Seton Healthcare Family

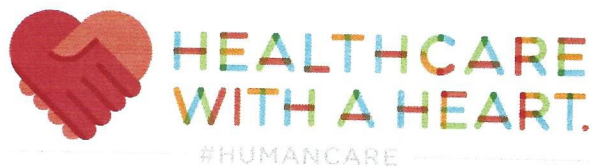WELCOME TO
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Objectives

- Introduction to Seton Healthcare Family
- Define Patient Logistics
- What's new in healthcare
- How is technology changing healthcare

Have Fun – Ask Questions

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Seton Family of Hospitals

HEALTHCARE WITH A HEART.
#HUMANCARE

https://www.youtube.com/watch?v=hrKLLOeIiE0&feature=youtu.be

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Who is Seton?

- Seton was founded by the Daughters of Charity of St. Vincent de Paul
- Seton originated in Austin in 1902
- Seton is named for Elizabeth Ann Seton
- Elizabeth Ann Seton adopted the philosophy of St. Vincent de Paul and was made the first American-born Catholic saint
- Seton is part of Ascension Health
- Ascension Health was created when the Daughters of Charity merged with Sisters of St. Joseph in November of 1999

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Seton's Mission

Our mission inspires us to care for and improve the health of those we serve with a special concern for the poor and the vulnerable. We are called to be a sign of God's unconditional love for all and believe that all persons by their creation are endowed with dignity. Seton continues the Catholic tradition of service established by our founders: Vincent de Paul, Louise de Marillac and Elizabeth Ann Seton.

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Seton's Values

- Dedication – Affirming the hope and joy of our ministry
- Reverence – Respect and compassion for the dignity and diversity of life
- Wisdom – Integrating excellence and stewardship
- Integrity – Inspiring trust through personal leadership
- Service to the Poor – Generosity of spirit, especially for the persons most in need
- Creativity – Courageous innovation

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Seton Facilities

- 2 Level I Regional Trauma Centers
  - University Medical Center at Brackenridge (UMCB)
  - Dell Children's Medical Center of Central Texas (DCMCCT)
- 1 Level II Trauma Center
  - Seton Medical Center Williamson (SMCW)
- 4 Acute Care Facilities
  - Seton Medical Center Austin (SMCA)
  - Seton Medical Center Hays (SMCH)
  - Seton Northwest Hospital (SNW)
  - Seton Southwest Hospital (SSW)
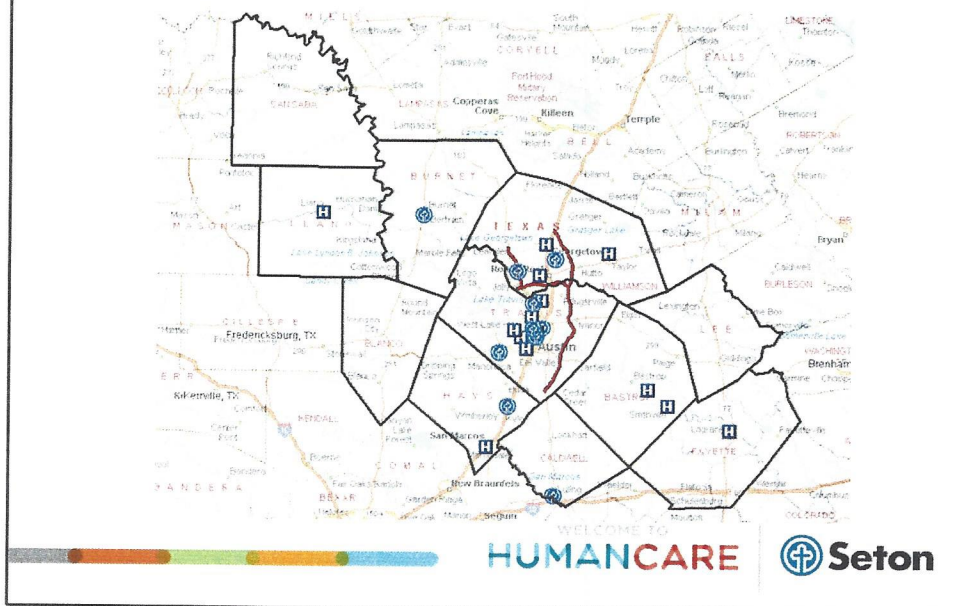
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Seton Facilities - continued

