The Power of Data

Sharp Grossmont Hospital Sharp HealthCare



"If you are going to achieve excellence in big things, you develop the habit in little matters. Excellence is not an exception; it is a prevailing attitude."

- Colin Powell



Presenters

Marguerite Paradis, BSN, RN, MHA Director, Emergency Services and Critical Care

Paul Larimore RN, BSN, MBA Manager, Emergency Department

Michael Young, MBA Manager, Operational Excellence

William Burfeind, MAS Senior Specialist



Topics

- Hospital Overview
- ED Analytics
- ED Transformation
- Open Forum







- 542 Licensed Beds
- ~700 Physicians on Staff
- One of the largest private employers in East County (>3,500 employees, ~1,400 Clinical RNs)
- Over 740 volunteers
- From prenatal to end-of-life care



Sharp Grossmont Emergency Department Quick Stats



5 TOTAL PODS

Advanced Care Accelerated Care G-Path GEDA



TOTAL TREATMENT BAYS: 74+



DAILY AMBULANCE ARRIVALS: 55-65



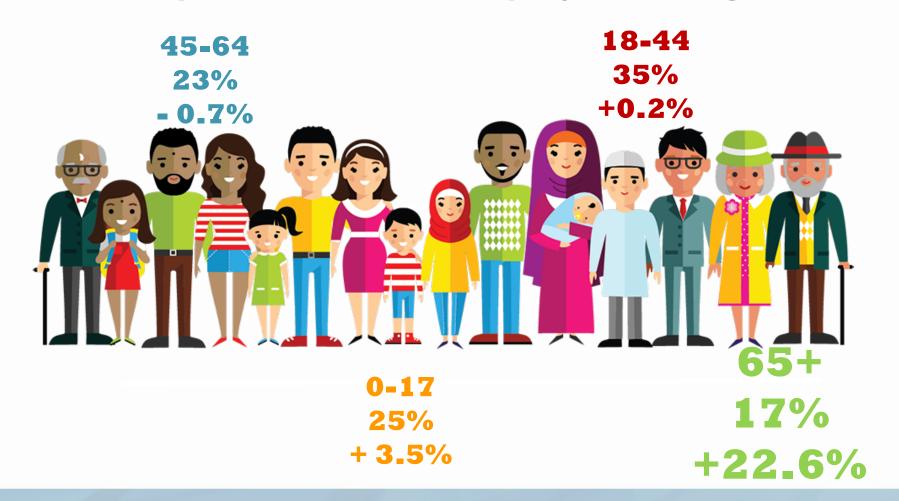
ANNUAL VOLUMES
> 100K
300 Daily Visits



G-PATH FOR BEHAVIORAL HEALTH



Hospital Service Area Distribution of Growth: 2018-2023 The hospital service area is projected to grow 4.0%



