Eastern Association for the Surgery of Trauma

28th Annual Scientific Assembly

Sunrise Session 15
Breaking Down Cultural Walls Preventing Effective Emergency Department
and Hospital Throughput

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Disney's Contemporary Resort
Lake Buena Vista, Florida

BREAKING DOWN CULTURAL WALLS PREVENTING EFFECTIVE ED AND HOSPITAL THROUGHPUT

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Reflection

There are three constants in life….
CHANGE
CHOICE, and
PRINCIPLES
- Steven Covey

Objectives

- Discuss the impact of regulation and consumer expectations on the evolution of ED operations.

- Identify opportunities for redesign at the front, middle, and back end of your ED flow.

- Describe impact on throughput improvement on quality, service, and finance performance.

Sharp Memorial Hospital

- Community Hospital
- Level II Trauma Center
- Base Station (Radio Room)
- 400 operational beds
  - 48 ICU Beds (+10 overflow)
  - 44 Short-Stay/Observation
- Private Inpatient Rooms
- 49 Bed ED
  - 40 ED
  - 4 Trauma
  - 2 Decon
  - 3 Quick Care

WHY MUST WE CHANGE?

Regulation
Overcrowding
Patient Satisfaction
Tradition

Regulatory Scrutiny

- Mandates to provide care (EMTALA, CMMS)
- Fear of retribution and litigation
- Refusal to pay (Medicare and Private)
- $$$ tied to patient experience
- $$$ tied to quality (readmissions, mortality)

   = Higher Cost of Care

Overcrowding

- Full lobbies have become the norm, not the exception
- It's a daily phenomenon
- More patients than beds
- Aging Population
- Bypass overutilization

APPROVED: Standards Revisions Addressing Patient Flow Through the Emergency Department

The Joint Commission approved standards revisions to focus that address patient flow through the emergency department (ED) as a hospitalwide concern as well as an issue of safe provision of care for boarded patients. The revisions include enhancements and additions to "Leadership" (LD) Standard LD.04.03.11, known as "the patient flow standard," and "Provision of Care, Treatment, and Services" (PC) Standard PC.01.01.01, which includes expectations that relate specifically to the experience of patients with behavioral health issues. Most of the revised ED-focused standards become **effective January 1, 2013;** for **hospitals,** however, two requirements will be deferred for one year.

Patient Dissatisfaction

- It's the typical expectation for ED care
- High ER wait times and long length of stays
- Patients leaving without being seen or treated
- Inconsistent performance
- Perception of poor quality of care
- Dissatisfaction continued for admitted patients

Tradition

- Rarely patient centric
- Bad, old, or no science behind practices
- Unable to adapt with healthcare evolution
- Divides a unit across generational lines
- Settling for Good Enough
- "Its the way we have always done it"
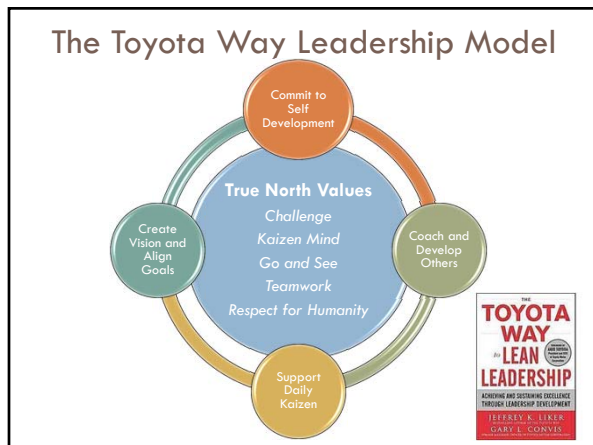
TRUE NORTH VALUES

Lean – Sharp – Piedmont

The Toyota Way Leadership Model

Commit to Self Development

Create Vision and Align Goals

True North Values
Challenge
Kaizen Mind
Go and See
Teamwork
Respect for Humanity

Coach and Develop Others

Support Daily Kaizen

THE
TOYOTA WAY
An **LEAN LEADERSHIP**
ACHIEVING AND SUSTAINING EXCELLENCE
THROUGH LEADERSHIP DEVELOPMENT

JEFFERY K. LIKER
GARY L. CONVIS

Sharp Healthcare's Vision

Sharp Healthcare's vision is to be the **best health system in the universe**.

