

Why Baldrige as a Quality Platform?

Presented to:

The Quality Colloquium

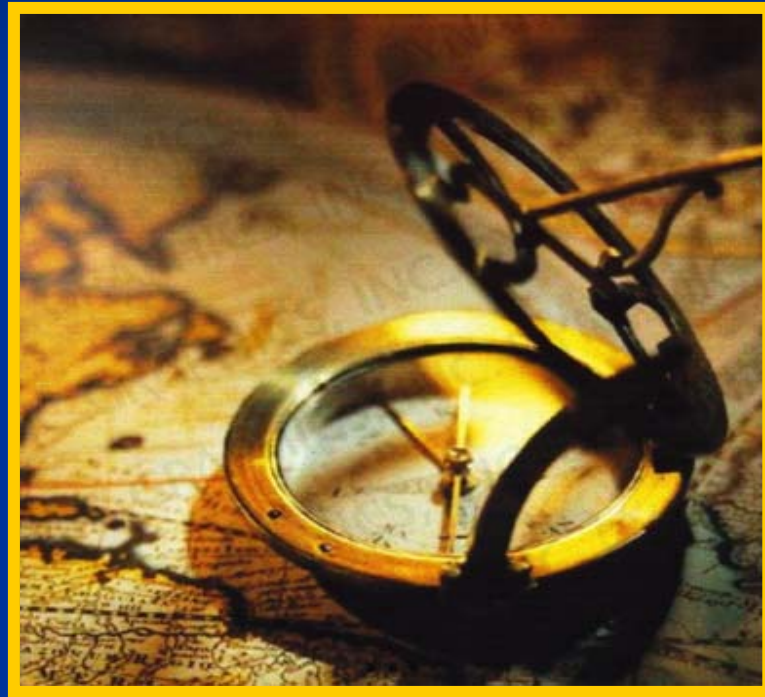
On the Campus of Harvard University

August 25, 2004

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JOURNEY *to Excellence*



Seven Categories of the Health Care Criteria

1. Leadership
2. Strategic Planning
3. Focus on Patients, Other Customers, and Markets
4. Measurement, Analysis, and Knowledge Management
5. Staff Focus
6. Process Management
7. Organizational Performance Results

Journey to Performance Excellence

Began in 1995

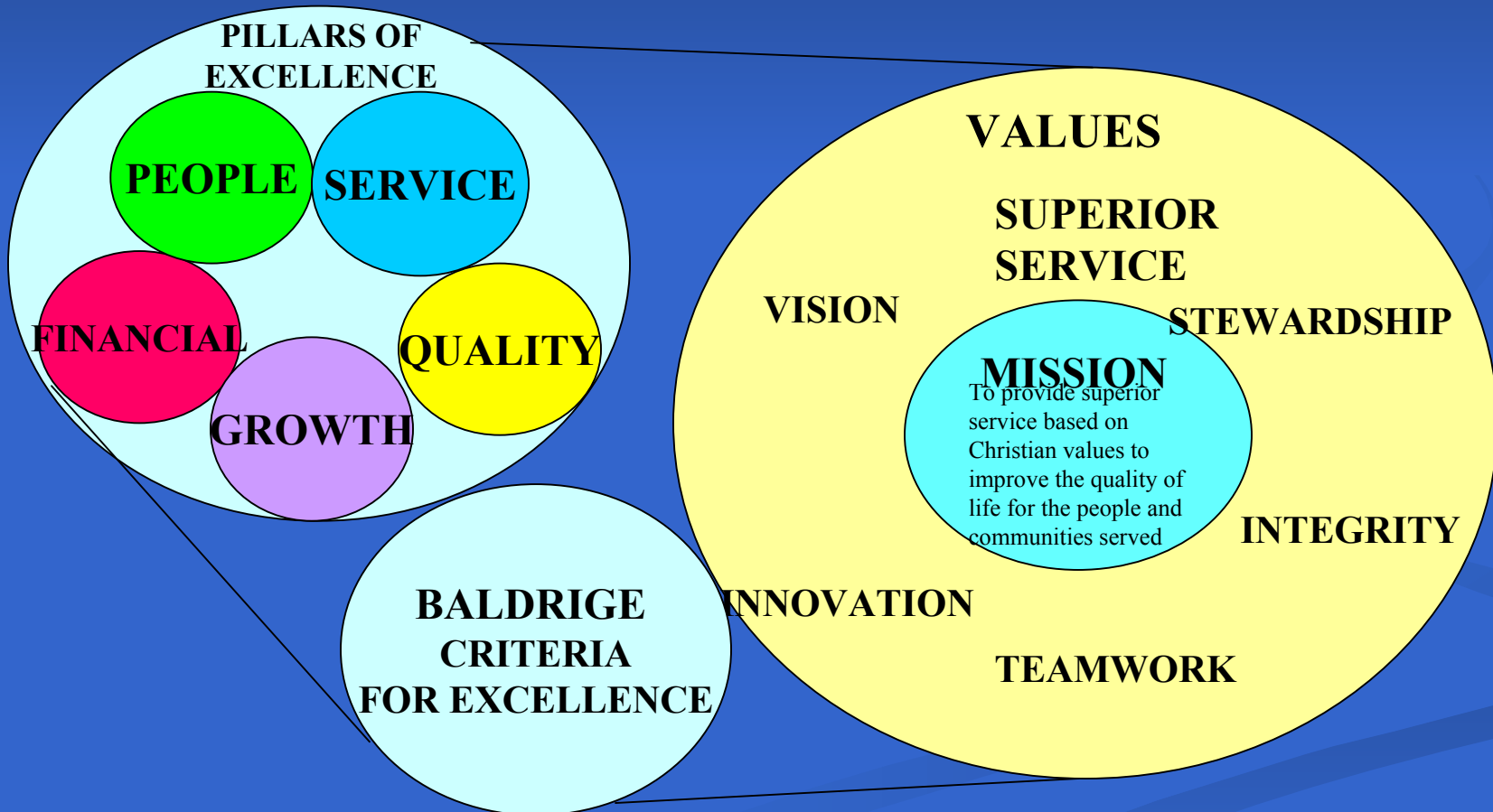
- No Secrets
- Commitment to Performance Excellence
- Benchmark Best Practices
- Customer Satisfaction Teams

Journey to Performance Excellence

- Real Time Accountability
- Non-Negotiable Results
- Leadership Development
- Never Stop Learning

