Quality News

MHA MISSOURI HOSPITAL ASSOCIATION

HEALTHIER POPULATIONS · better health care · VALUE

July/August 2017

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Upcoming Events

HIIN Regional Bootcamps
Thursday, Aug. 24
Oasis Hotel and Convention Center
Springfield, Mo.
Click here to register

Friday, Aug. 25
Hilton Garden Inn
Independence, Mo.
Click here to register

The Nurse Resilience Academy
Friday, Aug. 25
SSM Health St. Mary's Hospital
Jefferson City, Mo.
Click here to register

Excellence in Clinical Care Series — Patient Safety, Quality Improvement, Infection Prevention
Sept. 26-29
Camden on the Lake
Lake Ozark, Mo.
Click here to register

2017 Annual Emergency Preparedness & Safety Conference
Oct. 11-13
Lodge of Four Seasons

Spotlight

MHA's Statewide Patient and Family Advisory Council Launches
The Missouri Hospital Association has formed a statewide Patient and Family Advisory Council. A PFAC partners patients and families with members of the health care team to provide guidance on how to improve the patient and family experience. At the state level, the PFAC will serve to inform health care initiatives and policy, while applying the unique feedback and insight of the patient and family to improve care delivery. The consumer voice is critical in achieving the Triple Aim of better health and better care at lower costs.

MHA's PFAC is comprised of hospital staff members, patients, family members and community leaders from across the state, with representation reflective of the diverse health care communities served in Missouri. The council currently has 22 members. The council identified the need for additional representation on the council by physicians, patients and family members. Nominations of potential members in one or more of these categories is encouraged and can be sent to Mary Shackelford.

The council held its orientation meeting June 8-9. The goal of the meeting was to identify the mission and vision of the PFAC, as well as discuss initial action items to further support Missouri hospitals.

Initial objectives of the PFAC include the following.

- provide a consumer voice that is critical to achieving the Triple Aim of better health, better care and lower costs
- serve to inform broader health care initiatives and policy
- build a statewide culture of health integrating the patient and family perspective
- inform and advise MHA members on identified programming needs through a consumer lens
- inform, at a state level, common themes and issues that detract from the health care experience; provide insight and feedback for interventions
- assist in the understanding, and deployment, of health literacy and disparity reduction initiatives

Lake Ozark, Mo.
Click here to register

Virtual Events

FLEX MBQIP and Population Health Update
Tuesday, Aug. 8
10 a.m.
Click here to register

PSO Orientation
Vizient™ PSO members only
Tuesday, Aug. 8
1 p.m.
Click here to register

HIIN Huddle
Tuesday, Aug. 22
2 p.m.
Click here to register

What's Up Wednesday
Wednesday, Sept. 6
Noon
Click here to register

Save the Date

95th Annual Missouri Hospital Association Convention & Trade Show
Nov. 1-3
Tan-Tar-A Resort
Osage Beach, Mo.

For additional MHA events, click here

- serve as mentors and liaisons to members developing internal PFACs
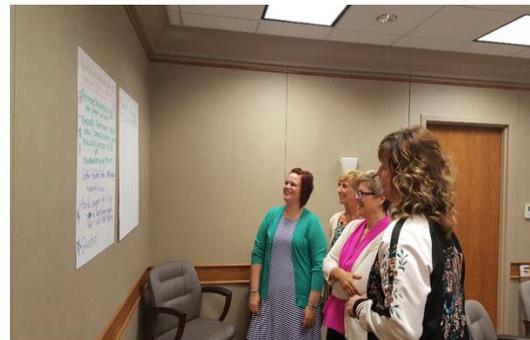- collaborate with MHA members to disseminate strategies and resources on PFE

During the meeting, council members reviewed current health care issues impacting Missouri, and gained a deeper understanding of patient and family engagement, and how other statewide PFACs operate. Members spent time learning and sharing ideas on how MHA's PFAC can be instrumental in supporting improved care and communication between patients, families and caregivers.

Questions or ideas for the PFAC can be sent to Alison Williams or Mary Shackelford.

Statewide PFAC members brainstorming on initiatives and direction of the council.

MHA Hospital Leadership and Quality Assessment Tool Survey Project *The 2017 Journey Ahead* MHA staff, along with dyads from Mercy Hospital St. Louis, Mercy Hospital Springfield and Missouri Delta Medical Center, attended this year's American Hospital Association/Health Research and Educational Trust, Institute for Diversity and Physician Leadership Forum meeting, July 25-26 in San Diego. The Missouri dyads joined 300 individuals across the nation to help co-create a new direction and engage in robust discussions about the future of health care. MHA is looking forward to the "journey ahead" for Missouri hospitals!

MHA Zero Heroes Club
MHA congratulates the following HIIN-participating hospitals with the most zero harm measures reported. These organizations have either achieved and/or sustained a zero rate of harm and are in the top 10 percent of HIIN participating hospitals in MHA's HIIN project. Congratulations to the "Zero Heroes" for the month of May!