- 3 Rural Hospitals
  - Seton Edgar B. Davis (SEBD)
  - Seton Highland Lakes (SHL)
  - Seton Smithville Regional Medical Center (SSRMC)
- 1 Psychiatric Facility
  - Seton Shoal Creek Hospital (SSC)
- Multiple Community Clinics
- Academic School of Medicine

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Seton's Service Area

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Seton Data

- Emergency Room Visits – 300,000
- Surgery Cases – 40,000
- Patient Days – 310,000
- Out Patient volume – 1.3 million
- Acute Care Transfers – 15,000

- Provides $398 million in charitable care
- Accounts for two-thirds of the inpatient charitable care in Central Texas

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Patient Logistics

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What is Patient Logistics?

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Problem Statement

- Emergency Department Diversions
- Inability to transfer within Network
- Operating Room Holds
- Extended Emergency Department and Post Anesthesia Care Unit Holding Time
- Daily challenges related to Throughput
- Post Acute Care Transfer Denials
- No Real Time Bed Status – Manual System
- New construction underway to add 8 OR suites and10 ED beds without additional inpatient beds
- Trust between Patient Units

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It's 11 am....Do you know where your beds are?

To improve patient flow, staff divided into several teams, focusing on four key areas: ED diversion, post-anesthesia care (PACU) unit holding, patient access to the facility, and transfers.

Dramatic rewards reaped: 0 diversion, significant reduction in ED and PACU holds, and 2500+ days saved.

How did we do it.......

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Develop Partnership

EVS
Leadership
Clinical
Case Management
Bed Board
Transfer Center

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Environmental Services

Past Problems: Inability…

- to track available bed inventory in real time
- to prioritize bed cleaning
- to provide visibility of bed status
- to maintain accountability for bed status
- to measure and improve service delivery
- to easily monitor staff performance
- to be part of the team

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Environmental Services

Implementation of Bed Tracking Software

- Automation of alerts when beds go dirty
- Visibility of all bed status
- Accountability of EVS staff
- Reporting of bed turn times
- Included in Patient flow process

✓ Average response time – 23 minutes
✓ Average clean time – 34 minutes
✓ Average turn time – 57 minutes

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Clinical

Day Before Discharge Planning

Barriers:

- Physician participation
- Patient and Family not prepared for 11 am discharge
- Lack of discharge planning day before
- Ineffective protocols for diagnostic test done on day of discharge

Successes:

- Average discharge time improved by 2 hours
- Staff dedication to prioritizing discharges
- Improved communication between care givers
- Team building between case management, social workers, and nursing staff

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Case Management

Working on Complex Discharges – Post Acute Transfers

- Create a multidisciplinary team charged with removing barriers to discharge and transfers
- Identify common thread barriers and develop "best practices" for on-going applications
- Introduce an objective discipline in reporting cases to the team by targeting specific DRG's
- Develop an outcomes measurement tool to document success of reducing LOS
- Develop an automated case management and post-acute transfer system

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Case Management

Implementation:

Process for Nursing Home Agreements for
Patients being Discharged from Brackenridge

- Cost Benefit Analysis process for pending Medicaid patient to lower level of care facility
- Established a rehab "scholarship" program for unfunded patients with external rehab facilities
- Created a Complex Discharge team that meets weekly

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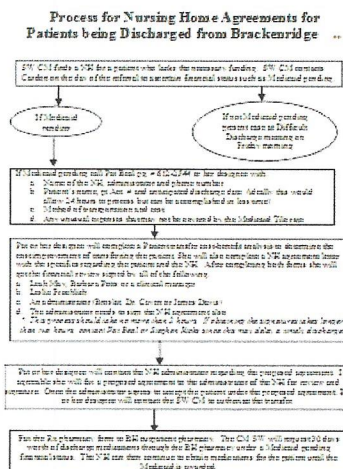
Bed Board – Transfer Center

Past Problems: Inability...

