CMS 2024 Quality Conference
Resilient and Ready Together

Creating an Optimal Environment for Quality Healthcare for Individuals, Families, and Communities

# Innovations in Training and Training Evaluations

*Project Firstline Escape Room and a Learning Collaborative Evaluation Framework*

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

**CMS** 2024 Quality Conference
**Resilient and Ready Together**
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# Project Firstline Escape Room: Nursing Home Roadshow

*Unlocking Excellence in Infection Prevention and Control*

**Mountain Pacific**

Crystal Morse, MSHSA, CCM, CSW
Project Firstline Senior Account Manager

Callie Perkins, BSN, RN
Wyoming Account Manager

# Learning Objectives

- Demonstrate utilizing an escape room as an innovative learning strategy that enhances critical thinking skills while improving team culture.

- Discuss the preparation and steps to implement the escape room as a supportive tool for infection prevention programs.

- Describe debriefing as an evaluation and quality improvement method.

# The Development Team

# 2021 Learning Needs Assessment

What infection control topics would you like to receive additional trainings?

Assessments completed = 814

- **Source Control**
- **Environmental Cleaning**
- Screening
- **COVID-19**
- **Personal Protective Equipment (PPE)**
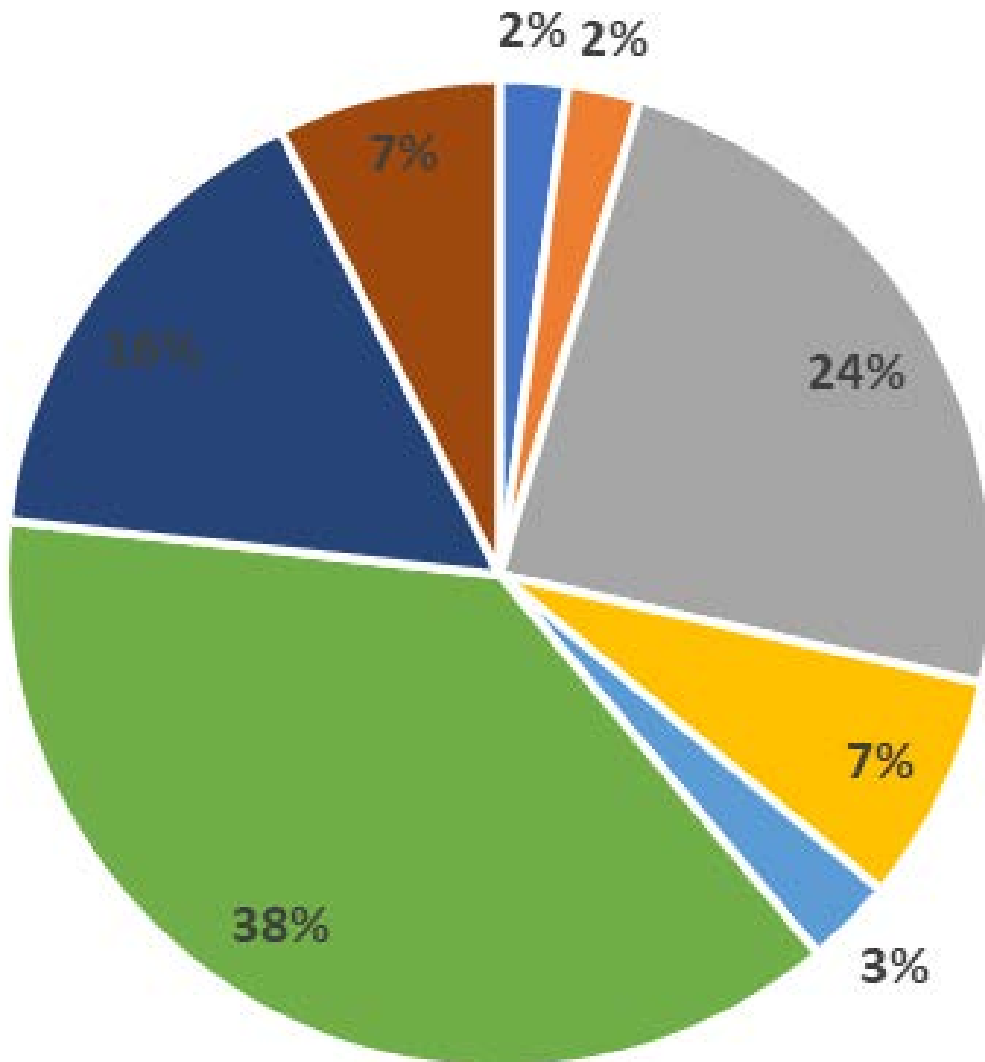- **Hand Hygiene**

