

Einladung

**Qualität im Gesundheitswesen:
Kultur – Kennzahlen – Steuerung**

**KCQ-Tagung
14. Februar 2020
Hotel Aquino
Berlin**

CONTINUOUS IMPROVEMENT AS AN IDEAL IN HEALTH CARE

THE NEW ENGLAND JOURNAL OF MEDICINE

Jan. 5, 1989

We are wasting our time with the Theory of Bad Apples and our defensive response to it in health care today, and we can best begin by freeing ourselves from the fear, accusation, defensiveness, and naiveté of an empty search for improvement through inspection and discipline. The Theory of Continuous Improvement proved better in Japan; it is proving itself again in American industries willing to embrace it, and it holds some badly needed answers for American health care.

Harvard Community Health Plan
Brookline, MA 02146

DONALD M. BERWICK,
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THE NEW ENGLAND JOURNAL of MEDICINE

SOUNDING BOARD

Balancing “No Blame” with Accountability in Patient Safety

Robert M. Wachter, M.D., and Peter J. Pronovost, M.D., Ph.D.

N ENGL J MED 361:14 NEJM.ORG OCTOBER 1, 2009

main reason to find the right balance between “no blame” and individual accountability is that doing so will save lives.

EDITORIAL

‘Bad apples’: time to redefine as a type of systems problem?

Kaveh G Shojania,^{1*} Mary Dixon-Woods^{2**}

To cite: Shojania KG, Dixon-Woods M. *BMJ Qual Saf* 2013;22:528–531.

Quality and Innovation in Cardiothoracic Surgery: Colliding Imperatives?

Joseph E. Bavaria, MD

University of Pennsylvania, Philadelphia, Pennsylvania

Ann Thorac Surg 2018; 106: 1278-82

„... The STS believes that „the public has a right to know the quality of surgical outcomes and considers public reporting an ethical responsibility of the speciality ...“

„... Many believe that the imperatives of quality and innovation are irreconcilable.

That new innovative approaches are inherently higher risk. And that the early adopters will suffer from decreased quality ...“

- *„Exclusion of certain conditions“*
- *Exclusion of „clinical research“*
- *„... explore the concept of patient-centered or patient-reported outcomes“*

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10:15–10:50 Uhr

**Qualität: Kultur, Kennzahlen, Steuerung im
Management komplexer Prozesse**

Prof. Dr. Benedikt Meier

10:50–11:25 Uhr

**Qualität: Kultur, Kennzahlen, Steuerung –
Konsequenzen im klinischen Alltag**

Dr. med. Harald Hollnberger

11:25–12:00 Uhr

**Eignung von Qualitätsindikatoren für eine externe
Steuerung im Gesundheitswesen**

Dr. Dennis Boywitt

12:00–12:15 Uhr

Diskussion

Individuelle Patientenversorgung ...

... standardisierte „Messung“ ärztlich-pflegerischer Leistung

Güte der „Qualitätsmessung“ ...

... Nutzung für externe Steuerung