North Dakota Hospital Association
Innovate·ND
HRET Hospital Improvement Innovation Network

October 27, 2017

EDUCATIONAL EVENTS

HRET HIIN

Physician Inclusion | Portfolio Program (MOC IV) Informational Overview Virtual Event
10/31/17 | 1:00–2:00 p.m. CT

QI Fellowship Foundational Track Virtual Event
11/08/17 | 11:00 a.m.–12:00 p.m. CT

QI Fellowship Accelerating Improvement Track Virtual Event
11/08/17 | 12:30–1:30 p.m. CT

Information, registration links and recording links for **all** HRET HIIN upcoming and past virtual events can be found under the "Events" tab on www.hret-hiin.org.

PARTNER EDUCATIONAL EVENTS

Great Plains and Lake Superior QINs - Heart Failure Webinar Series | Engaging Heart Failure Patients in Managing Their Care
10/31/17 | 11:00 a.m.-12:00 p.m. CT
Click here to register.

Great Plains QIN Antibiotic Stewardship Office Hours
10/31/17 | 12:15–1:00 p.m. CT
Click here to register.

Advance Care Planning…An Act of Love
11/04/17 | 9:30-11:30 a.m. CT

IMPORTANT DATES TO REMEMBER
Remember to report your HIIN data in CDS every month!

Deadline	Reporting Period
10/31/17	Performance data for September 2017 discharges As of October 26 at noon, 18 of 31 hospitals are complete!

QUALITY MILESTONES RECOGNITION

COPPER Milestone:	COPPER, BRONZE & SILVER Milestone: McKenzie County Healthcare System Sanford Hillsboro Medical Center
COPPER & BRONZE Milestone: Ashley Medical Center Carrington Health Center Cavalier County Memorial Hospital CHI Mercy Health – Valley City CHI St. Alexius – Devils Lake CHI Community Memorial Hospital – Turtle Lake CHI Garrison Community Hospital Cooperstown Medical Center First Care Health Center – Park River Heart of America Medical Center Jacobson Memorial Hospital Kenmare Community Hospital Linton Hospital Mountrail County Medical Center Nelson County Health System Northwood Deaconess Health Center Pembina County Medical Center Presentation Medical Center Sakakawea 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 Wishek Community Hospital Unity Medical Center	**COPPER, BRONZE, SILVER & GOLD Milestone:**

National Coordinating Center Engaging Physicians & Care Teams to Prevent & Manage Diabetes
11/08/17 | 2:00-3:30 p.m. CT
Click here to register.

Great Plains QIN
Wound Care: Identifying and Correctly Identifying Wound Types
11/09/17 | 10:00-11:30 a.m. CT
Click here to register.

Great Plains QIN
Social Media: Reputation Management
11/09/17 | 12:00-1:00 p.m. CT
Click here to register.

Partnership for Patients (PfP)
How to Help Hospitals Engage Physicians and Frontline Staff in PFE
11/14/17 | 1:00-2:00 p.m. CT
Click here to register.

Great Plains QIN
Medication Safety Webinar Series Prescription Drug Monitoring Programs, Part I | EHR Integration and Workflow
11/14/17 | 12:15-12:45 p.m. CT
Click here to register.

Prescription Drug Monitoring Programs, Part II | Best Practices and Overcoming Barriers
11/28/17 | 12:15-12:45 p.m. CT
Click here to register.

Prescription Drug Monitoring Programs Coaching Call
12/12/17 | 12:15-12:45 p.m. CT
Click here to register.

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

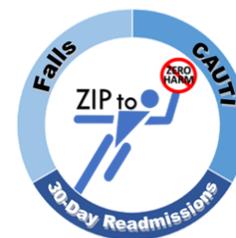## COPPER, BRONZE, SILVER, GOLD & PLATINUM Milestone:

CONGRATULATIONS to **Sanford-Hillsboro Medical Center** for making the **Silver Milestone**! Your commitment to high quality care is recognized!

Zero Harm Awards
Twenty-one Innovate-ND hospitals are on track to receive at least one Zero Harm Award, with five hospitals on track to achieve two!

Data submission to HRET-CDS by each hospital is tracked to identify those who are able to meet and maintain zero harm in the three categories for 12 consecutive months: Falls, CAUTI and 30-day Readmissions. Data submitted through September 2017 will provide the first set of 12 months of consecutive reporting.

