Integrity
Caring
Excellence
Safety
<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>About Hartford HealthCare</td>
</tr>
<tr>
<td>4</td>
<td>Outcome Reporting</td>
</tr>
<tr>
<td>8</td>
<td>Patient Safety</td>
</tr>
<tr>
<td>15</td>
<td>Hospital Quality</td>
</tr>
<tr>
<td>18</td>
<td>Standards of Care</td>
</tr>
<tr>
<td>20</td>
<td>Quality &amp; Safety Initiatives</td>
</tr>
<tr>
<td>24</td>
<td>Risk Management</td>
</tr>
<tr>
<td>26</td>
<td>Summary &amp; Wrap-up</td>
</tr>
<tr>
<td>27</td>
<td>Mission &amp; Vision</td>
</tr>
<tr>
<td>28</td>
<td>Awards &amp; Recognition</td>
</tr>
</tbody>
</table>
Hartford HealthCare’s more than 18,000 employees are dedicated to our core values of integrity, caring, excellence and safety for the benefit of our patients, their families, our community members and one another.

Over the past few years, our system has built a culture of employee empowerment and continuous improvement through How Hartford HealthCare Works (H3W). Almost every employee participates in an H3W work group focused on process improvement, quality, patient safety and the patient experience. The H3W culture is one of sharing and transparency, which enables us to learn from one another, work together more effectively and continuously improve our organization.

Continuous improvement is critical in our new health care environment where value is paramount. Delivering high-quality care at a lower cost requires efficiency and effectiveness that can be achieved only when all parts of a health care system work together seamlessly. At Hartford HealthCare, we have implemented numerous initiatives to achieve our vision “to be nationally respected for excellence in patient care and most trusted for personalized coordinated care.” Our patients and communities should expect no less.

Every day, we take steps on our journey to achieving this vision of excellence. Our 25 clinical councils bring together clinicians from various disciplines to establish standards of care, reduce variation, set goals, improve care coordination and measure progress. In 2013, we established Integrated Care Partners (ICP), a clinical integration organization with the mission of becoming a high-performing network of integrated providers successfully delivering value-based population health. ICP, an expanding organization with more than 1,700 members, has put treatment standards and metrics into place to improve patient outcomes in the communities we serve.

At Hartford HealthCare, quality, safety and risk management go together under the auspices of our chief medical officer. Accountability for quality begins with our board of directors and cascades through the organization to the Board Quality Committee, executive leadership team and system quality council. We provide risk-management education to our physicians, nurses and others involved directly in patient care and consistently work on risk reduction.

Ultimately, the foundation of everything we do is our dedication to our patients. We are committed to strengthening our integrated system of high-quality care and to providing the right care, at the right time, in the right place and at the right cost.

This report outlines our progress toward achieving our vision—both in our hospitals and our community organizations. With continued focus and staff engagement, we are well on our way.

Sincerely,

Elliot Joseph
President & CEO
Hartford HealthCare
In everything we do, Hartford HealthCare always seeks to provide the highest-quality care in the safest, most compassionate way. Through numerous initiatives, we are improving quality and the patient experience, and this report illustrates the results of our efforts. We are resolved to go further, faster. Our vision to be “nationally respected for excellence in patient care and most trusted for personalized coordinated care” drives our actions to make our hospitals top performers in the nation.

Public reporting of health care quality data is becoming more commonplace. The public expects transparency as they increasingly scrutinize health care providers to decide where they will receive care. Reports from the Center for Medicare and Medicaid Services (CMS), Consumer Reports, Leapfrog and U.S. News and World Report receive significant attention from the local and national media, and we expect that attention to increase. We have established the goal of being among the top performers in Consumer Reports ratings.

A major step we have taken is to partner with the Connecticut Hospital Association and Healthcare Performance Improvement to train staff members in the principles of high reliability. We believe health care can gain significant knowledge from industries such as nuclear power and aviation, which have seen dramatic improvements in safety during the past 25 years.

More than 80 percent of the staff, including physicians, at The Hospital of Central Connecticut and Backus Hospital already has undergone training. Leadership team members at Hartford Hospital, MidState Medical Center and Windham Hospital have been trained, and all staff is scheduled for training in 2014. The measure of success in our drive toward high reliability is to eliminate the occurrence of the serious safety event – an episode which results in harm to a patient as a result of deviating from a generally accepted performance standard.

Our culture of empowerment has led to the creation of daily morning safety huddles that bring together leadership and staff members to share issues encountered over the past 24 hours, anticipate possible problems, work on resolutions and continuously improve our safety performance. Our motivation is simple: It’s the right thing to do.

