

Reliable Care Blueprinting™

# 2019 RCB Adoption

December 01, 2019

- **RCB Overview**

- VTE Prophylaxis
- Heart Failure
- Mother-Baby
- Spine Surgery
- Major Joint Replacement
- How to contact CET

# What is Reliable Care Blueprinting (“RCB”)?

## RELIABLE CARE BLUEPRINTING

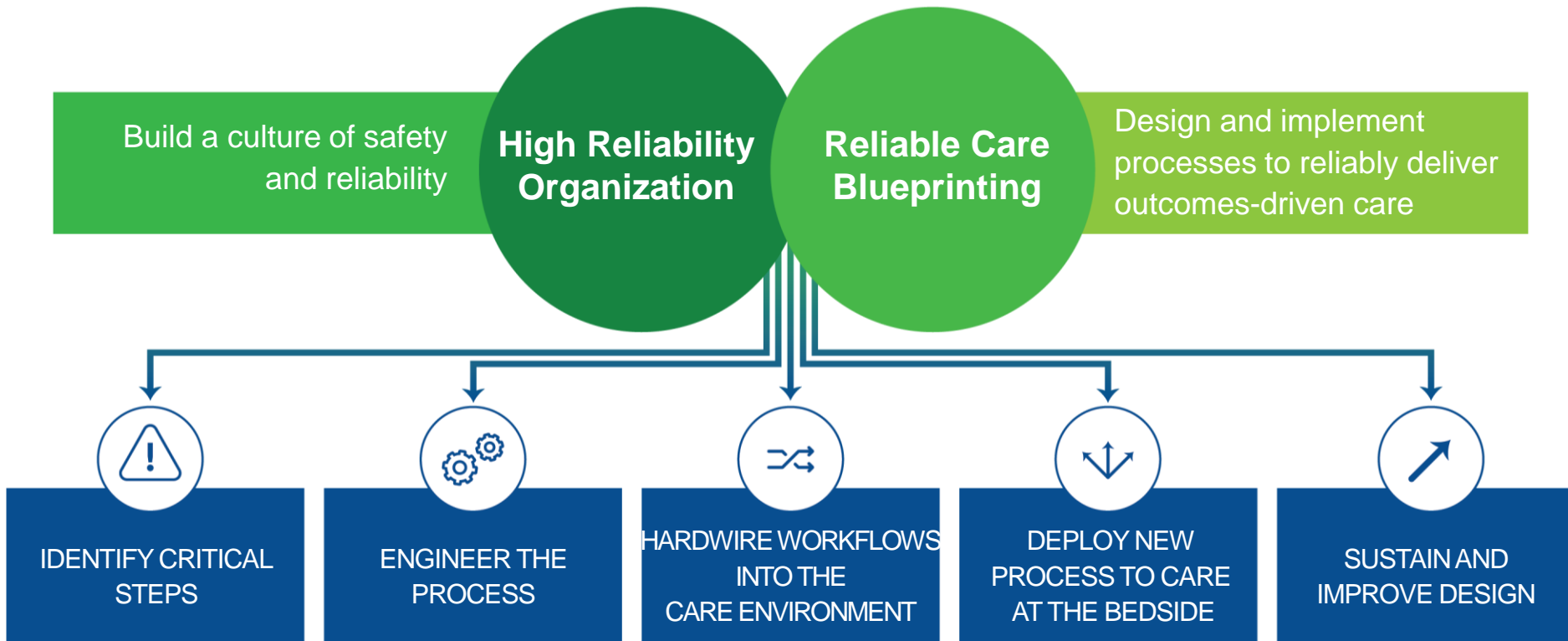
Reliable Care Blueprinting is Texas Health Resources’ approach to care model design to provide patients a safe, reliable experience at every Texas Health location, every time.