# Infection Control is for EVERYONE

During the 30-minute interactive, hands-on instructional activity, participants learned key infection control actions through the following domains:

- Hand hygiene

- Respiratory transmission and source control

- Donning and doffing of PPE

- Environmental cleaning and disinfection

# Participant Roles

# Data Collection and Outcomes

**Training period: January 2022 - October 2023**
**Number of responses: 1,094**

## Quantitative Data

- 88% expressed knowledge improvement
- 90% reported moderately high to high satisfaction with the training
- 91% reported they would implement the training received
- **85% reported training helped make connections with co-workers**
- **86% reported the activity encouraged team building**
- 91% reported they would recommend the training to others

## Qualitative Data

- "This was so much more fun than watching videos!"
- "The escape room was a fun and effective way to learn."
- "I enjoyed working as a team."

# Summary

- Blooms Taxonomy Methodology
- Critical thinking development
- Team-based care
- Train-the-trainer approach

" I've never had so much fun at work! "

**Brenda Gorm**
Amie Holt Care Center

" As an infection preventionist wearing many hats, I don't have the time or resources to put something like this together**.**
**Having the escape room planned was invaluable to me!**
Our staff really appreciated and enjoyed this interactive, hands-on learning experience."

**Kristina Duarte, BSN, RN**
Infection Preventionist/Employee Health Nurse
Johnson County Healthcare Center

# Thank you!



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# Creating a Learning Collaborative Evaluation Framework

Laura Myerchin Sklaroff, MA, EdD | Director, Systemwide Quality Improvement Evaluation

Ann Jensen, MPH, CPH | Health Care Data Analyst

**Comagine Health**

> We have learned so much as an organization and can offer our patients more value!

> I think it is a great program and all hospitals, including CAHs, should participate.

> I feel Comagine has been extremely helpful and willing.

> ... it's nice to go through this process with others, learn from other clinics' experiences, and talk through logistics with others who have other experience, points of view and an external eye.

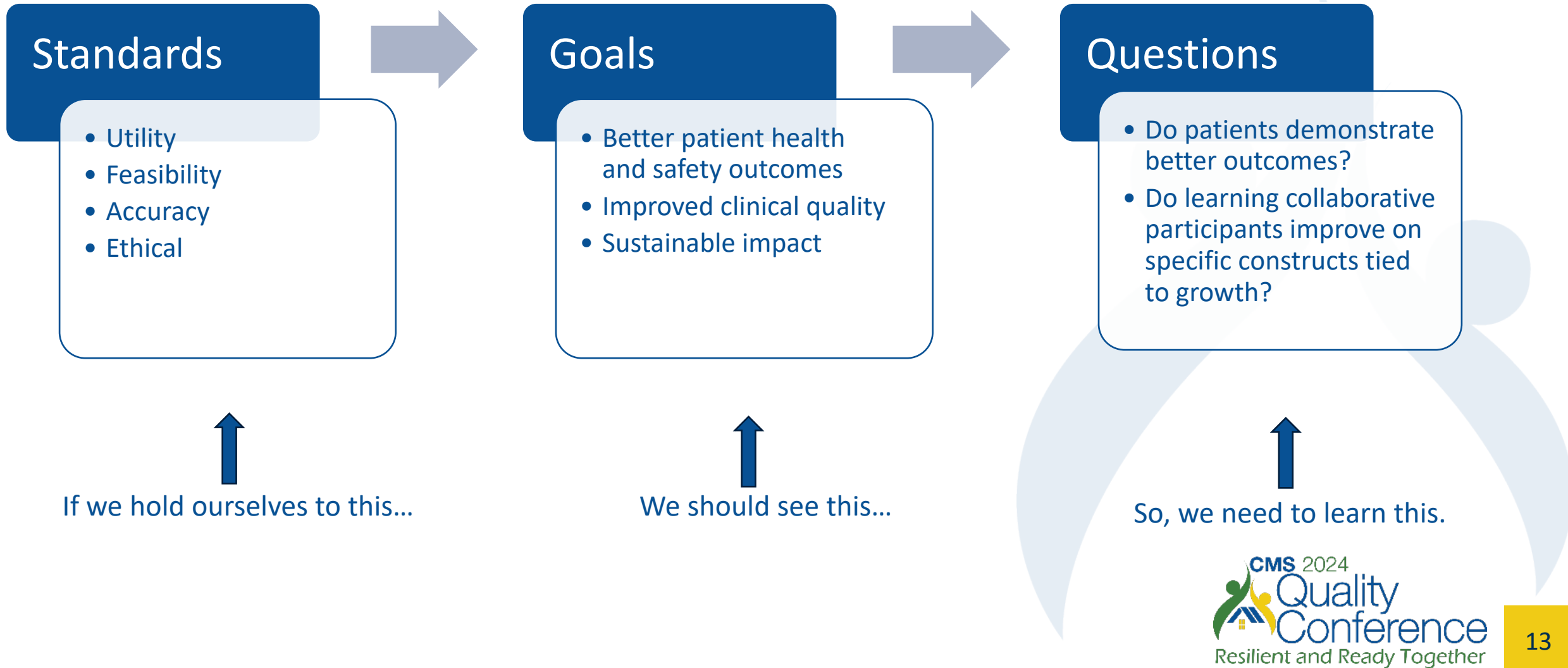> In a rural area, I think this is a great program to start implementing all together as a whole.

