



News & Views

President's Corner

WAHQ President



Linda Buel, RN, CPHQ

Board Updates As we approach the conclusion of another year, I want to share some updates on Board activity with you. Just recently, Michelle Boylan, President Elect, resigned because she moved out of the state of Wisconsin for exciting professional and personal changes. We sincerely miss her enthusiasm, brilliance, and leadership but of course, wish her the very best.

The Board is now charged with addressing this vacancy. We will follow our bylaws and fill this vacancy to ensure continued leadership.

Other board activities over the last year include website enhancement – check it out, and some fiscally responsible banking and investment changes.

WAHQ goal updates and initiatives will be shared at our Annual meeting on March 10, 2006. If you have specific interests or questions about any board activity, do not hesitate to contact me or one of the other board members.

WAHQ Conference

We have been actively planning for our 2006 Annual Conference and are pleased that we have been successful in securing some **excellent speakers**. If you have not already done so, please make sure you have reserved time on

Mark Your Calendars!

WAHQ Annual Conference “Quality Revolution” ”Creating an Environment of Reliability”

FRIDAY, MARCH 10, 2006

Crowne Plaza, Madison, WI

your personal and professional calendars to attend our Annual Conference on March 10, 2006. Two of our highlighted speakers include:

1. Pascale Carayon, Ph.D. is Procter & Gamble Bascom Professor in Total Quality in the Department of Industrial and Systems Engineering and the Director of the Center for Quality and Productivity Improvement (CQPI) at the University of Wisconsin-Madison. Her research areas include systems engineering, human factors and ergonomics, sociotechnical engineering and occupational health and safety.

2. Mary Brueggeman, MS, RN, is the Director of the Patient and Family Services Department at St. Joseph’s Hospital in Hillsboro, Wisconsin. From April, 2003 until August, 2005, Mary served as the project coordinator of a CMS national study The Patient Safety Learning Pilot, at MetaStar, Inc. MetaStar is the Wisconsin Quality Improvement Organization. The CMS study looked at acute care hospital safety programs and learning’s from incident reporting.

The PSLP safety prototype was developed for national use as well as the prototype for implementation of the National Beta Blocker Guidelines

for prevention of postoperative MI
Mary Brueggeman is also a Legal Nurse Consultant and facilitates a Nursing Home Administrators Roundtable through the Rural Wisconsin Health Cooperative.

Watch for the conference brochure early 2006.

The annual conference is always an excellent opportunity to receive valuable information. It is also an opportunity to earn continuing education credits for your CPHQ re-certification, and to network with colleagues from around the state.

My best to you through the Holiday season. See you in the Spring!

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Fall ISSUE 2005

On-Line Continuing Education Credits (CEC) National Association for Healthcare Quality (NAHQ)

You can link to the NAHQ page to view CE articles:
<http://www.nahq.org/db/ce/>

This is the page to search CEC by topic, and then the searcher is guided to the articles with the current CE tests. The tests are those that are the **most current** and **still available for credit** from the **past 2 years**. Expiration date is noted with the article information. A score of 80% is required to pass the test

Examples of Current Topics Include:

-  **Compliance**
-  **Documentation**
-  **Education Training & Communication**
-  **Evidenced Based Medicine**
-  **Government Regulations**
-  **Hedis-Managed Care Focus**
-  **HIPAA**
-  **Information Management**
-  **Informed Consent**
-  **OASIS-Home Healthcare Program**

The online tests are \$15 for members and \$25 for nonmembers
Participants take the tests, pay with a credit card, and
receive a certificate online if they've passed the test.

Address Changes and Email Addresses

We value your membership and would like to make sure we are sending materials to all of our members. If your address changes or you would like to add an email address to our database, please contact Virginia Wyss at (608) 752-3911 or by email at VWyss@ameritech.net.

NAHQ List Serve

NAHQ has a great networking opportunity via e-mail. NAHQ has created a list serve for its members. The list serve is a quick and inexpensive way to network with colleagues. If you would like more information about the list serve, please contact: NAHQ 800/966-9392

Visit our Website

Looking for the latest WAHQ news? You can visit our Web site at www.wahq.org for the latest information on healthcare activities at home and around the country.

We are fortunate to have the expertise of MetaStar to guide us in the development of our Web page. This avenue of networking would not be possible without Metastar's technical and financial support. Special thanks to Rich Peacock, webmaster, Metastar Inc.

WAHQ 2005 Goals

Submitted by Linda Buel, President

Goal 1 – Education – this includes our annual conference, newsletters, and Metastar's CPHQ study session. Will be emailing the newsletter to members with email and mailing to those that do not have access to Email.

Goal 2 – Networking – Improved communications with our members through an enhanced website, and continued liaison with other state organizations.

Goal 3 – State presence – CPHQ recognition and acknowledgement of member awards through the newsletter. Just a reminder, if you pass your CPHQ exam, please send evidence of your success and membership to our treasurer for \$75.00 reimbursement.

