

La. Rural Health Association 2010 Spring Conference

April 27, 2010

Hilton Baton Rouge Capitol Center

**The RHPI Project:
Success Story and Lessons Learned
by
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Delta Rural Hospital Performance Project (RPHI)

HISTORY /BACKGROUND

- **Introduction**
 - Began in 2001
 - Assist hospitals in the Delta Region to:
 - Improve financial, quality, and operational performance thru comprehensive PI activities
 - Help build state and regional capacity by providing assistance to rural hospitals
 - Collect and disseminate info and resources that focus on improving performance
- **Project Activities**
 - Funded thru Office of Rural Health Policy, HRSA
 - Contracted to Mountain States Group of Boise, Idaho who partner with Rural Health Resource Center of Duluth Minnesota
- **Eligible Hospitals**
 - Fewer than 200 beds
 - Located in Delta Region of La.
 - Works in coordination with State Office of Rural Health, State Hospital Associations, and QI organization
 - Selection criteria for individual TA can be found on website

Delta Rural Hospital Performance Project (RPHI)

BUNKIE GENERAL HOSPITAL PROJECT SUMMARY

- **PROJECT 1**

- **Financial and Operation Performance Improvement Assessment (PIA) by Stroudwater in FY 06**

- *Employee Feedback Survey – FY 07*
 - *Facility Planning Assessment – FY07*
 - *PIA Follow up – FY07*

- **PROJECT 2**

- **Clinical Quality Development Program by Darlene Bainbridge & Assoc. in FY 08**

- **PROJECT 3**

- **Leadership Development and Mid-Level Management Training by HCCA International – FY 10**

RHPI PROJECT I:

Financial & Operational Performance Improvement

Assessment (PIA) by Stroudwater

- **Time frame**
 - PIA - February 2006 to June 2006
 - Employee Feedback Survey – July 07
 - Facility Planning Assessment – July 2007
- **Assessment Approach**
 - Review historical data – cost report, etc.
 - Follow up with an intensive, on-site analysis of programs, strategic plans, and operational review
 - Onsite analysis included interview with hospital management, board members, physicians, and department leaders
 - Final report of findings and recommendations presentation
- **Goal** – Conduct focused analysis of hospital and its market that results in the identification of opportunities for: clinical service line; operational performance; and financial performance

RHPI PROJECT I:
Financial & Operational Performance Improvement
Assessment (PIA), by Stroudwater cont.

- **Work Plan Emphasis**

- Review service area population characteristics and trends
- Review clinical service program comparing
- Review financial functions including 3rd party contract strategies
- Review Medicare/Medicaid reimbursement reports to ensure optimal payments
- Benchmarking of hospital expenses with peer hospitals
- Physician practice management assistance
- Review of organization architecture and general mgmt. principles

RHPI PROJECT I: Financial & Operational Performance Improvement Assessment (PIA), by Stroudwater cont.

- PI Consultative Summary (including Employee Feedback Report)
 - Final report with 151 slides
 - 27 major priorities identified of which **8 required immediate attention:**
 - Improve QI/PI program and Board involvement
 - Improve image of services offered
 - Increase swing bed use
 - Start ED patient survey
 - Analyze third party contracts and summarize in grid format
 - Develop business office performance indicators and report monthly
 - Start due diligence on outsource billing options and assistance in catch up
 - Improve clinical fee schedule
 - Employee Feedback Survey recommendations:
 - **Knowledge Skills** - Increase leadership skills with focus on accountability, recognition, and developing teamwork
 - **Motivation** – review wage and salary scale, and develop reward system
 - **Organization Barrier** – include all in planning and improve communication between management and employees
 - 4 action plans completed as of May 2007
 - **Lessons learned** – key management turnover stifled the project, Board buy in, Leaders not trained on performance improvement, no budgets, etc.

RHPI PROJECT 2:
Clinical Quality Development Program
by Darlene Bainbridge & Assoc.

- **Background**

- BGH participated in the DHH Bureau of Primary Care and Rural Health Rural QI Leadership conference, Cypress Bend, Many, La. – “ Engaging your Medical Staff and Board in QI Process” on 8/31/07
- BGH won the door prize – Darlene Bainbridge for the Day
- Began evaluation and education of Quality program at BGH in September 2007
- The need was so great that funding was needed so BGH turned to RHPI project and applied for grant.

RHPI PROJECT 2:
Clinical Quality Development Program
by Darlene Bainbridge & Assoc.

- **Time Frame-** began 5/08 to 9/08
- **GOAL:**
Development of a Quality and PI approach and system that supports the hospital in five critical healthcare outcomes. The goal was also to move away from the traditional reactive approach of fixing things only after they are broken to one of proactive preventing errors.

RHPI PROJECT 2:
Clinical Quality Development Program
by Darlene Bainbridge & Assoc.

- **4 Phase approach that addressed the following shortfalls of existing program:**
 - QA plan not progressed to QI/PI
 - Fragmented program
 - Department operating in silo's
 - No hospital- wide plan
 - Duplication of reporting – quality, compliance, risk, etc.
 - No dedicated/ trained leader

RHPI PROJECT 2:
Clinical Quality Development Program
by Darlene Bainbridge & Assoc., cont.

