



WORKING TOGETHER TO BUILD A
Safer Tomorrow



Message from the CEO

To Our Members:

We've established a culture in Michigan that is distinct from other states. Our member hospitals are not afraid to tackle the big issues or unite with a common vision — discovering what works and what does not regarding patient safety and culture. The MHA Keystone Center continues to lead our members toward a common goal of making care safer and more reliable, both of which are critical components of quality healthcare and both of which are a shared responsibility.

As part of our mission at the MHA, we are committed to achieving better care for individuals, better health for populations and lower per-capita costs. Our member hospitals/health systems, including the hands-on healthcare professionals who partner with them, understand that delivering high-value and high-quality healthcare requires us to come together in settings like MHA Keystone Center workshops, webinars, and various trainings to participate and engage in shared learning and best practices. Despite our member hospitals operating in a competitive environment, their first priority is high-quality patient care, which is why these collaborative efforts achieve such remarkable results.

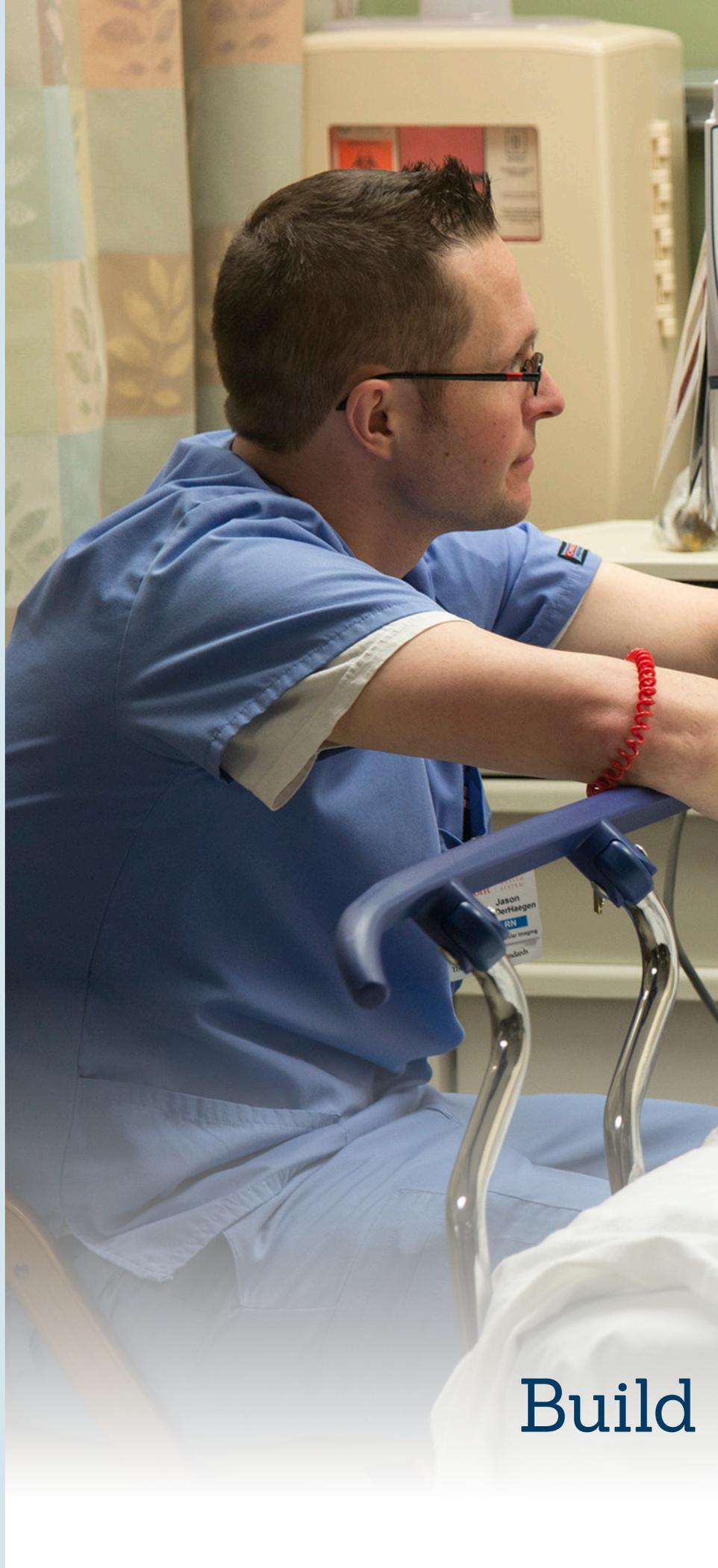
As we review the 2016-2017 program year in the MHA Keystone Center Annual Report, we are proud of the progress Michigan hospitals have made for their patients. We appreciate your continued commitment to improve the delivery of healthcare, and we look forward to working with you again in the upcoming program year.



