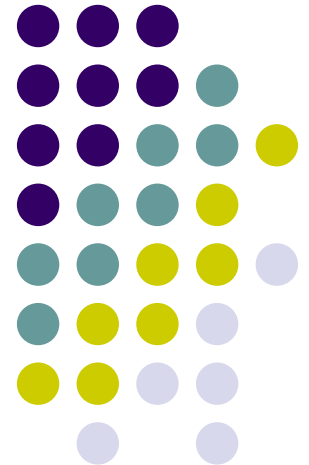


The Baldrige Mirror: Looking at Your “Whole” Self



Jan Englert, RN
Director, Outcomes
Management





Objectives

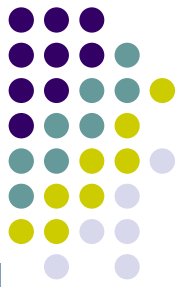
- Explain Baldrige process and it's meaning to healthcare organizations
- Discuss process for investing the entire healthcare system in the process
- Share results found and action plans implemented

Who Are We?



North Mississippi Medical Center

- Tupelo
- 650 bed main unit
- All service lines
 - Except transplants
 - Pediatric surgery
- Parent organization
 - North Mississippi Health Services



From the 'hospital on the hill' to...



What is the first thing you look at when you look in the mirror?

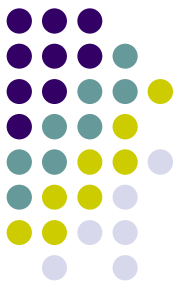


- Responses
 - Hair
 - Eyes
 - Face
 - Nose

A 'true' look in the mirror....



- Good side
 - Best appearance
 - Lines
 - Strengths
- Not so good side
 - Flaws
 - Sloppiness
 - Gaps
 - OFI's (Opportunity for Improvement)



What do you do with this information?



- Assess what is good and learn from information
 - Apply information more often
 - Emphasize strengths
- Assess what is not so good and learn from information
 - Begin working on flaws
 - Put best foot forward
 - Fill gaps

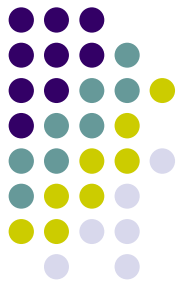


What does Baldrige mean in the healthcare world?

AHA Survey



- Senior executives across the country
- 1999
 - What's on your "to do" list
 - What keeps you up at night?
- 2001
 - What keeps you up at night?
- 2004
 - ?????



Study findings: leaders are not investing in what they claim to value

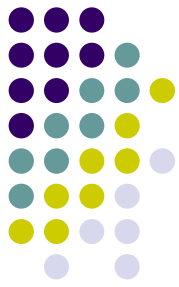
Report concluded that while healthcare executives *say* customer satisfaction (**good care with good outcomes**) and employee retention are the most important aspects of their business, they fail to invest adequately in either





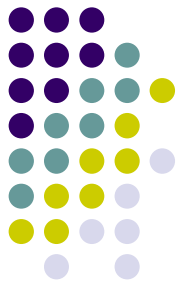
Create a culture/environment
that is aligned with your
employees' personal mission
statements





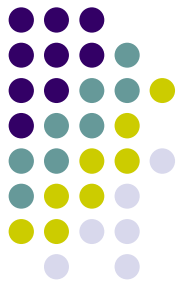
- Mission Driven
- Values Centered
- Customer Focused





Culture

- Creating an organizational culture built on open communication
- Creating a “no-secrets”, “no excuses” environment
- Creating a culture where employees feel valued, manage their own morale, behave like owners and are inspired to improve what is most important to them...patients!
- The care of patients IS our business



What is the Baldrige Process?

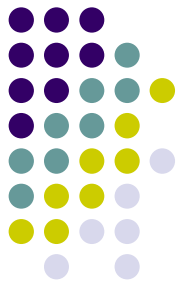
- Systematic method to focus on processes
 - What you do
- Systematic method to focus on deployment
 - HOW you do it
- Systematic process to focus on organizational learning
 - How do you get better and share knowledge?
 - How do you learn from these processes?

Why Did NMMC Choose Baldrige Process?