- **Outcomes**

- New departmental plans that link to hospital-wide
- Quality Calendars developed fro 22 department that incorporates all regulatory standards
- Extensive Department Manger Education
- Board Education
- Medical staff education
- New QI coordinator appointed with extensive training by consultant
- Removed functional silo approach and quality to an integrated approach across the ten (10) aspects of quality (IC, UR, Rick Mgmt., Safety, Corp Comp., Peer Review, Professional competency, QA, QI, and PI)
- Total restructure of department meetings – One meeting per month that incorporates quality, general, and safety/IC, and compliance ----
SUPER MEETING
- Incorporated Employee and Patient satisfaction into QI activities

RHPI PROJECT 2:
Clinical Quality Development Program
by Darlene Bainbridge & Assoc., cont.

- **Success stories** as presented at Delta RHPI Project 2009 Conference – Sept 09
 - **Admit Redesign Team**
 - Multidisciplinary team with internal and external partners
 - New computer system with ABN printout on admission
 - New process – 16 steps to 6 steps
 - New lab requisition form
 - **Impact**
 - 25 % of claims not coded
 - 15% of claims did not meet medical necessity
 - Financial projected annual saving = **\$69, 641**
 - Satisfaction for patient and customers improved

RHPI PROJECT 2:
Clinical Quality Development Program
by Darlene Bainbridge & Assoc., cont

- **Success stories** as presented at Delta RHPI Project 2009 Conference
– Sept 09
- **Supply Redesign Team**
 - New computer system with bar coding
 - No par levels established at hospital
 - No surveillance of supplies in leadership rounds
 - Impact –
 - ER supply savings \$3,000/ month versus \$532 - \$2,500 monthly savings
 - Nursing supply \$2,600/month versus \$100 = \$2,500 monthly savings

DO IT ONCE AND DO IT RIGHT

RHPI PROJECT 3:
Leadership Development and Mid-Level Management
Training by HCCA International

- **Time Frame:** October 2009 to February 2010
- **Goal:** Improve hospital performance thru leadership development and management training and education in a highly interactive fashion.
- **Focus of the Consultation**
 1. Coach line managers at all levels on mean to improve leadership skills – 20 department managers trained
 2. Coach managers on methods to hold employees accountable (in a positive manner) for their jobs and expectations -
Accountable – goal orientated performance evaluations
 3. Provide suggestion on how to increase effectiveness of Customer Service Skills and measures including integration of material info for orientation – Hardwire Customer Service
 4. Coach managers on improved managerial skills into areas of staff recruitment and retention, employee motivation, and encouragement and customer services

RHPI PROJECT 3:
Leadership Development and Mid-Level Management
Training by HCCA International, cont.

- **Methods and Work Plan**

- Step one: Pre planning and document review

- **Trip 1 Step 2: On-site assessment October 13-15, 2009**
 - Tour facility
 - Review PI plans, current practices, department meeting minutes, and performance evaluations

Step 3: Drafted Education Plan

- **Trip 2 Step 4: Implemented Plan November 17-19, 2009**
 - Interactive educational department manager sessions
 - Finalized Vision statement
 - Finalized 2010 Strategic objectives for hospital wide and department (20 departments)

RHPI PROJECT 3:
Leadership Development and Mid-Level Management
Training by HCCA International, cont.

- **Trip 3 Step 5/67: Implementation, cont December 8-10 , 2009**
 - Led individual interactive sessions with managers to provide managers support for outcome driven, employee performance eval and goal for 2010
 - Employee evaluations had the following components:
 - Mission and Vision
 - Dept. Plan/Goals for 2010
 - Job Description Review
 - Blame Free Error Reporting Policy
 - 2009 Performance review

RHPI PROJECT 3:

Leadership Development and Mid-Level Management Training by HCCA International, cont.

- **Outcomes**

- Redesigned **Strategic plan into PI plan** hospital wide & drilled down to dept specific
- Narrowed focus to **Three (3) Critical Outcomes** with dept goal in all 3 categories:
 - Clinical Quality
 - Satisfaction (Employee, Patient, and MD)
 - Financial Soundness
- Developed a Vision statement for BGH
- Conducted Annual Performance Appraisals by 12/19/09 that constructively confronted employees on past performance, hold accountable for jobs and expectations, measured competency, educate on mission/vision and goals for 2010.
96% of employees received evaluation on time compare to 76% in prior year.
- **Employee satisfaction survey conducted 3 Qtr 09 revealed that 53% of employee believed that the hospital supports a blame free error reporting system. Action:**
 - developed hospital wide policy
 - Provided education by HSLI attorney and Risk Mgr. for 2 days
 - Goal was 100% employee attendance – Actual achieved – 95% employees attended
- **Provided extensive leadership training on all three session to 19 dept managers**
- **Provided education session to Board of Commissioner in Feb 2010**

Challenges/Lesson Learned

- Change the culture – “*we did it this way for thirty years why change now*”
- Consultant's should understand hospital needs (*need someone to roll up sleeves*)
- Keep everyone on the same bus
- Senior leadership has to be very engaged in entire project
- Board of Commissioner buy in and support of administration

QUESTIONS ?

THANK YOU!