

An ER Transformation:

From Modest Beginnings (2009), to Radical Redesign (2011), to Daily Continuous Improvement (2012)



By Joseph Swartz
December 6, 2012



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Learning Network II:

Step 1: Rapid Intake:

- Rapid triage.
- Short registration.



*2 Step
Triage*

Step 2: Comprehensive Triage:

- Step-by-step engineered comprehensive triage.
- Confirm ESI level.
- Charge nurse backup.
- Immediate bedding if room available.
- Full bedside or booth registration.



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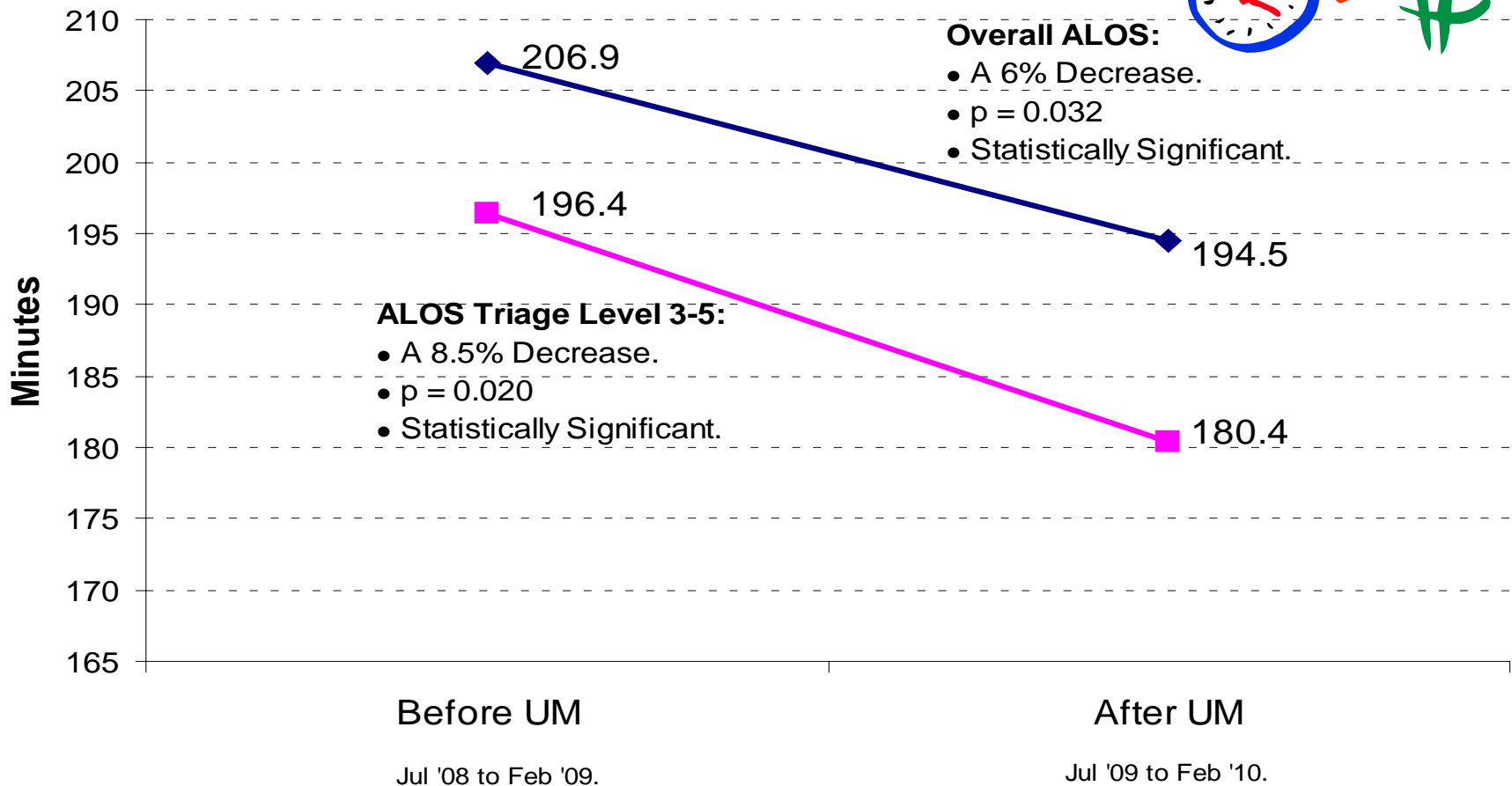
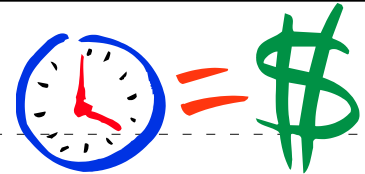
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LNII Results:

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- Reduced LOS, during a 3.3% increase in volume.

