



## KHC Office Hours for Compass HQIC

April 27, 2022


This material was prepared by the Iowa Healthcare Collaborative, a Compass Hospital Quality Improvement Contractor under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS.

 | HOSPITAL QUALITY IMPROVEMENT CONTRACTOR


  
Kansas Healthcare  
COLLABORATIVE

1


## KHC Compass HQIC Team and Presenters:




**Mandy Johnson**  
Program Director of Quality Initiatives



**Eric Cook-Wiens**  
Data & Measurement Director




**Erin McGuire**  
Quality Improvement Advisor





**Heidi Courson**  
Quality Improvement Advisor

**Special guest:**



**Susan Runyan, MHL**  
Runyan Health Care Quality Consulting

 | HOSPITAL QUALITY IMPROVEMENT CONTRACTOR

  
Kansas Healthcare  
COLLABORATIVE

2

## Agenda

- + Welcome and Announcements
- + Featured Topic: Improving Care of the Sepsis Patient through Patient and Family Engagement
- + Data and Program Updates
- + Resources, Upcoming Events, and Next Steps

April 27, 2022

COMPASS | HOSPITAL QUALITY  
IMPROVEMENT CONTRACTOR

KHC  
Kansas Healthcare  
COLLABORATIVE

3

## HQIC Cross-Cutting Priorities

Health Equity

Patient and Family  
Engagement

Telehealth



## Core Focus Areas

- + Behavioral Health / Opioids
- + Care Transitions/Readmissions
- + Community Collaboration/Integration
- + Health Equity
- + Pandemic Response
- + Patient Safety\*  
*Sepsis and Septic Shock*
- + Telehealth

4

v  
(

## Welcome Susan Runyan



COMPASS | HOSPITAL QUALITY  
IMPROVEMENT CONTRACTOR

5

Improving Sepsis Strategies through  
Patient & Family Engagement

Be Heard.  
Spread the Word.

The Walt Aikman Sepsis Journey

4/27/22

6

v  
(

# Great at Business

## Leader/President/CEO

- Strong
- Confident
- Calculated
- Opinionated
- Calm
- Powerful
- Authoritative



7

# Great at Family

## Patriarch

- Husband
- Father of 4
  - 3 Sons
  - 1 Daughter
- Grandfather of 8
- Uncle
- Friend
- Shriner



8



# Not So Great at Health

**Regular Guy**

- Insecure
- Doubting
- Resistant
- Fearful
- Hesitant



4/27/22

9

## Who is at risk?







Some people are at higher risk for sepsis:

 <p>Adults 65 or older</p>	 <p>People with weakened immune systems</p>
 <p>People with chronic medical conditions, such as diabetes, lung disease, cancer, and kidney disease</p>	 <p>People with recent severe illness or hospitalization</p>
 <p>Sepsis survivors</p>	 <p>Children younger than one</p>

10

## What are the signs & symptoms?

A patient with sepsis might have one or more of the following signs or symptoms:

	
High heart rate or low blood pressure	Fever, shivering, or feeling very cold
	
Confusion or disorientation	Shortness of breath
	
Extreme pain or discomfort	Clammy or sweaty skin

11

### HOW CAN I GET AHEAD OF SEPSIS?

1. Talk to your doctor or nurse about steps you can take to prevent infections. Some steps include taking good care of chronic conditions and getting recommended vaccines.
2. Practice good hygiene, such as handwashing, and keeping cuts clean and covered until healed.
3. Know the symptoms of sepsis.
4. **ACT FAST.** Get medical care **IMMEDIATELY** if you suspect sepsis or have an infection that's not getting better or is getting worse.

Sepsis is a medical emergency. Time matters. If you or your loved one suspects sepsis or has an infection that's not getting better or is getting worse, **ask your doctor or nurse, "Could this infection be leading to sepsis?"**

To learn more about sepsis and how to prevent infections, visit [www.cdc.gov/sepsis](http://www.cdc.gov/sepsis).

