



# Striving for Excellence In Challenging Economic Times

## *The Privilege and Power of Leadership*

Jim Conway  
Senior Fellow  
Institute for Healthcare Improvement

# Outline

---

- Our Shared Vision
- HELP!
  - “Make Them Stop Giving Us More Things”
- Leadership in Action:
  - Results That Blow You Away!
- IHI Framework for Leadership
  - IHI Improvement Map
- Closing Comments
- Q&A

# A Clear National Vision

---



Care that is reliably:  
*Safe, Effective, Patient  
Centered, Timely,  
Efficient, Equitable*

[IOM, Crossing the Quality Chasm]

# ***IHI's "No Needless" List***

---

No needless deaths

No needless pain

No helplessness

No unwanted waiting

No waste

...for anyone

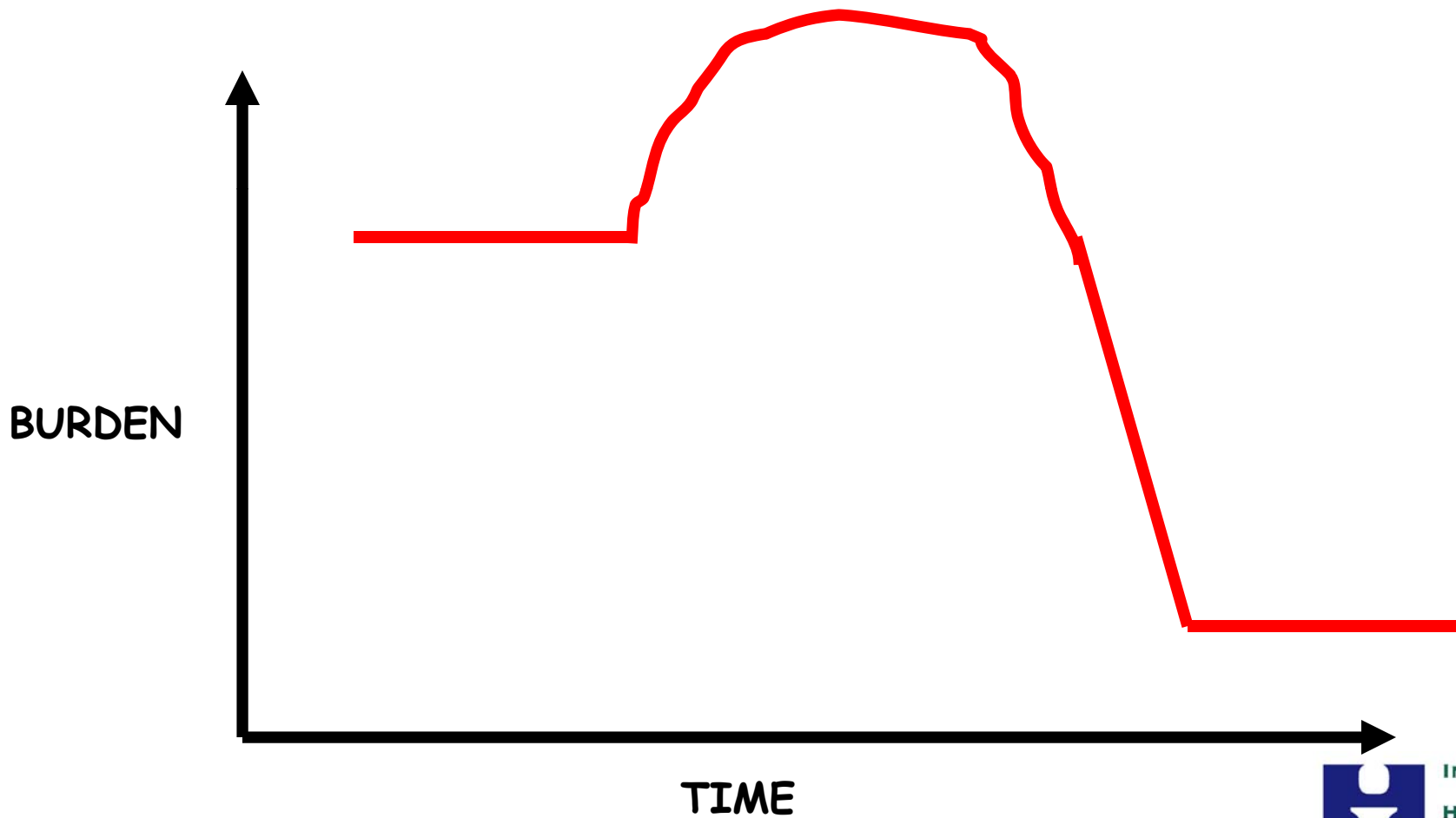
# What Would A Transformed Organization Look Like?

