Performance at a Higher Level – Leadership Development, HCAHPS, Clinical Quality and More!

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President & CEO

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PERFORMANCE
at a Higher Level

Glendale Adventist Medical Center
Adventist Health

History

- Seventh Day Adventist Church leaders felt a need to open a “Sanitarium” in Los Angeles
- Opened in 1905 in old hotel/school after miraculous signs from God suggested “this is the place”!
- 75 Rooms
- Guest Rates: $16 - $25 per week
- Employee Pay: $.06 - $.08 per hour
- Average Length of Stay: 30-40 days

Today:

- 515 licensed beds
- 2500 employees
- 750 physicians
- Key service lines/Technology: CVS, Neuro intervention, SILS, Da Vinci, Makoplasty, OB/NICU, Cancer, Psych, Rehab
- ALOS still too long!

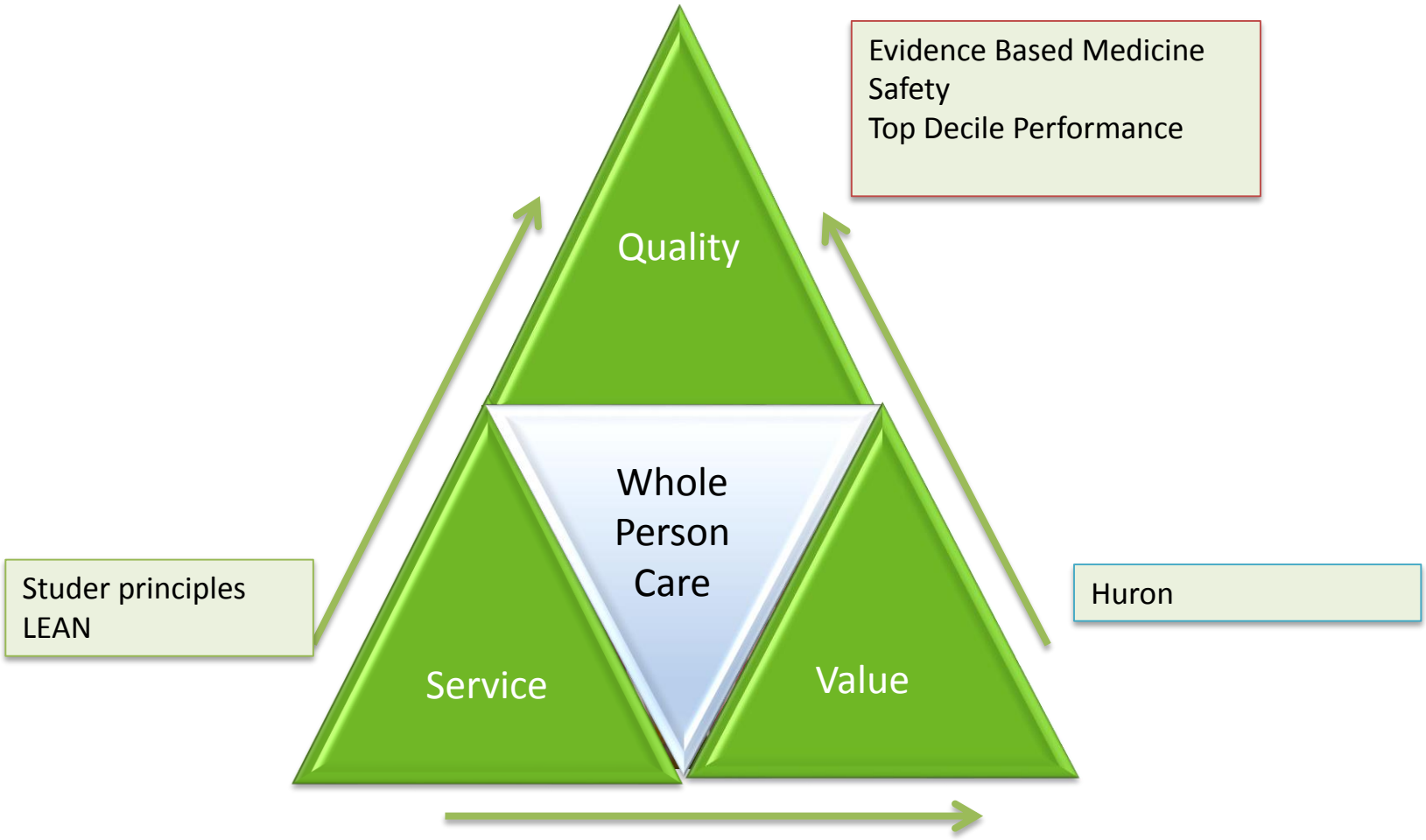
Adventist Health

- 17 Hospitals
- Corporate Office, Roseville, CA

Our Mission:

"To share God's love with our community by promoting healing and wellness for the whole person."

Healthcare - Triple Aim



Economic Conditions in Parallel with PHL

- Pending Medicare DSH cuts ($14M/year) looming over operational stability
- Medi/Medi Duals eligible conversion to managed care
- (+) New $220M tower….(-) LTD depreciation!
- Hired consultant to help identify, implement and hardwire more efficient operations across the board.

GAMC (Kevin's) Report Card

YTD May 2012

Adventist Health

Mission

- Increase Patient Perception – Spirit of Compassion & Caring by Care Team (Always)
- Attention to your unique religious/spiritual needs? (Always)

People

- Increase Employee Satisfaction – Overall as a place to work
- Increase Physician Satisfaction – Overall as a place to practice medicine

Service

- Increase Patient Satisfaction – Responsiveness of Staff
- Increase Patient Satisfaction – Overall Rating

Quality

- Core Measures (AMI, CAP, HF, SCIP)
- Patient Safety - Significantly reduce patient harm
  - MRSA/CLABSI
  - Falls
  - VAPs
  - **CAUTI's (goal 0)**
- Risk Adjusted Mortality

Growth

- Inpatient Discharges
- Outpatient Registrations
- Net Patient Revenue Growth Income Statement: Net. Pt. Rev. – Bad Debt + Premium Rev.

Finance/ Community

- EBIDA $
- Paid Hours per WPD
- Philanthropy Pledges for Capital Campaign

HCAHPS Stoplight Report

Discharge Dates From Oct 1, 2011 to Jun 30, 2012

https://catalyst.nrcpicker.com/GlendaleMedicalCenter/HCAHPSStoplightReport/default.aspx June 01, 2012

CATA Accelerati

	Benchmarks		Rolling Averages up to 4/29/2012		HCAHPS		
Overall	NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?	74.4% (n=161,976)	70.0% (n=6,021)	71.6% PR=64 (n=81)	67.5% PR=45 (n=302)	66.7%µ (n=15)	69.0% (n=87)	61.8% (n=68)

Key Drivers	NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
Communication with Nurses	80.2% (n=164,752)	76.5% (n=6,101)	70.4% PR=14 (n=81)	70.2% PR=14 (n=304)	62.2%µ (n=15)	72.5% (n=86)	71.0% (n=70)
Cleanliness / Quietness	69.6% (n=164,630)	63.7% (n=6,094)	59.1% PR=25 (n=82)	60.9% PR=31 (n=307)	71.9%µ (n=16)	56.3% (n=87)	63.0% (n=69)
Communication with Doctors	82.6% (n=164,101)	78.5% (n=6,078)	70.9% PR=7 (n=82)	74.0% PR=21 (n=307)	64.6%µ (n=16)	72.0% (n=87)	79.0% (n=70)

Emergency Stoplight Report

Discharge Dates From Oct 1, 2011 to Jun 30, 2012

https://catalyst.nrcpicker.com/GlendaleMedicalCenter/EmergencyStoplightReport/default.aspx June 01, 2012

CATALYST Accelerating Improvement

Overall	Picker Dimensions	Benchmarks		Rolling Averages up to 4/29/2012		Emergency		
		NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?		68.9% (n=116,783)	64.4% (n=5,591)	64.7% PR=54 (n=150)	65.6% PR=60 (n=506)	74.2% (n=31)	65.2% (n=181)	68.2% (n=195)

Key Drivers		NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
How often did the staff do everything they could to help you with your pain?	Physical Comfort	69.3% (n=46,591)	60.8% (n=2,841)	63.0% PR=52 (n=73)	59.9% PR=39 (n=269)	70.0%µ (n=10)	63.7% (n=91)	58.3% (n=115)
Do you think that you received the right treatment in the emergency room (e.g., tests, diagnosis, medications, etc)?	Coordination of Care	72.3% (n=90,551)	67.4% (n=5,600)	61.8% PR=23 (n=144)	63.1% PR=28 (n=501)	67.9%µ (n=28)	61.8% (n=178)	62.8% (n=196)
How often was there good communication between the different doctors and nurses?	Coordination of Care	70.3% (n=90,204)	62.2% (n=5,296)	54.2% PR=15 (n=144)	54.7% PR=16 (n=483)	56.7% (n=30)	54.4% (n=171)	54.0% (n=187)

FIRST PHL SUMMIT

JUNE 26, 2012

PERFORMANCE
at a Higher Level

Glendale Adventist Medical Center
Adventist Health

Different ways to accomplish the same thing

- http://www.youtube.com/watch?v=S-_5CdVxX3Q
- http://www.youtube.com/results?search_query=michael+phelps+freestyle+technique&sm=1

Key Elements of our PHL Journey

- Had to reveal the unpleasant “truth”
- Quarterly events
- Included Charge Nurses from day 1
- Driven by CEO and entire Executive Team
- Persistence, persistence, persistence in training, retraining of best-known practices!
- Blessed to have a workforce with great caring culture who wants to be world-class

FICTITIOUS Los Angeles Times Article

Written June 2012

Today, Glendale Adventist Medical Center was recognized as the best hospital in all Los Angeles County by receiving 35,000 votes from local members of the Los Angeles community. One eager community member, Ima R. Happy stated "I just can't believe what's happened at my hospital! I went there for a broken hip and had to have surgery. Those nurses were on me like an Italian suit. They **made me feel so comfortable, kept me informed of my condition** and **I even went home a day earlier than my doctor predicted**. **I barely remember being in pain at all** because they constantly kept it in check." She went on to say that "the housekeepers were the sweetest folks and **I slept like a baby at night**!"

