## HRET GHA Hospital Engagement Network 2.0

# Celebrating Our Success With Positive Net Forward Energy

Kathy McGowan Project Director

September 7, 2016





#### Agenda:

- Review Educational Webinars; Thoughts and Successes
- Recognize IHI's Foundational & Experienced Fellowship
- Recognize Super Data Submitters
- Review Savings and Patient Harm Prevented
- Preview of Hospital Improvement Innovation Network
- Examine areas where you still need improvement; and
- Celebrate your Successes!





#### **Educational Webinars**

- 91 Webinars Offered
  - ADE: 54
  - CAUTI: 37
  - CLABSI: 9
  - C-Diff: 39
  - Data Base, Reporting, Collection: 153
  - EED: 13
  - Falls: 42
  - OB Harm: 43
  - HAPU: 24





#### **Educational Webinars**

- 91 Webinars Offered (continued)
  - Radiation: 5
  - Readmissions: 75
  - Sepsis: 53
  - Surgical Site Infection: 23
  - VAE: 31
  - VTE: 2





#### **Educational Webinars**

- 91 Webinars Offered (continued)
  - Culture of Safety: 21
  - Rural & Critical Access Hospitals: 23
  - Harm Across the Board: 7
  - IHI's Foundational Fellowship: 59
  - IHI's Experienced Fellowship: 45
  - Quality Improvement Office Hours: 24
  - Get Up: 3
  - Soap Up: 6
  - Wake Up: 4





#### **Super Webinar Attendees**

- Bacon County Hospital and Health System: 14
- Coffee Regional Medical Center: 14
- Hamilton Medical Center: 24
- John D. Archbold Memorial Hospital: 24
- Meadows Regional Medical Center: 22
- Medical Center, Navicent Health: 21
- Medical Center of Peach County, Navicent Health: 20
- Memorial Hospital and Manor: 19





#### **Super Webinar Attendees**

- Miller County Hospital: 15
- Oconee Regional Medical Center: 16
- Phoebe Sumter Medical Center: 13
- Tift Medical Center: 12
- Union General Hospital: 15
- University Hospital: 25
- Wayne Memorial Hospital: 17





#### **Super Star Webinar Attendees**

• Habersham Medical Center: 56

Houston Medical Center: 44

• Midtown Medical Center: 38





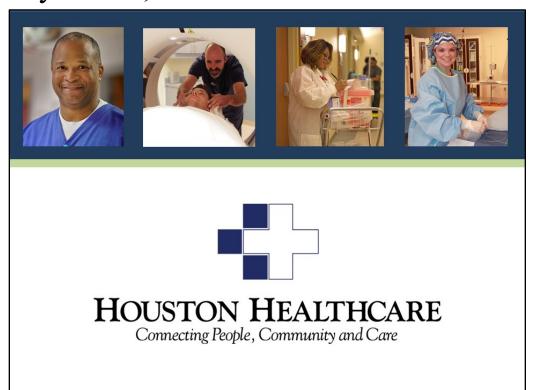
• Teri Newsome, Habersham Medical Center – Opioids