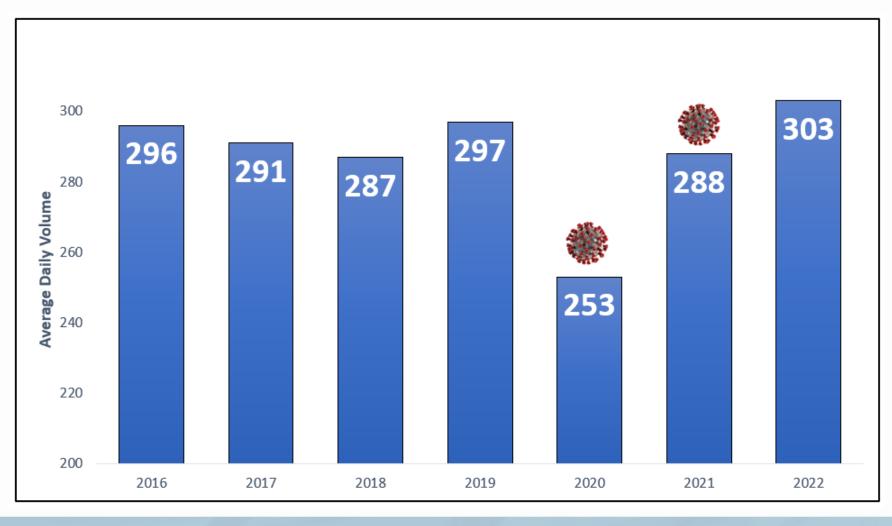




Sharp Grossmont Hospital Service Area Map



Average Daily Volume by Year



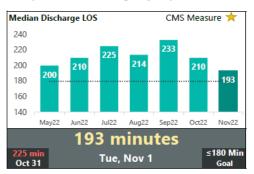
- Observing historic volumes for Sharp Grossmont ED:
 - Averaging >300 visits per day
 - Forecasting >110,000 visits in 2022
- This is a 2.0% increase from our previous high in 2019
- Or, <u>7 extra days worth of</u> patients than in 2019

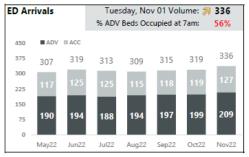


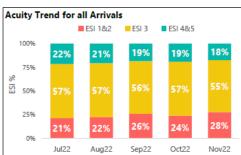
- More questions than answers
- Demonstrated need for enhanced analytics
- Data siloes
- Need to merge multiple sources to capture the whole story
- Collaboration to develop the right metrics
- Performance visualizations to drive process improvements

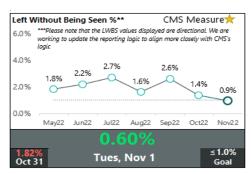


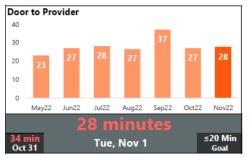
Sharp Grossmont Emergency Department Dashboard

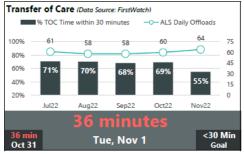




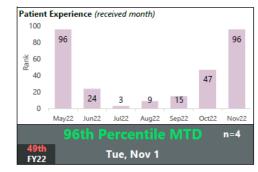


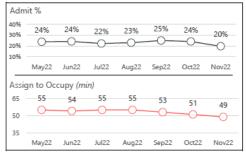






Through Tuesday, Nov 1st

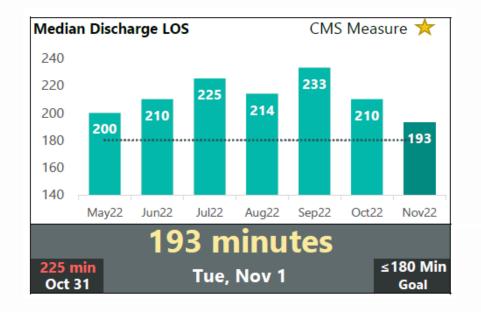


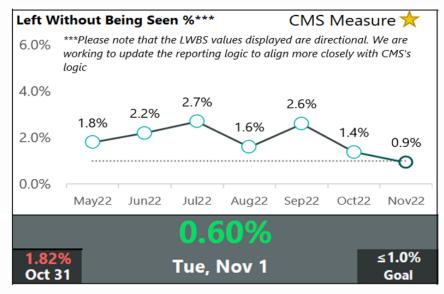




- Daily ED Dashboard focused on metrics that drive performance improvements
- Reporting tile approach to capture a lot of info in a small amount of space
- Distributed site-wide and reviewed daily at administration huddle





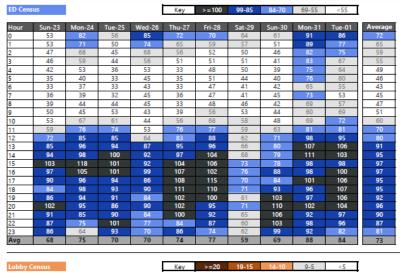


- Two main CMS measures that we monitor:
 - Discharge Length of Stay
 - Left Without Being Seen
- Each dashboard tile is a representation of the numerical data within the report (below)

Length of Stay	Sun-23	Mon-24	Tue-25	Wed-26	Thu-27	Fri-28	Sat-29	Sun-30	Mon-31	Tue-01	Overall	Goal
Discharge LOS	245	216	201	191	203	208	187	226	225	193	209	180
Admit	345	340	343	330	459	519	372	646	456	401	421	
Overall	272	230	228	223	263	237	214	254	246	209	237	

