Agenda

• Welcome and introductions
• HQIC overview and goals
• Measurement data
• Communication and education
• Technical assistance resources
• Hospital portal
• Wrap up/Next steps
Featured Speakers

Donna Cohen, RN, BSN, CCM  
Director, Quality Projects  
Alliant Health Solutions

Karen Holtz, MS, CPHQ  
Education and Training Lead  
Alliant Health Solutions

Carol Snowden, RN  
Quality Director  
Alabama Hospital Association

Lynne Hall, BSN, RN  
Quality Improvement Specialist  
Georgia Hospital Association

Nadyne Hagmeier  
Quality Improvement Consultant  
KFMC Health Improvement Partners

Aaron Hubbard  
QI Consultant  
Comagine
Alliant Quality

• Quality improvement services group of Alliant Health Solutions
  – CMS contractor with a national footprint in 13 states
  – Past sub-contractor to Hospital Improvement Innovation Network (HIIN) and Health Enterprises Network (HEN)

• Clinically-led and data-driven organization

• Demonstrated success across multiple healthcare settings, e.g., nursing homes, long term care, hospitals, clinical provider offices
HQIC Overview

• Four year program active until October 2024
• Supports small, rural and critical access hospitals and facilities that care for vulnerable and underserved patients
• Provide assistance to hospital leaders and clinical teams:
  – Reduce opioid misuse and adverse drug events
  – Prevent hospital-acquired infections
  – Improve care coordination to reduce readmissions
  – Support for pandemic responses and emergency preparedness
HQIC (Task Order 3) Awarded to Nine Organizations

- Alliant Quality
- Convergence Health Consulting
- Healthcare Association of New York State (HANYS)
- Health Quality Innovators (HQI)
- Healthcare Services Advisory Group (HSAG)
- Iowa Healthcare Collaborative (IHC)
- Independent Peer Review Organization (IPRO)
- Telligen
- TMF Quality Institute
Alliant HQIC Partners in Several States

- Alabama Hospital Association - Alabama
- Comagine - Idaho, Oregon, Utah and Washington
- Georgia Hospital Association - Georgia
- Kansas Foundation for Medical Care (KFMC) - Illinois, Louisiana and Nebraska
- KONZA - Kansas and Missouri
150 Enrolled Hospitals by State and Partner
as of June 1, 2021

- **Alabama Hospital Association**: 19 Hospitals
- **Alliant Health Solutions**: 2 Hospitals
- **Georgia Hospital Association**: 65 Hospitals
- **Kansas Foundation for Medical Care**: 1 Hospital
- **Konza**: 8 Hospitals
- **Comagine**: 18 Hospitals
- **Comagine**: 8 Hospitals
- **Kansas Foundation for Medical Care**: 1 Hospital
Areas of Focus

Patient Safety
- Opioid stewardship
- Adverse drug events (opioids, anti-coag, glycemic)
- CLABSI
- CAUTI
- C. diff
- Sepsis
- Pressure injuries
- Readmissions

Other
- COVID-19 and/or public health emergencies
- Health disparities and health equity
- Patient and family engagement
- Leadership engagement
HQIC Evaluation Metrics and Goals By 2024*

**Behavioral Health Decreased Opioid Misuse**
- Decrease opioid-related ADEs by 7%, including deaths
- Decrease opioid prescribing (<90MME) by 12%

**Patient Safety Reduction of Harm**
- Reduce ADEs by 13%
- Reduce all-cause harm by 9%
- Reduce *Clostridioides difficile* rates

**Care Transitions Focus on High Utilizers**
- Reduce readmissions by 5%

*For the nine Hospital Quality Improvement Contractors (HQICs)*
Data Measures (Monthly Monitoring)

- Low data burden on hospitals
- Use Medicare claims, NHSN, HHS Protect and Assessment data
- Standardized set of measures
  - Core
  - Secondary
  - Optional

