Learning Objectives:

- Describe how to design dashboards that represent quality metrics and overall costs that are meaningful to physicians.
- Summarize how to pull from dashboards business intelligence data that is clinically significant to practice.
- Illustrate how to make a significant impact on the bottom line with a straightforward process that is easily reproducible.

Overview:

Temple University Hospital is a large-scale academic medical center focused on patient excellence. To improve our quality metrics, we convened focused teams around different diagnosis-related groups (DRGs) to streamline clinical milestones and pathways for these similar patients.

We found that decreased clinical variability within a DRG leads to improved patient outcomes while also achieving a significant savings of \$25 million in the project's first 2 years.



Intervention:

Important to Note:

- Vizient Expected LOS was initially used as the primary metric of opportunity
- A multidisciplinary approach was taken when involving Stakeholders
- Dashboards were key in tracking the progress & success of projects
- Value is found at the intersection of Cost & Quality

Using Quality to Drive Cost/Case in Surgical DRGs

Claire Raab, MD, CEO Temple Faculty Practice Plan; Daniel del Portal, MD, MBA, Chief Clinical Officer Presenters: Byron Glasgow, MBA, Director of Business Intelligence; Nicole Patlakh, Performance Excellence Management Engineer Temple University Hospital, Philadelphia, PA

> **Dashboards to Track Progress** Project Management/ **Performance Excellence** Team



					C	ABG S	urgery	,		-										
Metrics		FY19	FY20	FY21	FY22 Goal	JUL	AUG	SEP	ОСТ	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FY22 YTD		
Efficiency: Inpatient Volume & LOS (DRG - Vizient)																				
Inpatient Volume (Discharge Month)		158	179	195		14	12	11	15	10	9	8	13	10				102		
Observed LOS		11.6	9.9	10.8	10.8	7.9	12.8	13.4	13.8	18.4	10.8	13.5	10.1	9.5				12.1		
Expected LOS	Expected LOS			11.6		10.7	12.0	12.6	10.9	11.1	10.1	13.0	10.5	9.7				11.1		
Median LOS	Median LOS			9		8	12	13	11	12	9	8	8	9				10		
Pre-Op LOS for Non-Elective Cases		4.0	4.5		2.3	4.0	5.1	6.3	7.6	5.6	6.6	3.3	3.3				5.0			
Mortality																				
# of Deaths (in hospital)		5	1	3	0	0	0	0	0	0	0	0	0	0				0		
% Mortality (in hospital)	Vizient (DRG)	Vizient (DRG)	Vizient (DRG) 3.	3.2%	0.6%	1.5%	0	0%	0%	0%	0%	0%	0%	0%	0%	0%				0.0%
Transfer Mortality (in hospital)		0 (n=32)	1	1	0	0	0	0	0	0	0	0	0	0				0		
# of Deaths (30-days post-surgery)	STS*	10	7	9	0	0	0	0	0	1	1	1	0	1				4		
% Mortality (30-days post-surgery)	313	5.6%	4.2%	4.6%	0	0.0%	0.0%	0.0%	0.0%	14.3%	9.1%	10.0%	0.0%	8.3%				3.4%		
Infection Prevention (Cases)																				
SSI Rate per 100 procedures (NHSN)		1.0%	0.6%	0.4%	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0				0.0		
# of actual cases with SSI (NHSN)		2	2	1	0	0	0	0	0	0	0	0	0	0				0		
# of surgeries (Surgery Month)		203	212	227		18	14	20	17	9	14	11	16	15				134		

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identifying greatest opportunities and to tracking progress.



