

North Dakota Hospital Association Innovate-ND

HRET Hospital Improvement Innovation Network

June 16, 2017

EDUCATIONAL EVENTS

HRET HIIN

**PFE Fundamentals | PFAs:
Awe Got Them! Now What?**
06/20/17 | 11:00 a.m.-12:00 p.m.
CT

**ADE – Opioid Safety
Fishbowl Series 2**
06/22/17 | 11:00 a.m.-12:00 p.m.
CT

**CAUTI | Culturing Practices
Matter: Spotlight on
Asymptomatic Bacteriuria**
06/27/17 | 11:00 a.m.-12:00 p.m.
CT

SSI Virtual Event
06/29/17 | 11:00 a.m.-12:00 p.m.
CT
*We are extremely fortunate that one of the content experts, **Gwen Borlaug, MPH, CIC**, who had a hand in developing a guidance document to compliment the use of the new CDC HICPAC Guidelines for the Prevention of SSIs, will join this call. Review this the [guidance tool](#) in advance of the session and come prepared to participate in the open-mic portion of the webinar.*

**Falls | Hit the Walls on Falls?
Time to Recalibrate!**
07/11/17 | 2:00-3:00 p.m. CT

Information, registration links and recording links for **all** HRET HIIN



IMPORTANT DATES TO REMEMBER

06/30/17	Performance/monitoring data for May 2017 discharges
07/28/17	Second quarter 2017 quarterly report

Congratulations to **First Care Health Center, Park River**, on implementation of bedside reporting! Megan Thompson reported, "We have been amazed at all the ways it has improved our care and knowledge of our patients!" This week they also have their first Patient Family Advisory Committee meeting with the first task to be review of a new patient orientation guide about what to expect while you are in the hospital. Best wishes for a successful meeting! We can't wait to hear the results!

St. Luke's Medical Center – Crosby has enrolled their ED and **local community pharmacy** in the Outpatient Antibiotic Stewardship initiative led by QHA! This is our first fully committed outpatient pharmacy...thank you Sarah Fagerbakke!

Click [here](#) to learn more about this initiative, how it aligns with hospital antibiotic stewardship, and how you can enroll your ED and other outpatient settings in this important work. This initiative will tie in very nicely with our Innovate-ND|HRET HIIN hospital antibiotic stewardship work!

QUALITY MILESTONES RECOGNITION

Silver Milestone

One of the requirements to achieve the silver milestone is to share your hospital's Harm Across the Board Score with your hospitals. This is something that is available through the HIIN Improvement Calculator, which you may download, or you may request a report from us. In order to claim it for your milestone, we need to know about it, so please make sure to provide the following to Nikki at nmedalen@qualityhealthnd.org:

- 1) The agenda for your board meeting

upcoming and past virtual events can be found under the “Events” tab on www.hret-hiin.org.

Great Plains QIN

Heart Failure 101
06/20/17 | 1:30-2:30 p.m.
 Register [here](#).

BCBSND

Gearing Up for Worksite Wellness
06/20/17 | Bismarck, ND
 Register [here](#).

CDC

Using the CDC's TAP Strategy to Prevent Healthcare-associated Infections: Running and Understanding TAP Reports
06/20/17 | 11:00 a.m.-12:00 p.m. CT
 See joining instructions [here](#).

New England QIN

Connecting Across the Community to Address the Needs of Patients with Complex Needs
06/22/17 | 10:00-11:00 a.m. CT
 Register [here](#).

ND Department of Health Antibiotic Stewardship in Long-Term Care Facilities
06/29/17 | 12:00-1:00 p.m. CT
 Register [here](#).

NATIONAL PATIENT SAFETY FOUNDATION WEBCASTS

The National Patient Safety Foundation (NPSF) now offers complimentary access to past NPSF webcasts. Check back often to see what is available. [Visit the NPSF Webcast Archive](#) website and follow the instructions on your screen.

2) A copy of the report that you shared during that meeting.

We would love to hear feedback on how it was received by your board, whether or not they are using the harm score to make financial or service decisions and if it has any impact on priorities for your hospital. If you request the report from us, we also want to know if there are additional items you would like included, or if there is a better, more user friendly way to present it.

