

The ED patient experience journey from sometimes to always...

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Our mission and vision



m the relentless pursuit of optimal health for every child within our reach



v reinventing the path to children's health for families throughout our region and beyond



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Strategic priorities



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About us

- Serve 20 county area in southwest Ohio
- 360,000+ patient visits a year
- Recognized by U.S. News in pulmonology
- Magnet designated



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Destination always

- We continually strive to improve the patient experience by providing exceptional care 100 percent of the time.



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Dayton Children's, by the numbers



360,000+

Total visits —
98,059 Emergency Visits
23,243 Urgent Care Visits
KidsExpress



178

102 ADC



12,800+

Surgeries



\$650m

Gross revenue

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The road to recovery: readiness

Key Actions

- Developed comprehensive plan for communicating safety and process for restart
- Reconfigured and made more intentional the visitor screening process at main and south campuses
- Reconfigured waiting areas and provided visual clues to facilitate social distancing; scanned priority environments for appearance of safety
- Prioritized patients for rescheduling surgeries, procedures and clinic visits
- Identified opportunities for optimizing video visits
- Established pre-surgery COVID testing process



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NPS scores 2020

FY20 NPS Scores

Area	FY20 Final NPS Score	FY20 Goal
Dayton Children's Overall	83.2	82
Inpatient (3W, 7T, 8T, HO, NICU, PICU, TCU)	79.7	80
Hallum's Roll-up (3W, 7T, and 8T)	79.3	80
Isham Roll-up (NICU, PICU, TCU)	81.9	80
Jayna's Roll-up (Includes Urgent Care combined, ED combined, Inpatient, and HO clinic)	76.6	80
ED Main	72.5	75
ED South	84.6	85
Urgent Care Huber Heights	79.8	78
Urgent Care South	78.3	78
Kids Express	97.23	NA
Tami's Roll-up (ED Combined and Urgent Care Combined)	76.2	80
Ben's Roll-up (All Ambulatory clinics excluding HO and Mental Health. Includes surgery combined)	87.7	87
All Ambulatory Clinics	87.4	87
Duby's Roll-up (Psychiatry, Psychology, and BCC)	84.7	80
Peri-op Roll-up (Surgery Main, Surgery South, PPU)	90.5	89.9

Data: July 1st 2019-June 30th 2020
 "No surveys were collected from Feb 10th to April 1st due to NRC ransomware incident"
 Source: NRC Real-time