BAPTIST HEALTH CARE

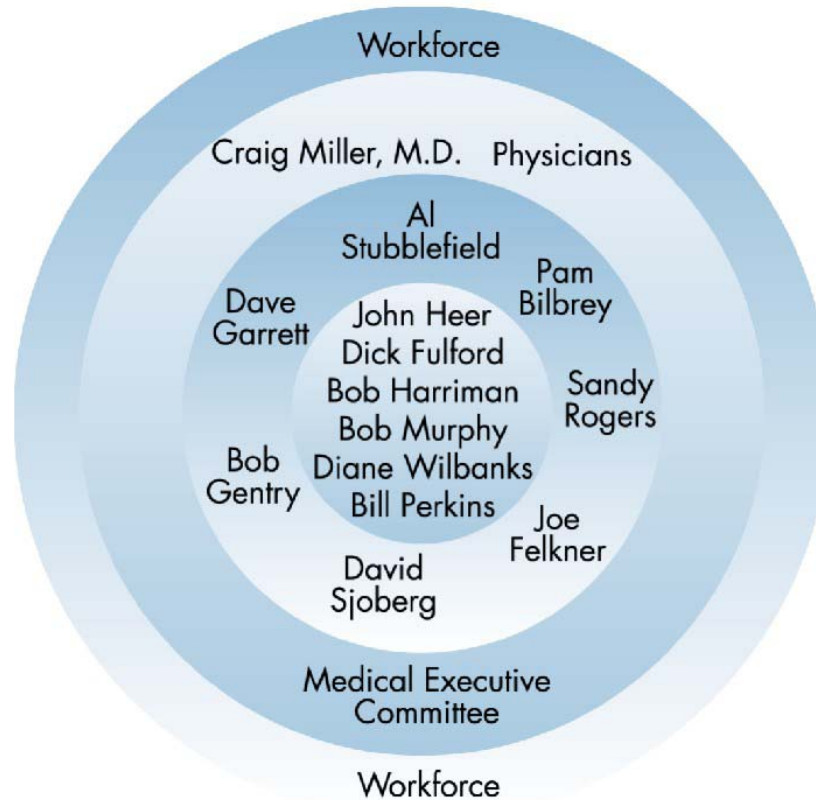
Culture of Quality



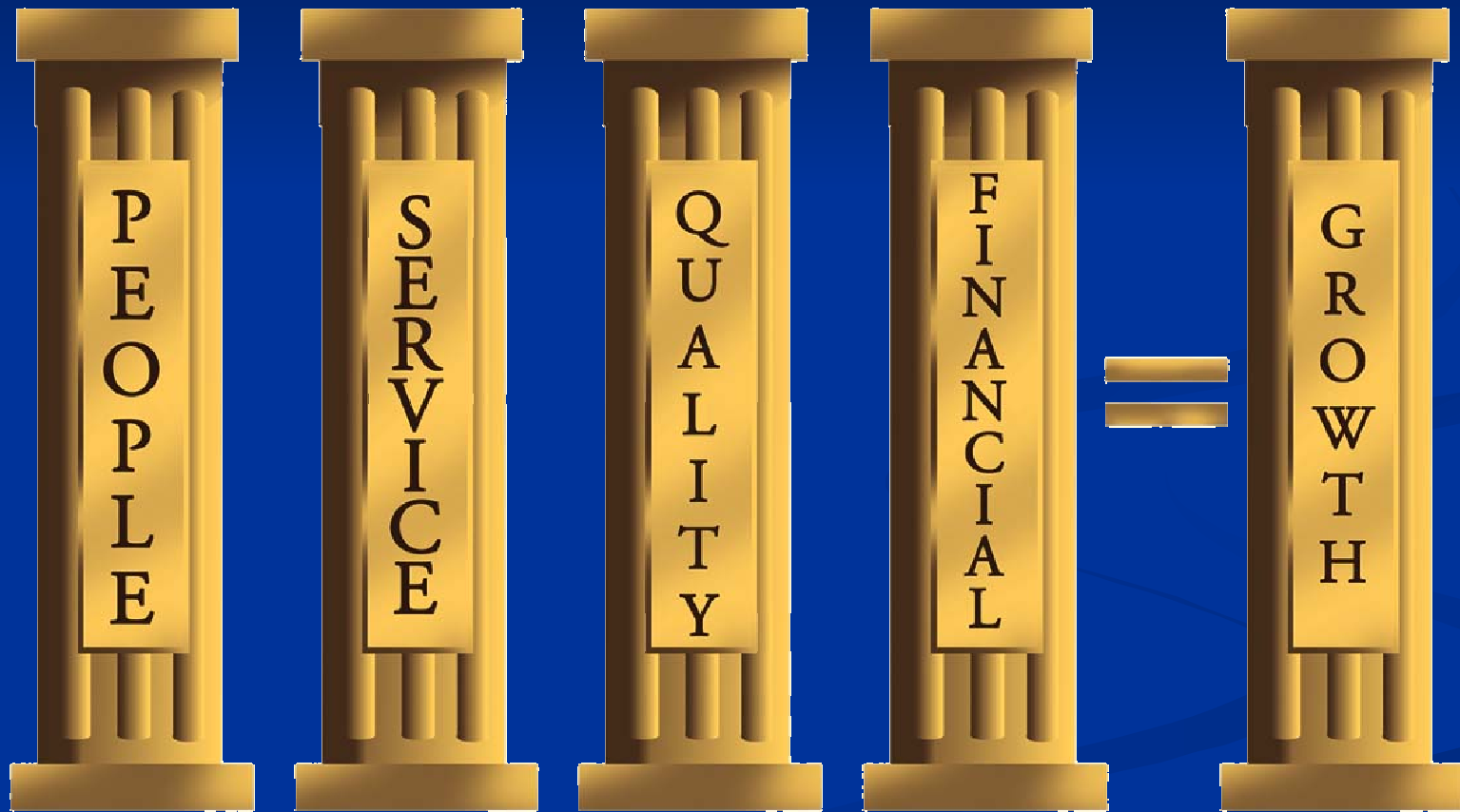
1. Leadership

- Senior Leadership Direction
- Empowerment, Innovation and Agility
- Key Performance Measures;
Improving Leadership System &
Effectiveness
- Support of Key Communities and
Community Health

Leadership Systems



Pillars of Operational Excellence



Achieving Extraordinary Levels of Service and Operational Excellence

Mission

Vision

Values

Key Components →

Employee Satisfaction

+

Patient Satisfaction

+

Leadership Development

Actions that Support Service and Operational Excellence →

Standards of Performance
Behavioral Based Interviewing
Peer Interviewing
Communication Boards
Employee Forums
Administrative Rounding
Bright Ideas
Reward & Recognition

Service Excellence Teams
Weekly Patient Satisfaction Tracking
Scripting
Patient Communication Boards
Nurse Leader Rounding
Nurse Discharge Calls
Service Recovery

Leadership Core Competencies
Leadership Development Training
Cascade Learning
Daily Line Up
Best Practice Sharing

Systems of Accountability

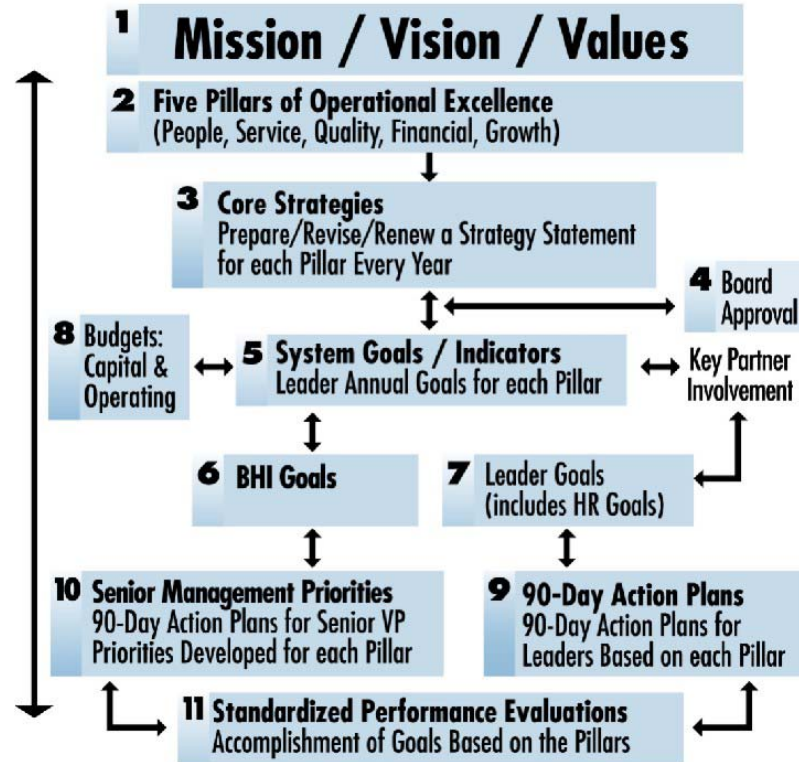
Hardwiring Success →

90 Day Plan	360 Degree Feedback	Pillars of Excellence
Leader Report Cards	CARE & BAR reports	Performance Evaluation
Satisfaction Feedback System		

2. Strategic Planning

- Strategic Planning Process
- Process Considerations
- Action Plan
 - Development/Deployment
- Short and Longer Term Action Plans

Strategic Planning Process



Methods Used in Alignment of Strategic Planning

NURSING UNIT ANNUAL GOALS

PEOPLE

- Achieve RN turnover of <5

SERVICE

- Achieve a Press, Ganey inpatient rating of 99%

QUALITY

- Achieve a CARE score > 94

FINANCIAL

- Achieve a BAR score above 85
- Implement 2.2 Bright Ideas per FTE

90-DAY ACTION PLAN



BAPTIST HOSPITAL BUDGET ACCOUNTABILITY REPORT

BAPTIST HOSPITAL CLINICAL ACCOUNTABILITY REPORT OF EXCELLENCE

3. Focus on Patients, Other Customers and Markets

- Patient/Customer and Health Care Market Knowledge
- Patient/Other Customer/Market Segments
- Listening/Learning and Using Patient/Customer Requirements
- Patient and Other Customer Relationships and Satisfaction

Listening & Learning

CUSTOMER GROUP	LISTENING and LEARNING ACTIVITY - Frequency
Active Patients and Family <i>Sub-groups for women, seniors, geographic location, disease type</i>	<ul style="list-style-type: none"> Press, Ganey satisfaction survey - daily Service recovery database - daily *Nursing discharge follow-up calls - daily *Healthsource (medical call center) - daily *Letters, phone calls - daily Therapist database - daily Focus Groups - monthly Preference database - as indicated *Personal Contact - daily *Centralized Scheduling - daily AHCA Database - daily Member...
Potential or Inactive Patients - Community at Large <i>No services received within the past 12 months; 80% on data; healthy on</i>	<ul style="list-style-type: none"> Image survey - every other... Customer Value...
Referring Physicians <i>Physicians who refer patients to BL</i>	<ul style="list-style-type: none"> *Personal contact - daily Physician Loyalty team - monthly *Centralized Scheduling - daily Physician Office Luncheon - quarterly Physician Schedule Breakfast - quarterly
Employees <i>Employee departments within the organization including employee with direct patient contact</i>	<ul style="list-style-type: none"> Attitude survey - every 18 months Employee forum surveys - quarterly Focus groups - as indicated *Bright ideas - daily Training needs analysis - as indicated Great Places to Work, Best Jobs - annually Employee COO Luncheon - monthly *Meeting committee feedback - daily Employee Loyalty team - weekly *Exit interviews - as indicated Departmental Surveys - annually BHC Daily evaluation - monthly Personnel Reception - weekly 360 survey - semi-annually BU Student Survey - annually
Employees <i>Employees who contract with managed care payors or who contract with Business Health for occupational health services</i>	<ul style="list-style-type: none"> Satisfaction survey - annually Needs analysis - annually Focus groups - as indicated Advisory Council - quarterly Angie survey - quarterly Sentiment evaluation - as indicated *Personal contact - daily *A.C.T. database - daily

* Real Time

L&L Activities



Customer Group	Listening & Learning Activities	Opportunities for Improvement	Best Practices	Future Emphasis
Active Patients and Family	Press Ganey Satisfaction Surveys Service Recovery Database	Response to concerns & complaints; Waiting time Room cleanliness; Wait...	Customer service at first point of contact; Food quality	...
Potential or Inactive Patients/Community at Large	Just Us Girls...			
Referring Physicians	Physician Accessibility Report Action Line	Average approx. new patient wait time is 18 days; number of PCP's accepting new patients = 38 of 57 Communication; Nursing staff procedures	Identification of new patient access to DRH through physician offices Team work of nurses, scrub techs, and nurse anesthetist	Promote use of sunscreen and healthy living through website Increase new patient access to PCP's Communication skills training to prevent communication breakdown
Employees	New Employee Traditions Evaluations	Benefit speakers time slot on the agenda; hospital tour	Enthusiastic and informative speakers; Friendly atmosphere; Personal touches with snacks	Extend time for hospital tour; Consider replacing some benefit speakers with written material
Employees	Advisory Council Business Health Seminar evaluation	Communication between insurance adjuster and medical provider Getting employees to return to work; implementation of organizational changes	Employees follow procedures for the Work-Fit Program Overall value and effectiveness of presentation	Concentrate on team work communication; Evaluate hire of Case Coordinator Collaboration between BL and Business Health in offering tailored consulting services

