

# HOSPITAL HEALTHCARE UPDATE REPORT

Presented to the JCC-SFGH on April 26, 2016

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### I. Inaugural Staff Forum on April 13th

On Wednesday, April 13th, ZSFG's Communications team hosted the first monthly Staff Forum. All members of the Zuckerberg San Francisco General Hospital community were invited.

The purpose of the monthly Staff Forum is to present useful and important information to all members of the ZSFG community – to engage, to inform, to connect and to inspire.

At our first staff forum, Roland Pickens opened with a welcome. Additionally, Terry Saltz discussed what staff needs to know about moving into the new acute care and trauma center.

### II. Inpatient Workshop during week of March 28<sup>th</sup>

Inpatient Services held their first Kaizen workshop related to the Inpatient Value Stream mapping event that occurred in January this year. The team focused their improvement efforts around provider decision to discharge, to the discharge order written, with the overall goal of improving patient flow. This aligns to our True North Metric related to Care Experience and is aligned with our Improving Flow Tactic.

Through this workshop, the team has begun to standardize discharge planning, the process for providers to review patient progress, anticipate discharge, and communicate with other members of the care team. Earlier communication improves care and promotes a perfectly timed discharge.

Throughout the week, the team tested several different ideas using Plan-Do-Study-Act cycles to create standard work. The team tested and implemented a new order set using CPOE for communicating anticipated discharges to nurses. Utilization Management and Social Work will now be accessible via Pager Box! In addition, the team studied a “Model Cell” for Multidisciplinary Rounds (MDR), fully leveraging the strengths of all team members.

The Kaizen team demonstrated serious dedication towards improving inpatient and overall hospital flow.

### III. San Francisco Business Times: Real Estate Deals of the Year Award on March 23<sup>rd</sup>

On Wednesday, March 23<sup>rd</sup>, Zuckerberg San Francisco General Hospital received a “Real Estate Deal of the Year” award, presented by the San Francisco Business Times.

ZSFG was honored as one of the most creative real estate deals done in the Bay Area in 2016, focusing on our new acute care and trauma center (Building 25). While we may not typically think of ourselves and our work in the context of “real estate” or even “deals”, the award shows that we are increasingly on the radar of the business community and are thought of as a critical element in the city’s infrastructure and identity.

### IV. Emergency Department Improvement Workshop during week of March 21<sup>st</sup>

The Emergency Department had their final workshop before the move into Building 25. The team focused on modifying existing improvement work to optimize front-end workflows including Fast Track (flow for our low acuity patients) and Provider at Triage.

Throughout the week, the team tested several different models and scenarios in the new ED using Plan-Do-Study-Adjust cycles to create and revise existing standard work. Several stakeholders like Eligibility also provided input as the team developed the future state emergency department workflows. This workshop has allowed the team to finalize all necessary training materials to align with Building 25 ED staff/provider training. The team did inspiring work.

### V. Emergency Department Diversion and Related Factors to Patient Flow

Emergency Department Diversion is enacted when a hospital determines it no longer has the resources (typically space and/or staff) to provide safe care to patients transported via ambulance. In the case of ZSFG, the Lack of physical space in the ED to safely care for patients transported via ambulance is the primary casual factor that initiates diversion in our emergency department. The lack of physical space is due to the following contributing factors:

1. Lack of sufficient ED exam rooms and treatment space. We know this will be addressed and ameliorated when we move into the new building on May 21, 2016. However, it’s important to note, the current lack of sufficient ED exam rooms was further compounded by the California Department of Public Health plan of correction that was implemented August 2014 in the ZSFG Emergency Department in response to a patient death in the ED hallway. That plan of correction requires that whenever there are 12 patients or more in ED Zone 1 (8 zone 1 beds + 4 in the hallway), the ZSFG ED will initiate ambulance diversion.

Not surprising, the episodes and duration of ZSFG ED Diversion have increased significantly since the implementation of the plan of correction.

2. Excessive numbers (25-35/day over the past 6 months) of Lower Level of Care(LLOC) patients occupying acute medical-surgical beds on the ZSFG inpatient units, thus preventing timely flow of ED patients newly identified for inpatient admission, which end up waiting(boarding) in the ED exam rooms and hallways. Prior to 6 months ago, LLOC medical-surgical patients averaged (12-20/day). Over the past year, the DPH has lost access to several units/beds of Board and Care level of care, which served as a primary discharge destination for many ZSFG LLOC patients.

In search of remedies to the on-going high rates of ZSFG ED ambulance diversion and overall patient flow, I want to share with you some of the immediate, intermediate and longer term solutions that either have been recently implemented or are underway:

- a. Recently Implemented - When ten or more patients are boarding in the ZSFG ED awaiting an inpatient medical-surgical bed, ZSFG Administrative Officer of the Day (AOD) will partner with the SF Health Network Transitions Division to transfer ZSFG medical-surgical LLOC patients out of ZSFG to other institutions or community placements, in order to free up ZSFG acute inpatient medical-surgical beds to accommodate the ZSFG ED boarding patients and relieve ZSFG overcrowding and ambulance diversion. If the ED overcrowding/boarding patient issue has not been resolved within 48 hours, the ZSFG CEO or designee will escalate to the SFHN Director and DPH Director of Health for resolution.
- b. Underway - Expansion of the DPH Medical Respite Program to provide additional beds for ZSFG discharged patients.
- c. Underway – SF Health Network Transitions Division is identifying new sources for ZSFG LLOC patient discharge to backfill the loss of Board and Care facility units/beds.
- d. Underway - Both ZSFG and SF Health Network have prioritized Patient Flow as a strategic initiative in their respective Strategic Plans utilizing LEAN A-3 development and methodology to develop short-term and long-term countermeasures to achieve ideal patient flow across our integrated delivery system.

We will continue to all necessary and appropriate actions to improve and optimize patient flow throughout our system of care.

#### VI. Patient Flow Reports for March 2016

A series of charts depicting changes in the average daily census is attached.

#### VII. Salary Variance to Budget by Pay Period Report

A graph depicting SFGH's salary variance between actual and budgeted by pay period is attached.