



January 13, 2011

Los Angeles County Board of Supervisors

Gloria Molina
First District

Mark Ridley-Thomas
Second District

Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

Mitchell H. Katz, M.D.
Director

John F. Schunhoff, Ph.D.
Chief Deputy Director

313 N. Figueroa Street, Suite 912
Los Angeles, CA 90012

Tel: (213) 240-8101
Fax: (213) 481-0503

www.dhs.lacounty.gov

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles residents through direct services at DHS facilities and through collaboration with community and university partners.



www.dhs.lacounty.gov

Algrid Leiga, Chair Quality and Productivity Commission
565 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA, 90012

Dear Chairman Leiga:

Rancho Los Amigos National Rehabilitation Center and the "Leaders are Learners" (LAL) Leadership Development program are pleased to share with the Productivity and Investment Board, the **RANCHO TRANSPORT NETWORK**.

The request of \$58,256 PIF grant is for an integrated communication system, including 18 long range hospital compliant digital receiver devices for the Unit Support Associates and 6 pieces of safe patient handling equipment to decrease the staff requirement to perform transfers to gurneys.

The LAL Leadership team was charged with solving productivity and efficiency issues throughout the organization. They chose to analyze our current patient transport system to maximize efficiencies and ultimately improve our patients' experience.

Objective and subjective data were collected to determine what our patients and staff were experiencing with respect to our current patient transport system. Pre pilot data showed only a small percentage of transport events being performed by Unit Support Associates (USA). As a result of our "silo" approach, over half of our patients were late for their appointment, with the most common reason being unavailable clinical staff to transport or perform lateral transfers to and from gurneys in preparation for transportation. In addition, patients spent an average of 20 minutes waiting for their unit specific transporter or licensed staff to pick up and return them to their respective inpatient unit. As an organization committed to providing patient centered care, a very clear problem with the current system was evident.

The Rancho Transport Network (RTN) was a three month pilot implemented to address the current transport system inefficiencies and improve the patient centeredness of the transport system. The pilot shifted from a decentralized to a centralized transport center with walkie-talkies and pagers to coordinate transport events with current transport staff. The RTN pilot yielded a 45% increase in on-time arrival rate, our Unit Support Associates were now performing over 80 % of the transport events and our patients average wait times post appointment decreased to less than 10 minutes. Several key issues impacting further pilot success were evident:

- The current walkie-talkie system was inadequate to provide full hospital coverage for care continuity;
- Patients continued to be late to their appointments due to the high volume of clinical staff needed to perform lateral transfers from the bed to the gurney.
- Lack of portable patient transfer equipment (lifts) for dedicated use by USA significantly reduces the efficiency of the transfer process, staff productivity, and staff injuries and patient safety.

Algrid Leiga
January 13, 2011
Page 2

In interpreting the pilot data, it is clear that this centralization of USA, with the appropriate communication technology and portable lift equipment, would decrease the use of licensed clinical staff for transports allowing them to focus on patient centered care at the bedside. Furthermore, our subjective patient and staff surveys showed that centralization is far superior to our current system. As a result of the positive pilot outcomes, this new and innovative system was approved by Rancho Administration to continue.

With the requested equipment, this new and innovative Rancho Transport Network will maximize staff efficiencies; improve the patient experience with less waiting time on and being on time to clinic, and serve as a model system to be shared with other DHS facilities.

Thank you for your consideration of this Productivity Investment Fund proposal.

Respectfully Submitted,

Mitchell Katz, M.D. Director,
Department of Health Services

MK:JO:mt

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

Department: Department of Health Services

Date: 1/13/11

Project Name: Rancho Transport Network
See attached.

SUMMARY DESCRIPTION OF PROJECT (Describe the project, for example, new or replacement equipment or additional staff needed. NOTE: PIF projects should not fund staff unless the need is temporary/start-up/short term.)

A Rancho Los Amigos National Rehabilitation Center Leaders Are Learners (LAL) leadership development team chose to analyze the current patient transport system and implement a model that maximizes efficiencies, productivity, safety and patient satisfaction. The model was named the Rancho Transport Network (RTN).

Historically, Rancho used unit specific transport personnel known as Unit Support Associates (USA), whose primary role was to transport inpatients to and from their appointments throughout the hospital. The volume of appointments for each USA on their specific unit was very large. Using the current decentralized transport process increased wait times for transport, allowed for the inefficient use of nursing staff to lift and transport patients, and decreased patient satisfaction. In addition, there is insufficient lift equipment on each unit to facilitate the transfer of patients from bed to gurney or wheelchair.

The LAL Leadership team proposed a coordinated centralized USA transport network using state-of-the-art communication technology. The RTN would allow the USA to be quickly sent to the patient units to transport patients to and from their appointments. A three month pilot was approved by Administration to test the effectiveness of the Transport Network with the objective of positively impacting patient wait time for pick ups, on time rates to clinic, and USA productivity and efficiency.