Zero Harm Awards will be awarded on a quarterly basis: November (data through Sept); Feb (data through Dec); May (data through March); August (data through June).

An Oldie but a Goodie…CMS Discharge Planning Checklist
In the HRET HIIN Readmissions Change Package one of the drivers to help hospitals achieve reduction of unnecessary admissions is "ENGAGE PATIENTS AND THEIR CAREGIVERS TO IDENTIFY THE "LEARNER," UNDERSTAND CARE PREFERENCES, AND ASSESS READMISSION RISK FACTORS." The first change idea noted for this driver is the CMS Discharge Planning Checklist.

Consider using or adapting CMS's Discharge Planning Checklist to optimize patient and family involvement and communication throughout the hospitalization and proactively plan for an effective care transition. The checklist is designed to find out what matters to the patient, and to understand how the patient perceives their illness, recovery potential, challenges, and barriers that could interfere with an optimal care transition.

ADVERSE DRUG EVENTS

President Declares Opioid Epidemic a National Public Health Emergency
President Trump declared the opioid epidemic a national public health emergency under federal law, directing executive agencies to use every appropriate emergency authority to fight the opioid crisis. As part of the announcement, the president said his administration will be announcing a new policy "to overcome a restrictive 1970s-era rule that prevents states from providing care at certain treatment facilities with more than 16 beds for those suffering from drug addiction." Trump said he expects the President's Commission on Combating Drug Addiction and the Opioid Crisis to deliver its final report next week. "After we review and

website and follow the instructions on your screen.

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! Re-tweet, reply or like their posts and share your HIIN journey using #WhyImHIIN.

evaluate the commission's findings, I will quickly move to implement approximate and appropriate recommendations," he said. In its draft interim report in July, the commission urged the president to declare the opioid epidemic a national emergency, among other actions. AHA President and CEO Rick Pollack said, "We welcome today's announcement of a public health emergency and the Administration's efforts to enhance access to treatment. This declaration appropriately highlights the urgent need to act so that fewer of our fellow citizens are suffering. We urge the Administration and Congress to take needed steps, such as eliminating the barriers to treatment created by the Medicaid Institutions for Mental Disease exclusion, knocking down impediments to the appropriate sharing of patient substance use records, and ensuring that patients have comprehensive coverage that facilitates access to the services they need. We also urge full funding and implementation of legislation previously enacted to help end the epidemic. We stand ready to continue to work with the Administration, the Congress, and others in the health field in this important fight." ~AHA Today, 10/26/17

Alternatives to Opioids
Earlier this year HRET featured a web event titled "Adjuncts and Alternatives to Opioids for Pain." The event can be found here. Slides 23-28 directly address the value of comfort menus and provide examples.

Medications, Mindfulness and More Alternatives to Opioids for Treating Pain
This recent article from Michigan Health discusses interventions to reduce pain and discomfort…alternates to opioids. Read more.

Opioid On-line Courses Available from UND School of Medicine
Click here for information about an online educational series addressing opioid issues from the UND School of Medicine and Health Sciences. You will need to register in their CME portal to take any of the courses.

AHA Releases Opioid Toolkit
The American Hospital Association has released a new toolkit to provide guidance to hospitals and health systems on how they can work with their patients, clinicians and communities to stem the opioid epidemic. The primary goals of the toolkit include: reviewing the multifaceted role of hospitals and health systems in fighting the epidemic, reiterating the key activities that every hospital should be undertaking and offering sources of expertise, ideas and resources to assist hospitals in fulfilling their roles. The toolkit was created with input from subject matter experts, including psychiatrists specializing in addictions, CMOs, and other clinical experts, pain management professionals, and a number of specifically-identified stakeholders to ensure its relevance across the field.

The toolkit may also be accessed online here.

Click here to review Dr. Jay Bhatt's blog post outlining the issue.

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ANTIBIOTIC STEWARDSHIP

Sample Antibiotic Stewardship Policy/Procedure
A sample document for developing policy and procedure that can easily be adapted by any hospital is available. Click here to access the document.

DIVERSITY

Digital Story: Why I Do What I Do
Check out HRET's newest resource on social determinants of health! Watch the personal story of Latchman Hiralali, manager of Boston Medical Center's Preventive Food Pantry, on how and why he started helping patients with food insecurity. As he states in his story, "Managing the food pantry is my way of connecting with the community." Watch his full story.

Visit www.hret.org/sdoh, a one-stop shop for resources on social determinants of health such as guides, podcasts, digital stories, articles, webinars and much more.

