



vizient<sup>®</sup>

# Focus on what truly matters

Putting patients at the heart of health care

UCHealth | January 2022

# Driving performance improvement in health care

- **The path for Vizient is clear:** We help health care organizations improve their performance; It starts with our mission centered on strengthening members' delivery of high-value care and comes to life in how we execute on that mission with an integrated approach to enhancing cost, quality and market performance. ●●

Byron Jobe, President and CEO, Vizient

1

Governance strategy

2

Decision-making

3

Physician engagement

4

Data

5

Executive support

## Vizient quality insight helps you

### Better understand your performance

- Where does meaningful variation exist across inpatient services?
- Within these inpatient services, what provider-level variation exists?
- Are patients able to easily access services through physician practices?

### Know how your performance compares to your peers

- Who has the best quality performance in my market footprint?

# 1

## Governance strategy

### Establish a clearly defined organizational governance structure

#### Strategy

- **Establish a master organizational strategic plan for governance**
- **Ensure integration and alignment across the system**
- **Everyone should know the strategic goals** and how their work supports each of the goals
- **Establish a master strategic plan** that incorporates both short- and long-term goals around governance
- **Make sure all key stakeholders are familiar** with the key goals and objectives around the strategy
- **Ensure integration** between the hospital system and the school of medicine strategic plans

#### Governance

- **Establish a clearly defined governance model** to delineate reporting and level of decision-making approval at each level
- **Create a road map** for implementing the governance structure across the system
- **Establish an organizational governance chart** to assist with navigating reporting relationships and levels or areas of responsibility
- **Establish a strategy and approach** to physician onboarding, recruitment and credentialing that is aligned with the overall governance model
- **Every committee should be able to relate how their work supports the key goals and objectives of the organization**

#### Communication

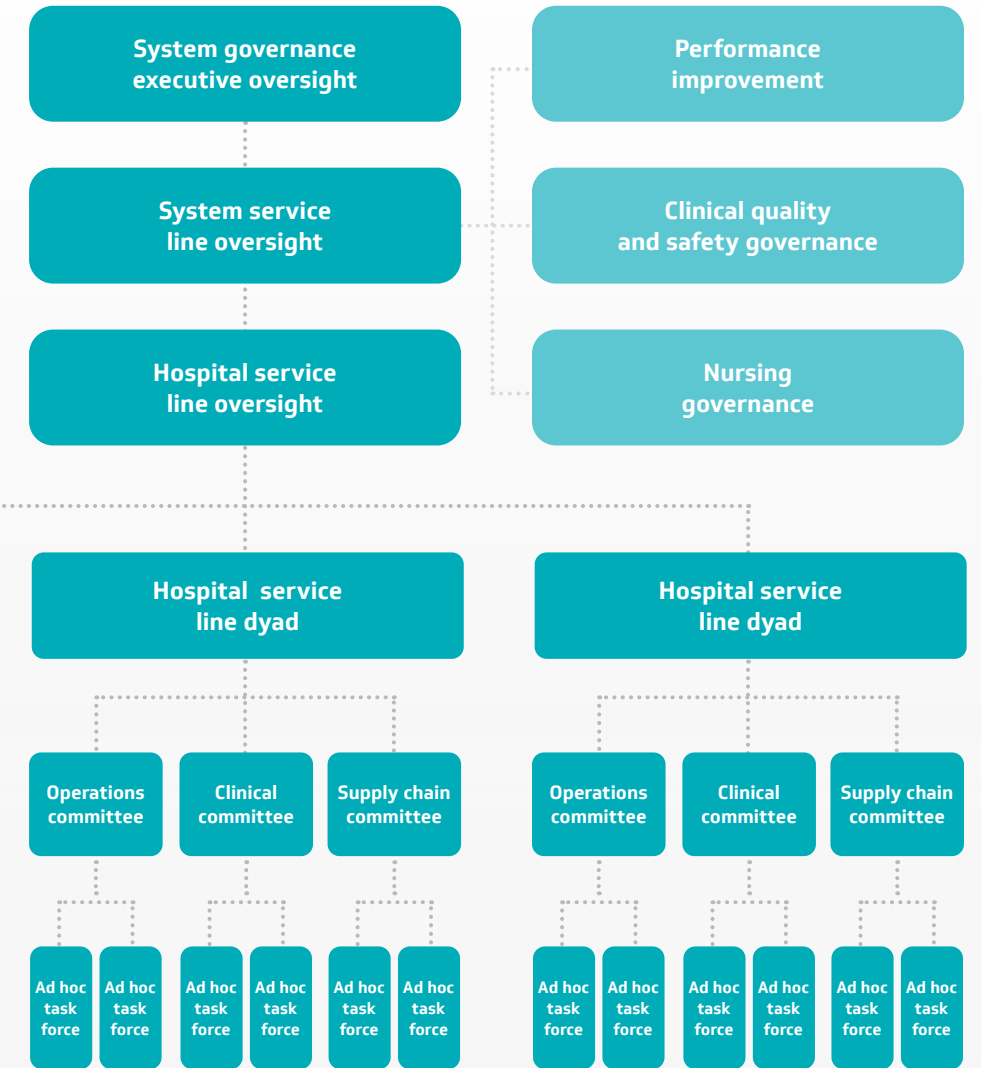
- **Establish a robust communication plan** around the organizational strategic plan for governance
- **Design purposeful and deliberate integration of best practices across the system**
- **The strategy evolution should involve people who are closest to the actual work**