Patient Departures	Sun-23	Mon-24	Tue-25	Wed-26	Thu-27	Fri-28	Sat-29	Sun-30	Mon-31	Tue-01	Overall	Goal
LWOT	1.5%	1.2%	2.4%	0.9%	0.9%	1.7%	0.4%	1.4%	1.8%	0.6%	1.3%	1.0%
ELOPE	2.5%	2.4%	1.8%	1.5%	1.2%	3.3%	2.5%	0.7%	2.7%	2.1%	2.1%	
AMA	0.6%	0.0%	0.9%	0.6%	0.9%	1.6%	1.4%	0.7%	0.3%	1.8%	0.9%	





Hold Ce	nsus				Key	>=40	39-30	29-20	19-10	<10	[
Hour	Sun-23	Mon-24	Tue-25	Wed-26	Thu-27	Fri-28	Sat-29	Sun-30	Mon-31	Tue-01	Ave
0	3	8	9	14	6	19	12	14	27	22	- 1
1	7	9	8	15	4	20	12	12	28	19	1.
2	7	6	4	12	3	22	8	- 11	26	20	1
3	8	7	5	7	8	22	9	10	28	20	1.
4	6	8	2	5	0	23	13	10	29	23	1.
5	3	3	5	6	- 1	23	12	10	31	21	1
6	2	2	4	5	3	22	14	10	30	24	1.
7	7	5	4	5	9	22	14	12	33	23	1.
8	6	2	5	5	7	18	15	12	29	18	1
9	5	2	2	3	5	17	14	8	16	17	9
10	2	2	4	4	4	18	15	8	17	13	9
11	6	6	5	2	5	18	15	8	17	15	1
12	10	4	4	2	12	21	16	8	18	14	1
13	3	5	11	5	10	24	18	7	23	19	1.
14	4	7	12	11	8	27	16	- 11	23	22	14
15	- 11	15	9	13	9	29	13	12	28	24	1
16	10	14	10	14	20	32	14	- 11	34	22	- 18
17	9	17	12	12	17	33	15	10	33	23	- 1
18	6	17	13	10	19	29	15	12	29	21	- 1
19	5	- 11	13	7	17	28	- 11	18	24	18	- 1:
20	6	10	12	12	18	21	14	19	27	16	10
21	5	6	7	17	17	20	12	18	23	16	1-
22	4	8	9	14	19	14	15	22	19	15	14
23	7	9	13	10	21	- 11	14	27	21	10	1
Avg	6	8	8	9	10	22	14	13	26	19	1

I - I. I					Kev	>=20	19-15	14-10	9-5	<5
LODDY	Census				Key	>=20	19-15	14-10	9-5	<5
Hour	Sun-23	Mon-24	Tue-25	Wed-26	Thu-27	Fri-28	Sat-29	Sun-30	Mon-31	Tue-01
0	6	22	5	12	6	12	8	4	21	9
1	6	15	4	10	8	- 11	9	0	16	4
2	4	11	6	7	3	5	7	1	9	8
3	4	7	4	4	3	3	5	1	12	2
4	3	5	3	5	2	5	1	5	- 11	1
5	3	3	4	4	2	4	2	6	12	0
6	3	2	2	2	3	1	1	0	9	0
7	3	4	4	3	4	2	5	1	11	1
В	4	3	2	4	3	2	0	2	13	4
9	6	7	3	3	6	3	0	4	8	8
10	8	12	8	3	4	3	2	2	17	12
11	7	12	11	4	10	10	5	8	15	10
12	12	16	16	6	7	13	4	9	25	17
13	21	22	21	20	13	23	6	13	29	26
14	28	23	25	17	20	27	6	15	31	28
15	39	33	24	19	30	25	14	16	21	18
16	39	35	29	25	28	22	14	18	18	26
17	40	31	19	17	25	36	7	21	22	29
18	128	74	19	43	35	33	11	24	15	30
19	24	22	13	20	21	25	9	31	17	29
20	30	23	16	20	24	25	6	33	23	21
21	21	20	18	13	19	22	7	25	11	20
22	23	16	24	8	12	22	6	23	14	14
23	17	10	20	8	13	13	3	23	12	10
Avg	20	18	13	12	13	14	6	12	16	14