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Patient experience drivers

Highly Motivated based on Unique Location in OHIO

Culture

Patient Flow

Family Communication

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Foundation for improvement



Senior leadership commitment

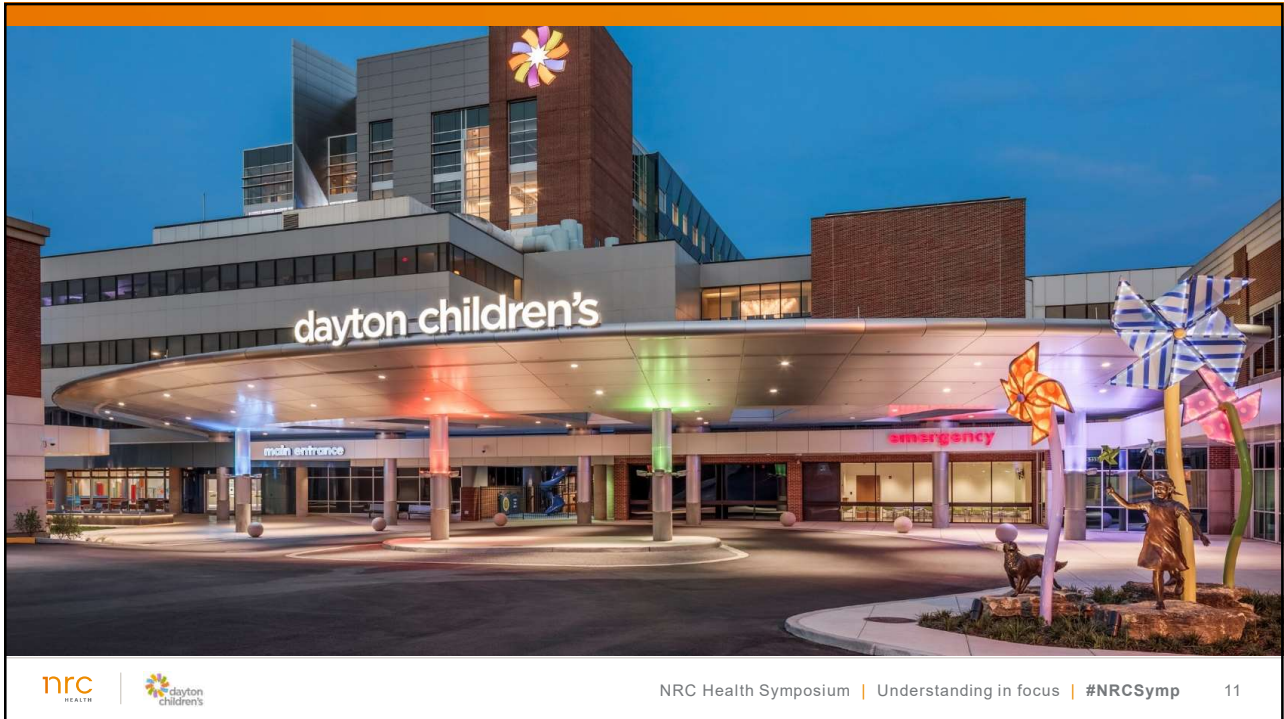


Dyad (Operational Leader/Physician) leadership commitment



Process excellence support

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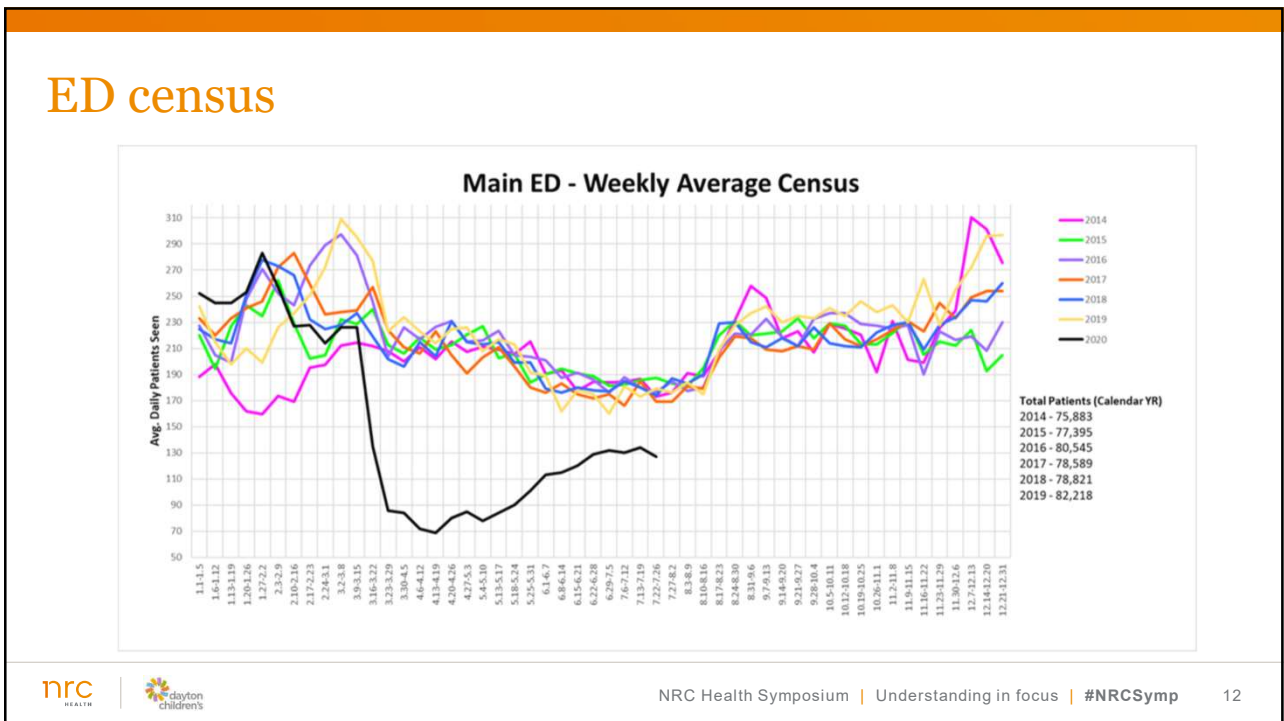
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dayton children's