The best place to work
The best place to practice medicine
The best place to receive care

SHARP.
San Diego's Health Care Leader ™
1-800-82-SHARP www.sharp.com

No Change, No Change

- □ Sharp Experience starts in 2001
- □ 2009 – moved into beautiful new building
- □ No Change in Experience
- □ Deep divide between staff and leadership
- □ Stuck in daily survival mode

Getting Lean*ER*

- □ Focus on the Patient Experience
- □ Improve Patient Satisfaction
- □ Increase Efficiency Through Waste Reduction
  - □ Reduce ED Patient Length of Stay & Wait Times
- □ Improve Staff Satisfaction
  - □ Education, Team Development, Standard Work
- □ Improve Physician Satisfaction

What is Lean?

A methodology that focuses on
- Improving *Workflow*
- Eliminating *Waste*
- Delivering *Value*

The Toyota House

Goals: Safety, Quality, Time, Cost, Morale

FLOW		QUALITY
Prevent delays		Identify root causes
Value-stream focus	Developing People	Prevent errors at the source
Pull systems		Involve employees
Right care, Right place, Right time		Avoid blame

Heijunka (Leveling Load)	Standardized Work	Kaizen (Continuous Improvement)
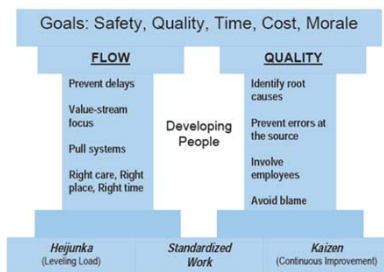
The Toyota House from Graban, M. *Lean Hospitals: Improving Quality, Patient Safety, and Employee Satisfaction,* New York, NY: Productivity Press, 2009, p74.

COMMIT TO SELF DEVELOPMENT

Learn to live through true north values

Leader and Team Study

☐ Resources Available

LEAN HOSPITALS

THE TOYOTA WAY to LEAN LEADERSHIP — ACHIEVING AND SUSTAINING EXCELLENCE THROUGH LEADERSHIP DEVELOPMENT — JEFFREY K. LIKER — GARY L. CONVIS

Managing to Learn — Using the A3 management process to solve problems, gain agreement, mentor, and lead — by John Shook
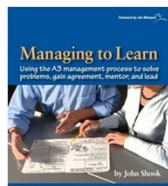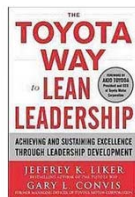
Building New Leadership Habits

- Avoid office and boardroom management
- Respect your staff buy engaging them in change
- See and ask, don't tell or demand
- Challenge your high performers

COACH AND DEVELOP OTHERS

See and challenge true potential in others

Change Readiness

Early Majority

Late Majority

Early Adopters

Innovators

Laggards

2.5%   13.5%   34%   34%   16%

Rogers Diffusion Of Innovation Bell
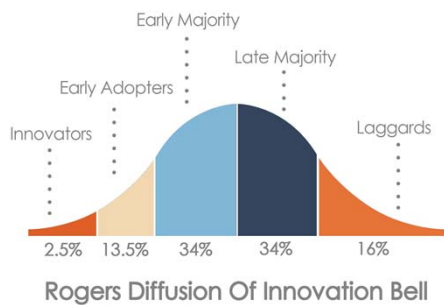
Change Management Support

- Lean Six Sigma Master Black Belt
  - Embedded in ED
- Green Belt
- Lean Leader Training
  - Frequent Meetings
  - 5S Projects to get ball rolling
- Change Acceleration Process

Continually Soliciting Feedback and Ideas

- **Communication board in staff break room**
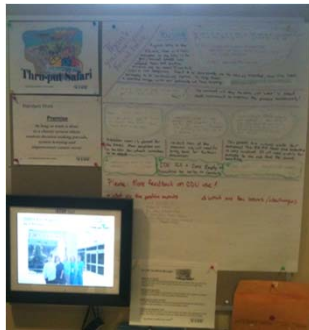
People Engagement: LeanER Newsletter

What are the challenges?
What is working well?

