From 10,000 foot to Sea Level:

Building engagement at all levels to reduce preventable hospital readmissions
Taking your car to the auto shop
Why focus on readmissions?

Humanistic Side:
• Does the patient or family want to be readmitted? implications?
• What if it was your child?
• What’s the impact to other patients?
• What else might staff be doing if not caring for a potentially preventable readmission?

Preventable Readmission = Preventable Harm

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Why focus on readmissions?

Facts and Data:

• 1 in 5 Medicare patients readmitted within 30 days
• Medicare cost of estimated care $26 billion per year, $17 billion potentially preventable
• Shift to value based payments; Adult hospital total fines was $428 million for excess readmissions in 2014
A big audacious challenge

- Hospital goal year prior
- Cross functional project team
- Normalization of occurrence
- Health care climate changing
- Needle didn’t move
- No direct owners
- ‘Frequent Flyers’
- Lots of $ at risk

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Rally a call to action

• Grasp the problem from a high level
  o Reflect on what’s been done before, and build on your learnings
• Narrow in on a particular scope, this is hard
• Identify your core team, and the key players
  o They’ll be some flux along the way, that’s okay
• Set the tone
  o Kickoff w/ team on clear purpose & intent of work
  o Get excited about the work! Your energy shows
Show respect to the workers and the work by taking the time to deeply understand current state.
Current state

- Ask those that do the work about the work
  - Do so with humility, to better understand how the work is done and the challenges encountered, not to pin blame to problems
Voice of the customer

- Ground everything in the needs of the customer, take the time to learn these and identify gaps

Do you know what ‘Discharge Criteria’ on the whiteboard means?

Doctor

Honestly….I have no idea

Family

It means when you get to go home

Doctor

Ohhhhh…

why don’t we call it that then?

Family
Voice of the customer

- Make simple changes...no do it now!

Gemba Kaizen
I am ready to go home when:

- I know how to take care of my child at home and feel confident in doing so.
- I feel my child is healthy enough to go home.
- I have the equipment and supplies I need to take care of my child at home.
- I have a ride or transportation home.
- I have my child’s medicine for home and know how to give them.
- I have my follow-up appointments scheduled.
- If I have questions after I leave I know who to call.
Then iterate...v2.0

### I am ready to go home when:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>📚</td>
<td>I know how to manage my child’s medical needs at home.</td>
</tr>
<tr>
<td>🎀</td>
<td>I feel my child is healthy enough to go home.</td>
</tr>
<tr>
<td>🏥</td>
<td>I have the equipment and supplies I need to take care of my child at home.</td>
</tr>
<tr>
<td>🚗</td>
<td>I have a ride or transportation home.</td>
</tr>
<tr>
<td>🍓</td>
<td>I have my child’s medicines for home.</td>
</tr>
<tr>
<td>📅</td>
<td>I have my follow-up appointments scheduled.</td>
</tr>
</tbody>
</table>
Then iterate…v3.0

<table>
<thead>
<tr>
<th>We are ready to go home when:</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Education" /></td>
</tr>
<tr>
<td><img src="image" alt="Equipment &amp; Supplies" /></td>
</tr>
<tr>
<td><img src="image" alt="Transportation" /></td>
</tr>
<tr>
<td><img src="image" alt="Medications" /></td>
</tr>
<tr>
<td><img src="image" alt="Follow-Up" /></td>
</tr>
<tr>
<td><img src="image" alt="Discharge Criteria from CIS" /></td>
</tr>
</tbody>
</table>

Fill in the blank spaces below with patient specific discharge information:

- [ ]
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- [ ] **We feel our child is healthy enough to go home.**

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Feeling too much resistance!?
Lean on your sponsors

- Role is to provide direction & remove barriers
- Tap into them more frequently than you think
- Be clear on what you need from them
- Don’t let your team spin too long
  - Escalate if that’s what’s needed
Then iterate...v4.0

We are ready to go home when:

- **Education**
  - We know how to manage our child's medical needs at home.
  - Complete  N/A

- **Equipment & Supplies**
  - We have the equipment and supplies we need.
  - Complete  N/A

- **Transportation**
  - We have a ride or transportation home.
  - Complete

- **Medications**
  - We have our child's medicines for home.
  - Complete  N/A

- **Follow-Up**
  - We have our follow-up appointments scheduled.
  - Complete  N/A

Fill in the blank spaces below with specific items to be met prior to going home.

<table>
<thead>
<tr>
<th>CARE TEAM USE: Include discharge criteria from CIS</th>
<th>FAMILY USE</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Final Check Before Discharge: [ ] We feel our child is healthy enough to go home.

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Then iterate...v5.0
Family Communication and Discharge Readiness Checklist

**Purpose of this form:** It is very important that you feel ready to go home before you are discharged from the hospital. This form provides a chance for you to let us know if you feel ready to go home, and if you have everything you need before you leave the hospital. In addition, this form is a place for you to add any questions or concerns you may have for your medical team.

**Instructions:** Please take a moment to check whether or not you have received the education you need, equipment and supplies, transportation, medications, and if your follow-up appointments are scheduled. Please add any additional questions or concerns you have for your medical team.

