

USACS CLINICAL MANAGEMENT TOOL (CMT) PROGRAM

ALIGNING CARE WITH THE BEST EVIDENCE TO IMPROVING EFFICIENCIES AND PATIENT SAFETY

THE PROBLEM:

Working in a busy emergency department (ED) or inpatient hospital setting is increasingly challenging. Managing clinical complexity, encountering high cognitive load and sometimes dysfunctional systems of care leads to high rates of burnout.

As a result, there is potential for variation in how physicians and advanced practice providers (APPs) approach specific chief complaints or diagnoses. A high degree of clinical variation is inefficient. It can also result in suboptimal patient outcomes, particularly when best practice approaches that align with the latest evidence are not used. Additionally, clinical variation increases the risk of adverse events, medical errors, and malpractice litigation.



CLINICAL
MANAGEMENT TOOL

THE SOLUTION:

To address clinical variation and ensure every patient receives the same, high-quality care, US Acute Care Solutions (USACS) has developed and implemented >30 clinical management tools (CMT). CMT are targeted towards common presentations and diagnoses where clinical variation exists and evidence from the literature can be integrated to optimize quality of care. CMT are designed to be usable, helpful resources for frontline physicians and APPs.

CMT are based upon the latest data from USACS, medical literature, and expert clinician expertise. CMT include carefully curated language to minimize the risk of adverse events and medical errors, and that care is delivered in the most efficient manner. Additionally, CMT provide medicolegal protections to clinicians, justifying medical decision-making by harnessing the power of the literature, statistical rigor, and practice bedside care.

THE RESULT:

Across USACS, CMT are at the heart of our strategy to improve care for every patient and are regularly used on shift. In 2020, CMT were utilized almost 94k times. This increased to nearly 176k in 2021, 284k in 2022, and 391k in 2023.

As a key result of CMT, patient adverse events and medical errors are considerably lower at USACS sites. This is demonstrated in the rate of malpractice claim frequency among ED visits, which is half the industry average (See figure depicting USACS claims over time compared to AON, which is an industry benchmark).

Malpractice exposure — USACS vs national average
(claims per 100,000 ED visits)

