Thank You

- For the hard work you are doing to improve and transform our nation’s healthcare system.
- For your commitment and actions to improve the care of the patients and clients we serve.
- For your leadership and participation with CMS, Mountain Pacific QIN-QIO, the American Hospital Association/HRET HIIN, Premier HIIN, & each other.

Purposes of Session

- Share current & emerging CMS and HHS priorities
- Provide update on strong progress and good work to reduce patient harm and readmissions, both nationally and especially in Montana
- Request your leadership and help in next stages of this work
- Explore strategies and approaches for increasing impact and joy while maintaining resilience in our shared work to provide great care
Current State –
Producer-Centered
Volume Driven
Unsustainable
Fragmented Care
FFS Payment Systems

Future State –
People-Centered
Outcomes Driven
Sustainable
Coordinated Care
New Payment Systems
(and more)
- Value-based purchasing
- ACOs, Shared Savings
- Data Transparency

CMS Strategic Goals
THE CMS STRATEGY WILL BE BUILT ON ONE MAIN GOAL:
PUT PATIENTS FIRST

1. Empower patients and doctors to make decisions about their health care.
2. Usher in a new era of state flexibility and local leadership.
3. Support innovative approaches to improve quality, accessibility, and affordability.
4. Improve the CMS customer experience.
Key Priorities Identified by Health and Human Services Secretary Price

- Opioids
- Behavioral Health
- Obesity
- Reducing Burden

CMS has established large-scale, action-focused networks to support state and local quality improvement and to generate results for patients:

- Partnership for Patients
  - 4,042 Hospitals

- Transforming Clinical Practices Initiative
  - 105,000+ Clinicians

- End Stage Renal Disease Networks
  - 6,000 Dialysis Facilities

- Quality Innovation Networks - Quality Improvement Organizations
  - 250+ Communities
  - 12,000+ Nursing Homes
  - 3,800 Home Health Organizations
  - 300 Hospice
  - 1,700 Pharmacies

- MACRA and Quality Payment Program - Small, Underserved, Rural Support (SURS)
  - Up to 200,000 Clinicians

Our “Way” of Operating to Achieve Results

- Bold, Clear Aims -- Implemented at Scale
- Focus on Results
- Do More of What Works
- Make Best-In-Class Performance, Common Performance
- Tied About the “What” Outcome; Flexible on the “How”
- Foster and Foment Joy in Work
Partnership for Patients Established 2 New Breakthrough Aims for 2015 thru 2019

20% Reduction in All-Cause Patient Harm

12% Reduction in 30-Day Readmissions

16 Hospital Improvement Innovation Networks

- American Hospital Association, Health Research Education Trust (AHA-HRET)
- 34 State Hospital Associations including Montana
- Carolinas Healthcare System
- Dignity Health
- Healthcare Association of NY State
- HealthInsight
- Hospital & Healthsystem Association of Pennsylvania
- HSAG
- Iowa Healthcare Collaborative

- Michigan Health & Hospital Association
- Minnesota Hospital Association
- New Jersey Hospital Association, HRET
- Ohio Children’s Hospital Solutions for Patient Safety
- Ohio Hospital Association
- Premier
- Valant
- Washington State Hospital Association

Partnership for Patients
Number of Participating Hospitals by State
(642 Hospitals Participating as of August 9, 2017)

- 2116 in Arkansas
- 1107 in California
- 837 in Colorado
- 1417 in Florida
- 488 in Georgia
- 757 in Illinois
- 817 in Indiana
- 252 in Iowa
- 1697 in Massachusetts
- 802 in Michigan
- 224 in Minnesota
- 217 in Mississippi
- 384 in Missouri
- 1777 in New York
- 437 in North Carolina
- 132 in North Dakota
- 136 in Oklahoma
- 796 in Oregon
- 543 in Pennsylvania
- 999 in Texas
- 203 in Utah
- 317 in Virginia
- 244 in Washington
- 238 in Wisconsin
- 169 in Wyoming

% of Hospitals Participated for State
- 20% - 39%
- 40% - 49%
- 50% - 59%
- 60% - 69%
- 70% - 79%
- 80% - 89%
- 90% - 99%
- 100%
Results to Date

29,447

Harms Avoided

10,205

Readmissions Avoided

$271M

Costs Avoided

HIIN Data (10/16 – 5/17)

1634 Hospitals

817 Rural

560 CAHs

816 Urban

AHA-HRET Data is showing strong improvement on multiple dimensions of work. National challenges include readmissions, MDRO, Falls.

