



# Preventing Harm In A Culture of Perfect Care

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American Hospital  
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# St. Joseph Hospital Orange, CA

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- Founded in 1929 by Sisters of St. Joseph of Orange; member of the St. Joseph Health System (16 hospital system)
- Largest hospital in Orange County, CA with 525 licensed beds
- 4<sup>th</sup> busiest ED in CA & 1<sup>st</sup> in Orange County
- 3<sup>rd</sup> in California and 1<sup>st</sup> in Orange County for Surgical Volume
- 40 bed ICU (SICU and MICU)
- Over 5,000 babies delivered each year
- ~ 3361 employees, ~ 1100 physicians

**Our Objective: Achieve our mission outcome goal of Perfect Care by preventing harm from VAP and achieving and sustaining Zero events.**



# Creating the Culture

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- IHI IMPACT Learning Collaborative on Reducing Mortality
- Focus on *Preventing Harm* to Patients
  - Adopted IHI’s definition of medical harm
- Focused on preventing “harm” to patients
- Reported infections as raw numbers (not rates)
- Making the failures (infections) visible to the staff
- Strong Partnership between Intensivists and Nursing
- MET team---24/7 proactive MET---Condition H
- “How would you want your Mom to be treated?”
- Achieving “zero” showed it was possible!



# Multidisciplinary Rounds

## 11:00 a.m. and 11:00 pm

- Led by Intensivist and Charge Nurse
- Patient Care R.N.
- Pharmacy
- Respiratory
- OT/PT
- Case Management
- Infection Control
- Dietician
- Social Worker
- Spiritual Care
- Patient and/or Family (when possible)





# Preventing Patient Harm

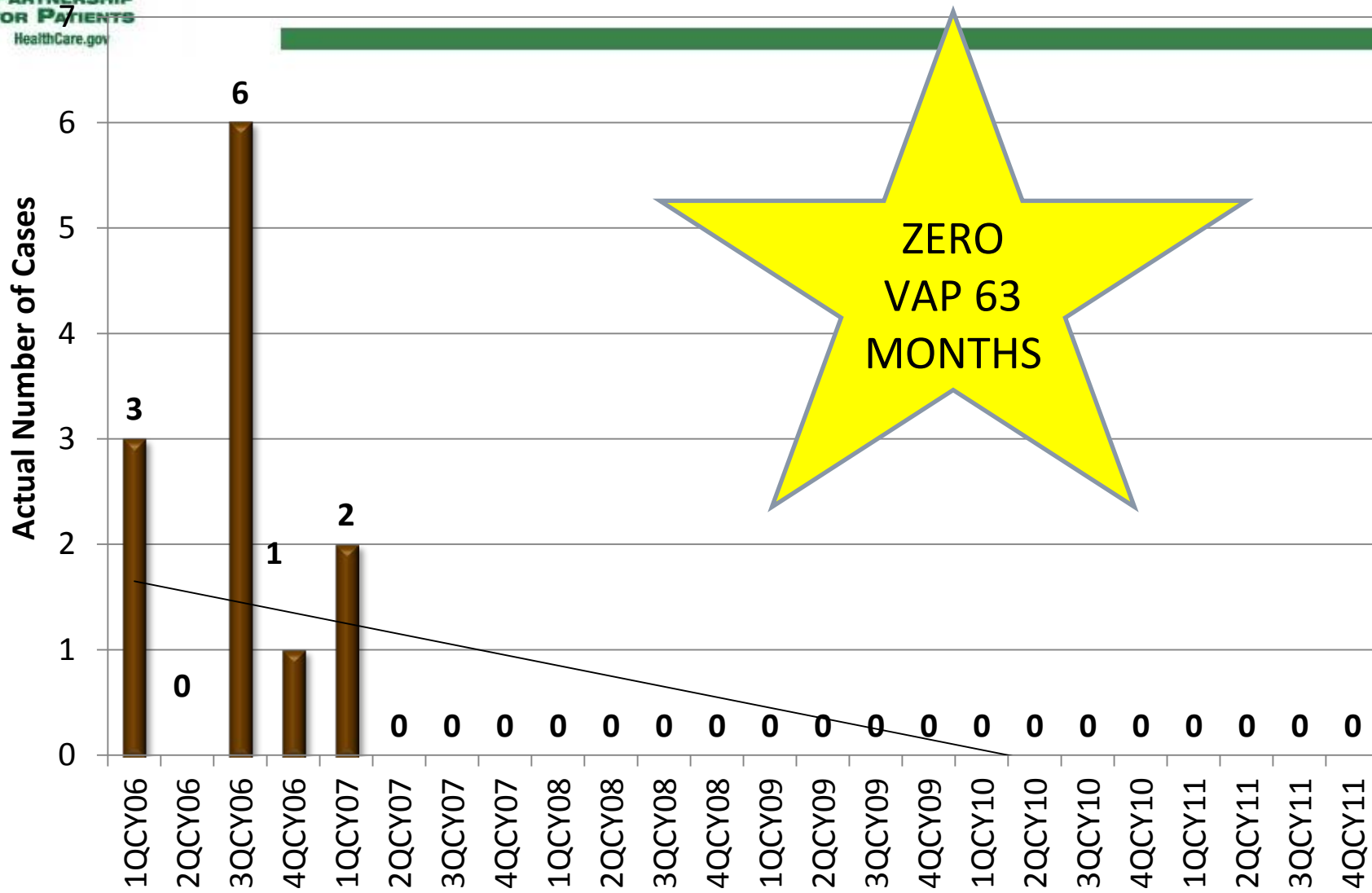
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Last day we  
caused **HARM**  
from VAP:

February 15  
2007



# Number of Ventilator Acquired Pneumonia





# Success and Sustainment

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- Consistent use of “bundles” and “check lists” for prevention of VAP, CLABSI, CAUTI, and C diff
- Strategic Goal of Perfect Care
- Breakthrough goals of reducing infections by 50% year over year
- Culture of teamwork between MD and RN’s
- Multidisciplinary rounds in ICU every 12 hrs



# Overcoming Challenges and Barriers

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- Nursing report from 15 min patient history to 15 sec SBAR
  - Developed “script” for nurses to stay on time and on target
- Scrambling for patient information
  - Created tools for capturing key information prior to rounds
- “I don’t have time for this” to “*Wow, I realize the benefit*”
- Confidentiality versus Patient Family Involvement in Care
  - After all, it is the patient’s plan of care
- ***Today it is our standard work***



# Summary and Advice for Others

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- Culture Change
  - Measure and report infections as raw numbers, zero is possible
- Improve Accountability
  - Multi-disciplinary approach
  - Reporting directly to Board of Trustees
  - Involve Patient-Family Advisors
- Disciplined Approach
  - Implementation of evidence based protocols and checklists



# Contact Information

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