

Sustainable Improvement: Reporting Critical Lab Value Results: A Case Study

Joint Commission Resources (JCR) and
Joint Commission International (JCI)

Sustainable Improvement Validation Program

Queens Hospital Center: Project Charter

PROJECT CHARTER: REPORTING OF LABORATORY CRITICAL VALUES FOR INPATIENTS AND THOSE PATIENTS OUTSIDE OF THE HOSPITAL OR IN THE EMERGENCY DEPARTMENT (QUEENS HOSPITAL CENTER, NEW YORK)

PROBLEM/GOAL STATEMENT

WHY IS THIS PROJECT IMPORTANT AND WHY SHOULD IT BE IMPORTANT?
TO IMPROVE THE PROCESS OF REPORTING CRITICAL LAB VALUES TO THE RESPONSIBLE PROVIDER IN ORDER FOR NECESSARY AND TIMELY CLINICAL ACTION TO TAKE PLACE FOR THE PATIENT

WHAT WILL THIS PROJECT ACHIEVE (MAJOR AIM)?
REPORT CRITICAL LAB RESULTS TO RESPONSIBLE PROVIDER WITHIN 30 MINUTES OF RESULT RECEIVED IN LAB

WHAT IS THE BUSINESS CASE FOR THIS PROJECT?
EFFICIENT AND EFFECTIVE CRITICAL LAB VALUE REPORTING WILL PROVIDE TIMELY INFORMATION TO THE ACTIONABLE PROVIDER SO THAT PATIENT CARE AND TREATMENT CAN BE ORDERED, PROVIDED AND IMPROVED PATIENT OUTCOMES. PROVIDER OF CUSTOMER INTERACTION, PHYSICIAN OR CLINICAL ACTIONABLE PROVIDER SATISFACTION, REDUCTION IN WASTED EFFORT, IMPROVING STAFF SATISFACTION, AND ORGANIZATIONAL RETURN ON INVESTMENT THROUGH COST REDUCTION, RETENTION OF PATIENTS, RESERVE.

PATIENT BENEFIT:
TIMELY RESULT REPORTING OF ABNORMAL LAB VALUES, TIMELY TREATMENT FOR RECONCILIATION OF ABNORMAL RESULT.

ORGANIZATION BENEFIT:
IMPROVED PATIENT OUTCOMES, COST REDUCTION, IMPROVED PATIENT CARE, INCREASE ACCESS TO LAB FOR VOLUNTEER STAFF AND FACULTY SATISFACTION

STAGE	TARGET DATE	ACTUAL DATE
DEFINE	AUG 2008	AUG 2008
DESIGN	OCT 2008	OCT 2008
DO	NOV 2008	NOV 2008
DETERMINE	NOV 2008	DEC 2008
DEPLOY	DEC 2008	JAN 2009
COMPLETION DATE	JAN 2009	JAN 2009

TEAM MEMBERS

LEADERSHIP SPONSOR: ROSALYN WEINSTEIN, DEPUTY EXECUTIVE DIRECTOR
PROJECT CHAMPION: TERRY FLEISER, SENIOR ASSOCIATE EXECUTIVE DIRECTOR
SEAN FERGUSON, MD, MEDICINE ASSOCIATE DIRECTOR
DEBRA BRENESSEL, MD, DIRECTOR OF AMBULATORY CARE
JOAN GABRIEL, DEPUTY EXECUTIVE DIRECTOR
STANLEY PERRY, ASSOCIATE DIRECTOR REGULATORY AFFAIRS
SYLVIA CHIN, ASSOCIATE DIRECTOR OF PATHOLOGY
VERONICA HENRY, ASSOCIATE DIRECTOR OF LABORATORIES
SHEILA ROBINSON, PATIENT SAFETY COORDINATOR
VICTOR PALMER, ASSOCIATE EXECUTIVE DIRECTOR
MAURE ELVESET, SENIOR ASSOCIATE EXECUTIVE DIRECTOR

STAKEHOLDERS:

Slide 2 Sustainable Improvement Validation Program

Pilot Test: 16 potential causes of delay in critical lab value reporting were eliminated and sustained!

Slide 3 Sustainable Improvement Validation Program

New in-patient process in red

Slide 4 Sustainable Improvement Validation Program

Critical Lab Value Reporting Project Results:

- 100% target completion over a sustained period of time (8 months)
- 30% volume increase in the Emergency Room, 21% volume increase in Inpatients discharges while maintaining current level of staff – the project eliminated re-work and “waste” associated with the inability to contact the correct provider
- Patient Safety “PLUS”!
- Nursing, Physician and Lab Staff Satisfaction with an effective and efficient process that provides immediate care and treatment to their patients
- Team learning through the application of best practices and literature reviews
- Sustainable results as an outcome of using a systematic process in the 5D Model
- Transfer of Sustainable Improvement knowledge and learning to other projects within the organization

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