



*Iowa Healthcare
Collaborative*

Hospital Engagement Network: A Data Update

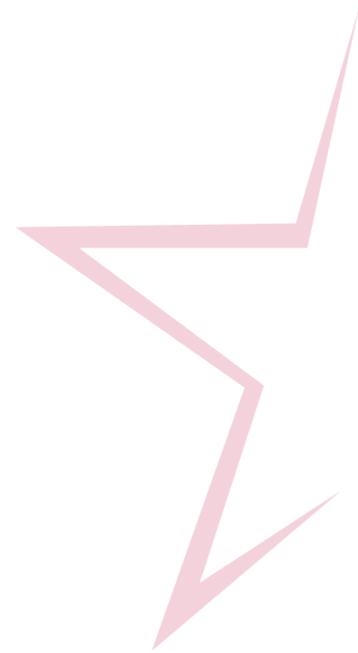
Iowa Healthcare Collaborative

Objectives

- Discuss the effect of the Partnership for Patients (PfP) Hospital Engagement Network (HEN) statewide and nationally.
 - Discuss the successful impact of Iowa hospitals on improving safety across the board through the PfP HEN.
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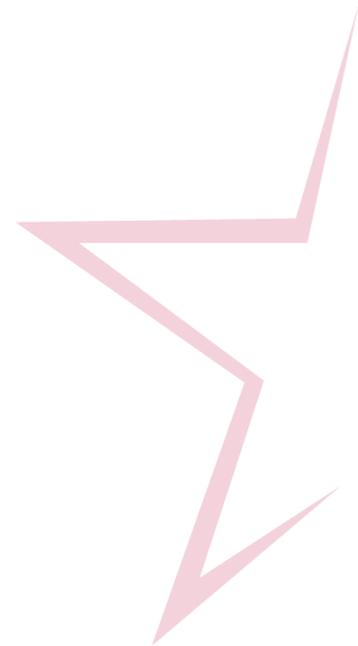
History of the HEN

- CMS contract through the Innovation Center
- Initial contract period started in 2012
 - Ended in December 2014
- HEN 2.0 awarded in September 2015
 - One year contract



PFP Campaign Goals

- **Reduce preventable inpatient harm by 40%**
 - Deployment of best practices
 - Process-focused local execution
- **Reduce readmission by 20%**
 - Care coordination
 - Aligning resources within the community

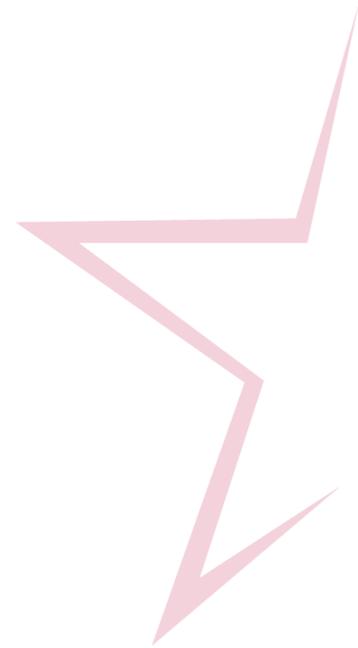


HIIN

- Hospital Improvement and Innovation Network (HIIN)
- New baselines will be 2014
- Bold new aims
 - 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).
- Strong partnerships with QIOs

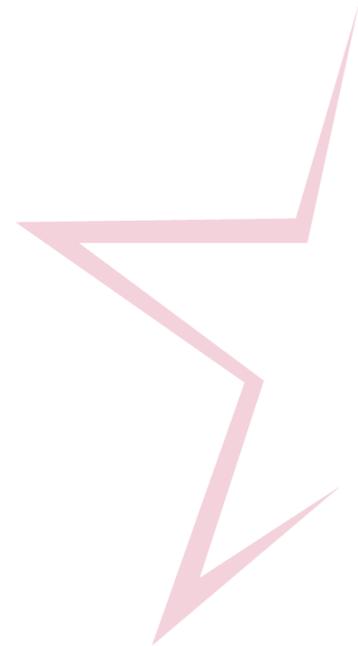
HIIN Areas of Harm

- 11 core focus areas
 - ADE
 - CLABSI
 - CAUTI
 - C. diff
 - Falls and Immobility
 - Pressure Ulcers
 - Sepsis and Septic Shock
 - SSI
 - VTE
 - VAE
 - Readmissions



HIIN Additional focus areas

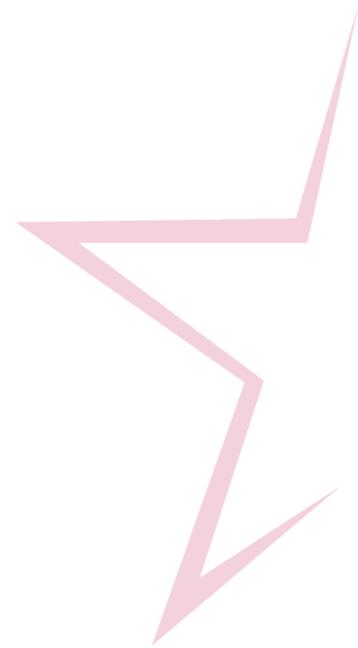
- Multi-drug resistant organisms
 - VRE, CRE, MRSA, etc.
- Antibiotic stewardship
- Diagnostic errors
- Addressing malnutrition in the Inpatient Setting
- Airway Safety
- Iatrogenic Delirium
- Undue Exposure to radiation
- Culture of Safety



IHC Available Resources

- On-site assistance and/or training
 - Improvement Advisors
 - Lean/Leadership/ Process Improvement
 - TeamSTEPPS Training
 - Teachback Training
- Physician and Board Engagement
- Conferences and online learning opportunities
- HEN-HUB
- Assistance with sampling methodologies and EHR data extraction
- IHC Website
- Monthly IP and What's Up calls
- Communities of Practice

HEN 2.0 Metrics



Data Sources

- Statewide Database (In/Out)
 - Submitted to IHA by all Iowa hospitals
- National Safety Healthcare Network (NHSN)
 - Submitted to NHSN/CDC
- Self-Reported
 - Submitted manually through IHC HEN data collection tool

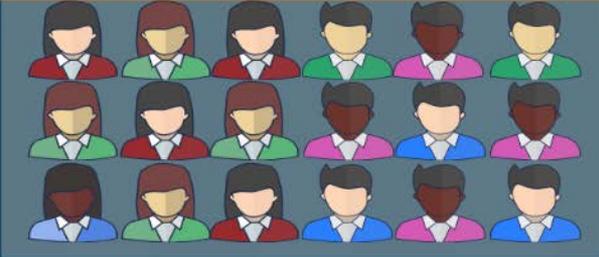
Data Source Totals

- IPOP - 18 measures
- NHSN - 12 measures
- Self Reported
 - Total 42 measures
 - Required 16 -22 measures
 - Falls and ADE are 11-13 of these required measures

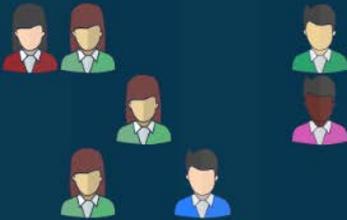
Sampling Encouraged

Sampling: How do we pick who to study?

Population: The whole group you have to pick from



Random Sampling:
Drawing names out of a hat, with no rhyme or reason for selection.



Systematic Sampling:
Sampling based on a predetermined interval. For example, every other person.

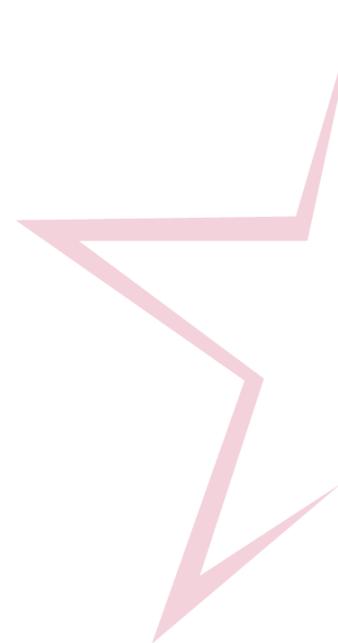


Stratified Sampling:
Separating the groups, then picking randomly from that group. For example, split into men and women, then take a random sample of women.



