

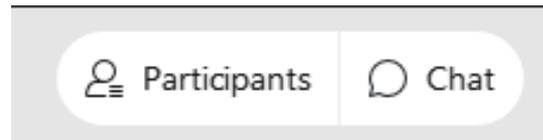


# HSAG HQIC Informational Session What You Need To Know

Hospital Quality Improvement Contract (HQIC)  
Program  
October 2020

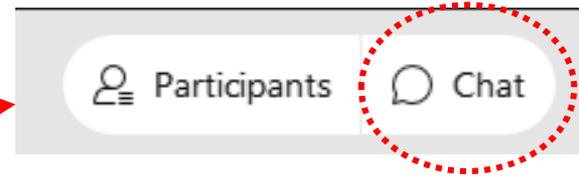
# How to Find the Chat Button

- Click on the button at the bottom right corner of your WebEx window and select the chat button.

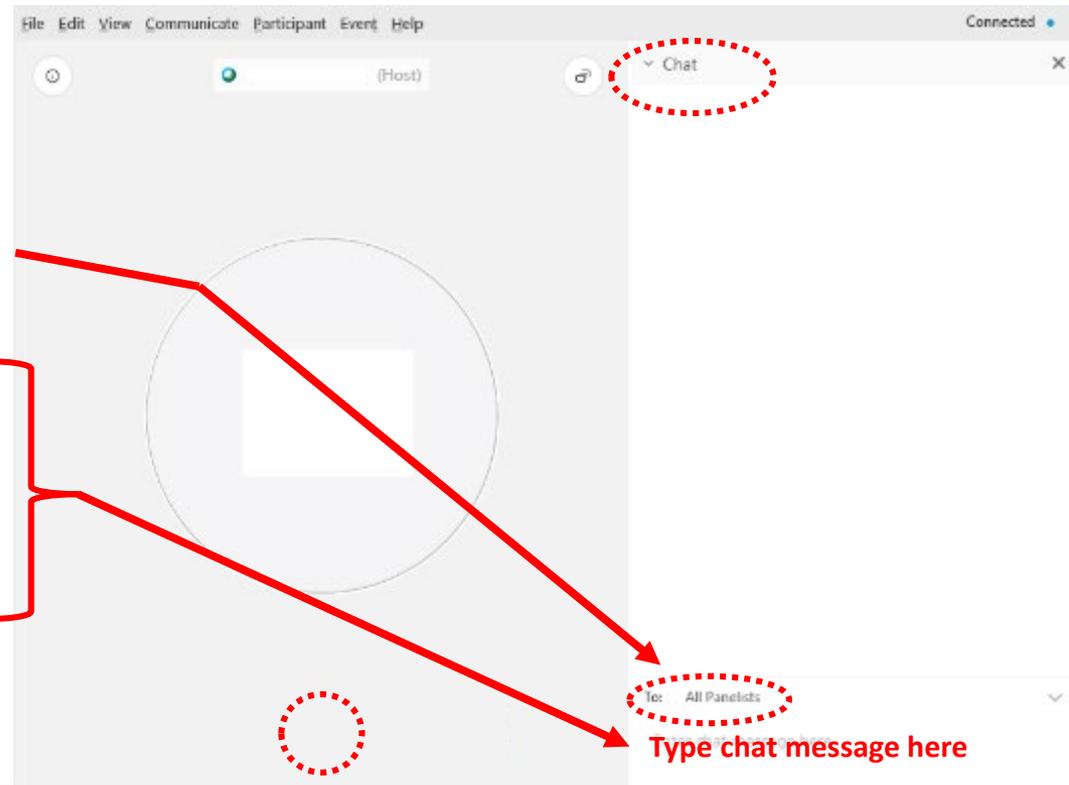


# How to Submit a Question

1. To submit a question, click on the **Chat Button** located in the bottom right corner of your WebEx window.



2. The **Chat** panel will open on your right.



3. Indicate that you want to send a question to **All Panelists**.

4. Type your question in the box at the bottom of the panel.

5. Press **Enter** on your keyboard to submit your question.

To connect to the audio portion of the webinar, please have WebEx call you.

# Webinar Objectives

- Describe the Centers for Medicare & Medicaid Services (CMS) HQIC initiative, goals, and a timeline for the coming months.
- Discover how HSAG will support your acute care quality improvement work.
- Move toward next steps in participation.

# A Word From Mary Ellen Dalton, CEO, HSAG



Mary Ellen Dalton, PhD, MBA, RN  
President & Chief Executive Officer

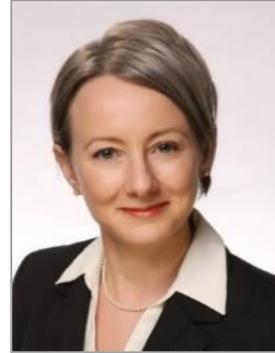
*On behalf of Health Services Advisory Group, I welcome you to this informational webinar for the Hospital Quality Improvement Contract.*

*We're very excited to present to you the details of the HQIC and have you as a partner in this program.*

# Meet the HSAG HQIC Core Strategy Team



**Christine Martini-Bailey**  
MSN, RN, CSSGB  
Executive Director, HSAG



**Laurie Hensley-Wojcieszyn**  
MHA, CPHQ, LSSGB  
Associate Director, HSAG



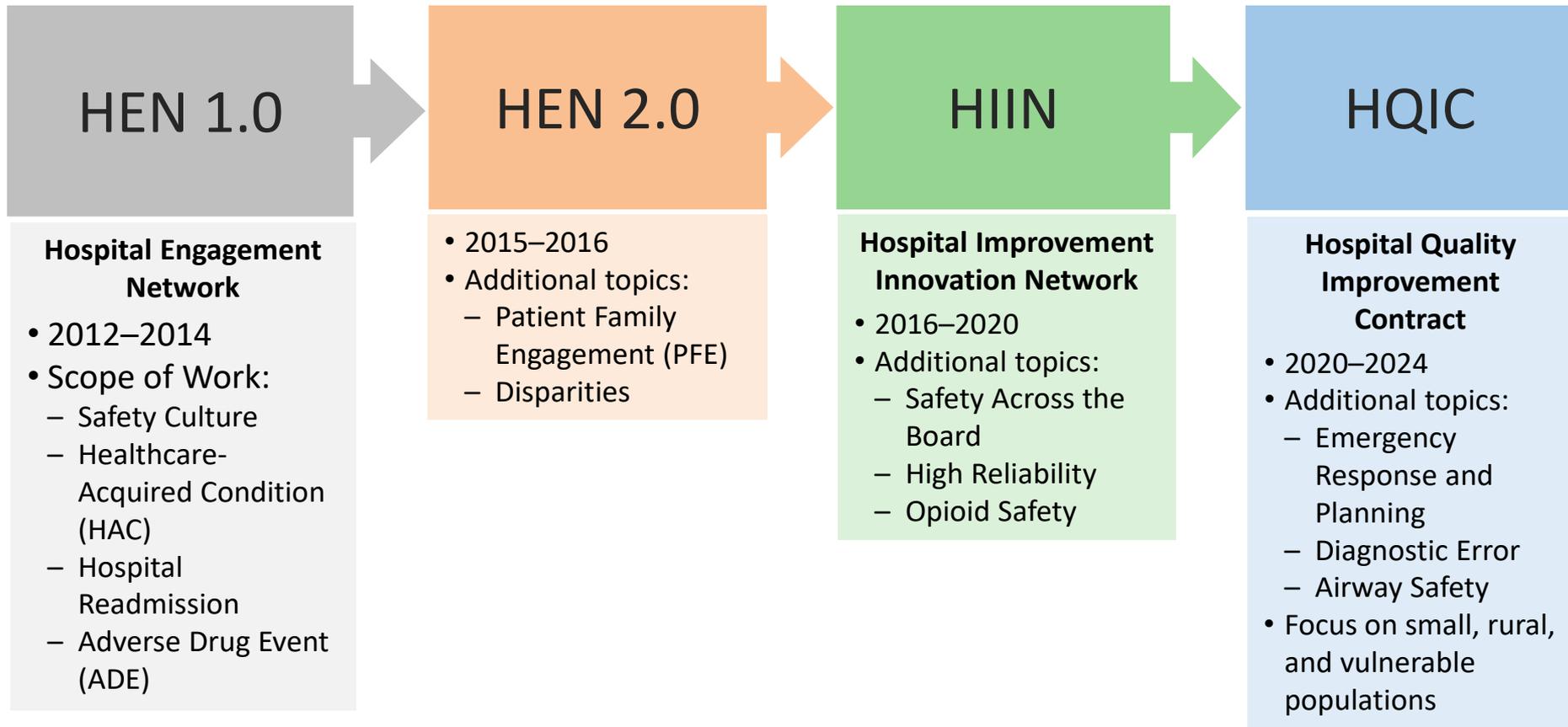
**Eli Delille**  
MSN, RN, CIC, FAPIC  
Associate Director, HSAG



