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 **GET WITH THE
GUIDELINES.**
HEART FAILURE



Indiana Critical Access Hospital Quality Improvement Initiative

Greg Poe, MHA, CPHQ

Director, Quality & Systems Improvement

Indiana

American Heart Association

6100 W. 96th Street

Indianapolis, IN 46278

(317) 873-3640

gregory.poe@heart.org

Disclosures

Financial Disclosure:

Nothing to Disclose

Unlabeled / Unapproved Uses Disclosure:

Nothing to Disclose

Great Working Partnerships



Indiana Rural Health Association



Indiana State Department of Health

Indiana State Dept. of Health/
State Office of Rural Health



Health Care Excel
(Indiana Medicare Quality Improvement Organization)



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American Heart Association

MUTUAL GOALS

Assist Rural and Critical Access Hospitals



IRHA



Indiana State
Department of Health

ISDH/InSORH



HCE

Indiana
Critical Access
Hospitals (CAH)



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AHA



The Needs of Indiana CAHs

- To demonstrate quality care in a host of areas
- To submit quality data to governmental, regulatory, and payer entities
- To comply with CAH status requirements
- To control costs
- To provide the best quality care possible to the people of rural Indiana

Initiative Outline



Positioned best to know the needs of member hospitals and to identify which facilities would be most successful with a pilot project



Positioned best to know which sources of federal funding would be best to pursue to support the large-scale implementation of the initiative



Positioned best to facilitate process improvement, sharing best practices, and application of evidence-based practices



Positioned best to deliver the products, support, expertise, and consulting services required for successful implementation of the initiative

September 1, 2005

- Meeting of all stakeholders takes place (IRHA, ISDH/InSORH, HCE, and AHA)
- All agreed on the pilot initiative's concepts and high level goals and objectives
- All agreed that the IRHA would be the best entity to distribute grant dollars to CAHs and monitor deliverables
- All agreed to submit a proposal for \$25,000 to assist 10 hospitals

The GWTG-HF Initiative took shape.

All Agreed: GWTG-HF Pilot Program Overall Goal

Improve Patient Outcomes for Heart Failure Patients in Indiana

Funding Source Approval



- ISDH/InSORH
 - September 2005 through December 2005
 - Small Hospital Improvement Grant—\$22,000 (\$2,200 each CAH)
 - January through August 2006
 - Flex Funding—\$12,490 (Program Cost)
 - May through August 2006
 - Flex Continuance—\$40,770 (additional \$2500 to each CAH)
 - December 2006 through August 2007
 - Flex Funding—\$50,000 (\$9000 to pilot; \$10,000 to Group 2)

Selection Process

- Readiness application/questionnaire
- Stakeholder meetings
- Selection—order of receipt
- Memorandum of Understanding (MOU)

Memorandum of Understanding

- Commitment with IRHA in collaboration with AHA and HCE
 - Concurrent reviews
 - Identify at least one physician champion
 - Committed data collection and/or entry person
 - Designated back-up educated and available
 - Assurance of sustained commitment

Development Process

- Signed Patient Management Tool (PMT) for GWTG-HF with Outcomes, Inc.
 - One-year lease of PMT
 - Technical support
- WebEx education
- Forms and tools
- Tracking

Implementation Timeline

- Identify teams and physician champion
- Team meetings
- Set up database pilot group with outcome
- Baseline data—December 31, 2005
- Start date—January 1, 2006
- Develop systems internally

Development

- Gantt charts
- Reference and tracking tools
- Physician order sets
- Critical pathways
 - Evidence-based practice guidelines
- Patient and staff educational tools
- Training
- Communication