<table>
<thead>
<tr>
<th>Patient Safety Topic</th>
<th>Standardized Measures</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADE</td>
<td>Anticoagulant Related Adverse Drug Events per 1,000 Acute Inpatient Admissions</td>
<td>Claims</td>
</tr>
<tr>
<td>ADE</td>
<td>Hospital Harm- Severe Hypoglycemia</td>
<td>Claims</td>
</tr>
<tr>
<td>ADE and Opioid Steward</td>
<td>Opioid-Related Adverse Drug Event Rate</td>
<td>Claims</td>
</tr>
<tr>
<td>CAUTI</td>
<td>NHSN CAUTI SIR - ICU, excluding NICU</td>
<td>NHSN</td>
</tr>
<tr>
<td>CAUTI</td>
<td>NHSN CAUTI SIR - ICU + Other Units</td>
<td>NHSN</td>
</tr>
<tr>
<td>CAUTI</td>
<td>NHSN CAUTI Utilization Ratio</td>
<td>NHSN</td>
</tr>
<tr>
<td>CLABSI</td>
<td>NHSN CLABSI SIR - ICU, including NICU</td>
<td>NHSN</td>
</tr>
<tr>
<td>CLABSI</td>
<td>NHSN CLABSI SIR - ICU + other units</td>
<td>NHSN</td>
</tr>
<tr>
<td>CLABSI</td>
<td>NHSN CLABSI Utilization Ratio</td>
<td>NHSN</td>
</tr>
<tr>
<td>C.Diff</td>
<td>Laboratory-identified Hospital Onset Clostridioides difficile Standardized Infection Ratio (SIR) (NQF 1717)</td>
<td>NHSN</td>
</tr>
<tr>
<td>MRSA</td>
<td>Laboratory-identified Hospital Onset Methicillin-resistant Staphylococcus (MRSA) bacteremia Ratio (SIR)</td>
<td>NHSN</td>
</tr>
<tr>
<td>PrU</td>
<td>Pressure Ulcer Rate Stage 3+ (AHRQ PSI-03)</td>
<td>Claims</td>
</tr>
<tr>
<td>PrU</td>
<td>Pressure Ulcer Prevalence Rate (NDNQI) (NQF 0201)</td>
<td>Claims</td>
</tr>
<tr>
<td>READMISSIONS</td>
<td>Hospital-wide, All cause, unplanned hospital 30-day readmissions (NQF 1789)</td>
<td>Claims</td>
</tr>
<tr>
<td>SEPSIS</td>
<td>Post-operative sepsis and septic shock (PSI-13)</td>
<td>Claims</td>
</tr>
<tr>
<td>SEPSIS</td>
<td>Adult Inpatient Risk Adjusted Sepsis Mortality (NQF 3215)</td>
<td>Claims</td>
</tr>
<tr>
<td>SEPSIS</td>
<td>30-day Sepsis Mortality rate</td>
<td>Claims</td>
</tr>
<tr>
<td>COVID-19_HOSPITAL</td>
<td>COVID-19 vaccination among hospital clinicians- Vaccination complete</td>
<td>HHS Protect</td>
</tr>
</tbody>
</table>
Data Measures (Monthly Monitoring)

- Standardized set of measures
  - Core
  - Secondary
    - Data is collected via assessment/coaching call and HHS Protect
  - Optional
    - Claims

### Secondary Measure List (Required)

<table>
<thead>
<tr>
<th>Measure Domain</th>
<th>Standardized Measures</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19_HQIC</td>
<td>* Ensuring infection preventionist function shared between another care setting in the community</td>
<td>Assessment COVID-19</td>
</tr>
<tr>
<td>COVID-19_HQIC</td>
<td>Written Emergency Preparedness Plan that fits the community characteristics and prepares for future surges.</td>
<td>Assessment COVID-19</td>
</tr>
<tr>
<td>COVID-19_HQIC</td>
<td>Implementation of the CDC Comprehensive Hospital Preparedness Checklist for the Coronavirus disease- 2019</td>
<td>Assessment COVID-19</td>
</tr>
<tr>
<td>COVID-19_HOSPITAL</td>
<td>ED Utilization related to COVID- ventilated patients</td>
<td>HHS Protect</td>
</tr>
<tr>
<td>COVID-19_HOSPITAL</td>
<td>ED Utilization related to COVID- non-ventilated patients</td>
<td>HHS Protect</td>
</tr>
<tr>
<td>COVID-19_HOSPITAL</td>
<td>Hospital Onset of COVID-19</td>
<td>HHS Protect</td>
</tr>
</tbody>
</table>

### Additional Common Measures and Optional Measures

<table>
<thead>
<tr>
<th>Measure Domain</th>
<th>Measure Description</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPIOIDS</td>
<td>Opioids: Rate of Narcan Administration</td>
<td>Claims</td>
</tr>
<tr>
<td>OPIOIDS</td>
<td>High-Dose Opioid Prescribing Upon Discharge</td>
<td>Claims</td>
</tr>
</tbody>
</table>
Data Analytics

