



*Strengthening Oklahoma's Safety Net,
One Community At A Time*

Board Bulletin

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Quality Initiatives Demand Attention: Part 2

In September 2007, the Office of Inspector General (OIG) of the U.S. Department of Health and Human Services (HHS) issued *Corporate Responsibility and Health Care Quality: A Resource for Health Care Boards of Directors*. The accompanying press release stated, "Ensuring the quality of care provided by health care organizations has never been more critical...It is essential for health care boards of directors to understand their important role in overseeing the quality of care provided in their organizations." The publication relies on the Institute of Medicine's (IOM) six-part definition of health care quality: 1) safe – help people, not hurt them; 2) effective – avoid underuse and overuse; 3) patient-centered – respectful and responsive; 4) timely – reducing wait times for providers and patients; 5) efficient – avoiding waste of resources and energy; and 6) equitable – same high quality care for all people. All six elements should be considered when designing quality programs.

How do CHC Boards Oversee Quality of Care?

The OIG report ends with a series of questions that gets to the heart of what is expected of health care board members. The questions address the following ten areas relative to quality improvement activities:

- ◆ **Promote Quality Care** – Boards must institute quality improvement goals that have specific metrics and benchmarks used to measure progress. The OIG report asks the question of boards, "*How is each goal specifically linked to management accountability?*" In other words, insist on results from management.
- ◆ **Evaluate Performance** – Boards will be expected to know how the organization measures quality, what is being done to improve patient outcomes and what staff are the key leaders responsible for quality and safety programs. Meeting minutes should document that CHC quality activities have been reported to the board.
- ◆ **Institute Quality Policies and Procedures** – Quality assessment and improvement processes must be integrated into the corporate policies and procedures. There must be evidence that boards have exercised 'duty of care' by developing policies that include proper internal controls and by monitoring policy implementation.
- ◆ **Engage in Board Development** – Boards will be expected to participate in formal quality improvement orientation to gain a better understanding of program requirements. "*Does the board include members with expertise in patient safety and quality improvement issues?*" Remember this when recruiting new members.
- ◆ **Monitor the 'Dashboard'** – CHCs are encouraged to develop a 'dashboard' that includes the information essential to effective oversight of quality improvement activities. Just as car gauges monitor fuel level and oil pressure, the CHC quality dashboard should enable easy board review of critical performance measures.
- ◆ **Coordinate with Corporate Compliance** – *How are quality of care and patient safety issues addressed in the organization's risk assessment and corrective action plans?* With this question, OIG is reminding boards that quality improvement activities must be coordinated with corporate compliance activities to reduce risks.
- ◆ **Demand Process Transparency** – The OIG makes it clear that boards must ensure there are processes in place that promote reporting of quality and safety concerns without fear of retaliation. Transparency is key to improving quality. *What guidelines exist for reporting quality and patient safety concerns to the board?*
- ◆ **Dedicate Resources** – "Put your money where your mouth is" by dedicating sufficient resources to quality activities. Quality suffers when professional and support staff levels are not adequate. Careful consideration must be given to proposals of new services and technology to guarantee patient safety and resource protection.
- ◆ **Ensure Provider Competency** – *Do the organization's competency assessment and training, credentialing, and peer review processes adequately recognize the necessary focus on clinical quality and patient safety issues?* High quality care can only be delivered by carefully securing competent, quality-focused providers.
- ◆ **Address Problem Areas** – Boards must develop 'early detection' processes so staff can quickly identify and correct problems. Performance improvement activities must include a reporting mechanism that informs the board of adverse patient issues without unnecessarily exposing the organization to liability.

To review OPCA's entire *Board Bulletin* series, visit the 'CHC Boards' section of www.okpca.org.

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