

MEDINA MEMORIAL HOSPITAL

March 2009 – September 2010



The Business Case for TCAB at Medina Memorial Hospital

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TCAB Unit

- 28 Bed Medical-Surgical Unit
- Rural Setting



How do we calculate
net income?

Revenue

What are the fundamental steps required to grow market share and revenue in healthcare?

How does TCAB impact revenue?

- **Growth of consumer pool**
 - Positive customer experience = positive PR = increased probability of consumption
 - Increased quality/patient satisfaction = marketable & desirable value proposition = increased probability of consumption
 - Physician recruitment = increased market share = growth in revenue
- **Control of leakage**
 - Customer satisfaction = recurrent visits = recurrent revenue
 - Physician retention = recurrent referrals/business = recurrent revenue

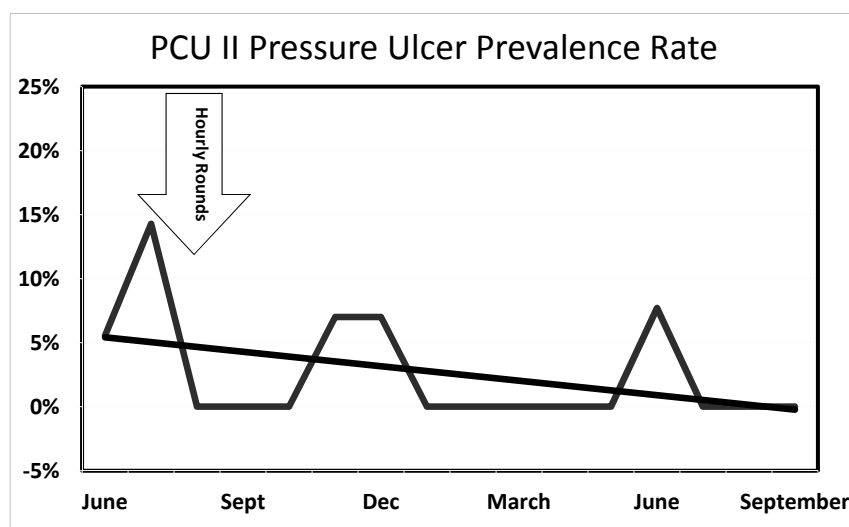
Revenue Impact

- TCAB provides the foundation for success
- TCAB coupled with good business decisions/practice = success

*The next few slides demonstrate some of the successes obtained through the TCAB journey which have created a foundation geared for success

*PCU II transformed from a low functioning unit to the flag ship unit of Medina Hospital