  
Pub No. 300408

### FOR PATIENTS AND FAMILIES

## IT'S TIME TO TALK ABOUT SEPSIS.

Infections put you and your family at risk for a life-threatening condition called sepsis.

**GET AHEAD OF SEPSIS**  
KNOW THE RISKS. KNOW THE SIGNS. ACT FAST.













12

## HOW CAN I GET AHEAD OF SEPSIS?



As a patient, you can take specific steps to reduce your risk of sepsis, including caused by COVID-19, such as:

- 1 | PREVENT INFECTIONS**  
Talk to your healthcare professional about steps you can take to prevent infections that can lead to sepsis.
- 2 | PRACTICE GOOD HYGIENE**  
Remember to wash your hands and keep cuts clean and covered until healed.
- 3 | KNOW THE SIGNS AND SYMPTOMS**  
A patient with sepsis might have one or more of the following signs or symptoms. A medical assessment by a healthcare professional is needed to confirm sepsis.
- 4 | ACT FAST**  
Sepsis is a medical emergency. **ACT FAST.**

 Take good care of chronic conditions	 Get recommended vaccines	
 Wash your hands	 Keep cuts clean and covered until healed	
 High heart rate or low blood pressure	 Fever, or shivering, or feeling very cold	 Confusion or disorientation
 Shortness of breath	 Extreme pain or discomfort	 Clammy or sweaty skin

If you or your loved one has an infection that's not getting better or is getting worse, **ACT FAST.** Get medical care **IMMEDIATELY** either in-person, or at minimum, through telehealth services. Ask your healthcare professional, "Could this infection be leading to sepsis?" and if you should go to the emergency room for medical assessment.

To learn more about sepsis and how to prevent infections, visit [www.cdc.gov/sepsis](http://www.cdc.gov/sepsis) or call **1-800-CDC-INFO**.



13

# January 2013

64 year old white male

History of:

- Diabetes
- High blood pressure
- High cholesterol

4/27/22

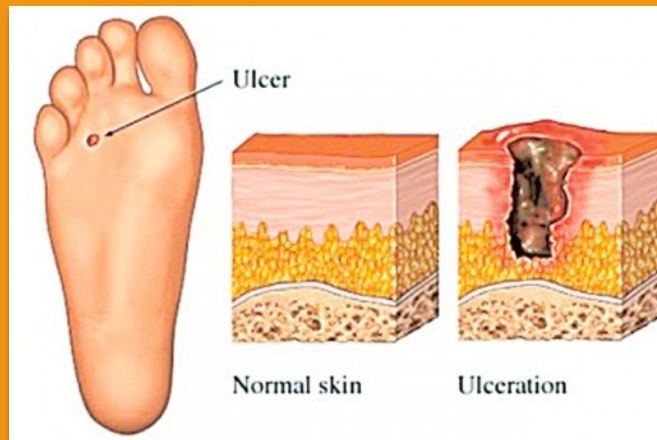
14



## “Spot on my foot”

His family physician:

“Just keep cleaning it out and changing your dressing if it gets wet.”



4/27/22

15

## March 2013

- Wound Clinic
- Emergency Department
- Admit to Diabetic Floor



4/27/22

16



## Congestive Heart Failure

- Transfer to CICU
  - Felt some relief
  - Though things would finally get better
- Team of physicians
  - Cardiologist
  - Wound Specialist
  - Infection Disease
  - Nephrologist
  - Intensivist



17

## April 1, 2013

- Confused, combative, literally red
- ‘Small’ heart attack
  - “He needs an LVAD”
  - “He needs a heart transplant”
  - “We need to fly him to a KC Hospital”



18

# April 2, 2013

“The heart is the least of his worries now.....”

“The infection is killing him.....”

