



News & Views



WAHQ President Kathryn Noe, RN, CPHQ

President's Corner

Welcome to our winter newsletter. The newsletter includes the latest quality issue updates from the National conference, the WAHQ 2004 conference plan and a CPHQ education report. This year's

NAHQ conference in Arizona included network opportunities with other Healthcare Quality Professionals from across the nation and from abroad. It was a terrific group with the common "quality" thread.

The conference was full of educational choices for improving participant learning on many different topics. I was glad to see others from the state participating and taking advantage of the NAHQ learning opportunities.

I was able to talk with neighboring state representatives and I discovered that they are also experiencing the same issues

Wisconsin Association for Healthcare Quality (WAHQ)

WAHQ Annual Conference

"Ready! Set! **Change!**"

Challenges..Accountabilities..Possibilities Partnering for Performance and Results."

March 5, 2004

Crowne Plaza East Towne

Madison Wisconsin

Leading Expert in Organizational Performance:

Dr. John H. Kleinman, FACP Vice President Clinical Affairs, VHA Upper Midwest

"Clinical Documentation - A Clinician's Guide to Severity Adjustment & Quality Measurement."

Organizational Performance Learning Objectives:

- Recognize how clinical performance of hospitals and physicians is reported
- Develop the skills in Chart Documentation to ensure the correct diagnosis and severity adjustments
- Recognize the key phrases to use for correct coding of the illness
- Be able to document correctly so that your clinical performance is assessed and reported accurately

Mark Your Calendar

See additional conference information on Page 2

that plaque our organization. It was exciting to hear some NAHQ cutting edge speakers who presented educational issues and who were from Wisconsin.

The board is preparing the slate now for the March 2004 WAHQ spring conference which will be a great educational opportunity held at the Crowne Plaza in Madison.

Recently WAHQ and MetaStar sponsored a Certified Professional in Healthcare Quality (CPHQ) educational class. This pilot class was well attended. It was offered to the

WAHQ members who plan to take the test later this year at no cost.

The WAHQ board would like to thank MetaStar for their time and commitment in this opportunity for improving the knowledge base of quality personnel in Wisconsin.

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Fall ISSUE 2003

Upcoming WAHQ Conference Topics, Speakers & Registration Information

Friday - March 5, 2004

Speakers

- 1. Leading Expert in Organizational Performance Dr. John Kleinman, FACP**
Dr. Kleinman is responsible for leading and coordinating VHA Upper Midwest's clinical efforts and providing credible, relevant clinical and operational support to senior management teams, physicians, nurses, and other clinicians working with and for VHA Upper Midwest's members.
He oversees clinical leadership development, VHAUM's patient safety collaborative, integrated practice benchmarking, and provides custom consulting for organizational physician strategies, payer strategies, operational improvement, and improved clinical efficiency and outcomes.
In addition he is the regional resource for the promotion and dissemination of VHA's national clinical improvement agenda.
- 2. Pam Maas, MBA, Director of Marketing**, will discuss how to develop marketing, communication and strategic plans as well as image positioning.
- 3. Sarah Stanton, MHA, MBA, CEO Stanton Group**, will discuss how to use operations management to create effective satisfaction among varied constituencies.
- 4. Jennifer Buchholz, Campus Chair for the University of Phoenix, Milwaukee**, will discuss strategies to communicate quality information to the adult learner.

Program Agenda

8:00-8:30	Registration and Continental Breakfast
8:30-9:00	Welcome & Announcements
9:00-10:30	Expert speaker: John Kleinman, MD, FACP
10:30-11:00	Break/Exhibits & Posters
11:00-11:30	John Kleinman, MD, FACP
11:30-12:30	Pam Maas
12:30-1:30	Lunch/Business Meeting, Exhibits & Posters
1:30-2:30	Sara Stanton
2:30-3:00	Break/Exhibit & Posters
3:00-4:00	Jennifer Buchholz, Closing Remarks & Adjournment



Special Thanks to  for sponsoring the cost of the conference brochure.

