

STATEWIDE COLLABORATION OPPORTUNITY TO PREVENT HAIS IN MONTANA

Presented by
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THE EXPERIENCE

- **This is a local, statewide collaborative project to reduce HAIs.**
 - **Sponsored by MPQH and their partners MHA and the HAI Prevention Initiative (MTDPHHS)**

- **The Learning and Action Network (LAN) will be the platform for spreading best practices and making small, rapid changes that will add up over time.**
 - **1 face to face meeting per year.**
 - **Monthly webinars that focus on sharing what works using methods like CUSP (comprehensive unit based safety program) and PDSA (plan-do-study-act).**

EXPERIENCE CONTINUED

- Your LAN team will be multidisciplinary and include members who can advocate for improvement and be the “boots on the ground”.
- Facilities will design and conduct small tests of change that focus on rapid implementation of best practices.
- Reporting on the successes and barriers encountered during your tests promotes transparency and rapid learning.

WHAT IS THE FOCUS?

- ✓ Catheter associated urinary tract infections (CAUTIs)
 - ✓LAN beginning October 2011
 - ✓Mandatory reporting for IPPS begins January 2012
- ✓ Surgical site infections (SSIs)
 - ✓Tools and best practices will be introduced during the CAUTI LAN sessions.
 - ✓Mandatory reporting for IPPS for inpatient colon and abdominal hysterectomy begins January 2012
- ✓ Clostridium difficile infection (CDI)
 - ✓LAN beginning June 2012
 - ✓Mandatory reporting for IPPS (facility wide) begins January 2013

WHO IS INVOLVED?

- Mountain Pacific Quality Health (QIO for Montana, Alaska, Hawaii and Wyoming)

- Montana Hospital Association

- HAI Prevention Initiative (MTDPHHS)

- You (Montana healthcare facilities)

WHAT IS DIFFERENT ABOUT THIS SCOPE OF WORK?

- This is a patient centered project.
 - We will start the LAN's with a patient story.
 - Strive to make patients part of your facilities improvement team.

- The project is flexible. We will adapt the LANs to meet the needs of the group and address barriers in real time.

- MPQH will want constant feedback about your experience and how they can make it more value added.

WHAT ARE THE BENEFITS FOR MY FACILITY?

- There is no enrollment fee.
- Participating in an **action and results** oriented statewide collaborative can help your facility pro actively address the new data reporting requirements.
 - Focus is on improvement in the form of reduction of HAIs that harm patients and could impact the bottom line.
- You won't be alone on your improvement journey. You will have support from project staff and experience an open learning/sharing forum with other Montana facilities.

WHAT ARE THE BENEFITS FOR THE PATIENTS?

- Learn about LOCAL HAI prevention and improvement efforts.
- Opportunity to participate in local healthcare improvement activities.
- Reduce healthcare associated infections in their communities by sharing their stories.

HOW IS THIS GOING TO WORK?

- The monthly LAN sessions will be scheduled for 1 hour.
- Your facility team will attend.
- Best practices will be presented. Improvement methods like CUSP and PDSA will be incorporated.

LOGISTICS CONTINUED

- Local mentor facilities will share what has worked related to the implementation of the best practice.
- The group will design small tests of change.
- Teams will conduct a small test of change before the next session.
- Teams will report on their progress.

WHAT IS AN EXAMPLE OF A SMALL TEST OF CHANGE?

- **Goal = Reduce CAUTIs**

- **Objective = Reduce the number of urinary catheter days.**

- **Best practice = Ensure that indwelling urinary catheters are removed promptly when they are no longer indicated.**

- **How? Conduct a daily review of your patients that have indwelling catheters, determine necessity and facilitate a process for removal.**

DESIGN THE TEST

- **Make the test small (i.e. one patient, one physician, one unit of patients).**

- **If you have an EMR find out if you can get a report that will tell you who has catheters. If you count catheter days manually determine if patient information is included.**

- **Review the patient or the group of patients to determine if the catheter is still indicated (or was indicated to begin with).**

- **Collect the data and decide if and how you could systematically improve (by decreasing days).**

WHAT IS EXPECTED OF YOU?

- Sign a letter of commitment and assign a point of contact.
 - CEO and 1 board member signature by October 31st.
- Participate in the LANs (face to face and monthly webinars)
- Conduct rapid cycle improvement between monthly calls and report your progress.
- Submit CAUTI and/or CDI data to NHSN and share it with MPQH.
- Evaluate MPQH performance on a regular basis by completing surveys and evaluations.

WHAT SHOULD YOU EXPECT FROM US?

- Customized support based on your needs.
- Phone and on site consults from IP staff.
- Technical assistance related to NHSN enrollment, data entry and reporting.
- Opportunities to participate as a mentor facility.

HOW DO I GET MY FACILITY SIGNED UP TO PARTICIPATE?

- **Contact Erin Minnerath and Pam Webb.**
 - We are available to present the opportunity onsite.
- **Solicit buy in and support from your Leadership.**
- **Sign the letter of commitment (CEO and 1 member of the Board)**

QUESTIONS?

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