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Areas of focus

- Leadership focus on same metrics
 - Dyad working collaboratively towards similar goals
- Employee/Provider Engagement
 - Changing the culture
- Patient Flow
 - Decreasing wait times and length of stay
- Communication
 - Improved communication with families

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Dyad leadership

- Medical and Nursing Director Alignment
- Weekly leader dyad meeting
- Review of performance metrics
- Action planning sessions

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Employee rounding

- Nurse Leaders round monthly on all employees
 - Nurse Manager and Assistant Nurse Managers
 - No more than 50 employees per leader
- High-Middle-Low performing employees distributed among the leaders
 - Allows leader to focus on needs of the employees
- Staff Recommendations
 - Monthly Stoplight Report
 - Shared in Daily Huddles
- Increased Employee Engagement

Daily huddles

- Meetings held twice daily
7am and 3pm
 - 7 pm during busy season
- Inclusion of all staff and providers
- Assisted in communication of changes



emergency department huddle board

Category	Metric	By 30 day							Trend	Target
		10	20	30	40	50	60	70		
Quality - Patient Safety	# of falls	0	0	0	0	0	0	0	0	0
	# of errors	0	0	0	0	0	0	0	0	0
	# of near misses	0	0	0	0	0	0	0	0	0
	# of patient complaints	0	0	0	0	0	0	0	0	0
	# of patient satisfaction	100%	100%	100%	100%	100%	100%	100%	100%	100%
Patient Safety - Infection Control	# of central line infections	0	0	0	0	0	0	0	0	0
	# of urinary tract infections	0	0	0	0	0	0	0	0	0
	# of surgical site infections	0	0	0	0	0	0	0	0	0
	# of ventilator-associated pneumonia	0	0	0	0	0	0	0	0	0
	# of catheter-associated urinary tract infections	0	0	0	0	0	0	0	0	0
Patient Safety - Medication Management	# of medication errors	0	0	0	0	0	0	0	0	0
	# of near misses	0	0	0	0	0	0	0	0	0
	# of patient complaints	0	0	0	0	0	0	0	0	0
	# of patient satisfaction	100%	100%	100%	100%	100%	100%	100%	100%	100%
	# of patient safety incidents	0	0	0	0	0	0	0	0	0
Patient Safety - Fall Prevention	# of falls	0	0	0	0	0	0	0	0	0
	# of near misses	0	0	0	0	0	0	0	0	0
	# of patient complaints	0	0	0	0	0	0	0	0	0
	# of patient satisfaction	100%	100%	100%	100%	100%	100%	100%	100%	100%
	# of patient safety incidents	0	0	0	0	0	0	0	0	0
Patient Safety - Patient Identification	# of patient identification errors	0	0	0	0	0	0	0	0	0
	# of near misses	0	0	0	0	0	0	0	0	0
	# of patient complaints	0	0	0	0	0	0	0	0	0
	# of patient satisfaction	100%	100%	100%	100%	100%	100%	100%	100%	100%
	# of patient safety incidents	0	0	0	0	0	0	0	0	0
Patient Safety - Patient Education	# of patient education errors	0	0	0	0	0	0	0	0	0
	# of near misses	0	0	0	0	0	0	0	0	0
	# of patient complaints	0	0	0	0	0	0	0	0	0
	# of patient satisfaction	100%	100%	100%	100%	100%	100%	100%	100%	100%
	# of patient safety incidents	0	0	0	0	0	0	0	0	0

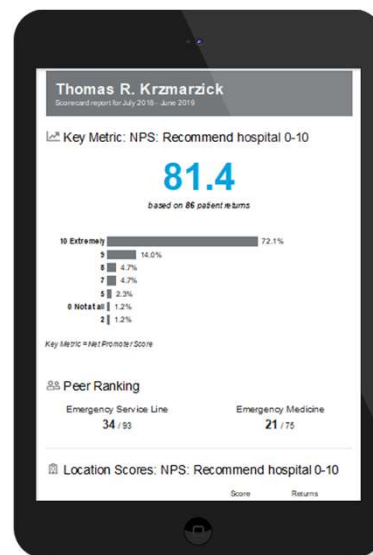
Provider involvement

- Provider Training
- Provider Shadowing
- Medical Director Rounding
- Data transparency
 - Provider Productivity
 - Provider Patient experience scores



