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EQIC events

Monthly workgroup meetings have started! Check the [event calendar](#) for the applicable dates and times and be sure to register for the series. Contact your project manager to verify if you are on the correct workgroup mailing lists for updates, reminders and meeting notes.

Announcements

Data request: Please enter this quarter's patient and family engagement data

EQIC requests that all hospitals update their patient and family engagement metrics on the secure data portal on a quarterly basis. Please [enter your current data](#) by May 15.

Your hospital's previously entered responses are populated in the data entry tab. Please log in and review these responses. If you do not have any changes, no further action is needed.

April is National Minority Health Month

The HHS Office of Minority Health has announced *Better Health Through Better Understanding* as the theme for this year's National Minority Health Month, which focuses on improving health outcomes for racial and ethnic minorities and American Indian/Alaska Native communities by providing them with culturally and linguistically competent healthcare services. It is estimated that only [14% of the U.S. population](#) has proficient [health literacy](#) and nearly [20% of people in the U.S.](#) speak a language other than English at home. When patients are provided with culturally and linguistically competent healthcare services, information and resources, they are empowered to create healthier outcomes for themselves and their communities.

Visit EQIC's [health equity webpage](#) and the National Minority Health Month website (available in

[English](#) and [Spanish](#)) to learn more about increasing health literacy for patients, providing culturally competent care for diverse populations and improving access to healthcare information for patients with limited English proficiency.

Education

TODAY!

Thursday, April 13

[Connecting your hospital culture of safety to patient harm reduction](#)

1 - 2 p.m.

According to the February 2022 *New England Journal of Medicine*, improvements in patient safety were quickly and severely reversed during the COVID-19 pandemic, indicating that the healthcare system lacks a sufficiently resilient safety culture and infrastructure. Hospitals now have an opportunity and an obligation to reevaluate patient safety with an eye toward building a more resilient healthcare delivery system. During this next CMS Community of Practice Call, join the discussion on how successful and sustainable patient safety improvement rests heavily on an organizational culture of attitudes, actions, teamwork and technology centered on reducing the risk of patient harm.

Thursday, April 27

[Antibiotic stewardship update: The CDC perspective](#)

Noon - 1 p.m.

This presentation will review current efforts to monitor and improve antibiotic use in the U.S., focusing on activities led and coordinated by the CDC in acute care. Speakers will focus on the CDC's National Healthcare Safety Network Antibiotic Use option and updates to the CDC Core Elements for Hospital Antibiotic Stewardship Programs. This webinar is offered as part of HANYS' *Commitment to Excellence Emerging Quality Trends* series.

Thursday, May 11

[Partnering with patients and families to prevent all-cause harm](#)

1 - 2 p.m.

Preventing all-cause harm continues to be a national priority. In 2016, an estimated 2.7 million harm events affecting hospital inpatients occurred, leading to more than 80,000 deaths at a cost of nearly \$29 billion. According to CMS, nearly 44% of these events and deaths could have been prevented. Studies have shown that people who are more involved in their care tend to be more satisfied, more likely to understand their acute and chronic conditions and are able to make informed decisions that can better help them.

The May CMS Community of Practice Call features strategies for hospitals and patients/families to engage as partners to ensure the right care is being delivered to the right patient at the right time to foster improvements in patient safety, healthcare quality, patient outcomes and equity while also minimizing staff burden.

Questions

Please contact [Cathleen Wright](#) or your [EQIC project manager](#) with any questions.

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