---

- A place where collaboration thrives; where physicians, nurses and all staff cooperate
- A place where the patient's voice is heard and drives design
- A place where staff experience reward and joy in their work
- A place with adequate resources and stable finances

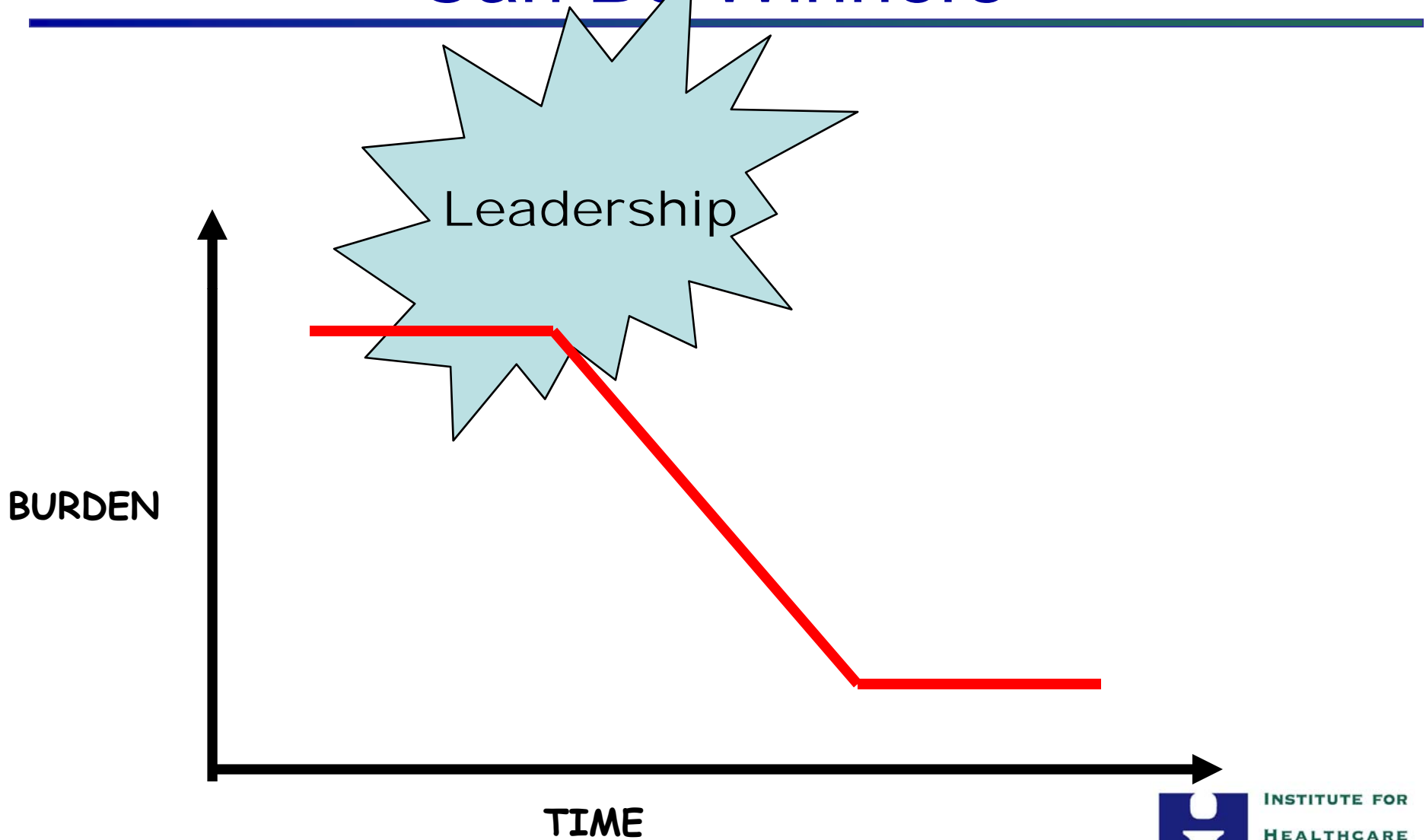
# The Transition State – Help, Make Them STOP!