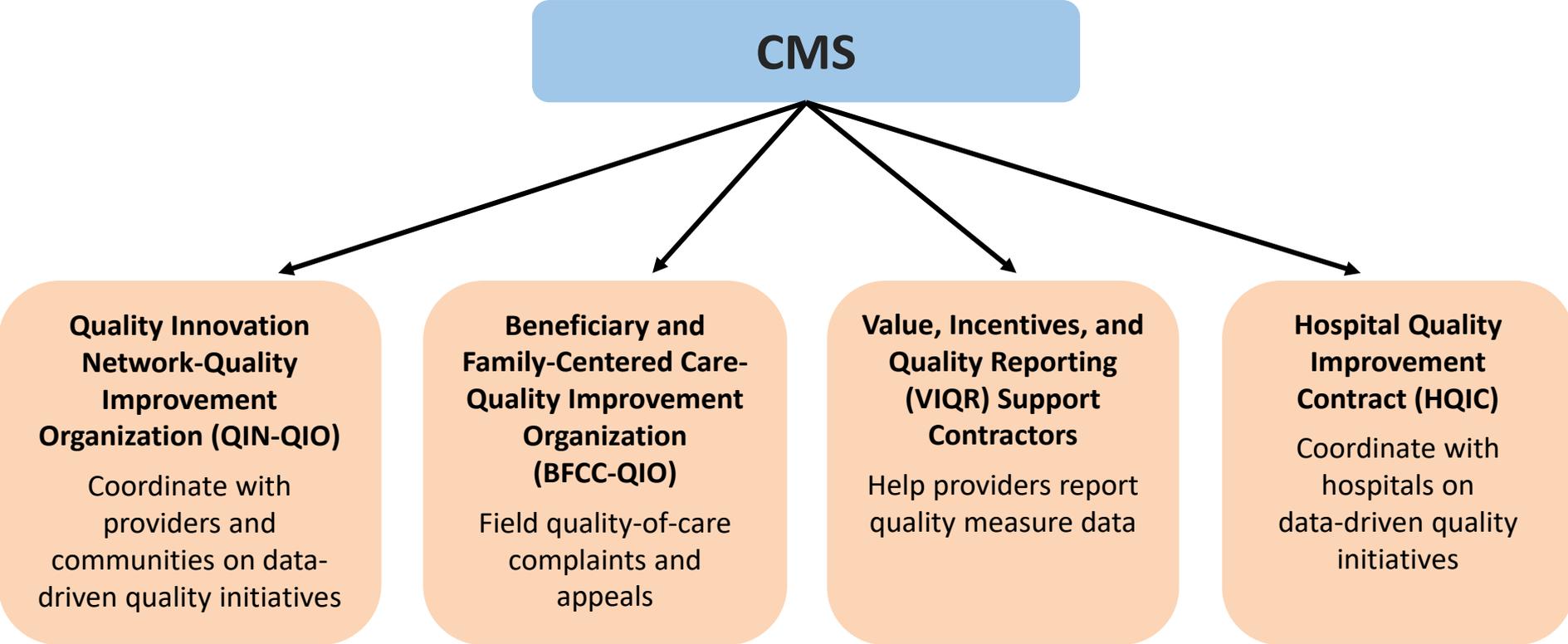
**Greg Sieradzki**  
MS, MHA, CPHQ, LSSGB  
Quality Advisor, HSAG

