility:

☐ This hospital gives permission to KHC to routinely upload to QHI a copy of relevant hospital-generated outcomes (HAI) data submitted to the Centers for Disease Control and Prevention's National Healthcare Safety Network (NHSN). Permission to upload the data will facilitate greater use of the comparison, benchmarking and reporting tools available in QHI for the participating hospital.

☐ This hospital gives permission to KHC to share hospital-identifiable HAI data with the Kansas Quality Improvement Organization, the Kansas Foundation for Medical Care (KFMC), in support of the QHI-QIO 117 Scope of Work. This permission will allow greater facility and ability for KHC and KFMC to work in concert towards shared efforts in improving patient safety.

This stated permission is supplemental to current and future information sharing agreements between KHREF and Participating Hospital. No modifications to this Addendum shall be binding unless stated in writing and signed by both parties.

<p>KANSAS HOSPITAL EDUCATION AND RESEARCH FOUNDATION</p> <p> KHREF</p> <p>_____ Signature of Hospital Administrator</p> <p>_____ Date</p>	<p>PARTICIPATING HOSPITAL</p> <p> HOSPITAL</p> <p>_____ Signature of Hospital Administrator</p> <p>_____ Date</p>
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Please return signed agreement by mail, email or fax to: Stuart Moore, QHI Project Manager, Kansas Hospital Association, 215 S.W. 8th Ave., Topeka, KS 66602-3906, FAX: 785-233-6955, Email: stmoore@kha-net.org

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Announcements and Updates

It's official!
CMS Continues HIIN through March 31, 2020

HRET Hospital Improvement Innovation Network (HIIN)
 Project Commitment

I, _____, agree to participate with the Kansas Healthcare Collaborative (KHC) and the American Hospital Association/Health Research & Educational Trust (HRET) in the Hospital Improvement Innovation Network (HIIN), the Centers for Medicare and Medicaid Services (CMS) HIIN Initiative through March 31, 2020. As an active and engaged participant in this initiative, our organization agrees to the services and requirements outlined below:

As a participant in this initiative, our organization will receive, at no cost:

1. Support and coordination from the Kansas Healthcare Collaborative, HRET, collaborators, partners and stakeholders.
2. Access to resources, webinars, educational opportunities and networking opportunities to support improvement work related to the HIIN topics.
3. Access to data submission tools, such as Quality Health Indicators (QHIs), as well as data analysis reports to track progress on all applicable topics, including state and national comparative data, risk charts, reports, benchmarks and dashboards.
4. Access to clinical advisors and subject matter experts who can assist with improvement questions and provide recommendations.
5. Access to educational opportunities, including webinars and peer sharing.

As a participant in this initiative, our organization agrees to:

1. Work to improve patient safety on all areas (1) required core topics (SAFE, GASTRO, CLABSI, CL, etc.), (2) Public Preventive (HIV, Hepatitis, Bacteremia, Sepsis, MRSA, VTE), or (3) topics to be determined by the network, including a specific focus on:
 - a. Developing policies and procedures at the hospital to promote antibiotic stewardship with a focus on applying these policies and procedures to reduce the incidence and prevalence of diseases that are C. difficile.
 - b. Reducing harm on (1) state, all state measures.
2. Commit to lowering a culture of safety and reducing incidence of harm to patients across the continuum of care.
3. Submit requested data on all required topics, including process, outcome and operational measures.
4. Commit to collaboration, alignment and coordination:
 - a. Share success stories and lessons learned with other HRET HIIN hospitals via LISTSERV mailing lists, webinars and in person meetings.
 - b. Participate in site visits with KHC and its HIIN partners, as requested, which should include the appropriate representation(s) from our hospital's senior leadership.

In addition to the core topics, our hospital consents to working on the following cross-cutting topics:

- Leadership engagement
- Unit-based improvement efforts
- Physician leadership
- Patient and family engagement
- Health care disparities in care and outcomes

HIIN Commitment Letter Page 1 of 2

of commits to working toward a twenty (20) percent reduction in all-cause patient harm and a twelve percent reduction in harm due to (1) state, all state measures.

I, below, we hereby consent to participate in this initiative and submitting the data of the HIIN stated above.

 Signature (e.g., CEO) Date

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Announcements and Updates

HIIN Milestone 14

August 2018 through July 2019

Due Date:
October 15


Data Completeness
 $\geq 80\%$ of applicable measures
 No missing months
and
Improvement
Achievement of HIIN "20/12" Goals
 $\geq 70\%$ of all applicable measures
 meeting improvement goals

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KHC HIIN Reports

Page 1: Dashboard

- Green border:
 - [Meeting Milestone target](#)
- If you have any updates to PFE or Health Equity metrics, notify Treva Borchert at tborchert@khconline.org.


Kansas Healthcare
COLLABORATIVE

KHC HIIN Data Snapshot
 Your Hospital
 September 2019

Milestone Dashboard

Data Submission

Current Milestone: Submit complete monthly data for at least 80 percent of applicable measures by August 15, 2019. The time period for this Milestone is Jan 2017 through May 2019. Your hospital has submitted complete data on 18 measures out of 24 measures. (See page 2 for details.)

