Accelerating Performance Excellence at RWJUH: Using the Malcolm Baldrige Approach to Improvement

Presented by:
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Clinical Outcomes and Medical Affairs

Making New Jersey a Model for Best Practices in Health Care, February 19, 2003
- 504 acute care hospital (large expansion project recently completed)
- 3rd highest Medicare case mix index (34% increase last 10 years)
- High occupancy
- 4300 employees
- 1403 Medical Staff and Allied Health Professionals
Our Quality Journey

- Where we were
- Where we are
- Where we’re going

PRONJ and other quality indicators
Malcolm Baldrige

Steps Toward a Mature Process Approach
An Aid for Scoring Approach-Deployment Items

(1) Reacting to Problems
Operations are characterized by activities rather than by processes, and they are largely responsive to immediate needs or problems.

(2) Early Systematic Approach
The organization is at the beginning stages of conducting operations by processes with repeatability, evaluation and improvement, and some coordination among organizational units.

(3) Aligned Approach
Operations are characterized by processes that are repeatable and regularly evaluated for improvement, with learnings shared and with coordination among organizational units.

(4) Integrated Approach
Operations are characterized by processes that are repeatable and regularly evaluated for change and improvement in collaboration with other affected units. Efficiencies across units are sought and achieved.
Impact of Case Management on Lipid-Lowering Therapy in CAD

Nosocomial Infections Per 1000 Patient Days - Methicillin-Resistant Staphylococcus aureus - December, 2002
Vaginal Birth Complication Rate

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Actual
Upper pred level
Expected
Lower pred level
Clear and Measurable Goals

- Strategic goals
- Organization-wide goals
- Department/team goals
- Individual goals
PERFORMANCE IMPROVEMENT PLAN

2000
Quality Goals

- **2000**: Consistent with the HCFA (now CMS) Sixth Scope of Work, RWJUH will develop and implement performance improvement initiatives to decrease the non-compliance rate by 30%.

- **2001**: Improve performance for all national quality indicators that are part of the HCFA Sixth Scope of Work to at least 90% appropriate adherence to recommendations.
## Process (Who, What, Where, When, How, and Why?)

<table>
<thead>
<tr>
<th>Pre-Hospital</th>
<th>ED</th>
<th>Hospital</th>
<th>D/C Point</th>
<th>Post-Hospital</th>
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</thead>
<tbody>
<tr>
<td>Physician</td>
<td>Physician</td>
<td>Physician</td>
<td>Nurse</td>
<td>Facility Staff</td>
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<tr>
<td>Paramedic</td>
<td>Nurse</td>
<td>Nurse</td>
<td>Case Manager</td>
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<tr>
<td>Facility Staff</td>
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Vaccines
# Health History Form

## Recent Immunizations

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Date</th>
<th>Immunization</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tetanus</td>
<td></td>
<td>Pneumonia Vaccine (within last 10 yrs)</td>
<td></td>
</tr>
<tr>
<td>Influenza (Administered 10/1 - 2/1 annually)</td>
<td></td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>Other:</td>
<td></td>
</tr>
</tbody>
</table>

## Do you have any allergies?  ☐ NO  ☐ YES  (If YES, explain reaction below)

<table>
<thead>
<tr>
<th>Category</th>
<th>Reaction</th>
<th>Category</th>
<th>Reaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food</td>
<td></td>
<td>Dyes/Contrast Media</td>
<td></td>
</tr>
<tr>
<td>Medications</td>
<td></td>
<td>Blood Transfusion</td>
<td></td>
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<tr>
<td>Latex/Rubber</td>
<td></td>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

## Current Medications:

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Dose</th>
<th>Route</th>
<th>Freq</th>
<th>Last Dose</th>
<th>Drug Name</th>
<th>Dose</th>
<th>Route</th>
<th>Freq</th>
<th>Last Dose</th>
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</tbody>
</table>

How do you pay for your medication?  ☐ Insurance  ☐ Self-pay  ☑ More information requested

Do you think that any of your medications are not effective?  ☐ No  ☐ Yes

Please explain: ___________________________________________________________
10/31/02
04:02AM INFLUENZA VACCINE
ADMINISTRATION: ADMINISTERED ON 10/2002
04:02AM PNEUMOCOCCAL VACCINE
ADMINISTRATION WITHIN THE LAST 10 YEARS: ADMINISTERED IN 2001
Nurses Automated Kardex

MR#: M 89
ACCT#: 834T01
SERV: 8T
MD: ADM:
DX: SEPSIS/RULE OUT PERITONITIS

======================================
SUMMARY: 11/20/2002 07:05 AM TO 03:05 PM

PATIENT INFORMATION:

08/07/2000 ALLERGY: --LOPRESSOR, PER PATIENT
08/07/2000 ALLERGY: --PHOSCAN, PER PATIENT
08/07/2000 ALLERGY: --CIPRO, PER PATIENT
08/07/2000 ALLERGY: --MACRODANTIN, PER PATIENT
08/07/2000 ALLERGY: --VASOTEC, PER PATIENT
08/07/2000 ALLERGY: --IVP DYE, PER PATIENT
08/07/2000 ALLERGY: --CLONIDINE, PER PATIENT
08/07/2000 ALLERGY: --NYACIN, PER PATIENT
08/07/2000 ALLERGY: --PREDNISONE, PER PATIENT
10/30/2002 ADMIT DX: SEPSIS/RULE OUT PERITONITIS
10/31/2002 INFLUENZA VACCINE ADMINISTRATION: ADMINISTERED ON 10/2002
10/31/2002 PNEUMOCOCCAL VACCINE ADMINISTRATION WITHIN THE LAST 10 YEARS: ADMINISTERED IN 2001
11/16/2002 WEIGHT, DAY 67.8KG
**Example of Rehab/Subacute/Nursing Home Transfer Form**

