The Partnership for Patient Care (PPC) is a collaboration with Independence Blue Cross and the region’s hospitals which began in 2006 to accelerate the adoption of evidence-based clinical practices by pooling the resources, knowledge, and efforts of healthcare providers and partners. As a signature program of the Health Care Improvement Foundation (HCIF), PPC’s vision is to be the safest region in the country. This unique collaboration between payer and providers to share successful experiences and to jointly fund quality and patient safety improvement initiatives has been recognized as a national model. The inclusive and collaborative nature of PPC’s improvement efforts has enabled the region to transcend a highly competitive provider marketplace and foster partnerships with organizations that share a common desire for quality improvement.

The Health Care Improvement Foundation (HCIF), an independent non-profit organization based in Philadelphia, provides program support and coordination for PPC initiatives. HCIF’s mission is to drive high-value health care through stakeholder collaboration and targeted quality improvement initiatives. Using HCIF’s approach, PPC is an outstanding example of how advances in quality care can be achieved through large-scale regional collaboration.

PPC’s unique model of payer / provider collaboration has enjoyed robust levels of participation each year. Despite increasing merger and consolidation activity among SE PA health systems in 2016-17, there were 107 hospital/health system teams (from 36 organizations) engaged in regional programs, higher than all but one of the previous years. This increase can be attributed to the launch of the Regional Safe Community in 2017.

Since 2006, the region’s hospitals have worked together on a variety of PPC topics aimed at improving the quality and safety of care delivered to patients in our region. Topics are selected by HCIF’s Clinical Advisory Committee, a voluntary expert panel of healthcare providers and partners from organizations across Southeastern PA established by HCIF’s Board of Directors. The committee also has the important role of providing input into programmatic development, monitoring the progress of each collaborative, making recommendations as needed, and determining program strengths and opportunities for continued improvement. PPC has funded over 23 collaboratives addressing a variety of quality and safety priorities.

The profiles below describe the collaborative work funded by PPC in 2017.
Regional Safe Community

HCIF’s Clinical Advisory Committee initiated discussions in 2016 about its next PPC collaborative topic for the 2017 agenda. In those discussions, committee members acknowledged the role of PPC in establishing a strong, supportive, noncompetitive regional community on safety. Committee members agreed that a priority for 2017 was to continue to build on the trust and transparency among our region’s patient safety and quality leaders. They recommended a PPC program where patient safety and quality leaders discuss and learn from actual events of harm, a departure from traditional topic-specific programs. In addition, committee members expressed interest in developing a patient safety curriculum that builds proficiency in the investigation of events and the implementation of strategies that prevent reoccurrence. After months of planning and vetting potential programmatic options, HCIF launched this major multi-year PPC initiative in 2017, entitled, “Regional Safe Community”. The expressed purpose of the Regional Safe Community is to advance the PPC vision by collaborating and learning from safety event experiences and sharing patient safety methodologies and best practices. The program is comprised of two key components, PPC Safe Table and Safety Forum, both of which are described below.

- **PPC Safe Table** is a regional forum of hospital Patient Safety Officers that promotes transparency in discussions about actual patient safety events and where solutions and best practices are shared. ECRI Institute Patient Safety Organization (PSO), a federally listed PSO, provides a legally protected environment for this peer-to-peer exchange of safety experiences and Patient Safety Work Product. Participation is voluntary and limited to PPC-contributing hospitals only. In 2017, 10 hospitals/health systems joined the safe table program, far surpassing the year one goal of 5. A total of two safe table meetings were conducted in which common themes emerged, resources were shared among organizations, and best practices were discussed.

- **The Safety Forum** is for front line patient safety leaders across Southeastern PA that promotes interactive discussions about safety hazards and vulnerabilities. Participation is voluntary and open to front line leaders and staff from acute and non-acute health care organizations in the 5-county Southeastern PA region. In 2017, two safety forum workshops were conducted. The workshops were attended by a combined total of 70 individuals from 12 hospitals/health systems. At the recommendation of HCIF’s Clinical Advisory Committee, the 2017 priority was to provide hospital improvement teams with the knowledge, approaches, tools and best practices for conducting cause analyses in order to build proficiency in event investigation and the implementation of actions that prevent reoccurrence.

