

# The LifePoint National Quality Program Provides Structured Framework for Reducing Inpatient Harm

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## Summary

Building on the company's experience as a Hospital Engagement Network participant in the Centers for Medicare & Medicaid Services (CMS) Partnership for Patients, LifePoint Health created the [National Quality Program \(NQP\)](#) based on a commitment to leadership, performance improvement, and culture of safety. . The objective of creating the NQP was to improve patient care, safety, and satisfaction and to give LifePoint hospitals a structured framework for improving patient safety activity, as assessed by an aggregate harm measure calculated using administrative claims data.

## Contact the Innovator

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## Date First Implemented

2014-01-01

## Problem Addressed

LifePoint hospitals found great success in improving inpatient safety performance under the [Hospital Engagement Network \(HEN\)](#) contract as a component of the Centers for Medicare & Medicaid Services (CMS) Partnership for Patients. LifePoint sought to build on this success and implement an institutional process that would allow for hospitals to further their patient safety performance gains once the contract expired. The [NQP](#) was launched with the goal of providing hospitals with the resources to be self-sufficient

and build the internal capacity necessary to continue to drive change. The NQP provides a structured approach to enable and empower hospitals to continuously improve patient care, safety, and satisfaction and builds on many of the innovations created under the HEN contract.<sup>1</sup> The program is based on three foundational pillars of leadership, performance improvement, and a culture of safety. LifePoint has developed an aggregate harm measure using administrative claims data to help hospitals monitor performance. This measure assesses harms such as central-line-associated blood stream infections, hospital-acquired pneumonia, urinary tract infections, and hospital-acquired sepsis, among others.<sup>1</sup>

## Description of the Innovative Activity

Three foundational pillars guide the NQP framework:<sup>1</sup>

- **Leadership:** There is commitment from leaders at all levels across the organization to sustaining quality improvement efforts. The expectation is that leaders are accountable for quality and safety outcomes. Accountability is ensured through regular reporting at the highest levels of the organization, including the Board.
- **Performance Improvement:** Incorporation of performance improvement methodologies and practices that are data-driven, transparent, inclusive, and multidisciplinary helps to drive improvement. Hospital and system-level teams should review the data regularly to allow for modification and refinement of interventions. Learning collaborative models and peer-to-peer learning supports the sharing of best practices and progress toward shared goals. The NQP emphasizes the celebration of achieved performance goals but also supports accountability and data transparency when performance falls below target.
- **Culture of Safety:** Leadership sets the expectation that quality and safety are the responsibility of every employee. This includes ensuring that staff feel empowered to speak up to express any safety concerns in a non-punitive environment for reporting errors for the purposes of learning to prevent future error.

The NQP team works with each LifePoint hospital to assess their current performance, existing initiatives, and resources. Using this information, they work with the hospital to create a work plan intended to advance care improvement and harm reduction efforts based on clearly defined goals. This work plan is specific to the hospital and focused on a few specific priorities. Through monthly coaching calls and regular data analysis, the NQP team is able to help the hospital identify where it is doing well in progressing the work plan, and where it is experiencing challenges. From there, the NQP team can provide clinical and case management support, or connect the hospital to evidence-based tools and peers within the program to help them address their challenges.

The hospital work plan is a living document and is expected to be updated as goals are achieved.

Hospitals are held accountable for continuous assessment and refinement of goals. Not only does the hospital participate in monthly coaching calls, but hospital CEOs present their hospital's quality scorecard to LifePoint's Quality Oversight Committee on a biannual basis.

## Context of the Innovation

In January 2011, LifePoint Health and Duke University Health System collaborated to create a joint venture, DLP Healthcare (DLP) to measurably improve culture and quality and patient safety metrics in community hospitals. The Duke LifePoint Quality Program, a structured approach to quality guided by a framework of leadership, performance improvement and a culture of safety, was developed at DLP hospitals.<sup>1</sup>

In December 2011, LifePoint, in partnership with Duke University Health System, received a contract to participate in the Center for Medicare & Medicaid Services (CMS) [Partnership for Patients Hospital Engagement Network \(HEN\)](#) initiative. The objective of the initiative was to reduce baseline hospital-acquired conditions by 40% and to reduce hospital readmissions by 20%. To facilitate improvement among the 50 included hospitals, LifePoint and Duke created a learning collaborative. The goal was to deploy interventions and strategies at scale, while also tailoring educational activities to each hospital's culture of safety, organization, and readiness to change. LifePoint and Duke identified performance metrics to assess reduction in the harms identified by CMS. As a result of the success of this model, LifePoint and Duke were awarded a contract in the next iteration of the HEN work – HEN 2.0 – with the goal of sustaining gains in harm reduction and further decreasing readmissions.

At the initiation of the HEN 2.0 contract, LifePoint established the NQP as the framework to not only implement the contract, but also as the means of continuing harm reduction and improvements in patient safety beyond the life of the contract. All LifePoint hospitals participate in the NQP. Any new LifePoint hospitals are required to take part in an onboarding process for the NQP that assesses the hospital's current performance and existing improvement activities.

