



# Health Systems Quality Assurance

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**HealthMAP**  
**October 9, 2012**

# Hospital Inspections

- DOH mandated by state law to inspect (survey) hospitals on a set frequency
- Done by teams composed of nurses and fire/life/safety experts (public health advisors and fire marshals)
- Federal overlay: We also inspect on behalf of CMS to confirm hospitals meet similar requirements for Medicare certification

# Why was the Hospital Inspection Process Chosen for LEAN?

**The Challenge:** Our frequency rate of inspecting hospitals was not meeting state mandates. Reasons included:

- Inspections are complex and involve two sets of ever-changing regulations
- Hospital's evolving complex systems and larger campuses require more time and larger teams
- Federal overlay adds another layer of unique process and increasing work, responsibilities and budget challenges

# Preparations for LEAN

## **Workshop Sponsor**

- Karen Jensen, Assistant Secretary, HSQA

## **Workshop Facilitators**

- Susan Ramsey, Director, OPA
- Kris Kernan, Strategic Planning Analyst, HSQA

## **Workshop Project Lead**

- Dave Magby, Director, IIO
- Trent Kelly, Deputy Director, IIO

## **Subject Matter Expert**

- Linda Foss, Program Manager

## **Workshop Coach**

- Roy Plaeger-Brockway, L & I

# Planning for LEAN: We Were Ambitious

While we agreed the overall inspection process was very complicated we decided against trying to limit the scope:

- All Hands on Deck: Invited entire team including support staff and managers
- Took them out of field and off campus for a week
- Invited representatives from the fire marshals and three hospitals to get their input
- No phase of the overall process was left out of the LEAN review



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“Pre-survey”

“On-site”

“Post-exit”

# 3 Phases to the Hospital Survey Process

# GOALS for this LEAN Event

- Optimize existing resources
- Standardize the inspection process
- Decrease the overall time it takes to conduct all three phases of a hospital survey

# The LEAN Event



# The LEAN Event

Over two days we identified 120 Kaizens.

We developed a “future state” that streamlined:

- Scheduling and prepping for inspection process
- Clerical functions, data entry, and paper shuffling involved in post-exit process to close out an inspection

## 90 - Day Implementation Plan

While we had decided to include all phases of the survey in the LEAN event, we agreed that initial implementation would focus on the pre-survey and post-survey phases.

The on-site phase would undergo further review when we could gather the team again.

# Kaizens Incorporated into New Office Protocol

New office protocol for survey prep and wrap up:

- All Kaizens were boiled down to their essence and incorporated
- Staff brought in for training on new protocol
- Ongoing monitoring of new protocol: What's working and what's not?

## Metrics We Have Improved Already

- Our pre-survey prep process reduced from 63 days to 10 days
  - Scheduling now centralized and done 90 days in advance
  - More coherent and effective sized teams
- Our post-exit process reduced from 200+ days to 35 days to completely close out a routine survey.

# So How Did We Do?

We saw improvement on all three fronts:

- Optimized existing resources
- Standardized much of the survey process
- Decreased the overall time it takes to conduct surveys

*... but the story continues...*

# The Rest of the Story: LEAN Momentum Continues

At the June LEAN event, the team struggled with value stream mapping the on-site phase of a survey. However some Kaizens were discovered:

- Overlapping and duplicative duties: Nurses and life/safety inspectors doing same things
- Over-inspecting: Every hospital unit surveyed extensively despite similarities of operation; all nurses looking at same processes on every unit
- Life/safety inspectors did not need the same on site time to complete their portion

# The Rest of the Story: LEAN Momentum Continues

We reconvened inspection team in September to take advantage of the LEAN momentum.

We set the expectation that we would develop a new inspection model – no going back!

Key Questions:

- Can we make surveys smarter?
- How can we best discover risky deficiencies?

# On Course to Launch a Revamped Survey Model

The new LEAN survey --  
a consistent and focused approach

- Focused on key overarching hospital systems.
- Standardized to best use team members.
- Ready to be implemented January 2013.
- Still need to finalize our new survey tools.
- Meanwhile, we've already scheduled all surveys through December 2012.

# Next Steps

After development and piloting stages, we anticipate the end result will be:

- Smarter surveys that root out significant hospital problems that raise the greatest patient safety issues
- Leaner surveys that can be done by smaller teams
- Freeing up other team members to conduct concurrent surveys and increase overall frequency
- Use of new measuring tools developed since the LEAN event to better understand our survey trends

# Overview – Where Have We Traveled?

LEAN has already helped our pre- and post-survey processes run much more smoothly and coherently.

Remaining challenge is to get to more hospitals timely. This requires improvements to the on site survey phase which are currently under development.

Our aim remains the same: Catch up and never fall behind again. We need to make sure we do so without losing sight of patient safety. That's a work in progress but we know we're on the right path.