







Improving the ED Experience and Efficiencies: 5 Strategies From 2 Large Systems

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Learning Objectives



- Discuss interventions to provide tangible guidance to operational leaders on how to improve their ED experience.
- Explain the roles of process improvements, accountability structures and process engineering and the impact each of them has on outcomes.







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Houston Methodist Entities

































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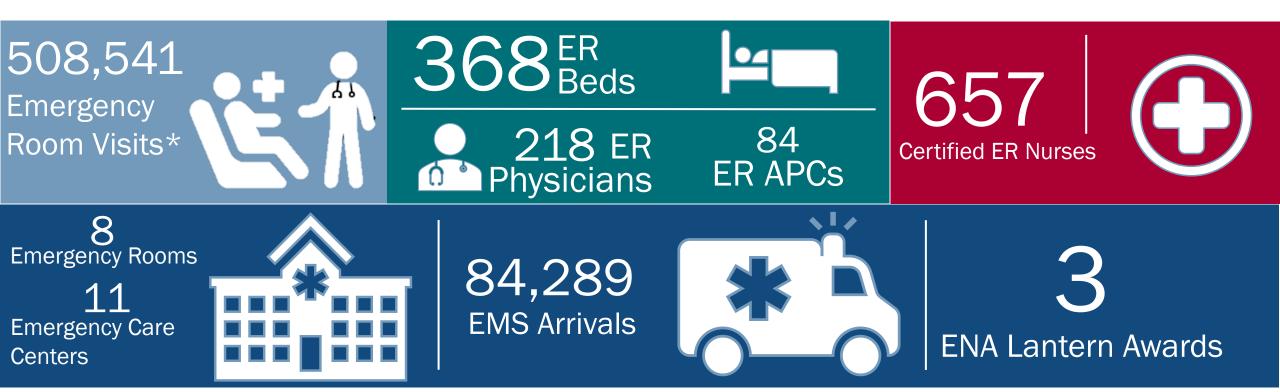






Houston Methodist By the Numbers



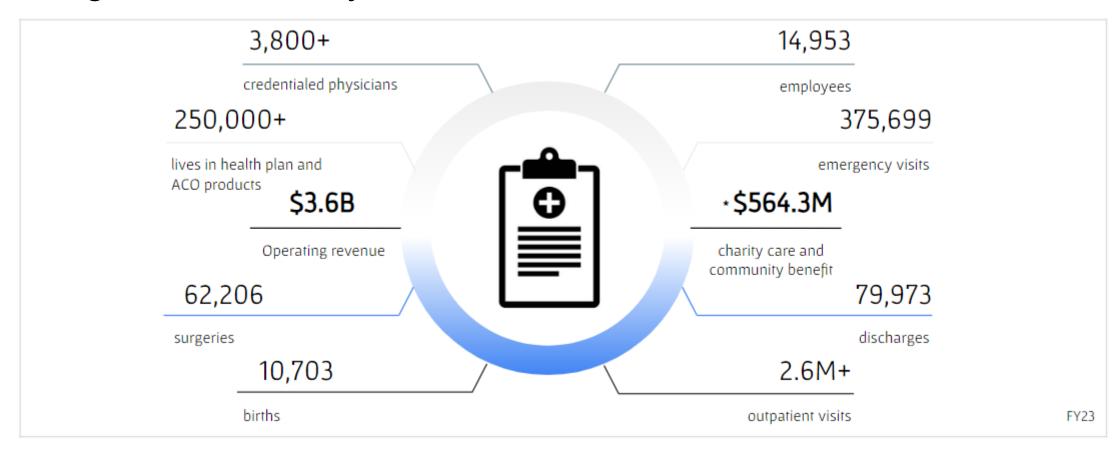


*2023 Year End

Ascension Texas: By the Numbers

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The Organization Today



^{*}represent the 10-year annual average from Fy12-Fy21 as the most current approved State of Texas data



Ascension Texas Services & Demographics

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13 Acute Care Facilities

- Academic medical affiliation
- 2 level 1 trauma facilities
- 2 stand alone children's hospitals
- 2 critical access hospitals

Background

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EDs are struggling post-pandemic with high patient acuity, increasing volumes, long admission holds (boarders), increased testing, and staffing issues. Patient experience scores have also fallen to an all time low.

