



HOSPITAL QUALITY IMPROVEMENT CONTRACTORS (HQIC)

Oct. 23, 2020



CMS National Focus on Quality and Patient Safety Learning Collaboratives

CMS program (HQIC) with focused approach to improvement in a smaller subset of clinical topics, plus the addition of new topics, for a targeted group of hospitals across the U.S.

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12

CMS program (HEN) with BOLD goals to reduce many types of hospital acquired harm across every hospital in the U.S.

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Additional year of the HEN (HEN 2.0) program with same goals across every hospital in the U.S.

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CMS program (HIIN) with slightly more manageable goals to reduce a smaller subset of hospital acquired harm across every hospital in the U.S.

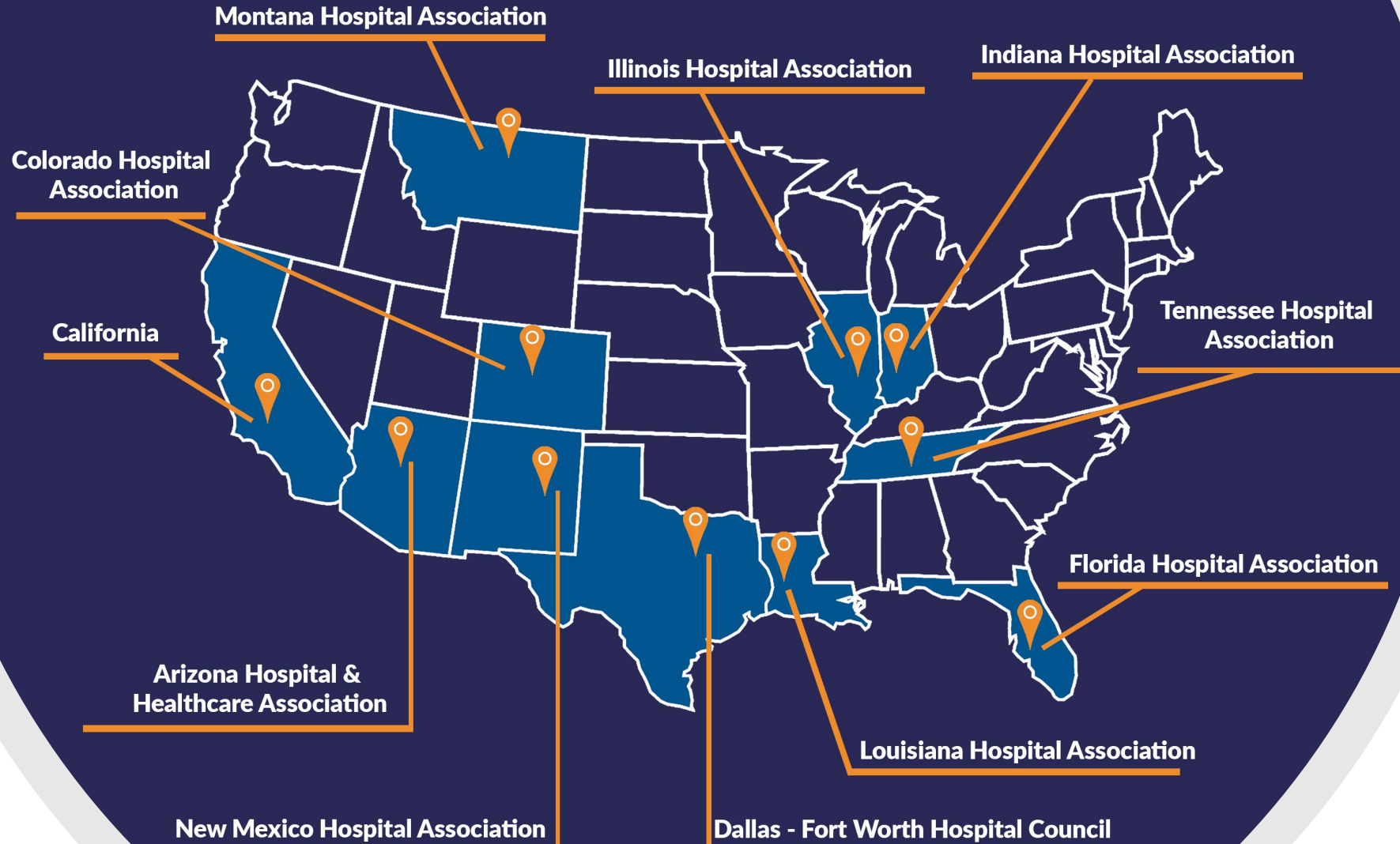
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How We Got Here?