Customer Snapshot



Loyalty Team Leaders
Senior Leaders
Marketing Task Force

Loyalty Teams:

- Culture
- Communications
- Employee Loyalty
- Customer Loyalty
- Physician Loyalty

Focus PDCA



Listening and Learning Activities

CUSTOMER GROUP	LISTENING and LEARNING ACTIVITY - frequency	
Active Patients and Family <i>Sub-segments for women, seniors, geographic location, disease type</i>	<ul style="list-style-type: none"> • Press, Ganey satisfaction survey - daily • Service recovery database - daily • *Nursing discharge follow-up calls – daily • *HealthSource (medical call center) - daily • *Letters, phone calls – daily • Trendstar databases – daily 	<ul style="list-style-type: none"> • Focus Groups - annually • Preference database – as indicated • *Personal Contact - daily • *Centralized Scheduling - daily • AHCA database – daily • Membership program evaluation - as indicated
Potential or Inactive Patients / Community at Large <i>No services received within the past two years. The total community served by BHI in its drive to create a healthy community.</i>	<ul style="list-style-type: none"> • Image survey – every other year • Customer Value Analysis – every other year • *Baptist HealthSource - daily • Focus Groups – as indicated • CRM database – as indicated • INFORUM database – as indicated 	<ul style="list-style-type: none"> • Web site survey – quarterly • Event evaluation/survey – as indicated • Membership program evaluation – as indicated • WellSource database – as indicated • Newcomer program – as indicated
Referring Physicians <i>Physicians referring patients to BHI facilities</i>	<ul style="list-style-type: none"> • Satisfaction survey - annually • Physician Accessibility Report - quarterly • Shared expectation sessions – as indicated • *Action line - daily • Physician call program - monthly 	<ul style="list-style-type: none"> • *Personal contact - daily • Physician Loyalty team - monthly • *Centralized Scheduling – daily • Physician Office Luncheon – quarterly • Physician Schedulers Breakfast – quarterly
Employees <i>Different departments within the organization including employees with direct patient contact</i>	<ul style="list-style-type: none"> • Attitude survey – every 18 months • Employee forum surveys - quarterly • Focus groups – as indicated • *Bright ideas - daily • Training needs analysis – as indicated • Great Place to Work Trust Index – annually • Employee COO Luncheon – monthly • *Meeting/committee feedback - daily 	<ul style="list-style-type: none"> • Employee Loyalty Team - weekly • *Exit Interviews – as indicated • Departmental Surveys – annually • BHC Daily evaluation – annually • Reward/Recognition – weekly • 360 survey – semi-annually • BU Student Survey - annually
Employers <i>Employers who contract with managed care payors or who contract with Business Health for occupational health services</i>	<ul style="list-style-type: none"> • Satisfaction survey - annually • Needs analysis - annually • Focus groups – as indicated • Advisory Council - quarterly • Aegis survey - quarterly 	<ul style="list-style-type: none"> • Seminar evaluation – as indicated • *Personal contact - daily • *A.C.T. database – daily

* Real Time

Customer Snapshot

Customer Group	Listening & Learning Activities	Opportunities for Improvement	Best Practices	Future Emphasis
Active Patients and Family	Press Ganey Satisfaction Surveys	Response to concerns & complaints; Waiting time	Customer service at first point of contact; Food quality	Scripting; Keep patient informed
	Service Recovery Database	Room cleanliness; Waiting time	Patients cheered up by flowers and balloon	Communication; Keep patient informed
Potential or Inactive Patients/Community at Large	Just Us Girls Survey	Shorter sessions; Younger speakers; Food	Key note speaker	Plan seminars with age of participants in mind
	Web Polls	Majority of respondents do not wear sun screen to prevent damaging effects of the sun	Respondents knowledgeable of heart disease and cardiovascular disease; Use physicians or medical personnel as primary source of information	Promote use of sunscreen and healthy living through website
Referring Physicians	Physician Accessibility Report	Average approx. new patient wait time is 18 days; number of PCPs accepting new patients = 38 of 57	Identification of new patient access to BHI through physician offices	Increase new patient access to PCPs
	Action Line	Communication; Nursing staff procedures	Team work of nurses, scrub techs, and nurse anesthetist	Communication skills training to prevent communication breakdown
Employees	New Employee Traditions Evaluations	Benefit speakers time slot on the agenda; hospital tour	Enthusiastic and informative speakers; Friendly atmosphere; Personal touches with snacks	Extend time for hospital tour; Consider replacing some benefits speakers with written material
Employers	Advisory Council	Communication between insurance adjustor and medical provider	Employers follow procedures for the Work-Fit Program	Concentrate on team work communication; Evaluate hire of Case Coordinator
	Business Health Seminar evaluation	Getting employees to return to work; Implementation of organizational changes	Overall value and effectiveness of presentation	Collaboration between BLI and Business Health in offering tailored consulting services

4. Measurement, Analysis and Knowledge Management

- Data Gathering/Alignment to Support Operations and Decision Making
- Information and Knowledge Management

Organizational Knowledge

Management of knowledge is based on a no-secrets, open communication culture. Building and managing BHI's knowledge assets is key to sustaining our culture.



Knowledge management is organized within the Pillars and becomes actionable through 90-day plans.

Staff Knowledge		
Baptist Universtiy	Employee satisfaction Survey	
Cascade learning kits	Story telling	Safety education
Employee forums	Traditions	360° feedback
Firestarters meetings	Inside Baptist	Bright Ideas
Serv-U	New leaders lunches	
Baptist Daily	Clinical education	

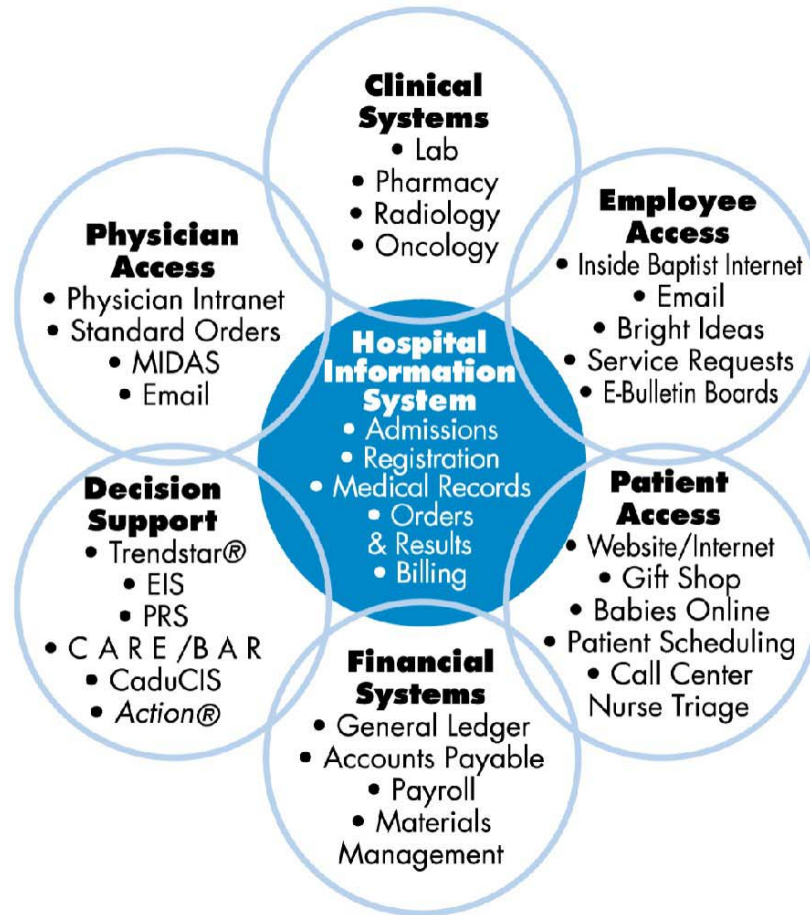


Customer/Supplier Knowledge	
Learning & Listening Strategy	Physician satisfaction surveys
Customer satisfaction survey	Discharge planning & follow up
Intra-departmental surveys	Service recovery and trending
Customer value analysis	Supplier meetings
Customer/community focus groups	Benchmarking

