WhidbeyHealth

The Road to Quality

Geri Forbes, CEO
Role of CEO in Setting the Stage for Quality and Safety

Priority #1

• Agenda item on Executive, Manager and Team Meeting - encourage performance improvement telling our stories with one another
• Sets the tone for quality and safety discussions at team level - inclusive of daily huddles
• Allocates funding to support quality and safety
• Encourage ongoing education for Quality Improvement and Safety
• Health System participation in Safe Table learning
• Openly promotes quality and safety reporting of events
• Encourages use of data to identify opportunities for improvement
Quality and Safety...
where do we focus?

- Patient
- Team
- Guests
- Vendors partners on site
What is Safety at WhidbeyHealth

Safety ... the way we work – top of mind each and every day!

- Conversation begins at new hire orientation
- Ongoing focus on injury and harm prevention using data/trends to design interventions
- Verify safety as we introduction of new processes and equipment
- Disaster preparedness – active participation leadership as a healthcare system and in the region events
- Enhanced role of Employee Health in prevention and education
- Require safety plan for onsite construction
Role of the Board in Quality/Safety

Monthly Public Board of Commissioner Meetings

• Board sets the expectation for Quality and Safety

• Standing Agenda Item at ALL Board of Commissioner Public Meetings

• Data presented and reviewed (Falls, CAUTI, CLABSI)

• Major changes in systems and structures presented

• Teams recognized on improvements

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Role of the Board in Quality

Quality Committee of the Board meets monthly

- Two members of the Board of Commissioners sit on the Quality Committee of the Board (Not public meeting)
- All non-litigation cases are reviewed in this session
- Cases in or pending litigation are discussion in Executive Session of QC with the Commissioners, Physician Leader, CEO, CNO and Quality Director
- Discussion is transparent, candid, interactive and actionable
Guidelines for Telling "Patient Stories" with Boards
Utilize the Education Opportunity

Use of patient stories to educate new employees and new members of the Board on quality processes such as:

- Root cause analysis
- Sentinel event policy
- Disclosure and transparency policies
- Non-punititive, but 'just' culture for employees
- Other systems and processes for quality, safety and transparency

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Patient/Family Complaint Process

1. Patient/Family Complaint
   - Via Phone, Email, Letter, or in Person
   - Via written comments on NCAMS surveys that patient has signed
   - If it is a NCAMS or patient satisfaction survey comment, QIC will enter the complaint into PSN for the manager’s investigation, correction and resolution

2. Is this a billing issue?
   - If yes, refer to PPS
   - If billing issue is resolved, note resolution in account notes and process is complete
   - If NOT resolved, refer to CFO with PSN and account notes included

3. Patient/Family Complaint
   - Determine clinical area involved
   - Take contact information, email or send copy of contact information and clinical area involved to Quality Department
   - Transfer/refer person to the clinical area manager

4. Clinical Area Manager
   - Returns calls within 48 hours
   - Completes PSN at the same time as the call
   - Completes resolution/corrective action & documents on manager review page in PSN
   - Within 14 calendar days of complaint, calls complainant back with resolution/corrective action
   - If complaint came by email or letter, also writes a follow up letter and cc’s Quality (CMS req)

5. Is complainant received?
   - If yes, process is complete
   - If NO, refer to Quality

6. QIC receives referral either by a patient story in person or by report from Quality
   - QIC determines action to resolve complaint
   - QIC determines best person to contact complainant for this resolution
   - Resolved?
     - If yes, process complete
     - If no, complainant determines if she/he wants to take legal action. NOTE: this is not offered to the person as an option.

7. Quality Contacts Complainant within 24 business hours of referral
   - Quality reviews actions taken so far with complainant
   - Determines if complaint has a specific resolution in mind such as a bill adjustment
   - Quality determines if there are grounds for such an adjustments or resolution
   - If so, complaint is resolved
   - If not, complaint is referred to QIC

8. Referral to Quality
   - Manager provides referral to Quality within 24 business hours
   - Including completed PSN with actions taken
   - Any information that would assist Quality in achieving resolution

1/26/2015
CASE STUDY

- Patient post surgical outcome did not achieved desired result
- Patient and Family filed a complaint
- Patient and spouse invited to share their story with the Quality Committee of the Board
- Story was shared with detail as to how they felt about their experience, their dismay in the outcome and what they suggested we could have done differently
- We thanked them for their open and honest feedback, candor and concern
- Gave them our commitment to making their event a learning opportunity for the organization
- They thanked us for the opportunity to tell their story
Best Practice for Improvement
Institute for Healthcare Improvement

Be focused on:
Individuals and families
• Right Patient
• Right Place
• Right Time

Access to care
• Redesign of primary care services and structures
• Mental Health and Social Determinants of Health

Population health management
• Work across lifetime experience

Cost control platform
• Measure and improve to prepare for new payment structures paradigm changes

System integration and execution
• Redesign care, prevention, wellness and measures of success

The IHI Triple Aim is our framework to optimizing health system performance.

“Triple Aim”:
• Improving the patient experience of care (including quality and satisfaction);
• Improving the health of populations; and
• Reducing the per capita cost of healthcare.

WhidbeyHealth
Understand that Quality and Safety is a Journey - Not a Destination

The pieces fit together

Use the right tool

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Thank You

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