



35TH ANNUAL **AHA RURAL  
HEALTH CARE  
LEADERSHIP  
CONFERENCE**

**FEBRUARY 6-9, 2022**  
ARIZONA GRAND RESORT & SPA


# ***Driving Value and Enhancing Affordability through Operational Improvements***

Erin Griffes MSN, RN  
Beth Langenburg MBA, BSN, RN  
Spectrum Health  
Big Rapids and Reed City Hospitals



**Spectrum  
Health**


# Improve health, inspire hope and save lives™




**31,000+**  
Team Members



**\$8.3 Billion**  
Enterprise\*



**\$542 Million**  
Community Benefit\*




**\$30 Million**  
Philanthropy\*




**900**  
Volunteers



**4,900**  
Physicians and  
Advanced Practice Providers  
(Spectrum Health employed and independent)



**14**  
Hospitals



**150**  
Ambulatory Sites



**219,000**  
Virtual Video Visits\*



**514,000+**  
Home Health Care Visits\*



**\$100 Million**  
Health Equity Funding  
(Over next 10 years)




**\$100 Million**  
Venture Capital Fund



**1 Million+**  
Members Served by our  
Health Plan



**7,000+**  
Employers Contracted by  
Priority Health



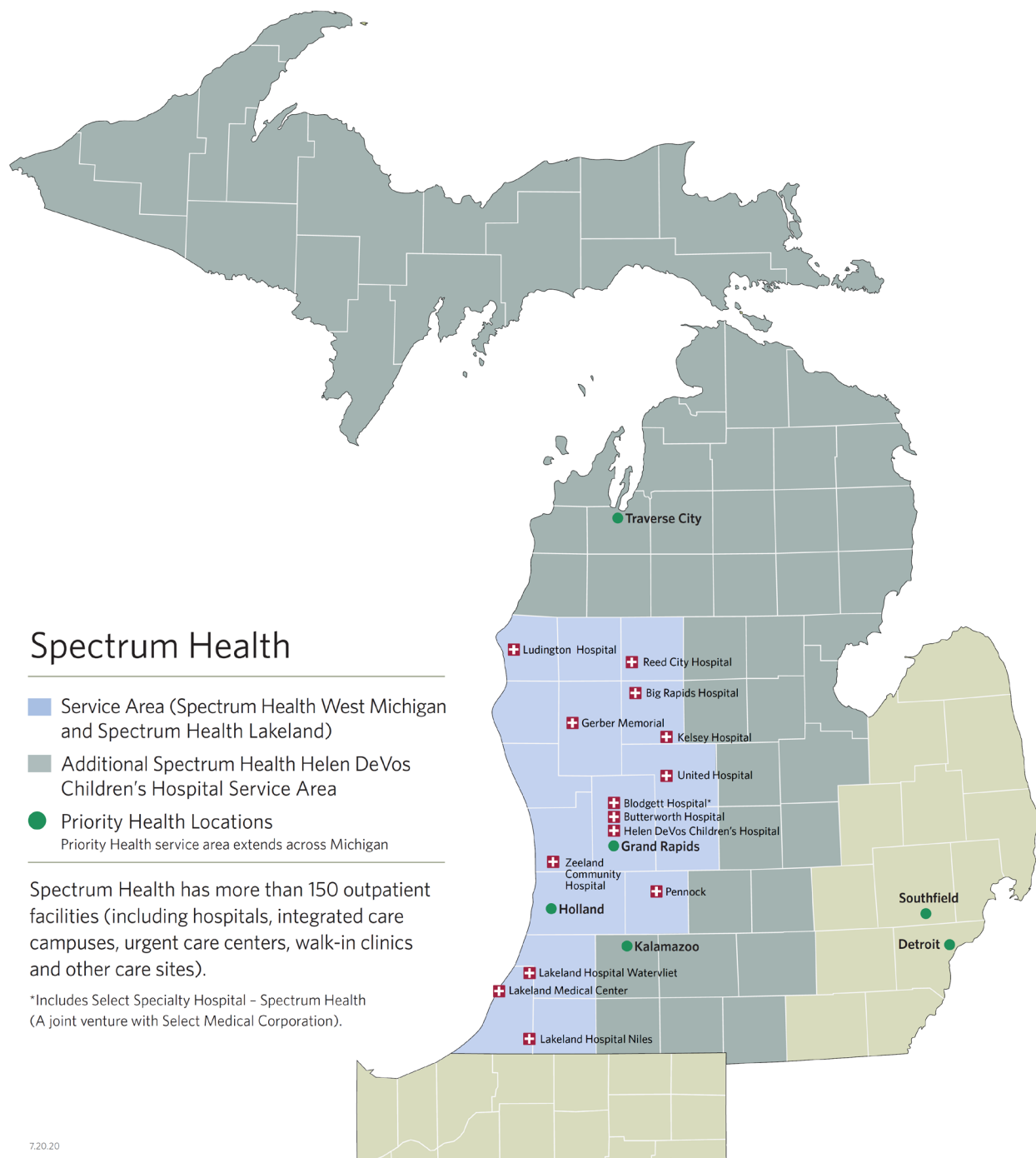
**97%**  
Michigan Primary Care  
Doctors in Network\*\*



