

## President's Message

*Dear NHAHQ Members:*

The NHAHQ Board would like to welcome all NHAHQ members to what we hope will be an exciting and productive year! I want to personally thank you for giving me the opportunity to serve as your President. This has been a busy and challenging fall for the Board. Your NHAHQ Board has been very busy working to further the mission of the Association.

I will share some of our accomplishments. We have thoroughly reviewed and revised the Bylaws of the organization. NHAHQ members were sent a draft of these bylaws for their review prior to voting on them at our Annual Membership on October 14<sup>th</sup>.

We have also been planning educational sessions for the year and our one day conference to be held on April 12, 2006 at the New England Conference Center in Durham. Our plan this year is to offer our members educational sessions to assist them to grow professionally in their roles. To further that effort, we are planning a two-day study session for members wanting to obtain their CPHQ certification. This will give our members the opportunity to obtain this valued certification.

We have drafted a budget for the upcoming year for our members' review and approval.

The NHAHQ Board wants to be the very best "partner" we can be to our members. We want to provide involved leadership, strong communication and educational opportunities for both new and returning members. We strongly believe that any organization can increase its level of performance.

I would encourage members to get involved in your organization. Each of us can find ways to serve and create the energy necessary to have the organization we all want.

Without you, the membership, there is no Association and no opportunity for us to join together to improve our organization! I look forward to see you at future meetings and to hear from each of you.

For now ...

Sincerely,

*Gloria Thorington*, President, NHAHQ  
[gthorington@lrgh.org](mailto:gthorington@lrgh.org)

## NHAHQ Educational Meetings for 2005-2006

October 16, 2005-NH Hospital Association  
January, 2006 CPHQ Study Session date to be determined  
February 3, 2006- NH Hospital Association  
April 12, 2006-Day-Long Conference-New England Conference Center  
June 2, 2006- NH Hospital Association

### Inside This Issue

- **President's Message- 1**
- **Annual Meeting- 2**
- **Leadership Corner- 3**
- **CPHQ Certification- 3**
- **Moving Improvement- 4**
- **Quality Legislation-5**
- **Membership Application-6**

# NHAHQ 2005 ANNUAL MEMBERSHIP MEETING: CHANGE METHODS & PROMOTING INNOVATION

**Friday, October 14, 2005**  
**NHHA Association, 125 Airport Road, Concord, NH**

## AGENDA

**DO NOT  
MISS  
OUR  
ANNUAL  
MEETING  
AND  
EDUCATIONAL  
CONFERENCE  
ON  
OCTOBER 14<sup>th</sup>.**

8:30 - 9:15	Coffee and Registration
9:15 - 9:30	Opening Welcome and Introductions – <i>Gloria Thorington, President</i>
9:30 - 10:45	Improvement Methods: How Do They Compare? Which is Right For Health-care? <i>Malcolm Baldrige</i> ; Six Sigma; Lean Manufacturing; ISO9000; Clinical Microsystems – <i>Anne Warner, MS, ASQ Certified Quality Manager, NorthEast Center for Excellence; Scott Goodwin, RN, MBA, CPHQ, and Eileen Keefe, RN, MSN, Parkland Medical Center</i>
10:45 - 11:00	Break
11:00 - 12:00	Improvement Methods ( <i>continued</i> )
12:00 - 1:00	Lunch and Annual Business Meeting
1:00 - 2:00	Diffusion of Innovations – What to Consider in Promoting Change In Your Organization - <i>Scott Goodwin, RN, MBA, CPHQ</i>
2:00 - 2:15	Break
2:15 - 3:15	Innovation Diffusion Game – <i>Scott Goodwin</i>
3:15 - 3:30	Closing Remarks/Meeting Evaluation/Adjournment

To register, complete this form below and mail, along with your payment, to:  
Scott Goodwin, Quality Director, Parkland Medical Center, 1 Parkland Drive, Derry, NH, 03038  
Checks should be made payable to NHAHQ.