# CMS/HHS<sup>1</sup> Programs

## The Partnership for Patients

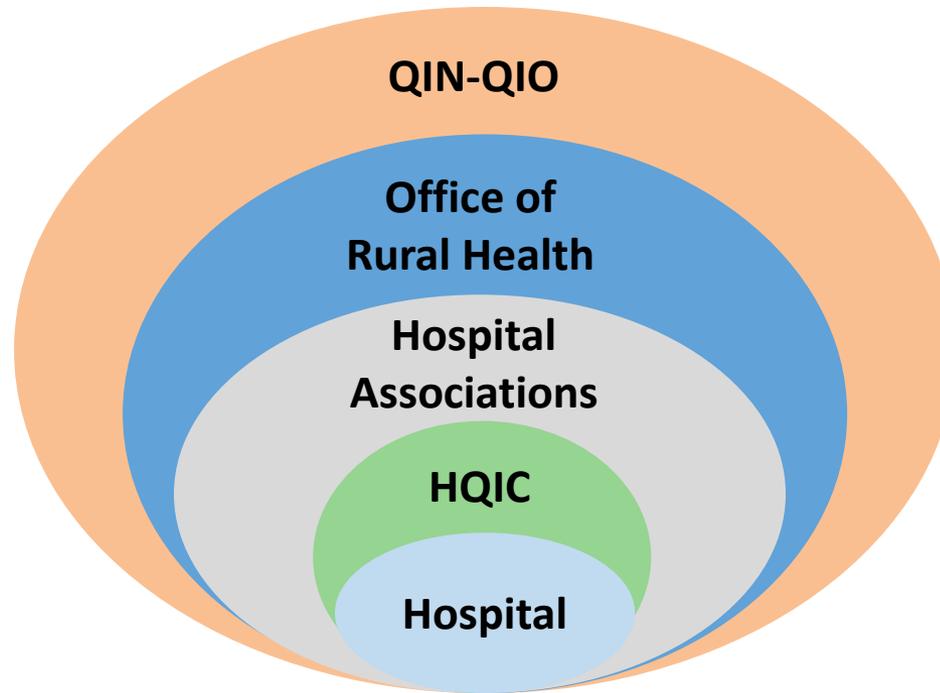


# The CMS Quality Contractors

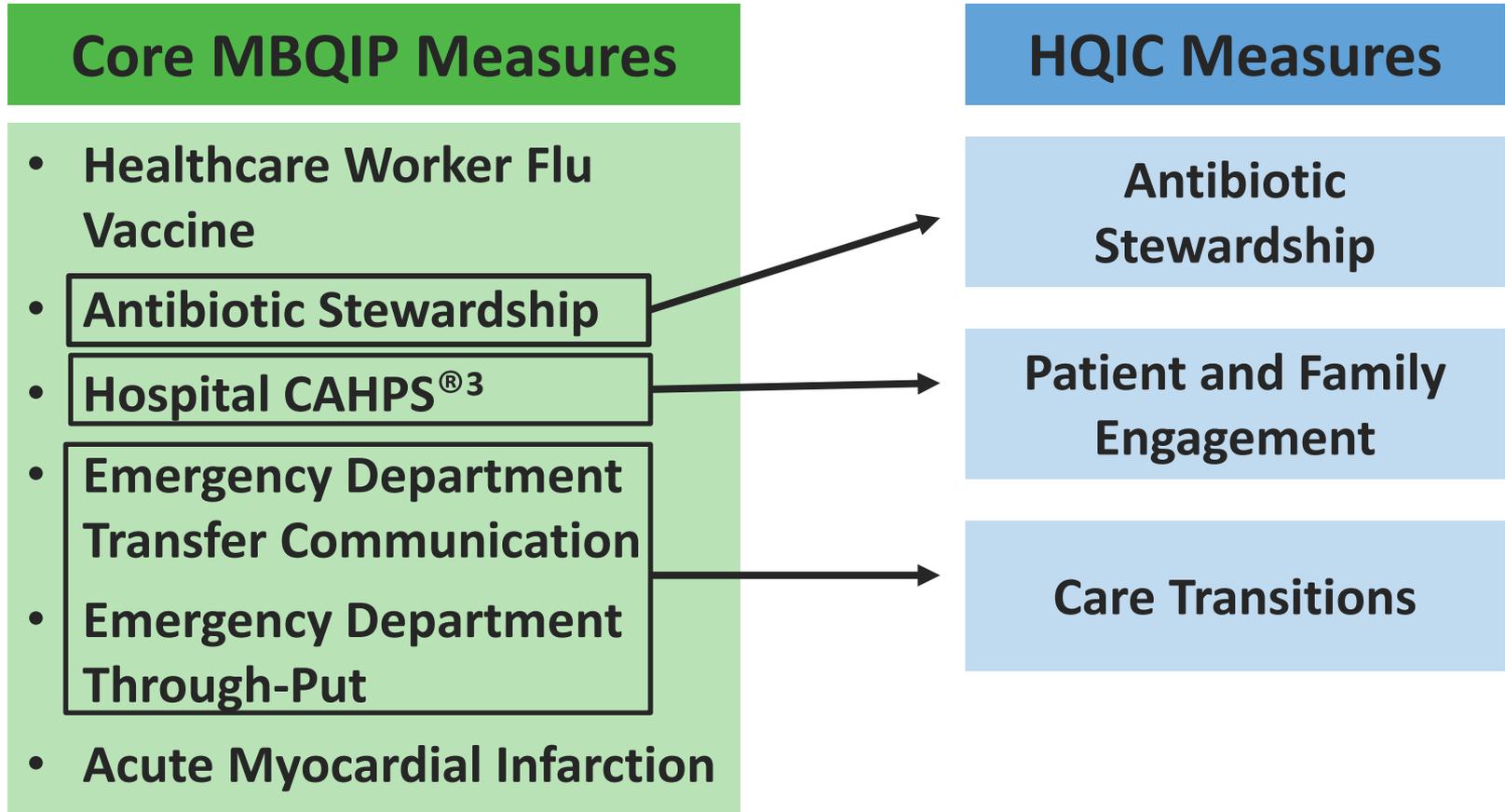


# Collaborating Partners and Stakeholders

Working together to ensure seamless collaboration



# Aligning With MBQIP<sup>1</sup> for CAHs<sup>2</sup>

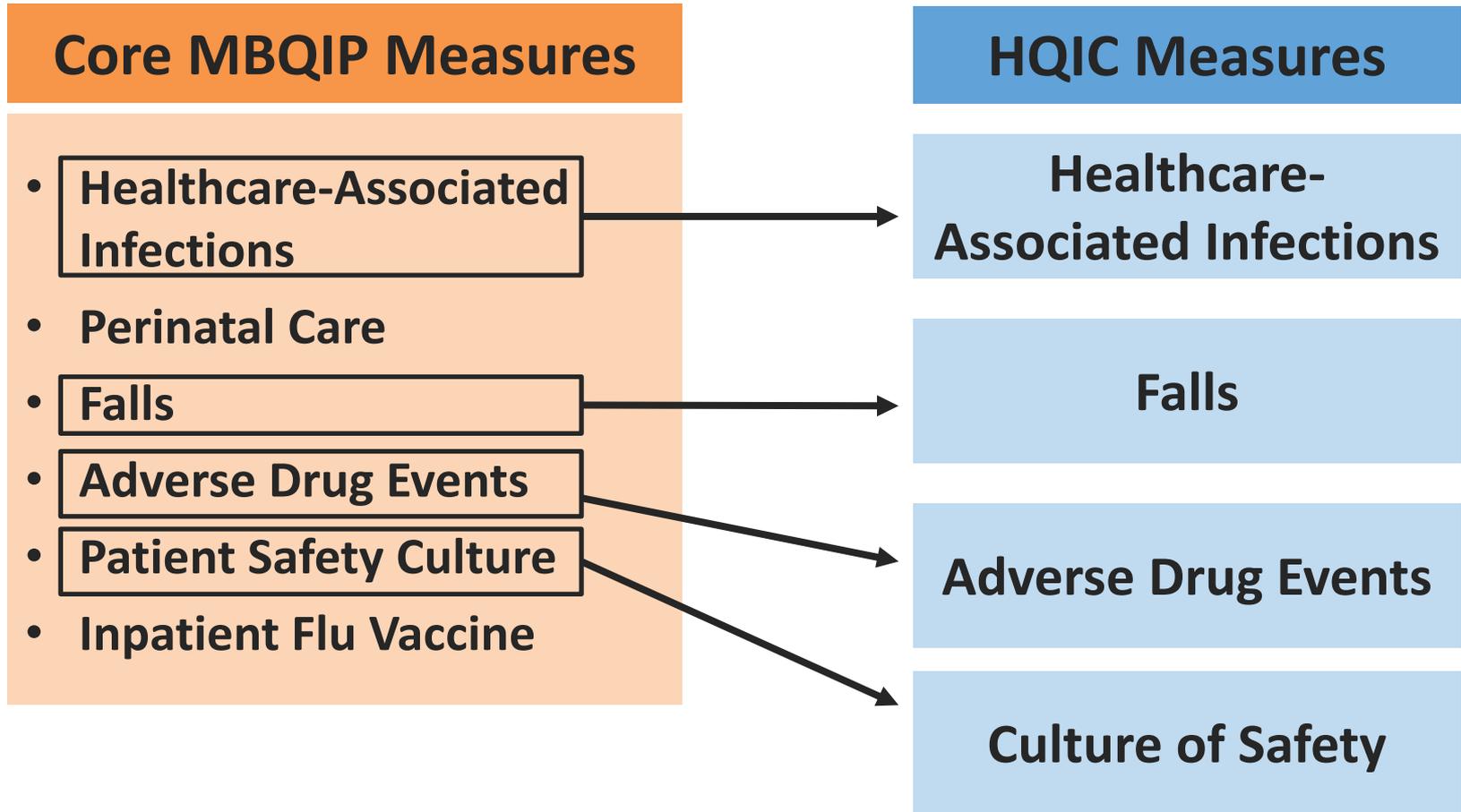


1. MBQIP=Medicare Beneficiary Quality Improvement Project

2. CAH=Critical Access Hospital

3. Hospital CAHPS=Hospital Consumer Assessment of Healthcare Providers and Systems. CAHPS<sup>®</sup> is a registered trademark of the Agency for Healthcare Research and Quality, a U.S. Government agency.

