

Hospitals In Pursuit of Excellence 2011 AHVRP Annual Leadership Conference

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TRANSFORMING HEALTH CARE THROUGH RESEARCH AND EDUCATION



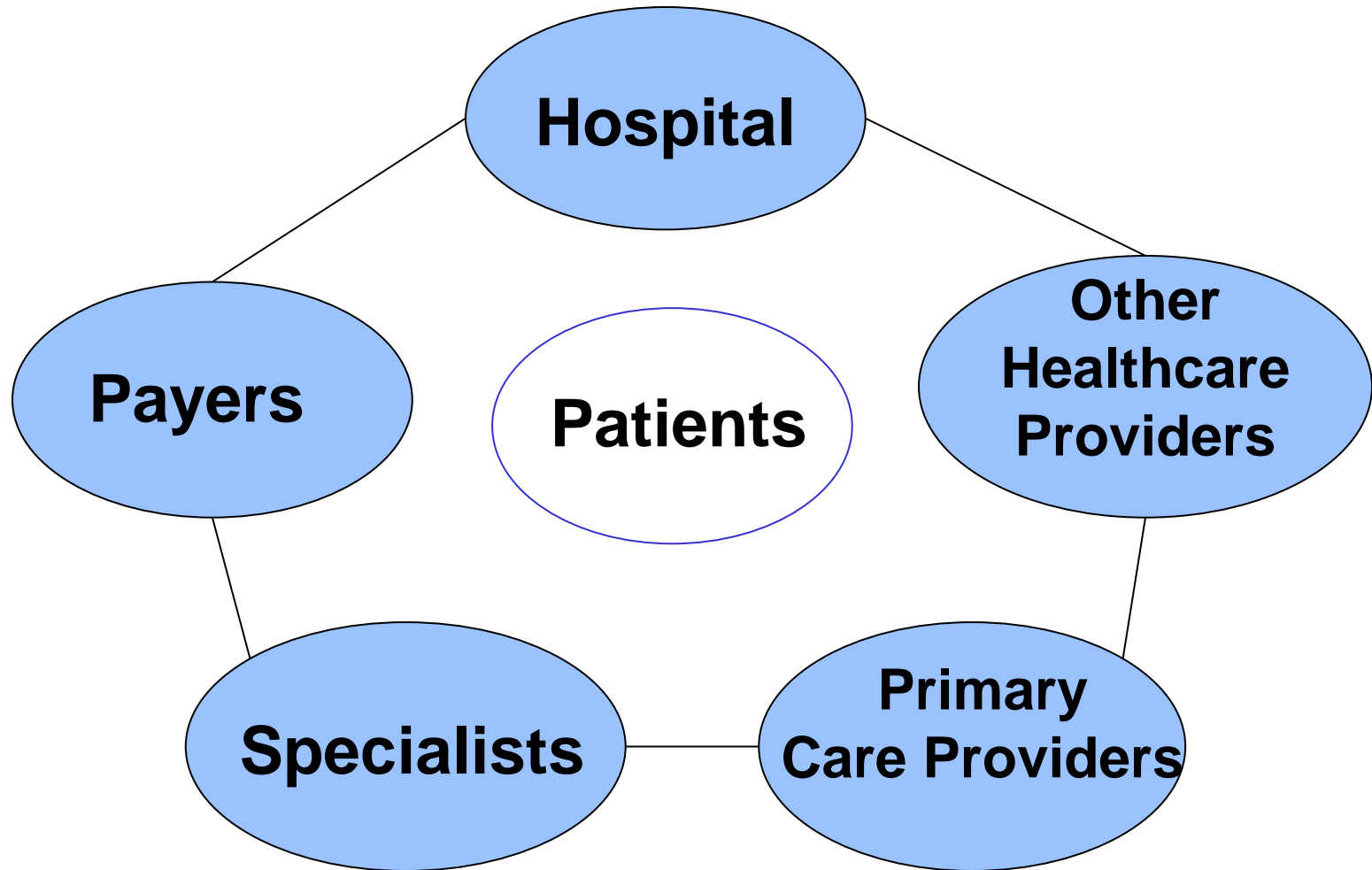
What Will Be Expected of Hospitals?

