



# Sustaining Quality Outcomes: Learning from the 2015 Healthgrades America's Best Hospitals™ Recipients

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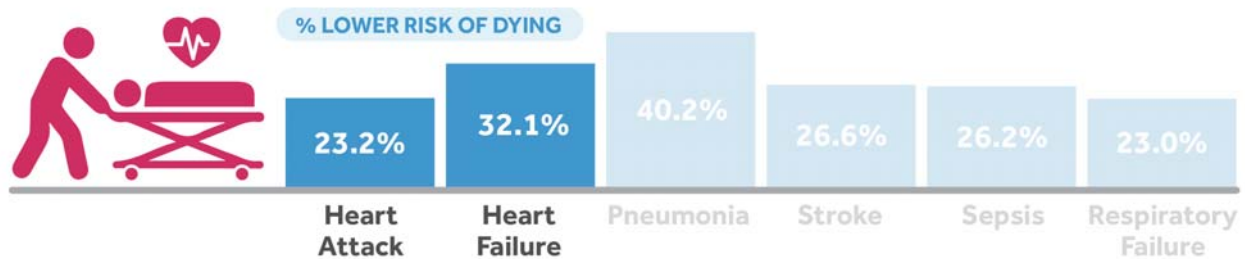
# Discipline Makes the Difference for Sustained Performance

The America's Best Hospitals™ designation highlights not only superior performance in risk-adjusted mortality and in-hospital complication rates; it focuses on the year-over-year accomplishment of superior outcomes.

For over 15 years, Healthgrades has analyzed hospital performance and has identified hospitals that repeatedly differentiate themselves from their peers. Two groups emerge annually—those with overall clinical excellence for at least six years and those who have done so for a minimum of three years. We recognize these groups as Healthgrades America's 50 Best Hospitals™ and America's 100 Best Hospitals™ as top performers passing the test of time.

## Focusing on Cardiac Care

An analysis performed on the top-performing hospitals identifies a core group of six conditions where these hospitals significantly outperform their peers: Sepsis, Pneumonia, Heart Attack, Heart Failure, Respiratory Failure, and Stroke. These six cohorts accounted for 80.9% of the mortalities across all 19 mortality cohorts evaluated by Healthgrades. For this year's America's Best Hospitals analysis, in honor of American Heart Month, we sought to gain insight regarding the performance of America's Best Hospitals in Heart Attack and Heart Failure.



We're pleased to share insights from two America's 100 Best Hospitals (Mills-Peninsula Medical Center of San Mateo, CA and Regions Hospital of St. Paul, MN) about what they have done to drive quality outcomes in Heart Attack and Heart Failure.

These hospitals shared common themes in high clinical performance and specific best practices as they relate to these cohorts. By sharing their voices and practices, we hope to start a dialogue to help other organizations achieve and sustain superior performance.

## Three Common Denominators

Three common themes emerged in both Mills-Peninsula Medical Center and Regions Hospital, regardless of the cohort.

### 1. Vision:

Both hospitals have created a culture and practice of going beyond current core measures and looking for protocols and procedures to address anticipated future core measures *before* they will be held accountable for them.

### 2. Evidence-based decision making:

These hospitals are driven by protocols that they track, measure, analyze and adjust to improve outcomes for their patients. While they each have specific ways of achieving evidence-based decision making, the use of data is pervasive in their work.



### 3. Collaboration:

Protocols are in place to drive communication among various departments in real time. Going beyond the culture of the hospital, these processes enforce collaboration and trust between care units.

## The Key Takeaway

### Discipline Is Required to Deliver on the Promise of Better Outcomes

While there are common themes, ultimately the key takeaway is that discipline is required to sustain the actions that consistently lead to continued superior performance.

These two America's Best Hospitals provide real, tangible examples of practices and protocols that drive the right behaviors resulting in better clinical performance.