# Aligning With MBQIP for CAHs (cont.)



# Aligning with Value-Based Purchasing for Acute Care Hospitals

## Safety

1. **CAUTI:** Catheter-Associated Urinary Tract Infection
2. **CDI:** *Clostridium difficile* Infection
3. **CLABSI:** Central Line-Associated Bloodstream Infection
4. **MRSA:** Methicillin-resistant *Staphylococcus aureus* Bacteremia
5. **SSI:** Surgical Site Infection Colon Surgery and Abdominal Hysterectomy
6. **PSI 90\*:** Patient Safety and Adverse Events Composite

## Person and Community Engagement

1. **HCAHPS Survey Dimensions**
  - Communication with Nurses
  - Communication with Doctors
  - Responsiveness of Hospital Staff
  - Communication about Medicines
  - Cleanliness and Quietness of Hospital Environment
  - Discharge Information
  - Care Transition
  - Overall Rating of Hospital

## Domain Weights



\*measure is new for FY

## Clinical Care

1. **MORT-30-AMI:** Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Acute Myocardial Infarction (AMI) Hospitalization
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## Efficiency and Cost Reduction

1. **MSPB:** Medicare Spending per Beneficiary

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## HQIC: Healthcare-Associated Infections (HAIs)



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## HQIC

**PSI 03:** Pressure Ulcer Rate

**PSI 08:** In-Hospital Fall With Hip Fracture Rate

**PSI 11:** Postoperative Respiratory Failure Rate

**PSI 12:** Perioperative Pulmonary Embolism (PE) or Deep Vein Thrombosis (DVT) Rate

**PSI 13:** Postoperative Sepsis Rate

**PSI 14:** Postoperative Wound Dehiscence Rate

\*measure is new for FY

## Clinical Care

al 30-Day, All-  
ed Mortality  
Acute  
(MI)

al 30-Day  
ry Artery  
rgery  
al 30-Day, All-  
Chronic  
isease

0-Day, All-  
Heart Failure

0-Day, All-  
Pneumonia  
cohort)

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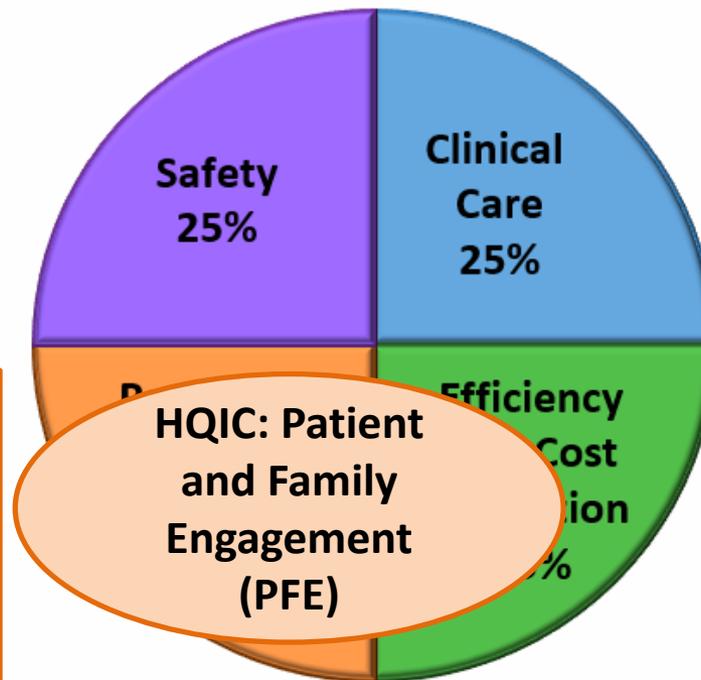
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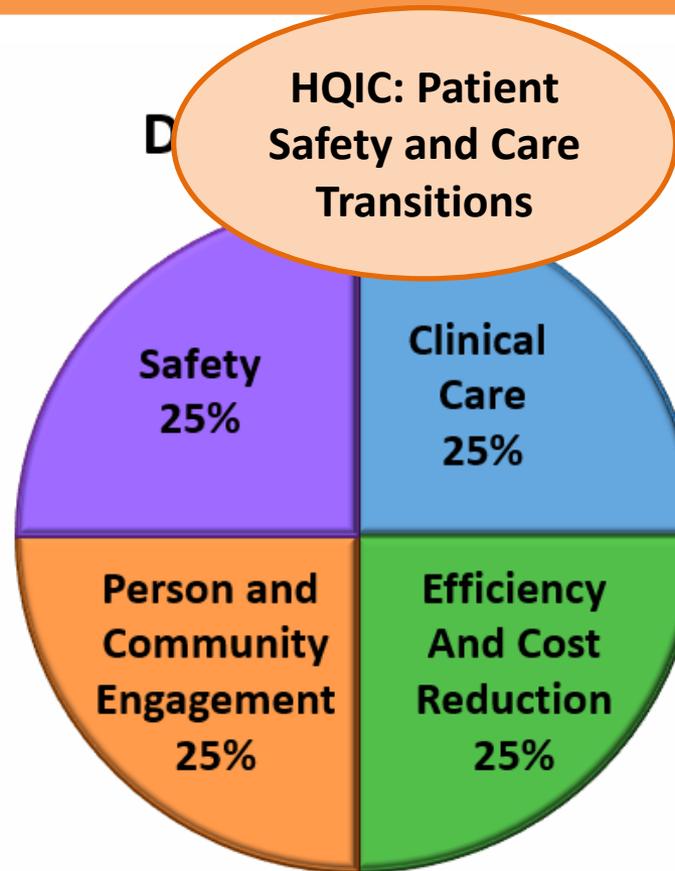
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## Efficiency and Cost Reduction

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# HSAG HIIN—Ranked #1 Across All HIINs in the CMS Performance Goals for the Program<sup>1</sup>



**265 hospitals**

including small, rural, and critical access hospitals worked with HSAG and committed to CMS quality initiatives to improve their quality and patient safety outcomes.<sup>2</sup>



**25,141**

Harms Avoided



**2,753**

Lives Saved

## Top 3 Harms Avoided Since Q4 2016

Only 3 types of harms make up almost 95% of all avoided harms over the past 3 years.



**11,350** avoided HAPIs



**9,533** avoided CDIs



**2,957** avoided sepsis events

*“HSAG HIIN has provided our hospital with valuable on-site evaluation of our clinical activities, tangible recommendations for improvement, comparative data, and monthly update calls, with specific recommendations for improvement.”*

—Steve Tanner, MBA, CPHQ, Director Clinical Quality, Regulatory Compliance & Risk Management, Providence Holy Cross Medical Center

## How HSAG HIIN Hospitals Benefit



Interactive performance dashboard through the HSAG secure web portal



Programs designed to advance the CMS focused patient and family engagement



Support and resources to address health equity

1. Among 16 participating HIINs in Partnership for Patients (PfP) program 11/18–09/19. Ranking determined through Reporting, Achievement, and Improvement Summary for Excellence (RAISE) Scoring Rubric Methodology. RAISE measured HIIN-participating hospital improvement/achievement—within each of the HIINs—toward CMS goals of reducing 30-day readmissions and all-cause inpatient harm by 12 and 20%, respectively.  
2. Out of the 265 hospitals, HSAG HIIN had 33 critical access hospitals and 232 acute care hospitals.

