

# Tracking Performance Improvement in Hospital Emergency Management

## The Problem

Emergency Management is fairly new to the hospital arena; currently there are no standard methods to evaluate the effectiveness of our emergency management program. After every incident and exercise that occurs at the Medical Center we identify areas for improvement in our response and procedures. What we hadn't realized was that all of the areas for improvement are the best learning tools we have; these are termed corrective actions.

## Aim/Goal

Utilizing the Corrective Action Matrix, Emergency Management (EM) has developed a Performance Metric used to evaluate the effectiveness of the Emergency Management Program at BIDMC. The EM Performance Metric compiles the corrective actions for each quarter and sorts them by date observed and date recommendation completed. We then use that quarterly data to track our performance goal of completing 90% of all corrective actions within 90 days of the event or exercise. The EM Program was effective in 2011 through the accomplishment of reaching our target of over 90% for 3 of 4 quarters.

## The Team

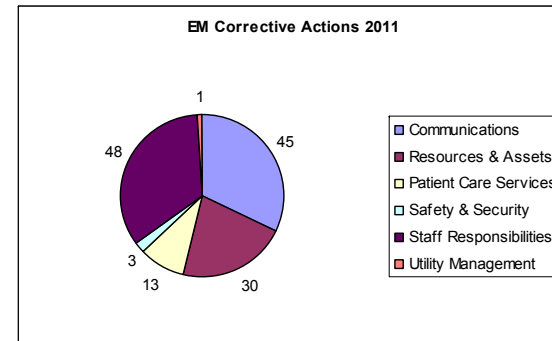
Meg Femino, Director, Emergency Management  
Bryan Sears, Project Manager, Emergency Management  
John Mangino, Project Manager, Emergency Management  
All participating departments across the BIDMC community

## The Interventions

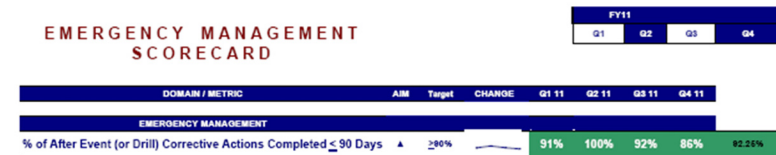
- Areas for improvement are identified across all areas of the medical center during an event or exercise debrief, in 2011 BIDMC responded to 15 drills and 19 events
- In order to accurately track all of these corrective actions we developed a Corrective Action Matrix tool. The matrix differentiates the corrective actions into the six critical functions in emergency management according to The Joint Commission. This system also allows us to track when we complete recommendations, by whom and retest each of these items.
- Determining why the area needed improvement and recommending a corrective action
- The EM Team weekly reviews and works with groups to provide solutions to actions listed that require correcting

## Summary of Results/Progress

Diagram depicting the breakdown of corrective actions by critical function-  
In FY 2011 there were a total of 140 areas for improvement identified.  
Communications and staff responsibility issues had the highest volume of the six critical areas tracked



Spark line depicting Emergency Management performance metric by quarter



## Lessons Learned

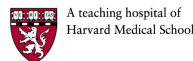
Capturing data and sorting by critical function gives us a useful picture of our greatest area needing improvement. This is essential information when developing EM goals for the next year in continuous improvement. It is important to track these corrective actions on a weekly basis to ensure a high level of completion.

## Next Steps/What Should Happen Next

- Our next step in “tuning” the EM Performance Metric is to implement a “point scale” for different categories of corrective actions (i.e. Rating a corrective action involving life safety higher than a corrective action involving a laptop in the command center not functioning)
- Developing an “EM Performance Cycle” from our performance tracking system that can be duplicated across all hospital emergency management as a performance standard



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