# It Sounds Like We're Doing Something Right. Are We? How Can We Show it?

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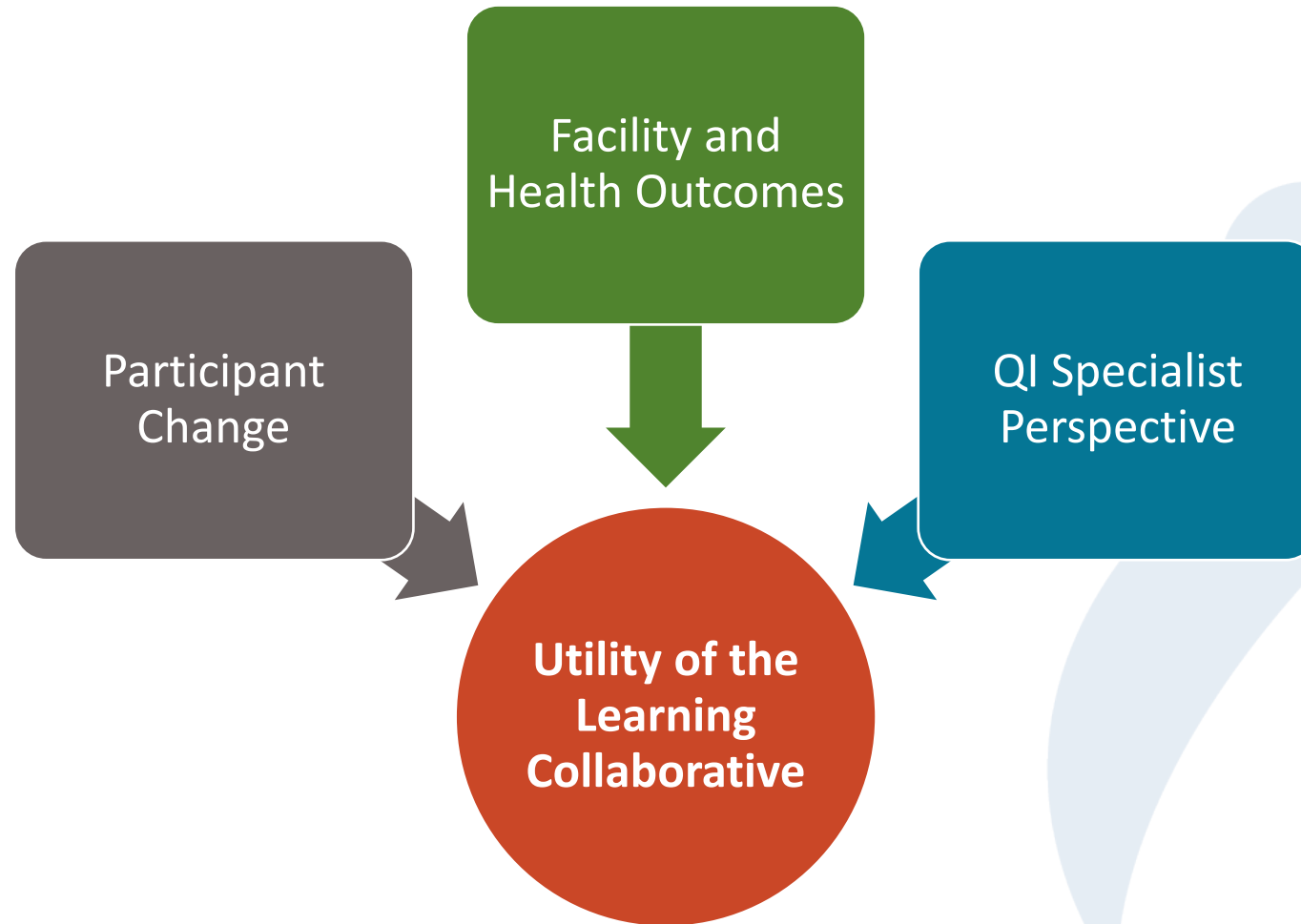Resilient and Ready Together

