I. Current quality efforts:
Check out this cool Quality Improvement project being led by Victoria Behrend

Problem: Foley catheters and diaper use in women lead to catheter associated UTI’s (CAUTI’s), skin breakdown, and discomfort.

Proposed solution: Purewick external catheter. This device is an external flexible rod which rests against the vulva and gently vacuums urine expelled through tubing to a wall canister.

- 2 month trial in the MICU and NSICU

Results so far:
- Data is promising so far without UTI’s or skin breakdown with use
- 92% of RN’s state urine capture was excellent and accurate
- 100% of RN’s said it was easy to use and recommended future use
- Foley use prevented or Foley’s removed in 67% of patients. Absolute reduction of Foley catheter use from 31.18% in MICU
- Diaper use completely avoided
- Potential net savings of $1 million per year given reduced cost of CAUTIs and associated Medicare fines

Next Steps:
- Expanded trial across all ICU’s

IIa. Inpatient Medicine Quality goals: How are we doing?
Department of medicine quality goals are set each year by the department and aligned around national reportable quality metrics. Likelihood to recommend (LTR) is based on the overall patient experience and has to do with patient perceptions of doctor communication and teamwork.

Catheter associated infections are improving by reductions in catheter use and can be improved further by avoiding inappropriate culturing practices.
IIb. NMFF Outpatient Clinic Quality Metrics: How are we doing?

Primary care has been an early adopter of quality measures with current insurers using these for clinic comparisons and rewards/penalties based on clinic and individual performance. Some measures have improved population health (vaccinations and cancer prevention) while others have evolved with changing evidence (HTN, Statin guidelines, Mammography).

Primary Care Galter 18 Performance report: All (resident and attending)

III. Value based care tip

6 steps toward high value care (ACP)

1. Understand the benefits, harms, and relative costs of the interventions that you are considering.
   Ex: CTA for someone with low risk well and renal dysfunction

2. Decrease or eliminate the use of interventions that provide no benefits and/or may be harmful
   Ex: Treating asymptomatic UTI with antibiotics

3. Choose interventions and care settings that maximize benefits, minimize harms, and reduce costs
   (using comparative-effectiveness and cost-effectiveness data)
   Ex: Chemotherapy regimens that can be done in the outpatient setting

4. Customize a care plan with the patient that incorporates their values and addresses their concerns.
   Ex: Choosing between hemodialysis and peritoneal dialysis

5. Identify system-level opportunities to improve outcomes, minimize harms, and reduce waste
   Ex: EMR flags for DVT prophylaxis

IV. Ways to get involved

These residents are representing on various Quality Committees. They will be sending updates throughout the year.

- Department of Medicine Quality Committee: Victoria Behrend, Sarah Chuzi, Madeleine Heldman, Lauren Lee, Anand Patel, Anna Rosenblatt
  - This committee focuses on quality metrics for inpatient medicine.

- Sepsis Quality Subcommittee: Thomas Byrd, Quinn Halverson, Fred McLafferty, Cindy You, Punit Vachharajani
  - Evaluates our sepsis response to national guidelines.
  - Special thanks to those who worked on the Sepsis Chart Abstraction Project – Chen Xie, Ravil Kesari, Cindy You, Quinn Halverson, Tom Byrd

- Glycemic Control Committee: Emily Nosova
  - Providing better care for our diabetic patients

- CCEC (Clinical Care Evaluation Committees): Sarah Chuzi, Kirti Johal, Chen Lin, Anand Patel
  - Reviews the serious events or near misses (NETS!)

Ongoing and Upcoming topics in Quality and Safety!

Recent and upcoming conferences

- Value based care conferences – Next on 9/22
- M&M and Root Cause Analysis (RCA) – 8/3, 8/23, Next on 10/20
- Patient Safety grand rounds – 7/18, next TBD
- Medicine Grand Rounds
- Patient engagement coach rounding on inpatient wards

Want more resources?

- Visit the DOM education quality home page DOM Quality homepage