Sincerely,

A handwritten signature in black ink that reads "Brian Peters". The signature is written in a cursive, flowing style.

MHA CEO Brian Peters



Build



MHA Keystone Center. Member Hospitals & Health Systems. State & National Patient Safety Experts.

Together, we are part of something important. We're changing healthcare and improving patient safety and quality by implementing evidence-based, best practices that are supported by data. Our person-centered philosophy fuels our purpose and work. It drives us to continually improve and build safer and more reliable healthcare.

Michigan Health & Hospital Association (MHA) Keystone Center member hospitals are voluntarily participating in programs to improve the quality and delivery of healthcare by tackling big issues on a daily basis.

Every day, we're exploring new and innovative ways to prevent harm, reduce healthcare costs, and improve patient safety.

TOGETHER, WE'RE MEETING THE CHALLENGES OF TODAY TO
a Safer Tomorrow and Beyond

Building a Person- and Family-Centered Healthcare System: Patient and Family Engagement (PFE)

For the 2016-2017 program year, the MHA Board of Trustees recognized the importance of partnerships with patients and families by identifying a goal that all Michigan hospitals have a functioning patient and family advisory council (PFAC) and/or have patient/family advisors on existing quality and safety improvement teams.

To date, 114 hospitals (86 percent) have established a PFAC and/or partnered with patient/family advisors on existing improvement teams. The MHA Keystone Center released a revised Road Map to Patient and Family Engagement in February 2017 with 12 recommended practices and policies for hospital adoption.



PFE Board Goal Progress



*Note: This meter tracks progress to achieving the board goal that 80% of Michigan hospitals create PFACs by July 2017. It does not represent 100% participation from all Michigan hospitals.



St. Joseph Mercy Ann Arbor Patient and Community Engagement Council

A digital media awareness campaign highlighted 12 PFE recommended best practices and policies to increase patient engagement within the hospital

14 posts on LinkedIn and Facebook highlighting member hospitals' PFE efforts generated:



High Reliability Organizations in Healthcare

Patients are unintentionally harmed in hospitals every day. Medical care accounts for 251,000 deaths per year and is the third leading cause of death in the U.S.

Organizations that manage safety concerns over an extended period of time are known as High Reliability Organizations (HROs). HROs deliver consistent, quality care for every patient, every time. The MHA Keystone Center is supporting hospitals through their journey to a culture of high reliability.

In 2016, the MHA Keystone Center partnered with the Joint Commission Center for Transforming Healthcare (CTH) for three years to assist Michigan hospitals in their journey to become highly reliable and aiming for zero preventable harm to patients, healthcare workers and visitors.



HRO Tier II Interactive Workshop



Spring Workshop

MHA Keystone Center Approach



2016-2017 HRO Events

Monthly Content Webinars

- Feature nationally recognized experts in the field
- Open to all MHA, Illinois Health and Hospital Association and Wisconsin Hospital Association participants

Quarterly Cohort Webinars

Semiannual HRO Workshops

Oct. 20, 2016 - East Lansing

- 34 attendees from nine hospitals

May 24, 2017 - East Lansing

- Focused on leadership safety rounds
- 55 attendees from 28 hospitals

Great Lakes Partners for Patients (GLPP) Hospital Improvement Innovation Network (HIIN)

The MHA, the Illinois Health and Hospital Association and the Wisconsin Hospital Association launched a joint quality improvement program — the Great Lakes Partners for Patients — in September 2016 as part of a Centers for Medicare & Medicaid Services (CMS) Hospital Improvement Innovation Network contract. **The partnership unites the quality improvement strengths of three statewide hospital associations, guiding participating members through a variety of best practices, collaboratives and resources to reduce 11 areas of harm over three years.**



In November 2016, the MHA Keystone Center held a Great Lakes Partners for Patients Hospital Improvement Innovation Network kickoff event to inform hospitals of the new ways in which the MHA Keystone Center will work with teams and what can be expected moving forward.