Hartford HealthCare has put into place a robust quality and safety program and is committed to becoming a top performer. We are very pleased to present Hartford HealthCare’s first Quality and Safety Report, which reflects the results of our work and commitment to excellence. Both remain constant.

Sincerely,

Rocco Orlando, MD
Senior Vice President & Chief Medical Officer
Hartford HealthCare
About Hartford HealthCare

Connecticut’s only truly integrated health care system

Hartford HealthCare is Connecticut’s only truly integrated health care system. With more than 18,000 employees and $2.5 billion in net revenue, the system offers the full continuum of care with five-acute care hospitals, the state’s only air-ambulance service, behavioral health and rehabilitation services, a large physician group and clinical integration organization, skilled-nursing and visiting-nurse services, a laboratory system that spans the state, and a number of services for seniors, including senior-living facilities.

Our vision
To be nationally recognized for excellence in patient care and most trusted for personalized coordinated care.

Our values
Integrity We do the right thing. Our actions tell the world what Hartford HealthCare is and what we stand for. We act ethically and responsibly in everything we do and hold ourselves accountable for our behavior. We bring respect, openness and honesty to our encounters with patients, families and coworkers and support the well-being of the communities we serve.

Caring We do the kind thing. Every Hartford HealthCare staff member touches the lives of the patients and families in our care. We treat those we serve and each other with kindness and compassion and strive to better understand and respond to the needs of a diverse community.

Excellence We do the best thing. In Hartford HealthCare, only the best will do. We work as a team to bring excellence, advanced technology and best practices to bear in providing the highest-quality care for our patients and families. We devote ourselves to continuous improvement, excellence, professionalism and innovation in our work.

Safety We do the safe thing. Patients and families have placed their lives and health in our hands. At Hartford HealthCare, our first priority – and the rule of medicine – is to protect them from harm. We believe that maintaining the highest safety standards is critical to delivering high-quality care and that a safe workplace protects us all.

Hartford HealthCare Service Area

- 5 acute-care hospitals
  Backus Hospital
  Hartford Hospital
  The Hospital of Central Connecticut
  MidState Medical Center
  Windham Hospital

- 2 psychiatric hospitals
  Institute of Living
  Natchaug Hospital

- 80 ambulatory sites
- 17 behavioral health locations
- Outpatient physical rehabilitation locations
- Visiting nurse association
- 7 skilled-nursing and assisted-living facilities
- 60 laboratory patient service centers
- More than 60 physician office locations
Hartford HealthCare’s dedication to transparency is reflected in a new set of Quality Key Performance Indicators (KPIs) endorsed by the Hartford HealthCare Board of Directors. The metrics we have chosen to report in our Quality KPIs include:

- **Risk-Adjusted Mortality** Hospital mortality is a critical measure of the quality of care. Hartford HealthCare’s overall mortality rate has steadily declined over the past three years.

- **Readmission Rate** The readmission rate represents the best indicator of our ability to coordinate care across the continuum. To encourage better care coordination, which reduces the cost of care, the Centers for Medicaid & Medicare Services (CMS) in 2013 began penalizing hospitals with high readmission rates for heart attack, heart failure, pneumonia, chronic lung disease and hip/knee replacement surgery. With numerous initiatives, including the implementation of a system-wide electronic health records system and the establishment of a clinical integration organization, we are heavily engaged in improving care transitions and reducing readmissions.

- **Safety** The safety score is a composite of publicly reported adverse patient events that have a significant impact on our patient outcomes and our publicly reported safety and quality ratings. Our goal is to reduce safety events to zero. Through extensive training and focus, patient falls resulting in injuries and hospital-acquired infections, among other issues, have dropped dramatically throughout our system.

- **Patient Experience** The patient experience is measured in all of our care settings and represents an important measure of our patients’ perceptions. Thanks to the commitment and focus of our outstanding staff, our patient satisfaction scores are continuing to increase.

- **Harm Rate** As part of the high-reliability journey, we track all events during which a patient is harmed as a result of a deviation from the standard of care. Our goal always is to have zero events and the highest patient satisfaction.

