Quality Improvement and the Patient Experience

A Conversation with our Chief Quality Officer
Excellence in Cardiovascular Care
Strides in Infection Prevention
Caring for the Critically Ill
Nursing Initiatives for Superior Patient Care
A Message from Our President and CEO

Dear Friend,

Stamford Hospital has been steadfast in our commitment to quality improvement, not just on paper but in practice, especially as it relates to enhancing patient-centered care. In fact, in recognition of the high level of care we provide, this past year the Hospital earned a Gold Seal of Approval from the Joint Commission and we were also named a Planetree Designated Patient-Centered Hospital – one of only 17 in the country and 31 in the world to achieve this distinction.

In this issue of Healthline, you will learn more about our approach to patient safety and quality improvement from a conversation with Dr. Rohit Bhalla, our Vice President of Quality and Chief Quality Officer. We also highlight several of our more recent and outstanding accomplishments that showcase the safety and quality measures driven by our dedicated healthcare teams, specifically:

• The success of our door-to-balloon initiative has allowed the primary angioplasty team to achieve a better heart attack survival rate than those of other U.S. hospitals
• Our open-heart surgery program finished the year with a 0% mortality rate in coronary bypass graft surgery
• The introduction of the Xenex germ-zapping “robot” is part of the Hospital’s comprehensive approach to minimizing C. difficile infections
• Our overall approach to infection prevention has resulted in a reduction in both catheter use and catheter-associated urinary tract infection rates
• The ICU team’s effort to stringently control the blood sugar level of critically ill patients has not only saved lives but has also gained the Hospital widespread recognition
• Our nursing staff has worked collaboratively to adopt best practices to improve the patient experience, and these efforts have resulted in performance recognition by our patients’ perception of their care
• With a strong focus on fall prevention, our nurse-driven initiatives have led to a 27% reduction in preventable inpatient falls

As you will learn, a common theme across all of our patient safety and quality improvement efforts is teamwork. Innovative solutions are developed from our staff working collaboratively, where new ideas very often come from those working on the front lines of patient care.

With the help of such a strong and dedicated team, we can ensure continued, high-quality care for our patients at the same time that plans for the new Stamford Hospital are coming to fruition. Construction is underway on the main campus, and we have a number of major milestones coming up in the months ahead.

I am exceedingly proud of our Hospital for providing the very best in patient care and ensuring quality outcomes.

Brian G. Grissler
President and CEO
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Q&A with Rohit Bhalla, MD, MPH
Vice President, Quality and Chief Quality Officer

Q HOW DO WE DEFINE PATIENT SAFETY AND QUALITY HEALTHCARE AT STAMFORD HOSPITAL?
We view quality as the degree to which the services we provide achieve desired outcomes for our patients. Therefore it not only includes things like avoiding preventable injuries, reducing wait times and providing consistent and effective care, but it is also closely linked to the patient experience – and providing care that is patient-centered.

Q WHAT TYPES OF INITIATIVES ARE IN PLACE TO ENHANCE QUALITY FOR HOSPITAL PATIENTS?
First, we have a culture that embraces quality from the bottom up and from the top down. Second, we have regular team meetings where issues are presented and outcomes are discussed. This makes for a very collaborative and open-learning process. Third, we set quantifiable targets across the entire organization. We have monitoring and measuring systems in place to evaluate our work and its results. Overall, we have a transparent organizational process.

Q HOW HAVE WE IMPROVED OUR APPROACH TO QUALITY OVER THE LAST YEAR?
We have a dedicated team in place responsible for focusing on safety and quality within the organization. Our role is to take more of a big-picture view and then let our individual healthcare teams lead the development of quality-oriented solutions in their own areas. In fact, a common theme in all of our quality improvement efforts here is teamwork.

This is not only evidenced in our many successful initiatives in cardiology, cardiac surgery, infection prevention and other areas, but also in the wide range of distinctions and recognitions we're earning from others. We know we're doing great work, and we see our patients benefiting from it, but it’s nice to have external validation by so many well-recognized and well-respected institutions.

Q WHAT IS YOUR GENERAL OPINION OF ALL OF THE VARIOUS HEALTHCARE RATINGS?
There are lots of different ratings out there and some are known to be more reliable than others. We simply want to be evaluated fairly using transparent criteria and vetted standards.