Nursing Director, Punnoose Varghese, declared that "In recent months our leadership team really pulled together to be more consistent with the practices we know work best! **Our staff have found that patients are happier, they use the call lights less often** and **they even are healing faster**!"

Adventist Health

- Hospital management informed the press that they had embarked on what they called a “Performance at a Higher Level “journey where all the leaders committed to using best practices in leadership and hospital systems. By aligning their goals, working diligently to implement their actions, and holding each other accountable, they saw substantial improvement in several areas. Most notably, **the key driver experiences went from the bottom quartile (25th percent or below) to the 90th percentile since June 2012.** Additionally, **with all the buzz in the community about the noticeable improvements, the number of patients and doctors using the hospital went up significantly**, therefore helping the hospital attract and retain the best staff and have healthy financial performance.

CFO, Kelly Turner was quoted as saying, “Yes, we are very pleased, not only are we serving our community and mission, but in the tumult of healthcare reform, it is great to see how much our patients and doctors appreciate the care here. And **it has helped stabilize us in financially tough times**.”

Studer Group, a partner in this Performance at a Higher Level journey **has invited leaders from GAMC to their annual showcase of best performers called "What's Right in Healthcare?"** This year in Paris, France, the GAMC team will explain how they used evidence-based leadership principles to turn around these important publicly reported measures of quality and service.

One new and important publicly reported measure is hospital mortality. **In May 2012 this rate was 1.18. The most recent quarter showed this at .70.** The new Vice President of Medical Affairs and Quality Arby Nahapetian explained it like this. "**Our physicians really came together to communicate better with each other and the clinical staff.** Our development of team oriented care and peer review has made great strides. Each department has committed to embrace the best known medical practices and hold each other accountable. **Coincidentally, the satisfaction of the doctors has improved as well."**

The local mayor congratulated GAMC saying, **"We always knew we had the best hospital in Los Angeles in GAMC, I just wonder why it took so long for everyone else to notice too!"**

- I asked the entire management team to help set a date in time that THEY believed this article could be published:

  We agreed on December 25, 2013

Evidence-Based Leadership (EBL)℠

Leader Evaluation → **Leader Development** → **Must Haves®** → **Performance Gap** → **Standardization** → **Accelerators**

Aligned Goals

- Implement an organization-wide leadership evaluation system to hardwire objective accountability

(Principle 7)

- Create process to assist leaders in developing skills and leadership competencies necessary to attain desired results

(Principle 4 & 8)

Aligned Behavior

- Must Haves®
- Rounding
- Thank You Notes
- Employee Selection
- Pre and Post Phone Calls
- Key Words at Key Times

(Principle 3, 5, 6, & 9)

- Re-recruit high and middle performers
- Move low performers up or out

(Principle 4)

Aligned Process

- Agendas by pillar
- Peer interviewing
- 30/90 day sessions
- Pillar goals

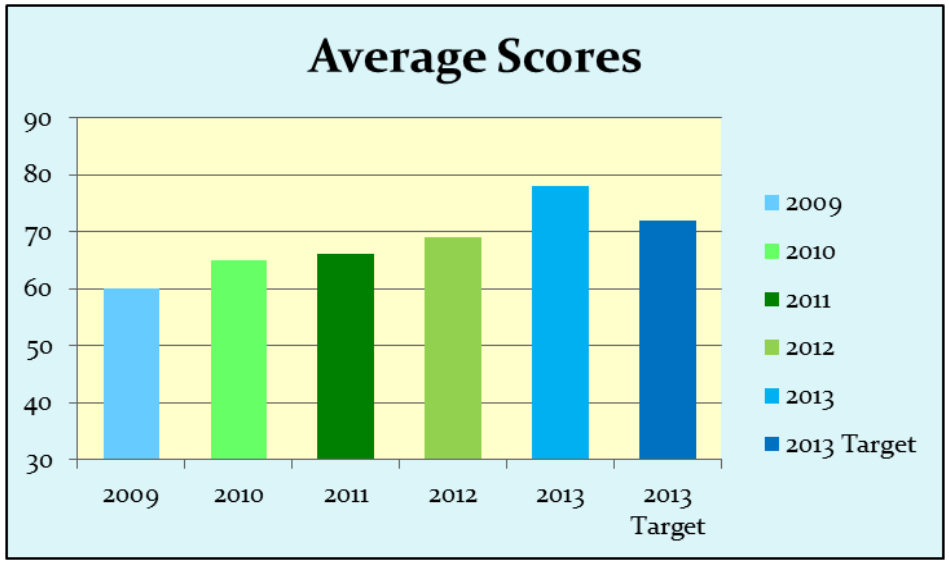
(Principle 1 & 2)

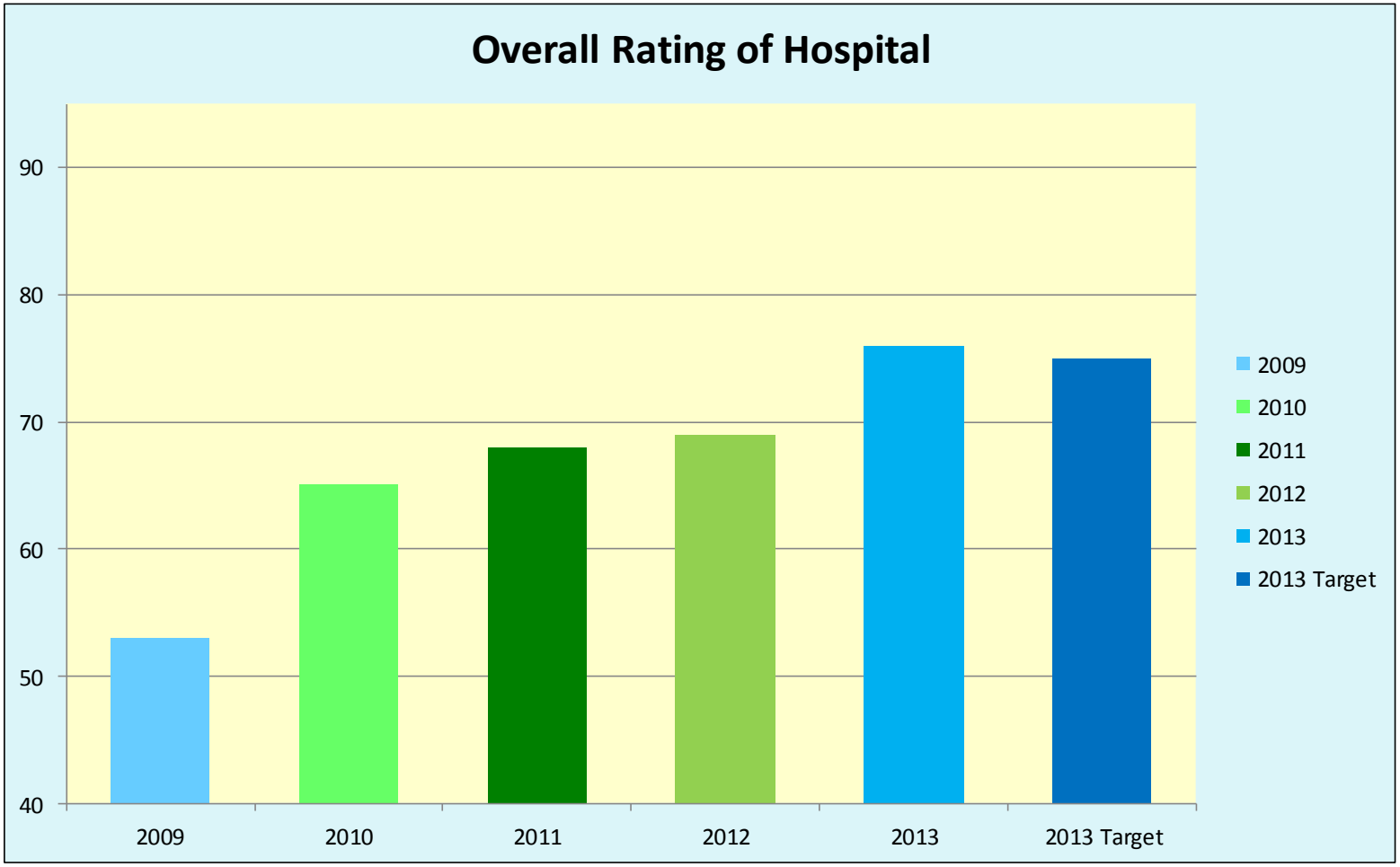
- Leader Eval Mgr™ (LEM)

Fast Forward 18 months

Judy Blair, Senior VP
for Patient Care &
CNO

HCAHPS	2009	2010	2011	2012	2013	2013 Target
Rate	53	65	68	69	76	75
Clean/Quiet	51	61	61	63	72	70
Comm Doctors	74	76	78	74	84	79
Comm Nurses	63	68	71	70	83	75
Responsiveness	46	55	56	56	71	61
Pain	60	61	63	64	78	68
Medications	53	53	54	52	68	58
Discharge	77	79	79	86	89	90
Average Total	60	65	66	69	78	72




