Making Health Care Better Together

Hospital Quality Improvement

Welcome from all of us!

COLLABORATORS:
- Alabama Hospital Association
- Alliant Health Solutions
- Comagine Health
- Georgia Hospital Association
- KFMC Health Improvement Partners
- Konza
Facilitator

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.

Amy loves to ride bikes and be outdoors!

Contact: Amy.Ward@Allianthealth.org
Learning Objectives

• Learn Today:
  • Introduction to MRSA cohort structure
  • Understanding of expectations
    • From subject matter experts (SMEs)
    • From QI coach
    • From hospitals

• Use Tomorrow:
  • Access available tools and resources to implement targeted interventions
Cohort Structure

• Targeted cohort members have been identified based on data
• Alliant supplies quantitative data
• Hospital supplies qualitative data – make it your program
  • What is happening in your building?  
  • What are your pain points around these topics?
• Use quantitative and qualitative data to identify interventions
• Apply interventions in 1:1 dialogue, discussing barriers to implementation
• 30-day focus plans – rapid cycle process improvement
**Expectations of QI Coach/Alliant SMEs**

- Monthly 1:1 focus call with QI coach for cohort intervention only
  - SME will attend as invited
- Monthly review of data – portal access
- PDSA review and implementation with each coaching call
- Provide timely resources for specified interventions

*Drop into chat what you expect or need from QI Coach/SME*
Expectations for Hospitals

• Attend monthly 1:1 coaching calls for specific cohort topics
• Access portal data during coaching calls
• Assess root cause or contributing factors of events based on available data (Fishbone)
• With QI coach, use root cause analysis to determine a potentially successful intervention
• Implement intervention using a rapid cycle (30-day) PDSA
• Continue rapid cycle improvement until the change is embedded and implement additional interventions to amplify success
What’s in Our Toolbox?

• Fishbone diagram
• PDSA template/examples(recordings
• QI Boot Camp series
• Coaching packages
  • Top 5
• HQIC website resources
• Portal access
• Monthly newsletter
• 1:1 coaching
• Access to Subject Matter Experts
Fishbone Diagram

- Problem = Head of the fish
  - Determined based on quantitative data
- Bones = major categories of contributors to the problem
  - Determined based on qualitative data
### PDSA Template

#### HQIC SMALL TEST OF CHANGE WORKSHEET

**PDSA Cycle Template**

<table>
<thead>
<tr>
<th>ACT</th>
<th>PLAN</th>
<th>STUDY</th>
<th>DO</th>
</tr>
</thead>
</table>

**Model for Improvement: Three questions for improvement**
1. What are we trying to accomplish (aim)?
2. How will we know that change is an improvement (measure)?
3. What change can we make that will result in an improvement (ideas, theories, hypotheses)?

**COAL: Overall goal you would like to reach – use SMART Goals: Specific, Measurable, Achievable, Relevant, and Timely**

**I. PLAN: Overall goal you would like to reach – list your action steps along with person(s) responsible and time line.**
- What is the objective of the test?
- What do you predict will happen and why?
- What change will you make?
- Who will it involve (e.g., one unit, one floor, one department)?

**II. STUDY: Compare the measured results and how they compared to the predictions (set aside time to analyze the data and study the results and determine if the change resulted in the expected outcomes)**
- Complete the analysis of the data
- Compare the data to your predictions

**III. TEST: Describe what actually happened when you ran the test of change.**
- Implement the change
- Try out the test on a small scale
- Carry out the test
- Document problems and unexpected observations
- Begin analysis of the data

**IV. DO: Describe what will happen when the test is carried out.**
- What measures will you use to determine if the prediction is a success?

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**Predictions:**
- How long will the change take to implement?
- What resources will they need?
- What data need to be collected?

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**Measures for predictions:**
- A measure for each prediction

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**ALLIANT HEALTH SOLUTIONS**

**HIQC：Centers for Medicare & Medicaid Services**

**QUALITY IMPROVEMENT & INNOVATION GROUP**
PDSA Example: Excess CLABSI Events

• AIM: To prevent two MRSA events in the ICU by December 31, 2022.

• Plan: To implement decolonization protocol in ICU.

• Do: Complete daily audits for completion of decolonization regimen for each patient in the ICU.

• Study: Review NHSN MRSA Lab ID SIR and TAP report to monitor MRSA SIR prior to and after implementation.

• Act: If intervention is effective in SIR reduction, consider dissemination to other units with excess SIR or excess events.