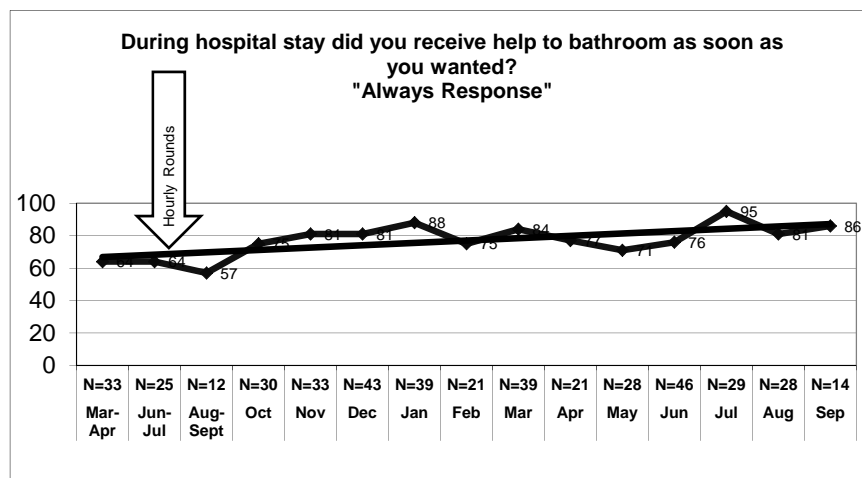
Quality



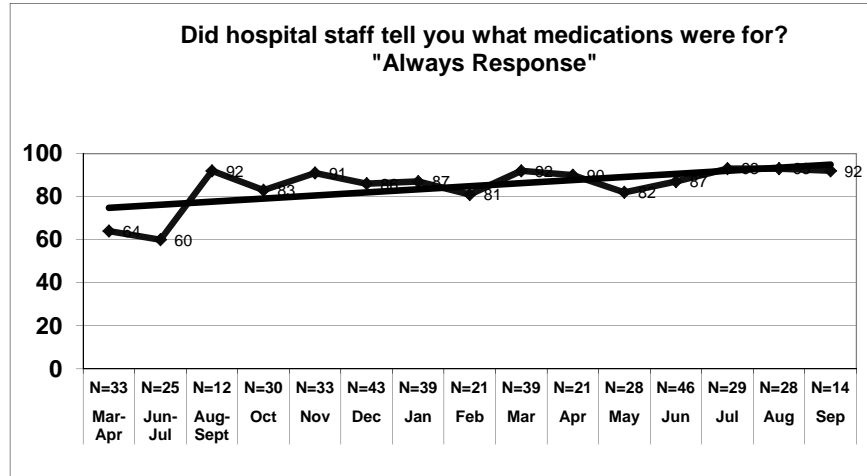
NYS Legislation

- New York State Public Health Law § 2805t requires the disclosure of nosocomial pressure ulcer rates upon request
- Consumers have the ability to use this information to make consumption decisions
- How this information will be utilized in NYS is not clear at this time (new legislation)