The LAL development team sought to collect subjective and objective data about patient transport to determine what our patients were experiencing. Pre pilot data showed only 35% of patient transport events were performed by the Unit Support Associates and 65% of transport events were performed by licensed clinical staff due to the fluctuating volumes and unit specific "silo" approach to appointment transportation. In addition, 55% of all patients are at least 10 minutes late to their appointments (range was 7-70 minutes) and they spent an average of 20 minutes (range 5-75 minutes) waiting for their unit specific transporter or licensed staff to pick up and return them to their respective inpatient unit. As an organization committed to providing patient centered care in their strategic plan, this was unacceptable.

The subjective comments that accompanied these data points from our clinic staff and patients were as follows:

(Patient A) "I have been waiting for someone to pick me up and get me back to the unit so I can go to therapy. Now I am missing my appointment. This is not fair".

(Clinic staff) "How can I do my job if the patients are never here. It's not fair to the next patient who now has to wait and miss their therapy."

The 3 month pilot consisted of the centralization of the USA using borrowed walkie-talkies as primary communication devices. There were areas in the hospital with partial radio coverage but response times began to improve. As efficiencies increased throughout the pilot it was clear that another reason for the increased wait time involved the USA waiting for the nurse or therapist to lift the patient from the bed to the gurney or wheelchair. It was agreed that the USA could be trained as an "on-call" lift team, which would free up clinical staff and reduce the wait time for transfers. Lift teams are a best practice throughout the United States and have significantly reduced industrial injuries and improved patient safety. Essential to the lift team is training and the use of portable lifts on the units so that USA may have immediate access when needed. Patients would not have to wait for a nurse or therapist to complete transfers to wheelchairs and gurneys.

This PIF grant request for \$58,265 is for an integrated communication system, including digital long-range hospital compliant walkie talkie devices for each of the 10 USA's and six portable patient lift equipment. These devices and equipment will ensure the success and longevity of this recent pilot project, improve patient safety, increase productivity and efficiencies and provide superior customer service which is what our patients deserve.

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

SUMMARY OF BENEFITS (Describe benefits, for example, revenue increase, service enhancement, future cost avoidance, cost savings)

The Rancho Transport Network pilot validated that centralization of the USA is a far more effective method of transporting the inpatients. With the USA trained as a lift team, we will free up our most expensive clinical staff from transporting patients. Improved on time rates to clinic means medical appointment staff are able to complete much needed procedures; and our therapists are able to see their patients for the required amount of time, which has a direct impact on reimbursement from our payor sources. Our patients' experience with appointments has improved to an excellent rating.

Post pilot results showed significant decreases in the time patients spent waiting for pick-up, improvements in on-time rates to appointments, and a substantial increase in the number of transports events being performed by the USA's instead of clinical staff including nurses and therapy staff. Most importantly, our patient satisfaction surveys showed transportation scores improved from fair to excellent and our patients reported that they were happy to be on time for their therapy sessions and not waiting for pick-up up to 74 minutes.

The use of portable lifts by the "USA lift teams" will significantly reduce the number of injuries due to patient related activities. In 2010, at Rancho Los Amigos National Rehabilitation Center, 26 workers compensation claims were filed for a total of \$221,000. The literature strongly recognizes lift teams as a best practice that significantly reduces industrial accident claims and improves patient safety. (Healthcare Research and Quality, California Nurses Association, Institute for Healthcare Improvement)

This PIF grant request for \$58,256 is for an integrated communication system, including digital long-range hospital compliant walkie-talkie devices for each of the USA and patient lift equipment. These devices and equipment will ensure the success and sustainability of this recent pilot project and provide superior customer service which is what our patients deserve. No additional staff will be needed.

With efficiencies built into the new centralized Rancho Transport Network and the acquisition of the communication devices and portable lift equipment, we anticipate that all measures of success looked at in our pilot will show positive results if initiated hospital wide, thus leading to greater efficiencies, lower costs, and a more patient centered experience.

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

EVALUATION/PERFORMANCE MEASURES (What is to be achieved and how will the project lead to enhanced quality and/or productivity? What measures will be used to evaluate the attainment of these goals?)

Below are the measures of success and proposed benchmarks for the three month pilot and our long-term program goals.

