

NEWS RELEASE

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Indianapolis Coalition for Patient Safety announces milestones

Collaboration of health care leaders makes strides to accelerate patient safety improvements in Indianapolis-area

INDIANAPOLIS, Indiana (August 1, 2007) – The Indianapolis Coalition for Patient Safety (ICPS) today announced that it has made significant strides in the effort to improve patient safety in the Indianapolis-area.

Since being founded in 2003, the ICPS provides a forum for Indianapolis-area hospitals to share information about ‘best practices’ and work together to solve the most concerning patient safety issues in Indianapolis hospitals in a non-punitive setting.

The ICPS is comprised of chief executive, medical, nursing and pharmacy officers from Clarian Health, Community Health Network, Richard L. Roudebush VA Medical Center, St. Francis Hospital and Health Services, St. Vincent Health and Wishard Health Services. In addition, there is participation by entities such as Eli Lilly and Company, WellPoint, Inc., Indiana University, Purdue University, Regenstrief Institute, Inc.

This month, the Indiana State Department of Health is expected to release the final version of the Indiana Medical Error Reporting System, the first public report on statewide medical errors. The ICPS focuses on solutions to these patient safety issues.

Key milestones include:

- **High-alert drugs:** Anticoagulants (blood thinners) and insulin are commonly used in hospitals, but are considered by experts to be “high alert drugs”, meaning they could put patients at high risk of serious injury if mishandled.
 - **Anticoagulants:** The Joint Commission of Accreditation of Healthcare Organizations (JCAHO) has set anticoagulation safety as a national patient safety goal for 2008. In December of 2006, ICPS started work with the Institute of Safe Medicine Practices on a citywide set of anticoagulation patient safety measures designed to address anticoagulant safety.
 - **Insulin:** Eli Lilly and Company sponsored a Six Sigma process improvement work team to address safety around the use of insulin

in hospitals; Wishard Health Services was selected to participate from a pool of local providers. A multidisciplinary team of Lilly and Wishard experts – including hospital leadership, nurses, pharmacists and other providers that specialize in diabetes care - led a “be the vial” exercise, analyzing the insulin delivery and administration process from the receiving dock to the patient’s bedside. Measures to improve the overall safety of insulin use in the hospital setting were identified, which may result in an even safer environment for patients. This learning will be shared with ICPS hospitals.

- **Surgical areas:** All ICPS member institutions are in the process of implementing a standard set of best practices for surgery and procedure safety, including *Site Marking* and a *Time Out Policy*. In addition to applying the best evidence to all member hospitals, the standardized set of practices will provide continuity to physicians and staff who travel between hospitals.

Site Marking verifications include marking the operative site/side with the mark ‘yes’ and marking prior to any sedative or anesthesia being administered in a standardized manner.

Time Out Policy procedures verify the correct patient, correct procedure, correct site and other relevant information before any surgery begins.

- **Root cause analysis review:** Building on the work of the Indiana Medical Error Reporting System, ICPS plans to share, learn and implement patient safety changes based on the review of information from adverse events.
- **Patient safety round programs:** After reviewing research studies and applications, the ICPS implemented and standardized Executive Patient Safety Rounds. Through observation and interviews, executives collaborate with staff to identify and correct potential safety issues before they reach the patient.
- **Standardized abbreviations:** In 2005, the JCAHO issued “do not use” list of abbreviations. The ICPS agreed upon a common set of abbreviations, eliminating variation and easing implementation across hospitals.
- **Institute for Healthcare Improvement (IHI) 100,000 Lives Campaign:** the ICPS hospitals pledged to cooperate and implement the initiatives designed to save 100,000 patient lives across the nation. ICPS established work groups, led by front line healthcare representatives from each of the organizations, to collaborate and implement practices efficiently and smoothly. The campaign has evolved this year to the 5 Million Lives Campaign, which aims to protect patients from five million incidents of medical harm in U.S. hospitals between December 2006 and December 2008.

The hospital system chief executive officers meet on a regular basis to discuss the implementation of the above activities, among other items. The group includes: Daniel F. Evans, Jr., Clarian Health president and CEO; William E. Corley, Community Health Network president and CEO; Robert J. Brody, St. Francis Hospital & Health Centers president and CEO; Susan P. Bowers, Richard L. Roudebush VA Medical Center CEO; Vincent C. Caponi, St. Vincent Health CEO; Dr. Lisa Harris, Wishard Health Services CEO and medical director.

The Coalition activities are guided by Dr. Glenn Bingle, chair of the ICPS and Community Health Network vice president for medical and academic affairs and Dr. Donald J. Kerner, vice chair of the ICPS and St. Francis Hospital & Health Centers associate chief medical officer.

The ICPS also has a multi-disciplinary executive team made up of key members in roles related to patient safety activities. The members of this team are: Susan Brown, St. Francis pharmacy director; Kimberly Radant, Richard L. Roudebush VA Medical Center associate director for patient care services; Valerie Shahriari, JD, RN, Clarian Health director of patient safety and risk management; Susann Stephenson, St. Vincent Health director of risk management.

“Patient safety is an evolving science,” said Dr. Bingle. “We have learned that the overwhelming majority of patient care error involves systems, and is not the fault of any one provider. By pooling our expertise in the ICPS, we can collaborate to move quicker and improve the safety of our patients.”

Kathy Rapala, JD, RN, is the director of the ICPS and is responsible for the administration and overall direction of the organization. Rapala is also a professor at Purdue School of Nursing and director of the Second Degree Program. She was a member of the first American Hospital Association/National Patient Safety Foundation (NPSF) Patient Safety Leadership fellowship, and has recently been appointed to the NPSF Board of Governors. Additionally, she is completing her Doctor of Nursing Practice Degree at Purdue.

“The Indianapolis Coalition for Patient Safety is a prime example of how collaboration is accelerating change among competitive organizations,” said Don Berwick, President and CEO of the Institute for Healthcare Improvement, a non-for-profit organization leading the improvement of health care throughout the world. “The Coalition is a national model for community-based process improvement.”

In addition, the Indianapolis Coalition for Patient Safety works closely with the Indiana Patient Safety Center, which was formed through the Indiana Hospital&Health Association. IPSC works on a statewide level. ICPS coordinates initiatives with IPSC, and shares its work for broader learning.

About the Indianapolis Coalition for Patient Safety:

The ICPS, formed in 2003, is a non-profit, public-private partnership of health care leaders committed to advancing patient safety efforts. Its membership includes Indianapolis-area hospital systems, as well as participants who purchase, insure, support or educate the health care community. Through their shared vision, the Indianapolis health care community has accelerated the pace of patient safety improvement in Indianapolis. www.indypatientsafety.org.