Behavior	al Health C	ensus in M	lain ED*		Key	>12	12-10	9-7	6-4	3-0	
Hour	Sun-23	Mon-24	Tue-25	Wed-26	Thu-27	Fri-28	Sat-29	Sun-30	Mon-31	Tue-01	Ave
0	0	2	- 11	6	3	2	1	2	12	7	
1	1	2	- 11	4	3	3	1	2	10	7	
2	2	2	- 11	4	2	3	2	2	9	8	
3	2	2	- 11	4	0	1	2	2	8	9	
4	2	2	- 11	5	0	- 1	2	2	8	9	
5	2	2	- 11	5	0	- 1	2	2	7	8	
6	1	2	- 11	6	0	- 1	2	2	7	7	
7	3	2	12	6	0	1	2	2	6	7	
8	3	5	14	6	0	- 1	2	2	6	6	
9	4	6	15	6	0	1	0	2	6	6	
10	5	7	14	7	0	- 1	0	2	6	6	
11	6	- 11	13	5	1	0	0	5	4	6	
12	6	10	13	5	1	0	0	6	5	2	
13	5	10	12	5	2	0	0	7	4	4	
14	3	10	14	3	2	0	0	8	4	4	
15	2	9	13	2	3	0	1	9	4	4	
16	2	10	13	2	4	0	1	10	4	3	
17	1	9	- 11	3	4	0	2	12	4	6	
18	2	- 11	9	3	5	0	2	11	5	5	
19	3	- 11	9	5	5	4	2	10	6	5	
20	5	13	9	5	5	3	2	10	6	5	
21	4	13	8	7	5	4	2	12	7	4	
22	4	10	5	4	5	4	2	- 11	5	4	
23	3	- 11	7	3	4	3	2	11	5	7	
Avg	3	7	11	5	2	1	1	6	6	6	

- Hourly census views to better correlate throughput metrics with patient experience performance
 - ED Census
 - Hold Census
 - Lobby Census
 - BHU Census in Main ED



SGH ED BEHAVIORAL HEALTH DASHBOARD



- Behavioral health dashboard tracking both ED and G-PATH patient cohorts
- Discharge and re-visit information for evaluating path of care



ED Analytics – External Additions

- Still left with questions
- Pairing internal and external data together:
 - Ancillary
 - Patient Experience
 - Provider Scorecard
 - Transfer of Care (TOC)
- Continual evolution of key performance drivers

ED Analytics – Ancillary

XRAY LOS Process Measures* (for patients with an Xray test)

Coefficient 0.75

-0.63

-0.46

0.01

0.73

0.45

Correlations w/ ALOS

Order to Complete

Complete to Read

Read to Dispo

Dispo to Exit

Door to Bed Bed to Order

Process Measure (Avg)	Sat-22	Sun-23	Mon-24	Tue-25	Wed-26	Thu-27	Fri-28	Sat-29	Sun-30	Mon-31	Tue-01	Average	% of LOS
Door to Bed	72	63	39	36	34	25	28	29	38	27	26	38	18%
Bed to Order	-13	1	6	10	16	29	24	17	16	18	15	13	6%
Order to Complete	38	43	56	50	43	54	53	41	35	44	49	46	22%
Complete to Read	17	30	25	15	19	25	23	33	29	18	24	23	11%
Read to Dispo	75	60	45	78	52	48	39	53	67	65	57	58	28%
Dispo to Exit	33	25	27	30	27	19	31	29	33	27	26	28	14%
ALOS	223	223	197	220	190	199	199	202	217	198	198	206	100%
	ACC Volumes:	113	131	134	137	117	111	104	102	140	127	122	
Door to Order	60	64	44	46	50	54	52	46	53	45	41		

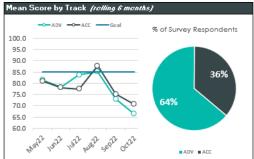
ALOS Key
< 160
161 -180
> 180

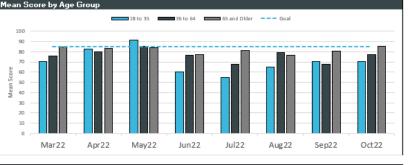
- Targeted analytics for Accelerated Care cohort (majority of discharge population)
- Breakdown by process measures to identify variation within existing processes and highlight correlations with ALOS

