

Leveraging Relationships to Drive Quality

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Chief Nursing Officer
Corona Regional Medical Center

Conflict of Interest Disclosure

Sylvia Lozano, FACHE, CPHRM, LSSGB, reported no relevant financial relationships or relationships she has with ineligible companies of any amount during the past 24 months.

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Sam Itani, M.SC., FACHE, reported no relevant financial relationships or relationships he has with ineligible companies of any amount during the past 24 months.

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We heal and



Who We Are

EHP is a top-10 largest Medicaid health plan and the largest not-for-profit Medicare-Medicaid plan in the nation. As the region's first Medi-Cal managed care plan, we currently serve more than 1.6 million residents in Riverside and San Bernardino counties.

For 26 years, we have worked to improve access to quality, affordable health care for vulnerable Inland Empire residents. Our guiding principle is to always put the needs of our Members first. In collaboration with our Providers, our counties and our community Partners, we are committed to improving the delivery of quality health care services for those who need them most.

"We will not rest in our journey toward innovation and excellence"



Mission:

We heal and inspire the human spirit.

Vision:

We will not rest until our communities enjoy optimal care and vibrant health.

Values:

We do the right thing by:

- Placing our Members at the center of our universe.
- Unleashing our creativity and courage to improve health & well-being.
- Bringing focus and accountability to our work.
- Never wavering in our commitment to our Members, Providers, Partners, and each other.





Vision Commitments | Optimal Care

Optimal Care means that our Members and the residents of the Inland Empire are engaged in their care and can trust the following across entities providing care:

- Clinical care quality & outcomes exceed national benchmarks, and our region has created evidence based best practices that are consistently followed.
- Care is accessible, anticipatory, and seamlessly coordinated from prevention through the whole care continuum.
- Care is built on cultural humility and respectful, holistic, human-centered experiences.

Success: By the end of 2030, 100% of our Members are receiving Optimal Care as defined above, and we have greatly influenced care for all who call the Inland Empire home.

Investing in Our Commitments

IEHP noted an opportunity to **create synergy** between the **health plan and hospital to:**

- ✓ Foster optimal health across the continuum that is built on cultural humility and respectful, holistic, human-centered experiences.
- ✓ Collaborate with Hospital Clinical Providers to employ quality practices that are patient-centered and holistic that translate into a safer, higher quality care for our hospitalized members.
- ✓ **Create renewed and re-aligned focus** towards improving clinical outcomes and experiences for our patients/members and their families.

Hospitals such as **Corona Regional Medical Center:**

- ✓ Noted an opportunity for a Culture Shift
 - Improve the human experience for patients, staff, and providers
 - Build relationships with health plans and organizations that share our vision and goals.
 - Leverage relationships to improve patient safety & quality outcomes.



Mission

to provide quality care with dignity and kindness.

Vision

to become a destination for health & healing for our community.

Values

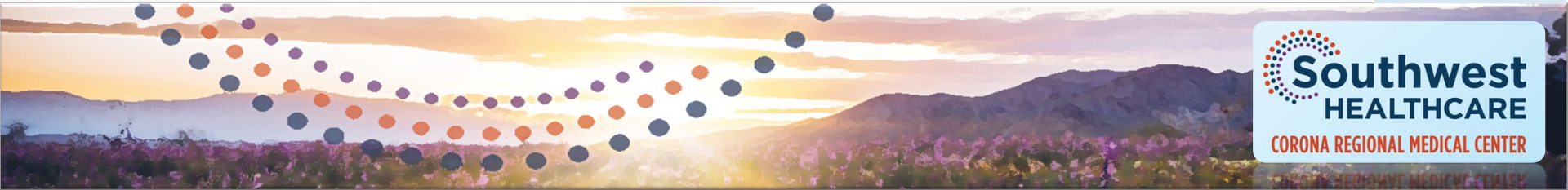
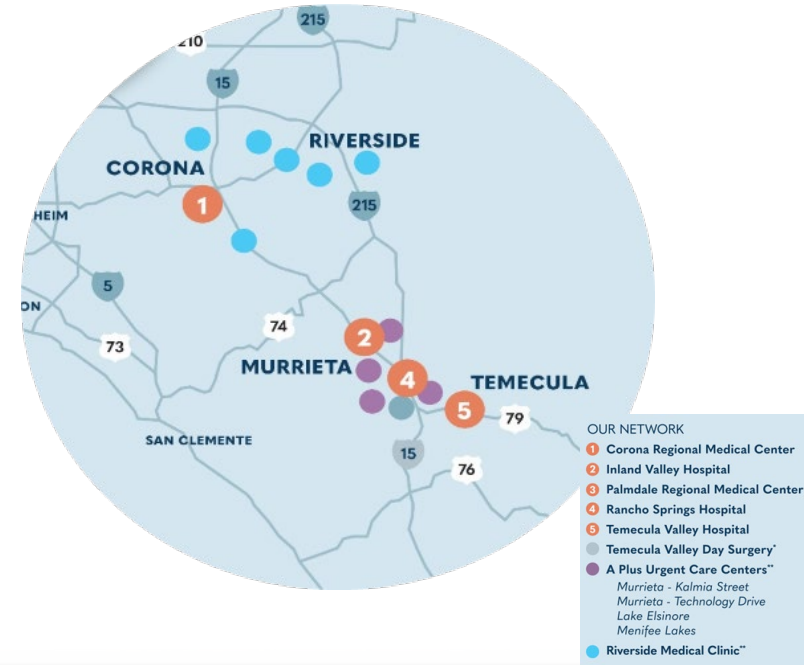
Respect
Excellence
Compassion
Integrity
Teamwork