- Carroll County Memorial Hospital
- Harrison County Community Hospital
- Osage Beach Center for Cognitive Disorders
- Iron County Medical Center
- Sullivan County Memorial Hospital
- Southeast Health Center of Ripley County
- Cooper County Memorial Hospital

Cass Regional Medical Center

Physician Engagement Opportunity
HRET has announced the American Board of Medical Specialties'
Maintenance of Certification Part IV, which supports physicians who are
directly engaged and active in HIIN-related quality improvement topics to
received credit toward their certifications. To receive the maintenance of
certification, a physician must demonstrate meaningful participation in the
project for each eligible HIIN topic chosen.

MHA's HIIN Regional Bootcamps
MHA's HIIN Regional Bootcamps, open to all MHA-member hospitals in
Missouri, have been designed to offer a more interactive and hands-on
learning environment, especially directed toward front-line staff. The
bootcamps will focus on health care-associated infections and evidence-
based prevention practices. Much of the learning will be focused on team
dynamics, so in an effort to assist attendees to implement the strategies
discussed, we encourage team attendance. HIIN-participating hospitals
that have a minimum of two front-line staff and one additional staff (e.g.,
physician, infection preventionist, manager) attending a bootcamp will
receive a $500 innovation stipend to use toward a project that promotes
HAI reduction. MHA will connect with those organizations in future
months to discuss how the innovation stipend was used to promote HAI
reduction. Those receiving the stipend also will be encouraged to submit
for Showcase during the 2018 HIIN Annual Meeting.

The HIIN team hosted its
first regional bootcamp
on July 18 in Cape
Girardeau with 36
attendees. Betsy Lee, an
improvement advisor
from Cynosure Health,
presented as the subject
matter expert
encouraging attendees
to prevent infections by
leading change with
high-functioning teams

and supporting a culture that focuses on preventing infections. Other
speakers included Gayla Tripp from Saint Francis Medical Center, Meagan
Gray and Rebecca Gordon from Mercy Hospital St. Louis, and Katie
Godsey from Perry County Memorial Hospital. Many evidence-based tools
and resources were shared. Attendees left with action items for
implementation within their organizations. Five hospitals met the team
requirements, earning $500 for their organization!

The HIIN team is looking forward to the next two regional bootcamps in
Springfield and Independence. Register to attend at one of the following
locations.

- Springfield
  - Thursday, Aug. 24
  - Oasis Hotel Convention Center
- Independence
  - Friday, Aug. 25
  - Hilton Garden Inn

Ambulance Strike Team Leader Training
MHA's emergency preparedness program recently held two Ambulance
Strike Team Leader Trainings. The June 12-13 training in Columbia had
16 attendees, and the June 27-28 training in Springfield had 20
attendees.

The overall class goals were to provide participants with information to assist in managing emergencies, hear about and learn from classmates' and instructors' experiences.

The overall course objectives provided the participants with the following.

- ability to identify and define strike team/task force configurations of various resources

- provide the skills and knowledge necessary to successfully manage an Ambulance Strike Team or medical task force at all-hazards incidents

- ability to identify and describe how to initiate and implement AST/Medical Task Force responsibilities in the preparation, mobilization and demobilization phases of an incident

- prepare for, identify and mitigate the hazards and risks associated with AST/MTF deployment

- recognize, plan for and describe how to implement appropriate tactics in various all-hazard incident situations with various resources organized into AST/MTF

The training was facilitated by JMG Logistics, LLC, through a subcontract with the Missouri Department of Health and Senior Services, using funds from the U.S. Department of Health and Human Services' Office of the Assistant Secretary for Preparedness and Response, Hospital Preparedness Program.

Columbia Ambulance Strike Team Leader Training

Regulatory Update on SB579-Infection Control and Antimicrobial Stewardship

The Missouri legislature passed Senate Bill 579, known as the "infection control bill," in May 2016. The governor signed the bill on July 14, 2016. All bills signed go into effect, unless otherwise noted, on Aug. 28 each year. The passage of SB 579 in 2016 is starting to make an impact on Missouri hospitals. Legislation can take up to two years to enact, unless there is an emergency rule requiring earlier implementation. The requirements involved with SB 579 include the following.

- On Oct. 3, 2016, an emergency rule was issued for hospitals (effective Sept. 8, 2016) to begin reporting carbapenem-resistant enterobacteriacceae. Since DHSS has not defined what strains of CRE to report, currently all strains are to be reported using the same mechanism as VRE and MRSA. DHSS plans to specify through rule making which strains to report and how to report in the near future.

- The Infection Control Advisory Panel, established through 2004 legislation, must make recommendations to DHSS on which hospitals, as a condition of licensure, will be required to report through NHSN for data collection; the use of NHSN for risk adjustment and analysis of hospital submitted data; and the use of CMS' Hospital Compare website for public reporting of the incidence of HAI. The panel made their recommendations to DHSS by Jan. 1. This includes specifying the reporting of four surgical site infections (current requirement is three).