- RN Response
- MD Response
- Health Care Partner Response

Reward & Recognition
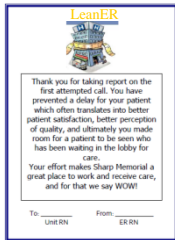
LeanER

Thank you for taking report on the first attempted call. You have prevented a delay for your patient which often translates into better patient satisfaction, better perception of quality, and ultimately you made room for a patient to be seen who has been waiting in the lobby for care.

Your effort makes Sharp Memorial a great place to work and receive care, and for that we say WOW!

To: _____   From: _____
Unit RN   ER RN

SHARP HEALTHCARE
WOW
Who:
What:

Excellence In
Patient
Throughput

Intensive WOW Campaign

- Internal ER
  - Top Pod Leader
  - Top Team Member
- External ER
  - First Attempt Report (given by ER RN)
  - Top Charge RN

SUPPORT DAILY KAIZEN

Build local capability for continuous improvement

Managing to Learn
with the Kaizen Events, Try-storms, and A3

- ☐ Kaizen Event – Full day(s) documented the current, ideal, and target states.
  - ☐ Used these to take big process steps
- ☐ Trystorms – Rapid Cycle Improvement
  - ☐ Model team, area that would test new processes and measure outcomes
  - ☐ Nimble enough to change midstream
- ☐ A3 – Individual/Small Group PI
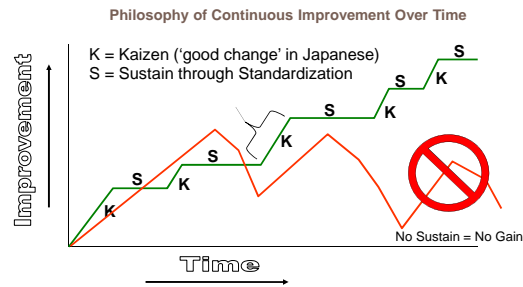 - ☐ Used on smaller process issues within the value stream

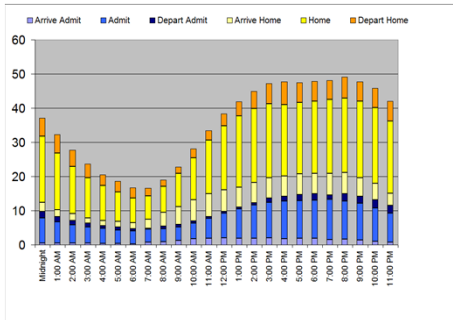## Lean Implementation Process

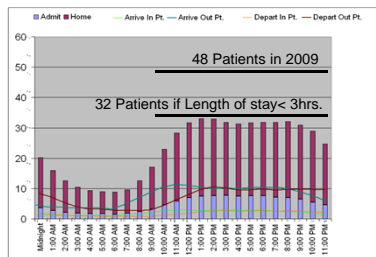**Philosophy of Continuous Improvement Over Time**

K = Kaizen ('good change' in Japanese)
S = Sustain through Standardization

Improvement

Time

No Sustain = No Gain

Analyze the needs of the patient

Arrive Admit · Admit · Depart Admit · Arrive Home · Home · Depart Home

Data Simulations Showed Compounding Benefits

SMH Census Simulation by Hour of Day "IF all LOS = 3 hours.
July to November 2009 (153 days)

Admit · Home — Arrive In Pt. — Arrive Out Pt. — Depart In Pt. — Depart Out Pt.