Commitment to Collaboration

community
Partners
kindness heal compassion
dignity teamwork commitment
Members Providers optimal-care
excellence healing vibrant-health health
Vision focus inspire
integrity Patients
respect kidness improve
courage Mission each-other
accountability
quality Values

Partnership for Progress

- Proposing to enroll in this unique partnership with IEHP and HQI Cares: Implementing Beta Heart Program opened the door for dialogue on risk management and patient safety at the UHS Regional and Corporate level.
- Corona Regional Medical Center is one of five UHS Acute Care facilities in the Southern California Region. Leveraging these relationships, all four Riverside County facilities are actively engaged in the program leading to improved quality outcomes and patient safety.





Pathway to Creating Alignment



HQI is a quality and patient safety affiliate of California Hospital Association, working with 400+ hospitals to realize statewide impact of improvement.

HQI and BETA have jointly formed a program called HQI Cares, which has made BETA HEART available to other (non-BETA-member) California hospitals.

IEHP entered this collaboration by including HQI Cares into its Hospital Pay for Performance (P4P) Program, which provides financial rewards to hospitals that meet quality improvement objectives.

IE  **HP**

Through this innovative partnership, our 32 participating hospitals have access to a world-class improvement program and an opportunity to achieve unprecedented progress in patient safety.



Healing –

For both patients
+ caregivers

Empathy –

Capacity to
express feeling for
what another is
going through
after an event

Accountability –
Organizational
+ individual

Resolution – Resolve
the impact of harm
that results from
medical error or
inappropriate
care

Trust –

Among health
care team +
between
patients/families
+ providers

Culture of Safety

Reporting moves from delayed to **immediate**

Communication + Transparency

From delay, deny and defend to **empathic, immediate, and ongoing**



Rapid Event Response + Analysis

From shame, blame, and train to **human factors process redesign**

Care for the Caregiver

From suffering in isolation to **empathic, immediate, and ongoing**

Early Resolution

From having to “fight for it” to **early offer**



Zeroing in on Patient Safety

Hospital P4P- HQI Cares: Implementing BETA Heart Program

Program Goals:

- Develop an empathic and clinically appropriate process that supports the healing of the patient and clinician after an adverse event;
- Ensure accountability for the development of reliable systems that support the provision of safe care;
- Provide a mechanism for early, ethical resolution when harm occurs as a result of medical error or inappropriate care;
- Instill trust in all clinicians and patients.

5 Program Domains:

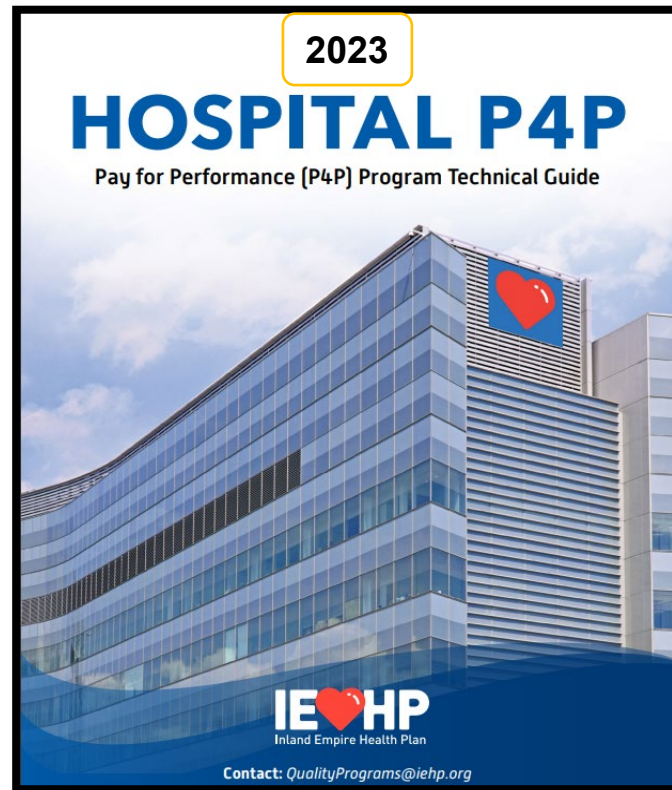
Safety Culture

Rapid Event Response and Analysis

Communication and Transparency

Care for the Caregiver

Early Resolution



Program Milestones



Onboarding includes activities that provide a lens to the level of maturation of the facility on their high-reliability journey

Enables HQI Cares Team to meet the organization where they are and customize interventions to meet their needs