Overall Rating of Hospital
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40
2009
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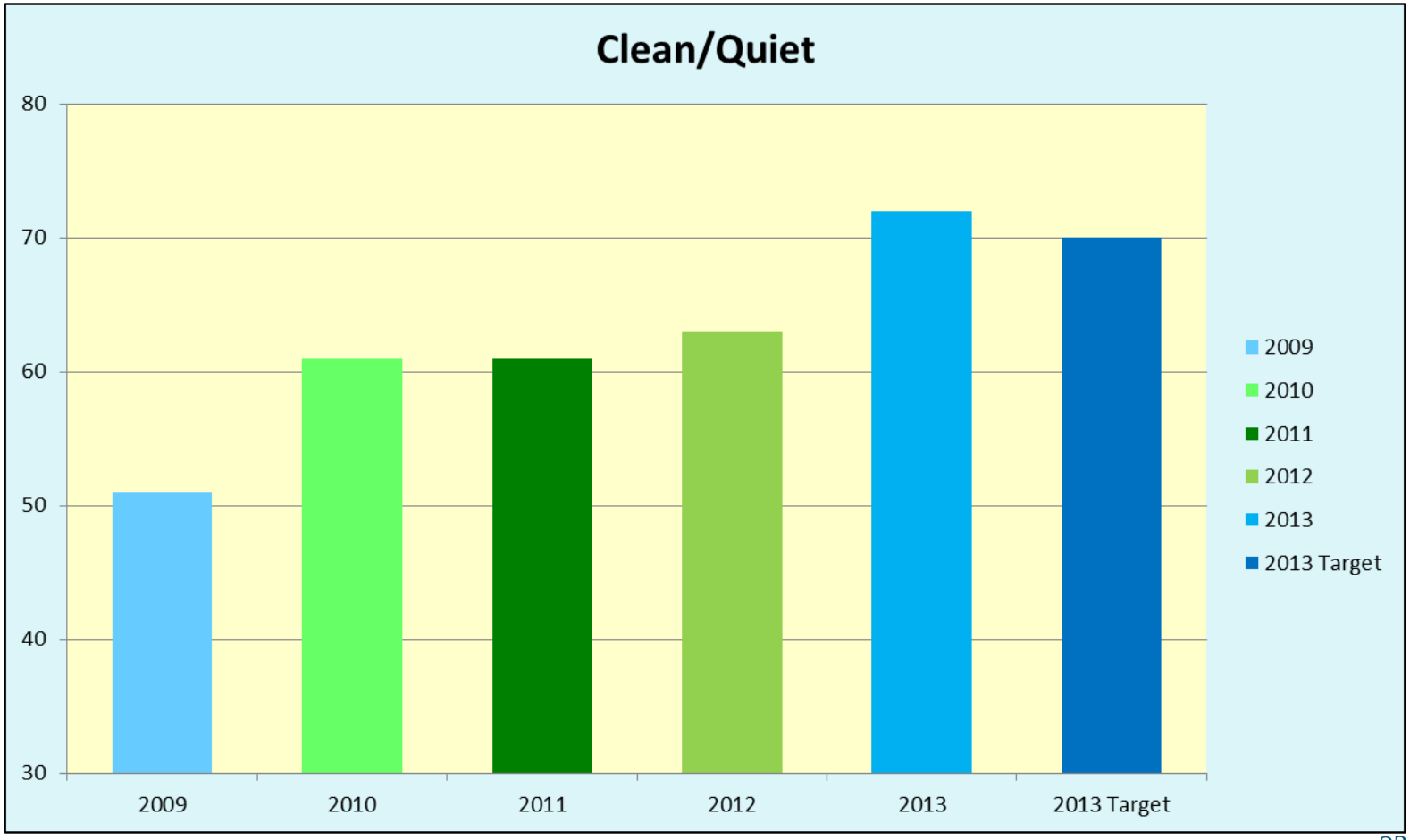
2011
2012
2013
2013 Target
2009
2010
2011
2012
2013
2013 Target


Clean/Quiet
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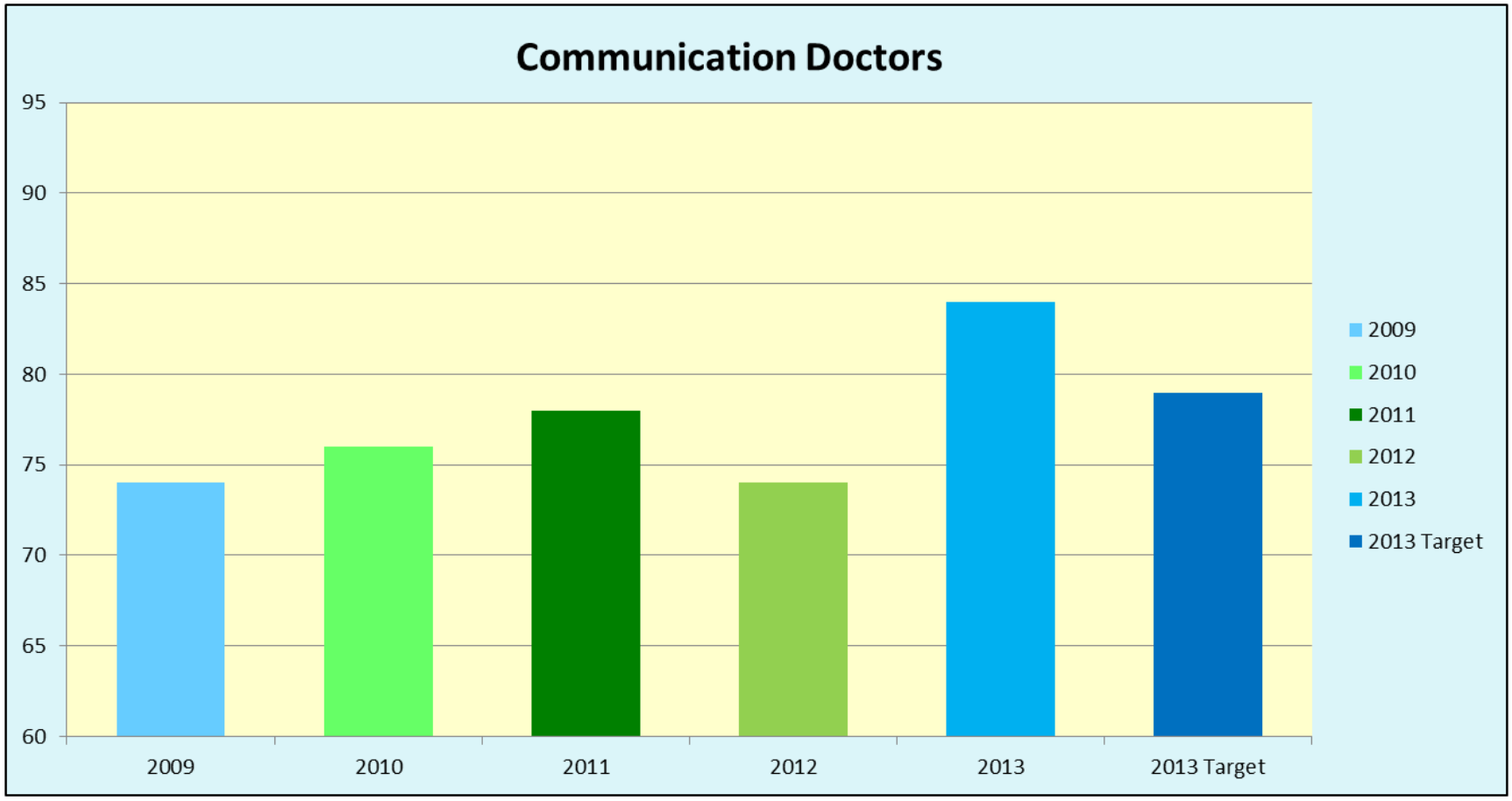
Communication Doctors
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2013 Target
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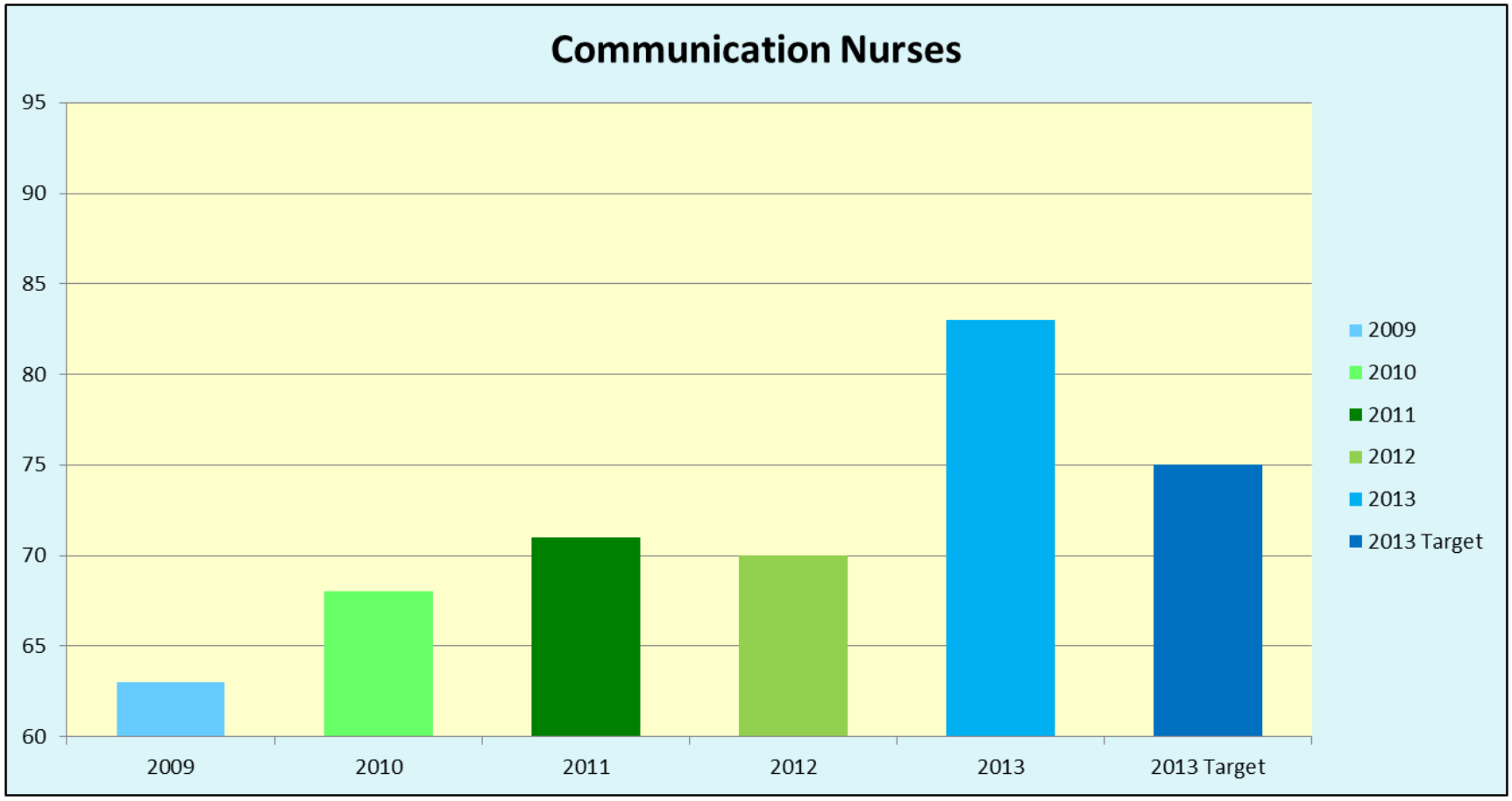
2013 Target