Data Entry Deadlines

September 2015 - MBQIP Phase 3 measure due October 23, 2015 All reporting due November 15, 2015 60 day CEO Reminder sent out on December 1, 2015	March 2016 - MBQIP Phase 3 measure due April 15, 2016 All reporting due May 15, 2016 60 day CEO Reminder sent out on June 1, 2016
October 2015 - MBQIP Phase 3 measure due November 20, 2015 All reporting due December 15, 2015 60 day CEO Reminder sent out on January 1, 2016	April 2016 - MBQIP Phase 3 measure due May 20, 2016 All reporting due June 15, 2016 60 day CEO Reminder sent out on July 1, 2016
November 2015 - MBQIP Phase 3 measure due December 18, 2015 All reporting due January 15, 2016 60 day CEO Reminder sent out on February 1, 2016	May 2016 - MBQIP Phase 3 measure due June 17, 2016 All reporting due July 15, 2016 60 day CEO Reminder sent out on August 1, 2016
December 2015 - MBQIP Phase 3 measure due January 15, 2016 All reporting due February 15, 2016 60 day CEO Reminder sent out on March 1, 2016	June 2016 - MBQIP Phase 3 measure due July 15, 2016 All reporting due August 15, 2016 60 day CEO Reminder sent out on September 1, 2016
January 2016 - MBQIP Phase 3 measure due February 19, 2016 All reporting due March 15, 2016 60 day CEO Reminder sent out on April 1, 2016	July 2016 - MBQIP Phase 3 measure due August 19, 2016 All reporting due September 15, 2016 60 day CEO Reminder sent out on October 1, 2016
February 2016 - MBQIP Phase 3 measure due March 18, 2016 All reporting due April 15, 2016 60 day CEO Reminder sent out on May 1, 2016	August 2016 - MBQIP Phase 3 measure due September 16, 2016 All reporting due October 15, 2016 60 day CEO Reminder sent out on November 1, 2016

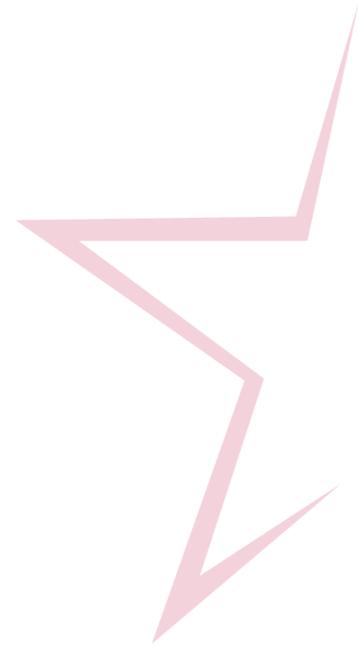


Using Data to Drive Improvement

- Run Charts
- Goal Reports
 - Baseline
 - Variable performance period
 - Auto populate on demand
 - Only metrics that have data entered for ALL months included in performance period will populate

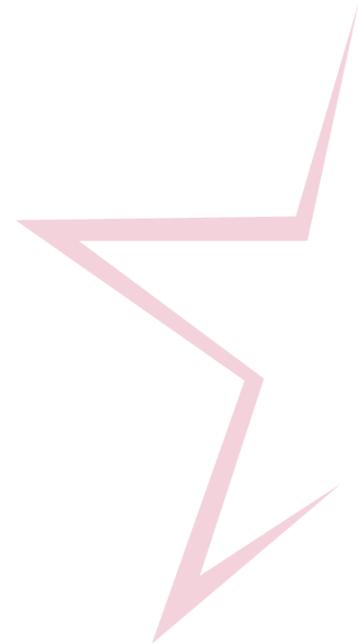
Using Data to Drive Improvement

- Baselines
 - 12-month baselines
- Performance Periods
 - Three-month performance periods

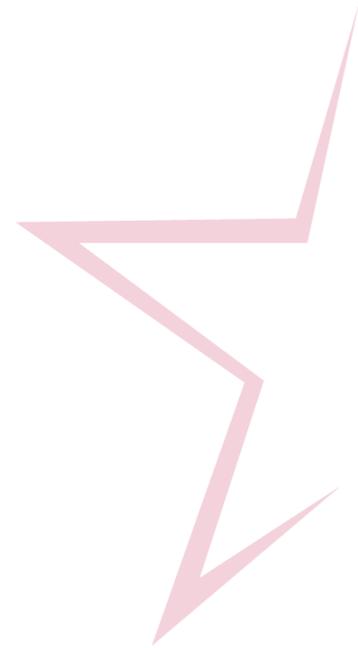


HEN PfP Reporting Database

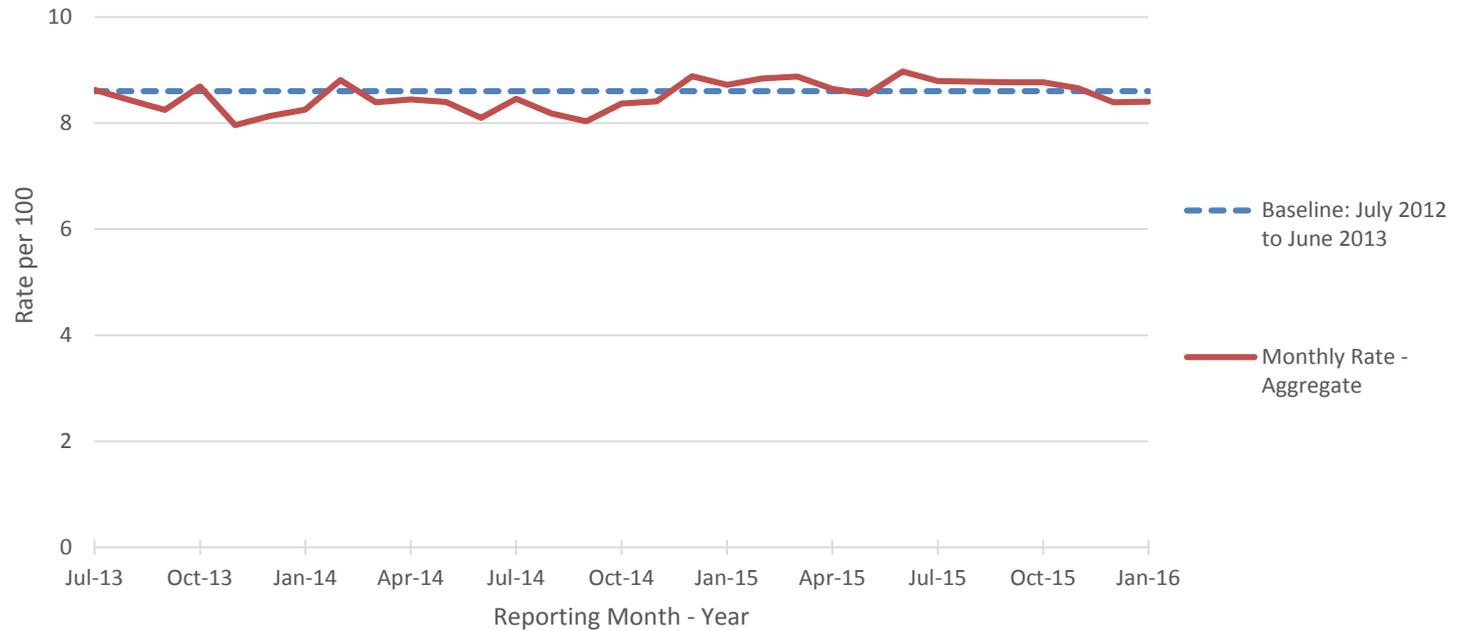
- Additional enhancements coming soon....
 - Phase One
 - Updated Run Charts
 - Export options for external analysis
 - Phase Two
 - Auto-populated CEO dashboard