- **Hospitals – How did you get here?:**
 - CMS provided a list of 58 Louisiana hospitals they deemed “priority”
- **LHAREF – How did we get here?**
 - May 2020:
 - CMS issued RFP for NQIIC Task Order #3 (HQIC);
 - We distributed notice to the priority hospital to ascertain interest; and
 - We chose to partner with the Deloitte Consulting/Missouri Hospital Association/Convergence Health triad in their HQIC bid.
 - Sept. 2020:
 - CMS awarded 9 HQIC contracts;
 - Deloitte was not one of the 9; and
 - We were recruited by 3 award recipients and, after much due diligence, very happily chose the Cynosure team.

Cynosure HQIC



LHAREF Leadership and Staff Supporting You



**Ken Alexander,
Vice President
of Member
Services
and Quality
Improvement**



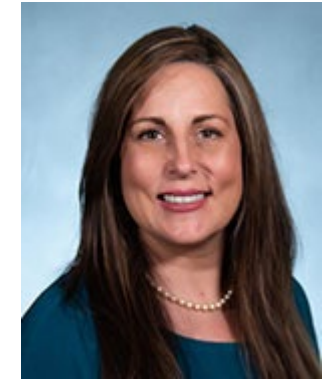
**Michelle
Smith, Quality
Program
Manager**



**Lynn Barrett,
Quality
Improvement
Specialist**



**Myra Foley,
Quality
Improvement
Specialist**



**Angela
Lockhart,
Quality
Coordinator**

LHAREF Partnerships with Cynosure Health

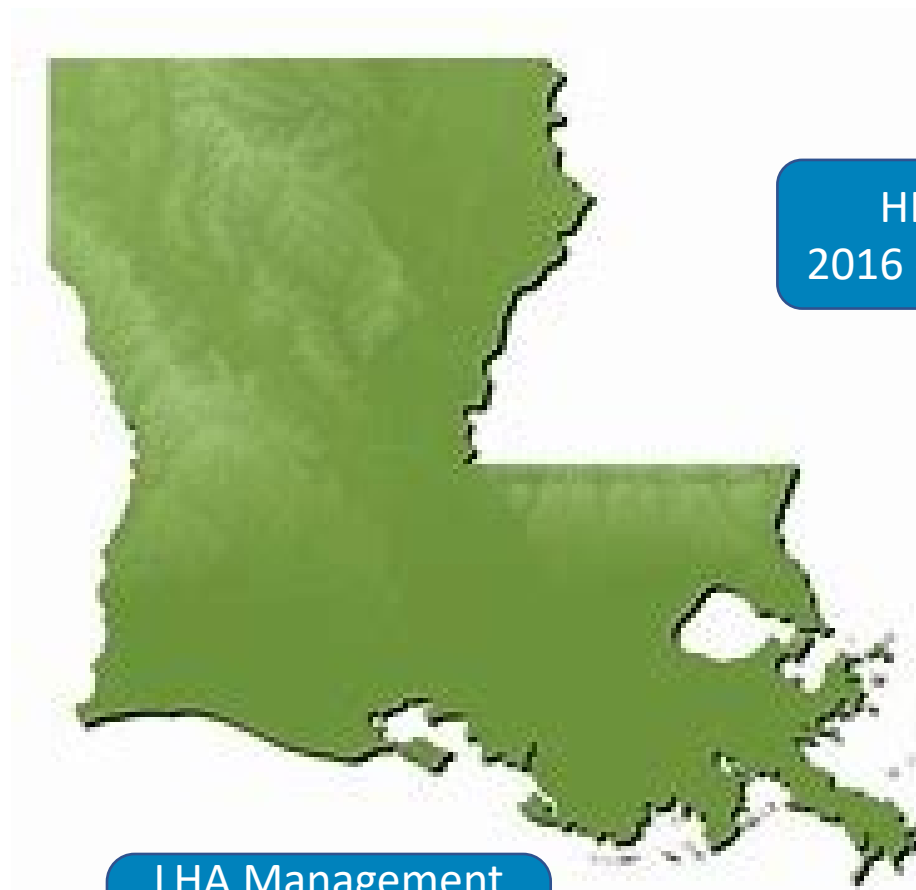
HEN
2012-2014

HEN 2.0
2015-2016

HIIN
2016 - 2020

STRIVE
March 2018

LHA Management
Corp
Jan. 2019





Meet the Team!