- Improves value to customers
 - Bottom line: To improve care
- Improves organizational performance
- A model to “get better faster”

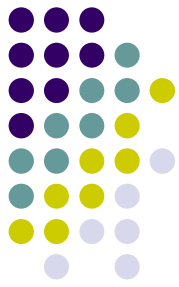




The Baldrige 'Makeover'

- Began in....1999
- To improve
 - Communication
 - Alignment
 - How information is used and shared
 - Processes

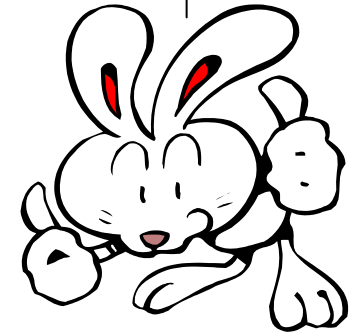




Steps re: Baldrige Award

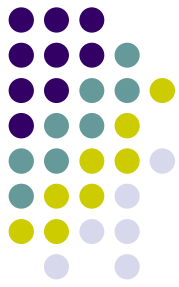
- Submit application
- Individual reviews
- Consensus
- Feedback report
 - Consulting
- Site visit
- Feedback report
- 2000 – State highest award
 - Assessment
- 2003
 - Consensus
- 2004
 - Consensus
- 2005
 - Site visit
- 2006
 - Site visit
 - RECIPIENT!!! Hurray

Some “Get Better Faster” Actions & Results of Engaging in the Baldrige Process

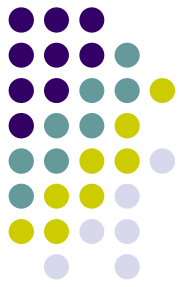


- Leadership
- Planning
- Customer Focus
- Information and Analysis
- Staff Focus
- Process Management
- Results

Leadership



- Servant Leadership
- Leader rounding
- Redesigned “Ideas for Excellence” program and leadership involvement
 - **Higher level response to and focus on ideas from employees**
- Redefined statement of values
 - **Shorter, more able to remember, recite, meaningful**
- Improved feedback from risk management, safety, PI processes, and patient, physician, employee surveys
- Developed benchmarks for “citizenship” activities



