PRHI Executive Summary

May 2001

The Pittsburgh Regional Healthcare Initiative is a collaborative effort of the institutions and individuals that provide, purchase, insure and support healthcare services in Southwestern Pennsylvania. We help our members work together to:
Achieve the world's best patient outcomes …Through superior health system performance . . .
By identifying and solving problems at the point of patient care.
We believe the major challenges in health care—rising costs, frustration and shortage among clinicians and workers, financial distress, overcapacity, and lack of access to care—share the same cause, and will share the same solution.

White House Studies PRHI

PRHI Chair Karen Wolk Feinstein and Director Ken Segel had the honor of being called to the White House on Thursday May 3, 2001 to brief President Bush's chief health policy advisors on the strategy and work of the PRHI partnership. The White House is considering whether to make health care quality and performance improvement using system-based approaches a major initiative. The Administration's health policy leadership were assembled to review PRHI as an example of a community-driven project.

Among those present at the briefing were Cabinet Secretaries Tommy Thompson from the Department of Health and Human Services and Paul O'Neill from the Treasury Department; Karl Rove, Senior Advisor to the President; Tom Scully, nominated as Administrator of the Health Care Financing Administration; Mark McClellan, MD, PhD, Consultant to the President and Council of Economic Policy Advisor; Anne Phelps, Special Assistant to the President for Domestic Policy (Health); and Gregg Meyer, MD, Director of the Center for Quality Improvement and Patient Safety at the Agency for Healthcare Research and Quality.

Feinstein and Segel summarized PRHI's core principles and activities, and suggested ways that White House and Administration leadership could aid efforts such as ours:

➢ Re-focus the national health care debate on patient outcomes and "perfect patient care."
➢ Demonstration funding for community-wide outcome improvement efforts such as PRHI.
➢ Financial support for hospital systems seeking to install and use clinical outcomes tracking systems, possibly tied to restoration of funds taken from the Balanced Budget Act.
➢ Expanded support for HCFA demonstration efforts to reward good performance, including premiums for low-cost services that improve patient outcomes.

➢ Dedicated NIH funding and academic rewards for research and clinical involvement in outcomes improvement initiatives.
➢ Support for activity-based costing demonstration projects.
➢ Training and reimbursement for health professionals who provide leadership (coaching and problem-solving) at the point of care with skills in informed shared decision-making and process improvement. ☙

McGuinn and Rohr to lead

PRHI Chair, Karen Wolk Feinstein, is pleased to announced that **Martin McGuinn**, Chairman and CEO of Mellon Financial Corporation, and **James Rohr**, Chairman and CEO of PNC, will co-chair the Leadership Obligation Group. Both have been strong long-term PRHI proponents, and are well-known as collaborative leaders.

"I strongly support this opportunity to improve performance in health care based on measurement and shared learning. I am pleased to help lead this important component of the initiative with my colleague, Jim Rohr," said McGuinn.

PRHI Partner Spotlight

Each month this newsletter lists one segment of PRHI's network of partners. This month we feature the members of PRHI's Leadership Obligation Group.

Kenneth Beatty, Vice President, PNC Bank Corporation
Scott Becker, VP, Strategic Provider Relationships, Highmark BlueCross BlueShield
Lawrence Biro, Network Director, Dept. Veterans Affairs
Donald Bogus, VP, Government Affairs,PPG Industries
Jeff Bolton, VP for Business & Planning, CFO, CMU
Thomas Boyle, Co-chair, Health Law, Buchanan Ingersol
Florence Brandt, Pres. & CEO, St. Francis Health System
Daniel Brooks, MD, VP & CMO, Heritage Vly. Health Sys.

Center for Shared Learning

Vickie Pisowicz
Director, CSL
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The mission of PRHI's Center for Shared Learning (CSL) is to support the testing and implementation of a system-based approach to healthcare management, drawn from the Toyota Production System (TPS) and Alcoa Business System.

We continue to focus on two areas of work:

(1) Holding information sessions throughout the region to discuss the application of TPS principles to health care; and

(2) Supporting the learning lines at UPMC Presbyterian and South Side hospitals.

This month we were fortunate to welcome Dr. Steven Spear to the learning lines. Dr. Spear and his colleague from the Harvard Business School, Dr. H. Kent Bowen, co-wrote the article on the "DNA" of the Toyota System for the *Harvard Business Review*. (Call Tony Kelly for a copy.) Their knowledge of TPS and their support for the PRHI model have made them an integral part of the help chain at the Center for Shared Learning. They are also able to guide us as we apply the principles of TPS in a healthcare setting.

