MHA: Strategic Quality
What’s Up Wednesday|Lunch and Learn

Your clinical quality, process improvement resource

Alison Williams, Vice President of Clinical Quality Improvement
August 2, 2017
August 2017

- Development of Statewide PFAC
  - Council Actions
  - Other Statewide PFACs — Case Studies
  - Current Statewide Issues and Initiatives
  - MHA Statewide PFAC — Getting Started
- Strategic Quality Initiatives Updates
- Resources and Upcoming Events
Development of Statewide PFAC
Patient and Family Engagement Definition — MHA’s Choice

Patient and Family Engagement is defined as “patients, families, their representatives and health professionals working in active partnership at various levels across the health care system — direct care, organizational design and governance and policy making — to improve health and health care.” (Carman et al, 2013)
MHA’s Work to Date on PFE

- **Quality Resource Briefs**
  - **Teach-Back: Closing the Loop With Patients and Families**
  - **Bedside Whiteboard Communication: Power in Simplicity**
  - **Caring Around the Clock: Hourly Patient Rounding**
  - **Patient and Family Care Transitions Upon Discharge**
  - **Medication Safety**
  - **Patients and Families: Health Care’s Untapped Resource**
  - **Developing a Patient Family Advisory Council**
  - **PFA Policy Design Strategies**
  - **Family-Centered Rounds: Making Patients and Families the Center of Medical Rounding**
MHA’s Work to Date on PFE

- Four-part webinar series in collaboration with Children’s Mercy Patient and Family Advocates
- Access to PFE resources through the Hospital Improvement Innovation Network
  - PFE fellowship
  - Quarterly survey to participating hospitals on PFE
Prior to admission, do hospital staff discuss a planning checklist that is similar to CMS's Discharge Planning Checklist with every patient that has a scheduled admission, allowing for questions and comments from the patient or family?

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No, not in any area or with any patients</td>
<td>29.8%</td>
<td>14</td>
</tr>
<tr>
<td>Talking about it</td>
<td>12.8%</td>
<td>6</td>
</tr>
<tr>
<td>Started planning</td>
<td>4.3%</td>
<td>2</td>
</tr>
<tr>
<td>Implemented in one unit with some pre-admission patients</td>
<td>12.8%</td>
<td>6</td>
</tr>
<tr>
<td>Implemented in more than one unit with all pre-admission patients</td>
<td>10.6%</td>
<td>5</td>
</tr>
<tr>
<td>In all units with all patients</td>
<td>14.9%</td>
<td>7</td>
</tr>
<tr>
<td>We do not do scheduled admissions</td>
<td>14.9%</td>
<td>7</td>
</tr>
</tbody>
</table>

answered question 47
skipped question 7

Source: HIIN
Does your hospital conduct shift-change huddles and bedside reporting with patients and family members?

**Answer Options**

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No, not in any area or with any patients</td>
<td>8.5%</td>
<td>4</td>
</tr>
<tr>
<td>Talking about it</td>
<td>8.5%</td>
<td>4</td>
</tr>
<tr>
<td>Started planning</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>Implemented in one unit with some patients</td>
<td>14.9%</td>
<td>7</td>
</tr>
<tr>
<td>Implemented in more than one unit with all patients</td>
<td>23.4%</td>
<td>11</td>
</tr>
<tr>
<td>In all units with all patients</td>
<td>44.7%</td>
<td>21</td>
</tr>
</tbody>
</table>

answered question: 47  
skipped question: 7  

Source: HIIN
Does your hospital have a person or functional area, who may also operate within other roles in the hospital, that is dedicated and proactively responsible for patient and family engagement and systematically evaluates PFE activities?

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No, not at all</td>
<td>31.9%</td>
<td>15</td>
</tr>
<tr>
<td>Talking about it</td>
<td>23.4%</td>
<td>11</td>
</tr>
<tr>
<td>Starting to plan structure</td>
<td>2.1%</td>
<td>1</td>
</tr>
<tr>
<td>Responsible for PFAC</td>
<td>21.3%</td>
<td>10</td>
</tr>
<tr>
<td>Responsible for other PFE initiatives</td>
<td>4.3%</td>
<td>2</td>
</tr>
<tr>
<td>Responsible for all PFE activity within the hospital or health care system</td>
<td>17.0%</td>
<td>8</td>
</tr>
</tbody>
</table>

answered question 47
skipped question 7

Source: HIIN
Does your hospital have an active PFE committee OR at least one former patient who serves on a patient safety or quality improvement committee or team?