Communication

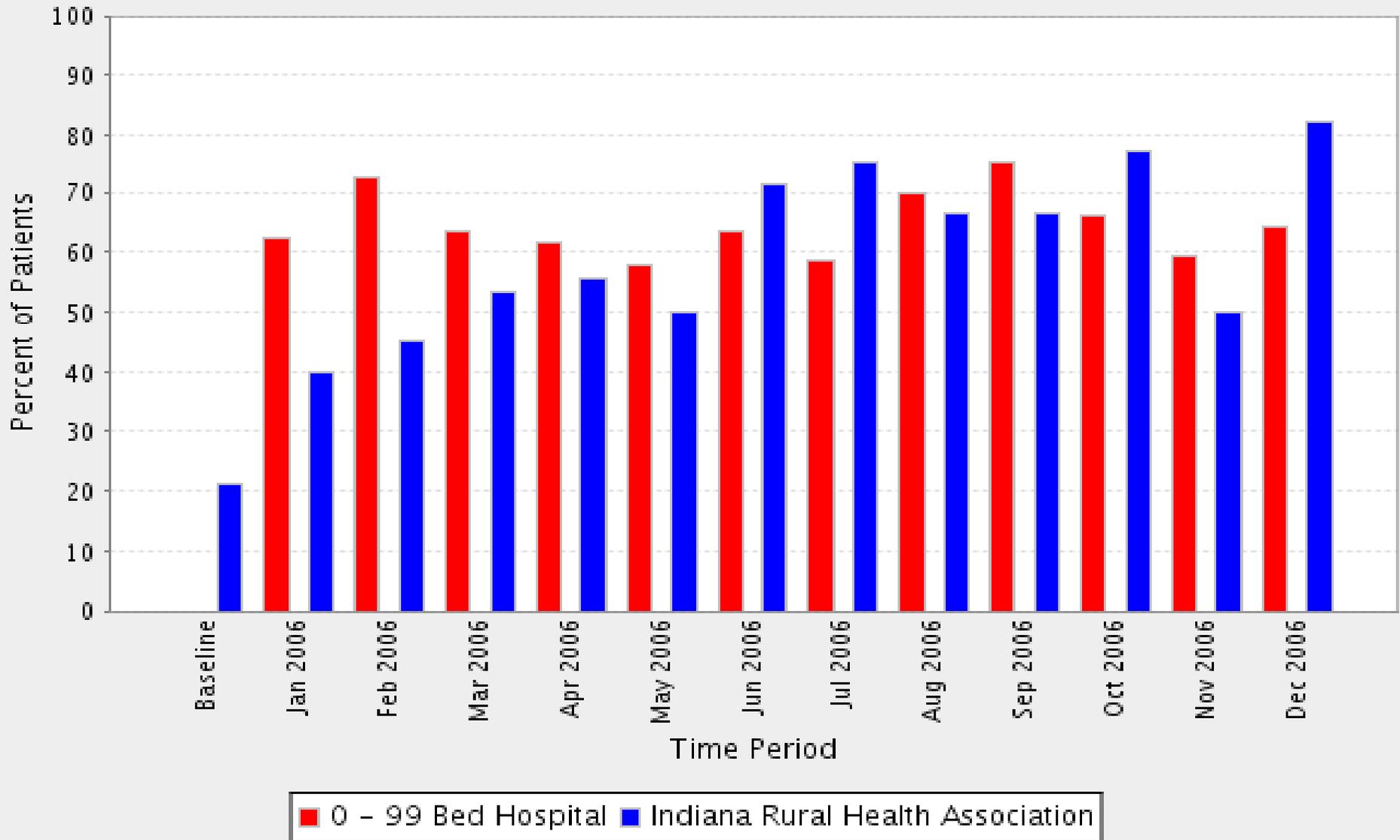
- Conference calls
 - Stakeholders
 - Pilot participants
- Group face-to-face meetings
- Remedial calls
- On-site visits
 - Training - Support
- IRHA Web site
- E-mail
- *CAHoots* newsletter
- List discussion group



