

UAHQ: Your Healthcare Quality Resource

UAHQ News

Spring 2017

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Tiptoe Through the Tulips with UAHQ

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A Message from Our President

Dear Members,

It looks like spring might be here to stay, and your UAHQ Board has sprung into action on several fronts. As I mentioned last time, we have a date for our Annual Conference: **Friday, October 6, 2017**. We have also revised our bylaws, conducted our annual Member Survey, and will be able to offer a CPHQ prep course in late fall or winter if there is enough interest.

A lot of blood, sweat, and tears went into our bylaws review and revision. Three areas stood out in my mind: 1) Who are we? 2) How do we need to change as a result of no longer being affiliated with NAHQ? 3) How are we organized and how do we really operate? By far the biggest change - again, my own perspective - is in defining who we are. Once we did that, the rest followed naturally. First our purpose: The purpose of the organization is to promote health care quality and support Utah professionals in health care quality across all health care delivery settings. With our purpose defined, our mission, vision, and values followed:

MISSION: To inspire, educate and empower health care quality professionals

VISION: UAHQ will build leaders in health care quality within the communities served.

VALUES: UAHQ affirms the following core values: Integrity, Excellence, Community, Empowerment, and Stewardship.

We hope the simplified mission, vision, and values are meaningful and what you expect of your professional association. In everything we do, we revisit them so that we serve our members as you deserve to be served. I want to offer a special thanks to Sara Phillips who facilitated our retreat, and to Linda Egbert, the primary author of our new bylaws.

Many thanks to all of you who participated in our Member Survey. Your feedback is invaluable and your board is already at work acting on that feedback. Specifically, we are looking at how you prefer to receive information, what topics are of greatest interest to you, and how we can meet the needs of the majority of our members, who are hospital-based, while being inclusive of those in other healthcare settings. A note of congratulations goes out to Robert Ogden of Utah Valley Regional Medical Center, the winner of the gift card

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drawing for completing the survey within the first ten days. It pays to be an early bird, right Robert?

If you would like more information on the survey results contact lynette.hansen@molinahealthcare.com.

If you have any other questions, e-mail me at linda.l.johnson@hsc.utah.edu or contact any [board member](#).

Enjoy the pleasant weather while it lasts!

Linda Johnson, MA, RN, CPHQ, UAHQ President

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Member Survey Results

We were pleased to have 46% of our membership participate in our annual Member Survey. We learned a lot from a short, ten question survey, and we are taking your comments and preferences very seriously as we work to fulfill our mission. Briefly, this is what you told us:

- 88% believe that UAHQ fulfills its mission all or most of the time
- Your expectations of your UAHQ membership are primarily education (60% of respondents) and networking (44% of respondents).
- 68% believe that UAHQ contributes to your professional growth significantly or to a great extent.
- 92% get professional and event information via e-mail. E-newsletters followed with 68%, and 56% get information from colleagues.
- 72% have visited the UAHQ website, for educational offerings including our annual conference, and for organization news.
- Events you would most likely participate in are the annual conference (92%), professional development and educational webinars (64%), and inspirational workshops with networking activities (56%).
- 68% said they would participate in the above mentioned events or activities if they were offered.
- It looks like our annual conference will need to address the impact of current issues in healthcare on patient safety and technology and data.

We encourage you to participate and give us feedback. You are welcome to attend any board meeting. We meet virtually the third Tuesday of each month at 4:00 pm. If you have concerns or agenda items you wish to present, you must submit that to a board member seven days in advance of the meeting. Contact any [board member](#) for more information.

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You're a Quality Professional, Why Not Be Certified?



Certified Professional in Healthcare Quality (CPHQ) is the only accredited certification for healthcare quality professionals. The goal of the CPHQ is to promote excellence and professionalism by documenting individual performance as measured against a predetermined level of knowledge about quality. Certification sets you apart and sets you up for success in

advancing the profession by:

- demonstrating your competence in healthcare quality
- distinguishing yourself from other healthcare quality professionals
- enhancing your credibility

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- demonstrating your dedication to the field
- showing your preparedness to improve outcomes across the continuum of care

UAHQ is ready to help you prepare for the certification exam. If you are interested in having UAHQ offer a prep/review course please contact linda.l.johnson@hsc.utah.edu.