75.0% (18/24)

Measure Performance

Your hospital has achieved the improvement goal¹ for 20 out of 24 applicable Milestone measures. The improvement goal can be achieved by demonstrating improvement exceeding goal from baseline to any of the following: the whole project period, the most recent 6 months submitted, or by showing a streak of 6 months or more with a rate of zero. See the measure detail pages of this report for further information on performance by measure.

83.3% (20/24)

Patient and Family Engagement (PFE)

Current Milestone: Implement at least 4 of 5 PFE metrics by March 2019. Based on our most recent operational survey, your hospital has achieved the following:

Pre-admission Planning Checklist	Yes	100.0% (5/5)
Shift Change Huddles OR Bedside Reporting	Yes	
Designated PFE Leader	Yes	
PFAC or Representatives on Hospital Committee	Yes	
Patient Representative(s) on Governing/Leadership Board	Yes	

Health Equity Organizational Assessment (HEOA)

Current Milestone: Achieve basic level or higher for each HEOA metric; additionally, achieve intermediate level or higher for at least 2 HEOA metrics. Based on our recent quarterly assessment survey, your hospital has achieved the following:

Data Collection	Basic	Basic or higher 3 of 7 Intermediate or higher 0 of 7
Data Collection Training	Basic	
Data Validation	Below Basic	
Data Stratification	Below Basic	
Communicate Findings	Below Basic	
Address and Resolve Gaps in Care	Below Basic	
Infrastructure and Culture	Basic	

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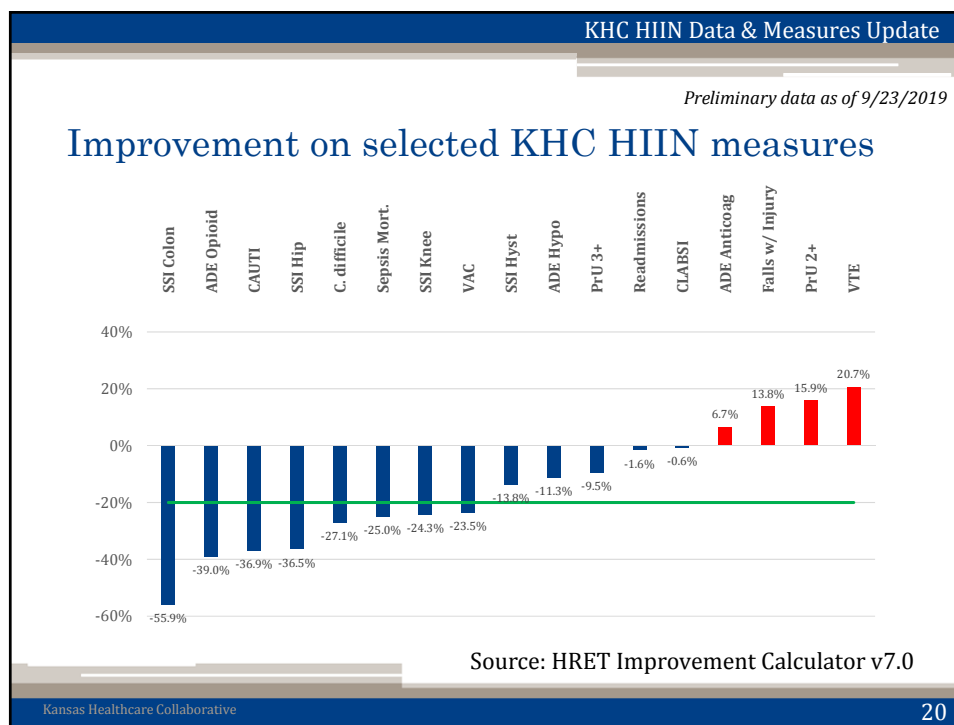
KHC HIIN Data & Measures Update

KHC HIIN Measures and Data Update

- Current status
- September data reports
- Data submission schedule

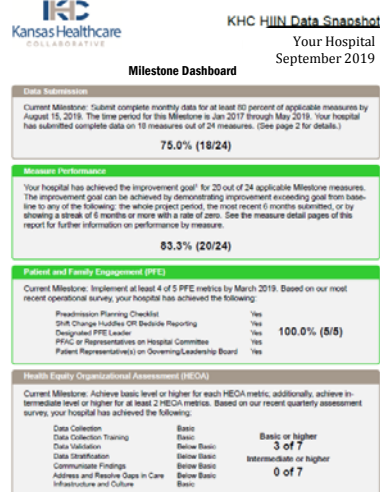
Eric Cook-Wiens
 MPH, CPHQ
 Data and Measurement Director
 Kansas Healthcare Collaborative
 ecook-wiens@khconline.org
 (785) 235-0763 x1324

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New Reports Dashboard

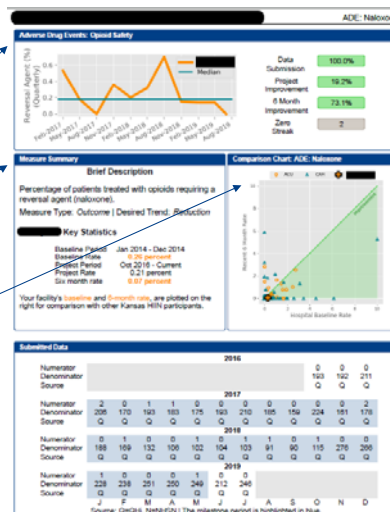
- Snapshot Date:
The date data files were pulled from NHSN and QHI
- Green border:
 - Meeting Milestone target
- Should match your 2-page milestone report



