



Resources for better healthcare



Information for Nebraska Healthcare Providers | October 2011

# the Resource

## Breast Cancer Awareness Month



According to the American Cancer Society, an estimated 192,370 new cases of invasive breast cancer are expected to be diagnosed among women in the United States this year. Breast cancer is the second leading cause of cancer death in women (after lung cancer). Today, there are about 2.5 million breast cancer survivors living in the United States. With breast cancer, education is empowerment. Visit the website for more information - [www.nbcam.org](http://www.nbcam.org)

## Health Literacy Month



Health literacy is "an individual's ability to read, understand and use healthcare information to make decisions and follow instructions for treatment."

October is Health Literacy Month, a time to promote the importance of understandable health information. The Health Literacy website has a multitude of resources and tools to help us bridge the communication gap and raise awareness of the significant effects of low health literacy - [www.healthliteracymonth.org](http://www.healthliteracymonth.org)

## A Story of Patient Engagement

Greg Schieke, Senior Vice President

As healthcare providers are increasingly subject to monetary rewards or losses tied to quality, patient engagement is becoming more critical. Whether it's accountable care organizations, patient-centered medical homes or resident-centered care, patient engagement is a necessary component in positioning yourself for success in the evolving healthcare environment. But how do we more actively engage with those we care for? Some believe that using technology, such as social media, apps and patient portals presents the path to higher patient engagement. Others believe that it's asking for input, through surveys and focus groups related to efforts to boost HCAHPS and similar satisfaction scores. If a customer is satisfied, they must be engaged, right?

Both are wrong. They're helpful strategies and tactics, but they miss the mark.

Over the past five months, I've been more personally engaged with the healthcare field than I ever would have imagined. But life and illness happens according to a plan out of our own control. In

May, my wife was diagnosed with both invasive ductal carcinoma and lobular carcinoma, sentinel lymph node positive. Fortunately, the prognosis is good and after three surgeries and 20 weeks of chemotherapy, she's doing well and happy to be ending adjuvant therapy.

We have learned a great deal and have many stories to tell. However, the overarching theme in this short journey is one of true patient engagement. I didn't see it at the time, but upon reflection, it is quite clear how the doctors, nurses and staff made sure we were equal partners in the decisions and in the actual care that was provided.

A diagnosis of cancer, as you would expect, changes how you view the world around you. You are filled with questions, worry, anger and other ingredients mixed together in a rapidly boiling stew of emotions. You look for answers. You look for clarity. You look for hope. And, when you are provided with what seems to be a definitive path to follow, a set of answers, it is human nature to accept that course and charge ahead.

## A Story of Patient Engagement ...continued

Our doctors and nurses were better than that. They didn't give us the answers. Instead, they gave us the information needed to make the best choices... for us, not them. We talked about evidence-based medicine, recent studies, odds/ratios, side effects and lifestyle choices. These conversations literally took hours and hours, not minutes. We were treated as equal partners throughout and we never experienced that queasy feeling of losing control.

Throughout treatment, everything was not perfect, nor did we expect it would be. It's tough to reconcile medications when we only know the common trade name, while the EHR only offers a drop-down menu with the generic name. We learned that certain nurses are better multi-taskers than others; we needed to gently remind a few to check their protocols. The need for engineered systems and required checklists is still very much intact. However, in each instance, our input was welcomed and appreciated.

Would we have been more engaged if technology allowed us greater access to information,

*A diagnosis of cancer, as you would expect, changes how you view the world around you.*

such as a portal to our EHR data or a website to provide us customized information? Really, no...the underlying concept is the provision of information to the patient, which we never lacked. The technology is really just a means of delivery. A portal to an EHR is useless if you don't know what the information represents and how it relates to your care. Also, a survey after the provision of care didn't make us feel more engaged as we already had the opportunity to provide real-time input at the point of care. A survey seemed redundant.

I do wonder if our experience would have been the same if we were 80 years of age, high-school dropouts or uninsured. I would like to think so, but I'm also a realist. Full disclaimer – my place of employment was never brought up and I believe most caregivers, if not all, just knew me as 'Greg', the husband. However, upon diagnosis, we did

seek out healthcare providers and professionals known for both their clinical expertise and ability to communicate and relate to patients.

Patient engagement, in my experience, is actually quite simple. It's about the decision-making process and having a say in what happens. It is being respected as a patient and family member. It is also an understanding that healthcare exists not as an institution built to employ smart people, but to provide individualized care for those who need it. It is also patients accepting the responsibility to participate in the care of their own health. It's been said that the most underutilized resource in healthcare is the patient and I believe that to be true. Now, our job at CIMRO of Nebraska is to help all Nebraskans, providers and patients alike, to become more actively engaged in the provision and receipt of healthcare. This is a theme that will be evident in our upcoming work. We look forward to future conversations on this issue, particularly at the Quality Forum in May. Hope to see you there.



