

# AHA 2009 Leadership Summit

## LEAN Healthcare for Lean Times

### Helping Hospitals to Minimize Errors and Waste, Optimize Performance, Patient Outcomes and Profitability



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# Session Agenda

- I. Introductions
  
- II. Hospitals at a Glance
  - I. St. Luke's Episcopal Hospital
  - II. Bryn Mawr
  - III. Charleston Area Medical Center
  
- III. Panel Q&A
  
- IV. Audience Q&A



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# David C. Pate, MD, JD

## Senior Vice President & Chief Executive Officer

### St. Luke's Episcopal Hospital



Dr. Pate is administratively responsible for hospital operations, including all clinical patient care departments and support services of the hospital. A graduate of Rice University with a bachelor's degree in biochemistry, Dr. Pate earned his medical degree from Baylor College of Medicine. He completed his internship and residency through Baylor Affiliated Hospitals and served as chief resident at St. Luke's in 1986. He is board certified in Internal Medicine and serves as a clinical assistant professor in the Department of Internal Medicine at Baylor College of Medicine. Prior to joining St. Luke's in November 1993 as vice president and medical director of St. Luke's Health Network, Dr. Pate was a member of St. Luke's medical staff in private practice as an internist in the Texas Medical Center. He was active on the medical staff, chairing the Quality of Care Committee, serving on the Internal Medicine Executive Committee, and

acting as a Section Chief, General Internal Medicine Service. In 1996, Dr. Pate earned his law degree cum laude from the University of Houston Law Center, and in June 1997, he was promoted to his current position as senior vice president. Dr. Pate serves as an adjunct professor at the University of Houston Law Center and has authored a textbook entitled *Regulation of Health Care Professionals*, released in November 2002, and a cumulative update on health law, released in August 2005. Dr. Pate served as chairman of the board for Houston Hospice and Palliative Care System from 2004-2006 and is a member of the Harris County Medical Society, the Texas Medical Association, the American Health Lawyers Association, and the American Bar Association.



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# Mike Reno, FACHE, CHSP

## Vice President of Operations

### Bryn Mawr Hospital Main Line Health System



As vice president of operations for Main Line Health System's Bryn Mawr Hospital, Mike Reno oversees not only the main hospital facility administrative needs, but operations as well. The latter includes everything from facility master planning, architecture and construction services to property management, pharmacy, laboratory, endoscopy, case management, the neuro-interventional program, the hospitalist group and more. Mike serves as the health system's Emergency Management and Hazard Mitigation director and Safety Officer. He also finds time to co-chair the Patient Safety and Quality Committee, which ensures compliance with other regulatory agencies such as TJC, PDOH, OSHA, etc. and is the chair of the health system Environment of Care committee. Prior to joining Bryn Mawr, Reno was vice president at St. Luke's Episcopal Hospital, where he had executive oversight and service line responsibility for the cardiology, cardiovascular and

neuroscience services, and was administratively responsible for diagnostic and therapeutic imaging, radiology and nuclear medicine. He oversaw the physical medicine and rehabilitation services, serving as the administrator for the 24-bed Rehab hospital within a hospital. Mike also oversaw the hospital's support service operations, including facility master planning, architecture and construction, clinical technology, parking and transportation, food and nutrition, safety and security, environmental services, mail and messenger services, facilities engineering and building and grounds operations. Additionally, Mike co-chaired the Patient Safety and Quality Committee, tasked with ensuring compliance with various regulatory agencies, including the Joint Commission Environment of Care Standards, served as the hospital's Emergency Management Coordinator and was the project executive for the Patient Care Center capital building project and the executive sponsor for the implementation of LEAN, the Toyota Production System, as the hospital's standard operating procedure



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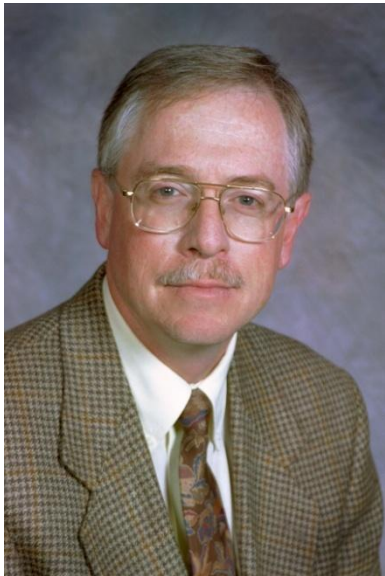