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Provider patient experience scores



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Data that drives change

NPS by arrival hour and arrival day

Hour Arrive	Friday	Monday	Saturday	Sunday	Thursday	Tuesday	Wednesday	Total
0	95	85	87	94	75	79	89	81
1	67	89	82	89	100	67	100	85
2	74	67	77	100	86	67	90	80
3	100	100	71	77	82	85	75	84
4	89	87	82	71	60	50	60	74
5	60	75	100	100	100	33	100	82
6	83	71	44	71	100	67	100	75
7	100	67	88	94	89	91	78	85
8	79	70	83	58	87	80	77	77
9	74	63	81	90	90	63	83	77
10	73	70	70	79	72	70	72	72
11	81	89	81	70	71	78	63	76
12	68	79	76	71	82	58	74	73
13	71	75	73	74	69	70	75	72
14	73	89	78	70	74	71	75	76
15	75	63	75	91	83	83	68	77
16	83	60	81	92	72	75	67	75
17	73	60	66	65	72	64	72	67
18	71	73	67	76	75	73	56	70
19	74	64	76	81	68	77	63	72
20	82	38	60	68	72	70	64	65
21	74	65	80	72	71	77	78	74
22	86	75	76	79	74	77	60	75
23	50	38	78	72	68	71	35	68
Total	76	68	75	78	76	72	71	74