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# Interested Parties and Evaluation

- Evaluation aims to render a judgment that produces useful and actionable information for interested parties

- Utility is different, dependent on the party
  - Patients, families, communities
  - Clinical and non-clinical staff, health system leadership
  - CMS and other payers
  - QIN-QIOs and other quality improvement specialists

# Measuring Utility in Evaluation Questions

**Standards**
- Utility
- Feasibility
- Accuracy
- Ethical

**Goals**
- Better patient health and safety outcomes
- Improved clinical quality
- Sustainable impact

**Questions**
- Do patients demonstrate better outcomes?
- Do learning collaborative participants improve on specific constructs tied to growth?

If we hold ourselves to this…

We should see this…

So, we need to learn this.

# Single Learning Collaborative Framework

# Framework for Single Learning Collaborative Assessment

## Participants' Perceptions

- Knowledge: The amount of information known about a specific topic

- Experience: The work and effort already done related to a specific topic

- Confidence: The certainty about ability to apply skills on a specific topic

- Competency: The ability to perform work or skills now or in the future around a specific topic

- Value for participants and colleagues

- Novelty of material

- Planned and executed behavioral change when possible

## Facilities' Data

- Counts and types of staff trained and using skills

- Engagement of provider champion

- Engagement of leadership

- Counts of patients at various health outcome milestones

- Counts of patients touched

- Participation in office hours and technical assistance

## Quality Improvement Specialists' Perceptions

- Facility engagement in learning collaborative

- Facility engagement with office hours and technical assistance

- Provider champion engagement

- Learning collaborative project success

**Single Measure**
Collected at end of timeframe

**Repeated Measures**
Collected as appropriate for timeframe and clinical content, minimum 3x

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# Framework for Across Learning Collaborative Assessment