• Cheryl Jones, Houston Healthcare







• Taylor Tenbrink, WellStar Spalding Regional Hospital CAUTI









Peggy McGee, Liberty Regional Medical Center,
 C-diff & NHSN







• Kathy MacQuirter, John D. Archbold Memorial Hospital



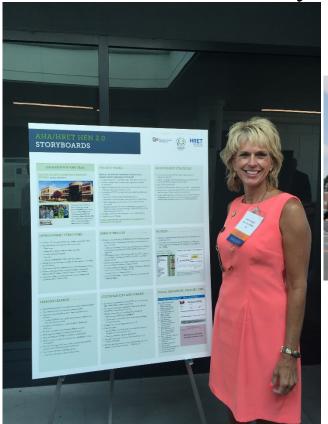
Excellent Webinars

Downloaded many tools & forwarded to various departments





• DeAnn Flanders, Bacon County Hospital and Health System



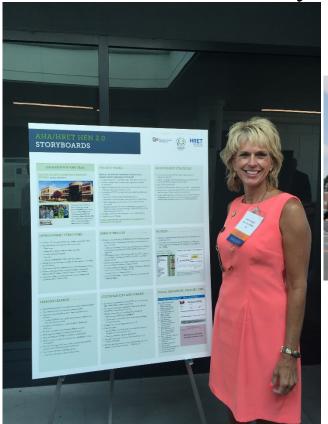








• DeAnn Flanders, Bacon County Hospital and Health System









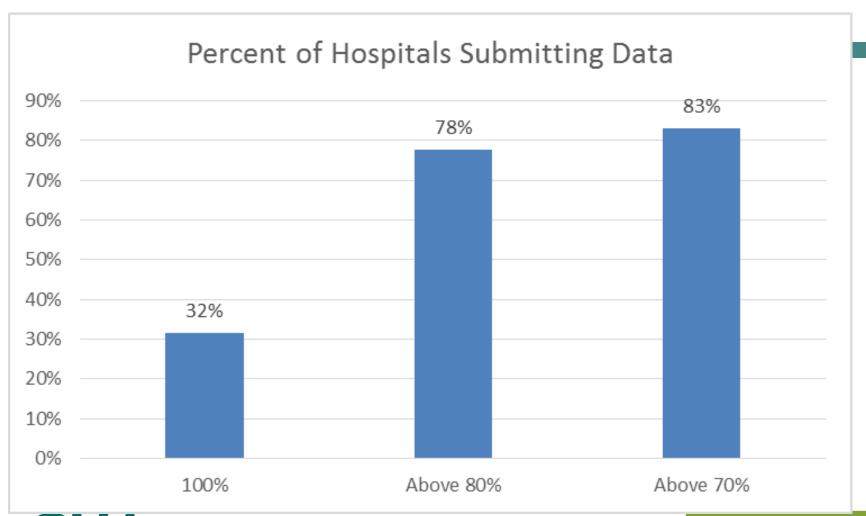
#### IHI's Foundational & Experienced Fellowship

- Priscilla Adams, Habersham Medical Center, 4 Exp
- Melonie Boatner, Midtown Medical Center, 4 Fnd; 4 Exp
- Tyra Brown, GHA, 7 Fnd
- Brandi Fitzgerald, Memorial Hospital and Manor, 4 Fnd
- Theresa Metro-Lewis, Habersham Med. Center, 2 Fnd; 3 Exp
- Pam Sawyer, Midtown Medical Center, 7 Fnd
- Kimberly White, University Hospital, 8 Fnd





#### **Super Data Submitters**

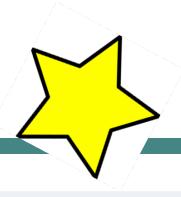












Bacon County Hospital and Health System

Barrow Regional Medical Center

Chatuge Regional Hospital, Inc.

Chestatee Regional Hospital

Coffee Regional Medical Center, Inc.

Coliseum Northside Hospital

Colquitt Regional Medical Center

**Dorminy Medical Center** 

Evans Memorial Hospital, Inc.

Fannin Regional Hospital

Good Samaritan Hospital

Habersham Medical Center

Jasper Memorial Hospital

Jeff Davis Hospital

Jefferson Hospital

Meadows Regional Medical Center

Midtown Medical Center

Northside Medical Center

Oconee Regional Medical Center, Inc

Optim Medical Center - Jenkins

Optim Medical Center - Screven

Pioneer Community Hospital of Early

**Shepherd Center** 

Southwest Georgia Regional Medical Center



100% of Data Submitted!!