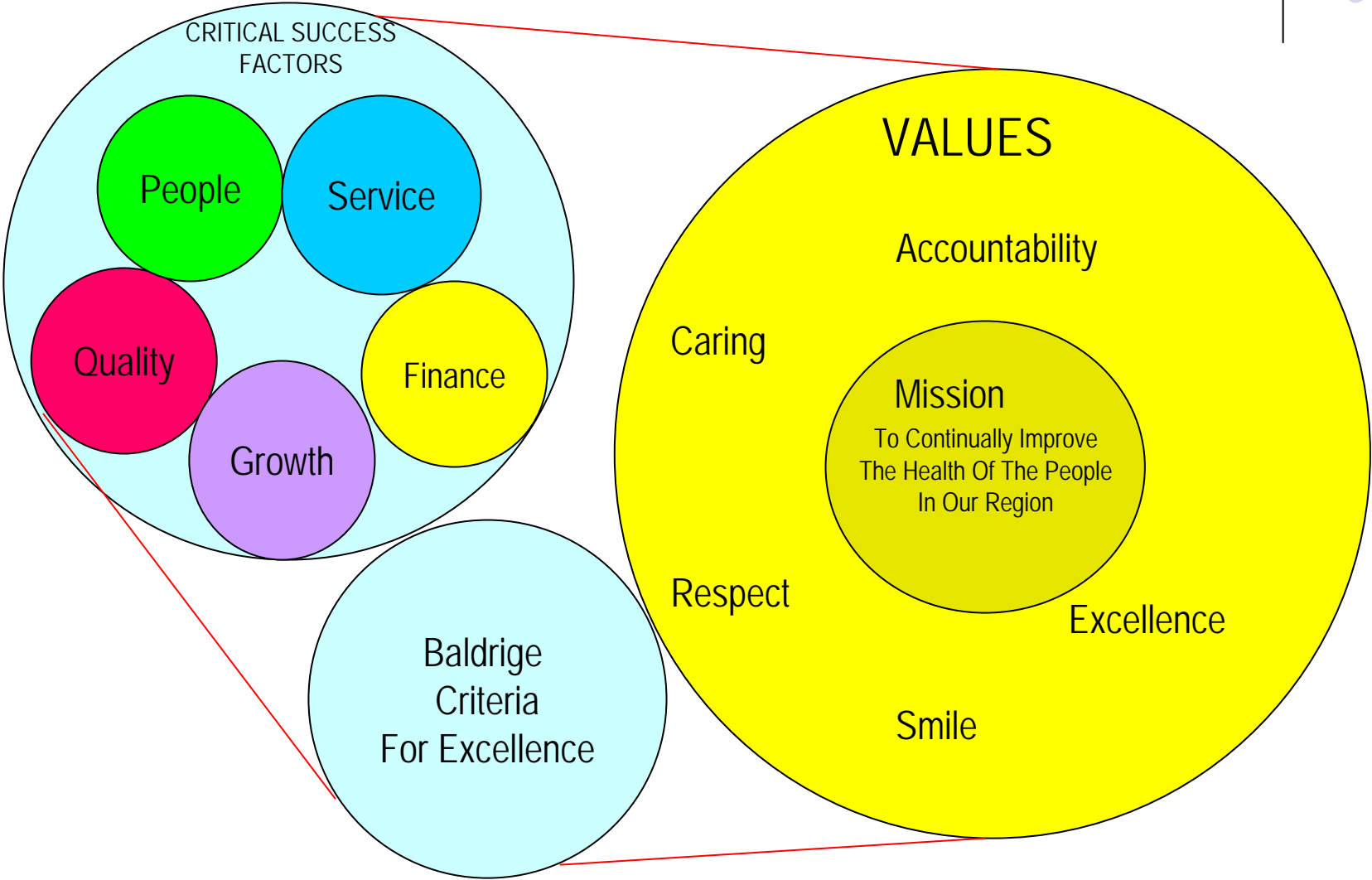
Critical Success Factors

- People
- Service
- QUALITY
 - Improve health outcomes
 - Improve prevention and health education
- Finance =
 - Growth

North Mississippi Health Services - NMMC



VISION: To provide the best patient-centered care and health services in America

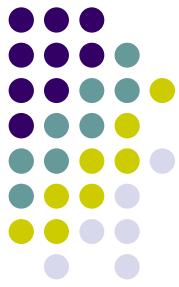


Planning



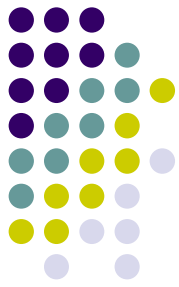
- Redefined strategic business units to include geography and function
 - Later evolved into service line structure
- Identified and included appropriate external stakeholders in strategic planning process -> comprehensive planning process - > EPP
- Developed processes to ensure strategic plans guide operational planning
- Developed structure to coordinate capital, human and other resources with operational planning

Customer Focus



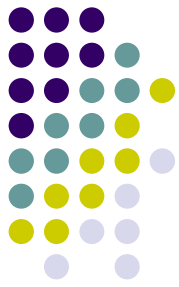
- Developed a system-wide complaint/compliment management process
 - Internal MIS, intranet access, central collection & reporting
- Established a system-wide structure for managing physician-related resource issues and physician support
- Developed a system-wide method of listening to and learning from internal and external customers
 - Focus groups
- Integrated customer feedback into planning and performance improvement processes

Information & Analysis



- Developed system-wide scorecard reporting
 - Entity and now service line scorecards
- Developed accurate and useful measures of market share
- Coordinated performance improvement activities and reporting to all levels
- Developed methods to improve physician utilization of EMR order entry
 - Physician order entry plan – Leapfrog goals
- Developed processes to ensure consistency, adequacy, integrity and availability of critical NMMC data

Staff Focus



- Developed a master education plan for the entire system
- Developed a system-wide two-way communication plan
 - “Town meetings” evolved to “Employee communication meetings”
- Improved management accountability for all aspects of annual performance review (Excel)
 - Excel form specific to Leadership attributes
- Succession planning “hard wired”

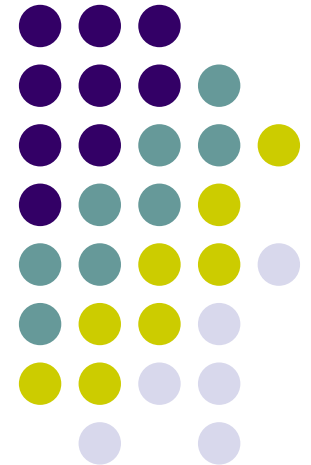
Process Management



- Defined values, characteristics and measurable indicators of patient-centered care
- Established a structure for system-wide design and coordination of care processes
 - Applied the PDCA (Plan-Do-Check-Act) model to key non-clinical processes
 - Began Six Sigma to address “finite” improvement
- Established system-wide guidelines for the evaluation of new services and for the design/redesign of processes

Visual Examples

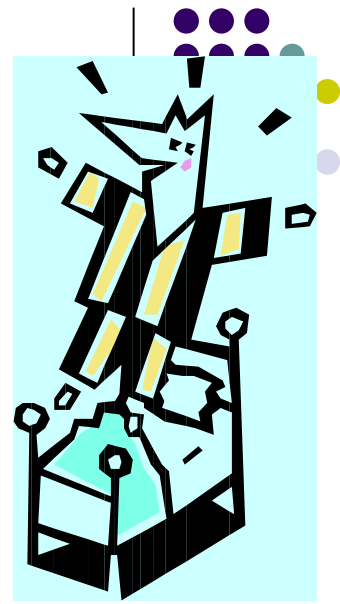
Patient Centered Definition
Pocket Cards
Knowledge Boards



