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## The Board's Role in Quality and Patient Safety 1.0



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### Knowledge Points

- **Current state of hospital safety**
- **The board's role: Quality and safety are job one**
- **Transparency and public accountability**
- **Quality measurement and reporting**



### Knowledge Points

- **Partnerships necessary for success with value-based payments**
- **Discussion points**

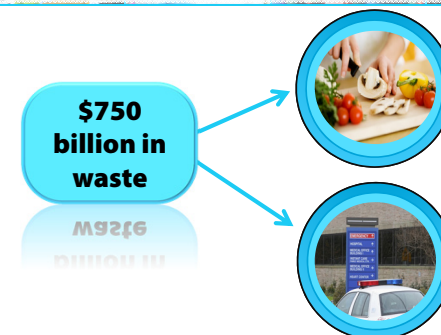


## The Current State of Quality and Patient Safety



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## The Cost of Waste in Health Care



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## The Cost of Medical Errors

- **Deaths from medical errors exceed motor vehicle accidents, breast cancer and AIDS**
- **Experts:**
  - Lapses in patient safety cause **200,000 deaths**
  - **2.4 billion extra hospital days**
  - **\$17-\$29 billion annually**

Sources: To Err is Human: Building a Safer Health System. Institute of Medicine. Never Event Frequency "Troubling." Standards Lacking. HealthLeaders Media. June 17, 2015.

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## Medical Errors Have Far Reaching Impacts



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## High Quality Pays

**High quality providers have the potential for....**



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## The Cost of Medical Errors Has Wide-Ranging Effects on Patients...



- Loss of trust in the health care system
- Diminished satisfaction
- Physical and psychological discomfort
- Lower overall health status

Source: To Err is Human: Building a Safer Health System. Institute of Medicine.

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## ...and on Health Care Professionals

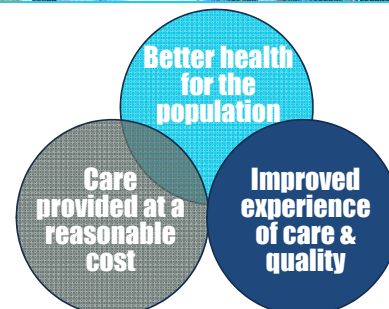
- Loss of trust in the health care system
- Declining morale and increased frustration
- Diminished job satisfaction
- Lost productivity



Source: To Err is Human: Building a Safer Health System. Institute of Medicine.

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## The "Triple Aim"



Source: Institute of Healthcare Improvement's Triple Aim.

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## Inadequate Systems

The Biggest Quality and Safety Problem



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## The System is Fragmented...



Patients see different providers for different health issues

Providers have limited access to patient information

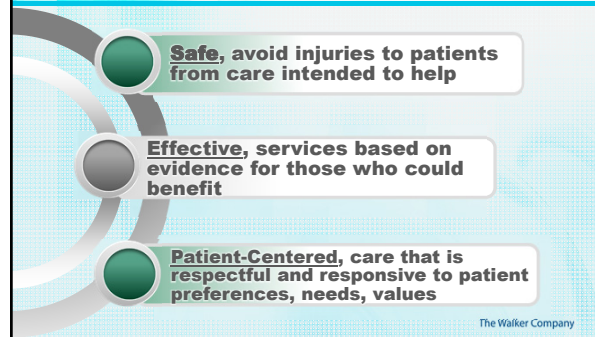
Care is poorly coordinated amongst providers

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**“What can or should our hospital or health system do to support safe, high-quality care?”**

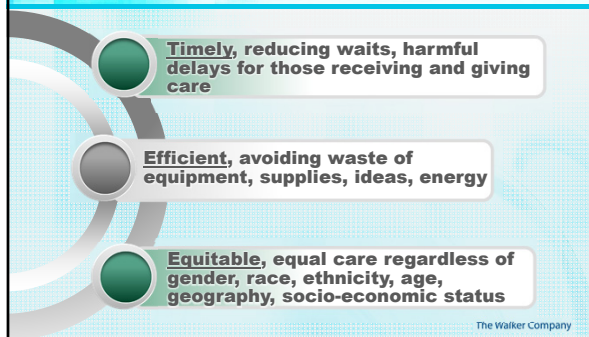
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## The IOM's 6 Aims of Care



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## The IOM's 6 Aims of Care



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## Job One

is Quality and Patient Safety



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## More Important Questions to Ask...

- Do we publicly disclose and discuss our quality and safety performance?
- What are the top safety issues for our hospital or health system?
- What is our aim for safety improvements, how quickly can we achieve our goals?
- How do we compare to organizations that score the best on safety?

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## More Important Questions to Ask...

- What should we hold the executive team and medical staff responsible for in improving our patients' safety?
- Is it easy and safe to report errors at our hospital? What is the process?
- How much do medical errors cost our hospital annually?
- What specific steps are we taking to address the IOM's Six Aims?

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## Consider This...