Medication Disposal Event



Michigan hospitals in the GLPP HIIN have achieved:

Sepsis Mortality Rate
6.5% reduction
from 2014 to 2016

Catheter-associated Urinary Tract Infection (CAUTI) Rates
24% reduction
from 2015 to 2017

Central-line-associated Bloodstream Infections (CLABSI)
44% reduction
from 2015 to 2017

Methicillin-resistant Staphylococcus aureus (MRSA)
5% reduction
from 2014 to 2017

Clostridium difficile (C. Diff)
15% reduction
from 2014 to 2017

Colorectal Surgical-site Infection (SSI)
27% reduction
from 2014 to 2016

Postoperative Pulmonary Embolism (PE) and/or Deep Vein Thrombosis (DVT)
22% reduction
from 2014 to 2016

317 hospitals

across Michigan, Illinois and Wisconsin



Sepsis Simulation



ICU Workshop

2016-2017 GLPP HIIN Events

Improvement Action Networks (IANs): The GLPP HIIN partnered with a Lean consultant to form IANs, which were designed to support Michigan hospitals and assist with issues specific to their institutions. IANs provide attendees with an understanding of the A3 improvement model and help address areas of concern within the hospital setting. Over the past year, there were five IANs — three focused on readmissions and two focused on critical access hospitals. In conjunction with the MHA Patient Safety & Quality Symposium, the MHA Keystone Center also held an additional IAN that focused on PFE.

Quality Essentials Skills Training (QuEST): A two-day, in-person workshop that engages hospital quality leaders and improvement teams in learning basic quality concepts.

Feb. 21-22, 2017 – Livonia

- 88 attendees from 32 hospitals

April 4-5 2017 – Grand Rapids

- 107 attendees from 49 hospitals

Hospital-acquired Infection Regional Learning Session (HAI RLS): A one-day, interactive event that provides the most up-to-date best practices and allows attendees to engage in discussions about techniques, share success stories, and express areas of opportunity within their organizations.

June 21, 2017 – Grand Rapids

- 19 attendees from 11 hospitals

Intensive Care Unit (ICU) Workshop: Hospital teams heard from national and state experts on matters related to sepsis, central-line-associated bloodstream infection (CLABSI), early mobility and delirium in ICU patients.

Sept. 14, 2016 – Grand Rapids

- 230 attendees from 67 hospitals

Sepsis Simulations: Sepsis simulations allow hospitals to walk through their sepsis process from a patient's arrival to discharge to better understand their opportunities to improve care.

Patient Safety Organization (PSO)

The MHA Keystone Center is recognized as a federally listed PSO by the Agency for Healthcare Research and Quality. The MHA Keystone Center PSO encompasses a three-pronged approach to improving patient safety through education on the legal protections of the federal Patient Safety and Quality Improvement Act, data analysis, and provision of learning opportunities.

The MHA Keystone Center PSO provides a safe environment for hospitals and healthcare providers to learn from one another and subsequently prevent future patient and staff harm. Over the last program year, the MHA Keystone Center PSO has seen overall improvement on several important measures. Specifically, the reporting of near misses, events that do not reach the patient, has increased, along with the submission of Root Cause Analyses (RCAs), while the number of harmful medication adverse events have decreased. These changes represent a maturing learning culture in MHA Keystone Center PSO members as they indicate a willingness to report and learn from situations with the potential for harm, before the harmful incident occurs.



