

Quality Orientation

Patient Safety
and
Performance Improvement



University of Mississippi
Health Care

Patient Safety



How do we define patient safety?

pa·tient [pey-shuh'nt] safe·ty [seyf-tee]

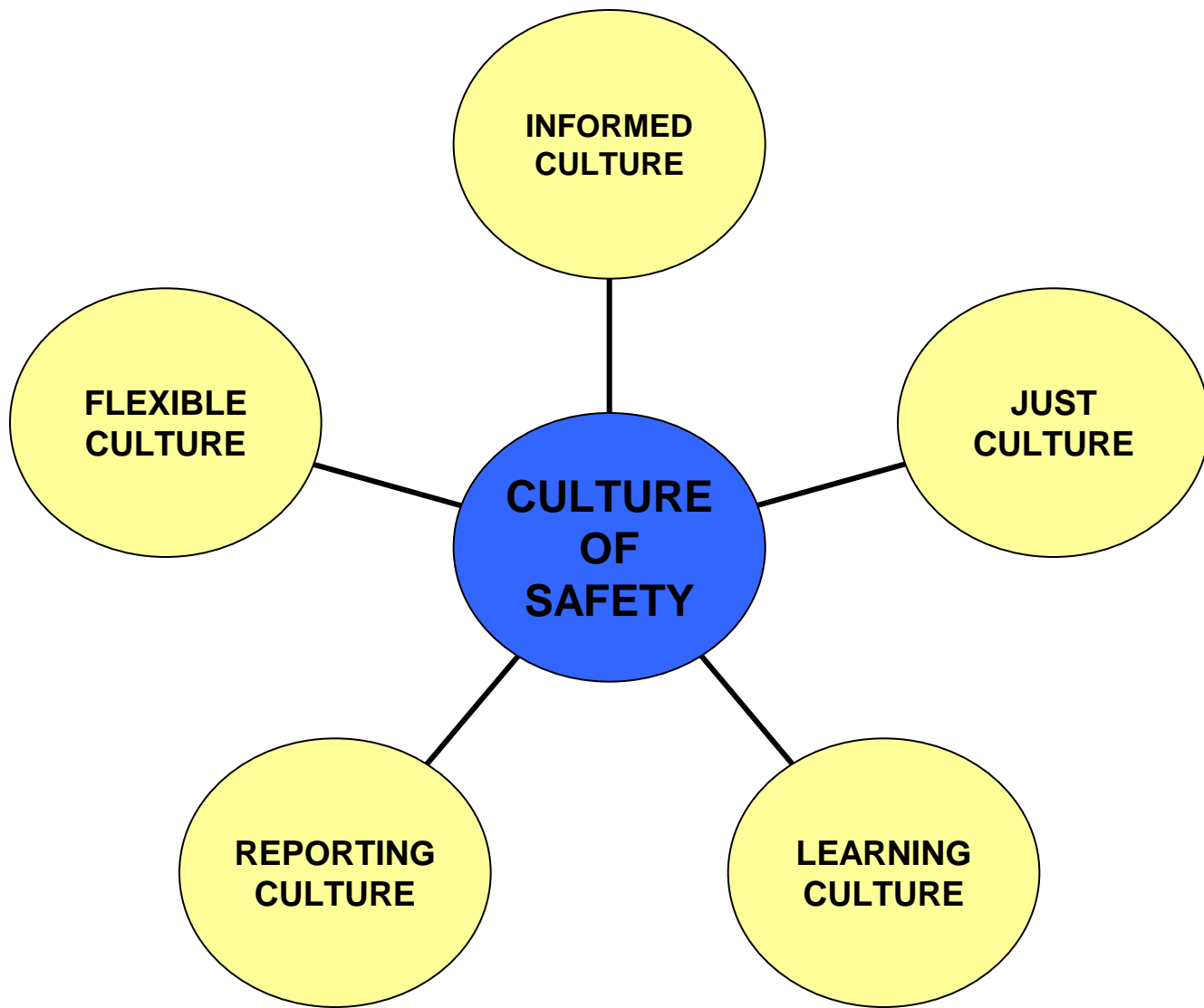
(n) freedom from unintended injury associated with the provision of healthcare services

- Ensuring patient safety involves the establishment of operation systems and processes that minimize the likelihood of errors and maximize the likelihood of intercepting them, so patient harm will not occur.



Who is responsible for patient safety?

- EVERYONE who enters our organization
 - Employees
 - Students
 - Patients
 - Visitors
 - YOU!





Learning from our Errors

- Reporting
 - Sentinel events
 - Unsafe acts
 - Near misses
- How to report
 - Occurrence reporting system
 - Supervisor



National Patient Safety Goals

- Patient identification
- Communication among caregivers
- Medication safety
- Reduce healthcare-associated infections
- Medication reconciliation
- Identify patient safety risks

Performance Improvement



What is Performance Improvement?

- A continuous effort to find new and better ways of doing things
- Improving our performance by using and applying
 - Best practices
 - Evidence based medicine
 - Improvement ideas
 - Success stories



Who is responsible for PI?