Four Deliberate Steps





Built new accountability structures across EDs (longitudinal cascade) from executive to the staff level (horizontal cascade)



Developed timely data-driven reports and distributed them to all teams interacting with the ED



Process engineers developed a LEAN-based process improvement structure and led workshops with staff to pilot, test, and refine ED workflows



Patient Experience leaders deployed a new evidence-based communication framework



Outcomes

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 System ED patient experience scores were 43% in January 2023 and increased to 76.4% in June 2024



• Average 30% reduction in left-without-being-seen



Average 50 minute reduction in ED DC LOS



 Maintained 120 min ED boarder hours across all sites; 70 min less than the national median.





Ascension Texas: Steps

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ED Clinical Care Council

- Aligned goals
- Transparently review results with all stakeholders
- Share across Ascension

Multidisciplinary Throughput Focus

- Shift resources to front and focus on movement
- Inpatient hallway boarding and/or faster report and movement

New Listening Customer System

- Survey closer to visit and measures endto-end customer journey
- Richer data insights and comments used for action plans
- Survey responses prompt immediate outreach to patients for service recovery

ED Experience Framework

- ED arrival service coaching tips
- Better inform patients of wait time expectations
- Every Moment Matters service training
- Clinician and nurse interaction

Ascension Texas: Outcomes



Key Performance Indicator	Goal	Year 1 2022-2023	Year 2 2023-2024
Left Without Being Seen (LWBS)	1.5%	3.13%	1.48%
Door to Provider (min)	14 min	12 min	11 min
Length of Stay Discharge Patients (min)	164 min	181 min	160 min
Consumer Experience Net Promoter Score (NPS)	54.8	54.4 (**Mar 23 – Jun 23)	56.9



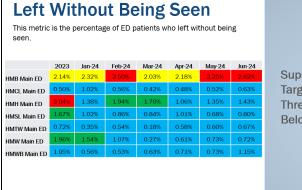
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What caused the performance improvements?

REFLESTION

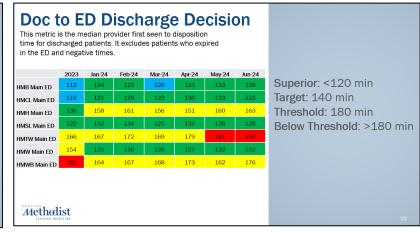
Measuring Success

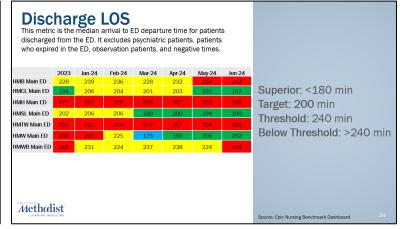
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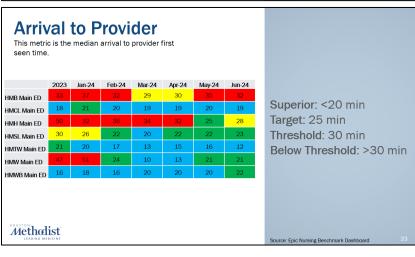


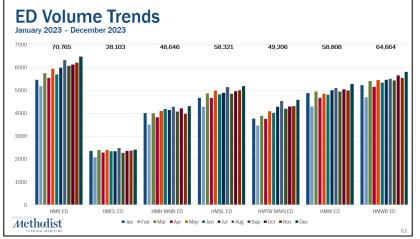
Methodist

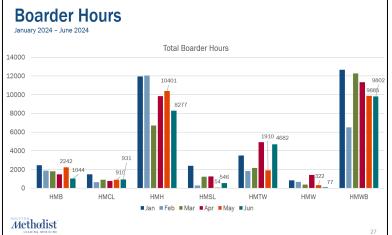
Superior: <1.5%
Target: 2%
Threshold: >2%
Below Threshold: >2.5%











All hospitals engaged in process improvements using taskforces



ED Redesign Task Force

Remodel current workflows and develop new processes

60-90 days to Design, Educate and Implement. Multidisciplinary team

Physicians, lean team, guest relations, front line ED representatives, and ad hoc every department that impacts the ED (radiology, lab, transport, Inpatient etc.,).

Ensure front line engagement occurred early for early adoption and sustainability.

Using Data and Innovation to guide the new design.

Visit and collaborate with sister facilities.

Using data analytics to drive process designs.

