Quality and Patient Safety
at
Cleveland Clinic

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Patient Safety Officer

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Chair, Quality and Patient Safety Institute
Cleveland Clinic: Quality and Patient Safety

What are we doing?

• Quality and Patient Safety Institute – 2006

• Leadership is committed to Quality and Safety as a high priority.

• Infrastructure development to fulfill Mission and Vision

• Focus Areas
Quality and Patient Safety Institute

Chairman – J. Michael Henderson, MD
Administrator – Elaine Mead

Departments and Directors

Quality
- Jackie Matthews

Accreditation
- Eileen Pomiecko

Risk Management
- Vicki Bokar

Data
- Eric Hixson

Environment
- Stuart Kline

Surveys & Outcomes
- Barbara Ackerman

Process Improvement
- Robert Frye

Physician Leadership:

Shannon Phillips  Nick Smedira  Chris Hebert  George Topalsky
Tom Fraser  Ajay Kumar  Brian Parker
Quality and Patient Safety Institute

FUNCTIONS:

• Administrative Structure and Authority

• Coordination: All departments contribute to programs for Quality and Patient Safety.

• Develop a communication structure to clinical departments for information / education / planning / implementation for Quality and Patient Safety.

• Connect Quality and Patient Safety to leadership and clinical Institutes
Support Team in the Clinical Institutes

Each Clinical Institute has a **Support Team** comprised of experts in:

- Quality
- Safety
- Clinical Risk Management
- Accreditation
- Infection Control
Who “owns” Quality and Patient Safety?

We all do

Balance of Responsibility

Institutes QPSI
What Drives Quality and Patient Safety?

- **Regulation**: CMS / Joint Commission / ODH

- **Required Reporting**: CMS: Core Measures / POA / IPPS / OPPS / PQRI; ODH -2007 legislation for Quality Reports

- **Patient Safety**: NPSG / IHI / AHRQ – Patient Safety Indicators / Leapfrog

- **Quality Metrics “standard setters”**: National Quality Forum / IHI

- **Scorecards**: US News and World Report / Payors
Focus Area 1: Accreditation & Regulation

• Approach going forward:
  - Best Practices / Continuous Readiness
  - It really is about the patient.

• QPSI / Institute Team
  - Content experts: Communication / education
  - Action experts: Institutes / the front line
  - Incorporate the standards into daily practice.
Focus Area 2: Quality Data and Reporting

• Align Clinical Outcomes and Process Measures

• Cleveland Clinic Outcomes Books

• Quality Data capture as part of clinical practice (EMR)
Quality Outcomes Reporting:
Aligning Clinical Outcomes and Process Measures

**Clinical Outcomes:**
- Publications / Outcomes Books
- Mostly High Profile areas
- X percent of CC patients
- Excellent results

**Process Measures:**
- Publicly reported data
- Drawn from all CC patients
- Opportunity for improvement

Cleveland Clinic
Clinical Outcomes: National Quality Datasets

• An Opportunity for the Institutes:
• Recommend to all Institutes
• Quality Improvement and Reporting
• Source data for Outcomes Books

ICU Database: Critical Outcomes

• What is your “Best” Database?
Quality Data capture in Clinical Practice

• Data Management in QPSI:
  - Oversight responsibility for quality data collection / abstraction
  - Combined forces with ITD and Medical Operations

• Electronic Data Capture:
  - Increase “Quality” data capture as we move to Inpatient Epic
  - Example: Surgical Episode (NSQIP)

• Data Reporting:
  - Keep it Simple (and actionable).
  - Scorecards with Medical Operations
Focus Area 3: Patient Safety

• Focus of attention - Cleveland Clinic 2007 factoids:

  - 32 Sentinel Events in 2007
  - 30 /1000 eligible pts
  - (Ohio rate – 9)

  - DVT / PE Rate
  - 318 Staph Aureus Blood stream infections

  - Overall Surgical Site Infection rate was 7.6%
  - 20 / 1000 Eligible Pts
  - (Ohio rate -17)
  - Decubitus Ulcer rate
• SERS: Event reporting

• Focus on “Harm” events. Timely investigation & Action Plans

• Disclosure / apology / early intervention
Focus Area 4: Metrics

- Scorecards for Quality & Safety
- Data drives improvement
- Work to national standards (NQF / IHI / AHRQ etc)

**DATA:** “If you can’t measure it, you can’t manage it”

*Edward Deming*
Focus Area 5: External Reports

Reputation

Outcomes

Safety

Volumes / outcomes / cost / safety

New York State Department of Health
2003 – 2005 HOSPITAL AND SURGEON OUTCOMES
QPSI

- Quality
- And
- Safety
- Performance Improvement
- Monitoring and Accountability
- Communication, Education, Training and Awareness
An Approach to “QUALITY” – Cleveland Clinic

• Leadership: A hospital commitment that Quality & Patient Safety are important.

• A structure to coordinate “quality” activities

• Build a “TEAM” to develop and support a plan for Quality and Patient Safety.

• Involve the physicians.

• Embed Quality into daily clinical practice.