TriHealth

Triumphs

Bringing New Tools to the Trade

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A Letter from
John Prout

Dear Fellow Employee,

Are you ready? With health care change upon us, TriHealth is working at all levels, from top to bottom, to successfully manage that change. Eliminating wasted time and resources, avoiding medical errors and hospital-acquired infections, and decreasing readmissions of patients recently discharged are a few of the important goals receiving our attention.
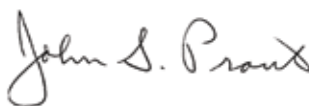
A constant in every process is our unwavering commitment to quality, safety, service and value. Another constant is that our organizational changes can't happen without your full support. There are opportunities in every corner of our system to work more efficiently and effectively, all with an eye toward better, safer, more cost-effective patient care.

Read on to learn more about TriHealth 2020, our system-wide process for "creating value through continuous innovation and transformation." You'll get to know Sher McClanahan, the leader of the process and some of the teams working to bring greater efficiency and effectiveness to their work settings.

You'll also read several success stories about the LEAN process in action, streamlining daily operations and bringing best practices to a variety of functions.

In the coming year, you'll be receiving further communications about the part you can play to fulfill our vision and make TriHealth the place "where people want to work, where physicians want to practice, and most importantly, where the community wants to go when they need the best quality, service, safety and value in health care."

Sincerely,

John S. Prout

John S. Prout
President and Chief Executive Officer

Written by: Jeff Wiesemann

TriHealth 2020
Our Future | Your Vision

Our Future, Your Vision

"Urgency motivates people to relentlessly look for ways to rid themselves, their calendars and the organization of things that do not add value."

—John P. Kotter, author of A Sense of Urgency

Value. It's what we all want, whether we're purchasing a new car or hiring a plumber. Health care consumers also are seeking the highest quality care and best experience for the best value. It's up to all of us to provide it.

To increase the value of our services, we have begun a system-wide transformation called TriHealth 2020, looking at both clinical and non-clinical functions. As you've probably heard through employee forums and *LinkNotes*, we started in early 2012 by forming workgroups—teams of employees that analyze and identify best practices within our system and in other organizations.

"As the health care industry changes dramatically, TriHealth's commitment to quality, safety and service remains strong. TriHealth 2020 will enable us to continue to achieve our mission and offer high-value, patient-centered care," says Sher McClanahan, senior vice president, Clinical & Operational Transformation, who is leading the daily operation of TriHealth 2020.

"TriHealth 2020 is a process—not a project—that involves everyone. This means all of TriHealth looking at what we do and asking 'can we do this better?'"

All processes and procedures are being reviewed to see where we can eliminate redundancy, waste or poor quality. In some cases, we are using the LEAN method to find and implement best practices (see page 4 for more on LEAN). Here are some early successes:

- The Bethesda North Cancer and Ambulatory Treatment Center, which serves more than 500 patients a day, now administers patient treatments 10 minutes earlier on average, and has shortened patient visits one hour and 42 minutes per patient.

- Engineering and Maintenance at Bethesda North saved $65,000 a year by switching to a lighter cart that allows them to complete jobs more efficiently. (See page 5.)

Sher explains, "Getting rid of waste includes things like eliminating unnecessary patient and staff movement, or waiting for supplies, medications and test results. We need to always question what we're doing. Is this the best way? Does the patient really need another X-ray? Does this add value? How do I do the right thing for every patient?"

In 2012, the federal government spent $950 billion in health care costs. National estimates suggest that 30 percent of health care expense is "waste" and doesn't add value. Predicted waste for TriHealth hospitals in fiscal year 2013 is $280 million—$778,000 per day. Eliminating "waste" will not only save money, it will free all of us to do the things we do best: take care of our patients.

"We need to break down silos and create forums where people can evaluate quality, safety and service," Sher says. "But we also need to make sure our staff has the support it needs to ask difficult questions and undertake difficult change."

TriHealth is an enormously successful system of physicians, hospitals and communities working together to live better. In the future, our performance will be measured by our ability to deliver high-value, patient-centered care. Together, we can be prepared for this future.

If you have questions or want more information about TriHealth 2020, contact sher_mcclanahan@trihealth.com.

Written by: Sandy Weiskittel

Creating the "Wow" Factor

Sher McClanahan leads TriHealth culture shift

Senior Vice President Sher McClanahan wants to engage all employees in creating a seamless, patient-centered system.

"I started working in a hospital when I was 15 years old. It's in my blood. I have a passion for it," says Sher McClanahan. That passion radiates from her as she talks about her new position as senior vice president of Clinical & Operational Transformation for TriHealth.