New Reports
Detail pages

4 Sections

1. Run Chart and project statistics
2. Measure summary
3. Comparison scatter plot
4. Numerators and denominators



KHC HIIN Data & Measures Update		
Kansas HIIN - Data Submission Schedule		
Outcome & Process Measures for HACs occurring in:	Readmissions for index discharges in, and SSI for procedures performed in:	Data Submission Due
January 2019	December 2018	28-Feb-2019
February 2019	January 2019	31-Mar-2019
March 2019	February 2018	30-Apr-2019
April 2019	March 2019	31-May-2019
May 2019	April 2019	30-Jun-2019
June 2019	May 2019	31-Jul-2019
July 2019	June 2019	31-Aug-2019
August 2019	July 2019	30-Sept-2019
September 2019	August 2019	31-Oct-2019
October 2019	September 2019	30-Nov-2019
November 2019	October 2019	31-Dec-2019

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**American Hospital
Association™**

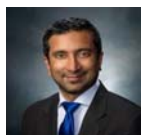
Advancing Health in America

AHA Age-Friendly Initiative — 4M Framework (Mobility, Mentation, Medication, and What Matters)

Raahat Ansari & Aisha Syeda

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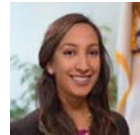
AHA Age-Friendly Team



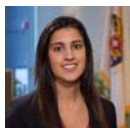
Jay Bhatt, DO, MPH, MPA,
President, HRET
SVP & CMO, AHA



Marie Cleary-Fishman, MS,
MBA
Vice President
Clinical Quality AHA



Raahat Ansari
Program Manager



Radhika Parekh, MHA
Performance Improvement Coach
II, AHA



Aisha Syeda, MPH
Program Manager, AHA



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Pre Surgery



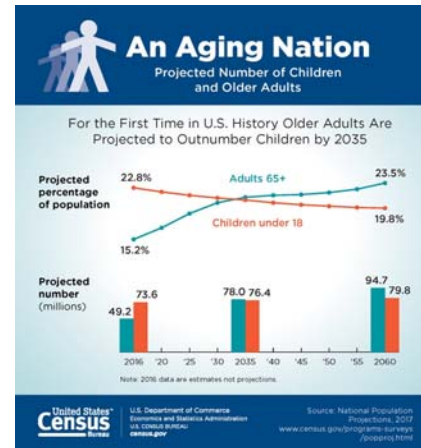
Post Surgery



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Why Age-Friendly Health Systems?

- Demography
- Complexity
- Disproportionate harm



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What is Our Goal?

Build a social movement so **all care** with older adults is **age-friendly care**:

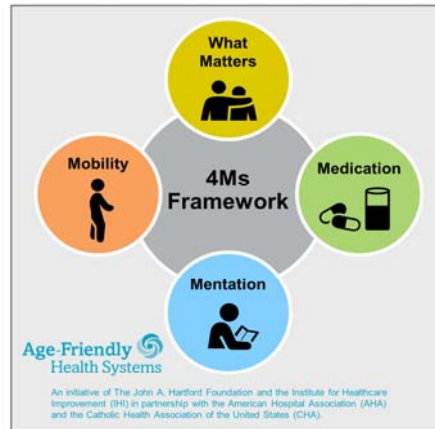
- Guided by an essential set of evidence-based practices (4Ms);
- Causes no harms; and
- Is consistent with What Matters to the older adult and their family.

Our first aim is to reach 20%: 1,000 hospitals & 1,000 primary care practices by December 31, 2020.



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The 4Ms Core of an Age-Friendly Health System



What Matters

Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

Medication

If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

Mentation

Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

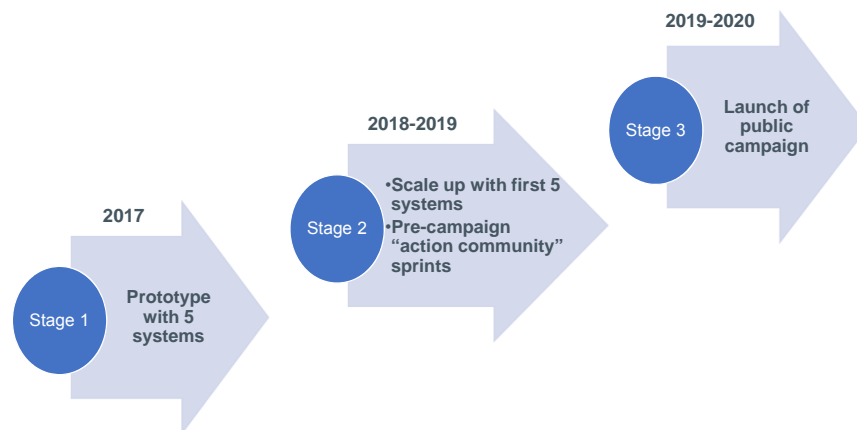
Mobility

Ensure that older adults move safely every day in order to maintain function and do What Matters.



