



# News & Views

## President's Corner

**WAHQ President**



**Gloria Field, RHIT, LPN, CPHQ**

The Board has been very busy organizing the spring conference for March 14th. We have planned the presentations based on your feedback after last years conference and hope that we are giving you a slate of speakers that will give you "take home" working knowledge.

Along with the spring conference, again, we are coordinating with MetaStar, to offer the CPHQ study session on the Thursday before our Friday conference and we thank MetaStar for this working effort.

We want to use the Q-Solutions Study Session Toolkit contracted through NAHQ to provide the opportunities for study sessions during the contract duration, building our CPHQ credentials within the state. Your feedback from last year's CPHQ Study Session was taken into account during this year's planning; so thank you. We will continue looking at other options within the state, as well.

## Plan to Attend WAHQ Annual Conference **Driving Performance Forward** Current Trends in Quality

**FRIDAY - March 14, 2008**

*at the Holiday Inn American Center  
(New Location)*

*5109 W. Terrace Drive, Madison, WI 1-608-249-4220  
Exit Hwy 151 (135B) then Parkway Drive (98 B)*

We will soon be asking for your consideration and voting on the revised bylaws.

The Board has been very thorough in reviewing and updating the bylaws. Some of the changes were made based on regulatory changes with our tax-exempt status and others to reflect more definition and action.

We thank Linda Buel for providing the revised version.

The Board, as well, has been diligently reviewing our Long Term Objectives, those key objectives being: Education, Networking (we've broadened the Networking objective to include "Communication" as we develop future goals and strategies for the organization), State and National Presence, and Fiscal Responsibility. These will be discussed at the spring conference.

As we continue a journey to align with NAHQ, we deleted the Leadership Council section and terminology in our bylaws based on NAHQ abolishing the Leadership Council to work toward

developing a Leadership Network.

We will re-align our Leadership networking efforts with NAHQ's strategies as they unfold their suggested "Town Hall Meeting" approach.

We will present the LTO's at the membership meeting and post on the web-site. As you review the strategies, please feel free to provide input to Board members with any ideas you may have. We look forward to seeing many of you at the upcoming conference. By then, summer will be just around the corner. Happy thoughts.

## **What's inside**

Treasurer's Report	pg 2
2008 Conference Agenda	pg 3
Call for Story Boards	pg 4
<b>WAHQ &amp; CPHQ Registration</b>	<b>pg 5</b>
CPHQ Content; New Patient Safety QI Rule	pg 6

Winter 2007-2008

# On-Line Continuing Education Credits (CEC) National Association for Healthcare Quality (NAHQ)

4700 W. Lake Avenue  
Glenview, IL 60025-1485 USA  
800/966-9392 847/375-4720  
Fax 847/375-6320 E-mail: [info@nahq.org](mailto:info@nahq.org)  
<http://www.nahq.org>

You can link to the NAHQ page to view CE articles:  
<http://www.nahq.org/db/ce/>

This is the page to search CEC by topic, and then the searcher is guided to the articles with the current CE tests. The tests are those that are the **most current** and **still available for credit** from the **past 2 years**. Expiration date is noted with the article information. A score of 80% is required to pass the test

## Examples of Current Topics Include:

-  **Compliance**
-  **Documentation**
-  **Education Training & Communication**
-  **Evidenced Based Medicine**
-  **Government Regulations**
-  **Hedis-Managed Care Focus**
-  **HIPAA**
-  **Information Management**
-  **Informed Consent**
-  **OASIS-Home Healthcare Program**

The online tests are \$15 for members and \$25 for nonmembers. Participants take the tests, pay with a credit card, and receive a certificate online if they've passed the test.

### Visit our WAHQ Website

Looking for the latest WAHQ news? You can visit our Web site at [www.wahq.org](http://www.wahq.org) for the latest information on healthcare activities at home and around the country.

We are fortunate to have the expertise of MetaStar to guide us in the development of our Web page. This avenue of networking would not be possible without Metastar's technical and financial support. Special thanks to Rich Peacock, webmaster, Metastar Inc.