"I want to create an infrastructure that knits together the pieces and parts of the system so people come to our hospitals and medical centers and think 'wow.' We want patients' experiences to be smooth as butter."

Sher is leading a culture change called TriHealth 2020, a system-wide effort to gain efficiencies and eliminate waste by continuously transforming systems, practices and tools throughout TriHealth.

Formerly chief operating officer for Bethesda North Hospital, Sher says her management style is all about team. *"I don't have all the answers*...but together we can find them. My philosophy is to do the right thing and move in that direction no matter what obstacles you come upon."

Last year, she spent a 10-day vacation in the southwestern desert with no cell phone service. "I wanted to confirm to my staff that 'You can do it.' I also want people to have a work/life balance, so I have to demonstrate it."

Sher reveals more of her personal balance: "When I'm not working, I'd always rather be outdoors. It rejuvenates me. A perfect day is taking my dog and heading to my 165-acre ranch in Kentucky to go horseback riding and hiking." A widow, she enjoys spending time with her son and daughter-in-law, who live on the ranch.

Educated locally at Northern Kentucky University, College of Mount St. Joseph and Xavier University, Sher was born in Phoenix. Her parents and five younger siblings moved frequently as a result of her father's military career. Her lifelong love for travel has taken her to Alaska, West Africa, Lebanon, Italy and Spain. "I like traveling off the beaten path. I'd like to try camel riding in Mongolia and stay in a yurt."

Closer to home, she enjoys Playhouse in the Park, a good movie (no blood and guts), and reading historically based novels and books on change and transformation.

She is putting knowledge from the latter to work at TriHealth, looking for creative ways to make quick, fluid changes with maximum results.

Written by: Sandy Weiskittel

Teams Built for Change

In the midst of busy work lives, TriHealth 2020 workgroups are stepping outside their everyday experience to recommend changes that save both time and money—and ultimately create a stronger health system. The teams ask questions like:

- How can we improve the TriHealth patient experience?
- How do we decrease patient length of stay?
- How can we save millions of dollars for supplies each year?

"We do deliver evidence-based practice principles every day, but our team is looking at how we can work together more effectively and find cost savings through greater efficiency," says Nancy Wuestefeld, PharmD, critical care clinical pharmacist at Good Samaritan. She is team leader for one of 75 TriHealth 2020 workgroups throughout TriHealth. Her team's challenge is to reduce length of stay for patients with sepsis (severe infection).

Physicians, nurses, care coordinators, residents and Nancy grapple with why some patients are staying longer than needed and how to eliminate unnecessary hospital days. Two practical applications that have evolved from their team meetings are:

- Creating a template on TriHealth Connect for transition notes to allow clearer hand-off communication as physicians change from shift to shift
- Evaluating patients on ventilators in the ICU to guard against over-sedation, which can lead to a longer stay

What Nancy likes about the process is that "real people are coming to the table with real ideas. A lot comes down to basic communication." Next up for her group is developing order sets to ensure patients are on the best possible antibiotics for their particular infection.

She sees the team's work as one answer to a future with more government regulations and less reimbursement for health systems. "We all need to be rowing in the same direction," she comments.

Nancy Wuestefeld, PharmD (left), talks with Shahla Mallick, MD, about ways to get patients safely off ventilators more quickly.

More Efficient, More Effective

Deloitte Consulting, a national health care consulting agency, has helped TriHealth identify opportunities for increased efficiency and effectiveness. TriHealth 2020 work groups currently are focusing on the following areas:

- Supply chain
- Clinical effectiveness
- Clinical resource utilization and throughput
- Human resources
- Revenue cycle

Shirley Calaway, Service Excellence manager at Bethesda North, says her team's work centered on the patient experience. "We looked at how we roll out service excellence initiatives, develop action plans, research for best practices and address low patient satisfaction scores. The big take away is that we need to help every individual be accountable. It's up to every employee to help people have a good patient experience."

Shirley's workgroup has finished meeting and has made its recommendations, but many others continue to promote the system's smooth operation, which ultimately serves the care of the patient.

More workgroups will form in the future and you may be asked to join one. Watch for information on how you can get involved.

Written by: Chris Klein

Going LEAN

Above: Using an intercom, E. Robert Wanat II, DO, keeps wait time to a minimum for patients at Bethesda Care Sharonville.

Below: By implementing LEAN principles, Sandy Jones, RT, and her co-workers have significantly improved patient flow.