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Update on Transparency in Healthcare and the Role of Apology Following a Medical Error

At our 2016 Annual Education Conference, UAHQ member Marie Prothero presented the role that apology can play when a medical error has occurred. She outlined the need for healthcare providers to be transparent and skilled in providing a meaningful and on target message of sincere apology. Since then, Marie and co-author Janice Morse, have had an article published on the topic: [Eliciting the Functional Processes of Apologizing for Errors in Health Care: Developing an Explanatory Model of Apology](#) If you want more in depth information on the topic, check it out.

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Antibiotic Stewardship: Last Time Nursing Homes, This Time Outpatient Clinics

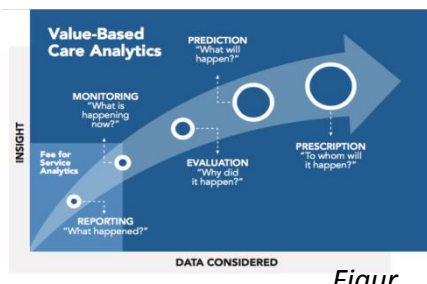


Our last newsletter featured AHRQ's new [Nursing Home Antimicrobial Stewardship Guide](#). Now we turn our attention to outpatient clinics. Doctors short on time, and patients (or parents) demanding antibiotics, fuel resistance. Up to half of antibiotics prescribed are either unnecessary or are prescribed improperly. Support is now available for busy clinicians who want to get on the antibiotic stewardship train.

For clinicians who prefer to “do their own thing” the CDC provides materials through their Get Smart program, [Know When Antibiotics Work in Doctor's Offices](#). HealthInsight offers an [Outpatient Antibiotic Stewardship Tool Kit](#). For clinicians who value both online and hands on assistance in implementing a program, [HealthInsight](#) is ready to help. To get started contact Sandra Debry at 801-892-6606 or sdebry@healthinsight.org

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Barriers to Improvement Innovation



Remember this? In his keynote at our 2016 Annual Conference, Len D’Avolio talked about measuring what matters not just what’s mandated, letting the numbers tell a story, and matching methods to the types of questions they were designed to answer. In other words, the adjacent possible. “The adjacent possible is a kind of shadow future, hovering on the edges of the present state of things, a map of all the ways in which the present can reinvent itself”, says Eddie Smith of Practically Efficient. It is “The ever-present set of opportunities at the boundaries of our reach....the

basic motivation behind all progress.” Recently an article, [Creating Safe Harbors for Quality Measurement Innovation and Improvement](#), surfaced in JAMA that seemed to follow in that same vein, one quality professionals would like to see become a reality, not just a viewpoint expressed in JAMA. One step we can

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take today (or by next Tuesday) is to create a measurement plan, one that includes operational definitions, data collection methods, reporting, and goals. Two excellent resources for building your plan are [Building a Sound Data Collection Plan](#) from iSixSigma and [Establishing Measures](#), part of the Institute for Healthcare Improvement's (IHI) Science of Improvement series.

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Buzzword: HRO

High reliability organization, that is. How many times have we heard that we need to be a high reliability organization? According to David Marx, there is no such thing! Why? Because, in order to be a high reliability organization, a commitment of time and resources is needed to achieve the desired reliability. There is heavy lifting involved here, folks. You will enjoy his brief [There is No Such Thing as a High Reliability Organization](#), a serious but lighthearted 700 words on reliability. Be sure not to miss his description of the space shuttle!

David Marx, JD is an engineer and attorney. He is a pioneer in the internationally recognized safety practice of Just Culture. He draws on experience that spans more than two decades of examining laws, regulations, and industry practices to help lawmakers, regulatory authorities, and organizational leaders fulfill their responsibilities to produce safer outcomes. Marx currently leads Outcome Engenuity, formerly Outcome Engineering, in the development and implementation of values supportive practices and culture within high consequence organizations.

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2017 UAHQ Board

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