### In Pursuit of 2014 HEN 2.0 Targets

**Savings: \$ 1,847,992 Million!** 

# Patient Harm Prevented: 568 Incidents of Harm





### **Summary of Improvement Measures: Harm**

			Year To Date %	Improvement Status
Harm Measure	Target Rate	Year To Date Rate	improvement 🔻	(scale)
ADE Anticoag	1.18376	2.57463	-30.5%	OPPORTUNITY
ADE Hypo	0.72545	1.25255	-3.6%	OPPORTUNITY
ADE Opioid	0.15070	0.22998	8.4%	OPPORTUNITY
Falls	0.36222	0.51984	13.9%	PROGRESS
HAPU 2+	0.17593	0.16934	42.2%	AT TARGET
HAPU 3+	0.43565	1.57527	-117.0%	OPPORTUNITY
VTE	2.88786	3.80077	21.0%	PROGRESS





### **Summary of Improvement Measures: Obstetrics**

			Year To Date %	Improvement Status
Harm Measure	Target Rate	Year To Date Rate	improvement	(scale)
EED	2.15312	1.13852	68.3%	AT TARGET
OB Trauma Instrument	65.90435	48.60088	55.8%	AT TARGET
OB Trauma No Instrument	11.17570	9.26105	50.3%	AT TARGET
OB Trauma Hemorrhage	*	0.82136	#VALUE!	AT TARGET
OB Trauma Preeclampsia	16.50000	0.00000	100.0%	IDEAL

\*Value is not available due to incomplete data





### **Summary of Improvement Measures: Infections**

			Year To Date %	Improvement Status
Harm Measure	Target Rate	Year To Date Rate	improvement	(scale)
CAUTI	0.86999	1.50118	-3.5%	PROGRESS
CLABSI	0.64562	1.30788	-21.5%	OPPORTUNITY
SSI Colon Surgeries	2.12997	4.62459	-30.3%	OPPORTUNITY
SSI Abdominal Hysterectom	0.93726	1.35331	13.4%	IDEAL
SSI Total Hip Replacements	1.67296	1.42466	48.9%	OPPORTUNITY
SSI Total Knee Replacements	0.45906	0.64220	16.1%	OPPORTUNITY
C. difficile Infections	0.38979	0.47711	26.6%	PROGRESS
Sepsis Post Op	9.09091	7.11744	53.0%	AT TARGET
VAC	1.88662	4.46392	-42.0%	OPPORTUNITY
IVAC	0.52000	1.51528	-74.8%	IDEAL





### **Summary of Improvement Measures: Readmissions**

			Year To Date % Improvement S	
Harm Measure	Target Rate	Year To Date Rate	improvement 🔻	(scale)
Readmissions	8.31673	10.85325	-4.4%	OPPORTUNITY





#### **Costs Saved and Harms Prevented**

HAC	Description	Harm Prevented 🔻	Cost saved 🔽
ADE Opioid	Adverse Drug Event - Due to Opioids	91	\$ 273,000.00
EED	Deliveries >= 37 weeks and < 39 weeks gestation	104	\$ 81,572.40
Falls	Falls With Injury (minor or greater)	72	\$ 47,736.00
OB Trauma Instrument	OB Trauma: Vaginal deliveries w/instrument	42	\$ 3,864.00
OB Trauma No Instrument	OB Trauma: Vaginal deliveries w/out instrument	98	\$ 15,484.00
SSI Abdominal Hysterectomy	Surgical Site Infection (SSI) Standardized Infection Ratio (SIR)- Abdominal Hysterectomies	5	\$ 105,000.00
SSI Total Knee Replacements	Surgical Site Infection (SSI) Standardized Infection Ratio (SIR)- Total Knee Replacements	5	\$ 105,000.00
SSI Total Hip Replacements	Surgical Site Infection (SSI) Standardized Infection Ratio (SIR)- Total Hip Replacements	25	\$ 525,000.00
C. difficile	Facility-wide C. difficile infection rate	12	\$ 1,896.00
Sepsis - Post Op	Postoperative sepsis rate	25	\$ 3,950.00
VTE	Post-Operative pulmonary embolism (PE) or deep vein thrombosis (DVT) rate	31	\$ 689,440.00
Total*		568	\$ 1,847,992.40

<sup>\*</sup>Excludes HAPU 3+, Sepsis Post Op, Sepsis Mortality, and IVAC because harms in these categories are included in other measures.