Have you noticed? TriHealth is going LEAN. We're working smarter and streamlining many of the things we do. LEAN is a large part of what will make TriHealth 2020 successful.

John Pennell, vice president of Support Services, is one of 26 TriHealth leaders who last year completed a LEAN training program. Their goal was to identify areas within TriHealth that could operate more efficiently and apply LEAN principles to make it happen. Pennell's team of five, with guidance from Linda Galvin, director of Performance Improvement, focused on the Bethesda North Pharmacy. Their aim: to improve speed of first-dose medication delivery—from the time it is prescribed to the time it is delivered to the nursing unit.

"Each month, after I attended LEAN training, I met with my group and we discussed how to implement the tools I had learned," he explains. After careful examination, the team identified three touch points that could be streamlined in order to get a patient's first dose of medication delivered more quickly. (Subsequent doses are delivered per a schedule.)

Assisted by TriHealth's transition to TriHealth Connect, the group made changes that reduced the delivery time from 59 to 42 minutes.

Bethesda Care Sharonville also has seen dramatic process improvement after the entire staff, working together, applied LEAN principles. Led by Supervisor Cheryl Bicknell, RN, and Assistant Supervisor Carmen Sora, MA, with assistance from Senior Performance Improvement Consultant Lisa Humphrey, the group sought to reduce length of visit. After collecting data, they set target outcomes.

Results are impressive. By reorganizing workflow, they shaved 15 minutes off the registration process and shortened an average visit by 23 percent. Companies now receive results in one day versus five. Physicians now use an intercom to more quickly alert staff that an X-ray or test is needed. A portable phone has dramatically shortened the time it takes to schedule a referral.

If you're interested in learning more, look for e-LEARN courses available from TriHealth Corporate Educational Services or e-mail Linda Galvin, Performance Improvement, at linda_galvin@trihealth.com.
See pages 5—8 in this issue for LEAN success stories.

Written by: Sandy Weiskittel

Bethesda North Maintenance Boosts Workforce Efficiency

Trading in their 600-lb. tool carts for smaller, lightweight carts with ladders has saved Bethesda North's Maintenance Department both time and money. The maintenance crew had often checked out job assignments first before bringing the large tool cart from their Ground Floor home base. The smaller cart, however, always goes with them to jobs, equipped with a ladder and commonly used tools like hammers, screwdrivers and wrenches. The simple change saves hours each day and more than $65,000 a year.

In addition, extra ladders and light bulbs are placed in several strategic locations throughout the hospital. Mechanics have organized more than 200 specialty tools.

"Our goal is to get the right tools to the job in the most efficient manner possible," says Lee Storm, Bethesda North Maintenance supervisor.

The extra time generated can be used to complete work orders sooner and meet the demand for more rigorous facilities codes and regulations. The new tool cart is one of several LEAN projects recently implemented by Bethesda North Maintenance, using the skill and knowledge of staff to identify and eliminate everyday sources of waste that are commonly overlooked but have significant impact on efficiency and productivity.

Performance Improvement Consultant Chris Luckett supports and advises the department in their efforts. Since introducing LEAN in 2010, Bethesda North Maintenance has decreased the number of jobs that go past their target completion date by 75%.

"We're being asked to do more and more work every week," Lee says. "We started out with managers thinking of improvement ideas. When that well started to run dry, we asked everyone in the department to come up with ideas." The department gives free lunch coupons to anyone who submits a LEAN idea that is put into practice.

Larry Berter, Bethesda North Maintenance mechanic, shows off a streamlined tool cart his department designed, making transport to job sites much easier than the 600-lb. cart mechanics previously used.

New Cart

$65K Savings Per Year

Old Cart

600 lbs.

250 lbs.

Written by: Lisa Daumeyer

Group Health Improves Patient Access

When patients are happy, Kaylah Israel is, too. Kaylah is one of the voices Group Health patients hear when they call for prescription refills, test results, or to speak to their physician. Lately, she's been interacting with increasingly happy customers as the result of a LEAN project Group Health underwent last year.

Group Health's Clifton call center handles an average of 33,000 adult internal medicine calls a month for their eight offices. In early 2012, they were seeing a trend of increasing abandoned calls, decreasing first-call resolution and decreasing speed of answering calls—all resulting in lower patient satisfaction scores.

Tim Gramann, Group Health's chief operating officer, and Ida Combs, director of practice operations, had faith that the problem was not due to their call center staff, and they weren't convinced that increasing staff was the answer. They turned to TriHealth's Performance Improvement department for answers.