115 KEYSTONE PSO MEMBERS

89% IN BOTH PSO AND HIIN

28 CRITICAL ACCESS HOSPITALS

3 INDIANA MEMBERS

1 PHYSICIAN PRACTICE



- In December 2016, the MHA Keystone Center partnered with the Indiana Hospital Association (IHA) to offer PSO services to all Indiana hospitals. The partnership with IHA maximizes the ability to engage in shared learning around patient safety and quality.

Discovering the root cause of an incident and compiling it with robust action plans is at the heart of driving patient safety improvements.

- This year, the MHA Keystone Center PSO emphasized the importance of hospital staff conducting robust Root Cause Analysis and Action (RCA²) through interactive trainings. The RCA² method helps guide healthcare staff when examining adverse events by systematically uncovering process-level issues and implementing appropriate corrective actions. The training is based on the National Patient Safety Foundation's (NPSF) RCA²: *Improving Root Cause Analyses and Actions to Prevent Harm* guidelines.

- **Both safe tables and the RCA² trainings have been focal points for the MHA Keystone Center PSO as they promote learning from errors while preventing future harm.**
- Safe tables provide a legally protected, safe forum for sharing information about adverse events, their contributing factors and root causes. It is an essential function of the MHA Keystone Center PSO as it facilitates a culture of sharing and learning for the benefit of all members.



Event Reporting

- Over the last year, the MHA Keystone Center PSO had a 53 percent increase in the submission of process mapping documents, RCAs, improvement action plans and other resources.
- The MHA Keystone Center PSO had fewer reported moderate harm, severe harm and death events than 75 percent of the national comparative database.
- There were 22 percent fewer medication events submitted to the PSO between the 2015-2016 and 2016-2017 program years.
 - There was a 13 percent increase in reporting of “no harm” medication events.
 - The three most common opioids associated with adverse drug events are morphine, fentanyl and oxycodone.
- The majority (67 percent) of severe harm and death caused by falls happen when the patient is attempting to walk to the bathroom.

MHA Keystone Center PSO members have reported substantial improvements in safety culture and engagement scores since 2015, indicating a shifting landscape toward safer, process-driven care.

Culture

- The highest burnout rate in 2016-2017 was reported by clinical support personnel (70 percent), nurses (66 percent) and technicians (66 percent), while the lowest burnout rate was reported by nonemployed physicians (30 percent), managers (38 percent) and administrators (45 percent).
- Overall, there was a 7 percent improvement to the local leadership domain. This means staff felt supervisors were more accessible and provided better performance feedback while communicating expectations more clearly.
- There was a 7 percent improvement to the decision-making domain. This means staff feel they have a voice within the organization and can contribute to decision-making conversations.
- Clinical social workers showed the largest improvement of any role type with a 23 percent reduction in workload strain.

Speaking Up for Safety

MHA KEYSTONE CENTER

Speak up!
AWARD

272 NOMINEES IN
TOTAL

25 HOSPITALS
REPRESENTED

5 QUARTERLY WINNERS
(SINCE INCEPTION)

1 ANNUAL WINNER



MHA Keystone Center Speak-up! Award Recipients

- **2017 Q2:** Jennifer Ludwig, RN, Sparrow Hospital, Lansing
- **2017 Q1:** Gaiti Bakhsh, DO, Beaumont Hospital, Taylor
- **2016 Q4:** Karen Kazyak, RN, Beaumont Hospital, Royal Oak
- **2016 Q3:** Kristi Tyler, Beaumont Hospital, Taylor
- **2016 Q2:** Seth Raymond, DO*, Bronson Methodist Hospital, Kalamazoo

**Annual award winner*

MHA Keystone Center Speak-up! Award: The MHA Keystone Center Speak-up! Award serves as a tool to publicly acknowledge individuals or teams in MHA Keystone Center PSO member hospitals who prevent patient or staff harm by speaking up when they see a potential adverse event. The award represents the elimination of preventable harm caused by non-communication or miscommunication.

