

NYAHQ

SPECIAL POINTS OF INTEREST:

- **President's Message**
- **Upcoming Educational Events**
- **Note from State Leaders Summit 2013**
- **Poster Presentation**

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New York Association For Healthcare Quality



SPRING 2013

Letter from the President

Barbara A. Nealand, RN, BS, LNC

As I embark on my term as President of the New York Association of Healthcare Quality, I reflect on the many accomplishments our past President, Veronica Hunko, has brought to the association. It was through her leadership, expertise and pledge that the organization continues to cultivate and prosper. I would like to take this opportunity to thank Veronica for her service to NYAHQ as President over the past four years. Veronica, in collaboration with the Board, has helped the membership to grow and offered valuable educational programs, including offering our members the Prep Course for the CPHQ exam. Our programs have been well attended and continue to bring in new members from across the State.

It is my hope to steadily move forward taking this momentum toward growth and opportunity for our organization. I look forward to working with the Board to further enhance and develop our educational programs. We are cur-

rently working on an educational program to be held in Brooklyn, LIU Campus, April 2013 and a CPHQ



Prep Course in June of 2013.

As NYAHQ President, my personal goals over the next two years include but are not limited to the following:

- Build on the successes of the past and broaden our membership by continuing to promote the organization to my colleagues in all areas of the Health Care field.
- Recruit and utilize the many talents of our QI, Safety, and Compliance professionals by encouraging and soliciting their participation in our educational offerings, contributing to

the NYAHQ newsletter or serving on the Board of Directors.

- Exploring the concept of "Point Individuals" for various regions in New York in an effort to augment and better serve the entire New York State membership.

I invite each of you to join me in evaluating our talents and to consider taking this opportunity to contribute, in some small way, to your organization. You are the key to making a difference and to our success. I thank you for giving me this opportunity to lead and look forward to working with you through the many challenges over the next two years. Together, we can all make a difference as we journey the road to High Quality and Enhanced Patient safety!



**New York Association For Healthcare
Quality, Inc.**

Is proud to present

**Health Care Quality and The Rapidly
Changing Landscape**

April 12, 2013

Long Island University, Brooklyn, New York

**Opening Remark: Len Parisi, MA, RN, CPHQ,
FNAHQ, President-Elect NAHQ**

**Key Note Speaker: Karen S. Heller, Executive Vice
President Health Economics and Finance
Greater New York Hospital Association**

Up Coming Educational Events

CPHQ Review Course

sponsored by the NYAHQ

Interested in becoming CPHQ certified?
Attend this review course and be on your way!

Thursday, June 21, 2012
12:00 noon - 4:00 pm

Friday, June 22, 2012
8:00 am - 4:00pm

Please visit: www.nahq.org/education/events/june.html for
Additional information.

LEADERSHIP SKILLS

Seeking Nonclinical Help to Improve Clinical Processes

Jane Martinsons, NAHQ staff writer



Sometimes the best clinical solutions come from unexpected, nonclinical sources. For weeks, a performance improvement (PI) team at Faxton St. Luke's Healthcare (FSLH), Utica, NY, comprising stroke unit leaders and clinical experts from various departments, including the emergency department, were stumped over why a

screening process for stroke patients was showing worsening results. With 78% of stroke patients experiencing dysphagia, or the inability to swallow safely, the team had been working on improving the dysphagia screening process to help lower the aspiration risk in stroke patients. But despite efforts to reform and standardize procedures (e.g., a nursing bedside water-swallow test), performance outcomes continued to wane.

That is, until the PI team asked the ISO process engi-

neers for help. The process engineers immediately identified what they considered to be glaring systemic problems, including that the procedure for the water-swallow test lacked sound documentation and communication and that the paper screening tool was inappropriate for the electronic medical record (EMR) system used in the emergency department (ED).

With their help, the PI team quickly improved their processes and implemented new ones. They replaced the paper screening tool with EMR screens that used "smart prompts" to ensure accurate screening, incorporated the water-swallow test results into the ED EMR patient transfer report, and educated staff on procedures and work flow.



NAHQ 2012 Conference Poster Winning

The New York Association for Healthcare Quality (NYAHQ) congratulates the second-place-winning 2012 NAHQ conference poster, "Reducing Aspiration Risk in Stroke Patients through an Improved Dysphagia Screening Process." Poster authors include Angelina Roche and Barbara C. Folger, MS RN CPHQ NEA-BC AVP, of FSLH's Quality and Outcomes Management and members of NYAHQ.