1. More integrated care
2. More at-risk payments
3. More accountability

Key Trends and Observations

1. Consumers want more performance information
2. Providers need more performance information
3. Improvement is happening, but slowly
4. Our transactional payment system is unsustainable

Implementing Reform



Focus on the Patient

- Involve patients/families in improvement teams
- Share patient stories with leadership and governance
- Patients/families on advisory councils
- Patients/families part of leadership walkarounds
- Patients/families part of daily rounds
- 24/7 open hours for patients/families
- Full and easy access to health records
- Educational materials appropriate for population

Hospitals in Pursuit of Excellence

- AHA's strategic platform to accelerate performance improvement
- Focus on spreading improvement by sharing best practices and synthesizing evidence for application

How Does HPOE Support the Field?

Education

- Case Studies
- Webinars
- Articles

Tools and Guides

- Best Practice Guides
- AHA Research Synthesis Reports

Leadership Development

- AHA-NPSF Patient Safety Leadership Fellowship
- Health Care System Transformation Fellowship

National Engagement Projects

- CUSP Infection Elimination Projects
- AHRQ Quality and Patient Safety Tools

Education – www.hpoe.org

1,000+ case studies of innovative practices and links to resources in the following areas:

- Efficiency
- Care coordination
- Health and wellness
- Health care equity
- Patient safety
- Healthcare-acquired infections
- Medication management
- New payment and care delivery models
- Health information technology
- Patient throughput

The screenshot shows the homepage of the Hospitals in Pursuit of Excellence (HPOE) website. At the top, there is a navigation bar with the HPOE logo on the left, which includes the text "hospitals in pursuit of excellence" and "Accelerating Performance Improvement and Implementing Health Reform". To the right of the logo are menu items: "Topic Areas", "Case Studies", "Resources and Tools", "HPOE", and "News". In the top right corner, there is a "HEALTH CARE REFORM" logo with the text "Moving Forward".

The main content area features a large blue banner with the text: "Hospitals in Pursuit of Excellence (HPOE)™. HPOE is the AHA's strategic platform to accelerate performance improvement and support health reform implementation in the nation's hospitals and health systems. Through education, tools and guides, leadership development and national improvement projects, HPOE brings providers together to improve performance in several areas, including care coordination/readmissions, patient safety, and the development of new payment and care delivery models that promote quality and efficiency." To the right of this text is a photograph of three healthcare professionals: a woman in pink scrubs, a man in a white lab coat, and a woman in green scrubs.

Below the banner, there are two columns of content. The left column is titled "Latest Articles" and lists three items: "AHANews4u" with a link to "FDA requires Baxter to refund or replace recalled infusion pumps", "H&HN" with a link to "Accidents Happen", and "Trustee" with a link to "Striking a Balance". The right column is titled "Upcoming Events" and lists three items: "June 20-23, 2010" with a link to "HFMA's ANI", "June 23-25, 2010" with a link to "The Joint Commission Annual Conference on Quality and Patient Safety", and "July 11-14," with a link to "ASHE 47th Annual Conference".

On the far right, there is a "Highlights" section with a list of links: "Patient Safety Leadership Fellowship", "Chairman's Files: Texas Health Resources", "HRET On the CUSP: Stop BSI", and "Societal Responsibility-- Trustee Magazine". Below this is a "Submit Case Study" button with a document icon and a "Search Case Studies" button with a magnifying glass icon. At the bottom right, there is a logo for "hospitals in pursuit of excellence" with the HPOE logo.