Note: Sepsis and Worker Safety do not meet data collection thresholds.

43 MT Hospitals Participating in HRET HIIN

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barrett Hospital &amp; HealthCare</td>
<td>Dillon</td>
</tr>
<tr>
<td>Beartooth Billings Clinic</td>
<td>Red Lodge</td>
</tr>
<tr>
<td>Benefis Teton Medical Center</td>
<td>Choteau</td>
</tr>
<tr>
<td>Big Horn County Memorial Hospital</td>
<td>Hardin</td>
</tr>
<tr>
<td>Big Sandy Medical Center</td>
<td>Big Sandy</td>
</tr>
<tr>
<td>Broadwater Health Center</td>
<td>Townsend</td>
</tr>
<tr>
<td>Cabinet Peaks Medical Center</td>
<td>Libby</td>
</tr>
<tr>
<td>Central Montana Medical Center</td>
<td>Lewistown</td>
</tr>
<tr>
<td>Clark Fork Valley Hospital</td>
<td>Plains</td>
</tr>
<tr>
<td>Community Hospital of Anaconda</td>
<td>Anaconda</td>
</tr>
<tr>
<td>Daniels Memorial Healthcare Center</td>
<td>Scobey</td>
</tr>
<tr>
<td>Deer Lodge Medical Center</td>
<td>Deer Lodge</td>
</tr>
<tr>
<td>Fallon Medical Complex</td>
<td>Baker</td>
</tr>
<tr>
<td>Garfield County Health Center</td>
<td>Jordan</td>
</tr>
<tr>
<td>Glendive Medical Center</td>
<td>Glendive</td>
</tr>
<tr>
<td>Granite County Medical Center</td>
<td>Philipsburg</td>
</tr>
<tr>
<td>Great Falls Clinic Hospital</td>
<td>Great Falls</td>
</tr>
<tr>
<td>Holy Rosary Healthcare</td>
<td>Miles City</td>
</tr>
<tr>
<td>Liberty Medical Center</td>
<td>Chester</td>
</tr>
<tr>
<td>Livingston HealthCare</td>
<td>Livingston</td>
</tr>
<tr>
<td>Madison Valley Medical Center</td>
<td>Ennis</td>
</tr>
<tr>
<td>Marcus Daly Memorial Hospital</td>
<td>Hamilton</td>
</tr>
<tr>
<td>Marias Medical Center</td>
<td>Shelby</td>
</tr>
<tr>
<td>McCone County Health Center</td>
<td>Circle</td>
</tr>
<tr>
<td>Mineral Community Hospital</td>
<td>Superior</td>
</tr>
<tr>
<td>Missouri River Medical Center</td>
<td>Fort Benton</td>
</tr>
<tr>
<td>Mountainview Medical Center</td>
<td>White Sulphur Springs</td>
</tr>
<tr>
<td>North Valley Hospital</td>
<td>Whitefish</td>
</tr>
<tr>
<td>Northern Rockies Medical Center</td>
<td>Cut Bank</td>
</tr>
<tr>
<td>Phillips County Hospital</td>
<td>Malta</td>
</tr>
<tr>
<td>Pondera Medical Center</td>
<td>Conrad</td>
</tr>
<tr>
<td>Prairie Community Hospital</td>
<td>Terry</td>
</tr>
<tr>
<td>Providence St. Joseph Medical Center</td>
<td>Polson</td>
</tr>
<tr>
<td>Roosevelt Medical Center</td>
<td>Culbertson</td>
</tr>
<tr>
<td>Rosebud Health Care Center</td>
<td>Forsyth</td>
</tr>
<tr>
<td>Roundup Memorial Healthcare</td>
<td>Roundup</td>
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<tr>
<td>Sheridan Memorial Hospital</td>
<td>Plentywood</td>
</tr>
<tr>
<td>Sidney Health Center</td>
<td>Sidney</td>
</tr>
<tr>
<td>St. Luke Community Healthcare</td>
<td>Ronan</td>
</tr>
<tr>
<td>St. Peter’s Hospital</td>
<td>Helena</td>
</tr>
<tr>
<td>St. Vincent Healthcare</td>
<td>Billings</td>
</tr>
<tr>
<td>Stillwater Billings Clinic</td>
<td>Columbus</td>
</tr>
<tr>
<td>Wheatland Memorial Healthcare</td>
<td>Harlowton</td>
</tr>
</tbody>
</table>
Some High Performing Montana Hospitals

