

Quality Leader Summit

Welcome!

- All lines are muted, please ask your questions in Chat and send to everyone
- Please actively participate in polling questions that pop up on the lower right-hand side of your screen
- Please be aware that this event will be recorded

Alliant HQIC Quality Leader Summit



Donna Cohen, RN, BSN, CCM
Karen Holtz, MT(ASCP), MS, CPHQ

April 30, 2024

Alliant HQIC Moderators



Donna Cohen, RN, BSN, CCM
Director, Quality Projects



Karen Holtz, MT (ASCP), MS, CPHQ
HQIC Education Lead

**Making Health
Care Better
*Together***

COLLABORATORS:

Alabama Hospital Association
Alliant Health Solutions
Comagine Health
Georgia Hospital Association
KFMC Health Improvement Partners
Konza

Hospital Quality Improvement

Welcome from all of us!

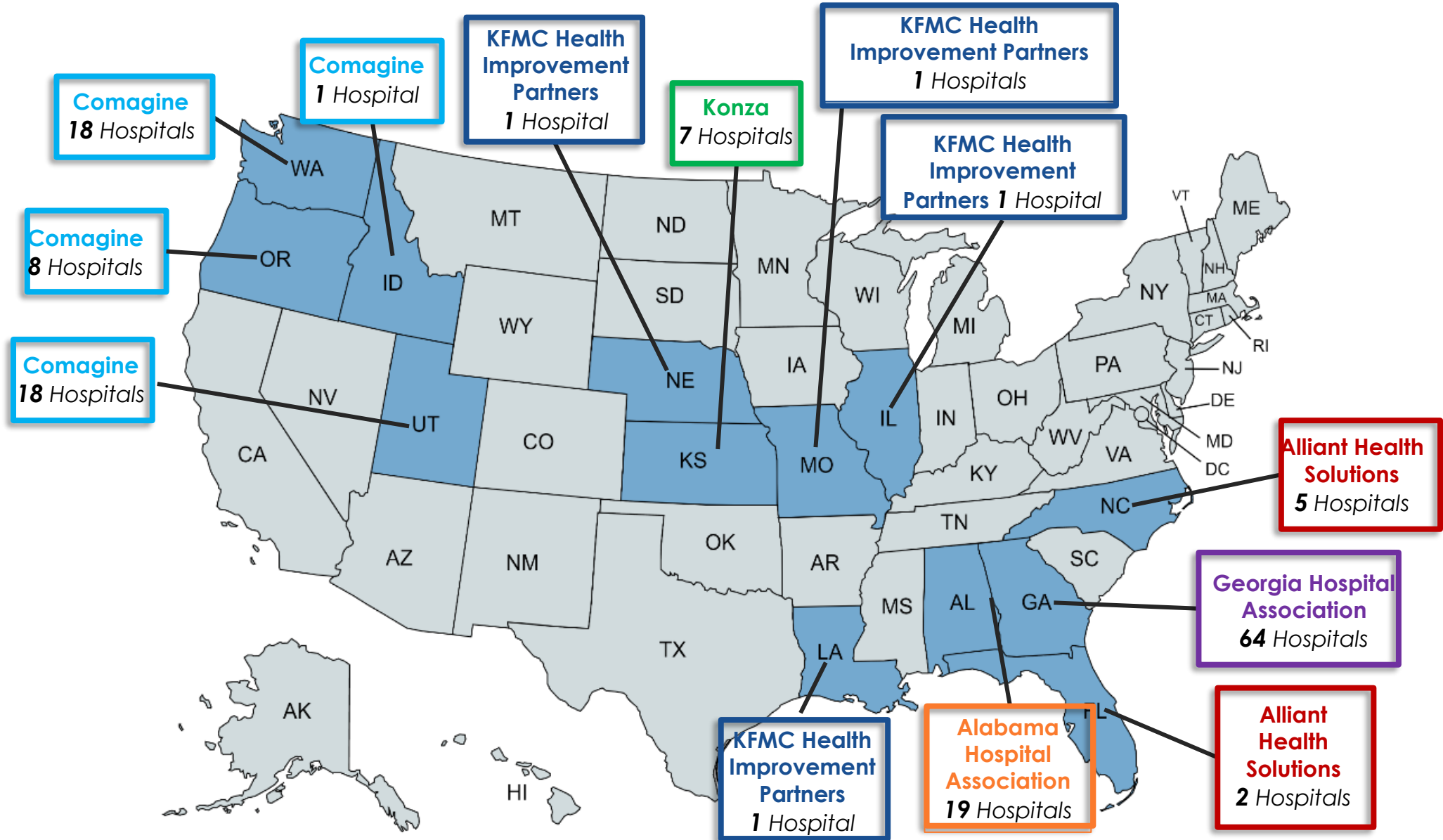


Agenda

- Welcome
- HQIC Updates
- Summary Performance Data
- HQIC by the Numbers
- Hospital Recognition
- Key Attributes of Success
- Professional Wheel of Life
- 13th Scope of Work
- Wrap Up/Adjourn

Enrolled Hospitals by State and Partner

146 updated March 2024



HQIC Evaluation Metrics and Goals By 2024*

Behavioral Health Decreased Opioid Misuse

- Decrease opioid-related ADEs by 7% including deaths
- Decrease opioid prescribing (>90MME) by 12%

Patient Safety Reduction of Harm

- Reduce ADEs by 13%
- Reduce all-cause harm by 9%
- Reduce *Clostridioides difficile* rates

Care Transitions Focus on High Utilizers

- Reduce readmissions by 5%

*For the nine Hospital Quality Improvement Contractors (HQICs)

Areas of Focus

Patient Safety

- Opioid Stewardship
- Adverse Drug Events (opioids, anti-coag, glycemic)
- CLABSI
- CAUTI
- C diff/MRSA
- Sepsis
- Pressure Injuries
- Readmissions

Other

- COVID-19 and/or public health emergencies
- Health disparities and health equity
- Patient and family engagement (PFE)
- Leadership engagement
- High Reliability Organization
- Workplace Violence Prevention

Additional Areas of Focus and HQIC Updates

1. High Reliability Organization (HRO)

- Maintain high levels of safety over an extended period
- Manage safety risks extremely well in complex and high-risk environments
- In healthcare, this translates to zero preventable harm for patient care

2. Workplace Violence Prevention (WVP)

- An act or threat occurring at the workplace that can include verbal, nonverbal, written, or physical aggression; threatening, intimidating, harassing words or actions; bullying; sexual harassment; or physical assaults involving staff, licensed practitioners, patients, or visitors
- Incidence of violence-related health care worker injuries has steadily increased for at least a decade.