- Medical liability costs are driven by lawsuits
- Liability fears may cause physicians to leave practice
- Liability fears may cause physicians to practice "defensive medicine"
- Loss of consumer confidence and market share



Source: "To Err is Human: Building a Safer Health System," Institute of Medicine.

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## Transparency and Accountability

### Taking the Next Step



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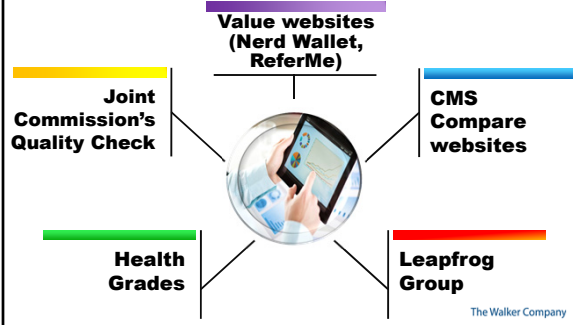
## Transparency...



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## Ranking is a Reality



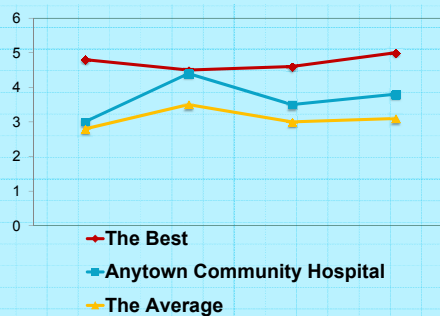
## Reporting and Measurement

Ensuring High Quality, Safe Performance



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## Do You Measure Up to the Best?



## Measure What's Most Relevant

- 1 Achieving quality and safety goals
- 2 Quality and safety measures used in determining payments
- 3 Adverse events
- 4 Hospital Compare website measurements

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## Measure What's Most Relevant

- 5 Infection measures
- 6 Employee safety
- 7 Community health (such as diabetes, obesity)
- 8 Unique issues important to the hospital/health system

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## Understanding Preventable Errors



## Serious Reportable Events



Operating on the wrong body part or wrong patient

Performing the wrong procedure

Leaving foreign objects in a patient

Contamination, misuse or malfunction of products and devices

Wrong discharge of an infant

Source: National Quality Forum Governance Principles.

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## Serious Reportable Events



Patient disappearance or suicide

Death or disability due to a medication error

Death or disability associated with a fall, burn or use of restraints

Care ordered by someone impersonating a doctor or nurse

Abduction or assault

Source: National Quality Forum Governance Principles.

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## Medicare's Hospital Compare

[www.medicare.gov/hospitalcompare](http://www.medicare.gov/hospitalcompare)

CMS first developed Hospital Compare

Collaborative effort with a wide variety of organizations

Now: physicians, nursing homes, dialysis facilities and home health

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## Meaning Behind the Websites

•Help people make decisions

•Improve quality of care

•Hospitals are required to report (those that aren't should still use it)

•Performance used for value-based purchasing payments



## Infection Reporting

NHSN

Surgical site infections

Catheter-associated UTI

Ventilator infections

Central line infections

MRSA infections

C. Diff infections

For more information: [www.cdc.gov/nhsn](http://www.cdc.gov/nhsn)

## Value-Based Payments

The Role of Quality



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## The Value Equation

$$\begin{array}{l}
 \text{High Quality} \\
 + \text{ High Patient Satisfaction} \\
 + \text{ Low Cost} \\
 \hline
 = \text{VALUE}
 \end{array}$$

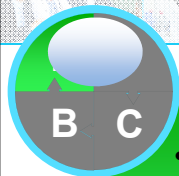


## It Can't Be Done Alone



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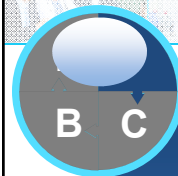
### Employers



- Champions for safety
- Promote need for reform
- Provide leadership

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### Patients



- Honesty and communication
- Advocate
  - Written information
  - Choose providers based on evidence
  - Clear treatment plans

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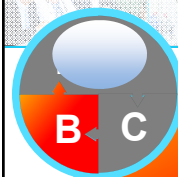
### Clinician and Staff Involvement



- Everyone plays a role
- Key elements:
  - Accountability
  - Education/Knowledge
  - Evaluation
  - Disclosure
  - Teamwork

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### The Board



- Make quality, safety the foundation
- On every agenda
- Set quality and safety goals
- Hold leadership accountable
- Infuse quality and safety throughout board discussions

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## Discussion Points

▶ **Has your board committed to making quality and patient safety a distinct competitive advantage?**

**Where is your board on the quality understanding and action continuum?**


**What specific ideas do you have for improving your board's "quality literacy?"**



## Discussion Points

▶ **How sure are you that your organization-wide systems are designed to ensure optimal quality and patient safety?**

**What initiatives should the board take to better carry out it's quality and safety accountabilities?**



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