The Gap Analysis Framework

Organizational Document Review

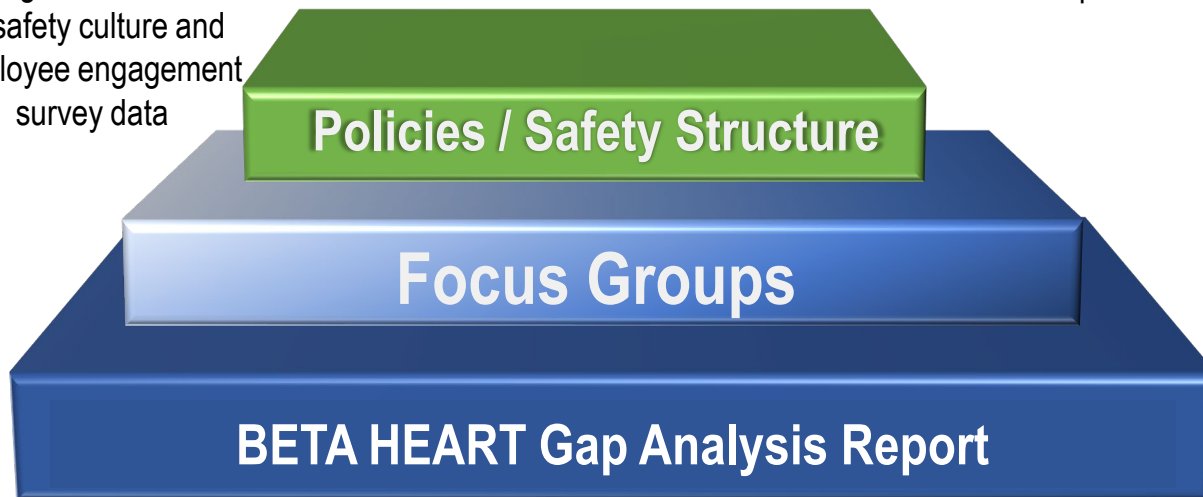
Key documents such as recent survey results, policies, and procedures, including a detailed review of safety culture and employee engagement survey data

Focus Groups

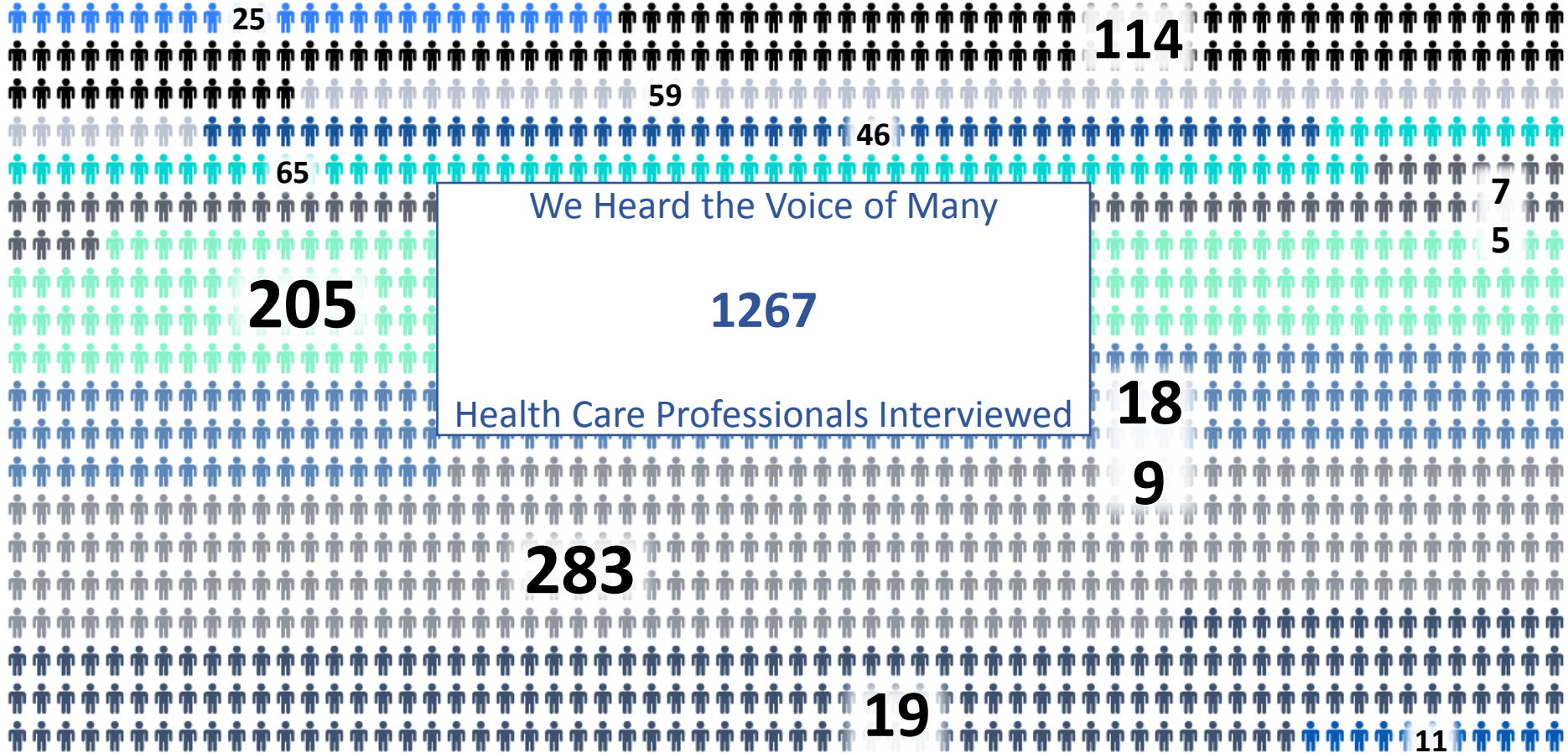
The voice and perspectives of physicians and staff across the organization are scribed verbatim

Gap Analysis Report

Includes Themes, High-Reliability Rating, SWOT, Recommendations, and Next Steps



- Board Members
- Executives
- Medical Staff Leaders
- Medical Staff
- Residents
- Quality/Risk/Pt Safety
- Managers
- Directors
- Frontline Staff
- Ancillary Staff
- PFAC



“What brings you joy...”

