### HOSPITAL HEALTHCARE UPDATE REPORT

Presented to the JCC-SFGH on February 23, 2016

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## I. <u>Emergency Department Improvements February 8-12</u>

The Emergency Department held its 2<sup>nd</sup> Improvement Workshop following the Value Stream that began in October, 2015. Prior to the workshop, the improvement work focused on reducing the lead time for low acuity, or Emergency Severity Index (ESI) level 4 and level 5 patients. Following the Plan-Do-Study-Act problem solving process, the ED implemented a fast track system, with a target to reduce the length of stay for low acuity patients to below 135 minutes (from a baseline of 187 minutes). For the week of January 29 to February 4, the length of stay was 125 minutes – representing a 62 minute reduction.

During the week of February 8<sup>th</sup>, the ED focused on reducing the lead time for ESI level 3 patients, through performing PDSAs around team-based care. This workshop also included improving the flow of work between the ED and Clinical Laboratory and Imaging. Standard work was created in these departments to improve the flow of patients through the ED by reducing turnaround time for lab and imaging tests. Further PDSA problem solving will be done in the upcoming weeks to continuously improve the process for the ESI level 3 patients. A huge "thank you" to the ED, Clinical Lab and Imagining.

### II. Day in the Life (Lite) Completion on Feb 3rd

On February 3rd, we held our first Day in the Life (Lite). The purpose of the Day in the Life (DIL) simulations is to: 1) Identify and address patient/staff safety issues; 2) Engage staff in mock patient care scenarios to validate operations and workflows; 3) Verify protocols and systems integration

and; 4) Facilitate open channels of communication among all participants.

DIL included 26 department-specific and emergency response code scenarios. There were 188 scenario staff (i.e. nurses, physicians, and support services), 48 scenario observers and roamers, 33 Support Center (IT, Facilities, Biomed, Security, etc.), and 10 Day in the Life Command Center. Representatives from each department were able to speak to their workflows, policies, and equipment.

Through this experience, we have learned a lot about the building and how to collaborate and communicate across departments. This experience will only make the next DIL even more successful.

# III. <u>Director's Retreat on Feb 4<sup>th</sup></u>

On February 4th, ZSFG held the first-ever Director's Retreat at UCSF Mission Bay. About 80 of our Executives and Directors met to build alignment across Truth North. It proved to be an amazing day to reflect on our values, practice our improvement tools, and reaffirm our lean management system. We look forward to having these retreats twice a year.

# IV. <u>Inpatient Value Stream January 25-29</u>

We embarked on our Inpatient Value Stream, mapping the flow for our patients from decision to admit in the Emergency Department, until the patient has been discharged and the room is cleaned on the Inpatient Medical/Surgical units. The team was also able to accomplish mapping the Future State, or our vision for the ideal flow for our patients that is achievable in 3-5 years. This work launches further improvement workshops that will follow the Plan-Do-Study-Act problem solving method to improve care for our patients. The improvements will be sustained by the Daily Management System, which is already implemented in Medical Surgical Unit 5D. Through coaching, accountability, visual management and using data to drive our business, we expect to see great results from the work planned during this Value Stream event.

# V. Patient Flow Reports for January 2016

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

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

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