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>Hospital City</th>
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<tbody>
<tr>
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</table>

High Performers (data as of 9/2/2017)

Achieved 20% or greater relative reduction, OR maintaining a zero rate, in 8 measures (all three ADE measures, CAUTI rate, CDI rate, Falls, MRSA, and Pressure Ulcers), AND at least 5 months of HIIN period data (October 2016 – most current).

HRET Montana HIIN Priorities

- High data submission rates and overall improvement
- Regionalized education and outreach
- Targeted coaching calls
- Topic specific priorities: readmissions, sepsis, UP
  Campaign implementation (cross cutting support)

21 HRET HIIN Fellowships in Montana: QI and Patient & Family Engagement

- QI: Foundations for Change Fellowship
  - For new HIIN participants or those new to quality improvement.

- QI: Accelerating Improvement Fellowship
  - For QI-trained HIIN participants or those who have been focused on quality improvement and patient safety for more than five years.

- PFE Fellowship
  - For hospital staff and patient/family advisors seeking to support PFE and guide patient and family advisors on how to support QI and patient safety efforts.

Details for each include:

- Integrated learning across topics
- Delivered throughout the fellowship to drive pace.
- Focus on peer-to-peer learning.
- Projects to generate individual hospital progress toward HIIN project goals.
- Supported by virtual and on-site collaboration.

http://www.hret-hinin.org/fellowships
### HRET Montana – HIIN Progress to Date

**Data submitted as of Sept 1, 2017**

#### Cumulative results through May 2017, based on data submitted as of Sept 1, 2017

<table>
<thead>
<tr>
<th>Harms per 1,000 Discharges</th>
</tr>
</thead>
<tbody>
<tr>
<td>Montana</td>
</tr>
<tr>
<td>Baseline</td>
</tr>
</tbody>
</table>

#### HRET/HIIN Montana Hospitals Meeting 20 Percent Reduction

<table>
<thead>
<tr>
<th>Harm</th>
<th>Prevention</th>
<th>Cost Savings</th>
<th>Year 1 Program Goals (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADE</td>
<td>61</td>
<td>$305,000</td>
<td>88%</td>
</tr>
<tr>
<td>CAUTI</td>
<td>19</td>
<td>$19,000</td>
<td>77%</td>
</tr>
<tr>
<td>CLABSI</td>
<td>14</td>
<td>$238,000</td>
<td>92%</td>
</tr>
<tr>
<td>Falls</td>
<td>20</td>
<td>$259,300</td>
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<td>PUH</td>
<td>2</td>
<td>$34,000</td>
<td>95%</td>
</tr>
<tr>
<td>SSI</td>
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<td>94%</td>
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<tr>
<td>c. Difficile</td>
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<tr>
<td>Readmissions</td>
<td>--</td>
<td>--</td>
<td>40%</td>
</tr>
<tr>
<td><strong>Total to date</strong></td>
<td>166</td>
<td>$1,449,300</td>
<td>--</td>
</tr>
</tbody>
</table>

(1) Cumulative results through May 2017, based on data submitted as of Sept 1, 2017

#### AHA-HRET Data for Montana Results to Date

<table>
<thead>
<tr>
<th>Harm</th>
<th>Harms Prevented</th>
<th>Cost Savings</th>
<th>Percent of hospitals meeting Year 1 Program Goals (2)</th>
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PREMIER HOSPITAL IMPROVEMENT INNOVATION NETWORK