3. Rural Emergency Hospitals (REHs)

- Effective January 1, 2023, Rural Emergency Hospitals as a new Medicare provider
- Hospitals convert to emergency services and observation care due to financial reasons and reimbursement
- To date, there are 21 REHs in the United States; one Alliant HQIC enrolled hospital in Georgia

Environmental Scan: HRO and WVP

- Per CMS modification, conducted survey in July/August 2023
- Asked hospitals to respond so Alliant could develop tools and resources
- Included Yes/No questions
- Approximately 100+ Alliant hospitals responded
- Top areas of need
 - HRO
 1. Leadership fosters a culture of patient safety including zero harm
 2. Uses robust process improvement tools to improve work processes and patient outcomes
 - Workplace Violence Prevention
 1. Leadership and accountability
 2. Routine safety audits and drills

HRO and WVP Coaching Packages

- Evidence-based interventions, tools, and resources in literature
- Quality advisers share with hospitals
- Currently have a total of 15 coaching packages on patient safety topics developed by subject matter experts
- Continue to review and revise
- Coaching Packages on Alliant HQIC website



Purpose: Use the evidence-based best practices and resources below to create quality

Category	Best Practices/Interventions	Links to Resources
Culture Assessment	Agency for Healthcare Research and Quality (AHRQ) Survey on Patient Safety Culture (SOPSTM)	https://www.ahrq.gov/sops/surve
Leadership	Leading a Culture of Safety: A Blueprint for Success	https://www.jhi.org/resources/pul/safety-blueprint-success#downl
	The Benefits of High-Reliability in a Value-Based Payment Environment (Premier, 2018)	https://premierinc.com/download/cf-high-reliability-in-vbp-Health
	Five Ways to Sustain the Gains from High Reliability (blog) (Premier, 2019)	https://premierinc.com/newsroom/the-gains-from-high-reliability
	Leading in Tough Times: A Resilience Playbook (Cynosure, 2023)	https://app.box.com/s/vvwnq35xfile/1331570382741
Just Culture and Always Events	What is Just Culture? Changing the way we think about errors to improve safety and staff satisfaction	https://www.brighamandwomens/news/what-is-just-culture-chang-errors-to-improve-patient-safety
	The Promise and Practice of a Just Culture	https://healthcareexecutive.org/a/promise-and-practice-of-a-just-c
	Always Events: A Toolkit	https://www.jhi.org/resources/too/kit#downloads (download)
	Always Events: Make the Patient the Focus	https://www.patient-safety.com/the-patient-the-focus
HRO Framework	The Framework for High-Reliability Healthcare	https://www.vizientinc.com/our-excellence/reliable-care-delivery
	A Framework for Safe, Reliable, and Effective Care	https://www.jhi.org/resources/wh/reliable-and-effective-care#dowr
	Reliability Culture Implementation Guide	https://www.mha.org/Portals/0/D/KeyStone%20Center/Tools/reliabil/guide.pdf
Learning Systems	Adverse Events, Near Misses, and Errors (AHRQ, 2019)	https://psnet.ahrq.gov/primer/ad/errors
	AHRQ Learning from Defects	https://www.ahrq.gov/hai/cusp/tc

High Reliability Organization

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

Category	Best Practices/Interventions	Links to resources and toolkits
Safety from Violence for Health Care Employees (SAVE) Act	Safety From Violence for Health Care Employees (SAVE) Act	https://www.aaos.org/globalassets/advocacy/action-center/2022-issue-one-page--save-act.pdf
	Health Care Workplace Violence and Intimidation, and the Need for a Federal Legislative Response (AHA)	https://www.manchin.senate.gov/imo/media/doc/save_act_bill_text.pdf?cb
	Letter of Support for the Safety from Violence for Health Care Employees (SAVE) Act of 2023 (AHA)	https://www.aha.org/lettercomment/2023-04-19-letter-support-save-act-2023
	Workplace Violence Prevention Standards (TJC) for all Joint Commission-accredited hospitals and critical access hospitals	https://www.jointcommission.org/-/media/tjc/documents/standards/r3-reports/wpvp-r3_20210618.pdf
Accreditation and Regulatory Requirements	Joint Commission Sentinel Event Alert #59: Physical and verbal violence against health care workers	https://www.jointcommission.org/-/media/tjc/documents/patient-safety-topics/sentinel-event/sea-59-workplace-violence-final2.pdf
	Joint Commission Infographic: Take a Stand: No More Violence to Health Care Workers	https://www.jointcommission.org/-/media/tjc/documents/resources/workplace-violence/sea_59_wpv_infographic_3_30_18_final.pdf
	Keep up to date with local, state and federal requirements and changes.	Workplace Violence Guidance Document - Hospitals (CMS Center for Clinical Standards and Quality, Nov. 2022) https://www.hhs.gov/guidance/document/workplace-violence-hospitals
Leadership and Accountability	How Boards Contribute to a Safe Workplace and Community (AHA)	https://trustees.aha.org/system/files/7files/media/file/2023/08/Boardroom-Brief-How-Boards-Contribute-to-a-Safe-Workplace-and-Community.pdf
	Building a Safe Workplace and Community	https://www.aha.org/system/files/media/file/2021/10/building-a-safe-workplace-and-community-framework-for-hospitals-and-health-systems.pdf
	Combining Workplace Violence in Health Care by Creating Safer Workplaces	https://www.aha.org/advancing-health-podcast/2021-10-27-combining-workplace-violence-health-care-creating-safer
	AHA and IAHS Creating Safer Workplaces (2021)	https://www.aha.org/system/files/media/file/2021/10/creating-safer-workplaces-guide-to-mitigating-violence-in-health-care-settings-f.pdf
	Joint Commission Standard LD.03.01.01: Leaders create and maintain a culture of safety and quality throughout the hospital	https://www.jointcommission.org/-/media/tjc/documents/standards/r3-reports/wpvp-r3_20210618.pdf
	Commitment to Safety (Hospital Example)	https://www.trinity-health.org/assets/documents/advocacy/comments-on-policy/2022/trinityhealthcommitmenttosafety-confntviolenceimprovehealthjune2022.pdf
	Workplace Violence Prevention Policy Example	https://mrwa.com/pdf/workplaceviolence2.pdf
	Code of Conduct Mass General Brigham	https://www.massgeneralbrigham.org/en/patient-care/patient-visitor-information/patient-code-of-conduct