Communication Nurses
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2013 Target
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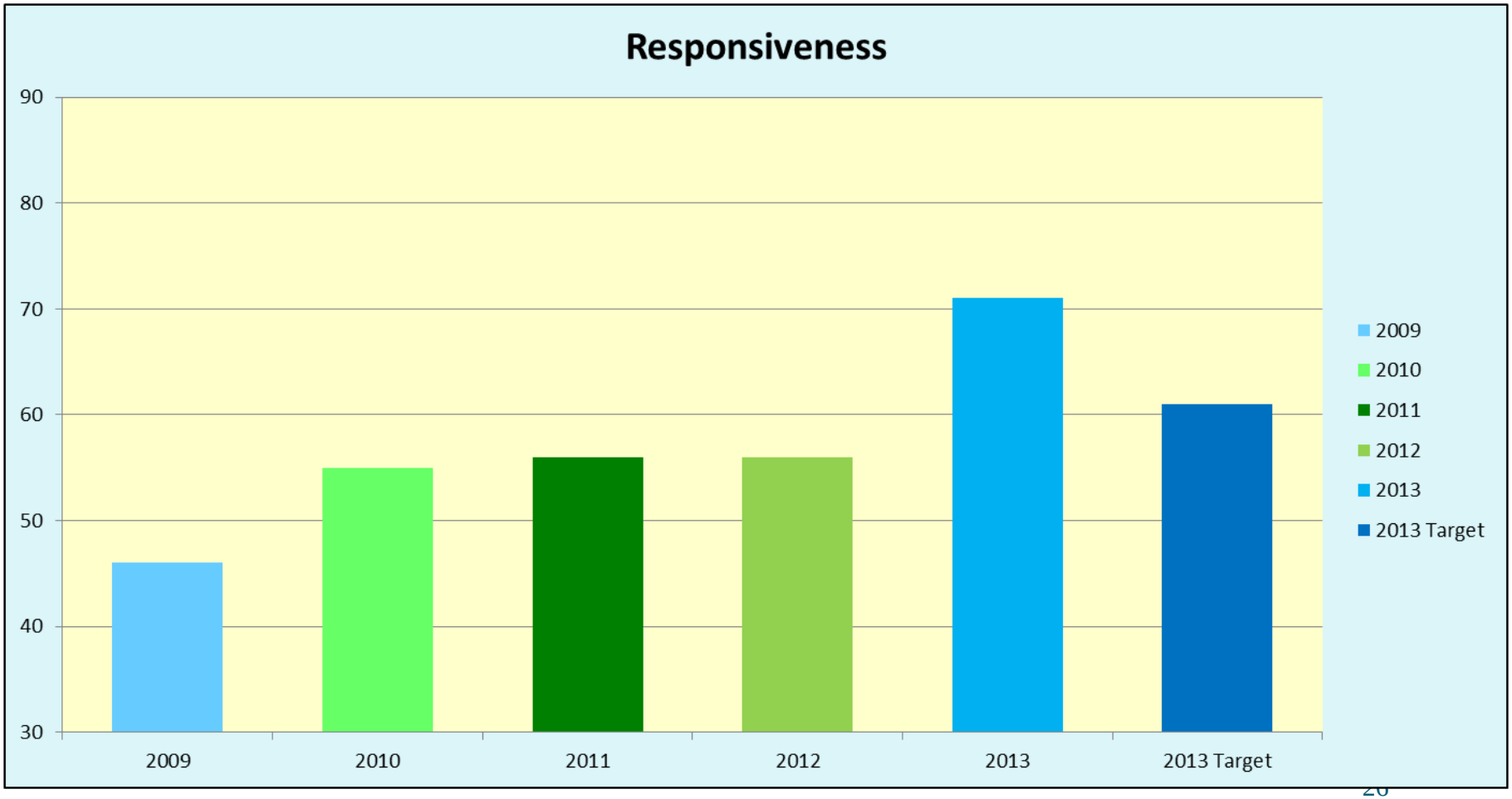
2013 Target


Responsiveness
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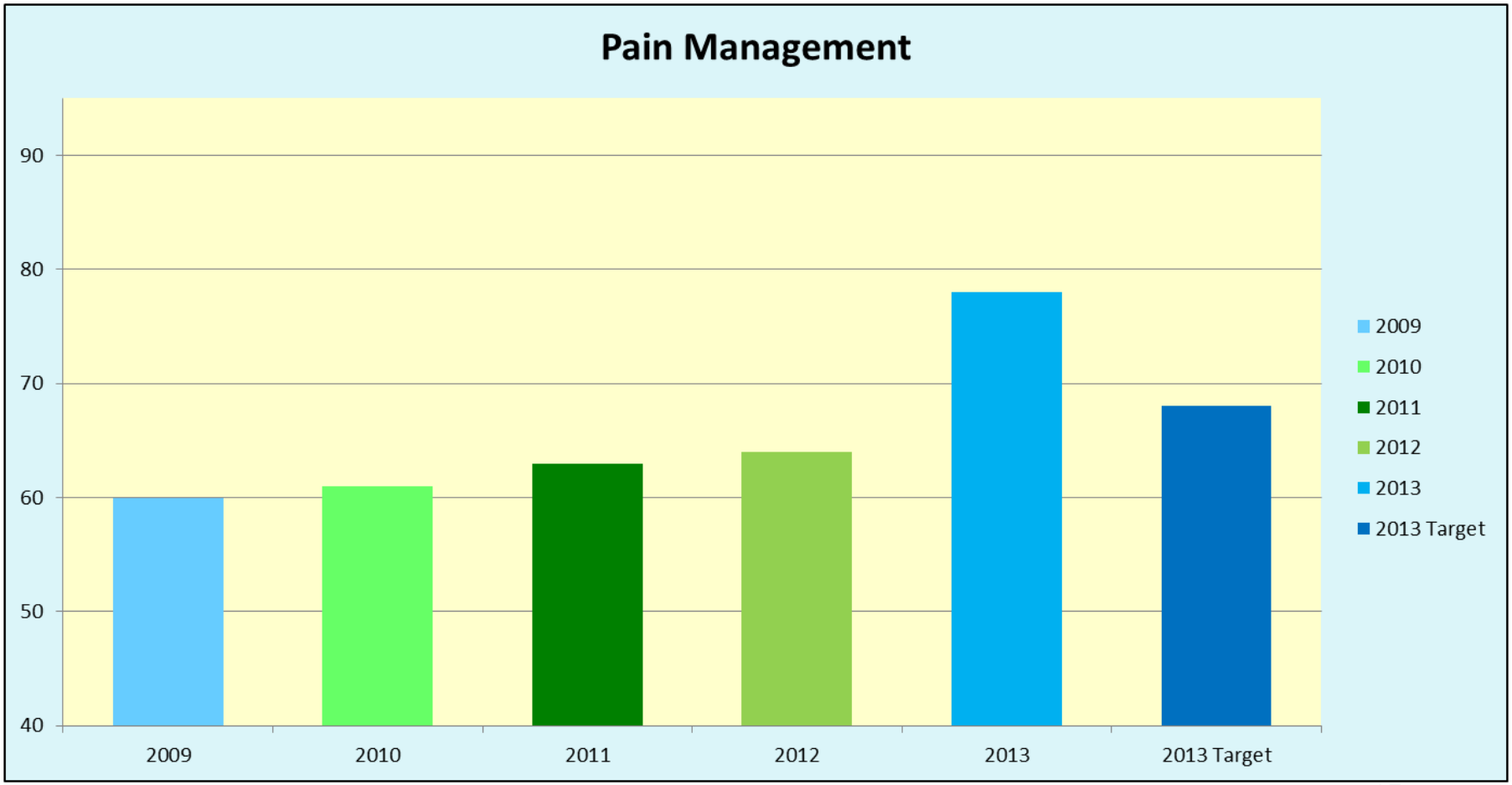
2013 Target