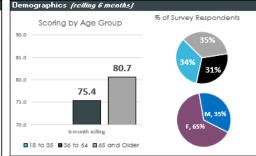


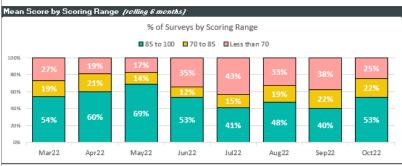
ED Analytics – Patient Experience

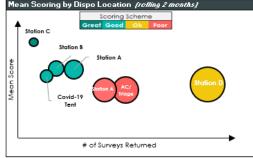




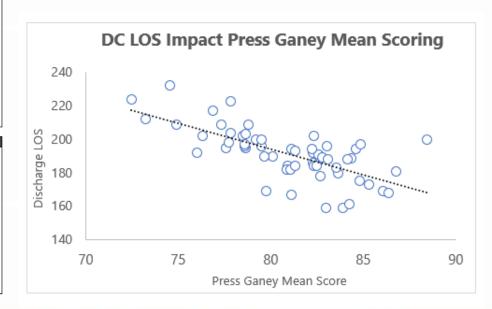








- Combining Press Ganey data with ED throughput metrics
- Identifying relationships between variables





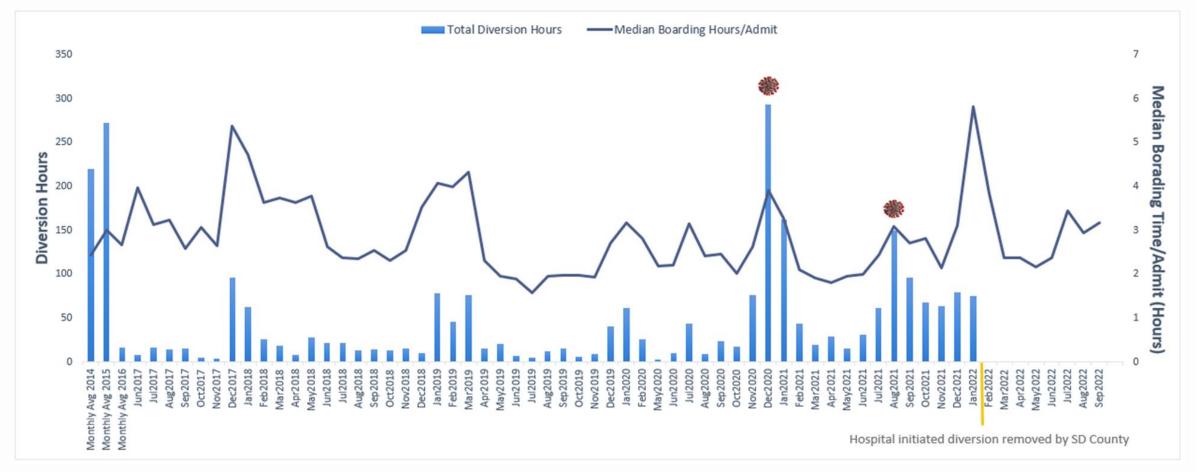
ED Analytics – Provider Scorecard

ED Provider	Pts. Seen*	Pts. Dispositioned	Total Admits	Admit Rate	Avg. Provider to Dispo (min)**	Assign to 1st Order - ADV (min)**	Assign to 1st Order - ACC (min)**	CT Utilization Rate^	YTD SEP-1 Usage, All Patients	YTD SEP-1 Compliance Rate, All Patients	Surveys Returned	Avg. Mean Score	Est. Doctors Domain Rank***
Provider 1	16	13	6	46%	212	3	-	46%	1/3	33%			
Provider 2	147	117	54	46%	145	12	3	40%	2/2	100%	1	100.0	99
Provider 3	88	70	20	29%	145	9	8	24%	0/2	0%	2	47.5	1
Provider 4	317	283	104	37%	136	0	1	51%	5/5	100%	5	93.0	98
Provider 5	194	164	62	38%	234	22	22	49%	1/1	100%			
Provider 6	73	68	26	38%	210	13	42	40%	0/1	0%			
Provider 7	47	39	12	31%	117	0	1	18%			1	0.0	1
Provider 8	272	222	108	49%	182	15	18	34%	4/4	100%	2	100.0	99
Provider 9	164	145	24	17%	184	0	1	26%	1/1	100%	5	78.0	3
Provider 10	63	54	23	43%	182	13	4	31%	2/2	100%			