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Age Friendly Health Systems: Timeline



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Pioneer Health Systems



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“On-ramps” for Hospitals and Practices

- 7-month Action Community starts in October
- Open to hospital-based teams (e.g., emergency departments, ICUs, general wards, medical-surgical units) and ambulatory care teams (e.g., primary care, specialty care)
- Instruction and coaching will be setting specific and include transitions in care between settings



Hospital-based
Care

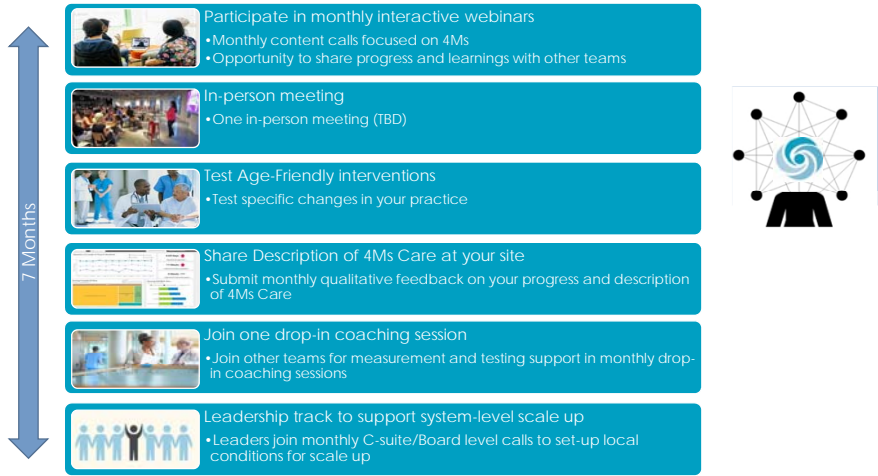


Ambulatory/
Primary Care



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Clinical Team (Site of Care) Responsibility



- Participate in monthly interactive webinars
 - Monthly content calls focused on 4Ms
 - Opportunity to share progress and learnings with other teams
- In-person meeting
 - One in-person meeting (TBD)
- Test Age-Friendly interventions
 - Test specific changes in your practice
- Share Description of 4Ms Care at your site
 - Submit monthly qualitative feedback on your progress and description of 4Ms Care
- Join one drop-in coaching session
 - Join other teams for measurement and testing support in monthly drop-in coaching sessions
- Leadership track to support system-level scale up
 - Leaders join monthly C-suite/Board level calls to set-up local conditions for scale up

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American Hospital Association
Advancing Health in America

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Assess and Act On

- Almost all systems integrate some of the 4Ms into care, some of the time, with some older adults, in some place in their system.
 - Assess:** Use an understanding of your current experience and capacity to engage in 4Ms care
 - Assess:** Use the 4Ms to organize care and focus on the older adult
 - Act On:** Integrate the 4Ms into care or existing workflows
 - Act On:** Identify what activities you can stop doing to reallocate resources for the 4Ms and when the 4Ms are reliably in practice
- Overall, look for opportunities to combine or redesign activities, processes, and workflows around the 4Ms

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Advancing Health in America

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How KHC will support this initiative

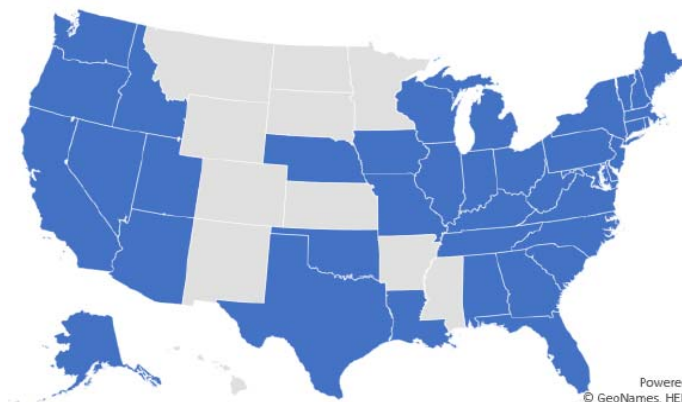
- Attend webinars to become familiar with content and programmatic updates
- Attend in-person meetings (TBD)
- Monitor clinical team's completion of pre-work and monthly data submission
- Help gather successes and challenges for AHA to enhance the work



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Age-Friendly across the U.S

State participation in Waves 1 and 2



162 organizations
327 sites of care
42 states



Wave 1 was held Fall 2018.
Wave 2 ends in October 2019.
Wave 3 begins in October 2019.