### Outcome Reporting

**Key Performance Indicators (KPIs)**

- **Mortality**
  - Hartford: 0.96
  - Midstate: 0.76
  - Hartford: 0.96
  - Midstate: 0.76

- **Readmission Rate**
  - Hartford: 16.51
  - Midstate: 13.48

- **Safety**
  - Hartford: 0.79

- **Patient Experience**
  - Hartford: 68.81

- **Harm Rate**
  - Hartford: 1.73

*Note: Hospital Safety: Smoothed Rate*
Our focus on quality and safety begins with our hospital mortality rates. We use the ratio of observed-to-expected (O/E) mortality rates to assess our performance: The O/E mortality rates are indexed according to hospital size and case-mix complexity. The graphic below depicts a steady three-year decline in mortality rates of approximately 20 percent. During the latter part of FY 2013, our performance reached a plateau, in part because of decreasing numbers of hospital admissions associated with an increase in the use of the observation status. Observation patients are not included in the denominator when calculating mortality rates.

One opportunity for further improvement in mortality is an increased focus on early identification and treatment of sepsis. In addition, greater use of the Medicare hospice benefit when the need for palliation is most important also will result in an improvement in the mortality statistic. This change would improve care for our patients and families – in Connecticut, this benefit is not used as much as in other parts of the nation.
According to a 2009 study, nearly 20 percent of Medicare beneficiaries are readmitted within 30 days after discharge at an annual cost of $17 billion. At Hartford HealthCare, through patient and family education, managing care transitions effectively, enhanced use of care coordinators, establishment of a clinical-integration organization (Integrated Care Partners), implementation of an electronic health record system, and partnering with community health care providers, we have begun to reduce avoidable readmissions.
The Hospital of Central Connecticut’s CHF Bridge Resource Center

Congestive heart failure (CHF) is a major health problem in the United States, affecting 5 million people, with 550,000 new patients diagnosed annually. More than one in three Medicare beneficiaries die of heart failure within one year of hospitalization and nearly 50 percent die within five years. The national readmission rate for Medicare heart-failure patients is 24.7 percent.

The Hospital of Central Connecticut (HOCC) established a CHF Bridge Resource Center to improve patient outcomes and reduce CHF readmissions. The center provides resources to help heart-failure patients and families become active participants in the patient’s care. Patients include, but are not limited to, those who have been discharged recently from the hospital. A nurse navigator identifies inpatient, high-risk patients and schedules appointments for them at the center within 72 hours of discharge. During the visit, the care-giving team takes a comprehensive approach and performs a cardiovascular exam, provides extensive education to the patient about heart failure, and provides emotional and social support. The patient and family are encouraged to participate together for optimal outcomes.

About three to four months after implementing the program, HOCC saw a drop in readmissions of 10 percent. Currently, about 15 percent of heart-failure patients are readmitted. Only 5 percent of those who go to the center after discharge are readmitted.

Hartford Hospital VAD and Infusion Center

Hartford Hospital has created one of the state’s most comprehensive programs for managing congestive heart failure. The program offers a range of options from outpatient care in the hospital’s infusion center to the use of ventricular-assist device technology and heart transplantation. What sets Hartford Hospital’s Heart Failure Rescue Program apart is its designation as a Ventricular-Assist Device (VAD) Destination Therapy Center. VADs have been used for many years to sustain patients who are candidates for heart transplant as they await a donor heart. With the development of lighter, more dependable VADs, it has become possible to consider the use of these devices not only as a “bridge to transplant,” but as a stand-alone therapy for those with hearts too weak to function properly.
Patient Safety

Central-Venous Catheterization

Protecting patients from harm is a cornerstone of our care. Through our high-reliability journey, we are driving to zero harm. A number of hospital-acquired conditions are tracked by Medicare and other organizations that publicly report hospital quality measures. The following measures are important markers of hospital safety: iatrogenic pneumothorax (accidental puncture of the lung during an invasive procedure), central-line blood-stream infections, post-operative blood clots, accidental perforations, post-operative hip fractures (resulting from falls) and pressure ulcers.

Central-Venous Catheterization

The incidence of pneumothorax has fallen dramatically at Hartford HealthCare (HHC) as a result of a 2012 Balanced Scorecard initiative to train all staff who perform central-venous catheterization in the use of ultrasound guidance to improve the safety of the procedure. Central-venous catheters are used to provide drugs and nutrition to patients and are used as a route to implant devices such as pacemakers.

Using simulation and mannequins at our Center for Education, Simulation and Innovation, HHC trained more than 80 percent of physicians, nurse practitioners and physician assistants. As a result of this mandated training, several physicians decided that they no longer wished to perform the procedure and voluntarily relinquished the privilege. These doctors tended to be those who had low volume; high volume is associated with better outcomes. In addition, our medical staff executive committees made it mandatory that physicians with the right to place these catheters must undergo the ultrasound training.