- to track available bed inventory in real time
- to prioritize bed cleaning
- to provide visibility of bed status
- to maintain accountability for bed status
- to prevent "shift change" bed management
- to measure and improve service delivery
- to provide a seamless integration of patient transport and bed availability
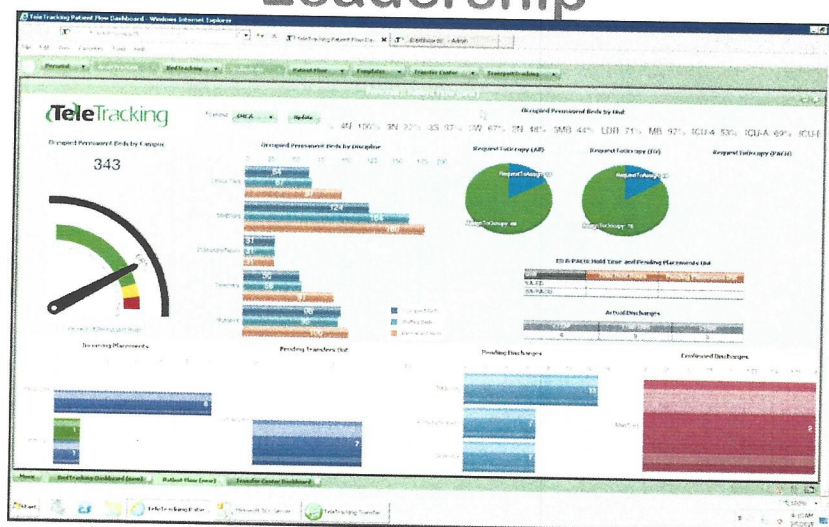
HUMANCARE ⊕ Seton

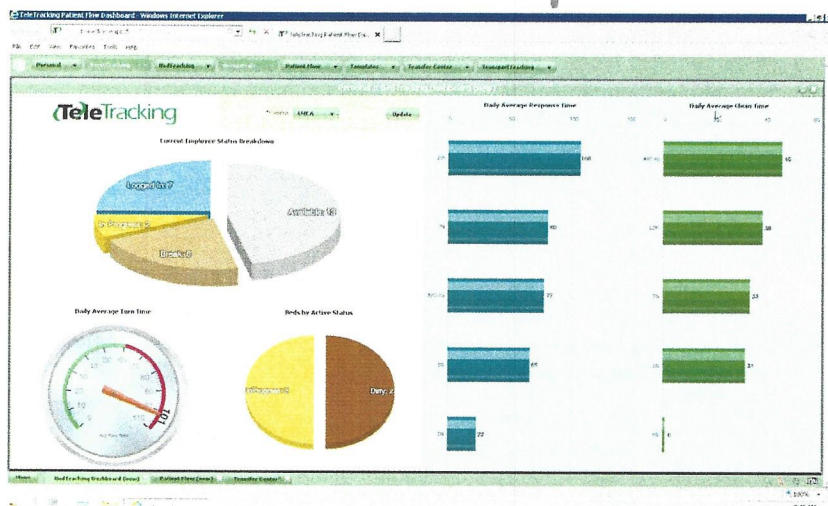# Bed Board – Transfer Center

Implementations:

- Established a "One call does it all" scheme to admit patients
- Developed a "Quick Registration" process
- Streamlined bed request from the ED and PACU
- Rolled out new patient flow processes to the units / network
- Established a "bed ahead" list used by charge nurses
- Streamlined bed turnaround for patient flow

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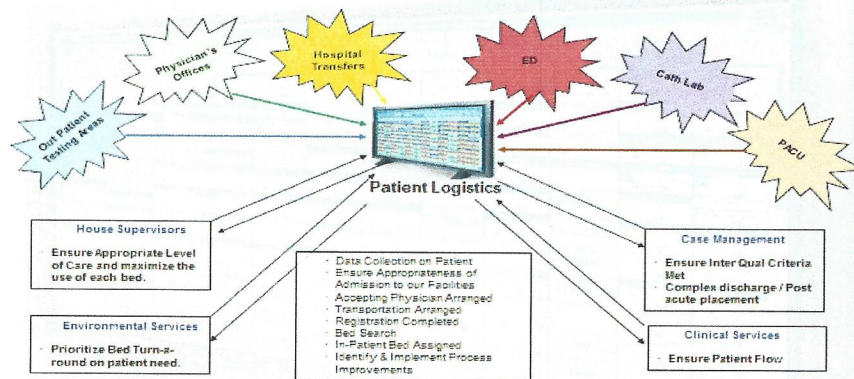
Leadership

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Leadership

Patient Logistics

What's new in Healthcare

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The Changing Landscape

- Reduction of Waste
  - $750 billion in waste annually
- Patient's Perception of Care
  - Hospitals Consumer Assessment of Healthcare Providers and System (HCAHPS)
- Pay for Performance
  - Readmission in less than 30 days
    - Congestive Heart Failure (CHF)
    - Acute Myocardial Infarction (AMI)
    - Chronic Obstructive Pulmonary Disease (COPD)
    - Total Hip or Total Knee

You Tube

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Healthcare that is more consumer focused

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What does consumer focused mean?