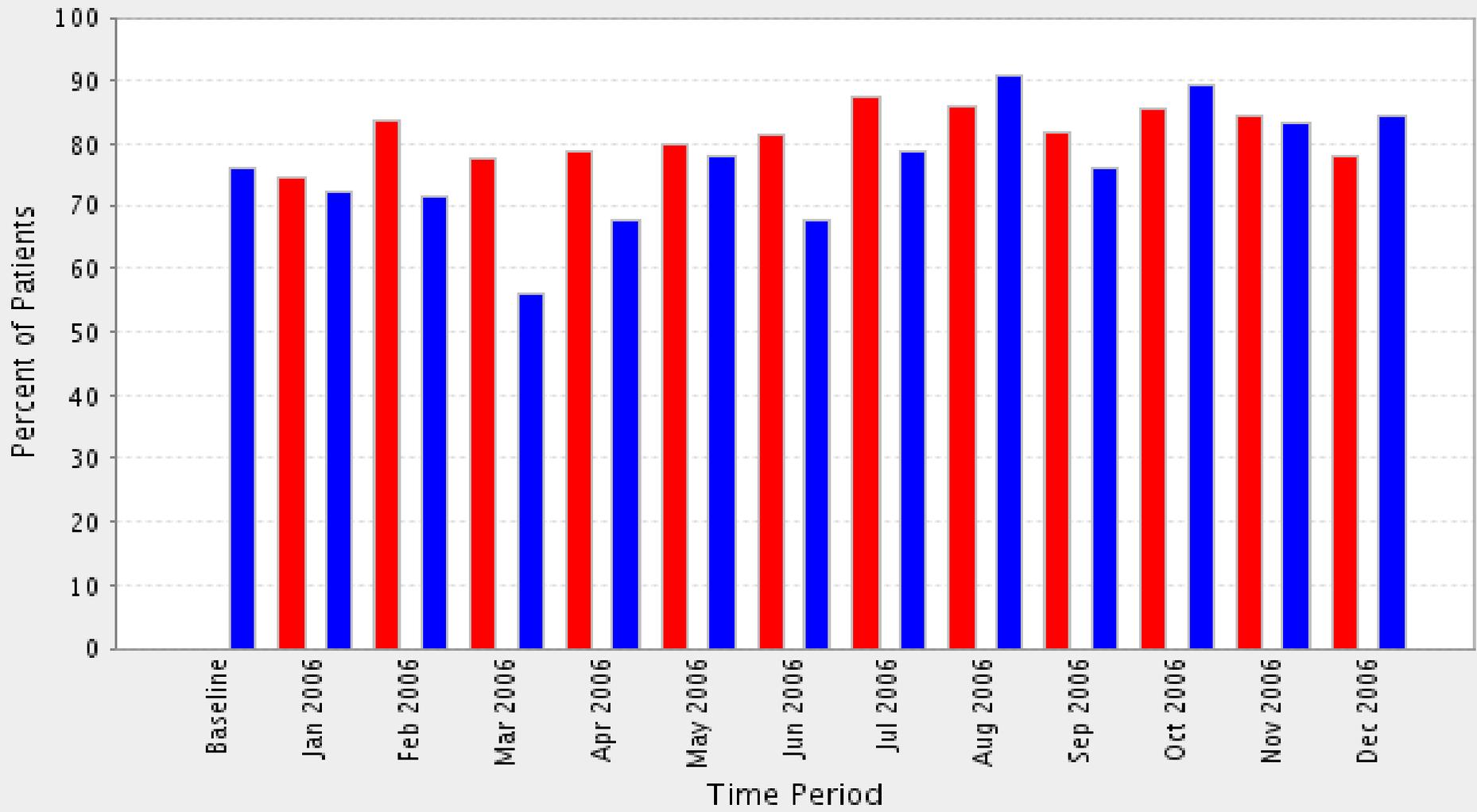
Monthly Communication

- Monthly progress reports
 - Monitor progress
 - Maintain momentum
 - Evaluate
- Six- and twelve-month surveys
- Evaluate test of change