---



# The Future State – Most Can Be Winners

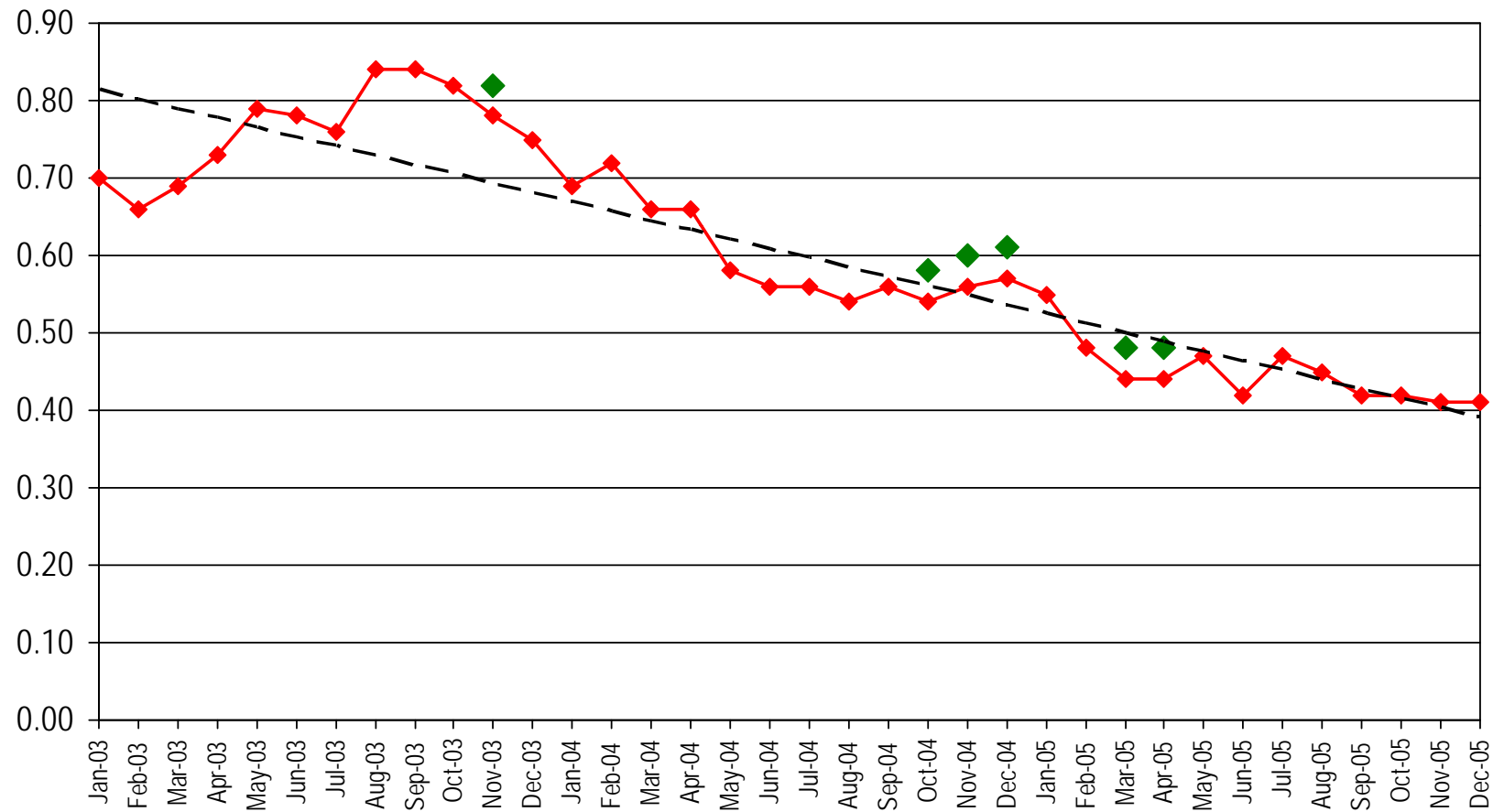
---





**Exceptional Examples of  
Leadership Are Emerging  
Everywhere!**

# Sentara: Rolling 12-month “Serious Safety Events” per 10,000 Patient Days



## Serious Safety Events

### Total Number of SSEs in Comparison to Baseline Rate

Chart Type: CUSUM (Cumulative Sum)