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Action Community Participants-Wave 1 & 2

- List of participants by organization and state
- Available in the files pod

Team	Organization	Source	State
Huntington Hospital		Wave 1	CA
Woodland Hills	Kaiser Permanente	Wave 1	CA
Saddleback Medical Center		Wave 1	CA
Acadia Adult Day Services	Alzheimer's Orange County	Wave 2	CA
South County Adult Day S	Alzheimer's Orange County	Wave 2	CA
Alzheimer's Orange Count	Alzheimer's Orange County	Wave 2	CA
4East Team	City of Hope National Medical Center	Wave 2	CA
EHB Team	City of Hope National Medical Center	Wave 2	CA
Kaiser Permanente	Kaiser Permanente	Wave 2	CA
Inpatient Services	MemorialCare Saddleback Medical C	Wave 2	CA
Geriatric Trauma Multi-di	Stanford University	Wave 2	CA
Senior Emergency Care U	University of California San Diego He	Wave 2	CA
Population Health	University of California San Diego He	Wave 2	CA
Senior Behavioral Health	University of California San Diego He	Wave 2	CA
Trauma Surgery Unit with	University of California San Diego He	Wave 2	CA
Niche Elder Care Taskford	University of California San Diego He	Wave 2	CA
Post Acute Care Preferred	University of California San Diego He	Wave 2	CA
Anesthesia	University of California San Diego He	Wave 2	CA



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How does Age-Friendly Relate to the HIIN Goals?

- Cross cut with HIIN measures
 - Falls with injury
 - Patient Family & Engagement
 - Adverse Drug Events
 - Delirium
 - Pressure Ulcers



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Action Community Monthly Data Collection

- Data submitted via survey monkey
- Submission includes:
 - Definition of the how you are putting the 4Ms into practice
 - Qualitative feedback about challenges or learnings the teams want to share
 - Count of 65+ people whose care includes the 4Ms
- Template available in files pod

Age-Friendly Health Systems- 4Ms Care Description

Please complete this survey with your 4Ms Care Description for your hospital or health practice. When your description of 4Ms Care is aligned with the [Guide to Using the 4Ms in the Care of Older Adults](#), we will be in touch with next steps. For any questions, please email ahaactioncommunity@aha.org.

Health System

Hospital, Primary Care Practice, or Clinic Name. If you have multiple Primary Care Practices, please fill out the Description for each practice.

Key Contact

Name

Email Address

4Ms Care Description

☐ First time submitting description or description is revised from previous month

☐ Description has not changed from previous month and hospital/practice has received notice from AHA that description is accepted as aligned with [Guide to Using the 4Ms in the Care of Older Adults](#)

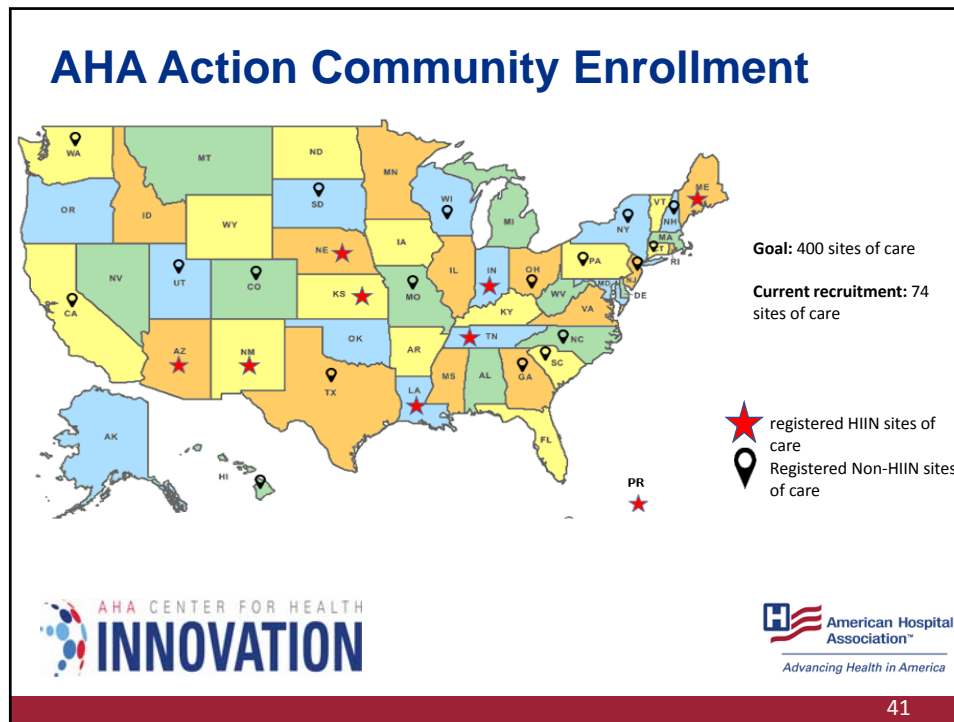
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4Ms Care Assessment

- Purpose:
To understand team's current state within Age-Friendly care
- To be completed the first submission month or if description has changed from previous month

