

Improving Patient Flow With TigerConnect

CHI St. Joseph

TigerConnect West Coast User Group Meeting
San Jose, CA, November 13, 2019

Today's **Speaker**

Kia Parsi, MD

Chief Medical Officer, CHI St. Joseph's Health



Today's Agenda

- Challenges Improving Patient Flow
- Key Steps to Successfully Implementing TigerFlow
- Barriers to Success
- Process Improvement Outcomes
- Expanding TigerFlow & Exploring Integrations

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Challenges With Improving Patient Flow In The ED

CHI St. Joseph's #1 Communication Goal

Improving patient flow in the ED

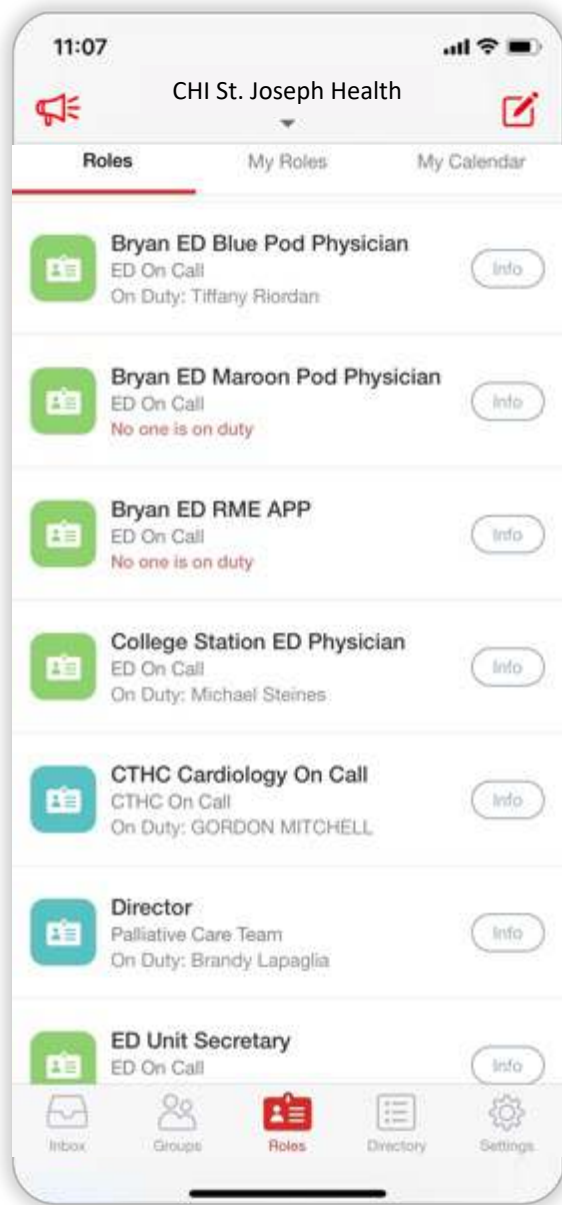
Challenges

- Risk of nonsecure mode(s) of communication
- Workflow interruptions due to communication needs
- Pagers = one-way communication
 - Clinician and staff toil
 - Delay in patient care



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Key Steps To Successfully Implementing TigerFlow



TigerConnect As CHI St. Joseph's Communication Solution

CHI St. Joseph communication requirements:

- HIPAA-compliant, secure
- On-duty Roles
- User friendly
- Ability to integrate with Meditech
- Scalability
- Ability to connect entire care team



