

LOUISIANA HEALTH CARE

Quality Insider

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an  eQHealth organization

Louisiana Health Care Review Changes Name to eQHealth Solutions

Will continue to operate as LHCR in Louisiana

Louisiana Health Care Review (LHCR) recently announced the company has changed its name to eQHealth Solutions. The new name supports the Louisiana-based company's growth into other markets, as well as underscores its key strength of providing effective and high quality health care solutions.

In addition to Louisiana Health Care Review, the company is known as HealthSystems of Mississippi and HealthSystems of Illinois in those respective states. But, because so many clients and business associates are familiar with these companies, eQHealth will continue to do business under these names in their respective markets.

"Although we are headquartered in Baton Rouge, we have large contracts in other states and other regions," said Gary Curtis, chief executive officer of eQHealth Solutions. "We sought a new name that was not state-specific and that best reflected our solution-based products and services and our multi-state presence."

"Over the past 25 years, the company has grown from a quality improvement company that did business

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How Did Your Organization Improve Health Care Quality in 2009? *How to recognize a high performing quality organization*

By Scott Flowers, MHA/MPH
Louisiana Director of Quality Improvement

Do you believe that delivering outstanding quality of patient care is one of your distinguishing characteristics? Do your patients, physicians, employees, and other customers agree? Does your data on your quality outcome metrics reflect the same? Hopefully your answers to each of these three questions are a resounding "Yes! Yes! and Yes!"

Louisiana Health Care Review has the privilege of working first-hand with many of your organizations, and recognizes the great strides being made across our state and nationwide on improving the quality of patient care. There is much written about those organizations who are truly remarkable in quality outcomes, and many of those organizations have very common characteristics. Here are the top five characteristics that distinguish their organizations from the pack:

- **Executive Leadership is keenly focused on the quality of patient care** in their institution and can speak comfortably about their quality measures. The Board of Directors spends at least 20 percent of their board meeting on quality. Leadership knows and understands their quality measures, where they stand, and what the organization is focused on improving.

- **A Culture of Patient Safety exists throughout the organization** that is fostered by trust and is absolutely non-punitive in nature. Patient Safety culture surveys often ask front line staff: "what are you most con-

cerned will happen to patients while they are in our facility?"

- **There is a high IQ for problem solving throughout the organization.** Staff members understand the customers of each

of their processes, what the customers' expectations of quality are, and how they measure up. They have information to identify what is causing variation in the process, the expertise to determine the critical factors, and resources and tools to redesign processes to improve quality.

- **Employee Engagement is high.** The connection between employee retention and engagement and how it impacts care delivery is clear. Employees feel a very strong connection to their work. They feel that their work is important to the organization's mission. And also feel vested, that they have a voice and their voice matters to their team and throughout the organization.

- **Physician Champions, Nursing Champions, and project managers are all responsible for leading the improvements forward** with a strong passion to improve quality and patient safety.

How does this discussion about quality intersect with future payment models, especially in light of the healthcare reform legislation?

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Scott Flowers

Gotcha! Louisiana Senior Medicare Patrol Volunteers Catching Scammers

Louisiana seniors may soon become the largest Medicare/Medicaid fraud task force in the state. LHCR, in collaboration with the Louisiana Department of Insurance Senior Health Insurance Information Program (SHIIP) and the Governor's Office of Elderly Affairs (GOEA), recently was awarded a federal grant funding the Louisiana Senior Medicare Patrol, a three-year program that recruits and trains seniors to recognize and report health care fraud.



Julie Mickles
Louisiana SMP Coordinator

According to LHCR's Julie Mickles, the Senior Medicare Patrol coordinator, the program teaches senior citizens how to detect and report possible scams that defraud government-run health care programs. Though the program is only a few months old, complaints have been reported in Terrebonne, St. Martin, East Baton Rouge, Avoyelles and Lafayette Parish.