### Other Quality Websites

- |                                  |  |
|----------------------------------|--|
| WI Bureau of Quality Assurance   | <a href="http://dhfs.wisconsin.gov">http://dhfs.wisconsin.gov</a>                                |
| New CMS Internet site            | <a href="http://www.cms.hhs.gov">www.cms.hhs.gov</a>   |
| Wisconsin Collaborative          | <a href="http://www.wiqualitycollaborative.org">www.wiqualitycollaborative.org</a>               |
| Wisconsin Price Point            | <a href="http://www.wipricepoint.org">www.wipricepoint.org</a>                                   |
| Health Grades                    | <a href="http://www.healthgrades.com">www.healthgrades.com</a>                                   |
| Center for Disease Control       | <a href="http://www.cdc.gov">www.cdc.gov</a>   |
| Healthy People 2010              | <a href="http://www.healthypeople.gov">www.healthypeople.gov</a>                                 |
| Minnesota Adverse Health Reports | <a href="http://www.health.state.mn.us/patientsafety/">www.health.state.mn.us/patientsafety/</a> |
| Caring right at home             | <a href="http://www.caringnews.com">http://www.caringnews.com</a>                                |

## 2005-2008 WAHQ Goals

Submitted by Gloria Field, President

**Goal 1 – Education** – this includes our annual conference, newsletters, and Metastar's CPHQ study session. We will be emailing the newsletter to members with email and mailing to those that do not have access to Email.

**Goal 2 – Networking** – Improved communications with our members through an enhanced website, and continued liaison with other state organizations.

**Goal 3 – State presence** – CPHQ recognition and acknowledgement of member awards through the newsletter. Just a reminder, if you pass your CPHQ exam, please send evidence of your success and membership to our treasurer for \$75.00 reimbursement.

**Goal 4 – Strengthen relationship with NAHQ** – maintain NAHQ affiliation through strong membership and participate in the NAHQ Leadership Council.

We continue to meet the minimum 25% dual membership for WAHQ and NAHQ. We have three members who participate on the NAHQ Leadership Council.

**Goal 5 – Fiscal Responsibility** –The board is continually looking for ways to increase member benefits and maintain budget conscious activities.

## Treasurer's Report

Submitted by Matt Wahoske, Treasurer


### ACCOUNT BALANCES

• Checking	\$ 4,166.58
• Savings	\$ 36,152.62
• Annuity	\$ 5,277.43
• Other	\$ 50.00
Total	\$ 45,596.63

# 2008 - WAHQ Annual Conference At a Glance

## Driving Performance Forward

### Current Trends in Quality

<p>7:30 -8:30 a.m. 8:30 -8:45 a.m. 8:45 - 9:45 a.m.</p>	<p><b>Registration &amp; Continental Breakfast</b> <b>Welcome</b> Elizabeth Menzer - <b>Wisconsin Forward</b> <b>Baldrige Criteria &amp; Healthcare</b></p>	<p><b>Baldrige Criteria &amp; Healthcare</b></p>  <p><a href="mailto:ElizabethMenzer@forwardaward.org">ElizabethMenzer@forwardaward.org</a></p> <p>Elizabeth Menzer is Executive Director of Wisconsin Forward Award (WFA) Inc.</p> <p>Ms. Menzer's facilitated the preparation of a WFA application for a Wisconsin service organization.</p> <p>Liz serves as a senior Baldrige Examiner and BNQP training facilitator.</p>
<p>9:45 -10:15 a.m.</p>	<p><b>Break/Exhibits &amp; Posters</b></p>	
<p>10:15-11:15 a.m.</p>	<p>Julie Bartels – Regional Health Information Organization Wisconsin Health Information Organization (WHIO) Project <b>Update– Incentive Based Payment</b> <b>Data Interoperability and Public Reporting</b></p>	<p><b>Incentive Based Payment</b> Presenter - Julie Bartels, Executive Director (WHIO) <b>State Goals:</b></p> <ul style="list-style-type: none"> <li>▪ Facilitate quality improvement efforts by private providers;</li> <li>▪ Help consumers make well-informed purchasing decisions;</li> <li>▪ Inform public health efforts such as disease surveillance; and</li> <li>▪ Secure value for money in public programs such as Medicaid. <i>(Taken from Collaborating to Promote Transparency on Health Care Quality and Costs March 9, 2007</i></li> </ul> <p><a href="http://www.commonwealthfund.org/innovations/innovations_show.htm?doc">www.commonwealthfund.org/innovations/innovations_show.htm?doc</a></p>
<p>11:15-11:45 p.m. 11:45-12:30 p.m.</p>	<p><b>Annual Meeting</b> <b>Lunch/ Break</b></p>	
<p>12:30- 2:00 p.m.</p>	<p><b>Legislative Update –</b> <b>P4P / Non Pay for Non Performance</b></p> <ul style="list-style-type: none"> <li>▪ Craig Moser, District Director for Congressman Steve Kagen, MD</li> <li>▪ Erick Borgerding. - WHA</li> <li>▪ Bill French - MetaStar - 9<sup>th</sup> Scope of Work</li> </ul>	
<p>2:00-2:15 p.m.</p>	<p>Break</p>	
<p>2:15-3:45 p.m.</p>	<p><b>Using Electronic Medical Record (EMR) for information to Drive Quality and Patient Safety</b></p> <ul style="list-style-type: none"> <li>▪ Dr. Paul Knudson</li> <li>▪ Dr. Peter Sanderson</li> <li>▪ Bill French - CPOE – examples on how it improved patient safety.</li> <li>▪ Dana Richardson – WHA</li> </ul>	