Average Length of Stay (ALOS)

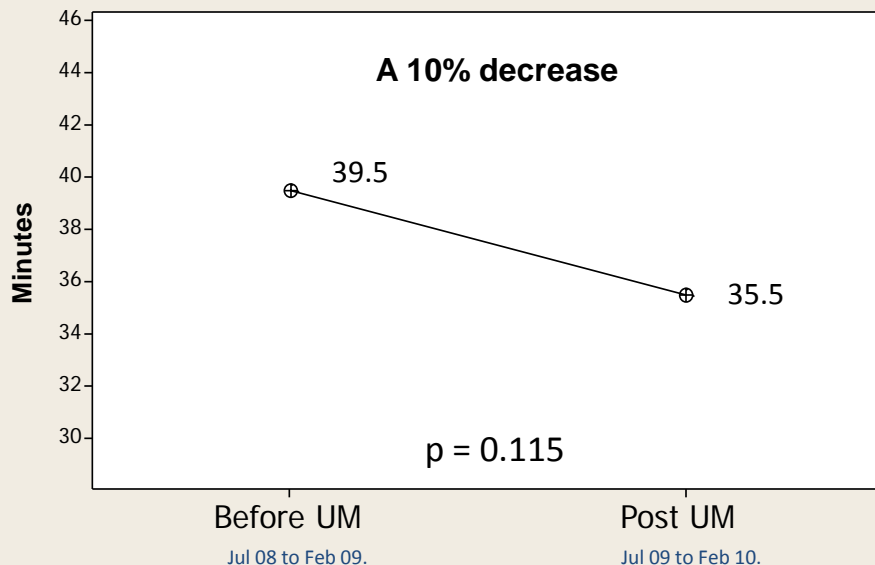


LNII Results (Continued)

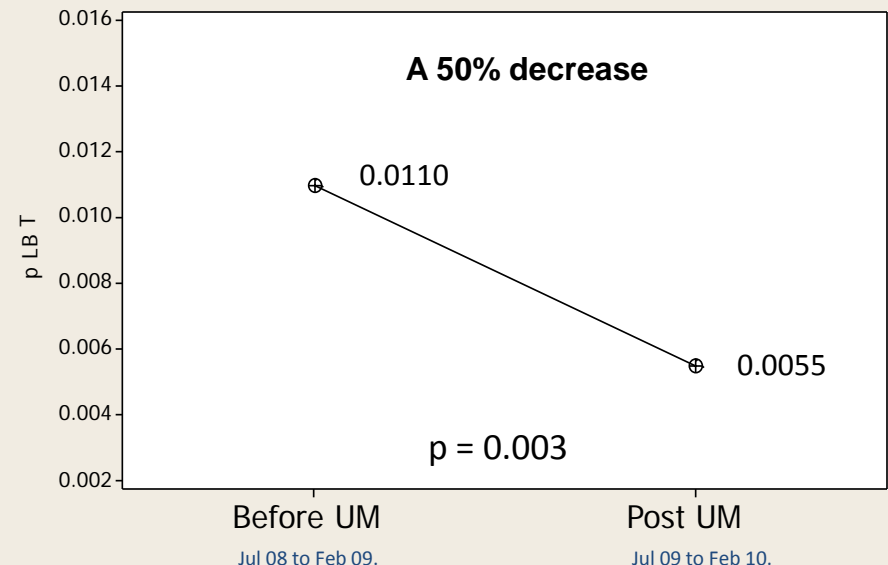


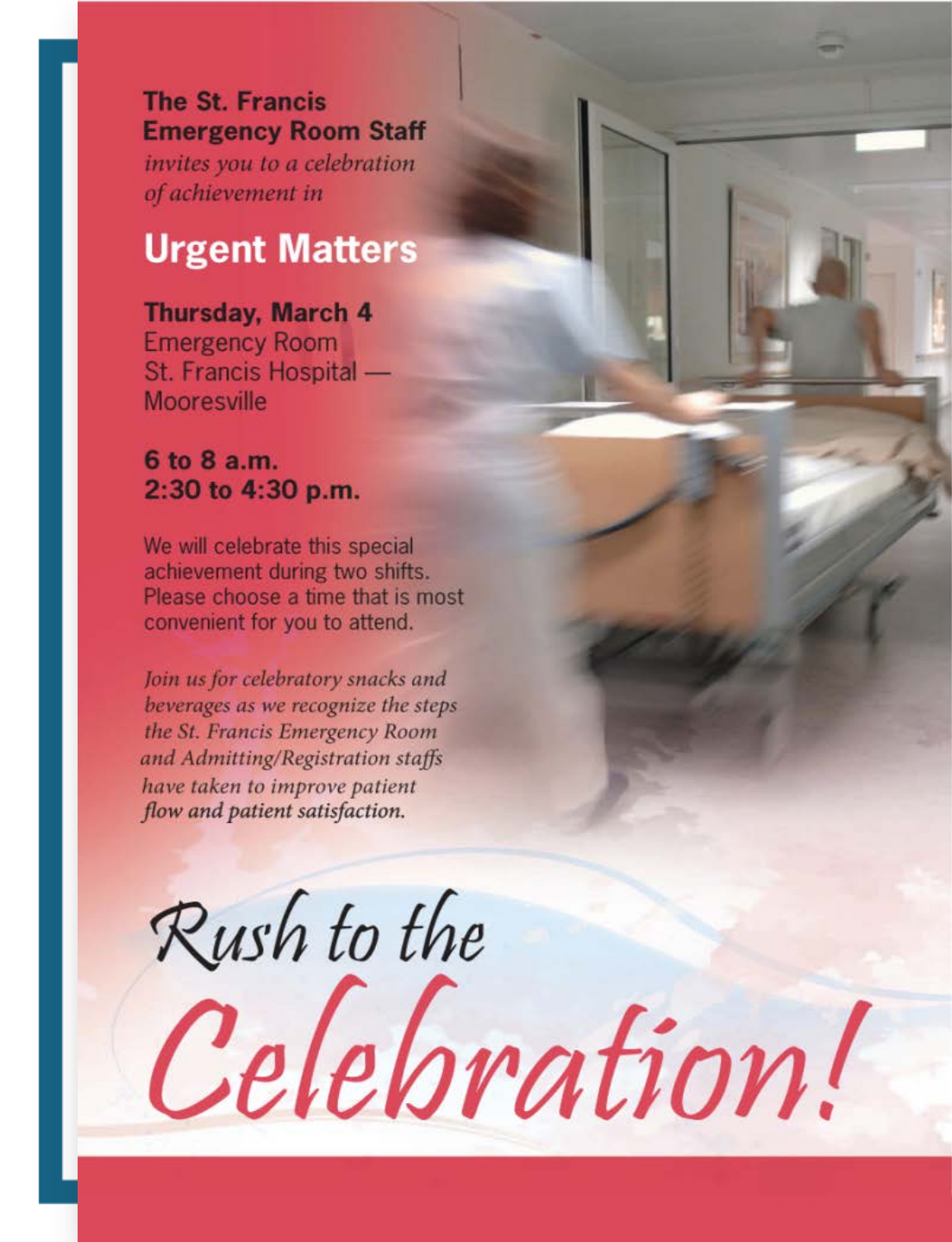
- Reduced Arrival to Bed Time.
- Reduced Left Before Triage (LBT).
- Reduced LWBS: 3.87% in 2008 to 2.62% in 2009.
- Improved communication and relationships between staff hospital-wide.

