

UCSF Medical Center

UCSF Benioff Children's Hospitals

True North Metric Update: Reducing Harm Events

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True North Metric Update: Zero Harm

Current State: Achieving Incremental Improvement

- How much progress did we make in FY18 toward our target condition (e.g., eliminating harm events)?
- How are we supporting and organizing the improvement work?

Looking Ahead: Road to Zero Action Plan

- Where are we focusing our FY19 efforts to sustain and accelerate the improvement work?

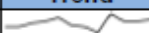



True North Metric Update: Zero Harm

Achieve Zero Harm: *What problem are we trying to solve?*

Strategic A3 Problem Statement: Patients and staff experience harms through exposure to the healthcare system at UCSF Health. While we excel in some areas, UCSF Health does not currently achieve or exceed important external benchmarks (e.g., for hospital-acquired infections) nor our desired outcome of zero harm.

Initial Approach in FY17 - 18:

- Define a set of harm metrics for hospital and ambulatory setting
- Focus on actual “harm events” rather than rates
- Allows units/practices to focus on harm events most relevant to their patient populations and settings

Zero Harm	Harm Events (actual # of harm events)	89 (monthly) 1,070 (FY17)	84	1,000	*FY18 IAP Goal Threshold: eliminate 50 events Target: eliminate 75 events Outstanding: eliminate 100	* Detailed Harm Report on Back Page	
			Jun-18				
Specific Harm Metrics		FY17 Baseline (# of harm events)	# of Harm Events			Rate	
			Jun-18	FY18TD	Trend	FY18TD	FY17
Adult Hospital	CLABSI (excl. CLAMBI)	42	7	61		1.03	0.73
	CAUTI	88	3	67		1.72	2.29
	PVAP (VAE)	4	0	4		0.41	0.52
	SSI						
	Hospital-Acquired Pneumonia (HAPU)						
	Falls with Injury						
	Serious Injury						
BCH-SF	Workplace Injuries & Illnesses						
	Reportable						
	CLABSI						
	CAUTI						
	VAP						
	SSI						
	Codes of Conduct						
Ambulatory	HAPU						
	Falls with Injury						
	Serious Injury						
	Communities of Color						
Unattributed	Workplace Injuries & Illnesses						
	Reportable						
Total Events		1070	84	1000			

What is our Current State?

70 Harm Events Eliminated in FY18

Outstanding IAP Performance

Volume Adjustment:

Inpatient (Adults & Peds) = 2.4% Increase

Ambulatory Visits = 5.4% Increase

Medical Center FTE = 5.2% Increase

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Zero Harm Metric Leadership

Zero Harm Metrics	Metric Owners
Hospital Acquired Infections & Communicable Disease Exposures	Amy Nichols, Debbie Yokoe & Lynn Ramirez
Hospital Acquired Conditions: HAPU & Falls	Carrie Meer, Bobby Robertson, Amy Kuwata, Michelle Macal & Mary Reid
Serious Safety Events	Adrienne Green, Cathy Dietzen, Jim Stotts & Kiran Gupta
Workplace Injuries	Matt Carlson, Bob Kosnik, Rebecca Harari, Tisha Bertlow & Phyllis Simmons
Reportable Privacy Events	Tom Poon, Shirley Kedrowski & Regina Johnson

FY18 Highlights in Road to Zero

Priorities	FY18 Performance	FY19 Actions
<u>Harm Events:</u> <ul style="list-style-type: none"> •Reportable Privacy Events •CAUTI (24% reduction) •C. difficile (9% reduction) •Communicable Dx Exposures •HAPU •Workplace Injuries (UCOP Award) •Serious Safety Events 		<ul style="list-style-type: none"> • Continue with action plans
<u>Safety Culture Interventions:</u> <ul style="list-style-type: none"> -STOP for Safety campaign -Caring for the Caregiver 		<ul style="list-style-type: none"> • Continue with action plans
<u>Harm Events:</u> <ul style="list-style-type: none"> •Falls with Injury •CLABSI •SSIs 		<ul style="list-style-type: none"> • Enhanced improvement initiatives being developed and implemented
<u>Defining harm events in:</u> <ul style="list-style-type: none"> -LPPH&C -Cancer Center -BCH 		<ul style="list-style-type: none"> • Continue development as part of their True North Scorecards

Case Example: Harm Reduction Creates Value

Achieving our True North Goals Zero Harm FY18 *C. difficile* Infection Improvement Effect on Value