Patient Centered Care

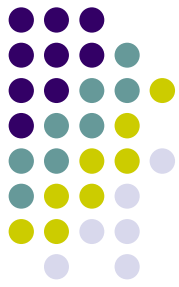
- Definition & Characteristics
 - Respect
 - Coordination and integration of care
 - Information, communication, education
 - Physical comfort
 - Emotional support and alleviation of fear
 - Involvement of family and friends
 - Transition and continuity
 - Access

R-E-S-P-E-C-T

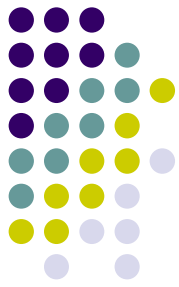


Nametag Pocket Card

M-V-V and CSF on One Side



<p>Mission <i>Why We Exist</i> To continuously improve the health of the people of our region</p> <p>Vision <i>What We Want To Be</i> The provider of the best patient centered care and health services in America</p>	<p>Values</p> <p>C ompassion</p> <p>A ccountability</p> <p>R espect</p> <p>E xcellence</p> <p>S mile</p>	<p>Critical Success Factors</p> <ul style="list-style-type: none">➤ People – Maintain a high quality workforce➤ Service – Improve customer service➤ Quality – Improve prevention and health education svcs & improve clinical outcomes➤ Finance – Produce resources to support mission➤ Growth – Expand access to healthcare and hc services
---	--	---



Goals on Other Side

Dept/ Unit Goals	My performance plan	Keys to Success North Mississippi Medical Center
People _____ _____ Service _____ _____ Quality _____ _____ Financial _____ _____ Growth _____ _____	People _____ _____ Service _____ _____ Quality _____ _____ Financial _____ _____ Growth _____ _____	



What Links Staff to the Mission and Vision?

- Personal goals

- Dept goals
 - Critical Success Factors
 - performance scorecard
 - fulfills organization's mission and vision

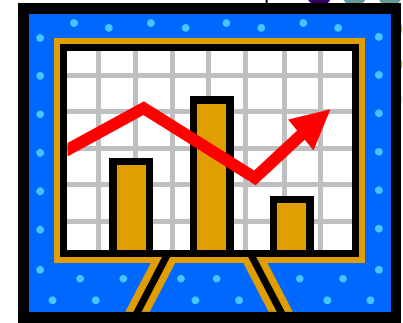
- Check system for documentation of discharge meds

- Increase ACE/ARB use in CHF patients
 - Improve Health Outcomes

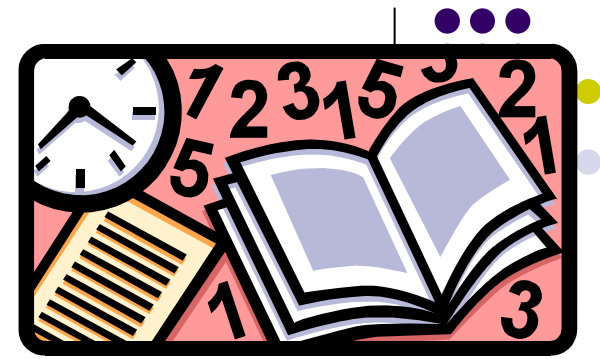


Deployment

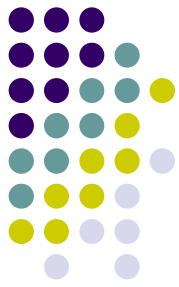
- Knowledge Board
 - Centralized communication!
- What is on it?
 - Critical Success Factors
- How does that affect staff?
 - Review at staff meeting monthly
 - Changed monthly / quarterly
 - Communicates praise and shows results of what staff accomplishes through improvements!