• Displayed in Power BI software
• Performance improvement coach can share screen shots of hospital data during monthly coaching calls
• Hospitals do not have access, but can see the hospital portal (slide 30)
Hospital Performance

• Trended over time with upper and lower control limits
• Comparison to TO3 (Task Order 3)*
• Data points are three-month rolling average
• Typically a four-month lag time

*All enrolled hospitals in Alliant HQIC that are submitting data for that measure
Benchmarking - Quartile Graph

- Hospital performance compared to top quartile (25th) and bottom quartile (75th)
Benchmarking - Quartile Scorecard

• Hospital performance in quartile-based scorecard
HHS Data: COVID-19
Monthly HQIC Newsletter

- Sent the first Thursday of each month to contacts
- Check junk mail or unblock email from Donna Cohen at Alliant
- Look at educational events for registration links and past recordings
- April newsletter
Learning and Action Network (LAN) Events

- Focus on areas of all-cause harm
- Scheduled the fourth Tuesday of every month from 2-2:30 p.m. ET/1-1:30 p.m. CT/12-12:30 p.m. MT/11-11:30 a.m. PT
- Featured speakers include external and internal subject matter experts and HQIC hospitals
- Best practice resources shared
- Registration links, past recordings and slides in newsletter and on Alliant website
# Learning and Action Network (LAN) Events

<table>
<thead>
<tr>
<th>Date</th>
<th>Patient Safety Focus Area</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mar 23, 2021</td>
<td>Opioid Stewardship/ADE Opioids</td>
<td>Opioid Misuse Disorder: Closing the Loop Between Hospital and Community</td>
</tr>
<tr>
<td>Apr 27, 2021</td>
<td>Health Disparities/Equity</td>
<td>Digital Health Equity Breast Cancer Screening</td>
</tr>
<tr>
<td>Jun 22, 2021</td>
<td>PHE/COVID19 Treatment</td>
<td>Monoclonal Antibody Therapy for High Risk COVID Patients</td>
</tr>
<tr>
<td>Jul 27, 2021</td>
<td>Opioid Stewardship/Pain Management</td>
<td>Establishing a Robust Pain Management Initiative Within Your Hospital</td>
</tr>
<tr>
<td>Aug 24, 2021</td>
<td>Care Transitions</td>
<td>TBD</td>
</tr>
<tr>
<td>Sep 28, 2021</td>
<td>Patient and Family Engagement (PFE)</td>
<td>TBD</td>
</tr>
</tbody>
</table>
Collaboration Across HQICs

• Opportunity to collaborate with other HQICs for peer learning and sharing
• All hospitals are welcome to participate
• Registration links will be shared across HQICs
  – LAN webinars
  – Exploring affinity groups for large urban hospitals
• Stay tuned for more info
How Does Technical Assistance Work?

• Meet with hospital quality, clinical team leaders and leadership
  – Allows leadership to understand the HQIC program and be involved in the QI process

• Customized 1:1 calls with performance improvement coach
  – Allows the hospital to ask for resources, improvement techniques and assistance with specific QI projects

• Coaching packages and resources are shared
How Does Technical Assistance Work?

• Initial assessments
  – Complete CMS enrollment questions, e.g., number of IP staff
  – Review baseline data and current interventions
  – Identify priority focus areas and goals

• Monthly coaching calls
  – Focus on low performing metrics and priority areas
  – Provide top interventions and evidence-based best practices
  – Develop action plans and provide coaching to meet goals
  – Connect hospitals to top performing peers for learning and sharing (mentoring)
Subject Matter Experts (SMEs)

Libby Bickers, LCSW
Behavioral Health/Opioid Misuse

Jennifer Massey, PharmD
Pharmacy and ADE Technical Adviser

Amy Ward, RN, BS, MS, CIC
Infection Prevention Specialist

Melody Brown, MSM
Care Transitions/Readmissions
Confer NHSN Rights

• Confer rights to Alliant to view infection data, create graphs and provide technical assistance
• Approximately 75% of hospitals conferred rights to date
• CAH – Reporting not mandatory, but highly encouraged

NHSN ID Number & Password

The group’s 5-digit NHSN ID number: 83373
The group’s joining password: Alliant20!