REPEAT
Quality Improvement Basics Boot Camp

• Three-part series
• Tools/recordings available on the Alliant HQIC website
• Series focus:
  • Quality improvement models and tools
  • Process improvement
  • Developing a quality improvement team/who should be at the table
  • Resources to be shared
Coaching Package

Purpose: Use the evidence-based best practices and resources to create quality improvement action plans.

Facility/Hospital Name: ___________________________ Date Completed: __________

<table>
<thead>
<tr>
<th>Category</th>
<th>Best practice/interventions</th>
<th>Links to resources, toolkits, webinars, etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Coordination</td>
<td>Implement a laboratory based alert system</td>
<td><a href="http://www.jstor.org/stable/10.1086/676934">http://www.jstor.org/stable/10.1086/676934</a></td>
</tr>
<tr>
<td></td>
<td>Special Approach: MRSA decolonization therapy</td>
<td>Strategies to Prevent S. aureus BBS in Acute Care Facilities, CDC</td>
</tr>
<tr>
<td>Data analysis/QAPI</td>
<td>Conduct MRSA Risk Assessment</td>
<td><a href="http://www.jstor.org/stable/10.1086/676934">http://www.jstor.org/stable/10.1086/676934</a></td>
</tr>
<tr>
<td></td>
<td>Provide MRSA data and outcome measures to key stakeholders</td>
<td><a href="http://www.jstor.org/stable/10.1086/676934">http://www.jstor.org/stable/10.1086/676934</a></td>
</tr>
<tr>
<td>Education</td>
<td>Educate healthcare personnel about MRSA</td>
<td>Factsheets for Clinicians</td>
</tr>
<tr>
<td></td>
<td>Prevent MRSA Infections (CDC)</td>
<td></td>
</tr>
<tr>
<td>Leadership/Culture</td>
<td>Pharmacist-led Stewardship Program</td>
<td>Core Elements of Antibiotic Stewardship Programs</td>
</tr>
<tr>
<td>Patient and Family</td>
<td>Educate patients and their families about MRSA</td>
<td>Factsheets &amp; Posters</td>
</tr>
<tr>
<td>Protocol/Protocol</td>
<td>Special Approach: Universal gown and glove for all contact with pts and the pt's personal items</td>
<td>Strategies to Prevent MRSA; 2016 Update on JSTOR</td>
</tr>
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https://quality.allianthealth.org/media_library/coaching-package-mrsa/
Targeted Interventions: Top 5 MRSA

- Promote compliance with CDC hand hygiene recommendations
- Use contact precautions for all MRSA infected and colonized patients
- Ensure cleaning and disinfection of equipment and the environment
- Implement MRSA decolonization protocol in high-risk locations
- Educate personnel, patients and families about MRSA
HQIC Website Resources/Tools

HQIC Resources

COVID-19
Health Equity
Hospital Acquired Pressure Injuries

Infection Prevention
Medication Safety/Adverse Drug Event (ADE)
National COVID-19 Resiliency Network (NCRN)

Opioid Stewardship
Patient and Family Engagement
Readmissions
Portal Access
Monthly HQIC Newsletter

Timely journal articles on all HQIC topics

Links to registration for all of our educational events

Success stories from top-performing hospitals

Latest news from CMS

Linked on HQIC website
Month Six Sharing

- Which Top 5 intervention was implemented at your hospital
- PDSA examples
- Barriers faced
- How barriers were overcome
- Lessons learned
- Best practices
Resource Links

• QI Tools:
  • PDSA Template
  • Fishbone Template

• Coaching Packages
  • MRSA

• HQIC Website:
  • Infection Prevention

• Portal:
  • Portal Instructions
  • Portal Registration and Multifactor Authentication
  • Portal Navigation and Feature Overview

• QI Boot Camp Series:
  • Session 1
  • Session 2
  • Session 3
Key Takeaways

• Learn Today:
  • Understand new HQIC Cohort Structure
  • Understand expectations for SMEs, QI coaches and hospitals

• Use Tomorrow:
  • Use available resources to implement positive change in your hospital for adverse drug events

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

Email us at HospitalQuality@allianthealth.org or call us at 678-527-3681.
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

QI Coaches will be scheduling 1:1 calls soon!

Infection Prevention SME:
Amy Ward
Amy.Ward@AlliantHealth.org
Save the Date!

Tuesday, June 28, 2022 | 11 A.M. - 3 P.M. ET

Participate and follow the chat using #ChatWithAlliant ON Twitter.
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Thank you for joining us!
How did we do today?

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