



Advancing Healthcare Quality in Arizona through leadership, education and communication.

AzAHQ Network

Spring 2013

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AzAHQ 2013 Spring Conference **Accelerating the Rate of** **Improvement:**

What We've Learned the Hard Way About Making Improvement Happen Faster

Presented by: Sandra Murray

Friday March 8th, 2013

7:30am Registration

8:00am - 4:00pm Program

Please use our online Registration:

<http://azahq.org/education>

Message from the President

I look forward to 2013 as a year of opportunities to deliver on our mission to serve as a resource to advance healthcare quality within Arizona, through leadership, education and communication. Healthcare is evolving and changing rapidly and our association hopes to broaden its reach to better serve our members. I encourage you to take a fresh look at AzAHQ by attending one of our conferences, contacting one of our board members, or following us on LinkedIn™.

We have a dedicated team of elected quality professionals on the AzAHQ Board of Directors who have experience in all aspects of the healthcare industry. Our primary focus is creating exceptional learning opportunities for healthcare professionals throughout Arizona. Our organization demonstrates their strong commitment to supporting members pursuing a CPHQ designation with our bi-annual CPHQ review course and our annual awarding of a CPHQ Grant. Our three conferences per year provide opportunities for CEUs to maintain CPHQ status.

I personally invite you to become an active and engaged AzAHQ member in 2013. We value professional growth through education, leadership, customer service, teamwork, and integrity. Your insights, expertise and feedback are our most valuable resources. Working together, we can enhance the quality of care throughout Arizona.



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A Case Study in Ventilator-Associated Pneumonia

By Janice Allen, MSN, RN, CIC, CPHQ
Submitted by Scott McRoberts, CPHQ
Phoenix VA Health System

Ventilator-associated pneumonia (VAP) is a health care-associated infection (HAI) that may occur in patients receiving mechanical ventilation for longer than forty-eight (48) hours. At a tertiary care medical center within the Phoenix metropolitan area the VAP rate in the Medical Intensive Care Unit (MICU), in Fiscal Year (FY) 2002, was 17.6 VAPs/1000 vent days compared to the National Nosocomial Infection Surveillance System (NNISS) rate of 7.3 VAPs/1000 vent days. The VAP rate in the Surgical Intensive Care Unit (SICU) was 15.5 VAPs/1000 vent days compared to the NNIS rate of 13.2 VAPs/1000 vent days.

A multi-disciplinary performance improvement team was formed to improve outcomes for patients on mechanical ventilation. In FY 2002, numerous practices were implemented and education provided to healthcare workers and providers however, any decreases in VAP rates could not be sustained. In FY 2005, evidence-based practices recommended by the Institute on Healthcare Improvement (IHI) were implemented using the Plan-Do-Study-Act performance improvement methodology with formal monitoring.

PLAN:

- Review literature for evidence-based practices for VAP prevention
•Identify possible barriers from previous implementation activities
-Fear of change
-Communication breakdown
-Physician and staff "partial buy-in"
-"Just another flavor of the week?"
-Unplanned intubations

DO (Interventions):

- Implement Institute of Healthcare Improvement's (IHI) VAP Prevention Strategies ("Bundle")
-Head of bed elevated
-Peptic ulcer disease (PUD) prophylaxis
-Deep vein thrombosis (DVT) prophylaxis
-Daily sedation vacation
-Daily readiness to wean
-Daily breathing trials
•Oral care every 4 hours
•Implement worksheet to monitor compliance with "bundle"
•Frontline nursing—motivator of change

- Two (2) volunteer champions
•Feedback to unit champions monthly
-Followed up with health-care workers (HCWs) re: non-compliance issues
•Posted monthly results of VAP rates and bundle compliance rates in both units
•Feedback via Special Care Committee, Infection Control Committee, Department of Surgery meeting, Nursing Quality Council, and Clinical Executive Board.

