Spartanburg Health

SingHealth Presentation
August 2014

Journey to Excellence



Spartanburg Regional Healthcare System STRATEGIC PLAN

MISSION

Provide excellence in health

VISION

Become a national leader in healthcare quality

KEY STRATEGIC STATEMENT

We are committed to clinical excellence, customer and service excellence, and corporate effectiveness.

VALUES

STEWARDSHIP • TEAMWORK • RESPECT

STRATEGIC IMPERATIVES

Deliver Excellent Quality
Improve Patient Satisfaction
Build a Winning Team
Aggressive Financial Management
Increase Business Growth
Improve Community Health



Healthcare Flywheel®

PRINCIPLES PILLAR RESULTS **Prescriptive** To Do's Purpose, worthwhile work and making a difference PASSION

Bottom Line Results

(Transparency and Accountability)

▼ Self-Motivation

Journey to Excellence

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Plan for Excellence, FY 2013-2015

Mission: Provide excellence in health

Vision: Become a national leader in healthcare quality

Values: Excellence, Integrity, Accountability, Stewardship, Teamwork, Respect

Key Strategic Statement: We are committed to clinical excellence, customer and service excellence, and corporate effectiveness.



Strategic Imperatives	Objectives		Strategies			
		1.1	Exceed CMS Hospital Compare Benchmarks for specified mortality rates			
		1.2	Exceed CMS Hospital Compare Benchmarks for specified readmission rates			
1. Deliver	Achieve top performer	1.3	Achieve 100% compliance for CMS Quality/ Core Measure Bundles by 2015			
Excellent	status on national	1.4	Preventable Hospital Acquired Condition rate will outperform CMS Benchmark			
Quality	clinical quality measures	1.5	Exceed national benchmarks for specified Physician Ambulatory Services quality indicators			
		1.6	Exceed national benchmarks for specified Post Acute Care quality indicators			
		1.7	Establish clinical transformation path			
2. Improve Patient	Deliver an optimal	2.1	Achieve a top box score for the HCAHPS National Patient Satisfaction Indicators for inpatient services			
	experience to every	2.2	Achieve best practice patient satisfaction indicators for outpatient services			
Satisfaction	patient every time	2.3	Achieve best practice patient satisfaction indicators for physician practices			
	Achieve a culture of	3.1	Develop a high performing workforce			
3. Build a	engaged and	3.2	Achieve a top box score for associate and physician engagement			
Winning Team	accountable associates and physicians	3.3	Exceed national benchmarks for associate retention			
		3.4	Promote health and wellness			
		4.1	Complete a revenue cycle process improvement plan to improve and accelerate cash collections			
4. Aggressive Financial	Achieve financial performance of an Aa3	4.2	Plan appropriate funding of capital assets to maximize cash and debt structure			
Management	rated health system	4.3	Achieve expense reduction through implementation of the Process Improvement Plan (PIP)			
		4.4	Implement a plan to grow the Foundation Endowment to support system initiatives			
		5.1	Become a leader in strategic clinical integration irrespective of geography			
5. Increase	Achieve targeted	5.2	Expand physician group and outpatient market presence and grow market share in key inpatient services			
Business	revenue growth of 25%	5.3	Implement initiatives to diversify and grow overall system revenue			
Growth	revenue growth of 23%	5.4	Develop image by promoting areas of expertise and points of difference to enhance competitive value			
		5.5	Right size infrastructure and technology for growth			
6. Improve Community Health	Anticipate and respond to community health	6.1	Explore and implement delivery system changes that improve outcomes and reduce costs			
	needs by partnering to improve health	1	Collaborate with public health partners to develop a community health plan for Spartanburg County addressing our most significant health issues			

SMART Goals are

- Specific
- Measurable
- Attainable
- Realistic
- ▶ Time-bound





Improve Patient Satisfaction

OBJECTIVE - Develop an optimal experience for every patient every time!





Did you know?









Quit?

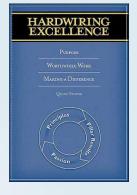








About Studer Group

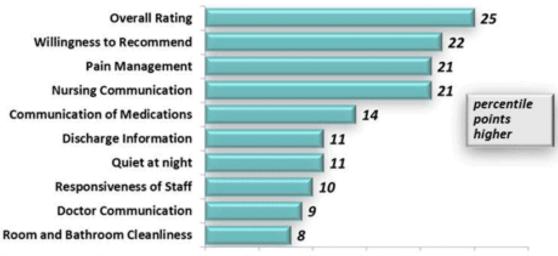


- Works with over 800 healthcare organizations, teaching them how to achieve, sustain, and accelerate exceptional clinical, operational, and financial outcomes.
- Successful organizations create focus and instill a sense of urgency by building and weighting goals into leader evaluations.
- Studer Group coaches hospitals and healthcare systems providing a detailed framework and practical how-to's that create change.



