

2010 Quality Summit Annual Report



From initiative to standard in one year

May 2010

Presenting Enloe's 2009-10 Quality Journey

- 2009 Perspective
- Poster Presentations and Quality Summit Award
- 2010 Quality Initiatives



ENLOE
MEDICAL CENTER



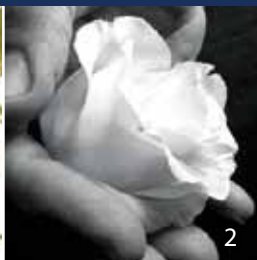
1) Charles Merriman, MD, presents at Enloe's 2010 Quality Summit. 2) The Enloe Health Learning Center encourages health education. 3) Oncology nurses on Enloe's 4th Floor focus on humanizing the dying process. 4) Caregivers in Enloe's Definitive Care Unit compose staff-led safety teams. 5) Enloe received the Get With The Guidelines Gold-Plus Performance Achievement Award in 2009. 6) The Cardiac Catheterization Lab's clinical excellence contributed to receiving STEMI Receiving Center Designation.



Table of Contents

2009 Perspective	4
Culture of Quality	5
Poster Presentations	6
Quality Summit Award	13
2010 Quality Initiatives	14
2010 Perspective	15
Acknowledgements	15

- 1) Maternal and neonatal care is the focus of a 2010 Quality Initiative.
- 2) Enloe's White Rose Companion Program is dedicated to ensuring no one dies alone.
- 3) Clinical Documentation Improvement Team members improve communication and care.



2009 Perspective

The first Quality Summit challenged all Enloe physicians and staff to boldly imagine the kind of care we want to provide our patients. “Good enough” wouldn’t be good enough any more. We sought to fulfill the vision “to be the first choice for health care”—and we knew that notion would only become reality if we took the best in evidence-based, patient-centered care and hardwired these innovations into the daily practice at Enloe.

Medical staff leadership selected five Quality Initiatives that would be the focus over the next year: Decrease pneumonia associated with ventilator use, decrease urinary tract infections associated with bladder catheter use, decrease the mortality from severe bloodstream infections (sepsis), create and use a checklist with every surgery that would decrease possibility of complications, and decrease the risk of blood clots. Ten physicians led the “Action Teams” and dedicated the next year to reaching these ambitious goals.

We can stand still and fall behind,

We can move forward and stay even, or

We can choose to lead and define the future.

Dr. Arthur Dugoni

Culture of Quality

Enloe's core values influence all we do. These values express our intent to continually focus on the quality of our care, create a culture of service, foster ownership and empowerment of outcomes, demonstrate integrity and transparency, and show mutual respect.

The Quality Summit showcases our commitment to patient safety. As teams throughout the organization highlight the work they are doing to improve quality, we find reinforcement of the value that every person is empowered to make a difference. The Summit, held annually, also allows Enloe to be more transparent about our work, which drives us to become more accountable to each other and to our patients.

Communities across the country are increasingly aware of health care performance. Prominent media outlets spotlight patient safety on television, radio and print. Web-based report cards show how hospitals in every state compare on selected measures and patient satisfaction. We are committed to improve what is publicly reported. More than that, we are committed to lead by example and implement what is considered "best practice" throughout the organization.

In addition to the five Quality Initiatives, another twenty-three teams from throughout the hospital submitted poster presentations showcasing their work over the past year. One of these projects was selected, by popular vote and established criteria, as the recipient of the first Quality Summit Award.

Poster Presentations

Catheter-Associated Urinary Tract Infection Prevention

This team's work resulted in creation of a policy for more careful consideration before the use of urinary catheters. Catheter use decreased, and the number of infections fell by 75 percent, to a rate well below the national average.

Ventilator-Associated Pneumonia Prevention

The critical care units instituted a "bundle" of best practices known to reduce pneumonia related to ventilator use. Nationally, these infections occur at rates between 5.1 and 8.3 pneumonias for every 1,000 days on a ventilator. As of April 2010, Enloe has had no cases of these infections since October 2009.