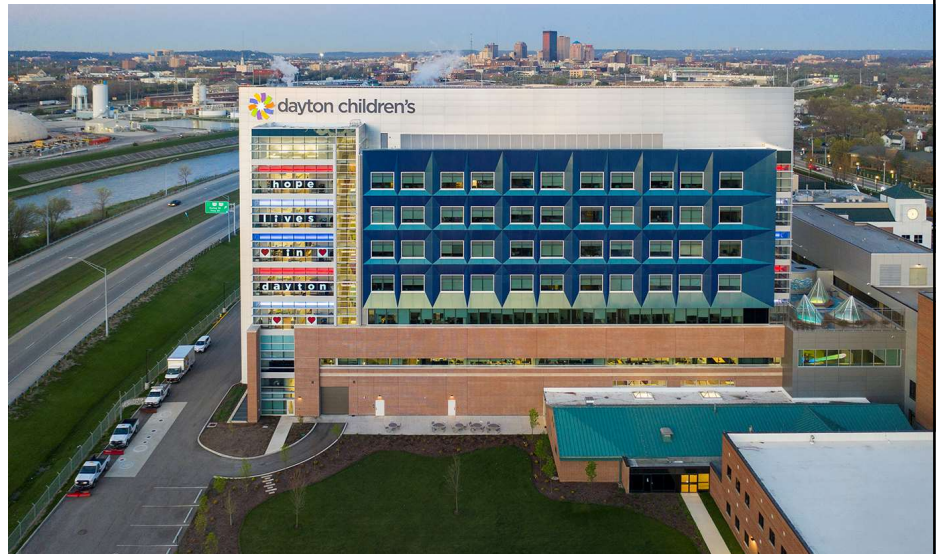


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Patient flow

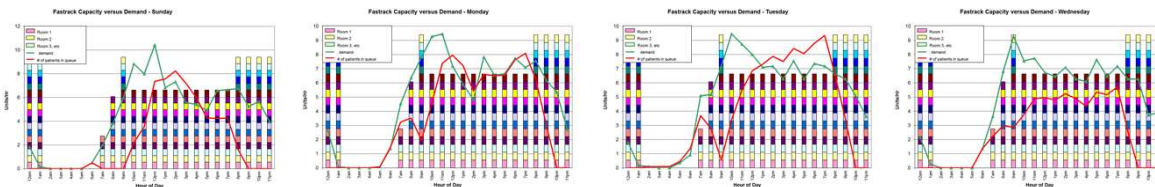


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Staffing

Fast track staffing is tight on Sunday – Thursday from 10am – 9pm

Waiting room queue 8-10 every hour until 10p-11p



Core staffing is a little tight on Tuesday and Wednesday from 5p – 10p

Waiting room queue 4-6 patients

Red Line represents # of patients waiting

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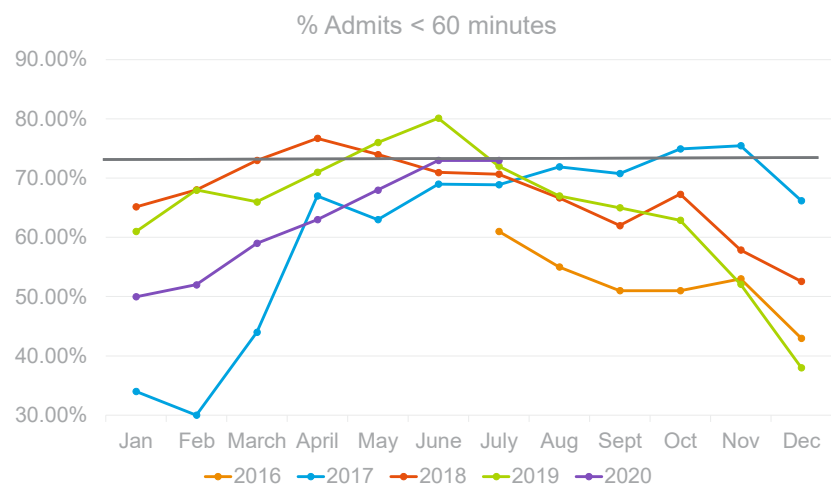
Patient flow trials and errors

- **Direct Rooming of Fast Track Patients**
 - Helped decrease door to doc for FT
- **Provider in Triage (PIT)**
 - APP in triage and physician in Fast Track
- **Super Track**
 - APP seeing low acuity treat and street patients
- **Rapid Lab**
 - Decreased lab turn around time
- **Waiting Room Announcements**
 - Clinical Team Leader does at 45-minute wait
- **Blended Hallways**
 - Still doing PDSA cycles

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Admission processes

- Creation of Clinical Logistics
- Push of patients to inpatient
 - Phone hand off and Admission PCA takes patient to the floor
- Order to admit placed by ED providers



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Family communication



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AIDET

- AIDET
 - October 2017
- AIDET on Arrival
 - February 2018
- Walk back AIDET
 - April 2018



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Communication boards

My Care Team my name is _____

DOCTOR	Attending	RN	Nurse
PA	Physician Assistant	PARAMEDIC	Paramedic
NP	Nurse Practitioner	ASSISTANT	Assistant

Can I eat or drink anything? No Yes fluids only | One fluid only | All

I am waiting for:

<input type="checkbox"/> Lab tests	90 minutes	<input type="checkbox"/> Doctor/PA/NP
<input type="checkbox"/> X-ray	90 minutes	<input type="checkbox"/> Receive medications by mouth
<input type="checkbox"/> CT scan	90-120 minutes	<input type="checkbox"/> Breathing treatments given
<input type="checkbox"/> Ultrasound	90-120 minutes	<input type="checkbox"/> IV start
<input type="checkbox"/> Admit to hospital	60-90 minutes	<input type="checkbox"/> Receive IV medications

Faces Pain Rating Scale

0	1	2	3	4	5	6	7	8	9	10
No Pain	Mild Pain	Moderate Pain	Severe Pain	Very Severe	Worst Possible					

Pain Goal

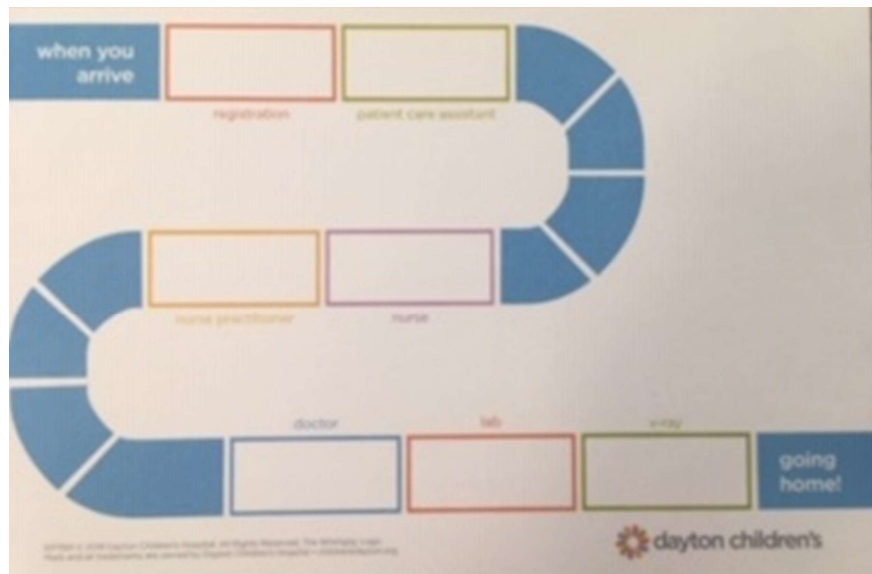
What are we doing to help my pain (comfort)?