HF-1: Discharge instructions*

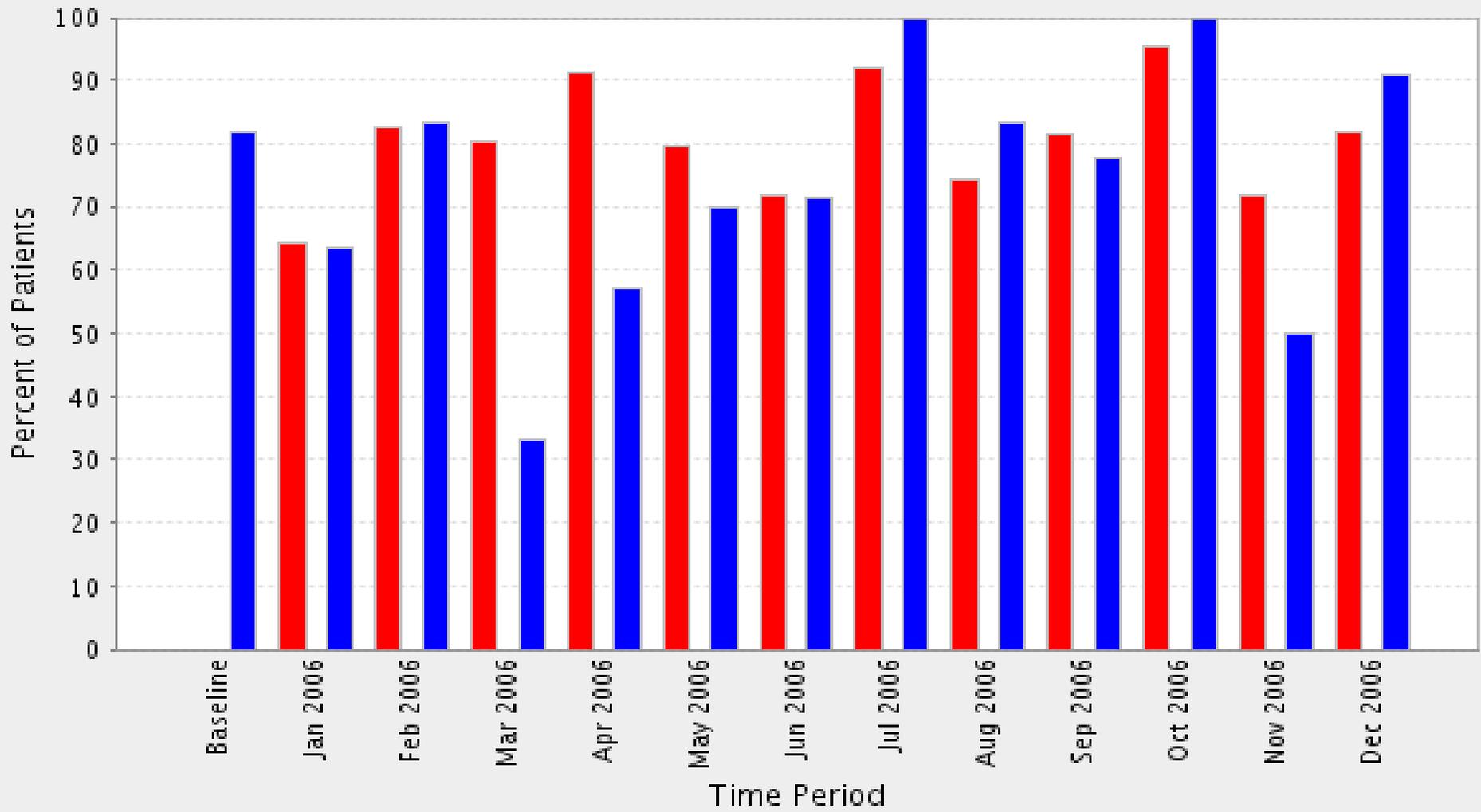


HF-2: Evaluation of LVS Function*



