

## San Leandro Hospital, Alameda Health System

Why physicians love it

Alameda Health System (AHS) is a major public health care provider and medical training institution recognized for its world-class patient and family centered system of care.

San Leandro Hospital (SLH), a newly acquired AHS hospital, is a 93- bed, community-based hospital that provides inpatient and outpatient services including medical, surgical and intensive care as well as 24- hour emergency services in their 13 bed, Level II Emergency Department. The hospital serves central Alameda County, a community of 265,000 people.

“Project APEX did a great job of outfitting San Leandro Hospital with the necessary performance metrics, goals and targets required to run an efficient operation.”

**Dr. Mark Notash**  
Medical director – ED

### Key Results

\$6.3 MM in additional net revenue through increased patient volume

77% reduction in patients Leaving Without Being Seen from the ED

32% reduction in patient arrival to discharge times in the ED

75% reduction in OR turnover time

19% improvement in average weekly OR surgical volume

61% reduction in patient Arrival to Provider time in the ED

18% improvement in average daily ED census

SLH has just been honored with one of only four “Distinguished Practice of the Year Awards” from a list of more than 100 sites. Their significant improvement in patient wait and attending times were primary factors.

### ANALYSIS

AHS management asked Renoir to carry out an Analysis of its newly acquired SLH unit to identify opportunities to improve its operations as well as gaining a better understanding of how it would optimally fit within the AHS family.

Renoir’s initial Analysis identified the following:

- Operational Key Performance Indicators were absent or missing, preventing standard methods for collection, interpretation and reporting
- Service Line alignment with the AHS vision, surrounding demographics and relevant payers was fragmented
- There were little or no marketing efforts nor community outreach programs
- Structured management tools such as short interval control rounding, variation analysis, action logs, performance reviews - were largely missing
- OR turnovers were conducted out of cadence and took an average of 68 minutes
- Patient waiting times in the ED were excessive, due in part to a lack of focus on patient flow and experience
- Patients leaving without treatment as a % of the overall daily ED census was very high at 6.8%.

### PROJECT APPROACH

Following the Analysis and an RFP process, Renoir was engaged to carry out an implemented Project. Renoir’s commitments included:

- Standardized and installed management control systems (MCS) across ED and OR
- Designed and installed metrics management tools (operational, financial, behavioral)
- Develop a daily/weekly/monthly operating report to highlight area performance
- Improve Short Interval Control rounding to focus on standard work times

### World Leaders in Sustainable Change

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“The Renoir Group has met or exceeded all expectations. It is without hesitation that I recommend their work.”

**James E.T. Jackson**  
**Chief Administrative Officer**  
**San Leandro and Fairmont Hospitals**

- Increase patient visits by reducing ‘length of stay’ and ‘arrival to provider’ times
- Implement a governance model to create a continuous improvement culture
- ‘Resource load’ ED and OR based on census demand
- Create better delegation and clarity of roles and responsibilities
- Standardize referral management and review process
- Increased performance of practices allowing for better capacity utilization and increased patient throughput – targeted 5%
- \$6.3 MM of additional net revenue per annum
- Productivity improvement as a result of data driven management control practices to reduce operational costs

To drive the Project, branded “APEX”, a Renoir team - 2 consultants and a Project Manager- was formed to oversee all initiatives. Two Management Action Teams (MATs) were also established to provide a feedback loop for process changes and ensure data credibility.

The Surgical Services MAT (SS MAT) and the Emergency Department MAT (ED MAT) promoted open dialogue among physician champions, senior leadership, SS/ED support personnel and Renoir. Processes identified at the site level, applicable Key Performance Indicators to gauge improvement, and desired targets for the department to achieve, were discussed. This included extensive mapping of existing SS and ED processes (patient readiness, OR turnover process, patient rooming process, triage process, etc.) as well as analyses and critiques of the organization’s management control systems.

‘Project Orange’ was established as the Marketing/Volume Driver/Community Outreach effort for the hospital and involved internal AHS Business Developers, physician liaisons’, AHS and SLH Senior Leadership, as well as Renoir’s Project Manager. This platform drove volume improvement efforts through gathering, collating and analyzing market data as well as competitor data to position SLH in the best possible position to capture a significant piece of the surrounding payer market. The group was also responsible for surgical line development and alignment with Alameda Health System’s strategic plan as well as ensuring that all relevant payer contracts were completed so that physicians could be granted privileges to conduct work and that the hospital was credentialed to carry the necessary payer contracts. Members of this group also organized community events and engaged with local politics to position SLH as a vital member of the community.

All efforts were overseen by an Executive Steering Committee made up of SLH Senior Leadership that was designed to encourage area development and leadership, provide guidance for KPI development, trend analysis and removal of barriers that threatened achievement of the project goals.

### PROJECT OUTCOMES

Active engagement with the MATs enabled the client’s leadership to understand the underlying concerns with the MCS variations across departments, and through critique sessions, identify a model consistent with their vision.

“The area KPI’s that were installed with the Management Control System help me monitor and focus on all of the right levers required to maintain an efficient workforce and influence quality of care.”

**Kathie Jones**  
**Nursing Director – ED**

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“Project APEX improved the patient’s Arrival to Provider time so dramatically that it resulted in a massive drop in our % of patient’s that were previously leaving without treatment.”

**Viki Arditto**  
**AVP of Nursing**

A thorough 5-week Focus Process™ allowed the Renoir team to identify 24 Best Practices necessary for standardized operations and practices to ensure patient satisfaction as well as drive efforts for increased patient volume. These Best Practices focused on processes, people and case complexities to ensure that patients in the ED and ORs, consistently received the best quality of service. Targets were set for each area to help drive patient satisfaction and throughput.

### OPPORTUNITIES

#### Enhanced patient access

Visit volume net revenue opportunity for SLH as a whole provides an additional \$28 MM; the 21 week project captured \$6.3 MM in additional net revenue

#### Utilization of OR’s

OR utilization increased by 19% during project.

#### Patient Cycle Times in ED

The patient experience was enhanced by reducing the patient’s ‘Arrival to Provider’ time by 61% and Arrival to Discharge time by 33%

#### Reduction of patients ‘Leaving Without Treatment’

Patient’s ‘Leaving without Treatment’ decreased by 77%

### KEY INITIATIVES

#### Development of necessary market analysis tools to drive volume improvement

Data was collected and collated to provide a comprehensive understanding of how well SLH was serving the needs of the current and emerging markets. This was essential to aligning SLH with AHS’s strategic plan.

#### Increase patient access to care

Patient wait times were drastically reduced, with patients being seen, consistently within a half an hour of arrival in the ED while improved OR schedule adherence allowed SLH to process more patients, efficiently and effectively.

#### Staffing rationalization and flexing

Benchmarks were used to identify appropriate staffing levels, based on forecasted census and volume. In many cases, surgical services were over staffed, based on the volume and productivity of the Providers. The ED staffing schedule was realigned based on historical volume and peak times to help increase patient satisfaction during high volume hours.

#### Patient Satisfaction

One of the most critical factors for the APEX project was to reduce ‘Lobby Wait Time’ and achieve a stricter adherence to ‘Arrival to Provider’ times. To assist the Charge Nurses, who were accountable for proactive monitoring of patient arrival, Renoir developed a “daily weekly operating report” (DWOR) providing site-level transparency of the patient flow. The development the DWOR, was instrumental for the client to shift to a culture of accountability, changing the mind set to an action oriented operation.

## THE RENOIR GROUP

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