# CMS-Funded HQIC Program

*“Provide customized quality improvement outreach to meet the **specific needs of small, rural, and critical access hospitals, and those serving vulnerable populations.**”*

- Acute care facilities
  - **At no cost for your organization**
- Kick-off September 2020

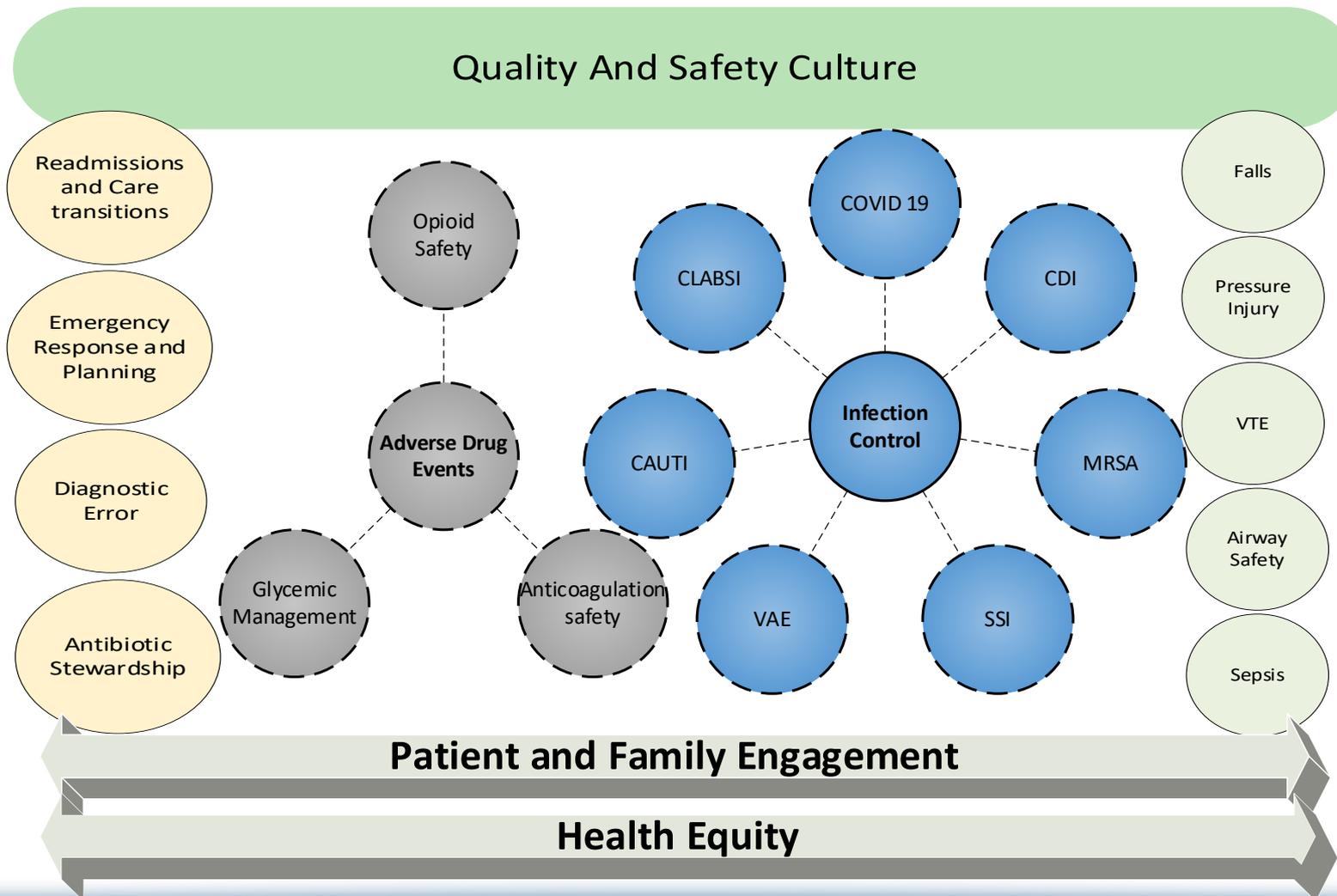
# Alignment With CMS Quality Goals

- Goal 1: Decrease opioid misuse
    - Implement opioid stewardship
    - Decrease opioid adverse events
  - Goal 2: Increase patient safety
    - Reduce all-cause harms
  - Goal 4: Increase quality of care transitions
    - Reduce readmissions
    - Focus on high utilizers
- 
- Infection prevention
  - Sepsis/sepsis shock
  - Hospital-acquired pressure injury
  - Venous thromboembolism
  - Falls
  - Airway safety
  - Diagnostic error
  - Others

# Additional CMS Focus

- Patient and family engagement
- Disparities
- Culture of safety
- Comprehensive quality improvement infrastructure
- Emergency response and planning
  - Pandemic preparedness

# HQIC—Proposed Quality and Safety Topics



CAUTI=catheter-associated urinary tract infection  
 CDI=*Clostridioides difficile* infection  
 CLABSI=central line associated bloodstream infection  
 MRSA=Methicillin-resistant *Staphylococcus aureus*

SSI=surgical site infection  
 VAE=ventilator-associated event  
 VTE=venous thromboembolism