Arrival to Treatment Time



Proportion Leaving Before Triage (pLBT)





**The St. Francis
Emergency Room Staff**
*invites you to a celebration
of achievement in*

Urgent Matters

Thursday, March 4
Emergency Room
St. Francis Hospital —
Mooresville

6 to 8 a.m.
2:30 to 4:30 p.m.

We will celebrate this special achievement during two shifts. Please choose a time that is most convenient for you to attend.

Join us for celebratory snacks and beverages as we recognize the steps the St. Francis Emergency Room and Admitting/Registration staffs have taken to improve patient flow and patient satisfaction.

*Rush to the
Celebration!*

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Franciscan

ST. FRANCIS HEALTH



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The ESI 3 Conundrum

By: Adhi Sharma, MD, FACMT, FACEP

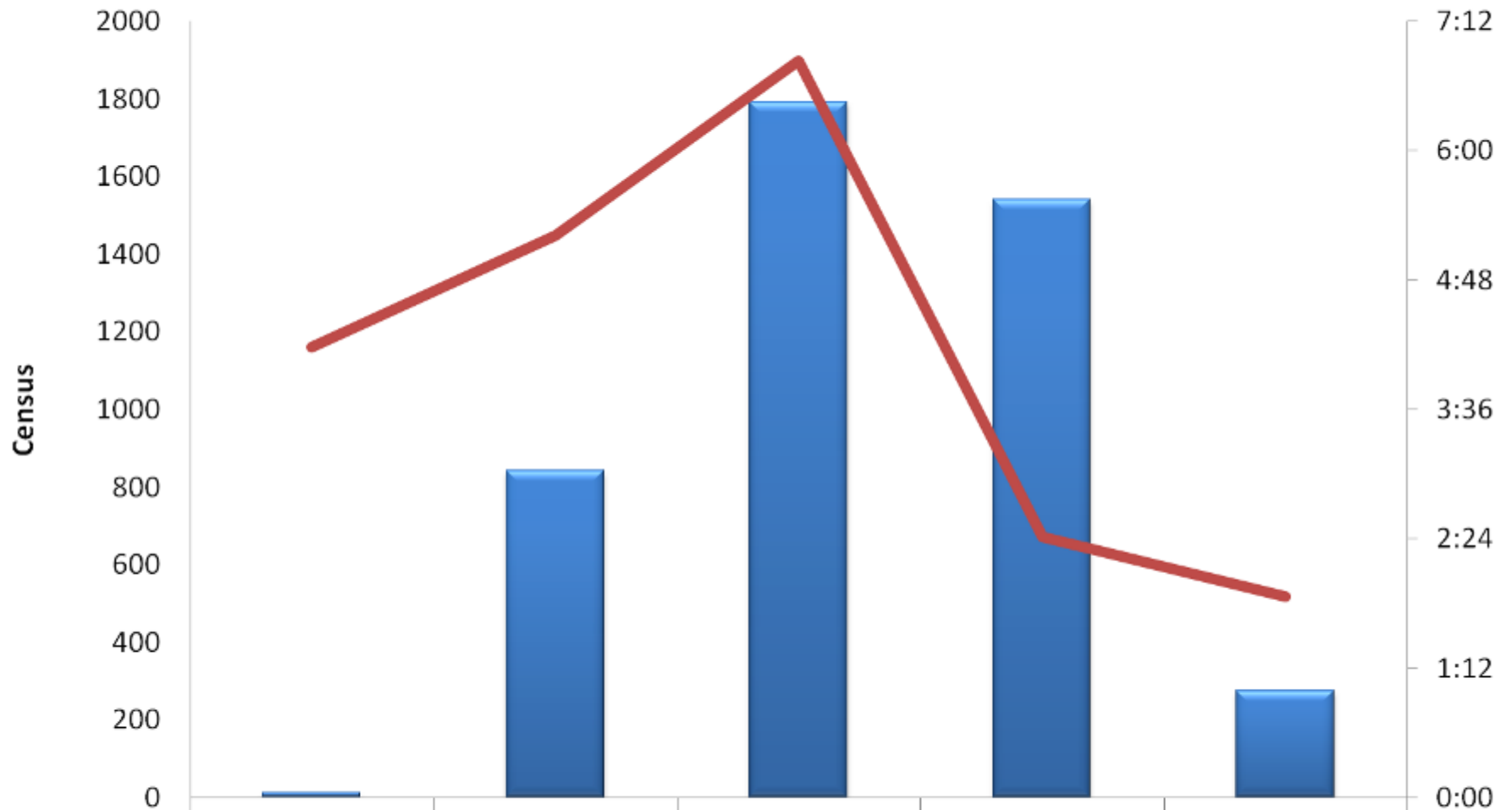


- Good Samaritan Hospital, Long Island, NY
- ER: 100,000 annual visits
- Solution: Mid-Track

Chief Complaint	LWBS Rate
Abdominal pain	4.6%
Flank pain	3.5%
Headache	5.5%
Pregnancy complication	5.3%
Vaginal Bleeding	6.1%
Vomiting	2.5%



IN ED January 2012 Census and LOS by Acuity



■ Census

— LOS

1

2

3

4

5

11

843

1793

1541

275

4:11

5:13

6:50

2:25

1:52

7:12

6:00

4:48

3:36

2:24

1:12

0:00

Census

St. Francis Hospital and the *Aligning Forces for Quality (AF4Q)* Hospital Quality Network (HQN)



St. Francis
Hospital & Health Centers
Sisters of St. Francis Health Services, Inc.

**Aligning Forces
for Quality** | Improving Health & Health Care
in Communities Across America


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AHRQ/HRET Web Conference:

**Implementing the Door-to-Doc
Model for Safer Care in the
Emergency Department**

April 16th , 2010



Site Visits