Working with everyone here is like a family. I'm serving the community I grew up in and get to see the success stories.

When I clean the room and I see the patient and speak with them I feel like I'm there for a reason. I feel like I'm myself in that room. I treat each patient like me or my family because I don't know if one day that will be me there, and if it was, I'd want a clean room.

People will go out of their way to help each other, even outside of work. Every day is an opportunity to make a difference.

Seeing your patients go from being sick to transitioning to being able to go home. You know especially when you see them at their worst and then they're healed.

Being able to really connect with people. In ED it's really exciting to get the big save, but over time I've derived more joy from getting to sit down and be with the patient and family and extend empathy and compassion.

Teaching about implicit bias to our family medicine residents. Most of this community is Latino or Black, so being able to teach the tools for compassionate care and how to drop our biases at the door.

Mentoring the new nurses who come fresh from school and watching them connect with patients and realize why they're here. Even if it's just holding someone's hand while they're passing, knowing it's their purpose in that moment.

That I'm able to share a prayer with patients even if we have different beliefs to provide that comfort.

We're part of one big team making sure to keep the patient happy. A lot of us have the integrity that it isn't about what you see, it's about what you do behind closed doors to do the right thing.

“If you had a magic wand, what one thing would you change...”

Just for our work to be valued and appreciated.

That other full hospitals can't refuse our patients. I don't think they understand that we have to watch people decompensate and die in our hallways from very treatable things—we just don't have the acuity to do it here.

To be heard more by the management team. Like when we see ways to improve or prevent and it takes a while for them to listen to us.

Accountability, from the no response problems to provider issues; things being addressed and stopping bad behavior through holding people accountable.
Don't treat people like a number.

Education. People are willing if they're provided with the tools.

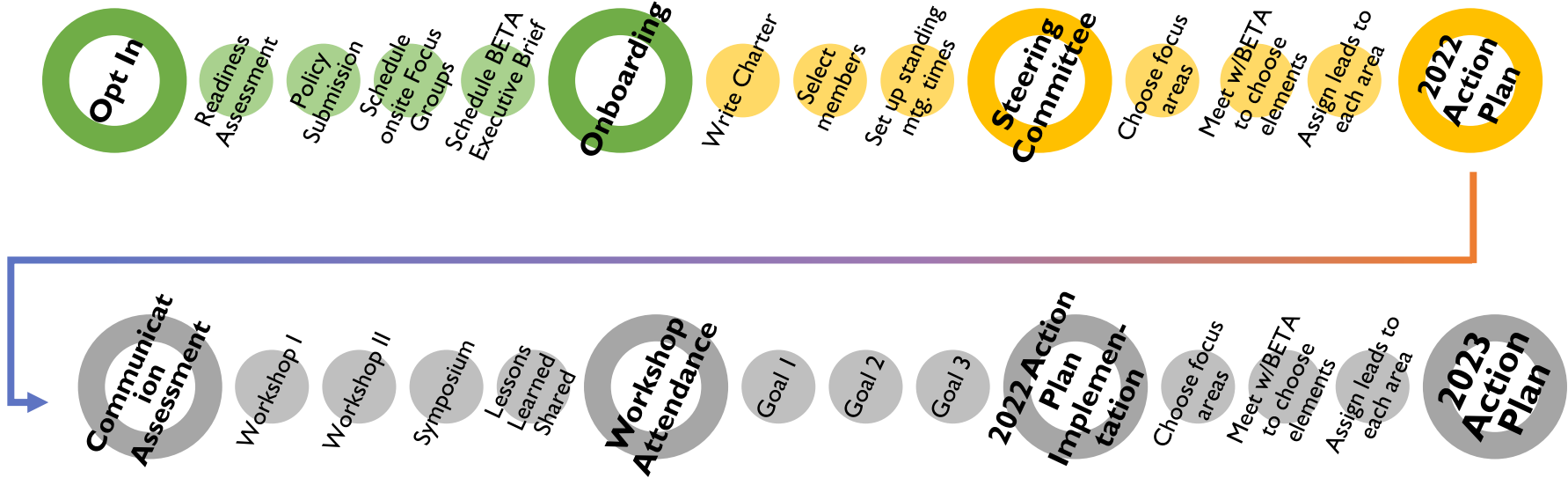
When leaders say something will become a standard for docs and then docs refuse to do it, and nothing happens to enforce it. Physicians can do whatever they want because of the "well who else are you going to get to do it out here" excuse.

An entire culture shift so that we can get people on board with best practices.

A better understanding of what everyone at the organization does so we have greater empathy for their struggles in their area. I don't think admin always thinks of what it takes for all of us to do our jobs and sometimes vice versa.

Senior leadership rounding on all staff and being more visible to frontline.