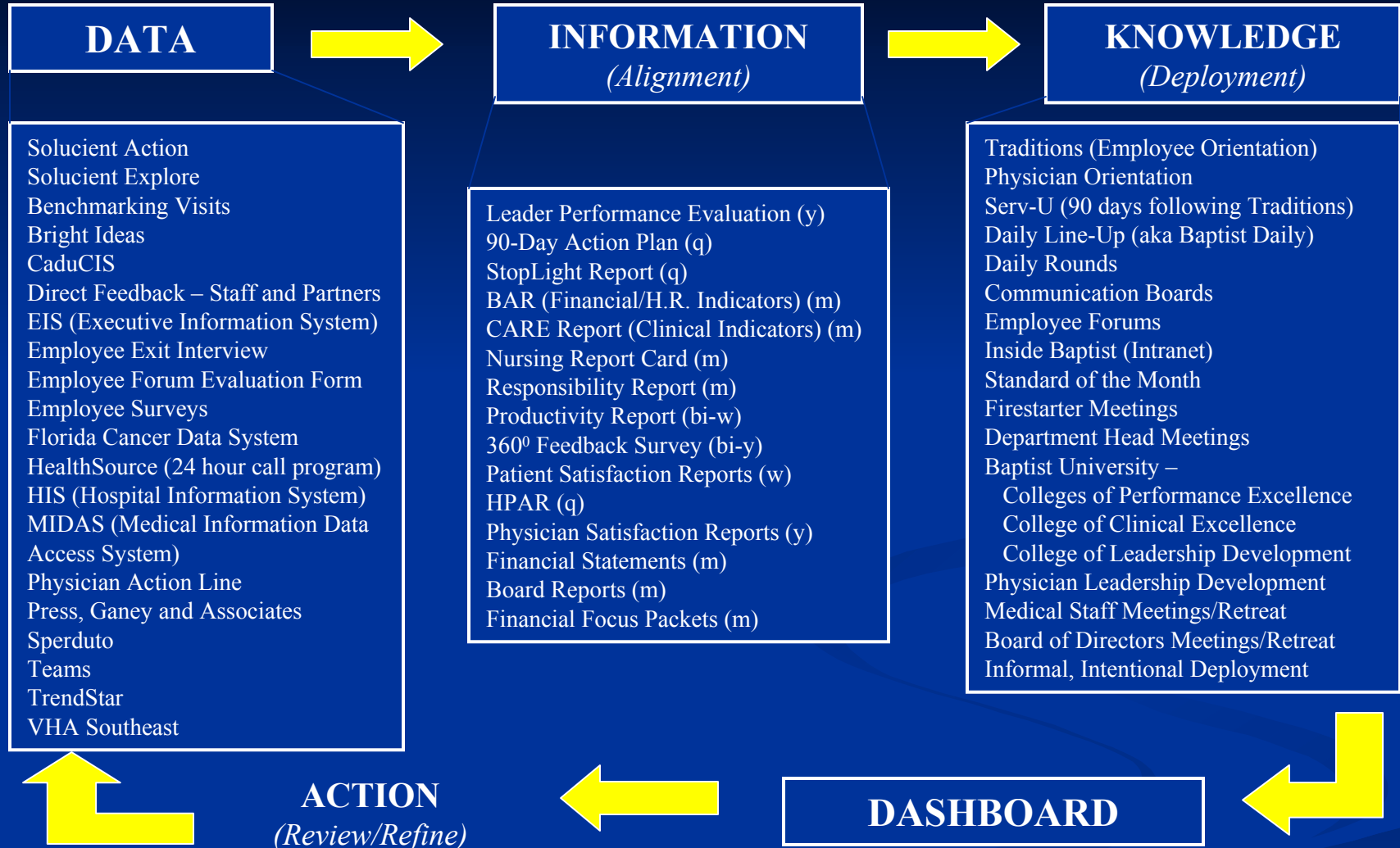
Systematic processes are in place for collecting and sharing customer knowledge. Best Practice sharing occurs with benchmark groups.

Collection and transfer of staff knowledge is done in many forms. Knowledge sharing is an integral part of our culture and is inherent in daily processes, meetings, training, survey data gathering and sharing and Best Practice sharing.

Information Management Systems



BHI'S SYSTEMATIC APPROACH



This systematic approach reflects how, through fact-based management and extensive organizational learning and sharing, we align and integrate our performance with our organizational needs. This provides a strong foundation for use in refining and continually improving our performance.

5. Staff Focus

- Organization and Management of Work
- Effective Communication and Skill Sharing
- Staff Performance Management System
- Recruiting, Hiring Retaining Staff
- Staff Education, Training and Development
- Staff Well-Being and Satisfaction

Figure 5.1-1 Examples of Interdisciplinary Teams

People	Service	Quality	Financial	Growth
Baptist University Board Education Planning Committee Employee Benefits Team Bright Ideas Diversity Council Faith in Action Employee Foundation Operation Teen	Patient Loyalty Teams: <ul style="list-style-type: none"> ■ Culture ■ Communication ■ Customer Loyalty ■ Physician Loyalty ■ Employee Loyalty Food Services Advisory Team	Clinical Excellence Teams: <ul style="list-style-type: none"> ■ Acute Myocardial ■ Congestive Heart Failure ■ Pneumonia Skin Care Integrity Team Medication Event Team Corporate Compliance Environment of Care Committee	Revenue Cycle Teams: <ul style="list-style-type: none"> ■ Payment Compliance ■ Patient Registration ■ Billing and Collections ■ Managed Care Pricing ■ Documentation & Coding ■ Late/Lost Charges ■ Charge Master Product Selection Committee	Service Lines: <ul style="list-style-type: none"> ■ Oncology ■ Cardiology ■ Orthopedics Marketing Task Force

Training Design Model



6. Process Management

- Key Health Care Services and Processes
- Process Performance Improvement
- Key Support and Business Practices

Service Design Process

Step 1

Conception



- Idea Generation / Screening
- Concept Development

Step 2

Feasibility



- Financial
- Productivity
- Cycle Time
- Volume
- Regulatory
- Capital Sourcing

Step 3

Approval



- Senior Leaders and, if necessary, Board

Step 4

Plan for Implementation



- Create a Team
- Develop Strategies and Goals
- Develop Action Steps
- Develop Monitoring and Evaluation Targets
- Develop Exit or Decline Strategy

Step 5

Implementation



- Execute Plan

Step 6

Evaluation

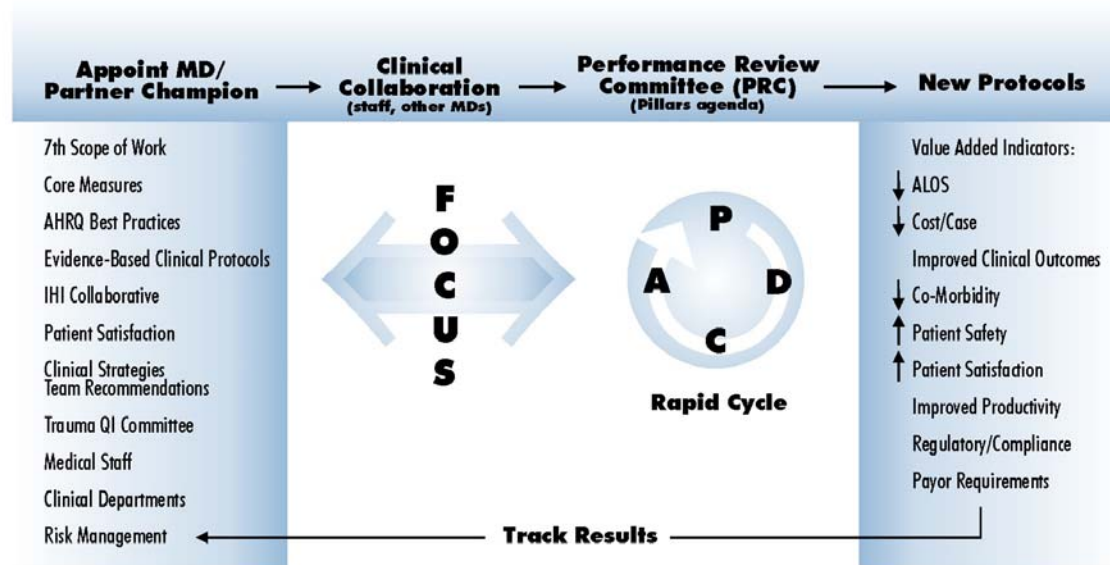


- Evaluate and Monitor Actual Performance to Goals
- Develop Corrective Action Plans if necessary

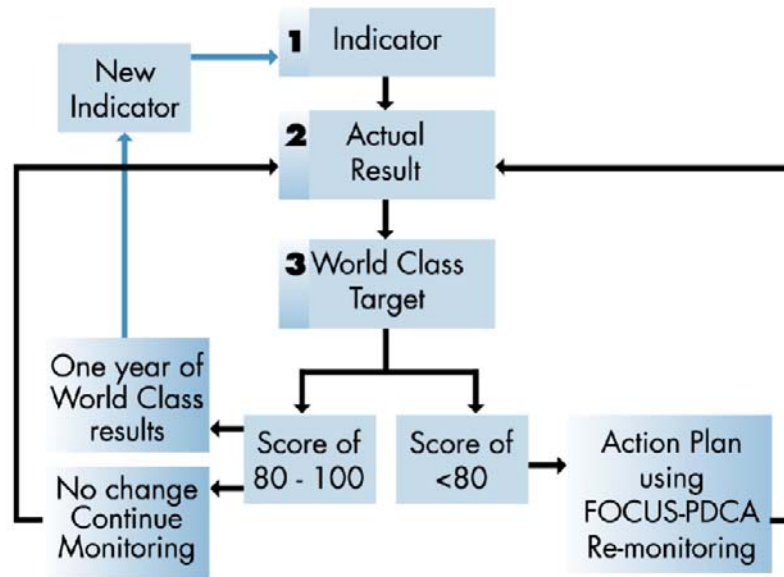
EBCI Process

Baptist Hospital, Inc.