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- Ochsner’s “qTrack” Process, New Orleans
 - 3 MDs, 1 PA, 1 NP, 1 Manager, me
- Banner Health’s “Split Flow” Process, Phoenix
 - 3 MDs, 1 Director, 2 staff RNs, me
 - 29 minute D2D, 192 minute D/C LOS
- Wishard Health Services, Indianapolis
 - 2 MDs, 1 NP, 1 Director, 1 Manager, 1 RN, 1 CNS, me
 - D2D: 90 → 31 minutes; D/C LOS: 240 → 150 minutes


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NOW **ER**

FRANCISCAN ST. FRANCIS EMERGENCY CARE

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Emergency Care Is An Urgent Matter



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NOW **ER** Leadership

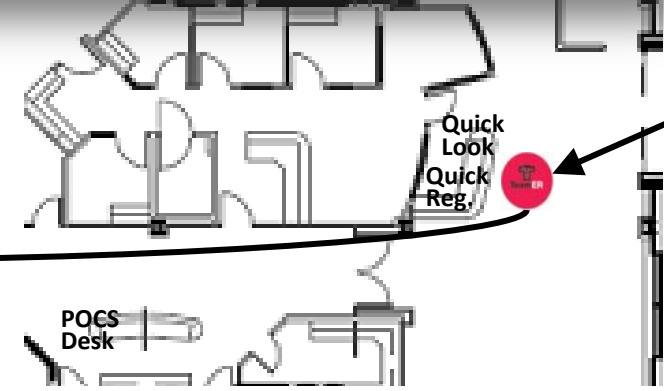
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- Administrative Champions:
 - Keith Jewell (COO), Susan McRoberts (CNO), and Christopher Doerring (CMO).
- Physician Leaders:
 - **Michael Russell (VP EPI)**, Randall Todd (Medical Director)
- Nursing Leaders:
 - **India Owens (Director)**, Kelley Hill (Clinical Manager), Vince Corbin (Operations Manager), and all our PCCs.
- Staff Nurses:
 - Sarah Rockwell, and Monica Sufan.
- Others:
 - Lab, Imaging, and Registration leaders.
- Process Improvement:
 - Joseph Swartz, and Thomas Pearson



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Intake Rooms	Lounge Areas
Procedure Rooms	Med Admin / Med History / Registration
X-Ray Room	Discharge Rooms
Lab Room	Mid-Track

Overall Results

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Measure	Before	After
Door to Provider (Median)	28 minutes	14 minutes
Door to Discharge (Median)	180 minutes	130 minutes
Left Without Treatment	2.8%	< 0.5%
Patient Satisfaction	13 th percentile	48 th percentile

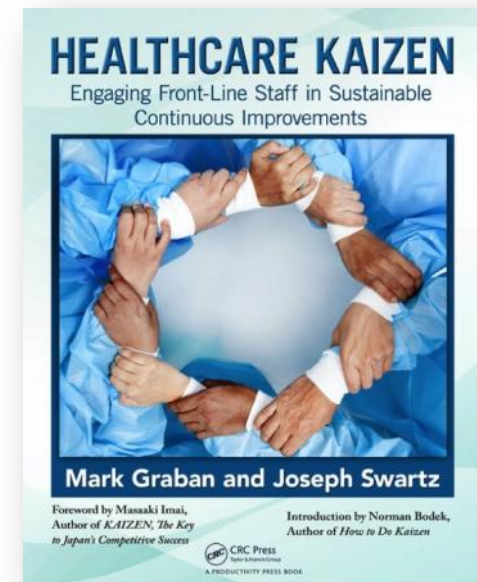


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Kaizen Continuous Improvement in the ER