We envision a new healthcare model that combines the **quality and trust** of traditional medicine with the **convenience, access, customer service and transparency** of retail.

You Tube

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Consumer Driver Healthcare

- The consumer-driven health market will change how providers compete and will fundamentally disrupt health plans.
- Problem: staying with your previously successful business model two to three years too long.
- Current Business model is not sustainable
- New healthcare business models are taking hold quickly

Walmart care clinic

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Consumer Engagement Model

Mission, and values

Care delivery and customer experience

Consumer understanding & market opportunity

Brand awareness, perception and preference
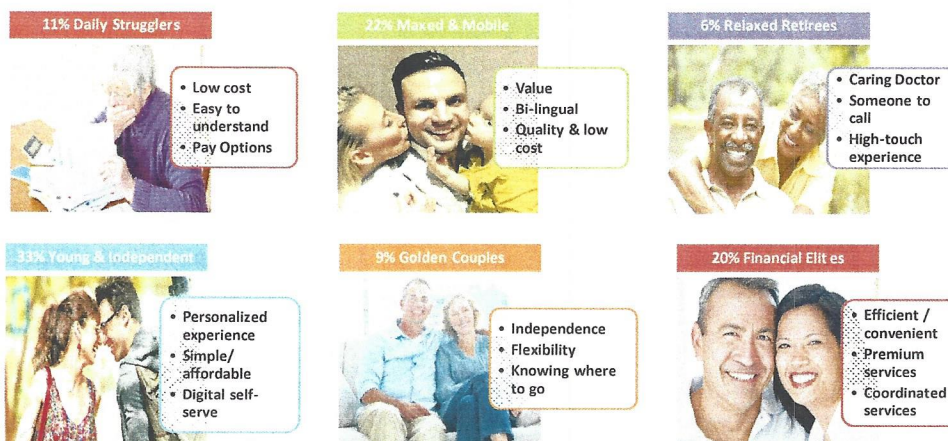
Business, product and services development

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HUMANCARE is a consumer-friendly way of telling people, why we are here (**our mission**) and how we intend to serve (**our values**).

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Consumer Segmentation
Filter: Austin Needs & Wants

11% Daily Strugglers
- Low cost
- Easy to understand
- Pay Options

22% Maxed & Mobile
- Value
- Bi-lingual
- Quality & low cost

6% Relaxed Retirees
- Caring Doctor
- Someone to call
- High-touch experience

33% Young & Independent
- Personalized experience
- Simple/affordable
- Digital self-serve

9% Golden Couples
- Independence
- Flexibility
- Knowing where to go

20% Financial Elit es
- Efficient / convenient
- Premium services
- Coordinated services
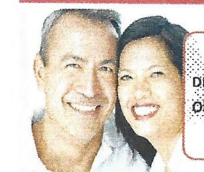
PwC – Getting to Know Your Austin Customer, 9/15

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Consumer Segmentation — Filter: Austin Diabetes and Obesity Prevalence
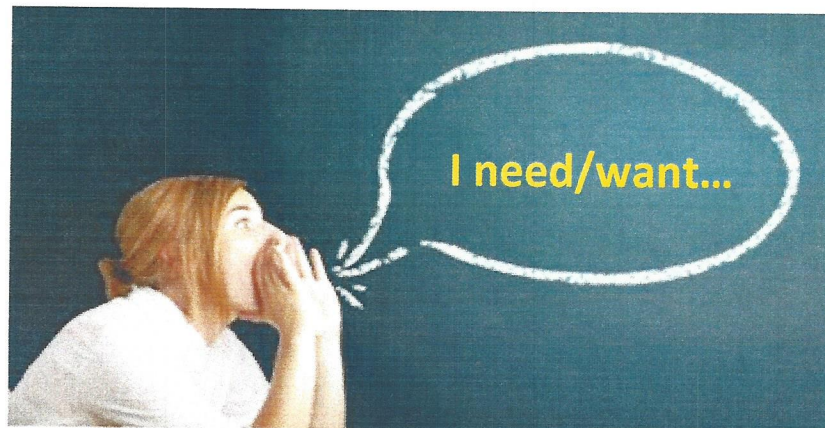
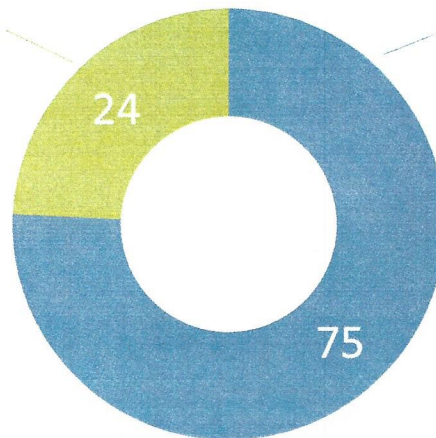What do our customers need/want?

