ALLIANT QUALITY
The Quality Improvement Services Group of ALLIANT HEALTH SOLUTIONS

HQIC
Hospital Quality Improvement Contractors
CENTERS FOR MEDICARE & MEDICAID SERVICES
iQUALITY IMPROVEMENT & INNOVATION GROUP

Alliant Quality HQIC Patient Safety Network

Welcome!

- All lines are muted on entry
- Please ask any questions in the chat
- Please actively participate in discussions via the chat

We will get started shortly!

Alliant Quality HQIC Patient Safety Network Session 5

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Making Health Care Better *Together*

Collaborators:

- Alabama Hospital Association
- Alliant Quality
- Comagine Health
- Georgia Hospital Association
- KFMC Health Improvement Partners
- Konza

Hospital Quality Improvement

WELCOME!

ALABAMA HOSPITAL ASSOCIATION

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Comagine Health

GHA
Georgia Hospital Association

kfmc
HEALTH IMPROVEMENT PARTNERS

KONZA

Elizabeth “Libby” Bickers, LCSW

CLINICAL SOCIAL WORKER

I have been a social worker for over 20 years in multiple areas of healthcare, primarily hospice. I have also worked in dialysis, home health, long-term care and inpatient hospital settings. I also worked in higher education as Director of Field Instruction at my alma mater, Valdosta State University. I have been a clinical reviewer for over five years with Alliant Health Solutions. I have been married for 23 years and have two children, a daughter and a son.

Contact: elizabeth.bickers@alliantaso.org

Amy Ward, MS, BSN, RN, CIC

INFECTION PREVENTION SPECIALIST

Amy is a registered nurse with a diverse background in acute care nursing, microbiology, epidemiology and infection control. She is passionate about leading and mentoring new and future infection preventionists in their career paths.

Contact: Amy.Ward@Allianthealth.org

Melody "Mel" Brown, MSM

PATIENT SAFETY MANAGER

Melody has over 40 years of healthcare experience, including varied roles at Alliant Health Solutions working on the CMS contract for the Quality Innovation Network–Quality Improvement Organization (QIN–QIO). Coaching hospitals and nursing homes on all facets of healthcare quality improvement has been her focus as the Patient Safety Manager.

Contact: Melody.Brown@AlliantHealth.org

Jennifer Massey, Pharm.D.

PHARMACIST, ADVERSE DRUG EVENTS/OPIOID STEWARDSHIP

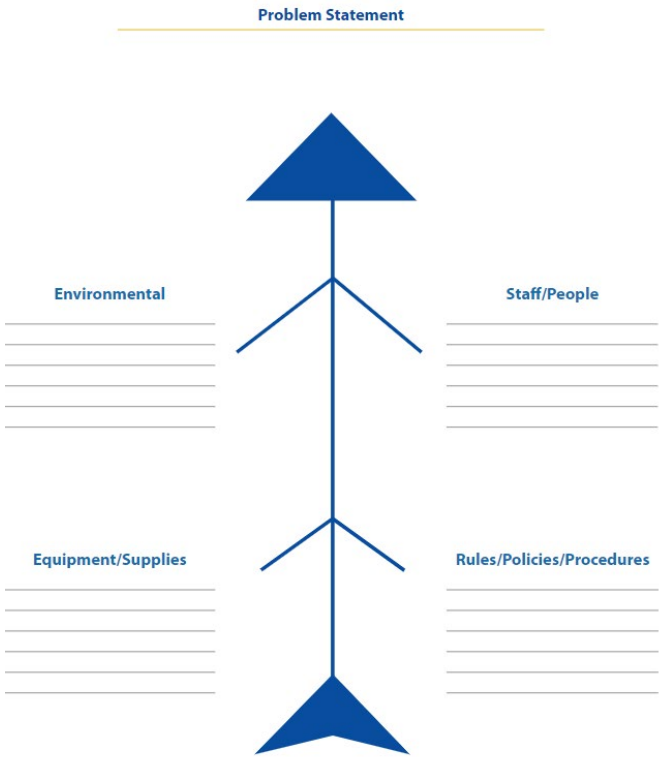
Jennifer is a pharmacist with over 10 years of experience in the hospital setting as a clinical staff pharmacist, including ICU, emergency department, code response and pediatrics.