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>36.2%</td>
<td>17</td>
</tr>
<tr>
<td>Talking about it</td>
<td>19.1%</td>
<td>9</td>
</tr>
<tr>
<td>Starting to plan structure</td>
<td>6.4%</td>
<td>3</td>
</tr>
<tr>
<td>Regular meetings, 50% or more members are patient/family advisors (PFA)</td>
<td>10.6%</td>
<td>5</td>
</tr>
<tr>
<td>PFA working on one hospital committee</td>
<td>21.3%</td>
<td>10</td>
</tr>
<tr>
<td>PFAs working on more than one hospital committee and are regularly consulted for short term projects</td>
<td>6.4%</td>
<td>3</td>
</tr>
</tbody>
</table>

answered question 47
skipped question 7

Source: HIIN
Does your hospital have one or more patients who serve on a governing or leadership board as patient representatives?

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>48.9%</td>
<td>23</td>
</tr>
<tr>
<td>Talking about it</td>
<td>14.9%</td>
<td>7</td>
</tr>
<tr>
<td>Planning</td>
<td>4.3%</td>
<td>2</td>
</tr>
<tr>
<td>Designated an existing board member to be the patient representative</td>
<td>17.0%</td>
<td>8</td>
</tr>
<tr>
<td>Chose a patient to be a board member</td>
<td>8.5%</td>
<td>4</td>
</tr>
<tr>
<td>Have a plan in place to sustain the patient seat on the board</td>
<td>6.4%</td>
<td>3</td>
</tr>
</tbody>
</table>

answered question 47
skipped question 7

Source: HIIN
Patient and Family Engagement — The Impact

- Reduces harm and adverse events
- Contributes to better clinical outcomes
- Reduces cost of care
- Increases activation to recommended treatment, leading to fewer complications and re-hospitalizations
- Improves the patient experience across the care continuum
Patient and Family Engagement — The Impact

- Addresses health-related issues within communities
- Informs health care providers how best to meet patient and family needs
- Improves physician and staff satisfaction
- Decisions are made that impact patient experience and outcomes
Updated Timeline — 2017

August 2016

- Received approval from Strategic Quality Advisory Committee to launch a statewide PFAC

March 13

- Recruitment memos were sent to identified individuals, hospitals and health systems

March 23

- Update SQAC and identify high-level work plan and subset of topics to consider for the initial 18 months of the council
May 1
- Finalize council members

June 8-9
- Initial council orientation held at MHA office

July 1
- Meeting follow-up communication

August 2017
- Webinar/ conference call

December 2017
- In-person meeting at MHA office
Council Actions
Background — PFE Components

- Engagement in Hospital Decision-Making
- Engagement in Individual Care
- Engagement after Harm Events
- Engagement in Policy and Advocacy
Statewide PFAC Key Outcomes

- Comprised of hospital staff, patients, family members and often community leaders from across the state
- Serve to inform broader health care initiatives and policy
- Build a statewide culture of health integrated with the patient and family perspective
- Provide a consumer voice that is critical to achieving the Triple Aim of better health, better care and lower costs
Statewide PFAC Key Outcomes

- 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 understanding and deployment of health literacy and disparity reduction initiatives
- Serve as mentors and liaisons to members developing internal PFACs
- Collaborate with MHA members to disseminate PFE strategies and resources
Group Activity

- What is the “temperature” in your organization for robust PFE/PFAC engagement?

HOT        WARM        COLD
Other Statewide PFACs — Case Studies
North Carolina

• The mission of the North Carolina Quality Center PFAC is to partner through the NCQC as a bridge for North Carolina health care systems, patients, families and communities in understanding PFE and its impact on patient care.