CIMRO of Nebraska has been privileged to serve as Nebraska's Medicare Quality Improvement Organization (QIO) since 2003. Implementation of the new Medicare QIO contract began on August 1, 2011. The contract is administered by the Centers for Medicare & Medicaid Services (CMS), which has set bold and strategic aims.

The goals of the QIO program are aligned with the HHS National Quality Strategy, which includes:

1. better healthcare
2. better health status for people and communities, and
3. affordable care; lowering costs by improvement

Specifically, our work will focus on the following four aims:

**Beneficiary and Family Centered Care.** Ensuring patients and family members are at the center of their care is important. This aim includes review of quality of care complaints and assisting providers in optimizing care processes and improving customer service.

**Improving Individual Patient Care.** This aim promotes safer and more affordable care through quality

improvement and reporting. All Medicare-participating hospitals will receive assistance in reporting inpatient and outpatient quality data to CMS.

We will also partner with Nebraska hospitals to reduce healthcare-associated infections and nursing homes to improve pressure ulcer rates, reduce the use of physical restraints and other healthcare acquired conditions.

Reducing the incidence of adverse drug events is another component of this aim.

**Improving Health for Populations and Communities.** This aim centers on promotion and use of preventive care and early diagnosis. Health Information Technology will be utilized to improve care coordination.

We will assist physician practices in using their electronic health record system to coordinate preventive services and report related quality measures. Practices also can participate in a learning network focused on reducing patient risk factors for cardiac disease.

**Integrating Care for Populations and Communities.** Improving care

coordination leads to a reduction in avoidable hospital readmissions. This aim builds upon our CareTrek™ experience and will expand efforts to other communities in Nebraska. Education and promotion of evidence-based models of care will be utilized.

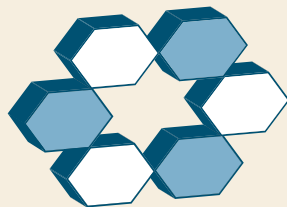
**Partnerships and collaboration** are the foundation for attaining these goals. We will add our resources to existing efforts and provide technical assistance and strategies for improvement. Our goal is care that is more integrated and patient-centered, resulting in a healthier population.

To enhance efforts, we will support or participate in national initiatives focused on care improvement. See page 5 for an overview of initiatives aligned with the National Quality Strategy and QIO goals.

CIMRO of Nebraska would like to thank Nebraska healthcare providers for your commitment to quality improvement and the energy put forth to help us meet our vision of making healthcare in Nebraska the nation's best.



## Nebraska Healthcare Quality Forum



May 8, 2012  
Embassy Suites & Conference Center  
La Vista, Nebraska

*A Call for Presentations will be sent in early December. More information to come.*

# What is a Learning and Action Network (LAN)?



Throughout the next three years, emphasis will be placed on implementation of Learning and Action Networks (LANs). We see LANs as a way for us to expand our reach, strengthen partnerships and improve healthcare quality in our state.

We will implement and utilize LANs to:

- engage leaders around an action-based agenda
- create opportunities for in-

depth learning and problem solving

- ensure collaboration and a reduction in duplication of efforts

LANs create an opportunity for communities to harness the knowledge, skills and resources of community partners to reach a larger audience around a common goal.

We will facilitate LANs to enhance improvement in the following areas:

1. Healthcare-Associated Infections (HAIs)
2. Healthcare Acquired Conditions in Nursing Homes
3. EHR Implementation and Use

4. Cardiovascular Health
5. Care Transitions (CareTrek)

Through LANs, we believe we will accelerate the pace of change and rapidly spread best practices. As a result, patients will experience better care, our population as a whole will be healthier and costs to the healthcare system will decrease.

## Expectations of LAN Participants

Each LAN member will participate in meetings throughout the year; some face-to-face and others virtually. LAN members will be expected to share lessons learned, best practices and challenges. Information sharing opportunities and resources will be made

available outside of scheduled meetings.

Every LAN will function differently to best meet the needs and to accomplish the goals set forth by LAN members.



## Role of CIMRO of Nebraska

We will support LAN efforts by:

- Providing ongoing technical and professional guidance on the implementation of strategies
- Ensuring evidence-based practices are available and utilized
- Coordinating LAN activities and educational sessions
- Providing a venue for educational sessions
- Disseminating information, tools, resources and emerging science
- Ensuring provider participation and satisfaction
- Committing time and resources to aid in sustainability
- Maintaining communication about meetings and relevant issues