Decreasing Mortality from Severe Sepsis and Septic Shock

By increasing awareness of best practice measures and sepsis therapies, as well as identification of septic patients, Enloe's survival rates are better than national averages. Changes in care resulting from this initiative saved 64 lives in 2009.

Implementing the Enloe Surgical Checklist

Enloe developed its own surgical checklist, based on IHI recommendations. Adopted by the medical staff in March 2010, it is already used in 98% of surgeries. OR teams attest to the improved communication and teamwork resulting from the checklist's use.

Poster Presentations

Venous Thromboembolism/ Deep Vein Thromboembolism Prevention

All patients at Enloe are now screened for their risk of deep vein blood clots, which are potentially fatal. Standardized orders for evidence-based clot prevention have been implemented.

Enloe Health Learning Center

This free community health library opened on May 21, 2009. Community members constitute over three-fourths of the patrons, who all enjoy free Internet resources and printed materials.

Alcohol Withdrawal Management

Due to the protocols created by this team, patients experiencing withdrawal symptoms have fewer falls, require fewer sitters and are able to leave the hospital days sooner than before these changes.

Dysphagia Screening in Stroke Patients

Part of Enloe's Gold Plus Award winning Stroke Program, dysphagia screening is performed consistently to ensure that stroke patients can safely swallow before starting oral nutrition.

Poster Presentations

DCU Improvement Project

The entire Definitive Care Unit is focused on improving patient safety by creating staff-led safety teams. To ensure safe transitions home and deliver exceptional service, a member of DCU calls every patient after discharge.

Baby Friendly Hospital

The obstetric and pediatric departments are working to become the first California hospital north of Sacramento to achieve this designation, which recognizes excellent OB and Perinatal care and focuses on improving breastfeeding rates in new mothers.

Throughput

Improving patient flow has led to industry-leading rates for patients who leave the Emergency Department before being seen. The result is that over 1,000 more patients were able to receive care in the ED in 2009.

Intensivist Program

The Intensivist Program, created in August 2009, draws physicians dedicated to inpatient critical care. Partnering with other critical care professionals, they have achieved a 50% decrease in ventilator days and restraint use, and have been instrumental in eliminating ventilator-associated pneumonias.

Poster Presentations

STEMI Certification

This work in cardiac care outlines Enloe's journey to becoming the only California hospital north of Roseville designated as a receiving center for ST Elevation Myocardial Infarctions.

Inpatient Glucose Control

This initiative of the Hospitalist physicians and Diabetes Committee produced protocols that enable Enloe to consistently beat national averages for safe glucose levels in hospitalized patients.

White Rose Companions

So that no one has to pass away alone, this program pairs a volunteer with a dying patient who would otherwise have nobody at his or her side for the final hours of life.

Service Recovery

This team works diligently to address patients' billing concerns and expedite any balance adjustments that are necessary based on care or service.

Poster Presentations

STAT Lock IVs

Using this new device to secure intravenous catheters, the IV can stay in place longer. This results in fewer planned as well as unplanned IV restarts, improving patient and nursing satisfaction.

Respiratory Therapy Electronic Medication Record

Respiratory therapists now use electronically generated medication lists. By doing this, medication administration accuracy improved by 20%, which improved patient care and safety.

Electronic Progress Notes

This progress note creates an efficient template for physicians to accurately document their assessment of each patient each day. The template is automatically populated with current lab data and vital signs.

Bariatric Program

This multidisciplinary team has achieved Center of Excellence status from the American Society for Metabolic and Bariatric Surgery by reducing post-operative complications and improving long-term outcomes.

Poster Presentations

**Patient Property:
Lost and Found**

Working over a year and a half, this team significantly decreased the number of patient belongings lost during a hospital stay. The total is down nearly 40 percent from first quarter 2009.