For example, when your child is given a grade, as a parent you want to know upon what criteria that grade is based. If the entire grade is based on a 15-minute quiz during the last week of class, that may seem unfair. However, if it is based on a combination of more comprehensive factors, you may feel the evaluation is justified, even if the grade itself leaves room for improvement.

Overall, some of the most comprehensive, standardized data is produced by Centers for Medicare & Medicaid Services.

We support the use of quality measures that have been endorsed by the National Quality Forum.

Q HOW DOES STAMFORD HOSPITAL DETERMINE WHICH AREAS TO FOCUS ON REGARDING QUALITY IMPROVEMENT?
Deciding which areas to focus on involves a combination of factors. We consider how we're doing in certain areas against other similar-sized institutions; we try to identify areas across the organization that may need improvement; we try to make sure that the needs of the community are being sufficiently addressed; and we strive to achieve top results consistently in areas where we are already strong.

Patient safety and quality improvement is a top priority at Stamford Hospital. Not only is it a focus of our strategic plan, but it is also an essential part of our dedication to providing patient-centered care.

An Associate Professor of Clinical Medicine at Albert Einstein College of Medicine, Dr. Rohit Bhalla joined Stamford Hospital in 2012. Prior to that, he was at Montefiore Medical Center, having served as Chief Quality Officer. Under Dr. Bhalla’s leadership, Montefiore was awarded the Leapfrog Top Hospitals Award on three occasions and earned national recognition for clinical excellence in diabetes care, under the Bridges to Excellence Program.

Dr. Bhalla serves on the Editorial Board of the American Journal of Medical Quality, and previously served as Chair of the Greater New York Hospital Association Quality and Outcomes Research Committee.
SAFETY AND QUALITY RECOGNITIONS

The Joint Commission’s Gold Seal of Approval*
Stamford Hospital has earned The Joint Commission’s Gold Seal of Approval* for accreditation by demonstrating compliance with The Joint Commission’s national standards for health care quality and safety in hospitals. The accreditation award recognizes Stamford Hospital’s dedication to continuous compliance with The Joint Commission’s state-of-the-art standards.

Planetree Designated® Patient-Centered Hospital
This designation recognizes Stamford Hospital’s achievement and innovation in the delivery of patient-centered care. Stamford Hospital is the second hospital in Connecticut and one of only 17 acute care hospitals in the United States to receive the Patient-Centered Designation since the program’s launch in 2007.

Orthopedic and Spine Institute
Stamford Hospital received Joint Commission (JCAHO) certification for Total Hip and Total Knee programs. We also received Joint Commission certification for our Lumbar Spinal Fusion Surgery program; the first hospital in Connecticut with this certification.

Primary Stroke Center
The Joint Commission designated Stamford Hospital as a Primary Stroke Center.

American College of Surgeons’ Commission on Cancer Recognition
The Bennett Cancer Center’s multidisciplinary approach to cancer care and involvement in research on cancer are just two of the reasons that the Center, accredited as an Academic Comprehensive Cancer Program, has received the Outstanding Achievement Award from the American College of Surgeons Commission on Cancer.

Center of Excellence in Minimally Invasive Gynecology
Our program at the Center of Minimally Invasive and Robotic Surgery has been recognized as a Center of Excellence in minimally invasive gynecology by the American Association of Gynecologic Laparoscopists.

Breast Imaging Center of Excellence by the American College of Radiology
The Women’s Breast Center was the first in the nation to be recognized by the American College of Surgeons as a National Accreditation Program for Breast Centers (NAPBC)-accredited center and was recently reaccredited for another three years.

To learn more about Safety and Quality Recognitions, visit StamfordHospital.org/Recognitions.
At Stamford Hospital’s Heart & Vascular Institute, the Cardiology team is involved in several leading approaches to quality improvement. These include completion of intensive team safety training with techniques similar to those used in the airline industry, development of care guidelines for best practice and participation in a number of quality monitoring programs to measure and improve care. Such national quality measurement programs include the American College of Cardiology National Cardiovascular Disease Registries and the American Heart Association Get With the Guidelines programs. These programs measure performance for patients receiving care for heart attacks and cardiac catheterizations.

The Hospital recently received the prestigious Silver Performance Achievement Award from the American College of Cardiology National Cardiovascular Disease Registry, for excellence in care of heart attack patients.