Since 2016, the MHA Keystone Center PSO has conducted reviews of empirical literature and analyzed harm type, frequency and anecdotal data collected through the MHA Keystone Center Speak-up! Award program. Results have suggested that, if a healthcare organization is able to infuse speaking up as a behavioral expectation, the following items will occur:

- Culture scores will increase as measured by validated survey instruments
- Monetary costs to patients, families, staff and hospitals will decline
- Near-miss reporting will increase

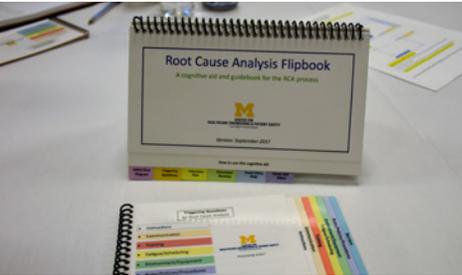
MHA Keystone Center Speak-up! Award Toolkit

- The MHA Keystone Center Speak-up! Award Toolkit was created in 2017 to help healthcare organizations design, implement and sustain a localized recognition program. The toolkit consists of two brochures and is a guide for members to create a tailored program that works within their organization(s).
- An electronic MHA Keystone Center Speak-Up! Award Toolkit is also available to MHA Keystone Center PSO members. It provides links to templates — posters, logos, certificates, etc. — that can be downloaded and used by hospitals.
- The toolkit was distributed in May to all MHA Keystone PSO member organizations.

Digital Outreach and Social Media

Follow the MHA Keystone Center on social media for news and updates:

-  Facebook.com/MichiganHospitals
-  Twitter.com/MHAKeystoneCtr
-  LinkedIn.com/company/mha-keystone-center/
-  Youtube.com/user/MiHospitalAssoc
-  Instagram.com/MiHospitalAssoc



PSO Annual Meeting



RCA² Training



RCA² Training

2016-2017 PSO Events

RCA² (Root Cause Analysis and Action) Training

May 31, 2017 – Grand Rapids

- 50 attendees from 19 hospitals

Sept. 20, 2017 – Livonia

- 69 attendees from 32 hospitals

MHA Keystone Center PSO Annual Meeting: The inaugural MHA Keystone Center PSO Annual Meeting focused on the delivery of results on broad safety goals and in specific areas, such as human factors engineering, root cause analysis and cultural improvement.

May 9, 2017 – East Lansing

- 75 MHA Keystone Center PSO members participated, virtually and in-person, from more than 50 organizations across Michigan and Indiana.

Safe Tables: Over the past year, the MHA Keystone Center PSO held safe tables focused on: pain management, obstetrics, pediatrics, patient safety evaluation systems (PSES), and concentrated insulin and adverse drug events.

- 91 attendees from 43 hospitals

Social media snapshot

 **17**
VIDEOS WITH MORE THAN 2,700 VIEWS

 **1,800**
AVERAGE NUMBER OF TIMES PER MONTH MHA KEYSTONE CENTER WEBPAGES WERE VIEWED SINCE THE LAUNCH OF THE NEW WWW.MHA.ORG WEBSITE

 **334,418**
IMPRESSIONS

 **5,687**
CLICKS/COMMENTS/SHARES

 **552**
TWITTER FOLLOWERS

 **152**
LINKEDIN FOLLOWERS

Member Tools & Resources

The MHA Keystone Center developed several educational tools and resources over the past year to educate members, patients and families on recommended policies and practices.

A Road Map to Person and Family Engagement

The following are recommended person and family engagement (PFE) policies and practices for hospitals. They are fundamental to improving quality of care for all patients and in building authentic partnerships among patients and care providers.

- Support PFE with policies and dedicated resources
- Provide a planning checklist to prepare patients that have educational preferences, allowing for questions and comments at admission
- Share and teach principles of person- and family-centered care with staff
- Involve and inform patients and families of family-informed rapid response teams (FIRRT) including them on time and when they are used
- Develop and ensure systems to encourage partnerships among patients, families, and care providers to improve patient-provider decision making
- Conduct change of shift reporting at the bedside and include patients and family members to be active participants
- Represent the patient voice at Hospital Board of Directors meetings, making them a part of governance decisions
- Conduct and inform patients and families of physicians' medical history reports and encourage their participation
- Dedicate a staff member to be responsible for all PFE activities and training
- Welcome 24/7 presence of family in the patient representative as part of patient's healthcare team
- Create an active PFE committee that will have patient representation on existing patient safety/quality improvement teams
- Include the voice of patients and families in every metric safety review

MHA Michigan Health & Hospital Association
 To learn more about person- and family-centered care, and for assistance on how to address these principles and practices, visit us at www.mhakeystonecenter.org
 ©2016 MHA Keystone Center. All rights reserved.



