Quick Quality Quests

Driven By You

New Faculty Orientation
UFHealth Jacksonville
October 11, 2018
Quality at UF Health Jacksonville

- One Patient -
- One Organization -
- One Continuous Encounter -
Vizient Quality

- Benchmarking data for all major metrics
- Real time performance assessment
- Meaningful feedback loops
- Knowledge transfer
- Prioritization & Action Steps
- All patients – not just Medicare

- It is the framework for performance improvement
- It is the base for all public reporting

- But we report in many other places
  - (FHA, Contracts, Feds etc)
Vizient Quality Domains

UF Health Jacksonville Mortality Index

*Coding change reset the O/E calculations
HOW -
- Every mortality is reviewed
- Departments are given feedback
- Identify trends for care changes
- Sepsis Bundle
- Areal early notification
- **Sepsis Order Set**
  - Guides care
  - Puts patients on the proactive RRT list
- Cut sepsis mortality from 3.78 to 0.89
Vizient Quality

UF Health Jacksonville # CLABSI and Rate January 2013-July 2018

UF Health Jacksonville CAUTI # and Rates January 2013- July 2018

\[ \text{better} \]
CLABSI
- **Right patient – Right reason – Right place – Right time**
- Limited bundles for insertion
- Strict dressing care
- **REMOVE** as soon as possible (Midlines)
- Abx solution in HD ports w/ dialysis

CAUTI
- Nurse drive De-cath protocol for removal
- **USE the order**
- Multiple external devices to limit indwelling need
- **UA micro to REFLEX culture**
Vizient Quality

Mortality
Safety 25%
Effectiveness
Pt Satisfaction
Efficiency
Care Equity

↓ better

# Hospital Associated C. diff infections 2013- June 2018

<table>
<thead>
<tr>
<th>Year</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td># HCA C. diff infections</td>
<td>252</td>
<td>222</td>
<td>169</td>
<td>124</td>
<td>97</td>
<td>53</td>
</tr>
</tbody>
</table>

# Hospital Associated MRSA Bloodstream Infections 2013- June 2018

<table>
<thead>
<tr>
<th>Year</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td># HA-MRSA BS Cases</td>
<td>28</td>
<td>19</td>
<td>28</td>
<td>25</td>
<td>15</td>
<td>10</td>
</tr>
</tbody>
</table>
Vizient Quality

CDIFF & MRSA

- PPE
- Wash your hands
- Nurse driven isolation protocols
- Best lab practice for C Diff processing
- **ALL procedural Clinics** give CHG soap
- CHG wipes in pre-op / holding

- Universal MRSA Decolonization Protocol
Vizient Quality

- ED LOS – discharged patients
  - Provider in triage & power shifting
- ED LOS – admitted patient
  - Hospital through put teams
- DVT prevention / education
  - Automated scan every day: >95% success
- Excess Care Days
- Re-admissions

CARE COORDINATION
System Changes
Readmission Strategy Changes

- Follow up appointments prior to discharge (M-F)  
  - Downtown - ALL adult med/surg patients
  - North – ALL med/surg patients
  - CCU discharges

- Home Health coordination

- Direct admission to the TCU

- Hospital-wide COPD Re-admission Prevention – Feb 2018
Readmission Strategy - New for FY19

- Pulmonary Rehab Clinic – October 2018
  - Next phase of the COPD project
  - Tuesday & Thursday afternoons
  - Existing space / staff
  - Inpatient commercial and city contract

- EPIC Re-admission Risk Tool - September 18, 2018
  *Complex Case Management Interventions*
Vizient Quality

• Communication with Nurses
• Communication with Doctors
• Responsiveness of Staff

• Hospital Environment
• Discharge Information
• Care Transitions
• Overall Rating

• Pain Management
• Communication about Pain
• Communication about Medications
Vizient Quality

Responsiveness of Staff Domain

- Mortality
- Safety
- Effectiveness
- Pt Centeredness (15%)
- Efficiency
- Care Equity