Knowledge Board Contents



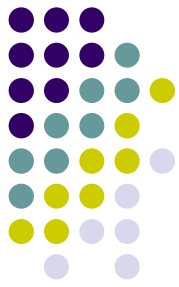
- Mission – Vision – Values
- **People**
 - Maintain High Quality Workforce
- **Quality**
 - **Improve Prevention & Health Education**
 - **Improve Health Outcomes**
- Service
 - Improve Customer Service
- Financial
 - Resources to Support Mission
- Growth
 - As a team
 - As an organization
 - As leaders



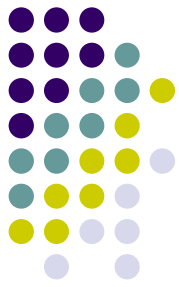
Engaging the System

- Second year
 - Environmental assessment
 - Close the loop processes
 - Service line re-structuring
- Focus on comparative and competitive results
 - “World class” benchmarking
 - Routine quality reporting to Board
- Community/board focus
 - New CEO
 - Community relations coordinator

Value of Information in Baldrige Process



- Gaps, Trends
- Benchmarks and comparisons
 - MUST HAVES
- How do you know where to go when striving for “world class”
- Partnership in performance improvement
- Partner in public reporting foray
- Care process and patient outcomes analysis



Organizational Learning

- **Outcomes College**
- Annual Outcomes and Safety Fair
- System councils
- Intranet tools
 - Information and informative
 - Interactive
- Weekly CEO emails
- Employee communication meetings

Hospital Public Reporting JCAHO Quality Check



Organizations Hospital Comparison

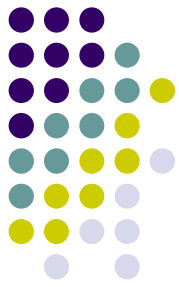
[Return to Search Results](#)

KEY	
	This Organization Achieved Best Possible Results.
	This Organization's Performance is Above the Performance of Most JCAHO Accredited Organizations.
	This Organization's Performance is Similar to the Performance of Most JCAHO Accredited Organizations.
	This Organization's Performance is Below the Performance of Most JCAHO Accredited Organizations.
	This Measure is not applicable for this Organization.
	No Data are Available for this Measure.

	Health Care Organization				
	Baptist Memorial Hospital Memphis, TN	St. Dominic - Jackson Memorial Hospital Jackson, MS	North Mississippi Medical Center Tupelo, MS	Methodist Healthcare- University Hospital Memphis, TN	Mississippi Baptist Medical Center, Inc. Jackson, MS
<i>National Patient Safety Goals Met</i>					
<i>National Quality Improvement Goals</i>					
<i>Heart Attack Care</i>					
<i>Heart Failure Care</i>					
<i>Pneumonia Care</i>					
<i>Pregnancy Care</i>					

