thequalitypost

in this issue

Monthly Quality Improvement Newsletter for the **Division of Hospital Medicine**

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Greetings from Cat, Nader and Jenica

QUALITY IMPROVEMENT DIVISION OF HOSPITAL MEDICINE Welcome to the 75th edition of The Quality Post. In this issue we feature a piece on the 5-Day Readmissions Project. We also DHM provider experience. Lastly, we review our performance on the DHM True North Quality Metrics.

Life After the Diagnosis: *Expert Advice on Living Well with Serious Illness for Patients and Caregivers*

In Life After the Diagnosis, our very own **Dr. Steven Z. Pantilat,** expert in palliative care, details recommendations for dealing with serious illness, outlines the steps that patients should take, and demystifies the medical system. The book focuses on the whole person, explains what doctors mean, provides the truth behind the myths about serious illness, and offers practical recommendations on what to do and when.

Dr. Pantilat covers everything from the initial steps after the diagnosis and finding the right caregiving and support, to planning your future so your loved ones don't have to. He offers advice on how to tackle the most difficult treatment decisions and discussions and shows readers how to choose treatments that help more than they hurt, stay consistent with their values and personal goals, and live as well as possible for as long as possible.

In addition to praise from Bob Wachter, Abraham Verghese and others, one of our DHM colleagues, Teri Rose, offered a review online: "Dr. Pantilat's well written, compassionate, thoughtful book is the companion and roadmap we need to get us through this journey. Owning this book is like having Dr. Pantilat along for the visit."

Congratulations on this momentous achievement, Steve!

Set Goals That You Actually Want to Accomplish

It's unlikely that you'll make progress on your professional development goals if they feel like a chore.

Instead of focusing on things you "should" do, choose one or two areas of focus that align with what really matters to you. Ask yourself:

- *If I could accomplish just one major professional development goal this year, what would it be?*
- *When I think about this goal, do I get excited about the prospect of working on it as well as achieving it?*
- *Am I motivated to achieve this goal because it's interesting and important, or is it something that I think would please other people?*

Use the answers to come up with a shortlist of goals that truly match your personal ambitions.

Adapted from "Stop Setting Goals You Don't Actually Care About," by Elizabeth Grace Saunders

5-day Readmission Project

Michelle Mourad, Andy Lai, Nader Najafi, Sirisha Narayana, Cat Lau, Jennifer Feld

A better quality metric?

Reducing 30-day readmissions via hospital interventions has proven difficult. In part, this could be because a readmission at 30 days is too long after discharge to be plausibly related to interventions from the index hospitalization. Readmissions on a shorter time scale, such as five days, could be a more plausible marker of appropriate and safe discharge.

A better source of case review?

The Credentials Committee asked all Departments/Divisions to create a standardized mechanism for eliciting cases for peer review. Our Case Review Committee has been successful in eliciting cases volunteered by attendings, residents, nurses, and others. Nevertheless, we adopted 5-day readmissions as a potential source of cases for case review.

An opportunity for clinical self-reflection?

There is no standard mechanism to notify hospitalists that their patient has been readmitted. Readmissions could be an opportunity to reflect on our clinical decision-making.

Our tool for studying 5-day readmissions has been a program called Murmur that was written and developed by our Division.