- I will attend the meeting and join NHAHQ (enclosed is \$35 for NHAHQ membership for 9/2005-8/2006 and \$6 for lunch) Total \$41.
- I will attend the meeting but not join NHAHQ (enclosed is \$30 registration fee and \$6 for lunch). Total \$36.
- I will attend the meeting and have already paid my membership fee for 9/2005-8/2006. Total \$6 for lunch.

Name:
Title/Organization:
Address:
Phone Number(s):
Email:

\*No refund will be given if you do not cancel within 7 days of the conference.

For additional information, contact Len Deneault, NHAHQ Education Chair, at  
(603)-759-5162 or e-mail: [ldeneault@comcast.net](mailto:ldeneault@comcast.net)

## LEADERSHIP CORNER

By Len Deneault

As many of you know, I have served as an Examiner/Senior Examiner for the Malcolm Baldrige National Quality Program for several years, providing me a unique opportunity to learn from the best in leadership and their examples in all forms of small and large organizations.

As members of NHAHQ, we are mostly quality professionals that embrace and practice some of the embodiments of true leadership. In the spirit of learning, allow me to share my learnings with you. I hope they are of value. Let's raise the bar together.

Recall the people in your life. Wouldn't you follow someone you consider a true leader to the ends of the earth? You also know "leaders" we wouldn't follow across the street. So, what constitutes a leader?

First off, the best do not crown themselves leader, nor would they want to. This recognition is best coming from others. Here are some attributes that I consider belong to some of the best in leadership.

1. Systems thinkers. A systems approach is used in solving problems, rather than scapegoating.
2. Knowledge of cause/effect. Leaders anticipate the effect of their decisions

on the organization, its systems, and the people.

3. Seeks input and expertise. Leaders are open to other ideas and learn to ask the right questions from those who know their jobs best.
4. Supports change. They demonstrate genuine commitment and support follow through to make a better environment.
5. Leaders influence, mentor, and motivate. In engaging others, they find a teaspoon of sugar goes a lot further than a pound of salt.
6. Leaders have positive core values. They possess and demonstrate (a key word here) these values, including those that concern treating others with dignity and respect, and place value on others' work.
7. Leaders eliminate fear. They not only free people, they free ideas.

Does it take work to be leader? You bet. We all aspire to be the best. Developing these attributes helps create a thriving environment of progress, motivating us further and invoking our passions, and ultimately, comfort in the satisfaction that we work "to make a difference".

Let me know what you think. Let's dialogue – E-mail me at <lend@necenter.org>.

## CPHQ Certification

The National Association for Healthcare Quality (NAHQ) is the parent professional association of the Healthcare Quality Certification Board (HQCB) which administers the distinctive Certified Professional in Healthcare Quality (CPHQ) certification exam.

The CPHQ certification recognizes professional and academic achievement by individuals in the field of healthcare quality management. The comprehensive body of knowledge includes quality management, quality improvement, case management, utilization management and risk management at all employment levels and in all healthcare settings. The CPHQ program is fully accredited by the National Commission for Certifying Agencies of the National Organization for Competency Assurance in Washington, DC, the only national voluntary program in the field to achieve this accreditation.

The CPHQ examination is available on an ongoing basis at over 100 computer testing centers located throughout the United States. The NH Association for Health Care Quality is planning on offering a two day study course for members planning on taking the CPHQ examination.

*Please visit the CPHQ and HQCB web-site ([www.cphq.org](http://www.cphq.org)) to receive detailed information about this distinction of excellence.*

### Interested in Legislative Updates?

Go to [www.nhha.org](http://www.nhha.org) for the latest New Hampshire Hospital Association Legislative updates.

## **MOVING IMPROVEMENT TO THE POINT OF CARE**

By Scott Goodwin

Fixing Healthcare from the Inside, Today by Steven J. Spear, IHI Fellow  
Harvard Business Review, September 2005

In the September 2005 edition of the Harvard Business Review, Steven Spear, a fellow at IHI, describes a model for promoting small, continuous changes at the point of care by clinical staff that seems very reasonable in concept but represents significant challenges to healthcare organizations. In the article, *Fixing Healthcare from the Inside, Today*, Spear translates the Toyota Production System concept of “tightly coupling the process of doing work to the process of learning to do it better as it’s being done” into healthcare and describes some organizations that have been able to make it work, at least on a limited basis.