Pain Management
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2013 Target
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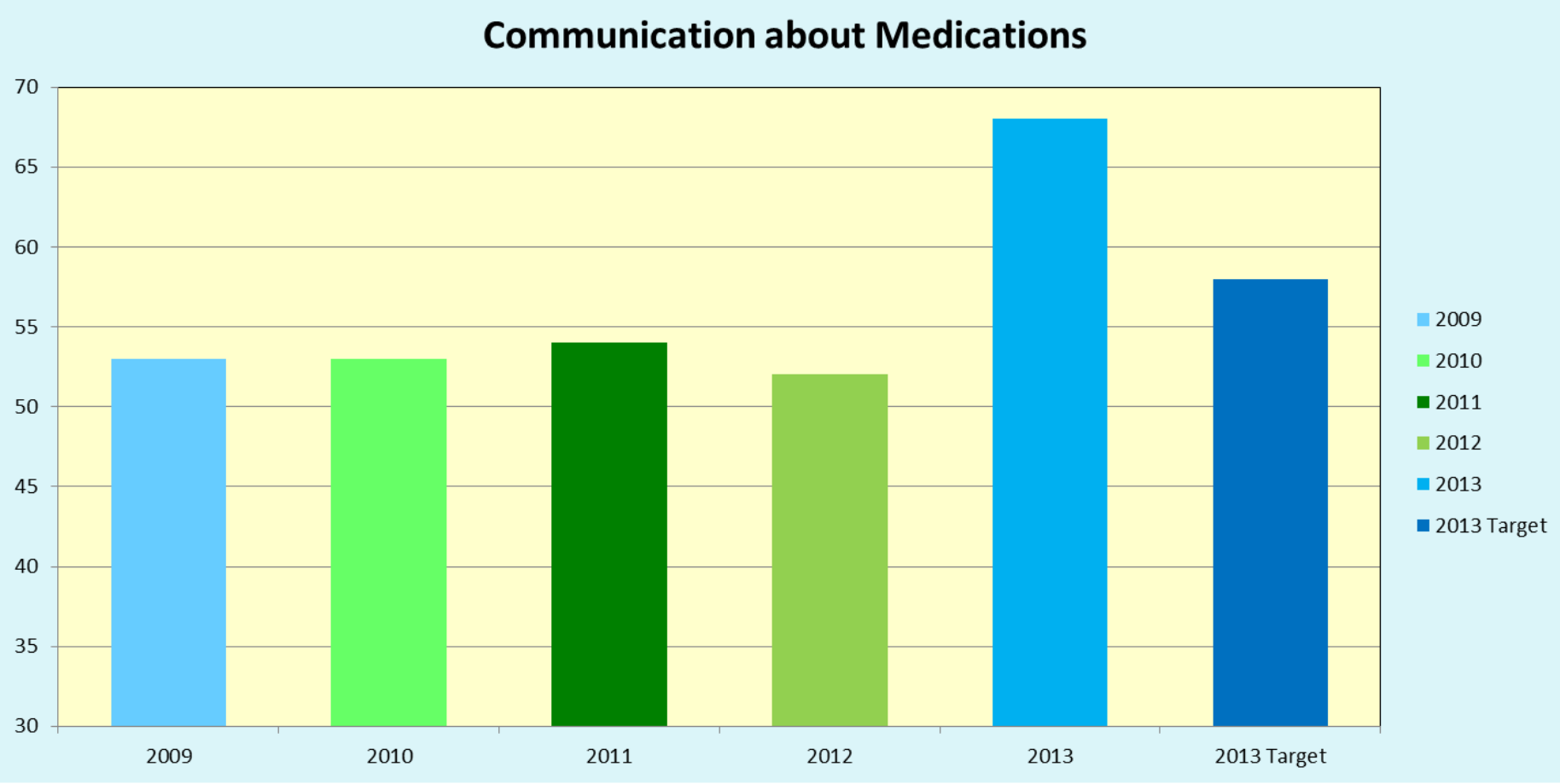
Communication about Medications
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2013 Target
2009
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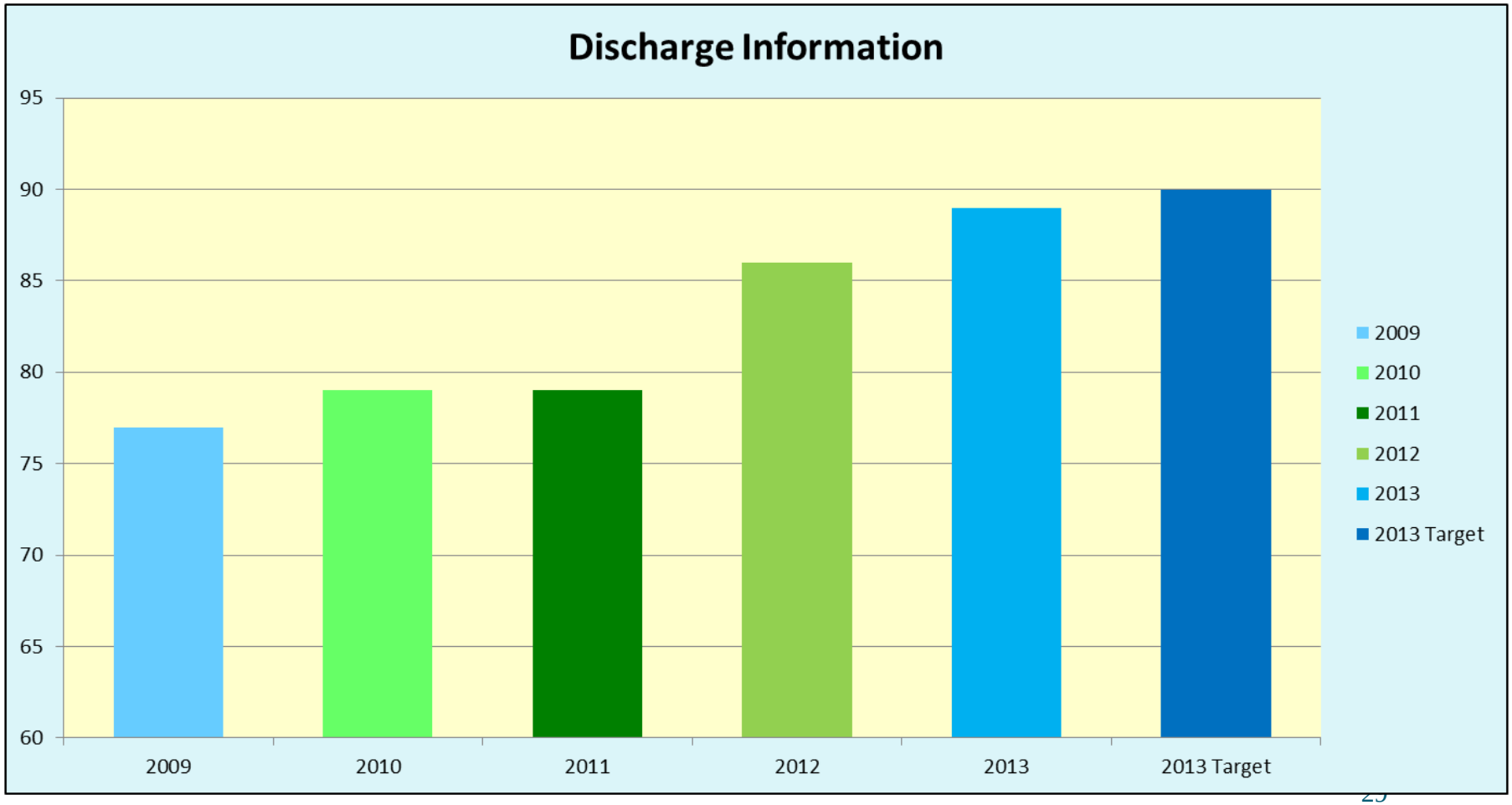
2012
2013
2013 Target


Discharge Information
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2013 Target
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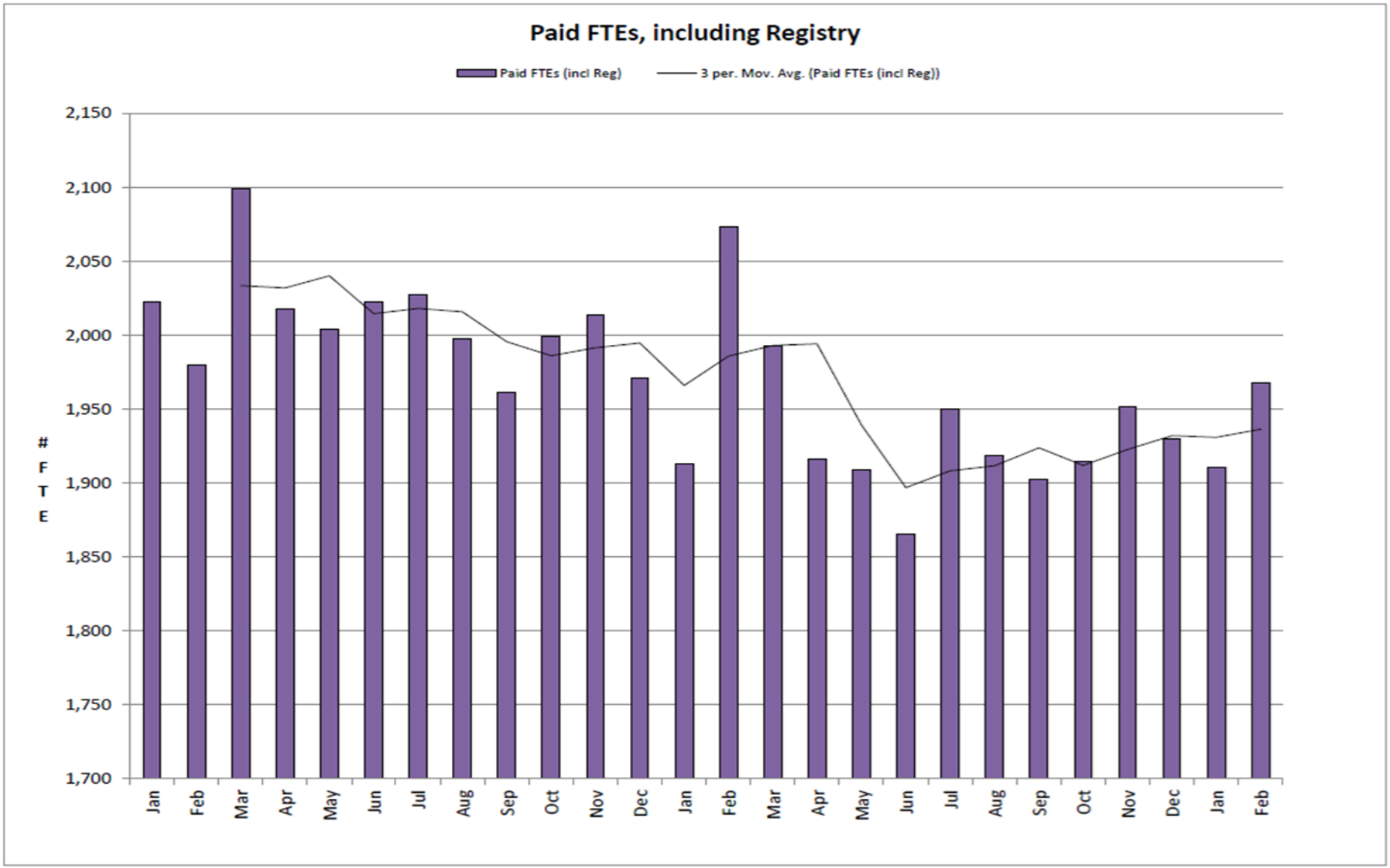
2013 Target