Angelina M. Roche, RN BPS CNRN CPHQ, FSLH's stroke program clinical coordinator, points to several lessons learned. First, Roche noted, "look beyond traditional resources within your own organizations. Think outside the box, beyond the same old thinking of having only nurses or therapists do performance improvement. You have other resources in your organization, such as nonclinical process engineers, who certainly know how to evaluate processes and can help you out."

Roche added that "the process engineers were invaluable to us. They were quickly able to see that there was no clear accountability in our procedure for who performed the water swallow test and where in the hospital it was performed."

As a result, "we changed policy to have clear accountability with nurses in the emergency department during their initial assessment of the patient. We also now use an electronic form with smart prompts," she said. "Using these two key elements, we were able to improve our performance to more than 95%, which we have sustained over time."

Speed Networking Notes from State Leaders Summit March 8, 2013

Education Collaboration

- Open to idea of partnering with other states, but haven't really thought about how to do it.
- Regional meet and greet
- Webinar sharing and newsletter sharing
- Consider asking states to grant membership rates for education offering for other state association memberships
- Exchanging speakers
- Cost of webinars need to be reasonable
- 2 states are collaborating:
 - * One does a spring conference
 - * One does a fall conference
 - * Each state plans their own, but both states' members can attend both
- Some states are offering some minimal collaboration with reciprocation of state member registration for their in-person educational conferences or virtual webinars
- Minnesota offers webinars on a monthly basis that are free to their members
- Last year, Utah offered a virtual broadcast of their annual conference at a reduced rate from their regular registration to members who lived more than 100 miles from Salt Lake City, UT. It was very successful and plan on offering this to their membership again this year.

Benefits:

- More robust educational offerings for the state
- Shared costs, hopefully lower the price for everyone if they can share the cost of a speaker or share the cost of a webinar.

Potential Partnerships between States:

South

- Arkansas wants to partner with Virginia on Webinars; Virginia can provide webinars
- Just from today - there is a partnership collaboration forming in the New England area specifically with Maine and Massachusetts.
- North Carolina has a conference and they offer it to the members of Virginia for the same member price, and vice versa.
- Other potential collaborations discussed were Texas and Louisiana, Arkansas and Louisiana, or Virginia, North Carolina and Arkansas.

Midwest

- Minnesota is looking into regional meet and greet
- Potential for multi-state collaboration between Iowa, Minnesota, Wisconsin and Nebraska
 - Each state is responsible for 4 webinars per year
 - State members have access to all of the webinars from all of the participating affiliates
 - Each state affiliate gets the registration \$ for their members signing up for webinar

Northeast

- Several states mentioned potential for NE Collaborative for Quality, joining together the NE State Quality

Associations.

- Opportunity to bring the Vermont Association into NAHQ Affiliate status; Claudia will provide some contact info.

Membership Campaigns

Recruiting New Members:

- Give a financial break on registration for a major conference or training if the attendee joins the association at the same time.
- "Each One Reach One" - every association member is challenged to recruit at least one new member.
- Reconcile lists of NAHQ and state association membership lists and contact individuals who belong to NAHQ but not to the state organization.
- Explore opportunities for NAHQ and state associations to collaborate on membership recruitment, for example offering savings with joint membership packages.
- Approach hospital quality departments to recruit members
- Develop and implement plans designed to cover states that have no association.
- Ensure Website is welcoming, innovative, up to date, and substantive. (Also important for membership retention)
- Look at non renewals: split up list and board members make personal phone calls
- Hold large event and have Board members bring a friend
- Email all the members in the past 2-3 yrs to encourage membership
- Plan and present an immediate/instant/quick invite to something of value: networking or educational opportunity at no cost
- Ohio gives free membership for 1st year for passing CPHQ
- Use CPHQ Review Course to recruit new members
- Organizational memberships: one state had a \$250 fee with which the organization can have any number of members. They all must come from same address, and only two members can vote.
- Student rates: lots of interest, but how to verify that someone is a student is unclear
- Use hospital association list to mail out to all quality folks
- Take the board meeting on the road: One group went out into their state and held meetings in different locations, invited members or potential members to attend, and offered an hour of CE credit

Retaining Current Members:

- Contact members not renewing. Personally encourage them to renew, and if they choose not to, ask them why.
- Conduct member survey to ascertain what provides the most value for them. (Consensus was that it's low cost/free webinars that are easy to access and that offer CEUs.)
- Provide specific tools, information and ideas that members can put to use
- Have regional liaisons or Board members personally contact new members to welcome them, get acquainted, create profiles, and help them engage
- At conferences have a speaker from each part of the

state

- Recognize new members at meetings or training sessions, for example have them wear special name badges, so everyone can greet them and get acquainted
- TWIV all meetings held remotely, so people can see one another (approach used in Nebraska)
- Offer scholarships and more types of awards and recognition
- Utilize more of the creative social media approaches described at the Summit
- Provide a variety of opportunities for engagement that meet wide-ranging preferences of various member types.

Strategic Partnerships

Benefits:

- Reducing duplication of efforts / programs (e.g., share and coordinate plans for educational offerings so don't all address the same topic and so don't compete on dates of offerings)
- Reduce competition – for resources and attention
- Adds credibility to all participating organizations – members see the alliances as a plus, outside organizations see the partnerships as a sign of strength or prestige
- Expands reach of state quality association – greater impact on healthcare quality, opportunity to grow membership
- Source of news / articles for state newsletter (ex. FHA and IHI contribute a total of 3-4 articles a year for FAHQ newsletter)

Potential Partnerships with Other Organizations:

- IHI Node Network – good way for states without strong partnerships to start off. Can give credibility to the State Associations to help build other relationships.

Minnesota

- Current: ASQ and Performance Excellence Network (this is their State level Baldrige program).
- Potential: MAPS (Patient Safety organization)

Texas

- Current outreach: Long Term Care Association, Dialysis group, Behavioral Health, Risk Management Associations and QIO relative to their Scope of Work in the state
- In Planning: How to cross pollinate with other groups

Oregon

- Co-sponsorship for CPHQ classes with other organizations Florida
- Current: IHI Node Network, FHA (hospital association) FMQAI (state QIO), Florida Chapter of American Heart Association.
- Provided speakers to a few colleges (nursing programs) on quality topics.
- In talks with Medical Staff Association (provided speaker for their annual conference)

Michigan

- Current: Medical Group Managers Association-- opportunity to partner to provide physicians education on quality and MAPS (Patient Safety Organization)

Utah

- Just starting, beginning with vendors. Goal is to increase income for financial stability. Working with Inter Mountain Healthcare for conference support and Morning Star (or Mountain Star) for webinar partner.

Arkansas

- Current: formal relationship with State Hospital Association. Has worked well in the past, but with creation of HENs, hospital association is now becoming a competing organization. Also has a great relationship

with vendor, American Data Network, who provides various forms of sponsorships and support.

Connecticut

- Current: informal with State Hospital Association. Also being offered more formal relationship, like Iowa, with their hospital association.

North Carolina

- Current: informal relationship with State Hospital Association
- Due to HEN formation, the hospital association now

has a Quality and Patient Safety Association connected to the hospital association. NCAHQ is now having concerns about their future and the implications of this hospital association group.



A Retirement Announcement

Veronica J. Hunko, RN, MA, CPHQ, immediate past president of NYAHQ, will be retiring in May 2013 after 46 years of service. Veronica is an alumni of KCHC School of Nursing. We all extend our best wishes to Veronica as she begins the next chapter of her life. May all her dreams come true and spend quality time with her love ones and family in the years of retirement.

We are also thrilled to announce that Torrance Akinsanya, MPA, CPHQ, NYAHQ Board of Directors, will be joining Kings County Hospital Center as Associate Executive Director, QM. The position was previously held by Veronica Hunko. Please join us congratulating on her new achievement..

In Memory of Sandra E. Ward, MA, MS, BSN, RNC, CPHQ, CPUR

The NYAHQ regrets to announce the untimely passing of Sandra Ward. Sandra was a long time member of the NAYHQ and her contributions and relationship will be greatly missed. Sandra was a faithful attendee of the annual NAHQ Educational conference even though she was not reimbursed for her expenses. She felt that the information she gained from attending was well worth the personal expense. Her positive attitude and vast experience in QM helped guide the association's endeavors and she was always available to lend a helping hand—a true quality Professional!



Sandra E. Ward



SHARE YOUR NEWS!!

This is your newsletter. Please e-mail successes and/or lessons learned, announcements of promotions, new positions, upcoming events to:

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“Job Postings” ----- Send postings to dgoldman@nyahq.org