Current IHC HEN 2.0 Results



Unplanned All-Cause, 30-Day Readmissions to Any Hospital

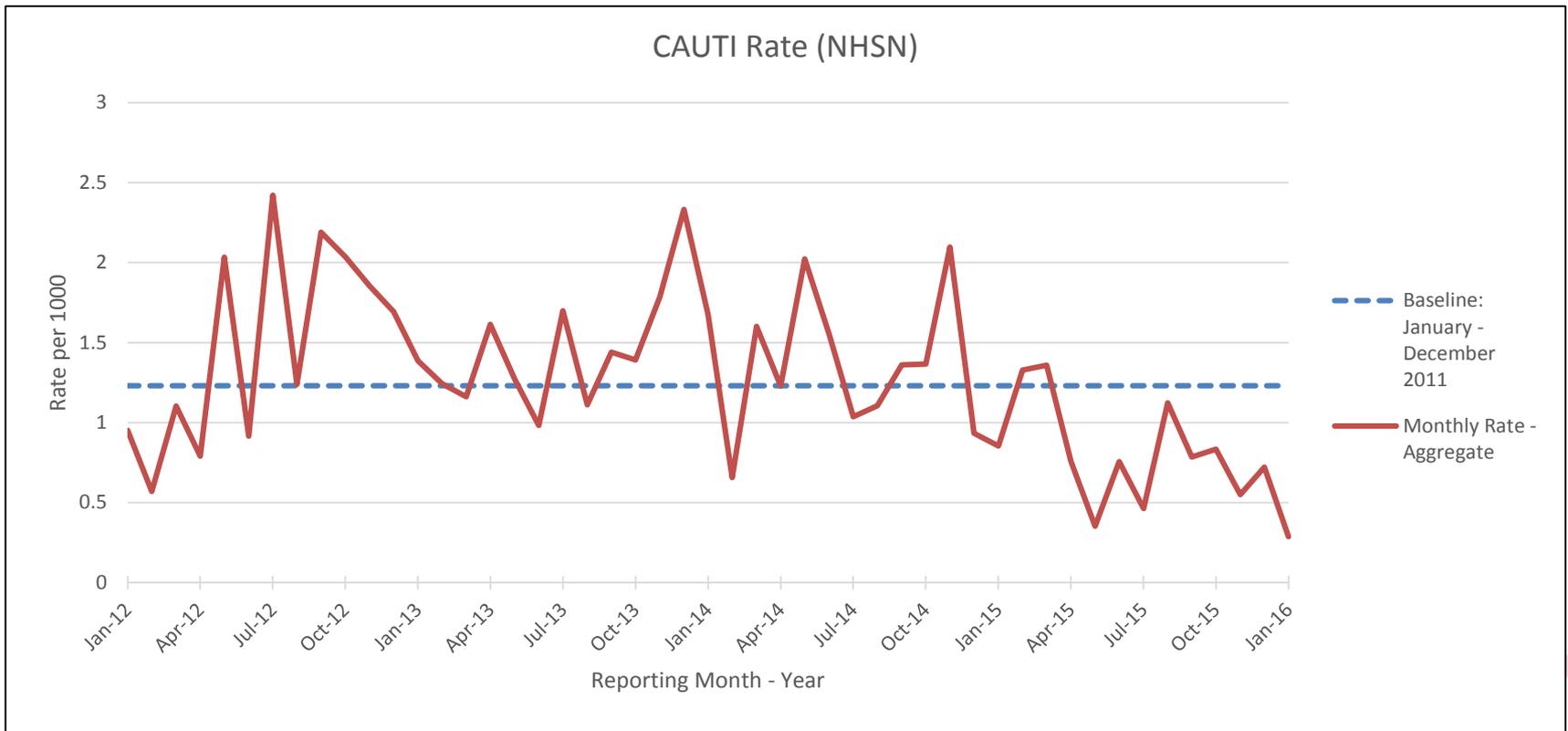


Percent improvement from baseline: 1.4%

Baseline (July 2012 - June 2013): 8.6

Performance Period (Nov 2015 – Jan 2016): 8.48



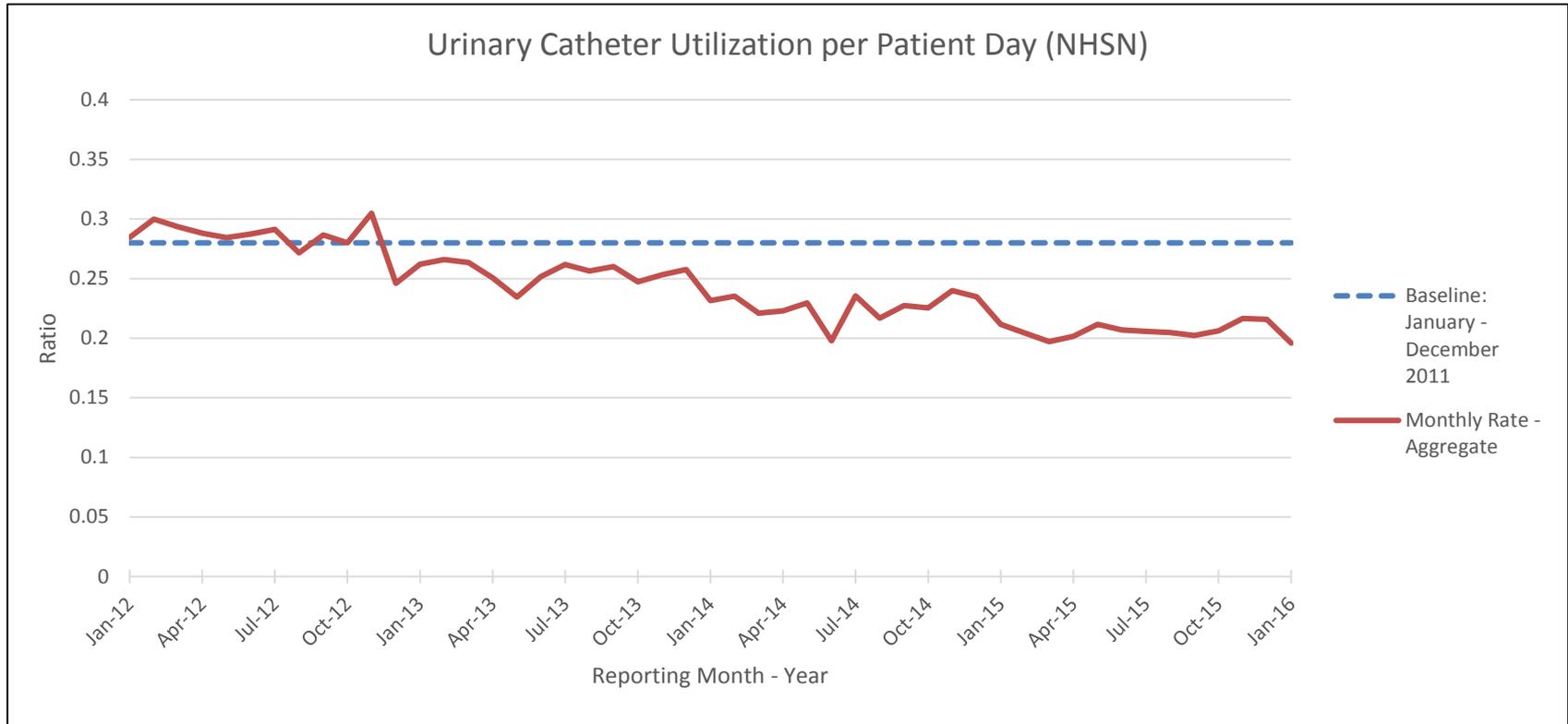


Percent improvement from baseline: 55.28%

Baseline (Jan 2011 - Dec 2011): 1.23

Performance Period (Nov 2015 – Jan 2016): 0.55



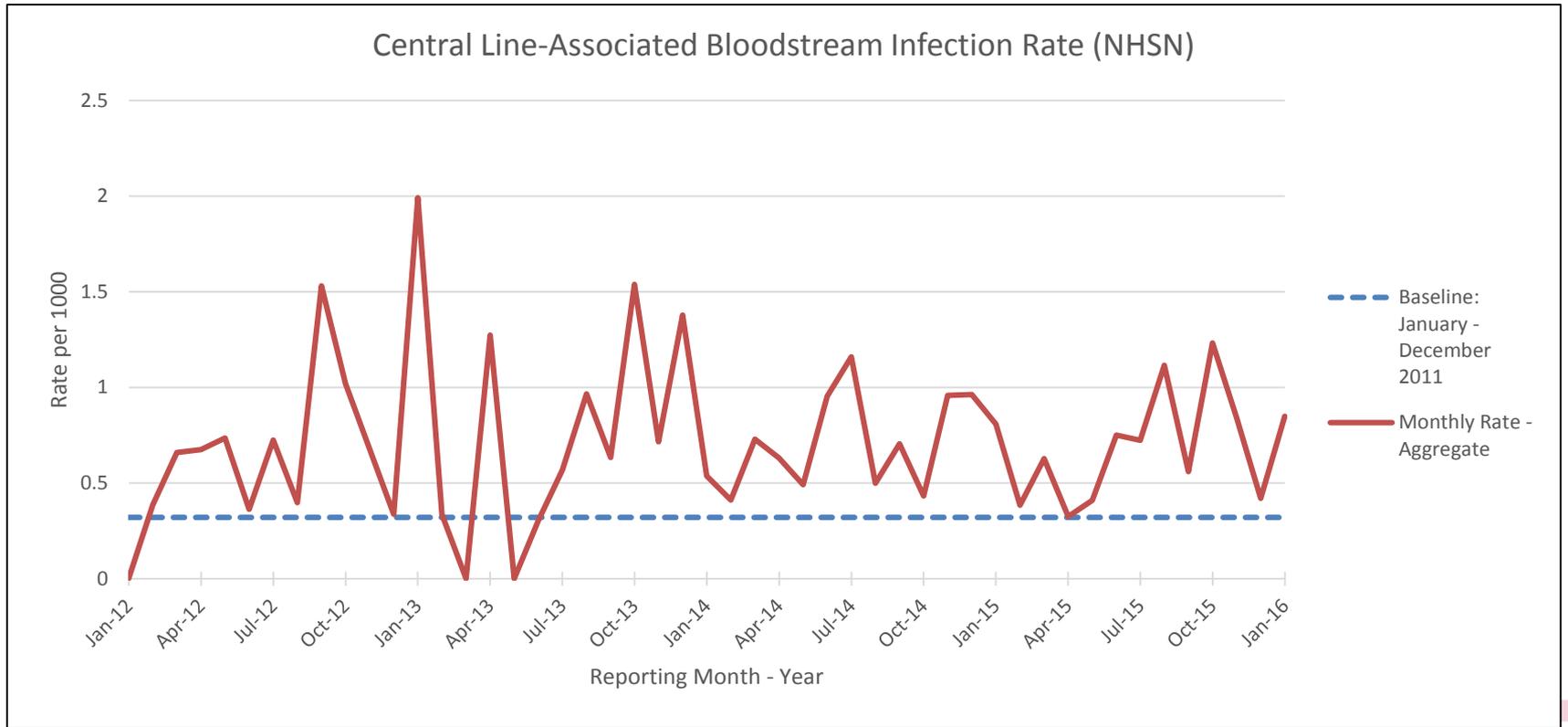