Are you curious how your peers are advancing health equity? Do you want to know what health equity looks like in practice?
Block your calendars to participate on November 8 in a live health equity twitter chat. This event is sponsored by American Hospital Association, Institute For Diversity, Health Care Service Corporation, America's Health Insurance Plans, and Kaiser Permanente.

Click here for details.

FALLS

Stepping On—An Evidence-based Falls Prevention Program
Stepping On is an evidence-based falls prevention program for people 60 and older who live independently. Click here for a list of current workshops.

HEALTHCARE-ASSOCIATED INFECTIONS

What YOU Need to Know about Sepsis
MedStar Health, a member of the Vizient HIIN, has released a short, but powerful, video to educate patients and families about sepsis, including the symptoms and when and how to take early action. The video was developed by MedStar Health's Patient and Family Advisory Council for Quality and Safety (PFACQS) as part of a public awareness campaign in partnership with MedStar Institute of Innovation (SiTel). It features the experiences and advice of Armando Nahum, a father, patient advocate, and co-founder of the Safe Care Campaign, and Lt. Col. Steven Coffee, a father, patient advocate, and patient and family advisor at MedStar Health.To learn more about how MedStar Health partners with patients and families to prevent sepsis, view materials from the September PFE Learning Event, *How to Engage Patients and Families to Prevent Sepsis and Reduce Readmissions*, by clicking here.

PERSON AND FAMILY ENGAGEMENT

Person and Family Engagement Roadmap Updated
A revised version of the PfP Strategic Vision Roadmap for Person and Family Engagement (PFE) has been released. The following are some of the differences you'll note from the original roadmap (to view the original, click here):
- Includes examples from hospitals for each of the metrics.
- Incorporates the first addendum so that it is built into the roadmap
- Uses new clarified language for the PFE metrics
- Condenses the text so it is more readable and easier to digest
- Includes data and stories from HIINs and hospitals to better illustrate the case for PFE and how to meet the metrics.

PFE Fellowship Slated for 2018
The HRET HIIN is planning to offer another Patient and Family Engagement Fellowship in 2018. Registration is expected to open sometime in November.

While we wait for registration to open, think about who from your hospital should attend and consider how participation in this Fellowship will help
- Build internal capacity
- Guide your internal PFE efforts
- Help your hospital advance through the Innovate-ND Milestone Program

Click here to experience an example of HRET's PFE Fellowship, access the most recent webinar slides and a recording of the event.

Better Choices, Better Health Volunteer Facilitator Training
Share this resource with patients and families who are living well with a chronic condition or caring for someone with a chronic condition. The Better Choices, Better Health program in Bismarck/Mandan is offering a four-day volunteer facilitator training beginning November 1. *Better Choices, Better Health* is an evidence-based, chronic disease self-management program. The volunteer facilitator training leads to certification and is free to trainees. Certified volunteer facilitators will be expected to co-facilitate one six-week workshop per year, as is required to maintain current certification. Contact Linae Bieber, Sanford Center for Learning, at 701-323-2911 or mlinae.bieber@sanfordhealth.org for more information.

Evidence-Based Strategies for Chronic Disease Management
Optimize care with CDC's new Health Systems Scorecard. This quality improvement tool assesses evidence-based chronic disease care management policies and practices. Use the tool to establish relationships with primary care practices and better understand evidence-based strategies for managing chronic disease.

Learn how measurement leads to improved outcomes. Million Hearts® has worked with public and private partners to align evidence-based clinical quality measures across national reporting initiatives. This has helped reduce the reporting burden on clinicians and focus improvement efforts on outcomes that matter.

PRESSURE ULCERS

2017 World Wide Pressure Injury Prevention Day
Mark your calendars! Thursday, November 16, is World Wide Pressure Injury Prevention Day – a day specifically set aside to raise awareness for pressure injury prevention and to educate staff on this topic.