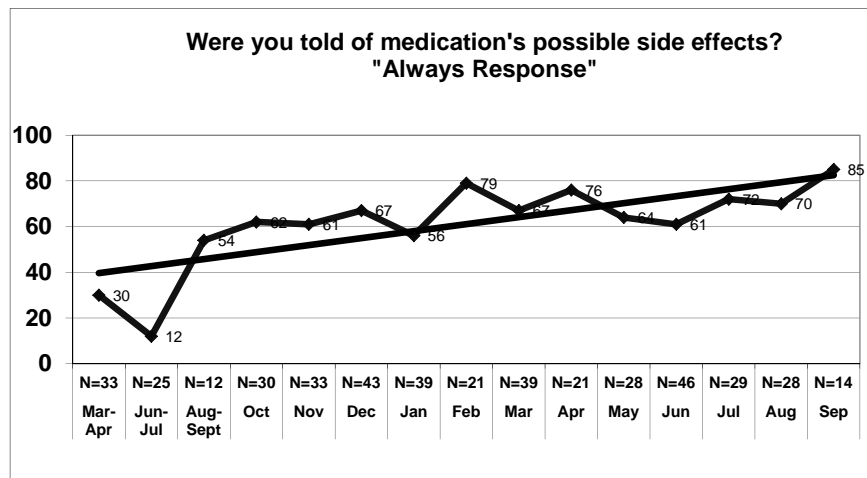
Patient Satisfaction- Help to Bathroom



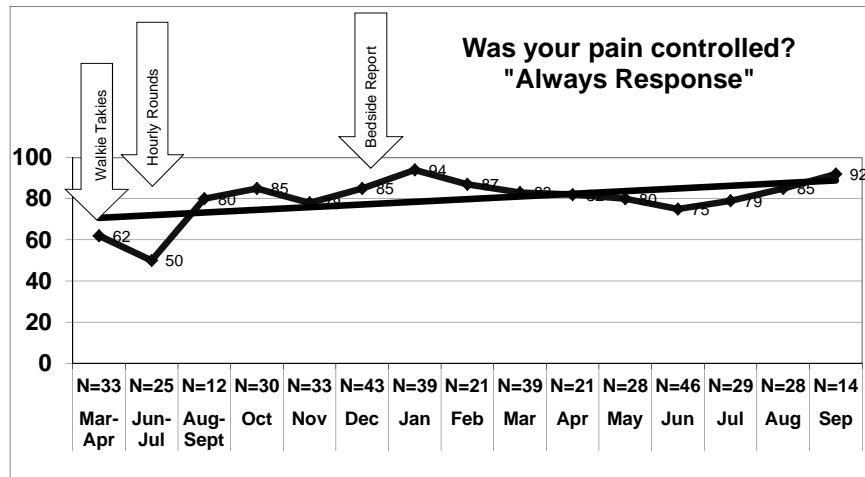
Patient Satisfaction- Medications



Patient Satisfaction- Medications



Patient Satisfaction- Pain Control



HCAHPS

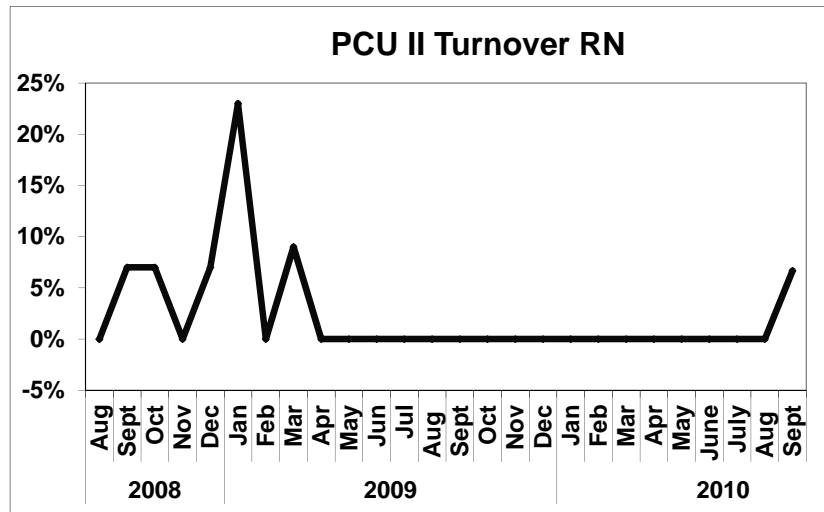
- CMS patient satisfaction data is currently available to the consumer
- Initiatives to increase consumer awareness of this information are present in the marketplace (CEA's in WNY)
- Vendors are integrating this information into public report cards
- Consumption of healthcare services based on patient satisfaction data will increase

Expenses

How has TCAB impacted ***expenses at Medina Hospital?***

- Decreased expenses resulting from RN Turnover
- Decreased expenses resulting from nosocomial pressure ulcers
- Decrease liabilities resulting from lawsuits for pressure ulcers

RN Turnover Trend



Medina Hospital Cost of RN Turnover

- Advertisement: \$1000/nurse
- Sign-on Bonus: \$5000/nurse
- 4 Month Orientation: \$17,420/nurse
(576 hrs * 30.24/hr)
- 4 Month agency Premium for Orientation: \$17,140 per nurse
((576 hrs * \$60/hr = \$34,560) - \$17,420 = 17,140))
- 3 Month agency Premium for Recruitment: \$12,856 per nurse
((432 hrs * \$60/hr = \$25,920) - (432 hrs * \$30.24/hr = \$13,064)) = \$12,856

TOTAL COST: \$53,416

Financial Impact

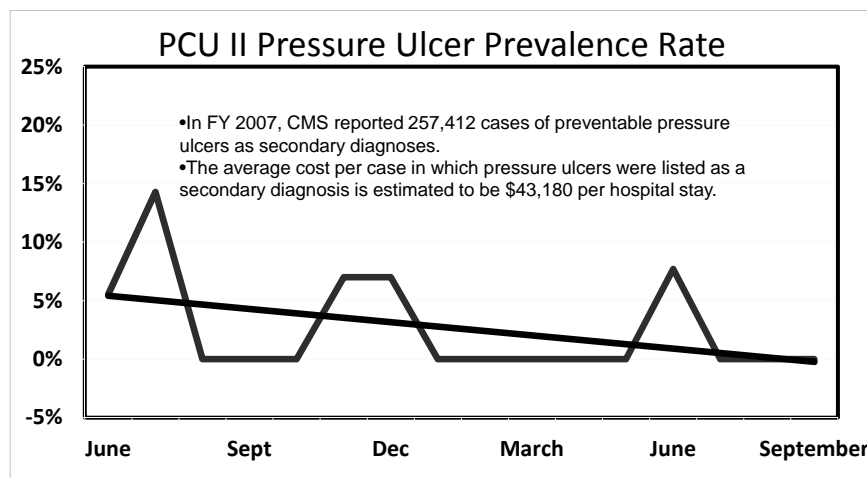
- Pre-TCAB RN Turnover 7 FTE's per year
- 1 RN Turnover for 18 months (1.5 years)

Total FTE Saving post TCAB = 9.5 FTE's

- Cost per RN Turnover \$53,416

Total Financial Impact = \$507,452

Cost of Pressure Ulcers



Liability from Pressure Ulcers

- We are seeing that nosocomial pressure ulcer lawsuits are ranging from \$0 to \$525,000 per case
- Documentation must be comprehensive and demonstrate that the appropriate interventions were implemented to prevent skin breakdown
- Difficult to defend when documentation is incomplete

Conclusions

- TCAB creates a foundation that promotes strong financial performance
- TCAB has improved quality & patient satisfaction through innovation, adaptation of best practice, and continuity of care
- TCAB coupled with good business decisions is a catalyst for success
- TCAB has significantly reduced RN costs resulting from turnover

Conclusions

- TCAB has reduced expenses resulting from nosocomial pressure ulcers
- TCAB has decreased the liability of potential lawsuits through improving skin breakdown prevention

Lessons Learned

“Key Factors that Drive Success”

