

May 28, 2014

REVAMPED QUALITY WEBSITE, TOOLS TO HELP YOU IMPROVE CARE

AT A GLANCE

At Issue

To advance the hospital field's progress in meeting the Institute of Medicine's Six Aims: care that is safe, effective, efficient, equitable, timely and patient-centered, the AHA Board of Trustees has urged the association to make three Strategic Performance Commitments (SPCs) for 2014-2016:

- Achieve safe, timely and efficient patient care by reducing early elective deliveries in America's hospitals to 3 percent in 2014, 2.5 percent in 2015 and 2 percent in 2016.
- Deliver high-quality, patient-centered care in America's hospitals as reflected by a composite HCAHPS score of 72.8 in 2014, 73.8 in 2015, and to 74.8 in 2016.
- Achieve reductions in catheter-associated urinary tract infections in America's hospitals with the long-term goal of zero, and more immediate goals of less than 2.3 per 1,000 in 2014, to 2.0 per 1,000 in 2015 and to 1.7 per 1,000 in 2016.

To achieve these important improvements in care, we need your hospitals' active involvement. We hope you will choose to work to improve care in these high priority areas and become involved in sharing your successful strategies through AHA. You do not need to collect or report additional data. These measures are already tracked as part of national quality reporting systems. Demonstrated best practices and tools exist for making measurable progress quickly on each goal.

In this advisory, you will find a summary of each SPC, the measurement target and resources to help your organization meet these targets. In addition, the AHA recently revamped its quality website to provide hospitals with their most recent data related to these three SPCs. You can view your data at: www.ahaqualitydata.org.

What You Can Do:

- ✓ Please share this advisory with your leadership, board of trustees and clinical leadership and quality leaders.
- ✓ View your organization's data at: www.ahaqualitydata.org to benchmark your performance.
- ✓ Review and implement proven best practices. Consider joining a Hospital Engagement Network (HEN) if you have not already done so. We're still recruiting hospitals to participate in the AHA HEN led by our Health Research & Educational Trust (HRET).

Further Questions:

Contact Charisse Coulombe, HRET vice president for clinical quality, at ccoulombe@aha.org or Nancy Foster, AHA vice president for quality and patient safety at nfoster@aha.org.



Quality Advisory

May 28, 2014

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BACKGROUND

To advance the hospital field's progress in meeting the Institute of Medicine's Six Aims: care that is safe, effective, efficient, equitable, timely and patient-centered, the AHA Board of Trustees has urged the association to make three Strategic Performance Commitments (SPCs) for 2014-2016:

- Achieve safe, timely and efficient patient care by reducing early elective deliveries in America's hospitals to 3 percent in 2014, 2.5 percent in 2015 and 2 percent in 2016.
- Deliver high-quality, patient-centered care in America's hospitals as reflected by a composite HCAHPS score of 72.8 in 2014, 73.8 in 2015, and to 74.8 in 2016.
- Achieve reductions in catheter-associated urinary tract infections in America's hospitals with the long-term goal of zero, with near-term goals of less than 2.3 per 1,000 in 2014, to 2.0 per 1,000 in 2015 and to 1.7 per 1,000 in 2016.

The AHA reviews the SPCs annually to ensure that they are aligned with national priorities and for which a gap exists between current and optimal performance. Identified below are criteria that were developed and affirmed by the AHA Management Quality Planning Committee with regard to potential selection for SPCs:

- SPC data must be available at least annually
- Baseline SPC data should be available
- SPC must be a nationally accepted, valid measure and judged to be important to patient outcomes
- SPC should be aligned with national performance measurement and improvement efforts – e.g., value-based purchasing or public reporting
- There should be evidence-based practices available for improving the SPC
- The AHA should provide resources in support of the SPC
- SPC should not require additional data collection resources from hospitals and should rely on available secondary data

The AHA provides advocacy, resources and research to America's hospitals and health systems to support them in the achievement of these commitments. Below, you will find a summary of each strategic performance commitment, the measurement targets and

resources to help your organization meet those targets. The AHA also recently revamped its quality website to provide hospitals with their most recent data related to these three SPCs. You can view your data at: www.ahaqualitydata.org.

MEASURES & RESOURCES

Safe and Efficient Care Commitment – Reducing Early Elective Deliveries

This is a national priority that involves numerous national stakeholders and for which there are substantial resources available for hospitals. This is a topic that is part of the work of the Hospital Engagement Networks (HENs). (The AHA's Health Research & Educational Trust (HRET) manages the largest HEN; visit <http://www.hret-hen.org/> for more.) The measure has started to be reported publicly, with many hospitals with rates at or near zero, but the national average is estimated to be above 5 percent. This measure has a significant cost and safety impact for babies.

