

Today's webinar will begin soon.

- Please mute your line by pressing ***6**.
- Questions and comments for the presenter and TCPS staff may be typed in the chat box.
- Please do not use the “hold” option on your phone.
- Lines will be opened during the call, so attendees may participate in discussion.
- Thank you for your patience.

THA HEN 2.0 Planning Webinar

March 12, 2015

THA HEN Highlights

- December 2011 – December 2014
- 61 acute care facilities
- Focus on readmissions, HAI (CAUTI, CLABSI, VAP/VAE, SSI), and HAC (falls, pressure ulcers, VTE)
- New topics generated by Partnership for Patients
 - OB adverse events (including EED)
 - Adverse drug events
 - Patient and family engagement

THA HEN Impact

Infections and complications reductions

1,853 fewer adverse events

\$2,307,325 estimated cost savings

Readmissions reduction

9,256 fewer readmissions

\$88,857,600 estimated cost savings

Total savings = \$91,164,925 and

11,109 events/readmissions

PFE Metrics

Patient and Family Engagement

Prior to admission, hospital staff provides and discusses a discharge planning checklist with every patient who has a scheduled admission, allowing questions or comments from the patient or family.

100%

Hospital conducts shift change huddles for staff and does bedside reporting with patients and family members in all feasible cases.

82%

Hospital has a dedicated person or functional area that is proactively responsible for patient and family engagement and systematically evaluates patient and family engagement activities.

61%

Hospital has an active Patient and Family Engagement Committee or at least one former patient who serves on a patient safety or quality improvement committee or team.

46%

Hospital has one or more patient(s) who serves on a governing or leadership board and serves as a patient representative.

39%

Source: THA HEN Z-5 August 2014

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Leadership Metrics

Leadership

Hospital has regular quality review aligned with the Partnership for Patients goals (40% reduction in HACs/20% reduction in preventable readmissions).

100%

Hospital has a public commitment to safety improvement with transparency in sharing more than CORE measurement data with the public.

95%

Patient safety goals or special targets are incorporated into all hospital staff roles or goals.

93%

Hospital board of trustees has a quality committee established, with regular review of patient safety data, including review and analysis of risk events.

95%

Source: THA HEN Z-5 August 2014

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

HEN 2.0 Overview

- **Goal**—to reduce all-cause preventable in-patient harm by 40% and readmissions by 20%
- 12 month contract (start date not identified)
- Proposal to be submitted March 27th
- Focus on same 10 adverse event areas
 - Adverse Drug Events, CAUTI, CLABSI, Falls, OB Adverse Events, Pressure Ulcers, SSI, VTE, VAE, and Readmissions
- Optional new topics
 - Sepsis, worker safety, undue exposure to radiation, Iatrogenic Delirium, airway safety, failure to rescue, C. diff (including antibiotic stewardship)

Polling Question 1a

- Which of the following topics is your facility currently working on? (Answer all that apply).

Sepsis 79%

Worker safety 53%

Undue exposure to radiation 42%

Iatrogenic delirium 11%

Polling Question 1b

- Which of the following topics is your facility currently working on? (Answer all that apply).

Airway safety 26%

Failure to rescue 37%

C. diff (including antibiotic stewardship) 84%

Polling Question 2a

- Which of the following topics would your facility be interested in working on in HEN 2.0? (Answer all that apply).

Sepsis 83%

Worker safety 39%

Undue exposure to radiation 28%

Iatrogenic delirium 17%

None 11%

Polling Question 2b

- Which of the following topics would your facility be interested in working on in HEN 2.0?(Answer all that apply).

Airway safety 16%

Failure to rescue 37%

C. diff (including antibiotic stewardship) 89%

None 11%

HEN 2.0 Changes

- All HENs will use a common set of measures
- 17 measures are identified around the 10 core areas, and at least 15 of these must be adopted
- Individual hospital data will be reported but may be de-identified
- Promotion of disparities reduction

Discussion

- What makes participating in the THA HEN worthwhile to your facility/system?

Discussion

- What can TCPS do to organize and message all the initiatives in a cohesive way to hospitals/systems to engage staff?

Discussion

- Are CEO leadership reports being utilized? How might information be better displayed for action?

Discussion

- What resources and intervention strategies provided by TCPS are most useful in assisting hospitals?

Polling Question 3a

- Which strategies will be most useful to your facility going forward?(Check all that apply).

Education (webinars, conference calls) 100%

Tools and resources (evidence-based, website) 94%

Leadership scorecards 82%

Expert faculty(state/national level) 53%

Coaching calls 47%

Polling Question 3b

- Which strategies will be most useful to your facility going forward?(Check all that apply).

In-person topic focused education/training 65%

In-person networking meetings (regional/statewide) 71%

Site-visits by TCPS staff 59%

Peer-to-peer assistance 47%

Other 0%

Discussion

- How can TCPS best recognize/celebrate hospital participation and success?

Other Questions/Comments?

Intent to Participate

- Answer a two-question survey, asking whether your facility/system intends to participate
- <https://www.surveymonkey.com/r/BFK99QC>

Spring Regional Meetings

Knoxville—Tuesday, April 21, 2015

Jubilee Banquet Facility

Nashville—Tuesday, April 28, 2015

THA Offices

Memphis—Thursday, April 30, 2015

Marriott Memphis East

Register at www.tnpatientsafety.com