Tools and Guides: Managing Variation

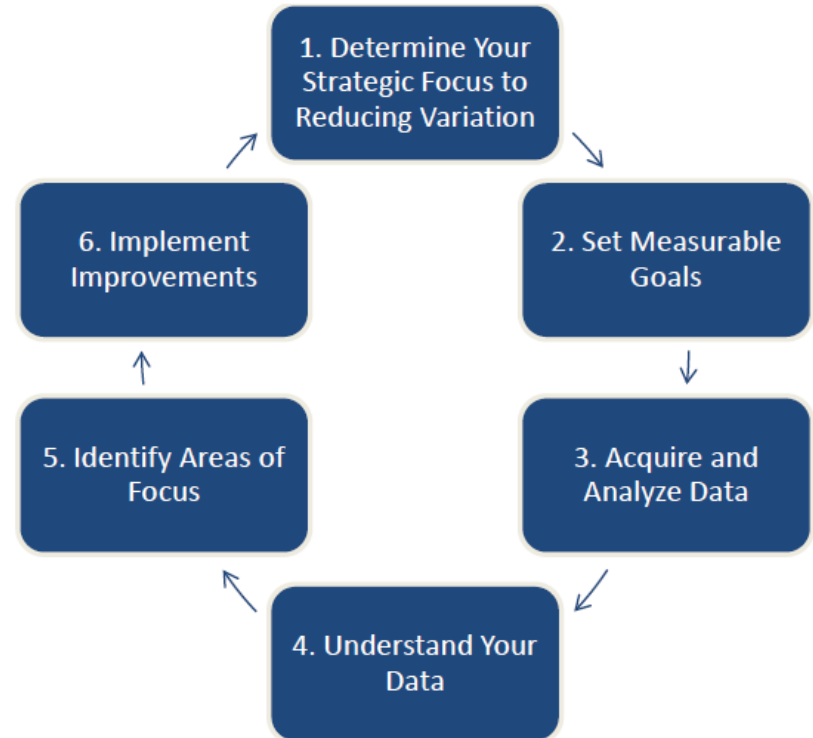
hospitals in
pursuit of excellence™
Assessing Performance. Improving Care.

Signature Leadership Series



Health Care Leader Action Guide: Understanding and Managing Variation

February 2011



Tools and Guides: A Culture of Health

**A Call to Action:
Creating a Culture of Health**

January 2011

American Hospital Association

| Recommendation | Goal/Action Steps | Examples of How Hospitals Can Meet This Goal |
|--|--|---|
| Recommendation 1: Serve as a Role Model of Health for the Community | As part of fulfilling their mission, hospitals are beacons of trust in the community. Hospitals must create robust health and wellness programs as examples to the communities that they serve. | Hospitals can work with local employers to build an integrated, regional approach to health and wellness that shares both risks and rewards. |
| Recommendation 2: Create a Culture of Healthy Living | Improving employee health is more than implementing individual programs. Hospitals need to strive for a culture of healthy living for all employees, which starts at the top with the CEO and the board of trustees. Wellness should be a strategic priority for the hospital. | Health and wellness indicators can be included in dashboards, and executive compensation can be linked to meeting wellness program objectives. Hospitals can eliminate environmental inconsistencies (e.g., unhealthy foods at meetings). |
| Recommendation 3: Provide a Variety of Program Offerings | While health and wellness is more than a set of activities, it is important for hospitals to offer a variety of activities to promote health within their organizations. | Hospital wellness programs can include a health risk assessment (HRA), a biometric screening, and at least one intensive coaching activity, based on the risks and health status of its employees. |
| Recommendation 4: Provide Positive and Negative Incentives | Positive and negative incentives are effective in improving health and wellness program participation levels. Hospitals can use incentives to increase participation and to improve outcomes. | Hospitals can expand the use of incentives in order to improve participation levels. As participation levels increase, hospitals can begin to shift toward more outcomes-based incentives. |
| Recommendation 5: Track Participation and Outcomes | To track the success of their health and wellness programs, hospitals must first measure and increase participation and then build systems to track outcomes. | Hospitals can track participation and outcome targets (e.g., overall participants, number completing an HRA, number enrolled in a smoking cessation program, and number with cholesterol improvement). |
| Recommendation 6: Measure for ROI | A strong financial case accompanies the strategic case of striving for robust health and wellness programs. In order to achieve ROI, hospitals must first commit to effectively measuring ROI over several years. | Hospitals can ensure a multi-year commitment to evaluation and improvement. Hospitals can use both health care cost savings and savings due to improvements in productivity (e.g., presenteeism and absenteeism). |
| Recommendation 7: Focus on Sustainability | For program effectiveness, hospitals must motivate employees over time, effectively communicate, and constantly reinforce wellness as a leadership priority. | Hospital boards, CEOs, and full executive teams can communicate wellness as a long-term priority for the hospital and ensure that wellness programs have dedicated resources. |

