

# North Dakota Hospital Association Innovate-ND

## HRET Hospital Improvement Innovation Network

May 10, 2018

### EDUCATIONAL EVENTS

#### HRET HIIN

**Culture of Safety Virtual Event - Disaster Preparedness**  
6/01/18 | 11:00 a.m.-12:00 p.m. CT

**Measurement Matters: Ground-breaking CDI Practices from Flowers Hospital in Alabama**  
06/05/18 | 12:00-1:00 p.m. CT

**HRET HIIN Readmissions Sepsis Fishbowl Series: Part 3**  
6/12/18 | 11:00 a.m.–12:00 p.m. CT

**HRET HIIN Readmissions Sepsis Fishbowl Series: Part 4**  
7/17/18 | 11:00 a.m.–12:00 p.m. CT

**HRET HIIN Readmissions Sepsis Fishbowl Series: Part 5**  
8/07/18 | 11:00 a.m.–12:00 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](http://www.hret-hiin.org).

#### UP Series

Recordings and handouts from Innovate-ND’s recent UP series—Wake UP, Script UP, Get UP, and Soap UP – are available [here!](#)

#### Partner Educational Events

### IMPORTANT DATES TO REMEMBER

**Remember to report your HIIN data in CDS every month!**

| Deadline  | Reporting Period                           |
|-----------|--------------------------------------------|
| 5/31/2018 | Performance data for April 2018 discharges |

### QUALITY MILESTONES RECOGNITION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                   |
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| <b>COPPER Milestone:</b><br>Towner County Medical Center – Cando                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>COPPER, BRONZE &amp; SILVER Milestone:</b><br>CHI St. Alexius – Devils Lake<br>CHI Garrison Community Hospital<br>CHI Mercy Health – Valley City<br>Pembina County Medical Center – Cavalier<br>Sanford Hillsboro Medical Center                                                                                               |
| <b>COPPER &amp; BRONZE Milestone:</b><br>Ashley Medical Center<br>Carrington Health Center<br>CHI Community Memorial Hospital – Turtle Lake<br>Cooperstown Medical Center<br>Heart of America Medical Center – Rugby<br>Jacobson Memorial Hospital – Elgin<br>Kenmare Community Hospital<br>Linton Hospital<br>Mountrail County Medical Center – Stanley<br>Nelson County Health System – McVille<br>Southwest Healthcare Services – Bowman<br>St. Aloisius Medical Center – Harvey<br>St. Luke’s Hospital – Crosby<br>Tioga Medical Center<br>Unity Medical Center - Grafton | <b>COPPER, BRONZE, SILVER &amp; GOLD Milestone:</b><br>McKenzie County Healthcare System – Watford City<br>Northwood Deaconess Health Center<br>Presentation Medical Center – Rolla<br>Sakakawea Medical Center – Hazen<br>Sanford Mayville Medical Center<br>St. Andrew’s Health Center – Bottineau<br>Wishek Community Hospital |
| <b>COPPER, BRONZE, SILVER, GOLD &amp; PLATINUM Milestone:</b><br>Cavalier County Memorial Hospital – Langdon<br>First Care Health Center – Park River                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                   |

**Centers for Disease Control and Prevention**  
**CDC's Public Health Grand Rounds**  
**Be Antibiotics Aware: Smart Use, Best Care**  
05/15/18 | 12:00-1:00 p.m. CT  
Register [here](#).

**North Dakota Population Health Collaborative**  
**Medication Take Back Events 101**  
05/16/18 | 10:00-10:45 a.m. CT  
No registration is necessary.  
Click [here](#) for the webinar access.  
Conference line: 1-800-251-5450  
Conference ID: 100-7908#

**TMIT High Performer Webinars**  
**Drug Shortages: A Critical Patient Safety Issue**  
05/17/18 | 12:00-1:30 p.m. CT  
Register [here](#).

**Self-Reported Oral Health Data vs. Oral Screening Data: What's the Story?**  
05/17/18 | 2:00-3:00 p.m. CT  
Register [here](#).

**PFCC Partners | Core Competencies of Effective Partners Training for Patient Family Advisors**  
05/11/18 & 05/18/18 | 4:00-5:00 p.m. CT  
Register [here](#).