A specific example of the team’s commitment to excellence in cardiac care is its performance on angioplasty (“balloon”) procedures for heart attack patients where a catheter is inserted to open the blocked artery, and blood flow is then restored to the heart muscle. For the best chance of survival, these procedures should be done within 90 minutes of arrival to the Hospital, a measure commonly referred to as “door-to-balloon time.” Using the approaches described above, over the last two years, the team has been able to complete 100% of these procedures within 90 minutes, compared to the national benchmark of 94%.

Over the past 2 years, the team has been able to complete 100% of the “door-to-balloon time” procedures within 90 minutes.

To view the Cardiology team’s performance on these measures visit StamfordHospital.org/Cardiology.
Excellence in Cardiothoracic Surgery

As a key component of the Heart & Vascular Institute at Stamford Hospital, the Cardiac Surgery program has demonstrated a superior commitment to quality of care and achieved outstanding results.

The program’s commitment to quality begins with an interdisciplinary team approach to patient-centered care, led by Chief of Cardiac Surgery Michael Coady, MD, MPH. As part of the process, the team monitors a number of quality measures delivered before, during, and after surgical procedures. Examples of measures that are tracked include medications used before and after surgery, types of blood vessel grafts used, rates of complications (for example, kidney failure) and mortality rates. Stamford Hospital’s program participates in a national database developed by the Society of Thoracic Surgeons (STS), which allows the cardiac surgery program to monitor all aspects of its performance and compare its results to those achieved nationwide.

To date, the team has completed well over 200 cardiac surgery procedures and has achieved a zero mortality rate for all coronary artery bypass graft procedures. It meets on a regular basis to carefully review its performance results and implement processes to deliver the highest quality of care possible. An example of an area that is closely followed is the use of various medications and interventions on discharge. By following best practice guidelines at discharge, the team strives to maximize patient survival and reduce the likelihood of a patient being readmitted to the hospital.

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The Cardiac Surgery Team led by Michael Coady, MD, MPH, Chief of Cardiac Surgery
Preventing C. difficile Infections

Infection prevention is a vital component of Stamford Hospital’s program to maximize patient safety and avoid hospital-acquired infections. Many studies have shown that infections acquired in the hospital can be life-threatening, and can be avoided with certain safe practices.

Led by national leaders in infection prevention and control, Michael Parry, MD, and Brenda Grant, RN, the Infection Prevention Program at Stamford Hospital has employed a number of new and innovative tactics.

A recent example of excellence in this area is the Hospital’s strategy to minimize Clostridium difficile infections. C. difficile is a bacteria that causes a possibly life-threatening colon infection. It is becoming more common as the necessary (and unnecessary) use of antibiotics to treat different types of infections is growing. Because many patients in the hospital are being treated for infection, they are also at risk for acquiring C. difficile.

The Hospital uses a number of methods to combat C. difficile. These include following guidelines for antibiotic use, review of antibiotics used at the Hospital to make sure they are necessary, careful hand washing, use of gowns when C. difficile is suspected, using the best testing technology to find C. difficile at its earliest stages, and the use of special disinfectants for patients and their rooms. The Infection Prevention team also tracks rates of hand washing and C. difficile on each unit and reports it to leadership and providers at the Hospital.

Most recently, the organization began using Xenex, a new “germ-zapping” ultraviolet light technology. The light helps to kill C. difficile, which can be resistant to common disinfectants. After a room is disinfected on specific patient units, the “robot” is put into the empty room, which flashes bursts of ultraviolet light to help kill any remaining C. difficile spores.
Reducing Catheter-Associated Urinary Tract Infections

Another example of the Infection Prevention’s team approach to address a common problem is its effort to minimize infections that can be caused by urinary catheters. Urinary catheters are used in hospitalized patients who cannot urinate on their own because of their medical condition. Though the catheters are inserted under sterile conditions, after a while, they can become infected. These are known as catheter-associated urinary tract infections (CAUTI). These infections require antibiotic treatment, often leading to longer hospital stays and further complications.

