

President's Corner

WAHQ President



Gloria Field, RHIT, LPN, CPHQ

I wish you a very Happy Spring and hope that you can join us at the 2009 "Quality Connection" WAHQ conference March 13th in Madison. Our spring conference is promising to provide us with high "quality" education.

The board has been working hard to give us a diverse program with topics connecting:

- **Patient safety,**
- **Patient satisfaction/experience,**
- **Compliance, one of which includes a regulatory update addressing these areas of quality.**

Just a couple of highlights as we try to activate some of our strategies toward WAHQ's goals: One of our goals is Leadership and Leadership Development. As the National Association for Healthcare Quality, (NAHQ) is changing their approach to Leadership Development and Communication with states, the board is hoping to increase participation in those

ANNUAL Conference March 13, 2009

The Quality Connection Linking Quality and the Patient Experience Crowne Plaza

4402 E. Washington, Madison, WI

leadership calls facilitated by NAHQ on a quarterly basis. We would like to include any member that may be interested in listening during a teleconference call with NAHQ leaders. If you are interested in participating in the leadership calls, please let Gloria Field or your Board Representatives know and you will be notified when they are scheduled. We would also welcome members to join us at a WAHQ Board meeting March 12th at the Crowne Plaza.

One ongoing goal for WAHQ is to **liaison with other organizations** within Wisconsin that have the same or similar educational interests. One of the strategies that we have outlined is to look into opportunities to partner and plan a shared event in 2010. The Wisconsin Society for Healthcare Risk Management (WSHRM) has expressed interest in teaming up with us in an opportunity to collaborate in the spring of 2010. We are in early discussions with both Boards agreeing that we have the potential to put together a very dynamic conference, meeting both the diverse and overlapping interests within our organizations.

At this point, I would like to ask for your thoughts regarding this opportunity. As you provide feedback, please consider that it would necessitate a conference schedule change to late April, as

WSHRM has already booked the Crowne Plaza in Madison for that time period. With your encouragement, as I leave the President position and move into Past President, I would make it my personal goal to be on the planning team with WAHQ & WSHRM to develop a remarkable conference for 2010.

With travel budgets limited, especially for out-of-state conferences, it could benefit us to join forces and share resources to create an impressive conference that **links** interested parties from both organizations and potentially beyond.

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Winter-Spring 2008/2009

Upcoming 2009 WAHQ Conference

March 13, 2009

**Crowne Plaza
Madison Wisconsin**



Call for Storyboards

Submitted By Sheri Krueger-Dix

- Another WAHQ opportunity to network and 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**.

Extended Deadline: due by February 27, 2009

The WAHQ BOD will review all submissions and confirm presentors with
**guidelines by
March 1, 2009**

email: sdix@fmh.edu or

Phone: 262-257-3495 or 414-850-8488

Visit our WAHQ 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 Chapman, webmaster, Metastar Inc.

Other Quality Websites

| | |
|----------------------------------|--|
| WI Bureau of Quality Assurance | http://dhfs.wisconsin.gov |
| New CMS Internet site | www.cms.hhs.gov |
| Wisconsin Collaborative | www.wiqualitycollaborative.org |
| Wisconsin Price Point | www.wipricepoint.org |
| Health Grades | www.healthgrades.com |
| Center for Disease Control | www.cdc.gov |
| Healthy People 2010 | www.healthypeople.gov |
| Minnesota Adverse Health Reports | www.health.state.mn.us/patientsafety/ |
| Caring right at home | http://www.caringnews.com |

The video "The NQF Efficiency Measurement Framework: Can it Help Heal the Schism Between Public Health and Medicine?" is now live. You can view it at
<http://videos.med.wisc.edu/videoInfo.php?videoid=1677>

2008-2009 WAHQ Goals

Submitted by Gloria Field, President

Goal 1 – Annual Conference –

Will be strategizing with WSHRM for a joint conference in spring 2010.

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 | \$ 4,810.61 |
| • Savings | \$ 35,769.65 |
| • Annuity | \$ 5,227.43 |
| Total | \$ 45,807.65 |

2009 WAHQ Conference

The Quality Connection...Linking Quality and the Patient Experience

Crowne Plaza, 4402 E. Washington, Madison, WI

PRE CONFERENCE AGENDA

Thursday, March 12

4 :00 - 5 p.m. **Board Meeting — open to all members**

5:30 - 7:30 p.m. **Registration and Reception Buffet**

Conference

Friday, March 13

7 - 8:15 a.m.