## Results

Hospitals enrolled in the NQP have demonstrated significant improvements in metrics of patient safety and were able to sustain their successes beyond the 2016 conclusion of the HEN 2.0 contract. This has also included demonstrating reductions in hospital readmissions and improvements in safety culture. Between January 2011 and December 2017, the number of preventable hospital-acquired harms per 1,000 inpatient stays decreased by 62.5% ( $p < 0.000$ ). In addition, all-cause hospital readmissions decreased by 11.6% and a survey index score of teamwork and safety culture increased by 29% ( $p < 0.000$ ). Additionally, improvements have been observed in specific harm areas contributing to the aggregate harm score. For example, hospital-acquired pneumonia per 1,000 inpatient days decreased 73% ( $p < 0.000$ ) and hospital-acquired urinary tract infection rates per 1,000 inpatient-days decreased 78.9% ( $p < 0.000$ ).<sup>1</sup>

## Innovation Patient Safety Focus

The innovation is designed to support hospitals in making continuous improvement and reducing inpatient harm events, such as healthcare-associated infections, as evidenced by an aggregate measure of patient

harms.

## Evidence Rating

**Moderate:** The evidence consists of improvements in patient safety metrics and safety culture over a seven-year period, as compared to baseline.

## Planning and Development Process

When establishing this innovation, the most important component is to collaborate with the hospital to establish goals, milestones, and approaches that are aligned with the hospital's priorities, resources, and existing workflows. This will help to ensure staff buy-in and not discourage the team by setting what are perceived as unrealistic expectations.

## Resources Used and Skills Needed

- **Staffing:** The program relies on a centralized team that includes safety and performance improvement experts, in addition to clinical experts. This team can not only support specific improvement questions from hospitals and address case management concerns, but can also make the connection between hospitals within the LifePoint system that have best practices or resources that they can share with others experiencing similar challenges.
- **Library of Resources:** Maintaining a library of performance improvement and safety resources that can easily be leveraged, or customized as necessary, for team trainings or specific improvement challenges ensures a more standardized approach and avoids hospitals needing to use resources to “reinvent the wheel” whenever a new project is implemented.

## Getting Started with This Innovation

- **Work with the hospital to establish their goals.** Engage the hospital team to identify what their priorities for safety improvement are and help coach them to find an improvement strategy and approach that aligns best with existing workflows. Encourage the team to focus on a few specific, achievable goals. Working directly with the hospital helps to support staff buy-in and ownership of the goals and improvement approach.
- **Utilize a data driven approach.** Ensure a plan for data collection and analysis that allows for regular identification of potential areas for improvement, but also can assess progress towards goals. Providing data stratification by unit within the hospital can enable targeted improvement efforts and sharing of peer performance can foster friendly competition among participating hospitals.
- **Establish clear milestones.** Regular check-in points that include both a review of initiative/intervention implementation and review of relevant data allows for continuous assessment

of progress, early identification of challenge points, and determination of which improvement activities are proving to be particularly impactful. Regular assessment of progress also helps to ensure accountability among team members, both from frontline staff and senior leadership.

- **Endorse foundational safety principles.** LifePoint's endorsement of core foundational safety principles that can easily be replicated across hospitals (e.g., TeamSTEPPS, the use of interdisciplinary care teams, bedside shift reports, prioritizing patient engagement) and providing guidance on how to implement and master these principles is an efficient use of resources. For hospitals less experienced in implementing patient safety interventions, encouraging them to focus their efforts on foundational safety principles gives them clear next steps towards advancing improvement.

### Sustaining This Innovation

- **Emphasize a culture of shared responsibility.** Hospitals within the NQP that have successfully continued to make progress over time are those where there is a strong culture of shared responsibility, from leadership buy-in and support to endorsement by the medical staff.
- **Codify expectations in organization principles.** The NQP continues to be a successful approach among LifePoint hospitals because it is codified into the organization's operational principles. It is required that all hospitals have an NQP work plan and that all newly acquired hospitals are onboarded into the program.

### Adoption Considerations Use by Others (Use By Other Organizations)

There are 83 hospital campuses enrolled and participating in the LifePoint National Quality Program.

### References/Related Articles

Frush K, Chamness C, Olson B, et al. National quality program achieves improvements in safety culture and reduction in preventable harms in community hospitals. *Jt Comm J Qual Patients Saf.* 2018;44(7):389-400.

Frush, K., Chamness, C., Olson, B., Nordlund, C., Hyde, S., Phillips, H., Holman, R., "National Quality Program Achieves Improvements in Safety Culture and Reduction in Preventable Harms in Community Hospitals," Joint Commission Journal on Quality and Patient Safety 2018, Vol. 44, No.7, pp.389-400

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Holman, R. "Growing, Learning – Transparency and Outreach are at the Heart of LifePoint's Quality Programs," Vitals, Nashville Post, Winter 2016 pp. 36-38.

## Footnotes

[1.](#) Frush K, Chamness C, Olson B, et al. National quality program achieves improvements in safety culture and reduction in preventable harms in community hospitals. *Jt Comm J Qual Patients Saf.* 2018;44(7):389-400.