• The vision of the NCQC PFAC is to merge voices of patients and families into health care delivery systems to provide the best possible patient-centered care, becoming a nationally recognized model in that process.
Wisconsin

- The Wisconsin Hospital Association PFAC assists in development of PFE resources and knowledge
- Panel participants at multiple conferences
- Provide the “voice of the patient” to WHA initiatives
- Participate in WHA webinars
Wisconsin PFAC Topics

- Developing a PFAC within hospital/health system
- Sepsis — “Think Katie First”
- Hand hygiene
- Hourly rounding
- Multidisciplinary rounds
- Price transparency
Michigan

- Incorporate PFE concepts into all activities of the Michigan Health & Hospital Association Keystone Center
- Include the patient and family voice in all improvement efforts to ensure a patient-centric approach
- Help advance patient- and family-centered care by supporting the implementation of PFE best practices in Michigan hospitals
Michigan Hospitals Close to Reaching PFAC Goal

Posted on May 09, 2017

As a foundational concept, the MHA Keystone Center is committed to partnering with hospitals to help advance person- and family-centered care. Recognizing the importance of partnerships with patients and families, the MHA Board of Trustees identified a goal that all Michigan hospitals have a functioning patient & family advisory council (PFAC) and/or have patient/family advisors on existing quality and safety improvement teams by the end of the 2016-2017 MHA program year. With less than two months remaining in the program year, 80 Michigan hospitals (slightly more than 75 percent) have reached this goal. These hospitals are recognized on the public MHA Keystone Center website to share their dedication and commitment to this effort.
Michigan

- In October 2013, the PFE Task Force released the PFE White Paper which included a summary of local best practices, priorities and recommendations for next steps.
  - Create networking opportunities
  - Develop educational material and resources
  - Create mentoring and leadership engagement opportunities
  - Extend the PFE Task Force to ensure consumer representation and involvement on all levels
Current Statewide Issues and Initiatives
Issues and Initiatives in Missouri

- Opioids — prevention and treatment as a chronic disease
- Antibiotic stewardship
- Reducing disparities/health equity
- Increasing transparency of quality health outcomes
- Sepsis — recognition and early treatment
- Reducing preventable readmissions
- Bundled care payments
Initial Topics for Consideration — MHA Staff Thoughts

- How to engage consumers in the transparency work — resources, plain language, tools, etc.
- Clinical and population health topics — opioids education, antibiotic stewardship
- Promoting PFE
  - Resources, tools, guidance documents
  - Moving from being engaged to being activated to improve/manage health
- Policy/advocacy issues — advise, speaker opportunities, etc.
Initial Topics for Consideration – Quality Improvement Workgroup Feedback

- Patient advocate role from admit to discharge
- Patient education materials
- Process improvements — d/c process, medications, transitions of care
- Care environment issues — way finding, first impressions, etc.
- Forms/letters — make them patient friendly
- Reviewing patient complaints/concerns
- Tools for PFAC development in hospitals
- Insights on improving HCAHPS scores
MHA Statewide PFAC — Getting Started
Orientation Meeting

- Held June 8-9 with 21 inaugural members
- Achievements
  - Council Charter was development
  - Mission/Vision was development
  - A lot of brainstorming was completed!!
    - How does this group envision a statewide PFAC?
    - What would we do?
    - What is important?
    - “Reinventing the Rules” exercise
Brainstorming
Mission/ Vision

• Hear and act upon the voice of the patient by understanding, infusing and integrating patient and family engagement across the care continuum in Missouri by providing resources for successful implementation and sustainability.

(Statement currently under refinement)

• Who the Statewide PFAC is
• What the Statewide PFAC stands for/espouses
• What the Statewide PFAC wants to accomplish
Statewide PFAC Vision Wordle
Data and Evaluation

- Initially use quality metric data for Missouri and HIIN-participating hospitals
- Help develop up to four additional questions to include on the quarterly survey to HIIN-participating hospitals that the council believes represent robust PFE engagement
- Correlate high versus low PFE performers across clinical quality metrics
  - PFAC will have to determine what constitutes high versus low performance
  - Send results (non-identified) to the PFAC for review and feedback
Who Is Missing?

- Physician
- Front-line staff
- Risk manager
- Hospital finance
- MHA executive staff/board member
- More patients and families
- Increase diversity — e.g., Hispanic, LGBTQ, etc.
- Specific names may be sent to Mary Shackelford
PFAC Next Steps

- Virtual meeting Thursday, Aug. 3 — finalize mission, vision, initial actions
- Development and refinement of PFAC member guidebook
- Data review and selection of additional metrics
- In-person meeting in December
2017 Key Strategies and Initiatives Update
MHA Project Timelines

HIIN PROGRAM
- ASP Immersion Project
- MHA SafeCulture Accelerator Project
- HLQAT Leadership Culture Survey
- Readmissions Immersion Project
- Sepsis Immersion Project
- LEAN/Six Sigma Immersion Project
- STRIVE
- FLEX

TO BE DETERMINED
HIIN Update

• HIIN monthly monitoring data due date
  ➢ October 16–July 17 data is due Wednesday, August 23

• Looking forward to Milestone 5
  ➢ October 16–May 17 data hard deadline
  ➢ Readmissions data included October 2016-April 2017
  ➢ Year 1 goals for readmissions and seven other topics
  ➢ Readmissions Year 1 goal is a 4 percent reduction from baseline
The AHA IT department investigated the emails and discovered they were generated by groups from Germany and Switzerland. They recommend that your IT department block emails from these two countries, unless you do business with them.

