



Where the MONO Chappens





# Interdisciplinary Collaboration & Communication

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- RUSH & TRIPSS Overview
- Collaboration & Communication Strategy
- Review of RUSH's Rounding Program
- Initiatives Spotlight
- Questions







## **TRUSH**









### **RUSH** is a Chicago-based health system comprised of:

- 3 hospitals
- 1 specialty hospital
- 1 university
- 1 clinically integrated network
- **200+** outpatient care sites

#### **QUALITY FOCUSED & DRIVEN**

- RUMC was once again named as one of the nation's top performing hospitals by Vizient, ranking as No. 2 within the 2024 Quality and Accountability Study.
- RUMC also secured a spot on U.S. News & World Report's prestigious Best Hospitals Honor Roll for the fifth straight year, tying for No. 1 as the top hospital in Illinois.
- All three hospitals have received Magnet designation; RUMC has held this designation for 8 years as of 2023.



### RUSH's Problem Statement

#### Pain Points in RUSH's Prior Risk Processes



SILOS ACROSS OUR OPERATIONS, PROCESSES, AND SYSTEMS



MANUAL PROCESSES DETRACT FROM VALUE GENERATION



VALUABLE METRICS AND INSIGHTS TRACKED IN ISOLATION



LIMITED USAGE OF DATA STORY TELLING & DECISION MAKING



### Riskonnect at RUSH





#### TRIPSS SNAPSHOT







#### Generate Risk Insight & Oversight







Provide Support & Response



### **TRIPSS Rollout Tracker**

**PROVIDERS** 

#### **HEALTHCARE**



20: Safety Event, Basic Reviews, Committees, Committee Mtgs, Committee Event Reviews (9), CAPAs, Patient Relations, HOA, Security, Employee Events, Harm Reviews, Leader Center

#### **ROUNDING**



9: Nurse Leader, Fall Risk, EVS Leader, Room Audit, ED Leader (WR / TR), FNS Leader, EOC Rounds, OP AS Rounds, Support Issues

#### **MED STAFF**





8: Interim OPPE, OPPE, FPPE New/Initial, Interim FPPE Cause, FPPE Cause, Peer Review, Med Staff Applicant, Healthcare Event Reviews

#### **LEGAL / POLICY**



8: HPL Claims, GL Claims, EPL Claims, GC Claims, Dep Assists, Policies, Claims History, COI

#### **ENTERPRISE RISK**



NOF

4: Risks, Macro Risks, Domain Libraries, Indicators

#### TREND MGMT



6: Healthcare Dashboards, RMIS Dashboards, Rounding Dashboards, ERM Dashboards, Med Staff Dashboards. Board Dashboards





# Strategy

**Driving Collaboration & Communication** 

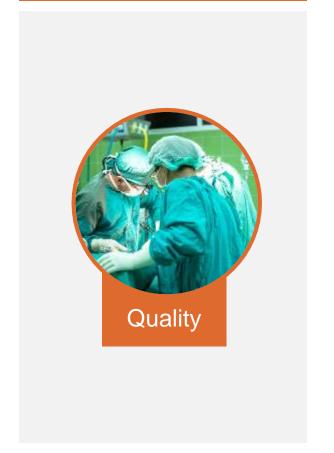


### Why Are We Invested?















### Key Initiatives To Realize Value

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+	
<b>—</b>	
1	

VALUE	E DRIVER	INITIATIVES				
<u> </u>	PATIENT SAFETY	Committee Event Reviews, Daily Safety Briefing, Leader Center, Service Views, Harm Closure, Safety Rounding				
PATIENT EXPERIENCE		Comprehensive Rounding Program				
	PROVIDER QUALITY	OPPE Indicator Integration, Provider Risk Rating				
-	LITIGATION MANAGEMENT	Occurrences Management, Claims Forecasting, Quarterly Review				
	INSIGHTS INTEGRATION	Rate Based Reporting, Departmental Risk Scorecards, Process Systemization & Standardization				





# Patient Rounding

RUSH's Comprehensive Rounding Program

### **Prior Operating State**

Purposeful rounding to identify and address safety and experience concerns during an admission.