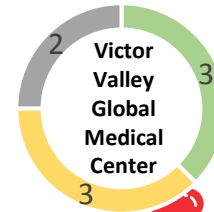
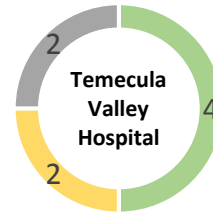
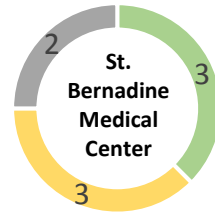
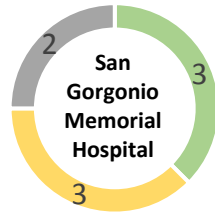
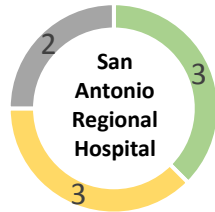
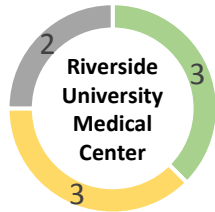
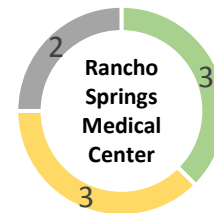
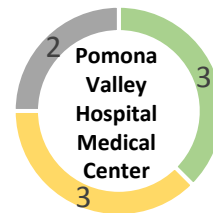
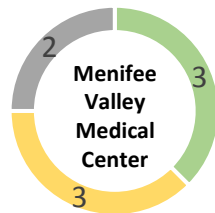
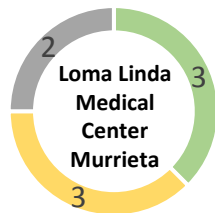
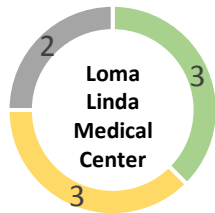
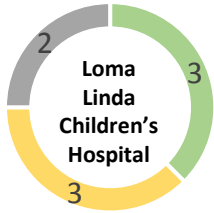
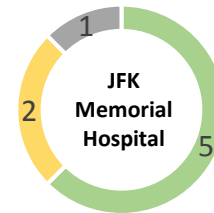
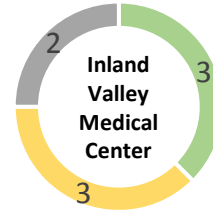
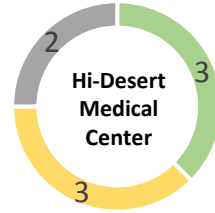
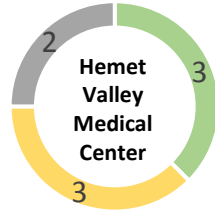
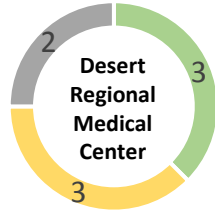
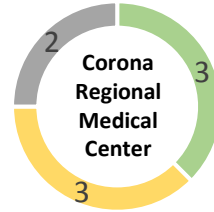
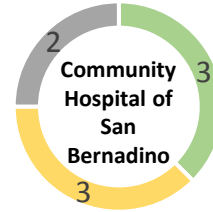
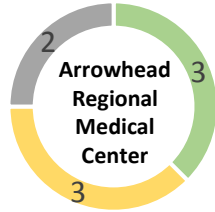
Milestone P4P Progress Tracker



IEHP Hospital Key Milestones

LEGEND

- Complete
- In Progress
- Not Started



BETA HEART® Workshops Introduce Domains of HQI Cares in a Sequence



Executive Retreat



145 attendees
21 hospitals

Physician Roundtable



23 attendees
15 hospitals

Workshop 1:

Culture of Safety
Care for the Caregiver



96 attendees
24 hospitals



Workshop 2:

Communication and Transparency
Rapid Event Response and Analysis

112 attendees
24 hospitals

Workshop 3:
Early Resolution



143 attendees
32 hospitals



IEHP Hospital Areas of Focus



13 organizations selected Culture of Safety



2 organizations selected Rapid Event Response and Analysis



6 organizations selected Care for the Caregiver



3 organizations selected Communication and Transparency



Culture of Safety Example of Recommendations and Next Steps

Begin to Develop the Organization's Culture of Transparency

- Share the results of the Gap Analysis
- Develop a communication strategy
- Invite physicians and staff to participate in HQI Cares activities

Administer a Culture of Safety Survey

- Administer survey that is scientifically validated instrument
- Ensure greater than 60% response rate
- Develop a process for conducting formal debriefs at the unit level
- Engage frontline staff in PI activities

Consider Opportunities to Implement Just Culture

- Review policies related to behaviors and accountability
- Engage key leaders in Identifying opportunities for formal adoption and training in Just Culture principles

Review Organizational Policies and Procedures

- Update as needed to ensure policies are organization-specific, consistent with current practice and reference California regulations and standards
- Review your current "Disclosure" Policy. Plan to revise where necessary to bring into full alignment with HQI Cares/BETA HEART terminology and process

Rapid Event Response Analysis Example of Recommendations and Next Steps

Evaluate Event Reporting Process

- Review current event reporting data
- Reinforce importance of event reporting process
- Build training into orientation
- Develop a process for sharing event reporting