www.qualitycheck.org

Focus on Quality/Safety



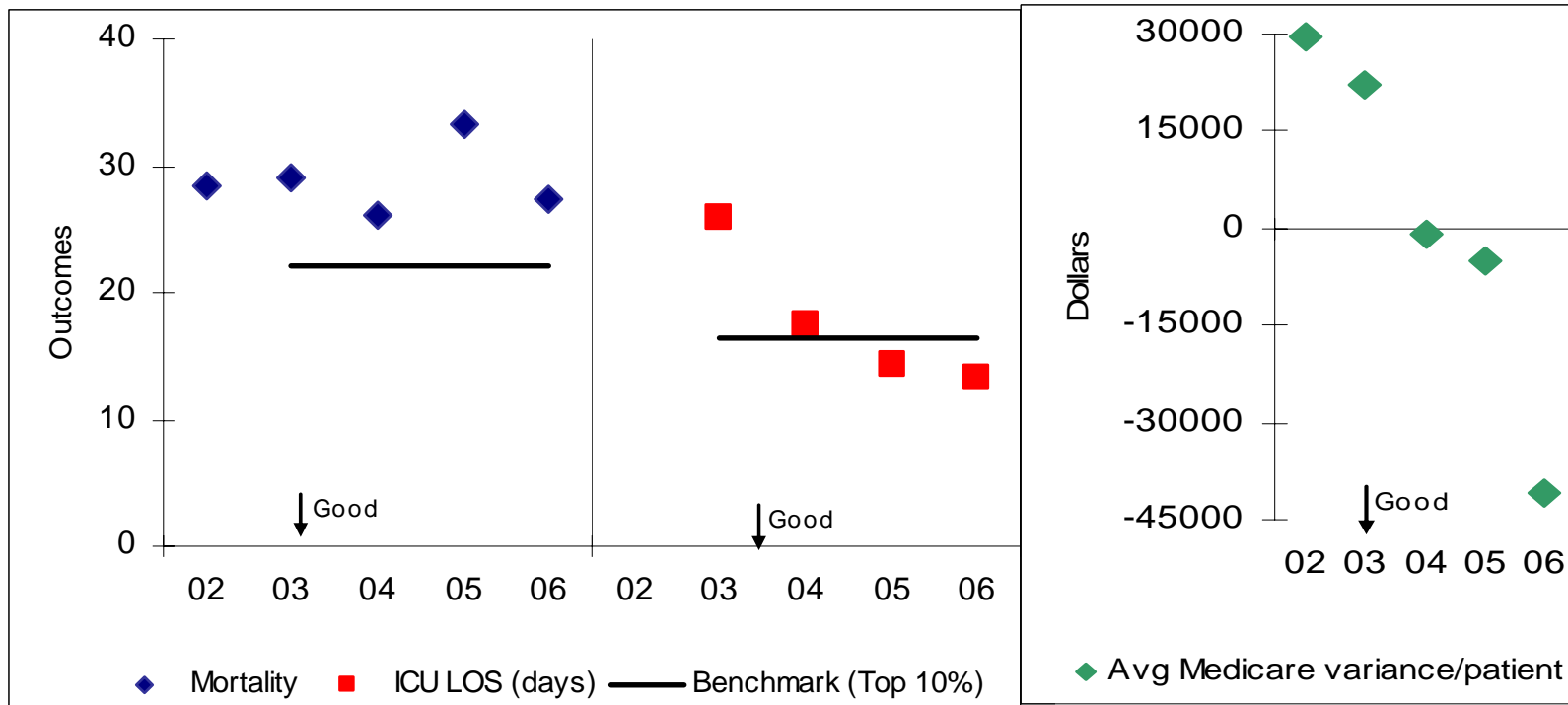
Quality as a Department

To

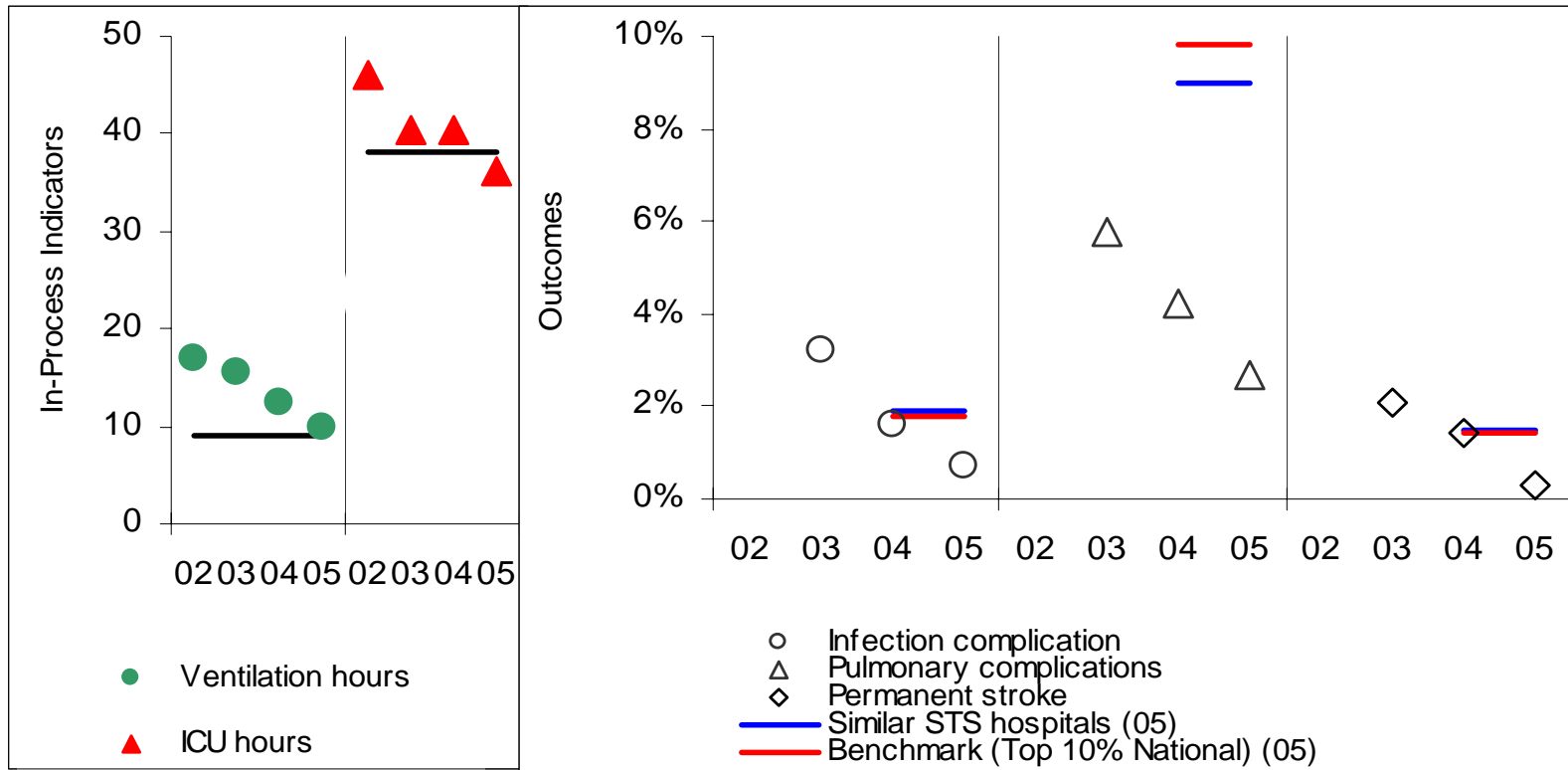
Quality as a Critical Success Factor

