

KHA Quality Program

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KHA Quality Improvement Journey

- **Hospital Engagement Network (HEN)-** HEN 1.0 (2011-2014) and HEN 2.0 (2015-2016) was an initiative funded by the CMS Partnership for Patients
- KHA Partnered with AHA's Hospital Research and Education Trust (HRET)
- Focus areas: ADE, CAUTI, CLABSI, EED, Falls, Pressure ulcer/injury, OB harm, SSI, VTE, VAE
- KHA had 93 hospitals participating by the end of the project



KHIIN Wrap up

- The Kentucky Hospital Improvement Innovation Network (KHIIN)
- Part of the HRET contract with CMS (October 2016-March 2020)
- Goal of program was to continue efforts Reduce hospital-acquired conditions and readmissions
 - Reducing all-cause inpatient harm and readmissions



Successes of KHIIN

- CDI- 30% Improvement
- CLABSI-All settings- 24% Improvement
 - ICU Only- 29% Improvement
- CAUTI- All settings- 10% Improvement
 - ICU Only- 9% Improvement
- Pressure Ulcer Stage 3 and Greater- 12% Improvement
- Falls with Injury- 7% Improvement
- Overall Sepsis Mortality- 4% Improvement
- Post-op Sepsis- 8% Improvement



KHA Quality Vision statement

- Continuously improving the health care quality, patient safety, and service in Kentucky through collaborations.
 - Aligns with new KHA Vision
 - Highlights the future Quality Program



KHA Quality Goals for the Future

- Hospital Quality Improvement Contractors (HQIC)
- Alliant Health – Readmissions
- KY Rising Stars
- Sepsis Consortium
- Other Quality Improvement Work
- SANE
- KY SOS
- KY Perinatal Quality Collaborative



Next Phase of HIIN

- CMS recently released information on federal Quality Improvement contract
 - National Quality Improvement and Innovation Contractor (NQIIC) **Task Order 3:**
 - **The Hospital Quality Improvement Contractors (HQIC)** replaces the contracts for **HIIN** (Hospital Improvement Innovation Network)
 - 4-year time frame (Sept 2020-Sept 2024)
 - Focuses on 3 overarching goals of **Behavioral health outcomes, Increase Patient Safety and Increase Quality of Care Transitions:**
 - Decrease Opioid misuse (KY leading other states in KY SOS program),
 - Reduce all-cause harm, ADEs, Cdiff, hospital readmissions (all work that KHA has done with your hospital for many years)



Next Phase of HIIN

- **KHA chose to partner with Q3 Health Innovation Partners (Penn, NJ, Ohio) as a Prime Contractor for HQIC Task Order 3**
 - Potential Prime Contractors informed CMS of Intent to Bid by June 5th
 - Proposal Deadline is June 25th
- **Recruit KY hospitals**
 - KHA sent Letter of Intent to participate to CEOs and Quality Directors on June 5th
 - KHA will start active recruiting hospitals soon





Letter of Intent to Participate with the Kentucky Hospital Association in the Hospital Quality Improvement Contractors (HQIC) Program

[Redacted] intends to participate in the Hospital Quality Improvement Contractors (HQIC) Program and other clinical initiatives with the Kentucky Hospital Association (KHA). The program is projected for a 4-year timeframe starting in September 2020. The HQIC program focuses on three overarching goals of behavioral health outcomes including decreasing opioid misuse, increasing patient safety, increasing quality of care transitions and reducing hospital readmissions. Included in this work are technical assistance and educational offerings, reducing disparities, patient and family engagement, leadership engagement and patient safety.

From the information KHA has received from CMS, the focus areas for this program will be:

- Opioid stewardship
- Adverse drug events
- Central-line associated blood stream infections (CLABSI) in all settings
- Catheter-associated urinary tract infections (CAUTI) in all settings
- Clostridioides difficile (C.diff), MRSA, including antibiotic stewardship
- Sepsis and septic shock
- Pressure injury
- Readmissions

Additional focus areas may include:

- Surgical site infections
- Venous thromboembolism (VTE) in all surgical settings
- Ventilator-Associated Events (VAE), including infection (IVAC), ventilator associated (VAC), and possibly ventilator associated pneumonia (PVAP)
- Injury from falls and immobility
- Airway safety
- Diagnostic error related to timeline
- Others as identified

Primary Quality Contact:

Name:

Title:

Phone: ()

Email:

By signing below, I hereby commit my hospital to continue to collaborate and work with the Kentucky Hospital Association's Quality team on the HQIC Program and other clinical initiatives as stated above.