Resources:
1. Joining a Group in NHSN and the Conferring Rights Template
2. Contact Amy Ward at amy.ward@allianthealth.org for technical assistance
HQIC Website

https://www.alliantquality.org/topic/hospital-quality-improvement/
HQIC Events and Newsletters

HQIC Events

Upcoming Events

Monoclonal Antibody Therapy for High Risk COVID Patients | June 22, 2021 | 2pm

Past Events

Antibiotics and Infection Prevention Efforts to Combat Antimicrobial Resistance Post COVID-19 | May 29, 2021 | 2pm ET
Digital Health Equity Breast Cancer Screening | April 27, 2021 | 2pm ET
Opioid Use Disorder: Closing the Loop Between Hospital and Community | March 23, 2021 | 2pm ET
Developing a Business Case for Infection Prevention Resources: What we learned from COVID-19 | February 23, 2021 | 2pm ET

HQIC Newsletters

Hospital Quality Improvement Newsletter -- April 2021
Hospital Quality Improvement Newsletter -- March 2021
Hospital Quality Improvement Newsletter -- February 2021
HQIC Success Stories and General Resources

Success Stories

Phoebe Putney Health System in Georgia Marks One Year of COVID-19 Battle

In Albany, Georgia, Phoebe Putney Health System hosted a Day of Remembrance on March 10th to mark the anniversary of the beginning of its COVID-19 fight. Each of Phoebe’s hospital campuses held special events Wednesday to recognize the region’s healthcare heroes, thank community members for their support, encourage southwest Georgians battling COVID-19 and honor those whose lives were taken by the virus. Events included tribute walks along paths lined with signs highlighting COVID-related milestones over the last year and Day of Remembrance ceremonies featuring remarks from patients, community leaders and healthcare workers who have been on the frontlines of the COVID-19 battle. To ensure proper social distancing, the public was not invited to the walks and ceremonies. Members of the community in Albany, Americus and Sylvester were invited to attend drive-through luminary events at each hospital campus Wednesday night. Luminaries lit up the hospital driveways and areas of each campus were illuminated in red in honor of healthcare heroes. At the main campus, a laser light show flashed messages of thanks, support and unity on the side of one of the medical towers. “We definitely wanted to find a safe way to include our communities in our commemorations, because they have been so supportive of the Phoebe Family and so vital to all we have been able to accomplish over the last year. We thought this was a great way to thank them and to allow them to express their condolences to families who have lost loved ones and to show their support for our staff and current patients,” said Joe Austin, Phoebe Putney Memorial Hospital Chief Executive Officer. [Read the Full Story]

General Resources

- Our Team
- HQIC Portal Instructions
- Allent HQIC Fact Sheet
- Joining a Group in NHIN and Accepting the Conferring Rights - Hospitals
Alliant HQIC Portal

• Access to Alliant HQIC portal available to enrolled hospital staff
• Must be listed as a contact with your HQIC coach to gain access
• Portal link and access instructions on the Alliant website
  a) Access portal via website here
  b) Portal self-registration instructions on website here
Portal Features

Home/HQIC Discussions
- Home-Listing of Discussions
- HQIC Discussions- Start a new Discussion

My Assessments
- My Assessments- Assessment History

Reports
- Reports-Data Measurements

Welcome!
The Alliant Portal is a web-based application for NQIC, HQIC AND ESRD networks. The Alliant Portal was created as a convenient way for partners to share data, access quality improvement resources, share resources with industry peers and communicate with Alliant representatives.
WELCOME!

The Alliant Portal is a web-based application for NQIC, HQIC AND ESRD networks. The Alliant Portal was created as a convenient way for partners to share data, access quality improvement resources, share resources with industry peers and communicate with Alliant representatives.

Sort by:
- Most Recent Activity

Portal Tester (Alliant Quality) asked a question.
May 24, 2021 at 9:49 AM

Looking to network with a large hospital using Cerner to identify opportunities with ADE, specifically around safety alerts.