Effective Aug. 28, each hospital and ambulatory surgical center, excluding mental health facilities, must establish an antimicrobial stewardship program. The program must be designed to evaluate that hospitalized patients receive the appropriate antimicrobial dosage at the appropriate time, and for the appropriate duration. This legislation requires the use of the CDC's Antimicrobial Use or Resistance module when regulations requiring Stage 3 of meaningful use are effective. DHSS continues conversations surrounding rule writing and survey requirements of ASP programs. No decisions have been made to date; however, in review of other state's rules, such as Georgia and California, tiered systems depending on the size and scope of the hospital may be an option.

- Beginning Jan. 1, 2018, and every year thereafter, DHSS will report ASP information to the General Assembly. Missouri is the first state to regulate the use of the AUR module for antibiotic use and resistance reporting.

- On Jan. 1, 2018, DHSS is required to adopt new regulations regarding the above no later than this date.

The biggest concern for hospitals stems from the technical needs required to submit AUR data to NHSN. MHA published a recent Inside Track to provide additional information, along with other resources related to SB 579. If you have questions or concerns related to this regulation, please contact Sarah Willson.

Announcements

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Qualaris Audit Tool Projects
MHA is partnering with Qualaris Healthcare Solutions to offer members access to four evidence-based practice audit tools: sepsis, hand hygiene, culture of safety rounding and readmissions/care transitions. The tools create an opportunity to complete observational-based audits with real-time data compilation and reports. Real-time data can drive real-time results. Access to the tools menu is open to all MHA members through September 2018.

The University of Missouri Sinclair School of Nursing 3rd Annual Conference Perinatal Nursing

Resources

Trajectories July 2017 — "Opioid Use Disorder: Assessing and Treating a Chronic Illness"

Opioid Toolkit — MHA's interactive opioid toolkit provides access to current national and Missouri research, and practice and policy guidance to address the opioid epidemic.

2017 Aim For Excellence Annual Report — This year's Aim for Excellence report summarizes the progress and trends of specific quality measures related to infections, patient safety and readmissions.

July 2017 What's Up Wednesday slides — Healthcare-Associated Infections

Population Health Program and Strategy (10-minute podcast)

Readmission Reductions Whiteboard Video Series — the video series was designed to focus and align with the material in the HRET HIIN Preventable Readmissions change package and top-10 checklist. The series goal is to facilitate an improved understanding of best practices to test and implement, which support efforts in reducing all-cause 30-day readmissions. Included in the series are 11 videos designed with strategies focused on the development and sustainability of readmissions reduction plans and programs.

Trustee Guide Module — AHA/HRET designed a video guide to illustrate the important role that leaders and trustees can play in the journey to improve patient care. It serves as a tool for all trustees to use as they work towards the goal of eliminating all patient harm within their organizations. To accompany the videos, a workbook has been designed as a tracking tool to prepare for each module.

Podcasts

- Sepsis Snippets for Success — Discusses regulatory requirements, quality improvement and science information. This podcast can support hospital teams with understanding and use of the sepsis predefinition.
- ADE Prevention Hypoglycemia — Provides an overview of hypoglycemia and adverse drug prevention.

Change Packages

- Adverse Drug Events
- Airway Safety
- Catheter-Associated Urinary Tract Infection
- C. difficile Infection
- Central Line-Associated Bloodstream Infection
- Culture of Safety
- Delirium
- Exposure to Radiation
- Falls
- Multi-Drug Resistant Organisms
- Pressure Ulcers
- Readmissions
- Sepsis
- Surgical Site Infection
- Ventilator-Associated Event
- VTE Change Package

Community Health Needs Assessment Resources — From assessment to implementation, MHA staff can work in partnership with your staff to complete all, or parts of, a CHNA that complies with Internal Revenue Service requirements.

Quality Reporting News

TJC Updates Performance Measure Report

CMS Announces Delay In Hospital Compare Update For Certain Measures

CMS Reminds IPFs Of Program Requirements

CMS Issues Technical Guidance Regarding CY 2017 eCQM Submissions

CMS Releases 1Q2017 Quality Reporting Checklists

CMS Updates IPFQR Program Resources

CMS Updates Known Issues Documents

CMS Releases 2017 VTE Reporting Requirements

CMS Provides IPFQR Program Updates

CMS Issues Guidance Regarding IPFQR PY 2018 Reporting

CMS Releases Hospital Quality Reporting Center Summer 2017 Newsletter

CMS Issues Additional Guidance Regarding IPFQR PY 2018 Reporting

CMS Releases IQR Specifications Manual

CMS Releases OQR Specifications Manual

CMS Updates IQR Known Issues Documents

CMS Releases OQR Times Newsletter

CMS Releases October 2017 Hospital Compare Preview Reports

CMS Publishes 2018 QRDA Category I HQR Implementation Guide

CMS Announces Dry Run Of Chemotherapy Measure

Missouri Hospital Association
P.O. Box 60 • Jefferson City, MO 65102
Phone: 573/893-3700 • Fax: 573/893-2809 • MHAnet
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