Workplace Violence Prevention

Summary HQIC Level Performance: 42-month

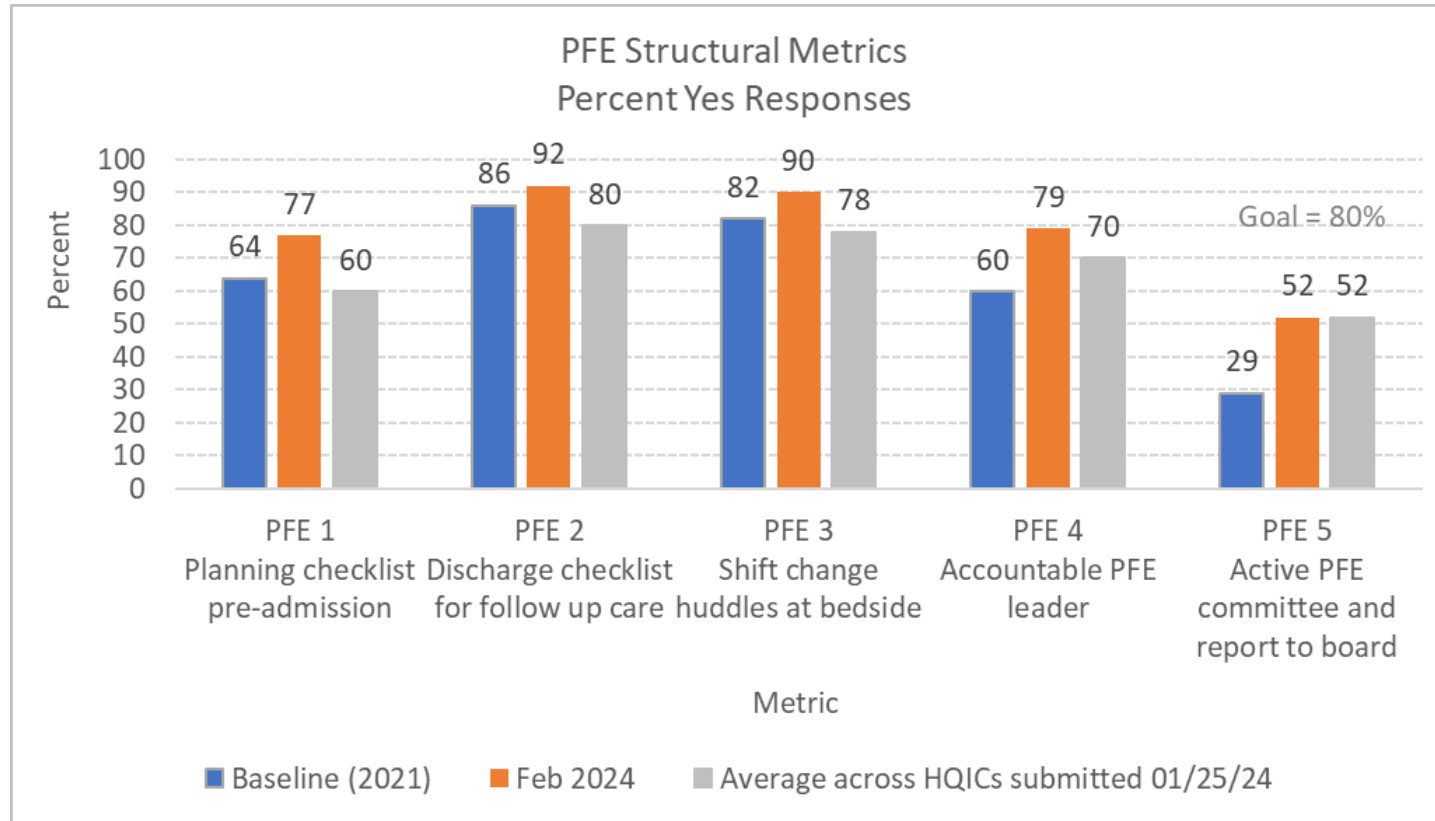
HQIC	GoalArea	Composite Component	Baseline Rate	Performance Rate	HQIC Composite RIR Score	Goal
ALLIANT	Anticoagulation and Hypoglycemia ADEs	ANTICOAGULATION	0.07%	0.06%	2.30%	13%
		HYPOGLYCEMIA	0.01%	0.01%		
	OPIOID ADEs	OPIOIDADES	0.32%	0.30%	5.51%	7%
	OPIOID Prescribing	OPIOIDPRESCRIBING	3.56%	2.99%	15.88%	12%
	Readmissions	READMISSIONS	15.97%	15.05%	5.75%	5%
Goal Area	Composite Component	Measure Name	HQIC Baseline Numerator	HQIC Baseline Denominator	HQIC Composite RIR Score	Goal
All Cause Harm	CAUTI	CDC_CAUTI_ICU_P	422	88879	17.97%	9%
All Cause Harm	CDIFF	CDIFF_Combination	575	115577		
All Cause Harm	CDIFF	CDIFF_RATE	575	115577		
All Cause Harm	CLABSI	CDC_CLABSI_ICU_P	371	88774		
All Cause Harm	MRSA	MRSA_Combination	216	88219		
All Cause Harm	PRESSUREINJURIES	PU_STAGE3	61	91037		
All Cause Harm	SEPSIS	SEPSIS_MORT_2	3838	89302		
All Cause Harm	SEPSIS_SHOCK	SEPSIS_SHOCK	148	87550		