STUDY:

- Reduction of VAP rates in both units sustained over time (24 months)
•Improved consistent/standardized care for the ventilated patient
•Zero tolerance culture
•Accountability
•Significant cost avoidance with reduction of VAPs
•Support from Leadership

ACT:

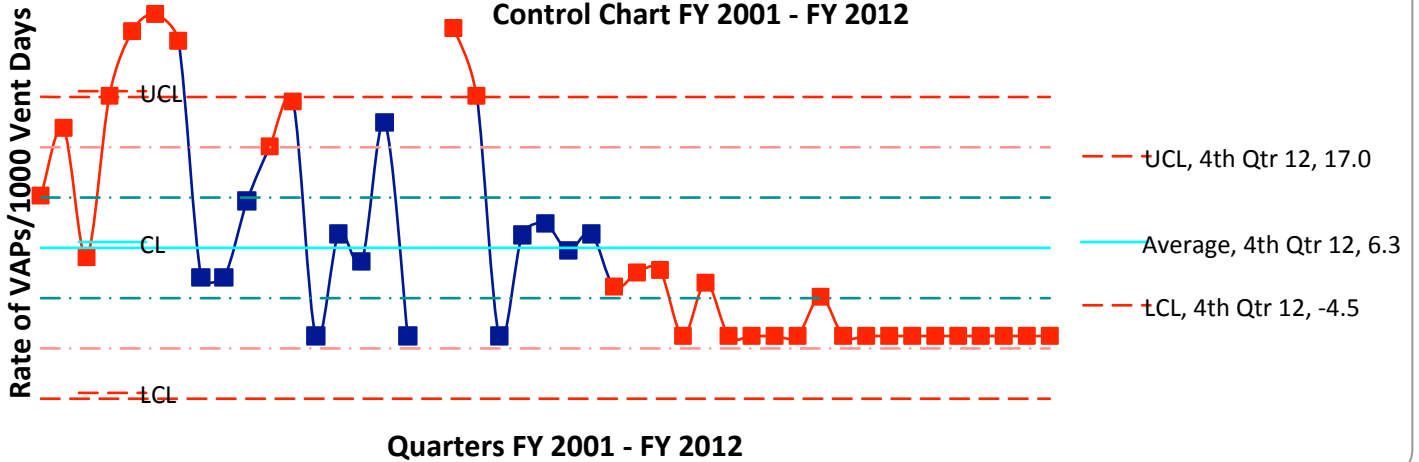
- Use of hi-lo endo-tracheal tubes in patients with comorbidities implemented
•Initiated CHG-impregnated swabs for oral care
•Initiated a total oral care protocol concurrently with the CHG-impregnated swabs
•Ongoing education and 1-to-1 education when "bundle" compliance rates decrease
•Ongoing focus on reducing the variation in the "bundle process"
•Concurrent monitoring for "bundle" compliance continues

OUTCOMES:

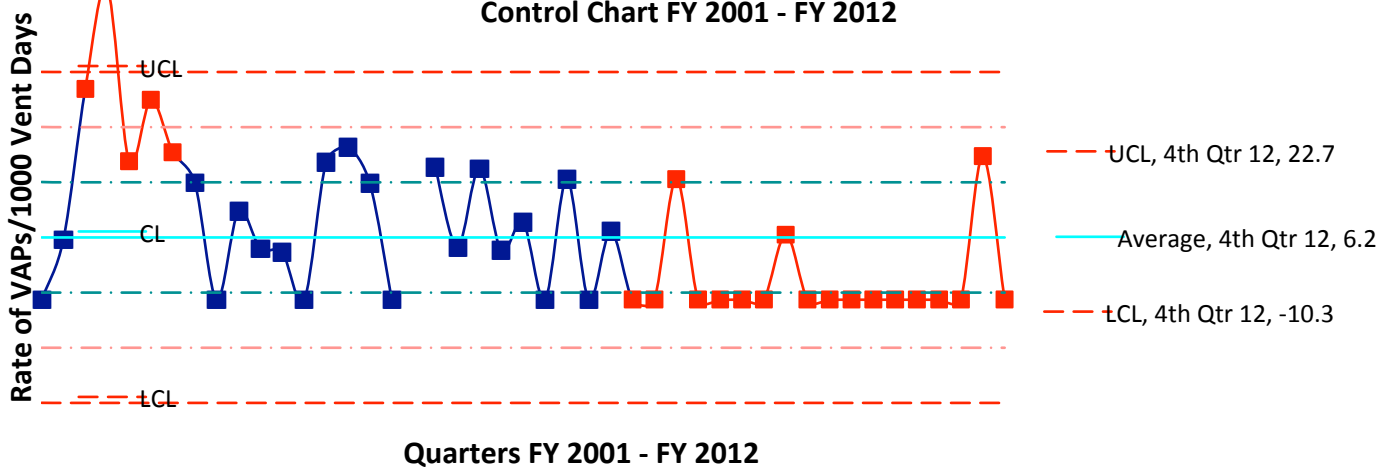
In FY 2011, the VAP rate in both MICU and SICU patients was 0 VAPs/1000 vent days which has been sustained over time. The facility has been without a HAI VAP case for twenty-four (24) months through 3rd Quarter FY 2012. Using FY 2002 as the baseline year, the total estimated cost avoidance from FY 2002 FY 2012 has been \$5,370,297. The prevention team would not have had successes without the support, visibility, and encouragement of the executive leadership team as well as the support, encouragement, visibility, and active participation in the interventions by the supervisors of all disciplines.

