

Brunswick Community Hospital

Path to Improvement in Quality
Measures

Global Interventions

- Implemented concurrent review process with addition of clinical analyst in July 2006. (*directly correlates to the timing of our improving trends!*)
- Allow immediate intervention to prevent misses
- Incorporate quality measure education into new employee orientation for nursing and CRNA staff.
- Provide on-going staff education through staff meetings, written material, etc.
- Provide direct one-on-one physician education and feedback.
- Promoted clinical analyst as educational resource and “physician's friend.”

Global Interventions continued...

- Developed data collection forms for concurrent review.
- Educated staff and physicians on data abstraction guidelines – **VERY SPECIFIC!**
- Incorporated quality measures needs and expectations into orientation for new physicians.
- Implemented alerts to include “chart stickers”, computer flags, physician “cheat sheet,” etc.

Global Interventions continued...

- One-on-one intervention with staff by analyst when misses are identified.
- Involve leadership, managers and direct care givers in Quality Measure review meetings for education, heightened awareness and accountability.
- Increase overall awareness by sharing of results in multiple forums such as town meetings, etc.

Surgical Care Improvement Project

- Collaborated with Surgeons to develop pre-printed pre- and post-op orders that were quality measure compliant.
- Created “extended time-out” to include review of relevant quality indicators.
- Pre-admission nurses educated to “screen” pre-op orders for compliance with antibiotic guidelines.
- Achieved Anesthesia buy-in and ownership for those measures under their control.
- Improved communication between PACU and pharmacy staff regarding surgical end time and antibiotic timing.