In their stories we find that focusing in these areas is not enough. These hospitals are tenaciously committed to providing better outcomes over an extended period of time—delivering on the promise. Remaining dedicated, when so many other priorities could derail the process, is a significant strength.

## Mills-Peninsula Medical Center: Heart Attack

Mills-Peninsula Medical Center, an affiliate of Sutter Health, is a not-for-profit healthcare organization located in Burlingame, Calif. Mills-Peninsula is a 241-bed facility that provides compassionate, state-of-the-art care to patients. It is the recipient of Healthgrades America's 50 Best Hospitals Award two years in a row and a Healthgrades five-star recipient for treatment of heart attack for three consecutive years.

We thank the following staff members of Mills-Peninsula Health Services for their insights:

- David Daniels, MD, Director of Catheterization Laboratory
- Allan Brody, MD, Medical Director of the Emergency Department and Chief of Staff
- Christopher White, MD, FACEP, Emergency Medicine Physician

### Collaboration & Trust

Mills-Peninsula Medical Center has a long history of protocols designed to drive collaboration resulting in trusted relationships that reinforce cooperative behaviors. Overall, these communication protocols and mutual trust lead to decreased times in treating the patient.

- **Everything starts in the field.** The Emergency Department (ED) physicians have respect for their paramedics and trust them when they say they have a critical case in the field. The cardiology physicians trust that if the ED tells them the patient is critical, they should treat it as such.
- **The ED can activate the Cath lab without the cardiologist evaluating the EKG.** This empowers paramedics and nurses to obtain the EKGs and activate the lab based on the results they see. That enables faster treatment time and more lives saved.
- **One call activation.** One phone number activates the team and cuts down on the time it takes to get everyone organized.
- **Physicians communicate via cell phone.** They don't have to go through an answering service which may otherwise cause delay in treating a patient.

*It goes beyond the ED. Our five interventional cardiologists represent three different medical groups but you couldn't tell. We all work really well together. Our situation is very unique with respect to the collaboration that exists and I think that directly contributes to our outcomes. It's pervasive in the hospital. Not only with the physician staff, but the new CEO is a strong proponent in working things out collaboratively. Not putting up barriers is critical. It's a very unique environment in a hospital. —Mills-Peninsula Medical Center*



Collaboration

### Cast a Wide Net

The protocols that allow for greater collaboration also help to cast a wide net in identifying patients that may present differently.

- Patients 30 years and older who have pain between their chin and belly button receive an EKG. This protocol ensures that patients, who present differently than having standard chest pain, are identified in time for the best treatment.
- Occasionally, a case occurs that does not have to go to the Cath lab. The ED and Cardiology Department accept a certain level of false activations in order to ensure that patients are identified and treated quickly.

- At Mills-Peninsula Medical Center, there is about a 3% false-positive rate from the field, a percentage that the hospital is willing to take in order to safeguard the fastest identification and appropriate treatment for patients with AMI.

*The one call activation is the way to go. This puts executing the established protocol in the hands of the ER doctor. The constant communication between all parties and even direct line communication within 60 seconds of looking at the EKG is key. Then being able to point resources to where they matter most. All of this leads to better outcomes for patients. —Mills-Peninsula Medical Center*

## Community Involvement

Community involvement—education, public health announcements, coordination with community transport—have made a difference in treating AMI patients sooner.

- Mills-Peninsula Medical Center helps coordinate the entire county as a single ST Segment Elevation Myocardial Infarction (STEMI) system. The hospital participates in monthly meetings to look at the county data, in addition to their own, to work toward better outcomes for members of the community.
- The hospital works with the community to quickly coordinate transportation for cardiac patients for time-sensitive treatments. Should a transfer be needed, the county does not wait for a critical care transport team to get patients to Mills-Peninsula Medical Center. The risk of delay in waiting for critical care transport can be significant. The hospital makes it clear to the community that standard transport is appropriate to transport critical care patients to their ED for faster treatment.
- Community involvement in communicating about heart attack symptoms and treatment have been key in capturing patients early enough to make a difference.