### Using an EMR to Drive Quality and Patient Safety Panelists

 <p>Dr. Paul Knudson, Froedtert &amp; Medical College of Wisconsin <a href="mailto:pknudson@mcw.edu">pknudson@mcw.edu</a></p>	 <p>Dr. Peter Sanderson Ministry Health St. Michael's Steven's Point <a href="mailto:pete.sanderson@ministryhealth.org">pete.sanderson@ministryhealth.org</a></p>	 <p>Bill French, Metastar <a href="mailto:bfrench@metastar.com">bfrench@metastar.com</a></p>	 <p>Dana Richardson, Wisconsin Hospital Association <a href="mailto:drichardson@wha.org">drichardson@wha.org</a></p>
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## 2007 Storyboard Reports by Sheri Krueger Dix

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### Using data to reduce hospital-acquired pressure ulcers

**Contact persons:**

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608.262.5740

Department of Nursing and Patient Care Services

University of Wisconsin Hospital and Clinics

600 Highland Avenue

Madison, WI 53792

**Summary:**

Pressure ulcers are one nursing-sensitive quality indicator for acute care settings. We have for several years completed a quarterly pressure ulcer study. Results were shared with the units, as well as submitted to the National Database for Nursing Quality Indicators (NDNQI), which allowed each unit to have a benchmark. While this quarterly study allowed us to have a snapshot of our overall performance, it was only four times a year. In January 2005, we started a monthly study. This has allowed us to have more data, be more timely in giving feedback, and to keep a strong focus on our prevention and care of patients with pressure ulcers. There is now a downward trend in our incidence of hospital-acquired pressure ulcers.

### Inpatient Falls Reduction

**Summary:** Using the 7 step methodology, we identified

the potential for fall risk reduction. In analysis we recognized numerous opportunities to reduce risk including better signage, better bed PMs, raising awareness of risk and improving education. Then ultimately we created a structured patient attendant program.

Current fall rate is 33% lower than the baseline measurement.

**Contact person:**

Joe Jicha Director of Quality Improvement

Riverview Hospital Association 410 Dewey St., Box 8080

Wisconsin Rapids, WI 54495

715-422-9251

[jicjoe@rhahealthcare.org](mailto:jicjoe@rhahealthcare.org)

### Medication Reconciliation in Ambulatory Care (Clinic System)

Medical Group/Saint Michael's Hospital

**Contact person:**

Laurie Reilly

Director of Nursing,

Ministry Medical Group

[LREILLY@rice.medical.org](mailto:LREILLY@rice.medical.org)

**Summary:** Efforts for Medication Reconciliation to improve the accuracy and efficiency of medication lists which is key to patient safety. The storyboard demonstrates the design phase for improving the current process, standardizing the format and process, and efforts to involve patient across campuses within Ministry System.

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## Call for Storyboards 2008 WAHQ Conference

Submitted By Sheri Krueger-Dix

- Another WAHQ opportunity to network and share your successes and lessons learned with your professional peers.
- If you are interested in presenting a **Storyboard that demonstrates a progressive topic that would highlight Healthcare Quality**

Please submit a brief description (80 words or less)

to **Sheri Krueger Dix.**

**Due by February 15, 2008**

The **WAHQ BOD** will review all submissions and confirm presentors with **guidelines by**

**February 29, 2008**

**email:** [sdix@fmlh.edu](mailto:sdix@fmlh.edu) or

**Phone:** 262-257-3495 or 414-850-8488



Storyboard presenters will receive a 1-yr. transferable **WAHQ membership per organization.**

Share your hard work and learning's with other Quality Professionals!



AGENDA

<http://www.metastar.com>

7:30 a.m. – 8:00 a.m.	Registration & Continental Breakfast
8:00 a.m. – 8:30 a.m.	Introduction/Test Taking Tips <i>Judy Frisch, RN, MBA, CPHQ</i>
8:30 a.m. – 10:15 a.m.	Foundation, Techniques and Tools <i>Judy Frisch, RN, MBA, CPHQ</i>
10:15 a.m. – 10:30 a.m.	Break
10:30 a.m. – 11:00 a.m.	Foundation, Techniques and Tools <i>Judy Frisch, RN, MBA, CPHQ</i>
11:00 a.m. – 12:00 p.m.	Using Data for Improvement: The Toolkit <i>Judy Frisch, RN, MBA, CPHQ</i>
12:00 p.m. – 12:45 p.m.	Lunch
12:45 p.m. – 2:15 p.m.	Strategy and Leadership <i>Bill French,</i>
2:15 p.m. – 3:00 p.m.	Continuous Readiness <i>Bill French</i>
3:00 p.m. – 3:15 p.m.	Break
3:15 p.m. – 4:15 p.m.	Change Management and Innovation <i>Bill French</i>
4:15 p.m. – 5:00 p.m.	Wrap-up/Evaluation <i>Judy Frisch, RN, MBA, CPHQ</i>

Where: [Holiday Inn at the American Center](#)  
5109 West Terrace Drive, Madison

Cost: \$75 per person (Check payable to MetaStar, Inc.)