What worries and concerns can we address today?

We strive to go above and beyond for our patients and families. If you feel your concerns were not met please call the emergency relations line doctor or manager at 937.631.0300

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Care card



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Nurse leader rounding

- Goal to round on 25% of discharged patients daily
- Rounding completed by Manager, Assistant Nurse Managers, Educators, Clinical Team Leaders
- Rounding Validation
- Support-Coach-Support Validation
- Urgent Care rounding calls

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Process excellence



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Pursuit of excellence

NRC RAW DATA DEEP-DIVE

- Cleanliness
 - Percent that replied no to cleanliness
 - 10 – 1.4%
 - 9 – 2.8%
 - 7/8 – 14%
 - Only 1 person in 100 rated the ED a 10 if they thought it wasn't clean



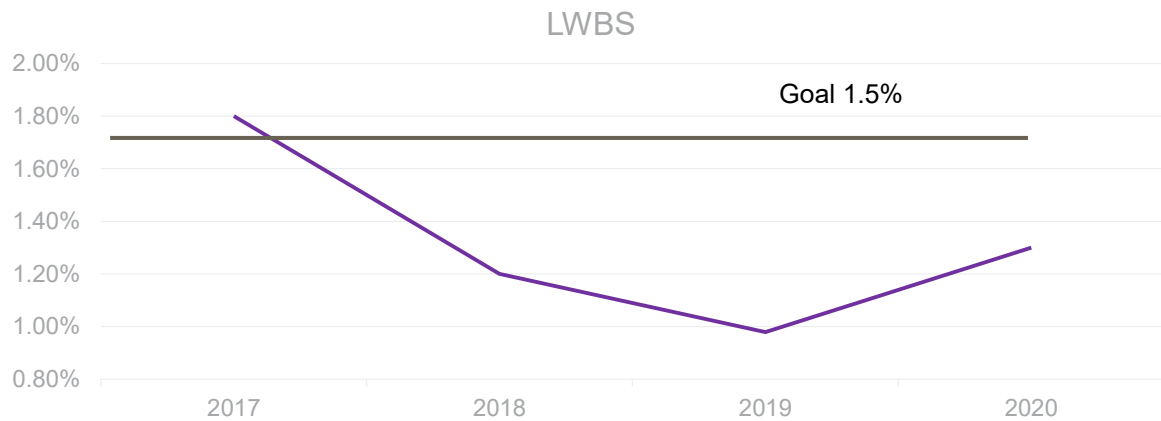
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Outcomes



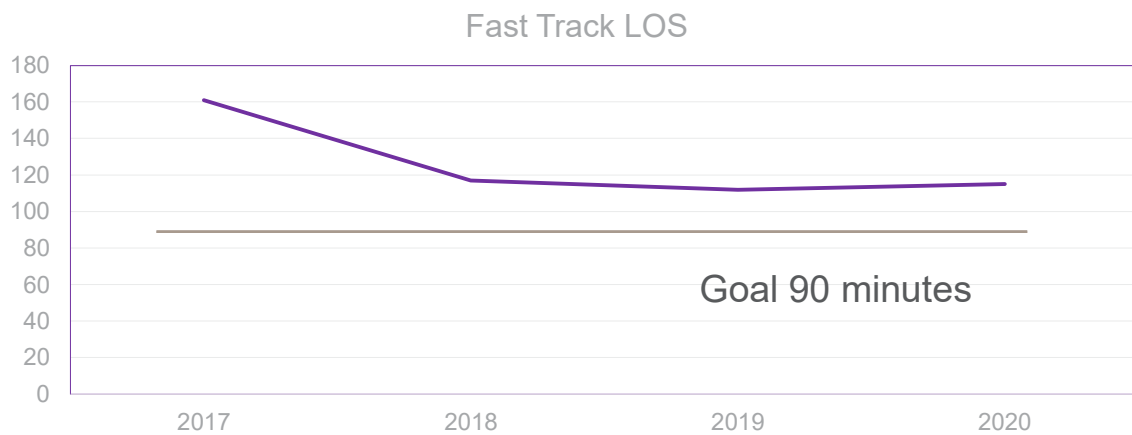
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Left without being seen