Registration, Vendors and Storyboards and Breakfast Buffet

8:15 - 8:30 a.m.

Welcome

8:30 - 9:30 a.m.

Katherine Leonhardt, MD

Partners in Safety: The Role of Patient, Family and Community in Patient Safety

9:30 - 9:45 a.m.

Break — Exhibits and Posters

9:45 - 10:45 a.m.

Pascale Carayon, PhD

Design of Work and Processes for Patient Safety — Part 1

10:45 - 11:00 a.m.

Break — Exhibits and Posters

11 - Noon

Pascale Carayon, PhD

Design of Work and Processes for Patient Safety — Part 2

Noon - 12:30 p.m.

Annual Meeting

12:30 - 1:15 p.m.

Lunch

1:15 - 2:15 p.m.

Bill Brown, BSN, MBA

Building the Foundation for a Culture on your Journey to “Excellence”

2:15 - 2:30 p.m.

Break — Exhibits and Posters

2:30 - 3:45 p.m.

Scott Geboy, JD

Katherine Kuchan, JD

Matthew Stanford, JD

Legislative Update

3:45 - 4 p.m.

Evaluation and Adjournment

GUEST FACULTY

Dr. Kathryn Leonhardt is the Patient Safety Officer and Medical Director of Care Management at Aurora Health Care, a large integrated health system in Eastern Wisconsin. Dr. Leonhardt is also a Clinical Assistant Professor in the Department of Family Medicine at the University of Wisconsin-Madison Medical School. She received her medical degree in 1987 from the University of Michigan, her Master of Public Health (Epidemiology) from University of California-Berkeley and is Board Certified in Preventive Medicine.



Dr. Pascale Carayon, PhD is a 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. She received her Engineer diploma from

the Ecole Centrale de Paris, France, in 1984 and her PhD in Industrial Engineering from the University of Wisconsin-Madison in 1988.

Bill Brown, BSN, MBA is the Founder and Principal of Interim Healthcare Executive Solutions, Inc. Strategically oriented, superb people skills, excellent innovator of ideas and team builder with more than thirty years of successful health care experience, including Acute Rehab Hospitals, in positions ranging from staff nurse through Chief Nursing Officer and Vice President of Patient Care Services. He has demonstrated competency in reorganizing management structure to streamline decision-making processes, implemented productivity standards for all professional staff as well as restructured care delivery models.

Katherine Kuchan, JD is an attorney with the Milwaukee office of Hall Render Killian Heath & Lyman

Scott Geboy, JD is an attorney with the Milwaukee office of Hall Render Killian Heath & Lyman

Matt Stanford, JD is Associate Counsel with the Wisconsin Hospital Association. His responsibilities include tracking and analyzing legislation, lobbying activities and policy research.

See page 6 for Registration information and fees.

2009 WAHQ Board Candidates

NORTHEAST REPRESENTATIVE

Betsy Benz, Director of Quality Care Management and Interim CNO at St Mary's Hospital in Green Bay started her career at St Vincent Hospital in 1986 as a staff nurse on a cardiac/medical floor. After a few years, she moved to Coronary Care Unit for three years. Betsy was then chosen to be the Assistant Director of the cardiac/medical floor and then the Director for the following 10 years. She began a newly created role as director of Clinical Improvement Department in October 2003. She moved to St Mary's Hospital in June 2007, expanding her role and responsibility in the quality field. She is currently honored to also be serving in the Interim Chief Nursing Officer role as well. Betsy also serves as the treasurer for the Wisconsin Organization of Nurse Executives. She participates on many statewide initiatives. Betsy is CPHQ certified and has been a member of NAHQ and WAHQ for several years. Outside of her professional activities she and her husband are kept busy by her twin boys in grade school and working as foster parents.

Education

| Institution | Major Area of Study | Degree | Year Awarded |
|--------------------------------|---------------------------------|---------------|--------------|
| Northeast WI Technical College | Nursing | Associate | 1986 |
| Marian College | Nursing | Baccalaureate | 1991 |
| Marian College | Business Leadership and Quality | Masters | 1996 |

NORTHWEST REPRESENTATIVE

Linda Burrell graduated with a Bachelors Degree in Business Administration in 1981 and an Associate Degree in Nursing in 1984. Her initial training in utilization and quality review was gained with the Wisconsin Peer Review Organization (WIPRO) and she has worked as a Quality Improvement Coordinator in the hospital setting as well. Linda's current position is with Luther Hospital as an RN Supervisor-Case Management. She completed Six Sigma Green Belt Training, Data Analysis training and Midas Careplan Software Training and is working on improvement teams at Luther. Linda is certified as a Quality Improvement Associate from the American Society for Quality.