Evidence-Based Clinical Improvement (EBCI Process)



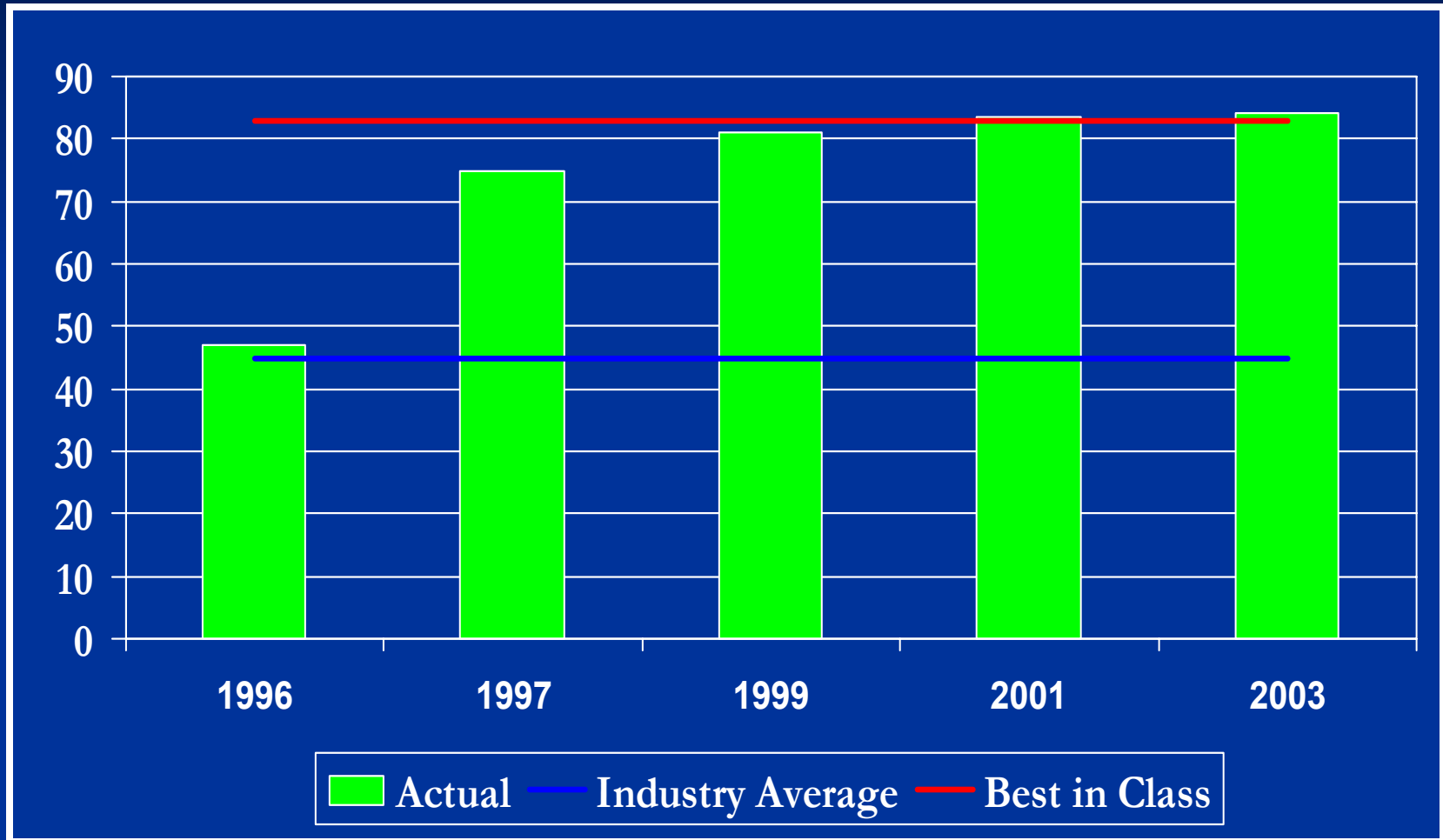
Clinical Accountability Report of Excellence (CARE)



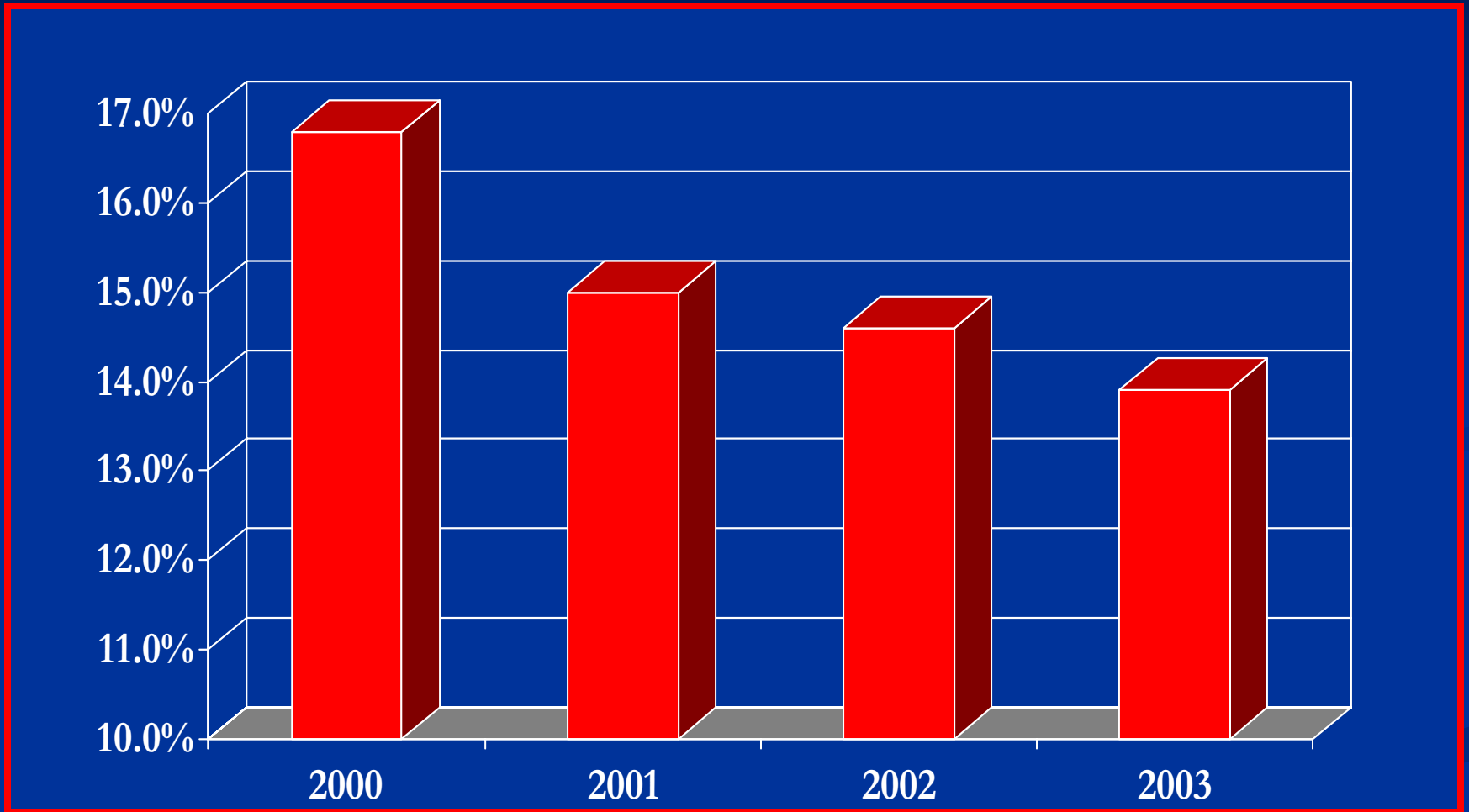
7. Organizational Performance Results

- Health Care Results
- Patient/Other Customer-Focused Results
- Financial and Market Results
- Staff and Work System Results
- Organizational Effectiveness Results
- Governance and Social Responsibility Results