- Combination of internal and external components to tell the whole story
- Includes:
 - Throughput Metrics
 - Ancillary
 - Sepsis
 - Patient Experience



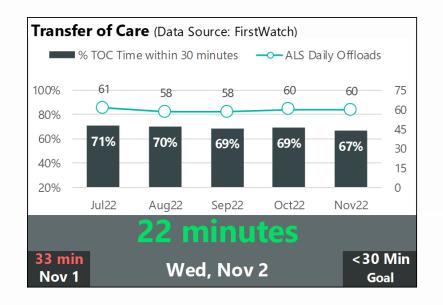
ED Analytic – Transfer of Care

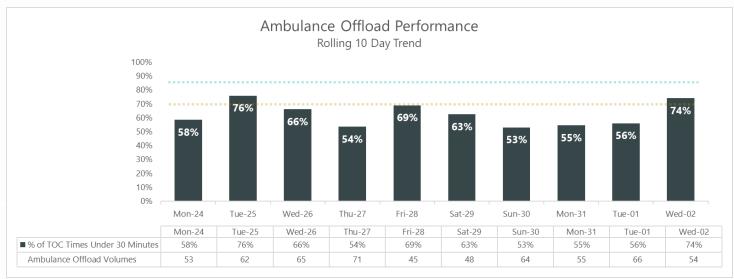


Zero serious safety events



ED Analytics – Transfer of Care





ALS Ambulance Arrivals (% of vol)	53 (16%)	53 (16%)	61 (18%)	65 (19%)	71 (21%)	45 (15%)	48 (17%)	64 (22%)	53 (16%)	64 (19%)	58 (20%)
Offloads > 20 Minutes TOC	49%	51%	48%	42%	68%	38%	50%	56%	57%	64%	52%
Offloads > 30 Minutes TOC	30%	42%	23%	34%	46%	31%	38%	47%	42%	47%	38%
Offloads > 60 Minutes TOC	21%	30%	18%	25%	37%	20%	27%	39%	38%	34%	29%

Source: First Watch



ED Analytics – Transfer of Care

Percentage of Offloads Under 30 Minutes by Arrival Hour (Oct2022)

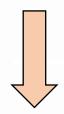
Hour	EMS	EMS	EMS	EMS	Daily
Hour	Agency 1	Agency 2	Agency 3	Agency 4	Arrivals
0	70%	100%	100%	60%	2
1	68%	100%	100%	100%	2
2	80%	80%	100%	100%	2
3	79%	100%	100%	100%	1
4	88%	100%	100%	100%	1
5	90%	100%	100%	100%	1
6	69%	100%	92%	100%	2
7	68%	100%	88%	75%	2
8	71%	83%	100%	75%	3
9	65%	80%	85%	100%	3
10	72%	100%	80%	50%	3
11	48%	100%	86%	78%	4
12	52%	82%	75%	60%	3
13	56%	50%	78%	57%	3
14	51%	50%	84%	40%	4
15	45%	85%	100%	78%	3
16	52%	57%	90%	33%	3
17	56%	90%	80%	25%	3
18	62%	100%	94%	57%	3
19	57%	70%	73%	60%	3
20	74%	50%	85%	50%	3
21	54%	73%	100%	100%	3
22	60%	78%	80%	80%	3
23	56%	88%	90%	56%	2

Key
80% to 100%
65% to 79%
Below 65%

- View performance by hour to focus efforts on improving offload time
- Identify specific agencies to strengthen collaboration efforts for TOC improvements
- Visualize variances between TOC method utilization by operating agency