| EHR Clinical Database | + | AMiON API | + | DHM Cellphone Directory | + | REDCap |
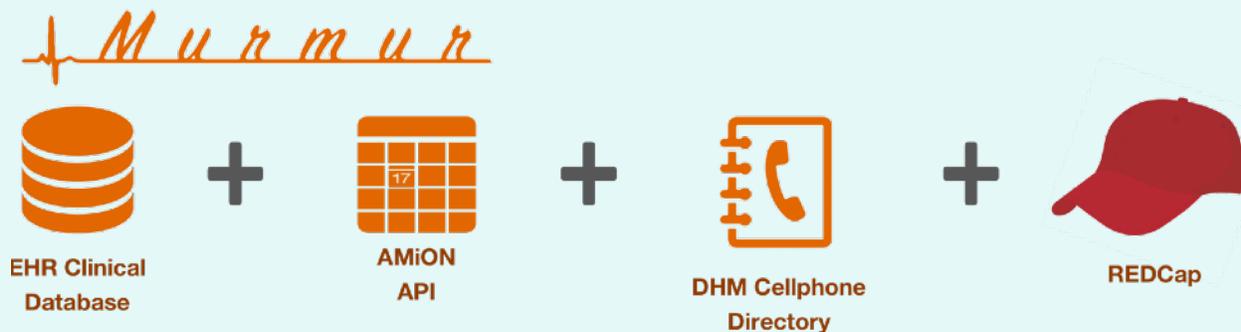
Murmur allows us to:
- Automatically detect 5-day readmissions every day
- Identify the discharging and readmitting attendings
- Notify these physicians via cellphone text message
- Elicit responses from them via customized surveys
- Pass a "signout" from the discharge attending survey to the readmit attending

DHM 5-day readmission rate (Teaching and Goldman): One every 1.1 days

We appreciate your continued feedback on 5-day readmits

The DHM Pulse

Thank you to all of you who continue to share suggestions regarding ways we can improve your quality of life at work — both as members of the DHM and as clinicians.

A huge thank you to **Sirisha Narayana** and **Fatima Karaki** for a successful inaugural Schwartz Rounds. In addition, thanks to **Adrienne Green** for her support of this along with other events for Patient Safety Awareness Week!

We are continuing to sift through the rich data gleaned from the DHM Pulse surveys – thank you for filling those out!

Getting in-basket coverage for personal leave and vacation is not standardized and the onus rests on the individual faculty member to sort this out. We are in the process of creating a workflow that will **streamline and simplify securing out-of-office in-basket coverage** for all DHM faculty members.

We hear you that the workflows for obtaining follow-up appointments and obtaining outside hospital records are not working smoothly. We are actively addressing both of those.

Based on your input, **we have added a workstation to the M1520** attending suite, and are in the process of adding another. Also, we have **upsized the whiteboards in the the 15 Moffitt**

We are so grateful to everyone on Goldman over the past few months.
Efforts are underway to optimize our response to surges in the Medicine census.
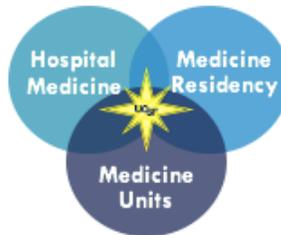Thank you for all of the feedback you have provided!

Kirsten Kangelaris
Liz Dzeng
Bassem Ghali

Sara Murray
Jake Natalini
Michael Wang

CJ Jordan
Jonathan Duong
Rachel Weiss

Special shout-outs to our colleagues who have filled in for jeopardy, GMS 5 and afternoon moonlighter slots!

DHM True North Quality Metrics

FY2017 True North Quality Metrics	FY16 Baseline	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
#SleepVitals Discharge ≥45% of patients with sleep promoting TID vital signs — **8 of 12 months**	15%	33%	48%	48%	43%	48%	58%	51%	50%
#DeliriumOrder Complete ≥50% delirium order set for Nu-Desc and AWOL positive patients within 12 hours — **4 of 6 months**	n/a	5%	0%	0%	21%	33%	36%	54%	55%
#HighQualityAVS Achieve ≥ 75% of patients with High-Quality AVS — **6 of 12 months**	69%	56%	61%	57%	62%	71%	69%	74%	80%
#MDexplain Achieve ≥ 77% score for HCAHPS "MD Explains in way patient understands" — **6 of 12 months**	77%	79%	81%	61%	79%	66%	77%	87%	–
#NewMeds Achieve ≥73% score for HCAHPS "Tell you what new medicine is for" — **6 of 12 months**	70%	77%	75%	78%	73%	78%	75%	84%	–
#MedRec Achieve ≥90% of patients who have had all meds reconciled before discharge — **4 of 12 months**	88%	87%	89%	86%	76%	81%	80%	78%	78%
#POLST Achieve ≥ 60% of patients (not full code) with POLST completion — **8 of 12 months**	55%	61%	67%	69%	74%	64%	58%	58%	58%