High Employee Morale

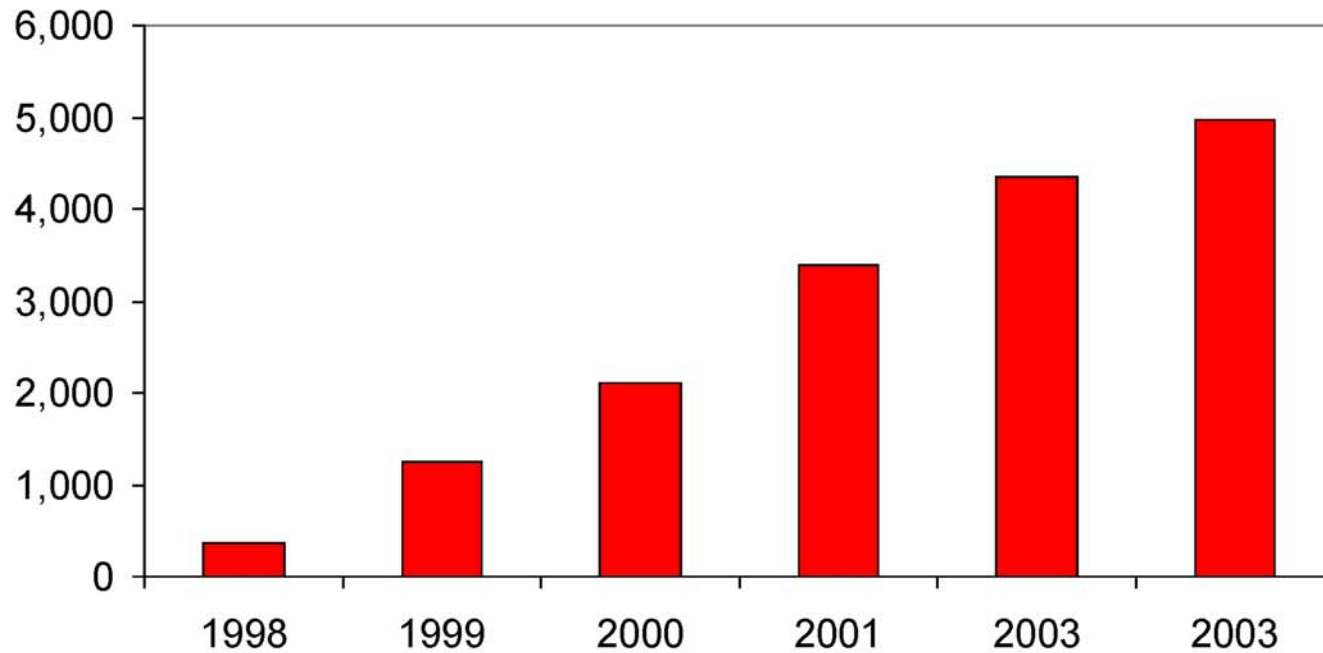


Low Employee Turnover



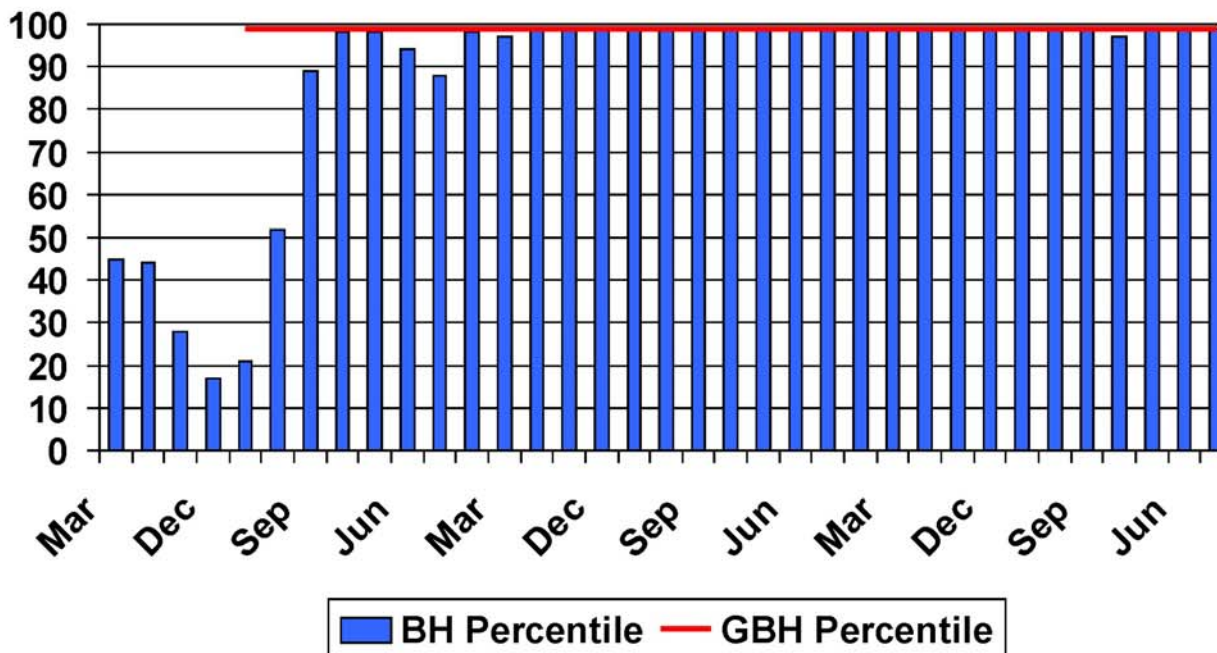
Baptist Hospital, Inc.

Implemented Bright Ideas

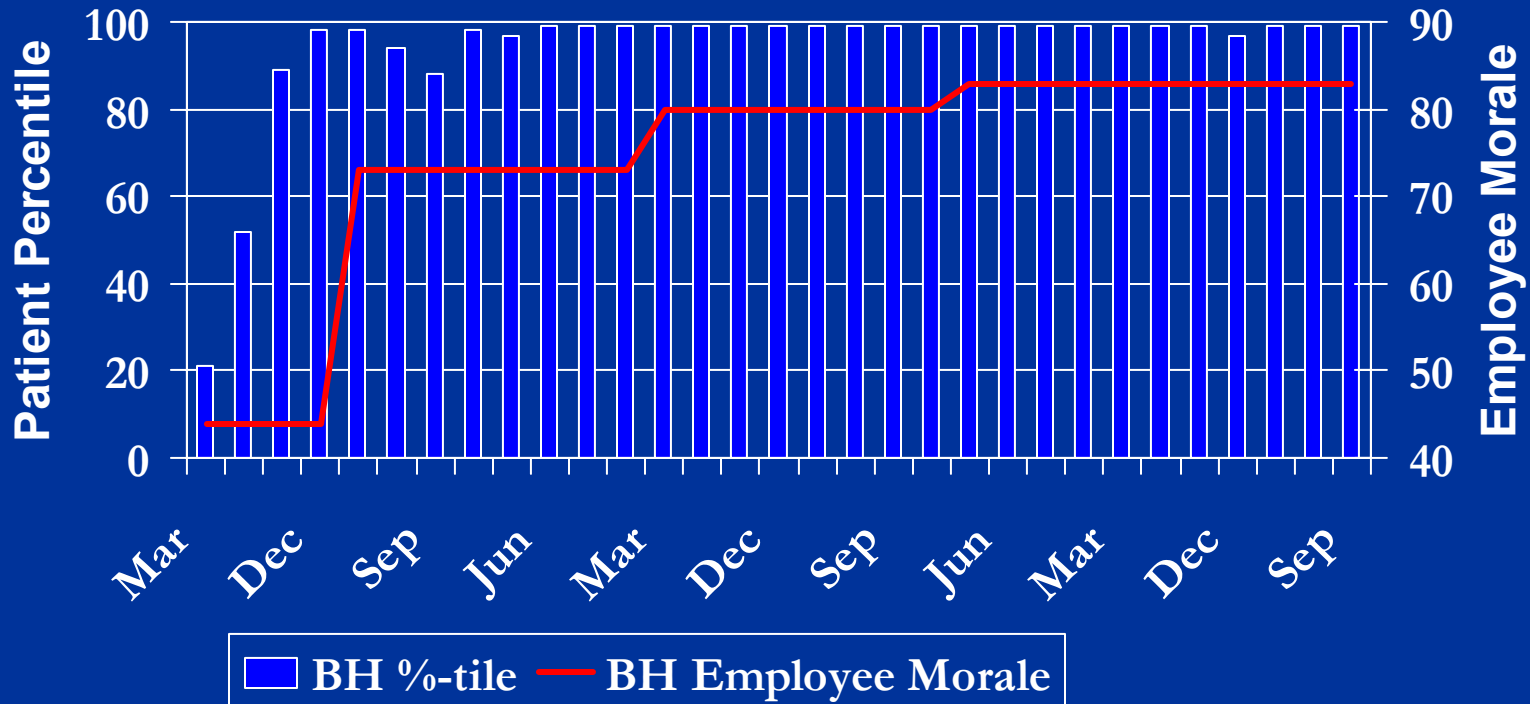


*For FY 2003, Actual Implemented Ideas per FTE = 2.49 with Goal = 2.4

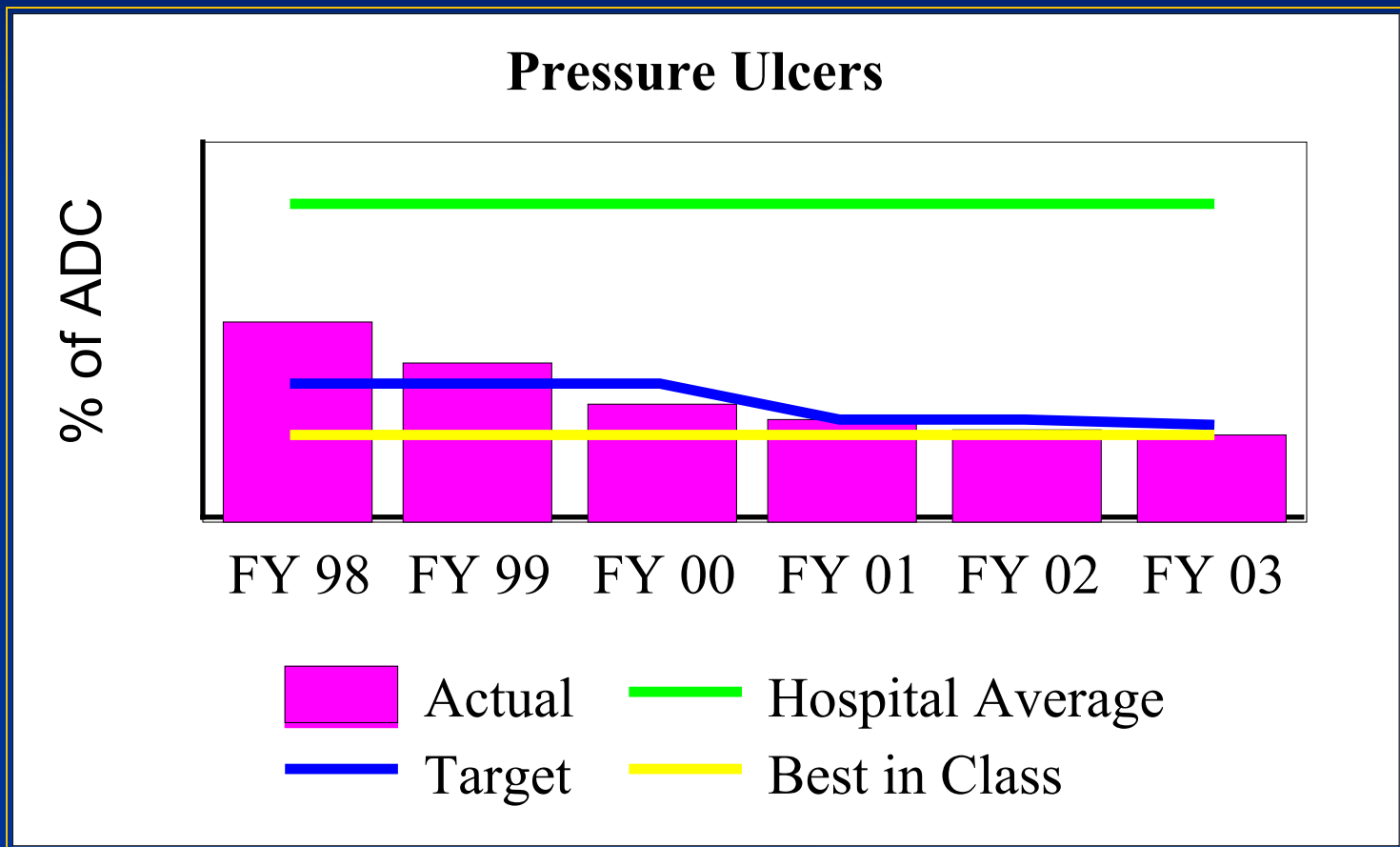
Top Percentile In Patient Satisfaction Inpatient Survey Results