- Daily Throughput Dashboards
- Ancillary Dashboards
- Provider Scorecards
- Behavioral Health Dashboard
- GEDA Dashboard



- Accelerated Care
- Advanced Care
- Midtrack
- G-PATH
- Surge Spaces
- Code Transport





AcceleratED Care

Transforming Grossmont Emergency
Enhancing the Sharp Experience

Target Population:

- Non-Admitted Patients
- ESI (Emergency Severity Index) "Vertical" 3, 4, 5

Goals:

- < 20 mins from Door to Provider
- < 1% LWOT
- < 120 mins Length of Stay</p>



AdvancED Care

Transforming Grossmont Emergency Enhancing the Sharp Experience

Target Population:

- Non-Admitted and Admitted Patients
- ESI (Emergency Severity Index) "Horizontal" 1, 2, 3.

Goals:

- < 20 minutes from Door to Provider
- < 1% LWOT (Left Without Being Seen)
- LOS Discharged Pts <180 min more than 50% of time



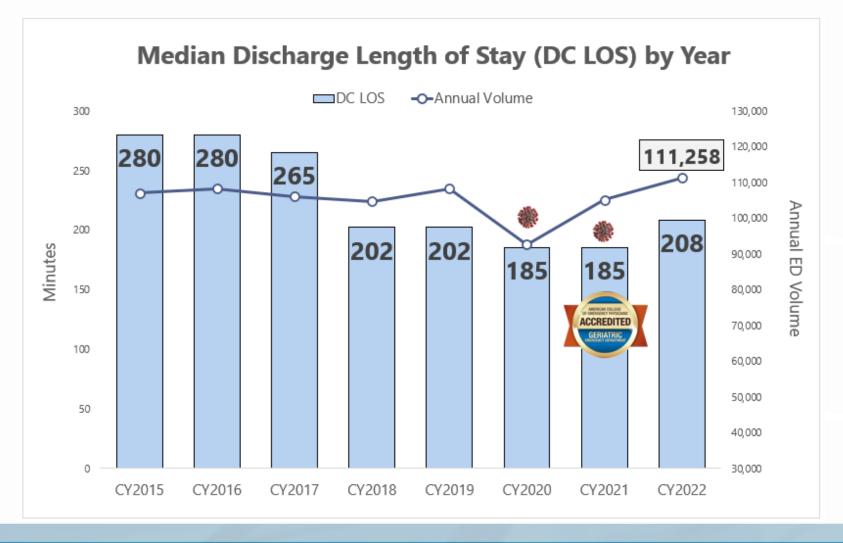
3 Track System:

- 1. ACC (easy)
- 2. Midtrack (complicated)
- 3. ADV Care (sick)



- Quickly identify sick patients that need immediate stabilization
- Discharge the easy, preferably from triage
- Get the complicated in front of the discharging provider ASAP and get them, "in-process" as quickly as possible (labs drawn and sent, radiographic studies completed, and first dose of medications)





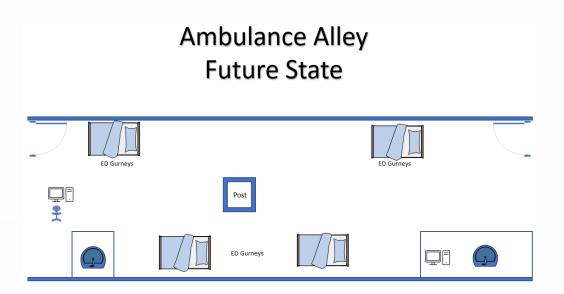
The Power of Data

- Volumes increasing
- Discharge length of stay decreasing
- Zero serious safety events



Next Steps: Areas of Opportunity

- > Partnering with EMS, San Diego County and CHA
 - Sharing data
 - Transparency among agencies
 - Joint solutions
- ➤ Initiating Lean Six Sigma project
 - Staff training and education
 - Creating pathways for offload options
- > Transforming our offload area
 - Redesign of ambulance offload area
 - Adding staffing/gurneys
- > Expanding our care areas
 - Utilization of tents for treatment
 - Pod F
 - Midtrack workflow
 - Care Clinic





Open Forum

SHARP Grossmont Hospital



Thank you



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