Building skills in identifying and staging pressure injuries is a high healthcare priority. New tools to help staff gain confidence in staging and documenting are available on the HRET HIIN website; the National Pressure Ulcer Advisory Panel (NPUAP) website also has several promotional materials to support your efforts.
- Full Color Pressure Injury Staging Poster
- Medical Device Related Pressure Injury Poster
- NDNQI Pressure Injuries and Staging Training Modules
    - o Pressure injury staging
    - o Other wound types
    - o Prevalence study guidelines / expectations
    - o Community vs. hospital acquired

Moving forward, consider…
- Developing and assessing staff competencies in pressure injury identification, staging and documentation
- Adding staging education to your annual competency fair
- Using self-directed on-line learning modules like the NDNQI
- Providing prevalence study training for your team

READMISSIONS

Readmission Interviews
Hospitals throughout the HRET HIIN participated in the CMS readmissions challenge of conducting five patient readmissions interviews by September 29, 2017, and sharing their interview results with readmission reduction leaders at HRET. From the interview results the following recommendations have been created.

Hospitals are encouraged to utilize the ASPIRE readmissions toolkit located here and specifically utilize Tool 2: Readmission Review Tool which provides a readmission interview script, sample questions and how to conduct a root cause analysis. If your organization already utilizes its own readmission interview tool, please continue to utilize your organization's tool instead of ASPIRE.

The framework for ASPIRE is provided below:

The HRET HIIN encourages hospitals to continue to interview readmitted patients to facilitate an improved understanding of why patients are returning and design targeted interventions to reduce readmissions.

2017 COPD Treatment Guidelines
Chronic Obstructive Pulmonary Disease (COPD) is one of the top diagnoses associated with avoidable readmissions. Follow this link to see the updated guidelines for COPD that highlight changes in diagnosis, strategies for de-escalation therapy, options for non-pharmacologic therapies, and an emphasis on the importance of comorbidities for the management of patients with COPD. (Medscape Nurses, 02/02/17)

Improving Care for High-Need, High-Cost Patients
As a new generation of payment and delivery system reform emerges, much focus has been on a subset of the population referred to as high-need, high-cost patients. Hospital and health systems are leading interventions to address the needs of these patients, who account for a disproportionate share of the nation's disease and health care spending. The American Hospital Association is committed to developing and identifying team-based approaches to engage these patients across the continuum of care and address underlying behavioral and social risk factors. This issue brief from the AHA provides resources and strategies to improve care for high-need, high-cost patients. Click here to access the resource.

Palliative Care Resources
Lack of palliative care services has been identified as a gap in many rural communities as critical access and rural hospitals are drilling down on their reasons for readmissions.

In a systemic review of palliative care in the rural setting, several barriers were identified in access to palliative care for eligible patients. Lack of palliative care specialists and local clinician knowledge deficits were identified as the key drivers. Knowledge gaps were related to non-cancer palliative care needs, and skill gaps exist in local clinicians' comfort level having end of life conversation with reluctant patients and families.

Best practices showing promise in increasing access and utilization of palliative care included: telehealth, community-academic partnerships, and training for rural health care professionals. Access the article here for the details.

How is your organization filling gaps in palliative care services in your community?
- What tools are you using to support clinicians in advanced care-planning?
- What community partnerships have you established?
- How are you addressing access to palliative care specialists? Are you video conferencing? Telemedicine?

If your organization is interested in establishing hospice and palliative care services in your community, the Center to Advance Palliative Care, the National Hospital and Palliative Care Organization and the National Rural Health Association produced a technical assistance tool kit: Providing Hospice and Palliative Care in Rural and Frontier Areas to guide your work with guidelines and innovative practices from rural communities.

MISCELLANEOUS

American Board of Medical Specialties Portfolio Program | MOC IV Credit

Are you looking for ways to participate in the American Board of Medical Specialties (ABMS) Portfolio Program and receive MOC part IV credit for your QI efforts? If so, attend this informational webinar on Tuesday, October 31, 1:00 p.m. CT.

HRET HIIN will provide an overview of the joint AHA HRET and ABMS portfolio program as well as discuss the process for physicians to participate. This event will be extremely helpful for those that want to be involved in a meaningful QI/PI effort that counts toward MOC IV Improvement in Medical Practice credit. Dr. David Price, Executive Director of the ABMS Multi-Specialty Portfolio Approval Program will give a summary of the program detailing the history, program standards, participation requirements and more! Please come prepared to engage and learn more about this exciting opportunity to earn MOC IV credit from the participating member boards. Take a look at the ABMS Portfolio Program brochure here. Register today!

How to Boost Inpatient Satisfaction in as Little as 3 Minutes

Used often in outpatient settings, a brief psychosocial intervention known as BATHE (an acronym for Background, Affect, Trouble, Handling, and Empathy) gives hospitalized patients a chance to share symptoms and other problems with their providers. Read more.