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MICU Ventilator-Associated Pneumonia Rates Control Chart FY 2001 - FY 2012



SICU Ventilator-Associated Pneumonia Rates Control Chart FY 2001 - FY 2012



Have a passion for website design? AzAHQ needs you.

AzAHQ would like to revamp and update its presence on the web. This is a great school project for a web design student or for anyone who is knowledgeable about website design and is willing to help. All ideas are welcome. Please contact the Association at website@azahq.org



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C Diff can be an ongoing annoyance or it can become an acute situation. AHRQ has researched this and offers ideas to help reduce the occurrence in hospital settings.



C Difficile Reduction Toolkit from AHRQ

Preventing C. difficile infections is a difficult but critical challenge for hospitals. To help facilities address this need, the Agency for Healthcare Research and Quality (AHRQ) has recently released a new toolkit to implement an antimicrobial stewardship program (ASP) specifically targeting C. difficile. Developed from an AHRQ-funded research project, the "Toolkit for Reduction of *Clostridium difficile* Infections Through Antimicrobial Stewardship" is an online toolkit offering an extensive list of resources developed to address questions hospitals commonly have when considering how to set up an ASP, including

The toolkit also includes real world examples from the project to demonstrate how others have used these resources. Hospitals using this tool successfully improved the appropriate use of at least one of the antibiotics targeted at each facility.

The new AHRQ resource builds on the "Antimicrobial Stewardship Toolkit," which includes best practices from the Greater New York Hospital Association/United Hospital Fund Antimicrobial Stewardship Collaborative. Hospitals can use the AHRQ toolkit to specifically target C. difficile in their facility.

- Is my organization ready?
- Which intervention should we use?
- How do we monitor and measure our effort?
- How do we make it sustainable?

The "Toolkit for Reduction of *Clostridium difficile* Infections Through Antimicrobial Stewardship" is available at www.ahrq.gov/qual/cdifftoolkit/.



Message from the Board

Building for Eternity: Making a Difference in NAHQ

Susan T. Goodwin, MS RN FACHE CPHQ FNAHQ, NAHQ immediate past president



To frame this Message from the Board, I want to share a poem given to me by a mentor, the minister of my church in a small town, many years ago. It was such an inspiration to me back then that I put it on a wallet card and have carried it with me ever since. Over the years, I've thought often about what it means and I would like to share some of those thoughts with you, particularly how the message relates to NAHQ and its members.

*Isn't it strange that princes and kings,
and clowns that caper in sawdust rings,
and common people, like you and me,
are builders for eternity?*

*Each is given a book of rules,
a shapeless mass, a bag of tools.
And each must fashion, ere life is flown,
A stumbling block, or a stepping stone.
- R.L. Sharpe, circa 1809*

Firstly, the poem is about **making a difference**. This poem can be applied in many different aspects of life—your family life, your religious life, your



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community service, or your professional life—but I am going to look at it from the professional perspective.

Secondly, the poem suggests that those who make a difference are **not just the formally designated leaders** represented by the princes and kings in the poem or the **celebrity types** like the clown. Rather, it is *each and every one of us*, in our own way, in whatever role we have been given in life, who have the power to make a difference.

The poem also suggests that we each have certain resources to use in accomplishing this:

A book of rules—What could that be from a professional aspect? Accreditation or regulatory standards, our Code of Ethics or professional practice standards, or the principles of quality improvement? You be the judge.

A bag of tools—What does that bring to mind? Perhaps our knowledge or skills, published resources, a network of colleagues, or our association?