### MISSION

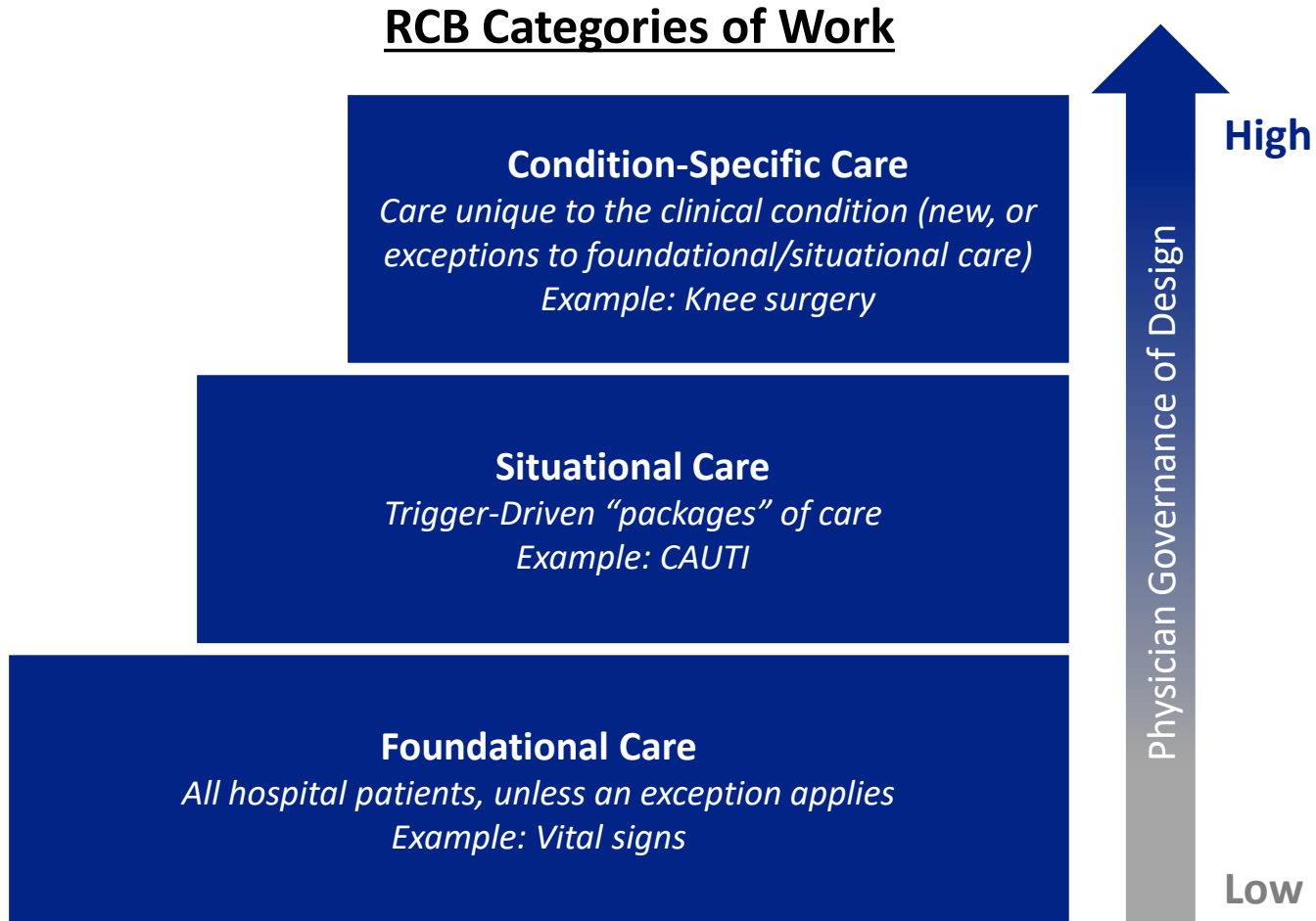
Implementing Reliable Care Blueprinting and principles of High Reliability Organizations will help us fulfill our Mission to improve the health of the people in the communities we serve.

# RCB designs and deploys the processes required to support our journey towards high reliability

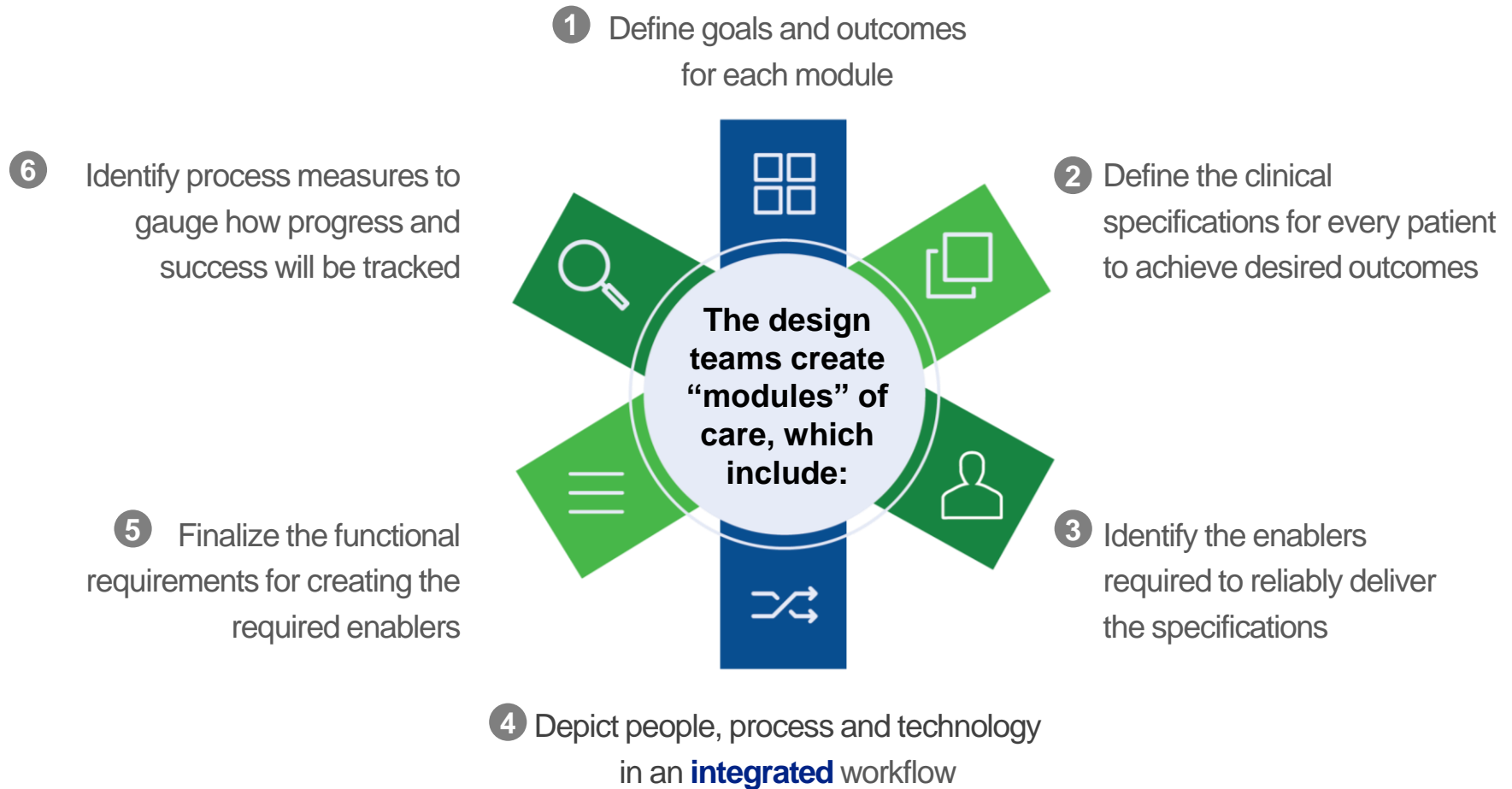
We will achieve high reliability by working together to:



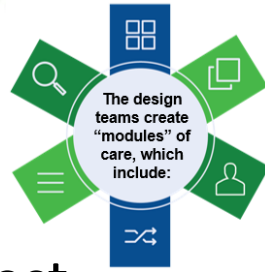
# To structure the care design efforts, RCB defines three categories of work



# There are six steps in the RCB design processes, completed for each care module



# What we mean by “integrated” is the hardwiring of specifications in the clinicians workflow



- Subject matter experts create ways to reliably hardwire best practices and evidence based research – typically in the EMR
- Some examples include:
  - In the VTE Prophylaxis module, an evidence based VTE risk assessment tool (Padua) has been implemented to support identification of a patient’s risk for acquiring VTE and recommend appropriate prophylaxis
  - The heart failure module has a best practice alert (BPA) to complete signs, symptoms, echo findings and diagnosis attestation prior to discharge

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# Why the RCB VTE Prophylaxis module is important for patients at Texas Health

- Texas Health Plano successfully reduced hospital acquired VTEs by over 50 percent by implementing a standardized risk assessment tool
  - The risk assessment tool was intended to remove the subjectivity of ordering prophylaxis
- The RCB design team which included hospitalists, intensivists, and ED physicians, determined that a physician should complete a standardized VTE risk assessment tool (Padua Prediction Tool)
  - Chief nursing officers within Texas Health determined that the Padua tool has components that are outside of nursing scope of practice (i.e., medical diagnoses).
- The Padua tool is an evidence-based, nationally recognized VTE risk assessment tool

# The System Clinical Specs for the VTE risk assessment is standardized through a tool & process steps

The following VTE prophylaxis system clinical specifications are hardwired through a standardized VTE risk assessment tool (Padua Prediction Score):

A1) Assess risk for VTE using standardized tool upon admission

a) Padua Risk Assessment Tool

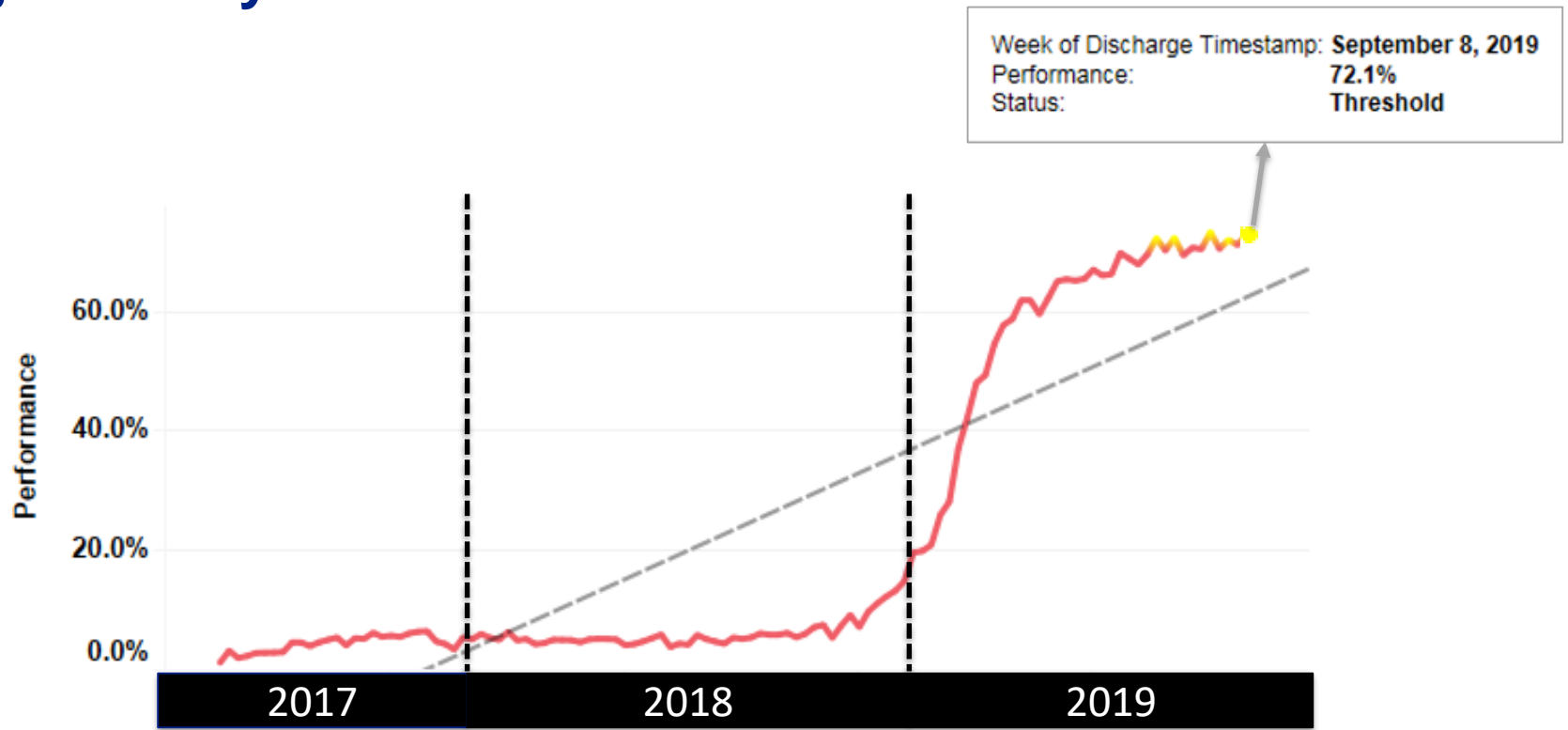
A2) Reassess VTE risk for patients whose initial assessment was low risk at clinically appropriate intervals

a) Process Steps:

- i. On the third and tenth hospital day
- ii. Upon transfer to a higher level of care
- iii. After any surgical procedure

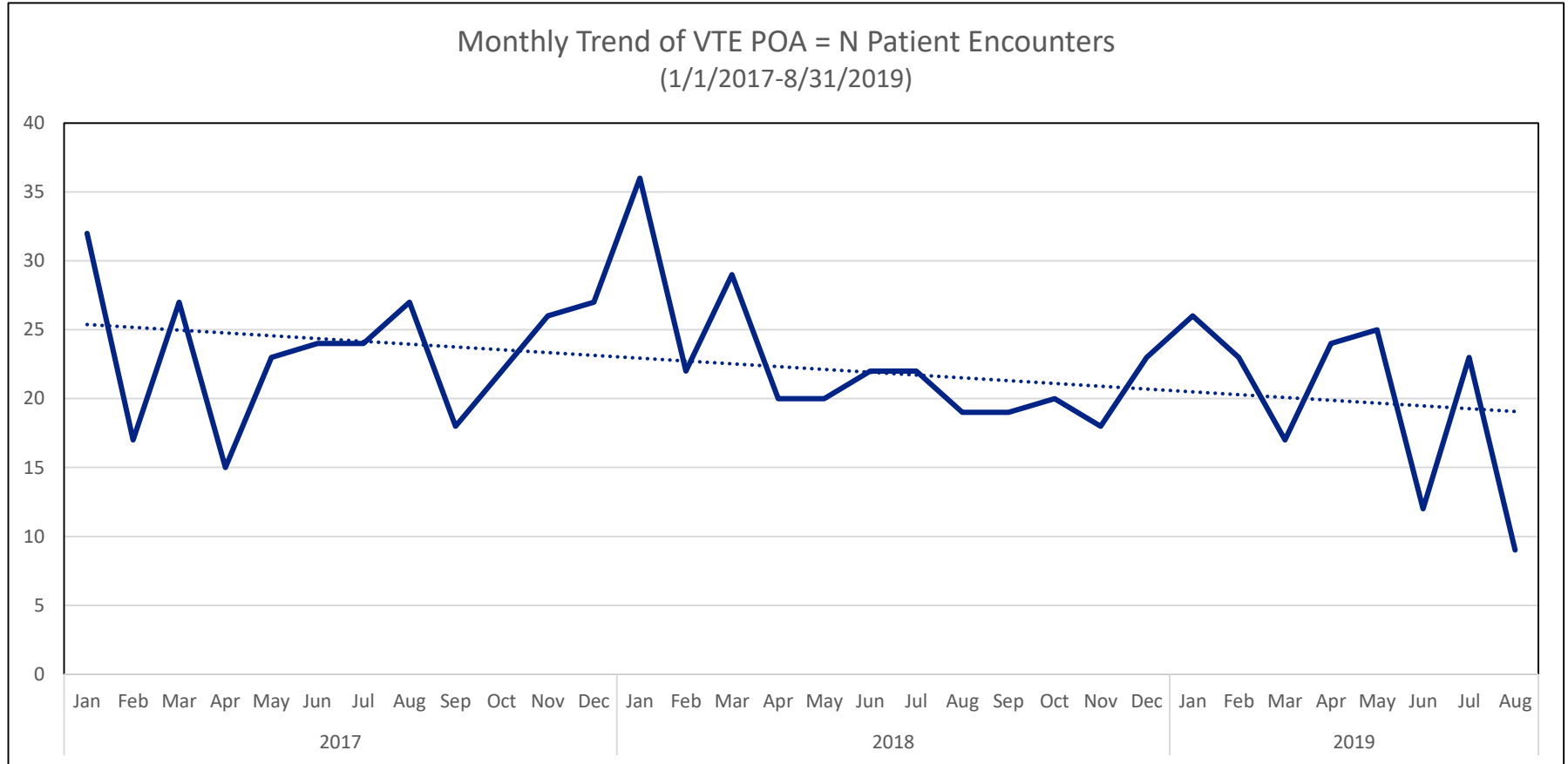
Access the detailed System Clinical Specifications [here](#).