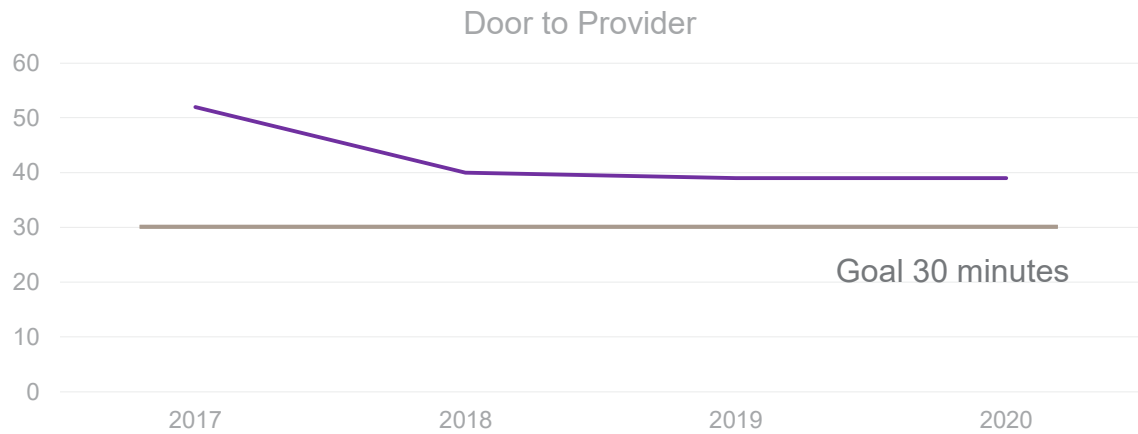
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Fast track length of stay



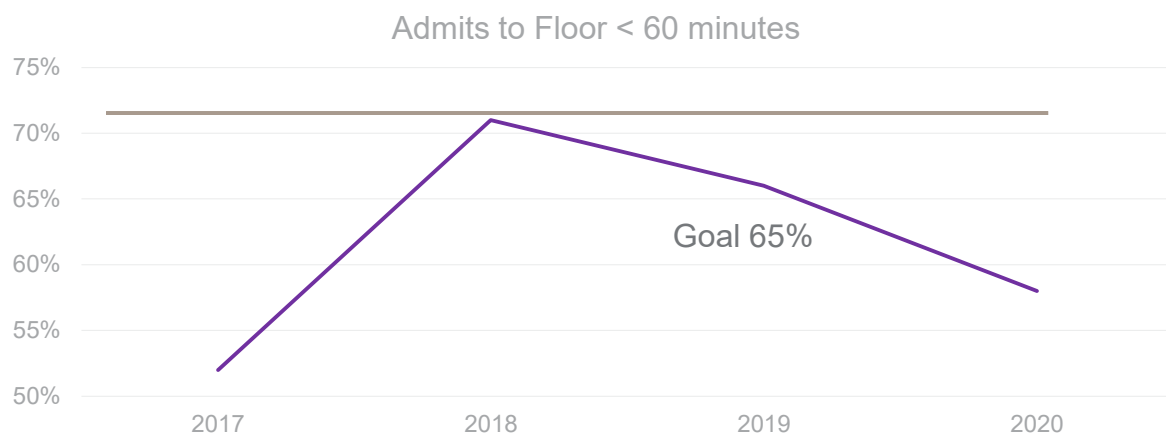
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Door to provider