One year after the training, the incidence of this complication has been reduced by 50 percent at HHC hospitals. This demonstrates the complexity of an initiative to reduce the frequency of an infrequent event and the long gestation period for many successful patient-safety interventions.
Another condition for which Hartford HealthCare has experienced a sustained improvement in quality are hospital patients falls resulting in injuries. A Falls Collaborative has shared best practices across the system as a result of rigorous assessment of each case, addressing all causal factors.

Pulmonary embolism and deep-vein thrombosis represent other examples of adverse events where Hartford HealthCare has intense focus. Blood clots in the legs, which can travel to the lungs, can be reduced to a very low level with preventive measures. Dedicated teams have improved physician-ordering practices and documentation and used timely data analysis to drive down rates of this complication.
The Infection Prevention Council has provided leadership in a number of areas; most important, the Balanced Scorecard initiative to improve hand hygiene. Approximately 50 percent of all hospital-acquired infections can be prevented by hand washing.

The team has used a best-practice method for monitoring compliance with hand washing: "Secret Shoppers," whose identities are unknown to staff members, have made observations at the nursing-unit level and provided feedback to caregivers. Executive leadership and management have been engaged in rounding. Adoption of best practices, including peer coaching, optimal placement of hand-cleansing supplies and education, have resulted in a dramatic and sustained improvement, although still just short of the goal of 90 percent compliance. However, given the organizational commitment to improve care for our patients, we are on track to achieve our goal.

Patient Safety
Hospital-Acquired Infections

Hartford HealthCare and Hand-Hygiene Compliance

From left to right:
Standing: Pepper Sobieski, Susan Malo, Dr. Jack Ross, Dr. Rocco Orlando, Jean Horoho, Karen Traficanti, Cathy Ligi, Joyce Sauve

Seated: Kathleen Houlihan, Diane Pomarico, Beth Sullivan, Emily Stroup, Lynn Pepin
Patient Safety

Blood-Stream Infections

The Hartford HealthCare Infection Prevention Council drives process and policy to eliminate all hospital-acquired infections across the system. A key focus has been to eliminate the occurrence of blood-stream infections, a serious potential cause of death and disability in hospitalized patients. Blood-stream infections are most prevalent in teaching hospitals where the case mix and severity of illness lead to a greater risk of these infections. As we pursue a goal of zero blood-stream infections, we have demonstrated a 22 percent reduction in the incidence of this complication.

<table>
<thead>
<tr>
<th>Hospital</th>
<th>2012 Number</th>
<th>2013 Number</th>
</tr>
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<tbody>
<tr>
<td>Midstate</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hartford</td>
<td>28</td>
<td>21</td>
</tr>
<tr>
<td>THOCC</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Windham</td>
<td>0</td>
<td>2</td>
</tr>
</tbody>
</table>

NOTE: THOCC refers to The Hospital of Central Connecticut
Patients recover better when they can be mobile. The problem with ICU patients is the amount of critical equipment they need at all times, including oxygen tanks, IV poles and pumps, and ventilators. So how can they get up and walk?

Hartford Hospital’s ICU staff and staff from the hospital’s Biomedical Engineering, Nursing Education and Physical Therapy departments decided to figure it out. They did a lot of research, including contacting some of the top-ranked U.S. hospitals, to see if others might have a solution. They ended up developing and implementing a solution themselves – with the help of “Mr. Fixit” Earl Morrison, who works with the hospital’s Engineering Department.

Earl built a cart that carries all the equipment that a ventilated ICU patient needs, including a cardiac monitor, portable mechanical ventilator, oxygen tanks, IV pole, triple-channel IV pump and Foley catheter. The weight of the equipment is distributed so the patient isn’t uncomfortable and the staff can easily see the monitors. Earl put brakes on the cart for safety and made the cart adjustable to suit individual patients. Bars around the edges enable the patient to take a rest during the walk.

The team named the cart EARL, but wanted the name to stand for something, so they held a contest. The winner: Early Ambulation Saves Lives.

For his ingenuity, Earl received a prestigious Health Care Hero Award from the Hartford Business Journal. But his biggest reward is helping to improve the quality of care and life for patients.

Earl Morrison standing with the cart that bears his name, EARL: Early Ambulation Saves Lives
Over the past year, our most significant quality initiative has been our investment in training to become a high-reliability organization. Health care has much to learn from other high-risk industries, such as nuclear power and aviation, which have seen dramatic improvements in safety over the past 25 years.