Goal 4 – Strengthen relationship with NAHQ – maintain NAHQ affiliation through strong membership and participate in the NAHQ Leadership Council. We continue to meet the minimum 25% dual membership for WAHQ and NAHQ. We have three members who participate on the NAHQ Leadership Council.

Goal 5 – Fiscal Responsibility –The board is continually looking for ways to increase member benefits and maintain budget conscious activities.

Treasurer's Report

Submitted by Matt Wahoske, Treasurer

ACCOUNT BALANCES

• Checking	\$8406.92
• Savings	\$8512.97
• Annuity	\$4946.47
Total	\$21,866.36

Note: This years NAHQ conference in New Orleans was cancelled due to a hurricane.

2006 - WAHQ Annual Conference At a Glance

“Quality Revolution”...”Creating an Environment of Reliability”



Pascale Carayon Ph.D

Featured Speaker:

www.engr.wisc.edu/ie/faculty/carayon_pascale.html

Fields of Interest

- human factors and system engineering in healthcare and patient safety
- human factors and organizational issues in computer security
- human factors and ergonomics
- job and organizational design
- quality and productivity improvement technological and organizational change

New WAHQ Members

Submitted by Virginia Wyss, Membership

Beth Dibbert-Dir, Quality & Risk Mgmt Hess Memorial, Mauston

Carol Durocher-Performance Improvement Aurora Medical Center, Manitowoc County, Two Rivers

Michelle Gardner-Dir, Quality Improvement Initiatives, American Heart Association Milwaukee

Peggy Kennedy-Dir, Performance Improvement, St Joseph's Hospital Marshfield

Debra Morse-Health Care Analyst MetaStar, Inc, Madison

Susan Peterson-Dir, Quality Improvement & Risk Mgmt, The Wisconsin Heart Hospital Wauwatosa

Patricia Pfeiffer-Dir, Clinical Performance Improvement, St Michael's Hospital Stevens Point

Anne Radtke-Accreditation Coordinator St Michael's Hospital, Stevens Point

Lisa Rowe-Peplinski-Clinical Outcomes Mgr, St Joseph's Hospital Marshfield

Sandra Turniff-Risk Management Hartford

Matt Wahoske, CPA-Johnson Insurance, Madison

Kimberly Wildes-Clinical Quality Coordinator, ThedaCare Appleton,

Sue Sanford-Ring, Director, QI UW Hospital & Clinics, Madison

Paula VanLaanen, QM Coordinator Froedtert Memorial, Milwaukee

2005 Federal - Patient Safety Quality Improvement Act (PSQIA)

Information about the PSQIA will be presented at the conference. This act empowers Health and Human Services to establish a network of databases with patient outcome information. Some leaders believe this will lead to expanded pay for performance.

2005 - WAHQ Conference Evaluation

submitted by Gloria Fields, WAHQ Secretary

Again, presenters received very positive comments such as

- forward thinking,
- best conference ever,
- fast moving in a very comfortable setting.

Participants commented on

- gaining understanding of future technological trends, the difference between JCAHO certification and accreditation,
 - research explained in a “common sense” way,
 - insights approaching Case Management.
1. Recommendations from participants: Participants continue to express a preference for on-line registration or phone with credit card.
 2. Showcase regional members in Newsletter with provider success stories and provide more articles about current initiatives with contacts listed.
 3. Continued preference for location with easy access off the interstate.
 4. Emphasized the need for completeness and readability in handout information.
 5. There is increasing awareness of the WAHQ web-site with a slight increase in access.
 6. The majority indicated they would recommend this program for the value of the information and networking.

Outcomes across the continuum were the #1 choice for educational opportunities with Patient Safety being the second most selected as #1. Quality Measurement methods, as well, received high rankings. Other suggestions included: Culture Change; Centers of Excellence panel of award winning organizations, Leadership and Management change, IHI 100k interactive with audience, Non-hospital based efforts (ie.-Disease Management, Employer needs,); and ROI in Disease Management. If there are any other ideas for educational programs, please forward your thoughts to your region representative or a WAHQ board member.

MetaStar Launches New QI Projects for Hospitals



Submitted by Greg Simmons, President & CEO, MetaStar, Inc.

Achieving transformational change in health care quality requires commitment from all levels of an organization but strong commitment from leadership is vital. As MetaStar launches new quality improvement initiatives for the next three years, we are asking hospital leaders to learn about these initiatives and to work with quality improvement staff to make a commitment to transformational change in partnership with MetaStar.

MetaStar will be working with Wisconsin hospitals differently from the way we have in the past. We will select a limited number of hospitals to participate in each of the initiatives from those that submit applications signed by their hospital CEO. Those selected to participate will receive individualized services from MetaStar and will participate in collaborative activities with other selected hospitals. Selection will be based on a number of factors, including evidence of senior leadership support and involvement.