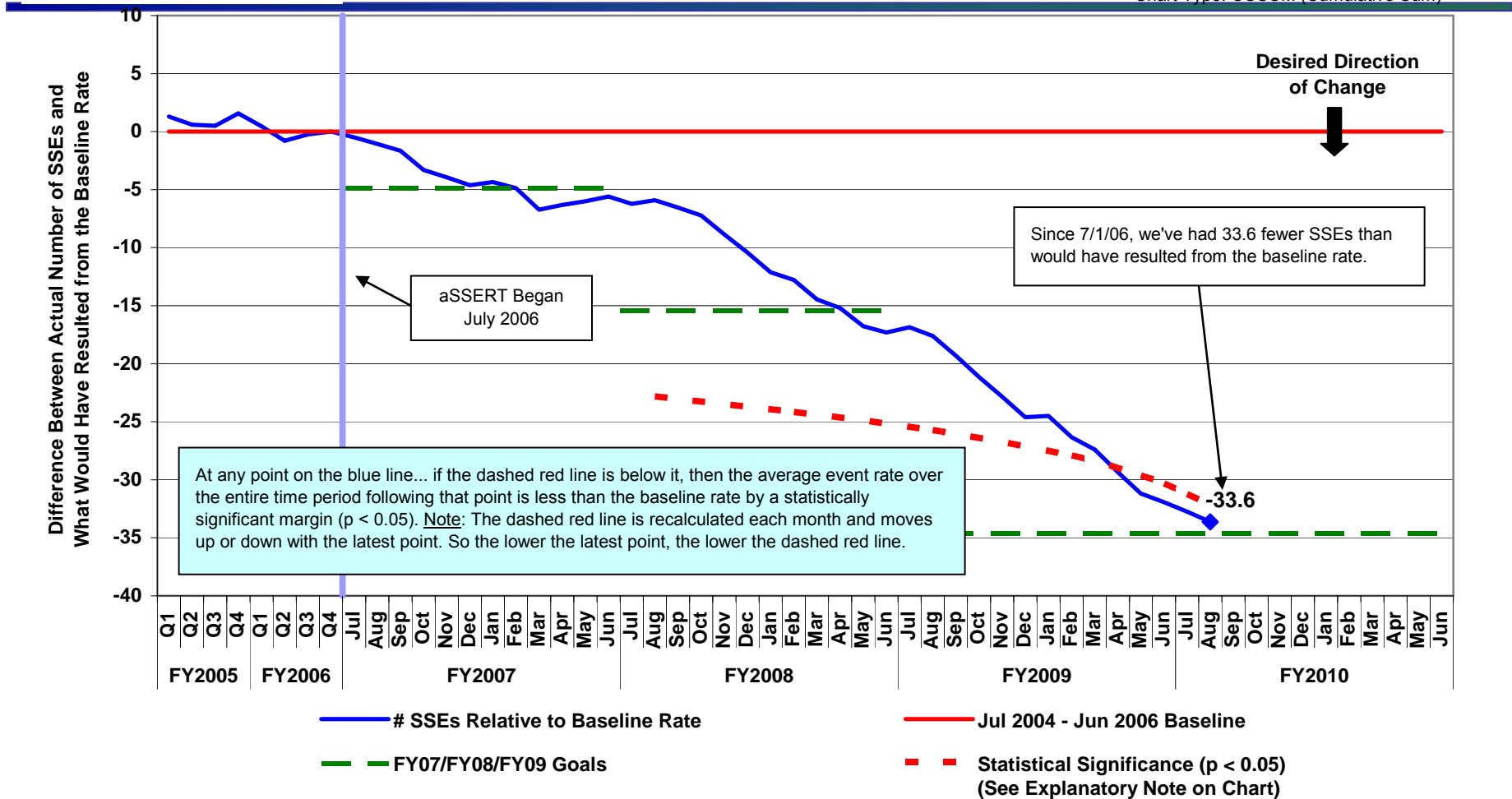


Chart Updated Through 31Aug09 by Art Wheeler, Legal Dept.

Source: Legal Dept.



# Allegheny General Hospital Reduction in HAI in CCU/MICU:

---

## Return on Investment

- Total Operating Improvements
  - CLAB= \$1,235,765 (2 years)
  - VAP= \$1,003,162 (1 year)
  - MRSA= \$ 295,342 (1 year)
- Highmark PFP = \$3,100,000 (2 years)
- HAI elimination Initiatives = +\$5,634,269
- Investment = \$85,607
- 388 additional ICU admissions
- 57 lives saved