Drivers of Preference

Main reason for choosing _____ as my system-of-choice:

GREAT CARE
Quality Doctors
Quality Care
Quality Nurses
Good Hospital
Doctor Affiliation
Maternity
Pediatric
Cardiac
Specialists
Surgical
Equipment
Orthopedic

24

75

GREAT EXPERIENCE
Convenient
Close
Familiar
Friendly
Caring
Professional
Respectful
Attentive
Prompt
Thorough
New
Available
Clean
Nice
Comfortable

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Connecting our Community with Seton

Seton Outreach Council

SFOD, SIS, SETON FUND, OUTPATIENT DISEASE MANAGEMENT

Community Outreach

Women's Health Programming

Service lines, Physicians and Facilities

Cardiac Screenings
Flu Clinic
Disease specific Education

Ignite

Community Awareness

Population Heath

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Care Line Development

Seton Heart Care

Seton Heart Institute

Seton Heart Institute

Advanced cardiac care for
the simplest conditions to
the most complex.

Appointments

The cardiovascular specialists of the Seton Heart Institute are providing some of the most advanced heart care in Central Texas. Our specialists utilize the latest technology available to diagnose and treat all types of heart problems, from the most common to the most complex.

Make an Appointment

877-860-1141

A Few Examples of Products and Services That Meet Our Customers' Needs/Wants

7 Locations, more to come

RediClinic · Seton

URGENT CARE CHECK-IN

Coming Spring 2016

500+ Users a month

SetonER.com

WAY EASIER THAN WAITING IN THE ER.

InQuicker

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Brand Relationships

Consumers need/want a relationship with our brand before they will consistently choose our products and services.

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Consumer Decision Making

Awareness
+ Perception
+ Preference

Choice

+ Experience

Loyalty

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FY15 Focus on Women Insured

*Women have long been the undisputed family health care decision-makers, making approximately **80%** of family health care choices.*

2011 Kaiser Family Foundation Report

Now more than ever, healthcare consumers are experiencing increased financial responsibility and are evaluating and rethinking how and when to spend.

PwC Employer Medical Cost Trends, Don Mclane MD 06.24.14

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Consumers want/need TV ads that are intriguing, captivating and entertaining.

https://www.youtube.com/watch?v=hrKLLOeIiE0&feature=youtu.be

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Consumers want/need radio ads that are intriguing, captivating and entertaining.

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Consumers want intriguing, captivating and entertaining radio programming

Seton HealthLine

KLBJ
NEWS ★ RADIO
590AM
99.7FM

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Measurement and Calibration

- Quality Metrics
- Safety Metrics
- HCAHPS
- Net Promoter Score
- Social Media Monitoring