**National Coordinating Center Integrating Alcohol and Depression Screenings into Whole-Person Care**  
05/19/18 | 2:00-3:30 p.m. CT  
Register [here](#).

**Institute for Diversity and Health Equity**  
**May Diversity Dialogue – Positioning Your Diversity Strategy for Organizational Impact**  
05/22/18 | 12:00-1:00 p.m. CT  
Register [here](#).

**Great Plains QIN Medication Safety Webinars Series**  
**Naloxone and Its Role in Prevention of Opioid Overdose Death**  
05/24/18 | 12:15-1:00 p.m. CT



The HRET HIIN is the largest and most diverse network of HIIN hospitals consisting of over 1,600 hospitals across 34 states. Earlier this week we heard from the Centers for Medicare & Medicaid Services (CMS) that the HRET HIIN has yielded an estimated

- \$630 million in savings to health care
- 66,604 fewer harms
- 5,138 lives saved
- For every dollar spent by CMS on the HRET HIIN, \$10 was saved

All of this in the first 1 ½ years of the initiative! A huge thanks to our ND hospital HRET HIIN teams for your contribution to this success!



*Thank you for all you do!*

#### [Nurses Week: Building on Florence Nightingale's Example](#)

Florence Nightingale may be nursing's most famous caregiver, but don't overlook the way today's nurse leaders are influencing change in healthcare.

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## FEATURED RESOURCE

### **Radiation Safety Officer Resource Manual**

The American College of Radiology (ACR) in collaboration with the American Association of Physicists in Medicine (AAPM) created the **ACR – AAPM Radiation Safety Officer Resource Manual** that includes detailed documents and sample policies to guide the Radiation Safety Officer (RSO) in the following duties:

- Implementation and oversight of a Radiation Protection Program (RPP) to meet regulatory requirements
- Oversight of a Radiation Safety Committee
- Achieving as Low as Reasonably Achievable (ALARA) occupational exposure standards and implementing investigations when occupational dose limits have been exceeded.

Register [here](#).

**SAMHSA-HRSA Center for Integrated Health Solutions Addressing Substance Use in AIMS Awardee Settings Part 1: Addressing Opioids in Integrated Care**

05/30/18 | 1:00–2:00 p.m. CT  
Register [here](#).

**Powerful Tools for Caregivers (PTC) Program**

06/05/18-06/06/18 | Fargo, ND  
Click [here](#) for more information.

**APIC 2018 45th Annual Conference**

06/13/18-06/15/18 | Minneapolis, MN  
[Registration](#) is open!

**Great Plains QIN Improving Care Coordination by Working with Super-Utilizer Patients**

06/27/18 | 12:00–1:00 p.m. CT  
Register [here](#).

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**SAVE THE DATE**

**Quality Health Associates of North Dakota 2018 Quality Forum**

08/23/18 | Bismarck, ND

**Healthcare Worker Immunizations | Return on Investment**

08/30/18 | 12:00-1:00 p.m. CT

**NDHA Annual Convention and Tradeshow**

10/09/18-10/11/18

**ND Cardiac & Stroke Conference**

10/24/18-10/25/18

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**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](#)

This go-to guide has all the tools an RSO needs to ensure an organization's occupational radiation safety measures are in place. This manual can be accessed in the HRET HIIN Resource library [here](#).

**ANTIBIOTIC STEWARDSHIP**

**CDC's Public Health Grand Rounds**

**On Tuesday, May 15 from 12:00-1:00 p.m. CT, the CDC will host “Be Antibiotics Aware: Smart Use, Best Care” – The event is open to the public.**



A live webcast will be available on their [website](#). Open captions are provided. The link will be live five minutes before the presentation. View the sessions on the CDC's [On Demand](#) page at your convenience. Sessions are archived 3-4 days after each

presentation.