# Does Improving Safety Save Money?

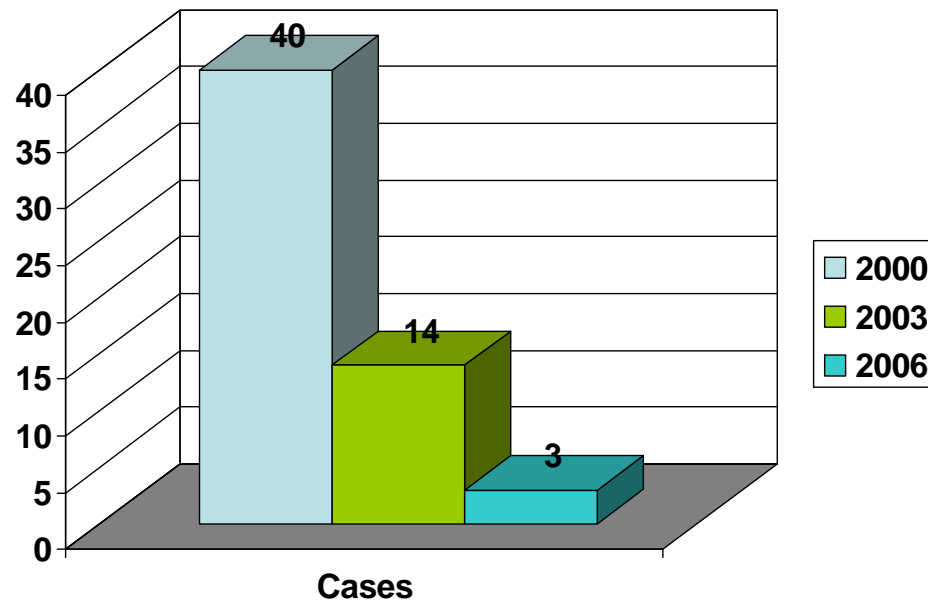
## Henry Ford Health System

IMPROVEMENT	COST	SAVINGS	NET
<i><b>SURGICAL INFECTIONS</b></i>	(\$110,000)	\$540,000	\$430,000
<i><b>BLOODSTREAM INFECTIONS</b></i>	(\$22,500)	\$4,780,000	\$4,757,500
<i><b>VENTILATOR PNEUMONIAS</b></i>	(\$0)	\$1,166,400	\$1,166,400
<i><b>RAPID RESPONSE TEAMS</b></i>	(\$390,000)	?	(\$390,000)
<i><b>TOTAL</b></i>	<i><b>(\$522,500)</b></i>	<i><b>\$6,486,400</b></i>	<i><b>\$5,963,900</b></i>

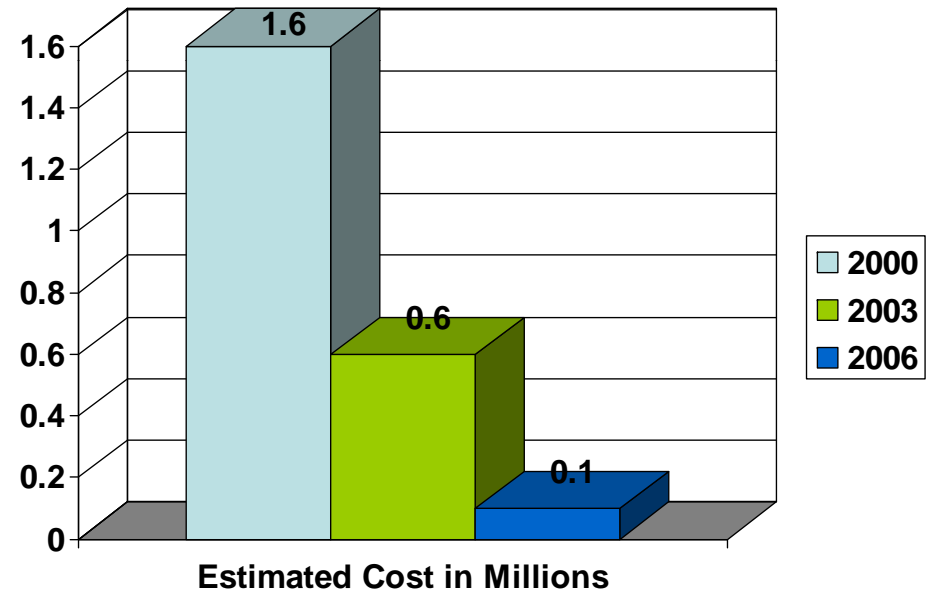
# Quality and Cost: Standard Work

## The Ventilator Acquired Pneumonia Bundle

- VAP Cases



- Cost in Millions



***Mortality Rate: 14% rate***

\*Data complete through August 2006

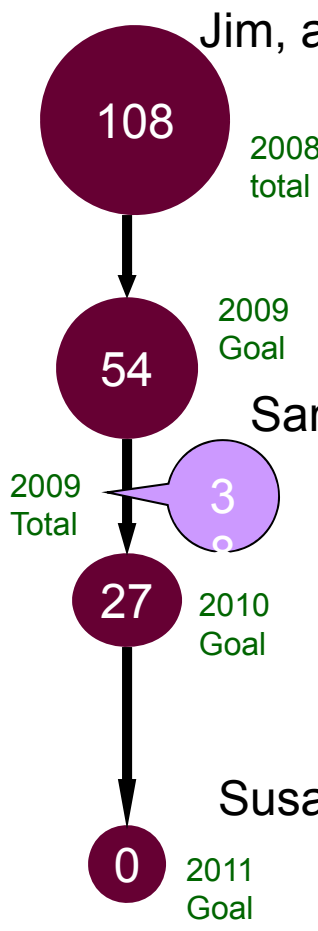
© 2008 Virginia Mason Medical Center. Used with permission.  
All rights reserved. No further use of these materials is permitted without the express consent of Virginia Mason Medical Center.