Please let me know if you have best practices you can share.
**My Assessments**

Details gathered on monthly sharing calls:

- **Goals**
- **Updates of focused outcome measures**
- **COVID-19**
- **PFE**
- **Health equity**
- **Leadership contributions**

<table>
<thead>
<tr>
<th>Details</th>
<th>Related</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization</td>
<td>Hospital Performs Surgery?</td>
</tr>
<tr>
<td>Date of Interaction</td>
<td>Key Hospital Contacts Updated in SFE</td>
</tr>
<tr>
<td>State</td>
<td>No</td>
</tr>
<tr>
<td>Georgia</td>
<td></td>
</tr>
<tr>
<td>Assessment Type</td>
<td>Additional Attendees</td>
</tr>
<tr>
<td>Initial Assessment</td>
<td></td>
</tr>
<tr>
<td>HQIC Assessment Type</td>
<td>Additional Attendees</td>
</tr>
<tr>
<td>Assessment Type</td>
<td>Additional Attendees</td>
</tr>
</tbody>
</table>

**Hospital Quality and Patient Safety Goals**

- Hospital Goal 1: Falls Prevention
- Hospital Goal 2: Medication Reconciliation
- Hospital Goal 3: Responds to Critical Lab Values
- Hospital Goal 4: Suicide
- National Patient Safety Goals – Joint Commission

**Outcome Measure 1**

- Outcome Measure: ADE - Opioids & Stewardship
- Current Data: 89.00
- Strategies for Success: Stewardship Program Components
  - The state has a database for prescriptions filled for narcotics and using that to check before the ED patients leave with an Rx

**Value Provided**

- 30-Day Action Plan
- Willing to Share Success Story?
Reports

View of measurement data for each patient harm area
- Rolling three-month average
- Comparison to all Alliant-enrolled HQIC hospitals
- Comparison to all hospitals enrolled in your HQIC group
Click here to ask a question

Click here to follow the discussion and have it display on your home page
Looking Ahead

• Connect every six months for a Quality Leaders Summit
• One hour virtual call
• Next Call:
  – Jan 11, 2022, at 3 p.m. ET
• Complete post-event survey to submit any agenda items
Questions?

Email us at HospitalQuality@AlliantQuality.org
Appendix
CMS Fact Sheet

Hospital Quality Improvement Contractors (HQICs) | Your Quality Improvement Leaders for Acute Care

The Centers for Medicare & Medicaid Services (CMS) Quality Improvement Organization (QIO) Program is one of the largest federal programs dedicated to improving the quality of health care at the community level. Hospital Quality Improvement Contractors (HQICs) are strategic partners of the QIO Program that support this mission within hospital settings. Their initiatives are designed to improve health care quality, access, value and equity for people with Medicare.

Health care quality is the overarching goal. The QIO Program and HQICs connect and convene the right people to help solve the nation’s most pressing health care challenges, one community at a time.

What are HQICs?
Data-driven. It’s the data that help hospitals measure progress toward quality improvement and CIQ goals. Hundreds of thousands of patients and families benefit from CMS-supported CIQ projects that make today’s hospital stays safer and improve the quality of hospital care.

Omnipresent and collaborative. HQIC partners with small, rural and critical access hospitals and facilities that care for vulnerable and underserved patients. Their quality improvement consulting and expertise — offered at no cost to the hospitals — help hospital leaders and clinical teams develop local CIQ projects designed to:
- Reduce opioid misuse and adverse drug events.
- Increase patient safety with a focus on preventing hospital-acquired infections.
- Refine care coordination processes to reduce unplanned admissions.

HQICs also direct their CIQ resources to assist hospitals with pandemic responses and emergency preparedness.

Local.
- Provide no-cost quality improvement consulting to help leadership teams understand and implement Medicare and other federal health care guidelines.
- Engage with hospital leaders and stakeholders to help prioritize national CIQ priorities to local conditions.
- Support health equity through patient and family engagement.
- Coordinate goal setting, communication, CIQ resources and crisis response by facilitating partnerships with community, state and local organizations.

Measurable.
- Help gather, analyze and interpret health care data to inform decisions that impact patients, families, partners and communities.
- Usual care to help hospitals track progress toward local and national quality goals.
- Demonstrate how hospital processes can evolve in response to real-time data.

Sustainable.
- Create and spread learning opportunities for today’s evidence-based best practices.
- Develop peer- and community networks for learning, collaboration and sharing.
- Teach and teach CIQ processes and techniques for lasting change.

To Learn More
The four-year HQIC program will remain active through October 2024. Please visit QIOProgram.org to learn more about HQIC partners and CIQ initiatives.
This material was prepared by Alliant Quality, the quality improvement group of Alliant Health Solutions (AHS), the Hospital Quality Improvement Contractor (HQIC) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. AHSQIC-TO3H-20-336