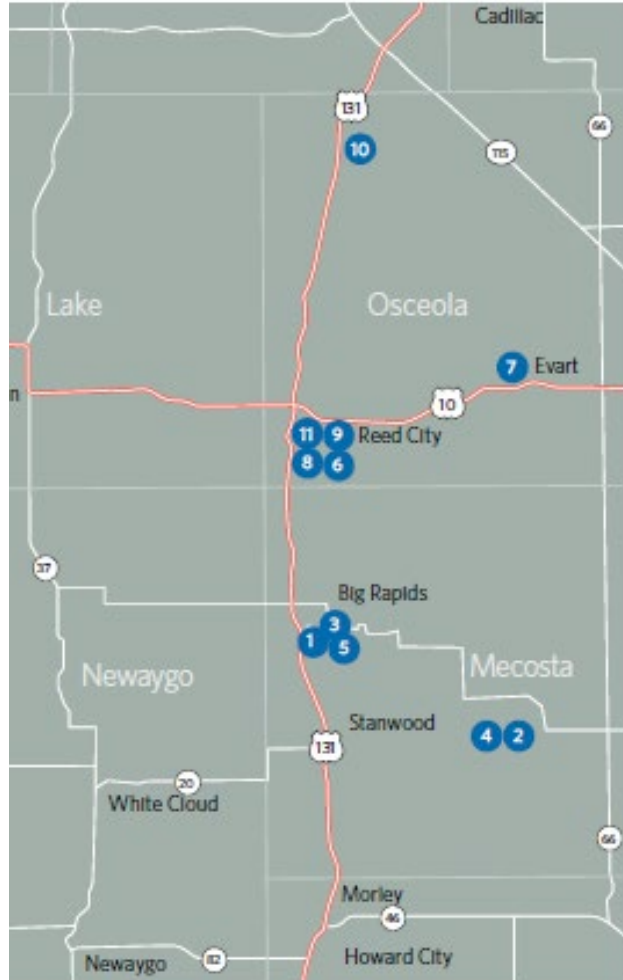
**78,000+**  
Lives touched through  
108,000+ Healthier  
Communities encounters\*

\*Jan. 1—Dec. 31, 2020

\*\*According to the Michigan Department of Insurance and Financial Services 2019 Individual and Small Group and network filings, excluding out-of-state and Upper Peninsula providers. Network varies by plan.



**SPECTRUM HEALTH**  
**Big Rapids and Reed City Hospitals**



**Big Rapids Hospital**

- 49-bed PPS hospital
  - ED
  - Obstetrics
  - Surgery
  - Inpatient
  - Outpatient Services

**Reed City Hospital**

- 25-bed CAH
  - ED
  - Endoscopy
  - Inpatient
  - Cancer Center
  - Rehab Nursing Center
  - Outpatient Services

**Andrea Leslie**  
President/ Regional Market Leader

**Beth Langenburg**  
Chief Operating Officer  
Compliance Officer  
BR/RC

**Carolyn Leja**  
Chief Nursing Officer  
BR/RC

*Operations Director  
Medical Group*

*Controller*

*Community Outreach  
Manager*

*Foundation  
Manager*

*Marketing &  
Communications Manager*

*HR Business  
Partner, Senior*

Diagnostic Imaging

EVS

Facilities

Laboratory

Nutrition Services

Occ Health

Rehab

Respiratory

Supply Chain

Cancer Services

Care Mgmt.

ED/OB/MS  
*Erin Griffes*

Pharmacy

RNC

Surgery

BR & CL Family Practice

RC, Tustin & Ewart Fam Prc

Gen Surg & Ortho Surg

Women's Health

Urology

Finance

HIM

IS

Patient Access

Pt. Financial Serv.