# Winchester Hospital

## Preventable Harm Events

October 2008 through September 2009



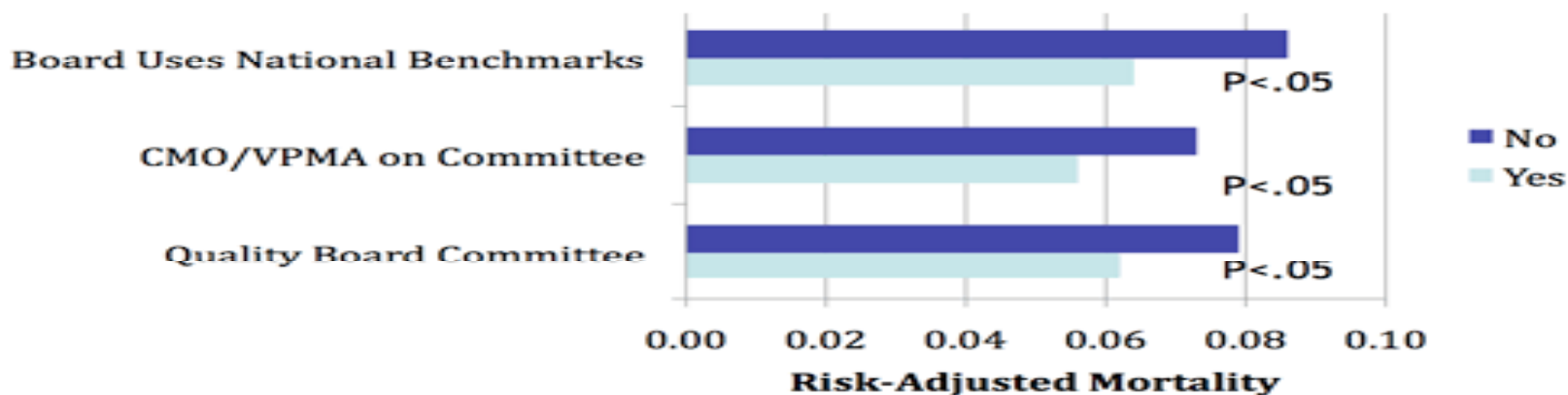
- Joe, age 65
- Judy, age 86
- Ed, age 82
- Kelly, age 1
- Joe, age 62
- Frank, age 88
- Chris, age 87
- Linda, age 84
- Joan, age 76
- Susan, age 28
- Karen, 45
- Sal, age 81
- Lisa, age 60
- Tim, age 76
- Mary, age 81
- Doug, age 72
- Karl, age 33
- Bob, age 76
- Felicia, age 80
- Michael, age 90
- Timothy, age 84
- Matthew, age 89
- Raymond, age 54
- Jim, age 48
- Jane, age 56
- Rob, age 76
- Kevin, age 50
- Sam, age 90
- Rose, age 82
- Susan, age 82
- Rick, age 80
- Bill, age 77
- Leo, age 80
- Paul, age 67
- Peter, age 78
- Ted, age 77
- Marie, age 89
- Dan, age 66

**Fiscal Year 2009 Goal: Reduce preventable harm by 50%**





Breaking News from HealthGrades: When a hospital's board is actively engaged in reviewing quality measures and investing in clinical quality improvement, research shows that reduction in mortality and complications happens at a faster rate. HealthGrades Clinical Excellence senior consultants have found that, among client hospitals, board engagement is one of the primary factors for success in rapidly improving patient care. Among HealthGrades' clients, the reduction in mortality and complication rates for those with engaged boards was statistically significant.





How are they getting these  
exceptional results?

