How HHQI Resources Help: Authentic Agency Success Stories

Cindy Sun, MSN, RN, COS-C
Crystal Welch, MSN, RN

Objectives

- Describe how to access Home Health Quality Improvement (HHQI) National Campaign tools and resources
- Identify three (3) ideas for integrating HHQI materials into your practices to improve outcomes and care quality
- Utilize two (2) new educational techniques using different formats
Have you heard of HHQI?

Goal:
To improve the quality of care home health patients receive through a cross-setting approach

- Reduction of avoidable hospitalizations and Improvement of Oral Medications
- Special Project funded by Centers for Medicare & Medicaid Services
- Evidence-based practice
- Free tools, resources & networking (public domain)

HHQI National Campaign
HHQI Phase 3 Impacts

- More than 11,000 unique individuals
  - Represents 5,500 home health agencies
  - Accounts for 79% of all home health episodes of care in 2013
- Multiple network coordinators for every state
- More than 250,000 documented resource downloads
- Webinar broadcasts with almost 15,000 live attendees and thousands of replays online
HHQI Phase 3 Impacts

- Correlation between the intensity of provider participation in the HHQI National Campaign and a reduction in avoidable hospitalizations among home health patients
- Oral medication management improvement with providers participating in HHQI
- Significant associated health care cost savings

HHQI Phase 3 Impacts

- Created an Underserved Population LAN
  - 25 UP Network webinars and teleconferences
  - More than 2,700 Underserved LAN participants
  - More than 7,000 downloads of a multimedia Best Practice Intervention Package (BPIP) for providers who serve underserved and dual-eligible populations
HHQI Phase 4

Your Quality Improvement Priorities

- Rehospitalizations & Emergency Visits
- Medication Management
- Fall Prevention
- Chronic Disease Management
- Wound Care
- Cardiovascular Health
- Other
Are You Using Evidence-Based Practices?

- Evidence-based clinical decision making
- External evidence from research, theories, opinion leaders, expert panels
- Clinical expertise
- Patient preferences and values

Melnyk and Fineout-Overholt, 2011, p. 4

Why Reinvent the Wheel?
Available HHQI BPIPs

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<th>Phase 3 BPIPs</th>
<th>Phase 2 BPIPs</th>
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<tr>
<td>Patient Self-Management*</td>
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<td>Disease Management: Diabetes*</td>
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<td>Disease Management: Heart Failure*</td>
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* Focused BPIP

Welcome to the HHQI National Campaign

Since 2007, the Home Health Quality Improvement (HHQI) National Campaign has been dedicated to improving the quality of care provided to America's home health patients. Whether you are a home health practitioner directly providing patient care, or an allied partner with a stake in improving the quality of care that home health patients receive, we are here to help you with evidence-based tools, timely data reports and a wealth of ongoing educational opportunities. All of our resources are absolutely free and available to everyone. Please explore our site to learn more about this initiative of the Centers for Medicare & Medicaid Services (CMS). Working together, we can make a real difference in patients' health care and ultimately, their quality of life.
Disease Management: Heart Failure (Focused)

Targeted BPIP on Disease Management: Heart Failure explains why heart failure is a national and community concern and provides free resources for clinicians and patients.

Disease Management: Diabetes (Focused)
The Targeted BPIP on Disease Management: Diabetes primarily addresses type 2 diabetes. Latest statistics and information are included, but tools and resources for both clinicians and patients comprise the majority of the package.

Cardiovascular Health BPIP Updates
Since HHQI’s Cardiovascular Health Part 1 and Part 2 BPIPs were published, several new guidelines related to cardiovascular risk assessment and management have been released. Updates to each Cardiovascular Health BPIP have been added to the list of resources on the individual BPIP pages below but can also be found here. Each Update is intended to be used in conjunction with its corresponding Cardiovascular Health BPIP.

Cardiovascular Health Part 2
The Cardiovascular Health Part 2 BPIP focuses on improving cholesterol screenings and actions to reduce cardiovascular risk, as well as tools and resources for clinicians to help patients stop smoking.

Cardiovascular Health Part 1
The Cardiovascular Health Part 1 BPIP focuses on the evidence-based practices for using appropriate aspirin or antiplatelet therapy with patients who need it, as well as assessments and strategies to assist patients with controlling their blood pressure to prevent heart attacks and strokes.

Immunization and Infection Prevention

Samples of BPIP Tools
Samples of BPIP Patient Tools

Bulletin Boards
Webinars

- HHQI National Campaign
- BPIPs
- Designing Quality Improvement (4-part series with IHI)
- Health Coaching
- Million Hearts®
- Cardiovascular Health
- Falls Prevention

Podcasts

- BPIP-related (Immunizations, Cardiovascular Health, etc.)
- Underserved Population
  - Race & Ethnicity
  - Dual-eligible
  - Cross-setting collaboration
  - Disease-specific (Alzheimer’s, hoarding, diabetes, etc.)
  - Caregiving
  - Using OTs to optimize outcomes
  - Small HHA needs
Prioritizing

1. Select an intervention
2. Break it down into manageable pieces
3. PDSA: Plan, Do, Study, Act
4. Spread
5. Reinforce
6. Add other pieces / interventions

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News and Updates
Just Released: Cardiovascular Health Report 1 2013 Update
4/24/2014
There have been a lot of changes regarding hypertension management guidelines recently. HHQI has developed a succinct, easy-to-read overview for busy health care professionals. Read more.

