

Making Quality Work for You

BY RHODA WEISS

Choosing a healthcare provider means trusting someone else's expertise. For the individual, it means saying to the provider, "I entrust my care to your skills. I expect the best." For employers or healthcare payers, that concern may be multiplied by the thousands, since entire workforces depend on the quality of the health plan chosen.

Memorial Health Services (MHS), a not-for-profit healthcare system based in Long Beach, CA, is trying to make itself more attractive to healthcare purchasers by having its hospitals document their quality through extensive clinical outcome studies.

At the heart of MHS is MemorialCare, an innovative concept in healthcare delivery. Under MemorialCare, physicians create guidelines for managing patient care. These guidelines become the standard of practice at all MHS facilities and have helped the four MHS medical centers in Los Angeles and Orange counties achieve outcomes that surpass national benchmarks for many major diagnostic groups.

The premise for MemorialCare is that as healthcare costs stabilize among providers, high quality will be the distinguishing factor for successful healthcare organizations. MHS executives and physicians believe MHS will gain a significant competitive advantage from instituting a physician-driven program of integrated high-quality care.

"In an era of HMOs, PPOs, EPOs, and more, furious cost cutting and price competition have led many hospitals to abandon the pursuit of quality, which is a valuable marketing tool in itself," claims MHS President and CEO Tom Collins. "People will give you a reasonable reimbursement in exchange for documented outcomes."

MEASURING CLINICAL OUTCOMES

While the MHS medical centers have been eliminating redundancies and putting more efficient systems in place, Collins is focusing on aggressive documentation of the outcomes at MHS hospitals. By doing so, he hopes to change the focus in



Ms. Weiss is a

Santa Monica,

CA-based

healthcare

consultant.

the marketplace from low costs to high quality.

Many experts believe that the lack of standards for comparison makes MemorialCare a difficult undertaking. But Collins is not starting from scratch. During the past two years, physicians at the MHS hospitals have participated in outcomes projects to measure quality indicators for major diagnostic groups (including neonatal survival rates, ICU mortality rates, and cardiac artery bypass graft success rates), as well as customer satisfaction. The information will be compared with accepted benchmarks and compiled into report cards to help consumers, employers, and payers in their decision making.

What makes the MHS report cards different from those produced by other hospitals and systems is the emphasis on clinical outcomes as well as customer satisfaction. MHS staff members spent months identifying the most accepted clinical standards from state and national agencies, professional organizations, and medical colleges to develop its outcome documents.

"Through careful study we are using anything and everything that is available from the most accepted documented sources, placing our clinical care against those standards, and communicating the results to the market of payers, employers, physicians, and consumers," says Collins.

PHYSICIANS AT THE HELM

The success of MemorialCare is tied to the fact that it is led by physicians. In the fall of 1996, 30 physicians and 10 administrative staff members from across the system met to discuss the implementation and promotion of MemorialCare into the next century. The message from the physicians was clear: If MHS and its physicians are going to stand out from the crowd, then attention to documented quality and outcomes and dedication to the health of MHS patients are essential.

"Prior to the conference we reviewed articles on quality and value, thought about the concepts and examples of other successful organizations,

Continued on page 72

EDUCATIONAL EVENTS

Coming Soon from CHA

To help you plan your year, this calendar lists upcoming educational programs offered by the Catholic Health Association.

For information on specific programs, contact the person listed at the end of the program description. Jan Holdcraft can help with other questions about CHA's educational activities. Call 314-253-3490, or write Jan at CHA, 4455 Woodson Road, St. Louis, MO 63134-3797.