---Original Message---
From: HEN Finance [mailto:jsrgoff@aol.com]
Sent: Tuesday, July 25, 2017 1:54 PM
To: HEN Finance <HENfinance@aha.org>
Subject: Invoice number: 302795

Greetings,

Pay your invoice here: http://katemadison.com/PTXI411100/

If you have any questions related to this attachment, we will be more than happy to assist you.

Thank you,
HEN Finance
HIIN Regional Bootcamps

• Attend an upcoming FREE regional bootcamp in your area
• Open to all MHA member hospitals
• Healthcare-Associated Infections/Hand Hygiene/Antibiotic Stewardship Program
• Operational-Focused
• $500 innovation stipend to use toward HAI reduction project
  ➢ Minimum of three attendees
  ➢ Two front-line staff
HIIN Regional Bootcamps

Missouri HIIN Regional Boot camps are designed to offer a more interactive and hands-on learning environment. The boot camps will highlight hospital or health care-acquired infections and different evidence-based practices and techniques for prevention.

8:30 a.m.
Registration

9 a.m.
Welcome and HIIN Project Update
Jessica Stultz

9:15 a.m.
Ice Breaker Activity

10 a.m.
Hand Hygiene Case Study

10:30 a.m.
HAI: Proven Tools and Methods to Achieve and Sustain
Reducations in Patient Harm - Part I
Betsy Lee and Barb Debaun, Cynosure Health

11:30 a.m.
Lunch

1 p.m.
HAI: Proven Tools and Methods to Achieve and Sustain
Reductions in Patient Harm - Part 2
Betsy Lee and Barb Debaun, Cynosure Health

2 p.m.
Antibiotic Stewardship Program Immersion Project Case Study

2:30 p.m.
HAI — Action items and synthesis for sustainability
Betsy Lee and Barb Debaun, Cynosure Health

3 p.m.
Wrap-Up
Amanda Keilholz, Jessica Stultz and Toi Wilde

3:30 p.m.
Adjournment
HIIN Regional Bootcamp Registration

- **Springfield**
  - Thursday, Aug. 24
  - Oasis Hotel Convention Center
  - Register [here](#)
  - Agenda [here](#)

- **Independence**
  - Friday, Aug. 25
  - Hilton Garden Inn
  - Register [here](#)
  - Agenda [here](#)
HIIN Physician/Administrator Engagement Opportunities

- American Board of Medical Specialties Maintenance of Certification Part IV
  - Final touches are being put on the ABMS MOC Part IV communication that will go out soon. We are excited to be able to offer this opportunity to many physicians that work on QI projects on HIIN!
HLQAT

- Hospital Leadership And Quality Assessment Tool
- Measures board members, C-Suite executives and management/supervisors for how well they are implementing evidence-based practices shown to support a culture of safety and high performance in clinical quality measures
- No front-line staff survey component
- Survey content
- FAQ
HLQAT Survey

- MHA is providing this complimentary opportunity for all HIIN-participating hospitals to access and utilize this survey.
- Two phase options
  - Phase I — June – December 2017
  - Phase II — April – August 2018
  - One or both (comparison option)
Immersion Projects

- Antibiotic Stewardship Program — currently in month ten of the project
- Readmissions Reduction/Care Transitions — Project timeline Aug. 15, 2017 – Sept. 7, 2018
- Sepsis
  - Registration — Oct. 2 – Oct. 31
  - Project timeline Nov. 29, 2017 – Sept. 2018
- LEAN Six — more information coming early fall 2017
Readmissions Reduction/ Care Transitions Immersion Project – Cohort 2

- Project timeline — Aug. 15, 2017–Sept. 7, 2018
- Project kick-off webinar — Tuesday, Aug. 15
- Hospitals committed — 12