Paid FTEs, including Registry
Paid FTEs (incl Reg)
3 per. Mov. Avg. (Paid FTEs (incl Reg))
FTE
2,150
2,100
2,050
2,000
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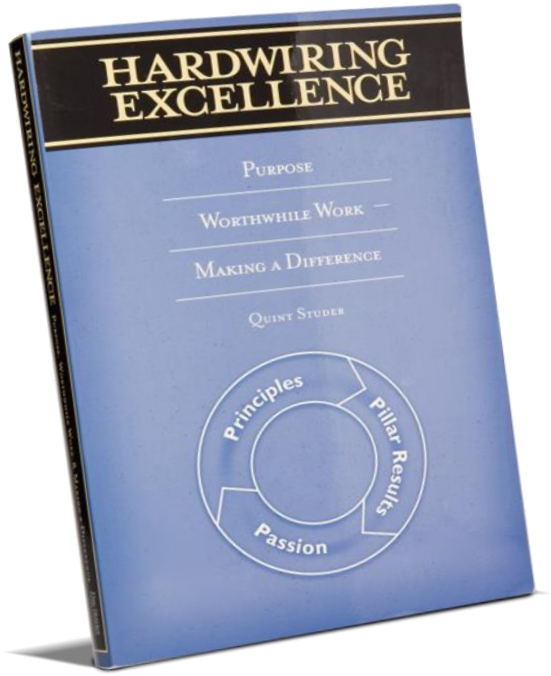
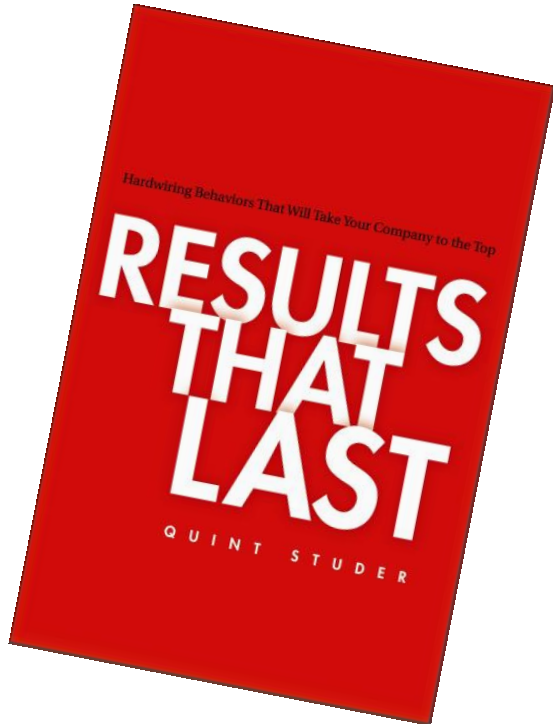
PERFORMANCE
at a Higher Level

Glendale Adventist Medical Center

Adventist Health





- What Makes the Difference
  - Make Learning Fun
    - Develop Themes for Leadership Training
      - Avengers Unite
      - Mission is Possible
      - Red Carpet Event
      - Red, White & True Blue
      - Destination Excellence

PERFORMANCE
at a Higher Level

Glendale Adventist Medical Center
Adventist Health

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PERFORMANCE
at a Higher Level

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- http://www.youtube.com/watch?v=MH9-HefQM_M&feature=youtu.be

- What Makes the Difference continued…
  - Appreciation and Celebration
    - Pizza Lunches
    - Monthly Shared Nurse Get Together
    - Huddles
    - Plaques and Roving Trophies
    - Unit Celebrations

- **What Makes the Difference continued…**
  - **Accountability**
    - **Hourly Rounding**
    - **Leader Rounding on Patients (goal 100% daily)**
    - **Director Rounding on Staff**
    - **Discharge Phone Calls**
    - **Weekly Huddles / Discussion**

- **What Makes the Difference continued….**
  - **Rewrote Charge Nurse Competencies**
  - **Day Away for Relief Charge Nurse Training**
  - **Thank You Cards**
  - **Meet Regularly with Directors to Plan**
  - **Communication at all Levels**
  - **Free Low Performers for other Opportunities**

Nursing Rocks PHL

- http://www.youtube.com/watch?v=JoLq32wRTsc

You must keep raising the bar….. everyone else is

Adventist Health

Zary Koftikain, RN, BSN

Assistant Director, Telemetry Services

CARDIAC INTERVENTIONAL TELEMETRY UNIT

Faith
GAMC RECOGNIZES:
CITU
Outstanding Performance
in C. difficile Surveillance
2013
GAMC RECOGNIZES:
CITU
Outstanding Performance
In CLABSI Prevention
2012-2013

HOW DID IT WORK

Validation

Recognition

Accountability

Consistency

Connecting the dots

PERFORMANCE AT A HIGHER LEVEL INITIATIVE VALIDATION

Adventist Health

Rigorous quarterly validations

As staff becomes confident in their skills and behavior, raise the bar

HARVEST RECOGNITION

Leader round on patients

- To assess quality of care
- To reinforce c are, verify nursing behaviors
- Harvest recognition
- Service recovery

Leader round on staff

- Obtain actionable information
- Shaw staff you care
- Equipment needed
- Systems that are nor working properly
- Opportunity to initiate discussions on professional growth
- Harvest recognition

PCM calls

- To confirm understanding of discharge instructions
- Knowledge of how to manage their care
- Knowledge on medications
- Follow up appointment
- Harvest recognition and suggestions for improvement

RECOGNITION

WAYS TO ACHIEVE ACCOUNTABILITY

Hold staff accountable

Leader accountability

Transparency and Consistency

CONNECT THE DOTS

Action	Outcome
• Hourly Rounding	• Decrease call light
• Asking about 4 Ps	• Prevents pressure Ulcer
• Positioning	
• *Bathroom and personal belongings*	• Prevents falls
• Pain	• Prevents patient complain and

June 2011 – Jun 2012

	NRC 75th Percentile	Cardiac Interventional Telemetry	
	Positive	Positive	n Size
HCAHPS: Did everything to help your pain	81.8	71.4	98
HCAHPS: Drs explained things understandably	79.1	72.2	230
HCAHPS: Drs listened carefully to you	82.1	74.5	235
HCAHPS: Got help as soon as wanted	67.2	66.9	178
HCAHPS: Help going to bathroom as soon as wanted	73.2	59.3	113
HCAHPS: Nurses explained things understandably	77.5	69.5	239
HCAHPS: Nurses listened carefully to you	78.0	76.9	238
HCAHPS: Pain well controlled during stay	66.7	62.6	99
HCAHPS: Quiet around room at night	65.2	57.2	229
HCAHPS: Rate hospital	75.7	73.2	235
HCAHPS: Received info re: symptoms to look for	91.3	85.3	211
HCAHPS: Room kept clean during stay	76.3	76.9	234
HCAHPS: Staff described med side effects	52.3	37.2	121
HCAHPS: Talked about help you would need	86.1	75.9	212
HCAHPS: Told what medicine was for	80.4	62.5	120
HCAHPS: Treated w/courtesy/respect by Drs	89.2	82.5	234
HCAHPS: Treated w/courtesy/respect by Nurses	87.6	85.0	240
HCAHPS: Would recommend hospital to family	79.6	76.9	229
How often did you get IP interpreter	74.2	64.3µ	28

January 2013 – December 2013

	NRC 75th Percentile	Cardiac Interventional Telemetry	
	Positive	Positive	n Size
HCAHPS: Did everything to help your pain	83.4	78.6	70
HCAHPS: Drs explained things understandably	80.5	78.1	114
HCAHPS: Drs listened carefully to you	83.3	77.6	116
HCAHPS: Got help as soon as wanted	70.0	69.1	97
HCAHPS: Help going to bathroom as soon as wanted	75.8	66.7	66
HCAHPS: Nurses explained things understandably	79.1	83.9	118
HCAHPS: Nurses listened carefully to you	80.0	85.6	118
HCAHPS: Pain well controlled during stay	68.1	68.1	69
HCAHPS: Quiet around room at night	67.4	61.4	114
HCAHPS: Rate hospital	76.7	84.5	110
HCAHPS: Received info re: symptoms to look for	93.1	91.4	105
HCAHPS: Room kept clean during stay	77.7	81.2	117
HCAHPS: Staff described med side effects	55.6	55.9	68
HCAHPS: Staff took preferences into account	47.0	36.5	104
HCAHPS: Talked about help you would need	87.7	86.8	106
HCAHPS: Told what medicine was for	82.1	82.1	67
HCAHPS: Treated w/courtesy/respect by Drs	90.0	82.9	117
HCAHPS: Treated w/courtesy/respect by Nurses	89.0	94.2	121
HCAHPS: Understood managing of health	56.8	44.6	112
HCAHPS: Understood purpose of medications	64.6	50.5	91
HCAHPS: Would recommend hospital to family	80.1	86.4	110

