NYSPFP Introduction and Overview

October 7, 2015

A partnership of the Healthcare Association of New York State and the Greater New York Hospital Association
Today’s Webinar Will Cover

- Overview of CMS Partnership for Patients – HEN 2.0
- NYSPFP Approach
- NYSPFP Measurement and Tracking
- Next Steps
CMS Announces Partnership for Patients – HEN 2.0

- CMS announces continuation of PfP initiative with 17 Hospital Engagement Networks across the country
  - NYSPFP is 1 of 9 state HENs; and 8 national or health system HENs
- Goal is to address inpatient harm across the board including
  - Hospital-acquired conditions from prior initiative
  - Patient and family engagement
  - CMS is focused on innovation; cost savings; attributing outcomes to the PfP effort
  - Several new clinical priorities
Hospitals should know:

- Twelve-month engagement
- All hospitals are welcome to enroll
  - Past NYSPFP participants must re-enroll
  - Hospitals that did not participate, encouraged to join

Enrollment Checklist

- Sign Memorandum of Understanding
- Complete hospital identification and key contact form
- Execute a Business Associate Agreement for HANYS and GNYHA
- Submit full enrollment package to NYSPFP
Three Years of NYSPFP Success

- Three-year joint effort of HANYS and GNYHA working with 169 hospitals resulted in:
  - Reduction of approximately 30,000 injuries or complications
    - 1,832 fewer early elective deliveries
    - 25,351 fewer patients readmitted within 30 days of discharge
    - 1,279 fewer CLABSIs

NYSPFP 40/20 Goal Improvement from Baseline

- CAUTI Population Rate: 28.36% improvement
- CLABSI SIR: 40.51% improvement
- SSI COLO SIR (2010 Baseline): -31.17% improvement
- SSI COLO SIR (2013 Baseline): 15.58% improvement
- SSI HPRO SIR: 19.76% improvement
- SSI CABG SIR: 20.33% improvement
- VAP Rate (2012): 9.51% improvement
- IVAC+ Rate: 49.64% improvement
- ADR Rate: 19.29% improvement
- Pressure Ulcers, Stage 2: 29.74% improvement
- Falls with Moderate Injuries: 16.01% improvement
- Falls with Any Injury: 16.39% improvement
- VTE Rate: -8.06% improvement
- PPR Rate: 16.39% improvement
- All-Cause Readmission Rate: 11.02% improvement
- OB>EED: 89.58% improvement

Legend:
- Rate worsened
- Rate met preventable goal
- Rate improved but < 40/20 goal
- Observed rate met 40/20 goal

(*) Also at CMS benchmark
(**) Preventable goal is CMS’ calculation for the reduction in preventable events
NYSPFP as Key to the Broader Quality Landscape

- Focus is on streamlining the entire delivery system
  - How do hospitals impact the patient experience outside of the hospital
  - HEN 2.0 recognizes that there is still work to be done in the inpatient setting
Areas of Focus

- Culture and Leadership
- Catheter Associated Urinary Tract Infections
- Central Line Associated Blood Stream Infections
- Surgical Site Infections
- Ventilator Associated Events
- Obstetrical Adverse Events
- Adverse Drug Events
- Pressure Ulcers
- Falls
- Venous Thromboembolism
- Readmissions
- Iatrogenic Delirium
- Clostridium difficile
- Severe Sepsis and Septic Shock
- Health Disparities
- Patient and Family Engagement
Additional CMS Goals

Reduce by 40%
- All Hospital-acquired conditions

Reduce by 20%
- Preventable Readmissions

Cost Savings and Quality

Health Disparities Data

Pediatrics
NYSPFP’s Driving Tenets

Building on insight gained from the first three years of NYSPFP

Focus on preventing *harm across the board*

Focus on engaging the *front line* to initiate and drive improvement

Focus on *sustaining reliable best practices*
NYSPFP Patient Safety Hubs

- Obstetrics
- Critical Care
- Medical/Surgical
- Operating Room

- HEN 1.0 initiatives move from being an initiative into unit-based daily practice
- NYSPFP will maintain statewide and regional education for new topics and as needed
- Focused programs in harm across the board
- Provisions for daily patient safety checks between unit leadership and bedside staff
NYSPFP Approach: *Culture and Leadership*

Supporting Hospital Leadership

NYSPFP will keep its focus on supporting leadership engagement in hardwiring performance excellence

Resources include:
- NYSPFP data dashboard
- NYSPFP summary reports
- Engaging leadership with safety rounds
- Clinical leadership engagement (e.g., hospitalists, pharmacists)
- Culture of Safety Survey and strategic organizational planning
NYSPFP will work with clinical service line managers to identify areas of opportunity, set priorities, develop a strategy to spur frontline engagement.

Resources include:
- NYSPFP data portal and dashboard
- NYSPFP PPR reports
- Statewide, regional educational programs and peer forums
- Service line gap analyses and strategic planning
- Dedicated support from NYSPFP project manager and subject matter experts
NYSPFP Approach: *Front Line Staff*

**Engaging the Frontline**

NYSPFP’s core strategy in HEN 2.0 will be to hardwire known best practices by engaging and activating front line staff

**Resources include:**
- NYSPFP just-in-time educational programming
- NYSPFP data portal
- Tools, resources, and knowledge sharing customized for the frontline and for bedside application
- Dedicated NYSPFP project manager support
Connecting the Clinical Dots – Opportunities for Addressing Harm Across the Board

- Ventilator-associated Events – Opioid Management – Delirium
- Emergency Department – CAUTI -- Readmissions
- Operating Room Safety – Implementing the Advanced Surgical Bundle
- Glucose Management – Readmissions -- SSI
NYSPFP Measurement and Tracking
# CMS Data Requirements

**Performance and Improvement**

- One process; one outcome per clinical topic
- NYSPFP must select most measures from a CMS list
- Monthly aggregate data submission
- Identify hospitals that have made significant improvements

**Other Data Requirements**

- Hospital-level process and outcome data will be de-identified and shared with CMS
- Hospital *engagement, improvement, performance* information
- Monthly aggregate cost savings data
Data Submission to NYSPFP

- Most measures will be collected through existing data sources
  - National Database for Nursing Quality Indicators (NDNQI)
    - pressure ulcers; falls
  - National Health Safety Network (NHSN)
    - CAUTI, CLABSI, C. difficile, SSI, VAE
  - SPARCS
    - readmissions, VTE, various AHRQ PSIs
  - DOH/IPRO
    - sepsis
NYSPFP Data Resources for Hospitals

**NYSPFP Data Portal**
- Provides immediate feedback upon data entry
- Ability to update prior data based on best available information
- Compare to real-time NYSPFP average

**Dashboard Reports**
- Run charts to show performance changes over time
- Visual comparison to NYSPFP benchmarks including facility size, academic status

**Potentially Preventable Readmission Reports**
- Provided quarterly

**CMS-developed Hospital Score**
- Provides hospitals with a snapshot of engagement, improvement and performance as compared to NYSPFP and national benchmarks
Next Steps
Next Steps for Hospitals

- Complete and submit the enrollment packet
- Schedule a conference call/meeting as soon as possible with your NYSPFP Project Manager
  - They will be in touch with you upon enrollment.
- Complete the process for granting permission to NYSPFP to access your NDNQI and NHSN data
  - More information forthcoming
- Look out for NYSPFP announcements in your inbox
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NYSPFP Contacts

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