Measure: Achieve safe, timely and efficient patient care by reducing early elective deliveries in America's hospitals to 3 percent in 2014, 2.5 percent in 2015 and 2 percent in 2016. (2013 baseline is approximately 7 percent.)

Resources

HRET HEN Resources:

- [Obstetrical Adverse Events Change Package - 2013](#)
- [Checklist - Days Since Last OB Harm Event: English Letter \(8x11\)](#)
- [Checklist - Days Since Last Early Elective Delivery: English Letter \(8x11\)](#)
- [OB Harm Boot Camp Session 1](#)
- [OB Harm Boot Camp Session 2](#)
- [OB Harm Boot Camp Session 3](#)

Hospitals in Pursuit of Excellence Resources:

- [Obstetrical Adverse Events Case Studies](#)

Patient-Centered Care Commitment – Improving Patient Experience

The HCAHPS survey is intended to provide a standardized survey instrument and data collection methodology for measuring patients' perspectives on hospital care. While many hospitals have collected information on patient satisfaction, prior to HCAHPS there was no national standard for collecting or publicly reporting patients' perspectives of care information that would enable valid comparisons to be made across all hospitals. HCAHPS is a part of value-based purchasing and an important service element for all reporting and pay for performance programs. This measure is a composite of all the 10 reported HCAHPS questions.

Measure: Deliver high-quality, patient-centered care in America’s hospitals as reflected by a HCAHPS score of 72.8 in 2014, 73.8 in 2015, and 74.8 in 2016. (2013 patient satisfaction score baseline is 71.8.)

Resources

[TeamSTEPPS Project](#) Resources:

- [TeamSTEPPS Master Training](#)
- [TeamSTEPPS Webinars](#)
- [TeamSTEPPS® Instructor Guide](#)
 - [Essentials Course](#)
 - [Fundamentals Course](#)
 - [Implementation Guide \(PDF\)](#)
 - [Course Management Guide \(PDF\)](#)
 - [Specialty Scenarios](#)
 - [Site Assessment Tools and Measurement Tools](#)
 - [Research/Evidence Base](#)
- [TeamSTEPPS National Conference](#)
- [TeamSTEPPS Case Studies](#)

Hospitals in Pursuit of Excellence Resources:

- [A Leadership Resource for Patient and Family Engagement Strategies](#)

Safe, Effective and Efficient Care Commitment – Reducing CAUTIs

This topic is also part of the work of the HENs and is a national improvement project funded by the Agency for Healthcare Research and Quality. The gap between current and best practice is significant, as is the cost impact.

Measure: Achieve reductions in catheter-associated urinary tract infections (CAUTI) in America’s hospitals with the long-term goal of zero, with near-term benchmarks of less than 2.3 per 1,000 in 2014, to 2.0 per 1,000 in 2015 and to 1.7 per 1,000 in 2016. (2013 baseline is 2.5 per 1,000.)

Resources

[AHRQ Interim Report \(July 2013\)](#)

[On the CUSP: Stop CAUTI Project](#) Resources:

- [CUSP Toolkit](#)
- [Assemble the Team:](#) Learn how to identify and engage team members and define roles and responsibilities.

- [Engage the Senior Executive](#): Find out how to bridge the gap between senior management and frontline providers and remove barriers to implementing improvement projects.
- [Understand the Science of Safety](#): Learn about workflows in systems, apply principles of safe design and encourage input of team members.
- [Identify Defects Through Sensemaking](#): Get tips on how to engage frontline providers in identifying system defects and make sense of root causes.
- [Implement Teamwork and Communication](#): Apply proven models of effective communication.
- [Apply CUSP](#): See how CUSP can be applied to diverse care settings and a range of safety issues.
- [The Role of the Nurse Manager](#): Understand the responsibilities and leadership role of nurse managers in quality and safety improvement initiatives.
- [Spread](#): Find out how to share, tailor and implement components of a process that have worked well at the unit level.

Hospitals in Pursuit of Excellence Resources:

- [Eliminating CAUTI](#)

NEXT STEPS

- Please share this advisory with your leadership, board of trustees and clinical leadership and quality leaders.
- View your organization's data at: www.ahaqualitydata.org to benchmark your performance.
- Review and implement proven best practices. Consider joining a HEN if you have not already done so. We're still recruiting hospitals to participate in the AHA HEN led by HRET.

FURTHER QUESTIONS

Contact Charisse Coulombe, HRET vice president for clinical quality, at ccoulombe@aha.org or Nancy Foster, AHA vice president for quality and patient safety at nfoster@aha.org.