	What Matters	Medication	Mentation	Mobility
Aim	Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care	If medication is necessary, use age-friendly medication that does not interfere with What Matters to the older adult. Mobility, or Mentation across settings of care	Prevent, identify, treat, and manage delirium across settings of care	Ensure that each older adult moves safely every day to maintain function and do What Matters
Engage / Screen / Assess Please check the boxes to indicate items used in your care or fill in the blanks if you check "Other."	List the question(s) you ask to know and align care with each older adult's specific outcome goals and care preferences: <small>One or more What Matters question(s) must be listed. Question(s) cannot focus only on end-of-life forms.</small>	Check the medications you screen for regularly: <input type="checkbox"/> Benzodiazepines <input type="checkbox"/> Opioids <input type="checkbox"/> Highly-anticholinergic medications (e.g., diphenhydramine) <input type="checkbox"/> All prescription and over-the-counter sedatives and sleep medications <input type="checkbox"/> Muscle relaxants <input type="checkbox"/> Tricyclic antidepressants <input type="checkbox"/> Antipsychotics <input type="checkbox"/> Other: _____ <small>Minimum requirement: At least one of the first seven boxes must be checked.</small>	Check the tool used to screen for delirium: <input type="checkbox"/> U-2 <input type="checkbox"/> CAM <input type="checkbox"/> 3D-CAM <input type="checkbox"/> CAM-ICU <input type="checkbox"/> hCAM <input type="checkbox"/> Nu-DESC <input type="checkbox"/> Other: _____ <small>Minimum requirement: At least one of the first six boxes must be checked. If only "Other" is checked, will review.</small>	Check the tool used to screen for mobility limitations: <input type="checkbox"/> TUG <input type="checkbox"/> Get Up and Go <input type="checkbox"/> JH-HLM <input type="checkbox"/> POMA <input type="checkbox"/> Refer to physical therapy <input type="checkbox"/> Other: _____ <small>Minimum requirement: One box must be checked. If only "Other" is checked, will review.</small>
Frequency	<input type="checkbox"/> Once per stay <input type="checkbox"/> Daily <input type="checkbox"/> Other: _____ <small>Minimum frequency is once per stay.</small>	<input type="checkbox"/> Once per stay <input type="checkbox"/> Daily <input type="checkbox"/> Other: _____ <small>Minimum frequency is once per stay.</small>	<input type="checkbox"/> Every 12 hours <input type="checkbox"/> Other: _____ <small>Minimum frequency is every 12 hours.</small>	<input type="checkbox"/> Once per stay <input type="checkbox"/> Daily <input type="checkbox"/> Other: _____ <small>Minimum frequency is once per stay.</small>
Documentation	<input type="checkbox"/> EHR	<input type="checkbox"/> EHR	<input type="checkbox"/> EHR	<input type="checkbox"/> EHR

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Practical Ideas for Changing the “Way we do it”

- Convert the white board to a “what matters” board
- Mobility check upon check-in
- Blood draw to 6am instead of 4am
- Mobility place mats; Brain games on flip side
- My Story with every chart
- Add a mobility check to a vitals check
- Use Straws instead of pitchers

Resources

- 2-pager Flyer- highlights the 4Ms and how to join the action community
 - Available in the files pod
- Age-Friendly Slides- overview of the initiative and how to enroll into the Action Community
 - Available in the files pod
- [Action Community Introduction Webinar](#)- provides details about the 4M Framework and how to become an Age-Friendly Health System
- Getting Started Guide-designed for clinical teams to use to integrate the 4Ms within the unit
 - Available in the files pod

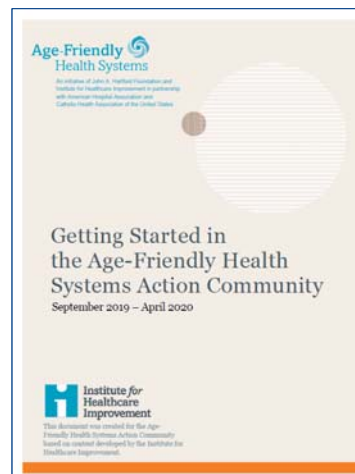


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Join the AHA Action Community

1. Enroll through this link:
<https://www.aha.org/center/new-payment-and-delivery-models/age-friendly-health-systems/form/commitment-form>
2. Register for the Getting Started (Kick-off) webinar, **today at 1pm CT**
 - Register [here](#) : Must enroll in the action community first!
3. Participate in AHA's Action Community (Sept. 2019 - April 2020)
 - Monthly all-team webinars
 - Scale-up leaders webinars
 - Listserv, sharing learnings
 - Monthly reports on testing and learnings
 - Celebration of joining the movement!

Email ahaactioncommunity@aha.org with any questions.



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Questions?



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Resources and Upcoming Events

Resources and Upcoming Events

Chuck Duffield
Performance Improvement Manager
Kansas Healthcare Collaborative
cduffield@khconline.org
(785) 235-0763 x1327

Kansas Healthcare Collaborative

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Upcoming Events

Upcoming KHC HIIN Webinars

KHC HIIN Webinar
Topic: Antibiotic Stewardship (details pending)
Kansas hospitals are encouraged to attend our monthly virtual meetings for HIIN updates, education, and peer-to-peer sharing.
Oct 23, 2019 • 10:00 to 11:00 am
Register Here: <https://khconline.adobeconnect.com/khc-hiin-10-23-19/event/registration.html>

KHC HIIN Webinar
Nov 20, 2019 • 10:00 to 11:00 am
Register Here: <https://khconline.adobeconnect.com/khc-hiin-09-25-19/event/registration.html>

KHC Hand Hygiene Collaborative Quarterly Virtual Session
Nov 1, 2019 | 11:00 a.m. – 12:00 p.m.
Kansas hospitals participating in Cohort 2 of the KHC Hand Hygiene Collaborative are invited to participate in each quarterly session. Contact Chuck Duffield (cduffield@khconline.org) for webinar registration link.

