

ZSFG CHIEF OF STAFF REPORT
Presented to the JCC-ZSFG on December 10, 2019
Nov and Dec Leadership MEC and Nov and Dec Business MEC

ADMINISTRATIVE/LEAN MANAGEMENT/IMPROVEMENT WORK/EPIC STATUS:

CDI Program

MEC welcomed Dr. Pallabi Sanyal-Dey, and Dr. Aaron Harris, MD, new Co-Medical Directors for Clinical Documentation Integrity (CDI). Dr. Sanyal-Dey and Dr. Harris gave MEC a preview of their roles as Co-Directors for CDI Physician Advisors. Dr. Pallabi Sanyal-Dey has worked at ZSFG for six years, and now directs the clinical operations for the Division of Hospital Medicine, looking at both direct-care services medicine and also understanding the relationship with ZSFG's residency and all the other services in the hospital. Dr. Aaron Harris works in the ZSFG Emergency Department, and for the last three years, has been working with the Emergency Department's documentation improvement. He is looking toward to taking that experience and bring it to the hospital in general. Both began their roles as Co-Directors, Physician Advisors, of CDI in July this year.

CDI is relatively new to ZSFG having been around for about 2-3 years, and is still in its infancy. To put it into perspective, CDI has two full time nurse analysts who are reviewing all of the patient charts for ZSFG, compared to UCSF which has over 20 analysts reviewing the charts. Data about CDI, how it has been affected by Epic Roll Out, and how providers are documenting in medical records are still rolling in. Already, the CDI team has learned a lot, and has identified some metrics that they want to follow.

Dr. Sanyal-Dey and Dr. Harris will be back with more specific information in January 2020. For now, their main focus is work on case mix index (CMI) and the mortality index, and work to improve ZSFG's star rating. All the data metrics are from hospital-wide data on patients' interactions, but also on specific specialty service line data. MEC members' support in communicating the information to faculty and staff is crucial to the program's success. CDI champions in each division/specialty who will work with the CDI team are also needed.

LLOC/PDSA AND Complex Long Stay Inpatient Cases

Dr. Hemal Kanzaria, Medical Director of Department of Care Coordination (DoCC), presented a PDSA on Utilization Committee. This is one of many PDSAs aimed at improving lower level of care (LLOC) patient flow. The presentation included the following:

- Purpose of the UM Committee
- Regular Committee members
- Volume Statistics:
 - ED Social Medicine, Perceived Potential Reasons Short Stay Admissions (Pareto Chart)
 - Inpatient LLOC, Perceived Discharge Barriers for Lower Level of Care Patients (Pareto Chart)

The UM committee has over the past couple of months been doing a deep dive into LLOC to determine what the main barriers are that have resulted in challenges with moving a patient forward with their care plan and to the next phase of their care (graphs). Some of the barriers are internal to ZSFG, some are external. The DoCC has PDSAs aimed at addressed many of the main barriers to LLOC patient flow. One barrier discussed relates patient and/or clinician concern/hesitation with community care plans. Example cases from the past 1 month were shared, demonstrating challenges with frequent changes in attending physicians and perceived challenges navigating the ambulatory care system.

The team is rolling out a standard approach to problem solving when there is concern with discharge. Representatives from social services, equity, and executive leadership are involved in developing these standard processes. The team is asking MEC Leadership to identify a lower level of care representative from each service by December 15. The ideal representative is a senior member (e.g., chief, medical director) with whom the DoCC and the clinical team can coordinate when there is concern moving a patient care plan forward using a Standard Escalation Pathway. An example of a Standard Escalation Pathway was included. The goal is to favorably impact LLOC length of stay and increased organization capacity.

STAFF-PROVIDER 2019 ENGAGEMENT SURVEY RESULTS

Dr. Jeff Critchfield and his Patient Care Experience Team shared the results of the 2019 Staff and Provider Engagement survey results, and informed members that communication of survey results will be continuous. Data will be shared and discussions will be facilitated. Engagement approach will guide the work.

CLINICAL SERVICE REPORT:

Medicine Clinical Service

Dr. Neil Powe, Service Chief, presented his biennial Service Report at the December 9, 2019 Leadership MEC meeting.