# Spectrum Health Big Rapids and Reed City Hospital ORGANIZATIONAL CHART

# Call to Action

- Lacking coordination of effort
- Variation in goals
  - between hospitals
  - within service line
  - within hospitals
- Plans implemented without an understanding of readiness
- Lack of focus
- Unrealistic goals



# Structure and Focus

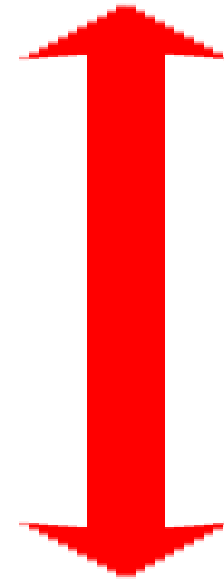
Goals for **Quality**, **People** and **Cost** will be managed across the system using

- Coordinated planning
- Prioritization
- Tracking
- Reporting cadence

*Every team member  
will know the  
operational focus for  
the coming year and  
their role in achieving  
those goals*

# Cascading Goals

- System
- Hospital / Service Line Executives
- Directors
- Managers
- Team members



# Tracking the work

*Are we doing the work?*

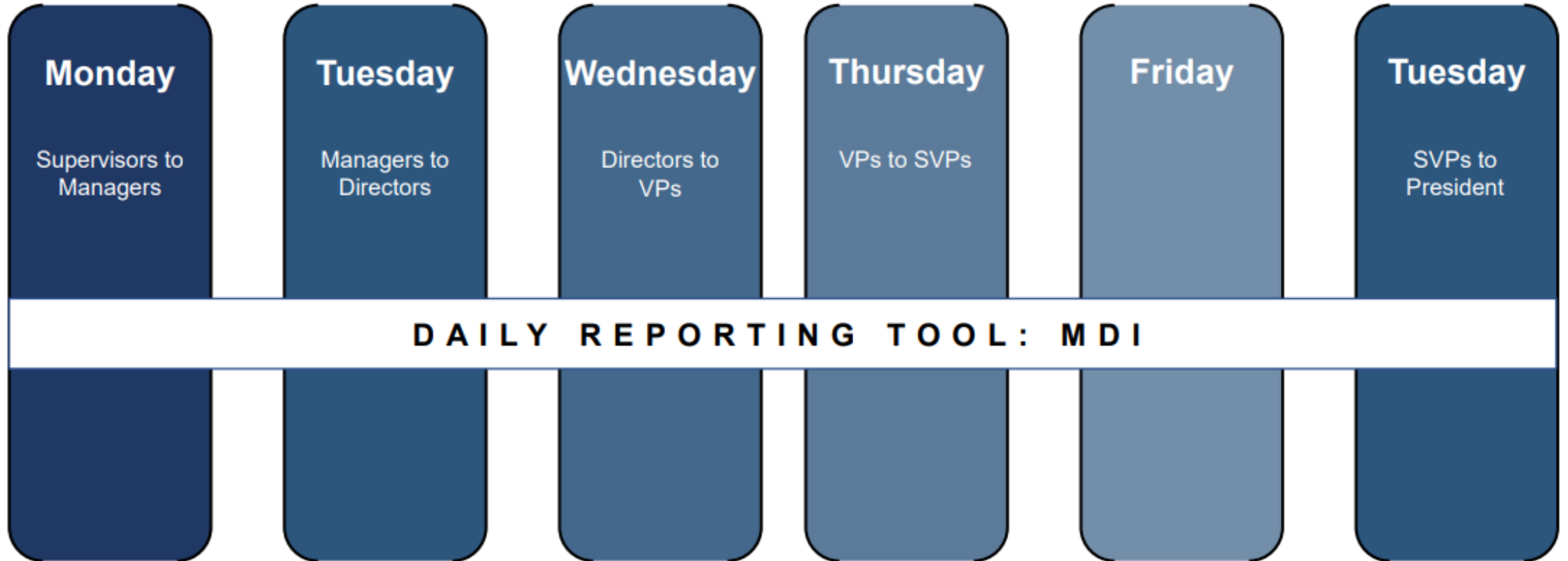
TRACK:

- Set a schedule every week of when conversation occurs with each leadership level
- Problems are solved at the lowest possible level
- MDI huddles utilized for sharing at the team member level

# Reporting Cadence

- Weekly Report Out to receive information Weekly Report out to provide information
- **Quality, People, Cost** addressed monthly
  - Each topic rotated by week
- Report using TAPE format
  - T: Target
  - A: Actual
  - PE: Please Explain