RIR Goal Month 42 = Relative Improvement Rate Goal for March 2024

RIR Achieved = Relative Improvement Rate compared to baseline (2019 data for all measures except CAUTI, CLABSI, Sepsis, PI and MRSA which is 2020 data)

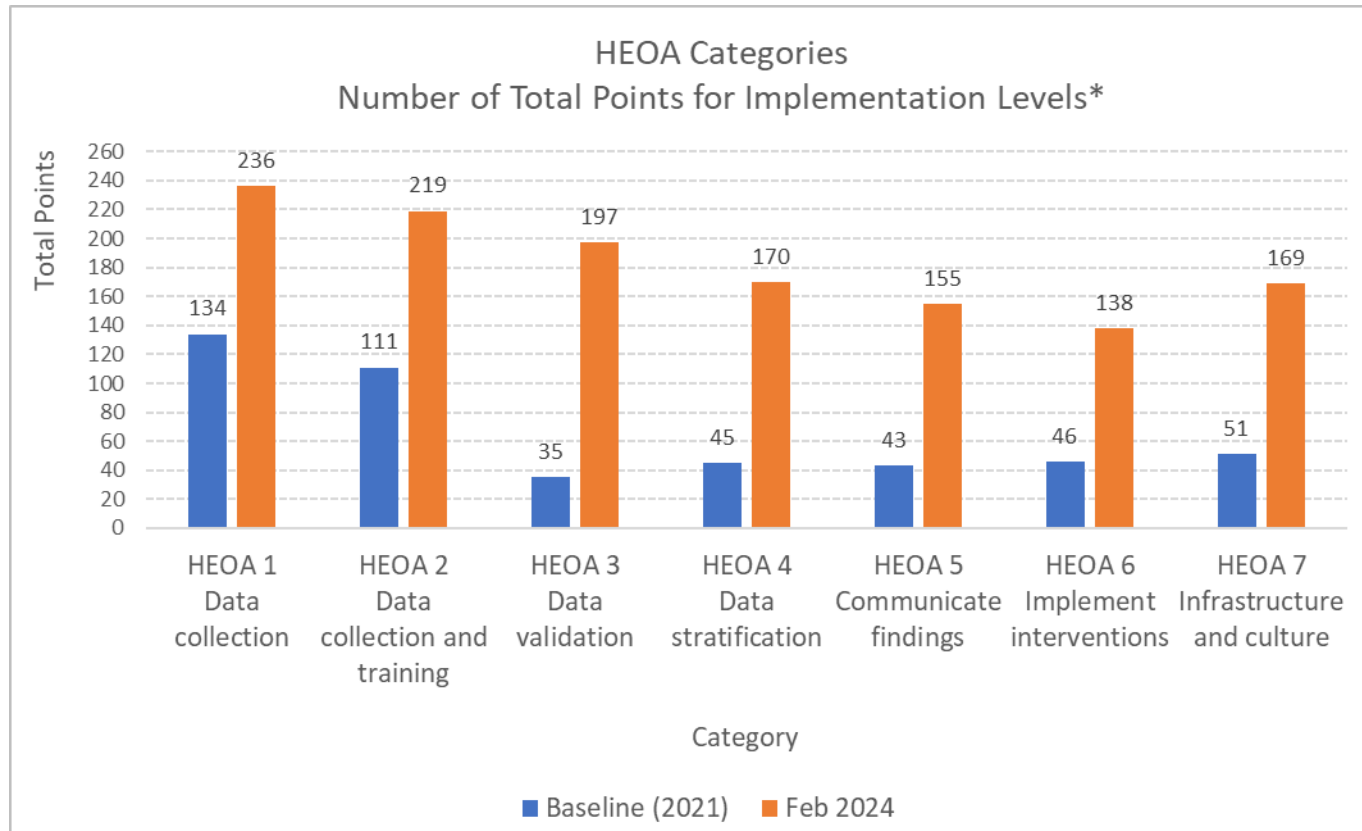
Source:
CMS claims and NHSN data as of October 2022-October 2023

Patient and Family Engagement Metrics



- Meeting internal goal of 80% for PFE 2 and PFE 3
- Action Plan:
 1. Identified hospitals with “no” responses
 2. Partners to ask during next scheduled assessments
 3. Update PFE coaching package
 4. Promote new resources, focusing on rural hospitals, in HQIC newsletter

Health Equity Organizational Assessment (HEOA)



- Hospitals have improved in all seven categories
- Highest percent improvement in HEOA 3 (463%) and HEOA 4 (278%)
- Action plan:
 1. Partners to ask during next scheduled assessments
 2. Promote monthly Health Equity Office Hours led by our subject matter expert
 3. Continue to promote resources in HQIC newsletter

Implementation levels*

0 = Not performing any activities in this area

1 = Basic/fundamental

2 = Mid-level/intermediate

3 = Advanced

HQIC Accomplishments as of February 2024 (Despite COVID)



274
Lives Saved

1,368
Harm Events Avoided

\$39,660,187
Cost Savings



The Road to Success HQIC by the Numbers

19 Cohorts
3,990 Coaching Calls
180 Calls with SMEs
15 Coaching Packages
23 IP Office Hours
11 Health Equity Office Hours

1,613 HQIC-related landing page visits
1,164 Contacts receiving HQIC newsletters

146 Enrolled Hospitals
13 States
92% CAH or Rural

7 Community of Practice (CoP) Calls
1 High Reliability Event
1 CMS hospital site visit
3 Blogs
2 Quality Conference 2024 presentations

TECHNICAL ASSISTANCE

PROGRAM


CMS LED EVENTS

MARKETING AND COMMUNICATIONS

EDUCATIONAL

33 LAN Events
95% Overall Satisfaction Rate
6 Quality Leader Summits
33 Success Stories

CMS Quality Conference 2024 Presentations



A Case Study for Enhancing Patient Safety Through Peer-to-Peer Learning and 1:1 Technical Assistance

Presented by:
Alliant Health Solutions
TMF Health Quality Institute



A Practical Approach to Hospital Health Equity Implementation



Donna Cohen, RN, BSN, CCM
Director, Quality Projects



Karen Holtz, MT (ASCP), MS, CPHQ
HQIC Education Lead



Rosa Abraha, MPH
Health Equity Lead

LAN Events and Quality Leader Summits – Featured Speakers



Success Stories – Featured Hospitals



CMS Led Events – Community of Practice (CoP Calls), Blogs, High Reliability Event, and Site Visit



Hospital Portal Users

- HQIC portal is available to hospitals to view completed assessments, data and trends, and post discussions
- 129 unique hospitals logging into the portal

Top 3 hospital users:



Special Shout Out



All hospitals with
baseline of zero and
maintaining zero in
patient safety measures.