# What are the Key Elements of Success in a Hospital?

---

- Leadership
- Honest review of data
- Prioritization
- Proper resourcing
- Clinician engagement
- Capacity with improvement and project management



# Leadership and Management at Every Level Critical in Improving Quality & Safety

---

- Governance
- Executive Clinical and Administrative Leadership (C-Suite)
- Senior Directors (Manager of Managers)
- Middle Managers
  - Front line managers, microsystem leaders
- Working supervisors
- Employees and staff (individual contributors)

# Forty Years of Leadership Learning

Conway: *Experience is the name we give to our mistakes*

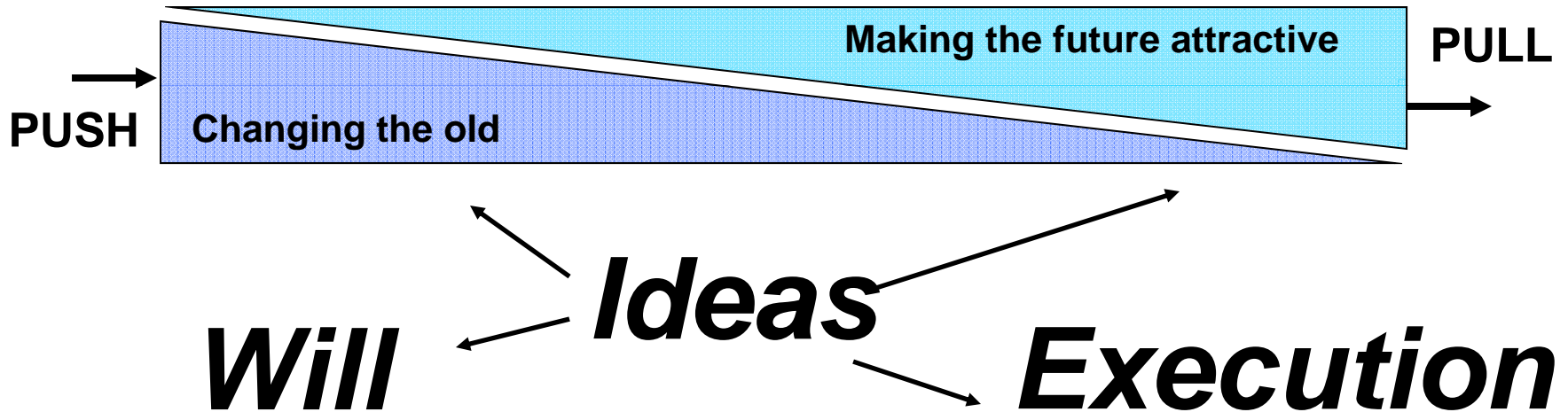
---

- Privilege and potential of service to others
- Power of vision and its communication when linked with the realities of today.
- Respect and trust; essential values
- Leadership occurs at every level / sphere
- Healthcare is a team sport—“Never Worry Alone”
- Disciplined, systematic, very hard work