*From a public health perspective, we have to tell consumers that if they have chest pain they have to come in to get treated. It's not something hospitals can control or measure but it's the thing that probably makes the most difference. I can be as fast as any cardiac interventionist on the planet, but if the patient sat at home for 15 hours before they came in, then the deed is done. It's the thing that can't be measured so people don't talk about it. —Mills-Peninsula Medical Center*

## Volume Is Key to Quality

Physicians often agree that outcomes get better with practice. Dr. Archelle Georgiou, strategic advisor to Healthgrades, explains that the volume of procedures a doctor has performed is correlated with their results. "Studies show that cardiac surgeons with the best outcomes should do at least 100 to 125 procedures a year to remain competent." There isn't a specific number for each type of procedure, but like any skill, practice gets closer to perfect.

The physicians at Mills-Peninsula Medical Center share that perspective, recognizing in these procedures that volume has value in its relationship to quality outcomes.

*I truly believe that volume is the key to quality. You have to have a high enough volume. As volumes increase, people (physicians) gain more experience. They have fewer complications and are faster and more efficient. The other thing that happens is as volume grows, their judgment gets better as to what to do and what not to do. What we focus on is appropriate use, doing the right procedure for the right patient. —Mills-Peninsula Medical Center*

## Vision

Proactively solving problems before they emerge has been a key to success. From empowering the emergency department to activate the Cath lab rather than following a traditional chain of command, to working with the county to develop community transport protocols, which reduce time to treatment, Mills-Peninsula Medical Center proactively seeks ways of treating patients faster and with better outcomes. It goes beyond the culture of the hospital, however. It is a state of mind that drives the evidence used to make decisions, and the protocols developed to drive problem solving.

*We strongly believe that in the next five to ten years everything will be focusing on paying for quality. If we are going to be successful, we need to focus on what we're going to do in terms of quality. But we also have to be able to measure it. It's us taking a look at our data.*

*We need to take a hard look at what we are doing and how we can do better. If we do that and continue to ratchet up our performance in outcomes, in five years when the payers say "You know what? We aren't going to pay for this procedure unless you can show us that you meet this benchmark." Well we are already going to have met the benchmark. We're already going to have the data to show it to them before they ask for it.*

*It's not just that it's going to set us up for success. It's also the right thing to do. That's why the shift is happening in healthcare. We want to be able to provide the best service with the best outcomes and the lowest length of stays. It's good for the patient. —Mills-Peninsula Medical Center*

## Regions Hospital: Heart Failure

Established in 1872, Regions Hospital is part of HealthPartners—the largest consumer-governed, non-profit healthcare organization in the nation, with a mission to improve health and well-being in partnership with members, patients, and the community.

Regions Hospital and HealthPartners provides healthcare services in St. Paul and its surrounding communities, as well as for patients throughout Minnesota, western Wisconsin, and other Midwestern states. It is the recipient of Healthgrades America's 100 Best Hospitals Award for two years in a row, and a five-star recipient for the treatment of Heart Failure for four years in a row.

We extend our thanks to following staff members of Regions Hospital for sharing their perspectives:

- Beth Heinz, VP of Operations and Chief Quality Officer
- Mike Cannon, Director of Nursing, Cardiovascular Services
- Tim Lindquist, Quality Reporting Advisor
- Terry Carter, Director, Cardiovascular Service Line
- Gretchen Leiterman, VP of Operations
- Katie Moriarty, MD, Department Head of Cardiology

## Visionary Leadership

Regions Hospital and HealthPartners have a commitment to both the current and future state of healthcare. The hospital is constantly pushing to achieve greater results for their patients by aligning vision with executable policies.