Percent improvement from baseline: 25%

Baseline (Jan 2011 - Dec 2011): 0.28

Performance Period (Nov 2015 – Jan 2016): 0.21



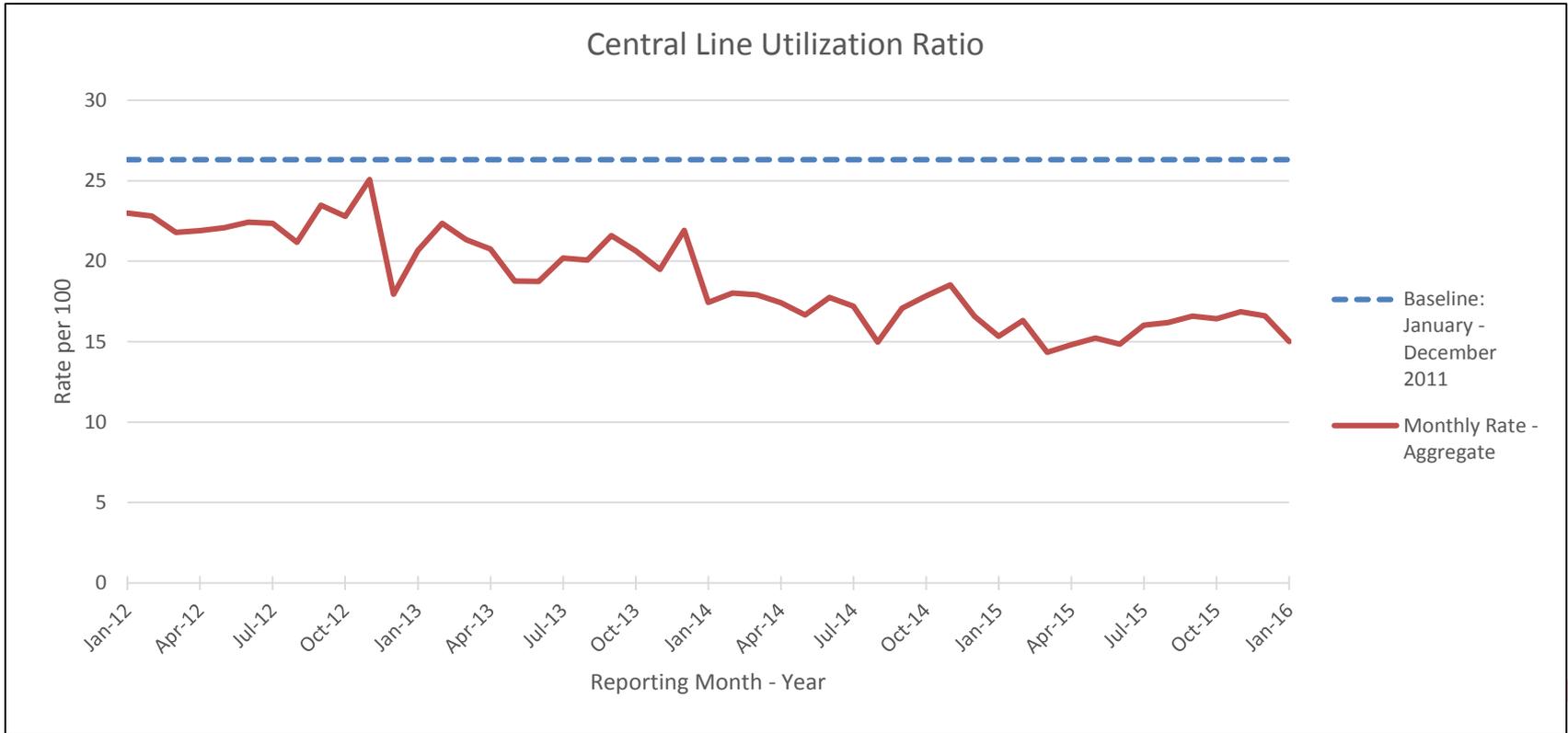


Percent improvement from baseline: -115.63%

Baseline (Jan 2011 - Dec 2011): 0.32

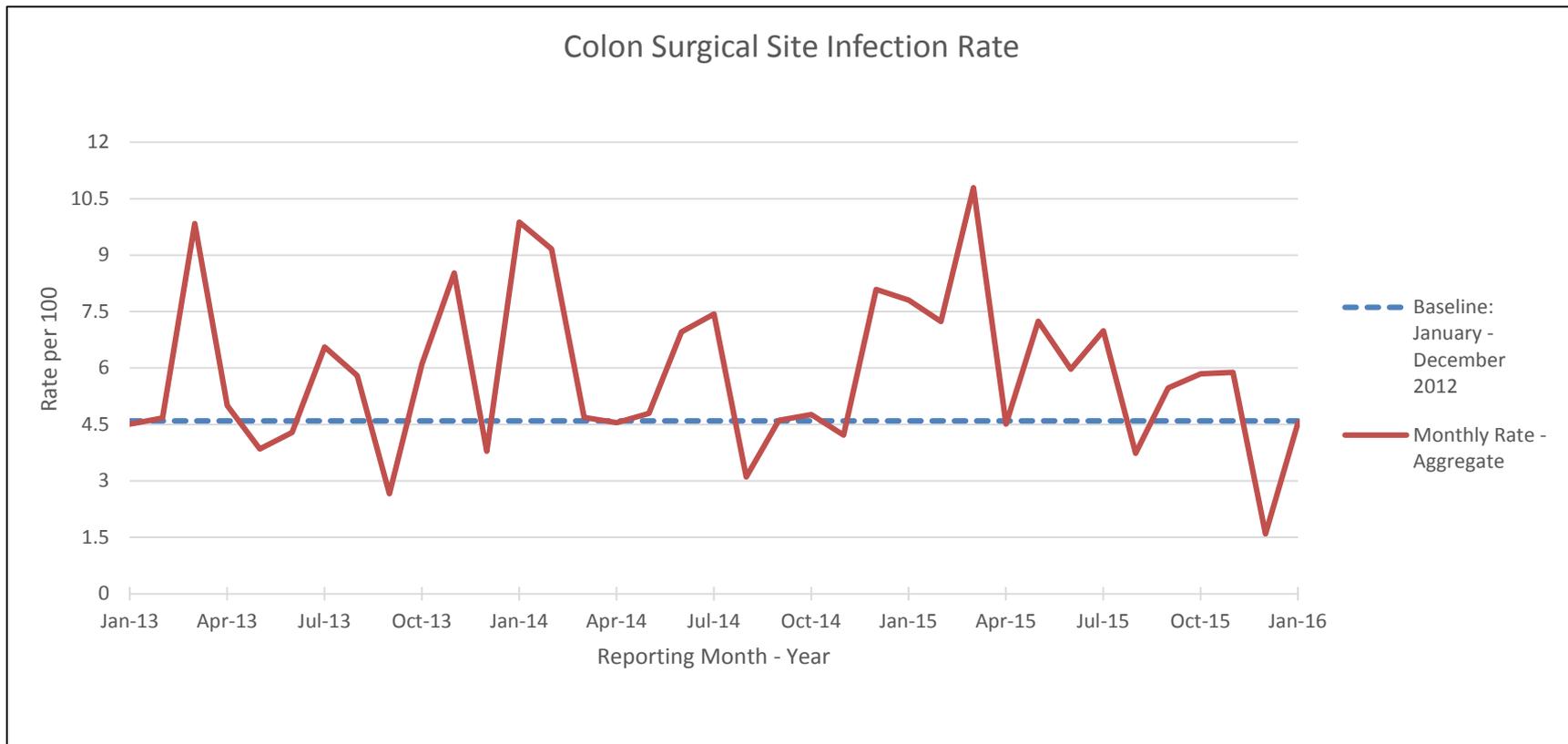
Performance Period (Nov 2015 – Jan 2016): 0.69





Percent improvement from baseline: 38.08%
 Baseline (Jan 2011 - Dec 2011): 26.31
 Performance Period (Nov 2015 – Jan 2016): 16.29