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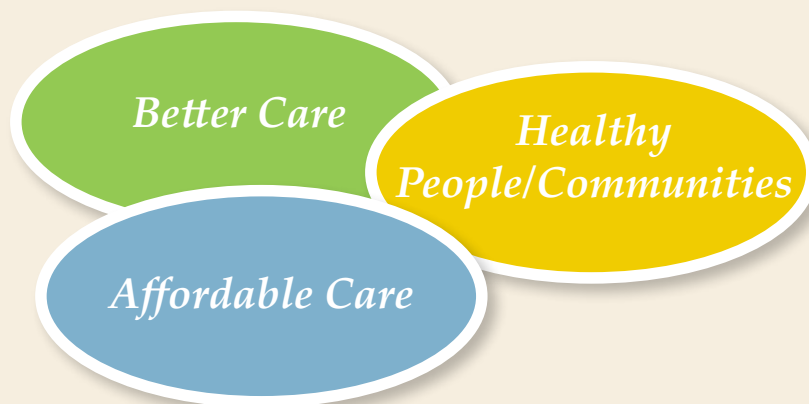
# Aligning Efforts in Quality Strategies

The Department of Health and Human Services has unveiled a three-pronged National Quality Strategy that calls for developing patient-centered care, reducing costs and improving general public health by supporting “proven interventions” that address unhealthy behavioral, social and environmental issues.

This effort was called for under the Affordable Care Act and marks the first comprehensive effort to create national aims and priorities to guide local, state and national efforts to improve healthcare.

Included below is a list of quality improvement and care initiatives that are currently underway in support of the National Quality Strategy. These efforts are all working under the same vision of better care, affordable care and healthy people and communities.

**National Quality Strategy**  
[www.healthcare.gov](http://www.healthcare.gov)



## **Partnership for Patients**

[www.healthcare.gov](http://www.healthcare.gov)

Campaign bringing together leaders of major hospitals, employers, physicians, nurses and patient advocates along with state and federal governments in a shared effort to make hospital care safer, more reliable and less costly.

Goal 1: Keep patients from getting injured or sicker

Goal 2: Help patients heal without complication

## **Quality Improvement Organization (QIO) Program**

[www.cms.gov](http://www.cms.gov)

AIMS:

1. Beneficiary centered care
2. Improve individual patient care
3. Integrate care for populations
4. Improve health for populations and communities

## **Community Based Care Transitions Program**

[www.cms.gov](http://www.cms.gov)

Goals: reduce hospital readmissions, test sustainable funding streams for care transition services, maintain or improve quality of care and document measurable savings to the Medicare program.

## **Million Hearts**

[www.millionhearts.hhs.gov](http://www.millionhearts.hhs.gov)

National initiative to prevent 1 million heart attacks and strokes over the next five years.

## **Home Health Quality Improvement Initiative**

[www.homehealthquality.org](http://www.homehealthquality.org)

Grassroots movement designed to unite home health stakeholders and multiple healthcare settings under the shared vision of reducing avoidable hospitalizations and improving medication management.

## **Advancing Excellence in America's Nursing Homes**

[www.nhqualitycampaign.org](http://www.nhqualitycampaign.org)

Mission: Help nursing homes achieve excellence in the quality of care and quality of life for the more than 1.5 million residents of America's nursing homes

## **Medicare Beneficiary Quality Improvement Program**

[www.ruralcenter.org](http://www.ruralcenter.org)

Goal: Improve rural quality care access for Medicare beneficiaries served by Critical Access Hospitals (CAHs).

# Why Get Involved?

Learning and Action Networks will provide a means to bring together our collective knowledge and resources to create smarter solutions. This “c o m m o n knowledge.” will result in improved care and overall health.

## All teach, all learn

All ‘improvers’ are welcome. By partnering with CIMRO of Nebraska, you will:

- Connect with organizations and individuals that have similar QI goals and challenges
- Learn from others in an “all teach, all learn” environment
- Be mentored by high-performing providers

- Benefit from others' best practices and experiences
- Participate in improvement collaboratives based on rapid, small tests of change
- Access free information and tools that support improvement
- Be recognized for meeting or exceeding improvement targets
- Experience positive results - at the organizational and patient levels



## Annual Report

Check out our newly-released annual report highlighting the successes of our work.

[Click here to access the report...](#)

## Visit our Website

For additional information, visit our recently updated website.

We have an abundance of useful information to share. Sign up to be added to one or all of the CIMRO of Nebraska lists on our site.

[www.cimronebraska.org](http://www.cimronebraska.org)

## All ‘Improvers’ Welcome

As we strive to improve healthcare quality, there are challenges for broad and rapid improvement across healthcare settings. However, this is an opportunity to work together, exchange information, share insights on processes that work and learn from one another as we work towards common goals.

Invitations to participate in Learning and Action Networks and other statewide efforts will be made available during the course of the next three years. We will communicate and make requests for partnership as we go forward.

In the meantime, visit our website for more information.

[www.cimronebraska.org](http://www.cimronebraska.org)



Keri McDermott, Communications Director  
kmcdermott@neqio.sdps.org  
1230 O Street, Suite 120 | Lincoln, NE 68508  
800/458.4262 | P: 402/476.1399 | F: 402/476.1335