Patient Satisfaction Correlated to Employee Morale

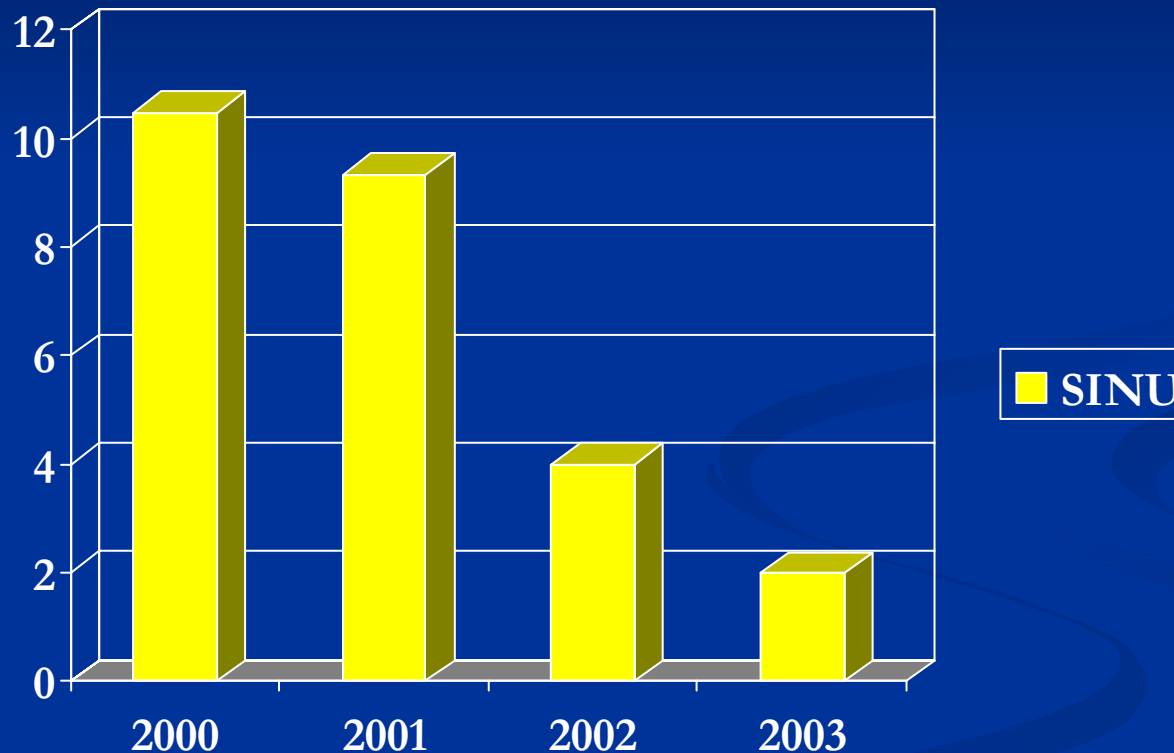


Baptist Hospital, Inc., Results Clinical Quality Pillar

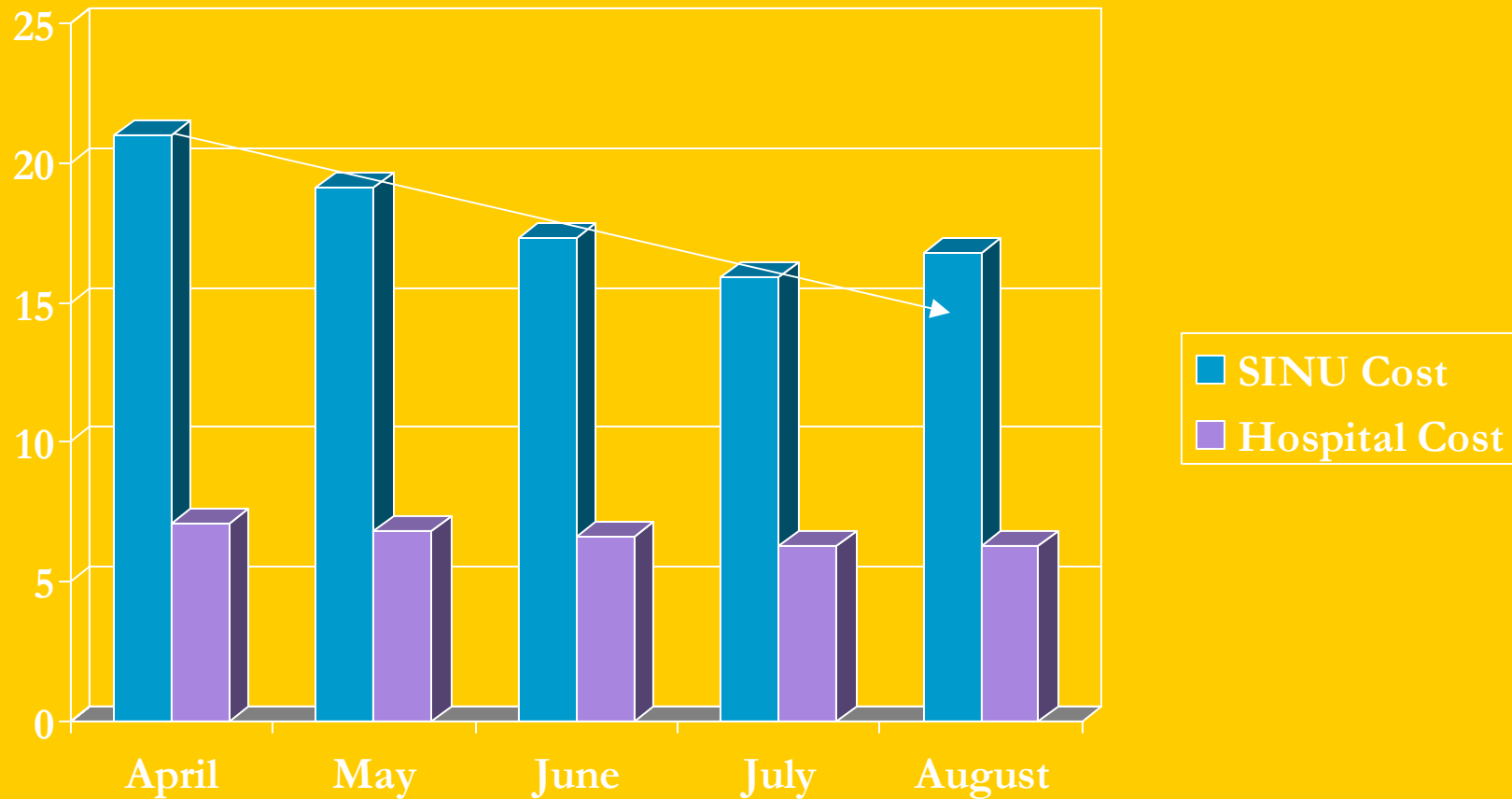


Infection Prevention Results SINU

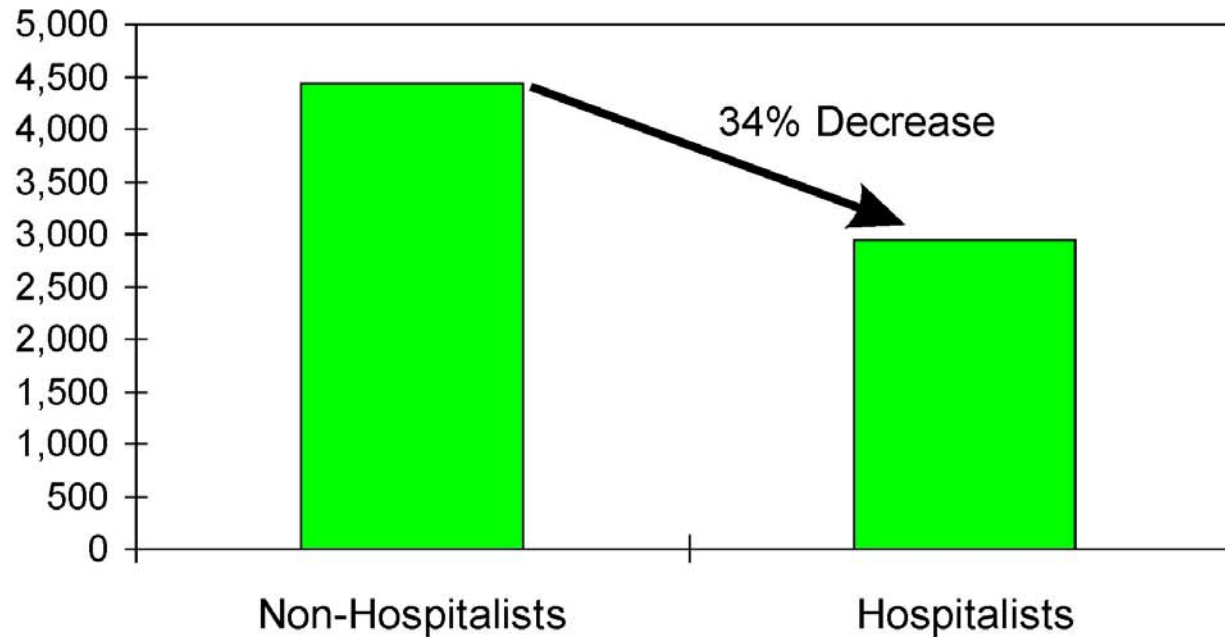
Ventilator –Related Pneumonia



IHI Critical Care Collaborative Cost Results



Hospitalists Mitigate Costs of Inpatient Care Variable Cost per Case at Baptist Hospital