Dr. Spear and Dr. Bowen both plan to visit our learning lines again at the end of May.

June 2001 at a glance *

Tony Kelly, PRHI Administrative Coordinator
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June 4	12-1:45 p	PRHI Co-chairs lunch
June 5	8am-noon	Nosocomial Infection Work Group
June 12	3-4:30 p	Adverse Drug Effect Advisory Committee Work Group
	6-9 p	Center for Shared Learning Information session (Call Tony Kelly to reserve a space)
June 18	8-10 a	Leadership Obligation Group A.E. Hunt Room Regional Enterprise Tower
June 21	2:30-4 p	Buying Healthcare Value
	4-6 p	Clinical Advisory Committee, Mercy Hospital

* all meetings held at PRHI offices unless otherwise noted.

Patient Safety Programs

Ed Harrison
Director, Patient Safety
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PRHI partners are working collaboratively to eliminate two major patient safety concerns: healthcare-acquired infections and medication errors.

AHRQ Proposal

PRHI submitted a proposal to the Agency for Healthcare Research and Quality (AHRQ) for the grant: *Improving Patient Safety: Health Systems Reporting, Analysis, and Safety Improvement Research Demonstrations*. If approved, the research project, "The Implementation of a Regional Approach for Improving Patient Safety," will accelerate our joint efforts in preventing nosocomial infections and medication errors. The grant will fund staff to rotate through our partner hospitals, helping them to use the medication error and infection reporting systems.

Preparing the proposal enabled us to create a road map for: (1) expanding reporting system assessment; (2) learning how reporting can affect change; and (3) assessing the work environment in which the reporting is done.

PRHI is pleased to report that 30 of 31 eligible PRHI partnering hospitals submitted letters of commitment.

If you have any questions and/or would like to review a copy of the proposal, please contact Edward I. Harrison, Director of Patient Safety, PRHI, at 412-594-2584.

Infection Control

Infection Control Practitioners at PRHI partnering facilities are collecting the data required for the PRHI bloodstream infection project. The initial month's data are scheduled for submission directly to the CDC by May 31, 2001, however, the CDC cannot accept this information before receiving authorized consent.

Consent forms and supporting documentation have just been distributed to the administration of participating hospitals. **The signed consent document should be returned directly to the CDC by May 18, 2001.**

Centers for Disease Control and Prevention
C/o Juan Alonso- Echanove, MD
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Clinical Initiatives

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> Southwestern Pennsylvania seeks to achieve the best patient outcomes of any community in the world. PRHI has established a partnership among clinicians, businesses, hospitals and insurers to achieve those goals in five pilot areas by (1) constructing outcome data sets trusted by those who provide care and (2) supporting collaborative efforts to improve care.

Cardiac Work Group

The Cardiac Report released last fall has led to powerful collaborative work among competing cardiothoracic surgeons, cardiologists, and hospital quality improvement officials. On the heels of a groundbreaking Work Group meeting, data analysts from several different institutions met to agree upon data definitions for a region wide Cardiac Registry. Clinicians selected risk-adjusted mortality and atrial fibrillation as preliminary improvement areas. The group is developing measures that will expand upon the PRHI report showing **how** each institution is faring. These new measures—a "data registry"—will add important details about **what** processes each system is using. Creating this "data registry" will allow physicians and hospitals to modify their work to get to better patient outcomes.

The group expects to complete its work in two more meetings, and hopes to begin collecting improvement data and sharing improved practices by the fall.

Depression Report

In other news, the Clinical Advisory Committee expects to finalize the Depression Report in May and release it shortly thereafter. Preliminary reviews already show large variations in post-hospitalization follow-up and effective medication management. Attention also focuses on policy issues regarding the reinvigoration of partial hospitalization options.

Diabetes Report

Finally, the Diabetes Work Group is coming together with the staffing of Susan Elster, who is contacting endocrinologists, primary care physicians, nephrologists, and pediatricians from several different systems to help frame questions for the final of the five first round reports.