Screen shot of Louisiana SMP Web site
www.stopmedicarefraudla.org

"Each of the scams that we are now investigating has been brought to our attention by seniors who rely on Medicare, and who noticed something wrong or suspicious," Mickles said.

If you suspect fraud or a health care related scam, call 1-877-272-8720 immediately. To find out more information, please visit: <http://www.stopmedicarefraudla.org>.

LHCR Awarded \$1 Million Grant Funds to Support Limb Preservation

LHCR was recently awarded \$1 million by CMS to fund a special study, "Limb Preservation After Katrina," an enhanced version of the "Every Diabetic Counts" program currently being held in parishes across the state. The LiPAK program is specific to Orleans and Jefferson Parishes, which are still recovering from the effects of Hurricane Katrina.



This two-year LiPAK special study is the only program of its kind in the country, and provides free diabetes education that focuses on limb preservation for African-American Medicare beneficiaries living in the area.

"Medicare has a continued concern about the Greater New Orleans area and its Medicare beneficiaries' ability to access the full scope of resources in a health care infrastructure so badly damaged four years ago. The funding of the LiPAK program is a meaningful and exciting program for our community," said Scott Flowers, LHCR Director of Quality Improvement.

The amputation rate for all Medicare beneficiaries in Louisiana is 1.66 per 1000, which is the highest in the nation. For African-American Medicare beneficiaries, the rate is far higher. In the New Orleans and Metairie Hospital Referral Regions, the amputation rate is as high as 5.8 per 1000. Since Hurricane Katrina, resources available to elderly African-American Medicare beneficiaries have been reduced. The result is these individuals now face an even greater risk of severe complications from diabetes.

If you or someone you know is interested in enrolling in the LiPAK program, please call LiPAK Program Director Linda Harkey at (225) 926-6353.

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One thing is clear, that new payment methods will be modeled after those organizations that are consistently delivering high quality of care at reasonable costs. So the time is certainly ripe to ensure that your answers to the questions above are, in fact, Yes! Yes! and Yes!

The Centers for Medicare & Medicaid Services continues to develop new quality initiatives for the Medicare providers across the country. You have probably heard about and may be working on several in Louisiana such as the Surgical Care Improvement Project (SCIP), Care Transitions, Advancing Excellence in Nursing Homes, Every

Diabetic Counts and the Limb Preservation After Katrina (LiPAK) for African American diabetics in Jefferson and Orleans parishes (See story above—"LHCR Awarded...").

Please save the date for our 3rd annual Louisiana Health Care Quality Summit & Awards event scheduled for April 26, 2010 as we honor those who have measurably improved health care quality. And, join the Facebook Fan page to stay up to date with the Summit news as well as the community of attendees (See story on page 6).

If you are interested in quality improvement information, support or other resources, please contact me directly or visit www.lhcrmedicare.org

lhcrmedicare.org where you can sign up for quality alerts, become a member of our physicians organization and access other important quality improvement tools available to health care providers.

I wish you and your family a safe and happy holiday season and look forward to working with your quality improvement teams in 2010.

Warmest wishes,

Scott M. Flowers

Scott M. Flowers



Tulane University Medical School Curriculum in Louisiana Reflects SCIP Best Practices

National Quality Leader Emphasizes Patient Safety Beginning in the Classroom

Only a few months are left for Louisiana hospitals to reach the Surgical Care Improvement Program (SCIP) goal to reduce the incidence of surgical complications.

SCIP is a national partnership of organizations committed to improving the safety of surgical care through the reduction of post-operative complications by 25 percent by the year 2010. Tulane University's Medical School is emphasizing enhanced patient safety training and SCIP best practices guidelines in course curricula as an additional way to continuously improve surgical outcomes in Louisiana.

Curriculum Focus on Patient Safety

Benjamin P. Sachs, M.D., the dean of Tulane University School of Medicine since 2007 and a national advocate and expert in Patient Safety improvement, says the surgical department at Tulane University now has an increased focus on the tools available to reduce surgical complications such as hospital-acquired infections. Training program enhancements have included a new emphasis on team training and evidence-based best practices such as stopping prophylactic antibiotic administration within 24-48 hours after surgery, one of the SCIP measures. (See full list of SCIP measures at right).

