Quality Plan

Introduction

The organization-wide strategic quality plan is designed to deliver exceptional quality to every patient, in every care setting, during each healthcare encounter. This plan is implemented through the integration and coordination of the quality initiatives of the Medical Staff, residency programs, clinical departments and support services departments at CHMC.

Purpose

The purpose of the plan is to create a collaborative systematic approach to quality improvement. Through the utilization of quality improvement tools and process improvement initiatives, Crittenton Hospital Medical Center strives to become the low cost, high quality provider of choice.

Objectives

The objectives of the plan are to:

- Coordinate the quality plans of each discipline toward organizational process improvement. The disciplines include:
  - Medical Staff / Peer Review
  - Provider Credentialing
  - Patient Care Departments
  - Ancillary and Support Services
  - Risk Management
  - Patient Relations
  - Residency Programs

- Create a reporting structure for each of the above mentioned disciplines to communicate outcomes and develop action plans to improve patient care delivery.

- Utilization of the following quality tools to drive process improvement:
  - Plan-Do-Check-Act
  - Root Cause Analysis
  - Failure Mode Effects Analysis
  - Benchmarking against national standards

Priorities

The priority of this plan is to utilize data and evidence-based practice to provide high quality care to the community that we serve.
**Organization, Authority and Responsibility**

The CHMC Board of Trustees has overall authority for the Quality Plan. The CHMC Board of Trustees has delegated the authority to implement and maintain activities to the Quality and Risk Management Department. 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 quality care.

The Board of Directors, together with Hospital Administration and Medical Staff, facilitate quality care by:

- Providing direction in setting quality initiatives.
- Ongoing monitoring and evaluation of the CHMC Quality Performance Measurement Report and Joint Quality Care Committee minutes.
- Review of the Medical Quality Care Committee meeting minutes.

**Joint Quality Care Committee**

The Joint Quality Care Committee supports the Quality Plan by:

- Holding each department accountable for improvement of their outcomes by quarterly review of the CHMC Quality Performance Measurement Report.
- Reviewing feedback and recommendations for process improvement.

**Medical Quality Care Committee**

The Medical Quality Care Committee oversees all Medical Staff Quality Plans and coordinates all FPPE and OPPE activity.

**Senior Leadership**

Senior Leadership supports the Quality Plan by:

- Demonstrating open communication among leaders and staff on quality concerns.
- Ensuring that the policies are in place to support quality.
- Disseminating organizational performance indicators

**Hospital-Wide Quality Improvement Teams**

Multidisciplinary Quality Improvement Teams address area-specific opportunities for improvement. Examples of these teams include:

- Robust Process Improvement (RPI)
- Participation in quality collaborative
- Residency process improvement education