Contact Information

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PRHI Partner Spotlight

Leadership Obligation Group Members,
continued from page 1

Michael Bryson, Exec. VP, Finance, Mellon Financial Co.
Rita J. Cindrich, Deputy Atty. Gen'l, Commonwealth PA
Yvonne Cook, Exec. Asst. Allegheny County Chief Executive
Larry Crowell, President & CEO, Heritage Vly. Health Sys.
Sandra Danoff, Director, Corp. Planning & Marketing, UPMC Health System
Paul Dishart, MD, Pres., Allegheny County Medical Society
Herb Elish, Director, Carnegie Library of Pittsburgh
Karen Wolk Feinstein, Pres., Jewish Healthcare Foundat"n
Mike Fisher, Attorney General, Commonwealth of PA
Marlene Garone, MD, VP, Operations, Western PA Hospital
William Getty, President, The Benedum Foundation
Paul Holdren, Executive Vice President, HealthAmerica
Leland Holly III, Senior VP, Human Res., FedEX Ground
William Jesserer, District Manager, Aetna US Healthcare
James Klingensmith, Group Executive Vice President, Highmark BlueCross BlueShield
Mark Laskow, CEO, Greycourt & Co., Inc.
Patricia Liebman, CEO, UPMC Health Plan
Jon Lloyd, MD, Medical Advisor, PRHI
Anthony Lombardi, Pres. & CEO, Monongahela Valley Hos.
Barbara McNees, Executive Director, Greater Pittsburgh Chamber of Commerce
Kenneth Melani, MD, Highmark BlueCross BlueShield
Michael Moreland, Director, VA Pgh. Healthcare System
Timothy Murphy, District 37, Allegheny, PA State Senate
Charles O'Brien, Pres & CEO, W. Penn Allegheny H System
T. Lawrence Palmer, Deputy Attorney General
Gerald Pifer, MD, Pres-elect, Allegheny County Medical Soc.
Ian Rawson, President, Hospital Council of Western PA
James Roddey, Chief Executive, Allegheny County
James Rohr, President & CEO, PNC Financial Services Grp.
Jeffrey Romoff, President, UPMC Health System
C. Daniel Sacco, VP, Planning & Managed Care, West Penn Allegheny Health System
Jack Saxer, Jr., Vice President, DQE, Inc.
Cliff Shannon, President, SMC Small Business Councils
Carl Sirio, MD, Associate Professor, UPMC
Francis Soistman, President & CEO, HealthAmerica
Daniel Sullivan, President & CEO, FedEX Ground
Scott Teachout, Hilb, Rogal & Hamilton Co. of Pittsburgh
Sandra Tomlinson, Senior VP, Highmark BlueCross BlueShield
Rosemary Trump, SEIU Local 585
Ronald Violi, Chairman & CEO, Children's Hospital of Pgh.
Ed Weisgerber, Partner, Kirkpatrick & Lockhart LLP
Chris Whipple, Exec. Dir., Pgh. Business Group on Health
Greg Zoller, Pres. & COO, Pittsburgh Mercy Health System

Progress Report

MedMARx is the registered trademark for a state-of-the-art system for reporting medication errors. Selected by a committee of PRHI participants, MedMARx will create a consistent reporting platform for all participating hospitals in the region. This table is a snapshot of our progress to date.

PRHI Partners	MedMARx contracting	MedMARx implementation	Regionwide reporting	Implement internal education	Implement self-review	ADE advisory committee	MedMARx users' group
	June 01	June 01	Quarterly	July 01	Sept 01	Ongoing	Ongoing
Butler Memorial Hospital	D						
Children's Hospital of Pittsburgh	In progress					Executed	
HealthSouth, Inc.	D						
Heritage Valley Health Systems, Inc.*	Executed	Executed				Executed	Executed
Latrobe Area Hospital*	Executed	Executed				Executed	Executed
Lifecare Hospitals of Pittsburgh, Inc.	D						
Monongahela Valley Hospital, Inc.	Executed	Executed				Executed	Executed
Ohio Valley General Hospital	In progress						
Pittsburgh Mercy Health System	Executed	Executed				Executed	Executed
South Hills Health System	Executed	Executed				Executed	Executed
St. Clair Memorial Hospital*	In progress					Executed	Executed
St. Francis Health System	In progress					Executed	
UPMC Health System	In progress					Executed	Executed
West Penn Allegheny Health System	In progress					Executed	Executed
Westmoreland Health System	Executed	Executed				Executed	Executed

Legend: (horse icon) Contract executed   (horse icon) In progress   D Declined to contract

*   Under structured collaboration with VHA hospitals and national VHA patient safety initiatives
**   Canonsburg General Hospital, WPAHS, has an active MedMARx contract.

Note: It is important that PRHI hospital partners execute their MedMARx contracts and initiate data collection by July 1, 2001. This is an eligibility requirement for participation in the AHRQ grant opportunity, *Improving Patient Safety: Health Systems Reporting, Analysis, and Safety Improvement Reearch Demonstrations* (see article, page 2).