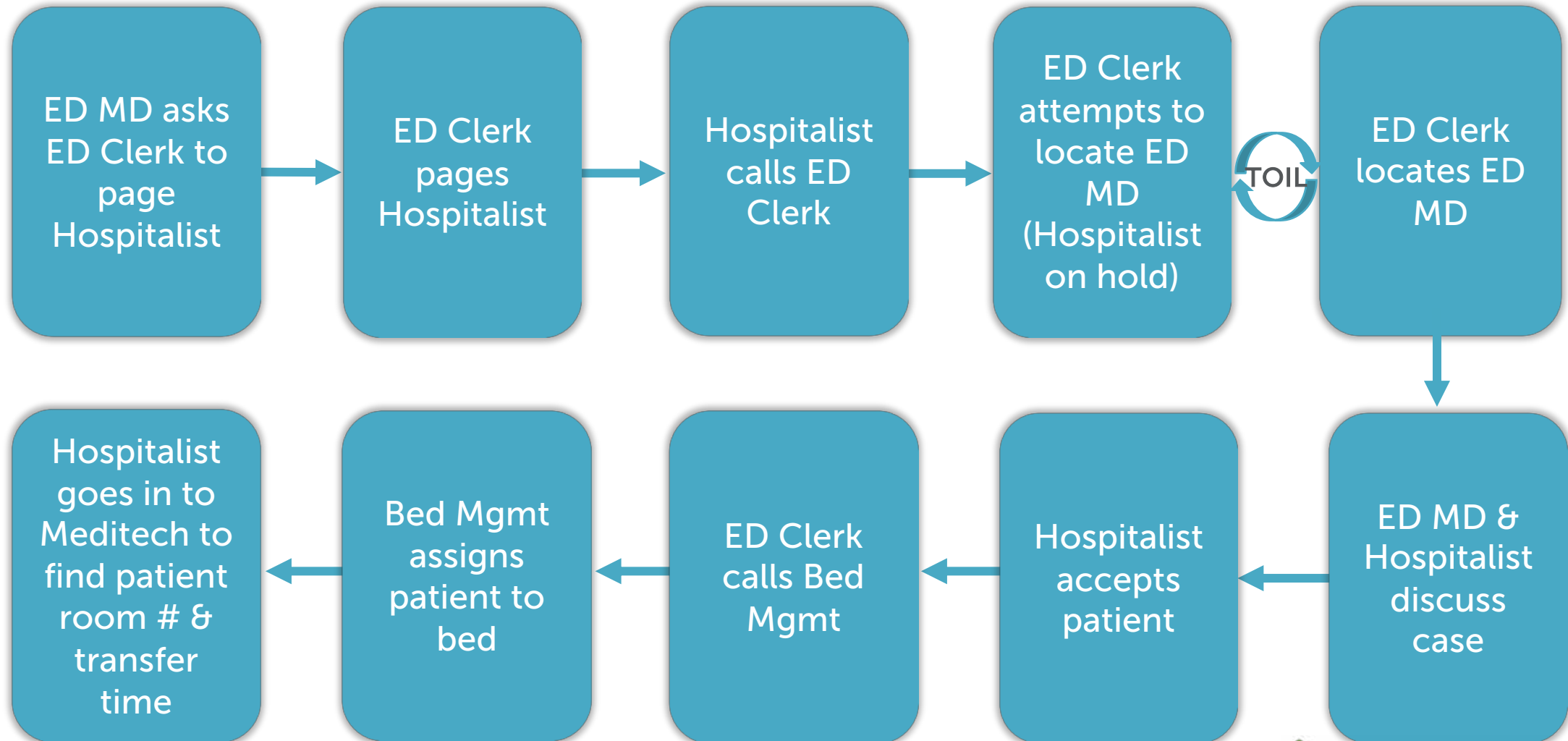
Physician & Staff Buy-In

- Department Chairs & Program Medical Directors = TigerConnect champions
 - Monthly governance meetings
- Medical Staff Services help train physicians
- Mandated TigerConnect for clinical staff