Kaizen

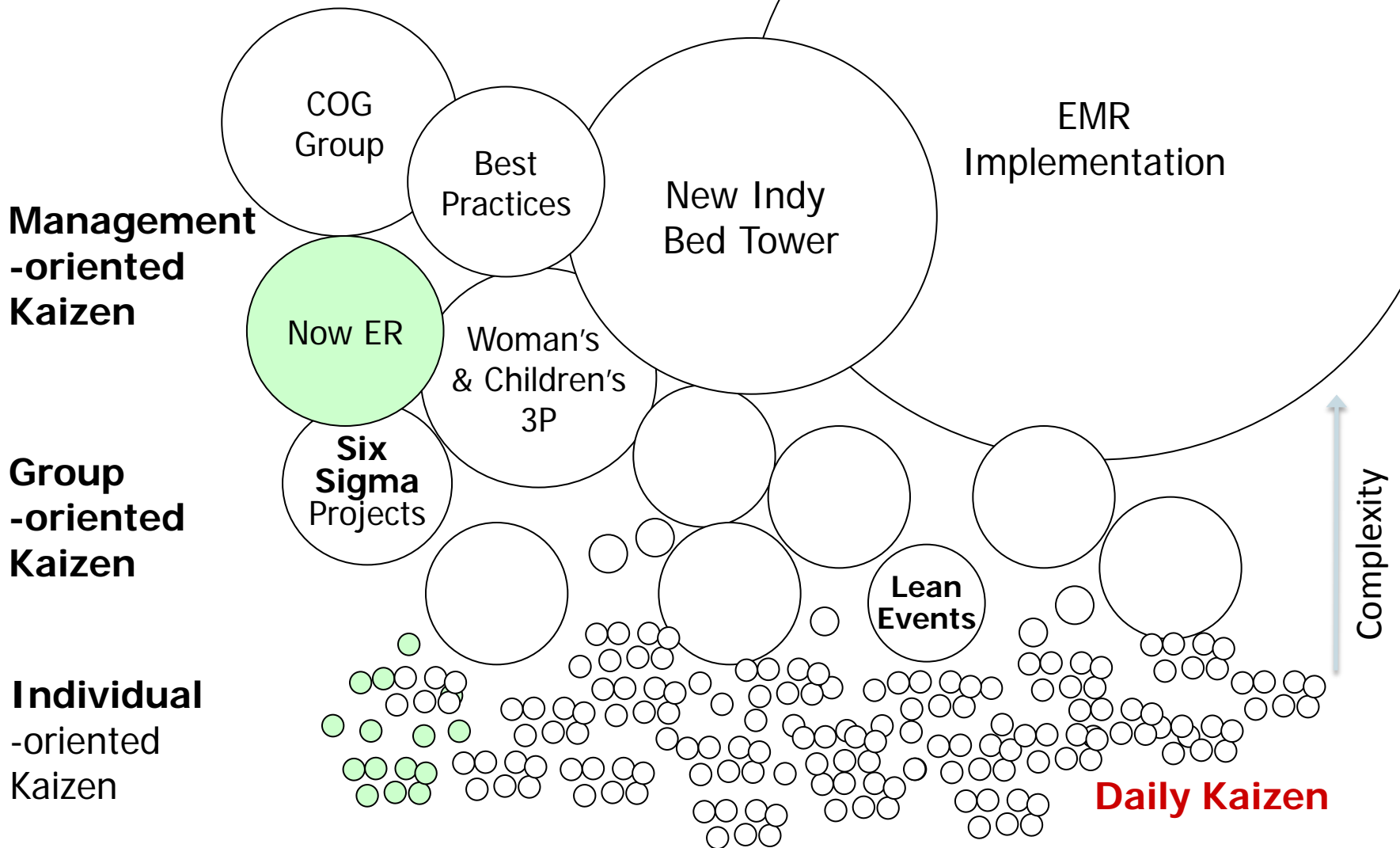
改

Kai = Change

善

Zen = Good

3 Levels of Kaizen



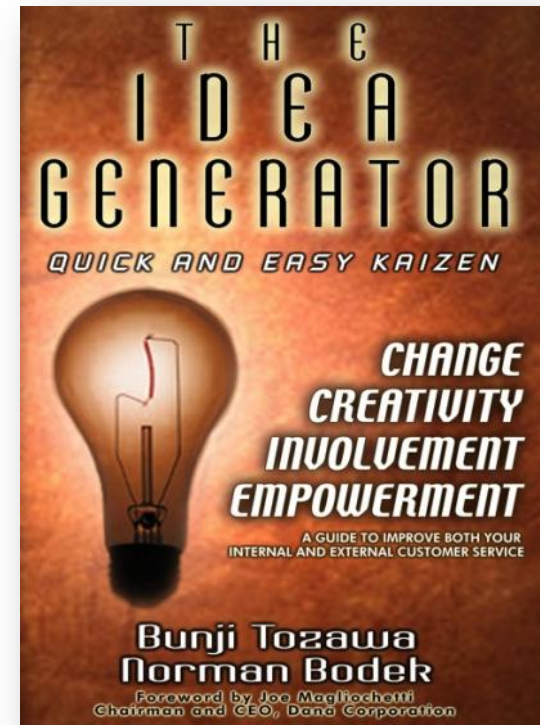
Bubble size is meant to roughly represent relative size of effort

Ideas vs. Suggestions

“Suggestions are things I think you should do.”