**Presenters**

Katherine Fleming-Dutra, MD, FAAP  
*Deputy Director*  
Office of Antibiotic Stewardship  
Division of Healthcare Quality Promotion  
Centers for Disease Control and Prevention  
“The Case for Antibiotic Stewardship”

Jeffrey Linder, MD, MPH, FACP  
*Chief*  
Division of General Internal Medicine and Geriatrics  
*Michael A. Gertz Professor of Medicine*  
Northwestern University Feinberg School of Medicine  
“Improving Antibiotic Prescribing for Adults”

David Hyun, MD  
*Senior Officer*  
Antibiotic Resistance Project  
The Pew Charitable Trusts  
“Antibiotic Stewardship Policies”

**Facilitators**

John Iskander, MD, MPH, Scientific Director, Public Health Grand Rounds  
Phoebe Thorpe, MD, MPH, Deputy Scientific Director, Public Health Grand Rounds  
Susan Laird, MSN, RN, Communications Director, Public Health Grand Rounds  
project consisting of CAH and acute care hospital pairs across eight states.

**HOSPITAL-ACQUIRED INFECTIONS**

**WHO World Hand Hygiene Day “It’s In Your Hands” Prevent Sepsis in Healthcare**

[Archive](#) website and follow the instructions on your screen.



World Hand Hygiene Day was May 5, and although the recognition day has come and gone you can still access the plethora of tools and resources recommended to promote the World Health Organization's (WHO) [SAVE LIVES: Clean Your Hands campaign](#) aims to progress the goal of maintaining a global profile on the importance of hand hygiene in health care and to 'bring people together' in support of hand hygiene improvement globally.

### 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

This year, WHO calls on health facilities to prevent health care-associated sepsis through hand hygiene and infection prevention and control (IPC). Sepsis is estimated to affect more than 30 million patients every year worldwide. At the Seventieth World Health Assembly in May 2017, Member States adopted a resolution on improving the prevention, diagnosis and treatment of sepsis. Health care-associated infections and infections acquired during health care delivery, are common a risk factor for developing sepsis. Effective hand hygiene plays a key role in prevention. Your focus should be on prevention of sepsis in health care EVERYDAY!

- All healthcare professionals can take part in the campaign:
- Health workers** - "Take 5 Moments to clean your hands to prevent sepsis in health care."
  - Health facility leaders** - "Prevent sepsis in health care, make hand hygiene a quality indicator in your hospital."
  - Ministries of health** - "Implement the 2017 WHA sepsis resolution. Make hand hygiene a national marker of health care quality."

**Patient advocacy groups** - "Ask for 5 Moments of clean hands to prevent sepsis in health care."

## RESOURCES

### LISTSERV®

[Sign up](#) and help meet our goal of approximately 1,000 subscribers per LISERSERV® 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](http://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

Make sure to download the infographic [How to prevent sepsis - the role you can play in health care and communities](#) as well as posters, and other promotional material. To learn more, click [here](#).

### **CDC | Protect Yourself and Your Family (New Sepsis Resources)**

Sepsis is a medical emergency. The CDC recently released several tools and resources to heighten public awareness and achieve early recognition and treatment of sepsis. Click [here](#) to check them out!

### **Lose the Tube Toolkit**

**Lose the Tube** is a toolkit designed to help hospitals reduce unnecessary urinary catheters. It is based upon two of **Canadian Society of Hospital Medicine's Choosing Wisely Recommendations**:

- # 1 Don't place or leave a urinary catheter without reassessment
- # 2 Don't place, or leave in place, urinary catheters without acceptable indication

The toolkit is divided into three modules that can be implemented together or individually:

- Early Removal of Unnecessary Urinary Catheters on Inpatient Units
- Restrictive Insertion of Urinary Catheters in Operating Rooms
- Restrictive Insertion of Urinary Catheters in Emergency Departments

The toolkit can be accessed in the HRET HIIN Resource library [here](#).