Conference Location:

Crowne Plaza East Towne,
4402 East Washington Avenue, Madison, WI 53704
Toll-Free: 8004047630
Tel: 1-608-2444703
Fax: 1-608-2447829
Email: crowne@inxpress.net

Conference Registration Information:

Member Registration Cost - \$175
Member Registration Cost & WAHQ Renewal - \$210.00
Non-members Registration- \$225
Non-member with Registration-\$250
Registration postmarked after Feb 1, 2004- Add \$25
All cancellations must be made in writing before February 15th. A \$25 cancellation fee will be charged.
No refund for any cancellations after February 15th, 2004.
Substitutions are acceptable.

Conference Objectives

1. Recognize how clinical performance of hospitals and physicians is reported.
2. Examine the concept of public accountability and what consumers are saying about your organization.
3. Describe the integration of Performance Improvement (PI). Incorporate PI in an organization's marketing strategy.
4. Learn why customer service training is driving consumerism in healthcare.
5. Identify customer service skills that you can easily implement.
6. Strengthen the performance and communication of information through transfer learning.
7. Learn strategies to strengthen your style and techniques of communicating to adult learners.

WAHQ CONFERENCE REGISTRATION/MEMBERSHIP INFORMATION

Name: _____ Credentials: _____ (CPHQ, RN, LPN, RRA, ART, Other)
Title: _____ Business Phone: () _____ Home Phone: () _____
Organization: _____ Fax: () _____ E-mail: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Business Address: _____ City: _____ State: _____ Zip: _____
Are you a member of NAHQ? Yes No (Please check) Send more information on: NAHQ CPHQ
Signature: _____ (Membership renewal only \$ 35) or check one:
2004 member conf. fee ___(\$175) **2004 member conf. fee with renewal** ___(\$210)
Non-member conf. fee ___(\$225) **Non-member conf fee with membership fee** ___(\$250)
Late Fee ___(\$25) (postmarked after Feb 1, 2004) **Total Submitted \$** _____

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2003 NAHQ Annual Conference Reports

“On Par with Quality”

Near Miss - Early Warning System

Sarah Tackett, RHIT CPHQ FNAHQ, HQ AFMC/SGPO, Wright-Patterson Air Force Base, OH - submitted by Linda Buel

<p>In November 1999, the Institute of Medicine (IOM) released a report entitled <i>To Err is Human: Building a Safer Health System</i> that shook the entire American medical community. The report indicated that health care institutions throughout the nation have a serious problem with medical errors, and that the root causes are poorly designed systems, not poor providers and that systems improvements can indeed reduce errors. It also indicated a loss of public trust as a result of these errors and that safety must be a top priority. This Near Miss Pilot Project focused on military medicine and how it is compared to the IOM Report. The research during the three year period has produced positive results in identifying and reducing medical error and developed several unique initiatives to improving patient care.</p> <p>On concept discussed, called the “Swiss cheese” model of accident causation (Reason, 1990), demonstrated that if failures in the system line up – organizational factors (poor</p>	<p>communication, change in routine); unsafe supervision (inexperienced pharmacy techs or nurses); preconditions for unsafe acts (colleague responsible for patient, unfamiliar with specific treatment regimen); unsafe acts (route of medication administration incorrect), a sentinel event more than likely occurs. “Rather than being the main instigators of an accident, operators tend to be the inheritors of system defects...their part is that of adding the final garnish to a lethal brew whose ingredients have already been long in the cooking” <i>James Reason</i>.</p> <p>In July of 2001, the JCAHO instituted the patient safety and error reduction standards that will require compliance from ambulatory care facilities as well in January of 2004. Their concept is that reduction of errors/other factors that contribute to adverse outcomes requires an environment that encourages:</p> <ol style="list-style-type: none"> 1. Recognition and acknowledgement of risks 2. Initiation of actions to reduce risks 	<ol style="list-style-type: none"> 3. Internal reporting of what was found and actions taken 4. Focus on processes and systems 5. Minimization of individual blame/retribution <p>The challenge – “The medical imperative is clear; to make health care safe we need to redesign our systems and create a culture in which the existence of risk is acknowledged and injury prevention is recognized as everyone’s responsibility” Lucian Leape JAMA 1998. Some examples of system redesign include: standardization, use of protocols – EBM, reduce reliance on memory and use checklists, reduce reliance on vigilance, attention to error prone systems, improve access to patient information, improve access to medication information, design for errors, team training, simplify everything, bar coding/voice recognition.</p> <p>Sarah Tackett’s presentation can be accessed at https://www.afmc-mil.wpafb.af.mil/HQ-AFMC/SG/sgp/sgpindx.htm.</p>
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What You Need to Know About the JCAHO Patient Safety Standards