# HQIC Program Features—Our Pledge

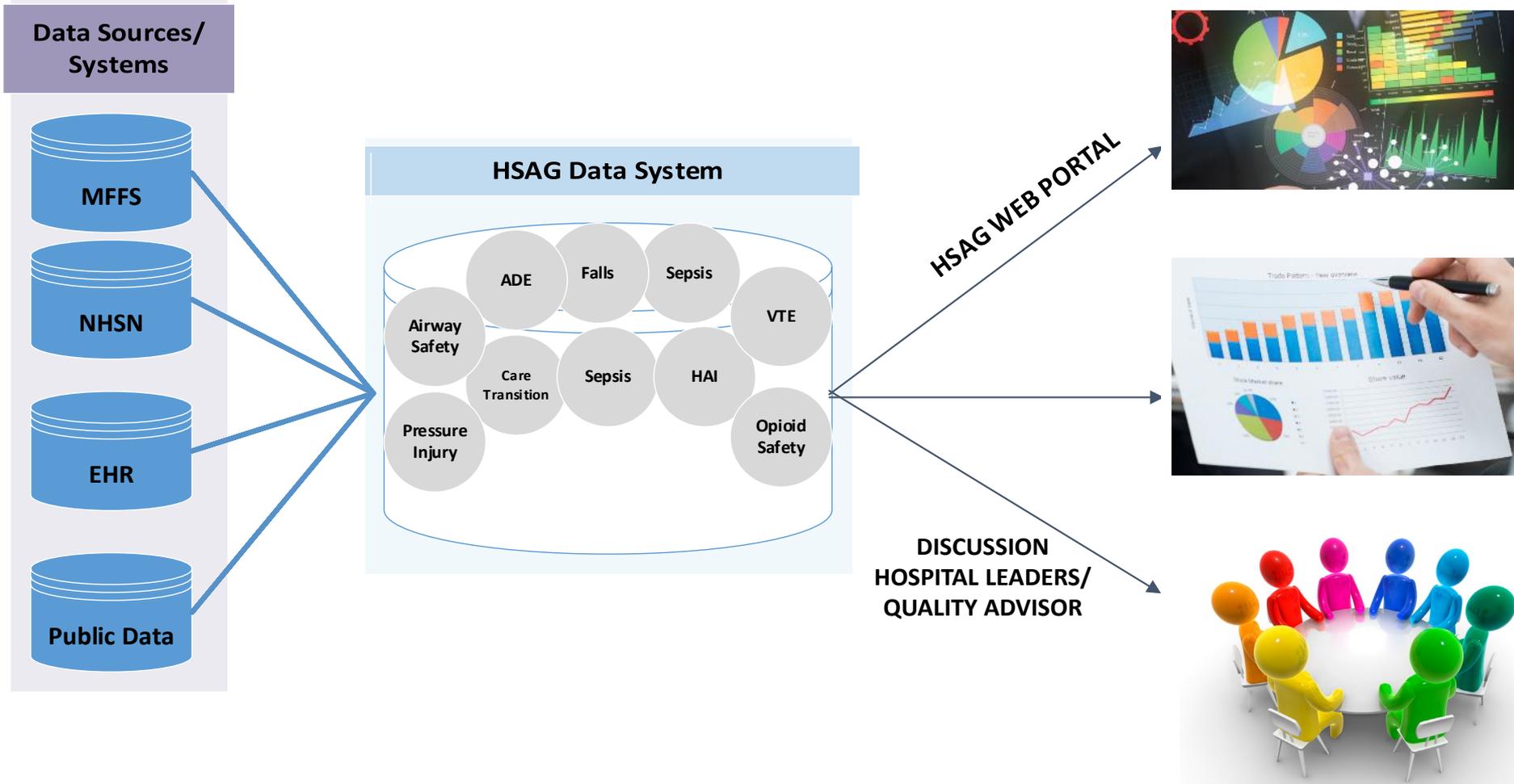
- Commitment to CMS/patient safety
- Leadership and board engagement
- Agile support/intense one-on-one support
- Working in concert with other stakeholders to avoid redundancy
- Offer multipronged strategies for CAHs and hospitals who serve vulnerable populations
- We need and want your regular feedback

# HSAG HQIC Global Support

- Weekly newsletters
- Highlight of the Month
- Sharing your successes
- On-demand educational content
- Update on evidence-based practices
- Pandemic preparedness
- Infection prevention
- Nation Healthcare Safety Network (NHSN) support



# HSAG HQIC Facility Level Support: A Data-Driven Approach



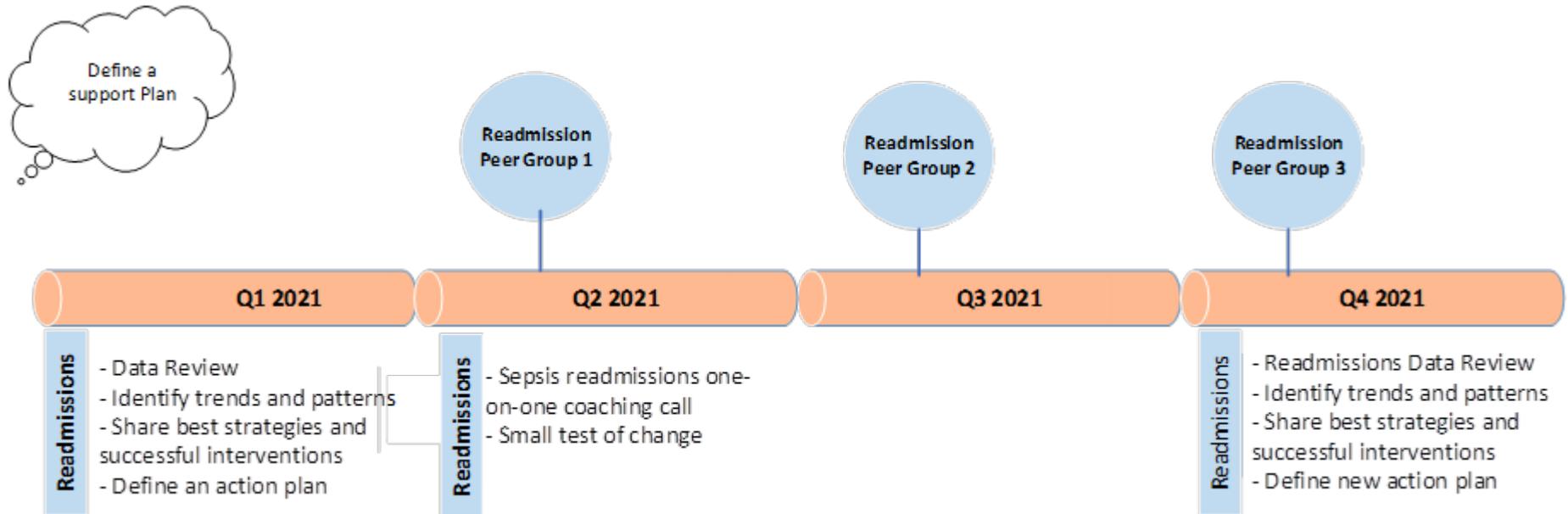
# HSAG HQIC Facility Level Support: A Data-Driven Approach

- Regular touch-base meetings with your advisor or topic leads
- One-on-one coaching
- Participation in peer groups
- Data analyses (deep-dive)

—We're here for you

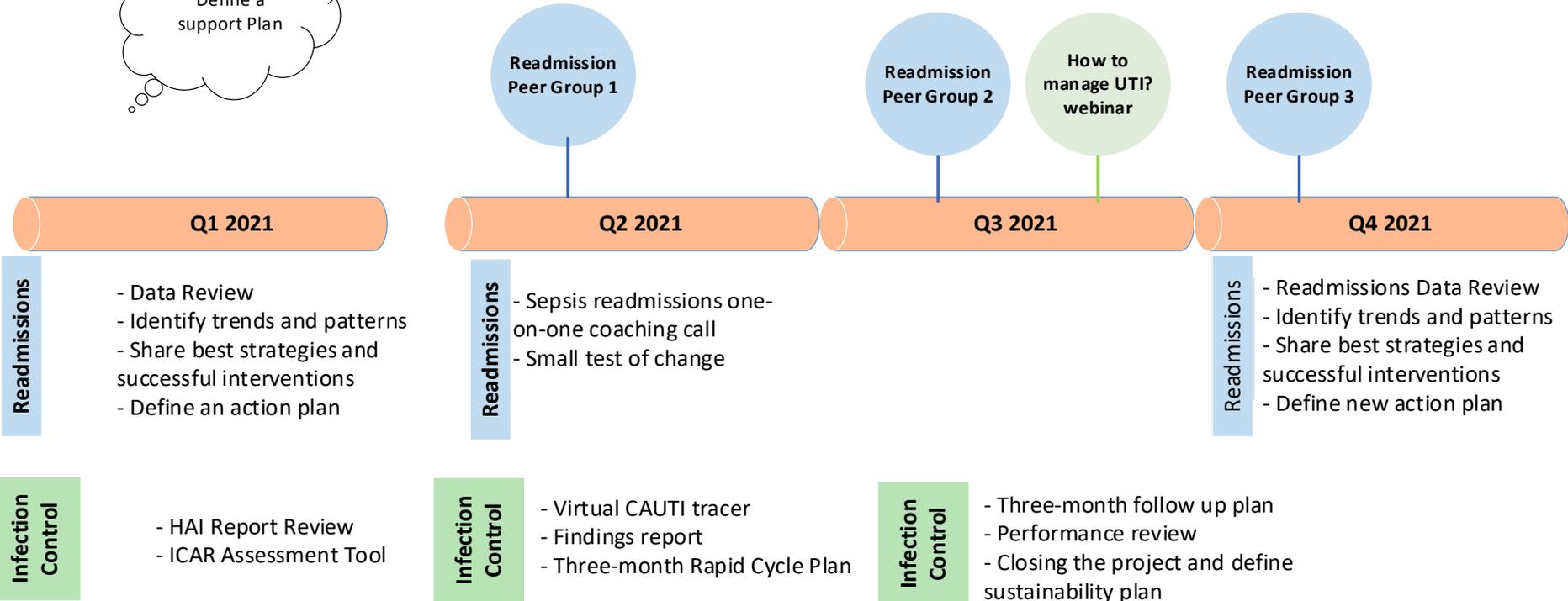
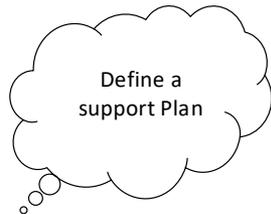
# HSAG Personalized Support Plan

