



## Sibley Memorial Hospital Gains Edge on Total Performance Improvement

### **BUSINESS CHALLENGE**

Sibley Memorial Hospital needed to meet healthcare organization accreditation requirements through the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and participation requirements for the Centers for Medicare and Medicaid Services (CMS) 7th Scope of Work (SOW) — and to fulfill its commitment to excellence in patient care. Jacqueline White, R.N., director of the quality management department, was the driving force behind the hospital's core measures program and explained its challenge this way.

“A top priority for the hospital was to go beyond meeting reporting requirements and to implement a program that monitored overall patient care processes and identified opportunities throughout the organization for ongoing performance improvement initiatives.” Sibley chose The Solucient® Core Measures Solution (Core Measures) to help it identify opportunities and track progress over time.

Sibley also wanted to use Core Measures comparative data to gain a broader understanding of its performance in relation to other Solucient clients, to hospitals across the country with characteristics similar to its own, and to national core measures results.

### **CHALLENGE #1: ACCURATELY AND EFFICIENTLY FULFILL REGULATORY COMPLIANCE REQUIREMENTS**

#### **Result: Simultaneous and secure reporting of both JCAHO and CMS measures**

A key hospital concern was to capture and submit integrated clinical and administrative data accurately and efficiently to fulfill regulatory compliance requirements for JCAHO and participate in the CMS 7th Scope of Work. Sibley's initial core measures, starting in the third quarter of 2002, were heart failure and community-acquired pneumonia; in the fourth quarter of 2002, it included acute myocardial infarction (AMI).

Core Measures is designed to reduce a hospital's data collection burden by integrating administrative and clinical data sets — saving organizational resources, time, and money. Sibley confirmed this to be true based on its experience. The administrative data identifies and lists qualified cases for each core measures set and pre-populates components of abstraction, reducing the burden for data collection significantly, and helping Sibley successfully meet its efficiency goals. In addition, Core Measures allows Sibley to collect data one time but report to both JCAHO and CMS, thereby eliminating redundant data collection.

“The hospital designated two part-time clinical RNs based out of the quality management department for data abstraction,” explains White. Although long-range goals include electronically capturing clinical documentation, to date Sibley has a predominately (75 to 80 percent) paper-based medical record, which includes critical paths and care planning documents.

“Early in the process, we realized key benefits of the Solucient Core Measures Solution, including direct online data entry and support within the abstraction form to ensure accuracy,” says White. “This means users do not have to spend time hunting for element definitions or criteria to support their responses.”

The automated case list, driven from the administrative data, is a tremendous asset for Sibley. Lists of qualified cases for a given core measure set populate the tool, which facilitate obtaining the necessary medical records and beginning abstraction. Other functions of Core Measures that assist Sibley in meeting its reporting requirements efficiently include:

- Drop-down lists of response options
- Integrated prompts and data definitions
- Data entry quality checks online and in real time
- Instant data quality reporting and real-time statistical analysis to measure current and past performance

### **Sibley Memorial Hospital**

- Location: Washington, D.C.
- Scope and Services: Serving the Washington, D.C. area for 110 years, Sibley Memorial Hospital is a 328-bed acute-care community hospital with medical, surgical, psychiatric, obstetric, and oncology inpatient services. Outpatient services include ambulatory surgery, endoscopy, pain services, and an infusion clinic. Sibley's campus also includes an assisted living residence and a center devoted exclusively to senior services.

It's not just the data. It's the

# Insight.

## About Solucient

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By integrating, standardizing and enhancing healthcare information, Solucient provides comparative measurements of cost, quality and market performance. Solucient's expertise and proven solutions enable providers and pharmaceutical companies to drive business growth, manage costs and deliver high-quality care. For more information, visit [www.solucient.com](http://www.solucient.com).

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- Ability to monitor data collection status on a daily or weekly basis to ensure completion of case abstraction for quarterly JCAHO and CMS submission.

“We also are reassured using Core Measures because of its secure access and transmission of data, which meet HIPAA compliance for privacy and confidentiality,” says White.

### CHALLENGE #2: IDENTIFY SPECIFIC AREAS FOR QUALITY IMPROVEMENT

#### Result: Implementation of comprehensive corrective actions

The hospital wanted to identify specific opportunities in the patient care process for effective quality improvement, implement proactive corrective measures, and closely track results on a continuous basis.

Sibley Memorial Hospital adopted an interdisciplinary approach to performance improvement utilizing the core measures findings. Core Measures allows Sibley to generate monthly and quarterly reports — such as the Detailed Measure Report and Trend Analysis — for each core measure set and to distribute them among key executives, medical staff committees, department managers, and the hospital's Quality Council. The reports' performance results for patients who received care within a particular measure set were trended over time to monitor the hospital's performance improvement progress.

“For example, the hospital had previously identified aspects of care for heart failure and AMI cases as possible opportunities for improvement,” says White. “Core Measures data validated that these opportunities exist — particularly for documentation of left ventricular assessment in heart failure cases and for administration of ACE inhibitor (ACEI) medications in the heart failure and acute myocardial infarction patient population.”