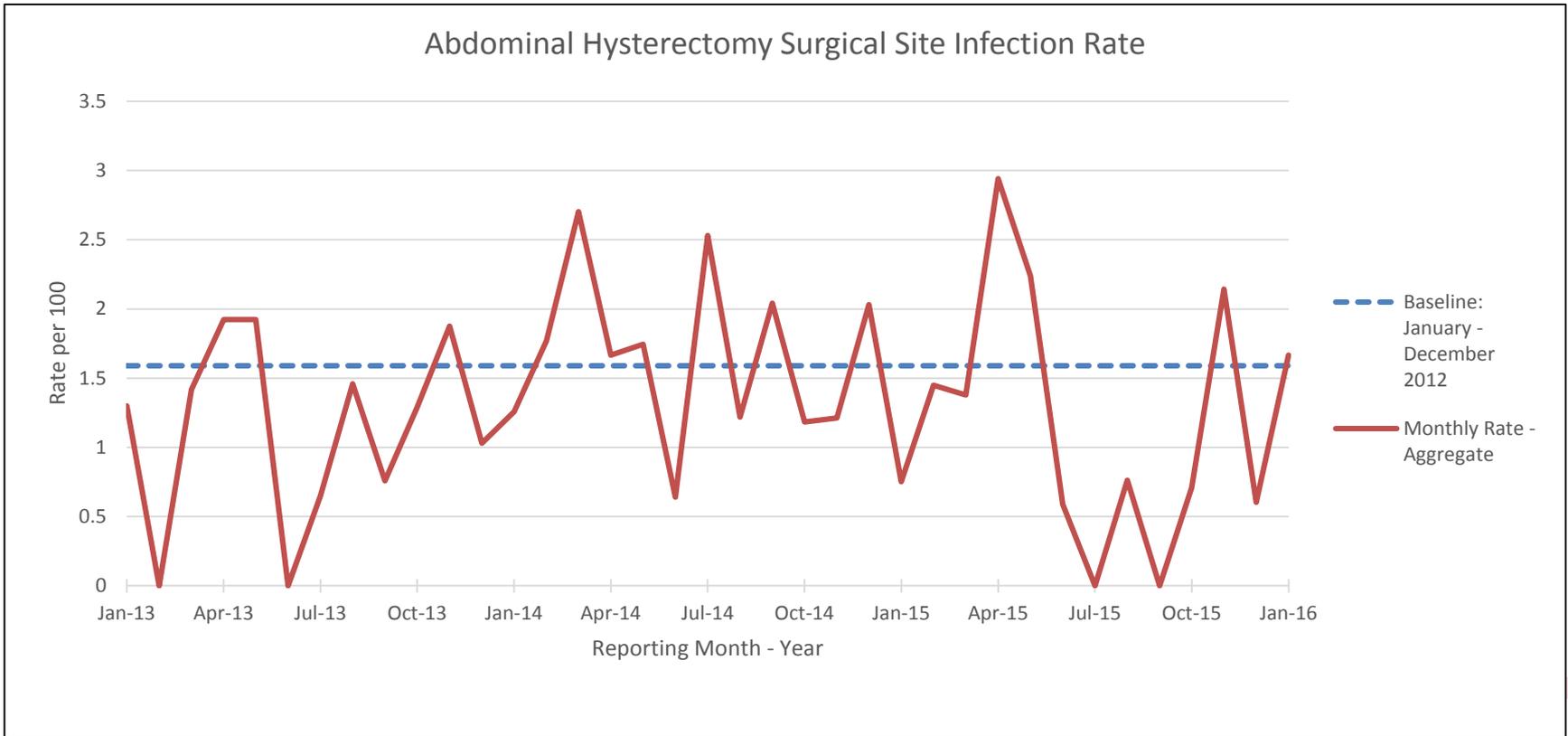


Percent improvement from baseline: 13.73%

Baseline (Jan 2012 - Dec 2012): 4.59

Performance Period (Nov 2015 - Jan 2016): 3.96



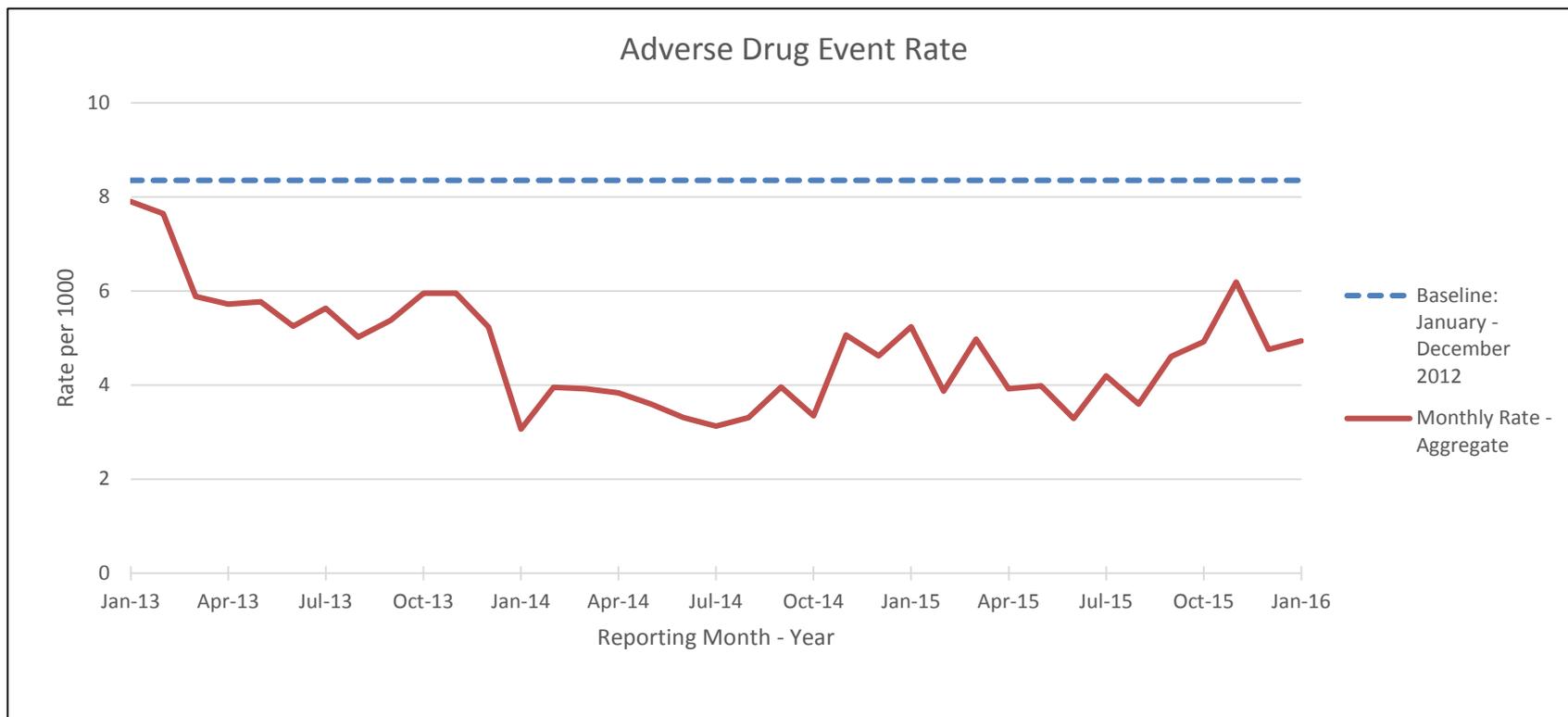


Percent improvement from baseline: 13.84%

Baseline (Jan 2012 - Dec 2012): 1.59

Performance Period (Nov 2015 - Jan 2016): 1.37



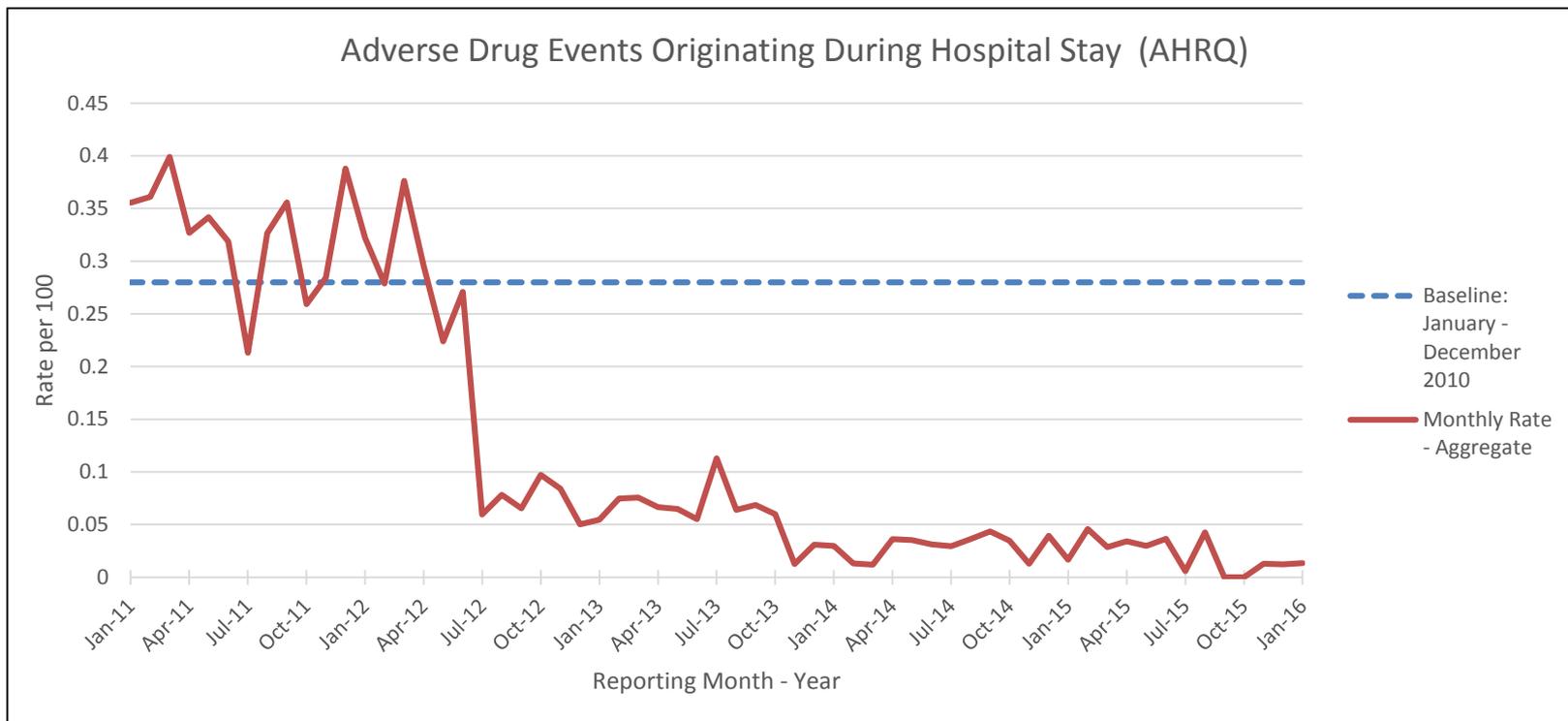


Percent improvement from baseline: 36.89%