Judy Homa-Lowry, MS RN CPHQ, Homa-Lowry Healthcare Consulting, Metamora, MI - submitted by Linda Buel

<p>This presentation provided an overview of the JCAHO Patient Safety Standards. Information was presented on implementation of the standards and suggestions for implementing effective data collection, data analysis and improvement strategies. Highlights include:</p> <p><i>LD.4.5 – The leaders measure and assess the effectiveness of their contributions to improving performance and improving patient safety.</i></p> <p>1. The document review session has been eliminated and visits to units have increased. Therefore, each department in the organization should have patient safety goals and each employee should be able to speak to them.</p>	<ol style="list-style-type: none"> 2. Start with baseline data suggested in resources. 3. Integrate ancillary department into studies of processes and systems and define who leads. QI traditionally has expended most of its energy on Medical Staff Services quality initiatives. 4. Look at policies and procedures and make sure they are operationalized and include process criteria. Do an indicator purge – if the indicators do not give you data on patient safety, “get rid of them”. <p><i>LD.5 – The leaders ensure implementation of an integrated patient safety program throughout the organization.</i></p>	<ol style="list-style-type: none"> 1. Does the culture support integration? Does leadership support QI/RM integration? All employees are accountable, but who is accountable? 2. Who handles the immediate response to medical/health care errors “after QM hours”? Who can perform analysis and preserve site at the time-not waiting until QI is there? 3. Are analysis, reporting and institution of improvements timely? Define how much information is provided to the governing body and consider PowerPoint presentation and no handouts. Presenting the cost of doing sentinel event root cause analysis and FMEA can be powerful. 4. Check your data
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NAHQ Conference Reports:

"The Quality Challenge: Where do we go from here?"

Submitted by Kathy Noe, WAHQ President

Dr. David Nash was one of the opening speakers at the NAHQ conference in Phoenix. Dr Nash discussed his recent personal experience from surgery last year. The difficulties he experienced with finding a qualified surgeon for his specific procedural needs. How he used quality data that is available now to the public for research on the physicians on the procedures done and their outcomes. Also the different customer (patient) services that can be provided to make the hospitalization experience easier. An example was the meeting of the staff on the surgical unit where he would be recovering and the discussing of their normal daily routines prior to surgery.

He finished his speech with how things may change in the future. For example, the ability to interact with your practitioner on a secured internet site and review your labs and update your care. This was a very good presentation to get people thinking about how changes are going to be made to interact with patients in the future. Patients are not going to wait for 2 weeks for test results and then another couple weeks for an appointment to discuss those results.. the future generation that is used to getting rapid response through many different media sources will want the results now! The beginning steps being taken with keeping patients information confidential as we progress to this new age communication is important baby steps.

Leadership Council Report from NAHQ Conference in Phoenix

Submitted by Sheryl Krueger Dix, Southeast Region Rep.

The privilege of being able to be part of the National Leadership Council was an inspiring experience. The business of the council included the 2003 election results. Please take time to visit the NAHQ website to become familiar with your new NAHQ leadership. They will lead us through the next years with a commitment to added resources and programs for membership. The President's address by LJ Guthman motivated the membership into a mindset to accomplish the goals and challenges with vision. A new toolkit will be available on the NAHQ website the first quarter of 2004. Resources will include a multimedia core competency assessment and a salary survey. A report on the international direction of HQCB and the role of the Quality Management professional at a global level was presented. The leadership council discussed NAHQ Bylaws changes. The articles for discussion included Article III Section 1, regarding whether or not to continue institutional membership. There was ongoing discussion with support to continue the membership that allows participation in NAHQ. Article III Section 1 was up for discussion. After discussion regarding Emeritus Members, the vote was yes to allow Emeritus Membership granted to any individual who has retired from full-time employment and has been a voting member of the Association for at least five (5) years immediately preceding the initial application for emeritus membership. This change will offer active individual members the opportunity to

continue their NAHQ membership at a 50 percent discount. The new statement eliminates age 60 as a requirement. I am grateful for the opportunity to attend and participate in the National conference and council. Phoenix was a wonderful place to visit with the State Association as gracious hosts to NAHQ members.