## Hospital A—Focus on One Topic at a Time



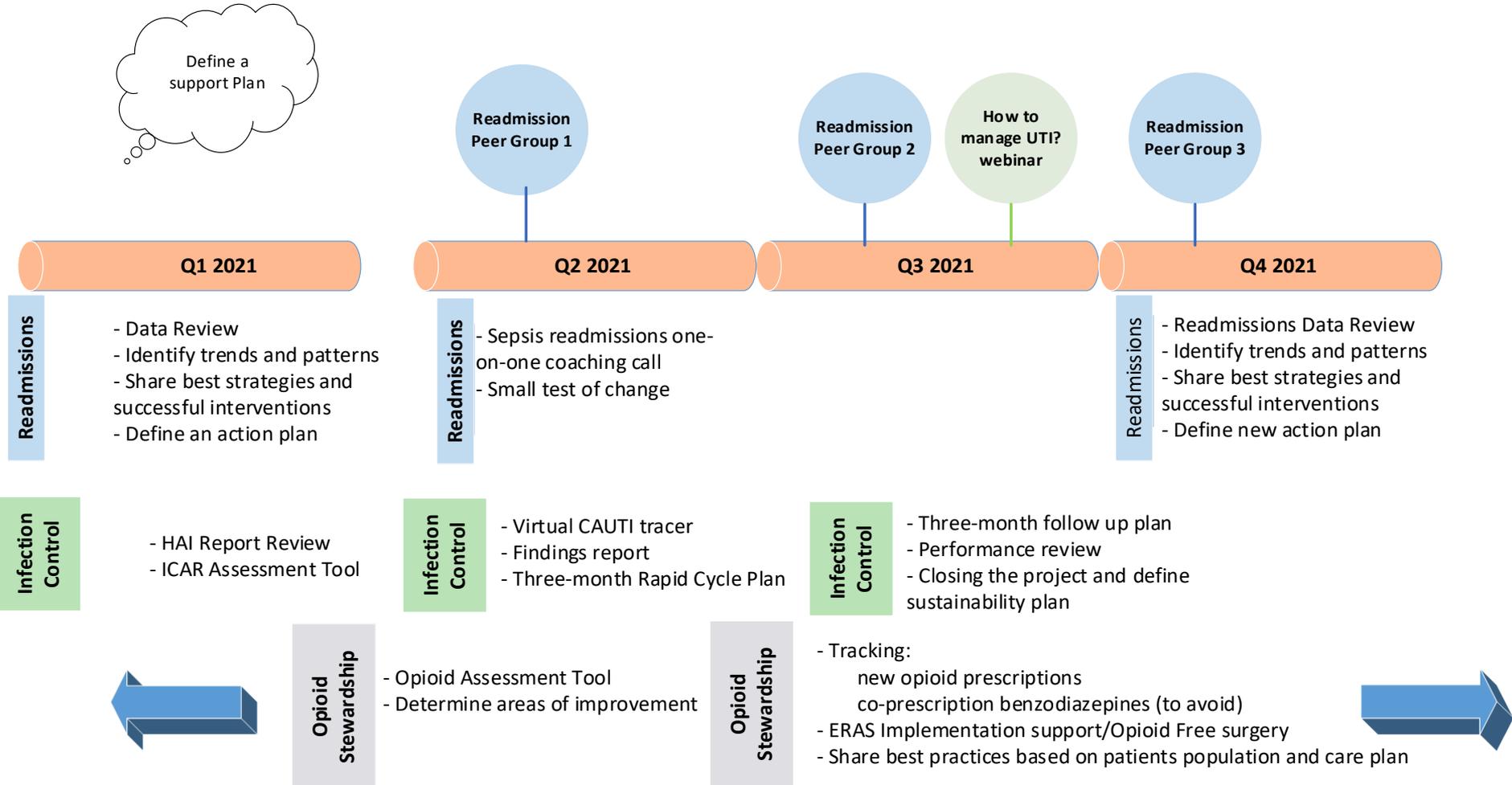
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## Hospital B—Focus on Multiple Topics at a Time



