

Joint Commission Leaders Author JAMA Viewpoint on High Reliability Strategies

In the May 12, 2015, issue of the *Journal of the American Medical Association* (*JAMA*), a Viewpoint coauthored by The Joint Commission's president and chief executive officer, Mark R. Chassin, MD, FACP, MPP, MPH, and executive vice president for Healthcare Quality Evaluation, David W. Baker, MD, MPH, calls on physicians to acquire the skills necessary to become leaders for quality improvement and safety in an increasingly complex health care environment.

The Viewpoint, "Aiming Higher to Enhance Professionalism: Beyond Accreditation and Certification,"* is part of a *JAMA* theme issue on the topic of governance and professionalism in medicine. In the column, Chassin and Baker note that medicine has too often tolerated problematic behaviors and is viewed by some stakeholders as failing to address issues such as poor quality of care and safety, lack of access to health care, and the high cost of care. This persistent behavior is now drawing threats to medicine's self-governance from government officials, private organizations that purport to judge quality, and consumers demanding more accountability. The best way to mitigate those threats, according to the column, is to place physicians at the forefront of health system efforts to improve.

"Physicians could make a much stronger case for continued self-governance if they took a more visible and vigorous leadership role in efforts that led to major improvements in the quality and safety of patient care," Chassin and Baker write. "In the past, it might have been enough for individual physicians to work hard and

> provide care to patients to the best of their ability. Medicine was far more art than science. However, health care today is too complex for a single physician's isolated efforts to be successful. Systems of care are necessary to achieve the highest levels of safety and quality."

> > In addition, medical societies and

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^{*} Chassin MR, Baker, DW. Aiming higher to enhance professionalism: Beyond accreditation and certification. JAMA. 2015 May 12;313(18):1795–1796.

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accrediting and certifying organizations must change as well so they can assist physicians in leading this change, the authors state.

"Medical societies have emphasized to their members that working to improve quality is part of physician professionalism. Accrediting and certifying organizations can work in tandem with medical societies to help make this a reality," Chassin and Baker write in the article. "But just as health care has changed, the organizations that perform standard accreditation and certification functions will need to change to be effective in this new environment."

The authors note that the traditional approach of comparing performance to standards is only able to find deficiencies, such as failure to meet accreditation requirements during an onsite survey or wrong answers on a certification test. That approach, by its design, is unable to recognize or foster excellence. Instead, they recommend an approach built on the principles of high reliability to achieve far-reaching, systemic changes in patient safety and quality of care:

- State simply and clearly that the ultimate goal is zero harm for patients and health care workers. This means always delivering effective care, freedom from complications of care, and elimination of care that has no value (overuse).
- Physicians and organizations should master the tools, methods and science that businesses outside of health care have used to facilitate the magnitude of such improvements.

These tools of Lean, Six Sigma, and change management, along with the science of high reliability, provide this capability.

• Accrediting and certifying organizations must develop new programs to foster, identify, and publicly recognize consistent excellence. These should be seamlessly integrated with the traditional—and necessary—accreditation functions.

The Joint Commission already has taken on these three strategies and fully adopted Lean, Six Sigma, and change management for all of its internal improvement functions. In addition, the Joint Commission Center for Transforming Healthcare, which functions separately from the accreditation programs, has embraced these tools as well as high-reliability science and uses its programs and tools to engage physicians and health care organizations in this effort.

"Physicians should demand and lead new efforts to eradicate patient harm and produce consistent excellence across the full continuum of care," Chassin and Baker write at the conclusion of the article. "This strategy is the best way to ensure society will continue to entrust self-governance to the medical profession."

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