Celebrate the wins

Celebrate the wins

So, What???
Global impact on organizational performance

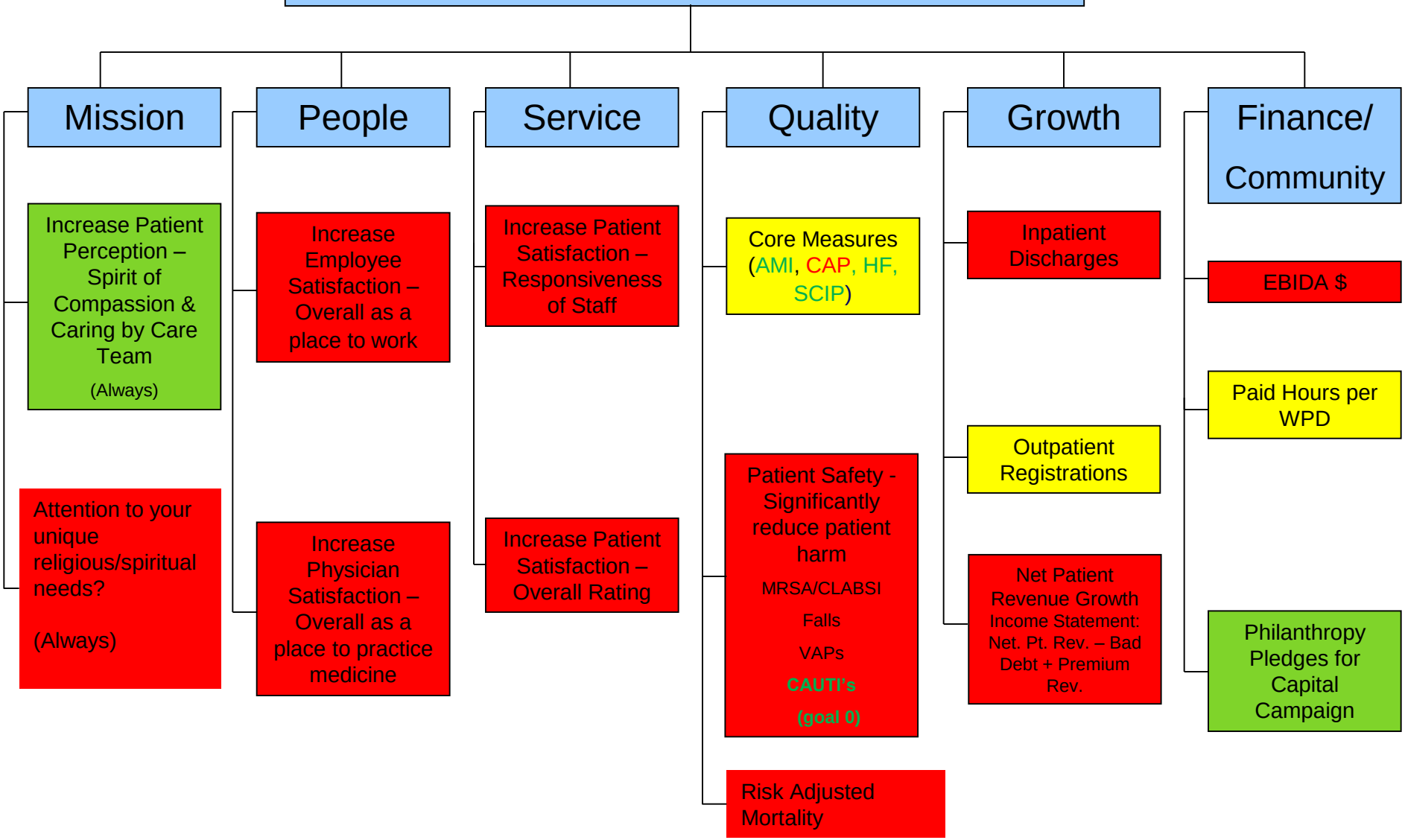
Kevin Roberts, CEO

2013 “Best Evers”

- Best Physician Satisfaction as a place to practice medicine.
- Lowest fall rate
- Lowest risk adjusted mortality
- Highest discharge volume
- Highest ED volume
- Highest HCAHPS scores (IP and ED)
- Best Core Measures compliance

GAMC (Kevin's) Report Card

YTD May 2012



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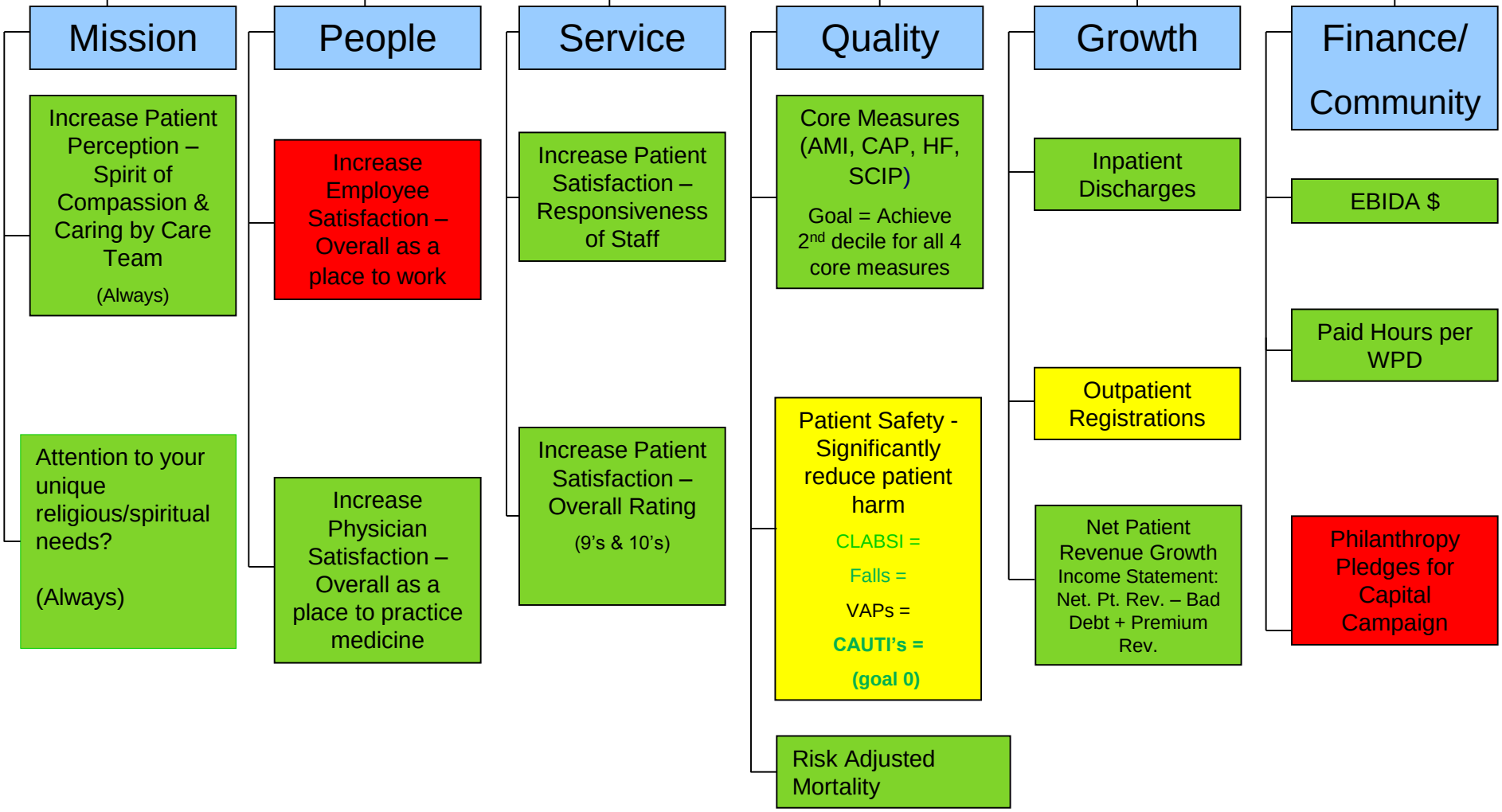
Year End 2013



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Discharge Dates From Oct 1, 2011 to Jun 30, 2012

https://catalyst.nrcpicker.com/GlendaleMedicalCenter/HCAHPSStoplightReport/default.aspx June 01, 2012

	Benchmarks		Rolling Averages up to 4/29/2012		HCAHPS		
Overall	NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?	74.4% (n=161,976)	70.0% (n=6,021)	71.6% PR=64 (n=81)	67.5% PR=45 (n=302)	66.7%µ (n=15)	69.0% (n=87)	61.8% (n=68)

Key Drivers	NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
Communication with Nurses	80.2% (n=164,752)	76.5% (n=6,101)	70.4% PR=14 (n=81)	70.2% PR=14 (n=304)	62.2%µ (n=15)	72.5% (n=86)	71.0% (n=70)
Cleanliness / Quietness	69.6% (n=164,630)	63.7% (n=6,094)	59.1% PR=25 (n=82)	60.9% PR=31 (n=307)	71.9%µ (n=16)	56.3% (n=87)	63.0% (n=69)
Communication with Doctors	82.6% (n=164,101)	78.5% (n=6,078)	70.9% PR=7 (n=82)	74.0% PR=21 (n=307)	64.6%µ (n=16)	72.0% (n=87)	79.0% (n=70)