YOUR GUIDE TO CONTROLLING & MANAGING PAIN AFTER SURGERY

SAVE A LIFE
DISPOSE DRUGS SAFELY

Disposing of expired, unused or unwanted drugs the right way can protect people and the environment. Here is why drug disposal is important:

- Drug overdose is the leading cause of accidental death in the U.S. More people die from drug overdoses than car accidents.
- 70,000 children go to the hospital each year for medication errors.¹ Unused drugs contribute to this.
- 69% of people who misused pain medication got them from a friend or relative.²
- 80% of new heroin users began by misusing pain drugs ordered by their doctor.³

SAFELY STORE DRUGS BEFORE DISPOSAL⁴

STEP 1
 Keep drugs in the container you received them in.

STEP 2
 Lock the container in a cool, dry place out of reach of children and pets.

The 4Cs of the MHA Data Cycle

The MHA collects data four times a year from nearly 175 entities to help Michigan hospitals and other healthcare partners make a meaningful difference in the lives of the patients, families and communities served by the state's healthcare network. This process is known as the 4Cs of the MHA Data Cycle.

STEP 1: HOSPITALS PROVIDE CARE

300,000 admissions + 8.8 million visits = Number of patient & outpatient visits to Michigan hospitals in a given 3-month period

STEP 2: HOSPITALS CODE RECORDS

MHA 60 DAYS
 Time hospitals need to ensure record completeness

STEP 3: MHA COMPILES DATA

Data sent to MHA and vetted for errors → Submit → Correct (Revisions are due from hospitals 30 days after data has been submitted) → MHA analyzes and publishes data 30 days after correction period → Release

STEP 4: MHA CIRCULATES DATA FOR ACTIONABLE INSIGHTS

- Patient Safety & Quality
- Improvement & Innovation
- Public Health Research
- Cost Reduction
- Performance
- Demographics
- Market Share
- Utilization
- Advocacy

For more information about the MHA, visit www.mha.org.

A Road Map to Person and Family Engagement: The PFE Road Map was updated to better align with the PFE requirements and priorities under the GLPP HIIN, which push the five identified evaluation metrics that serve as a measurement of PFE activities across all HIINs. The updated PFE Road Map includes definitions and criteria for each of the PFE recommendations/practices guiding hospitals on the goals and intent of each metric.

Starter Packs: A two-part series of education and webinars to help hospitals gain a better understanding of an area of harm and process improvement.

Gap Analysis: A tool for each specific area of harm that provides available evidence-based, best practices, as well as an opportunity for hospitals to self-identify their areas of opportunity within an area of harm.

Pain Management Guide: A step-by-step guide to controlling and managing pain after surgery.

- **August 2016:** The MHA and the MHA Keystone Center were nominated for the Collaborative for Effective Prescription Opioid Policies Salutes award, which recognizes policymakers, healthcare organizations, community-based organizations, companies and individuals working to reduce opioid abuse and implement strategies for opioid reduction in the U.S.

Medication Disposal Guide: Based on feedback from the MHA PFAC, the MHA Keystone Center developed a standardized tool to help people across Michigan understand the importance of disposing of expired, unused or unwanted medications, as well as how to dispose of them safely and properly. Due to the partnership and support of 13 organizations, the Medication Disposal Guide is a uniform statewide tool.

The MHA Keystone Center Monthly Newsletter: In July 2017, the MHA Keystone Center launched a newly designed and restructured newsletter that highlights important news and information on a monthly basis for patient safety and quality staff.

The 4Cs of the MHA Data Cycle: A graphic that illustrates how the MHA collects data to help Michigan hospitals and other healthcare partners make a meaningful difference in the lives of the patients, families and communities served by the state's healthcare network.