SOUTHCENTRAL REPRESENTATIVE

Linda Sauer is the Manager of the Quality Resources Department at UW Hospital and Clinics (UWHC). She began working at UWHC in the Quality Resources Department in 2003. Safety and Quality experiences include peer review, survey readiness, process improvement tools such as RCA and FMEA, benchmarking, research, team facilitation and project management.

Linda has worked in healthcare since beginning her career in 1982 as a Medical Assistant in Milwaukee Wisconsin. She then moved to Unity Health Plans in Sauk City Wisconsin, in 1988 as a claims processor. Her role eventually evolved to Provider Representative where she developed experience in contracting and reimbursement methodology. In 1998, Linda became the Director of Network Management at Community Physicians Network, Inc. (CPN) a rural Wisconsin independent physician association providing a rural network for multiple HMOs. She later became the Director of Data Integrity and also headed a non-for-profit organization called Community Physicians' Foundation, Inc. When CPN's Board of Directors decided to dissolve the organization, Linda was appointed Chief Operations Officer to complete the dissolution process. Linda obtained her bachelor's degree in Management and Communications from Concordia University in 1998. In 1982 she obtained her certification as a Medical Assistant and a degree from MATC-Milwaukee. She also completed a Nonprofit Management Series in 2003. She enjoys family and friends, her two cats, reading, music and badger basketball. Her recreational activities include playing volleyball, canoeing, biking hiking and skiing.

TREASURER

Matt Wahoske, CPA, is the Managing Director - Wisconsin for FinCor Solutions. Based out of Waunakee, he is responsible for business development in Wisconsin, promoting MHA Insurance Company and The Risk Management and Patient Safety Institute products and services, and personally meeting with hospital and physician clinic representatives to help them make their facilities safer for their patients and to help them reduce their medical malpractice cost. Matt has spent over 16 years serving the Wisconsin healthcare community. After spending three years as an auditor with a large Milwaukee accounting firm, Matt took a position with PIC Wisconsin in 1990, the state's leading medical liability writer. During his 15 year stint with PIC, he served in a variety of financial and operational roles, where he had the opportunity to work with many of the state's leading healthcare providers to develop risk and quality programs as part of their medical liability program. In August of 2006, he joined FinCor Solutions, an integrated risk management corporation designed to meet the risk financing, risk transfer and clinical risk management needs of today's health care providers. In addition to WAHQ, Matt is active in the Wisconsin Institute of Certified Public Accountants (WICPA), the Wisconsin Chapter of the Healthcare Financial Management Association (HFMA), the Wisconsin Society of Healthcare Risk Managers (WSHRM) and the Rotary Club of Madison. Matt graduated with honors from the University of Wisconsin at Madison with a degree in accounting. He currently resides in Waunakee with his wife and three children. In those rare moments of quiet time, he enjoys running, biking, gardening and cooking.

Ballots were emailed to all WAHQ members for voting. Election results will be announced at the March 13th meeting. If you did not receive a ballot please contact Gloria Field at fieldg@smhosp.org.

CMS ADDS NINE (DRY RUN) PATIENT SAFETY INDICATORS

Release of the Dry Run Version of Hospital-Specific Reports on AHRQ Measures (Feb 17, 2009)

The Centers for Medicare & Medicaid Services (CMS) adopted 9 Patient Safety and Inpatient Quality Indicators developed by the Agency of Healthcare of Research and Quality (AHRQ) for the Reporting of Hospital Quality Data for Annual Payment Update (RHQDAPU) program in the Final FY 2009 Inpatient Prospective Payment System (IPPS) rule issued August 2008. Prior to implementing these measures on Hospital Compare for the RHQDAPU program, CMS plans to conduct a national dry run for these measures.