Cooper County Memorial Hospital
Golden Valley Memorial Healthcare
Hannibal Regional Hospital
Mercy Hospital Washington
Poplar Bluff Regional Medical Center
Samaritan Hospital
Southeast Hospital
Scotland County Hospital
Mercy Hospital St. Louis
Citizens Memorial Hospital
CoxHealth
Perry County Memorial Hospital
Sepsis Immersion Project - Cohort 2

- Registration — Oct. 2–Oct. 31
- Project timeline — Nov. 29, 2017–Sept. 7, 2018
- Limited to 20 Missouri hospital participants
- HIIN-participating hospitals receive complimentary fee coverage
- Non-HIIN hospitals will be charged the project fee based on MSC fee schedule
Qualaris Audit Tool Projects

- Hand Hygiene
- Culture of Safety Rounding
- Sepsis
- Readmissions/Care Transitions

MHA Overview / Audit Tool Demo
Resources
MHA has made available a new resource for hospitals that provides guidance necessary to implement their CHNAs. Additional resources also are available.
Community Health Needs Assessment and Implementation Plan

We Can Help!

From assessment to implementation, Missouri Hospital Association staff can work in partnership with your staff to complete all, or parts of, a community health needs assessment that complies with Internal Revenue Service requirements.

Basic services include:
- guidance
- consultation
- toolkits
- determination of baseline status

Resources are available on MHA’s website at www.mhanet.com/chna.aspx.

COMING SOON!
- new guide on community health implementation strategy
- ZIP-code level data for assessment and intervention

For hospitals needing additional services, such as primary and secondary data collection and analysis, facilitation of community input, survey design, writing the assessment and development of an implementation plan, customized services are available through Quality Works, a subsidiary of MHA. CHNA support services are affordable, flexible and adapted to your needs. Prices range from hourly rates to package pricing.

For More Information
Peter Rux, MHA, CMPE
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573/863-3700, ext. 1407
prux@mhanet.com

Stephen Njenga, MPH, MHA, CPHQ
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snjenga@mhanet.com

MHA Network

Sherry Buschjost
573/863-3700, ext. 1360
sbuschjost@mhanet.com
Governor’s Regulatory Reform Initiative

You can submit items that are a regulatory burden, let your voices be heard.

- Executive Order
- NX MO Red Tape
- MHA Regulatory
Monthly Newsletter

Quality News

June 2017

Join the Conversation
Find us on LinkedIn.

Upcoming Events
Missouri Preceptor Academy
Tuesday, July 11
BJC Learning Institute
St. Louis, Mo.
Click here to register

Tuesday, July 18
Hilton Garden Inn
Independence
Click here to register

In This Issue
MHA Initiatives and Programming Update
Announcements
Resources
Quality Reporting News
Quality and Population Health News

Spotlight
Readmissions Reduction/Care Transitions Immersion Project – Cohort 2
The Missouri Hospital Association is pleased to announce the opportunity for Missouri hospitals to join the Quality Works’ Readmissions Reduction/Care Transitions Immersion Project – Cohort 2 launching Tuesday, Aug. 15. Immersion projects are topic-focused, time-limited and provide structure to implement evidence-based practices and achieve improved outcomes. Each project engages the Triple Aim framework of better health, better care and lower costs, to improve population health. This project focuses on decreasing readmissions and improving care transitions for hospital-based patients and uses a recommended four-

Click here for past issues
MHA Trajectories

“Opioid Use Disorder: Assessing and Treating a Chronic Illness”

In the July issue we feature a short video of Dr. Sam Page, anesthesiologist, discussing the benefits of a PDMP in a practice setting. This video is a joint effort among many Missouri health care provider associations and will be the first in an ongoing series of physician-to-physician videos about various opioid reduction strategies.
The Opioid Crisis | Interactive Toolkit

Understanding the Issue

- Background
- Research

Strategies to Reduce Opioid Misuse

- Prevention
  - Missouri Prevention Resources
  - Prescribing Guidelines: Emergency Department
  - Managing Pain

- Assessment & Treatment
  - Assessment
  - Treatment

- Patient Education
  - Addiction
  - Pain Management
  - Understanding Use and Disposal of Narcotics

- Policy Changes
  - Prescription Drug Monitoring Database
  - Payers
  - Access to Treatment

© 2017 Missouri Hospital Association
Additional Opioid Resources

• Opioid Patient Education Flyer #1: Disposal (View Spanish Version)
• Opioid Patient Education Flyer #2: Prescribing (View Spanish Version)
• Opioid Patient Education Flyer #3: Pain Management (View Spanish Version)
NHSN Resources