Hartford HealthCare has partnered with the Connecticut Hospital Association and Healthcare Performance Improvement to train staff in the principles of high reliability. At The Hospital of Central Connecticut and Backus Hospital, more than 80 percent of the staff has been trained in these principles, including the medical staff holding active privileges.

At Hartford Hospital, MidState Medical Center and Windham Hospital, the leadership has been trained and training for all staff rolled out in FY 2014.

The measure of success in our drive toward high reliability is to eliminate the occurrence of the serious safety event – an episode which results in harm to a patient as a result of deviating from a generally accepted performance standard.
Patient Safety

High Reliability

We are monitoring the serious safety event rate at all of our hospitals. In the initial year of the program, we expect the rate of events to increase as a result of heightened awareness and better reporting. After a year, as at The Hospital of Central Connecticut and Backus Hospital during the current year, we expect to see a reduction in these events. The focal point for these efforts is to change the culture of safety by implementing best-practice, error-prevention techniques coupled with vigorous root-cause analysis and application of standard principles. Most important is a change in the culture which empowers any staff member to speak freely about any safety concern – secure that these concerns are valued and appreciated.

As an important part of the culture change associated with high reliability, all hospitals now conduct a morning safety huddle 365 days a year. David Whitehead, president of Hartford HealthCare’s East Region, leads a safety huddle at Backus Hospital.
Hospital Quality

The Patient Experience

All Hartford HealthCare organizations conduct surveys to assess the patient’s perception of his or her experience. In the hospitals, this is measured with the Centers for Medicare & Medicaid Services-mandated HCAHPS survey, which is reflected as one of the components for hospital payment in the value-based purchasing program.

The Patient Experience Council serves to coordinate activities across the system under the leadership of Catherine Stevens, vice president for Patient Care Services for Hartford HealthCare’s Central Region. For two years, achieving a top-quartile patient experience rating has been a Balanced Scorecard goal. Results of this journey for the hospitals are displayed on the graph below and demonstrate progress.

Most organizations within the system now use a single vendor, Press Ganey, to measure the patient experience. The Patient Experience Council has led in sharing best practices and disseminating those practices to both community and behavioral health organizations.

Hartford HealthCare was involved in two important patient-experience conferences in FY 2013. We held our first Patient Experience Conference in April 2013. The event included a keynote speaker, patient presentations and 46 poster presentations of research and process improvement by our own staff. In November 2013, Hartford Hospital hosted the Press Ganey Regional Patient Experience Conference.

Through a systematic process, VNA HealthCare Inc. monitors patient satisfaction.

One key question they monitor is “Likelihood to Recommend.”
Work to improve quality within the Hartford HealthCare Rehabilitation Network has been focused on the patient experience, which is measured by site. The Rehabilitation Network has demonstrated outstanding performance.

**Hospital Quality**

**The Patient Experience | Hartford HealthCare Rehabilitation Network**

HHRN – Hartford Hospital Rehabilitation Network
HOCCRN – The Hospital of Central Connecticut Rehabilitation Network
WHRN – Windham Hospital Rehabilitation Network
Standards of Care

Evidence-Based Care

Evidence-based care refers to the extent to which hospitals adhere to defined standards of best practices. In many cases, adherence to these standards results in either penalties or incentive payments from Medicare and health insurance companies.

Given the clinical and economic importance of these measures, there has been intense focus on gaps and opportunities. Backus Hospital was named “Top Performer on Key Quality Measures” by The Joint Commission and was one of eight hospitals in the state to be recognized as a Top Performer on Key Quality Measures and one of 1,099 hospitals in the country to earn this distinction for attaining and sustaining excellence in evidenced-based care standards. Backus was recognized for its achievements in the following measure sets: heart attack, heart failure, pneumonia and surgical care. All Hartford HealthCare hospitals are showing strong signs of improvement to top performance in these measures.

Key Quality Measures

Hartford HealthCare Compliance in Evidence-based Care

- Top Performance Threshold
- MidState Medical Center
- Hartford Hospital
- Windham Hospital
- The Hospital of Center Connecticut
- Backus Hospital
Standards of Care

Quality Targets

An increasing number of our managed-care contracts include financial performance incentives for reaching quality targets. Our partnership with Anthem – our largest commercial payer – is one such example. Our performance is measured with a number of measures included in the Q-HIP (Quality Hospital Incentive Program) score. Our improvement trend for these measures is strongly positive.