R.S.V.P.: By March 3, 2008, to Jennifer Parisi by mail with payment (checks only) to:  
MetaStar, Inc.  
2909 Landmark Place  
Madison, WI 53713

**Wisconsin Association for Healthcare Quality (WAHQ)  
2008 Conference Registration & Membership Application**

Name \_\_\_\_\_ Credentials \_\_\_\_\_ (CPHQ, RN, LPN, RRA, ART, Other)  
 Title \_\_\_\_\_ Business Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Organization \_\_\_\_\_ FAX ( ) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_  
 Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Are you a member of NAHQ? \_\_\_ Yes \_\_\_ No (Please check) Send more information regarding \_\_\_\_\_ NAHQ

**Annual Membership Fee  \$45 Member Conference Fee  \$100 Non-member conference only  \$140**

Make check payable to **WAHQ** Mail or bring to conference, 2008:

**Virginia Wyss**  
2202 Tradition Lane  
Janesville, WI 53545

Email [VWyss@ameritech.net](mailto:VWyss@ameritech.net) Phone: (608) 752-3911

Affiliation with the National Association for Healthcare Quality (NAHQ) to join logon to:

**NAHQ Membership** <http://www.nahq.org/member/NAHQapplication.pdf> annual membership \$150

# HHS Proposes *New Patient Safety and Quality Improvement Rule*

[Patient Safety & Quality Improvement Rule Feb 12, 2008](#)

**Federal Register SUMMARY:** “The rule proposes regulations to implement certain aspects of the Patient Safety and Quality Improvement Act of 2005 (Patient SafetyAct).

The proposed regulations establish a framework by which hospitals, doctors, and other health care providers may voluntarily report information to Patient Safety Organizations (PSOs), on a privileged and confidential basis, for analysis of patient safety events. The proposed regulations also outline the requirements that entities must meet to become PSOs

and the processes for the Secretary (of Health) to review and accept certifications and to list PSOs. In addition, the proposed regulation establishes the confidentiality protections for the information that is assembled and developed by providers and PSOs, termed “patient safety work product” by the Patient Safety Act, and the procedures for the imposition of civil money penalties for the knowing or reckless impermissible disclosure of patient safety work product.”

**HHS will accept comments on the proposed rule through April 14.**

## CPHQ Study Session Content

### Module Objectives

Module 1 – Foundations, Techniques, and Tools

a. On a scale of 5 (Agree) to 1 (Disagree)

i. Module 1 objectives were relevant to overall purpose of the course - mean score of 4.39

Module 2 - Strategy and Leadership

b. The objectives for Module 2 were relevant to the overall purpose of the course - mean score of 3.49

Module 3 – Continuous Readiness

c. The objectives for Module 3 were relevant to overall purpose of the course - mean score of 4.11

Module 4 Change Management and Innovation

d. The objectives for Module 4 was relevant to overall purpose of the course - mean score of 4.03

As a result of completing this course, I am now better able to:

e. Organize quality activities by incorporating performance improvement concepts Mean = 4.22

f. Integrate risk management elements in quality activities Mean = 3.87

g. Discuss and apply statistics and statistical techniques Mean = 4.08

h. Identify and discuss outcome measure strategies Mean = 4.16

i. Describe the relationship of education, training and communication in performance improvement Mean = 4.16

j. Overall course: topics and content were consistent with publicity descriptions Mean = 4.21

k. Length of the course was appropriate Mean = 3.73 (Comments consistent with one day is too short)

l. The meeting environment facilitated learning Mean = 4.23

m. Are you members of NAHQ? Yes = 15 No = 26

### Q-Solutions Program: Healthcare Quality Management Review and Study Session

This program was used for the first time at the March 2007 CPHQ session. The program package from NAHQ consisted of the day’s agenda, four modules with power points, an evaluation form template, a new resource workbook, and Sandra Murray’s *Using Data for Improvement: the Toolkit* DVD.

Based on analysis of the evaluations and presenter feedback, we have several new ideas for revising the training session. This is the short list of potential improvements:

- Build in pre and post testing to target test questions
- Break the certification and recertification into two groups sometime during the session for more specific attention to their needs
- Encourage participant preparation prior to the course
- Revise the agenda to reflect alignment with the evaluation questions

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