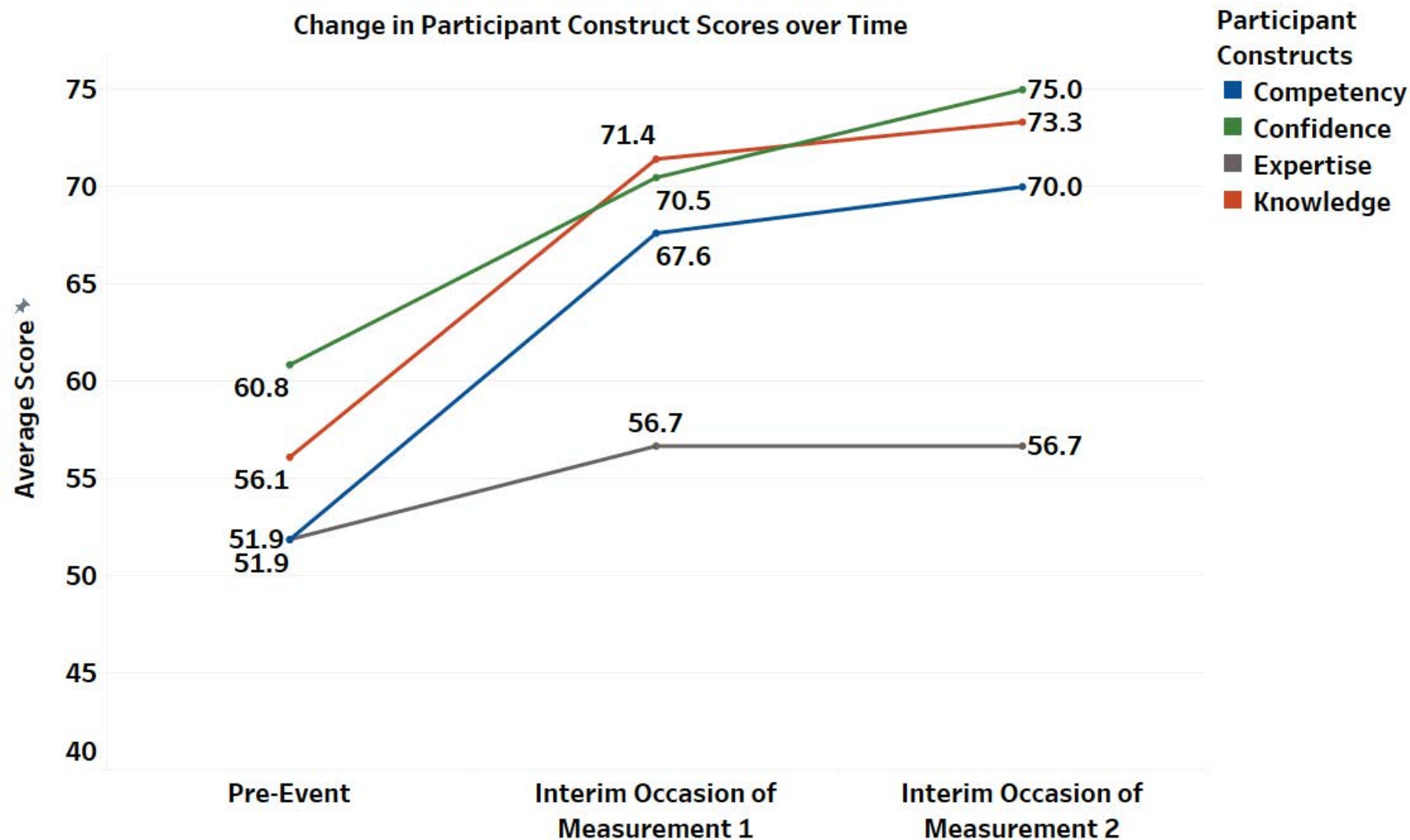| Clinical Domains (not a comprehensive list) | Participant Constructs (not a comprehensive list) | Facility-Level Metrics | Other Metrics |
|---|---|---|---|
| Hypertension | Confidence | Number of Staff Trained | Occasion of Measurement |
| Diabetes | Competency | Types of Staff Trained | Cohort (first, second, etc.) |
| Chronic Kidney Disease | Value for Others | Number of Patients Touched | Start Date |
| Nursing Home Resident Safety | Novelty of Material | Improved Patient Health Outcomes | N/A |

# Reporting Back to Interested Parties

- Report-backs to celebrate and highlight participant and facility growth built into the learning collaborative
  - Designed to be "cut-and-paste" friendly so participants can use information elsewhere

- Reports that identify opportunities for change and "find the blueberries"
  - What works well and how we can foster that

# Real World Application:
## Self-Measured Blood Pressure Learning Collaborative

- Started July 2023 with 12 facilities in three states

- Facilities provided blood pressure cuffs to "jump-start" patient enrollment

- About 2-3 staff participants per facility, including identified champion

- Examining health outcomes across four patient sub-groups:
  - 18-64, newly diagnosed with hypertension, not at goal
  - 65+, newly diagnosed with hypertension, not at goal
  - 18-64, established hypertension, not at goal
  - 65+, established hypertension, not at goal