COPPER Milestone:	COPPER, BRONZE & SILVER Milestone:
COPPER & BRONZE Milestone: Ashley Medical Center Carrington Health Center Cavalier County Memorial Hospital CHI Mercy Health–Valley City CHI St. A’s Mercy Hospital–Devils Lake Community Memorial Hospital Cooperstown Medical Center First Care Health Center Garrison Community Hospital Heart of America Medical Center Jacobson Memorial Hospital Care Center Kenmare Community Hospital Linton Hospital McKenzie County Healthcare System Mountrail County Medical Center Nelson County Health System Northwood Deaconess Health Center Pembina County Medical Center Presentation Medical Center Sakakawea Medical Center Sanford Hillsboro Medical Center Sanford Mayville Medical Center Southwest Healthcare Services St. Aloisius Medical Center St. Andrew’s Health Center St. Luke’s Hospital Tioga Medical Center Towner County Medical Center Unity Medical Center Wishek Community Hospital	COPPER, BRONZE, SILVER & GOLD Milestone:
COPPER, BRONZE, SILVER, GOLD & PLATINUM Milestone:	

SAVE THE DATE

HRET Adaptive Leadership 08/02/17-08/03/17 | Chicago, IL

Adaptive Leadership in Medicine training will be held in Chicago August 2-3, 2017. This is an opportunity for a physician and administrator from the same organization to join together and gain valuable leadership tools. HRET HIIN hospitals are eligible to receive a scholarship that includes the training, hotel and airfare free of charge. Non-HIIN hospitals are also encouraged to apply, but please note that their scholarship includes only the cost of the training. Those interested in applying will be required at the time of registration to identify the individual from their organization who will be joining them. Click [here](#) for brochure and registration link.

QHA's 2017 Quality Forum 08/10/17 | Fargo, ND

Registration information coming VERY SOON!

HRET HIIN Road Show 10/02/17-10/03/17 | Fargo, ND

NDHA's 2017 Annual Convention & Trade Show 10/03/17-10/05/17 | Fargo, ND

REMINDER: CMS Evaluation of Partnership for Patients (PfP) Hospital Engagement Network (HEN) Program

CEOs from randomly selected hospitals will receive an online survey to be filled out as part of a CMS program evaluation process. For comparison purposes, the survey will collect information from hospitals that participated in the PfP and hospitals that did not participate in the PfP. The original email was sent on May 24 from pfp2_evaluation@econometricainc.com with the subject line "CMS Evaluation of the Partnership for Patients 2.0. Please complete this survey by June 14." The first reminder email to non-responders was sent on May 31.

TeamSTEPPS: There's an App for That!

Download AHRQ's new TeamSTEPPS® app now to put the structured communication tools and checklists from the TeamSTEPPS pocket guide at your fingertips on your smartphone or tablet. TeamSTEPPS is AHRQ's signature curriculum to improve patient safety by training health care teams to communicate and practice effective teamwork. The app is available at no cost through the [Apple iTunes Store](#) and [Google Play Store](#). The paper-based TeamSTEPPS *Pocket Guide* is also available by calling AHRQ's Publication Clearinghouse at 800-358-9295 and requesting publication number 14-0001-2.

ADEs

Campaign for Meds Management | Inspired by You – Impacting People Everywhere

Phase 2 of Campaign for Meds Management (CMM) has launched! This campaign aims to promote patient-centered medication management in the high-risk medication (HRM)* use population, advance patient-centered shared decision-making models, and emphasize the patient voice in healthcare.

**HRM = Opioids, diabetes medications, and anticoagulant medications*

Please join us in this campaign!

- Commit to participate in the Medication Safety Learning & Action Network (LAN) Events and engage in at least one of the following:
 - Share a tool or resource
 - Share a story or experience with the CMM team
 - Use/promote shared decision-making in your practice



[Learn more about the campaign here.](#)
[Commit to join the campaign here.](#)

HEALTHCARE-ASSOCIATED INFECTIONS

Antibiotic Stewardship Programs (ASP): The Secret of Getting Ahead is Getting Started

On June 1, the HRET HIIN hosted the virtual event *Antibiotic Stewardship Programs (ASP): The Secret of Getting Ahead is Getting Started*.

The ASP virtual event kicked off with a polling question to gauge the degree of ASP development in our participating hospitals. Of the nearly

CARE CONSULTATION



Care Consultation is an important program for professionals who are working with individuals with memory loss. The program is designed to provide disease education, support, and care planning for all aspects of memory loss. As a professional who receives care consultation, you will receive individualized assistance to support your clients, their family care partners and other members of your staff in effectively managing memory loss symptoms and issues.