# 2

## Decision-making

### Generate a road map and formal process for establishing quality decision-making

- The system needs to mature as an organization in making decisions from data and driving change with data analytics and clinical governance
  - Create a formal governance structure that includes specific mechanisms, authority and responsibility to empower decision-making on multiple issues related to quality, operations and financial performance in order to impact and reduce variation in clinical practice
  - The authority to set goals resides with the executive team; however, allow the authority for achieving the goals or implementing policies to reside with the committees and the people closest to the action
  - Generate a road map and formal process for establishing governance, committees, relationship to strategic goals, purpose, objectives and decision-making authority
  - The overall governance structure needs to be reduced, don't add more committees or more layers; it needs to "sit" somewhere
  - Make more effective use of leadership dyads
  - Need to provide the committees with the actionable data they need or request to make informed decision
  - There needs to be an overall manager of the governance structures to ensure continuity, facilitate meetings and process, facilitate alignment, prevent people from adding groups, prevent duplicate work
  - This is about building governance groups that will function over the long term
- Need to formalize the decision-making mechanisms and processes; currently, some of it is done by consensus while other is done by voting
  - Create a governance support team led by a governance resource manager
    - Resource manager: This individual is responsible for keeping track of the committees and the work that they are doing to avoid duplication, facilitate and distribute information on who is doing what, good new ideas, etc.
    - Support team: Supports all work being done by the committees, including facilitate meetings; create agendas; write minutes; manage schedules; generate materials or reports; ensure good and effective data; and share work, ideas, and achievements
    - Report to vice president of performance improvement or possibly chief operating officer
  - The committees will need support from appropriate internal experts (like data analysts) and external experts (e.g., experts in spine implant pricing, experts in operating room operations, experts in implementing leading practices in sepsis care, etc.)
  - The committees should work on multiple issues related to quality improvement, financial performance and operational efficiency that will add consistency and address variation in clinical practice, and develop people with broad multidimensional expertise



Example: governance structure

# 3

## Physician engagement

### Establish clear mechanisms for the distribution and sharing of physician level data

- Ensure that the physician onboarding process is addressed and aligned with the overall governance development structure
- Provide education to physicians around processes to assist with addressing the overall goal of reducing variation in practice
- Establish clear mechanisms for the distribution and sharing of physician level data so that there is alignment across all aspects of the health system and medical school

#### Vizient differentiators

- Unique data and analytics for actionable insights for our members
- Solution-driven results through core strategy applications
- Tailored education to meet member needs
- Sustainability through on-site mentoring
- Education on compliant coding guidelines
- Documentation aligned with quality initiatives
- Improved actual-to-expected length-of-stay ratios