4/27/22

19

# April 10, 2013

- Induced Coma
- Intubated
- Continuous dialysis
- Multiple antibiotics and fluids
- Attempted to wean off ventilator
- No brain activity



20




**April 11, 2013**

3:51am - his body was overtaken by sepsis



21

**Be Heard.  
Spread the Word.**



22

# KHC & Compass Data Updates

COMPASS | HOSPITAL QUALITY  
IMPROVEMENT CONTRACTOR

  
Kansas Healthcare  
COLLABORATIVE

23

## Data Updates

- + Data are due at the end of the following month.
- + Data Refresh
  - Administrative Claims and NHSN transferred to QHi
  - QHi data are sent to Compass
  - Current Data Refresh: 4/10/2022
  - Next Refresh: **On or around May 10, 2022**

COMPASS | HOSPITAL QUALITY  
IMPROVEMENT CONTRACTOR

  
Kansas Healthcare  
COLLABORATIVE

24



4/27/22

# QHi Training Session



[MyQHi.org](http://MyQHi.org)

Date: Wednesday, May 25

Time: 1:00 – 2:00 CT

Here is the link to register: <https://cc.readytalk.com/r/vrhyrpyfzm2s&eom>

- Adding New Users
- Select Measures
- Entering and Importing Data
- Running Reports



25

4/27/22

## QUALITY REPORTING FOR CRITICAL ACCESS HOSPITALS



*I work at a Critical Access Hospital, what do I need to report?*



[MyQHi.org](http://MyQHi.org)



- Quality Programs
- Impact of participation
- Data submission process
- Measure lists
- Resources
- Acronyms

**INTRODUCTION**

Since 2003, the QHi benchmarking program has supported rural hospitals and clinics across the country. Critical Access Hospitals comprise over 75 percent of QHi participants. The QHi team developed this guide in response to the often posed question, "As a CAH, what quality measures are required to report?"

There are many benefits to participating in a quality program, the most important being improved quality of patient care. All are voluntary but, depending on the program, participation may result in a financial impact. Federally funded programs often require reporting of particular quality measures as do state and local health insurers.

**ABOUT THE GUIDE**

Quality experts at all levels were engaged to build this guide. A special thanks to the Oregon Office of Rural Health, generously sharing their document.

Many others volunteered their time and expertise. Contributors and resources are listed here. Designed to assist quality staff at hospitals, this guide can also act as a template for network or state leadership to develop a customized guide supporting local, regional and state quality initiatives.

**CONTRIBUTORS AND RESOURCES**

Centers for Medicare and Medicaid Services

Hospital Quality Improvement Contractors (HQIC):

- EPHC
- Nedyne Hoagwood, RN

Kansas Healthcare Collaborative (KHC):

- Edie McGuire
- Heidi Coxson, RN
- Eric Cook-Waters, MPH, CPHQ

Kansas Rural Hospitals Optimization:

- Jennifer Finlay
- Susan Durgatz

Merit-Based Incentive Payment (MIPS):

- Shannon Egan
- QHi Merit-Based Incentive Payment
- Lucy Drosselmeier

QHi:

- Sally Othman
- Sha Moore
- Jaron Caffrey

**HOSPITAL QUALITY IMPROVEMENT CONTRACTOR (HQIC)**

**PROGRAM OVERVIEW**

Hospital Quality Improvement Contractor provides targeted quality improvement assistance to rural and critical access hospitals, as well as hospitals serving vulnerable and underserved populations to achieve measurable outcomes with a focus on patient safety, care transitions and episode.

KHC is a new Centers for Medicare and Medicaid Services-led initiative which builds upon the Hospital Improvement Innovation Network. There are more than 100 hospitals in Kansas and more than 2,000 nationally identified as eligible to participate in this program.

**IMPACTS**

This initiative is designed to help hospitals improve in the respective measures and collaborate with other hospital peers to share best practices. This initiative can help facilities collectively promote better outcomes. This program is voluntary and is at no cost to hospitals.