The poem goes on to suggest what must be done:

To fashion something from a "shapeless mass"—Could that be healthcare of the future? Certainly with healthcare reform it feels that things have yet to take shape. How about our profession? Do you think our work will be changing tremendously in the near future and that we need to have a role in shaping it? How about the practices in the organizations where we work? What is to be created? Is the stepping stone analogous to NAHQ's vision of "realizing the promise of healthcare improvement through innovative practices in quality and patient safety"? What are our individual roles in achieving this vision? Is your role facilitating positive change? Is it creating opportunities for others by mentoring and developing new professionals and leaders, either directly or through contributions to HQF to fund grants to help others? Is it identifying and sharing proven professional practices by providing education, publishing, or advocating for issues of importance? Or is it contributing to the profession by giving your voice; through attending conference or the membership meetings; or participating in SIGs, working on a team, or even just taking 15 minutes to do a membership survey?

The poem says we need to do this now while we have an opportunity in our professional life and that we each have only a short time to make a difference! To be most effective, this means working together through our professional association—it's really why we gather as professionals and the reason for our association. We can do so much more together than we could ever do individually.

The poem was inspirational for me because it gave me a different vantage point:

To not be buried in day-to-day details, but also to look up at the big picture.

To evaluate what "tools" I have available and decide what my stepping stone should be...and believe me, it's still a work in progress!

To understand the need for professional community and my obligation to be part of it.

I hope you are inspired by this poem like I was.

Thank you for having provided me with the opportunity to serve as your president-elect, president, immediate past president, and as a member of the NAHQ Board of Directors. I hope we can keep the dialogue going and work together on our stepping stone to our vision of the future of NAHQ!

AzAHQ Member List Serve

Do you receive messages from the Association about upcoming conferences or newsletter releases?
If not, would you want to?

Each individual member must opt-in to receive messages. List Serve benefits include:

Receive notification of upcoming AzAHQ events (conferences, review sessions,...)

Send messages to other members (events your organization is planning, requests for help on projects,..)

AzAHQ newsletter releases/postings

Notification of AzAHQ Board Elections and General Membership Meetings



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Due to recent changes in spam laws and to respect member privacy, the Association is no longer able to synchronize its list serve mailing list with the current active membership. Watch your e-mail for more details about how to manage your membership in AzAHQ's mailing list.



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BECOME AN EXAMINER !

Arizona Quality Alliance (AQA) is actively recruiting volunteers for: Examiners, Mentors/Monitors, and Lead Examiners.

Deadline to apply: May 15, 2013

Volunteer to join the AQA Board of Examiners – A powerful learning experience and a valuable professional development step for any individual.

Benefits of participation include:

“It was a wonderful experience to go through the AQA examiner process. We had excellent team work and coordination. The best part is the site visit, where you actually learn the most about the applicant process. Good team work combined with different industry exposure is very rewarding at the end of the day given the amount of time and effort dedicated to the whole process giving the examiner a sense of accomplishment. I would recommend professionals go through this program as an opportunity to serve the state, represent your organization and further your professional development.”

- Deep Mane

- ✓ Opportunity to learn firsthand innovative approaches utilized by leading Arizona organizations
- ✓ Opportunity to network with colleagues and other professionals throughout Arizona
- ✓ Develop assessment, analytical, interviewing, and writing skills

You receive over 30 hours of training at minimal cost to you or your employer. In addition, you learn how to:

- ✓ Use national Malcolm Baldrige award criteria to understand and evaluate an organization.
- ✓ Understand how any business enterprise functions as a system.
- ✓ Conduct an effective assessment of quality performance.
- ✓ Develop and provide non-prescriptive feedback in a management report.
- ✓ Become part of a cross-functional, multi-level team of individuals working towards a common purpose.
- ✓ Develop a strong understanding of a global set of guidelines (road map) for running an effective organization
- ✓ Evaluate the quality systems of a range of organizations, from small and large manufacturing, healthcare, education and service companies to public sector organizations.

Your contributions to the process include:

- ✓ 60-75 hours of independent case study and application evaluation; and
- ✓ 70-100 hours working with a team to achieve consensus, conduct a site visit, and write a feedback report.
- ✓ Becoming an examiner is a professional development opportunity and a highly regarded addition to your resume

Applications – Please visit the AQA website to download a Board of Examiners Application Packet. http://www.arizona-excellence.com/SQA_Program/Awards.htm .
 For more information, or to apply, please call (480) 874-5815 or email kshepard@arizona-excellence.com .
We look forward to receiving your application!