Mission, and values

- **Catholic Identity Matrix**
- **Model Community Survey**

Care delivery and customer experience

Consumer understanding & market opportunity

- Brand Tracker

Brand awareness, preference and preference

Business, product and services development

- Community Needs Assessment
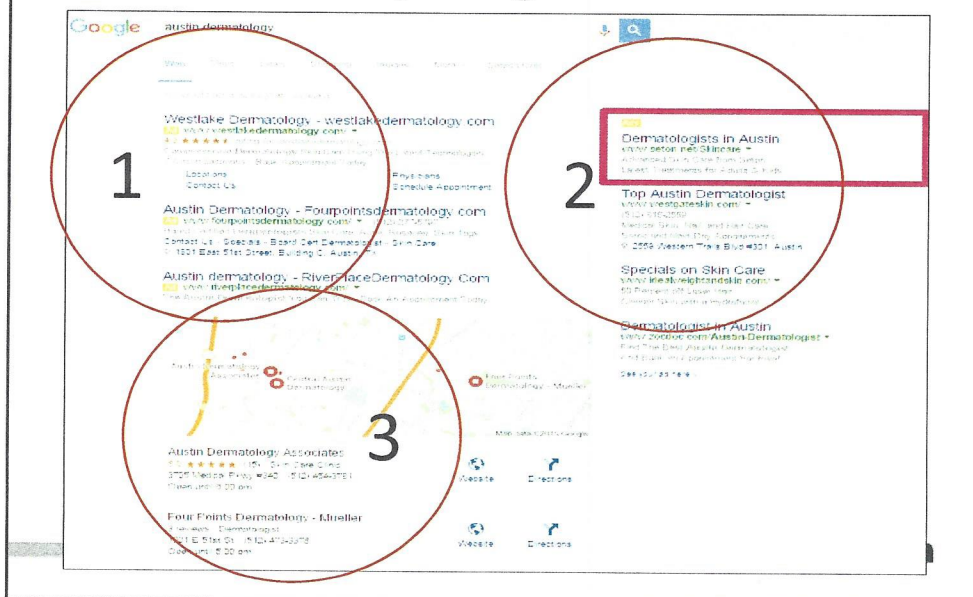- Customer Segmentation

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How is technology changing healthcare

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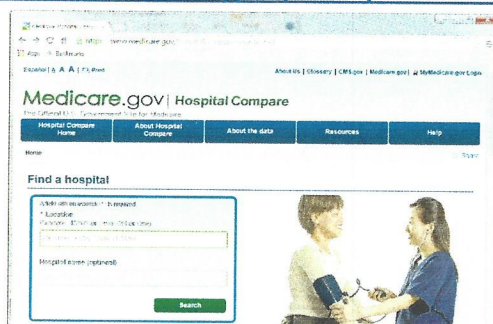# Consumers want/need digital experiences, that are intriguing, captivating and entertaining **and** easy to use.

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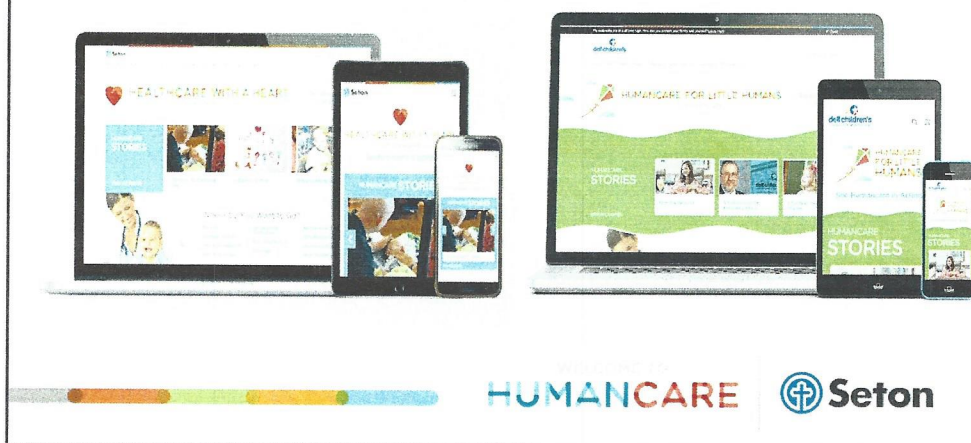
Consumers want/need to be able to find everything online.

Consumers view hospital performance

www.medicare.gov/hospitalcompare
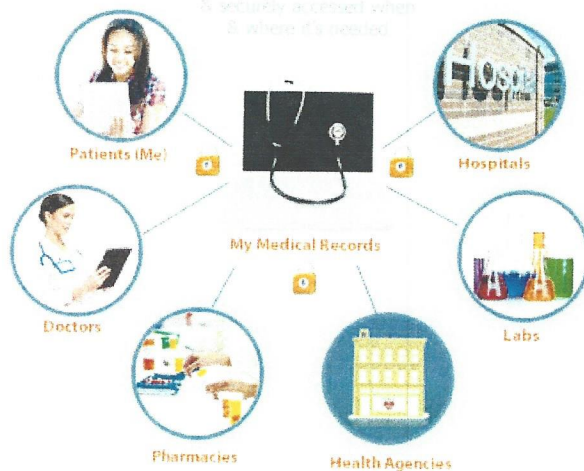

Technology Connection

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Thank You

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