



HARRISON COUNTY COMMUNITY HOSPITAL

Our Mission: Providing exceptional care to every patient, every day.

Amy Pickren, RN MSN/MBA

Director of Inpatient Services & Director of Quality Management

Harrison County Community Hospital District

Critical Access Hospital

- ▶ 19 Medical/Surgical Beds
- ▶ 24-hour Emergency Department
- ▶ Swing Bed program
- ▶ Ancillary (Cardio-Pulmonary, Laboratory, Radiology, Rehab Therapies)
- ▶ 19 Outpatient Specialty Clinics
- ▶ Outpatient Geriatric Psychiatry (Senior Life Solutions)

Rural Health Clinics

- ▶ 3 Primary Care Clinics (3 physicians, 4 mid-level providers)

Home Health Agency

- ▶ Nursing Care, Rehab Therapies, and In-home Services

MBQIP at HCCH

- ▶ Increased data reporting helps drive improvement.
- ▶ Improvement plans help achieve measurable goals.
- ▶ Make quality a main focus every day.
- ▶ Utilize MHA tools and resources.
- ▶ Align quality measures with the strategic plan.
- ▶ Monitor quality measures at monthly QAPI meetings.
- ▶ Obtain senior leadership & board support and involvement.

Measures of Improvement

MBQIP Care Transitions Quality Report: Improving Care Through Emergency Department Transfer Communication (EDTC)

| 261312 - Harrison County Community Hospital | | | | | |
|---|------------------------------|--------------------------------------|-------------|-------------|-------------|
| MBQIP Quality Measures | | Your Hospital Performance by Quarter | | | |
| | | 4Q16 | 1Q17 | 2Q17 | 3Q17 |
| Total Medical Records Reviewed | | N = 29 | N = 45 | N = 44 | N = 58 |
| EDTC-1 | Administrative Communication | 100% (n=29) | 100% (n=45) | 100% (n=44) | 100% (n=58) |
| EDTC-2 | Patient Information | 100% (n=29) | 100% (n=45) | 100% (n=44) | 100% (n=58) |
| EDTC-3 | Vital Signs | 97% (n=28) | 98% (n=44) | 100% (n=44) | 100% (n=58) |
| EDTC-4 | Medication Information | 100% (n=29) | 98% (n=44) | 105% (n=46) | 100% (n=58) |
| EDTC-5 | Practitioner Information | 100% (n=29) | 100% (n=45) | 105% (n=46) | 100% (n=58) |
| EDTC-6 | Nurse Information | 100% (n=29) | 78% (n=35) | 34% (n=15) | 14% (n=8) |
| EDTC-7 | Procedures and Tests | 100% (n=29) | 100% (n=45) | 100% (n=44) | 100% (n=58) |
| All EDTC | Composite* | 97% (n=28) | 76% (n=34) | 34% (n=15) | 14% (n=8) |

Reporting Period: Fourth Quarter 2016 through Third Quarter 2017

Improvement Strategy

- ▶ **Team:** Directors of ED and Quality; frontline staff
- ▶ **Inform staff:** What is tracked and reported (and why)?
- ▶ **Staff education:** Importance of required documentation
- ▶ **Attitude:** Proactive vs reactive
- ▶ **Extrapolation and reporting:** Accuracy and clear understanding of the measures
- ▶ **New EMR:** Allowed for easier charting
- ▶ **Daily audits:** Ensure proper documentation

Teamwork Matters

- ▶ All EDTC measures 100% by Q4 2017
- ▶ Among the top state and national performers



Successes and Challenges

- ▶ Auditing each transfer for compliance
- ▶ Holding staff accountable
- ▶ Recognizing staff for high performance
- ▶ Celebrating our achievements

Lessons Learned

- ▶ Have clearly stated, measurable goals and expectations.
- ▶ Communicate progress regularly.
- ▶ Involve staff in process changes.
- ▶ Remember that quality healthcare is our main focus.
- ▶ Celebrate and share wins!

Recommendations

- ▶ Explain the “why”.
- ▶ Communicate progress along the way.
- ▶ Involve staff in all process changes.





Questions?

THANK YOU

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