

IHI Virtual Expeditions



Helping teams
make rapid
improvements.





IHI Virtual Expeditions are topic-specific, action-oriented virtual programs that typically last two to four months. Expeditions are designed to help multidisciplinary teams make rapid improvements in the areas of greatest concern to health care organizations today.

Upcoming IHI Virtual Expeditions

Summer 2016

BEGINS**August
10****SNF Trigger Tool – Measuring Patient Harm in Skilled Nursing Facilities**

The IHI Skilled Nursing Facility (SNF) Trigger Tool for Measuring Adverse Events provides an easy-to-use method for accurately identifying adverse events (harm) and measuring the rate of adverse event incidence over time in SNFs.

BEGINS**August
17****Behavioral Health Integration – Beyond the Basics**

Integrating behavioral health and primary care is a key component of the Triple Aim, leading to better outcomes, better patient experience of care, and lower per capita costs, particularly for patients with multiple chronic conditions.

BEGINS**September
15****Bundled Payments – Transitioning to Value-Based Care**

Whether your organization has just begun navigating the transition to bundled payments, or has been learning along the way over the last few years, this IHI Virtual Expedition can equip you with the right resources and help you align and redesign your team for success.

Fall 2016

BEGINS**October
5****A Practical Approach to Ambulatory Patient Safety**

This six-session, virtual training will walk through a framework as the backbone of thinking about safety in primary and specialty care as well as provide tactical, implementable steps with tools to help primary care teams to recognize and address safety issues in their settings.

BEGINS**November
1****Improving Flow in the Emergency Department**

This six-session, virtual training will instruct participating teams how to improve the quality of patient care and the patient experience by optimizing emergency department patient flow, operations, and services.

Upcoming in 2017

Begins January 2017 Engaging Patients and Families in the ICU

Begins February 2017 Preparing for New Models of Joint Replacement Care

Begins March 2017 A Population Approach to Maternal Health

Begins March 2017 Strengthening Partnerships between Hospitals and Communities

Begins April 2017 From Consultation to Integration – Addressing Behavioral Health in the Hospital