*An organizational passion
for Quality/Safety*

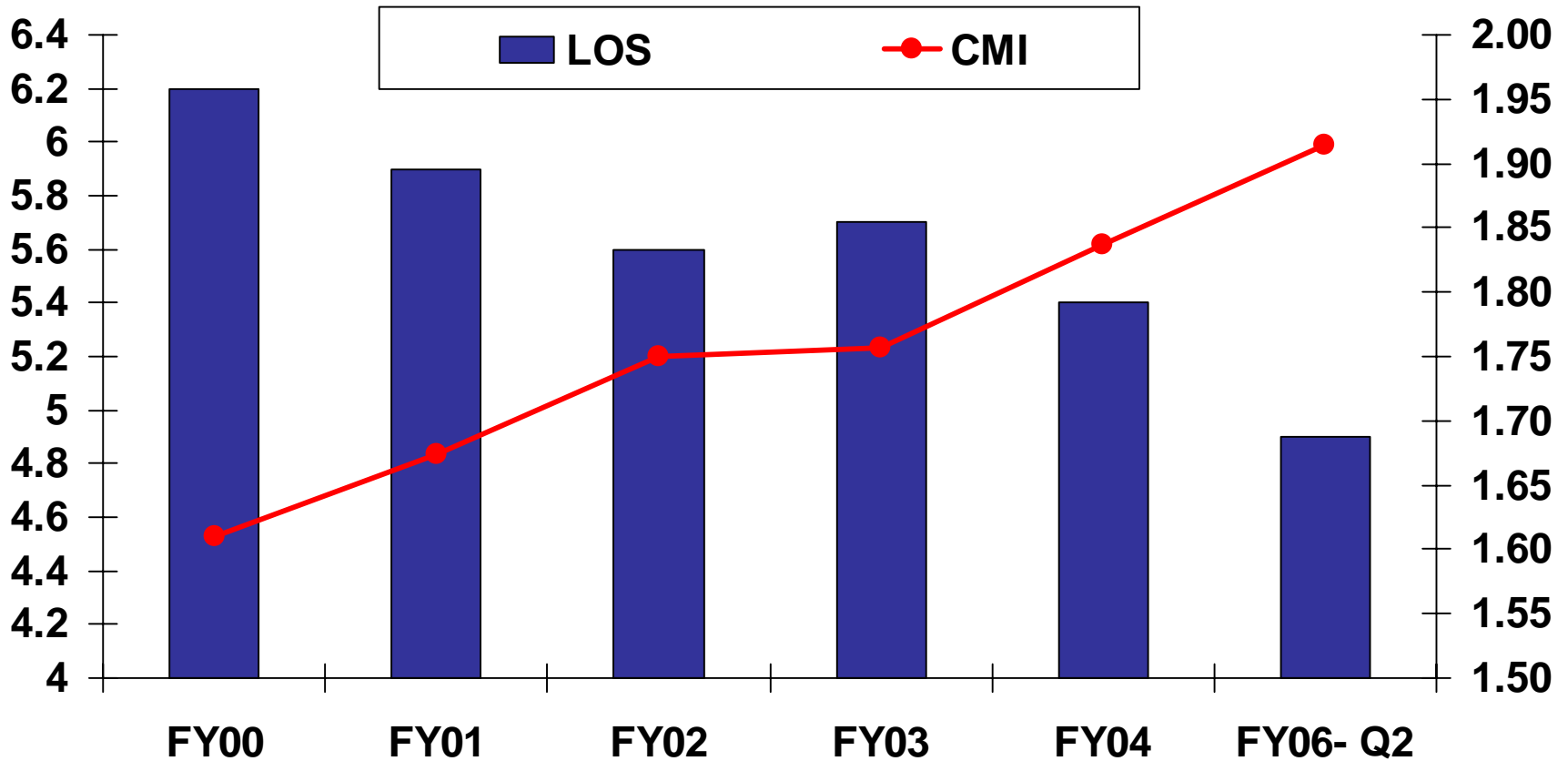
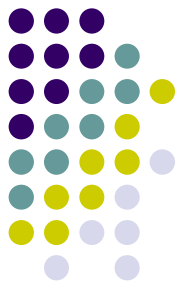
Improved Outcomes Tracheotomy Patients