Stamford Hospital developed a group of interventions to minimize the risk of these infections. The most important goal of the effort was to ensure the catheters are only used in those patients whose conditions require them. The Infection Prevention team developed guidelines that require physicians ordering a catheter to document the reason why and to revisit the reason in their daily notes. This allows nurses to review the reason for use regularly and remove catheters when no longer needed. To do this, the organization used its computerized medical record system, so doctors and nurses could document and communicate directly on the need for catheters.

The Infection Prevention team reviews lab results daily to look for bacteria that may be linked to urinary catheter use. It produces reports for each unit on how often they are using the catheters, as well as the rates of infection. The organization’s overall approach has resulted in a great reduction in catheter use and catheter-associated urinary tract infection rates.

Over the past 4 years, we have reduced catheter use by 42% and reduced infections by 57%.

To learn more visit StamfordHospital.org/CathUTI.
Patients with critical illnesses require very specialized care and expertise. Because of the complexity of this patient population, a focus on quality of care is essential. Survival for these patients can be improved by using a number of different types of interventions. This includes the skill and training of the staff in the Intensive Care Unit (ICU), precautionary steps to prevent infections and complications, and adherence to the most up-to-date medical professional guidelines.

The ICU team at Stamford Hospital is led by a national leader in Critical Care, James Krinsley, MD. A Professor of Medicine at the Columbia University College of Physicians and Surgeons, Dr. Krinsley has served in an advisory capacity to professional organizations nationally and internationally, and has authored a number of papers and presentations on the subject of best practices for critically ill patients.

The ICU care model employs a team approach to strive for best outcomes. The team includes physicians with board certification in internal medicine, critical care and lung disease who are in the ICU or available 24/7; specialized critical care nurses; pharmacists; respiratory therapists; nutritionists and palliative care specialists.
The team reviews each patient’s care plan and treatment goals daily, including the need for and best use of: ventilators, different types of catheters, preventive medications, nutritional intake and skin-care precautions.

Over the years, Stamford Hospital has become nationally recognized for its quality of ICU care in relation to blood sugar control. Studies have shown that patients who are in an ICU, both with and without diabetes, have better survival rates if their blood sugars are strictly controlled. The ICU team develops a process where nurses check patients’ blood sugars on admission to the ICU and, based on these results, follow a physician-ordered continuous insulin protocol with close blood sugar monitoring. Nurses check sugars frequently and alert physicians, allowing for insulin doses to be adjusted, and for blood sugars to achieve the best range possible. The entire protocol is documented in the patient’s electronic medical record.

The program has achieved excellent results for ICU patients, garnering the Hospital national distinction. In fact, the Joint Commission awarded the Hospital its prestigious Codman Award for excellence in healthcare quality.

Stamford Hospital has improved ideal blood sugar levels and reduced undesirable blood sugar levels by up to 37%.
Reducing Inpatient Falls

The effort to prevent patient falls is important in any hospital setting. Falls can occur for a number of reasons, such as a patient being weak, dizzy or confused after a procedure. Even with the best preventive measures in place, sometimes a patient gets out of bed or a chair quickly and without assistance resulting in a fall.

At Stamford Hospital, our nurses work collaboratively to develop innovative solutions that address patient needs – among which is a comprehensive Fall Prevention Program. This effort begins with an assessment of all patients to determine their risk of falling. Those considered “at risk” are given specific preventative instructions and assistance.

Additionally, as part of the Fall Prevention Program we formed a Fall Prevention Committee that meets weekly to review data related to patient falls. The goal is to increase staff awareness, develop intervention strategies and ensure patient safety.

Nursing Interventions to Improve the Patient Experience

Stamford Hospital’s goal is to provide patients with a first-rate experience. Our journey to improve the patient experience has included the implementation of many initiatives focused on a patient- and family-centered model of care, consistent with the Planetree philosophy. Our approach is holistic and encourages healing in all dimensions of body, mind and spirit.