# 4

## Data

### Provide clear, relevant and strategic data connected to actionable and meaningful outputs

- **Take another look at your entire data program** and clearly answer these questions.
  - What are our goals around data?
  - How should data be collected, analyzed, packaged and presented, and to whom and on what cadence?
  - How will we benchmark? Risk-adjust? Know when the data is relevant and actionable?
  - Continue to ask: Is the data actionable? Is the data relevant? Is the data reliable?
- **It is better to present the physicians, other clinicians and staff with a targeted amount of good, actionable data** than an excess of data that they don't trust, use or find actionable? Ask them what they need to know
- **To enhance physician engagement, focus more on quality data that will impact outcomes, operations and cost**
- **Customize the data shared to each audience**
- **Identify consistent data to share to all physicians**
- **Consider a comprehensive audit of the data collection and distribution system**
- **Determine what data is most relevant and actionable;** how the data should be collected, analyzed, packaged and presented; who should be seeing the data; and on what cadence
- **Generate dashboards using agreed-upon sources of data** (sources of truth) and aligned with key quality, operational, productivity and financial performance metrics at the system, hospital, departmental and provider levels that are meaningful and actionable
- **The physician-specific data should be focused on quality and outcomes** and be aligned with quality, financial and operational performance
- **Focus resources and investment in information and informatics technology** as it is the foundation to changing physician behavior and impacting clinical variation in practice
- **Generate physician-specific dashboards** using agreed-upon physician-level comparison data and key metrics aligned with quality, operational, productivity and financial performance
- **Don't just give the physicians the data you have,** ask them what they need to know in order to reduce variation in clinical practice and improve care, costs and operations
- **It is better to present the physicians, other clinicians and staff with good, relevant, actionable data** than unnecessary data they don't use or don't find actionable

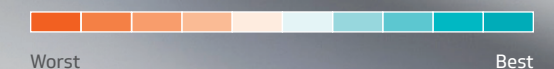
### UCHealth quality and accountability scorecard

Data to drive improvement

#### UCHealth safety measures by hospital

Hospital	NHSN CAUTI	NHSN CDI	NHSN CLABSI	NHSN COLO	NHSN HYST	NHSN SSI	PSI 03	PSI 06	PSI 09	PSI 11	PSI 13	THK
	SIR	SIR	SIR	SIR	SIR	SIR	O/E	O/E	O/E	O/E	O/E	Rate %
<b>Comprehensive Academic Medical Centers (AMCs, n = 101)</b>												
UCHEALTH_COLORADO	0.51	0.59	0.88	1.02	2.37	N/A	1.99	0.89	1.32	0.5	0.71	0.0
<b>Large, Specialized Complex Care Medical Centers (LSMCs, n = 117)</b>												
UCHEALTH_MEDCTRROCKIES	1.21	0.64	0.45	0.84	LV	N/A	1.37	1.96	0.49	0.0	0.1	0.02
UCHEALTH_MEMORIAL	1.1	0.38	0.46	1.07	0.78	N/A	0.46	1.05	1.31	0.2	0.16	0.01
<b>Community Hospitals (CHs, n = 226)</b>												
UCHEALTH_GREELEY	LV	0.78	0.67	N/A	N/A	0.0	0.91	0.0	0.0	1.21	0.0	LV
UCHEALTH_HIGHLANDS-RANCH	4.15	0.31	4.71	N/A	N/A	2.46	0.74	0.0	0.79	0.0	0.0	0.05
UCHEALTH_LONGSPEAK	LV	1.5	3.0	N/A	N/A	4.28	1.01	0.0	3.85	0.45	2.91	0.0
UCHEALTH_POUDEVALLEY	1.46	0.25	0.63	N/A	N/A	0.91	1.53	0.72	0.57	0.41	0.55	0.01

Source: Quality & accountability study (Q&A) period 4 2021.



Abbreviations: CAUTI = catheter-associated urinary tract infections; CDI = Clostridioides difficile infection; CLABSI = central line-associated bloodstream infection; COLO = colon procedure; HYST = hysterectomy; LV = low volume; N/A = not applicable; NHSN = National Healthcare Safety Network; O/E = observed and expected; PSI = patient safety indicator; SIR = standardized infection ratio; SSI = surgical site infection; THK = total hip and knee.

