

Framing the Issues for Quality and Patient Safety

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- “If you don’t know where you’re going , you’re liable to end up someplace else”

– Robert Mager

The Market Model for Quality

Stage 1

Stage 2

Stage 3

Stage 4

Stages

Acknowledgement

Differentiation

Innovation

Reward

Drivers

**Data Release
(IOM Report)**

**Regulatory Initiatives
Malpractice Crisis**

**Availability of
Technology Solutions**

**Business Case
for Quality/Safety**

Market
Reactions

Media Coverage

**Employer Response
(Leapfrog)**

**Adoption of
Technology**

**Consumer
Activation**

Consumer Interest

Legislation

**Pay for
Performance**

Provider
Response

Leadership Attention

Staff Training/Education

**System (process)
Redesign**

**Learning
Organization**

**Organizational
Assessments**

Data Collection/Analysis

Culture Change

**Goal Setting- Defect
Free Hospital**

**Preventive Risk
Strategies**

The Philadelphia Inquirer

Friday, April 23, 1999

Kidney misplaced as transplant patient waits

By Jim Fitzgerald
ASSOCIATED PRESS

VALHALLA, N.Y. — The transplant team was just about to put the patient under when the operation had to be postponed. The healthy new kidney, it seemed, was missing.

Someone, it turns out, had thrown it in the trash.

one, can be preserved on ice for about 48 hours, and 36 hours had passed.

The patient, a New York man who spent the last year on dialysis, was told there would be a delay. He was not told why. "There was no reason to at that point," said Carin Grossman, a hospital spokeswoman.

An hour and a half went by as the

Concerns About Safety

**According to a recent Survey
respondents had the following concerns:**

61 % being given the wrong medicine

**58% given medicines that interact in a
negative way**

56% complications from a procedure

Acknowledgment

- Harvey Fineberg- President of IOM
- Arthur Miller- Harvard Law Professor, Author, and TV host


MARKET DRIVEN

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in the Transformation
of America's Largest
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Differentiation

- Suzzane Delbanco- Executive Director,
The Leapfrog Group- Purchaser Initiatives
for Quality and Error Reduction

Technology- Are We Doing All We Can?

- 92% of Providers believe much more can be done for quality than is being done
- Effectively using technology: 16%
- Federal efforts required: 44%

Innovation

- George Halvorson- Chairman and CEO, Kaiser Foundation Health Plan, Author “Strong Medicine and Epidemic of Care”

Business Day

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WEDNESDAY, JULY 11, 2001

The New York Times

In a Shift, an H.M.O. Rewards Doctors for Quality Care

By MILT FREUDENHEIM

Blue Cross of California, one of the nation's largest health insurers, announced yesterday that it would pay bonuses to doctors serving its health maintenance organization members based on patient satisfaction and other quality standards. It will also stop paying extra to physicians with the best cost-cutting records.

The shift follows a similar move by Harvard Pilgrim Health Care in Boston last month. A number of other managed

care companies, including several Blue Cross and Blue Shield plans operated by Anthem Inc., offer rewards for both cutting costs and quality care.

In the past, almost every H.M.O. rewarded doctors based on their ability to keep medical costs down, scrutinizing their billing to make sure they were not ordering more high-priced tests and procedures than other doctors treating the same ailments. But as doctors and employers have criticized managed care companies for their business practices, and as enrollment in the most restrictive H.M.O.'s has stagnated, managed care companies are start-

ing to give more weight to the quality of care their doctors provide.

The move is a plus for consumers, according to patient advocates, because doctors will now have incentives to improve patient care rather than to cut costs. "It's good for consumers for the health care industry to be competing on the basis of quality," said Naomi Meyer, a health care analyst at Consumers Union in San Francisco.

Employers also hailed the shift, saying it would pay off in the long run in the form of fewer employee absences from work.

"This is not just one of those California oddball ideas," said Peter V. Lee, president of the Pacific Business Group on Health, which represents big West Coast employers. "Employers nationally are saying we want to see quality rewarded and we want it to be more transparent to consumers."

In Detroit, the major automakers are rewarding hospitals that provide high quality care for particular diseases by publicizing their results. Dr. Denise Clement, director of health care quality assurance at the Ford Motor Company, said the results

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Are We Really Making Progress in Patient Safety?

You can always trust the Americans. In the end they will do the right thing, after they have eliminated all other possibilities.

- Sir Winston Churchill