“Ideas are things that I can do.”

- Norman Bodek



Steps of Kaizen

1. See & Find:
 - Find improvement ideas.
2. Discuss:
 - Discuss with supervisor and those affected.
3. Implement:
 - You do it (with help).
4. Document:
 - Write it down.
5. Share:
 - Post it and talk about it.



Thermometers at the Point of Use

Before

Nurses spent too much time searching for thermometers

After

Have one thermometer in each room at the point of use.



Effect

Saves nursing time searching for thermometers.

Name

ID #

Dept #

Supervisor

Date

Nancy Thompson

6301

Nancy Mosier

2008

Bubbles for Babies

Before

Our little patients under 5 years old are often screaming and won't be still or lay down during Ultrasound procedures. The parents are frustrated and many times cannot find a way to calm the infant down.

After

We now have tiny bottles of "wedding" bubbles and we ask the parents to gently blow them over the top of the child to calm and entertain them.



The Effect

Happy babies make for happy parents, which make for happy staff, resulting in Joyful Service, and peace of mind.

Name	Supervisor	Date	Estimated Cost Savings (Optional)
Hope Woodard	Gina Bonner	5-9-07	Priceless!

3 Ways to Submit:


1. Paper

2. Email


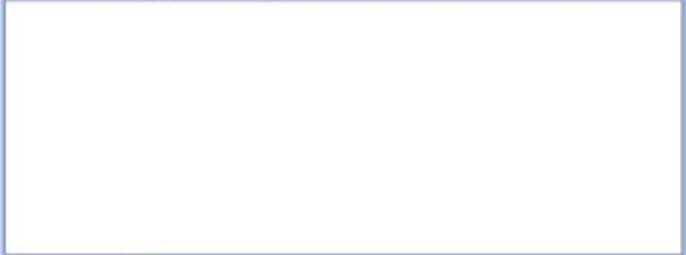

3. Web Based Database

Title:

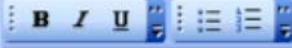


Short Description:
Maximum 250 Characters

Origination Date: 



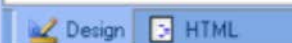
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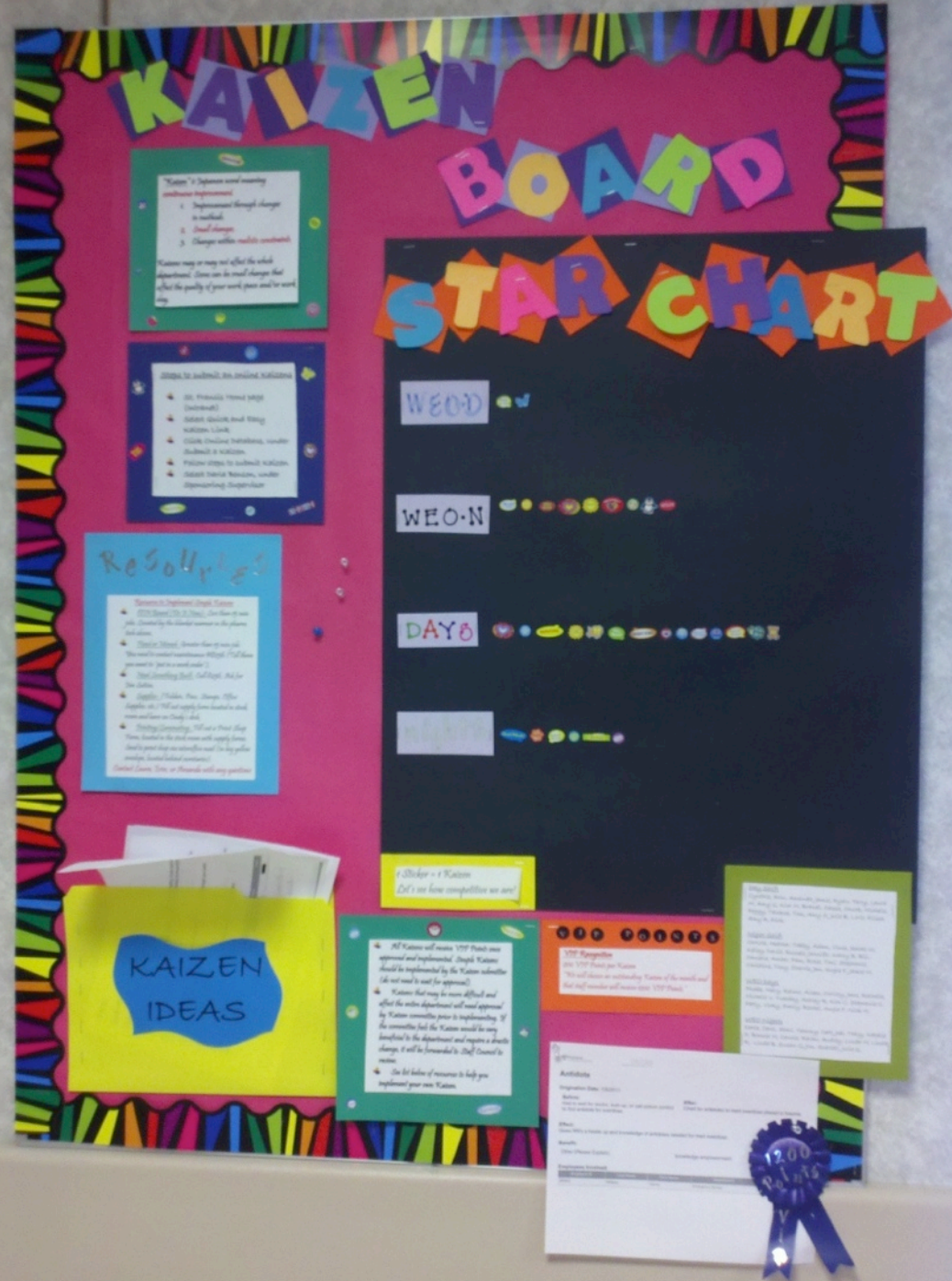
After:

Effect:

5. Share



Start Small



- Make your job easier, safer and more enjoyable.
- Improve patient care, the patient's experience or patient safety.

Peter's First Kaizen



Daily Operational & Quality Huddles (DOQH)

- 15 minutes.
- Focuses on nursing improvements.
- Answers questions:
 - How did what we tried yesterday work?
 - Should we keep it, modify it, or throw it out?
 - What can we try different today?
- Met daily for a few months after Now ER go-live, but now less frequently.
- Drives Kaizen.



Design Team Meetings

- 2 hours.
- Every 2 weeks.
- Big DOQH proposed changes and changes that could affect providers go to the Now ER Design Team for review and approval.

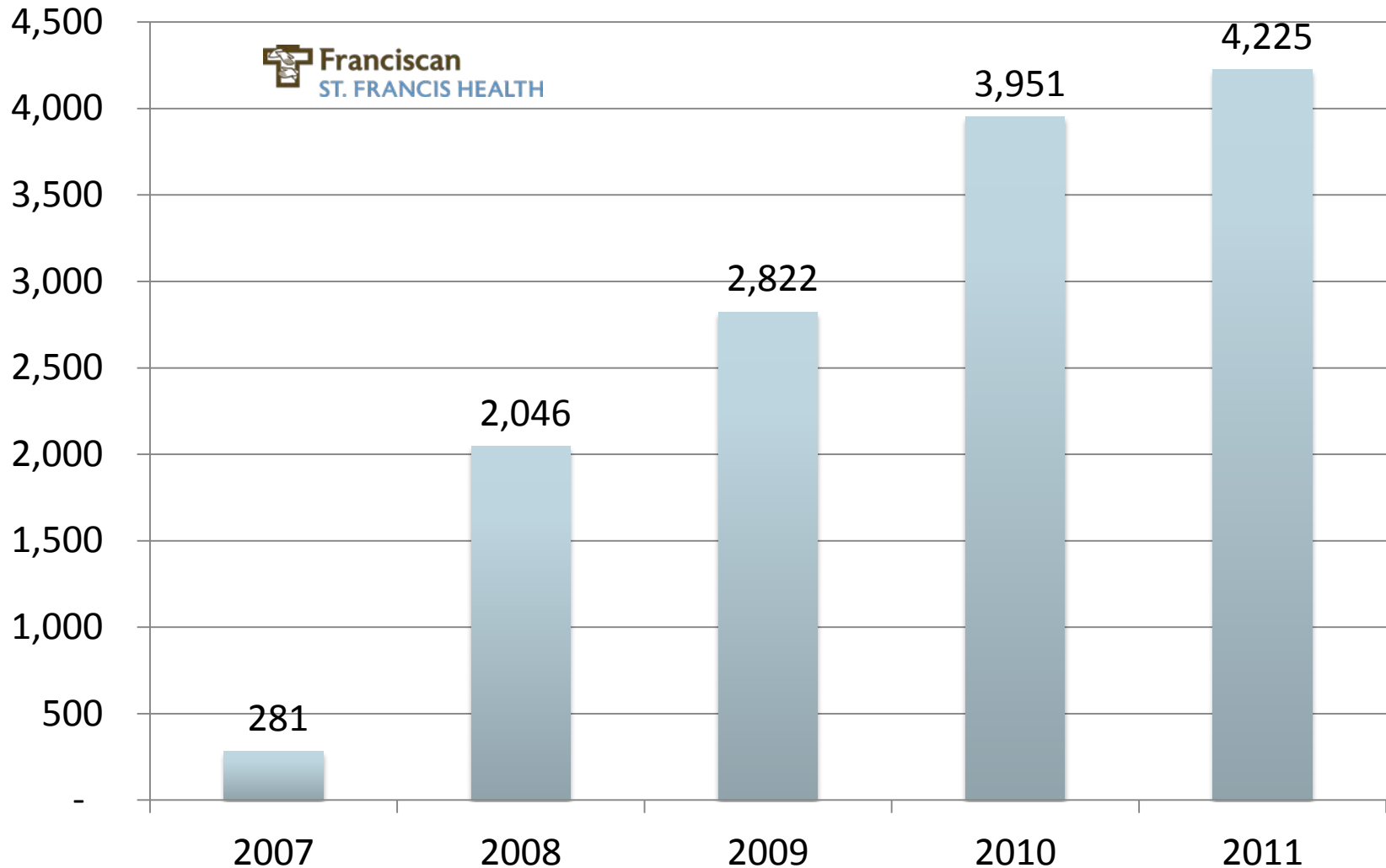
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NOW ER
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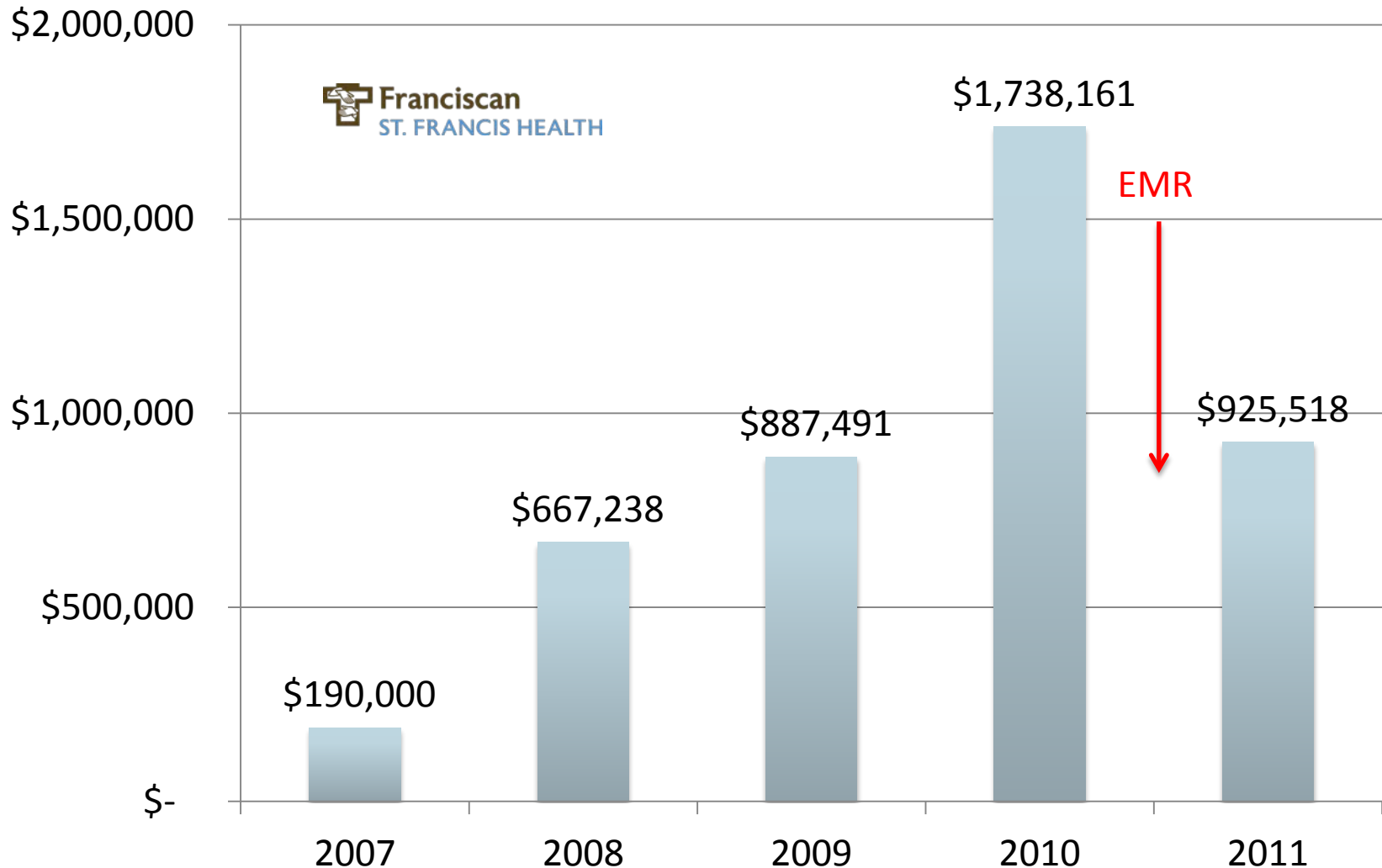
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of Recorded Kaizens