### Large Hospital Q-HIP Survey

<table>
<thead>
<tr>
<th>Hospital</th>
<th>CY 2010</th>
<th>CY 2011</th>
<th>CY 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartford Hospital</td>
<td>70.39</td>
<td>63.55</td>
<td>83.4</td>
</tr>
<tr>
<td>Hospital central Connecticut</td>
<td>85.23</td>
<td>88.76</td>
<td>77.38</td>
</tr>
<tr>
<td>Backus Hospital</td>
<td>56</td>
<td>77.13</td>
<td>93.07</td>
</tr>
<tr>
<td>Top Threshold</td>
<td>115</td>
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### Community Hospital Q-HIP Survey

<table>
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<th>Hospital</th>
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<th>CY 2011</th>
<th>CY 2012</th>
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<tr>
<td>Windham Hospital</td>
<td>68.00</td>
<td>72.68</td>
<td>83.50</td>
</tr>
<tr>
<td>MidState Medical</td>
<td>93</td>
<td>104</td>
<td></td>
</tr>
<tr>
<td>Top Threshold</td>
<td>112</td>
<td>112</td>
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Quality & Safety Initiatives

Integrated Care Partners

Integrated Care Partners (ICP) is Hartford HealthCare’s physician-led clinical integration organization that will play a critical role in improving how patient care is delivered. ICP’s mission is to “be a high-performing network of integrated providers, successfully delivering value-based population health.”

To reduce costs and improve the health of populations – to deliver value – our focus must change from treating illness to maintaining patient, and community, health. Coordination of care for patients with chronic illnesses is a key in this transformation, given that 50 percent of adults have at least one chronic illness. Modifying treatment, including increasing patient engagement, can reduce costs through the elimination of duplicate, unnecessary testing and the prevention of hospitalizations and complications caused by the patient’s not participating in the management of his or her disease.

ICP has collaborated extensively with Hartford HealthCare Quality Management to define clinical performance metrics required of ICP physician participants. Each specialty has three to five quality metrics that are monitored by the ICP and Quality staffs, which provide feedback to physicians on their performance and assist if performance improvement is required.

Hartford HealthCare is engaged in several value-based programs. ICP physicians participate in the Center for Medicare & Medicaid Services’ Medicare Shared-Savings Program (MSSP) – a Medicare Accountable Care Organization (ACO), requiring measurement of quality outcomes for 22 metrics. Initial performance has been excellent. For 12,000 MSSP patients for 2013, we were above the 90th national percentile for diabetes management and controlling high-blood pressure. The benchmarks are set at greater than 90 percent.

“Clinical integration is a structured collaboration among physicians and hospitals to develop an active and ongoing program designed to improve the quality and efficiency of health care”

(Source: Advocate Health Care)
# Quality & Safety Initiatives

**Integrated Care Partners**

## Chronic Disease Outcomes Metrics

<table>
<thead>
<tr>
<th>Category/Measure</th>
<th>Actual</th>
<th>Benchmark</th>
<th>Metric Met</th>
<th>Total Qualified</th>
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<tbody>
<tr>
<td><strong>Chronic Disease Outcome Metrics</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HTN: Controlling High BP &lt;140/90</td>
<td>93%</td>
<td>80%</td>
<td>4,778</td>
<td>5,136</td>
</tr>
<tr>
<td>Ischemic Vascular Disease: LDL &lt;100</td>
<td>58%</td>
<td>79%</td>
<td>255</td>
<td>443</td>
</tr>
<tr>
<td>DM: BP&lt;140/90</td>
<td>95%</td>
<td>37%</td>
<td>884</td>
<td>933</td>
</tr>
<tr>
<td>DM: A1c Poor Control (&gt;9%)</td>
<td>5%</td>
<td>10%</td>
<td>56</td>
<td>1,128</td>
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<tr>
<td>DM: A1c Control (&lt;8%)</td>
<td>85%</td>
<td>37%</td>
<td>792</td>
<td>933</td>
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<tr>
<td>DM: LDL (&lt;100)</td>
<td>64%</td>
<td>37%</td>
<td>599</td>
<td>933</td>
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<tr>
<td>DM: Tobacco Non-Use</td>
<td>47%</td>
<td>37%</td>
<td>440</td>
<td>933</td>
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</table>
Quality & Safety Initiatives

Clinical Councils

Hartford HealthCare’s clinical councils are system-wide multidisciplinary groups that bring together clinicians to drive standardization, identify best practices and implement best practices across the system. The councils develop charters, set goals and monitor progress with data and dashboards. The initial work of the councils began with the hospitals, but now is expanding into behavioral health and our community organizations. We have more than 20 councils working to improve care and identify efficiencies that can result from standardization.

