Get Better Here™

Patient Safety Plan

Introduction

The Patient Safety Plan is designed to support and promote the Mission, Vision and Values of Crittenton Hospital Medical Center (CHMC) which include continuously improving patient, visitor and employee safety. This plan is implemented through the integration and coordination of the patient safety activities of the Medical Staff, residency programs, clinical departments and support services departments at CHMC. The plan also promotes the critical role that each employee plays in ensuring patient, visitor and staff safety.

The organization-wide Patient Safety Program is designed to reduce medical errors and hazardous conditions by utilizing a systematic, coordinated and continuous approach to the improvement of patient safety. This approach centers on the establishment of mechanisms to support effective responses to actual occurrences and hazardous conditions, ongoing proactive reductions in medical/health care errors and integration of patient safety priorities in the design of the organizations’ services and processes.

Purpose

The purpose of the plan is to create and maintain a culture of safety that is collaborative, planned, systematic and organizational wide. It is designed to assess, measure and improve patient safety. It supports our mission to enhance the health status of the individuals we serve.

Objectives

The objectives of the plan are to:
- Outline patient safety authority and responsibility
- Review and investigate serious outcomes where a patient injury has occurred
- Review and evaluate actual potential risk of patient safety
- Identify opportunities to improve safety performance
- Implement educational programs to reduce the possibility of patient injury
- Promote a non-punitive culture that promotes awareness of safety concerns
Priorities

The priorities of the plan are to:

- Review organizational processes to ensure compliance with the Joint Commission 2014 National Patient Safety Goals
- Promote patient safety education throughout the organization
- Continue to conduct daily patient safety briefings

Organization, Authority and Responsibility

The CHMC Board of Trustees has overall authority for the Patient Safety Plan. The CHMC Board of Trustees has delegated the authority to implement and maintain activities to the Environment of Care Committee. To achieve an integrated plan, the following roles and responsibilities are outlined.

Responsibilities

Board of Directors

The Board of Directors has the overall responsibility for ensuring the provision of patient safety. The Board of Directors, together with Hospital Administration and Medical Staff, facilitate patient safety by:

- Providing direction in setting patient safety initiatives.
- Overseeing the ongoing monitoring of the patient safety function.
- Providing adequate resources to accomplish the patient safety function.
- Reviewing and making recommendations regarding patient safety activities.

Joint Quality Committee

The Joint Quality Committee supports the Safety Program by:

- Making recommendations for projects that require multidisciplinary Patient Safety/Process Improvement Teams.
- Reviewing feedback and recommendations for process improvement.
- Reviewing data and information that impact patient safety.
- Evaluating the effectiveness of the patient safety activities of the departments.
Senior Leadership supports the Safety Program by:

- Demonstrating open communication among leaders and staff on patient safety concerns.
- Ensuring that the policies are in place to support patient safety.
- Providing direction in establishing patient safety priorities.
- Allocating resources for assessing and improving patient safety.
- Providing ongoing recommendations for an effective Patient Safety Program.

Medical Staff:
The Medical Staff at CHMC is responsible for the ongoing safety of patients and contributes to patient safety by:

- Participating in organizational-wide patient safety activities/teams/rounds.
- Approving the Patient Safety Plan.
- Communicating patient safety issues.

Department or Hospital Wide Patient Safety/Process Improvement Teams are established to address clinical, operational or system-wide process and responsibility for:

- Establishing the team’s goals and objectives.
- Utilize the Plan, Do, Check, Act (PDCA) Methodology and Performance Improvement tools like Root Cause Analysis (RCA) and Failure Mode Effect Analysis (FMEA) as necessary.
- Utilizing the expertise of the Medical Staff, staff and departments.
Safety Improvement Activities

The following are safety improvement activities that are reviewed and/or monitored on an annual basis. These activities are not limited and will continue to expand over time.

- Joint Commission National Patient Safety Goals
- Incident and near miss reporting and root cause analyses
- Medication Safety Committee
- Infection Control Committee
- Environment of Care/Performance Standards
- Staff suggestions for improving patient safety
- Patient/Family suggestions for improving patient safety
- Sentinel Event identification and reporting
- Collaborative Participation

Crittenton Hospital Medical Center makes a commitment to provide the safe and professional care of patients and ensures the safety of visitors and employees. The commitment is made through the Patient Safety Plan that proactively identifies, evaluates and recommends patient safety improvements.

Internal and External Requirements and Data Repositories which Influence CHMC Patient Safety Efforts

- Core Measures
  1. Acute Myocardial Infarction
  2. Heart Failure
  3. Pneumonia
  4. Surgical Care Improvement Project
  5. Stroke
  6. Venous Thromboembolism
  7. Immunization
  8. Perinatal Care
  9. Emergency Department
  10. Hospital Outpatient Department
  11. Hospital Based Inpatient Psychiatric Services
  12. Substance Use

- Blue Cross Blue Shield of Michigan (BCBSM) Pay for Performance Collaborative Quality Initiatives:
  1. Michigan Cardiovascular Consortium – Percutaneous Coronary Intervention (BMC²-PCI)
  3. Michigan Society of Thoracic and Cardiovascular Surgeons Quality Collaborative (MSTCVS)
5. Michigan Surgical Quality Collaborative (MSQC)
6. Michigan Arthroplasty Registry Collaborative for Quality Improvement (MARCQI)
7. Hospital Medicine Safety Consortium (HMS)
8. MHA Keystone CAUTI
9. MHA Keystone Sepsis

- Joint Commission National Patient Safety Goals for Hospitals
- Hospital Readmissions Reduction Program
- Hospital Acquired Conditions Program