Highest Scores	NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
Discharge Information	87.1% (n=144,938)	85.0% (n=5,437)	83.8% PR=51 (n=77)	79.6% PR=26 (n=275)	76.7%µ (n=15)	82.9% (n=79)	73.0% (n=63)
Cleanliness / Quietness	69.6% (n=164,630)	63.7% (n=6,094)	59.1% PR=25 (n=82)	60.9% PR=31 (n=307)	71.9%µ (n=16)	56.3% (n=87)	63.0% (n=69)
Would Recommend Hospital	77.9% (n=161,915)	72.5% (n=6,019)	72.2% PR=54 (n=79)	67.0% PR=38 (n=303)	71.4%µ (n=14)	70.6% (n=85)	54.3% (n=70)

HCAHPS Stoplight Report

Discharge Dates From Apr 1, 2013 to Dec 31, 2013

https://catalyst.nrcpicker.com/GlendaleMedicalCenter/HCAHPSStoplightReport/default.aspx January 01, 2014

CATA Accelerati

	Benchmarks		Rolling Averages up to 12/16/2013		HCAHPS		
Overall	**NRC 75th Percentile***	**Adventist Health Average Score**	**3 Months‡**	**12 Months‡**	**Qtr 4 2013‡**	**Qtr 3 2013**	**Qtr 2 2013**
Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?	77.0% (n=212,758)	70.2% (n=6,223)	77.7% PR=76 (n=461)	75.0% PR=67 (n=789)	77.1% (n=420)	73.9% (n=276)	62.2% (n=45)

Key Drivers	**NRC 75th Percentile***	**Adventist Health Average Score**	**3 Months‡**	**12 Months‡**	**Qtr 4 2013‡**	**Qtr 3 2013**	**Qtr 2 2013**
Communication with Nurses	82.8% (n=216,209)	78.0% (n=6,320)	84.1% PR=84 (n=476)	83.1% PR=77 (n=813)	84.1% (n=436)	80.8% (n=283)	80.4% (n=46)
Pain Management	74.8% (n=146,777)	72.2% (n=4,537)	78.4% PR=90 (n=349)	77.5% PR=86 (n=609)	77.5% (n=318)	78.3% (n=219)	70.3% (n=37)
Communication About Meds	68.5% (n=114,342)	66.0% (n=3,175)	67.6% PR=70 (n=227)	67.0% PR=66 (n=388)	67.4% (n=210)	63.3% (n=135)	69.6%µ (n=23)

Highest Scores	**NRC 75th Percentile***	**Adventist Health Average Score**	**3 Months‡**	**12 Months‡**	**Qtr 4 2013‡**	**Qtr 3 2013**	**Qtr 2 2013**
Discharge Information	89.2% (n=195,137)	86.5% (n=5,790)	89.5% PR=77 (n=447)	88.9% PR=72 (n=765)	89.8% (n=408)	88.9% (n=266)	73.9% (n=44)
Communication with Doctors	84.5% (n=215,408)	80.6% (n=6,290)	84.8% PR=76 (n=473)	84.6% PR=75 (n=805)	84.2% (n=432)	86.0% (n=280)	74.8% (n=45)
Communication with Nurses	82.8% (n=216,209)	78.0% (n=6,320)	84.1% PR=84 (n=476)	83.1% PR=77 (n=813)	84.1% (n=436)	80.8% (n=283)	80.4% (n=46)

Emergency Stoplight Report

Discharge Dates From Oct 1, 2011 to Jun 30, 2012

https://catalyst.nrcpicker.com/GlendaleMedicalCenter/EmergencyStoplightReport/default.aspx June 01, 2012

CATALYST Accelerating Improvement

	Picker Dimensions	Benchmarks		Rolling Averages up to 4/29/2012		Emergency		
Overall		NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?		68.9% (n=116,783)	64.4% (n=5,591)	64.7% PR=54 (n=150)	65.6% PR=60 (n=506)	74.2% (n=31)	65.2% (n=181)	68.2% (n=195)

Key Drivers		NRC 75th Percentile*	Adventist Health System Average Score	3 Months‡	12 Months‡	Qtr 2 2012‡	Qtr 1 2012‡	Qtr 4 2011
How often did the staff do everything they could to help you with your pain?	Physical Comfort	69.3% (n=46,591)	60.8% (n=2,841)	63.0% PR=52 (n=73)	**59.9% PR=39 (n=269)**	70.0%µ (n=10)	63.7% (n=91)	**58.3% (n=115)**
Do you think that you received the right treatment in the emergency room (e.g., tests, diagnosis, medications, etc)?	Coordination of Care	72.3% (n=90,551)	67.4% (n=5,600)	**61.8% PR=23 (n=144)**	**63.1% PR=28 (n=501)**	67.9%µ (n=28)	**61.8% (n=178)**	**62.8% (n=196)**
How often was there good communication between the different doctors and nurses?	Coordination of Care	70.3% (n=90,204)	62.2% (n=5,296)	**54.2% PR=15 (n=144)**	**54.7% PR=16 (n=483)**	56.7% (n=30)	**54.4% (n=171)**	**54.0% (n=187)**

Emergency Stoplight Report

Discharge Dates From Apr 1, 2013 to Dec 31, 2013

https://catalyst.nrcpicker.com/GlendaleMedicalCenter/EmergencyStoplightReport/default.aspx January 01, 2014

CATALYST
Accelerating Improvem

	Picker Dimensions	Benchmarks		Rolling Averages up to 12/16/2013		Emergency		
Overall		NRC 75th Percentile*	Adventist Health Average Score	3 Months‡	12 Months‡	Qtr 4 2013‡	Qtr 3 2013	Qtr 2 2013
Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?		70.8% (n=202,244)	65.6% (n=5,866)	76.5% PR=88 (n=81)	74.0% PR=82 (n=315)	72.3% (n=65)	85.7% (n=84)	59.2% (n=76)
Key Drivers		NRC 75th Percentile*	Adventist Health Average Score	3 Months‡	12 Months‡	Qtr 4 2013‡	Qtr 3 2013	Qtr 2 2013
How often did nurses explain things in a way you could understand?	Information and Education	80.4% (n=204,906)	73.1% (n=5,988)	84.4% PR=92 (n=90)	81.6% PR=83 (n=354)	86.1% (n=72)	86.5% (n=96)	73.6% (n=87)
How often did the staff do everything they could to help you with your pain?	Physical Comfort	69.6% (n=95,981)	60.6% (n=2,932)	59.6% PR=30 (n=52)	67.0% PR=65 (n=203)	56.1% (n=41)	79.7% (n=59)	60.0% (n=60)
Do you think that you received the right treatment in the emergency room (e.g., tests, diagnosis, medications, etc)?	Coordination of Care	73.3% (n=182,453)	68.1% (n=5,881)	64.6% PR=29 (n=82)	70.8% PR=62 (n=322)	65.2% (n=66)	75.9% (n=87)	66.7% (n=78)
Highest Scores		NRC 75th Percentile*	Adventist Health Average Score	3 Months‡	12 Months‡	Qtr 4 2013‡	Qtr 3 2013	Qtr 2 2013
How often did providers treat you with courtesy and respect?	Respect for Patient Preferences	86.8% (n=189,539)	81.8% (n=5,421)	89.6% PR=88 (n=77)	83.3% PR=52 (n=294)	88.7% (n=62)	89.9% (n=79)	77.3% (n=75)
Were you checked in and evaluated by a nurse in a timely manner?	Access to Care	76.8% (n=198,094)	68.3% (n=5,981)	86.2% PR=95 (n=87)	81.6% PR=89 (n=348)	87.1% (n=70)	86.3% (n=95)	78.0% (n=82)
How often did nurses explain things in a way you could understand?	Information and Education	80.4% (n=204,906)	73.1% (n=5,988)	84.4% PR=92 (n=90)	81.6% PR=83 (n=354)	86.1% (n=72)	86.5% (n=96)	73.6% (n=87)

Studer Group – Healthcare Organization of the Month Awardee, GAMC July 2013

by the numbers

Hospitals with the highest, lowest mortality rates

Ranked by average mortality rate

	Heart attack mortality rate	Heart failure mortality rate	Pneumonia mortality rate	Average mortality rate[1]
U.S. AVERAGE MORTALITY RATES	15.13	11.67	11.87	12.89

LOWEST MORTALITY RATES

Rank/Hospital	Location	Heart attack mortality rate	Heart failure mortality rate	Pneumonia mortality rate	Average mortality rate[2]
1 NYU Langone Medical Center	New York	9.4	7.7	7.5	8.2
2 Centinela Hospital Medical Center	Inglewood, Calif.	12.5	6.4	7.3	8.73
3 Cedars-Sinai Medical Center	Los Angeles	12.4	7.8	6.7	8.97
4 New York-Presbyterian Hospital	New York	10.9	8.3	7.8	9
5 Glendale Adventist Medical Center	**Glendale, Calif.**	**10.6**	**8.5**	**8**	**9.03**
Maimonides Medical Center	New York	11.2	8.2	7.7	9.03
7 East Orange General Hospital	East Orange, N.J.	10.4	7.3	9.5	9.07
Presence St. Joseph Hospital	Chicago	11.7	7.3	8.2	9.07
Portland VA Medical Center	Portland, Ore.	12.6	8.1	6.5	9.07
10 Olympia Medical Center	Los Angeles	11.9	7.8	8.5	9.4

The Joint Commission

Recognized GAMC as "Top Performer on Key Quality Measures" for 2013

- Top Performer hospitals for 2013 will be formally announced October 30, 2013 in the annually published "Improving America's Hospitals" report.
- As a top performer, GAMC is among 1,099 hospitals being recognized this year. This represents the top 33% of all Joint Commission-accredited hospitals reporting accountability measure performance data for 2012.
- This achievement demonstrates GAMC's commitment to assuring that evidence-based interventions are delivered in the right way and at the right time; because it's the right thing to do for our patients.

Thank you!

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