Map Current Workflows & Communication Challenges

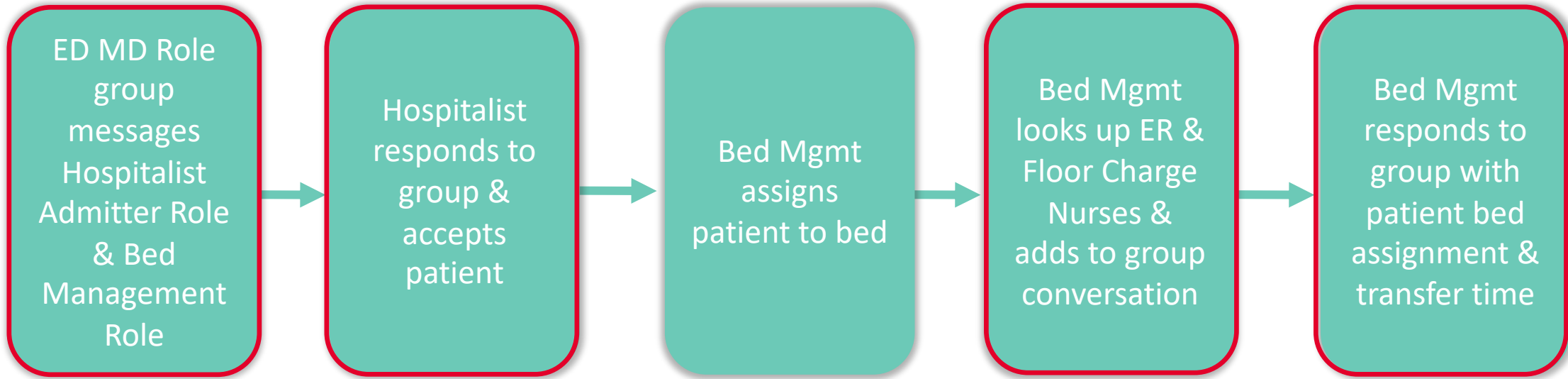
Part Of The ED to Admit Workflow



Develop New Workflows & Processes With TigerFlow At The Core

Part Of The ED to Admit Workflow

TigerConnect



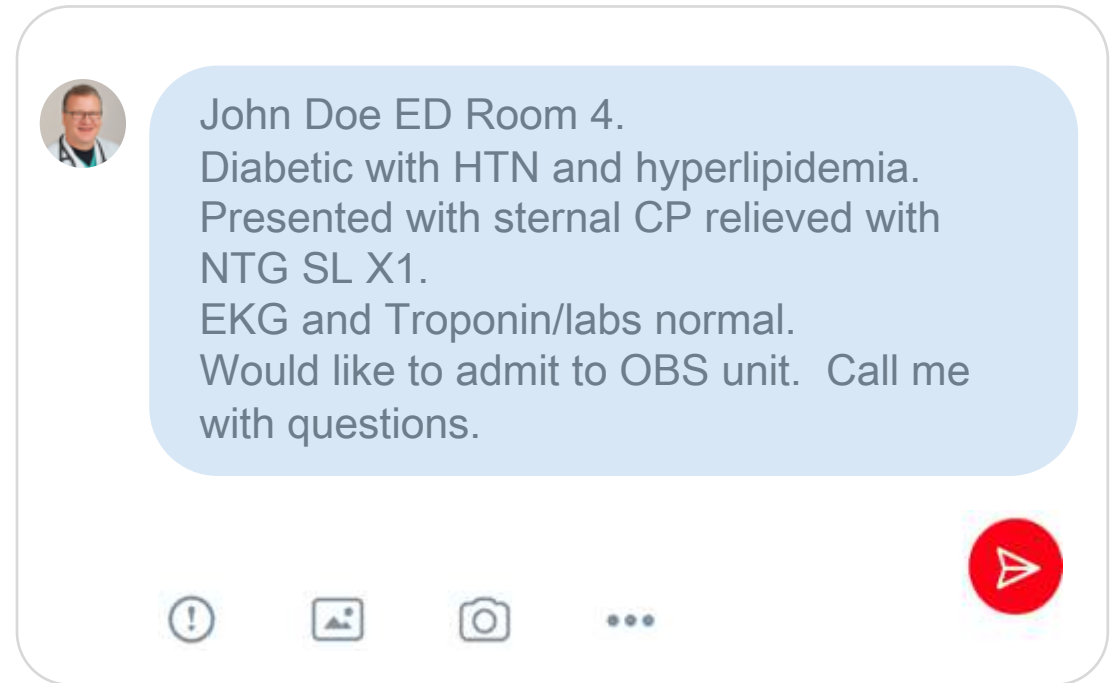
John Doe ED Room 4.
Diabetic with HTN and hyperlipidemia. Presented with sternal CP relieved with NTG SL X1. EKG and Troponin/labs normal. Would like to admit to OBS unit. Call me with questions.

Patient John Doe assigned to OBS unit Room 226. Patient expected to be transferred within 30 minutes.



Implementing New ED to Amit Processes

- Provision appropriate users in TigerConnect:
 - ER physicians
 - Admitting physicians
 - Hospital bed management team
- Create Group in TigerConnect with:
 - ER Attending Role
 - Hospitalist On-Call Role
 - Bed Management Role
 - Floor Charge Nurse
 - ER Charge Nurse
- Educate and train users



