The Kansas Healthcare Collaborative (KHC), joined by founding organizations the Kansas Hospital Association (KHA) and the Kansas Medical Society (KMS), held their second annual Summit on Quality on October 22, 2010 in Wichita. Over 200 hospital representatives and providers from across Kansas attended the educational event focused on enhancing quality and patient safety at the point of care.

Summit attendees were inspired and motivated by three keynote speakers. Dr. Tom Evans from the Iowa Healthcare Collaborative (IHC) kicked off the event with a “Health Care Call to Action.” He applauded the outstanding work of Kansas hospitals in their health care worker influenza immunization campaigns and shared the results of a recent survey conducted by KHC showing that hospitals have increased their health care worker influenza immunization rates to 77 percent; a 13 percent increase over last year. This is well above the national average and an achievement to be celebrated. Dr. Evans encouraged hospitals to remain steadfast in their efforts to insure that 100 percent of health care workers including medical staff are immunized against influenza by 2014.

Over lunch, participants heard from Dr. Jay Kaplan, an Emergency Physician and Medical Director of the Studer Group. Dr. Kaplan’s presentation, “Practicing Excellence” generated rave reviews from the audience. Attendees described Dr. Kaplan as, “very inspiring and motivational” with “….great thoughts for the bedside practitioner.”

Doctor Brian Wong, a family physician and CEO of the Bedside Project closed the day with “Collaboration Begins with Role Clarity.” Dr. Wong shared with the audience relational answers to operational problems and the universal attributes of a trusted colleague. Summit attendees described Dr. Wong as “phenomenal” and “easy to listen to and entertaining.”

Attendees had the option to choose from eight breakout sessions throughout the day. The sessions featured presentations from hospital representatives and physicians from Kansas, where quality improvement and patient safety efforts are executed every day. Breakout sessions focused on leadership development, engaging bedside providers and improving clinical quality through transforming organizational culture. For those who were unable to attend the Summit, the keynote and breakout session presentations are available at www.khconline.org.

Please make plans now to join us for our Third Annual Summit on Quality at the Sheraton Overland Park on October 21, 2011. We are pleased to announce that Brent James, MD from Intermountain Healthcare based in Salt Lake City, Utah will be our featured keynote presenter. He is the Chief Quality Officer and Executive Director for the Institute for Health Care Delivery Research at Intermountain Healthcare. Dr. James is known internationally for his work in clinical quality improvement, patient safety and the infrastructure that underlies improvement efforts, such as culture change, data systems, payment methods and management roles.

The Kansas Healthcare Collaborative (KHC), in partnership with the Kansas Medical Society (KMS) and the Kansas Hospital Association (KHA), is pleased to announce the opportunity for Kansas hospitals to participate in a groundbreaking national patient safety program to reduce central line associated blood stream infections (CLABSI) in hospital units using the Comprehensive Unit-based
Safety Program (CUSP). CUSP is transforming care and patient safety in hospital units by improving patient safety culture and practices.

According to the Centers for Disease Control (CDC), approximately 250,000 central line associated blood stream infections occur in the United States each year. An estimated 30,000-62,000 patients die as a result of these infections, and the cost to the health care system is about $25,000 per episode. Demonstrated by the Michigan Keystone ICU Project nearly 6 years ago, these infections are largely preventable. Over 100 Michigan ICUs participated in the project and the results demonstrated a decrease in the median infection rate from 2.7 per 1000 catheter days at baseline to zero at three months after implementation. The benefit from the initiative was sustained resulting in a 66% reduction in CLABSI at the end of the two-year study period. Participating ICUs continue to sustain their improvements, saving thousands of lives and millions of dollars each year.

On the CUSP: STOP BSI is a two-year initiative of the Health Research and Educational Trust (HRET) of the American Hospital Association (AHA), in partnership with the John Hopkins University Quality and Safety Research Group and the Michigan Health and Hospital Association’s Keystone Center for Patient Safety and Quality (Keystone Center). The project is funded by the Agency for Healthcare Research and Quality (AHRQ), part of the U.S. Department of Health and Human Services (HHS).

Kansas On the CUSP: STOP BSI project goals are to eliminate, or at least reduce, CLABSI rates to no more than one infection per 1000 catheter days at the end of two years, and to improve safety culture on hospital units. There is no charge for hospital teams to participate in the two-year On the CUSP: STOP BSI program. Each participating hospital will learn how to apply the CUSP program and CLABSI reduction tools, receive tools for measuring CLABSI and safety culture in units, receive ongoing support through monthly calls, have access to expert faculty for conference calls and face-to-face meetings and receive a detailed CUSP operation manual.

The Kansas Healthcare Collaborative will facilitate the implementation of this initiative in Kansas. For more information visit the KHC website at www.khconline.org.

In addition to the CLABSI project, KHC plans to offer resources to assist hospitals and providers as they address central line associated urinary tract infections (CAUTIs). Additional information regarding this effort will be available at the end of December.

Immunization of Health Care Worker project

In a 2010 survey of Kansas hospitals conducted by the Kansas Healthcare Collaborative, results indicate that 77% of health care workers received the seasonal influenza vaccine for the 2009-2010 flu season; a 13% increase over last year’s survey results of 64% for the 2008-2009 flu season.

Studies show influenza can cause up to 48,000 deaths in the United States each year and the CDC for many years has recommended an annual influenza immunization for health care workers, yet the national average hovers around 40%.

While the Kansas immunization rate for health care workers is above the national average, there is room for improvement. KHC has established a statewide goal to increase hospital health care workers’ seasonal influenza immunization rate to 100% by 2014.

Last summer, KHC launched the Immunization of Hospital Health Care Workers Project and Toolkit. This four-year campaign provides hospitals with information and resources to support their efforts to implement evidence-based practices to improve influenza immunization of health care workers. KHC applauds the existing efforts of Kansas hospitals to increase immunization against seasonal influenza and encourages them to continue the progress by taking advantage of resources and local
support available in the toolkit to complement their current immunization campaigns. For more information about KHC and the Immunization Project and Toolkit, please visit the KHC Web site at www.khconline.org.

Website
In July, the KHC website was launched at www.khconline.org. Information about our organization and programming is available in a user-friendly format. With the addition of our website, KHC staff email addresses have also changed to the following:

Tonya Crawford: tcrwford@khconline.org
Olga Gay: ogay@khconline.org
Kendra Tinsley: ktinsley@khconline.org

Please feel free to contact me with questions or for more information at 785-235-0763. We appreciate the opportunity to provide this update.

Kendra Tinsley