Educating, Connecting and Celebrating Members: MHA Keystone Center Webinars, Awards and Events



Israeli Hospital Visit



MHA Patient Safety & Quality Symposium



MHA Patient Safety & Quality Symposium



MHA Patient Safety & Quality Advocacy Day

Webinars

- Over 4,000 participants joined 122 webinars to learn how to reduce hospital-acquired conditions.

Awards

The MHA Keystone Center Patient Safety & Quality Leadership Award: The MHA Keystone Center Patient Safety & Quality Leadership Award honors those who demonstrate leadership in patient safety and quality improvement that transcends the bounds of their hospital or health system.

- **2017 Award winners:**
 - Patricia J. Posa, RN, BSN, MSA, quality excellence leader, St. Joseph Mercy Ann Arbor
 - Samuel J. Flanders, MD, senior vice president of quality and safety, Beaumont Health, Southfield

Events

2017 MHA Patient Safety & Quality Symposium: The 2017 MHA Patient Safety & Quality Symposium took place March 7-8 in Dearborn. The event explored ways high reliability drives improvement in every aspect of healthcare — not only clinical outcomes, but in reducing harm, patient and family engagement, employee safety and other areas.

Israeli Hospital Visit: On March 27, the MHA Keystone Center hosted a care team from Sheba Medical Center in Tel Hashomer, Israel. The team traveled to the U.S. to learn about the experiences and successes in Michigan hospitals as part of the MHA Keystone Center's efforts to improve safety culture and reduce hospital-acquired conditions.

MHA Patient Safety and Quality Advocacy Day: Nearly 40 Michigan hospital leaders, patient safety professionals and lawmakers gathered at the Michigan State Capitol May 3 to discuss Michigan's nationally acclaimed approach to improving healthcare quality and reducing costs in hospitals through voluntary efforts and evidence-based practices.

Publications, Posters and Presentations

MHA Keystone Center Contributing Staff

Sam R. Watson, MSA, CPPS, senior vice president of patient safety and quality

Brittany Bogan, MHSA, CPPS, vice president of patient safety and quality

Michelle Norcross, MSA, senior director of patient safety and quality

Kelsey Peterson, MPH, manager of patient safety and quality

Adam Novak, MA, manager of patient safety and quality

Bryan O. Buckley, MPH, manager of patient safety and quality

Corine Pope, BS, coordinator of patient safety and quality



- Norcross, *Improving Perioperative Pain Control and Reducing Opioid Related Adverse Events; Michigan Health & Hospital Association Keystone Center Experience*, poster presentation at the Annual NPSF Patient Safety Congress, May 2016, **Won Best Poster Award.
- Watson, *A Program to Prevent Catheter-associated Urinary Tract Infection in Acute Care*, NEJM, June 2016
- Novak, *Improving Patient Safety Culture to Provide Safer Care*, presentation for Agency for Healthcare Research & Quality TeamSTEPPS National Implementation Webinar, August 2016
- Norcross, *Improving Pain Control and Reducing Opioid Related Adverse Events*, presentation at the CMS Quality Conference, December 2016.
- Watson, Bogan, *Protocol-Based Resuscitation Bundle to Improve Outcomes in Septic Shock Patients: Evaluation of the Michigan Health and Hospital Association Keystone Sepsis Collaborative*, Critical Care Medicine, December 2016
- Watson, Pope, *Sustainability of Quality Improvement – A Statewide Experience*, presentation at the Society of Critical Care Medicine Conference, January 2017.
- Norcross, Novak, *Improving Pain Management and Reducing Opioid-Related Adverse Events: MHA Keystone Center Experience*, presentation at the 2017 Michigan State University College of Nursing Conference on Pain, February 2017
- Watson, *Evaluation of the Association between Hospital Survey on Patient Safety Culture measures and Catheter-associated Infections: Results of Two National Collaboratives*, British Medical Journal on Quality and Safety, March 2017
- Novak, *The MHA Keystone Center Speak-up! Award: Engagement through Acknowledgement*, presentation at the Agency for Healthcare Research & Quality Patient Safety Organization Annual Meeting, April 2017.
- Novak, *Speaking up About Medical Errors in the Healthcare Setting*, poster presentation at the D.C. Health Communication Conference: Patient-Centered Health Communication, April 2017.
- Norcross, *Partnerships Adding Value in PFE and ADEs*, presentation at the CMS Partnership for Patients meeting, June 2017.
- Peterson, Buckley, *The Performance Improvement Journey of CAUTI: A Statewide Approach*, Association for Professionals in Infection Control, June 2017.