- The Regions Heart Failure clinic has been in place for 12 years while the Heart Failure Steering Committee has been in place for 10 years. The fact that the hospital was visionary enough to recognize this high-risk population 12 years ago is unique. Only recently has reimbursement started to be tied to outcomes in this cohort. Regions Hospital made the investment before financial incentives were established and has remained committed to this focus throughout the years.
- The majority of physicians at Regions Hospital are employees of HealthPartners rather than independent contractors. As employees, physicians are engaged in their jobs, aligned with quality outcomes incentives, and committed to the well-being of the hospital—visionary in physician alignment.
- Regions Hospital has a committee focused on potential future core measures and how to develop protocols around those measures that will benefit patients. Getting ahead of potential requirements keeps them in front of the status quo.

*When you are in healthcare, you have to consider everything. You can't do just one or two things. We remember a time when it was hard to get a scale for our patients and it was hard to get them to weigh themselves. We started with the basics.*  
—Regions Hospital

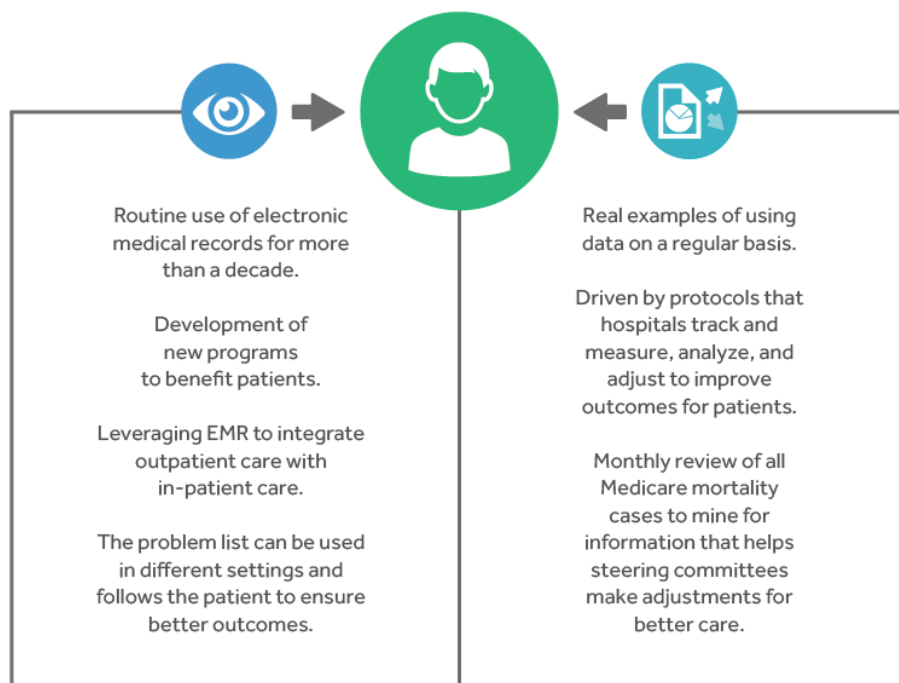
## Data-Driven Decision Making

Vision combined with data ensures an evidence-based approach to caring for patients.

- Regions Hospital has a long history of using electronic medical records (EMR). They have been using EMR technology for more than a decade, so using order sets is now routine. They now have the ability to move beyond compliance and are looking to develop new programs to benefit patients.
- Not only do they use the EMR, they have leveraged it to integrate outpatient care with in-patient care. The patient's medical problems and best practice treatments can now follow the patient and can be used in different settings. This ensures better outcomes for patients.
- The Heart Failure Steering Committee reviews all Medicare mortality cases. By holding themselves to this monthly commitment, the committee is able to mine cases for information that helps them make adjustments for better care.

*To be data driven hasn't been extremely easy because we are still working to optimize data. But it has pushed us to look at data in a different way. We are looking at where we've had opportunities for improving patient care, and then we are making changes to our practice.* —Regions Hospital

Vision combined with data ensures an evidence-based approach to caring for patients.