- Between hospitals, rounding workflows were siloed with varied approaches, interventions and outcomes.
- Rounding strategies were returning inconsistent value to downstream clinical / operational teams.
- Gather and analyzing system level data was impossible given disparate data sets and processes.

RUMC

Utilized digital solution with real-time issue alerts for issues and automated rounding coverage and issue SLA reports Successfully improved experience scores yet cost prohibitive for continued system rollout.

**ROPH** 

Purposed paper-based checklist to identify issues. No reporting / tracking mechanism available, and issue resolution required manual intervention. Seeking to improve key experience metrics.

**RCMC** 

Using non-standardized rounding solution and workflows leading to duplicative tool costs. Limited reporting functionality and visibility with no issue assignment automation.





### Future State Ask

# set.

Standardized rounding process coupled with an advanced, centralized patient experience data set.

- Achieve greater rounding quality insights through round status, long stays, advanced reporting.
- Empower support service functions with work queues, SLA tracking, and downstream tool integrations.
- Address patient experience challenges at community site hospitals and improve CMS Star performance.

#### **ROUNDING PLATFORM JOURNEY**

1

#### Prioritize ROPH

- Address immediate need and collect baseline data
- Pilot to refine user experience before main campus rollout
- Prioritize mobile experience to aid in user adoption

2

#### Rollout RUMC

- Offboard and scale beyond prior solution, realize savings.
- Create standardization across department rounding workflows.
- Create one-stop-shop for leadership (SE, Round, etc.),

**HERE TODAY** 

Expand / Enhance

- Rollout advanced dashboards and insights tracking.
- Analyze data sets for trends and reset priorities / metric targets.
- Complete system rollout with onboarding of Rush Copley.



### WHAT FOLLOWS...

Is a visual depiction of our current workflow for **Purposeful**Inpatient Nurse Leader Rounding. Our program also
supports the following rounding workflows:

FNS LEADER | EVS LEADER | EVS ROOM AUDITS

ED WAITING ROOM | ED TREATMENT ROOM | FALL RISK

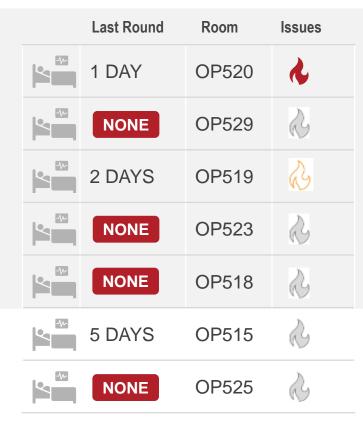


### What We've Achieved





#### **PATIENTS ON MY UNIT**















### What We've Achieved (cont'd)



#### FEEDS INTO OUR DMS WORKFLOW

TIER 1

TIER 2

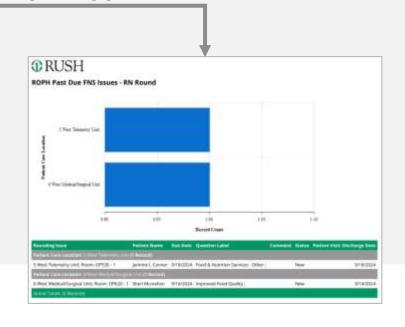
TIER 3

**DAILY WORK** 

#### **SLA REPORTS**

#### **PAST DUE TRIGGER**





#### **WEEKLY REPORTS**

#### ORGANIZATIONAL TARGETS SET FOR ALL TEMPLATES

			Base Metri	C# 1		Patients w/ Interaction Room		
Mursing Service			Count of Patients		dents	Court of Pa Parses Secto <sup>2</sup> latton <sup>2</sup>		ed Prope
Adult ICUs	10 Kest Tower (MICU - Medical ICU)	56	6	87,10%		52	96.30%	
	10 West Tower (AICU - Adult ICU)	36	63	63.93%		23	58.97%	
	11 East Tower (CSICU - Cardiovascular & Surgical ICU)	30	-	87,50%	•	34	97.14%	
	11 West Tower (NSICU - Neuroscience (CU)	- 6	51	88.68%		47	100.00%	
	Subtotal	177	211	81.13%		153	88.95%	