Key Attributes of Success – Alliant Health (2 hospitals)



Karen Holtz, MT(ASCP), MS, CPHQ
HQIC Education Lead

- Customized one-on-one calls with subject matter experts and new staff to roles, e.g., Infection Preventionist, Health Equity Leader
- Discussion of the “top five” evidence-based interventions from the coaching packages
- Peer-to-peer learning and networking, e.g., LAN events, large hospitals meeting with other large hospitals to discuss patient safety topics

Key Attributes of Success – Alabama Hospital Association (19 hospitals)



Carol Snowden, RN, BSN
Quality Director

- Alliant Subject Matter Experts engagement during calls
- Power BI data is shared during each call; however, hospitals were encouraged to share their current data to reflect progress or need for additional interventions on identified opportunities
- Physician peer-to-peer lunch and learn was successful in developing a robust sepsis program
- All quality directors and case management leaders were invited to their respective Partnership for Community Health (PCH) meetings to network and strategize on ways to improve transitions of care. This also helped hospitals meet the new CMS health equity requirements for community engagement.

Key Attributes of Success – Comagine Health (45 hospitals)



Rhonda Bowen, MPH,
CIC, CPPS, CPHQ
Senior Improvement
Advisor, Patient Safety

- Leadership involvement was one of the key drivers
 - Ongoing communication with the Board and C-suite
- Ongoing data driven approach
- One to one technical assistance on implementation of evidence-based practices
- Collaboration with local, state agencies, and peer to peer
- Organization wide communication of current performance data
 - Frontline involvement of staff within the organization
- Commitment to continuous quality improvement

Key Attributes of Success – Georgia Hospital Association (64 hospitals)



Lynne Hall, RN, BSN, LSSBB
Master TeamSTEPPS Trainer
Senior Quality Improvement
Specialist

- Leadership involvement - better improvement efforts when the C-Suite is involved
- Review of data - Keeping the data and the interventions in front of the hospitals helps with accountability
- Encouraging dashboards and policies relating to interventions
 - Posting the data in key areas of the hospital (lobby, nursing floors, etc.) allows for transparency and holds hospitals accountable
- Having staff involved in the measures creates a better buy-in when making changes
- Encouraging hospitals to involve the patient and family caregiver's voice and input through a strong patient and family engagement culture that has a conduit to hospital leadership. This includes adding the patient voice to the organization's governing board.
- Promoting equal care delivery as a core value of the hospital that is data driven and actively addressed at all levels of the organization

Key Attributes of Success – KFMC/Konza (11 hospitals)



Nadyne Hagmeier, RN
Quality Improvement Consultant

- Technical assistance in the form of monthly coaching calls kept teams on task and engaged over time. 30-day action plans held them accountable for continued improvement.
- Ongoing data review with teams each month to identify areas of opportunity that may not have been their primary area of focus but benefitted from attention
- Challenging teams to look beyond the usual and routine
- Tap into and utilize existing data sources and partnerships and explore collaboration opportunities in the setting of limited resources
- Take credit for what you are doing!

Optim Health System Speakers



Lora Duncan, MSN, RN, MBA
Chief Nursing and Clinical Operations Officer
Optim Health System

Mrs. Duncan has worked for over 20 years in medical industry. In her current role, she provides leadership and direction for the nursing staff, care coordination, pharmacy, regulatory compliance and support services, as well as emergency medicine services. She received her undergraduate from West Virginia University, a Masters in Nursing from Chamberlain University and Masters in Business from Strayer University.



Lisa Waters, RN, CEN
Quality Director, Patient Safety and
Employee Health Nurse

Lisa Waters has been a nurse for 32 years and has worked in many different roles including ED and Med-Surg Staff Nurse, Health Services Administrator, Emergency Department manager and a Flight Nurse. Her goal in her work life is to utilize quality metrics to produce patient safety and positive patient outcomes. She is currently studying for her CPHQ (Certified Professional in Healthcare Quality) certification exam.



Teal Jeffers, MSN, RN, CIC
Infection Preventionist/Risk Manager
Optim Medical Center Tattnall

Teal Jeffers has worked as a registered nurse in the hospital setting for over 33 years. Teal earned an associate degree from Armstrong State College in Savannah, GA, a Bachelor of Science in nursing from Georgia Southern University in Statesboro, GA, and a Master of Science in nursing from Walden University in Minneapolis, MN. She is an ordained minister and her goal in life is to assist others in finding their true purpose while enjoying life's journey.

Wheel of Life

- The Wheel of Life, also known as the *life balance wheel*, the *coaching wheel* or the *life wheel*, is used to achieve a work-life balance by assessing and understanding how areas in your life are currently balanced.
- Paul J. Meyer, one of the originators of what is now known as ‘life coaching’ and the founder of the Success Motivation Institute, developed the wheel of life's modern-day version in 1960. The spokes of the wheel represent the most important aspects of your life, such as:
 - Family, home life, health, wellbeing, career, finances, spirituality

Sometimes, we may view our lives sarcastically as the “Wheel of Strife!” Stressors on every side are in constant motion, much like a hamster wheel. We are often running at full speed but going nowhere fast and can’t find the time to jump off the wheel!

Professional Wheel of Life

- Our system CEO challenged the executive team to complete this wheel. The findings were varied but thought-provoking. Our Chief Clinical Officer Lora Duncan then challenged her nursing administrative team to complete.