## Collaboration

Collaborative protocols that drive communication between cardiology, hospital medicine, and emergency medicine ensure that Regions Hospital patients get to the right place for the right care.

- Low-risk cardiac protocols—chest pain, congestive heart failure, and atrial fibrillation—have all helped keep patients out of the hospital and get them into the clinic. These processes ensure these patients receive the best care for the lowest cost.
- Regions Hospital is part of an integrated healthcare organization that includes clinics, specialty care, hospitals, finance and payer. The culture aligns to focus the appropriate resources to improve care.
- Regions Hospital gets the right physician involved at the right time by leveraging the structured hand-off that the integrated organization affords them.
- Communicating areas for improvement is essential. The Heart Failure Steering Committee identifies goals, desired outcomes, gaps and areas for improvement. These results are then communicated to the physicians, nursing staff, and executives on a monthly basis.

*This clinical performance reflects the transparency and communication between the emergency and cardiovascular departments. Everyone is working toward a common goal. We're really fortunate to have the appropriate staffing and support to implement our programs. —Regions Hospital*



## What Makes The Difference for Sustained Quality Outcomes?

Mills-Peninsula Medical Center and Regions Hospital attribute their exceptional clinical performance to a collaborative approach to medicine, evidence-based decision making, and a culture of vision for the future of caring for patients. These elements are not only a part of their culture, but are built into the specific protocols they use on a daily basis.

All hospitals have protocols and are committed to providing the best care possible. Mills-Peninsula Medical Center and Regions Hospital offer examples of a willingness to commit resources and time to execute those protocols to succeed.

Every hospital has access to patient outcome data, but it's the commitment and rigor to use the data that matters. The two hospitals we feature here have demonstrated purposeful use and appropriate management of their data over long periods of time. This translates into better outcomes for their patient's year over year.

## America's Best Hospitals™ Methodology

Healthgrades identifies America's Best Hospitals™ and stratifies performance into two categories: America's 50 Best Hospitals™ and America's 100 Best Hospitals™.

### Identifying America's 50 Best Hospitals™

Healthgrades America's 50 Best Hospitals Award™ recognizes 50 hospitals as the top 1% in the nation for consistent clinical excellence based on an analysis of risk-adjusted mortality and complication rates for common procedures and conditions. Specifically, these hospitals have received a Healthgrades Distinguished Hospital Award for Clinical Excellence™ in consecutive years over an extended period of time. To identify America's 50 Best Hospitals, Healthgrades used a two-step process.

1. Identified those hospitals that received the Distinguished Hospital Award for Clinical Excellence for at least seven consecutive years.
2. If the number of hospitals identified above was less than 50, then the recipients for the last six consecutive years were identified and sorted by volume-weighted average z-score from the most recent Distinguished Hospital Award for Clinical Excellence analysis. (The volume-weighted average z-score is a statistical measure of hospital quality outcomes.) The top hospitals from this list were then added to the list from Step 1 above to create a list of America's 50 Best Hospitals for 2015.

### Identifying America's 100 Best Hospitals™

Healthgrades America's 100 Best Hospitals Award recognizes the top 100 hospitals that received the Distinguished Hospital Award for Clinical Excellence each year for at least the last three years. The list is made up of those hospitals that were identified as America's 50 Best Hospitals as described above with the addition of the next 50 top hospitals, identified by consecutive years of achieving the Distinguished Hospital Award for Clinical Excellence and volume-weighted average z-score. These hospitals are recognized as the top 2% in the nation for consistent clinical quality.

## About Healthgrades

Healthgrades, headquartered in Denver, Colorado, is the leading online resource for comprehensive information about physicians and hospitals. Today, nearly one million people a day use the Healthgrades websites to search, compare and connect with hospitals and physicians based on the most important measures when selecting a healthcare provider: experience, hospital quality, and patient satisfaction. For more information about Healthgrades, visit <http://www.healthgrades.com> or download the [Healthgrades iPhone app](#).