Physician Satisfaction Survey

Active Physicians (n=139)	Top 2 Ratings	
Overall	2001	2003
Satisfaction with Primary Hospital	80%*	90%
Quality of Emergency Department	67%	93%
Quality of Medical Records	78%	79%
Quality of Laboratory Services	82%	92%
Quality of Radiology Services	80%	96%
Quality of Nursing Staff	75%	93%
Quality of Pharmacy	82%	96%

*Ratings of “4” or “5” (Completely Satisfied or Very Satisfied)

Outcome Profile at Baptist Hospital

Standardize
Variation % Diff
from Predicted

1999 2003



Yr. 1999-2000: 12,253 IP Case

Case Mix Index: 1.62

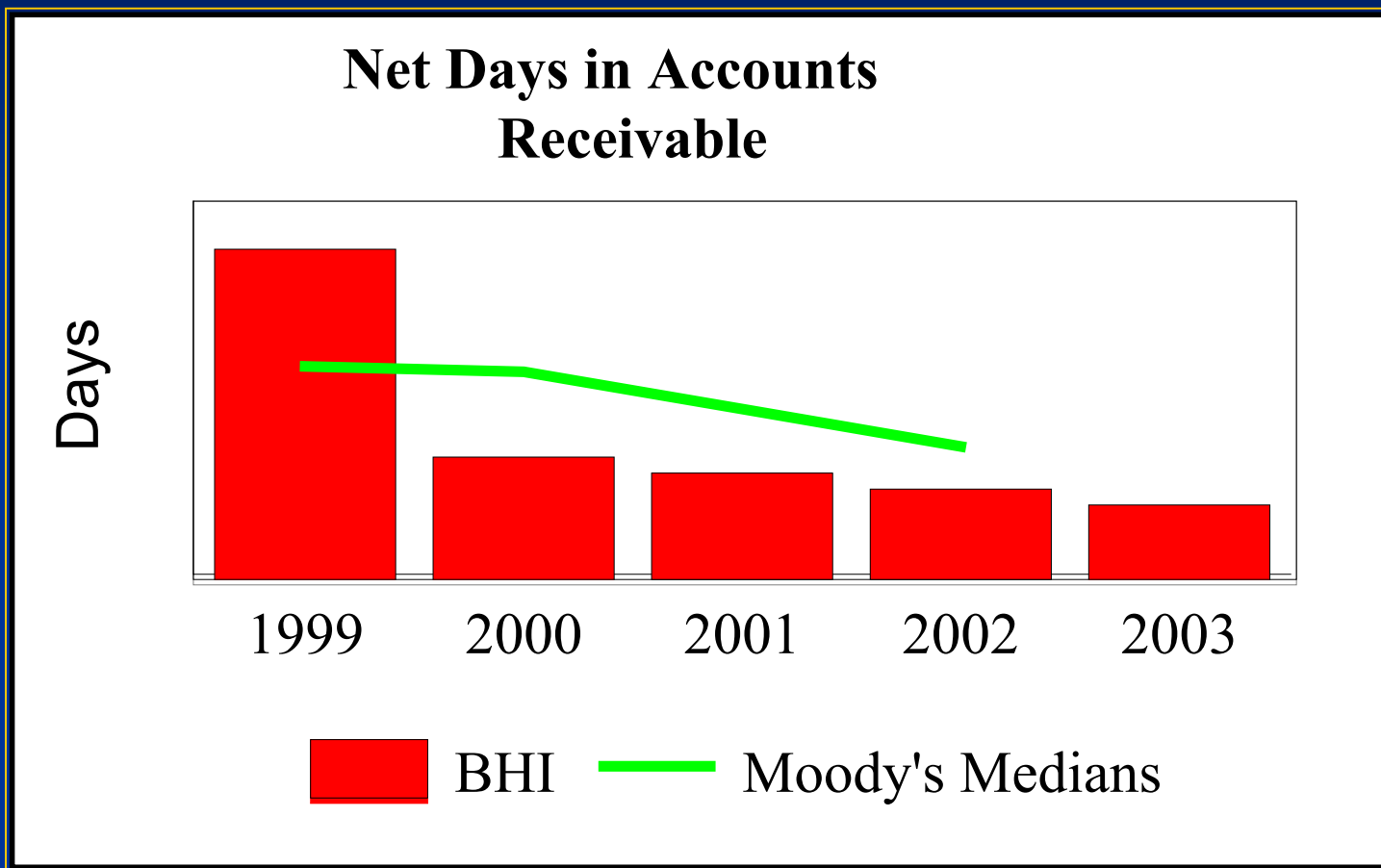
Yr. 2002-2003: 13,124 IP Case

Case Mix Index: 1.72

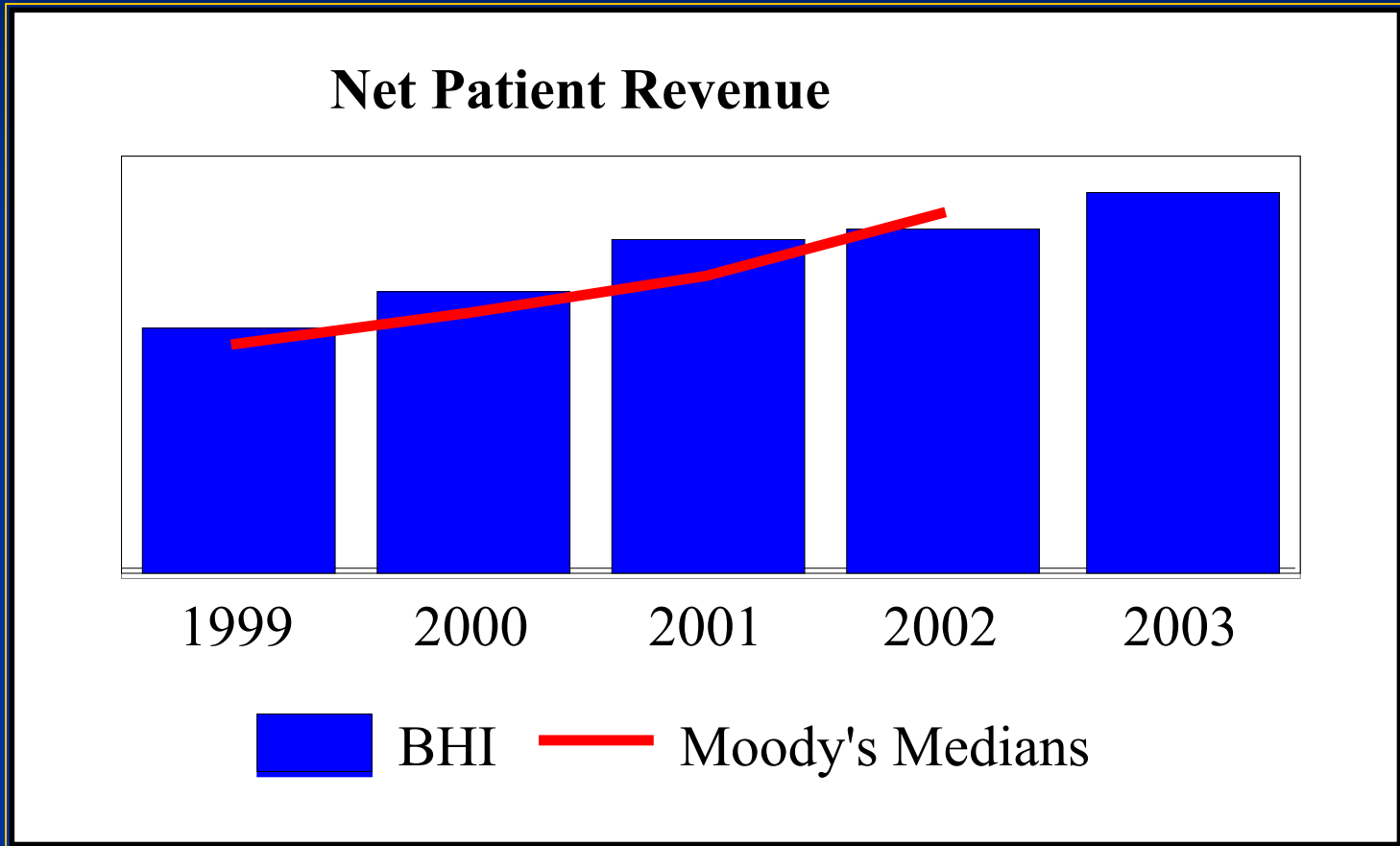
Significant at 90% confidence level

Baptist Hospital, Inc., Results

Financial Performance Pillar



Baptist Hospital, Inc. Results Growth Pillar



Summary

- **Make Patient-Defined Quality and Value the Strategy**
- **Convey the Vision**
- **Measure Performance at the Whole-System Level**
- **Assure Cooperation across the Continuum**

Conclusion

“In times of change the learner will inherit the earth while the learned find themselves wonderfully equipped to live in a world that no longer exists.”

Eric Hoffer (1902-83)