QUALITY & SAFETY

FY18 Improvement

FY18 Rate: **9.03 per 10,000 pt days**
9% decrease

FY17 Rate: 9.91 per 10,000 pt days

+

EXPERIENCE

FY17 Improvement

24 fewer patients developed
***C. difficile* infections**

=

**IMPROVED
VALUE**

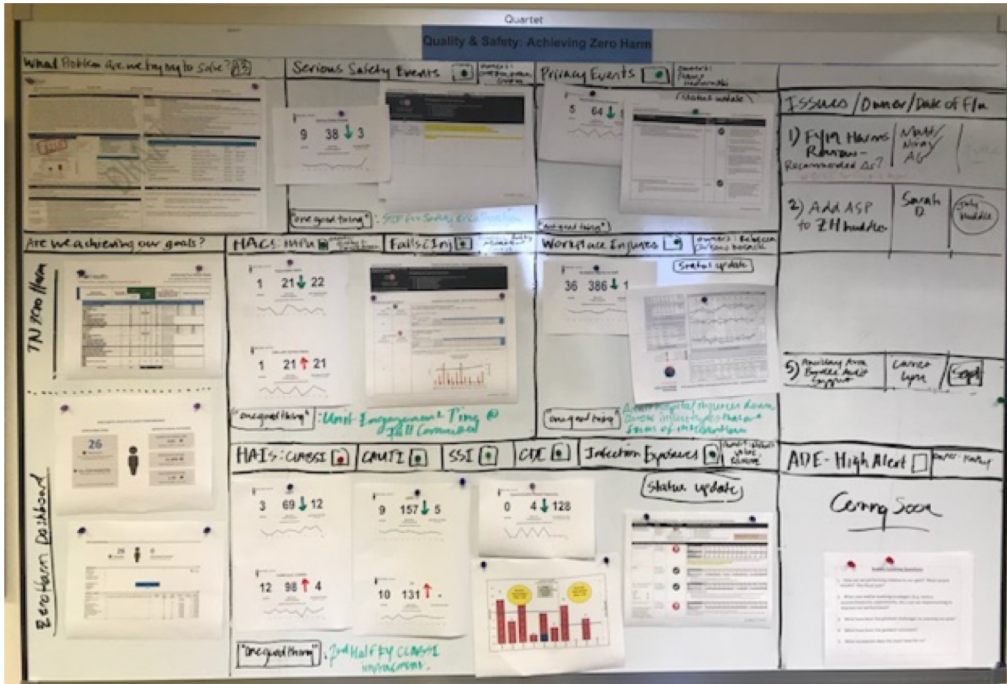
COST

FY18 Improvement

FY18 Cost Avoidance: **\$661,728**

FY18 Available Bed Days: **280.8**

HOW: Building & Iterating a Management System to Support Engagement, Accountability & Oversight



- Zero Harm huddle occurs with leadership sponsors and harm metric owners
- Harm metric owners bring updates using a standardized report of structure, process and outcomes
- Promotes visibility & engagement through problem-solving, accountability and sharing of improvement approaches. Areas highlighting specific harms on TN boards demonstrating great engagement & outcomes (e.g. CAUTI on inpt units)
- Focus on escalating barriers & sharing “one good thing”
- Opportunity to continue improving catch ball process to ensure meaningful feedback shapes goals and improvements

Looking Ahead: FY19 Priorities in Road to Zero

Proposed Expansion of Harm Categories

- **High Alert Adverse Drug Events (ADEs)** – Opioids, Antineoplastics, Anticoagulants and Antidiabetics (*New Harm Category*)
- **Falls with Injury** – All Falls with Injury to Align with Magnet Definitions (*Expand From Moderate/Severe Injury*)
- **Hospital Acquired Pressure Ulcers (HAPUs)** – HAPUs Stages 2, 3, 4 and Unstageable to Align with Magnet Definitions (*Expand From Stage 3+*)
- **Ventilator Associated Events/Pneumonia (VAE/VAPs)** – Expand to All Three Levels of Ventilator Associated Events (VAEs) to Align with NHSN Criteria (*Expand From Current Subset Definition*)
- **Codes Outside the ICU (BCH Only)** – Shift from All Codes Outside the ICU to Cardiopulmonary Arrest (CPA) and Acute Respiratory Compromise (ARC) to Align with CHA Definition (*Focus on Subset of Serious Events*)

FY19 IAP Zero Harm Goal

- Reduce harms by 50 (threshold), 75 (target) and 100 (outstanding)