This project is supported by funding through the North Dakota Department of Human Services, Aging Services Division.

alz.org 24/7 Helpline: 1.800.272.3900

300 participants, 52 percent are “just getting started,” 42 percent are “gaining momentum” and 6 percent have a program that is “firing on all cylinders.” If you are just getting started, or gaining momentum, you have lots of company. As Mark Twain said, “The secret of getting ahead is getting started.”

Panelists, **Kevin Dumas** (Bridgton Hospital in Maine), **Myllinda Dill** (Jefferson Regional Medical Center in Arkansas), and **Stephanie Justice** (St. Claire Regional in Kentucky) shared their approaches to ASP implementation; they represented diverse settings (critical access, 80 beds and 200 beds.) Each facility has an impressive ASP program that is rapidly gaining momentum and was developed in the absence of many of the resources (e.g., an infectious disease physician) that many consider required elements for success.

The [recording](#) is now available for your review and to share with your colleagues. Below is a summary of the event.

ASP is a team sport

ASP is highly impacted by culturing practices. If specimens are being collected for the wrong reasons (e.g., to capture “present on admission”) or because of inappropriate reasons (e.g., “test of cure”) we are not headed in the right direction. A great example of a decision tree for CDI from the University of Wisconsin is available [here](#).

Collect data but do not die doing it

Use a tool that is short and concise and that does not discourage the pharmacists (or others) from collecting data.

Collect data to document improvement

The ultimate measure of an effective ASP is the impact on your facility’s antibiogram. The most powerful way to demonstrate the impact of ASP is to show that sensitivity to specific antibiotics is improving.

Documentation of your interventions is key, but remember, an ASP is about appropriateness of antibiotics. It may not only be about narrowing the spectrum. Sometimes stewardship means expanding coverage for a patient!

Drive improvement by requiring “the why?”

Modify electronic ordering systems to require an ‘indication’ for specific antibiotics. How is the pharmacist or infection preventionist to help if they do not know what the physician is treating?

Shrink the change

Start where you can make the biggest impact. Consider reviewing patients with positive blood cultures. Expand to other isolates when capacity allows.

Find your champion

Your champion may be an emergency department physician or a family physician who has an active outpatient practice. Think creatively and overcome.

Words matter

Avoid the use of the term “restricted antibiotics.” Instead, use the term “protected antibiotics.” The latter term is patient-centric and more

RESOURCES

LISTSERV®

[Sign up](#) and help meet our goal of approximately 1,000 subscribers per LISTSERV® topic. These platforms enable peer-sharing and are used to promote virtual events and highlight innovative topic-specific strategies to reduce harm. New subscribers are added on the first day of each week.

On the Web

The HRET HIIN website is a one-stop-shop for all HRET HIIN information and events! Check it out at www.hret-hiin.org.

Social Media

Follow the HRET HIIN on Twitter [@HRETtweets](#)! Here they’ll be promoting virtual events, highlighting recruitment numbers, state partners and hospitals! Retweet, reply or like their posts and share your HIIN journey using #WhyImHIIN.

You can also join the HRET-HIIN on Facebook and LinkedIn. Follow

the instructions for joining by clicking on the correlating icon on the right-hand side of the page when you log onto the HRET HIIN website (www.hret-hiin.org)

INNOVATE-ND SUPPORT TEAM

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positive. It implies that we need to save these drugs for when we really run out of options. Powerful communication messages shape behavior and create positive results.

It is all about relationships and communication

Data alone does not influence or change behavior. It is the one-to-one conversations or powerful messages that connect prescribing practices to bad outcomes. If a patient develops healthcare associated CDI and it can be linked to an undesirable antibiotic selection, then either pick up the phone and have a conversation with the prescriber or send a note.

Build competence: knowledge is power

[Here](#) is a resource to build knowledge through MAD-ID program.

Align and segment

Do not be out there on a limb. If your priorities are not aligned with the organizations you will become Sisyphus, forever rolling that boulder uphill. Get attention with data and use your political capital wisely.

Start where you are and do what you can!

Guidance Document Enhances Updated CDC HICPAC Guidelines for the Prevention of SSIs

The recently released CDC HICPAC Guidelines for the Prevention of SSIs is the first update since publication of the 1999 SSI prevention guidelines. These new guidelines are based upon randomized controlled trials that were published prior to 2015, and as a result, many practices are listed as ‘unresolved’ or ‘no recommendation.’