Studer Group Partners Outperform the Nation across HCAHPS Composites

Studer Group Difference over Non-Partners in National Percentile Ranking



■ Studer Group Difference over Non-Partners in National Percentile Ranking

Source: The graph above shows a comparison of the average percentile rank for Studer Group Partners that have received EBL coaching since Oct 2008 and non-partners for each composite; updated 8.10.11 using 4Q09-3Q10 CMS data.

Taking You and Your Organization to the Next Level © 2011 Studer Group®







Fundamental Knowledge

Information

Tools we use



Patients Perception of Quality

- Personalized Care
- Prompt Attention
- Professionalism
- Communication
- Respect
- Privacy



5 Most Important Service Quality Characteristics

- Responsiveness
- Assurance
- Empathy
- Tangible
- Reliability



Disney



- Sense peoples needs prior (initiative)
- Help each other out (teamwork)
- Acknowledge peoples feelings (empathy)
- Respect dignity and privacy (courtesy)
- Explain what's happening (communication)



Fundamental Tools

- AIDET
- Narration
- Hourly Rounding
- Bedside Shift Reporting
- Nurse Leader Rounding







AIDET

- Acknowledge
- Introduce
- Duration
- Explanation
- Thank you





Narration



 The simple, yet not so simple, practice of speaking outward what you are doing or what you know



Hourly Rounding

- Reduces call lights by 38%
- Decreases falls by 50%
- Decreases hospital decubiti by 14%
- Improves patient perception by 12%



Hourly Rounding



Hourly Rounding Behavior	Expected Results			
Use opening and key words	Contributes to efficiency			
Accomplish scheduled tasks	Contributes to efficiency			
Address Three Ps (pain, potty, position)	Quality Indicators – fails, decubitus and pain management			
Address additional comfort needs	Improved patient satisfaction on pain, concern and caring			
Conduct environmental assessment	Contributes to efficiency, teamwork			
Ask, "Is there anything else I can do for you before I go? I have time."	Contributes to efficiency; Improves patient satisfaction on teamwork and communication			
Tell each patient when you will be back	Contributes to efficiency			
Document the round	Quality and accountability			



Bedside Shift Reports

- Conducted in patients presence
- Decreases misses & mistakes
- Increases patient involvement
- Increase patient trust
- Decreases patient anxiety at shift change
- Increases accountability builds culture
- Increases new RN skill level
- Increases teamwork between shifts





EFFECTIVE HANDOFFS

 We provide effective handoffs by taking time to give appropriate information and ensuring understanding and ownership

Tool: The 5 P's

Patient – What is to be handed off

Plan – What happens next

Purpose – The desired end state

Problem – What is known to be different,

unusual or complicating about this

patient

Precaution – what could be expected to be

different, unusual or complicating

about this patient



Nurse Leader Rounding



 What have I learned about the care of the patients in my unit?

What must I do with this information?



Post-Visit Phone Calls



- Confirm compliance & understanding with DC instructions
- Demonstrate empathy
- Afford opportunity for service recovery
- Reduces anxiety, increases compliance, improves clinical outcomes, reduces readmissions, decreases complaints, increases employee satisfaction, increases patient satisfaction



Post DC Call Sample

Empathy and Concern	"Mrs. Williams? Hello. This is <name>. You were discharges from my unit yesterday. I just wanted to call and see how you're doing today".</name>				
Clinical Outcomes	 "Do you have any questions regarding your medications or any possible side effects?" "Is your pain well controlled?" "We want to make sure we do excellent clinical follow-up to ensure your best possible recovery. Do you know what symptoms or health problems to look out for?" Do you have your follow-up appointment?" 				
Reward and Recognition	 "Mrs. Williams, we like to recognize our employees. Who did an excellent job for you while you were in the hospital?" "Can you tell me why Susan was so excellent?" 				
Service	"We want to make sure you were very satisfied with your care. How were we Mrs. Williams?"				
Process Improvement	"We're always looking to get better. Do you have any suggestions what we could do to be even better?"				
Appreciation	"We appreciate your taking the time this afternoon to speak with us about your follow-up care. Is there anything I can do for you?"				

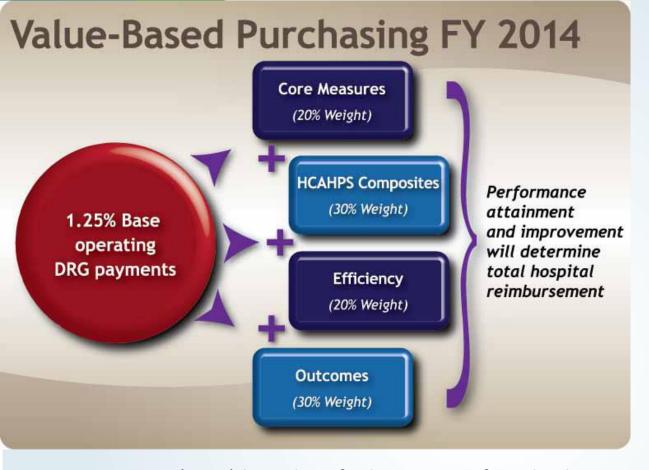


Why Organizations Do Not Achieve Desired Results?