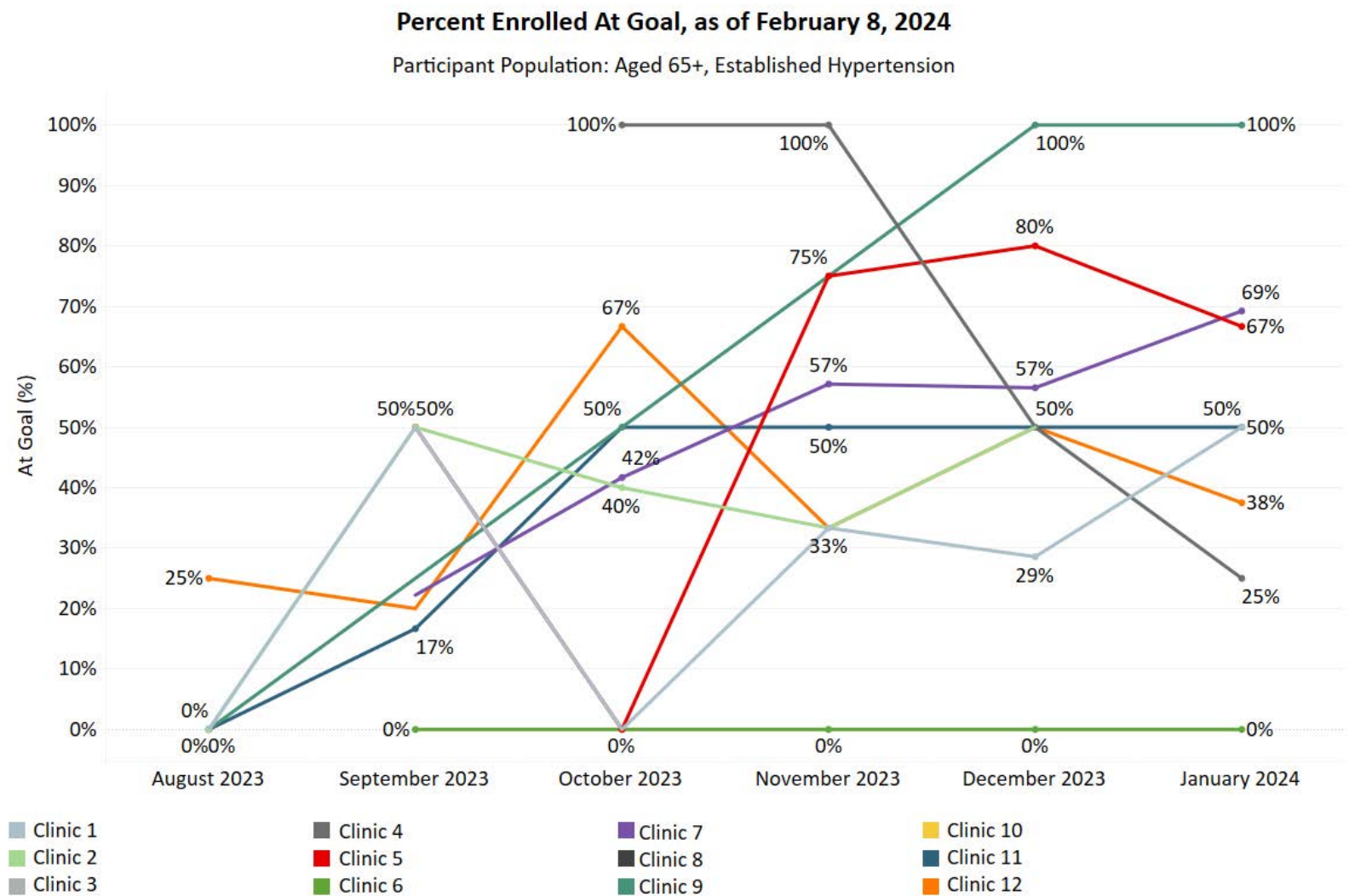# SMBP Learning Collaborative: Participant Change Snapshot

# SMBP Learning Collaborative:
# Facility Enrollment and Health Outcomes Snapshot

## Hypertension Goal Status of Enrolled Participants as of February 8, 2024

Participant Population: Aged 65+, Established Hypertension



| Staff Trained | Change in Number Enrolled | Facility Name | Participant Chart | Change from Last Month | | |
|---|---|---|---|---|---|---|
| | | | | Dropped | Active | At Goal |
| 17 | -1 | Clinic 1 | 3 / 3 / 6 | +0 | -2 | +1 |
| 12 | +2 | Clinic 2 | 2 / 2 / 4 / 8 | +2 | -2 | +2 |
| 10 | +0 | Clinic 3 | 0 | +0 | +0 | +0 |
| 9 | | Clinic 4 | 3 / 1 / 4 | | | |
| 9 | +1 | Clinic 5 | 1 / 1 / 4 / 6 | +0 | +1 | +0 |
| 8 | +0 | Clinic 6 | 5 / 5 | +0 | +0 | +0 |
| 7 | +3 | Clinic 7 | 8 / 18 / 26 | +0 | -2 | +5 |
| 4 | +0 | Clinic 8 | 0 | +0 | +0 | +0 |
| 4 | +0 | Clinic 9 | 4 / 4 | +0 | +0 | +0 |
| 4 | | Clinic 10 | 0 | | | |
| 3 | +0 | Clinic 11 | 1 / 4 / 3 / 8 | +0 | +1 | -1 |
| 2 | +0 | Clinic 12 | 3 / 3 / 6 | +0 | +0 | +0 |

Number of Participants: 0 2 4 6 8 10 12 14 16 18 20 22 24 26 28

Legend: ■ Dropped ■ Active ■ At Goal

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# SMBP Learning Collaborative:
# Facility Enrollment and Health Outcomes Snapshot



**Percent Enrolled At Goal, as of February 8, 2024**

Participant Population: Aged 65+, Established Hypertension

# Questions? Let's Talk

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