# CASCADING REPORTING

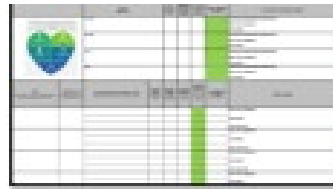


***TOOLS***

**PEOPLE**  
**COST**  
**QUALITY**

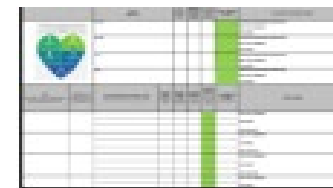


President



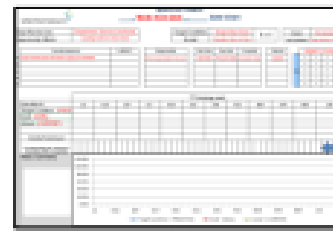
OA3

Directors



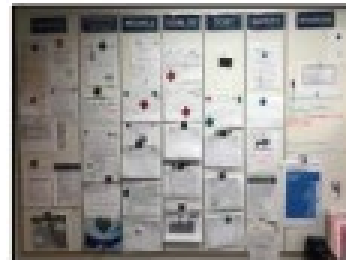
OA3

Managers



GATE CHART

Team Members



MDI



# OA3

Document for operational goals and tactics



Microsoft Excel  
Worksheet



# Watch Chart

Used to track key tactic that is being monitored but does not need to be “fixed”

Spectrum Health Department Hitting Productivity Goal - Watch Chart													
Dept /Service Line	RC - ED					Actual	2.59	G	Owner:	Jennifer Lokers			
Name of metric	Maintain WH of 2.78 or less								Last Updated:	12/20/2021			
	CY_21__												
Data Month	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	
Goal				2.78	2.78	2.78	2.78	2.78	2.78	2.78	2.78	2.78	
Actual				2.76	3.11	2.62	2.44	2.31	2.34	2.3	2.59		
<p>Target: WH less then 2.78            Actual: WH 2.59            Explain: Our Pals tool shows our \$/UOS in the red by \$33,449. Current state RCED has a travel RN and 2.7 Open RN FTE's which are being filled with 100% bonus pay. To attach a general dollar amount to the overtime- I have 216 open hours in 2 weeks. If an RN was paid base X 100%, lets say we are paying \$80.00/ hour. 216 X \$80= \$17,280. multiple X2 for the month which = \$34,560. This does not include the hours paid at \$125 for the travel RN.</p>													

# MDI

Daily Focus for individual Teams



# MDI Examples

## PEOPLE

**BELONGIN :**

Target: 82% or higher  
Actual: 72% in November

Please Explain: Teamwork to MR.

## QUALITY

Press Ganey likelihood to recommend us!

Target: 3  
Actual: 2

Please Explain:

## COST

Target: 6/6 cost centers  
Actual: 4/6 cost centers in November

Please Explain: daily staffing to volumes evaluation & adjustments

## JUST FOR FUN!

January Birthdays  
Meghan-3rd  
Amy-12th  
Beth-20th

## DASHBOARD METRICS

Modality	Current LTR	Target LTR 4 Benchmark
CT		87.2%
IR		87.6%
MAM		91.1%
MRI		87.2%
NM		89.2%
US		96.0%
XRAY		86.2%
DEXA		92.1%
CV		85.7%

## GOLDEN TICKET

In process!

## PEOPLE

## QUALITY

## SAFETY

## COST

## DASHBOARD METRICS

HOUSE Sup 1-616-288-2870

OPEN POSITIONS -  
FULL TIME -  
PART TIME -

DAILY LEAD<sup>20</sup>  
MED/SURG -  
OB -  
OR -  
CCU -

DISCHARGE<sup>20</sup>  
MED/SURG -  
OB -  
CCU -

Staffing  
1st -  
2nd -  
3rd -

## RECOGNITION

Housekeepers Make every Day Sparkle!

# Matrix Tactic Tracker

Used to capture outcomes of matrix teams

Data Source (describe where you will get your data from)	Tactics Identified to Achieve Goal (identify the major work required to meet the overall goal)	TACTIC GOAL (annual tactic goal)	MONTHLY TACTIC TARGET (monthly interim target)	MONTHLY TACTIC ACTUAL (last reported)	(difference between target and actual in color Red or Green)	ACCOUNTABLE LEADER (single process owner)	Please Explain	
GLINT	BR/RC EVS: increase GLINT Belonging Score from 70 to 72	72		74	G	Kostecki	June, 2021	Teambuilding exercises weekly with about 50% participation rates. 1:1 meetings.
GLINT	BR/RC NS: increase GLINT Belonging Score from 70 to 71	71		71	G	Kostecki	June, 2021	Increased participation rates of 90%. Team feels undervalued.
GLINT	RC Lab: increase GLINT Belonging Score from 67 to 69	69		60	R	Cornelius	June, 2021	Low participation rates. Phleb team low scores. Positions open.
GLINT	BR Imaging: maintain GLINT Belonging Score above 74	>73		81	G	Smith	June, 2021	
GLINT	RC Imaging: maintain GLINT Belonging Score above 74	>73		73	R	Smith	June, 2021	PE: Focus on Communication. Team Huddles.
GLINT	Rehab Services: maintain GLINT Belonging Score above 81	82		90	G	Smith,K.	June, 2021	
GLINT	BR/RC Respiratory: increase GLINT Belonging Score from 67 to 69.	69		67	R	Allers	June, 2021	Improved scores. LM 1:1 conversations. Red for month.