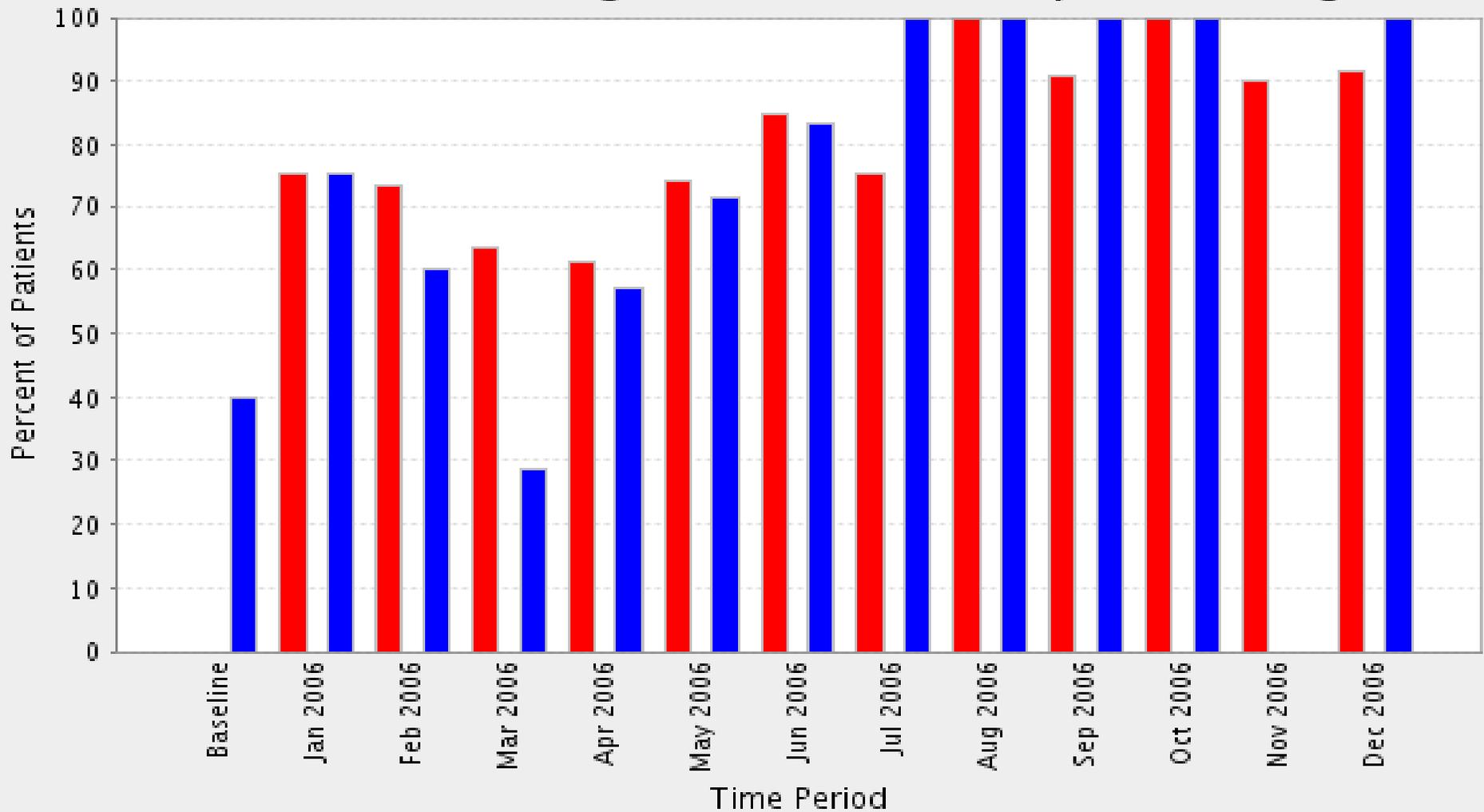
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HF-3: ACEI or ARB for LVSD*