Strategic Alignment

- Engage the board
 - Engage ALL members of senior management
 - Engage the community
 - Engage all staff from all disciplines
 - Engage the patients
- *** Ensure TCAB is on everyone's agenda and radar

Quick Wins

- Leverage “low hanging fruit” interventions early on to engage staff and gain momentum
- Responding to staff requests early on in the TCAB Journey demonstrates commitment and support to the initiative

Quick Wins- Example



Quick Wins- Example



Quick Wins- Example



Quick Wins- Example



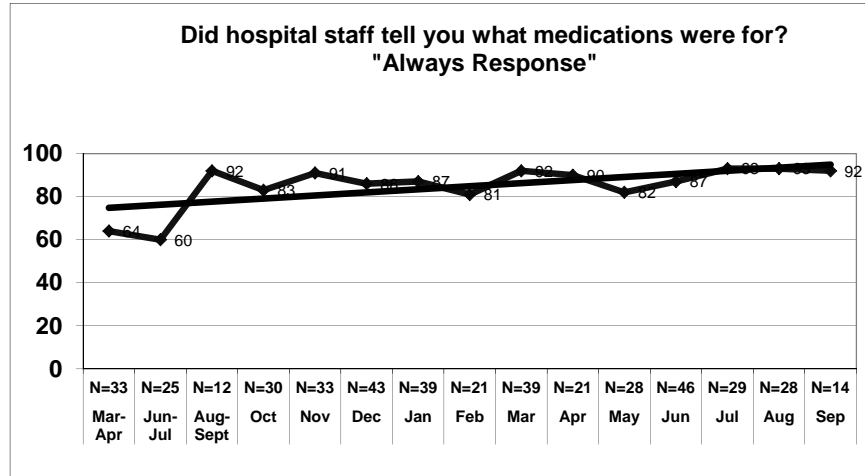
Quick Wins- Example

DATE	8-11-09	DAY OF THE WEEK	TUESDAY
NURSE	JANE	DOCTOR	DR. SMITH
CNA-PCT	BETTY		
TEST / PROCEDURES	X-RAY		
GOAL OF THE DAY	CONTROL PAIN, WALK 2x		
COMMENTS	DIET - REGULAR		

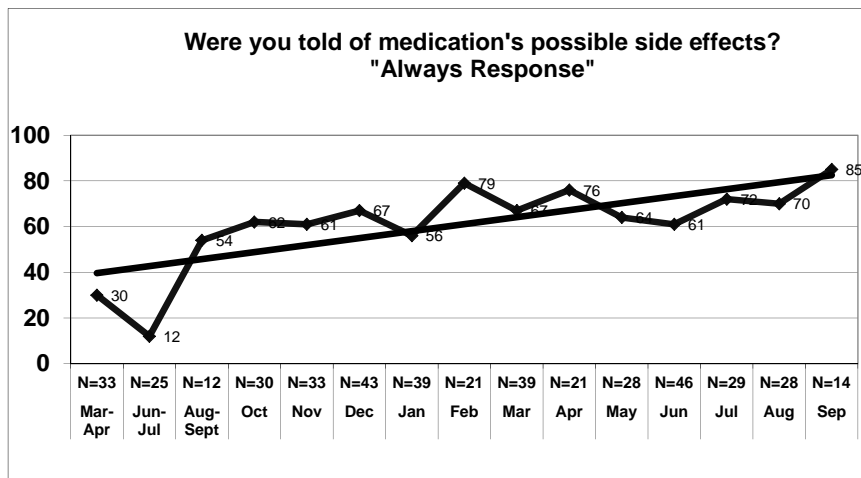
Performance Transparency

- Develop Standardized ways to communicate the impacts of TCAB initiatives with staff
- Staff will repeat behavior that improves patient care if they know about it
- **Data empowers staff to influence other staff that are reluctant to participate in tests of change**

Performance Transparency- Example



Performance Transparency- Example



Performance Transparency- Example



Adapt and Adopt BEST PRACTICE

“Steal Shamelessly”