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Upcoming Events

Upcoming QHi Webinar

QHi Back-to-Basics Training Session
Review basics of selecting measures, entering data and running/scheduling reports
October 3, 2019 | 1:00 p.m. – 2:00 p.m. | [Register here](#)

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Announcements and Updates

*KHA***Three-part De-escalation Webinar Series**

The Kansas Hospital Association has announced a three-part webinar series to address current challenges that many — health care employees, volunteers, and others who interact with aggressive individuals — face in the health care setting. Each webinar begins at 12:00 p.m.

- **Oct. 22** – *Sticks and Stones and Getting Along: Controlling Conflict with Communication*
- **Nov. 12** – *All Patients are Unique (Just Some more than Others): De-escalation Techniques in Atypical Health Care Settings*
- **Dec. 10** – *S E C U R I T Y: Who is Responsible?* (Hint: It's someone you know.)

[Webinar series brochure](#)

[Online registration link](#)

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Announcements and Updates

Kansas Association of Risk and Quality Management
KARQM Fall Conference

Registration is now open!

Please register by October 11.
 Hurry! Space is limited.

For more information, contact
 Lorri Dean at KHA (785) 233-
 7436 or email [ldean@kha-](mailto:ldean@kha-net.org)
[net.org](mailto:ldean@kha-net.org).



KARQM
 Kansas Association of Risk and Quality Management

WHEN IT GETS PERSONAL

Being a Witness, Errors, Quality Measures, Patient Safety, Litigation, Health Equity, Health Disparities, Implicit Bias

2019 KARQM FALL CONFERENCE
 Friday October 18, 2019
 Ascension Via Christi Hospital, Inc. (St. Joseph)
 McNamara Center

Registration — KARQM Members— Free
 Non-Members \$125
 Registration must be received by October 11, 2019
 Registrants limited to 110
 Lunch included

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Announcements and Updates

National Content Developer
NCD Pacing Event

Topic: Venous Thromboembolism (VTE)

September 26, 1 to 2 pm

- [Register here](#)

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Announcements and Updates

Free CDC Training
Pharmacists Role in Fall Prevention

Pharmacists can help prevent older adult falls. Learn how pharmacists can implement fall screening, review medications and offer patient education with this training from CDC and the American Pharmacists Association (APhA). This web-based, self-study module offers 1.0 contact hour of CPE credit.

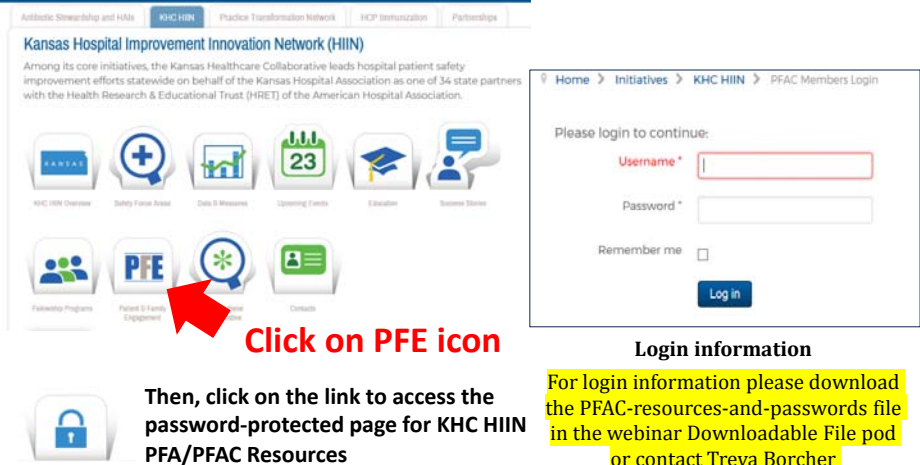
- CDC Train | [STEADI: The Pharmacist's Role in Older Adult Fall Prevention](#)

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Resources

Gaining Access to Shared PFA/PFAC Resources at www.khconline.org



Click on PFE icon

Then, click on the link to access the password-protected page for KHC HIIN PFA/PFAC Resources


Login information

For login information please download the PFAC-resources-and-passwords file in the webinar Downloadable File pod or contact Treva Borchert TBorchert@khconline.org

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Resources

PFA/PFAC Resource Toolkit INSTRUCTIONAL VIDEOS Steps #1 - #7



Note: You must be logged into the PFAC Members-Only page to access the videos.