Summary  Total Round Count Total Opp	ortunity Areas				
11 263.0	0				
Template Type1	Rounder!	Round Count Sun		Opportunity Areas Sum	Patient Care Location Node
ED Norse Leader Treatment Area	Akson, Ceretor		1	24,00	Emergency Department
			3	24,00	Emergency Department
			1	24.00	Emergency Department
			7	24.00	Emergency Department
			3	24.00	Emergency Department
		Subtotal	5	120,00	



### **Successes & Challenges**

#### Successes

- ✓ Launched 7 rounding workflows across 2 sites, and 6 care departments
- ✓ Increased staff efficiency by automating issue routing and assignment
- ✓ Introduced alerts to share patient compliments direct to front-line staff
- ✓ Improved reporting insights for proactive management of key experience drivers
- ✓ Optimized cross-functional collaboration with real-time loop closure via single interface
- ✓ Achieved strong leadership buy-in and user adoption







#### **Lessons Learned**



- Exploring how best to evaluate the value of a round, ensuring it's purposeful
- Tailoring what data is surfaced to the attention of a user right data, right time

#### **Facing Challenges**

- ▲ Managing the growing demands from operations for new rounding programs
- ▲ Need for more configurability to aid in the onboarding of future rounding programs
- ▲ Continued optimization of the user experience to decrease the end-to-end time spent logging a round









# Initiative Spotlights

Daily Safety Briefing & Layered Committee Event Reviews

### Daily Safety Briefing

TIER 2 TIER 1 TIER 3 **DAILY WORK** 

Leader Center

**AGENDA**: a daily leadership level look back, look ahead, and follow up report.

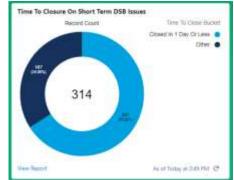
Report outs inventoried within TRIPSS to track:

- 1. Key safety metrics
- 2. Issue resolution
- 3. Report out compliance
- 4. Trends over time

Daily work reports are sent house-wide to create transparency and accountability.



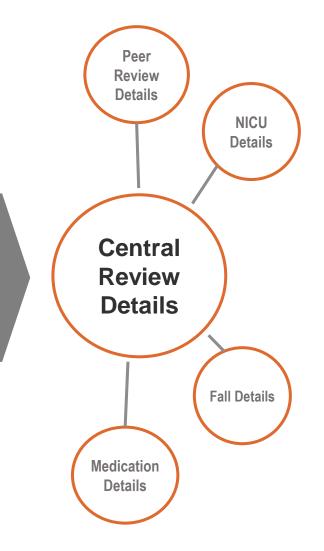






### Layered Committee Event Reviews





Safety

**Event** 

1 Review Collaboration

Once a second review is launched on a single event the committee reviewers collaborate on a single revie response.

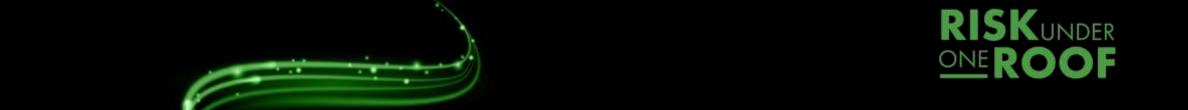
2 Review Peek-Thrus

Committee reviewers can see details pertaining to tasks, basic reviews, and CAPAs when completing their review.

3 Hand-Off Processes

Committees can send event review requests to other committees asking that they consider a review of the event.





# QUestions?





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