

Why Patient Safety is *Not* Like the Weather

by E. Strode Weaver, FACHE, MBA, MHSA

Sure everybody talks about both topics. While one of these subjects is outside of our control and cannot be changed no matter what we do, the other *can* and *must* be changed.

Changes are, in fact, taking place. Here are just a few recent news stories:

- Pennsylvania is the first state to publicly disclose nosocomial (hospital-acquired) infection data (*USA Today*, July, 13, 2005).
- “Most Wired” hospitals have lower mortality rates (Study released by the American Hospital Association, July 2005).
- Three Missouri healthcare groups form a patient safety center for the state (*Kansas City Star*, July 2005).
- Pittsburgh hospitals reduce catheter-related infections by 63 percent (*Pittsburgh Post Gazette*, February 2005).

As leaders, we know that to change or influence a situation or process we first have to raise awareness. People need to know what is going on *now* and why change is necessary. To continue providing the best possible care to our cancer patients, safety must be maintained and, in some cases, improved.

So what's the first step? Here's something that we can all get in touch with—the *100,000 Lives Campaign* of the Institute for Healthcare Improvement (IHI), a major undertaking that is gathering widespread support. You can find out all about it at IHI's web site (www.ihf.org). In just over six months, IHI has signed up over 2,000 U.S. hospitals to participate in the *100,000 Lives Campaign*.

And talk about a powerful tag

line: “*Some is not a number. Soon is not a time.*” The *100,000 Lives Campaign* challenges institutions to set their own numbers and specific target dates to save lives. The campaign focuses on six interventions that have been proven to prevent avoidable deaths: rapid response teams; evidence-based care for MI patients; and prevention of adverse drug events, central line infections, surgical site infections, and ventilator-associated pneumonia.

While not all of these areas touch our cancer patients, our nursing staffs take care of central lines every

day and our chemotherapy drugs are in the forefront of severity for an adverse drug reaction. So, in keeping with my theme, here is my call to action.

First, visit the *100,000 Lives* web site and learn what it is all about.

Second, find out if your hospital or the hospital where your patients are cared for is participating in this program. If not, actively lobby for a commitment.

Third, select those areas of the initiative in which you do participate and download the initiative guidelines.

Finally, adopt the guidelines as your game plan, measure where your services are now, and contribute to the success of this all-important improvement effort over the next year.

Don't be one of those people standing around the water cooler and talking about patient safety. Make a difference. Make a change. Do what you can *today* to improve patient safety in your hospital, center, or your practice. Our patients deserve nothing less. ☐



Coming in Oncology Issues

- ◆ A Model Image-guided Radiation Therapy Program
- ◆ Developing an Interdisciplinary Staff Education Program in Radiation Oncology
- ◆ Strategic Planning for Hospital Oncology Programs
- ◆ The Whole Patient Experience
- ◆ Physician Alignment: A Top Priority Strategy for Building Profitable Growth and Protecting Market Position in Oncology Services

Plus, a look at IT and EMR issues in the Hospital Setting