“Interns and residents spend several hours each week studying patient safety, reviewing outcomes, and learning techniques that prepare them for a zero tolerance level for medical errors,” says Dr. Doug Slakey, chair of the Department of Surgery at Tulane University. “The Surgical Care Improvement Program (SCIP) is an example of the type of patient safety best practices that we use in our curriculum which often emphasize team work and communication skills that enhance outcomes.”



Dr. Doug Slakey

Partners in SCIP, such as the American College of Surgeons and the American Hospital Association, believe that a meaningful reduction in complications requires that surgeons, anesthesiologists, perioperative nurses, pharmacists, infection control professionals and hospital executives work together to intensify their commitment to making surgical care improvement a priority.



Dr. Benjamin Sachs

Sachs, who held several appointments at Harvard Medical School, including

chair of the Department of Obstetrics and Gynecology at Beth Israel Deaconess Medical Center, is internationally renowned for his work in improving patient care and reducing medical errors. In 2007, he and his team received the John M. Eisenberg national award for patient safety and quality from The Joint Commission - National Quality Forum. His team at the Beth Israel Deaconess Medical Center's obstetrics and gynecology department was also awarded the Blue Cross Blue Shield of Massachusetts Health Care Excellence Award for exceptional achievement in improving the safety and effectiveness of health care. Both awards recognize the team's groundbreaking approach to reducing medical errors.

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The SCIP Measures

Surgical Care Improvement Project (SCIP) Measures for FY 2011 (*New measure effective January 1, 2010)

Infection:

- SCIP Infection-1: Prophylactic antibiotic received within one hour prior to surgical incision
- SCIP Infection-2: Prophylactic antibiotic selection for surgical patients
- SCIP Infection-3: Prophylactic antibiotics discontinued within 24 hours after surgery end time (48 hours for cardiac patients)
- SCIP Infection-4: Cardiac surgery patients with controlled 6 a.m. postoperative serum glucose
- SCIP Infection-6: Surgery patients with appropriate hair removal
- SCIP Infection-9: Postoperative urinary catheter removal on post operative day one or two*
- SCIP Infection-10: Perioperative temperature management*

Cardiac:

SCIP Cardiovascular-2: Surgery patients on a Beta Blocker prior to arrival who received a Beta Blocker during the perioperative period

VTE:

SCIP VTE 1: Venous thromboembolism (VTE) prophylaxis ordered for surgery patients
SCIP VTE 2: Venous thromboembolism prophylaxis within 24 hours pre/post surgery

Additional SCIP information is available on QualityNet (www.qualitynet.org), MedQIC (www.qualitynet.org/medqic) and the American Hospital Association Web site (<http://www.aha.org/aha/issues/Quality-and-Patient-Safety/scip.html>).

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Their work on team training (Crew Resource Management) was funded by the Department of Defense and Harvard's Risk Management Foundation.

SCIP Importance for All Providers in Louisiana

Chief Medical Director for eQ Health Solutions, Ron Ritchey, M.D. emphasized the importance of SCIP. "The SCIP program is designed to increase the safety of hospital admissions for surgical procedures by reducing complications of surgery such as infections and blood



Dr. Ron Ritchey

clots," Ritchey said. "SCIP, which began as a partnership of medical organizations interested in improving the outcomes of health care (including Medicare, CDC and the American College of Surgeons) has been embraced by hospitals and physicians across the country."

"When interns and residents are trained on these best practices, they review their outcomes and learn techniques that prepare them for the patient safety challenges they may face," says Dr. Samuel Leonard, Associate Medical Director for LHCR.



Dr. Samuel A. Leonard

"Tulane has a long history as a leader in medical education, research and patient care and it will be a real privilege to help lead the recovery," Sachs said. He and his team members will offer patient safety team training and resources to Louisiana Health Care Quality Summit attendees in April of 2010.