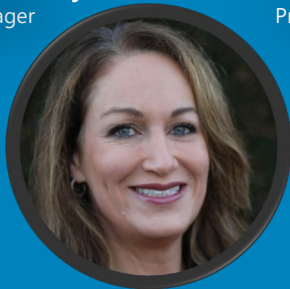
OPERATIONS



Jennifer Stockey
Sr. Project Manager



Sam Simpson
Production & Communication



Tracy Fisk
Executive Assistant

LEADERSHIP



Bruce Spurlock
President & CEO



Marsha Chan
Chief Administrative Officer

IMPROVEMENT ADVISORS



Barb DeBaun
Improvement Advisor



Alex Stack
Improvement Advisor



Steve Tremain
Physician Advisor



Jackie Conrad
Improvement Advisor



Maryanne Whitney
Improvement Advisor



Kim Werkmeister
Improvement Advisor



HQIC: A 4-Year Project To:

Improve Behavioral Health Outcomes, with a focus on Decreased Opioid Misuse

Increase Patient Safety with a focus on reduction of harm

Increase the Quality of Care Transitions with a focus on high utilizers

Support hospitals responding to public health emergencies

Benefits of LHAREF Partnership with Cynosure HQIC

CLIC - Customized and democratized education, technical assistance and coaching including access to our on-demand virtual learning platform

Subject matter experts for all topics

Tools and resources to enable our hospitals to excel, including our discovery tools which quickly and easily help to identify improvement priorities

Meaningful data reports demonstrating performance over time with applicable benchmarks

Tailored resources to engage, train, and build capacity and competency for staff at all levels

Affinity groups for emerging topics such as COVID-19 and or other areas of interest



HQIC: What's in it for my hospital?

Just in time methods to learn, implement and engage your entire hospital staff

Access to the nuts and bolts of everything you need for improvement

Discovery Tool methodology

Voice of the patient and family embedded in the work

Mini RCA HAPI Process Improvement Discovery Tool (Minimum 5 charts/Maximum 10 charts).
 Focus on most recent stage 2 or 3 hospital acquired injuries within the last 12 months.
 Audit chart for documentation 72 hours or 3 days prior to discovery; and 72 hours after discovery of the HAPI.

Note: Do NOT spend more than 20-30 minutes per chart!

Instructions: (1) If the answer to the question is "NO", mark an X in the box to indicate a possible process failure. You may check more than one box per chart.
 (2) The processes with the most common failures could be a priority focus.
 Document NA for those criteria that do not apply.

	Chart #	Chart #	Chart #	Chart #	Chart #	Chart #	Chart #	Chart #
HAPI DETAIL								
Anatomical Location of HAPI								
LOS when discovered								
Unit location of HAPI discovered								
Stage when discovered								
Was the patient transferred prior to discovery?								
PROCESS								
Risk Screening								
A standard HAPI risk screening tool was used to assess this patient's risk.								

**Innovative,
 Practical tools
 and resources**

**YOUR BLUEPRINT
 TO FIGHT THE
 OPIOID EPIDEMIC**

*Proven Strategies
 for Hospitals*



CASE FOR CHANGE

**BLUEPRINT FOR
 SUCCESS**

KEY MILESTONES TO GUIDE
 YOUR CHANGE PLANNING

Days Between Events Control Chart





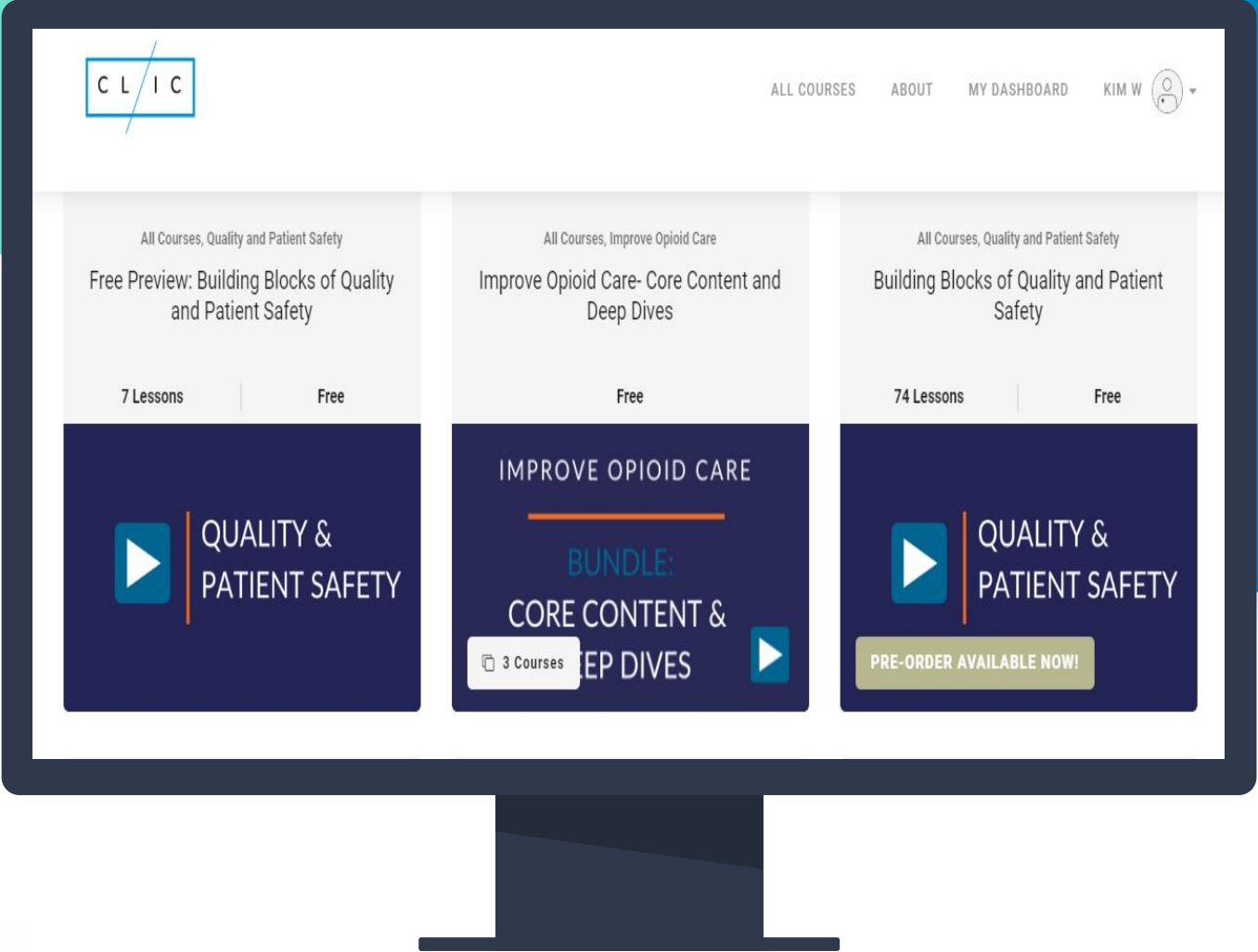
Patient and Family Engagement Addressing Health Equity The Funfetti Approach