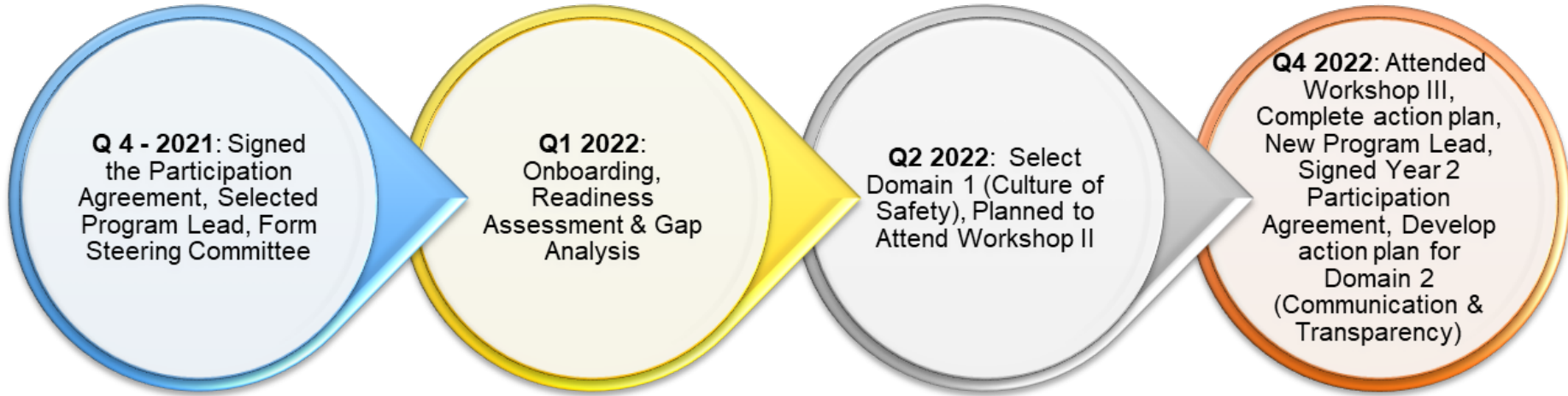
Identify Opportunities to Engage the Medical Staff in the Event Review Process

- Develop a plan for strengthening the relationships and building trust
- Consider opportunities to engage physician leadership and frontline physicians

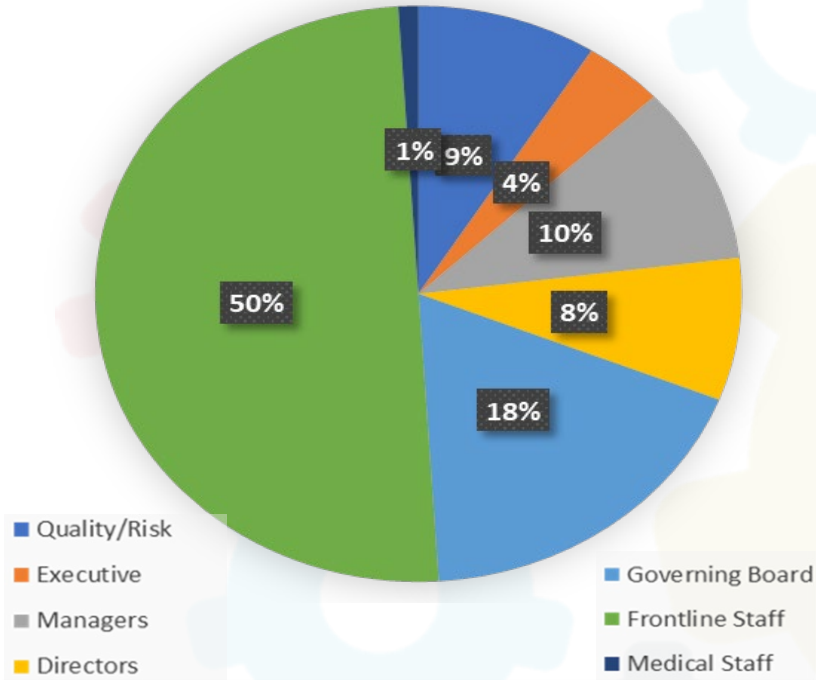
Consider Opportunities to Broaden Effort to Engage Patient and Family Members in Quality Activities

- Engage patient and family safety advocates as partners in developing strategies around communication after harm

CRMC Program Milestones: Year One



Gap Analysis & Readiness Assessment



Strengths

- Engaged board members and medical staff
- Trust & teamwork
- Clear reporting process
- Embedded Just Culture Principals
- Active participation by staff and patient safety activities

Opportunities

- Communication after an adverse event
 - Consistent rapid dissemination for critical process improvements
 - Lessons learned & next steps
 - Continuing inclusion patient/family
- Care for the Caregiver: Peer to Peer Support after an event

CRMC Program Milestones: Year Two

Q1 2023: Attended Workshop I & Regional Trainings to improve Communication & Transparency

Q2 2023: Attended Workshop II, Regional Trainings


Q3 2023: Attended Workshop III, Validate progress, Choose Year 3 Domain

Q4 2023: Sign Year 3 Participation agreement, Develop Action Plan for Domain 3

CARE FOR THE CAREGIVERS
An organizational program that ensures emotional support for members of the healthcare team involved in or impacted by an adverse event.

BENEFITS
Immediate & ongoing support from peers and supervisors
Provide resources to assist individuals requiring more extensive support
Participation in an open discussion in a nonjudgmental manner

Care for the Caregiver
Peers Engaging with Empathy to build Resilience and Support



Word cloud terms: LOVE, sibling, brothers, wife, family, grandparent, son, parent, neighbor, partner, care, support, mother, care, support, support, family, friend, mother, friend, grandparent, spouse, sister, caregiver, Love

- Formal and Informal emotional support with Trained Peer Supporters
- Organizational Commitment to improve staff and patient outcomes
- Improve Staff/ Provider Retention and Well-Being
- Dedicated Wellness Spaces