BELLESIISD

Common Lean Changes Across Most EDs

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Within 10 minutes of patient arrival, every patient is seen by a physician: **Meaningful Encounter**



Split the ED into three phase of care

- Patients with LOS < 3HRS
- Patients with LOS > 3 HRS
- Patients Critical and/or admitted



Added recliner space and hallway capacity; created lounges; enhanced EVS and FNS rotations



Communication Framework



- Highlight and refine behaviors through regular clinician feedback.
- Share 2-3 focused areas and specific strategies at each monthly ED physician meeting, based on data insights.
- Utilize individual physician scorecards, incorporating patient comments for performance improvement.

Individual physician scorecards



		Do	ctors Ov	erall	Courtesy of doctors			Doctors concern for comfort			Doctors include you trtmt decision			Doctors informative re treatment			Doctors took time to listen									
MD Name	ED Department	Тор Вон	n	Large PG Rank ▼	Тор Воя	n 🕌	Large PG Rank ▼	Тор Воя	n 🕌	Large PG Rank ▼	Тор Вох	, n	Large PG Rank ▼	Тор Вон	n 🕌	Large PG Rank ▼	Тор Воя	n 🕌	Large P Rank							
	DP ECC	100.00	5	99	100.00	5	99	100.00	5	99	100.00	5	99	100.00	5	99	100.00	5	99							
	DP ECC	83.33	6	92	83.33	6	86	83.33	6	93	83.33	6	94	83,33	6	93	83.33	6	90							
	DPECC	95.15	21	99	95.24	21	99	95.00	20	99	95.00	20	99	95.24	21	99	95.24	21	99							
	DPECC	83.33	12	92	83,33	12	86	83,33	12	93	83.33	12	94	83,33	12	93	83.33	12	90							
	DP ECC	0.00	1	1	0.00	1	1	0.00	1	1	0.00	1	1	0.00	1	1	0.00	1	1							
	DP ECC	100.00	3	99	100.00	3	99	100.00	3	9	1				 				+	Doctors			Doctors	Doctors'	Doctors	
	DP ECC	83.33	6	92	83.33	6	86	83.33	6	9 ,	MD NAME	NAME APP NAME			COMMENT			SECTIO COMMENT		Overall Ton	Courtesy of	Doctors took	informative re	concern for		SERVICE DATE
	DP ECC	100.00	1	99	100.00	1	99	100.00	1	9	- T		,		0011112111		-	N 🖵	CATEGOI -	Box Score	doctors 🚽	time to liste 🖵	treatment	comfort	trtmt decisi	▼
	DP ECC	83.33	18	92	88.89	18	96	83.33	18	9			This was the first E	R visit I've had whe	re I was treat	ted with respect and	d dignity for my									
	DP ECC	100.00	2	99	100.00	2	99	100.00	2	9			condition, and tak	en seriously. I was	heard, unde	erstood, and each pe	erson tasked									
	DPECC	100.00	6	99	100.00	6	99	100.00	6	9		No APP	with my care was i	noredibly knowled	dgeable. Again, active listening was used and me and making sure that I was comfortable at all			Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	4/27/2024
	DPECC	85.71	7	95	85.71	7	91	85.71	7	9			there was genuine	interest taken in r						l .					1 '	
	DPECC	60.00	5	12	60.00	5	6	60.00	5	1				ent and treatment.												
	DP ECC	73.85	13	64	69.23	13	30	76.92	13	7		No APP				vered all my question	ns. Everyone	Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	5/1/2024
	DPECC	62.86	7	20	71.43	7	39	57.14	7	10		No APP	Very good experie	fessional. They ma	ade me reel c	cared for.		Doctors	Positive	100	VERY GOOD	VEDY COOR	VERY GOOD	VEDY COOR	VERY GOOD	5/27/2024
	DPECC	84.75	12	94	100.00	12	99	72.73	11	6		No APP		t go anywhere else				Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	6/15/2024
	DPECC	91.67	12	99	91.67	12	99	91.67	12	9		No APP	So nice and very					Doctors	Positive	100	VERY GOOD			-	VERY GOOD	4/30/2024
	DPECC	83.33	6	92	83.33	6	86	83.33	6	9					ucted to let v	women with previous	s history of			•						
	DPECC	63.33	6	21	66.67	6	20	50.00	6	3		No APP	textured breast im	plants just die slow	ly (like every	other doctor).		Doctors	Negative	U	POOR	FAIR	FAIR	POOR	POOR	4/30/2024
	DPECC	80.00	5	85	80.00	5	75	80.00	5	8		No APP	Long periods of no	one checking on	me. Freezin	ng cold - difficult to g	jet blankets.	Doctors	Negative	n	GOOD	FAIR	FAIR	POOR	FAIR	5/4/2024
	DPECC	100.00	6	99	100.00	6	99	100.00	6	9				3:30 AM to go hon	ne where Hive	e alone.										
	DP ECC	83.33	6	92	83.33	6	86	83.33	6	9		No APP	All good. Very kind					Doctors	Positive	100	VERY GOOD			VERY GOOD	VERY GOOD	5/20/2024
	DP ECC	80.00	1	85	100.00	1	99	100.00	1	9		No APP	,	est. Couldn't have			h	Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	6/6/2024