As a result, staff members at Sibley implemented comprehensive corrective actions that included:

- Revising order sets
- Refining preferred provider agreements with the pharmacy department for preferred ACEI medications
- Presenting information at medical staff meetings on a monthly and quarterly basis
- Posting progress reports throughout the hospital to communicate improvements and enlist compliance
- Providing nursing education

Within two months after implementing these strategies, Sibley realized a real improvement in terms of increased administration of ACEI medications to applicable patients who were in heart failure or who had experienced an acute myocardial infarction. These improvements had a dramatic benefit for AMI patients. For instance, ACEI medication administration increased by 8 percent for patients with heart failure between the third and fourth quarters of 2002. For their first quarter collecting AMI clinical data (the fourth quarter of 2002), Sibley's results were an astonishing 100 percent for all qualifying cases confirmed with having left ventricular systolic dysfunction (LVSD) — well above the national results of 76 percent.

Core Measures also allowed the hospital to identify and address other practice improvement areas internally, which included:

- Initial antibiotic time for patients with community-acquired pneumonia
- Pneumonia screening and vaccination
- Discharge instruction forms to capture all required elements for heart failure patients.

Actions to improve these areas of care included implementing new order sheets and discharge forms to more effectively capture timely information on patient care and treatment.

### CHALLENGE #3: CONDUCT COMPARATIVE BENCHMARKING FOR AMI MEASURES RATES

#### Result: Confirmation of high performance on four AMI measures

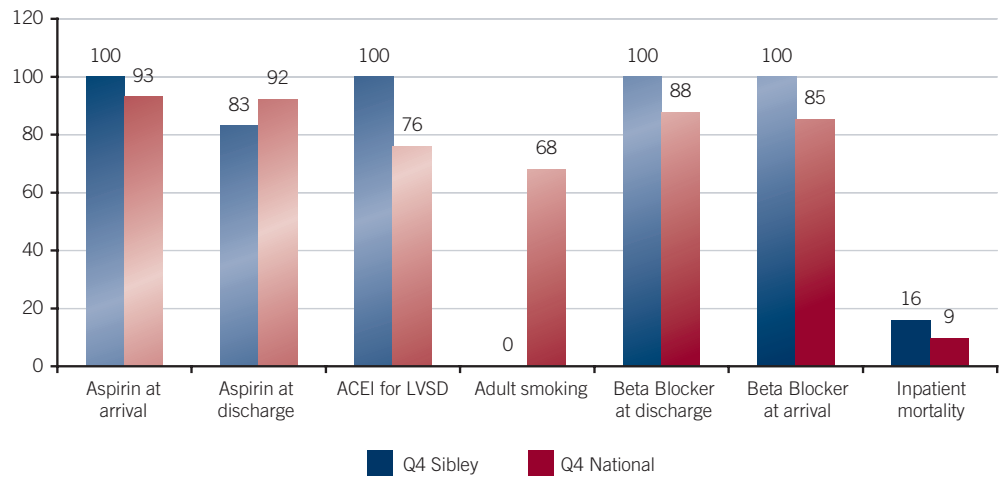
The hospital needed to determine its standing in patient care on a national level with other similar organizations.

As part of a larger community of Core Measures users, Sibley uses the Web-based tool's Comparison/Benchmarking Reports to conduct comparative analyses with other organizations and share information on “best practices.” Clients can generate comparative reports for other organizations that are Solucient clients or for all core measures participants across the nation, as reported by JCAHO. Sibley was interested in determining how its facility compared to other organizations for AMI measures rates on a national level.

Sibley also determined that it was performing higher than the national rate on four AMI measures: administration of aspirin and beta-blockers on arrival, beta-blockers prescribed at discharge, and



**FIGURE 1. COMPARISON/BENCHMARKING REPORT FOR AMI CORE MEASURE**



From these reports, the hospital identified other aspects of AMI patient care for improvement. For example, initiatives are under way to improve and document adult smoking cessation counseling.

administration of ACEI for LVSD. (See Figure 1.) The reports also confirmed that the hospital was on target to reach its performance improvement goals.

**Next Steps**

“The hospital’s top leadership — including the chief executive officer, medical staff director, and chief nursing officer — are committed to performance improvement initiatives,” says White. “This has been a critical component to our success.”

“At Sibley, we are beginning to measure our cost savings and decrease length of stay around these three core measures sets by analyzing costs and outcomes before and after implementing improvement initiatives,” says White. “Already, the hospital has realized cost efficiencies in certain cases, such as using preferred providers for antibiotics and ACEI medications through the pharmacy and therapeutics committee.”

Sibley also continues improvement efforts across patient care practices as related to core measures conditions through interdisciplinary teams that collect and monitor data on a monthly and quarterly basis. The executive teams — in partnership with clinicians — are actively integrating findings of core measures data into the organization’s performance improvement initiatives to continually improve healthcare practices and celebrate their successes.

**HIPAA STATEMENT**

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