He describes four basic organization capabilities that make it possible for people doing the work to find ways of doing it better without putting a patch on it, kicking it up to administration or waiting for a team comes together. These capabilities are:

- 1) Designing work as a series of ongoing experiments that immediately reveal problems. This means clearly describing how the work is to be performed and eliminating ambiguities in the work. Ambiguities such as who is responsible for specific tasks.
- 2) Problems are addressed immediately through rapid experimentation
- 3) Solutions are disseminated adaptively through collaborative experimentation
- 4) People at all levels of the organization are taught to become experimentalists

If you were going to implement these basic organizational capabilities in a hospi-

tal, what would it look like? Spear describes the experience of Western Pennsylvania Hospital’s pre-surgery nursing unit. In this unit, he describes the role of the clinical coordinator as a key part of the application. The clinical coordinator provided the “problem-solving support” that Spear felt was essential to the success of the unit in using these capabilities.

According to Spear, the clinical coordinator’s prior to the changes was the person of last resort that staff sought out for difficult problems they couldn’t solve. In implementing the new approach, the clinical coordinator’s role was redefined. This position became a key point in improving quality. All process problems, even those the staff could work around, were now brought to the clinical coordinator. The clinical coordinator worked with the individual who found the problem to develop real process changes, not temporary patches, to eliminate the problem. The change was tested and the process redesigned. Spear states that the clinical coordinator was supported by a quality mentor experienced in the quality techniques. This mentor served as a coach and advisor. In the past year, more than 50 problems were brought by staff to the clinical coordinator.

Developing the structure to support small, continuous improvements at the point of care is a challenge for healthcare organizations. Professional silos, rigid hierarchy and traditional methods inhibit staff initiative and creativity. Steven Spear makes the case that if organizations such as Toyota, Southwest Airlines and others can find new ways of unleashing the power of staff to achieve new levels of quality, healthcare should be able to do it, too. Let’s hope he is right.

**Visit** the NHAHQ web site, updated monthly, for information on: Membership, Education, Career Opportunities, Newsletter, Teams/Committees, Legislative Updates, Information Share, Calendar of events, Healthcare Quality Links, Information Request Form. Get the answers and assistance you need to quality, utilization, care management, or risk management questions

### **YOUR NHAHQ BOARD 2005-06**

#### **President:**

Gloria Thorington  
(603) 527-2934

E-Mail:

[gthorington@lrgh.org](mailto:gthorington@lrgh.org)

#### **President Elect & Membership**

##### **Chairperson:**

Scott Goodwin  
(603) 421-2491

E-Mail:

[Scott.Goodwin@HCAHealthcare.com](mailto:Scott.Goodwin@HCAHealthcare.com)

#### **Past President:**

Laura Anderson  
(603) 227-7000

E-Mail:

[landerso@crhc.org](mailto:landerso@crhc.org)

#### **Treasurer:**

Kathy Rhinehart  
(603) 421-2278

E-mail:

[Kathy.Rhinehart@HCAHealthcare.com](mailto:Kathy.Rhinehart@HCAHealthcare.com)

#### **Secretary / Communication**

##### **Chairperson:**

Charles White  
(603) 752-2200

E-Mail:

[cwhite@nchin.org](mailto:cwhite@nchin.org)

#### **Educational Chairperson:**

Leonard Deneault  
(603) 759-5162

E-Mail:

[lend@necenter.org](mailto:lend@necenter.org)

#### **Bylaws Chairperson:**

Marian Wichert  
(603) 622-2954

E-Mail:

[mwichert@cmcnh.org](mailto:mwichert@cmcnh.org)

# QUALITY LEGISLATION?

By Len Deneault

This past summer, the State of Washington passed amended legislation pertaining to quality assurance (QA) in boarding homes, nursing homes, hospitals, peer review (PR) organizations, and coordinated quality improvement (QI) plans.