- Hospitalist Medicine
- Emergency Medicine
- Pharmacy and Therapeutics
- Neurosurgery Anesthesiology
- Pathology Surgical
- Wound Care
- Cancer
  - GU
  - Lung
  - GYN Oncology
  - GI
  - Breast
- Radiology
- Patient Experience
- Infection Prevention
- Obstetrics and Gynecology
- Cancer Quality
- Behavioral Health Quality
- Cardiac Care
- Pediatrics/Neonatology
- Perioperative Services
  - Anesthesia
  - Surgery
  - Robotic Surgery
  - Orthopedics

These groups have made important contributions to care at our hospitals.

For example, the Pharmacy and Therapeutics Council’s members include hospital pharmacy directors and physician chairs of the Medical Staff Therapeutics committees. The council has achieved the following:

- Dramatic cost savings of $4.6 million over three years through standardization of drugs and vendor relationships.
- Movement toward adopting a single system formulary, beginning with oncology (as a result of the Hartford HealthCare Cancer Institute’s membership in the Memorial Sloan Kettering Cancer Alliance).
- A move to adopt a single Pharmacy and Therapeutics Committee for the system.
Quality & Safety Initiatives

Clinical Councils

The **Hospital Medicine Council** has conducted a system-wide risk assessment and identified opportunities in medication management and follow-up of incidental findings noted during a hospitalization and has identified the need for better communication with other physicians, especially primary care. As a result, a number of action steps are in place. One example: Discharge summaries are available to primary care physicians within 48 hours more than 90 percent of the time with a goal to achieve greater than 95 percent within a year.

The **Robotics Council** has developed a rigorous approach to training and awarding privileges for performing robotic surgery. Uniform standards are in place at all hospitals. In addition, the council is reviewing surgical outcomes and identifying improvement opportunities. The surgical outcomes have indicated top-decile performance when our robotic outcomes are compared to the Premier data base.

The **Obstetrics and Gynecology Council** was established in July 2013. In a short time, the group has focused on reducing obstetrical harm and is monitoring Caesarian section rates. As a result of physician education, complications at the time of delivery have been reduced. In addition, a program is in place to use simulation to improve outcomes during childbirth.

The **Radiology Council** has standardized policies, procedures and consent forms and is planning to introduce a standard and best-practice approach to measuring and minimizing exposure to radiation during imaging studies.
Risk Management

Hartford HealthCare Indemnity Services

The risk-management program at Hartford HealthCare is an integral part of our approach to quality and safety. We believe that quality and risk management are two sides of the same coin. Hartford HealthCare Indemnity Services is our Bermuda-registered malpractice insurance captive. We review all claims and adverse events to identify trends that represent opportunities to improve care. The risk-management program is an extensive undertaking that involves risk (quality) education and practice assessment as an integral part of risk-reduction initiatives.

The risk-management education program touches more than 5,000 clinicians throughout Hartford HealthCare. The curriculum is based on claims and adverse-event analysis and includes a combination of web-based and in-person educational sessions tailored to the individual specialties of the providers.

Examples of topics covered in the curriculum include: informed consent, documentation, standard of care, patient relations, the electronic health record, failure to diagnose and continuity of care.

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Risk-Management Education Curriculum

<table>
<thead>
<tr>
<th>Risk-Management Themes</th>
<th>Program Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Informed Consent</td>
<td>Quarter 1 Web module CME approved</td>
</tr>
<tr>
<td>• Documentation</td>
<td>Quarter 2 Risk management rounds</td>
</tr>
<tr>
<td>• Standard of Care</td>
<td>Quarter 3 Web module</td>
</tr>
<tr>
<td>• Patient Relations</td>
<td>Two learning risk alerts</td>
</tr>
<tr>
<td>• Electronic Medical Record</td>
<td></td>
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<tr>
<td>• Inter-Provider Communication</td>
<td></td>
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<tr>
<td>• Failure to Diagnose</td>
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<td>• Continuity of Care</td>
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Hartford HealthCare’s Risk-Management Education Process

- Determine exposure areas
- Risk assessments & consultative support
- In-depth assessment that identifies areas of vulnerability
- Utilize information to tailor education and practice change
- Education, development of tools & forms
- Measure effectiveness of change over time
- Audits, self-assessments, evaluations

Hartford HealthCare Indemnity Services

Hartford HealthCare’s risk-management program has been in place for seven years in parts of Hartford HealthCare and has a proven track record of reducing malpractice claims, which is a clear indication of improving quality.