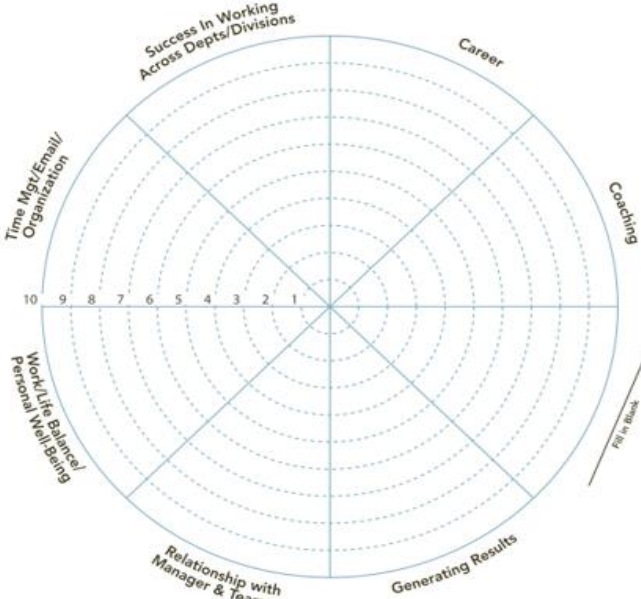
Professional Wheel of Life

It may be time to explore your professional life in a new way. Below is a template of a **Professional Wheel of Life**. This wheel represents the many facets of one's work life and is a good tool to begin with. For many of us, work is more than half of our waking hours and deserves our real attention. What is your relationship to your professional life? What are the questions you ask your self about it?

Create your wheel

- Print the wheel out and use it as it is, or add or subtract any wedges you want.
- Be sure to make the wedges reflect the parts of your professional life that are important to you.
- Darken the line of each wedge at your level of satisfaction. The center of the wheel is 1 (least satisfying) and the outer edge is 10 (most satisfying).
- Then connect the lines of each wedge.

Once you've done this, you may discover that, like many people, your lines don't match up. Imagine putting a set of these wheels on a car and driving around. Does the ride allow you to be creative and fulfilled? Or do your wheels keep you stuck with your teeth rattling?



- Self-Assessment
Let's take a few minutes to complete the Wheel of Life that was included in registration.

You will need to print this out. While you are printing, we will provide instructions.

Evaluation

- The concept behind the wheel of life is that you can find fulfillment and happiness if you can find the right balance among your categories.
- So, you'll want to use your wheel of life to visually assess how much time is being devoted to each of the important areas of your work-life.

Evaluation

Here are some steps you can follow to make that assessment:

- Go through each category and assess how much attention you're currently devoting to it
- Assign each category a mark on a scale of 0 to 10, with 0 being the least attention and 10 being the highest attention
- Once you determine a category's score, write it down and then mark it in the corresponding spoke

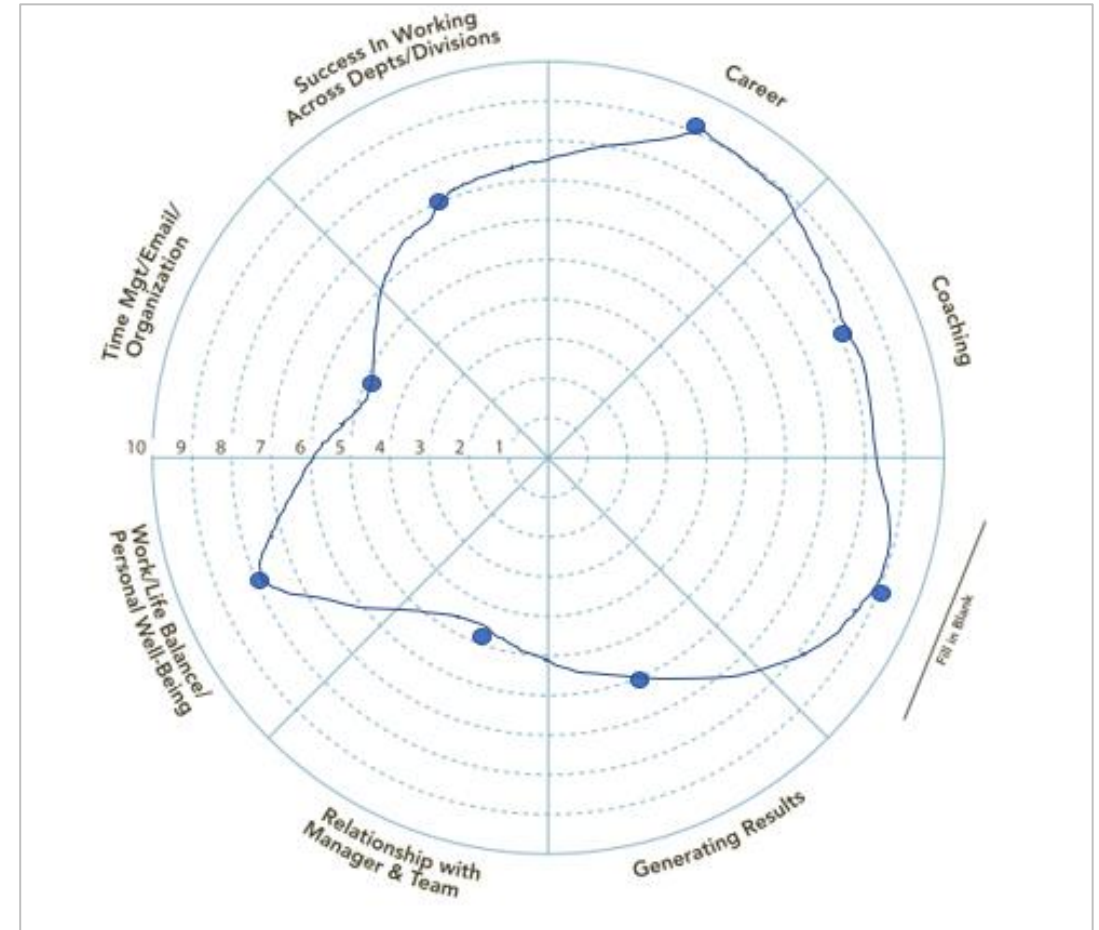
Evaluation of Results

Connect the Dots

After you have gone through each category and marked your score on your wheel of life, connect each mark around the circle. By connecting the dots, you can see how each area compares and decide whether your wheel appears to be balanced.