The nursing staff has worked collaboratively to improve our care delivery model and the patient experience by developing and adopting a number of best practices from leading national experts and institutions. More specifically, our best practices include:

• **Discharge Phone Calls** – connects nurses with patients to ensure they understand their discharge instructions and medication regimen

• **Hourly Rounding** – proactively anticipates the patients’ needs before they request help via their call light

• **Leadership Rounding** – connects nursing leadership to staff and patients, ensuring a positive experience

• **Bedside Shift Report** – involves the patient and the care partner in transitioning one patient to another when shifts change, and promotes safety and involvement in decision making

• A technologically advanced **Nurse Call System** – connects patients directly to their care providers

• **Patient Directed Visitation** – allows the patient autonomy in decisions related to care partnership, visiting and rest

• **Patient Access to a Clinical Pharmacist** – answers patients’ medication questions

• Nurse practitioners and physicians who specialize in **Pain and Palliative Care Services**

One of the ways we can evaluate whether these initiatives are making a difference is through the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey, which measures our patients’ perception of their care in eight key areas. As a result of our efforts, Stamford Hospital has experienced gains in all of the eight HCAHPS domains.

In addition to these across-the-board gains, we have consistently exceeded the national average in two areas: nurse communication and pain management. Our success is directly related to increasing the amount of time patients have contact with our nursing staff. For example, Hourly Rounding provides frequent opportunities for nursing to engage patients regarding their care, ensures that pain is adequately managed, anticipates patient needs and assesses patient safety. Our communication with patients continues after discharge through Discharge Phone Calls. Nurses follow up with patients within 24-48 hours of discharge to make sure they understand their discharge instructions and medication regimen. Nurses can also answer any questions about the discharge and identify issues which may require immediate follow up with a physician.
Other interventions we have developed to support fall prevention include:

- A more comprehensive unit surveillance program that includes staff who are not typically involved in fall prevention.
- A dedicated team to analyze patient falls in real time, which not only increases the communication between disciplines but, more importantly, facilitates the implementation of interventions.
- Environmental visual reminders using the color orange to allow for easy staff identification of fall risk patients.
- The purchase of new beds that are lower to the ground and include safety lighting.

Since the implementation of the Fall Prevention Program, we have decreased inpatient falls by 27%.

To review specific data, visit StamfordHospital.org/PatFall
Breaking Ground for the New Stamford Hospital

Many years in the making, the plan to create a new Stamford Hospital is coming to fruition.

With patients and their needs firmly in mind, features of the new hospital include:

- New patient care units with all private rooms and bathrooms
- An Emergency Department with separate treatment areas for trauma, cardiac, urgent, behavioral health and pediatric patients, more than doubling the number and size of exam rooms
- Significantly larger surgical suites to accommodate the latest technology
- A new Pediatric Unit in the Whittingham Pavilion to centralize mother-child services
- An expanded Intensive Care Unit
- A central location for all Heart & Vascular Institute services

Other major milestones to take place this year include:

- Foundation work for the new facility took place this spring
- The erection of steel structures to begin by the end of the year
- Construction on the Hospital’s new Central Utility Plant, which is scheduled for completion in December 2013
Relocation of Entrances for the Bennett Cancer Center and Whittingham Pavilion

Beginning April 15, 2013, the Bennett Cancer Center and Whittingham Pavilion will relocate their entrances. Both facilities will be accessible from a single entrance on the east side of the Whittingham Pavilion.

To access the new entrance, take Broad Street near the former Tandet Center and Jean S. Rich Professional Office Building. The new entrance will not be accessible from Shelburne Road. An enclosed connector has been built between the Whittingham Pavilion and Bennett Cancer Center to make the transition as seamless as possible. The new entrance for both facilities will remain in place until our construction concludes in 2016. Existing internal entrances to both facilities from the current main Hospital will not be impacted. Surgical patients who previously entered through the Whittingham Pavilion entrance will now be instructed to enter the Hospital at the Admitting entrance.

Valet parking will be available for patients and visitors at the new entrance.
Sickness and medical emergencies don’t always fall during regular doctors’ hours. That’s why we extended ours.

**THE IMMEDIATE CARE CENTER**

**Now open 6am – 10pm, 7 days a week**

Our Immediate Care Center (ICC) located at the Tully Health Center offers quick, convenient treatment when you and your family need immediate medical attention, and your physician is not available. Staffed with emergency-trained physicians and nurses, the ICC is now open from 6am to 10pm, 7 days a week, to accommodate steady increases in patient demand. In every case, the goal is to have patients treated and released within an hour.

Patients with severe symptoms including chest pain, shortness of breath, seizures, choking, trouble breathing and abdominal pain should call 911 or go to the Emergency Department.

For more information and to view a virtual tour of the ICC, visit StamfordHospital.org/ICC or call 203.276.2222.