Improved Outcomes for ACB Patients

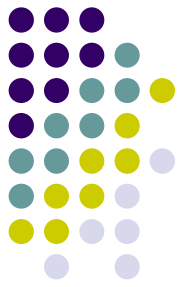


Case Mix Adjusted Medicare Length of Stay



Other Related Outcomes

Improved Cost



- Ischemic stroke patients Medicare variance
 - FY02 – (\$2,479); FY06 – (\$1,942)
- Mechanically ventilated patients Medicare variance
 - FY03 – (\$6,144); FY06 – (\$1,843)



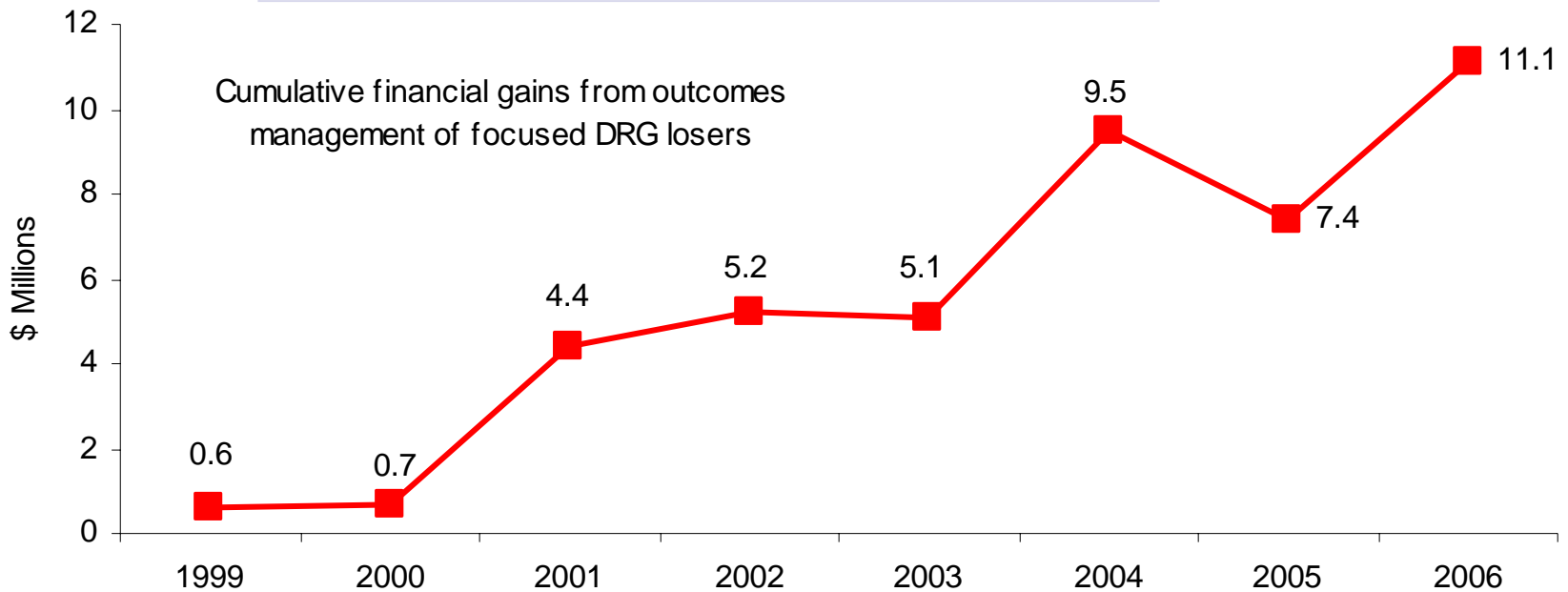
What is the value added return?

- CARE-Based Cost Management – Breakout Session
 - Making the business case for quality
- Select practice

Care-Based Cost Management



Cumulative financial gain from outcomes management of focused DRG losers



Do I really make a difference?



There is a thin thread that weaves only from you to hundreds of thousands of lives. Your example, your actions, and yes, even one decision can literally change the world.

Andy Andrews, [The Traveler's Gift](#)

The Baldrige Mirror... to be continued

