



RHQN NEWSLETTER

June 2010

Where's Waldo?

When our children were little, my wife and I would read to them (well OK, maybe we just looked at) the "Where's Waldo?" books. They loved to scan the pages over and over looking for the rather nerdy young man in the bumblebee striped shirt. He was always in a huge crowd of people and stuff. It was amazing all the things we found in the pictures, besides Waldo.

My past month has been a living "Where's Waldo?" I have been all over the state, meeting with and extending the helping hand of assistance on behalf of the Rural Healthcare Quality Network. I don't mean to sound patronizing, but traveling to our member facilities is the highlight of my job. Sometimes the 'getting there' is a little less than stimulating and sometimes the drive is a great part of the reason for going.

At each hospital I visited, there was work to be done and progress to be made. Many of the visits were done with Bev McCullough, the RHQN Quality Improvement Manager. I would like to take you with me on a virtual tour of much of the state as 'Waldo' Benson travels to and provides assistance to the RHQN's members.

My first stop was Ocean Beach Hospital in Ilwaco. I traveled to Ilwaco to meet with Joe Devin, their CEO, and discuss the services we offer. In our meeting, I talked about the RHQN's external peer review process and its role in verifying that member facilities are meeting the conditions of participation for critical access hospital (CAH) funding from the Center for Medicare and Medicaid Services. One of the CAH conditions of participation is that the facility's medical staff bylaws and policies have been reviewed/revised in the past two years. Joe was pleased to learn that we provide membership assistance in updating medical staff bylaws/policies through our peer review physicians. Dr. Myron Bloom, our medical director, is expert in providing assistance for members in this area. We have available a master index of 'best practice' medical staff bylaws and examples of specific bylaws and policies, if you wish to see them. Just let me know.

My second visit of this past month was to Klickitat Valley Health in Goldendale. We were invited to the hospital to do our "Taste of LEAN Process Improvement" class for their management group. This course is interesting (as well as valuable) because it requires 'homework' that must be completed before we arrive. The homework is a treasure hunt for waste in the facility. This treasure hunt for waste is broken into eight categories. We collect the homework the day before the training and use it as a major part of the class. The LEAN process class is not on statistics or discussions of financial ROI, it focuses on process and hands-on skill development. Klickitat's management team blew us away with their strong 'team' culture and ability to dive into problems.

I have to share with you a funny aside to doing this class. We divide the class into small groups. Toward the end of the class, each group works on one of the eight categories of waste and attempts to fix the problem. After they work on their waste problem, each group reports back to the full team on their issue and how they corrected it (made it more efficient, more effective and/or more cost conscious). We try to hold the report backs to five minutes. But, it never works. Each small group is so excited to share the innovative and creative ways they solved the problem that they demand to be heard. It was awesome!

We have provided the “LEAN Process” class at six facilities. Three of them specifically requested that we focus on helping prepare their management team for a move to either a new facility or addition. We initially questioned how well this would work. I have to say, it has worked so well that we are incorporating some of the moving material into the class’s core agenda.

My third visit in the past month was to Skyline Hospital in White Salmon. The nursing units at Skyline recently moved into a new addition. They asked us to provide pre-survey safety rounds for both the environment of care and clinical quality. Bev and I spent a full day touring the facility with the management team, giving recommendations for improvement, and discussing how to best present documentation of staff competency.

My fourth visit of the past month was to Whidbey General Hospital in Coupeville. I was invited to visit by their clinical educator (Arlene Taylor) and nursing management team. Our focus was on how to provide ‘best practice’ nursing orientation, clinical precepting, and knowledge/skills competency. My background in staff development (19 years as a Director of Staff Education) put me in a good position to provide assistance and support for streamlining both the process and documentation of competency for all staff (not just nursing). Our meeting was very productive and several policy and agenda samples/templates were provided.

My fifth visit of the past month was to Coulee Medical Center in Grand Coulee. Bev and I were invited to present our “LEAN Process” class to their management team since they take possession of a new facility in October. The LEAN Process course, as it relates to a move, uses 5S and PDSA terminology to get a handle on what needs to be moved and timeframes for a successful move. Strategic planning for a move, as we teach it, is a great help to the move coordinator. Greg Hanoff, Coulee’s Director of Engineering and coordinator of the move, thanked us for getting the management team organized and engaged in the process of moving.

My sixth visit of the past month was to Ferry County Memorial Hospital in Republic. Bev and I were invited to do our Adverse Event and Root Cause Analysis training. We are very fond of this course. It is not taught as ‘a response to an adverse clinical event’ but rather as a means of doing root cause analyses for process improvement. Scenarios of adverse events (clinical, financial, environment of care, employee health, etc.) are used for small group sessions and report backs.

Need for this course arose from a recent Hearst Newspaper series on clinical adverse events in hospitals. The series inferred that clinical adverse events were so under reported, especially in rural settings, that it was almost criminal. We found no evidence that clinical adverse events were being under reported. But, we did find that there was some fear of doing a root cause analysis (RCA). Managers were unfamiliar with the forms to use, the questions to ask, and the process to follow. Our course addresses those issues and more. We teach use of the Joint

Commission RCA form, the VA triage questions series, and the Canadian Framework for developing and implementing action plans. The most exciting part of the course is application of these principles to non-clinical adverse events. Twelve RHQN member facilities have asked for and been provided this training.

So, ‘Waldo’ Benson had a very busy month. We invite you to make use of any of the courses or other assistance that the RHQN offers. **All assistance is provided free of charge** to members. The Adverse Event and RCA course is four hours, the “Taste of LEAN Process Improvement” course is six hours, and the Pre-survey, Environment of Care and Clinical Quality Rounds take about eight hours to complete. If you would like to hear more about the courses or are interested in scheduling a visit from Bev McCullough or me, please contact Bev (RHQN Quality Improvement Manager) at bevm@wsha.org or (206) 216-2862, or me (Randy Benson, RHQN Executive Director) at randyb@wsha.org or (206) 577-1821.

Upcoming Member Conference Calls

Bev McCullough (RHQN QI Manager) and I have split the Members Conference Call topic list for 2010. We will be alternating the monthly calls. If you have a topic suggestion, please call or e-mail Randy Benson (RHQN Executive Director) at randyb@wsha.org or at (206) 577-1821.

- July 13, 10:30 a.m. – **Developing and Strengthening Staff Competency: From Age Specific Competencies to Workplace Violence Training, How Are You Doing?** presented by Randy Benson, RHQN Executive Director
- August 10, 10:30 a.m. - **Clinical Best Practices and Lessons Learned**, facilitated by Bev McCullough, RHQN Quality Improvement Manager
- September 14, 10:30 a.m. – **Finding A Champion: One of the Foundations of Successful Change**, presented by Randy Benson, RHQN Executive Director

If you have ideas, comments, questions, need additional resources or a consultation, contact Randy Benson, RHQN Executive Director, at (206) 577-1821 or randyb@wsha.org