CEO Signature (or designee): _____



Letter of Intent- Thank you!

- Baptist Health
- Wayne County
- U of L Peace
- Taylor Regional
- McDowell ARH
- Ohio County
- Murray-Calloway County
- Monroe County
- Methodist Health
- Rockcastle Regional
- Carroll County Memorial
- Barbourville ARH
- Three Rivers Medical Center
- Pikeville Medical Center
- Middlesboro ARH
- TriStar Greenview Regional
- Cumberland County
- Crittenden Community
- Caldwell Medical Center
- Twin Lakes Regional
- St. Elizabeth Health
- AdventHealth Manchester
- Livingston Hospital and Healthcare
- Hazard ARH
- Harrison Memorial
- Continue Care Hospital at BH Corbin
- Jennie Stuart Medical Center



Alliant Health

- Alliant Health Solutions was recently awarded KY as the new QIN/QIO by CMS
- KHA has subcontracted with Alliant Health for the next 5 years to provide community coalition work.
 - Communities are defined as Hospitals and other post acute care providers working together on specific quality improvement work



KHA/Alliant Scope of Work

Improve Behavioral Health Outcomes, Including focusing on Reducing Opioid Misuse



- Reduce opioid use and death
- Improve early detection of Alzheimer's and depression screening
- Improve access to and treatment of substance use disorders

Increase Patient Safety



- Reduce adverse drug events (ADEs) across community settings
- Reduce adverse drug events in nursing homes
- Reduce hospitalizations for nursing home onset of C-diff

Improve Chronic Disease Self-Management

(Cardiac and Vascular Health, Diabetes, Slowing and Preventing End Stage Renal Disease)



- Support the Million Hearts Initiative to prevent cardiovascular events
- Reduce smoking prevalence of Medicare beneficiaries
- Educate and screen patients to improve management of diabetes
- Diagnose, manage and screen for chronic kidney disease (CKD)

Increase Quality of Care Transitions



- Reduce the rate of emergency department visits
- Reduce hospital admissions and readmissions
- Reduce admissions and emergency department visits by super utilizers
- Improve care transitions between care settings

Community Coalitions

- 8 Regional Communities
 - Purchase Area Community
 - Hardin Community
 - Taylor Community
 - Meadowview/Fleming Community
 - Corbin/Hazard Community
 - Northern KY Community
 - Eastern KY Community
 - Lexington Community



Why Community Coalitions

Because they provide...

- Networking opportunities with a diverse group of providers, beneficiaries and community stakeholders
- Sharing promising strategies and best practices to improve community outcomes
- Access to community performance data
- Availability of educational resources for quality improvement techniques and methodology
- Access to technical assistance with improvement projects



KY Rising Stars

- **KY Rising Stars** is a KHA project to improve the Overall Hospital Ratings
- The Overall Hospital Ratings are based on 57 Quality Measures across 7 categories
- 7 categories:
 - Effectiveness of care
 - Efficient use of medical imaging
 - Mortality
 - Pt experience
 - Readmissions
 - Safety of Care
 - Timeliness of Care
- **Conduct Education on Star Ratings to hospitals** to kick off the “Coding for Quality” monthly webinar series



KY Rising Stars

- **Coding for Quality-**
 - Coding opportunities throughout the state
 - Overall Focus is to improve patient outcomes, clinical documentation, coding and reimbursement
 - Identify opportunities to improve coding versus opportunities to improve quality
 - Educational webinar series
 - **Conduct Education on Star Ratings to hospitals** to kick off the “Coding for Quality” monthly webinar series
 - Share real-time data
 - Have facilities share best practices with coding



KY Rising Stars

Best practices assessed:

- Coding and Clinical Documentation Improvement (CDI) specialists collaboration
 - Clinical documentation is the core of every patient encounter and reflect the scope of services provided
 - Facilitates the accurate representation of a patient's clinical status that translates into coded data
 - Collaboration/Education/Relationship
 - Moving beyond queries
 - Hospital Leadership buy-in
 - Education (Providers and staff)
 - Coders/CDI specialists participate in daily interdisciplinary meetings
 - Audits (of quality and coding processes around CMS star metrics)