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Barriers to Success

Keeping Roles Up To Date

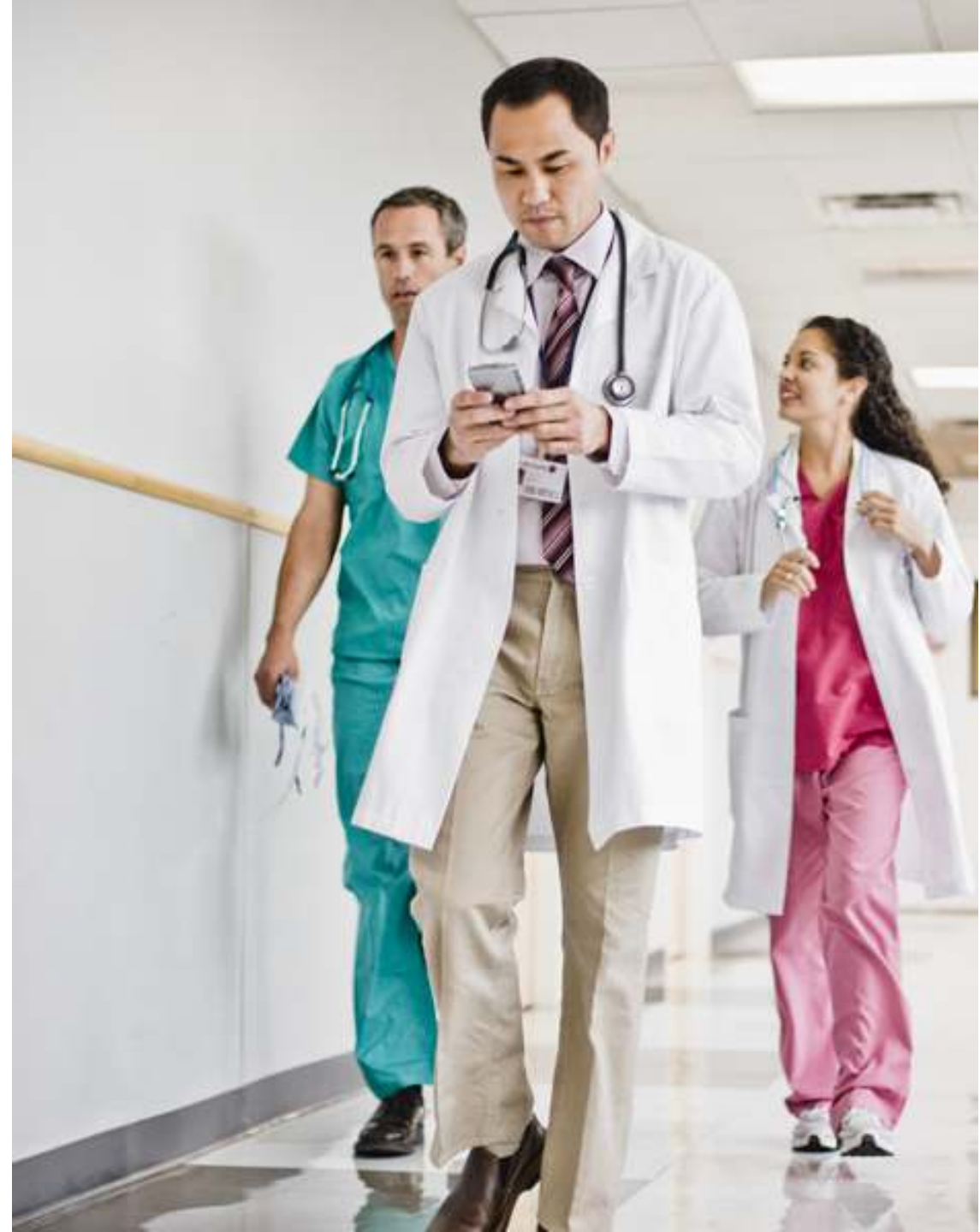
Manual vs automated

Automated Role assignment challenges:

- Lack of resources to keep schedules up to date
- Budget constraints to purchase third party vendor scheduling solution

Solution = manual opt in/out

- Key: make it part of the physicians' and staffs' new daily process



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Outcomes

Improvements with TigerConnect

- Decrease in ED LOS
- Less interruptions for physicians and staff
- Increase in physician and staff satisfaction
- Better communication and collaboration between physicians
- Creates opportunity for:
 - more attentive patient care
 - increase in patient satisfaction



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Additional Opportunities For Process Improvement



Expanding TigerFlow & Exploring Integrations

→ Further optimize ED to Admit processes:

- Creates Roles for Charge Nurses, Residents and Trauma services
- Meditech integrations:
 - Send ED admit requests/orders to Admitting Hospitalist Role
 - Send Admit/Discharge notifications to PCPs

→ Streamline transfer processes

- Expand TigerFlow to rural and College Station hospitals

→ Improve consultation processes

- Create Roles for consulting physicians
- Meditech integration: send consultation orders to Roles



Q & A