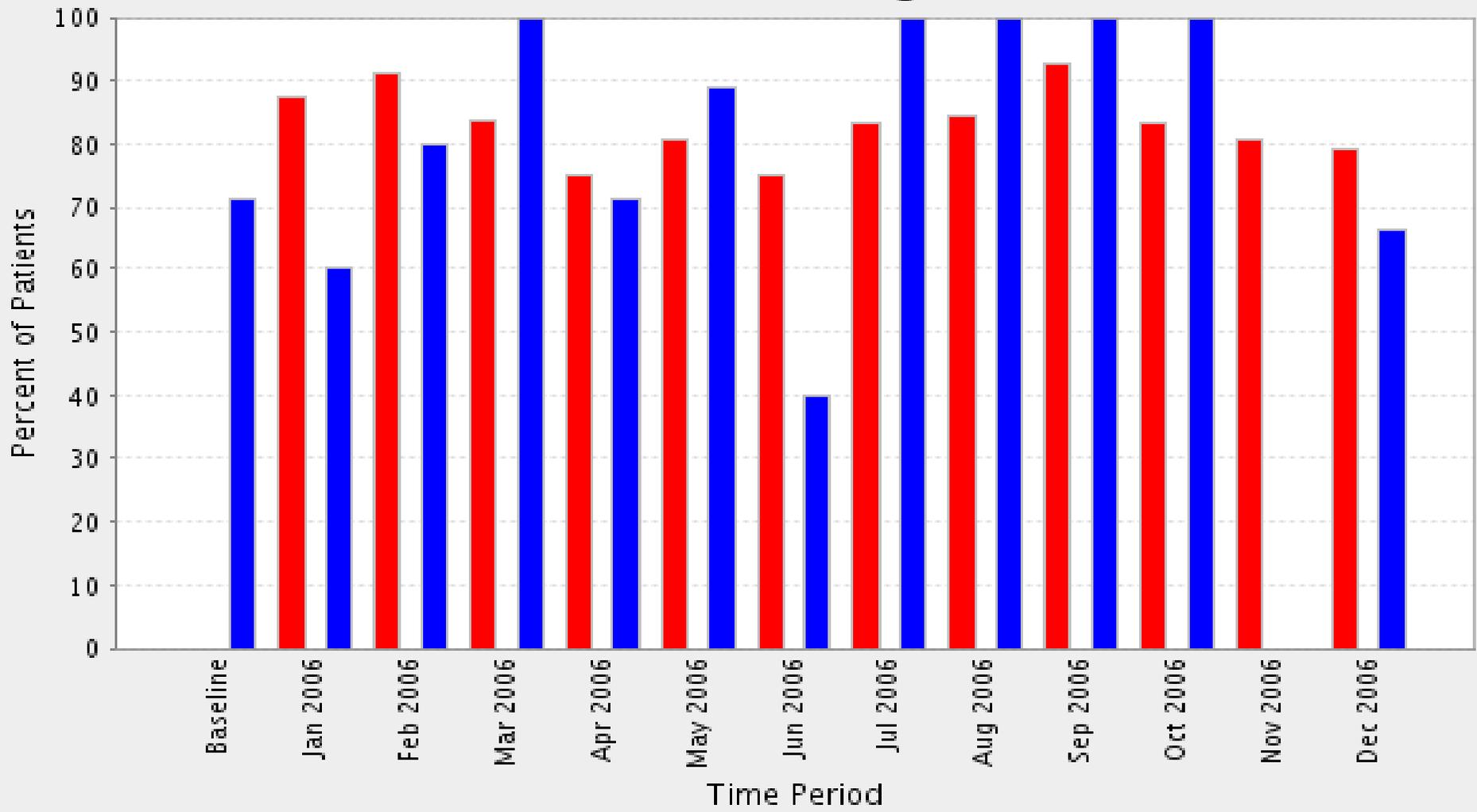
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HF-4: Adult Smoking Cessation Advice/Counseling