					C	ABG S	urgery	1															
Metrics		FY19	FY20	FY21	FY22	JUL	AUG	SEP	ОСТ	NOV	DEC	JAN	FEB	MAR APR	MAY	JUN	FY22						
Efficiency: Inpatient Volume & LOS ((DRG - Vizient)				Goal												Ϋ́́́́́						
Inpatient Volume (Discharge Month)		158	179	195		14	12	11	15	10	9	8	13	10			102						
Observed LOS		11.6	9.9	10.8	10.8	7.9	12.8	13.4	13.8	18.4	10.8	13.5	10.1	9.5			12.1	SURGEON	#		NOTON		% PREE CARD
Expected LOS		11.1	11.0	11.6		10.7	12.0	12.6	10.9	11.1	10.1	13.0	10.5	9.7			11.1	PANEL1	SURGERIES	S CARD (Y)	PREF	TOTAL	COMPLIANT
Median LOS		10	9	9		8	12	13	11	12	9	8	8	9			10				CARD (N)		
Pre-Op LOS for Non-Elective Cases			4.0	4.5		2.3	4.0	5.1	6.3	7.6	5.6	6.6	3.3	3.3			5.0	Surgeon	A 1	16	1	17	94%
Mortality																		Surgeon	3 1	16		16	100%
# of Deaths (in hospital)		5	1	3	0	0	0	0	0	0	0	0	0	0			0	Surgeon	C 1	25	7	32	78%
% Mortality (in hospital)	Vizient (DRG)	3.2%	0.6%	1.5%	0	0%	0%	0%	0%	0%	0%	0%	0%	0%			0.0%	Surgeon	3	69	10	79	87%
Transfer Mortality (in hospital)		0 (n=32)	1	1	0	0	0	0	0	0	0	0	0	0			0	GRAND TO	TAL 6	69	10	79	87%
# of Deaths (30-days post-surgery)	¢ <i>T</i> ¢*	10	7	9	0	0	0	0	0	1	1	1	0	1			4			-	<u> </u>		
% Mortality (30-days post-surgery)	313	5.6%	4.2%	4.6%	0	0.0%	0.0%	0.0%	0.0%	14.3%	9.1%	10.0%	0.0%	8.3%			3.4%						
Infection Prevention (Cases)																							
SSI Rate per 100 procedures (NHSN)		1.0%	0.6%	0.4%	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0			0.0		Crani-He	matoma Av	erage Cost F	Y'21 May	
# of actual cases with SSI (NHSN)		2	2	1	0	0	0	0	0	0	0	0	0	0			0	Surgeon	# SURGERIES	Max. Cost	Median Cos	t Average	Cost Min Co
# of surgeries (Surgery Month)		203	212	227		18	14	20	17	9	14	11	16	15			134	GRAND TOTAL	6	\$3,273	\$1,627	\$1.9	16 \$1.23 ¹
STS Quality Metrics*																				<i>40)270</i>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>
Star Rating		\bigstar		$\star\star$																			
Beta Blocker Pre-Op (within 24 hours)		141/179	146/176	161/177	100%	16/16	12/12	12/14	15/15	7/7	10/10	9/9	16/16	12/12			109/111		Crani-Herr	atoma Ave	erage Cost I	Y'21 Ma	y
		78.8%	83.0%	91.0%	100 /8	100.0%	100.0%	85.7%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			98.2%	\$3,500 \$3,273			-		-
Extubation <24hr		124/179	144/180	169/194	87%	15/16	7/13	12/15	13/17	6/7	8/11	9/10	15/16	10/12			95/117	Ç,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5,275				
		69.3%	80.0%	87.1%	0778	93.8%	53.8%	80.0%	76.5%	85.7%	72.7%	90.0%	93.8%	83.3%			81.2%	\$3,000					
Extubation Time = 0				59/194		4/16	3/13	2/15	3/17	0/7	3/11	4/10	4/16	2/12			25/117	\$2,500					
				30.4%		25.0%	23.1%	13.3%	17.6%	0.0%	27.3%	40.0%	25.0%	16.7%			21.4%	\$2,000			ć1 0	10	
Mean Ventilation Hours				20.7	< 24	14.0	21.5*	14.1*	21.8	33.0	27.2	18.7	9.8	18.3			18.6*	\$2,000		\$1.627	\$1,9	10	
STS Morbidity Metrics*																		\$1.500		<i>Ş1,027</i>			64.220
Strake/CV/A			1/172	3/194	09/	0/16	0/13	0/15	0/17	0/7	0/11	0/10	0/16	1/12			1/117	<i>Q</i> 1,000					\$1,239
SUOKE/CVA			0.01%	1.55%	U %	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	8.3%			0.9%	\$1,000					
Survial De Evreleration			4/172	6/194	00/	1/16	0/13	0/15	1/17	1/7	0/11	1/10	0/16	0/12			4/117	\$500					
Surgial Re-Exploration			2.33%	3.09%	0%	6.3%	0.0%	0.0%	5.9%	14.3%	0.0%	10.0%	0.0%	0.0%			3.4%	\$500					
Deen Sternel Menned Lafestien Dete			3/172	1/194	00/	0/16	0/13	0/15	0/17	0/7	0/11	0/10	0/16	0/12			0/117	\$0					
Deep Sternal Wound Infection Rate			1.74%	0.52%	0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			0.0%	M	ax. Cost	Median Cost	Average	e Cost	Min Cost
Destance Kating Descal Failure			8/172	5/194	00/	0/16	0/13	2/15	0/17	0/7	1/11	0/10	0/16	1/12			4/117						
rosioperative Renai Fallure			4.65%	2.58%	0%	0.0%	0.0%	13.3%	0.0%	0.0%	9.1%	0.0%	0.0%	8.3%			3.4%						
Prolonged Ventilation			28/172	25/194		1/16	6/13	3/15	4/17	1/7	3/11	1/10	1/16	2/12			22/117						
				12.9%	13%	6.3%	46.2%	20.0%	23.5%	14.3%	27.3%	10.0%	6.3%	16.7%			18.8%						
Other Metrics (Cases)																							
Pathway Compliance			84%	92%	100%	86%	83%	73%	87%	70%	89%	75%	85%	80%			81%			1	ТСЛ	IDI	с Цсл
*STS Metrics are non-risk adjusted				•			-		-	•	•	•	-	• •	•	•						VIL L	