Graph showing responsiveness over quarters with a VBP line.
Vizient Quality

Mortality
Safety
Effectiveness
Pt Centeredness
Efficiency
Care Equity

Overall Rating Domain

% Rating 9 or 10
Quarter
Q1 2014
Q2 2014
Q3 2014
Q4 2014
Q1 2015
Q2 2015
Q3 2015
Q4 2015
Q1 2016
Q2 2016
Q3 2016
Q4 2016
Q1 2017
Q2 2017
Q3 2017
Q4 2017
Q1 2018
Q2 2018
Q3 2018

VBP

System changes support the work
PRIVATE ROOMS
TCU – long term vents (July 2018)
✓ Could have a big impact on LOS, Cost & Infection metrics

Transportation Efficiency Project
➢ Right job / right reason / right place / right time
➢ Utilizing the EHR / pagers
➢ Decreased cancellations (waste) by 80%
➢ Decreased time by 45%
➢ “Gained” 300 hours per month

❌ ITS / Agile template – use for EVS Efficiency Project
<table>
<thead>
<tr>
<th>Metric</th>
<th>2015</th>
<th>2018</th>
<th>Cost / event</th>
<th>Savings $$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sepsis LOS</td>
<td>14.2 days</td>
<td>12.2 days</td>
<td>$500-1000/d</td>
<td>3-8.1M</td>
</tr>
<tr>
<td>Cauti</td>
<td>15 /month</td>
<td>2 /month</td>
<td>$1000</td>
<td>.3M</td>
</tr>
<tr>
<td>Clabsi</td>
<td>10 /month</td>
<td>3 /month</td>
<td>$16,000</td>
<td>2.6M</td>
</tr>
<tr>
<td>MRSA</td>
<td>2.5 /month</td>
<td>1.5 /month</td>
<td>$20,000</td>
<td>.48M</td>
</tr>
<tr>
<td>C. Diff</td>
<td>8 /month</td>
<td>4.5 /month</td>
<td>$34,000</td>
<td>2.9 M</td>
</tr>
<tr>
<td>Other PSIs</td>
<td></td>
<td></td>
<td>$15 – 35K</td>
<td>.255 - .595M</td>
</tr>
<tr>
<td>Transportation</td>
<td>Gained -</td>
<td>300 hr/mo</td>
<td></td>
<td>INDIRECT</td>
</tr>
<tr>
<td>HCAHPS</td>
<td>Exceeding VBP</td>
<td></td>
<td>-$ to +$</td>
<td>.2M</td>
</tr>
<tr>
<td>Readmissions</td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
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</tbody>
</table>
MyUFHealth

Communicate with your doctor
Get answers to your medical questions from the comfort of your own home

Access your test results
No more waiting for a phone call or letter – view your results and your doctor’s comments within days

Request prescription refills
Send a refill request for any of your refillable medications

Manage your appointments
Schedule your next appointment, or view details of your past and upcoming appointments

Sign Up Now
New User?
Sign Up Now
Request an Activation Code

PAY AS GUEST
Primary Care (Less Total Care Clinic) Lag Time (New, Scheduled Patients)
All Payors and Commercial (Median)

2016 Access Symposium Benchmark: 17.3 days
2017 Access Symposium Goal: 14.0 days
Dr. Kadambi's Goal: 7 days
UF Practice Plan

- Closing Care Gaps
- Social Determinates of Health
- Care Coordination
- HEIDIS / MIPS
- Safe Opioid Prescribing
- Warm Hand-offs

UF Health
University of Florida Health

UF College of Medicine
Jacksonville
Public Reports

Old Data (2014-2017)
- Can’t be used for process improvement
- Survey & Assessment take resources

Local Market-share

State & National Reputation
- Old Data (2013-2015)
- Can’t be used for process improvement
- Complex resources
- DOXIMITY

“A” 2021

Drives Performance Improvement

LEAPFROG HOSPITAL SURVEY

“BEST HOSPITALS & WORLD REPORT”

U.S. News

Florida top 10 2023

DOXIMITY
A tremendous amount of good work
We are doing the right things
We are making a difference

YOU make ALL the difference

Questions, Comments or Suggestions:
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Gray- only one that will come up