Tools and Guides: Readmissions



Health Care Leader
Action Guide to Reduce
Avoidable Readmissions

January 2018



Table 1: During Hospitalization

- Risk screen patients and tailor care
- Establish communication with primary care physician (PCP), family, and home care
- Use “teach-back” to educate patient/caregiver about diagnosis and care
- Use interdisciplinary/multi-disciplinary clinical team
- Coordinate patient care across multidisciplinary care team
- Discuss end-of-life treatment wishes

Table 2: At Discharge

- Implement comprehensive discharge planning
- Educate patient/caregiver using “teach-back”
- Schedule and prepare for follow-up appointment
- Help patient manage medications
- Facilitate discharge to nursing homes with detailed discharge instructions and partnerships with nursing home practitioners

Table 3: Post-Discharge

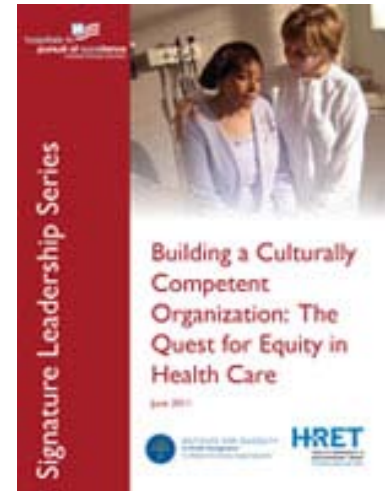
- Promote patient self management
- Conduct patient home visit
- Follow up with patients via telephone
- Use personal health records to manage patient information
- Establish community networks
- Use telehealth in patient care

<http://www.hret.org/hret/programs/readmissions.html>

Tools and Guides: Improving Health Equity

Seven Ways to Improve Cultural Competency:

1. Collect race, ethnicity and language preference (REAL) data.
2. Identify and report disparities.
3. Provide culturally and linguistically competent care.
4. Develop culturally competent disease management programs.
5. Increase diversity and minority workforce pipelines.
6. Involve the community.
7. Make cultural competency an institutional priority.



Equity of Care Call to Action

There is great opportunity to impact disparities using three core elements:

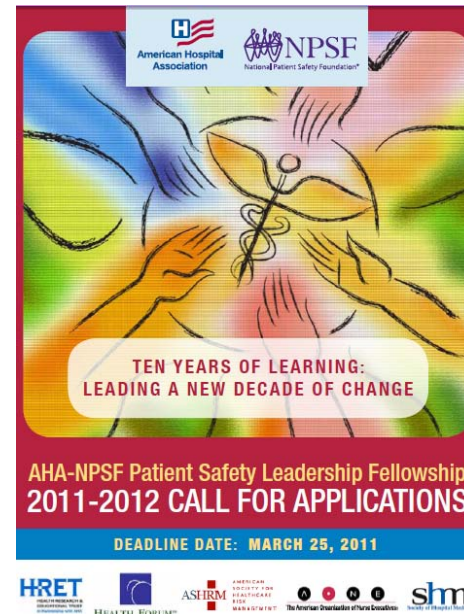
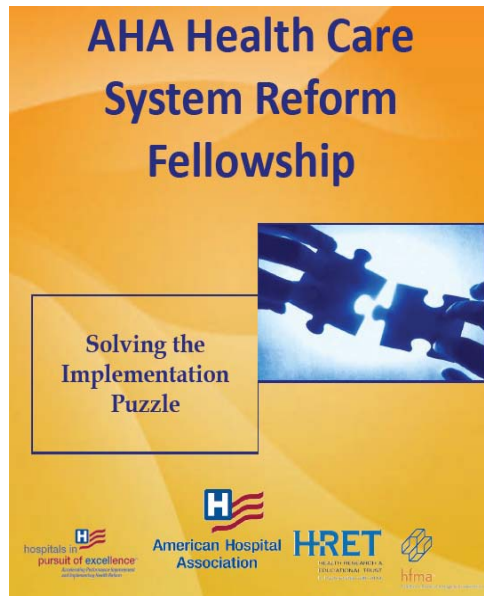
1. **Increasing** collection of race, ethnicity & language data
2. **Increasing** cultural competency training
3. **Increasing** diversity in leadership