# VTE Risk Assessment adoption has improved significantly in 2019



- To increase adoption of the VTE module we:
  - Included in the RCB 2019 KPI
  - Adoption tour for hospitalists
  - Created a provider tool

# Patients who began their hospital encounter without VTE POA and acquired VTE in their stay is declining



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# Advanced analytics on the RCB heart failure module validated key components of the module

- The analysis determined that the **RCB heart failure module is making an impact** in reducing readmissions when the module is followed
- In particular, documenting the dry weight goal for each patient's stay correlated strongly to reduced readmission
  - Many steps in the module lead to the appropriate documentation of a patient's dry weight goal

# The heart failure module focuses on acute systolic heart failure to reduce readmissions

The following Heart Failure Care system clinical specifications are:

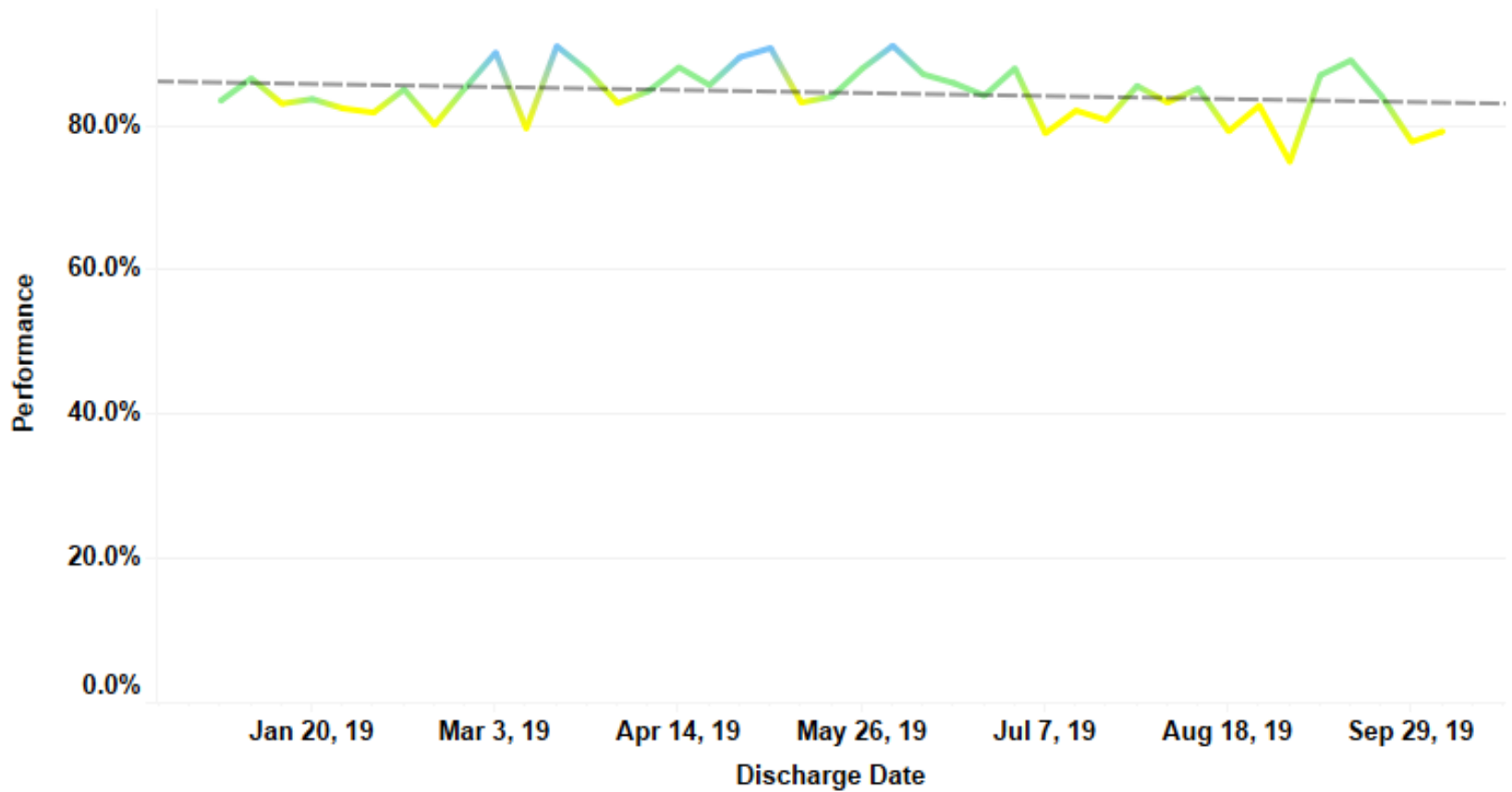
- A. Validate diagnosis
- B. Achieve euvolemia prior to discharge
- C. Administer indicated medications for reduced ejection fraction heart failure (HFrEF)
- D. Identify precipitating cause of HF hospitalization for proper resolution of root cause of acute exacerbation
- E. Deliver clear & detailed plan of self-management care for patients discharged home & patients discharged to post-acute care facilities

Access the detailed System Clinical Specifications [here](#).