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](http://www.hret-hiin.org))

### **INNOVATE-ND SUPPORT TEAM**

Jean Roland  
[jroland@qualityhealthnd.org](mailto:jroland@qualityhealthnd.org)  
701/989-6227

Nikki Medalen  
[nmedalen@qualityhealthnd.org](mailto:nmedalen@qualityhealthnd.org)  
701/989-6236

Jon Gardner  
[jgardner@qualityhealthnd.org](mailto:jgardner@qualityhealthnd.org)  
701/989-6237

### **Highlights from the section targeting inpatient units:**

- Develop consensus based criteria for your specific population that is based upon Healthcare Infection Control Practices Advisory Committee ([HICPAC](#)) or the Center for Disease Control and Prevention ([CDC](#)) guidelines. Engage nurses and providers in determining population based, explicit criteria
- Select early removal interventions
  - Auto-stop date through consensus of physicians, i.e., 24-48 hours
  - Build the stop order into the admission order set
  - Make it explicit with the reasons for appropriate catheter use
- Develop provider reminder systems: daily huddles, alerts built into the EHR, central list of patients on the ward with catheters
- Use medical directives to support the nurse removing the catheter
  - Use consensus-based criteria, train nurses and monitor adherence
- Pay attention to post-catheter care
  - Develop an algorithm to assess for adequacy of bladder emptying
  - See sample algorithm in the [Lose the Tube](#) toolkit.
- Choose a measure
  - Outcome measure: CAUTI rate, average catheter duration
  - Process measure: portion of providers that used the intervention
  - Balancing measure: the number of catheter re-insertions
- Sustain early success
  - Indications for criteria use in the selected population should become institutional policy.
  - Create posters with utilization criteria to be displayed on inpatient units.
  - Provide annual education to maintain nursing competency.
  - Conduct spot audits and provide feedback.

### **"Unprotected People Reports" Provide Compelling Real-life Accounts of People Who Have Suffered or Died from Vaccine-Preventable Diseases**

IAC's [Unprotected People Reports](#) web section features 109 real-life accounts of people who have suffered or died from vaccine-preventable diseases: compelling personal testimonies, remembrances, case reports, and newspaper articles. The reports can be sorted by topic or number and are available in HTML and PDF formats. Feel free to reprint (with appropriate credit) or otherwise share these articles to highlight the seriousness of vaccine-preventable diseases and the life-saving potential of vaccines.

These reports remind us why vaccines are essential to protecting and preserving our public health. They serve as a counterbalance to anti-vaccine news stories.

Additional stories are available on IAC's website for the general public at [vaccineinformation.org/personal-testimonies](http://vaccineinformation.org/personal-testimonies).

## **PRESSURE ULCERS**

**Journal of Patient Safety | A Comprehensive Program to Reduce Rates of Hospital-Acquired Pressure Ulcers in a System of Community Hospitals (Abstract)**

Read this [article](#) to learn the impact of hospital-acquired pressure ulcer prevention on patient outcomes and cost of care.

**READMISSIONS**

**Communication in Care Transitions**

Care transitions efforts can fall short of expectations due to inadequate communication. In order to overcome this common barrier, the team at Frisbie Memorial Hospital in Rochester, NH worked with their community partners to develop a community consent [form](#). Once signed, the agencies listed have permission to discuss information across providers.

This tool serves as a great example of what communities can accomplish when they work together toward a shared goal.

**DATA**

**Data Driven Techniques to Enhance Physician Participation**

*HRET HIIN Listserv | May 2, 2018*

Did you miss last month's HRET HIIN Physician virtual event: **Data Driven Techniques to Enhance Physician Participation?** If so, the slides and the event recording can be found [here](#). Over 60% of the audience were quality leaders and nurse managers. Additionally, 40% of the organizations in the room share general quality data with the medical staff and almost 30% provide departmental feedback on quality performance.

Bruce Spurlock, Executive Director at Cynosure Health, opened the discussion by providing a background about how sharing data with your team can increase physician participation and drive change within quality and safety work.

Dr. Noah Ivers from the University of Toronto shared the latest research about practice feedback mechanisms that allow physicians to trust the data and get them engaged. Some common suggestions for designing practice feedback include recommending actions that can improve and are under the recipient's control, providing individual rather than general data, choosing comparisons that reinforce desired behavior change such as comparing top performers rather than average. Dr. Ivers emphasized delivering the feedback intervention in an effective way is crucial as well. Prevention of defensive reactions to the feedback and constructive feedback through group interactions both have shown results.