Additional SCIP information is available on MedQIC (www.qualitynet.org/medqic) and the American Hospital Association web site (<http://www.aha.org/aha/issues/Quality-and-Patient-Safety/scip.html>). Questions about SCIP in Louisiana? Email Laurie Robinson, RN, CPUR, Director of Quality Improvement at LHCR, lrobinson@lhcr.org.

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only in Louisiana to having Medicaid clients in several other states," added Curtis. "As eQHealth Solutions, we are more than just a quality improvement corporation; we are a results-oriented company that provides medical management solutions to our current and future clients."

eQHealth Solutions' strengths are providing health care quality improvement solutions such as care coordination, utilization management, clinical quality consulting, electronic health record adoption and other medical management services required by Medicaid agencies and other health care payors.

In Baton Rouge, eQHealth's care coordination project (under contract with CMS as the Medicare QIO for Louisiana), Care Transitions, is succeeding at reducing the rate of unnecessary re-hospitalizations. It is expected that the federal government will expand this project to other states.

Recent New Contracts

In the past month, eQHealth has been awarded a contract from the Mississippi Division of Medicaid to conduct an assessment of the state's Family Planning program.

Recognizing eQHealth's expertise in diabetes education, the federal government just awarded the company a \$1 million contract to design and implement a plan to reduce the number of individuals with diabetes who are at risk of an amputation.

eQHealth was also selected by the Office of the National Coordinator for Health Information Technology to submit proposals to assist physicians in Louisiana and Mississippi who are adopting electronic health record technology into their practices.

The company recently assisted the Louisiana Department of Health and Hospitals Office of Public Health with a federal grant application to reduce the number of health care associated infections. The assistance resulted in DHH being awarded a three-year grant from the Centers for Disease Control and Prevention.

According to Ron Ritchey, M.D., chief medical officer for eQHealth Solutions, these are all examples of the work the company conducts that improves the quality of health care.



"For multiple clients who are seeking solutions to varied health care problems, we offer strategies that make sense. From fine-tuning the hospital discharge process to creating nurse hotlines and call centers to deploying case managers, we have the experience to help our clients better manage the populations they serve," he said. For more information, visit eQHealth Solutions at: www.eqhealthsolutions.org.



eQHealth Conference Display

P4P Has a New Meaning – Passion for Patients

20 Louisiana Hospitals Participate with LHCR in Surgical Care/Heart Failure Collaborative (SCIP-HF)

By **Sue Sihvonon, RN**

LHCR Quality Improvement Specialist

The SCIP-HF collaborative is part of the Patient Safety theme of CMS's 9th Scope of Work (2008-2011). Its goal is freeing patients from the risk of harm, injury or loss resulting from their interaction with the health care delivery system through the prevention of surgical complications and improving heart failure care.

The surgical component aims are to reduce surgical site infections, cardiac events, and venous thromboembolism (VTE) events for selected surgical procedures. The Heart Failure component aim is to increase the use of ACEI or ARBs for eligible patients with left ventricular systolic dysfunction.

The SCIP clinical quality process measures for this project, as directed by CMS, are listed on page four (see **SCIP Measures**). The Heart Failure clinical process measure is ACEI or ARB for left ventricular systolic dysfunction, defined as an ejection fraction of less than 40 percent.



A goal of the collaborative is the implementation of protocols and pre-printed orders for antibiotic and VTE prophylaxis. The implementation and use of these protocols are best practices shown to impact improvement in patients receiving the right care at the right time, every time.

At the start of the collaborative in October 2008, 28 percent of the participating hospitals had prophylactic antibiotic pre-printed orders/protocols in place and 45 percent of participating hospitals had VTE prophylaxis pre-printed orders/protocols in place. Thanks to dedicated quality improvement staff, leadership, and healthcare professionals at these hospitals, as of October 2009, 80 percent have prophylactic antibiotic orders/protocols and 90 percent have VTE prophylaxis orders/protocols.

