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Closing Gaps in Research ~ Organizations and Healthcare Diagnoses

Pragmatic Considerations for Getting from Here to There

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Perspective MedStar Health ~ FY 2015

- 10 Acute Care Hospitals ~ over 200,000 admissions & observations
- 300+ Ambulatory Care sites ~ over 4.5 million outpatient visits
- 1,800 Employed Physicians; 4,800 affiliated physicians
- 31,000 Associates including 1,100 residents and fellows
- We are a "new" diversified delivery network

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Corporate Quality and Safety

- New corporate department in 2011
- National leader recruited to build department
- Initial developmental focus: "Patient Safety"
- 2014 ~ Clinical Quality added as concerted focus
- Goal: World Class Quality/Patient Safety
- Patient First



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Reality: What is Important to Leaders?

- Patient Safety
- Clinical Evidence
- Regulatory Compliance
- World Class Clinical Quality Outcomes
- Pay for Performance



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Where We Want to Go~ Where do we Begin?

- Systemness
- Look to the Evidence
- Crawl before we walk
- Walk before we run
- Data that are valid, reliable, important and action oriented



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National Quality Strategy: How It Works



The National Quality Strategy unites efforts to improve health and health care for all Americans. The above graphic provides a high-level view of how the National Quality Strategy works to provide better, more affordable care for the person and the community.

8 Goals to Improve Diagnosis and Reduce Diagnostic Error

- GOAL 1 Facilitate more effective teamwork in the diagnostic process among health care professionals, patients, and their families
- GOAL 2 Enhance health care professional education and training in the diagnostic process
- GOAL 3 Ensure that health information technologies support patients and health care professionals in the diagnostic process
- GOAL 4 Develop and deploy approaches to identify, learn from, and reduce diagnostic errors and near misses in clinical practice

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8 Goals to Improve Diagnosis and Reduce Diagnostic Error

- GOAL 5 Establish a work system and culture that supports the diagnostic process and improvements in diagnostic performance
- GOAL 6 Develop a reporting environment and medical liability system that facilitates improved diagnosis through learning from diagnostic errors and near misses
- GOAL 7 Design a payment and care delivery environment that supports the diagnostic process
- GOAL 8 Provide dedicated funding for research on the diagnostic process and diagnostic errors

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Three Pragmatic Challenges and Priorities for Organization Focused Research

1: How to tie NAM recommendations to existing work Dx Error is not "new"~ next phase of existing work Patient Centered Care HRO Just Culture

 Methods to engage administrators and practitioners in opportunities with potential for greatest impact ~ and least resistance

> Financial impact Stories of harm

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Three Pragmatic Challenges and Priorities for AHRQ Research Agenda

- 3 "Making Research Relevant"
 - ROI for Researcher in Residence Model
 - Small scale pilot studies
 Mining clinical data for dx opportunities
 Effective closed loop communication with clinicians
 Exploring pay for performance impact
 Role of Patient and Family Advisory Councils



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