Contact: Jennifer.Massey@Allianthealth.org

Learning Objectives

- Learn Today:
  - Learners will interact during the session in an “all teach, all learn” environment.
  - Learners will contribute to the brainstorming and feedback session.
- Use Tomorrow:
  - Learners will continue to communicate their project goals and interventions, along with analysis information, to their leadership throughout the course of these sessions.

Fishbone Diagram



1. Select the event to be investigated.
2. Select the team members for the project.
3. Gather the facts and data.
4. List all the contributing factors.
5. Put all information together to complete your root cause analysis tool.

SMART Goal Checklist

- **S**pecific:
  - *Is the intervention(s) focused and well-defined?*
  - *Does the intervention include details like what, when, and who is accountable?*
- **M**easurable:
  - *Does the intervention(s) include a way to measure progress (measurement/metrics), so the facility can assess effectiveness and course correct if needed?*
- **A**chievable:
  - *Does the intervention(s) look attainable?*
  - *Does the facility have the capacity to do this, or should they be looking for a more achievable intervention?*
- **R**ealistic:
  - *Does the intervention(s) seem to make sense and align with the goal?*
- **T**imely:
  - *Does the intervention(s) include target dates, deadlines or progression timelines for achievement?*

Plan for Improvement

- **Plan – Do – Study – Act**
- A way to accomplish rapid cycle improvement
- Small tests of change rather than system-wide until proven
- Cycles are intended to be short, evaluated, then adopted, adapted or abandoned
- Many times, you will need multiple PDSA cycles to improve a system effectively

Corrective Action Strengths

Weak

- Double checks
- Warnings/labels
- New policies/procedures/memos
- Training/education
- Additional study

Intermediate

- Decrease workload
- Software enhancements/mods
- Eliminate/reduce distraction
- Checklists/trigger/prompts
- Read back
- Eliminate look alike/sound alike
- Enhanced documentation/communication
- Build in redundancy

Strong

- Physical changes: grab bars, non-slip strips on tubs/showers
- Forcing functions or constraints: design of gas lines so only oxygen can be connected to oxygen lines; electronic medical records – cannot continue charting unless all fields are filled in
- Simplifying: unit dose

Prevent future problems by developing and testing strong actions

https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/downloads/QAPIAtaGlance.pdf

Leaving in Action

Type your suggestions into the chat box:

- PDSA suggestions for next steps
- Tool suggestions for next go round
- Anything you've learned or "aha" moments

Resources

Alliant Quality HQIC website

Quality improvement tools available for download:

- Previous slides/handouts
- Fishbone Diagram
- PDSA Worksheet

https://www.alliantquality.org/topic/hospital-quality-improvement/

Key Takeaways

- Learn Today:
  - Learners will interact during the session in an “all teach, all learn” environment
  - Learners will contribute to brainstorming and the chat waterfall as the PDSA worksheet is completed during the session

- Use Tomorrow:
  - Learners will continue to communicate their project goals and interventions, along with analysis information, to their leadership throughout the course of these sessions

How will this change what you do?
Please tell us in the poll…

Questions?

Elizabeth Bickers - Elizabeth.Bickers@AlliantASO.org
Melody Brown - Melody.Brown@AlliantHealth.org
Jennifer Massey - Jennifer.Massey@AlliantHealth.org
Amy Ward - Amy.Ward@AlliantHealth.org
OR Call us at **678-527-3681**

HQIC Patient Safety Network Goals

Adverse Drug Event Network

- ✓ Decrease high dose opioid prescribing
- ✓ Reduce adverse drug events related to anticoagulants, glycemic agents, and opioids

Infection Prevention Network

- ✓ Reduce C. diff in all settings
- ✓ Reduce device associated infections - CAUTI and CLABSI
- ✓ Reduce Post – Op Sepsis and Sepsis Mortality

Readmission Network

- ✓ Reduce Hospital Readmissions

HQIC Goals

Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services

Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce *C. diff* in all settings

Quality of Care Transitions

- ✓ Convene community coalitions
- ✓ Identify and promote optical care for super utilizers
- ✓ Reduce community-based adverse drug events

Upcoming Events

Exploring Sepsis Strategies Part 2: Care Coordination & Preventing Sepsis-Related Readmissions	COVID Office Hours – IP Chats
September 30, 2021 2 – 3 P.M. ET Webinar Registration - Zoom	**Every Wednesday – Beginning September 22** 2 - 2:30 P.M. ET **No Registration Required** Click HERE to join each week or visit https://bit.ly/COVIDOfficeHours. For more information, visit our website www.alliantquality.org.

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Thank you for joining us!
How did we do today?

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