#### **PURPOSE:**

Patient safety is an essential component of the QIN-QIO 11th Scope Of Work and the Partnership for Patients, and the alignment of these programs will permit the systematic use of innovative patient safety practices at a national scale. HENs are trusted partners and have established relationships with thousands of acute care hospitals. This integration presents unique opportunities to leverage scope and scale in achieving the goals of the 11th SOW.





#### **GOAL:**

- A 20% reduction in all-cause patient harm (to 97 Hospital-Acquired Conditions [HACs]/1,000 discharges) from 2014 interim baseline (of 121 HACs/1,000 patient discharges); and
- A 12% reduction in 30-day readmissions as a population-based measure (readmissions per 1,000 people).

**BASELINE: 2014** 





#### **CORE TOPIC AREAS:**

- Adverse drug events (ADE), including at a minimum, opioid safety, anticoagulation safety, and glycemic management
- Central line-associated blood stream infections (CLABSI), in all hospital settings, not just Intensive Care Units (ICUs)
- Catheter-associated urinary tract infections (CAUTI), in all hospital settings, including avoiding placement of catheters, both in the ER, and in the hospital
- Clostridium difficile (C. diff) bacterial infection, including Antibiotic Stewardship
- Injury from falls and immobility
- Pressure Ulcers
- Sepsis and Septic Shock





#### **CORE TOPIC AREAS:**

- Surgical Site Infections (SSI), to include measurement and improvement of SSI for multiple classes of surgeries
- Venous thromboembolism (VTE), including, at a minimum, all surgical settings
- Ventilator-Associated Events (VAE), to include Infection-related Ventilator-Associated Complication (IVAC) and Ventilator-Associated Condition (VAC)
- Readmissions





Foster a culture of safety and reduce harm to patients as part of a continuum of care. The following are some examples of topics HIINs may consider to achieve this goal:

- Multi-Drug Resistant Organisms (e.g. VRE, CRE, MRSA, etc.)
- Diagnostic Errors
- Addressing Malnutrition in the Inpatient Setting
- Airway Safety
- Iatrogenic Delirium
- Undue Exposure to Radiation
- Hospital Culture of Safety that fully integrates patient safety with worker safety
- Developing a metric to measure and report on all-cause harm within the HIIN network.





#### **GETTING READY:**

- Anticipate CMS announcing awards in late September
- Within 45 days Commitment Letter from CEOs
- Hospitals will do a Needs Assessment & confer rights to NHSN data
- Cohorts will be created
- Kickoff HIIN meeting: Month 2 or 3
- GHA HIIN staff will do hospital visits and help establish Action Plans
- HRET CDS database will be utilized, training will be provided





#### **2017 Patient Safety Summit**

Partnership for Health & Accountability
Patient Safety Summit
January 11-12, 2017
The Ritz-Carlton Reynolds, Lake Oconee
Greensboro, Georgia

Applications Due September 26 @ Noon







#### **Contact Information**

Name	Title	Email	Telephone number
Natosha "Tosha" Boyd	Patient Safety Specialist-Rural	tboyd@gha.org	(770) 249-4553
Lynne Hall	Quality Improvement Specialist	lhall@gha.org	(770) 249-4525
Shearl Lesser	PHA Program Assistant	slesser@gha.org	(770) 249-4549
Kathy McGowan	Vice President of Quality & Patient Safety	kmcgowan@gha.org	(770) 249-4519
Tyra Brown	Public Health Information Specialist	tbrown@gha.org	(770) 249-4587
Doug Patten, M.D.	Chief Medical Officer	dpatten@gha.org	(770) 249-4547
Joyce Reid	Vice President of Community Health Connections	jreid@gha.org	(770) 249-4545
Tracy Rutland	Quality Improvement/ Patient Safety Specialist	trutland@gha.org	(770) 249-4511
Roben Summers	Infection Prevention/Patient Safety Specialist	rsummers@gha.org	(770) 249-4518





### Cohort 1: Red Rover Red Rover, Send Georgia Right Over