Login information


For details for accessing KHC HIIN resources, download the PFAC-resources-and-passwords file in the webinar Downloadable File pod or contact Treva Borchert TBorchert@khconline.org

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Resources and Upcoming Events

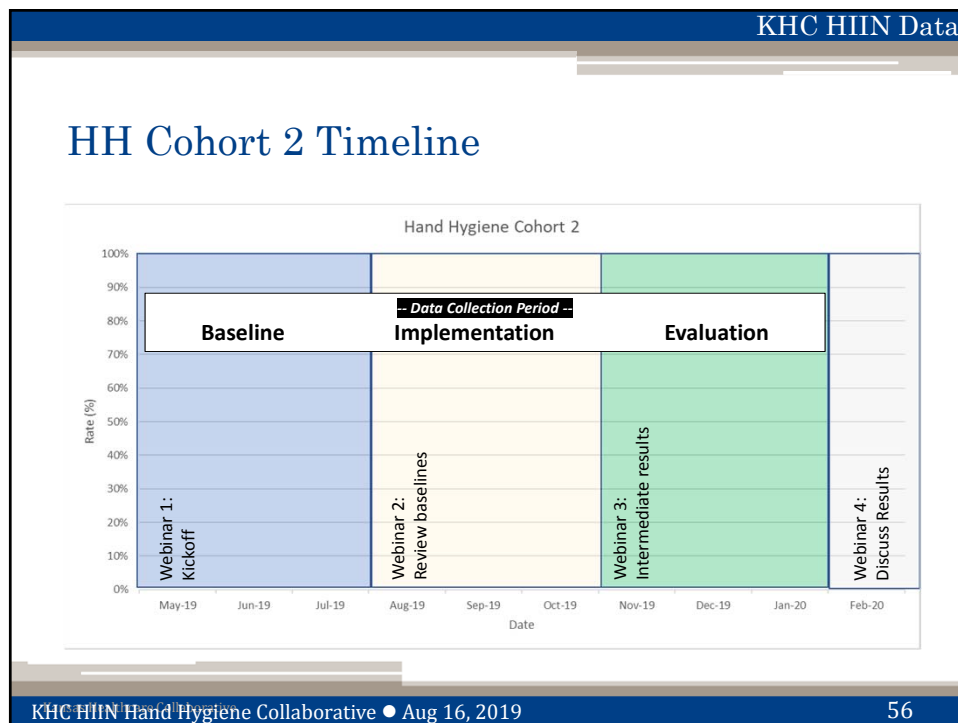
KHC HIIN Hand Hygiene Collaborative Cohort 2 May 1, 2019 to March 27, 2020

This 11-month collaborative, conducted by KHC features many supports to help your hospital increase hand hygiene adherence. We welcome Cynosure Health improvement advisor Barb DeBaun as our subject matter expert and faculty.




Contact Chuck Duffield at cduffield@khconline.org for additional information

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Enrolled Hospitals		
KHC HIIN Hand Hygiene Collaborative Cohort 2 - 79 hospitals		
Allen County Regional Hospital Anderson County Hospital Atchison Hospital Citizens Medical Center Clara Barton Hospital Clay County Medical Center Cloud County Health Center Coffey County Hospital Coffeyville Regional Medical Center Comanche County Hospital Community HealthCare System, Inc. Community Memorial Healthcare, Inc. Decatur Health Systems, Inc. Edwards Co. Hosp. and Healthcare Ctr. Ellsworth County Medical Center F.W. Huston Medical Center Fredonia Regional Hospital Geary Community Hospital Girard Medical Center Goodland Regional Medical Center Gove County Medical Center Greenwood County Hospital Hanover Hospital Hays Medical Center Hiawatha Community Hospital Hillsboro Hospital Hodgeman County Health Center	Holton Community Hospital Hospital District 6 Anthony Campus Hutchinson Regional Medical Center Jewell county Hospital Kansas Medical Center Kearny County Hospital Kingman Community Hospital Kiowa District Hospital Labette Health Lindsborg Community Hospital LMH Health Logan County Hospital McPherson Hospital Inc. Meade District Hospital/Artesian Valley Health System Memorial Health System Mercy Hospital Columbus Mercy Hospital Inc. Miami County Medical Center, Inc. Minneola District Hospital Mitchell County Hospital Health Systems Morton County Health System Nemaha Valley Community Hospital Ness County Hospital District No. 2 Newman Regional Health Newton Medical Center Norton County Hospital	Olathe Medical Center, Inc. Osborne County Memorial Hospital Ottawa County Health Center Phillips County Hospital Pratt Regional Medical Center Rawlins County Health Center Republic County Hospital Rush County Memorial Hospital Sabetha Community Hospital Saint John Hospital Saint Luke Cushing Hospital Saint Luke's South Hospital Salina Regional Health Center Sheridan County Health Complex Smith County Memorial Hospital South Central Kansas Medical Center Stafford County Hospital Sumer Community Hospital Sumner County Hospital District No. 1 Susan B. Allen Memorial Hospital Trego County Lemke Memorial Hospital University of Kansas - Great Bend Campus University of Kansas Health System Western Plains Medical Complex William Newton Memorial Hospital Wilson Medical Center
KHC HIIN Hand Hygiene Collaborative • Aug 16, 2019		
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Resources and Upcoming Events
<p>Please provide feedback to this webinar. Let us know your next steps.</p> <p>https://www.surveymonkey.com/r/HIIN-Webinar-09252019</p> <p>We welcome your ideas for future topics!!</p>
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HIIN Contacts


Your HIIN Contacts




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Executive Leadership



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Co-Executive Director



Jerry Slaughter
Co-Executive Director



Allison Peterson DeGroff
Managing Senior Director



Karen Braman
Senior Director



Michele Clark
Program Director



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KHConline.org/staff

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