- **NHSN Quick Learn Videos**
- **2017 NHSN Patient Safety Component Training** — definitions for all HAIs reported into NHSN
- **Newsletters**

**Acute Care Hospitals**

- **Sections for each of the following:**
  - Surveillance for bloodstream infections (BSI)
  - Surveillance for urinary tract infections (UTI)
  - Surveillance for C. difficile, MRSA, and other drug-resistant infections (MDRO/C.diff)
  - Surveillance for Surgical Site Infection Events (SSI)
  - Surveillance for Ventilator-Associated Events (VAE)
  - Surveillance for Healthcare Personnel Vaccination

- **In each section:**
  - Training — includes streaming video, YouTube links and slide decks
  - Protocols — actual definitions
  - Forms
  - Support Materials
  - Analysis Resources
  - FAQs
ASP Resources for Small/ Critical Access Hospitals

• CDC published a special implementation guide — *Antibiotic Stewardship for Small and Critical Access Hospitals*

• On May 15, HRET HIIN presented a webinar focused on antibiotic stewardship in rural hospitals and CAHs. The recording and slides can be found [here](#).
Change packages have been recently created or updated. Change packages for Diagnostic Error and Antibiotic Stewardship are in development and scheduled to be released in September.

- 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
- *Malnutrition
- Multi-Drug Resistant Organisms
- Pressure Ulcers
- Readmissions
- Sepsis
- Surgical Site Infection
- Ventilator-Associated Event
- VTE Change Package
“Date of Last” Posters

- Updated topic-specific **“Date of Last” posters** now are available to download on the HRET HIIN website including 16 HIIN topics!
  - This tool is designed to help track the date of the last adverse event at your facility.
  - As an example, see the “date of last” septic event poster to the left.
  - Join your colleagues in reaching zero harms!
- Hard copies available upon request.
Readmission Whiteboard Video Series

• The Readmissions Whiteboard video series is designed to focus and align with the material in the HRET HIIN Preventable Readmissions Change Package and top 10 checklist.

• The goal is to facilitate an improved understanding of best practices to test and implement, in order to support efforts in reducing all cause 30-day readmissions.

• Eleven videos in this series for strategies focused on the development and sustainability of readmissions reduction plans and programs.
Trustee Video

- 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 to be used as a tracking tool as viewers prepare for each module, view the videos and then discuss key take-aways.
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.
MHA Strategic Quality Webinars

• What’s Up Wednesday
  ➢ 12 noon first Wednesday of each month
  ➢ Register [here](#)
  ➢ Wednesday, Sept. 6 — Worker Safety, OSHA Measures and Workplace Violence Reduction Immersion Project presented by Jaclyn Gatz

• HIIN Huddles
  ➢ 2 p.m. fourth Tuesday of each month
  ➢ Register [here](#)
  ➢ Tuesday, Aug. 22 — ASP/Soap Up presented by Amanda Keilholz
Upcoming Events

- **HIIN Regional Bootcamp — Springfield**
  - Oasis Hotel and Convention Center, Springfield
  - 9 a.m. Thursday, Aug. 24

- **HIIN Regional Bootcamp — Kansas City**
  - Hilton Garden Inn, Independence
  - 9 a.m. Friday, Aug. 25

- **The Nurse Resilience Academy**
  - SSM Health St. Mary’s Hospital, Jefferson City
  - 8 a.m. Friday, Aug. 25
Upcoming Events

• **Excellence in Clinical Care Series – Patient Safety, Quality Improvement, Infection Prevention**
  ➢ Camden on the Lake, Lake Ozark
  ➢ Sept. 26-29

• **2017 Annual Emergency Preparedness & Safety Conference: Being Resilient in a Transformative Era**
  ➢ Lodge of Four Seasons, Lake Ozark
  ➢ Oct. 11-13
Educational Resources Provided by MHA Health Institute

For additional webinar/seminar opportunities click [here](#).
Save the Date

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

MARK YOUR CALENDAR!
Thank You for Joining Us!

• Questions?
• See you at 12 noon Wednesday, September 6
  ➢ Worker Safety, OSHA Measures and Workplace Violence Reduction Immersion Project presented by Jaclyn Gatz
  ➢ Click here to register
Contact Information

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Vice President of Clinical Quality Improvement
Missouri Hospital Association
awilliams@mhanet.com
573/893-3700, ext. 1326