Baseline (Jan 2012 - Dec 2012): 8.35

Performance Period (Nov 2015 – Jan 2016): 5.27



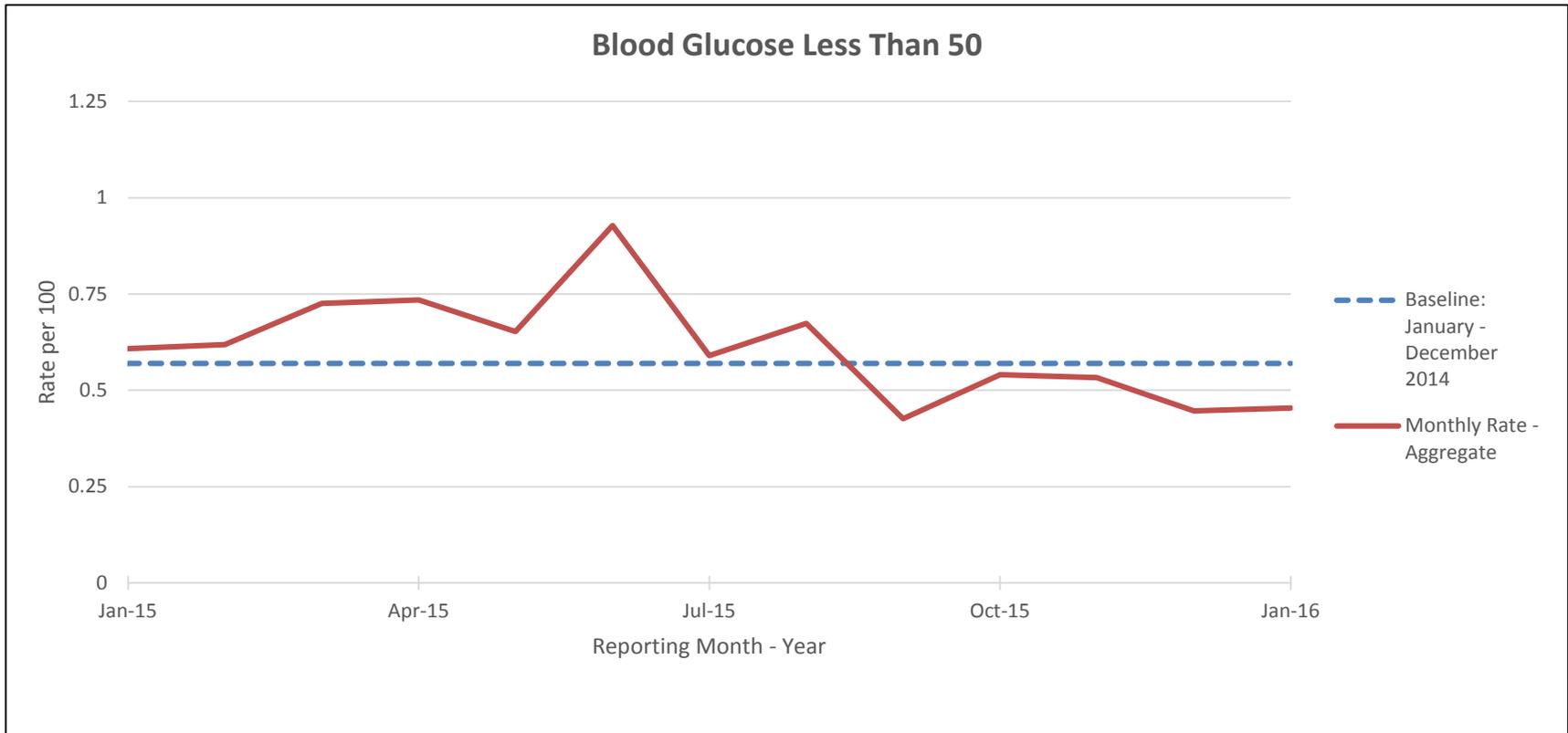


Percent improvement from baseline: 96.43%

Baseline (Jan 2010 - Dec 2010): 0.28

Performance Period (Nov 2015 – Jan 2016): 0.01



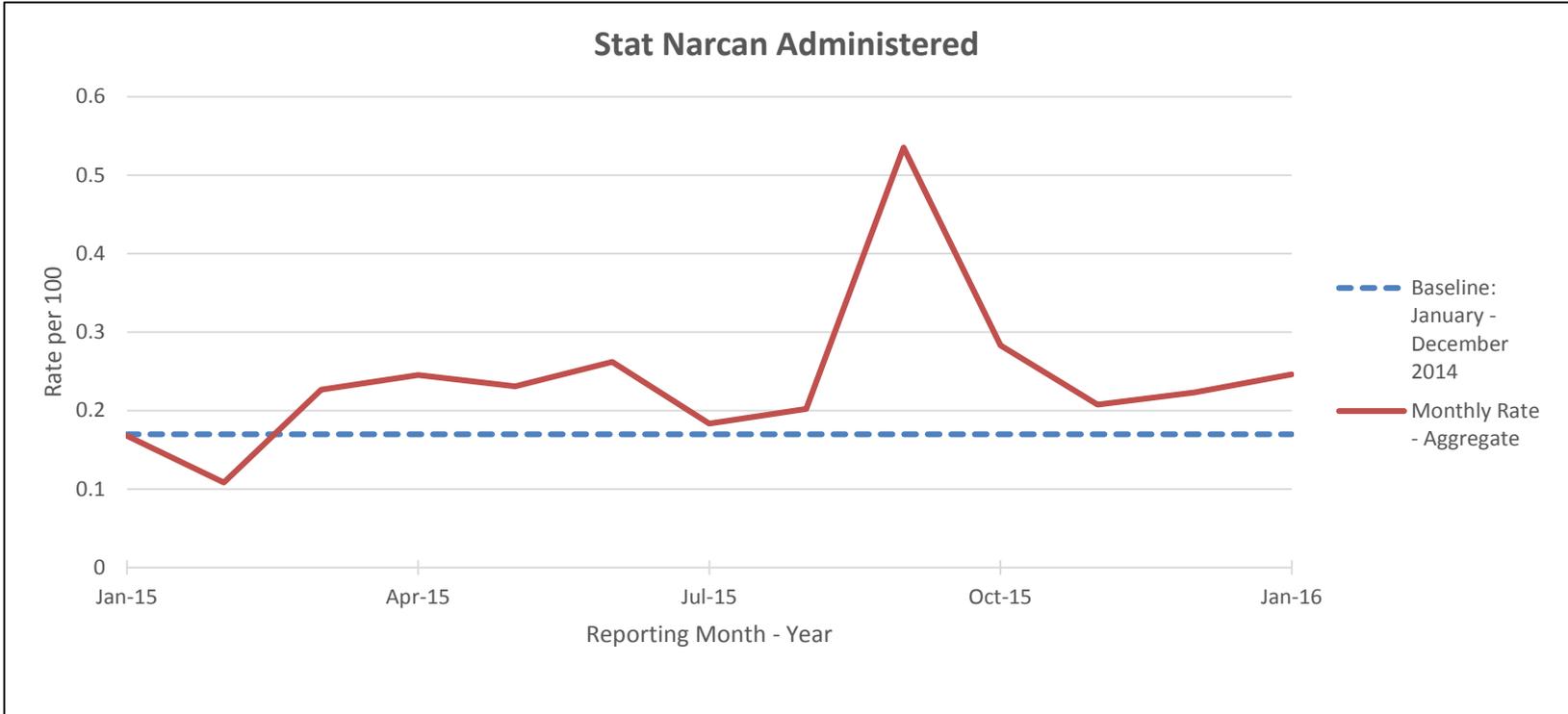


Percent improvement from baseline: 15.79%

Baseline (Jan 2014 - Dec 2014): 0.57