Senior Performance Improvement Consultant Regina Fitzsimmons and an eight-member team used the LEAN principles of quality and process improvement to dissect the problem and explore solutions. Data analysis revealed that the issue was the callback process. They found 18 to 29 process steps in handling calls, depending on the call loop.

The team developed a consistent process that streamlined the call handling, thereby reducing steps by 50 percent.

In a six-week pilot at Group Health's Springdale office, three call center employees—including Kaylah—moved to Springdale, triaging the calls from that office instead of the Clifton call center.

Getting faster answers for patients is one of the many benefits Group Health Springdale has noticed in bringing phone triage staff on site. Answering calls from the Springdale office are (l to r) Kimberley Smith-Williams, RMA, Mary Drach, MA, and Kaylah Israel, MA.

Within one week, the abandoned call rate dropped 22 percent and other metrics improved dramatically as well.

Through this change, the call agents interacted with the doctors and office staff personally; they could physically turn around and get an answer while the patient was on the phone. This increased communication and trust led to better job satisfaction for Kaylah and her team.

The pilot has worked so well, it's rolling out to Group Health's other sites over the next several months.

Ida credits the LEAN process with the success. "This process kept us focused and helped us figure out the problem," she says. "LEAN gave us tools and a road map to follow."

Written by: Laura Englehart

Going Home:
A Faster, Safer Process

For patients in the 4-100 telemetry unit at Bethesda North, the hospital discharge process was taking about three hours.

Variations in the way nurses received discharge notices, delivered discharge instructions to patients, and ordered patient transportation from the hospital increased the time it took to move patients out the door and led to low overall patient satisfaction scores.

"Because our patient satisfaction scores were low in regard to patient discharges, this was a great opportunity to try and affect change," says Stacy Kelly, RN, nurse manager.

To improve the process, the unit analyzed the way it discharged patients and, in December, implemented two plans: One addressed the steps to deliver discharge instructions to patients, and the other worked to improve communication between physicians, nurses,

other caretakers and volunteers. Both plans sought to streamline and standardize the process by including:

- A visual cue in the medical records system to notify nurses when a patient is discharged

- Standard scripts for nurses to use when instructing patients on what to do when they leave

- Opportunities for consistent communication between patients, physicians and other health care providers.

In addition, the unit set a goal to discharge patients within one hour and 15 minutes.

Since implementing both plans, preliminary results show unit discharge times have improved to about one hour and 20 minutes, says Beth Solomon, senior Performance Improvement consultant for TriHealth. She says she hopes this kind of LEAN initiative sets an example for other TriHealth employees.

"Our next steps are to take these improvements to management committees so that the other units can learn from what we did and implement some of the changes we made and improve their processes as well and replicate the successes through the organization," Beth adds. "That's the benefit of these projects—to improve the patient experience, which is good for TriHealth."

Written by: Sarah Buelterman

TriHealth Heart Institute: *Patients Praise Shorter Wait Times*

TriHealth Heart Institute's Montgomery office has cut wait times by more than 50 percent—and patients are noticing.

"It's amazing," says Therese Currin, practice manager at the TriHealth Heart Institute. "[One patient] was in and out of the office, I think it was between 35 and 40 minutes. She went to the front desk and said, 'I've never been in and out so quickly...I don't know what you are doing, but keep it up!'"

The Heart Institute began implementing their LEAN project during late October 2012 as a way to effectively streamline processes between Cardiology Associates of Cincinnati and the Cardiology Center of Cincinnati—two practices that aligned with TriHealth to form the TriHealth Heart Institute in 2011.

Senior Performance Improvement Consultant Lisa Humphrey started the process with a six-hour rapid improvement event that brought together frontline staff, managers and physicians from each practice to identify opportunities for improvement. "Those two practices really had to operate as one—be seamless for the patient experience, no matter where [the patients] went," Lisa points out. "They were already providing great care. It was just a matter of getting the patient through in a timely fashion."

Then, one office from each practice diagrammed their workflow to compare processes. "We critically looked at how we could change it to make it more efficient," Therese explains.

From there, the process improvement group met twice each week for three weeks. Since applying LEAN principles, which focus on eliminating wasted time and resources, the TriHealth Heart Institute Montgomery office has decreased time in waiting rooms by 14 minutes, decreased time waiting for the doctor in the exam room

Using LEAN processes, patients are being seen 50 percent faster at TriHealth Heart Institute's Montgomery office.

by 11 minutes, and reduced the average visit length from 77 minutes to 48 minutes.

"It just makes the workflow a lot easier," Michelle Owusu, certified medical assistant, explains. "It helps the whole staff. It helps morale. I just think it's a good thing."