CLIC

Cynosure Learning and Improvement Connection



CLIC

Cynosure Learning and Improvement Connection

A Few of the CLIC Courses:

- Strategies for Engaging the Whole Team in QI
- Building Blocks of Infection Prevention
- Nuts and Bolts of Quality Improvement and Patient Safety
- Drivers for Improvement in Clinical Topic Areas such as Readmissions, CAUTI, CLABSI, Adverse Drug Events
- Foundational Quality Improvement Training for Middle Managers
- Board of Directors Quality Improvement and Patient Safety Training



Let's Take a Look



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and Improvement
Connection

What Will Be Expected of My Hospital if We Join the Cynosure HQIC?



Take advantage of the resources available – online learning, improvement tools, access to subject matter experts, collaboration with other hospitals



Track improvement through data reporting



Share your bright spots and opportunities with others

What Will We Be Working to Improve?

Opioid stewardship and reduction of harm from opioids

Care transitions and readmissions, especially for the high utilization population

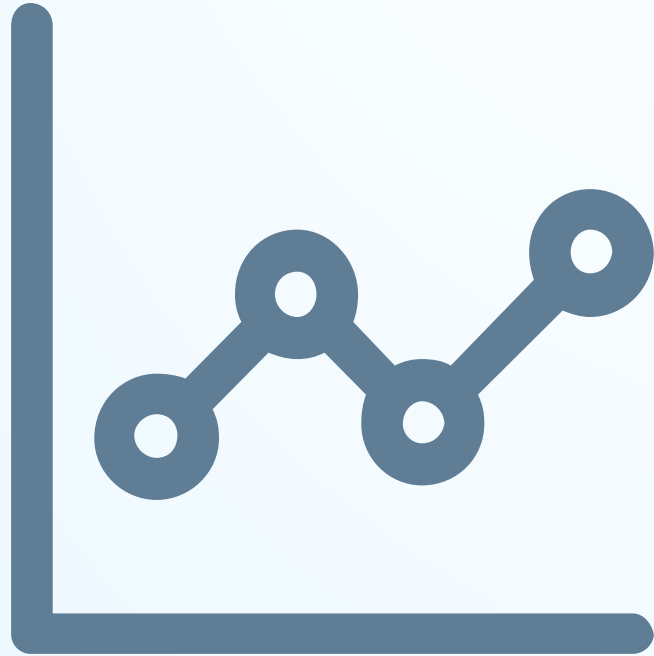
Patient safety, namely CAUTI, CLABSI, HAPI, ADE, Sepsis, and Antibiotic Stewardship

Reduction in all cause harm

Response to public health emergencies, such as COVID

Patient and family engagement

How Will Data be Submitted?





Together we can improve further, faster





- Commit: CEO and program lead both sign and return the commitment form to msmith@lhaonline.org
- Questions?: Contact Michelle Smith, msmith@lhaonline.org
- Already committed: THANK YOU! Stay tuned for further instructions