Compare the Results to your Ideal Levels

Different areas of your life require different amounts of attention, especially in various seasons. In other words, achieving a balanced work-life doesn't have to mean that you're giving an equal amount of focus to each category. Consider what your ideal attention level is for each category and then plot those scores on your wheel of life in a different color.



Make a Change

Take steps to address the areas you'd like to improve

Assess any gaps that exist between your current and ideal work-life balance. There could be areas where you feel you're unable to devote the desired amount of attention. Using this visual tool, you can identify the gaps and decide the areas in your life that need more of your time and attention.

Wheel of Life Categories


- Success in working across departments/divisions
- Career
- Coaching
- Generating results
- Relationship with manager and team
- Work-life balance/personal well-being
- Time management/email/organization
- Fill in the blank (add an area of importance that may affect your work-life balance)

How to Use the Wheel of Life for Personal Use

It can be a great personal tool to help you find balance in your life. Some specific situations you might use it to help navigate include:

- Preparing for a promotion
 - You can use the different categories of your wheel to sort out which skills or experiences you might need to prepare for a change at work.
- Stress management
 - Use the wheel to identify and evaluate different stressors in your life and develop a better understanding of how to manage those stressors.
- Evaluating family life
 - Use the wheel to assess your parenting or family management style. Label the wheel areas with elements of family management, then assess how well you focus on each area.



Wellbeing Guide and Measures



Impact Wellbeing Guide

Taking Action to Improve Healthcare Worker Wellbeing

Wellbeing: "A state in which people perceive their lives as going well, including aspects of their physical, emotional, and psychological health, productivity, and economic well-being."¹



NIOSH's *Impact Wellbeing* Guide for a step-by-step systems approach to improving wellbeing and building trust between leaders and healthcare workers.

<https://www.cdc.gov/niosh/impactwellbeing/guide/>

<https://www.cdc.gov/niosh/impactwellbeing/>

¹ Source: [National Institute for Occupational Safety and Health](https://www.cdc.gov/niosh/impactwellbeing/guide/)

Actions in This Guide

- 
- Action 1:**
Review Your Hospital's Operations
- 
- Action 2:**
Build Your Professional Wellbeing Team
- 
- Action 3:**
Break Down Barriers for Help-Seeking
- 
- Action 4:**
Communicate Your Commitment to Professional Wellbeing
- 
- Action 5:**
Integrate Professional Wellbeing into Quality Improvement
- 
- Action 6:**
Develop Your Long-Term Professional Wellbeing Plan

Professional wellbeing measures to consider:

- Leading indicators (meaning predictive measurements) might include:
 - A reduction in time spent on hospital work outside of work hours.
 - A reduction in the amount of time healthcare workers spend reading messages in their inbox.
 - A decrease in the number of nightshifts worked by non-nocturnists.
 - An increase in uninterrupted or focused work time.
- Lagging indicators (meaning output measurements) might include:
 - A decreased difference between the number of actual hours worked by healthcare workers and the number of ideal hours.
 - A reduction in the amount of time that workers are unexpectedly absent from work not including sick leave.
 - A reduction in staff turnover.
 - A reduction in involuntary terminations.
 - An increase in the amount of positive feedback received from healthcare workers.
 - Improved patient experience scores.

Upcoming Events: Office Hours - Ask the Experts

Infection Prevention (IP) Chats
July 24 from at 2:00 p.m. ET

[Registration link](#)



Amy Ward, RN, BS, MS, CIC
Infection Preventionist

JOIN OUR UPCOMING WEBINAR EVENTS

Join Our Office Hours-IP Chats

REGISTER FOR THESE UPCOMING DATES

Event Description:
IP Chats are quarterly networking events to build knowledge, share experience and provide support for hospital infection preventionists. Have questions or ideas for content? Contact Amy Ward, MS, BSN, RN, CIC, FAPIC, AHS Patient Safety Manager, at Amy.Ward@Allianthealth.org.

Infection Prevention Bite-Sized Learning Videos:
Alliant HQIC developed a series of bite-sized learnings to assist hospital infection preventionists with some of the most frequently asked questions regarding the National Healthcare Safety Network (NHSN) database. Topics include:

- NHSN New User Introduction
- Adding, Assigning Rights and Deactivating Users in NHSN
- Location Mapping and NHSN Training
- NHSN Annual Survey and Monthly Reporting Plans
- LabID Reporting

[\[93\] Alliant's HQIC Infection Prevention Chat - YouTube](#)

Additional infection prevention resources can be found on the [Alliant HQIC website](#).

HQIC Office Hours:
Infection Prevention Chat - January 24, 2024

HQIC Office Hours:
Infection Prevention Chat - April 24, 2024

HQIC Office Hours:
Infection Prevention Chat - July 24, 2024

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

Health Equity
Every 3rd Thursday from 3-4:00 p.m. ET

[Registration link](#)

JOIN OUR UPCOMING WEBINAR EVENT

ALLIANT HQIC
Health Equity Office Hours

Tues, Jan. 16 from 3-4:00 p.m. ET & Every 3rd Thursday from 3-4:00 p.m. ET from February through August 2024 via ZOOM

FEATURED SPEAKERS:

ROSA ABRABA, MPH
Health Equity Lead
Alliant Health Solutions

LEANN PRITCHETT, MSN, RN, CPHQ
System Director of Quality and Safety
Tift Regional Medical Center

AUDIENCE:
Health equity team leaders, quality and patient safety professionals, clinical social workers, community and population health professionals, clinical team members, leadership

Office hours will be held the 3rd Thursday of the month from 3-4:00 p.m. ET. Please register to attend.

Jan. 16, 2024 • Feb. 15, 2024 • Mar. 21, 2024 • Apr. 18, 2024
May 16, 2024 • Jun. 20, 2024 • Jul. 18, 2024 • Aug. 15, 2024

OVERVIEW:
Interested in networking with peers and learning about the health equity regulatory requirements and best ways to implement at your hospital? Join our subject matter experts from Alliant Health Solutions and TR Regional Medical Center (TRC) for monthly interactive office hours.

Office hours are participant driven and with minimum slide presentations. Discussions will focus on the six health equity planning and action steps as well as other questions from the hospitals, e.g., CEO engagement.