# TAPE Example from Tracker

**Tactic:** Maintain GLINT Belonging Score for Imaging above 74

**T:** >73

**A:** 73 **RED**

**PE:** Focus on Communication and Team Huddles

**Do you need assistance:**No

# TAPE Example from Tracker

**Tactic:** Increase GLINT Belonging Score for Laboratory from 67 to 69

**T:** 69

**A:** 67 **RED**

**PE:** Low participation rates, Phlebotomy team scores low, positions open.

**Do you need assistance:** YES. Compensation model for Phlebotomists not competitive causing difficulty in recruitment.



# TAPE Example from Tracker

**Tactic:** Increase GLINT Belonging Score for Environmental Services from 70 to 72

**T:** 72

**A:** 74 **GREEN**

**PE:** 3<sup>rd</sup> month of Green, moving to watch chart

# TAPE Example from Tracker

**Tactic:** Increase Nutrition Services “Quality of Meal” Score from 2 to a 3 by September 30,

**T:** 2

**A:** 4 GREEN

**PE:** Leading Metric Green of visiting inpatients three times daily to obtain preferences.

# Quality

- Measured with “Metrics that Matter” scorecard 1-4.
  - Efficiency
  - Mortality
  - Patient Experience
  - Readmission
  - Safe, Gentle Care
  - Zero Harm Complications
  - Zero Harm Infections
  - Zero Harm Staff
- Average GPA

# Quality example

QSE -Maintain Big Rapids overall score in infection rate at 4.7 through September 31, 2021	Compass	BR: Maintain zero harm infection score of 4.7 or above through September 31, 2021	4.7	5.0	G	4.7	Erin Griffes	Watch Metric
QSE - Maintain Reed City overall score in infection rate at 5.0 through September 31, 2021	Compass	RC: Improve Care Transitions from a 1.0 to a 2.0	2.0	5.0	G	2.0	Lokers	unit is closed, merging interdisciplinary rounds and rounding with the doc while they are there when they reopen.
QSE - Improve Big Rapids Patient Experience Score from 2.6 to 3.1 by September 31, 2021.	Press Ganey	BR: Improve Care Transitions from 2.0 to a 3.0	2.0	2.0	G	3.0	McLachlan/Hartline	MSP- 25% to 90% with C2S, 90.1 LTR 5, still rated at a 3. included in heart to heart conversations. Countermeasure to communicate discharge and medications. Jayme moved from 2 to 3 with
		BR: Improve communication about medications from a 2.0 to a 3.0	2.0	4.0	G	3.0	McLachlan	commit to sit by nursing, already hit that goal for the year!
QSE - Improve Reed City Patient Experience score from 2.5 to 2.6 by September 31, 2021.	Press Ganey	RC: Improve Communication about medication from a 2.0 to a 3.0	2.6	5.0	G	3.0	Jennifer Lokers	when reopened, 0 to 100 % sharing medication cards, staff meetings 16th and 21st,
QSE - Improve Big Rapids Patient Experience Score from 2.6 to 3.1 by September 31, 2021.	Press Ganey	BR ED: Maintain Press Ganey LTR at 3.0 through September 30, 2021	3.0	3.0	G	3.0	Walt Hartline	watch chart continues to maintain at a 3, April's LTR had a hit a lower percentage of people
QSE - Improve Big Rapids Patient Experience Score from 2.6 to 3.1 by September 31, 2021.	Press Ganey	BR FBC: Improve Care Transitions from a 1.0 to a 2.0	1.0	2.0	G	2.0	Modene	creating a discharge list in OB to sit and ask, starting with admission nurse and all the way through to DC nurse. Ob moves from a 1 to a 2 with 100%, low number of surveys,
QSE - Improve Reed City Patient Experience score from 2.5 to 2.6 by September 31, 2021.	Press Ganey	RC ED: Maintain Press Ganey LTR at 3.0 through September 30, 2021	2.0	3.2	G	3.0	Jennifer Lokers	brought back questions for discharge, making sure patient understands instructions. Jump in Press Ganey to 83.6%.