Written by: Melissa Haller

Christine Marshall gets ready for ICD-10, a new classification system of diseases and health problems, which will be implemented in October 2014.

will replace the current ICD-9 on October 1, 2014. The federal government has mandated this, but it's not a simple switch: ICD-10 represents a massive transition that requires preparation by many people across TriHealth, including physicians, nurses, support staff, coders and Patient Accounting.

ICD-9 is based on a 30-year-old code set that does not capture the current range of health services and medical knowledge. ICD-10 is about improving the quality of the health information we're documenting. Among other things, it will:

- Provide a more relevant code set to support the data requirements of payment reform, reimbursement, meaningful use, accountable care, quality initiatives and research.

- Allow for more complete and accurate recording of the patient experience.

- Describe a patient's specific diagnosis and treatment and determine the final bill.

The new system will change the number of codes and the way they are used. For example, the current **844.1: Sprain/strain medial collateral of knee** might be **S83.411A: Sprain/strain medial collateral of right knee, initial encounter** with ICD 10.
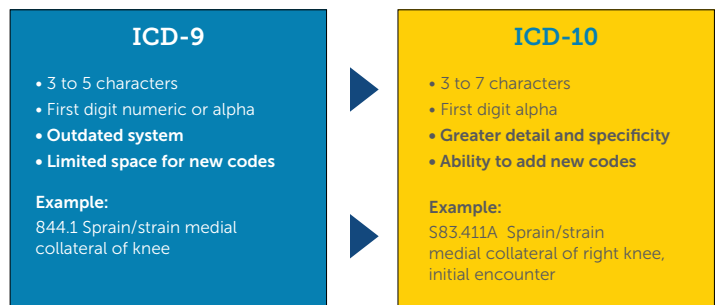
You'll hear more about it through the year, as Corporate Educational Services announces detailed training information that will be available in various formats, including live presentations and Webinars. Stay tuned!

Updated Coding System To Bring Big Transitions in Recording Patient Services

Change is coming to the way TriHealth's physicians and staff members code patient diagnoses and procedures, as well as the way we bill, report and track the millions of patient interactions that occur each year across our system. It's commonly called ICD-10, a short name for what will impact all health care workers in the United States.

"It's critical that all employees be prepared for the changes to come with ICD-10," says Georges Feghali, MD, senior vice president of Quality and chief medical officer for TriHealth. "It will directly impact reimbursement and patient risk assessment, so it's important that we get it right."

ICD-10, or the tenth revision of the International Statistical Classification of Diseases and Related Health Problems,

ICD-9	ICD-10
• 3 to 5 characters	• 3 to 7 characters
• First digit numeric or alpha	• First digit alpha
• **Outdated system**	• **Greater detail and specificity**
• **Limited space for new codes**	• **Ability to add new codes**
Example: 844.1 Sprain/strain medial collateral of knee	**Example:** S83.411A Sprain/strain medial collateral of right knee, initial encounter

One of the most noticeable changes from the ICD-9 disease classification system to the new ICD-10 will be the increased number of highly specific codes.

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TriHealth 20 20
Our Future | Your Vision

Hospitals

Bethesda Butler Hospital
3125 Hamilton-Mason Road
Hamilton, OH 45011
513 894 8888

Bethesda North Hospital
10500 Montgomery Road
Cincinnati, OH 45242
513 865 1111

Good Samaritan Hospital
375 Dixmyth Avenue
Cincinnati, OH 45220
513 862 1400

TriHealth Evendale Hospital
3155 Glendale Milford Road
Evendale, OH 45241
513 454 2222

Ambulatory Centers

Bethesda Arrow Springs
100 Arrow Springs Boulevard
Lebanon, OH 45036
513 282 7000

Good Samaritan Western Ridge
6949 Good Samaritan Drive
Cincinnati, OH 45247
513 246 9800

Good Samaritan Glenway
6350 Glenway Avenue
Cincinnati, OH 45211
513 569 6777

TriHealth Anderson
Opening 2013

Services

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11129 Kenwood Road
Cincinnati, OH 45242
513 891 1622

Hospice of Cincinnati
4360 Cooper Road
Cincinnati, OH 45242
513 891 7700

TriHealth Fitness & Health Pavilion
6200 Pfeiffer Road
Cincinnati, OH 45242
513 985 0900

TriHealth Priority Care | Glenway
6139 Glenway Avenue
Cincinnati, OH 45211
513 346 3399

TriHealth Priority Care | Mason
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