# 5

## Executive support

### Bring key stakeholders together for a plan and design day to develop a roadmap for governance

- Finalize the vision of the overall governance structure and decision-making processes
- Formalize the roles and responsibilities in this governance structure and encourage all stakeholders to work within the new structure
- Local teams should be given the authority to decide how to execute on those goals
- Implement consistent messaging and a formal approach to communication
- Need to establish a consistent, linked strategy for governance across the system
- Need to clarify how the governance structure integrates across the system
- The formal governance structure should include specific mechanisms, authority and responsibility to empower decision-making on matters related to quality, operations, financial performance and market strategy (responsibility to fix the problems and the authority to make final decisions)
- The new decision-making processes needs to be strongly supported by the executive team, and the executive team needs to give real authority to the institutes and local teams to make decisions on a wide variety of matters
- Communicate the governance structure and encourage all stakeholders to work within the new structure



# Designation turned differentiator

## US San Diego Health – case study

### UC San Diego Health pursues distinction as a high-reliability organization, streamlining clinical operations and improving organizational communication.

UC San Diego Health has always prided itself on its dedication to safety and quality, but with two major expansion projects in 2017, it decided to take a deeper look. “We knew our growth involved new challenges and we knew there is always room for improvement,” said Christopher Longhurst, MD, chief information officer and associate chief medical officer for quality and safety. By 2018, however, UC San Diego Health had recommitted to becoming a high-reliability organization.

### Refocusing on the high-reliability journey

As defined by The Joint Commission, a high-reliability organization holds zero harm as its ultimate measure. The organization constantly and consistently works toward that goal through commitment from leadership, an organizational culture where all team members can speak up, and the use of improvement tools such as Lean.

“We said we’re going to pick a goal as an organization that we can focus on that gets us all centered on the right priorities relative to quality,” said Chad VanDenBerg, chief quality and patient safety officer. VanDenBerg and Longhurst have spearheaded the organization’s high-reliability mission in tandem.

### Leading on every level

It wasn’t just the guidance of VanDenBerg and Longhurst that was critical to the process. The duo embraced their partnership with chief operating officer Brendan Kremer and chief clinical officer Margarita Baggett, and the leadership of UC San Diego Health CEO Patty Maysent. Maysent has steadfastly championed the organization’s high-reliability goals, which are key to being able to put the right structures in place and make appropriate investments, according to VanDenBerg and Longhurst.

That leadership filtered down and those at every level were motivated by a desire to improve patient care and patient outcomes. “It is a year-to-year commitment to be able to evidence the exceptional care that our front-line faculty and staff provide,” VanDenBerg said, adding that the team-based approach is central to UC San Diego Health’s success.

### Leaning on analytics

With zero harm as UC San Diego Health’s “North Star,” the organization began its journey to high reliability by understanding current performance and setting long-term goals. A crucial part is to understand how the hospital was performing, and for that, the organization uses the Vizient® Q&A dashboard as a mile marker for success. The enterprise goal is to achieve top 10 performance, and that goal is cascaded to every level of the organization.

At the outset of UC San Diego Health’s high-reliability journey, the team studied the Vizient methodology and generated internal dashboards with targets based on the Vizient Clinical Data Base (CDB) comparative performance – first top 10 and then top 5. The UC San Diego Health analytics teams, led by Eema Hemmen, also used CDB data to create performance prediction models to track progress ahead of quarterly updates. And working with Vizient team, UC San Diego Health developed an understanding of the metrics and their drivers, data quality issues, and improvement opportunities. “The Vizient dashboards are very helpful in identifying opportunities and helping our administrative and medical leaders prioritize resource allocation” said Longhurst.

Because the internal dashboards leverage an enterprise tool, the data is available and transparent to all leadership, including medical directors, administrative leaders and others. Everyone is encouraged to log in, perform a deep analysis on the data and create their own set of assumptions and improvement opportunities at the local level.