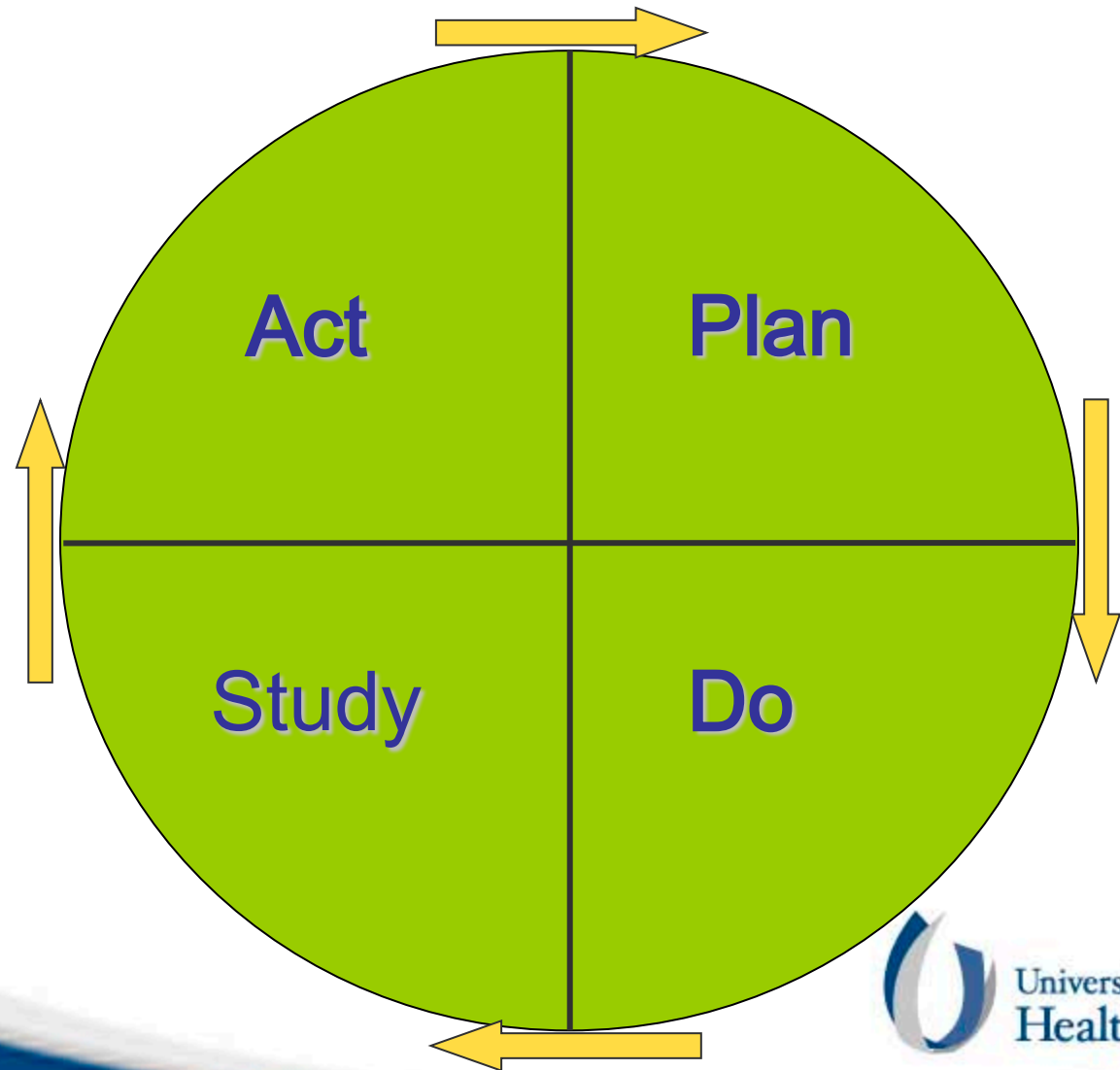
- All of us each day have the responsibility to improve the safety and quality of care we provide to our customers
 - Teams
 - Projects
 - PDSA reporting
 - Personal, departmental, and unit based improvement initiatives



How do we choose what to improve?

- UHHS Performance Improvement Plan
 - Communicates the methodology for how we will identify, prioritize, plan, measure, evaluate, and improve our systems, processes, and outcomes across the continuum of care
- Quality Boards and UHHS Leaders
 - Develop strategic plans, priorities, and expectations
 - Oversee the performance improvement process to accomplish desired goals for health, service, and cost outcomes

UHHS Model of Improvement





Regulations and Guidelines

- TJC - The Joint Commission
- Large impact including public perception, residency programs and reimbursement
- Four surveyors for 5 days - typically
- Unannounced surveys began January 2006
- Our last survey - February 2009
- Tracer activities compose the majority of the survey - "Traces" a number of patients through the entire health care process
- Surveyors interact primarily with front-line staff



Current Measures Available

- Quality Data Management (QDM)- Patient Satisfaction
- TJC Standards and Patient Safety Goals
- Restraint Use
- Procedural Sedation
- Organization Wide Initiatives
- Pain Assessment
- Customer Care Connection
- Scorecards and Report cards
- QDM HCAHPS Patient Satisfaction
- Mock Survey Reports
- Morehead Survey Results
- CMS/TJC Core Measure areas
 - Acute myocardial infarction
 - Heart failure
 - Pregnancy and related conditions
 - Children's asthma care
 - Pneumonia
 - Surgical care



Information and Education

- UHHS Leadership Meeting
- Healthstream modules
 - Performance Improvement
 - PDSA Training
 - Apparent Cause Analysis
- Websites
 - <http://pi.umc.edu/> and <http://patientsafety.umc.edu/>