Click on titles to register

01.16.24 - TO3 - HQIC Health Equity Office Hours

02.15.24 - TO3 - HQIC Health Equity Office Hours

03.21.24 - TO3 - HQIC Health Equity Office Hours

04.18.24 - TO3 - HQIC Health Equity Office Hours

05.16.24 - TO3 - HQIC Health Equity Office Hours

06.20.24 - TO3 - HQIC Health Equity Office Hours

07.18.24 - TO3 - HQIC Health Equity Office Hours

08.15.24 - TO3 - HQIC Health Equity Office Hours

Southwell



LeAnn Pritchett, MSN RN CPHQ
System Director of Quality & Safety
Tift Regional Medical Center



Upcoming Events

Learning and Action Network (LAN)

Daily Safety Huddles and Using High Reliability Organization (HRO) Principles

Tues, Jun 25
Flyer forthcoming

Community of Practice (CoP) Call
Enhancing Capacity: Reengineering Fall and Fall Injury Programs

Thurs, May 9 from 1-2:00 p.m. ET

[Register Here](#)

HQIC Reliability and Resilience Learning Action Series

Second session on June 21, 2024

Webinars aim to educate and engage hospital leaders on the concepts and practices of resilience and high reliability in health care.

[Register here](#)



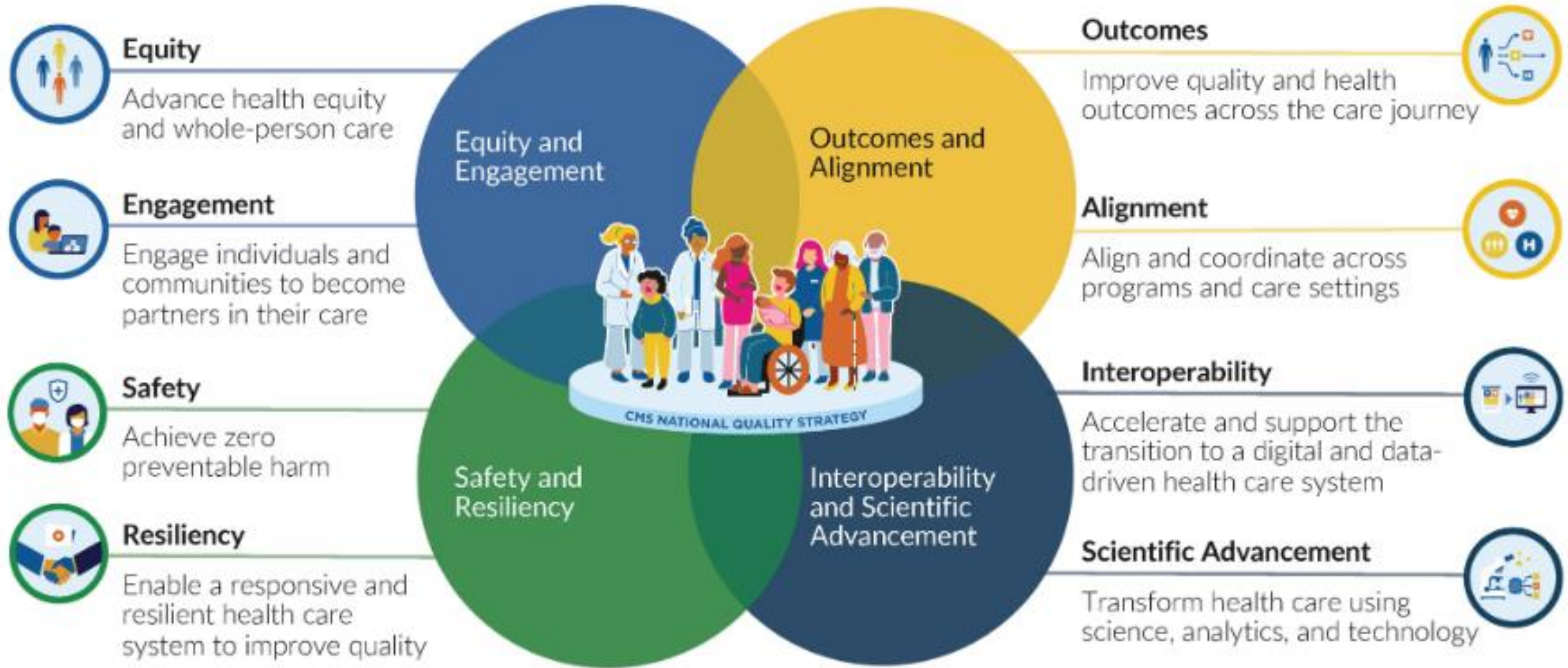
Vision for the 13th Scope of Work

- Program focus and design to align with the **HHS Strategic Plan, National Quality Strategy, CMS' Strategic Pillars, CMS' Behavioral Health Strategy and Health Equity Strategy**
- **Target quality improvement models** where evidence suggests they will improve outcomes. CMS led and direct QI – both the “what” and “how” it is done with clearly defined interventions
- Shift the QIO program from an information dissemination role via QI education, **towards QI implementation and national leadership of QI**. Help facilities to assess and build their internal capacity to drive culture change and implement improvements at all the levels that are necessary to effectively implement a quality improvement and management system. Meaningfully **influencing leadership and governance** is key.

Vision for the 13th Scope of Work, continued

- **Foundation** is the **Community Health model** so that QI is targeted at the health system as a whole in an integrated fashion, not at discrete, fragmented models in isolation
- Ensure that collection and **use of data**, which is foundational to all QI, is brought into the modern age with state-of-the-art IT systems and enhanced data analytics capability.
- Optimize use of **all levers for outcomes, oversight and culture change:** program design, payment model, contract structure, selection of contractors, role of CMS staff, technology
- Position QIO Program as the **nation's resource for QI**, providing integrated, systemic QI while also serving as CMS' rapid response arm to address quality and safety issues.

CMS National Quality Strategic Goals



Q&A/Wrap Up

- Type questions and comments in Chat
- Complete evaluation polling questions upon exit



Thank you for attending!

Making Health Care Better *Together*

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

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