### Process-focused outcomes

Another crucial aspect of UC San Diego Health’s high-reliability efforts was a partnership with the transformational health care team under the leadership of

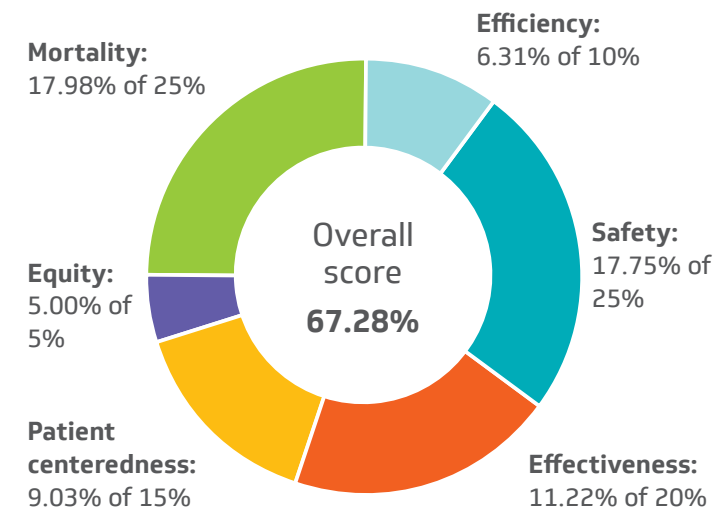
- One of the key elements for us was figuring out how to create 10,000 problem-solvers, all helping drive performance improvement at every level.●●

**Chad VanDenBerg,**  
Chief Quality and Patient  
Safety Officer,  
UC San Diego Health



### UC San Diego Health System scorecard

Overall rank: 7 ★★★★★



▲ Vizient median: 51.76%

chief operating officer Brendan Kremer to leverage Lean improvement processes. “One of the key elements for us was figuring out how to create 10,000 problem-solvers, all helping drive performance improvement at every level,” said VanDenBerg.

Key to that process is the tiered daily huddle. At every level, from the front-line staff to the executive team, each day begins with a huddle where they intentionally ask: Are we prepared to safely care for our patients today? Are there any concerns – infrastructure, staffing, supplies, equipment – around safety? Concerns are communicated to the proper resources and addressed as quickly as possible so they can deliver safe, exceptional care to patients that day and every day. Each daily huddle ends with expressing gratitude to members in the huddle.

### High-reliability journey enabled agile, rapid pandemic response

In less than three years, UC San Diego Health has progressed significantly on its high-reliability journey. They’ve cultivated and continuously support a culture of gratitude at every level of the organization. Members remain committed to the goal of zero harm. In the first two years of their journey, they reduced harm by nearly 26%.

In 2020, UC San Diego Health was ranked No. 1 for the San Diego region in *U.S. News & World Report’s* “Best Hospitals” report. In 2019, UC San Diego Health received The Vizient Bernard A. Birnbaum, MD, Quality Leadership Award. (Vizient didn’t have quality performance rankings for 2020 due to the pandemic.) And when the pandemic

### Celebrating teamwork and success

Marking milestones is a tenet of UC San Diego Health’s high-reliability journey. Each year at the Vizient Connections Education Summit, the team celebrates its ranking with its peers: sixth in 2019 and a top performer in the academic medical center cohort again in 2020, when rankings were not publicly issued due to the COVID-19 pandemic.

The celebration and teamwork are integral to maintaining momentum toward the system’s high-reliability goals – and staff motivation for delivering outstanding patient care. Vizient and UC San Diego Health also co-hosted a celebration to honor the contributions bedside care staff made to the ranking.

struck, the processes UC San Diego Health had in place helped set them up to continue to deliver safe and high-quality care to both their COVID-19 and non-COVID-19 patients.

“We think of this as a journey, not a destination. There are a lot of mile markers along the way,” VanDenBerg said.

### Systemwide collaboration

The challenge for UC San Diego Health now is sustaining progress, which includes both sharing and learning leading practices with others, including the four other academic medical centers in the University of California system.

“I think that any time health care organizations come together in a friendly competition to deliver the highest-quality care, that’s great for all of our patients,” Longhurst said.

- The Vizient dashboards are very helpful in identifying opportunities and helping our administrative and medical leaders prioritize resource allocation.●●

**Christopher Longhurst, MD,**  
Chief Information Officer and  
Associate Chief Medical Officer  
for Quality and Safety,  
UC San Diego Health







290 East John Carpenter Freeway  
Irving, Texas 75062  
[www.vizientinc.com](http://www.vizientinc.com)