MARCH 1997

15-18 CHA-NATIONAL ASSOCIATION OF CATHOLIC CHAPLAINS THIRD ANNUAL CONVENTION—"PARTNERING FOR ALL GOD'S PEOPLE: SPIRITUAL CARE IN NEW ENVIRONMENTS"

Corpus Christi, TX

The 1997 convention, to be held at the Omni Hotel, will feature four keynote and plenary sessions: "Partnering with Our Poor: A Plea for All God's People," Paul E. Farmer, MD, PhD; "Institutions in Crisis: The Pain of Partnering," Rev. Charles Curran, STD; "Spiritual Care in Health and Well-Being Partnerships: A CEO's Perspective," Patricia A. Cahill, JD; and "A Scriptural Call to Partnership," Cathy O'Connor, PhD.

The convention will also feature 13 workshops in three tracks—for chaplains, for spiritual care managers, and for CPE supervisors. Workshop topics were selected from among the issues chaplains have raised in the ongoing CHA-NACC survey.

Program Coordinator:

Larry Seidl

Contact: Janet Brasher

314-253-3523

APRIL 1997

14-15 FOUNDATIONS OF CATHOLIC HEALTHCARE LEADERSHIP

To be determined

We have updated the former "Foundations of Mission" to reflect the Center for Leadership Excellence's research findings on leadership competencies. During this interactive program, participants will examine the



THE CENTER FOR LEADERSHIP EXCELLENCE

Gospel values supporting Catholic healthcare; the mission, ministry, and healing tradition; the structure of the Catholic Church and its relationship to the health ministry; sponsorship issues; and the moral wisdom, social teaching, and scriptural foundations that guide Catholic healthcare today.

This program, sponsored by CHA's Center for Leadership Excellence and Mercy-sponsored and -cosponsored health systems, is designed for senior-level executives (e.g., chief executive officers, presidents, vice presidents) new to Catholic healthcare organizations.

For more information, call the Center for Leadership Excellence, or complete the business reply card inserted in this issue.

Program Coordinator:

Carol Tilley

Contact: Linda Raney

314-253-3507

JUNE 1997

8-11 82ND ANNUAL CATHOLIC HEALTH ASSEMBLY—"FIDELITY TO MISSION: OUR STRATEGIC STRENGTH"

Chicago

CHA's 82nd annual meeting will help leaders of Catholic healthcare systems and facilities, as well as sponsors and other ministry leaders, explore the power of mission in enabling them to create new forms of organizational and clinical responses to human need, develop distinctive market strategies, and ensure a strengthened ministry presence in health care. The assembly will feature a special presentation on supportive care of the dying and sessions on integrated delivery, continuum of care, clinical responses, managed care initiatives, sponsorship and governance, and public policy and advocacy. The headquarters hotel is the Chicago Marriott Downtown.

Contact: CHA Member Hotline

800-230-7823

COMMUNICATION STRATEGIES

Continued from page 68


and recorded our thoughts on core values, purposes, and long-term goals. We also described what we would like to see occur," says Robert Parke, MD, medical director of Anaheim Memorial Medical Center, a member of MHS.

Parke and nine other physicians from the system's four campuses now act as MemorialCare's steering committee. Physicians from all MHS hospitals participate in focus groups or serve on task forces dealing with quality, marketing, information systems, or physicians.

AN AMBITIOUS COMMUNICATIONS PLAN

In 1997 MemorialCare is implementing a comprehensive communications plan, directed at physicians, payers, employers, hospital employees and volunteers, clergy, community leaders, and the general public. A MemorialCare brochure that showcases the MHS facilities, includes patient stories, and charts clinical outcomes has already been well received by physicians, payers, and employers. The plan also includes bimonthly newsletters to its target audiences; hospital programs that will showcase statistical outcomes and allow payers and employers to witness surgeries and other medical procedures; ongoing evaluation of MemorialCare by MHS employees and physicians; and advertising campaigns during employers' open enrollment periods for health plans.

Collins realizes that MHS facilities and their medical staffs must define a position in the marketplace as the health system of choice based on quality and value. "While other systems promote their names to establish brand recognition, we have the ability to back up our brand name by examining and improving patient care to meet and exceed recognized benchmarks." □

 For more information, call Byron Schweigert, PharmD, at Memorial Health Services, 310-933-9455.