KY Rising Stars

- **Develop Regional Groups to work on key Core Measures that impact Star Ratings**
 - Set benchmarks and create dashboards to determine progress made and create action plan revisions as needed
 - **What metrics stand out? Low-hanging fruit? (May be different for each Region)**
 - Address quality issues identified through Regional Collaborative
 - Targeting Low Performers but including High Performers as topic champions (for hospitals where coding is correct but quality issues are identified)
 - Have High Performing facilities in the Region present their success story to help others improve



Kentucky Sepsis Consortium

- **KHA created a KY Sepsis Consortium**
 - Worked with Senator Jimmy Higdon, 14th district (Casey, Marion, Nelson, Spencer and portion of Jefferson county) and Darrell Raikes, patient advocate sepsis survivor to create a Resolution:
 - KY recognizes September 13 as World Sepsis Day
 - Supports KHA in the creation of a KY Sepsis Consortium
 - The focus is to reduce the incidence of and harm from sepsis through education and quality improvement coaching for KY hospitals and their communities



Steering Committee

- The KY Sepsis Consortium's Steering Committee includes key stakeholders across the state including physicians, nursing, quality, pharmacists, lab and pt advocates
- Representation from all 4 Districts



Steering Committee

Bluegrass District

William Russell Judd, PharmD

Dana Stephens, MT, Lab

Dr. Louis Clabon, MD, Hospitalist

Clark Wheeler, RN, Director of Quality

Cumberland District

Dr. Anthony Stumbo, MD

James Hensley, RN, Dir- Process & Performance

Ohio Valley District

Dr. James Frazier, MD

Danette Culver, APRN, Sepsis Coordinator



Steering Committee

Twin Lakes District

Dr. Allison Rains, MD, Emergency Department

Dr. Eric Fischer, MD

JoAshley Ross, RN, Sepsis Coordinator

Sundown Clark, RN, Assistant CNO

Patient/Family Advocates

Darrell Raikes

Tracy Rexford, RN



Steering Committee

Kentucky Hospital Association

Deb Campbell, RN, Quality Improvement
Advisor

Carla Donnell, RN, Director of Quality, Pt
Safety, Health Professions

Melanie Moch, VP of Data and Health
Information

Kentucky Medical Association- TBD



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Goals

- To improve sepsis outcomes through collaborative learning to achieve timely and reliable implementation of evidence-based interventions.
- As a result of these efforts we will:
 - Decrease sepsis-associated mortality
 - Reduce morbidity from sepsis
 - Decrease the incidence of hospital-onset sepsis



Action plan

- Engage hospitals state-wide
- Standardization of early detection/screening
- Timely Evidence-based interventions
- Establish process and quality metrics to monitor for improvements
- Create dashboards to determine progress



Next Steps

- Steering Committee meeting
 - July 15th
 - Discuss Goals of the program
 - Discuss Proposed Plan and Timeline
 - Discuss process and outcome metrics
 - Schedule future monthly Steering Committee



Next Steps

- Monthly education webinars with evidence-based content
- Monthly data collection
- Recruit all Kentucky hospitals to participate
- Convene Regional training meetings to educate and energize hospitals
- Technical assistance
- Individual Coaching and support
- KHA site visits



Future state

- Including community partners (urgent care, nursing homes, ambulatory care, EMS)
- Promote and subsidize The Joint Commission Sepsis Certification for participating hospitals
 - Sponsored 4 Hospitals to complete the Joint Commission Sepsis Certification Program
 - Saint Joseph Hospital
 - Owensboro Health Regional Medical Center
 - Spring View Hospital
 - Meadowview Regional Medical center



Other Quality Improvement Work

- **SSI** (Colon, Abdominal hysterectomy)
- **ADE**-Adverse Drug Events (Anticoagulation, Hypoglycemia, Opioid Safety)
- **Readmissions** (All Cause; All Payer and Medicare)
- **VAC**- Ventilator Associated Condition
- **IVAC**-Infection-related Ventilator Associated Condition
- **Post-op VTE**-Venous thromboembolism
- **Pressure Ulcer (Stage 2)**



Sexual Assault Nurse Exam (SANE)