<table>
<thead>
<tr>
<th>Patient Name:</th>
<th>Medical Record #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Medicare#:</td>
<td>Medicaid #:</td>
</tr>
<tr>
<td>☐ A ☐ B:</td>
<td></td>
</tr>
<tr>
<td>Home Phone:</td>
<td>Box: M F DOB:</td>
</tr>
<tr>
<td>Emergency Contact:</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Home Phone:</td>
<td>Business:</td>
</tr>
<tr>
<td><strong>DISCHARGE DIAGNOSIS:</strong></td>
<td>PPD Status: ☐ Unknown ☐ Positive ☐ Negative</td>
</tr>
<tr>
<td>Immunization Status: ☐ Influenza: Date Given: ______</td>
<td></td>
</tr>
<tr>
<td>☐ Pneumococcal Date Given: ______</td>
<td></td>
</tr>
<tr>
<td>Tetanus Toxoid: ☐ N/A ☐ Date Given:</td>
<td></td>
</tr>
</tbody>
</table>
Influenza and pneumococcal vaccinations can be given together.

Influenza Vaccination – Effective annually from October 1 through February 1

☐ Administer Influenza vaccine 0.5 ml IM:
   ☐ Now (encouraged if medical condition permits)
   ☐ On discharge (for acutely infected patients)

☐ Do not administer influenza vaccine because of the following contraindication(s): (check all that apply)
   ☐ Previous receipt of influenza vaccination this season – Date: __________
   ☐ Hypersensitivity to any compound of the vaccine
   ☐ Previous serious reaction to influenza vaccine
   ☐ Allergy to eggs
   ☐ History of Guillain-Barre
   ☐ Allergic to thimerosal
   ☐ Other ____________________

Nurse to chart contraindications related to hypersensitivity, previous serious reaction, allergy to eggs, and history of Guillain-Barre in the Clinical Information System.

Signature of Ordering Practitioner: ________________________________ Date/Time: ____________

Order Verified by: ________________________________ Date/Time: ____________
PT VACCINE INFO DOCUMENTATION - 12/31/2002

PATIENT NAME: [Redacted]
AGE: 76
MR #: [Redacted]
ROOM #: [Redacted]
ADM DATE: 12/01/02

12/01/02 12:34 PM: INFLUENZA VACCINE ADMINISTRATION: ADMINISTERED ON 10/2002
12/02/02 08:43 AM: DO NOT ADMINISTER PNEUMOCOCCAL POLYSACCHARIDE VACCINE (PPV) . . . DUE TO -- PT CONDITION, (12/02/02 08:43AM), (2817)

12/05/02 08:12 AM: PNEUMOCOCCAL VACCINE ADMINISTRATION WITHIN THE LAST 10 YEARS: ADMINISTERED IN 2001
12/16/02 11:45 AM: INFLUENZA VACCINE ADMINISTRATION: NO . . . MD ORDER SHEET PLACED ON CHART: YES

12/20/02 12:23/02 09:01 AM: INFLUENZA VACCINE ADMINISTRATION: ADMINISTERED ON 11/2002
12/23/02 09:00 AM: PNEUMOCOCCAL VACCINE TO BE GIVEN ON DISCHARGE
11/05/02
11:28AM --INFULENZ A 10/02, PPV 2001;
%8T% ON* 10/31/2002* (DRGA)

11:42AM --PT W ESRD ON PD W RECENT HX
NEG UF'S AND NEED FOR CHANGE TO HD.,
ASSOC W BS'S>700 AND T TO 102- HAD
START OF SEPSIS WU AS OUTPT, STD ON IV
VANCO AFTER CX'S DONE. PT NOW ADM'D W
C/O FEVER TO 102 ASSOC W BILAT LQ PAIN-
PLAN R/O COLITIS VS PERITONITIS VS
VIRAL ETIOL. ENDO CONS. CON'T COUMADIN
FOR HX AFIB; OTHER HX (DRGA)
Influenza Vaccine Campaign
October 1, 2002 - February 1, 2003

- More vaccine given in 2002 compared to 2001
- Campaign continues until February 1, 2003
- It is not too late to order vaccines
- Pneumococcal vaccine initiative in place all year
Thanks to everyone’s efforts, RWJUH has given more flu vaccines to our patients (65 years and older) this flu season as compared to the number given last year.

Thank you for your support.

Sincerely,

RWJUH Infection Control and Performance Improvement Departments
Accountability is Key!
Where We’re Going!

- IT
- IT
- IT
- IT

... SPEED INFORMATION TECHNOLOGY ADOPTION!!!
Where we’re going!

- Knowledge-based alerts across patient visits
  - New-onset atrial fibrillation recognized and sends alert to practitioner to consider thyroid testing and echocardiogram
  - Measures of ejection fraction in the past automatically pulled into the electronic record of a new episode
Baldrige Criteria for Performance Excellence Framework: A Systems Perspective

Organizational Profile:
Environment, Relationships, and Challenges

1. Leadership

2. Strategic Planning

3. Customer and Market Focus

4. Measurement, Analysis, and Knowledge Management

5. Human Resource Focus

6. Process Management

7. Business Results
Thank You!