Results to Date

477 Hospitals

55 Critical Access
31 Academic
87 Small Rural
137 Large Urban
25 Indian Health Service (IHS)

6,639 HARM AVOIDED

4,553 READMISSIONS AVOIDED

$91M COSTS AVOIDED*

PREMIER HIIN Data (10/16 – 4/17)

477
55 Critical Access
31 Academic
87 Small Rural
137 Large Urban
25 Indian Health Service (IHS)

Billings Clinic | Community Medical Center | Blackfeet Community Hospital
Crow Medicine | Cheyenne River Hospital | Fort Belknap Hospital

HARM TOPICS + READMISSIONS

PREMIER HIIN PERCENT IMPROVEMENT: BASELINE – Thru Qtr 1, 2017

HARM REDUCTION GOAL

20% - 70%

12% - 30%

Questions for Reflection & Action

› What excites me about these results?
› What insights do I have about what to do more of, better or differently?
› What actions do I plan to take next to improve safety and reduce readmissions?
Purposes of Session

- Share current & emerging CMS and HHS priorities
- Provide update on strong progress and good work to reduce patient harm and readmissions, both nationally and especially in Montana
- Request your leadership and help in next stages of this work
- Explore strategies and approaches for increasing impact and joy while maintaining resilience in our shared work to provide great care

Aims & Results: a choice we make every day

Value

What will the future be?

Today

Time

We have made a Leadership Choice - Breakthrough Aims

“I want to see something much better.”

Value

Practical

Current Drift

Today

Time
"I believe that this nation should commit itself to achieving the goal, before this decade is out, of landing a man on the moon and returning him safely to the earth."

— President John F. Kennedy
Delivered in person before a joint session of Congress
May 25, 1961

First Round of Partnership for Patients Also Focused on 2 Bold Aims

**Goals:**
- **40% Reduction in Preventable Hospital-Acquired Conditions**
  - 1.8 Million fewer injuries; 86,000 lives saved
- **20% Reduction in 30-Day Readmissions**
  - 1.6 Million patients recover without readmission

Purpose

http://partnershipforpatients.cms.gov
National Results on Patient Safety: Substantial Progress Thru 2015

- 125,000 lives saved
- $28B in cost savings
- 3.1M fewer harms

Success in Achieving Bold Aims Has Led to New Bold Aims!

Number of Harms per 1,000 Discharges
Organ Donation Breakthrough Collaborative
Bold Aim Led to Unprecedented, Life-Saving Results

Increasing Organ Donation in USA
Jan 1999 – Apr 2007 (Monthly)

We Can Pursue Bold Aims in Work & Bold Aims in Life!

St Jean Pied de Port in France to Santiago de Compostela in Spain in 34 Days: 799 kilometers or 496.5 miles

Plan-Do-Study-Act in Action on the Camino de Santiago!

St Jean Pied de Port in France to Santiago de Compostela in Spain in 34 Days: 799 kilometers or 496.5 miles

My family discovered and implemented many opportunities for PDSA cycles!

- Blister Prevention
- Blister Treatment
- Hydration
- Backpack Adjusting
- Managing & Minimizing Foot Pain
- Spouse Collaboration
Pause for Reflection

What are your experiences with using Bold Aims to drive results?

What bold aims are you committed to now in your work and/or in your life?

What Are the Sources of Resilience?

- Purpose
- Partners
- Perspective
- Choice
- Embracing Change; Leading Change
- Wholeheartedness

A Wholehearted Commitment to Clear Purpose is a Powerful Source of Resilience

- 125,000 lives saved
- $2B in cost savings
- 3.1M fewer harms
Pause for Reflection

- What are your experiences with these or other methods for cultivating Resilience?
- How do you sustain yourself and others on your team? What’s working?

Leadership Happens Through Speech Acts

- Declarations
- Assertions
- Acknowledgements
- Requests & Offers
- Commitments
- Effective Questions
- Yes … and
Other Speech Acts...

- Reporting
- Explaining
- Ordering
- Assessing
- Idle Chatter

Other Speech Acts...

- Reporting
- Explaining
- Ordering
- Assessing
- Idle Chatter
- Complaints
- Gossip
- Worries & Frets
- Ineffective Questions
- Excuses
- Blame

Final Reflections

- What is your main insight from this afternoon?
- As a leader, what might you do more of, better or differently?