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See What's New at the NAHQ 2013 Conference



The NAHQ 38th Annual Educational Conference will be here before we know it! The 2013 conference will be held October 6–9 in Louisville, KY, so be sure to mark your calendars and make plans to attend!

This year's conference will offer new and exciting changes to assist in developing and expanding the knowledge of healthcare quality professionals of all levels. The Conference Planning Team has listened to your feedback and is looking to incorporate many of your ideas, such as interactive sessions and sessions shorter in length, to be able to accommodate a greater amount of topics.

Continue to visit NAHQ.org/conference for information about planning your trip in 2013.

NAHQ Offers New "Introduction to Healthcare Quality" Course



This year, NAHQ is excited to announce a new addition to our list of professional advancement offerings: "Introduction to Healthcare Quality." This course will provide healthcare quality professionals who are new to the profession an understanding of quality and patient safety principles and methodologies as well as toolsets to enable them to advance their knowledge and skills in their healthcare setting.

This 1-day course is designed to engage the learner in acquiring knowledge that will transfer to the healthcare quality practice setting. The format and design are intended to invite a high degree of interaction and group activities. Continue to check the [NAHQ Events Calendar](#) for more information.

The very first course will be held Monday, April 8, in Rochester, NY. Registration opens soon. Share the knowledge with new employees and start planning today!

AzAHQ 2013 Board Member Data

POSITION	NAME	Credentials	Employer	Work Title
President 2012-2013	Susie Duffy	R.N., MBA/HCM, CPHQ	Scottsdale Health Care	Consultant/Supervisor, Quality Outcomes
President Elect 2013	Michelle Bagford	RN, MA, CPHQ	Phoenix VA Healthcare System	Chief of Quality Safety & Improvement
Past President 2012-2013	Jeanne Stueland	R.N., BSN, MPA, CPHQ	Scottsdale Health Care	Consultant, Quality Outcomes
Secretary 2013-2014	Alexis Megeath	BSIE, CPHQ, PMP, CSM	Aetna Medicaid	Director of Performance Monitoring & Improvement
Secretary Elect	vacant			



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POSITION	NAME	Credentials	Employer	Work Title
Treasurer 2012-2013	Ellen Kane	RN, MSN, CDE, CPHQ	St Joseph's Hospital and Medical Center	Quality Specialist
Treasurer Elect	vacant			
Communications Team Lead	Holly Grems (temporary)	RN, BS, BSN, MHA, CPHQ	John C Lincoln Health Network	QM Analyst, QA Coordinator
Communications Team Lead Elect	vacant			
Education Team Lead 2013	Andrew Kopolow	MPA, MSW, CPHQ	UnitedHealth Care	Senior Project manager
Education Team Lead Elect 2013	Mark Patton	CPHQ, BS	Sanofi	Quality Initiatives Manager
Membership Team Lead 2013	Jennifer Wolfe-Pearce	RN, BSBA, MBA, PMC, CPHQ	Scottsdale Health Care	Consultant-Quality Outcomes
Member at Large	Marva Greene	RN, MSN, MHA, CPHQ, FACHE	Phoenix VA Health Care System	Deputy Nurse Executive
AzAHQ Association Manager	Holly Grems	RN, BS, BSN, MHA, CPHQ	John C Lincoln Health Network	QM Analyst, QA Coordinator

Visit the AzAHQ website to [contact a board member directly](#).

This is your 2012-2013 Board! You can see that there are three vacant positions. Serving on a Board can develop important relationships with other professionals and build leadership skills. We are looking for energetic Quality Professionals!

If you are interested in becoming involved in AzAHQ at the Board Level, please contact azahqassociationmanager@juno.com. Questions, comments or requests should also go to the same Email address. We'd love to hear from you!

Save the Date for:
AzAHQ 2013 Summer Conference
Friday, July 26, 2013
Watch for details & registration at
www.azahq.org
Click on Education
 OR
 Check your email from AzAHQ



Lava River Cave, AZ

Come see this lava tube cave 14 miles W of Flagstaff