



Fast Facts



Quality Improvement in Rural Hospitals—System and Practice: Learning Session 2

The *Quality Improvement in Rural Hospitals—System and Practice (QI in Rural Hospitals—S&P)* collaborative, presented by Health Services Advisory Group, Inc. (HSAG) in collaboration with the Rural Hospital Flexibility Program at the Rural Health Office, held its second learning session at the HSAG Phoenix office on **Thursday, January 21, 2010**. The current project focuses on improving the “infection monitoring and reporting process” in Arizona Critical Access Hospitals (CAHs).

Meeting Objectives

- Refine project Aim Statements developed by participating hospital teams after the first learning session.
- Refine process flow charts developed by participating hospital teams after the first learning session.
- Identify key leverage point(s) in the process flow charts for monitoring process performance.
- Identify potential process measures.

Meeting Highlights:

- Joyce Hospodar of the RHO presented an overview of The Kansas Hospital Assoc. Quality Health Indicators (QHI) project. It revealed the possibility of using the QHI data collection system to collect custom performance indicators developed for the current *QI in Rural Hospitals—S&P* project.
- Dr. Silvey of HSAG demonstrated the project Web page for the *QI in Rural Hospitals—S&P* collaborative. The Web page, located at www.hsag.com/services/special/cahs.aspx, includes postings of all materials from learning sessions and recordings and materials from WebEx sessions. It also includes reference materials and links to project-related Web sites.
- Participants collaborated to refine the Aim statement for each of the six hospitals represented at the meeting.

Key “Take-Away” Messages

- Aim statements are only one component of a team charter. In addition to the Aim statement, a charter includes information needed to structure and organize what the team is going to do, how it will go about its work, and how it will communicate its barriers, needs, activities, and results (charter templates were provided).
- Effective measures should focus on monitoring process performance at key intervention point(s) at which data collection is feasible and which also provide maximum leverage for improving the process.

Next Steps (to be completed by Thursday, February 18, 2010)

- RHO staff will find out if AZ-QHI participants can design their own performance indicators for use with the QHI electronic data collection tool.
- *QI in Rural Hospitals—S&P* project participants will:
 - Visit the project page on the HSAG Web site.
 - Report any technical difficulties and send any proposed Web links, resources, etc. to [Dr. Silvey](#).
- *QI in Rural Hospitals—S&P* project team leaders will:
 - Complete their teams’ charters—including team name, process name, team members, and Aim statement.
 - Refine their teams’ process flow charts based on refined Aim statements.
 - Identify key intervention/monitoring leverage points in their processes.
 - Call Dr. Silvey (602.665.6135) for one-on-one sessions, if needed.
- HSAG staff will call hospital team leaders to provide technical assistance with these Next Steps.
- The next WebEx session will be held online Tuesday, February 23, 2010. Instructions for joining the online meeting will be sent prior to the event.