	Current Pre-Pilot	Pilot (phase II) Actual	LTG (1 year)
Transportation to appointments by Unit Support Associates	33%	80%	90%
On time to appointments	45%	70%	85%
Waiting Less than 10 Minutes post appointments	37.5%	85%	100%
On time to Therapy	35%	75%	90%

***Subject post pilot data revealed a significant increase in patient satisfaction from a 3 on a scale of 1-10 to 8.

*** Clinic/appointment staff reported an improvement from a 4 to a 9 in terms of their perception regarding patients being on time and not waiting for a long time after their appointment.***

Some of the comments on the post pilot surveys were as follows:

"I cannot believe what has been accomplished in such a short time. I cannot wait until this program role's out hospital wide." (clinic staff)

"My nurses are now able to care for their patients and meet their medical needs because they no longer need to transport patients to their appointments." (nurse manager)

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

Is this an Information Technology project? If yes, is the IT form attached?
 Yes No N/A

<u>Amount Requested:</u>		
<u>Loan</u>	<u>Grant</u>	<u>Total</u>
_____	<u>\$58,256</u>	\$58,256

Cost Analysis Summary. Attach detail for A and B, including staff, equipment, supplies, etc.

	<u>Implementation Period</u>	<u>Project Year 1</u>	<u>Project Year 2</u>	<u>Project Year 3</u>
A. Annual Cost of Current Process:				
B. Estimated Annual Cost of Proposal:				
C. Savings (B minus A)		\$0.00	\$0.00	\$0.00

Funds Flow Summary: Indicate the amount of funds needed during implementation by period (fiscal year and quarter)

This request is for a one time funding for mobile lift equipment to use for lifting patients to and from gurneys and wheelchairs and for long range hospital compliant walkie-talkie devices which can utilize Rancho Los Amigos' current existing FCC license.

Productivity Manager (Print and Sign)
Cheryl Guinn

Telephone Number
 562-401-7602

E-mail
 cguinn@dhs.lacounty.gov

Project Manager (Print and Sign)
Jorge Orozco

Telephone Number
 562-401-7022

E-mail
 jorozco@dhs.lacounty.gov

Department Head (Print and Sign)
Mitchell Katz M.D.

Telephone Number
 213-240-8101

E-mail
 mkatz@dhs.lacounty.gov

Budget/Finance Manager (Print and Sign)
Robin Bayus

Telephone Number
 562-401-7327

E-mail
 rbayus@dhs.lacounty.gov

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

QUESTIONS

1. Has this proposal been submitted before for a Productivity Investment Fund loan or grant? Yes No
 If so, when (date)?

2. Was this proposal included in the department's current budget request?
 Yes No

The pilot project was approved by Rancho Los Amigos Administration in September, 2010, and will re-distribute staff to support Rancho Transport Network. It was not included in Rancho's FY 10/11 because it was a new project. Rancho's current budget is the victim of a significant reduction and the hospital is challenged to meet its obligations to providing safe, efficient, and cost effective care. The need to transform the patient care delivery system is driven by Health Care Reform and Medicaid Waiver. The majority of Rancho's discretionary budget is focused on transforming care delivery systems and the creation of specialized medical homes for persons with disabilities. This transport network project will allow Rancho to implement much needed efficiencies that will significantly impact delivery of patient care, improve patient and staff satisfaction, improve staff and clinic productivity, and improve the efficient use of staff at all levels, specifically clinical staff.

3. How much of this proposal is for a loan and how much for grant funding?
 Loan \$ _____ Grant \$ 58,256 Total \$ 58,256

4. How many years will it take for the loan to be paid back (3 year maximum without special approval)? N/A

5. When will the funds be needed? Please indicate fiscal year and quarter:

2009-2010

1st Quarter
 2nd Quarter
 3rd Quarter
 4th Quarter

2010-2011

1st Quarter
 2nd Quarter _____
 3rd Quarter
 4th Quarter \$34,803

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

2011-2012

1st Quarter _____

2nd Quarter _____ \$23,453

3rd Quarter _____

4th Quarter _____

2012-2013

1st Quarter _____

2nd Quarter _____

3rd Quarter _____

4th Quarter _____

6. Where will the funds come from to repay the loan? NA grant funding request

7. Hard dollar savings
 Revenue generation

Cost Avoidance X
 Other (please explain):

8. If this is a grant, does it reduce net County cost?

No, the Rancho Transport Network is service enhancement and productivity improvement project. With the coordination of resources, more expensive clinical staff will be able to work with patients on clinically related procedures vs. transporting patients to and from appointments. During our initial pilot study, approximately 65% of transportation occurred using nursing staff, taking them away from providing direct patient care on their units. This time away from patient care equals 670 minutes per day or over 11 hours away from taking care of patients. In a year, this equates to over 2,900 hours away from direct patient care. By returning these hours to the patient, we improve patient care without utilizing additional nursing resources or staff.

We anticipate that this project will also increase efficiencies in our clinics as patients will be on time and our patients will not be waiting for pick-up outside of the special test doors and can be participating in much needed and billable therapy procedures. The patient lift equipment will allow for staff to be more effective and efficient in transferring patient to and from gurneys. What once took three to four staff to do will now only take one to two.