# Heart Failure Documentation adoption across Texas Health in 2019

## Measure Trend

This chart shows the weekly performance for the selected time period

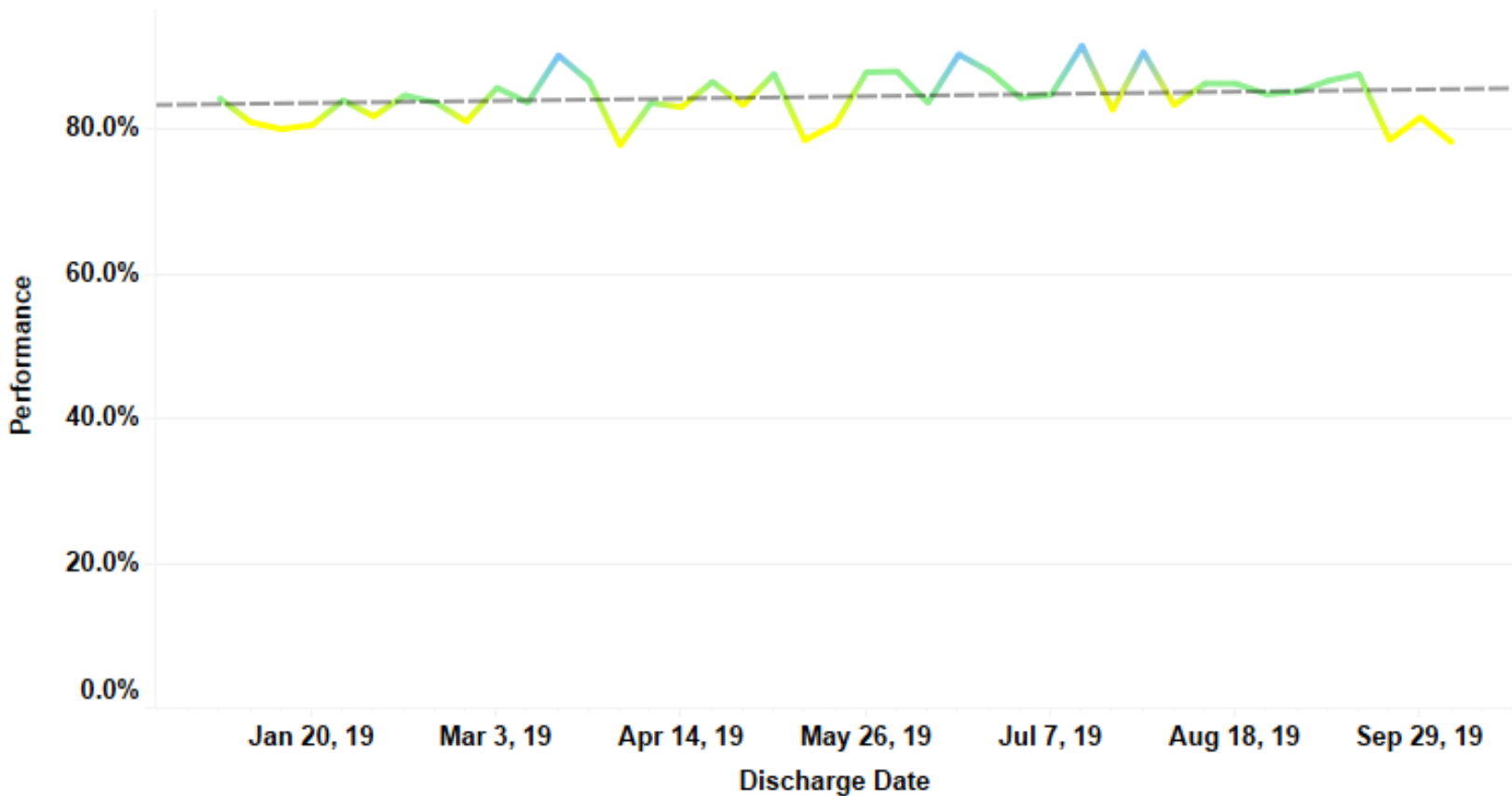




# Heart Failure Dry Weight adoption across Texas Health in 2019

## Measure Trend

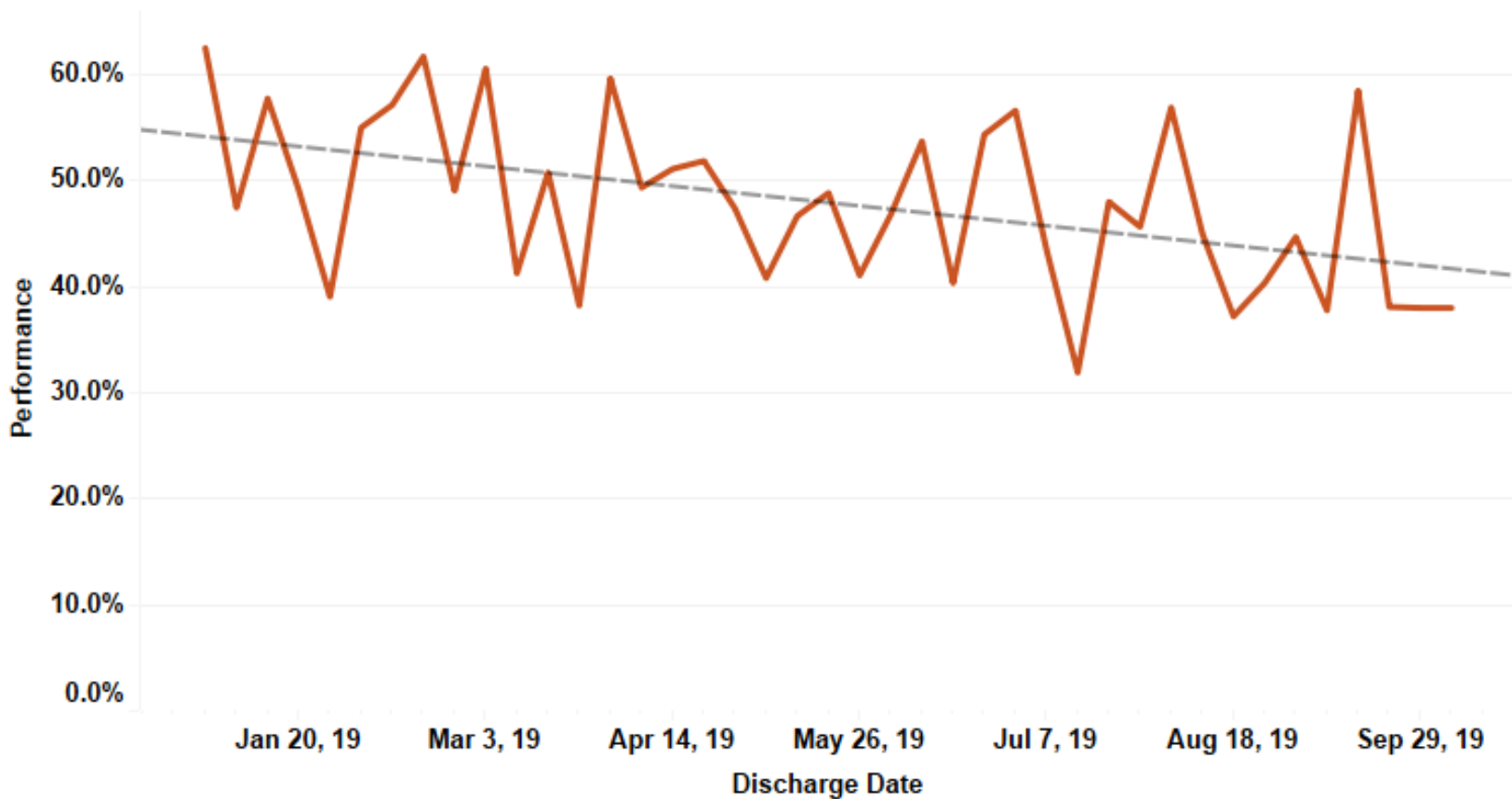
This chart shows the weekly performance for the selected time period



