

The HRET Hospital Improvement Innovation Network (HIIN) requests the following information from our participating facilities. **No hospital specific information will be shared outside of the national program team or your state partner associations.**

Hospital Name: _____
Hospital identifier (HIIN-nnnnnnn-ST): _____

Please enter your responses based on your facility's status as of the end of the third quarter of 2017 (i.e., as of September 30 2017).

What is your hospital's highest priority item related to patient safety and/or quality improvement, for the rest of 2017?

Prior to admission, do hospital staff discuss a pre-admission planning checklist with every patient that has a scheduled admission, allowing for questions and comments from the patient or family?

- No, not in any area or with any patients
- Talking about it
- Started planning
- Implemented in one unit with some pre-admission patients
- Implemented in more than one unit with all pre-admission patients
- In all units with all patients
- We do not do scheduled admissions

Does your hospital conduct shift-change huddles and bedside reporting with patients and family members?

A hospital may offer alternatives to accommodate patient and care partner participation (e.g., adjust time of shift changes, offer options for care partners to participate via phone or Skype).

- No, not in any area or with any patients
- Talking about it
- Started planning
- Implemented in one unit with some patients
- Implemented in more than one unit with all patients
- In all units with all patients

Does your hospital have a person or functional area, who may also operate within other roles in the hospital, that is dedicated and proactively responsible for patient and family engagement and systematically evaluates PFE activities?

- No, not at all
- Talking about it
- Starting to plan structure
- Responsible for PFAC
- Responsible for other PFE initiatives
- Responsible for all PFE activity within the hospital or health care system

Does your hospital have an active PFE committee OR at least one former patient who serves on a patient safety or quality improvement committee or team?

- No
- Talking about it
- Starting to plan structure
- Regular meetings, with one or more members who are patient/family advisors (PFAs)
- PFA working on one hospital committee
- PFAs working on more than one hospital committee and are regularly consulted for short term projects

Does your hospital have one or more patients who serve on a governing or leadership board as patient representatives?

If a specific board representative is not possible, your hospital may implement one of the alternatives to the metric to incorporate the perspective of patients and families when making hospital governance decisions:

1. Asking for PFAC input on matters before the board, and incorporating a PFAC report into the board agenda.
2. Identifying elected or appointed board members to serve in a specific role, with a written role definition, representing the patient and family voice on all matters before the board.
3. Requiring all board members to conduct activities that connect them closer to patients and families, such as visiting actual care units in the hospital two times per year and/or attending two PFAC meetings per year.

- No
- Talking about it
- Planning
- Designated an existing board member to be the patient representative
- Chose a patient to be a board member
- Have a plan in place to sustain the patient seat on the board

Please select the most appropriate response for the items below. Note: Diversity can include racial, ethnic, gender, cultural, language, socioeconomic, or other relevant factors.	Yes	No
Does your organization have a board-level quality committee or clinical quality committee?	<input type="radio"/>	<input type="radio"/>
Does your board currently have at least one “quality champion”?	<input type="radio"/>	<input type="radio"/>
Does your board reflect the diversity of your hospital/health system in terms of your staff?	<input type="radio"/>	<input type="radio"/>
Does your board reflect the diversity of your hospital/health system in terms of the patients you serve?	<input type="radio"/>	<input type="radio"/>
Does your board reflect the diversity of your hospital/health system in terms of the community you serve?	<input type="radio"/>	<input type="radio"/>

Please select the most appropriate response for each item below.	Yes	No
Does the hospital collect information about RACE from patients in a standardized way through the use of trained registrars?	○	○
Does the hospital collect information about ETHNICITY from patients in a standardized way through the use of trained registrars?	○	○
Does the hospital collect information about LANGUAGE preference from patients in a standardized way through the use of trained registrars?	○	○
Is the hospital able to report race and ethnicity according to the standardized Federal Office of Management and Budget (OMB) categories?	○	○
Does your hospital use data to routinely (at least on an annual basis) establish goals in the reduction of racial and ethnic disparities (e.g., improve clinical quality indicators, CMS core measures, readmissions, etc.)?	○	○
Does your hospital use data to routinely (at least on an annual basis) identify gaps in care by race and ethnicity (e.g., improve clinical quality indicators, CMS core measures, readmissions, etc.)?	○	○
Does your hospital use targeted interventions to reduce disparities?	○	○
Does your hospital's strategic plan include goals for improving quality, safety of care for diverse individuals?	○	○
Does your hospital stratify quality measure data (e.g. readmissions, CMS core measures, etc.) by race, ethnicity, language reference or other socio-demographic variables (such as income, disability status, veteran status, sexual orientation and gender identity) to identify disparities in treatments or outcomes?	○	○
Does your hospital use stratified quality measure data (as described above) to address disparities in treatments or outcomes?	○	○