Quick Links
Campaign Resources: Discover our free resources to help improve your patients’
HHQI Data Reports

ACH & Oral Medication Improvement Rates
Immunization Improvement (Influenza & Pneumonia)
12-month rolling reports
Data Source: OASIS
Updated around the 3rd week of the month
Secure access
Free

Other ACH Tables

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### Hospitalizations by Day of the Week

Percentage of Hospital Admissions by Day of Week from 10/23/06 (Excludes planned hospitalizations)

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### Hospitalizations By Day of the Week Total (Excludes planned hospitalizations)

- Sunday
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday

### Reason for Hospitalizations of Total (Excludes planned hospitalizations)

- Acute Mental/Behavioral
- Cardiac, Dysrhythmia
- Dehydration, Malnutrition
- CHF, Pneumonia, ARDS
- GI Issues
- Heart Failure
- Hypo/Hyperglycemic
- Improper Medication Administration
- Injury Caused by Fall
- IV Gastrointestinal Infection/Complication
- Mucosal Infection
- Other Heart Disease
- Other Respiratory Problem
- Other
- Other Unknown
- Other Gastrointestinal Infected
- Other Lower Respiratory
- Other Uncontrolled Pain
- Other Unspecified
- Wound Infection/Deterioration
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Cardiovascular Risk Reports

Home Health Cardiovascular Data Registry (HHCDR)

- Aligns with physician quality measures (PQRS)
- Includes patients with the following:
  - Hypertension
  - Ischemic Vascular Disease
  - Dyslipidemia
  - Tobacco use
Engagement Barriers

Clinicians
- Already super busy
  “How can we do more?”
- Not seeing full picture of QI activity & leadership vision
- QI focus ever changing
- Not enough time for learning
- ??????

 Patients
- Overwhelmed with illness or recent hospitalization
- Health illiteracy, race/culture, economic issues, etc. not addressed
- Information overload
- Lack of confidence or motivation
- Environmental and emotional barriers
- ??????

Overcoming Clinician Engagement Barriers
- Review current process, documentation, & practices to streamline, make more efficient (and tell staff)
- Share leadership vision in all that you do
  - Emphasize patient-centeredness
  - Plan focused QI activities for 6-12 months
- Be effective with your training (both staff & your time)
- Use multimedia materials
- ??????
Overcoming Patient Engagement Barriers

- Assess patient's preferred learning styles
- Ensure privacy when teaching
- Make an emotional connection with patient by empowering them to believe that they are learning
- Create an active and participatory learning environment
- Associate interventions & education with recent exacerbation or hospitalization
- LISTEN!!
  - Find out what the potential barriers are for each patient
- Develop an Action Plan together
  - Give patient options of interventions
  - Let the patient select topic to learn first...
  - Use tools that are health literate
  - Use multimedia materials
  - Evaluate together if it is working
  - Use teach-back technique
- Communicate to all team members

Multimedia

- Overcoming Patient Engagement Barriers
- Multimedia
"By going to the HHQI website and reviewing the most current data available, we are able to utilize the information and best practices published by HHQI. We implement action plans that include the best practices for acute care rehospitalization and oral medication management. We are able to track our progress by monitoring our results on HHQI."

Pamela Gulczynski, RN  
Director of Home Care Services

“The HHQI national campaign has been a valuable resource to us and we appreciate the wealth of information and reports it makes available.”

Merry Beth Rucker  
CEO, VNA of Middlesex-East
"We are thankful for organizations such as HHQI to partner with us in education and provide tools to help us achieve exemplary care."

Ronda Malmberg, BSN, CWS
Administrator, CovenantCare at Home

"At Fauquier Health Home Care Services our clinicians are dedicated to providing the highest quality of care for our patients. This requires them to stay educated and up to date on Best Practice Interventions. The HHQI National Campaign makes this challenge easier by providing tools and BPIPs to help educate staff."

Jeannelle Dawson, RN, COS-C
Quality Coordinator
Additional HHQI Resources

HHQI Phase 4
HHQI Phase 4 Focus

- Cardiovascular Health
- Reducing Hospitalizations
- Chronic Diseases, Falls Prevention & Wound Care
- Reducing Disparities

11 SOW QIN-QIO Map

*Legend: The color legend indicates the different organizations and initiatives involved in the QIN-QIO program.*

Notes: Some states have not yet been determined.
Home Health Now Part of QIN-QIO Core Work

- Home Health is returning to QIO Core Work after 6 year absence
- QINs-QIOs will be working with limited number of HHAs in each state on the following:
  - HHQI evidence-based practices
  - Cardiovascular health
  - Quality improvement
- Contact your QIN-QIO immediately

Connect with HHQI

Facebook [www.facebook.com/MyHHQI](http://www.facebook.com/MyHHQI)
Twitter [www.twitter.com/HHQI](http://www.twitter.com/HHQI)
LinkedIn [http://tinyurl.com/lece9t9](http://tinyurl.com/lece9t9)
MyHHQI Blog [http://hhqi.wordpress.com](http://hhqi.wordpress.com)
Discussion Forum under Network tab on HHQI website
LiveChats under Network tab on HHQI website
How Can HHQI Help?

Email Us:
HHQI@wvmi.org

http://www.youtube.com/watch?v=pZ1zhj9aLLM&feature=youtu.be
Questions?

Contact Information:
Cindy Sun – csun@wvmi.org
Crystal Welch – cwelch@wvmi.org

And of course, we can always be reached at
HHQI@wvmi.org

Thank You!