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

9. Does this proposal provide technology transferability to other departments?

Yes, the grand vision is to apply the technology infrastructure of the patient transport system and utilize it to strengthen our disaster management and hospital wide disaster communication tree, which is under the same constraints as our piloted transport system.

10. Does this proposal eliminate a function?

This proposal does not eliminate a function or county position, however it does allow us to work more efficiently and maximize our limited resources.

11. Does this proposal enhance the County image or provide an innovative service?

Yes. With the documented results and success of the pilot program, this improved staff efficiency and use of state-of-the-art communication technology will certainly improve the County's image. The elements of the patient transport network can be shared and utilized at other county healthcare facilities. The most important people in our health care team are our patients. We, as a facility, have heard their voices and want to implement the needed changes that our patients deserve. The patient and staff satisfaction surveys, issued both pre and post pilot, showed a significant increase in both patient and staff satisfaction with the new program vs. the current system of transportation.

12. Does this proposal promote interdepartmental cooperation?

Yes, this proposal's fundamental premise is that if you maximize the ability to communicate among all departments with technology and rethink the way business is performed, then you will maximize resources you have.

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

13. Has this proposal gone through a pilot?

Yes, a three month pilot was completed in 2010, and the results are stated above.

14. Where did the original idea for this project come from?

Multiple patient and staff complaints were analyzed by a Leaders Are Learners Leadership development program as the program pilot project.

15. Have you looked at the *Alliance for Innovation* (www.transformgov.org) for similar projects and resource information? What did you find?

Yes, no similar project seen.

IMPLEMENTATION PLAN

<u>KEY MILESTONES</u>	<u>START DATE</u>	<u>FUNDS NEEDED</u>	<u>FUNDS REPAID</u>
(Major steps in the project development)	(Estimated date for each project step)	(Amount and quarter funds will be needed)	(Amount and quarter funds will be repaid)
Purchase of 18 Walkie-talkies (digital receiver), repeaters	2nd qtr 2011	\$34,803	\$n/a
Staff training for walkie-talkies, repeater installation	3rd qtr 2011	\$0	\$n/a
Assessment of lifts to purchase	3rd qtr 2011	\$0	\$n/a
Purchase of (2) Liko Sabina sit to stand lifts (2) Liko roll on standers (2) Airpal Lateral Transfer device	4th qtr 2011	\$23,453	\$n/a
Staff Training for lifts	1 st quarter 2012	\$0	\$n/a

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

LINE ITEM BUDGET DETAIL

Salaries and Employee Benefits

Salaries/Wages

Employee Benefits

(a) Total Salaries and Employee Benefits \$ NA

Services and Supplies

List all services and supplies here

(b) Total services and supplies \$ NA

Other Charges

List all other charges here

(c) Total other charges \$ NA

Fixed Assets

<i>Item</i>	<i>Individual Cost</i>	<i># of Items Needed</i>	<i>Total Cost</i>
<i>Liko Sabina Sit to Stand Lifts</i>	<i>\$4,923.50</i>	<i>2</i>	<i>\$9,847</i>
<i>Liko Roll On Standers</i>	<i>\$2,326.50</i>	<i>2</i>	<i>\$4,653</i>
<i>Relay Repeaters</i>	<i>\$4,476.50</i>	<i>2</i>	<i>\$8,953</i>
<i>Airpal Lateral Transfer Device</i>	<i>\$6,401.50</i>	<i>2</i>	<i>\$12,803</i>
<i>Digital Receiver Sets (with wireless ear pieces)</i>	<i>\$1,222.22</i>	<i>18</i>	<i>\$22,000</i>

Total = \$58,256

INFORMATION TECHNOLOGY STATEMENT

1. Is the proposed hardware or software technology compatible with existing and related systems? Specifically, does it conform to the Business Automated Plan?

Yes, similar equipment is currently in use by LAC/USC Medical Center's public safety department and can be utilized with existing antenna and repeater networks at Rancho.

County of Los Angeles Quality and Productivity Commission
PRODUCTIVITY INVESTMENT FUND PROPOSAL

2. Does the proposal represent state-of-the-art technology?

Yes, products meet all FCC guidelines for hospital environments.

3. Does the proposed technology-based solution conform to your department's strategic or automation plan and the County's future direction of technology?

Yes, similar equipment is currently in use by LAC/USC Medical Center's public safety department and can be utilized with existing antenna and repeater networks at Rancho.

4. Do you have existing knowledge of the proposed technology-based solution?

Yes, IT is familiar with the proposed system.

5. Will you be able to support the technology-based solution with existing staff?

Yes.

6. Will staff have to be trained in the new technology and its supporting infrastructure?

Yes, staff training is included with equipment purchase price.

7. Will you hire a contractor to provide the technology-based solution or hire dedicated county staff?

No additional staff will be hired. Equipment will be provided by a county approved vendor.

Final