48 Patients in 2009

32 Patients if Length of stay< 3hrs.

More time for quality nursing care!

Managing the Message

- Our initiative is about achieving the best patient experience by improving patient flow.

- It is important for us to be *great all the time.* By improving efficiency in our work environment and improving patient flow, we will better meet the needs of our patients and staff.

- When successful, we will be able to provide great care in less than a 3 hour length of stay.

- What we need from you is more than support; we need your openness to new ideas, your active participation and your great ideas for a positive change.

Value Stream Map
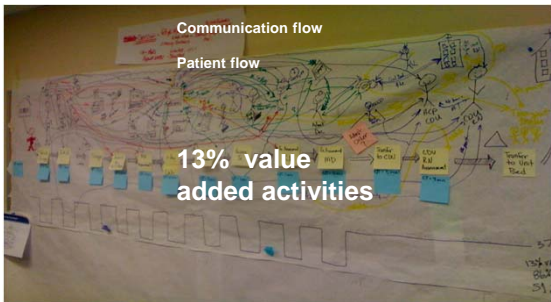
Communication flow

Patient flow

13% value added activities

Creating Solutions Through Kaizen Events

"All hands, hands on, all stakeholders."

1. Walk the process
2. Brainstorm Wastes
3. Sensing with coworkers
4. Integrate Lean philosophy
5. Test the new process
6. Create Standard Work
7. Seek feedback (Muda Board)
8. Reanalyze data

The Middle – Intradepartment

- Team Development *(Developing People)*
  - Team structure by pod*
  - Team member responsibilities *(Standard Work)*
  - Team leadership
  - Team accountability
  - Physician accountability

* A Pod is the functional unit of our department. There are 5 pods within our department

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The Middle – Intradepartment

- Targeted Solutions
  - Team Leaders with Self-Sufficient Teams
  - Top of the Hour Huddles
  - Co-assessment/Co-discharge
  - Bedside Triage
  - Work Station Re-Configuration
  - ED Patient Room Standardization
  - Diagnostic Turn Around Time
    - Lab
    - CT

The Back End

- Admission Throughput
  - The starting point
  - Started as service recovery
  - Alignment with strategic plan and organizational goals
  - Rapid Cycle Improvement
    - 100 day campaign to 60 minutes
    - Nurse Transport & Bedside Hand-off

The Front

- Growth opportunity is the discharged population
- Longer lobby waits for the "lowest acuity", but…
  - Patient satisfaction surveys
  - Risk of deterioration
  - Experience suffers
- Utilization of Observation Unit

Keeping the Momentum

- Strategic Planning and Priorities
- Ongoing Learning
- Frontline Engagement
  - Lean Meetings – Every 2 weeks
  - Town Halls – Monthly with Lean report out
  - Muda Boards – Ongoing
- Recent implementation of central placement - TeleTracking

CREATE VISION AND ALIGN GOALS

Alignment of goals vertically and horizontally

Target Selection Criteria

- Why 3 hours?
  - Press-Ganey - Identified the relationship between a patient experiences less than 3 hours and satisfaction scores reaching our goal of 90th percentile performance.

2009	Overall	> 3hr	<3hr
Overall Patient Satisfaction Rank	57th	40th	95th
Mean Score	84.3	82.8	89.1
N	3936	2883	1053

Targets

Sharp Memorial – All Nursing – CNO to ED Tech
- Admission Throughput – Order to Occupy < 60min
- Patient Satisfaction > 90%

Emergency Services
- Total ED LOS – Door to Dispo < 3 hours
- Total LOS for Quick Care – Door to Car < 90
- 100% Discharge Phone Calls

SUMMARY

Changing Culture

- Align with your principles, values, vision, and mission
- Chose the behavior you want to see from your leaders and your direct reports
- Structure yourself for continuous change
- Engage the early adopters and enlist the frontline to drive the change
- Manage the CAVEMEN with 10% of your time
- Coach yourself and your staff to be experts in performance improvement

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