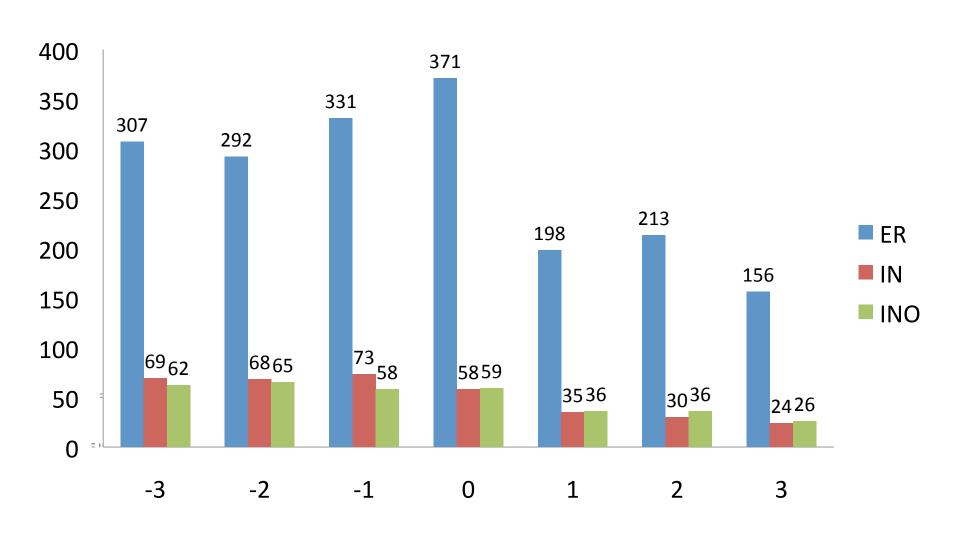
# Emergency Department Innovations: Pop Health/Pt Sat

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### Innovations and Successes

- Population health
  - High-risk care plans (high-frequency utilizers)
  - Low-risk chest pain protocol
  - Telehealth
- Patient experience
  - Patient callback program

# High Risk Care Plans Expanded to 308 Patients



#### **HRCPs**

- Total ED visits avoided: 363 (39% reduction)
- Total admissions avoided: 121 (58% reduction)
- Total observations avoided: 87 (47% reduction)

#### Low Risk Chest Pain

- Modified TIMI score to select patient population:
  - Age <65</p>
  - 2 or fewer CAD Risk Factors
  - No Known CAD, >50% stenosis
  - 2 or fewer episodes of chest pain in past 24 hour
  - Normal EKG
  - Able to physically perform an exercise stress test

#### Low Risk Chest Pain

- UM UCMC: Protocol initiated 10/15/2014
  - Total volume through June: 288
  - Direct from ED: 48 patients (16.7%)
- Results
  - Cancelled by Cardiology: 16 (5.6%)
  - Cancelled by ED: 2 (0.7%)
  - Cancelled by Patient: 32 (11.1%)
  - No show: 29 (10.0%)
  - Negative: 179 (62.2%)
  - Non-diagnostic: 19 (6.6%)
  - Positive: 11 (3.8%)

#### Low Risk Chest Pain

- Annualized 632 observations stays avoided that were cared for in outpatient setting between both hospitals
- Expansion of stress testing and utilization of HEART score criteria will increase those numbers