# Heart Failure Evidence Based Discharge Medications adoption across Texas Health in 2019

## Measure Trend

This chart shows the weekly performance for the selected time period



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# The Mother Baby – managing elective deliveries module

The following Managing Elective Deliveries system clinical specifications are:

## A. Scheduling

1. Provide practitioners with patient prenatal education materials on inductions, including why an induction will be performed and the associated risks
2. Confirm gestational age
3. Provide indications for scheduling a delivery or induction

Access the detailed System Clinical Specifications for Mother Baby – Managing Elective Deliveries [here](#).

# The Mother Baby – labor and delivery module helps safely reduce non-scheduled c-sections

The following Mother Baby system clinical specifications are:

## A. Post-Procedure

1. Adhere to labor management definitions for failed induction of labor, arrest disorders and adequate uterine activity established by American Congress of Obstetricians and Gynecologists (ACOG)
2. Document clinical indication for performing all non-scheduled c-sections

Access the detailed System Clinical Specifications for Mother Baby – Labor and Delivery [here](#).

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# The Spine Surgery module standardizes care for patients undergoing elective spine surgery

The following Spine Surgery system clinical specifications are:

- A. Pre-op testing and education
- B. Intraoperative
- C. Acute Recovery
- D. Discharge Planning

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# The Major Joint Replacement module standardizes care for patients with elective total hip or total knee surgery

The following Major Joint Replacement system clinical specifications are:

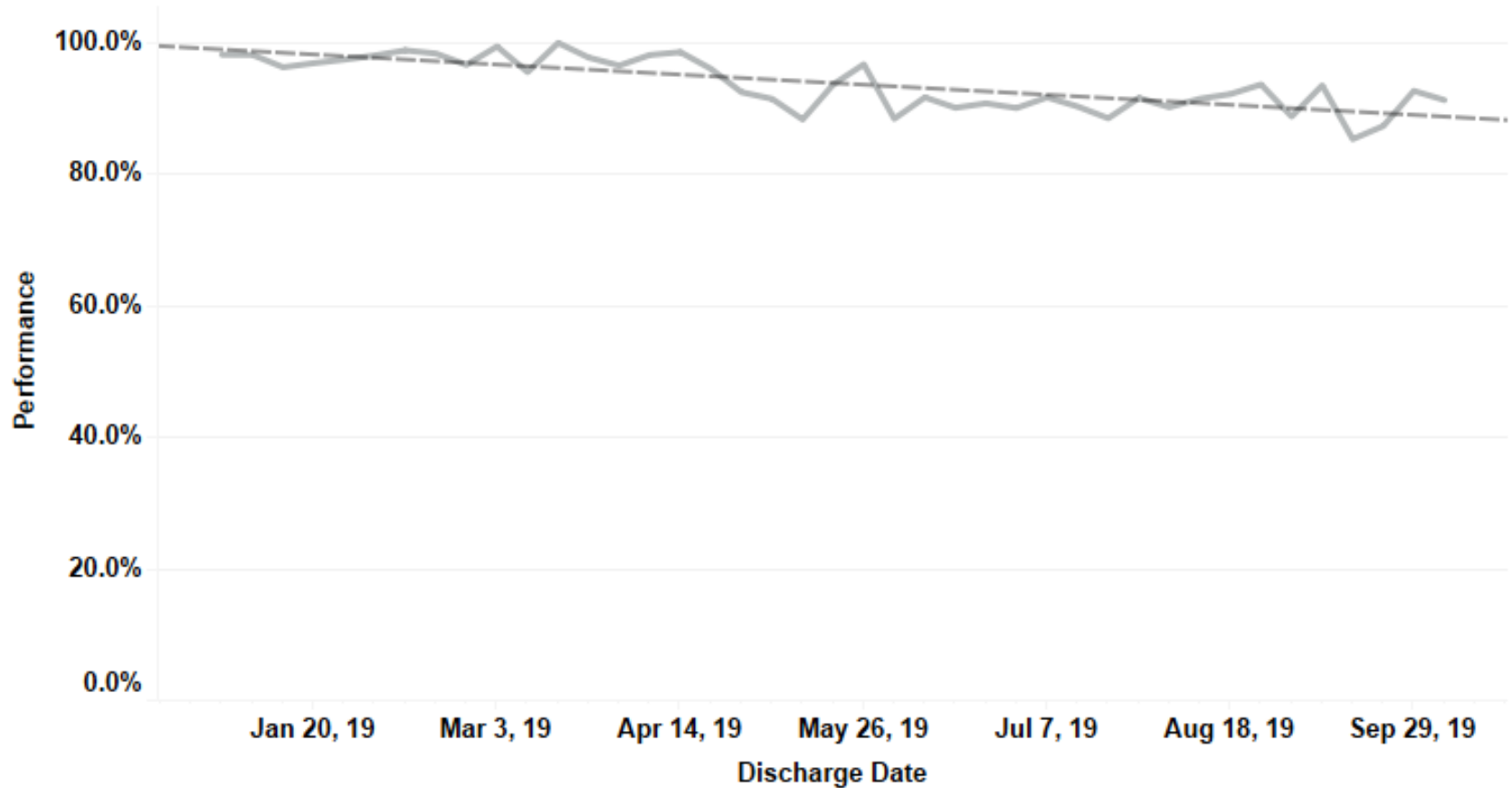
- A. Pre-op testing and education
- B. Intraoperative
- C. Acute Recovery
- D. Discharge Planning

