

## **Quality and Patient Safety Report December 2014**

The Quality and Patient Safety program at the University of Illinois Hospital & Health Sciences System (“UI Health”) supports quality and safety improvement for UI Health’s entire scope of clinical operations including our hospital, clinics, and Mile Square Health Center.

Over the past year, we have enhanced the alignment and integration of key quality and safety endeavors with other organizational priorities, while also working to further strengthen partnerships with UI Health’s health sciences schools. Key 2014 highlights are briefly outlined below.

### **Quality and Patient Safety Division**

UI Health’s Quality and Patient Safety division, directed by the Associate Vice President for Health Affairs, Quality and Patient Safety, includes the following four teams:

- Accreditation and Clinical Compliance
- Infection Prevention and Control
- Quality Performance and Improvement
- Patient Safety and Risk Management

All four teams experienced leadership changes this year. The former Director of Quality and Accreditation accepted the new role of Director, Accreditation and Clinical Compliance, and the former Assistant Director of Quality and Accreditation was promoted to Director, Quality Performance and Improvement. Two leaders with extensive experience and expertise were also recruited into UI Health this year: our new Associate Director for Infection Prevention and Control started in mid-June, and our new Director for Risk Management and Patient Safety joined the organization in mid-December.

Collectively, these leaders and their teams have developed and are implementing a coordinated plan to lead UI Health in consistently delivering high quality, cost effective patient care and health outcomes, and to assist in the pursuit of eliminating disparities in health and healthcare.

## Quality and Safety Strategy and Leadership Steering Committee

Established in early 2013, the Quality and Safety Strategy and Leadership Steering Committee (“QSSL”) continues to provide leadership, direction, and oversight to UI Health’s enterprise-wide quality and patient safety priorities, performance, and action plan. Its membership includes key clinical and operational leaders from across the clinical enterprise, the Office of the VPHA, and UI Health’s seven health sciences schools.

### FY14 Quality and Patient Safety Goal Performance

UI Health exceeded two of its three FY14 Quality and Patient Safety goals and fell short in the third area:

1. **Central Line-Associated Blood Stream Infections (CLABSIs):** Our goal was to reduce CLABSIs by 20% (target goal) to 30% (stretch goal) by June 2014 as compared to our June 2013 baseline. ***We exceeded our stretch goal with an actual reduction of 43%.***
2. **Catheter-Associated Urinary Tract Infections (CAUTIs):** Our goal was to reduce CAUTIs by 10% (target goal) to 30% (stretch goal) by June 2014 as compared to our June 2013 baseline. ***We exceeded our stretch goal with an actual reduction of 44%.***
3. **30-day All-Cause Readmissions:** Our goal was to reduce these by at least 25% by June 2014 as compared to our June 2013 baseline. ***We fell short of this goal, achieving only a 7% reduction.***

### FY15 Quality and Patient Safety Goals

In June, QSSL named its FY15 Quality and Patient Safety priorities and targets:

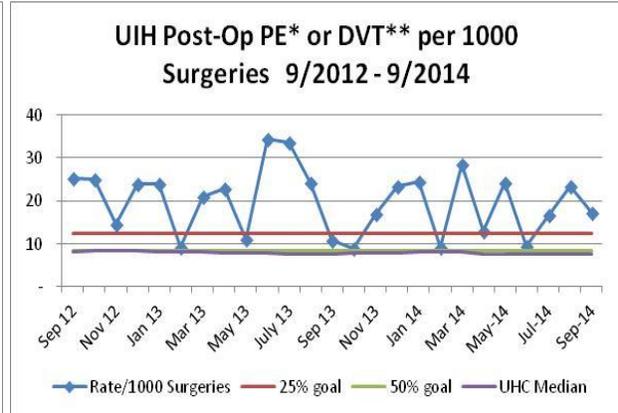
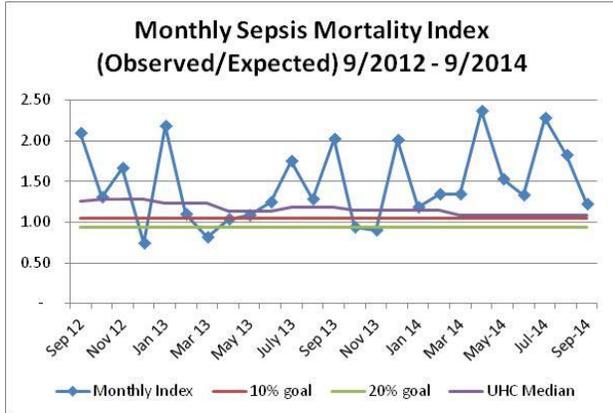
1. **Reduce Sepsis Mortality** by 10% (target goal) to 20% (stretch goal)
2. **Reduce Post-operative Deep Venous Thrombosis and Pulmonary Embolism** by 25% (target goal) to 50% (stretch goal)
3. **Reduce 30-day All-Cause Readmissions** by 20% (target goal) to 30% (stretch goal)

The improvement targets are relative to UI Health’s baseline performance as of June 30, 2014. Achieving the stretch goals will place UI Health’s performance in the top half of hospitals included in the University HealthSystem Consortium (UHC) for each of these priority areas.

