Quality and Patient Safety

Ensuring quality and patient safety is integral to maintaining the viability of any hospital or health system. In fact, it is fundamentally connected to patients' primary expectations that the hospital will not unintentionally harm them while they are in its care.

It is crucial to understand the leadership role that hospital board members play in overseeing and ensuring quality and patient safety in their organization. In the governance hierarchy, the hospital's chief executive officer is directly accountable to the board for quality and patient safety, and the board is responsible for monitoring the CEO's performance. The board also helps establish priorities for the organization and ensures appropriate resource allocation for quality and patient safety work.

Effective oversight by the governing board is fundamental to achieving the highest standards of care. In order to provide that oversight, a clear understanding of what quality and patient safety means in the organization is needed.

Defining Quality

In today's hospitals, the focus on providing the highest level of care and preventing errors is so deep-rooted that the phrase "quality and patient safety" has become almost a mantra. But what does it actually mean?

Quality and patient safety mean different things to different people. For instance, patients usually say it involves exceptional care or service, positive outcomes and reasonable costs. Physicians and other providers tend to think of it in terms of good clinical outcomes. A hospital's operations personnel see it through a still different lens and may regard it as good clinical outcomes, low costs, efficiency and improved operational performance. Despite the varying interpretation, hospitals are best served by a clear understanding and unified vision around quality and patient safety, so goals can be established.

IMPORTANT

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The Health and Medicine Division of the National Academies of Sciences, Engineering, and Medicine (NAM), formerly known as the Institute of Medicine (IOM) , defines "quality" as "the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge."

The Current Landscape

Hospitals began to focus sharply on quality and patient safety in 1999, after the publication of the IOM's landmark report, "To Err Is Human: Building a Safer Health System." The first in the series of reports on the quality of health care in the United States, its publication quite possibly marked the beginning of the modern field of patient safety. Its impact was so important that, today, references to "the IOM report" are immediately understood in the medical field.

The report stated that as many as 98,000 people die in hospitals each year as a result of preventable medical errors, and some studies estimate the number is much higher. Twenty-two percent of Americans report that a medical error has impacted either them or a family member. Nationally, that translates into 22.8 million people who have experienced a mistake in a doctor's office or hospital.

There are substantial repercussions for health care for health care organizations for these errors. Preventable medical errors and complications can lead to declining patient satisfaction scores that damage a hospital's reputation, lower employee morale and, ultimately, reduce business. The financial consequences can be devastating. According to a 2010 report by the Healthcare Financial Management Association (HFMA), "The Human and Economic Costs of Medical Errors," the cost of medical errors in the United States in 2008 was $19.5 billion. About $17 billion or 87 percent of this amount was directly associated with added medical costs – inpatient care, ancillary services, prescription drug services and outpatient care.

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