NAHQ Publishing Workshop

Submitted by Sheryl Krueger Dix, Southeast Region Rep

The 2003 Writing Clinics: Roll up your sleeves and let's start writing, was a hands on, discussion and informative session for the prospective author. Five concurrent tables and discussion groups were set up to include types of submissions and articles, techniques in writing, along with the manuscript review process.

The tables for "How to" research an article with ideas on how to decide what to write about were given to participants. Many great tips on age of references limited to 5 years, along with sharing the criteria used to evaluate submissions along with the Manuscript Review Form.

Journal of Healthcare Quality (JHQ) staff professes to provide a mentorship approach to encouraging potential authors to consider sharing their topics of interest. Support is provided to any of the editors and contributors to the journal. It is exciting for professionals to know that support is provided to encourage sharing and growth. I hope our members take advantage of this opportunity!

WAHQ 2003 Conference Evaluation Summary

Submitted by Gloria Field, WAHQ Secretary

All of the **presenters received very positive feedback**. Participants deemed the conference as an excellent, well planned, conference with excellent speakers, "on point and relative".

Some of the lessons learned included:

1. Attendees recommended internet registration, earlier notification of the conference, although most indicated they heard about the conference via the brochure.
2. Attendees identified the need to include the hotel phone # in the Newsletter and on the website, more timely and more frequent newsletters,
3. More space between tables, better working AV equipment, board introductions from the front, and inclusion of an "abbreviations list" with speaker handouts for attendees new to the field.
4. There is a need to include speaker objectives with the presentations.
5. The site continues to be favored with comments about easy access, beautiful facility, great food and service.

Other positive lessons learned included: nice speaker introductions, appreciation of member and speaker identification, and especially inclusion of vendors/storyboards/treats in great room being conducive to learning and accessibility.

There were some **excellent suggestions** such as: **Memo Board** "I'm looking for information on..." as a networking option. **Risk Management, Outcomes** across the Continuum, **Patient Safety, Quality Measurement Methods**, and **Case Management** were chosen as #1 in that order for **educational opportunities**.

However, **Information Systems, Case Management, Outcomes Across the Continuum and Quality Measurement Methods** received the **highest scores** for **future conference topics**.

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

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 Linda Buel at 608-262-6087 or by email at la.buel@hosp.wisc.edu.

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.

So, visit our site and let us know if you find it beneficial. Our e-mail can be accessed through the Web page also. Any suggestions are always welcome!

Special Thank you to PIC Wisconsin

In recognition of the National Quality Week, PIC WISCONSIN sponsored a luncheon for the WAHQ October board meeting. In addition, throughout 2003, PIC has supported the organization by offering the WAHQ board free use of a conference room at their Madison offices for all of the board meetings.

PIC WISCONSIN is one of the country's leading writers of medical professional liability insurance, providing insurance products and risk management services to physicians, dentists, hospitals, healthcare facilities and integrated healthcare networks. The entire organization focuses exclusively on helping healthcare professionals manage risk through risk management services and a tenacious defense policy against no meritorious claims.

The WAHQ board appreciates PIC's support and recognition of the efforts of healthcare professionals throughout the Wisconsin.

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.

Examples of Current Topics Include:

-  **Compliance**
-  **Documentation**
-  **Education Training & Communication**
-  **Evidenced Based Medicine**
-  **Government Regulations**
-  **Hedis-Managed Care Focus**
-  **HIPAA**
-  **Information Management**
-  **Informed Consent**
-  **Management & Leadership-Model Structure for EBM Programs**
-  **Primary Care-Allergy Immunotherapy**
-  **OASIS-Home Healthcare Program to prevent**

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.

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