Seeking to assist front line staff, The Wisconsin Division of Public Health (WDPH) convened content experts. These experts developed a [guidance document](#) to enhance, not replace, the CDC HICPAC SSI Prevention Guidelines.

The [WDPH document](#) provides enhanced guidance on the following and more:

- antimicrobial prophylaxis
- glycemic control
- normothermia
- oxygenation
- antiseptic prophylaxis

In addition, it includes recommendations for staphylococcal surveillance and a “surgical bundle.”

The CDC’s SSI [guidelines](#) are intended to provide new and updated evidence-based recommendations for the prevention of SSI and should be incorporated into comprehensive surgical quality improvement programs to improve patient safety. Preventing surgical site infections is more important than ever given the increasing number of surgeries performed each year.

READMISSIONS

Highlighted Hospital

Belinda Sanderson from Baptist Memorial Hospital (BMH) in Columbus, Mississippi, shared their story and resources on tackling pneumonia readmissions through standardizing processes on [Huddle for Care](#). Read about their journey to reduce pneumonia readmissions through Kata, a rapid cycle improvement process. Belinda also highlighted her success in the HRET HIIN Readmissions Webinar, "[Connecting the Patient Voice to Readmissions Reduction Approaches](#)."

Perspectives on the Acute Care Continuum | How to Get Providers Involved in Advance Care Planning

Surveys suggest that the majority of Americans would prefer not to receive life-prolonging care if they were suffering due to an incurable condition. Unfortunately, 75 percent of people hospitalized with a critical illness are unable to make their wishes known. In these cases, having an advance care plan (ACP) in place can help to ensure that patients receive end-of-life care that's consistent with their values and preferences. [Read more](#).

PFE

2017 Quality Forum Highlights Engagement

QHA's 2017 Quality Forum is all about engagement! Remember to mark August 10th on your calendar and watch your email for details and registration information.

VTE

VTE Change Package and Resources Released

The updated [VTE Change Package](#) is now available on the HRET HIIN website. Additionally, you can access the VTE [Top Ten Checklist](#) to quickly reference best practices.

MISCELLANEOUS

Hypertension and Stroke Resources

Check out the ND Department of Health's free patient resources for hypertension and stroke prevention. The resources include bookmarks, brochures, education sheets (8.5x11), magnets, posters, placemats and more. [Order here](#).

Sleep Hygiene/Falls, Part II Webinar Recording

The recording and handouts for the June 8th Great 8 webinar, Sleep Hygiene/Falls – Part II as well as the event handouts are can be found [here](#).

New HRET HIIN LISTSERV®

The HRET HIIN team is pleased to announce we have added two new LISTSERV®:

1. Children's Hospital LISTSERV®: A forum for sharing best practices and peer-to-peer discussion, specifically related to challenges and opportunities unique to children's hospitals and hospitals with pediatric units/clinics.
2. Level 1 Trauma Center LISTSERV®: A forum for sharing best practices and peer-to-peer discussion, specifically related to challenges and

opportunities unique to level 1 trauma centers. Hospitals must be Level 1 Trauma Center to subscribe.

To subscribe to these, or any of the HRET HIIN LISTSERV®, visit our website [here](#).

DATA

Updated HRET- HIIN Improvement Calculator Available

HRET is pleased to announce that Version 3.0 of the HIIN Improvement Calculator is now available!

<http://www.hret-hiin.org/resources/display/hiin-improvement-calculator>

The HIIN Improvement Calculator enables hospitals to use data collected via the Comprehensive Data System (CDS) to calculate, and track, a "total harm per discharge" rate in pursuit of safety across the board. This Excel-based tool provides a simple end-user experience and not only calculates harms per

discharge, but also calculates and displays harms prevented, lives saved, and costs saved. Users should take the time to review the "Instructions" tab included directly in the tool, or available separately: http://www.hret-hiin.org/Resources/data_collections_informatics/17/hiin_ic_instruction_manual.pdf

Recent enhancements include:

- Expanded Summary Table to include all measures and allows user to toggle data suppression and inclusion in total harms
- New Total Harms Per Discharge tab showing monthly total harms per discharge in both graphic and tabular formats
- Hospital selection on any page of Dashboard, Summary Table, Summary Table per Discharge carries through to all tables
- Updated "Methods" tab, and more!

Version 3.0 of the Improvement Calculator, an updated instruction guide, video tutorials, and other valuable data resources can also be found on the "Data" tab of the HRET HIIN website: <http://www.hret-hiin.org/data/data.shtml>