# TAPE Example from OA3 for Quality

**Goal:** QSE - Improve Big Rapids Patient Experience Score from 2.6 to 3.1 by September 31, 2021.

**T:** (category of improve communication regarding medications) 2

**A:** 4 GREEN

**PE:** Leading Metric Green of bedside “commit to sit” program for emphasis on medication education with discharge.

# Together We Provided Compassionate Care for All

## Patients

### Big Rapids & Reed City Radiology - Patient Experience Leadership Summary 2021 Performance Period - Likelihood to Recommend



Location	2021 Performance Period				Baseline Comparison			2021 Performance Period LTR Response Distribution
	n	Top Box %	+/- 50th %ile (3)	1 - 5 Bench mark	PP vs Base	+/- Base	Base Top Box %	
Big Rapids Bone Density	93	87.1%	-1.5%	2	↓	-2.2%	89.2%	87.1% 12.9%
Big Rapids CT	173	81.5%	-2.0%	2	↓	-3.5%	85.0%	81.5% 15.0%
Big Rapids Interventional Radiology	67	88.1%	3.4%	4	↑	4.5%	83.6%	88.1% 7.5%
Big Rapids Mammography	414	87.9%	-0.8%	2	↓	-1.2%	89.2%	87.9% 9.9%
Big Rapids MRI	218	83.9%	0.6%	3	↓	-1.9%	85.8%	83.9% 12.4%
Big Rapids Nuclear Scan	25	88.0%	2.3%	3	↑	11.1%	76.9%	88.0% 12.0%
Big Rapids Ultrasound	161	75.2%	-6.9%	1	↓	-2.0%	77.2%	75.2% 21.1%
Big Rapids X-Ray	189	77.2%	-5.0%	1	↓	-1.4%	78.6%	77.2% 18.0%
Reed City Betty Ford Mammography	209	90.9%	2.2%	3	↑	6.6%	84.4%	90.9% 8.6%
Reed City Bone Density	21	95.2%	6.6%	5	↑	14.5%	80.8%	95.2%
Reed City CT	130	84.6%	1.1%	3	↑	1.8%	82.8%	84.6% 13.8%
Reed City MRI	132	86.4%	3.1%	3	↑	1.2%	85.2%	86.4% 9.1%
Reed City Ultrasound	68	83.8%	1.7%	3	↑	2.0%	81.8%	83.8% 11.8%
Reed City X-Ray	104	86.5%	4.3%	4	↑	10.3%	76.2%	86.5% 10.6%
Big Rapids & Reed City Radiology Total	2,004	84.7%			↑	0.7%	84.0%	84.7% 12.5%

Big Rapids Interventional Radiology	As usual your staff was all top notch. I couldn't ask for better!
Big Rapids MRI	All staff members very professional and cordial
Big Rapids X-Ray	Spectrum employees are really wonderful and compassionate people
Reed City CT	I wouldn't change a thing, you're doing everything right
Reed City Ultrasound	Incredible kindness from both registration attendant and ultrasound tech.
Reed City X-Ray	Very efficient. Didn't wait long. In and out of there very quick
Reed City CT	Your place and your staff is totally awesome, don't change nothing
Reed City Betty Ford Mammography	Everyone involved was very nice and professional.
Big Rapids Ultrasound	The staff was friendly and answered my questions to my satisfaction.
Big Rapids CT	I appreciated how friendly the staff was. We were all talking and joking around. I also appreciated how they explained the process for me so I knew exactly what was going to happen and what to do next.
Big Rapids Mammography	Everyone was very helpful and understanding
Big Rapids Bone Density	Felt very well taken care of!

# People

- Glint – survey sent quarterly to staff
- Defined improvement goals
- Focus on Belonging as an system

# People tool example

<p>PEOPLE -Improve score in "Belonging" from 66, goal is 68 by Nov 30, 2021</p>	67	65	R	68	Griffes
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<p>PEOPLE -Improve belonging scores from 66 to 68 baseline is 66, goal is 68 by Nov 30, 2021</p>	<p>Gate charts</p>	<p>Hartline - improve overall Glint score from a 66 to a 68 by April 1, 2021.</p>	66.0	60.0	R	70.0	Walt Hartline	<p>recognize 24/30 in the green, increase score of belonging not met, lack of response plays in it, 25% rate of participation.</p>
		<p>Lokers- improve overall Glint score from a 57 to a 60 by April 1, 2021.</p>	58.0	57.0	G	70.0	Jennifer Lokers	<p>rounding 21/20 so in the green, touching nightshift is lacking. comment on nurses week is the only comment</p>
		<p>Modene - improve overall Glint score from a 67 to a 68 by April 1, 2021.</p>	68.0	68.0	G	70.0	Lisa Modene	<p>75% staff participating in unit, target is 70, actual 71% so green. highest response rate at 50%, e sat is higher. reminders to staff regarding the survey.</p>
		<p>McLachlan - improve overall Glint score from a 67 to a 68 by April 1, 2021.</p>	70.0	76.0	G	70.0	Jamie McLachlan	<p>increase communication, 20 times per month, in the green. MDI huddle led by charge, in the green on that as well.</p>