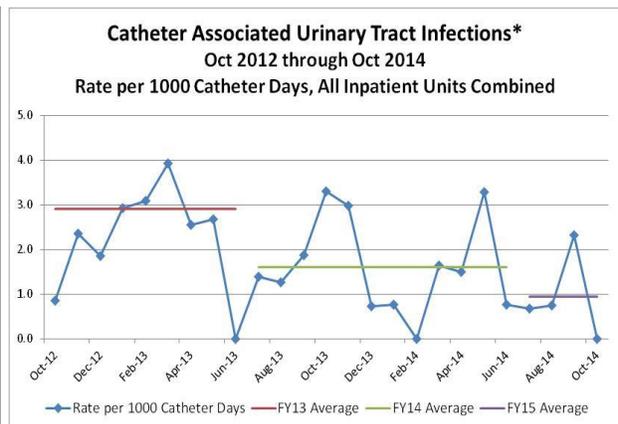
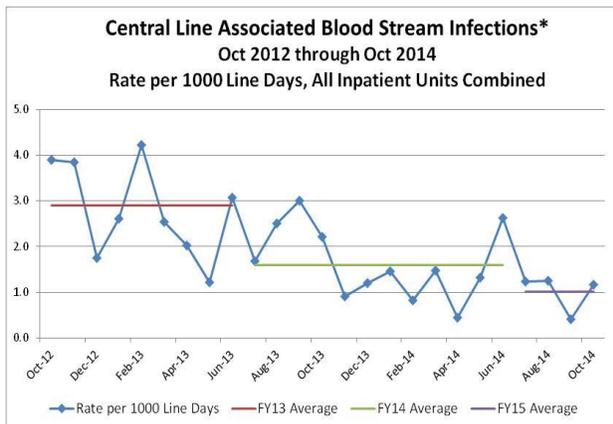
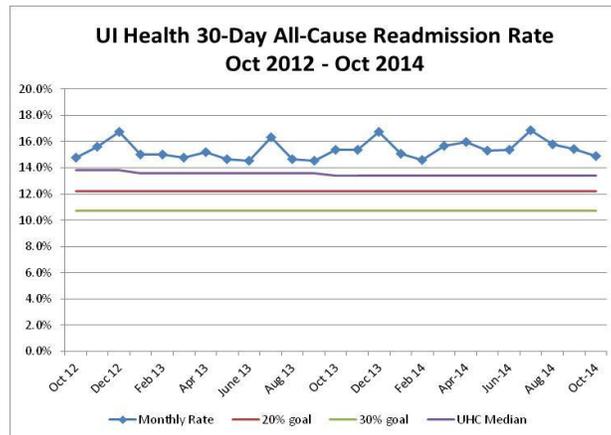
Work also continues on CLABSIs and CAUTIs, though no new improvement targets were set for FY15.

## Supporting Enterprise-Wide Goal Achievement

For each of the priority areas outlined above, multidisciplinary project teams and detailed project plans were formed beginning in July. Performance is being tracked monthly by QSSL, and progress is shared broadly each month throughout UI Health.



\*PE – Pulmonary Embolism \*\*DVT – Deep Venous Thrombosis



## **Quality Summit**

Dr. Jim Reinertsen, an expert in achieving large-scale improvements in healthcare performance, visited UI Health in June. During his three-day visit, he spent time with leaders and staff, observing and discussing our clinical quality and patient safety successes and challenges. He also led a half-day Leadership Summit on Quality and Safety co-sponsored by the Office of the VPHA and our seven health sciences deans. The Summit was attended by over 180 clinical and operational leaders and focused on leadership's role in quality and patient safety performance, as well as proven approaches for accelerating performance improvements.

## **Preventing and Responding to Patient Harm**

Our Safety and Risk Management team is continuing its work to elevate the safety of our care processes and systems. This includes the investigation of significant events – unexpected occurrences that had the potential to cause serious or lasting harm. During 2014, root cause analyses were conducted, and subsequent process improvements made, in the following areas:

- Medication overdose in Interventional Radiology
- Breast milk administration
- Smoke from a surgical instrument in the Operating Room
- IV heparin and insulin administration
- Biopsy specimen handling
- Cancelled surgical cases after anesthesia administration
- Turnaround times for imaging studies
- Gastrojejunostomy tube placement

Review of staffing-related issues is continuously incorporated into the analysis of patient occurrences. The Safety and Risk Management process includes assessment of staffing levels, personnel supervision, and task performance by each involved staff member using a Just Culture approach based on James Reason's Unsafe Acts Algorithm.

The Safety and Risk Management team ensures full disclosure to our patients and families when harm occurs. Team members provide coaching to clinicians preparing for communications with patients and families, and also attend and facilitate patient and family meetings involving communication of adverse events as requested.

In addition, the Safety and Risk Management team activates peer-to-peer support for clinicians who have been involved in or affected by patient harm events.

## Supporting Other Quality and Safety Efforts

UI Health’s quality and safety agenda remains much broader than the priority areas stated above. The Quality and Safety team continues to provide support, consultation, and facilitation for the important body of work that collectively comprises UI Health’s performance improvement journey.

One such example is our Ebola Preparedness planning. The Infection Prevention and Control team has played a key role in developing and implementing UI Health’s plan for identifying and managing patients who might have symptoms similar to Ebola Virus Disease and are seeking care at our facilities.

## Improvement “Across the Board”

One of the tools the Quality and Patient Safety division uses to track UI Health’s progress is the University HealthSystem Consortium’s “Vitals in Performance” dashboard. This VIP dashboard includes a total of 20 quality and patient safety measures in four categories:

- Improving Survival
- Coordinating Care
- Reducing Variations in Care, and
- Preventing Patient Harm.

When we began tracking our Quality and Patient Safety performance with this tool in Quarter 1 of FY 2013 (July-September 2012), only 6 of our measures (30%) were in UHC’s “top half”, and only 2 (10%) were in the “top quartile”. Demonstrating significant improvements “across the board”, for the most recent quarter available – Quarter 4 of FY 2014 (April-June 2014) – 9 of UI Health’s measures (45%) are in the “top half” and 6 (30%) are in the “top quartile”.