	DP ECC	100.00	5	99	100.00	5	99	100.00	5	9		No APP	finger nail.	it tney alan t sugge	est a tetanus	shot since I sewed t	nrougn my	Doctors	Negative	40	VERY GOOD	VERY GOOD	GOOD	GOOD	FAIR	6/12/2024
	DP ECC	100.00	6	99	100.00	6	99	100.00	6	9		No APP	Excellent					Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	5/1/2024
	DPECC	100.00	7	99	100.00	7	99	100.00	7	9		No APP	Dr was very kind a	nd caring				Doctors	Positive	100	VERY GOOD				VERY GOOD	5/16/2024
Total	DP ECC	85.79	185	95	87.57	185	95	84.70	183	99		No APP	Very nice, explain	ed everything to m	e.			Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	5/18/2024
										_		No APP	Was very blessed	to have had this HI	MER Deer Pa	ark TX Team this mor	rning and will	Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	6/5/2024
														eeded, will highly recommend it												
												No APP	Professional					Doctors	Positive	100	VERY GOOD		VERY GOOD		VERY GOOD	6/8/2024
												No APP	Dr was excellent					Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	6/8/2024
												No APP	everything to me!!	The Doctor was excellent!! I could not have ask for better care!! He explained		Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	6/23/2024		
												No APP		rteous and consid	erate.He was	s very thorough in his	s questions.	Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	6/26/2024
												No APP		ry calm and thorou		,		Doctors	Positive	100	VERY GOOD			VERY GOOD	VERY GOOD	6/29/2024
												No APP	Attentive	,				Doctors	Positive	100	VERY GOOD	VERY GOOD		VERY GOOD	VERY GOOD	4/3/2024
												No APP	The doctors, it was		, were extrer	mely compassionate	e , they truly	Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	5/10/2024
												No APP	Wry nice	week R				Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	6/3/2024
												No APP		st unconcerened				Doctors	Negative	0	FAIR	FAIR	FAIR	FAIR	FAIR	6/10/2024
												No APP	+ ′			uestions. Very confic	dent in her	Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	4/20/2024
												No APP	I felt comfortable a	ınd any questions	were answer	ed		Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	4/26/2024
												No APP	Very professional					Doctors	Positive	100	VERY GOOD			VERY GOOD	VERY GOOD	4/28/2024
												No APP		the most caring m	nissedNurses	s In town!!!		Doctors	Positive	100	VERY GOOD	VERY GOOD			VERY GOOD	4/28/2024
												No APP	Would return					Doctors	Neutral	100	VERY GOOD				VERY GOOD	5/10/2024
												No APP	All three spent equ					Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	5/10/2024
												No APP				ade sure I had my qu oconcerns seriously		Doctors	Positive	100	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	VERY GOOD	5/13/2024
													get the referrals I r	ieeded.							1					

Lessons Learned: Both Hospitals



- Shifting resources to front and focusing on movement put patients in front of providers, started workups on arrival and improved arrival experience
- Extremely important to involve interdisciplinary teams registration, imaging, internal medicine, environmental services
- Shift in culture required to put patients where they could receive appropriate care, instead of every patient to a bed - including inpatient hall boarding or expedited movement
- Communication is key explaining wait times, movement, plan of care is essential from all staff
- Engage Frontline Staff Continuously:
 - Involve all disciplines and departments that interact with the ED early and regularly
 - Avoid "tokenistic" involvement and ensure their input actively shapes and implements decisions
 - Consider significant changes over incremental pilots for more impactful improvements



Key Takeaways: Both Hospitals

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- Aligned goals with strategic priority
- Lead with quality and safety
- Review results transparently
- Collaborate on improvements
- Share across health system
- Deliver a deeply personalized and frictionless consumer experience



Questions?

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