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Beta Blocker Usage^{3*}

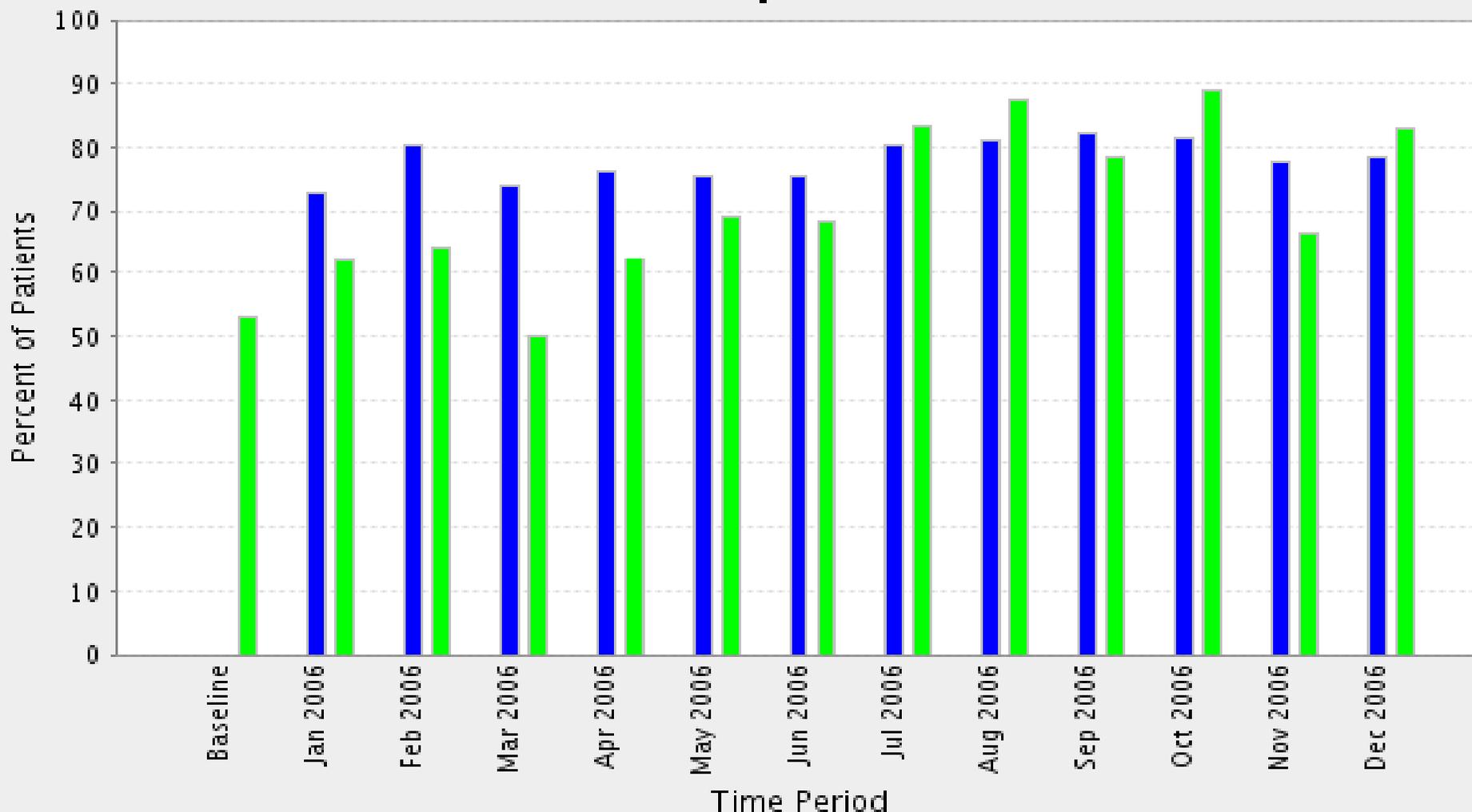


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HF Composite Measure: The composite quality of care measure indicates how well your hospital does to provide appropriate, evidence-based interventions for each patient.



HF Composite



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HF Defect-Free Measure: The Defect-free measure gauges how well your hospital did in providing all the appropriate interventions to every patient.



HF Defect-Free