# TAPE Example from OA3 for People

**Goal:** Improve “belonging” scores in Glint survey from 66 to 68 by Nov 30, 2021.

**T:** 70

**A:** 76 GREEN

**PE:** Leading Metric Green of number of staff filling out the survey and leaving comments/suggestions

# Together We Focused On BELONGING in Radiology!

## The 5 Love Languages for Co-Workers



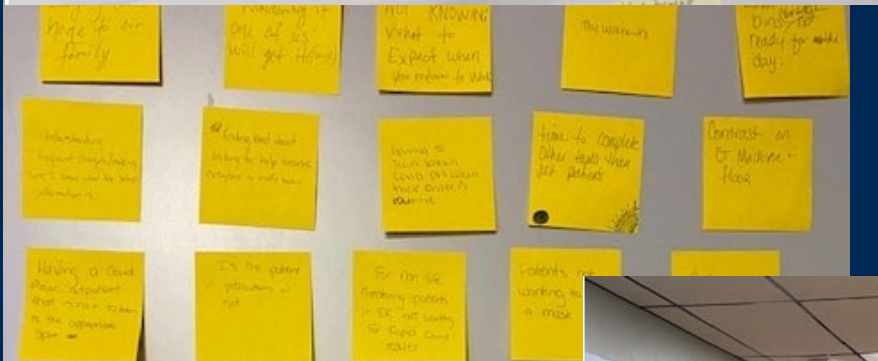
### Recommendations/Ideas:

- Transport patients
- Stock rooms
- Clean rooms
- Help with patient exams – offer to take patients back
- Stocking rooms
- Completing the schedule
- Transfer patients
- Clean rooms
- Someone helping without being asked
- Completing paperwork

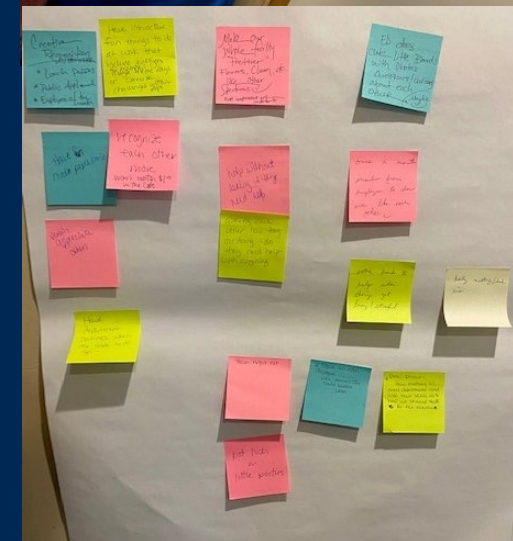
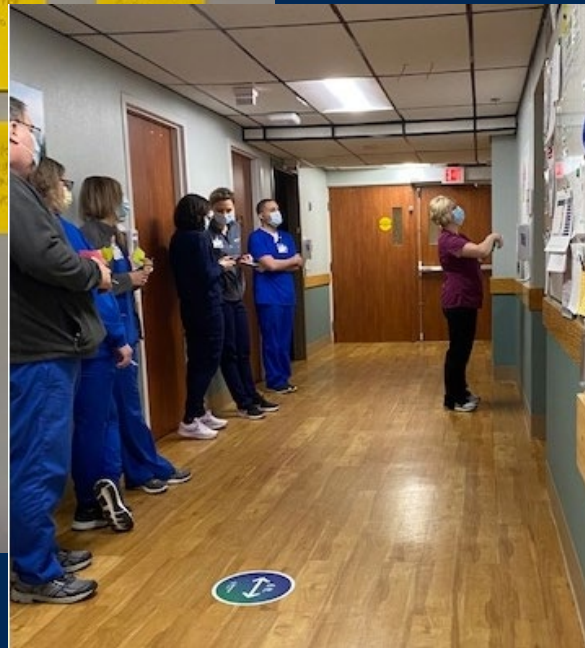
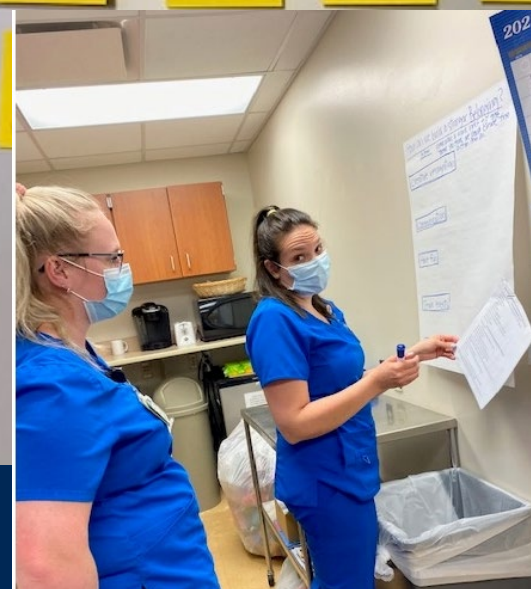
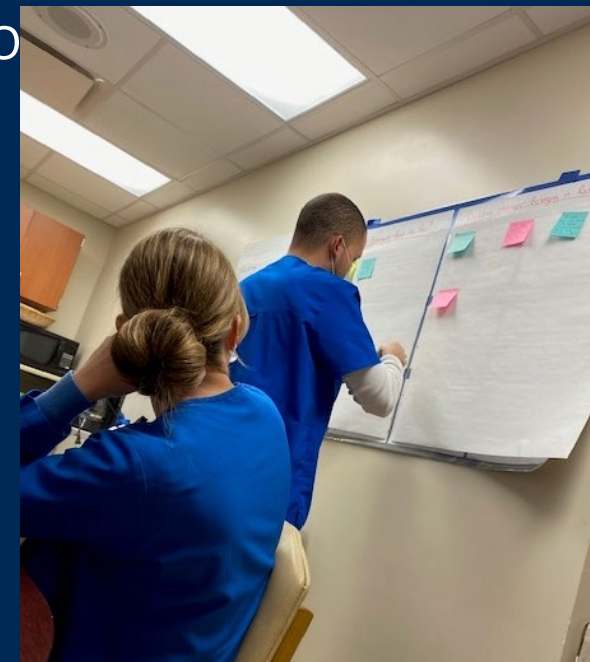


