The New World of the QIN-QIOs and the Hospital Innovation Improvement Networks (HIINs)

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Objectives

Identify opportunities to partner with QIN-QIO to support your organizations quality improvement efforts

Understand how your facility can participate in the new, outpatient antibiotic stewardship collaborative

Understand the transition of the leadership of the HAI collaborative to the HIINs
Partnership for Patients

• CMS Quality Improvement Organization (QIO) will incorporate key component of the Partnership for Patients through modification to work being done by QIN-QIO and the HIINs.

• The goal is to sustain and expand national progress toward better care, smarter healthcare spending and healthier people.
Notching Up
Patient Safety Efforts

- Patient safety is a core focus of both the QIO Program and the Partnership for Patients.
- QIN-QIOs have a track record of proven effectiveness in improving care processes and outcomes.
- HENs have demonstrated the capacity to support the majority of the nation’s hospitals in multi-year programs to decrease patient harm.
Hospital Engagement Network (HEN) will become the Hospital Innovation Improvement Network (HIIN)

• Support current work of QIN-QIOs to reduce healthcare-acquired infections and decrease avoidable hospital readmissions for patients with Medicare
QIN-QIO & Hospital Progress for *C. Difficile*

### C. Difficile

<table>
<thead>
<tr>
<th>State</th>
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<th>Expected Number of Healthcare Facility-Onset LabID Events</th>
<th>SIR</th>
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2014 National SIR: 0.924

Data Time Period: 7/1/15 - 6/30/16
CDI Progress

National SIR 2014: 0.924
# QIN-QIO & Hospital Progress for CLABSI

**Data Time Period: 7/1/15 - 6/30/16**

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2014 National SIR: 0.495
CLABSI Progress

National SIR 2014: 0.495
# QIN-QIO & Hospital Progress for CAUTI

Data Time Period: 7/1/15 - 6/30/16

## CAUTI

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2014 National SIR: 1.000
CAUTI Progress

RI

National SIR 2014: 1.00

VT
HIIN Areas of Focus

1. Adverse Drug Events
2. Central-Line Associated Blood Stream Infections
3. Catheter-Associated Urinary Tract Infections
4. *Clostridium difficile*, including antibiotic stewardship
5. Injury from falls and immobility
6. Pressure Ulcers
7. Sepsis and Septic Shock
8. Surgical Site Infections
9. Venous Thromboembolism
10. Ventilator-Associated Events
11. Readmissions
QIN-QIO Changes

- QIN QIO will continue offering hospital support on inpatient and outpatient quality reporting, value based purchasing and care transitions.
- QIN QIO is expanding work to include outpatient antibiotic stewardship initiatives and adverse drug event intervention-specific projects.
Examples of QIN-QIO & HIIN Alignment

- QINs helping nursing homes reduce catheter-associated urinary tract infections will help reduce hospital admissions/readmissions and lower sepsis rates.

- HIIN efforts to reduce adverse drug events in the hospital will benefit from the QINs’ interventions with community pharmacists and physicians to improve safety for people who take high-risk medications.
Antibiotic Stewardship

- Antibiotics most commonly prescribed class of medication
- In 2015, the National Action Plan for Combating Antibiotic-Resistant Bacteria (CARB) set a goal of reducing inappropriate outpatient antibiotic use by at least half by 2020.
- Overuse and misuse introduces greater risk of developing resistance and compromises effectiveness

At least 30% of outpatient antibiotics prescribed unnecessarily

http://www.cdc.gov/media/releases/2016/p0503-unnecessary-prescriptions.html
Antibiotic Stewardship

The Centers for Disease Control (CDC) will release the Core Elements of Antibiotic Stewardship for Outpatient Settings in November 2016.

Using multidisciplinary teams, antibiotic stewardship programs allow facilities to

• monitor
• reduce
• and prevent misuse/overuse of antibiotics

QIN QIO will work with outpatient settings to introduce and support the implementation of the Core Elements
QIN-QIO Support

• Outpatient settings include but are not limited to
  • Emergency departments
  • Walk-in clinics
  • Federally qualified health centers
  • Physician offices

• Assistance includes free educational offerings, onsite support and guidance with implementation of core elements and ad hoc quality improvement consultations.

• There is no fee, our organization receives funding from CMS to assist the provider community with quality improvement initiatives.
## For More Information

<table>
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<tr>
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<tbody>
<tr>
<td>Connecticut</td>
<td>Carol Dietz, <a href="mailto:cdietz@qualidigm.org">cdietz@qualidigm.org</a></td>
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<td>Maine</td>
<td>Amanda Gagnon, <a href="mailto:agagnon@healthcentricadvisors.org">agagnon@healthcentricadvisors.org</a></td>
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<td>Massachusetts</td>
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<td>New Hampshire</td>
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<td>Rhode Island</td>
<td>Maureen Marsella, <a href="mailto:mmarsella@healthcentricadvisors.org">mmarsella@healthcentricadvisors.org</a></td>
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<tr>
<td>Vermont</td>
<td>Regie Cooper, <a href="mailto:rcooper@qualidigm.org">rcooper@qualidigm.org</a></td>
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Resources

New England QIN-QIO Website:
www.healthcarefornewengland.org
Visit our website for up-to-date resources for all care settings including all previously recorded webinars and learning events.

National Action Plan:
https://www.whitehouse.gov/sites/default/files/docs/national_action_plan_for_combating_antibiotic-resistant_bacteria.pdf

Partnership for Patients Website:
https://partnershipforpatients.cms.gov/

CMS Blog Introducing HIINs:
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Maine Program Director
dhersey@healthcentricadvisors.org