- White Boards
- Hourly Rounds
- Bedside Report

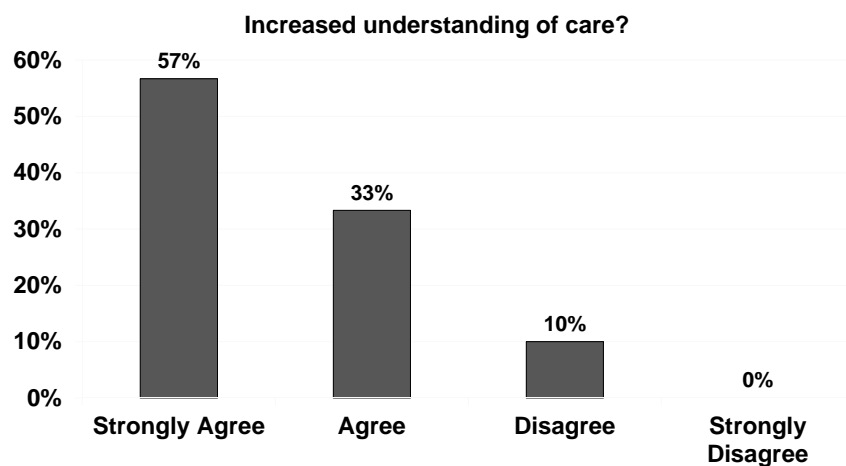
*** Very high impact initiatives that were adapted and adopted following TCAB conferences

Abandonment

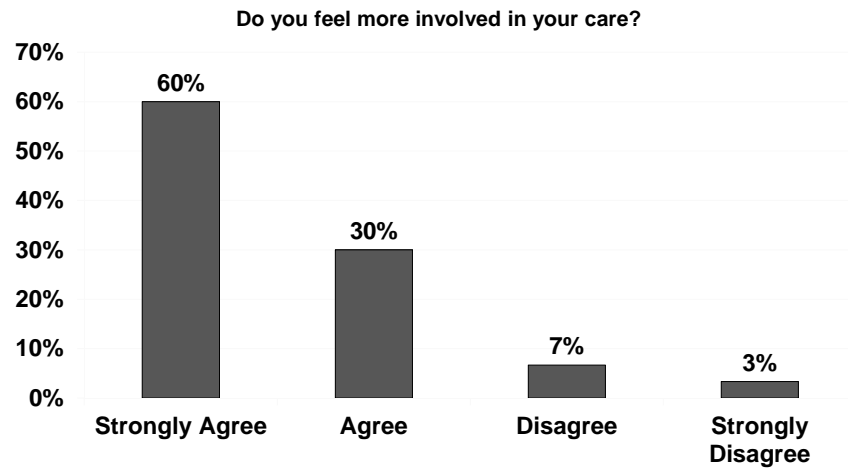
- Do not be afraid to abandon unsuccessful tests of change
- Failed rapid cycle tests of change may result in future success
- “Its OK if a test of change is unsuccessful”

Example: A failed group report test of change evolved into bedside report

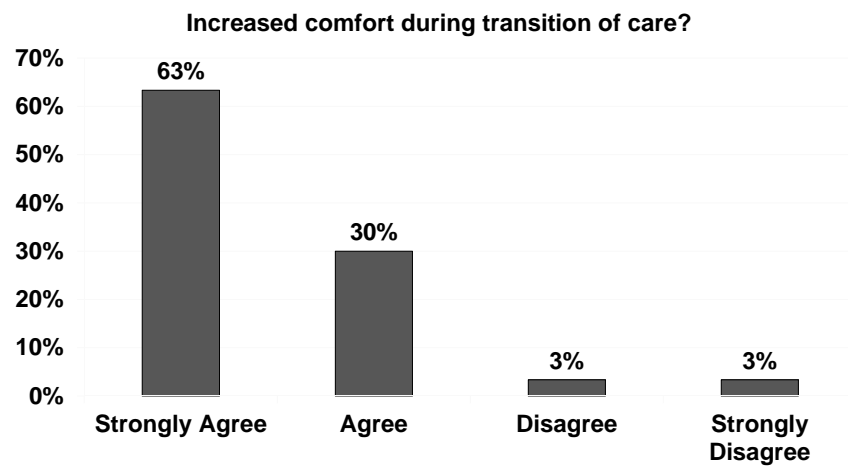
Abandonment Success Story- Bedside Report



Abandonment Success Story- Bedside Report



Abandonment Success Story- Bedside Report



How Important is the CNO in TCAB?

- CNO Involvement/Leadership = Success
 - CNO Transition = Slippage
 - CNO transitioned to COO 9/1/2010
 - New CNO joined organization 11/15/2010
 - New CNO Involvement/Leadership = rebound effect
- *** CNO Involvement/Leadership is a contributing factor to success

Next Steps

- Continue to implement change that improves care and organizational performance
- Continue to spread TCAB throughout hospital- Integrate into non-clinical departments
- Share successes locally and nationally to support overall improvement in healthcare throughout the United States

Opportunity

What would TCAB mean to your organization if you were able to duplicate this success on all units?

What would TCAB mean to the healthcare industry if we were able to duplicate this success nationwide?

QUESTIONS