We will use four strategies to achieve change during the upcoming three years: measuring and reporting clinical performance, process improvements, systems improvement, and safety and organizational culture change. The four strategies are incorporated into the following projects:

Appropriate Care Measure (ACM): The ACM project is a composite measure of care at the patient level for three clinical topics: acute MI, heart failure and pneumonia.

Surgical Care Improvement Project (SCIP): The SCIP project was developed by a national partnership of organizations committed to improving surgical care through the reduction of post operative complications. The four national modules include: infection, cardiac, venous thromboembolism (VTE), and respiratory. The MetaStar project will target the infection and VTE modules.

Systems Improvement and Organizational Culture Change (SIOC): The SIOC project is an eHealth initiative in which MetaStar is offering a structured plan of action that will assist participating hospitals to adopt telehealth, computerized physician order entry (CPOE), or barcode enabled point of care.

Rural Organizational Safety Culture Change (ROSC): In this project, MetaStar will provide rural hospital leadership with tools and assistance to increase the safety of patients by adopting a safety culture.

Critical Access Hospital (CAH) Performance Measurement and Improvement Project: MetaStar is offering a project specifically for CAHs. The focus will be to improve hospital's performance on measures using the data they have sent to the QIO clinical warehouse for 3rd and 4th quarters of 2004. Letters and project descriptions were sent to all hospital CEOs, Nursing Directors and Quality Improvement Directors.

Additionally, informational webinars were conducted on September 28, 2005, and October 12, 2005. You can access the call information on the MetaStar website at: <http://www.metastar.com/professional/hospitals.asp>. Click on the "What's New" section for the September 28, 2005, call discussion. The October 12, 2005, call will be posted soon.

For more information on the quality initiatives, please call Jennifer Parisi, Administrative Assistant at (800) 362-2320 or (608) 274-1940, ext. 8219. Jennifer will forward your request to the appropriate project contact.

Call for Storyboards - March 10, 2006 WAHQ Conference

Submitted By Sheri Krueger-Dix

Another WAHQ opportunity to network, share your successes and lessons learned with your professional peers.

If you are interested in presenting a **Storyboard that demonstrates a progressive topic that would highlight Healthcare Quality,**

Please submit a brief description (80 words or less)
to **Sheri Krueger Dix.**
Due by January 13th, 2006

The **WAHQ Board** will review all submissions and **confirm presentors with guidelines by February 18th 2006.**



email:
sdix@fmlh.edu
or Phone:
262-257-3495 or
414-850-8488

Storyboard presenters will receive a 1-yr. transferable WAHQ membership per organization.

2005 WAHQ Conference –Storyboard Reports

Submitted By Sheri Krueger-Dix

Organ Donation Breakthrough Collaborative, by Pam Epple, RN

There are 84,467 patients waiting for an organ transplant in the United States.

Seventeen people on the transplant waiting list die each day.

The Organ donation breakthrough collaborative requires six high leverage changes to narrow the gap:

1. Advocate Organ donation as the mission,
2. Involve Senior leadership to get results,
3. Deploy a Self-Organizing OPO/Hospital Team,
4. Practice early referral, rapid response,
5. Master Effective requesting,
6. Implement donation after cardiac death

Early Clinical triggers were developed for ICUs to identify immediate or early referral to the Donor Network in an attempt to quickly begin the donation process.

Process and Outcome measures are reported in quarterly newsletters and as a report card

for involved staff. A continued plan, do, study, act process is in place to continually identify ways to improve the second chance for a second life.

Improving Quality through Public Reporting Workshop Series, by Judy Frisch, RN



MetaStar conducted a workshop series inviting teams from hospitals across the state to work together to improve the delivery of care to patients with:

- acute myocardial infarction,
- congestive heart failure or
- pneumonia,

thereby improving rates on publicly reported performance measures.

By the end of the third workshop, the teams prepared their internal and external communications and made real improvements to their processes of care and documentation, which should result in higher performance rates in the future.

Improving Outcomes for Patients with Community Acquired Pneumonia, by Sandi Budzynski

The storyboard focused on the care management for community acquired pneumonia in adult patients. The project was geared toward standardizing the care of the community acquired pneumonia patient population using the Plan, Do, Check, Act (PDCA), benchmarking with the JCAHO core measure data set using an evidence based practice.

WAHQ 2005-2006 Membership Application

Name _____ Credentials _____ (CPHQ, RN, LPN, RRA, ART, Other)

Title _____ Business Phone () _____ - _____ Home Phone () _____ - _____

Organization _____ FAX () _____ - _____ Email _____

Business Address _____ City _____ State _____ Zip _____

Are you a member of NAHQ? ___ Yes ___ No (Please check) Send more information regarding ___ NAHQ

Annual Membership Fee \$45

Make check payable to **WAHQ**

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