The purpose of the dry run will be to provide hospitals with information about the 9 AHRQ measures and to give hospitals an opportunity to review their hospital performance and provide CMS with their feedback. This dry run will be similar to the ones that CMS conducted for the mortality measures in 2006 and the Heart Failure (HF) readmission measure in 2008. CMS is pleased to announce that the release of the “dry run” version of **Hospital-Specific Reports for the 9 AHRQ measures will occur by the end of February followed by a 30-day question and comment period, during which we welcome your feedback.**

Calculations featured in the dry run reports will be based on Medicare fee-for-service claims received for hospitalizations occurring from January 1, 2006 through December 31, 2006. Hospitals that have treated patient and submitted claims to CMS for hospitalizations for the conditions relevant to the 9 measures in 2006 will receive Hospital-Specific Reports containing their data and comparative information for the nation, their State, and their Health and Human Services (HHS) region. For those hospitals that did not submit claims for these conditions, CMS will make available a mock-report based on simulated data for their review on QualityNet. The purpose is to give all hospitals in the nation an opportunity to participate in this dry run. These hospital-specific dry run reports will be made available via QualityNet Exchange by the end of February, and will be placed in the My QualityNet inbox of the hospital designee in the “QIO Clinical Warehouse Feedback Reports” role. **This will mark the beginning of the 30-day question and comment period regarding the Hospital-Specific Reports, which will end April 2, 2009.**

The information contained in these “dry run” reports will not be used in any payment determinations, nor will it be publicly reported.

This “dry run” is intended to inform hospitals about the measures and their facility’s performance on these measures prior to implementing the measures for public reporting on Hospital Compare. CMS encourages hospitals to provide feedback during the 30-day question and comment period.

The five AHRQ Patient Safety Indicators to be included in the “dry run” report include the following:

- PSI 4-Death among surgical patients with treatable serious complications
- PSI 6-Iatrogenic pneumothorax, adult
- PSI 14-Postoperative wound dehiscence
- PSI 15-Accidental puncture or laceration
- Complication/patient safety for selected indicators (composite)

The four Inpatient Quality Indicators in the “dry run” report include the following:

- IQI 11-Abdominal aortic aneurysm (AAA) mortality rate
- IQI 19-Hip fracture mortality rate
- Mortality for selected surgical procedures (composite)
- Mortality for selected medical conditions (composite)

Detailed information and specifications for the AHRQ Patient Safety Indicators and Inpatient Quality Indicators are available at: <http://www.qualityindicators.ahrq.gov/>

Each QIO will receive reports, in zipped format, for all hospitals in its respective state(s).

The reports will be placed in the QualityNet Exchange inbox of the QIO’s designated Hospital Public Reporting

CMS DRY RUN SAFETY INDICATORS (continued)

(continued from page 5)

Point of Contact. Hospitals are encouraged to contact ahrqdryrunbrandeis@brandeis.edu for help in interpreting the data or other content of the Hospital-Specific Report. Questions regarding the measure specifications, or measure development should be referred to: support@qualityindicators.ahrq.gov, or (888) 512 – 6090. For any file-related issues (e.g., retrieving or opening files.), please contact the QualityNet Help Desk at qnet-support@ifmc.sdps.org, or (866) 288-8912.

Q-SOLUTIONS TRAINING FOR QUALITY PROFESSIONALS

MetaStar, in collaboration with the Wisconsin Association for Healthcare Quality (WAHQ), invites health care quality professionals to a one day educational session for

Certified Professional in Healthcare Quality Certification (CPHQ), Recertification, or General Knowledge Enhancement

MetaStar will be using the new Q-Solutions educational program. The course materials contain essential resources in step with current and anticipated demands. This course will be held on

**Thursday,
March 12, 2009
8 a.m. – 5 p.m.**

**Crowne Plaza Hotel
4402 E. Washington, Madison, WI**

You can **order the course materials** by calling the National Association for Healthcare Quality (NAHQ) customer service at (800) 966-9392 or through the NAHQ Web site at www.association-office.com/NAHQ/etools/products/products.cfm (See page 7 for course content details.)

The cost of the training materials:
\$165 for NAHQ members
\$185 for NAHQ non-members.

To register and pay for the course or to obtain more information, call Jennifer Parisi at (608) 441-8219 or at jparisi@metastar.com.