Congratulations to the participating hospitals for implementing these best practices for the patients they serve!

What is the latest on the Advancing Excellence Campaign?

By **Kimberly Byers, BS, NFA**

LHCR Quality Improvement Specialist

"In the first campaign, we chose the reduction of restraints as the goal for our nursing home. The Advancing Excellence Campaign provided us with the inspiration we needed to meet our goal. We have been restraint free for over two years and have never looked back. Advancing Excellence helps us tie our quality measures into our culture change journey," reports KaraLe Causey, NFA, CPA, MA, Administrator at Haven Nursing Center, Inc., and President Louisiana Enhancing Aging with Dignity through Empowerment and Respect, Inc.



KaraLe Causey
Haven Nursing Center, Inc.

Advancing Excellence is a national campaign to encourage, assist and empower nursing homes to improve the quality of care and life for residents. The Advancing Excellence Campaign is a national effort supported by 28 stakeholder groups including AAHSA, AHCA, AMDA, CMS, NADONNA, NCCNHR and the Pioneer Network. Their goal is to help improve quality of care and life in nursing homes. The campaign relies on statewide coalitions called LANE's to get the word out, provides free, evidenced-based technical assistance on eight areas of nursing home care and management, supports frontline staff and encourages consumer transparency. LANE stands for Local Area

Network for Excellence, and for our state we are not only part of the LANE but the LANE convener. The campaign, launched in 2006, was initially planned as a two-year effort. Because of its success, including improvements in care by campaign participants, the campaign leaders decided to launch a second phase beginning October 2009. New goals include decreasing staff turnover, use of consistent assignment, decreased use of restraints, decreased number of pressure ulcers, increased advance care planning with residents and measurement of resident and staff satisfaction.



Don't wait – join the campaign as many of your neighboring nursing homes have. You can choose the goals that are a priority to your home. Free resources are offered, such as implementation guides, newsletters, Webinars and on-line videos. Almost half of the nursing homes in the nation participated in the first campaign.

You can join by going to the Advancing Excellence Web site, (www.nhqualitycampaign.org) click on "Join the Campaign" and follow directions. **If you joined the original campaign, you must go to the same website and re-register.** Then you will be able to update your profile and remain a member. And, YES, you CAN change goals through December 31, 2009. Have your password handy. If you need password or log-on help, please contact Julie Kueker at jkueker@lhcr.org. She will be happy to help you.



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Louisiana Providers in the News

Rapides Regional Medical Center Receives Stroke Accreditation

Rapides Regional Medical Center (Alexandria, LA) is celebrating a huge achievement. The center is the first hospital in Central and North Louisiana to become a "Certified Advanced Primary Stroke Center." (Story was covered on KALB-TV, Alexandria.)

Minden Medical ranks 14th of 4,400 in the nation

At a time when the nation's health care system is forefront in a debate, a local hospital has gained high marks from its customers -- the patients -- and at the same time earned a ranking unmatched in Louisiana. The federal government's Web site, Hospital Compare, has placed Minden Medical Center in the top 1 percent in the country by listing it as 14th in the nation in an evaluation of its quality of care. No other hospitals in Louisiana are on the list; the closest is in Oklahoma. (Story appeared in the Shreveport Times.)



LOUISIANA HEALTH CARE QUALITY
 SUMMIT & AWARDS

APRIL 26TH, 2010
 BATON ROUGE

Save the Date!

Please mark your calendar for Monday, April 26th, 2010 and join us in Baton Rouge for the 3rd Annual Louisiana Health Care Quality Summit & Awards. We hope that you will note the 2010 Summit & Awards ceremony as one of next year's most important events to attend in your schedule.

For up-to-date information, including speaker and hotel information when they become available, please visit the Quality Summit Facebook Fan Page at:

<http://www.facebook.com/pages/Louisiana-Health-Care-Review-Quality-Summit/137750953382> and become a "fan" today!