Leadership ▲ Commitment ▲ Collaboration ▲ Communication ▶

Join us for **Coffee & Conversation**

Hosted by
Phyllis Snyder, CNO & Yvonne Lyn-Slagian, ACNO

Friday, September 30th
Meet us in the MST-2/Stepdown Breakroom!
Nursing Update Presentations begin at:

6:00am
6:30am
7:00am
7:30am
8:00am

Open Forums will follow each presentation




POMONA VALLEY HOSPITAL
MEDICAL CENTER

Tuesday Noon Conference
July 26, 2022

**When Words and Actions Matter Most:
The Case for Peer Support**

Tim McDonald, MD, JD
Chief Patient Safety and Risk Officer of RL Daxiv

Dr. Tim McDonald is an accomplished physician and attorney, with more than 30 years of experience. By using the CANDOR approach, he has assisted over 800 hospitals and health systems implement a culture of "normalized compassionate honesty" combined with the transformation to a "fair and accountable culture." Dr. McDonald has received numerous Patient Safety awards including the American College of Medical Quality's Founder's Award, the Institute of Medicine – Chicago Patient Safety Award, and the MITSS Hope Award.




Highlights

Return of the Culture of Safety Survey

Starting October 31st, we will begin hosting our annual Safety Culture Survey.


The Safety Culture Survey measures teamwork, safety, job satisfaction, stress recognition, perceptions of unit management, perceptions of hospital management, and working conditions.

The results of the Safety Culture Survey will be shared with all KPC Hemet Staff. Results will be presented by unit managers/leaders. You can also look for the results here in the KPC Talks Safety Newsletter.

KPC Talks Safety SEPTEMBER 2022

All Staff Members who complete the Safety Culture Survey will receive raffle tickets for 3 big prizes or weekly money envelope drawings.

- 1st week (10/3 to 10/09) will receive 6 tickets
- 2nd week (10/10 to 10/16) will receive 4 tickets
- After 10/16 you will receive 2 tickets



In a dark place we find ourselves, and a little more knowledge lights our way.
-Yoda

RESPONSE GOAL OF 80%

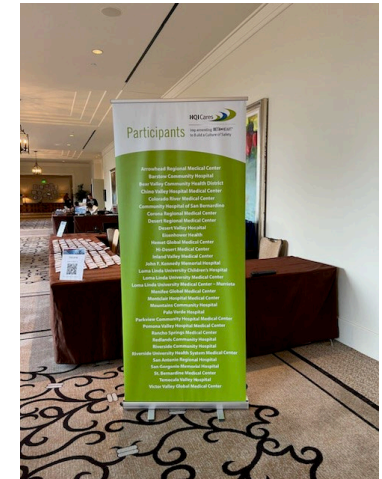
Each department that achieves 80% or more will have a Nacho Bar Party of their own to celebrate! Everyone who participates has a chance to win money, gift cards, treats and prize giveaways.

Cohort 1 Hospitals

Arrowhead Regional Medical Center
Barstow Community Hospital
Bear Valley Community Hospital
Community Hospital of San Bernardino
Corona Regional Medical Center
Desert Regional Medical Center
Hemet Global Medical Center
Hi-Desert Medical Center
Inland Valley Medical Center
John F. Kennedy Memorial Hospital
Loma Linda University Children's Hospital
Loma Linda University Medical Center
Loma Linda University Medical Center - Murrieta
Menifee Global Medical Center
Parkview Community Hospital Medical Center

Pomona Valley Hospital Medical Center
Rancho Springs Medical Center
Riverside Community Hospital
Riverside University Health System
San Antonio Regional Hospital
San Geronio Memorial Hospital
St. Bernardine Medical Center
Temecula Valley Hospital
Victor Valley Global Medical Center

100%
of Cohort 1
Organizations
opted in for a
second year



New Organizations for 2023

Chino Valley Hospital Medical Center

Colorado River Medical Center

Desert Valley Hospital

Eisenhower Health

Montclair Hospital Medical Center

Mountains Community Hospital

Palo Verde Hospital

Redlands Community Hospital



Testimonials



Jennifer McDowell
Risk Manager
St. Bernardine Medical Center

“It has been an exceptionally gratifying experience for Barstow Community Hospital in working with HQI Cares: Implementing BETA HEART. We greatly value the tools, resources, calls, conferences, and insight provided to assist and support us in our goal to improve our Culture of Safety, our approach to Providing Care for the Caregiver and much more. Implementing BETA HEART has already made a tremendously positive impact for our patients and staff thus far, and we look forward to further great future success. We truly value & appreciate the entire BETA HEART team for their leadership, mission, vision, and efforts – thank you, all!”



**Wray Ryback, MHA,
CPHRM**
Risk Manager
Pomona Valley Hospital
Medical Center

“Working with HQI Cares/BETA Heart team has been a great experience which has allowed Pomona Valley Hospital Medical Center to illuminate the importance of a well-defined patient safety program. We have already been practicing some of the BETA Heart guidelines and have found that our Associates are looking forward to the development of our C4C program to support our staff. I truly believe the efforts of IEHP, HQI Cares and all our local hospitals will result in a more transparent, supportive, and caring health care system in Southern California.”



**Kim Johnson MSN, RN,
CCRN**
Assistant Chief Nursing Officer
Desert Regional Medical Center

“Progress starts each day when we choose to take one step forward. The journey with HQI: Cares implementing BETA HEART is progress even its baby steps!”