SURGEON PANEL1	# SURGERIES	ON PREF CARD (Y)	NOT ON PREF CARD (N)	TOTAL	% PREF CARD COMPLIANT		
Surgeon A	1	16	1	17	94%		
Surgeon B	1	16		16	100%		
Surgeon C	1	25	7	32	78%		
Surgeon D	3	69	10	79	87%		
GRAND TOTAL	6	69	10	79	87%		



ΤH

Measure	FY 2018	FY 2019	FY 2020	FY 2020 Variance		Five Most Recent Months									
	to FY 2019		to FY 2019		May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020						
	Volume														
Discharged Cases	97	95	106			9	10	14	11	12					
	ALOS														
Med Surg ALOS	9.60	8.01	7.82	2.37%		7.22	7.40	6.86	7.09	8.25					
ICU ALOS	4.60	4.58	3.75	18.12%		3.78	3.20	3.29	3.91	4.33					
Total ALOS	14.20	12.59	11.57	8.10%		11.00	10.60	10.14	11.00	12.58					
Vizient Expected ALOS	13.25	12.07	11.72			12.79	11.19	13.03	+	+					
	мссмі														
MC CMI	6.87	6.77	6.78	0.15%		7.20	6.79	6.73	7.54	7.19					
	MC Complication Cases														
мсс	74	64	65			7	6	8	10	9					
сс	‡	ŧ	ŧ			ŧ	+	+	ŧ	+					
None	23	31	41			2	4	6	1	3					

ALOS Cost to Treat CABG with Cardiac Cath

This scorecard only includes DRG's 231, 232, 233, & 234. This scorecard excludes patients on ventilators. Other patients could have experienced these services but fell out of the targeted DRGs.



TEMPLE HEALTH

←ALOS → Exp LOS — LOS Index Trend