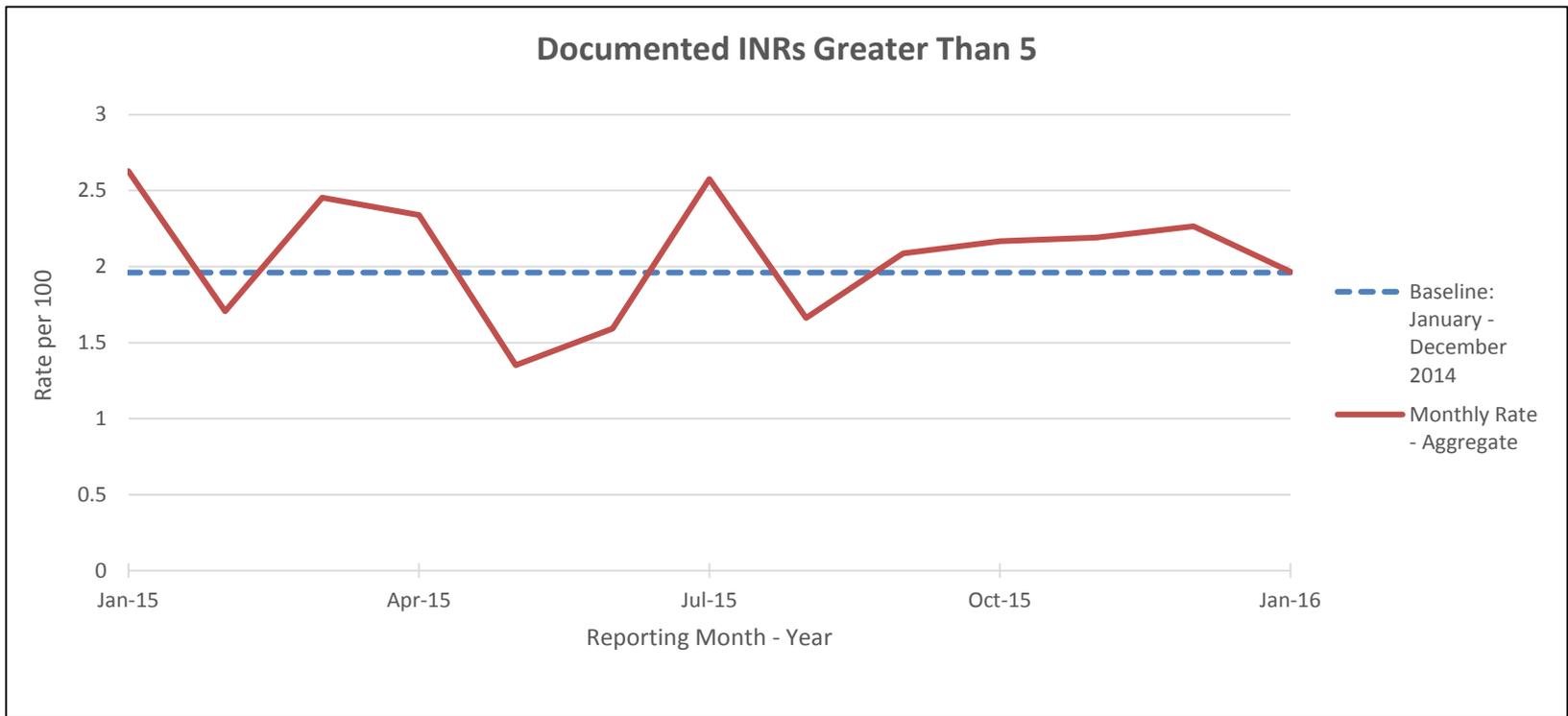
Performance Period (Nov 2015 – Jan 2016): 0.48





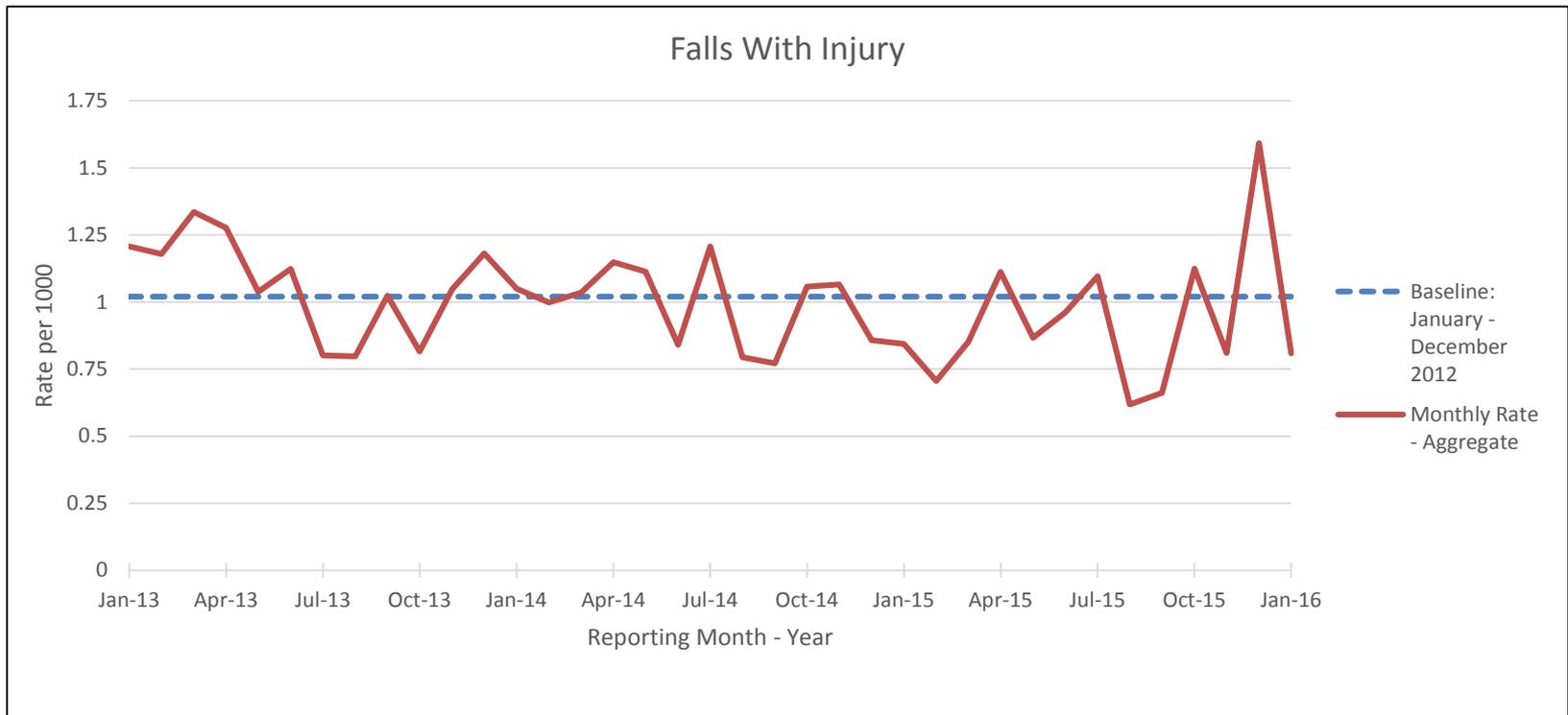
Percent improvement from baseline: -35.29
 Baseline (Jan 2014 - Dec 2014): 0.17
 Performance Period (Nov 2015 – Jan 2016): 0.23





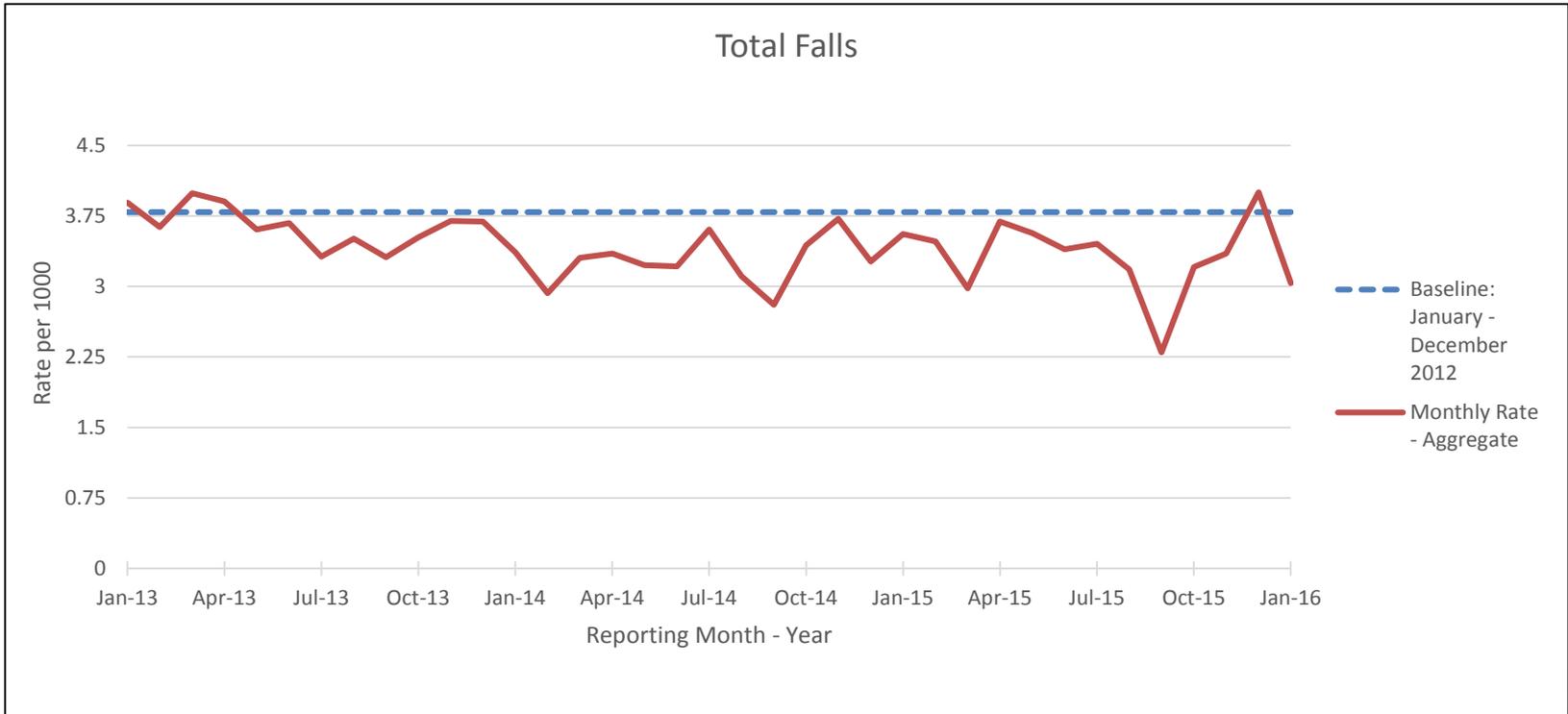
Percent improvement from baseline: -8.67
 Baseline (Jan 2014 - Dec 2014): 1.96
 Performance Period (Nov 2015 – Jan 2016): 2.13