# Together We Focused On BELONGING in Radio

Building Stronger Belonging in Radiology



What does Belonging Mean to You?



# Cost

- Defined Improvement Goals
- Focus on Labor Cost per Units of Service
- Finance tool updated monthly

# Cost tool example

I	J	K	L	M	N	O	P	Q	R	S
New Dept Name	\$ Variance to 2021		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
	Target YTD									
Emergency Department - Big Rapids	\$ 21,152	🟢	\$ (49,241)	\$ (25,613)	\$ 4,121	\$ 22,881	\$ 6,634	\$ 20,950	\$ 11,685	\$ 29,735
ICU - Big Rapids	\$ (10,291)	🔴	\$ (7,315)	\$ (6,176)	\$ 1,571	\$ 3,743	\$ (405)	\$ 2,552	\$ (5,440)	\$ 1,179
Med-Surg - Big Rapids	\$ (78,869)	🔴	\$ (41,975)	\$ (13,817)	\$ 1,868	\$ 16,462	\$ (15,401)	\$ (14,165)	\$ (15,413)	\$ 3,571
Nursing Administration - Big Rapids	\$ (131,985)	🔴	\$ (29,385)	\$ (17,570)	\$ (18,018)	\$ (18,784)	\$ (21,566)	\$ (6,983)	\$ (11,896)	\$ (7,783)
Obstetrics - Big Rapids	\$ (43,329)	🔴	\$ (5,924)	\$ (26,216)	\$ (2,006)	\$ (15,126)	\$ (25,060)	\$ 12,241	\$ (7,918)	\$ 26,681
Emergency Department - Reed City	\$ (78,990)	🔴	\$ (35,831)	\$ (24,305)	\$ (24,139)	\$ (3,175)	\$ (17,434)	\$ 3,766	\$ 2,501	\$ 19,627
<b>SUBTOTAL</b>	\$ (322,312)	🔴	\$ (169,670)	\$ (113,697)	\$ (36,603)	\$ 6,000	\$ (73,232)	\$ 18,361	\$ (26,481)	\$ 73,010

# TAPE Example from OA3 for Cost

**Goal:** Improve the departments meeting productivity targets from 0% to 100% by July 31, 2021

**T:** 100

**A:** 86 **RED**

**PE:** Leading Metric Red labor cost due to incentive shifts, overtime, orientation costs

# 2021 Outcomes

- Improved quality scores throughout the organization.
- Maintained the structure and cadence, despite significant staffing shortages and increased census/acuity, while also saving on cost of care.
- Improvement of Glint score related to “belonging”
- Transparency of work has lifted the level of understanding at each role.

# 2021 Lessons Learned

- Focus resulted in maintenance or improvement of goals, even in a pandemic
- Reporting structure allowed for service lines to learn from each other
- Timely removal of barriers
- Increased collaboration, reduced work in silos
- Process and tools increased transparency to goals



# *Questions*



**Spectrum  
Health**