# Framework: Leadership for Improvement

---

*Setting Direction: Mission, Vision and Strategy*



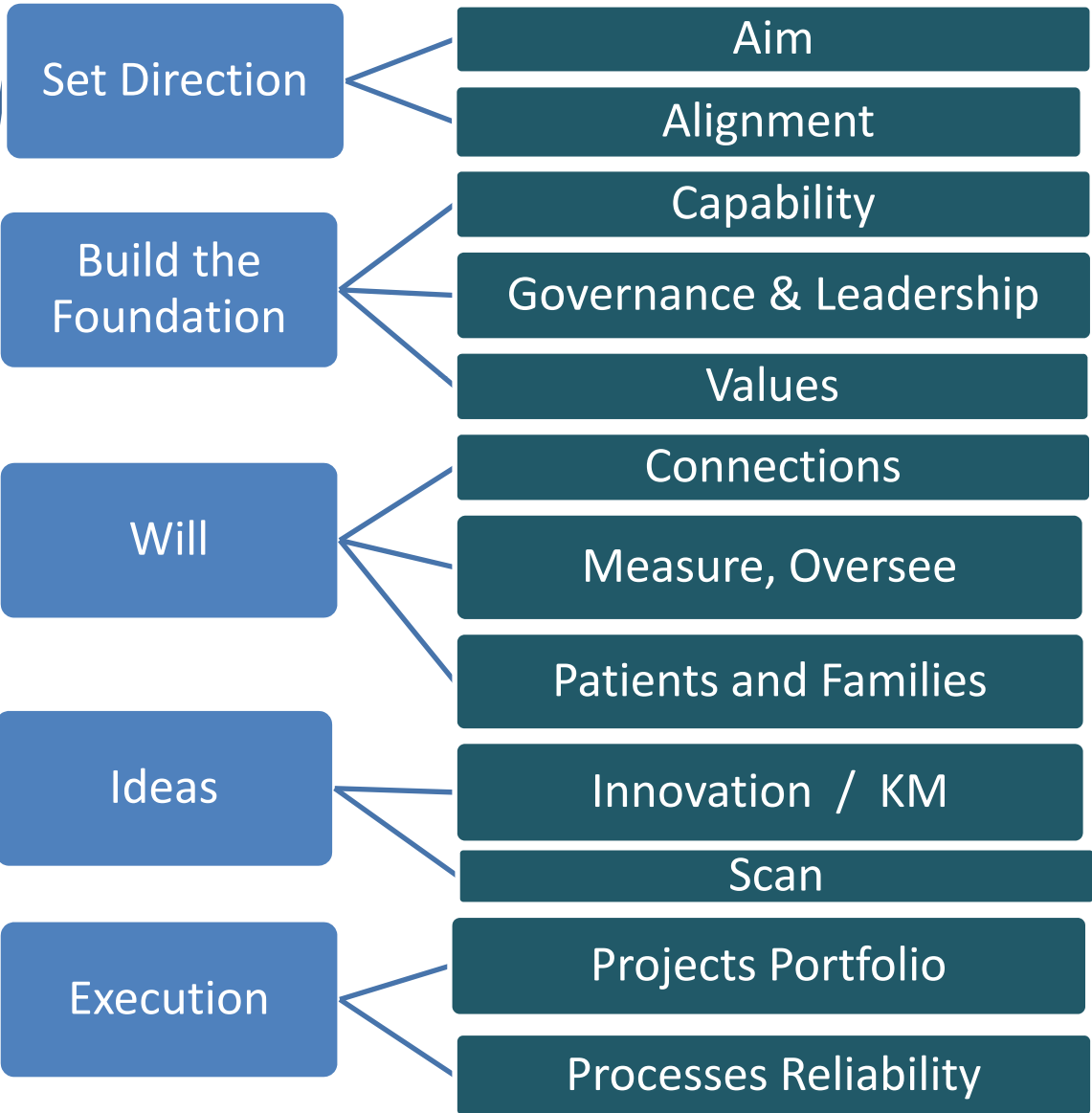
**Establish the Foundation**

# AIM

# FRAMEWORK

# IM LEADERSHIP PROCESSES

Leaders are positioned to achieve well-defined and thoughtful annual aims (clinical, financial, satisfaction) within one year



# The Work Ahead

## Developing Leadership Competency

---

### For Middle Management

- Modeling Values
- Building improvement capability
- Communicating & Coaching
- Seeking out new knowledge
  - Staff, P&F, teams, scanning
- Measurement
- Integrating and aligning
  - People, goals, results
- Leading and managing Processes reliability
- Personal development

### For MM Managers

- Values—MM part of solution
- Building leadership capability –internal & external
- Providing resources & time
- Mentoring and coaching
- Integrating and aligning
- Measurement
- Supporting execution of processes and projects
- Celebrating



# Leadership... the story continues....

*A tidal wave of accountability  
moves across the US and the  
world.*



Most change  
efforts fail...

*...no matter where you  
look or who you ask*



**If you knew, why didn't  
you do something?**

# Our Vision Is Clear

---



Care that is reliably:  
*Safe, Effective, Patient  
Centered, Timely, Efficient,  
Equitable*  
[IOM, Crossing the Quality Chasm]



Q&A



# Appendix



- The IHI Improvement Map is an open resource, available free of charge to anyone, anywhere.
- The Improvement Map builds on the work of the 100,000 and 5 Million Lives Campaigns and represents IHI's next frontier of hospital work.
- The Improvement Map helps:
  - Make sense of the many complex and competing demands hospitals face
  - Bring together the best knowledge available on the key process improvements that lead to exceptional hospital care
  - Support hospital staff (from leaders to the front lines) set change agendas, establish priorities, organize work, and optimize resources

# Where Are You Now? Gap Analysis

---

*Hospitals that show the greatest improvement are those that know **where they are** and **where they are going**. The Improvement Map can help you to understand both.*

- Go to <http://www.ih.org/ImprovementMap> and click on the Gap Analysis link in the gray “Take Action” box
- Identify the number of processes you have in place, and the number of processes you have started
- Share your learning by completing the Survey



INSTITUTE FOR  
HEALTHCARE  
IMPROVEMENT

## Strengthening the Core

---

*Middle managers play a vital role in  
improving safety.*

Healthcare Executive JAN/FEB 2010 [ache.org](http://www.ache.org)  
and available on [IHI.org](http://www.ihl.org)

<http://www.ihl.org/NR/rdonlyres/99BCC032-BEB0-4F63-BD97->

[EF0906C49230/0/FedericoBonacumStrengtheningtheCoreMiddleManagersRoleinSafety\\_HCExecJan10.pdf](http://www.ihl.org/NR/rdonlyres/99BCC032-BEB0-4F63-BD97-EF0906C49230/0/FedericoBonacumStrengtheningtheCoreMiddleManagersRoleinSafety_HCExecJan10.pdf)