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MISSOURI TEAM QUALITY AWARD RECIPIENT

INFORMANTS TEAM at Southeast Missouri Hospital, Cape Girardeau



PROFILE

Southeast Missouri Hospital is a not-for-profit community hospital located in Southeast Missouri. A regional hub between St. Louis and Memphis, Southeast has 251 beds, serves 20 counties, and employs 1,952 people with more than 200 physicians on staff. Southeast strives for excellence in technology and nursing as a leading health care provider for the region. It's one of three Missouri hospitals offering robotic assisted surgery with the da Vinci® Surgical System, the only Missouri hospital with Novalis® Shaped Beam Surgery™, a computed tomography scanner, and a full-field digital mammography system. The American Nurses Credentialing Center gave Magnet Recognition for Nursing Excellence in 2004, and Southeast is accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

OPPORTUNITY FOR IMPROVEMENT

The Quality Management Department identified an improvement opportunity relating to dissemination of clinical data sets called core measures. These clinical indicators focus on Acute Myocardial Infarction (AMI), Heart Failure, Pneumonia, and Surgical Infection Prevention, and are used by JCAHO, the government, insurance companies, and the public to compare clinical quality among hospitals. The challenge was determining how to get clinical performance data to caregivers that could make a difference. Other methods had been tried (presentations, written reports, publications), but caregivers seemed to know little about core measures. Due to the scope of care and opportunities identified, AMI Core Measures were chosen as a place to begin and a Performance Improvement (PI) team was requested through the Quality Council. The team would

be consistent with the hospital's mission, "together we make a difference through our commitment to excellence in health care," by promoting excellence in communication. Knowing that if caregivers were aware of opportunities in AMI care, improvements in patient care would quickly follow and be reflected in core measure results. The team's objective was to share this information with key stakeholders, while impacting compliance with core measure indicators and improved patient outcomes.

TEAM ACTIONS

The Informants Team first assessed the current process and familiarized themselves with the five AMI indicators based on Medicare Services standard reporting. To identify effective communication methods, nursing units caring for AMI patients were surveyed to determine the level of knowledge regarding these AMI indicators, and where that information was obtained. The team reviewed the data and found only 1.5% could identify all five AMI indicators and 65.3% had never heard of core measures. Further, no consistent method of information sharing was identified. The team developed a process for sharing this information with key stakeholders through review of survey data, brainstorming, and benchmarking hospitals with high AMI indicator success rates. The final product was a poster identifying the five clinical indicators of care and Southeast's performance compared to other hospitals statewide, and key stakeholders were given the posters to display in their areas.

RESULTS

The latest of two surveys performed after introduction of the AMI indicator posters showed 46% could name the five indicators and 100% had heard of core measures. Part of the long-term impact included improved AMI core measure performance and the January 2006 quarterly report shows 100% compliance in the five identified indicators.

FUTURE PLANS

The Informants Team's success prompted formation of other teams to address the core measures of Heart Failure, Pneumonia, and Surgical Infection Prevention. The team also developed a defined process for future PI Teams, including an outline of all team activities specific to the MTQA Standards. This process is used by all PI teams to continually improve, address changing needs, and help future teams striving for excellence in health care.

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