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# Glenn Crotty, Jr., MD, FACP

## Executive Vice President & Chief Operating Officer

### Charleston Area Medical Center



Dr. Crotty oversees the operations of a three-hospital system with 2100 open-heart procedures per year, a level one trauma center and a Women and Children's Hospital with level three NICU and PICU. Dr. Crotty is responsible for CAMC's Quality Improvement Program and is the corporate sponsor of CAMC's Six Sigma Program. Dr. Crotty led the change of its quality program, introducing CAMC to Six Sigma Lean Methodology, developing and enhancing both the quality and safety infrastructure with Six Sigma tools, Lean and methodologies, with methods and tools from the Institute of Healthcare Improvement. The quality program has improved several key issues related to patient care, Center for Medicare Services Quality Indicators, supply chain improvements, pharmacy improvements, and is utilizing Six Sigma design methodology to install new enterprise wide software applications to enhance quality, safety, and management of hospital operations. The Six Sigma program is in its ninth year with over 50 million dollars of savings to the organization. CAMC has improved its overall patient flow capabilities, being able to handle over 40 more patients per day at the Cardiac Center.



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**Mike Olive**

**Director, Healthcare Performance Solutions Practice  
RWD Technologies**



Mike Olive's 17 years of first-hand experience in application and consulting in the adoption, training and implementation of the Toyota Production System has enabled Olive and his team to support Fortune 100 clients with strategic transformation planning, coaching and mentoring in lean manufacturing principles and lean operating systems design and deployment. Olive's leadership in the design and implementation of lean has consistently achieved systemic transformation and unprecedented results for RWD's clients. Olive earned a B.S. from Boston University College of Engineering. He is an active member and contributor to American College of Healthcare Executives (ACHE); Association of periOperative Registered Nurses (AORN); Maryland Association of Healthcare Executive (MAHCE); and American Hospital Association (AHA).



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# St. Luke's Episcopal Hospital: Achieving Hospital – Wide Efficiency, Excellence and Engagement



- Emergency Department
  - Length of stay decreased by 36 percent.
  - Cases of patients leaving without being seen decreased by 69 percent.
  - Diversion decreased by 96 percent.
- Operating Room
  - Room turnover time decreased by 67 percent.
  - Antibiotic timing compliance increased by 25 percent.
- Central Supply Processing Department (CSPD) decreased inventory by 26 percent (savings of \$1.18 million).
- ST elevation myocardial infraction (STEMI) at 100 percent compliance for door to balloon (D2B).
- Environmental services decreased room turnover time by 17 percent.



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# Charleston Area Medical Center: Transforming Care Together



- In less than one year, increased patient care time at trauma unit to 55 percent (from 42 percent).
- Staff turnover rate reduced to 12.9 percent from 33.8 percent, resulting in \$240,000 of savings.
- Patient satisfaction increased to 8.9 percent from 7.9 percent.
- Reduced staff overtime by 28 percent and increased staff satisfaction to 4.4 from 3.8 (scale from 1-5).
- Misses Pain Reassessment reduced to less than 0.3 percent.
- Eliminated decubitus ulcers.
- Falls reduced by 50 percent.
- Reduced nurse travel by 3.5 million steps (1600 miles).



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# Bryn Mawr Hospital – Main Line Health: Building a Case for Change

Main Line Health  
Bryn Mawr Hospital

- “Good better best, never let it rest till your good is better and your better is best”  
- *St. Jerome*
- “Start by doing what's necessary, then do what's possible; and suddenly you are doing the impossible”  
- *St. Francis of Assisi*
- Position the implementation as an approach that supports, not competes with, all other initiatives.
- Provide frequent and honest communication to the staff on what to expect.



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# Thank You!

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