- KHA partnered with KY Association of Sexual Assault Programs (KASAP), U of L SANE Coordinators, and Kentucky Board of Nursing
- Focus is to bring awareness and education to Front line staff, Providers, and Leadership at Kentucky hospitals
 - The ethical and legal obligations to providing sexual assault exam to patients who have been sexually assaulted 24/7 if a SANE nurse is not available
 - Discuss challenges to KY hospitals and solutions to eliminate barriers



Next Steps

Goal is to Increase number of SANE Nurses

- Revise state-wide 40 hour didactic SANE training
 - Virtual component
 - Train the Trainer

Continue to bring awareness to KY hospitals

- Educational webinars
- Disseminate SANE awareness booklets and posters for Emergency Departments
- Site visits
- Work with hospitals to ensure they have policies and toolkits in place to guide Provider sexual assault exams and train staff to collect forensic evidence if SANE nurse NOT available



Additional Resources

- KHA website

<https://www.kyha.com/sexual-assault-response>

- **Sexual Assault Response Home-**
 - Information to help hospitals meet the legal and ethical obligations for sexual assault victims
- **Education-**
 - Sexual assault training video created by KASAP and KHA
 - Additional KASAP resources
 - SANE-ready hospital guide booklet created by KHA
 - Sexual Assault Treatment Poster created by KHA
 - Upcoming SANE Training events hosted by KASAP and KBN
 - Presentations



Additional Resources

- **Regulations and Policies for Hospitals-**
 - Laws and regulations
 - Hospital guides such as Hospital Procedural checklist and Emergency Department Responsibilities Checklist
(created by Kentucky Sexual Assault Team Advisory Committee)
- **Links-**
 - KASAP Programs (locating local crisis center, latest news, public awareness)
 - SANE-Ready Hospitals (list provided by OIG)



Future State

- Ensure front-line Providers are comfortable performing Sexual Assault Forensic Exam (SAFE)
 - Telehealth exams- Video conference with experienced SANE nurse to guide on-site Provider through the SAFE exam
 - 4-hour virtual training to prepare front-line Providers

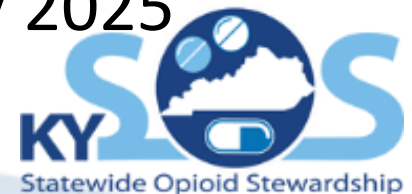


KY Statewide Opioid Stewardship

- KHA received Continuation Funding for the initial Grant, which will extend through June 2021
 - This provides additional funding to continue Inpatient work around Opioid Stewardship
- Monthly educational webinars and events
 - KY SOS is providing Continuing Education credits for physicians, nurses, and pharmacists
 - Also offering HB 1 CE credit for providers
- KY SOS Goal Statement: Reduce the number of Opioid prescriptions in KY by 1/3 by 2025



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KY SOS Advisory Committee

Kristy Deep, MD -UK Healthcare

Doug Oyler, PharmD -UK Healthcare

Ryan Stanton, MD -BH Lexington

Teresa Koeller, MD -St. Elizabeth Healthcare

Mike Kalfas, MD -St. Elizabeth Healthcare

Joe Grossman, CEO -ARH Health System

Alex Elswick, Patient Advocate –Voices of Hope
Foundation

Allen Brenzel, MD –Cabinet for Health and Family
Services

Nina Eisner, CEO -Ridge Behavioral Health System

Kellie Holland, RN, COO- Ridge Behavioral Health
System

Barbara Kinder, RN, CCO- Clark Regional
Medical Center



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KY SOS Data Reporting

- Monthly data reporting by participating facilities into KHA's KY Quality Counts data collection system
 - 5 Process Measures
 - 3 Outcome Measures
 - Use of Naloxone as a reversal agent
 - Concurrent e-prescribing of 2+ opioids or opioid + benzodiazepine at discharge
 - 3 Emergency Department Alternatives to Opioids (ALTO) measures
 - Migraine
 - Renal Colic
 - Acute Ankle Sprain
 - Ambulatory procedures where 3 days' supply or less of C2 opioid or zero days of C2 opioid prescribed
 - Dental Extraction
 - Uncomplicated Vaginal Delivery
 - Cardiac Catheterization
 - Appendectomy
 - Breast Biopsy/lumpectomy
 - Arthroscopic partial meniscectomy
 - Cholecystectomy
 - Prostatectomy
 - Thyroidectomy
 - Unilateral inguinal hernia repair