Wisconsin Association for Healthcare Quality (WAHQ) www.WAHQ.org 2009 Membership Application & Conference Registration

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

Current Member Conference Fee \$125

Conference fee with New or Renewal membership \$170

Non-Member Conference Fee \$195

Make check payable to WAHQ

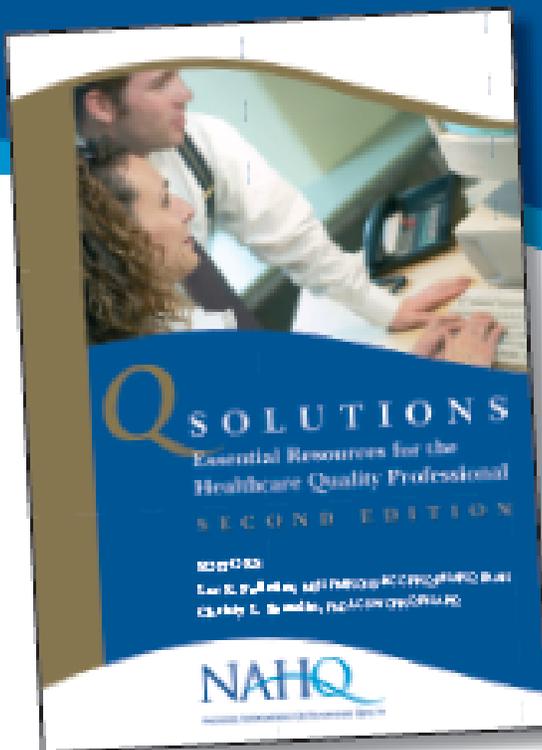
Mail completed Registration to:

Virginia Wyss
2202 Tradition Lane
Janesville, WI 53545

Email VWyss@ameritech.net Phone: (608) 752-3911

Affiliation with the National Association for Healthcare Quality (NAHQ) to join logon to:

NAHQ Membership <http://www.nahq.org/member/NAHQapplication.pdf> annual membership \$150



Q Solutions: Essential Resources for the Healthcare Quality Professional

EDITORS:

Luc R. Pelletier, MSN PMHCNS-BC CPHQ FNAHQ FAAN

Christy L. Beaudin, PhD LCSW CPHQ FNAHQ

\$125 NAHQ MEMBER • \$145 NONMEMBER

Q Solutions: Essential Resources for the Healthcare Quality Professional, 2nd edition, establishes and extends foundational knowledge for healthcare quality professionals across the care continuum. It covers the breadth and depth of the areas critical to professional development and leadership: frameworks for quality management, the linking of science with practice, and the translation of data into information that can be used and understood by both practitioners and patients.

Developed by a team of experts and members of the National Association for Healthcare Quality (NAHQ), *Q Solutions* provides quality professionals with the tools they will need to measure, monitor, and determine actions and interventions that produce sustainable or improved healthcare quality while controlling costs. A fifth module on healthcare safety culture has been added to the second edition to correspond with the addition of patient safety to the Certified Professional in Healthcare Quality (CPHQ) examination. Modules 1-4 have also been updated to reflect recent changes in national healthcare safety initiatives.

Healthcare quality professionals, along with students, teachers, professional development directors, and administrators, will find *Q Solutions* to be an exceptional resource.

Contents

Module One: Foundation, Techniques, and Tools

Module Two: Strategy and Leadership

Module Three: Continuous Readiness

Module Four: Change Management and Innovation

Module Five: Healthcare Safety Culture

CPHQ Exam Preparation: *Q Solutions* is a valuable resource for any healthcare quality professional seeking certification as a CPHQ, particularly in conjunction with the Healthcare Quality Management: Review and Study Session offered by NAHQ. *Q Solutions* is the official text of this course.

***Q Solutions* is available for order at www.nahq.org.**

Contact NAHQ for additional information or order by phone at 800/966-9392.

Focus on a Local Healthcare Patient Safety Collaborative: The Madison Patient Safety Collaborative

WAHQ Guest Author—Kendra Jacobsen, MS, Executive Director

Originally presented at the Wisconsin Hospital Association Quality and Safety Forum, October 21, 2008, Wisconsin Dells, WI

In 1999, the Institutes of Medicine (IOM) published a groundbreaking work titled *To Err is Human*, which created a storm of media attention on medical error. Most of those working in healthcare across the nation were not prepared for this attention and responded by questioning the data and methods before eventually admitting that there might be a problem.