<table>
<thead>
<tr>
<th>We are ready to go home when:</th>
<th>Education</th>
<th>Equipment &amp; Supplies</th>
<th>Medications</th>
<th>Follow-Up</th>
<th>Transportation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We know how to manage our child’s medical needs at home:</td>
<td>Complete</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We have the equipment and supplies we need:</td>
<td>Complete</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We have our child’s medicines for home.</td>
<td>Complete</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We have our follow-up appointments scheduled.</td>
<td>Complete</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>We have a ride or transportation home.</td>
<td>Complete</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Final Check before Discharge:** We feel our child is healthy enough to go home.
Then iterate...v7.0

Going Home Checklist for: _____________

How do we use this form?

Let us know if you feel ready to go home and have everything you need before you leave the hospital.

- Check the complete box when you have the education you need, equipment and supplies, transportation, medicines and your follow-up appointments are scheduled.
- Add any questions or concerns that you have for your child’s healthcare team.

We are ready to go home when:

Education
- We know how to care for our child and which medical needs are at home.

Complie  Not Completed

Equipment & Supplies
- We have the equipment and supplies we need and know how to use them.

Complie  Not Needed

Medsications
- We have any medications that the home.

Complie  Not Needed

Follow-up
- We have our follow-up appointments scheduled.

Complie  Not Needed

Transportation
- We have a safe or transportation home and/or follow-up appointments.

Complete

Questions or concerns for your child’s healthcare team:

Final check: □ We feel our child is healthy enough to go home.

Please let your nurse know if you have any questions about filling out this form.
Go to gemba w/ purpose

• Be present, have focus, engage, capture

<table>
<thead>
<tr>
<th>Observation Date: Wednesday 7/20/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facilitator: Beckie</td>
</tr>
<tr>
<td>Topic for the week of 7/18: Family D/C checklist</td>
</tr>
<tr>
<td>Gemba objective: Gather input from bedside nursing on how the d/c checklist can best be used in their workflow</td>
</tr>
<tr>
<td>Process Observations:</td>
</tr>
<tr>
<td>• none</td>
</tr>
<tr>
<td>Feedback from staff:</td>
</tr>
<tr>
<td>Shannon, RN (F5)</td>
</tr>
<tr>
<td>• She would like to check next to question. Likes the idea of keeping all questions on checklist and running the questions with family on day of discharge. Rn initials next to question = completed/answered.</td>
</tr>
<tr>
<td>Stephan, RN (F4)</td>
</tr>
<tr>
<td>• Discuss checklist during Rn handoff. Put in a Misc. communication in CIS. Likes idea of initializing next to questions to show ownership</td>
</tr>
<tr>
<td>Christina, RN (F4)</td>
</tr>
<tr>
<td>• Initial introduction on admission because she already discusses where to write questions, the whiteboard, etc. Ideally the day shift RN would then review/reinforce the checklist during rounds.</td>
</tr>
<tr>
<td>• Review the checklist with each other during shift handoff.</td>
</tr>
<tr>
<td>• To determine when an item is completed: If it is simple to resolve, just erase it. If not, then ask the family if they feel it has been addressed.</td>
</tr>
<tr>
<td>• Review daily during rounds to see if there are new items on the checklist or anything that needs to be completed.</td>
</tr>
<tr>
<td>Feedback from patients/families:</td>
</tr>
<tr>
<td>• Really like the format. It makes sense. Would like a final check to have the option to speak to a provider prior to discharge as there are so many different people involved here at children’s. Noticed the whiteboard has a tiny space for questions so like the idea of having their own checklist.</td>
</tr>
<tr>
<td>Reflections/Follow-Up (opportunities for improvement, just do its):</td>
</tr>
</tbody>
</table>
| • The whiteboard on Forest 4/5 has a tiny spot for questions; we could fill that spot with an arrow pointing to the checklist so there is only one spot for questions. Could we make a sticker arrow???
Invite customers into your process

Messaging to Families on TV’s in Patient Rooms

Important Information
Make sure you’re ready to go home. Talk with your nurse about medicine, education, supplies and follow-up.

Close

Hello Patient

My Action Plan

Here are a few things to check out!

Important Information
Make sure you’re ready to go home. Talk with your nurse about medicine, education, supplies and follow-up.

Close

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Iterate your project framework too

- Get the right people at the table
- Empower while providing clarity & direction
  - Blank slate methodology usually not effective
- Cadence, purpose, and setting of meeting
  - Leverage work on gemba when you can
- Things getting stale, change it!
Make your story visible

- Display simple info that resonates with staff and paints a clear picture of goals and status
‘Built In Quality’ is often a staple pillar
Think about how you might create ‘Built In Engagement’
Hardwire engagement in Readmission Review Process

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Demo silos, build engagement

- Break down silos, integrate cross functional collaboration and communication

Nurses

Doctors

Care Provider Team
Nurses + Doctors + Others

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Good morning!

• Engage with your team outside the confines of your project
Don’t forget to have fun!

• Create an infectious enthusiasm on your team
  o It will bring others along with you
  o You will need it when you hit bumps

Team Cheer: ‘Discharge Once, Discharge Right, No Readmission Another Night!’
Recap: Building Engagement

- Rally a call to action with intent & purpose
- Show respect, ask those that do the work about the work
- Make sure to incorporate the voice of your customer
- Pick something and go...then iterate & often
- Lean on your Sponsors more than you think
- Go to gemba with purpose
- Treat you project framework like a process, and improve it a long the way
- Make your story visible
- Hardwire engagement in
- Engage with team outside the project
- Don’t forget to have fun!
A simple equation

Effectiveness = Quality × Engagement
Reflection

• What challenges are you currently facing in the engagement of people in your lean efforts?
• What do you think some of the key contributing factors are?
• What might you try differently in your efforts to build better engagement?