Leading in patient safety: Joint Commission, NQF name recipients of 2017 Eisenberg Awards

A physician passionate about improving communication and transparency between patients and care providers, a network of children’s hospitals that saved an estimated 10,000 patients from harm, and a large health system that has seen a decrease of more than 60 percent in hospital-acquired patient harms have been named as the recipients of the 2017 John M. Eisenberg Patient Safety and Quality Awards. Presented annually by The Joint Commission and the National Quality Forum (NQF), the awards were presented earlier this week at NQF’s annual conference, held this year in Washington D.C.

The award recipients were:

- **Individual Achievement** — Thomas H. Gallagher, MD, professor and associate chair, Department of Medicine, and professor, Department of Bioethics and Humanities, University of Washington School of Medicine, Seattle, worked to improve transparency in disclosure of injury to patients who have been harmed during their medical treatment. His contributions include creating and directing the Collaborative for Accountability and Improvement, which has implemented communication and resolution programs at health care organizations across the country.

- **Innovation in Patient Safety and Quality at the National Level** — Children’s Hospitals’ Solutions for Patient Safety, a network of more than 130 children’s hospitals in the United States and Canada is honored for sparing nearly 10,000 children from harm while hospitalized. Members of the network share data about 11 types of patient harm, such as surgical site infections, catheter-associated urinary tract infections, adverse drug events and pressure injuries and falls.

- **Innovation in Patient Safety and Quality at the Local Level** — LifePoint Health’s National Quality Program, Brentwood, Tennessee, a system-wide learning laboratory that consists of a data-driven program to improve the safety culture in system hospitals and decrease hospital-associated patient harm across more than 70 facilities in 22 states. Through these efforts, aggregate patient harm has decreased 62 percent.

“Congratulations to Dr. Gallagher, LifePoint Health and Children’s Hospitals’ Solutions for Patient Safety for their achievements in the relentless pursuit of patient safety and quality improvement,” said Mark R. Chassin, MD, FACP, MPP, MPH, president and CEO, The Joint Commission. “All three recipients are committed to providing highly reliable health care — care that is consistently excellent and safe across all services and settings. It is through innovative work like theirs that we can make great strides in achieving zero patient harm.”

The patient safety awards program, which launched in 2002, honors the late John M. Eisenberg, MD, MBA, former administrator of the Agency for Healthcare Research and Quality (AHRQ). An impassioned advocate for health care quality improvement, Eisenberg was a member of NQF’s founding board of
directors, was chairman of the federal government’s Quality Interagency Coordination Task Force and personally led AHRQ’s grant program to support patient safety research.

The 2017 award recipients’ achievements will be featured in the July 2018 issue of The Joint Commission Journal on Quality and Patient Safety.

Fourth meeting of expert panel on suicide risk reduction may lead to new or revised EPs
An expert panel convened by The Joint Commission to provide customer and surveyor guidance on suicide prevention safeguards met for the fourth time in December. As reported in the Jan. 10 issue of Joint Commission Online, the panel is addressing recommendations for behavioral health care settings, inpatient psychiatric units, general acute inpatient settings and emergency departments.

After the December meeting, recommendations regarding suicide risk assessment and key components to the safe monitoring of high-risk patients have been identified as beyond the scope of clarification of current standards — and potentially the basis for new accreditation requirements.

The Joint Commission and the panel are assessing the recommendations to see which of them are appropriate to include as new or revised elements of performance in the revised National Patient Safety Goal on suicide prevention (NPSG 15.01.01).

The updated NPSG will be sent for a field review to garner feedback.

Accreditation and certification

Comment invited on proposed revision for fluoroscopy
Revisions to The Joint Commission’s standards on fluoroscopy are being considered for the hospital, critical access hospital, ambulatory care and office-based surgery accreditation programs. Staff from these settings are invited to share their comments on the proposed changes.

These revisions were developed to further promote patient safety and quality of care, and align accreditation requirements with current recommendations from scientific, professional and governmental organizations.

The survey will be available through April 20. Comment now. (Contact: Joyce Marshall, jmarshall@jointcommission.org)

LS, EC revisions address doors and areas administering inhaled anesthetics
Three revised requirements across the Life Safety (LS) and Environment of Care (EC) chapters went into effect March 11. The revisions are:

- LS.02.01.30, element of performance (EP) 13, for deemed-status hospitals, critical access hospitals and hospices, is designed to maintain alignment with the Centers for Medicare & Medicaid Services’ (CMS) requirements regarding latches for corridor doors. The Joint Commission recommends organizations inspect their facilities immediately to identify any corridor doors that are not in compliance with these requirements and make modifications to bring them into compliance as soon as possible.
- EC.02.03.05, EP 25, applicable to the ambulatory care, behavioral health care, critical access hospital, home care and hospital programs, provides additional clarity on nonrated doors.
- EC.02.05.01, EP 27, addresses environmental features of areas administering inhaled anesthetics in the ambulatory care, critical access hospital, hospital and office-based surgery programs.

(Contact: Kenneth A. Monroe, kmonroe@jointcommission.org)
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Ambulatory Buzz — Infection Control Program Elements to Remember: Busy clinical directors and infection control coordinators must ensure constant attention to keeping ambulatory surgery center (ASC) policies and procedures for infection control (IC) up to date, writes Crissy Benze, MSN, BSN, RN, senior consultant, Progressive Surgical Solutions.

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