Innovative areas of work include an obstetrical partnership with Physicians for Women’s Health to develop an extensive educational program for women prior to and during pregnancy. Tied to this initiative is a simulation-based program using the Center for Education, Simulation and Innovation to reduce harm associated with shoulder dystocia and postpartum hemorrhage.
Summary & Wrap-up

Hartford HealthCare

During the last year, we have made great strides in improving quality and safety at Hartford HealthCare. We are aligned with our 2,400 physicians in our pursuit of this goal and have the strong support of all of our employees.

The best example of our success is our ability to reach consensus about clinical excellence. Our clinical councils always have been able to reach a conclusion about standards of excellence and are moving to implement these best practices across the system. Our ability to improve performance is based on rigorous use of data and measurement of outcomes.

We have ongoing opportunities to drive further improvements: We are focused on reducing the incidence of hospital-acquired infections even further and will target reducing the incidence of catheter-associated urinary tract infections during the coming year. We will continue our dedication to achieving high levels of hand-hygiene compliance and a superlative patient experience.

Goals for the coming year include establishing Patient Advisory Councils across the system – advancing our mission to improve quality and safety through the voice of our patients. We will be relentless in our efforts to become a high-reliability organization with the stated goal of eliminating all medically induced harm. Our patients and our communities deserve nothing less.
Mission
To improve the health and healing of the people and communities we serve.

Vision
To be nationally respected for excellence in patient care and most trusted for personalized coordinated care.
Awards & Recognition

Hartford HealthCare

Hartford Hospital has been ranked by U.S. News & World Report as the No. 1 hospital in the Hartford region and among the best in Connecticut for 2013-14.

Hartford Hospital gave a presentation at the Premier 2013 conference titled “Fall Reduction through a Volunteer Mobility Program.”

In February 2013, Press Ganey recognized Windham Hospital’s Emergency Department for significant improvement in its patient experience scores.

Hartford Hospital received a grant from the U.S. Agency for Healthcare Research and Quality to study the use of personalized medicine to treat patients with severe depressive disorder.

MidState Medical Center was recognized by HealthGrades as a 2013 Outstanding Patient Experience recipient.

The Hospital of Central Connecticut was awarded the American Heart Association/American Stroke Association’s Get With The Guidelines®-Stroke Gold Plus Quality Achievement Award and Target: Stroke Honor Roll recognition.

Hartford Hospital’s Bariatrics was notified that seven of its quality submitted abstracts were accepted for the National Bariatric Meeting (Obesity Week) to be held in October 2014 in Atlanta. The abstracts accepted were one podium and six poster presentations.

Hartford HealthCare’s Central Region, including The Hospital of Central Connecticut and MidState Medical Center, had three posters accepted to IHI 2013:
- Integrating Triage and Fast Track to Improve Patient Experience in the Emergency Department
- Safe, Effective & Well-Coordinated Patient Transition After Total Joint Replacement: A Discharge Appointment
- Mislabeled Specimens: One Institution’s Story

Backus Hospital received an Anthem Blue Distinction recognition for orthopedics.

Hartford Hospital’s Stroke Center earned The Joint Commission’s Gold Seal of Approval™ for certification as a Primary Stroke Center.

The Hospital of Central Connecticut’s Comprehensive Breast Program was the first program in Connecticut to be recognized as a Certified Quality Breast Center of Excellence in National Quality Measures for Breast Centers™ Program.

Backus Hospital received an “A” rating from Leapfrog.

Hartford Hospital was once again named one of America’s Best 100 hospitals by HealthGrades.

MidState Medical Center’s Critical Care Unit was one of only two in Connecticut to be awarded the silver-level Beacon Award for Excellence by the American Association of Critical Care Nurses.

Hartford Hospital received certification by the Joint Commission for its Ventricular Assist Device Program.

The U.S. Department of Health and Human Resources and Services Administration awarded Hartford Hospital a gold designation for the work the hospital has done to support organ-donation awareness.

Backus Hospital was named a Top Performer on Key Quality Measures by the Joint Commission.

MidState Medical Center was recognized as Baby Friendly® birth facility for implementation of the Baby-Friendly Hospital Initiative and for offering optimal levels of infant care through breastfeeding. Baby Friendly® is sponsored by The World Health Organization and the United Nations Children’s Fund (UNICEF).