**Rehabilitation
Hospital Catheter-
Associated UTI
Prevention**

By implementing standard protocols for bladder catheter use, the incidence of catheter-associated urinary tract infections has been decreased. This allows patients to more fully participate in their rehabilitation therapies.

**On-time Induction
of Labor**

The timeframe to begin an elective induction has decreased from 1½ hours to under 1 hour, improving the satisfaction of both patients and physicians.

**Medication
Management Training**

This team re-created medication safety education for new and existing staff, plus established medication safety rounds. Participants report feeling better prepared to administer medications safely.

Poster Presentations

Pressure Ulcer Prevention

Pressure ulcer prevalence rates have fallen from 6% to 1%, significantly better than the average national rate of 5%, thanks to a series of measures. Among them: special mattresses on all beds, new skin-care products on the formulary, and extra training and monitoring.

Needs of the Dying

The inpatient oncology team has focused on humanizing the dying process by focusing on the comfort, spiritual needs, and communication during a person's last days. Patients and family have welcomed to these efforts.

Esplanade Rehabilitation Therapies List

By creating electronic patient therapy lists, the physical therapy team ensures that every patient receives the appropriate treatment, and therapists spend less time generating their work lists for the day.

Clinical Documentation Improvement

By more precisely documenting patients' medical conditions, communication between all caregivers is improved, which improves care. This also leads to more accurate publicly reported data.



2010 Quality Summit Award Sepsis Mortality Reduction Team

Sepsis results when an infection from any source spreads throughout the bloodstream, often causing internal organ damage and even death. The sepsis mortality reduction project started as the vision of physicians, pharmacists, nurses and therapists who saw an opportunity to improve care to our patients with sepsis. Now, with consistent education and process refinement at Enloe, patients with this life-threatening condition are quickly identified and receive the best care possible.

The results speak for themselves. Mortality has fallen to as low as 14% over the past year, and is consistently below the national average of 29%. In 2009, sixty-four more patients survived severe sepsis and septic shock than would have before this effort began.

2010 Quality Initiatives

As in 2009, Enloe has identified Quality Initiatives with an emphasis on reducing the risk of hospital-acquired conditions. Another focus is to improve the efficiency of the hospital, which will allow more patients to receive care and improve the patients' experience.

This year, each Quality Initiative will be led by a Physician Co-Champion and a Nurse Co-Champion.

Further improve throughput

- Improve the use of Emergency Department resources so that patients move more quickly to the inpatient units when they are admitted
- Improve the efficiency of the discharge process

Decrease impact of drug-resistant organisms

- Improve the timeliness of screening patients for infections such as MRSA, including "healthy" patients who carry infections without symptoms
- Improve the evidence-based use of antibiotics

Improve maternal and neonatal health

- Move away from elective deliveries earlier than 39 weeks into pregnancy to ensure the best conditions for mother and baby

Ongoing Quality Initiatives

All of the 2009 Quality Initiatives will continue to be monitored and refined as part of our culture of quality.

2010 Perspective

When we get better, people stay alive.

Rulon Stacey, Health Care Executive

The perspective for 2010 is simple and to the point: Our work impacts lives, and our work saves lives. We have already shown what committed individuals, working together, can achieve in just one year. We expect similar successes in the year to come. It is the work we do every day, and will continue to do, at Enloe Medical Center.

Acknowledgements

First and foremost, this work is dedicated to the patients we serve. The Board of Trustees set a vision for health care that the entire organization has embraced. The Quality Management Department has been instrumental in supporting these vital efforts. The poster presentations owe their exceptional quality to the SQUIRE publication guidelines for reporting health care quality improvement research. And nothing would have been possible without the selfless contributions of physicians, clinical staff and non-clinical staff who are dedicated to QUALITY every day at Enloe Medical Center.

For more information about Quality Initiatives at Enloe,
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