Access the detailed System Clinical Specifications [here](#).

# Day 0 Ambulation Prior to Mid-Night adoption across Texas Health in 2019

## Measure Trend

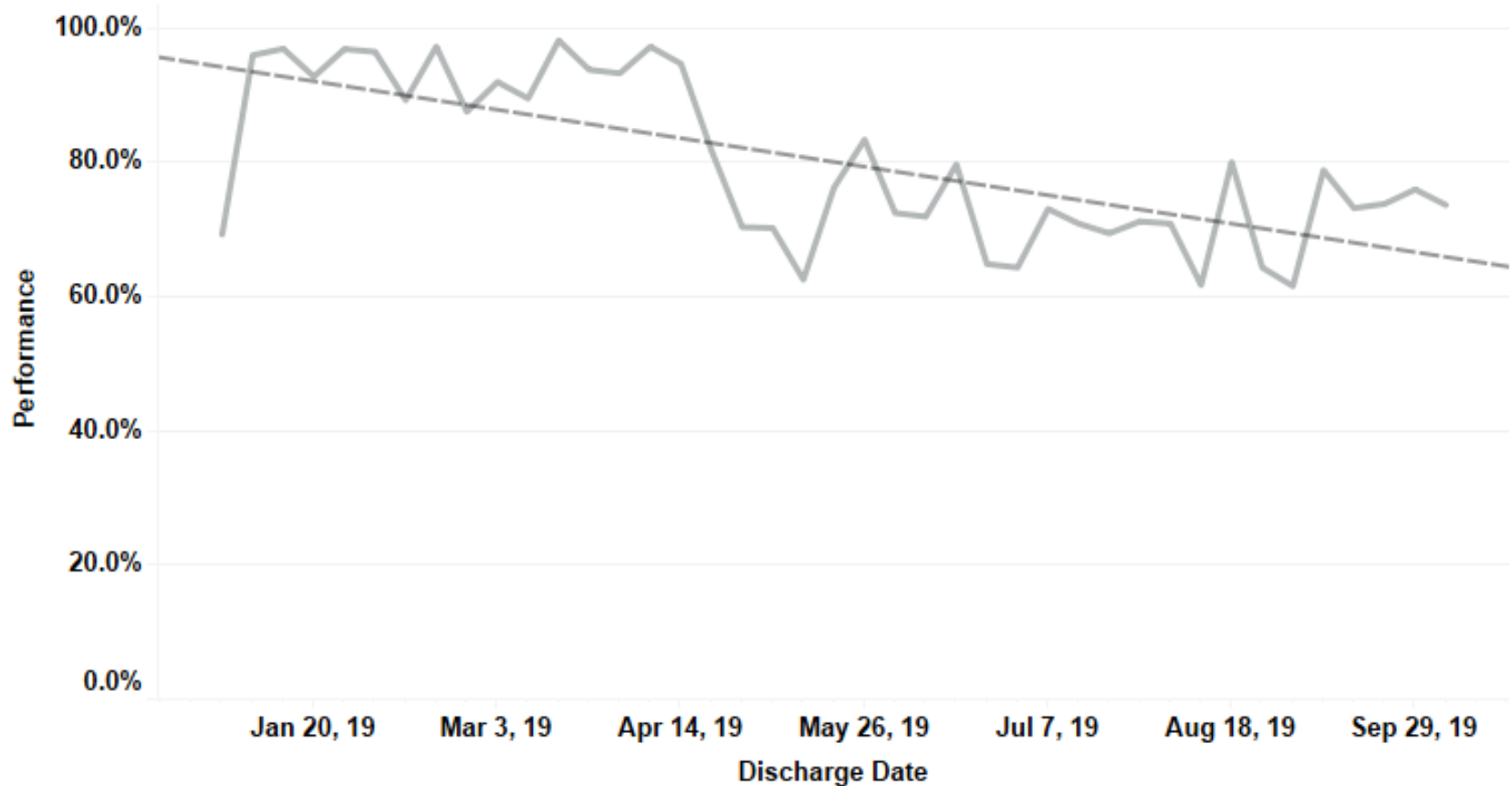
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# Documentation of Physical Therapy Completed 2x Daily Post-Procedure adoption across Texas Health in 2019

## Measure Trend

This chart shows the weekly performance for the selected time period



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## Customer Engagement Team (CET) Contact Information

- The THF CET team member will be available for at-the-elbow service to help you with any documentation questions
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