Chad Konchak from NorthShore University Health System focused on strategies to engage surgeons through analytical processes in order to measure practice variation and clinical standardization. It is important to show physicians cost savings opportunities through the data. Designating champions within the organization that clinicians will listen to will also drive change in quality improvement work.

**MISCELLANEOUS**

## **Delirium Resources**

HRET HIIN would like to thank Indiana State Hospital Association (IHA) for sharing their peer-to-peer strategy on prevention of iatrogenic delirium through the WAKE UP campaign on the HRET HIIN Weekly State Partner Call. IHA's delirium prevention strategy consisted of first creating a survey to assess hospital educational needs. The survey was created with the assistance of HRET HIIN's WAKE UP Campaign resources and iatrogenic delirium objectives and checklist. IHA utilized the survey results and the experience from their 11 patient safety coalition to create their own online WAKE UP resources page and educational content which they disseminated to their hospitals. HRET HIIN resources and IHA's WAKE UP Campaign and iatrogenic delirium resources can be found below:

- [IHA WAKE UP resources page](#)
- [IHA WAKE UP Webinar](#)
- [HRET HIIN WAKE UP Webinar](#)
- [HRET HIIN Iatrogenic Delirium Check List](#)
- [HRET HIIN Iatrogenic Delirium Change Package](#)

For more information on IHA's UP Campaign visit [Indiana Hospital Association's UP Campaign resource page](#).

## **Tales from the Field: Leadership Engagement in Safety**

Wentworth-Douglass Hospital in Dover, New Hampshire has been working to make culture of safety a high priority through data analysis and leadership engagement. Marilyn Ireland, Clinical Patient Safety Manager at Wentworth-Douglass Hospital shared their story:

"Typical of most healthcare organizations, our leaders are faced with multiple competing priorities. Our leaders have been involved in MGH integration plans, IT upgrades and numerous other major initiatives. The single biggest impediment to advancing the culture of safety in our facility boiled down to leaders keeping a steadfast focus in this area with everything else they were juggling. To start the process of prioritizing culture of safety, we analyzed our culture of safety and high reliability data. The data clearly identified a need for culture of safety strategies and leadership engagement. In 2016, our facility adopted a 'Zero Preventable Patient Harm' Strategic Long Range Plan goal. To maintain leadership focus on this area, we update and advance the goals & objectives annually.

For 2017, one of the 'Zero Preventable Patient Harm' goals was to measurably improve leadership engagement. Based on evidence in the literature, we elected to develop and implement Comprehensive Unit-based Safety Programs (CUSPs) as a major tactic by which to achieve the goal. We implemented CUSP (based on the Johns Hopkins model) on eight units. Our subsequent AHRQ Culture of Safety survey demonstrated that we were in the top quartile in overall patient safety with 95% of CUSP units showing leadership engagement scores in excess of the national benchmark, most with improved scores from the prior year. Additionally, we implemented weekly rotating leadership safety rounds in the non-CUSP departments. Through this process, staff and providers identified 155 patient and personal safety issues in 2017 of which 124 (80%) have been resolved. Along with these strategies, we also implemented "Safety 360" patient engagement boards in patients' rooms accompanied by a new process to conduct individualized safety plans for every patient to help reduce falls. In this process patients and their families partner with caregivers to establish the safety plan and goals."

To learn more about Wentworth-Douglass Hospital's culture of safety strategy contact New Hampshire's State Lead, [Anne Diefendorf](#) from the Foundation for Healthy Communities.

### **May is Mental Health Month**



Each year millions of Americans face the reality of living with a mental illness. During May, the [National Alliance on Mental Illness \(NAMI\)](#) will be raising awareness of the prevalence of mental health illnesses to fight stigma, provide support, educate the public, and advocate for policies that support people with mental illness and their families. In 2018, NAMI will promote the theme "CureStigma" throughout all Mental Health Month awareness events.

[Mental Health America](#) will be raising awareness and promoting Mental Health Month with the theme "Fitness #4Mind4Body". The organization will focus on what we as individuals can do to be fit for our own futures – no matter where we happen to be on our own personal journeys to health and wellness. Their toolkit has fact sheets and worksheets on how mental health is affected by diet, nutrition, sleep, etc. Download their toolkit, [here](#).