**IMPROVED POPULATION HEALTH** 

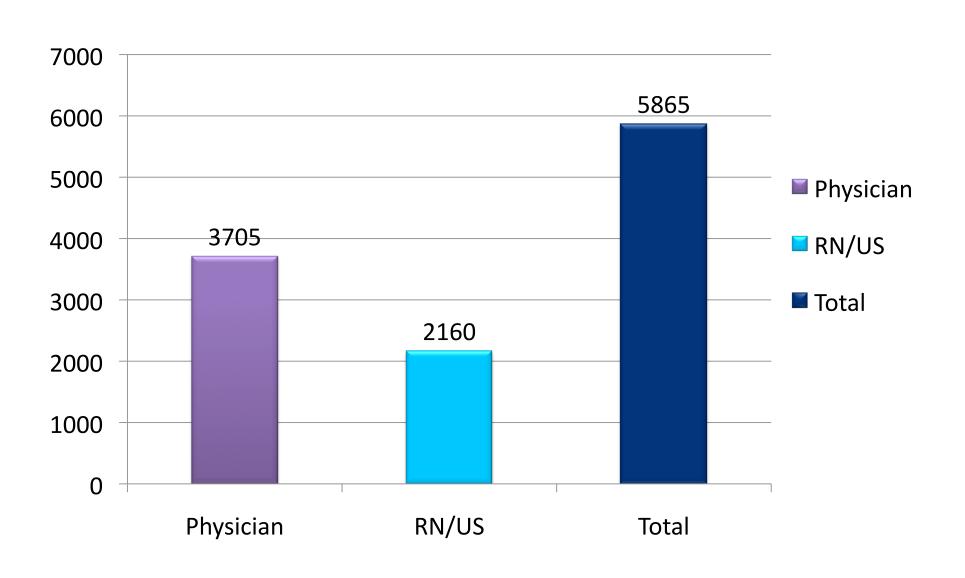
#### Patient Satisfaction

- The only operational metric that matters
- "The patient doesn't care how much you know unless they know how much you care"
  - Adapted from Damon Richards
- Increase compliance
- Increase physician satisfaction

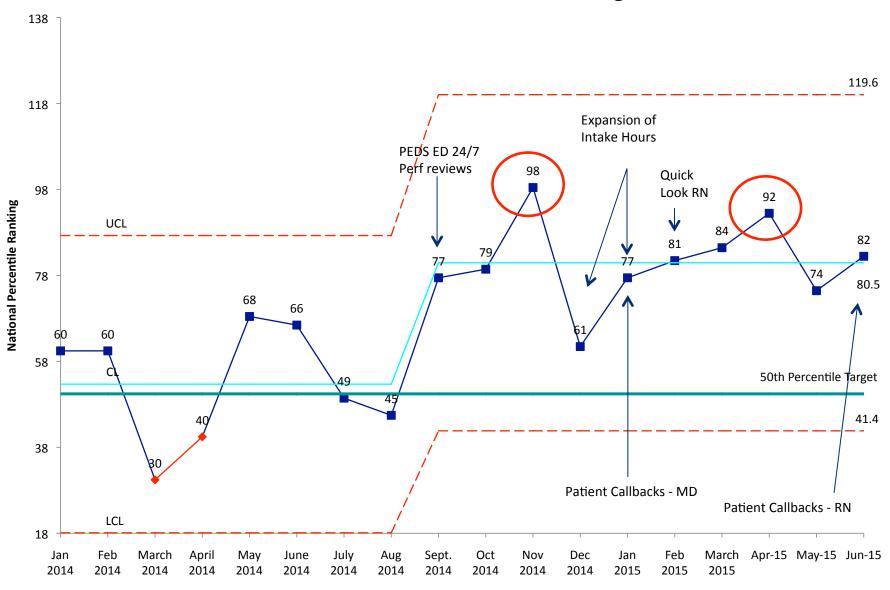
### Patient Experience—HCAHPS

- Patient callback program: Setting the culture
  - Dr. Jay Kaplan Grand Rounds University of Maryland Sept 2014
  - Trial with nonmedical personnel: Sept–Dec 2014
  - Physician callbacks: Jan 2015
  - RN callbacks: June 2015

## Patient Callbacks Jan-July 2015



#### **UCMC ED HCAHPS Percentile Ranking**



### **Future Goals and Initiatives**

- Telehealth expansion: SNF and urgent care
- 90<sup>th</sup> percentile HCAHPS
- Evidenced based tools to decrease clinical variation and thus decrease cost/utilization

Real-time feedback

	F	ST F	ᅥᆫ	RL	IN
	Forerun <sup>™</sup> EDOptimizer <sup>™</sup>				
Category	Metric		Jun 2015	6 Mos Trend	6 Month Avg
Utilization <u>click here</u>	Average Visits Per Day	<u>D</u>	182	<b>①</b>	175
	ED Admission %	D	23.90%	•	26.84%
	LWBS %	D	1.76%	•	1.35%
Patient Process Flow click here	Median Door to Room	D	21	•	22
	Median Room to 1st Provider	D	20		16
	Median Door to 1st Provider	D	48	•	48
	Median 1st Provider to Decision	<u>D</u>	140	•	143
	Median Decision to Admit to Patient Transferred to Floor	D	66	•	67
	Median EDLOS Disch	D	183	•	202
	Median EDLOS Admit	<u>D</u>	345	•	344