KY SOS

- KY SOS Website
 - www.kentuckysos.com
- Resources Available
 - Educational sessions and recordings
- KY SOS Banners



KY SOS
Statewide Opioid Stewardship

*Kentucky Hospitals
Working Together to
Fight the Opioid
Epidemic*

Our hospital is committed to:

- Reducing opioid over-prescribing
- Improving SAFE opioid use
- Taking action for our community & combatting the opioid epidemic

www.kentuckysos.com



KORE KENTUCKY OPIOID RESPONSE EFFORT
CHFS Cabinet for Health and Family Services
UK HealthCare
Kentucky Hospital Association



KY SOS

KY SOS
Statewide Opioid Stewardship

Working to Reduce the Number of Opioid Prescriptions in Kentucky by One-Third by 2025

June 2020

KY SOS Links

- [About KY SOS](#)
- [Events & Education](#)
- [Standards](#)
- [Resources](#)
- [Contact Us](#)

Kentucky Hospital Association

CHFS
KENTUCKY Cabinet for Health and Family Services

UK HealthCare

KORE
KENTUCKY OPIOID RESPONSE EFFORT

Kentucky Statewide Opioid Stewardship (KY SOS) June Newsletter

A Message from the KY SOS Team

KY SOS has been granted an extension year. KY SOS will continue to work on reducing the number of opioid prescriptions in Kentucky through June 2021, and hopefully longer! KY SOS is hoping to expand in other areas of health care.

KY SOS has designed a retractable banner for hospitals to showcase their participation in the KY SOS program. Each participating hospital will receive three banners to display in their lobby/registration area, emergency departments and/or any other location within the facility for the public to view. These banners will be mailed out this month to your facility's project lead.

Hospital Highlight

U of L Health – Jewish Shelbyville Hospital (JSH) has significantly reduced their use of opioids in the emergency department.

Amy Capps, ER Nurse Director, told KY SOS how they did it, "Our starting point was to look at our top prescribers and diagnosis" that led to opioids being prescribed. Having this knowledge allowed us to take our next steps. We decided as an organization that the amount of narcotic prescriptions being written would be reduced, meaning patients must meet have a definitive diagnosis, such as a fracture. In addition, we decreased the maximum amount to 3 days of medication without refills. Next we decided to take one diagnosis from our list and create a non-opioid medication regime. We chose migraine, and had tremendous success with acceptance by both staff and patients alike when properly educated regarding rebound headaches associated with narcotics and the success at improving migraines through the non-opioid medication management. We are currently looking at other diagnosis we could eliminate opioid usage with and developed a comfort menu to be used throughout the hospital to give patients

- Introducing.....
- KY SOS Monthly Newsletter
 - One page, stay informed!
 - If you did not receive a newsletter electronically, contact Claire Arant, carant@kyha.com



KY SOS Upcoming Webinars and Events

- Webinars
 - June 24, 2020 from 11a-12noon ET
 - Dr. Connie White will be presenting on OB best practices and prescribing (Metric 4)
 - If you did not receive a calendar invite, contact Emily Henderson, ehenderson@kyha.com
 - Future Webinar Topics
 - Metric 2a and 2b- Dr. Kristy Deep, July 2020
 - Behavioral Health
 - Bridge education emphasis from prescribing focus to progression into risk assessment and screening
 - » Risk factors for Use, to Misuse, and to Disorder
 - » Treatment and Continuum of Care
 - » Staff Fatigue and Stigma
- KY SOS In-Person Meeting Fall 2020
 - Educational sessions
 - Palliative Care
 - The Epidemic within the Pandemic
 - Best Practices from Hospitals around the State
 - Opioid Stewardship from a CEO's Perspective



KY SOS Partnerships

- Collaborating with other stakeholders to increase scope of education to providers and communities
 - Bluegrass Care Navigators
 - Palliative Care
- Partnership with Dr. Connie White and KY Perinatal Quality Collaborative



KY Perinatal Quality Collaborative

Kentucky Perinatal Quality Collaborative (KyPQC)-

- Led by Dr. Connie White
- KHA collaborating with KY Department of Public Health, KY Birthing Hospitals and other key stakeholders to improve maternal mortality across the state
- KyPQC to partner with KY SOS to decrease overprescribing for OB patients
- KHA representation on Workgroup development (OB, Neonatal, Data and Analytics)
- KHA representation on 15 member Steering Committee



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Questions

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