Source: Healthcare Kaizen

Franciscan Savings Impact



Real Culture Change:

- *“Real culture change occurs when Kaizen is practiced daily by everyone in an organization.”*
– Masaaki Imai



A Cultural Change:

- High % of employee engagement
- Control over workplace has improved
- The workplace is clean and orderly
- Work and patient care flow more like clockwork
- Staff relentlessly searching for opportunities to improve
- Everyone works together better
- Everything gets questioned
- Staff and physicians happier
- Patients and families happier
- Less stress and tension
- The whole atmosphere is better



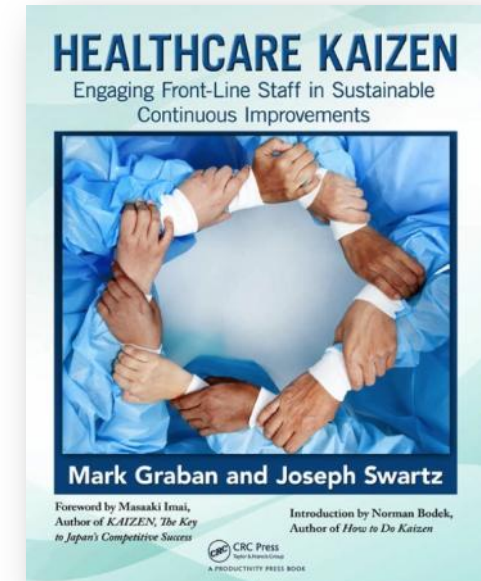
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Acknowledgements

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