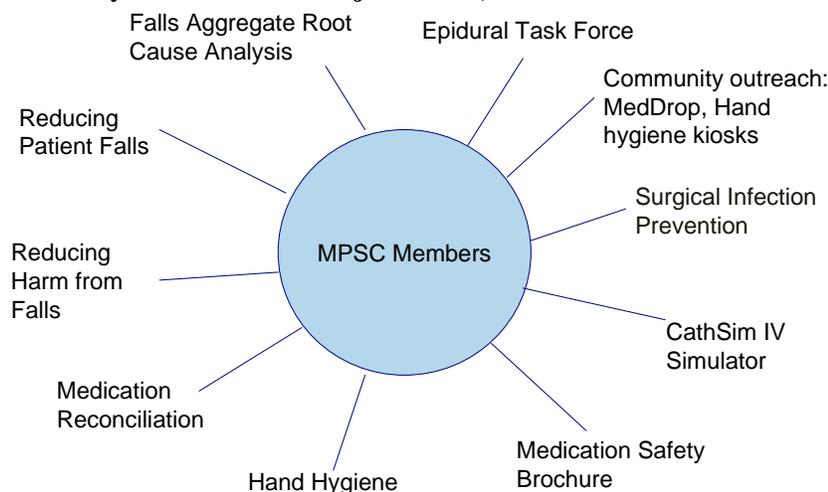
In Madison, Wisconsin, however, the IOM's observations resonated with healthcare leaders, who immediately connected with colleagues across the city—even with competing organizations—to establish a forum to facilitate sharing and learning about patient safety and patient safety initiatives. The resulting Madison Patient Safety Collaborative (MPSC) was founded to “enhance the safety of patients in our community through shared learning and collaboration” and “to serve as a model that will encourage other communities to adopt such a cooperative approach in the best interests of all healthcare consumers.” To accomplish these intentions, members of the new organization agreed from the beginning to set aside any use of safety data or initiatives to compete with one another. This core value established a foundation of trust critical to the MPSC's success.

Patient safety and quality collaboratives have proliferated since 2000. Across the nation, each is unique in purpose, form, and function. The MPSC remains a private collaborative with a very small staff (currently a single executive director who manages both overall strategy and day-to-day activities) and an annual budget of approximately \$100,000. These funds are generated through dues from MPSC members, which include all of the city's hospitals and large clinic systems: Dean Health System, Group Health Cooperative of Southcentral Wisconsin, Meriter Hospital, St. Mary's Hospital Medical Center, University of Wisconsin Hospitals and Clinics, University of Wisconsin Medical Foundation and the Wm. S. Middleton VA Hospital.

Because the MPSC aims to make improvements in healthcare safety at a level not possible at each individual organization alone, one of the MPSC's core functions is to provide opportunities for members to communicate, problem-solve, and innovate across organizational boundaries. Monthly member meetings involve high-level quality and safety personnel from each member organization. These representatives identify community trends and opportunities for improvement, share concerns, and help set future direction. Project teams involve subject matter experts who work together on specific project initiatives. These representatives act as champions for system improvement, share on-the-ground successes with and collect practical ideas from other MPSC members, work to produce a product, and sponsor community events.

Over the years, projects have centered on fall prevention, medication reconciliation, hand hygiene, medication and epidural safety, catheter simulation to increase successful IV starts, surgical infection prevention, and community outreach such as hand hygiene kiosks at the Dane County Fair, a Community Falls Summit, and co-sponsorship of MedDrop, “the best place to get rid of medicines” (see Figure 1).

Figure 1. Madison Patient Safety Collaborative Project Areas, 2000 to Present



Focus on a Local Healthcare Patient Safety Collaborative... (continued)

The MPSC's surgical infection prevention project demonstrates the importance of members' commitment not to compete based on safety data. In 2004, the MPSC chartered a surgical infection prevention (SIP) project team to reduce surgical site infections by implementing three proven SIP strategies promoted by the Center for Medicare and Medicaid Services (CMS): choosing the right antibiotic for the surgery, starting the antibiotic within 60 minutes of incision, and discontinuing the antibiotic 24 hours after

surgery. For 18 months, each participating hospital collected and submitted data to the team regarding compliance with the three measures. These data were summarized and discussed at quarterly meetings of operating room, infection control, quality improvement, and hospital pharmacy staff.

Hospitals showing improvement were asked to share what they had done to improve; hospitals moving in the opposite direction were invited to share about the barriers they encountered. Not all hospitals implemented the same techniques; many were customized for a particular hospital's system.

WAHQ Board of Directors

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WAHQ members may attend board meetings provided there is sufficient room. Check with your regional representative if you are interested in attending a future meeting.

***Upcoming Board Meeting Schedule:
March 12, 2009,
Crowne Plaza***

4:00-5:00 PM

followed by Registration and a Reception Buffet