



Parkview Medical Center

Improving LOS, patient satisfaction & the bottom line

Parkview Medical Center is a 305 bed facility and provides a full range of healthcare services including the region's most experienced, certified Level II Trauma Center and the region's first certified Stroke Center. Parkview is the leader in cardiac, emergency, and neurological services as well as behavioral health programs. Their desire to better control its patient throughput times (length of stay) and improve its patient satisfaction scores, resulted in engaging Renoir Consulting to assess opportunities and implement efficiency and patient satisfaction measures in the Emergency Department.

ANALYSIS

Renoir's initial survey of Parkview's operations and identified the following:

- Performance Management issues including operational data, e.g. availability, perception of reliability, and usability; lack of Short Interval Controls (SICs), Key Performance Indicators, systematic performance reviews, root cause analysis and action
- Process inefficiencies, robustness and limited consistency
- Roles & Responsibilities lacked clarity and consistency
- Support Department operational Interfaces lacked effectiveness and Service Level Agreements (SLAs) performance variances were high
- Patient Throughput focus was missing due to the lack of data and trends for LOS and "left without being seen" were negative
- Patient Satisfaction levels were not improving and patients' perceptions were not well managed
- Management Control Systems were missing feedback loops and there were little or no SICs to manage LOS

PROJECT APPROACH

Renoir's commitment included:

- Reduction of Length of Stay (LOS) by at least 10%
- Increased Contribution Margin (CM) by at least \$1.5M plus addressing a number of qualitative improvements such as:
 - Improved patient satisfaction
 - Enhanced Performance Management Control System (MCS)
- Positioning Parkview's ER as a key differentiator in marketplace
- Improve the ER performance, its stability and predictability
- Attract a better patient mix as a result of the operational improvements
- Create a continuous improvement culture in the organization
- Develop the staff in terms of supervisory and management capabilities
- Improve clarity in accountabilities, responsibility and delegation in the organization and as a 'door to the hospital'
- Streamlining operational processes prior to completion of current expansion

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"Working with Renoir has helped bring numerous departments together and this great open dialogue continues to help drive improvements in other areas. Because of this success, Parkview has signed an additional engagement letter with Renoir to review the Medical Center's Admissions and Discharge processes."

Michael T. Baxter
CEO

Key Results

OPD LOS improved by 27%. This was worth \$2.4M in contribution margin benefits

Patients' length of stay had decreased by 60 minutes with the same average census

Rejection rates improved by over 50%

Wait times were reduced by over 50%

Parkview and Renoir jointly launched the 30 week project. Under the guidance of 2 full time consultants, a 'taskforce' team was created including client representation to assist in the opportunity identification, savings assessment, and target attainment.

Management action teams (MAT's) were created for key areas within the Emergency Department and headed by administrators/physicians. The teams were Entry & Admissions, Patient Care and Coordination, Bed Management and Support Services. Each management action team (MAT) comprised a multifunctional team of department staff, physicians, and Renoir and taskforce members. These teams were charged with achieving length of stay reductions and improved patient satisfaction through improved processes, focused rounding practices and performance management.

PROJECT OUTCOMES

As the project progressed, management action plan updates, scorecard performance and issues/concerns were reviewed in the bi-weekly steering committee. This committee consisted of the key leaders from the executive team at Parkview and was chaired by the CEO.

The teams spent the 1st 10 weeks (Focus Process™) of the engagement identifying opportunities of improvement through process mapping, management control system mapping and data analysis. Processes were critiqued to identify areas for improvement and management control systems were reviewed to identify what key elements of the system were missing. The overall goal for the project was to reduce the length of stay from the current average of 255 minutes to a stretch target of 204 minutes. This equated to a 20% reduction or an improved contribution margin of \$1.7M annually.

KEY INITIATIVES

Entry & Admissions: The key initiative here was to reduce ER patient wait times & initiate protocols up front. A new 'triage in effect/triage not in effect' process was implemented along with protocols for waiting patients greatly reducing their length of stay.

Patient Care & Coordination: As one of the main initiatives was to improve the delay in initiating care, new protocols were developed with clear and accurate timestamp segments for the patient stay. The current flow was streamlined and KPI's were developed around the segments. Targets were established and hourly Lead Clinical and Team Lead rounding was implemented to manage target times for the patients. The patient experience was also enhanced by adding remote controls and ensuring that the nursing staff, as part of their rounding, were following up to specific patient needs.

Bed Management: The main focus for this team was to develop a coordinated plan to handle surges in inpatient waiting census. A new plan was developed to ensure adequate coverage was available, enabling the ER to free up nursing staff to attend patients. Guidelines were developed, implemented, and fine-tuned to identify and respond to surges in inpatient census.

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Support Services: One of the main initiatives for this team was to decrease the number of rejected specimens. The process involved implementing a new lab phlebotomy policy effectively manage rejections. Training was provided to all techs and nurses and the team began tracking the new key performance indicators. Rejection rates had improved by over 50%.

THE RENOIR GROUP

Renoir Consulting is a world leader in sustainable, implemented change. Founded in 1994, Renoir has offices located in North and South America, UK, Europe, Turkey, Middle East, Southern Africa, India, Pakistan, China, South East Asia and Australasia. With over 350 fully employed and highly trained consultants, their work across a wide range of industry sectors gives them a broader perspective of the issues facing your business, allowing them to be sensitive to your unique challenges, culture and specific business issues. This cross-pollination ensures truly effective, rapid and sustainable solutions.

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