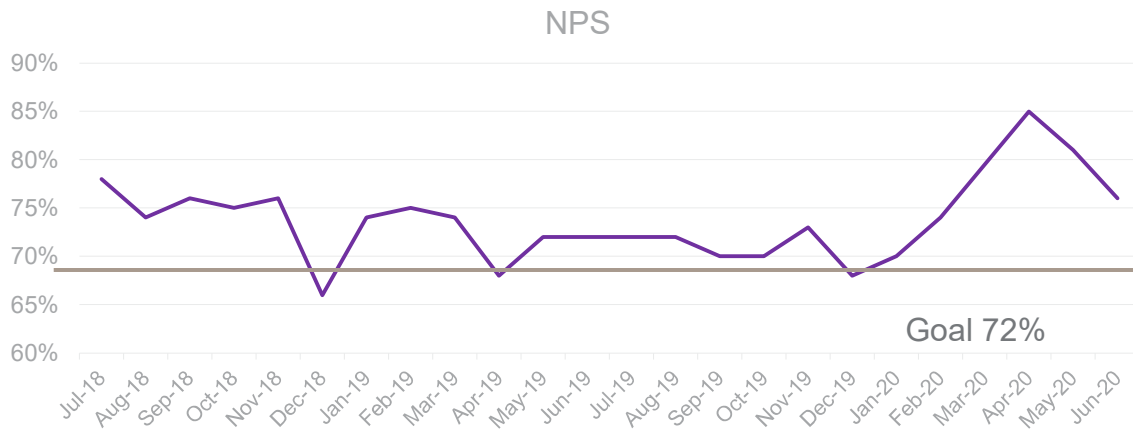
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Admits to floor in < 60 minutes



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NRC Health NPS

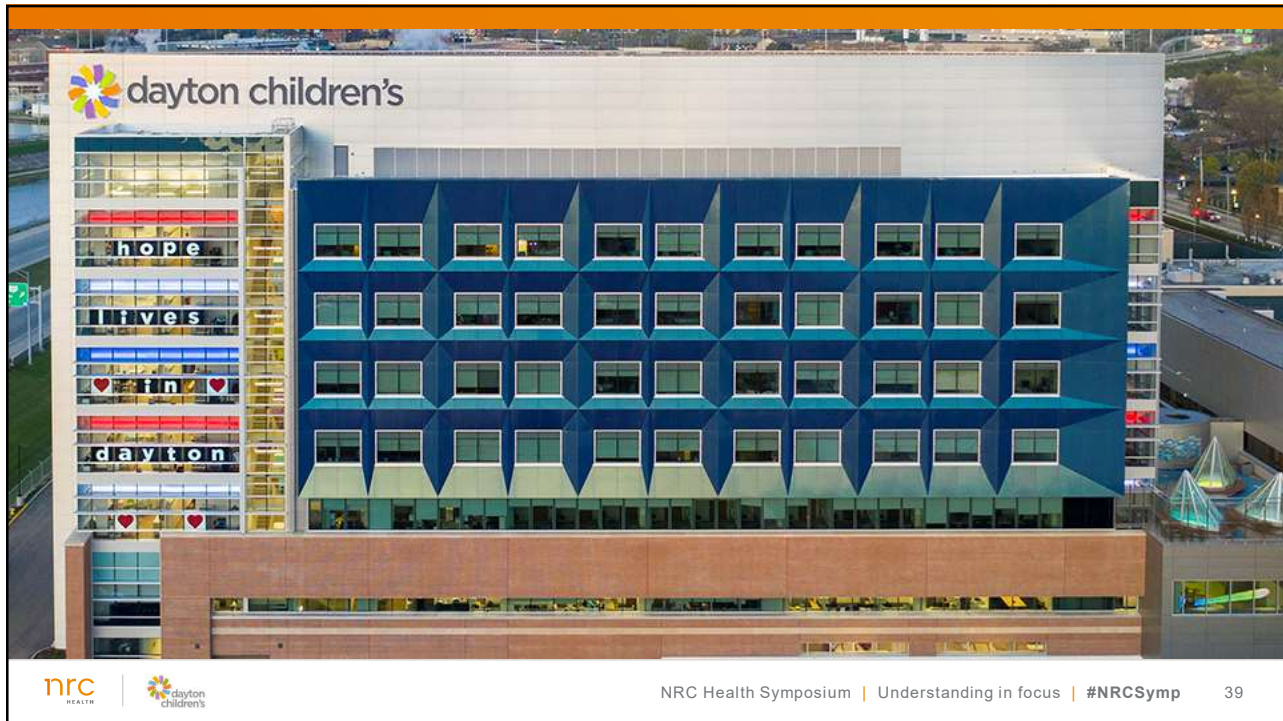


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Ongoing journey

- The road that leads to always never ends
- Continuous staff engagement
- Need to make sure that core, foundational elements are always followed and don't slip

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Dedication and continued focused improvement paying off....



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