Partnership for Patients Hospital Engagement Network
Frequently Asked Questions

COST

Q: How much will participation in the Partnership for Patients (PfP) Hospital Engagement Network (HEN) campaign cost the hospital?

A: There will be a nominal fee of $50 per person to participate in the Learning Communities. That fee covers the cost of food and meeting space rental. Financial scholarships will be available to Critical Access Hospitals through an IDPH grant to help offset costs related to travel and registration fees to attend the Learning Communities.

METRICS

Q: What are the core metrics for the 10 focus areas?

A: The core metrics for the 10 focus areas will be released on March 1, 2012. They will consist of at least one process and one outcome metric for each focus area.

Q: How will we report the PfP/HEN metrics?

A: Some PfP/HEN metrics will require the hospital to collect and report data to the IHC using an online data collection portal. For other PfP/HEN metrics, data are already being collected and reported.

Q: What is the timeline for data reporting?

A: Hospitals are required to submit data monthly, starting June 1, 2012. Earlier submission is acceptable and encouraged.
Q: What is the Centers for Disease Control and Prevention’s (CDC) National Healthcare Safety Network (NHSN) system? How will we share access to IHC?

A: The NHSN is a secure, internet-based surveillance and reporting system managed by the Division of Healthcare Quality Promotion (DHQP) at CDC. NHSN collects patient safety and infection related data. IHC is a registered group administrator for all Iowa hospitals within the NHSN system. For reporting infection related data, hospitals should join the NHSN system. Hospitals will need to take the annual NHSN survey and grant IHC permission to view and access the hospital’s NHSN data.

Q: How will success stories be collected and spread?

A: IHC Improvement Advisors will assist hospitals to capture their quality improvement stories. Success stories will be collected and spread through a variety of means:
- Learning Communities and webinars
- IHC communication vehicles (newsletter, portal, website, email)
- Conferences

Q: What are the leadership and culture of safety surveys?

A: The leadership survey is designed to assess the quality and safety of leadership structures and systems in creating and maintaining a culture of safety. This survey will be repeated annually.

The culture of safety survey will be conducted annually to determine if a culture of safety really exists from the perspective of the employees.

ORGANIZATIONAL STRUCTURE

Q: Who should be involved in the hospital’s improvement team? Who do you recommend as the hospital contact?

A: It will be important to have one primary hospital contact for the project - typically this could be the quality lead. The overall improvement team may consist of the CEO, CNO, CFO, CMO, quality lead and a physician.
champion. Each of the 10 focus areas will require participation from other involved individuals.

Q: How much time will be involved from the CEO, hospital contact, and other staff?

A: The time needed will vary depending on where the hospital is at with quality improvement initiatives across the 10 focus areas and what your past involvement has been with the Iowa Healthcare Collaborative.

Q: If we are already focused on quality initiatives, how will the Hospital Engagement Network enhance our work plan?

A: The HEN is not a project designed to change the work currently being executed by the hospital. It is simply an effort to provide assistance and resources. Each hospital that participates will have an IHC Improvement Advisor assigned that will provide resource assistance to help meet quality improvement initiatives and spread best practices across the state. In addition, there will be opportunities to attend learning communities, webinars and conferences that will spotlight each of the 10 focus areas.

Q: Will our quality work plan need to be revised? Can we use current work plan?

A: Yes, you can use your current quality work plan. Revisions and/or updates can be made as needed.

Q: Do I have to participate in all 10 focus areas?

A: The hospital must participate in each focus area, unless the related service is not provided.

**SUPPORT RESOURCES**

Q: Who are the IHC Improvement Advisors?

A: The Improvement Advisors are part of the IHC. There are 5 IHC Improvement Advisors and they will be assigned to and remain with the hospital throughout the time frame of the initiative. A copy of the IHC
Improvement Advisors and their assigned hospitals will accompany this email.

Q: Who provides the support and assistance with the process improvement activities and data collection?

A: A team will provide support to the hospital. The team will consist of: IHC Improvement Advisors, IHC resource team members, IHA IT staff, Telligen staff and CMS staff. This team brings numerous skill sets and will collaborate with the hospital improvement team to establish needs and secure resources.

Q: Where will I find information about the resources available?

A: The IHC website will contain a portal for the hospital to access data reporting, quality improvement resources and interactive engagement with participating hospitals.

**LEARNING COMMUNITIES**

Q: Can you tell me more about the Learning Communities?

A: We anticipate hospitals will identify two individuals to attend IHC’s HEN Learning Communities. All 2012 Learning Communities will be held from 8:30 am – 3:30 pm at The Meadows Events & Conference Center, Prairie Meadows, Altoona, Iowa. Learning Communities dates are:

**Readmissions:**
March 6, June 5, August 28 and November 28

**Patient Safety & Hospital Acquired Infections (HAI):**
March 8, June 6, August 30 and November 29

**Note:** IHC’s Patient Safety Conference is March 7 and Annual Conference is August 29, both at The Meadows Events & Conference Center.

Q: What is the learning network?
A: Through IHC’s Learning Communities, webinars and other complimentary communication tools, we will create a learning network to share not only best practices but challenges and struggles with each other.

Q: What is the IHI Breakthrough Series Model?

A: IHI Breakthrough Series Model is an improvement method that relies on spread and adaptation of existing knowledge to multiple settings to accomplish a common aim. Participants will attend four IHC Learning Communities in 2012 – March, June, August and November. The periods between the Learning Communities are action periods, supported by topically-focused webinars, conference calls and toolkits from content experts.

Q: What is community engagement in relation to the PfP/HEN?

A: Hospitals working collaboratively with local community organizations and groups addressing the healthcare issues affecting their community health. IHC will host a three part series of webinars that will focus on community engagement and public-private partnerships throughout their population. The webinar function will specifically focus on the available resources within local communities, such as public health departments, area agencies on aging, home health organizations and long-term care facilities.