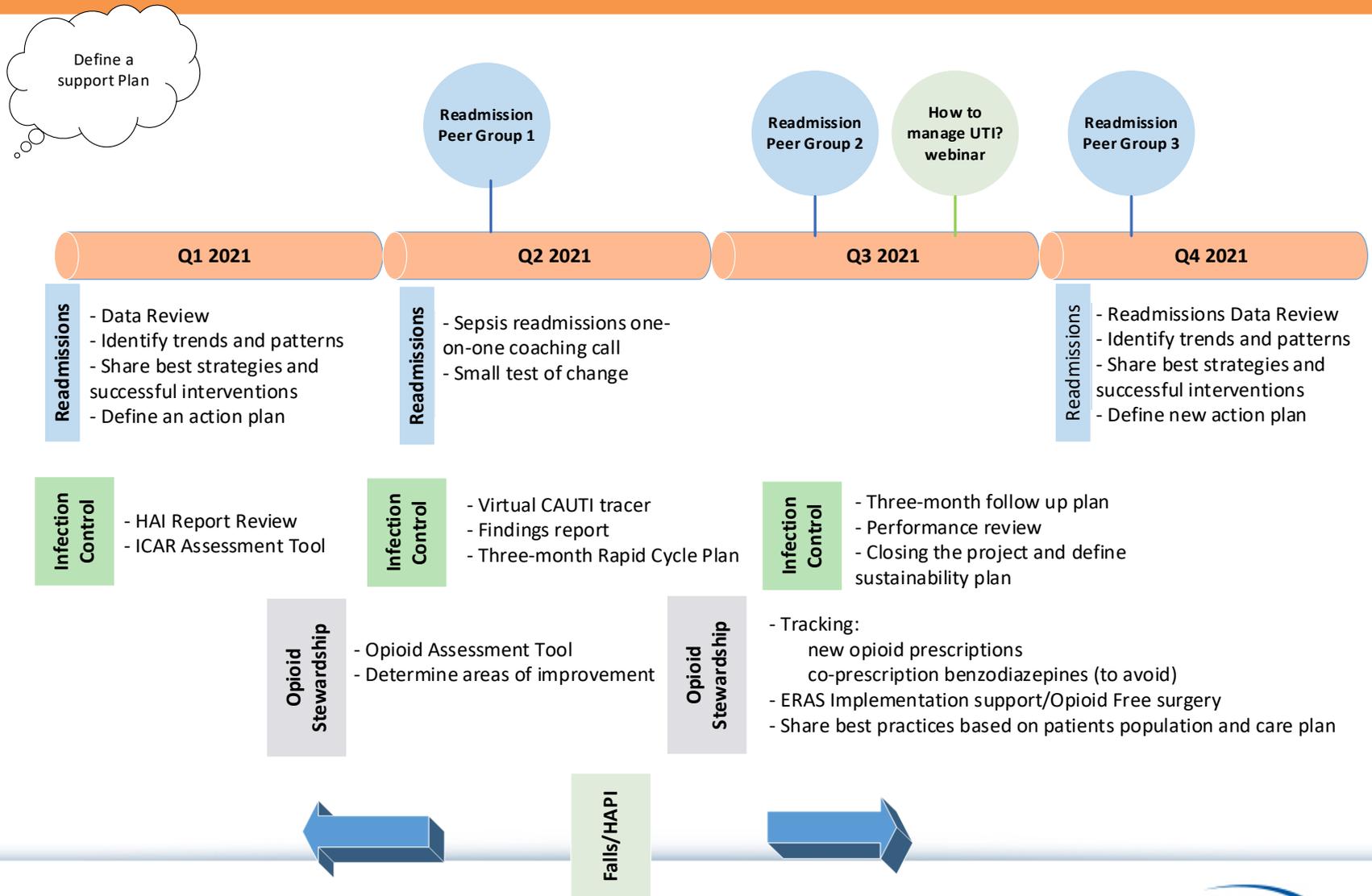
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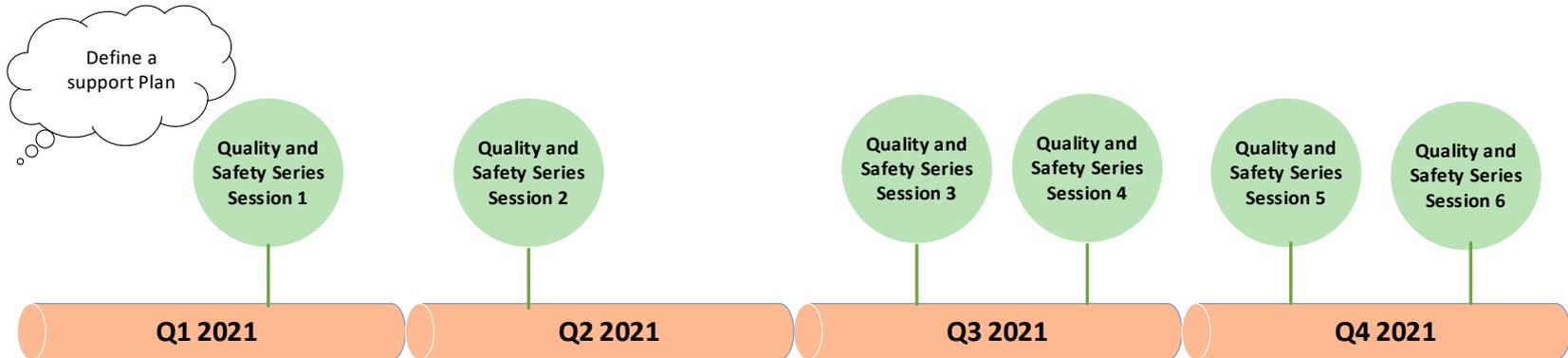
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## Hospital B—Focus on Multiple Topics at a Time



# HSAG Personalized Support Plan

## Hospital C—Integrated Approach for all Harm Areas



### Quality And Safety Culture program(s)

Quality and Project Management Concepts and implementation  
QAPI support  
Strategies for implementing Evidence-Based Practices  
AHRQ Comprehensive Unit-Based Safety Program (CUSP)  
Lean Six Sigma Projects



Safety Across the Board  
High Reliability Organization  
4 M Framework  
Support for Advanced certifications  
Human-Centered Design (HCD)

# Next Steps

- Participation Agreement
- Access to HQIC Enrollment FAQ and Office Hours sessions
- Meet with advisor
- Quality and safety assessment
- Engage in planned activities
- Access data reports

# Participation Agreement

Contact a team member at:  
hospitalquality@hsag.com

[www.hsag.com/hqic](http://www.hsag.com/hqic)

**HSAG** HEALTH SERVICES ADVISORY GROUP

## Participation Agreement

### HSAG Hospital Quality Improvement Contract (HQIC) Initiative

**Please complete and return this Participation Agreement no later than October 9, 2020.**

Your hospital was selected by The Centers for Medicare & Medicaid Services (CMS) based on specific criteria in order to qualify for the HQIC Initiative. HSAG requests your hospital leadership's commitment to engage and participate in the HQIC Initiative through 2024.

CMS awarded Health Services Advisory Group (HSAG) the HQIC to support specific hospitals in meeting the following goals:

- Decrease opioid related adverse events, including deaths, by 7 percent with a focus on Medicare beneficiaries using opioids.
- Reduce all-cause harm in hospitals by 9 percent or more, including adverse drug events.
- Reduce hospital readmissions by 5 percent.

**My organization commits to participate as a partner with HSAG. (September 2020–September 2024)**

Executive Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Organization Name: \_\_\_\_\_ CMS Certification # (CCN): \_\_\_\_\_  
Address: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Return via email: \_\_\_\_\_  
For more information, please contact \_\_\_\_\_  
To enroll multiple facilities, you may email or fax a company facility list along with \_\_\_\_\_

Page | 1

# Q&A



# Endorsements

“We learn a great deal about what other facilities are doing to improve sepsis care. Really like your format. It is a learning community. We learn from you and our peers from other areas.”

—393-bed urban hospital

“HSAG HIIN has provided our hospital with valuable on-site evaluation of our clinical activities, tangible recommendations for improvement, comparative data, and monthly update calls, with specific recommendations for improvement.”

—377-bed urban hospital

“Our chief medical officer and several providers listened to the Opioid Stewardship Townhall Meeting for CAHs. It was wonderful to have information from a subject matter expert that was relatable to our unique population and needs.”

—25-bed CAH

“The HSAG HIIN has benefited our facility by pushing us to look ahead at areas of quality that we need to improve before they become CMS requirements.”

All of the measures within the compendium are valuable in either spotlighting to us where we are doing well, or where we are falling short. We have core measures, which are of course very important, the HIIN measures take us further.

I really enjoy the team collaboration that being a part of the HIIN provides, that there are no stupid questions, and we have the opportunity to share and learn from each other in these small groups. The tools and resources are awesome as well. The HIIN helps us to just be aware of what is on the horizon for quality, as well as helps us to see how we are doing now in comparison to our peers.”

—111-bed rural hospital

# Thank you!

Slides and a recording will be available by tomorrow under today's date at:

[www.hsag.com/hqic-events](http://www.hsag.com/hqic-events)

More information, including the Participation Agreement, can be found at:

[www.hsag.com/hqic](http://www.hsag.com/hqic)

To reach an HQIC team member, email:

[hospitalquality@hsag.com](mailto:hospitalquality@hsag.com)