- Dots are not connected consistently to purpose, worthwhile work and making a difference
- Do not achieve critical mass -Lack of balanced approach
- Absence of an objective accountability system
- Leaders do not have the training to be successful

- 5. Too many new behaviors introduced at once need of sequenced approach
- 6. No process in place to re-recruit the high and middle performers and address low performers (highmiddlelow®)
- 7. Inability to take best practices and standardize across organization
- 8. Failure to have leaders "always" do desired behaviors (lack of verification systems)





Hospital Acquired Conditions could cost:

2013 - \$2,100,000

2014 - \$3,400,000

(CMS) has identified 11 types of medical errors that:

- Are preventable
- Are high cost or high volume (or both)

Hospitals will not receive additional payment when these conditions were not present on admission



Focus On The Nine Principles®





Build individual accountability



Measure the important things



Align behaviors with goals and values



Build a culture around service



Communicate at all levels



Create and develop great leaders



Recognize and reward success



Focus on employee satisfaction



Draft Implementation Planning

		•		•		
	Month 1-2	Month 2-3	Month 3-4	2 nd Quarter	3 rd Quarter	4 th Quarter
Foundation Activities	 Assessments Expectations Meeting Steering Team & Structure Schedule master calendar 	 Establish strategic priorities Coaching Plan delivered based on assessments and priorities 	Employee Forums	Employee Forums	Employee Forums Assessment	Employee Forums
SRHS Must Haves	(This a forecast of potential sequence, to be finalized after needs are assessed)	Rounding Thank You Notes	 Coach on Must Haves (focus on customizing approach to leader's responsibilities) 	Post Visit Calls Key Words/AIDET	 Coaching on Must Haves (leaders and staff) 	30-90 Day Peer Interview
People Engagement- Quality Impact Teams	 Select teams and leaders as needed: Measurement Standards Communication Service Recovery Recognition 	Team Leader Training	Populate teamsEstablish Charters	Teams report on results	Teams report on results	
Leader Evaluation Process	 Assess current goals and performance Begin developing organizational goals 	 Align goals to strategic priorities & cascade Monthly Meeting Model 				
Leadership Development Institute (LDI)	 Select LDI Team Leader Conduct leader training 	LDI curriculum to be determined by needs assessment, potential topics include: Rounding, Thank you notes	Activate LDI TeamCurriculum planning	Leadership Development	Leadership Development	Leadership Development

Execution Framework Evidence-Based LeadershipSM Breakthrough

Foundation

STUDER GROUP®:

Objective Evaluation System

Leader **Development**

Must Haves[®] **Performance Management**

Standardization Accelerators

Software

Aligned Goals

▼ Create

skills

4 & 8

Principle

process to

in developing

competencies

- Implement an organizationwide leadership evaluation system to hardwire objective accountability
- ▼ Principle 1, 2, & 7

Aligned Behavior

- Agreed upon tactics and behaviors to assist leaders achieve goals
 - ▼ Principle 3, 5, 6, & 9
- and middle/solid performers
- ▼ Move low performers up or out
- ▼ Principle 4

Aligned Process

- ▼ Re-recruit high ▼ Processes that are consistent and standardized
 - Process Improvement
 - **▼** PDCA
 - ▼ Lean
 - Six Sigma
 - Baldrige Framework
 - **▼** Principle



Phases of Organizational Change



PHASE 1: The Honeymoon

PHASE 2: Reality Sets In

PHASE 3: The Uncomfortable Gap

PHASE 4: Consistency

- Sense of excitement
- Right "to do" list
- Things will get better (hope)
- Quick fixes are implemented
- Team in place
- Some skeptics
- Overall lots of enthusiasm

- We/they
- Inconsistency apparent
- Bigger challenge and more work than thought
- This will impact me—change for all
- Some are getting it and getting it faster
- Some are not and may not

- Performance gap is evident
- Tougher decisions must be made
- Process improvement increases due to accountability and skill level
- Inconsistencies
 obvious that if not
 fixed, progress will
 halt and
 organization will
 go backwards

- High performing results
- Everyone understands the keys to success
- Disciplined people and disciplined processes displayed in organization
- Proactive leadership



Resources/Acknowledgement

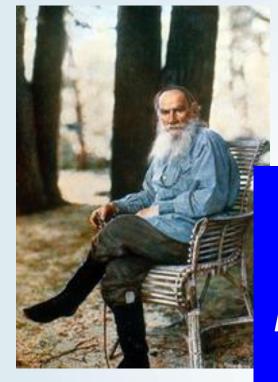
If Disney Ran your Hospital; Lee



 Achieving Service Excellence; Tottle, Ford, Heaton

 HCAHPS Handbook; Studer, Robinson, Cook





Everyone thinks of changing the world, but no one thinks of changing himself.

Leo Tolstoy