**LOCAL SUPPORT**

Kansas Association of Medical Care  
Kansas Healthcare Collaborative



<https://www.kha-net.org/DataProductsandServices/DataProducts/d164234.aspx>

26

v  
(

## KHC & Compass Resources, Updates, and Upcoming Events

COMPASS | HOSPITAL QUALITY  
IMPROVEMENT CONTRACTOR

**KHC**  
Kansas Healthcare  
COLLABORATIVE

27

### 2022 Quality Improvement Work Plans (QIWP)

- + Please update your QIWP to include 2022 goals.
- + Your QIA will submit any necessary QIWP changes to the IHC data portal on your behalf.
- + Please submit your 2022 work plans ASAP.

COMPASS | HOSPITAL QUALITY  
IMPROVEMENT CONTRACTOR

**KHC**  
Kansas Healthcare  
COLLABORATIVE

28

## KHC Office Hours

- + Register once for all remaining sessions.
- + Save recurring appointment to your calendar.
- + Stay abreast of KHC program updates.
- + Learn from subject matter experts and peers.

### Up Next!

**May 25, 2022 | 10:00-11:00a.m.**  
Hospital sharing on improving sepsis bundle compliance

KHC Office Hours series registration link:  
[https://us06web.zoom.us/webinar/register/WN\\_3wt40adgS2aQmYibO3mlng](https://us06web.zoom.us/webinar/register/WN_3wt40adgS2aQmYibO3mlng)

All sessions are held from 10 to 11 a.m. CST.  
Sessions will be recorded and posted to KHC Education Archive at [www.khconline.org/archive](http://www.khconline.org/archive).



29

## Now enrolling up to 8 facilities for 2022 project Overdose Data to Action

KHC and KDHE are inviting applications from hospitals and clinics to join a clinical quality improvement project to prevent and decrease harms associated with controlled substances, such as opioids and Substance Use Disorder (SUD).

### Eligible hospitals and clinics:

- Serve a high-risk population
- Have a need for education, training, policy development and technical assistance around safe prescribing

For more information, visit  
[www.khconline.org/od2a](http://www.khconline.org/od2a)

and contact Mandy Johnson, MBA, CRHCP  
KHC Program Director  
Desk: (316) 681-8200 |  
[mjohnson@khconline.org](mailto:mjohnson@khconline.org)

### OD2A Project Goals Summary

1. Increase provider and health system awareness of and support for guidelines
2. Decrease high-risk opioid and/or high-risk controlled substance prescribing
3. Support development of clinical quality improvement around substance use disorder screening, referral, overdose management and linkage to care for patients presenting in the clinic or emergency department.

Project ends August 31, 2022



30

## Event Schedule

Session #1 | April 7, 2022 | 12:00-1:00pm  
Session #2 | May 5, 2022 | 12:00-1:00pm  
Session #3 | June 2, 2022 | 12:00-1:00pm  
Session #4 | July 7, 2022 | 12:00-1:00pm

## Speakers



**Kellie Wark, MD, MPH**  
Asst. Prof Inf Diseases, KUMC  
HAI/AR expert and AS Co-Lead, KDHE



**Nicole Wilson, PharmD, BCIDP, DPLA**  
AS Program Coordinator, KUMC  
HAI/AR expert and AS Co-Lead, KDHE

*Each session is approved for 1 Nursing and/or Pharmacy Continuing Education credit*



Department of Health and Environment

Healthcare-Associated Infections & Antimicrobial Resistance Program

In partnership with



**Kansas Healthcare**  
COLLABORATIVE

## Now enrolling!

# Antibiotic Stewardship

### Practical Implementation for Kansas Hospitals

Register at <https://www.khconline.org/abs-series>

### Target Audience

Pharmacists | Nurse Leaders | Clinicians | Quality Leaders |  
Infection Preventionists | Antibiotic Stewardship team members



