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.
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

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<td>MBQIP Phase 3 measure due April 15, 2016</td>
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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
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
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
Percent improvement from baseline: **-4.90**
Baseline (Jan 2012 - Dec 2012): 1.02
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
Questions?
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