A Look Back and Ahead

To Our Members:

This year's annual report reflects the MHA Keystone Center's work toward making Michigan hospitals HROs, as well as our efforts through the GLPP HIIN in Michigan, Illinois and Wisconsin.

We have seen tremendous success in maintaining low rates of infection, especially for central-line-associated bloodstream infection and catheter-associated urinary tract infection. We've also seen a substantial decrease in postoperative pulmonary embolism and deep vein thrombosis.

Our PFE efforts yielded over 86 percent of Michigan hospitals having PFE councils to bring in the voice of patients. Additionally, under the PSO, we had tremendous response to the MHA Keystone Center Speak-up! Award, with more than 270 nominations and five awardees.

When I speak with teams from high-performing hospitals, they always ask what they need to do to continue improving — and that is what the MHA Keystone Center is doing as we plan for the year ahead.

As we celebrate the successes of the past year, the MHA Keystone Center team is looking ahead to further its support of our member hospitals and the GLPP participants in becoming HROs.

Critical to success in the upcoming year will be the continued focus on PFE to further bring patients and their families into the care conversation. Clinical improvements will continue forward with a heightened focus on the areas that need the greatest improvement, including readmissions.

Under the PSO, we began training members last year on the National Patient Safety Foundation's RCA² process. As part of this, our team is evaluating RCA reports submitted to the PSO to find what can be learned and shared around the cause of the event and improved to prevent future harm.

Thank you to all of the teams across Michigan and the GLPP that have worked together to make care safer. Care is now safer because of your work.



Sam R. Watson, MSA, CPPS
Senior Vice President of Patient Safety and Quality
MHA Keystone Center

The MHA Keystone Center acknowledges and appreciates the generous financial support of Blue Cross Blue Shield of Michigan.



The MHA Keystone Center is also grateful for the financial support of MHA-member hospitals, the Centers for Medicare & Medicaid Services, the Centers for Disease Control and Prevention, the Agency for Healthcare Research and Quality, and the Michigan Department of Health and Human Services.

MHA Keystone Center Board of Directors 2017-2018 Program Year

Michelle Schreiber, MD, Chair
Henry Ford Health System

Robert Welsh, MD, Vice Chair
Beaumont Hospital – Royal Oak

Brian Peters, CEO
MHA

Matthew Rush, FACHE, Past Chair
Hayes Green Beach Memorial Hospital

Sam R. Watson, MSA, MT (ASCP), CPPS, Board Secretary
MHA

Lawrence Abramson, DO, MPH
Michigan Osteopathic Association

Rick Boothman
University of Michigan Health System

Robert Riney
Henry Ford Health System

Paul Conlon, PharmD, JD
Trinity Health

Robert Hyzy, MD
University of Michigan Health System

Mark Janke
Bronson Healthcare Group

Cheryl Knapp, RN, MBA, CPHQ, CPPS
Bronson Healthcare Group

Kevin McCarthy
Trillium Staffing

Marjorie Mitchell
Michigan Universal Health Care Access Network

James E. Richard, DO
Michigan State Medical Society

Barbara Smith, MS, NHA
Burcham Hills Retirement Community

Jonathan So
Detroit Regional Chamber of Commerce



At the MHA Keystone Center,
we're guided by our mission, vision and values.

Vision: Healthcare that is safe, effective, efficient, patient-centric, timely and equitable

Mission: To lead the nation in quality and patient safety through the diffusion of change using patient-centered, evidence-based interventions supported by cultural improvement

Values: Excellence. Innovation. Compassion. Teamwork.

To read stories about how MHA Keystone Center member hospitals are improving the quality and delivery of healthcare, visit MHAKeystoneCenter.org.