

# Dr. Liem wins *Contribution in Clinical Care Quality Award*

**Timothy Liem, M.D.** was nominated by the Professional Staff at OHSU for his outstanding contribution in clinical care. Dr. Liem, with **Brett Sheppard, M.D.** and **Jennifer Murphy, M.D.** formed the Quality Management Committee in 2010 as a tool to reach an overall goal. This goal, Dr. Liem explains, is to reduce unnecessary variability in the care of surgery patients, which will ultimately lead to overall improved care. **John Hunter, M.D.** appointed Dr. Liem as the Vice-Chair for Quality and since then, Dr. Liem and committee members have spent extra hours speaking with professionals, specifically other physicians and hospital administrators, to learn about healthcare quality practices at other highly regarded institutions. He also emphasizes the importance of meeting with surgical residents to learn more about what works for them because they are a critical component of the surgical team.

Initiatives are now in place for all surgical care providers to have access to consistent resources and best practices. Dr. Liem highlights the work of the IT team, **Ed Wolf** and **Sherry Hall**, who have been integral in the formation of a “quality intranet.” This new website provides resources for best practices, quality plans and practice guidelines. The practice guidelines, which are still in beginning stages, will provide instructions for surgical procedures for the residents, depending on the attending’s preferences. Instead of guessing how a specific doctor likes to do a procedure, the resident will arrive prepared. Furthermore, the intranet will incorporate the Morbidity & Mortality database, which is being converted from the current paper system. “The goal is not to add more work to everyone’s plate,” says Dr. Liem. “The goal is to improve efficiency and communication and make the data we already use more usable.”

Dr. Liem is confident that the committee’s work and long hours are already paying off. He says, “It does take an investment of time and money from ourselves as well as the administration to reduce variability, but in the end, it will be cost saving and more importantly, better for patients.”