HOSPITAL QUALITY IMPROVEMENT CONTRACTOR



31

## Upcoming KRHOP Education

### Quality Corner Calls

**May 26**  
Noon to 1 p.m.  
Patient Experience: Making a Difference

**August 10**  
Noon to 1 p.m.  
(topic TBD)



**September 29**  
Noon to 1 p.m.  
(topic TBD)

### Employee Health and Safety Cohort

**Informational Webinar**  
**May 13**  
10 a.m.

**Project runs June to October**

More information at [www.krhop.net](http://www.krhop.net)



32



## Next Steps

- + Ensure data entry is current and timely
- + Review your Q.I. Work Plan and update for 2022 goals — please submit to your QIA
- + Log into iCompass Forum and iCompass Academy to engage and learn
- + Watch your inbox for the Compass Navigator on May 1<sup>st</sup>



33

## Have Questions, Need Help?

### Kansas Healthcare Collaborative

#### Heidi Courson

Quality Improvement Advisor  
[hcourson@khconline.org](mailto:hcourson@khconline.org)  
785-231-1334

#### Erin McGuire

Quality Improvement Advisor  
[emcguire@khconline.org](mailto:emcguire@khconline.org)  
785-231-1333

#### Eric Cook-Wiens

Data and Measurement Director  
[Ecook-wiens@khconline.org](mailto:Ecook-wiens@khconline.org)  
785-231-1324

### Kansas Hospital Association/QHi

#### Sally Othmer

Senior Director Data & Quality  
[sothmer@kha-net.org](mailto:sothmer@kha-net.org)  
785-276-3118

#### Stuart Moore

Program Manager QHi  
[smoore@kha-net.org](mailto:smoore@kha-net.org)  
785-276-3104

### KHIN/KONZA

#### Josh Mosier

Manager of Client Services  
[jmosier@khinonline.org](mailto:jmosier@khinonline.org)  
785-260-2761


#### Rhonda Spellmeier

HIE Workflow Specialist  
[rspellmeier@khinonline.org](mailto:rspellmeier@khinonline.org)  
785-260-2795



34

**Questions?**



COMPASS | HOSPITAL QUALITY IMPROVEMENT CONTRACTOR

35

**Thank you for joining us.**

**We invite your feedback.**  
What was a key take-away?  
What are 3 next steps based on the information shared?

Please complete our brief feedback survey.  
[www.khconline.org/april-survey](http://www.khconline.org/april-survey)

COMPASS | HOSPITAL QUALITY IMPROVEMENT CONTRACTOR

36

4/27/22



Connect with us on:



KHCqi

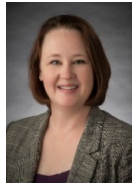


@KHCqi

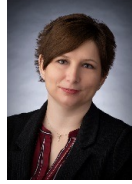


KHCqi

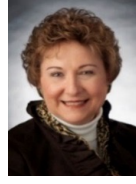
→ Find contact info, bios,  
and more at:  
[www.KHOnline.org/staff](http://www.KHOnline.org/staff)



**Malea Harlvickson**  
Executive Director



**Mandy Johnson**  
Interim Director  
of Quality Initiatives



**Rhonda Lassler**  
Operations Manager



**Eric Cook-Wiens**  
Data & Measurement  
Director



**Phil Cauthon**  
Communications Director



**Treva Borchert**  
Project Coordinator



**Kayle Andersen**  
Quality Improvement Advisor



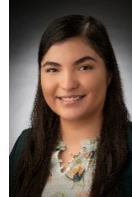
**Heidi Courson**  
Quality Improvement Advisor



**Jill Daughetelee**  
Quality Improvement Advisor  
& Education Coordinator



**Julia Pyle**  
Quality Improvement Advisor



**Azucena Gonzalez**  
Health Care Quality Data Analyst



**Erin McGuire**  
Quality Improvement Advisor



**Patty Thomsen**  
Quality Improvement Advisor