

## **B18 Developing and implementing guidelines for standardizing the delivery of care across diverse health care institutions**

### **Leader/s**

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**Objective and rationale:** To educate on developing and implementing guidelines for standardizing care. To use measurements and quality tools to promote consistency in the delivery of care. To define quality in terms of optimal outcomes, critical thinking, and variance analysis.

### **Outline for Workshop content:**

The presenters of the workshop are the senior vice president, quality management, of a vast integrated 18 hospital system, including both small community and large teaching tertiary hospitals, the nurse executive of a suburban research/teaching hospital, which has been designated as the number one hospital in America by an independent not-for-profit organization (Consumers' Checkbook), with the highest nursing designation (Magnet), and a physician from a community hospital who is also responsible for resident education and training. They will introduce the fundamental concepts and the rationale for developing guidelines. Leaders will also share their experience with a sophisticated quality management communication structure for providing information about care delivery and services. Their specialized experience in establishing multidisciplinary teams, using expertise and professional literature, developing guidelines appropriate to various institutions to standardize the delivery of care according to specific diseases and processes, such as congestive heart failure, pneumonia, stroke, operative site verification, pressure ulcers assessment and treatment, suicide safety in the acute care and behavioural health environments, offers the international health care community an opportunity to interact and understand how to replicate guideline development and implementation in their own institutions (30 minutes). The Health System has over 170 guidelines, several of which have been nationally recognized and publicized as examples of "best practices" by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Using case examples and exploring issues relevant to patient safety and care across the continuum of care (from acute through home care), participants will have the opportunity to develop key interventions and key outcomes for various diseases and process improvements. Tools developed by the leaders for monitoring guideline use and effectiveness will be presented for evaluation and discussion. This will enable the participant to understand how to use both compliance and variance data to analyze the process of care and to introduce performance improvements into the workplace. Because the presenters come from different disciplines, the tools (such as, suicide guidelines, quality management policies and procedures for operative site verification, disease specific guidelines per day of hospitalisation, for both the clinicians and the patients/families, variance data collection form) can be seen to have great value for every part of the health care organization.

### **Leadership:**

Yosef D. Dlugacz, Ph.D., Senior Vice President, Quality Management, North Shore-Long Island Jewish Health System, New York. Dr. Dlugacz is an internationally recognized leader and teacher in quality management, responsible for the development of sophisticated methodologies for performance improvement, targeting initiatives based on focused data analyses, and developing and implementing clinical guidelines for specific disease processes. Margarita Baggett, R.N., M.S.N, Associated Executive Director Patient Care Services and Care Coordination Nurse Executive at North Shore University Hospital, has led the hospital in achieving Magnet Status for nursing excellence and implemented best practice protocols in patient safety. William Bennett, M.D., is the Director of the North Shore University Hospital at Glen Cove Family Practice Residency Program as well as a faculty member in the Department of Family Practice. He is a member of the hospital's Performance Improvement Coordinating Group and has been a leader in implementing clinical guidelines for inpatients and outpatients.

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*From Practice to Paper Documentation for Hospitals*, Joint Commission Resources, Inc: 2002

Dlugacz, Y.D., Stier, L., Lustbader, D., Jacobs, M.C., Hussein, E., Greenwood, A. "Expanding a Performance Improvement Initiative in Critical Care from Hospital to System," *The Joint Commission Journal on Quality Improvement*. August 2002.

Dlugacz, Y.D., Stier, L., Greenwood, A. Changing the System: A Quality Management Approach to Pressure Injuries, *Journal of Healthcare Quality*.23:5, Sep-Oct 2001.