For more information visit: www.equityofcare.org

Leadership Development

- **Patient Safety Fellowship Program**
 - 10th year Class started July 2011
 - 28 Fellows (13 physicians)
- **Health Care System Reform Fellowship**
 - 2011 inaugural year
 - 18 Fellows



National Leadership Projects

HRET CUSP CLABSI Project


- Working with all states and all hospitals to implement comprehensive unit based safety programs (CUSP) to eliminate central line associated bloodstream infections
- More than 1,000 hospitals in 46 states, the District of Columbia and Puerto Rico
- Preliminary data from adult ICUs in more than 350 hospitals in 22 states show a reduction in CLABSI rates by an average of 35 percent.

HRET CUSP CAUTI Project


- Working with states to implement comprehensive unit based safety programs to eliminate catheter associated urinary tract infections

AHRQ Quality & Patient Safety Tools – Selected Consumer Tools

**Blood Thinner Pills:
Your Guide to Using
Them Safely**




U.S. Department of
Health and Human Services
Agency for Healthcare Research and Quality
525 Convent Road
Bethesda, MD 20810


 AHRQ
Agency for Healthcare Research and Quality
Assessing Evidence to Improve Care • www.ahrq.gov

AHRQ Pub. No. 09-0064C
April 2009

**Taking Care of Myself:
A Guide for When I Leave
the Hospital**



Learn more about how to take medicines safely. Use the **Medicine Record Form** at the back of this booklet to keep track of your medicines.


 AHRQ
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**Your Medicine:
Play It Safe**




Learn more about how to take medicines safely. Use the **Medicine Record Form** at the back of this booklet to keep track of your medicines.


**Your Guide to
Preventing and
Treating Blood Clots**



U.S. Department of
Health and Human Services
Agency for Healthcare Research and Quality
525 Convent Road
Bethesda, MD 20810

 AHRQ
Agency for Healthcare Research and Quality
Assessing Evidence to Improve Care • www.ahrq.gov

AHRQ Pub. No. 09-0047C
May 2009

 **Quick Tips—
When Talking with Your Doctor**

The single most important way you can stay healthy is to be an active member of your own health care team. One way to get high-quality health care is to find and use information and take an active role in all of the decisions made about your care. This card will help you when talking with your doctor.

Research has shown that patients who have good relationships with their doctors tend to be more satisfied with their care—and to have better results. Here are some tips to help you and your doctor become partners in improving your health care.

Give information. Don't wait to be asked!

- You know important things about your symptoms and your health history. Tell your doctor what you think he or she needs to know.
- It is important to tell your doctor personal information—even if it makes you feel embarrassed or uncomfortable.
- Bring a "health history" list with you, and keep it up to date. You might want to make a copy of the form for each member of your family.
- Always bring any medicines you are taking, or a list of those medicines (include when and how often you take them) and what strength. Talk about any allergies or reactions you have had to your medicines.
- Tell your doctor about any herbal products you use or alternative medicines or treatments you receive.
- Bring other medical information, such as x-ray films, test results, and medical records.

Get information.

- Ask questions. If you don't, your doctor may think you understand everything that was said.
- Write down your questions before your visit. List the most important ones first to make sure they get asked and answered.
- You might want to bring someone along to help you ask questions. This person can also help you understand and/or remember the answers. (over)

Implemented by more than 900 hospitals

QUESTIONS?

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