

Hospital Name _____
 Date Submitted _____, 2024

All three sections are required regardless of expenditure of funds. The total grant award is \$11,922.31

SECTION 1 INSTRUCTIONS: Put an X in the box to the right of the most appropriate statement for your hospital related to this Mid-year Report.

My hospital is reporting no funds expended. All funds will be reported on the Year-End Report.	
My hospital is reporting partial funds expended.	
My hospital is reporting all funds expended on this Mid-Year Report.	

SECTION 2 INSTRUCTIONS: Indicate items/services purchased with grant funds. Attach documentation showing receipt of goods/services purchased during the grant period.

<i>2024-2025 SHIP Purchasing Menu Item</i>	<i>Started/ Completed</i>	<i>Amount spent on selected activity</i>	<i>Describe each activity (how did you use the money?)</i>	<i>Please list vendor and/or name of education program.</i>
Quality reporting data collection/related training or software				
MBQIP data collection process/related training (including HCAHPS)				
Provider based clinic-based (Rural Health Clinic) quality measures education				
Alternative payment model and quality payment program training/education				
Computerized provider order entry implementation and/or training				
Pharmacy services training, hardware/software and machines (not pharmacist services or medications)				
Population health or disease registry training and/or software/hardware				
Social determinants of health screening software/training				
Systems performance training in support of ACO or shared savings related initiatives				
Telehealth and mobile health hardware/software (not telecommunications)				
Community paramedicine training and/or hardware/software				
Health information technology training for value and ACOs, including training/ software or cybersecurity risk assessment with training				

2024-2025 SHIP Purchasing Menu Item	Started/ Completed	Amount spent on selected activity	Describe each activity (how did you use the money?)	Please list vendor and/or name of education program.
ICD-11 software				
ICD-11 training				
S-10 Cost Reporting training (not software)				
Pricing Transparency Training/ Chargemaster training (software allowed)				
Quality improvement Training – no projects (List category -- see below). If you have more than three, please add a sheet of paper.				
Quality improvement Software – no projects (List category -- see below). If you have more than three, please add a sheet of paper.				
Efficiency Training – no projects (List category -- see below). If you have more than three, please add a sheet of paper.				

Total Amount Spent (no more than \$11,922.31)

Quality Improvement TRAINING

- Patient experience
- Discharge planning
- Patient Safety
- Reducing readmissions
- Antibiotic stewardship
- Immunization
- Hospital safety/emergency preparedness
- Reducing disparities in readmissions

- Lean
- PDSA
- Team STEPPS
- CMS abstraction tool
- Medicare spending per beneficiary
- Non-clinical operations
- Swing-bed utilization/measures
- Care Coordination
- Population Health
- Health Information Exchange
- Social determinants of health

Quality Improvement SOFTWARE

- Lean
- PDSA
- Team STEPPS
- CMS abstraction tool
- Medicare spending per beneficiary
- Non-clinical operations
- Swing-bed utilization/measures
- Care Coordination
- Population Health
- Health Information Exchange
- Social determinants of health

Efficiency Training

- Financial operational strategies
- 340B

SECTION 3 INSTRUCTIONS: Fully answer the questions below for this report to be considered complete.

1. Do you anticipate expending all FY24 SHIP funds by May 31 2025?

If no, please explain

Submitted by:

Email:

Phone number:

Email completed report to ship@kha-net.org no later than Dcember 31, 2024.