Looking to the Future

Continue to Align Hospitals and IEHP

“Driving towards common goals”



“Health Plan of choice for quality”

- ~ Driving excellence primarily through ambulatory care
 - ~ Regulatory agency: NCQA
 - ~ Engaging members in their care (CAHPS)
- ~ Improving quality of care for members and prescribing practices of our providers (HEDIS)
 - ~ Applying methods to achieve timely access for our members while optimizing our resources
- ~ Targeting a NCQA 4-star or above health plan rating

“More alike than different”

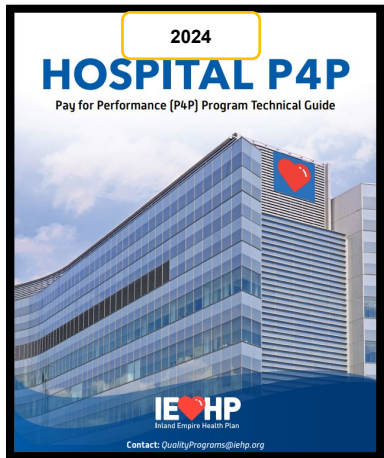


“Hospital of choice for quality”

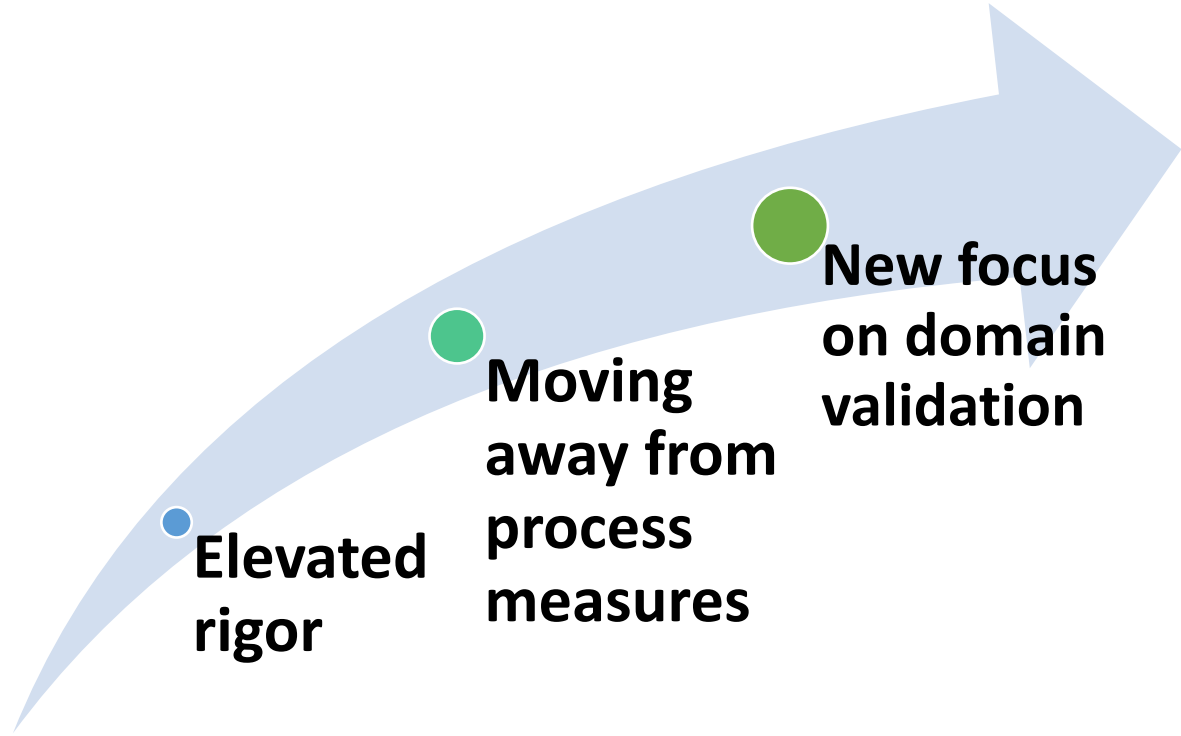
- ~ Driving excellence primarily through acute care
 - ~ Regulatory agency: TJC
 - ~ Engaging patients in their care (HCAHPS)
- ~ Improving quality of care for patients and prescribing practices of our providers (CMS)
 - ~ Applying methods to achieve timely access for our patients while optimizing our resources
- ~ Targeting a CMS 3-star or above hospital rating



Looking Ahead to 2024



*Hospital
Pay for Performance*
IE♥HP



Optimal Care Universal Integration

"Holding providers accountable to high-quality standards"

"Narrowing our quality network to secure sustainable care outcomes"

"Establishing a viable and aligned health care safety net for our members"



"Reducing clinical barriers in care coordination"

"Facilitating collaborative efforts to drive improvement in health care delivery"

"Rewarding the provision of high-quality care by our providers"



"We will not rest until our region's hospital care is nationally recognized as excellent"

"Optimal Hospital Care realized"

"Members at the center of our Universe"

"Vibrant Health for all"



Hospital
and
Ancillary Relations

"Right care, right place, right time"

2030

"Hospital-Health Plan Alignment"

"Network and Community Integration"

"Organizational Strength secured"

"Advancing compassionate End Of Life Care"



Collaboration – the ultimate intertwining of skills, passions, and knowledge – is what **concocts the most shatterproof forms of changemaking.**

IE  **HP**
Inland Empire Health Plan
Live Wholeheartedly.

2023

HQI and Hospital Council
ANNUAL CONFERENCE

LAKE TAHOE

Questions

Thank you

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