It is the legislature's belief that a law is needed to promote the QA process and safe patient care. They also find that communication, sharing, and QA efforts will achieve the goal of providing high quality and safe patient care to citizens and ensure consistency of care across organizations and practices. In ensuring this, they set requirements for QA committee membership, when they will meet, and their responsibilities. The intent here is a positive one.

Strangely enough, a section allows the JCAHO and any other accrediting organization to review and audit the records of both QI and PR committees in connec-

tion with their regular reviews.

To be fair, they also set into law some very good things around the protection of quality improvement activities, privacies, and so on.

The real point to this article is the perception that in order to ensure quality, it must be regulated. The danger here, folks, is that quality is being legislated to be the responsibility of a particular few. It is common for improvement activities to be coordinated by a central group, but by assigning quality in this manner, wouldn't this dampen overall organizational progress and effectiveness of improvement and patient satisfaction?

See the legislation at:

<http://www.leg.wa.gov/pub/billinfo/200506/Pdf/Bills/Session%20Law%202005/1569-S.sl.pdf>

Let me know what you think. Let's dialogue – E-mail me at [lend@necenter.org](mailto:lend@necenter.org).

## MEMBERSHIP

Complete and submit the enclosed form if you are interested in being a member of the New Hampshire Association for Healthcare Quality. You can also go to our web-site at:

[www.nhha.org/profsoc/about.html](http://www.nhha.org/profsoc/about.html)

Or e-mail Scott Goodwin at: [scott.goodwin@hcahealthcare.com](mailto:scott.goodwin@hcahealthcare.com).

## Don't Miss the NHAHQ Educational Sessions

Here are some of the topics we have covered in the past at NHAHQ Educational Sessions:

- Highlighting Performance Measures – Computerized Patient Records, Progress Notes, Clinical Reminders and External Peer Review
- Project Management – Strategies for Success
- Centers for Medicare and Medicaid Services Update: 7<sup>th</sup> Scope of Work: Adverse Event Reporting and Public Disclosures
- Considering Quality – Offense, Defense, Benefits and Costs
- Attaining CPHQ Certification
- NH Partnership for End-Of-Life Care Project
- Understanding and Utilizing State Health Data for Potential QI Efforts
- Publishing
- Innovations in Patient Safety and the Evolving Role of the Quality Professional
- Overview of the Pharmacy Intervention Project
- Medication Use Safety: Advancing a Non-Punitive Culture at LRGHealthcare
- Leadership for Medication Safety

## Journal for Healthcare Quality

The following list of JHQ continuing education articles is available for your review online at:

<http://www.nahq.org/journal/online/TOC.html>

September/October 2005 Table of Contents:

Chaos and Complexity: Applications for Healthcare Quality and Patient Safety - *Heidi Benson*

Learning from Unexpected Events: A Root Cause Analysis Training Program - *Stormy C. Sweitzer, Michael P. Silver*

Overcoming Challenges to Integrating Behavioral Health into Primary Care - *Andrew Kolbasovsky, Leonard Reich*

Challenges to Performance-Based Assessment for Community Physicians - *Melodie Blackledge, Uma R. Kotagal, Lisbeth Lazzaron, Pamela J. Schoettker, Melissa R. Kennedy, Michelle Stultz, Stephen Muething*

A Computerized Surveillance System for the Quality of Care in Childhood Asthma - *Ronit Peled, Asher Tal, Joseph S. Pliskin, Haim Reweni*

## HOT WEB SITES

**NH Assoc. for Healthcare Quality:**  
[www.nhha.org/prof\\_societies/sites/nhahq/about.html](http://www.nhha.org/prof_societies/sites/nhahq/about.html)

**National Academy for State Health Policy – Status of Statewide Patient Safety Coalitions:**  
[www.nashp.org](http://www.nashp.org)

**CPHQ Certification:**  
[www.cphq-hqcb.org](http://www.cphq-hqcb.org)

**Journal for Healthcare Quality continuing education articles:**  
[www.allenpress.com/jhq](http://www.allenpress.com/jhq)

**Medication reconciliation tools:**  
<http://www.healthynh.com/fhc/initiatives/performance/medrecon.php>

**100K Lives Campaign**  
<http://ihi.org/IHI/Programs/Campaign/Campaign.html>

