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The 2016 John M. Eisenberg Patient Safety and Quality Awards

The 2016 John M. Eisenberg Patient Safety and Quality Awards were presented on April 4, 2017, in Pentagon City, Virginia. Additional information, including the awards announcement, can be found at http://www.jointcommission.org/topics/eisenberg.aspx.

INDIVIDUAL ACHIEVEMENT

315 An Interview with Carolyn M. Clancy
Interviewed by Lawrence Becker

Dr. Clancy, Deputy Under Secretary for Health for Organizational Excellence, Veterans Health Administration (VHA), was recognized for empowering patients and their families to make informed decisions about their own health care, as well as for her commitment to improving veterans’ experience with care. She discusses the current focus on transparency, which is “vital to regaining and restoring Veterans’ trust in the system.”

ORIGINAL ARTICLES

Diagnostic Errors

338 Primary Care Collaboration to Improve Diagnosis and Screening for Colorectal Cancer

Colorectal cancer (CRC) screening helps achieve early diagnosis and better outcomes, yet many patients fail to receive recommended screening. As part of an academic improvement collaborative, 25 primary care practices worked to improve CRC screening and diagnosis. The collaborative effectively engaged teams in a broad set of process improvements with key lessons learned related to barriers, information technology challenges, outreach challenges/strategies, and importance of stakeholder and patient engagement.

Methods, Tools, and Strategies

351 Flying Blind: Don’t Manage Warfarin Without a Registry
A.J. Rose

In view of the feasibility of implementing “a relatively simple, but highly functional registry system,” the author argues that a registry function should be part of the standard of care for warfarin management.

353 Designing and Implementing an Electronic Patient Registry to Improve Warfarin Monitoring in the Ambulatory Setting

Warfarin requires individualized dosing and monitoring in the ambulatory setting for protection against thromboembolic disease. Yet patients spend upwards of 30% of time outside the therapeutic range. At an urban, publicly funded clinic, an electronic patient registry was created to help ensure regular testing and monitoring of patients. It identified 341 (96%) of 357 actively seen patients, and the no-show rate decreased from 31% to 21%.

Teamwork and Communication

361 Improving Care Teams’ Functioning: Recommendations from Team Science
K. Fiscella, L. Mauksch, T. Bodenheimer, E. Salas

Implementation of effective team-based models in primary care requires adaptation of core team science elements (such as cooperation, coordination, and communication), coupled with relevant, practical training and organizational support, including adequate time to train, plan, and debrief. “Teamlets” (small teams) represent a potential launch point for team development and diffusion of teamwork principles within primary care practices.

INNOVATION IN PATIENT SAFETY AND QUALITY AT THE NATIONAL LEVEL

319 Integrating Research, Quality Improvement, and Medical Education for Better Handoffs and Safer Care: Disseminating, Adapting, and Implementing the I-PASS Program
A.J. Starmer, N.D. Spector, D.C. West, R. Srivastava, T.C. Sectish, C.P. Landrigan, for the I-PASS Study Group

The I-PASS Study Group was honored for its national efforts to standardize provider communications and handoffs of care. When its I-PASS Handoff Program was implemented in nine hospitals, it was associated with a 30% reduction in injuries due to medical errors and significant improvements in handoff processes, without any adverse effects on provider workflow. I-PASS can be applied to a variety of disciplines and types of patient handoffs.

330 Innovative Information Technology–Powered Population Health Care Management Improves Outcomes and Reduces Hospital Readmissions and Emergency Department Visits

Christiana Care Health System was recognized for its development of its Care Link, a patient-centered and clinician-led information technology–enhanced care coordination service. More than 8,600 patients in several surgical and medical populations have received support from Care Link. For example, a preoperative assessment of patients to predict post-acute care needs after an elective joint replacement led to a 30% increase in discharges to home with self-care or home health care.

333 Innovative Information Technology–Enhanced Care Coordination System Improves Outcomes and Reduces Hospital Readmissions and Emergency Department Visits

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337 Implementing the I-PASS Program: Disseminating, Adapting, and Integrating Research, Quality Improvement, and Medical Education
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339 Innovating the I-PASS Study: Using Communication Simulation and High-Fidelity Video to Disseminate and Adapt the Program: The I-PASS Team Training Institute

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