Pennsylvania Urology Regional Collaborative (PURC)

Pennsylvania Urologic Regional Collaborative (PURC) is a quality improvement initiative that brings major urology practices together in a physician-led, multi-year, data-sharing and improvement collaborative aimed at advancing the quality of diagnosis and care for men with prostate cancer. PURC, established with PPC funding in February 2015, currently has nine participating urology practices from across Pennsylvania and southern New Jersey. The PURC program funding is through the support of PPC, independent practice funding and grants.

Participating practices continue to submit patient-level data to a cloud-based clinical registry. Various quality initiatives have taken place because of the access to data analytics, practice specific reports and working group meetings. In 2017, an additional working group originated for a total of four. The working groups currently are concentrating on Active Surveillance, Biopsy, Genomic and Imaging practices in prostate cancer care. Physician champions from each of the practice sites are responsible for reviewing and disseminating their practice reports, leading their practice improvement efforts, participating in one of four program workgroups, and joining program meetings. In addition to quality improvement activities, PURC manages a registry that tracks the outcomes of over 6,200 patients in order to share best practices in diagnosis and treatment. With its statewide reach and involvement of over 100 urologists, PURC is well positioned to advance and spread the results of the
project to other practices to enhance the value of the registry. HCIF serves as the PURC “coordinating center”, provides administrative, clinical, analytic and database support for program members.

Addressing the Prostate Cancer Issue - What facilities are doing:

- Participating in a reliable, sustainable platform for prostate cancer data collection with real time feedback to identify practice trends and provide regional benchmarks. At the close of 2017, the PURC registry was tracking the diagnosis, treatment and outcomes for over 6,200 patients.
- Continuing to reduce variation in diagnostic services such as bone scan utilization and care delivery including addressing the costs of “over-diagnosis” and “over-treatment” related to the increase in prostate cancer screening. As of 2nd quarter 2017, the PURC aggregate rate of bone scan utilization when not indicated has decreased from 30.1% to 13.2%.
- Participating practices are characterizing current Active Surveillance practice patterns to decrease variability among institutions and individual practitioners and increase utilization among men with low risk prostate cancer.
- Expanding patient-centered decision-making among men faced with treatment choices for prostate cancer.
- Identifying the role of molecular diagnostics and genomics and its integration into clinical practice through data collection and survey collection. All PURC providers received a survey fall 2017, which revealed that 75% of the respondents are ordering biomarkers.
- Participating in collaborative discussions among physician champions that promote innovation and dissemination of best practices. Providers are sharing collaborative outcomes at national and regional conferences such as the American Urologic Association and the Society of Urologic Oncology.
- Participating providers have added additional demographic variables to the registry to increase the understanding of disparities in prostate cancer care by age, race, address, education and marital status.

2017 PPC Leadership Summit

The annual Partnership for Patient Care Leadership Summit was held on Thursday, March 23, 2017, at the Top of the Tower/Sky Philadelphia at 1717 Arch St. in Philadelphia. Over 100 healthcare leaders and partners were in attendance. Nationally-known patient safety expert James Bagian, MD, PE was featured as the keynote speaker, presenting his insights and reflections on safety culture and error prevention. As in years past, attendees shared in the recognition of the “top ten” entries for the Delaware Valley Patient Safety & Quality Award program. The First Place Award Entry was presented by Subha Airan-Javia, MD from the University of Pennsylvania Health System for the innovative initiative “Clinical Data App: Upgrading from Outdated Paper to Real-Time Interdisciplinary Mobile Handoffs.” Christina Michalek, BSc, Pharm, RPh, FASHP from ISMP also presented findings from the regional PPC collaborative evaluating hospital CPOE systems. Attendees also learned about PPC’s newest collaborative, Regional Safe Community.

2017 Delaware Valley Patient Safety and Quality Award Program

PPC has funded the Delaware Valley Patient Safety and Quality Award Program since 2002. The program is one of many ways in which HCIF promotes best practices in health care patient safety and quality throughout the region. The award recognizes hospitals and other providers for their innovative contributions in advancing patient care. Winners are selected by a two-tiered judging process involving regional quality and patient safety leaders and experts. Healthcare organizations/health systems with an entry in the top ten showcase their initiative at HCIF’s annual PPC Leadership Summit; the first place winner is a featured presenter at the Summit. In addition, winning entries are highlighted on HCIF’s website. In 2017, HCIF received 31 entries. The first place award winner was Jefferson Health with a submission entitled, “Implementation of a Patient Blood Management Program”. At the suggestion of HCIF’s Clinical Advisory Committee in 2017, HCIF will expand the dissemination of the programs by conducting a webinar in 2018 featuring short presentations by the top ten submissions.