Percent improvement from baseline: -4.90
 Baseline (Jan 2012 - Dec 2012): 1.02
 Performance Period (Nov 2015 – Jan 2016): 1.07



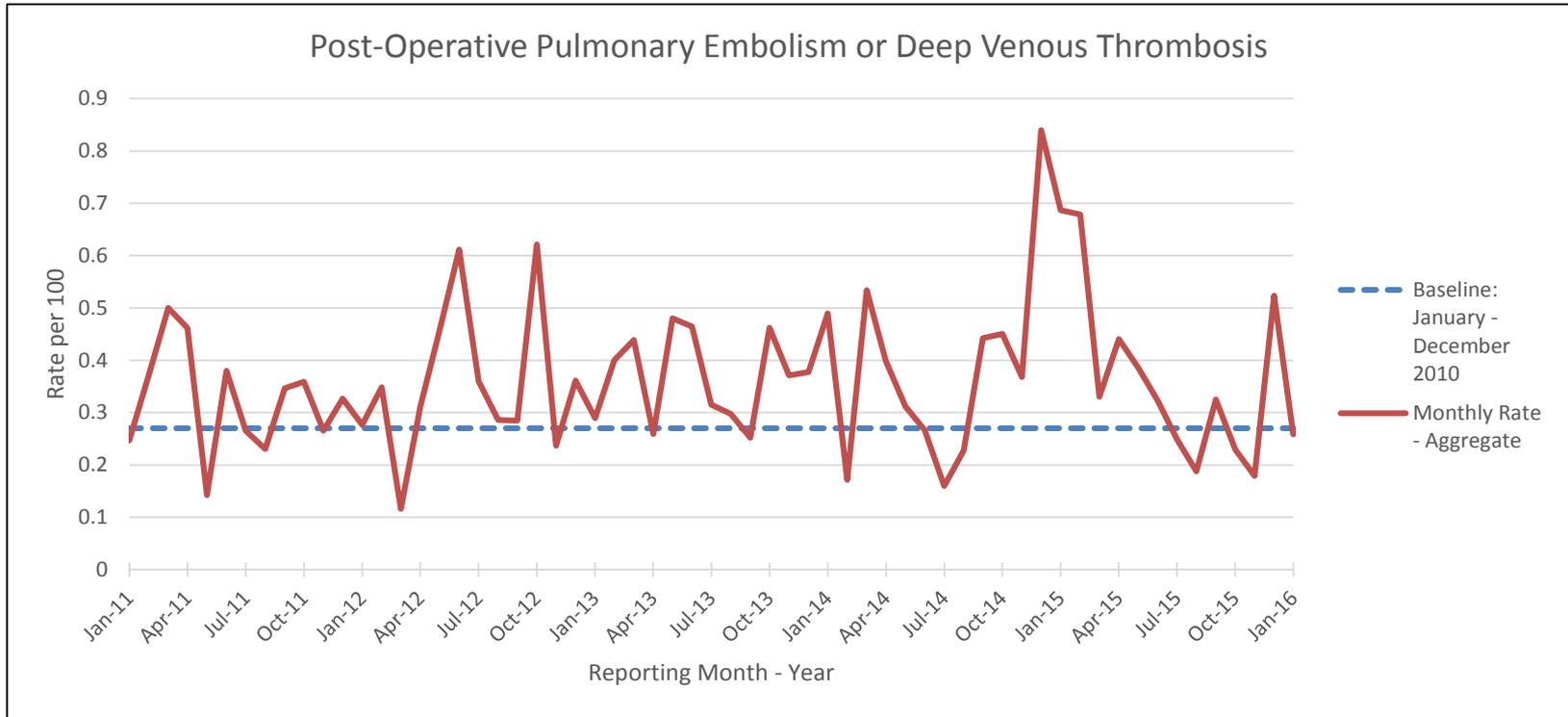


Percent improvement from baseline: 8.97

Baseline (Jan 2012 - Dec 2012): 3.79

Performance Period (Nov 2015 - Jan 2016): 3.45



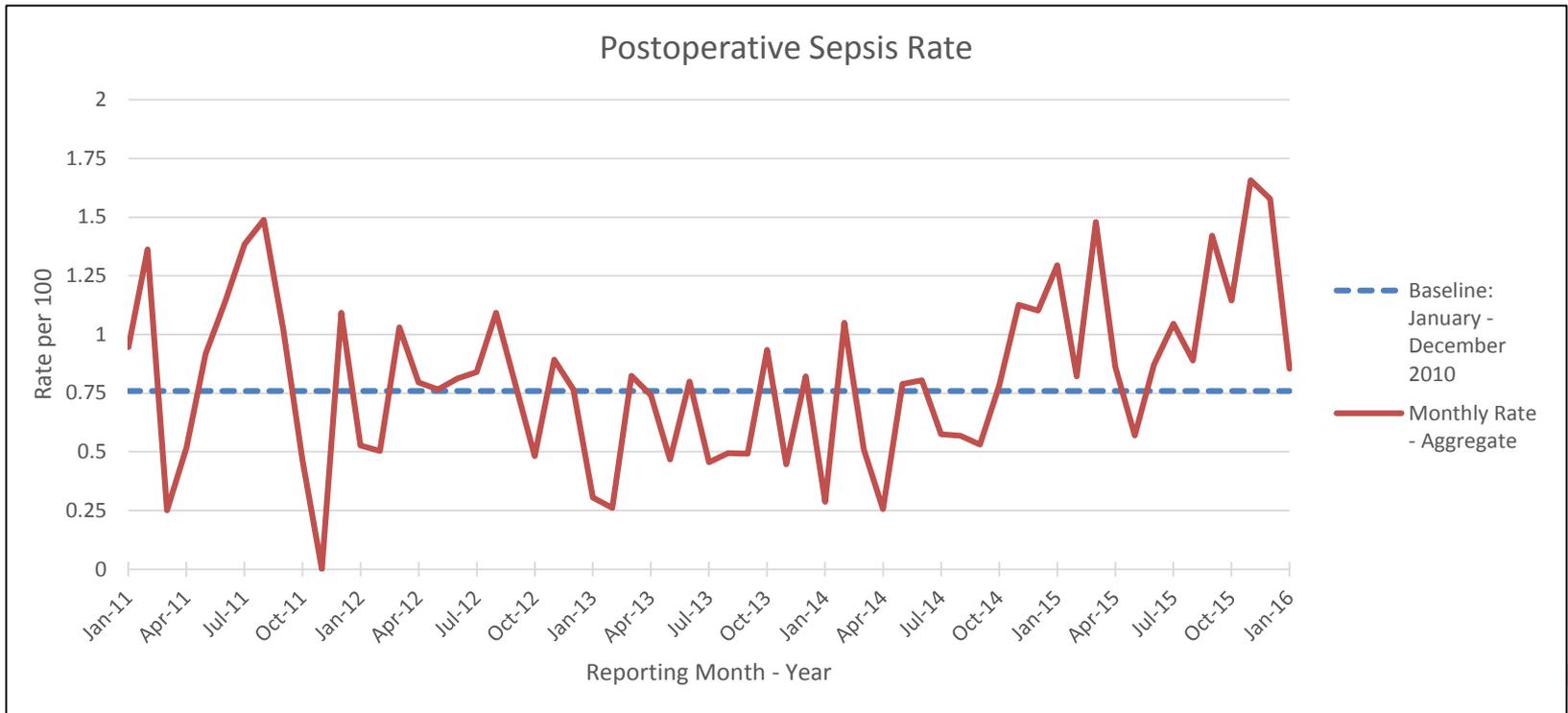


Percent improvement from baseline: -18.52

Baseline (Jan 2010 - Dec 2010): 0.27

Performance Period (Nov 2015 – Jan 2016): 0.32





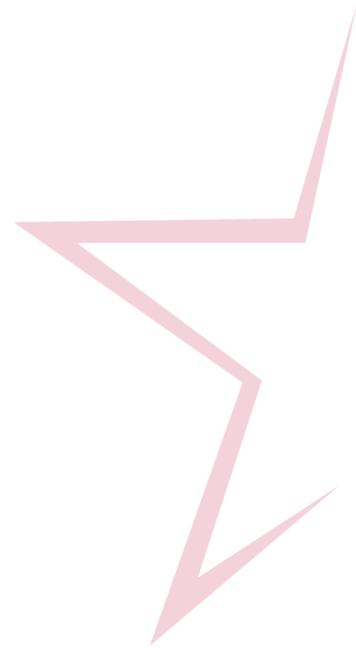
Percent improvement from baseline: -86.84

Baseline (Jan 2010 - Dec 2010): 0.76

Performance Period (Nov 2015 – Jan 2016): 1.42



Questions?



Contact

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