Sentara Healthcare
Journey to Top System Performance
Howard P. Kern, FACHE
President & CEO
Sentara Healthcare
Overview

I. Organizational Overview
II. Guiding Principles
III. 5 Keys to Success
IV. Performance Improvement
Sentara Healthcare

130 Year Not-for-Profit Mission

3 States Served

4 Medical Groups

1,000+ Affiliated Physicians

12 Hospitals

500,000 Member Health Plan

500+ Sites of Care
In 2013...

We were falling behind

If we are not improving at a rate equal to or better than our peers, we are getting worse.

Our patients deserved more.
..due to:

Fragmented Implementation
..due to:

Siloed Organization Structure
..due to:

Focusing on Too Many Things
Guiding Principles

Est. 2013

We will **reduce variation** in our clinical and operational processes by consistently implementing best practices.

Sentara’s **patient experience** is fundamental.

We will embed changes across the **entire continuum of care** in all regions.

Enhancing **Sentara culture** and **decision-making** tools will be key.
High Performance Design Structure
High Performance Design Structure
Classic Three-Legged Stool

- Sentara BOD
- CEO
- CEO Workgroup
- Medical Staffs
- COO
- CVPs
- CMO
- SQCN

- HOSPITALS
- LONG-TERM CARE
- HOME HEALTH/HOSPICE
- MEDICAL GROUPS

Sentara BOD
CEO
CEO Workgroup
Medical Staffs
COO
CVPs
CMO
SQCN

HOSPITALS
LONG-TERM CARE
HOME HEALTH/HOSPICE
MEDICAL GROUPS
High Performance Design Structure
Clinical Leadership Council
High Performance Design Structure
Clinical Leadership Council

Interdisciplinary Structure
Voting Members (n=55)

- System Executives, 9, 16%
- Medical Staff Representatives, 19, 35%
- Hospital Presidents, 14, 25%
- Service Line Physician Leaders, 13, 24%
- Clinical Leadership Council
- CEO Workgroup
- CEO
- COO
- CMO
- SQCN
- MEDICAL GROUPS
- SENTARA CEO Workgroup
High Performance Design Structure
Interdisciplinary Horizontal Teams

High Performance Teams/Service Lines
Clinical PI™ Priority Teams
Patient Experience Priority Teams

Clinical & Patient Experience Goals, Priorities & Processes
High Performance Design Structure
Interdisciplinary Horizontal Teams

- CEO
  - CEO Workgroup
- CMO
- SQCN

**Interdisciplinary Horizontal Teams**

<table>
<thead>
<tr>
<th>Management Leader</th>
<th>Physician Leader</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse Leader</td>
<td>Ancillary Leader</td>
</tr>
</tbody>
</table>

**High Performance Teams/Service Lines**

- Clinical PI™ Priority Teams
- Patient Experience Priority Teams

**Clinical & Patient Experience Goals, Priorities & Processes**
Keys to Success
5 Keys to Success

1. Performance excellence
2. Accountability for results
3. Leadership execution & alignment
4. Learning enabled across the organization
5. Values-driven affiliations
Focus on reducing unnecessary variation
2. Accountability for Results | Sustaining Improvement

Monitoring for **sustained improvement**.

<table>
<thead>
<tr>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HEART FAILURE, SEPSIS, PNEUMONIA</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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**CLABSI RATE**

**MAMMO TAT**

**CDI RATE**
Effective execution of best practices by interdisciplinary teams

3. Leadership Execution | Horizontal Leadership

Horizontal Leadership

<table>
<thead>
<tr>
<th>High Performance Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management Leader (Hospital President)</td>
</tr>
<tr>
<td>Nurse Leader (VP of Nursing)</td>
</tr>
<tr>
<td>Physician Leader</td>
</tr>
<tr>
<td>Ancillary Leader</td>
</tr>
</tbody>
</table>

Vertical Leadership

<table>
<thead>
<tr>
<th>Hospital Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital President</td>
</tr>
<tr>
<td>Hospital Nurse Executive</td>
</tr>
<tr>
<td>Hospital VP of Medical Affairs</td>
</tr>
<tr>
<td>Medical Staff President</td>
</tr>
</tbody>
</table>
3. Leadership Execution | System Prioritization

Identified Opportunities

- Patient Experience
- Patient Impact
- Financial Impact
- Benchmarking
- Goal Alignment
- Simplicity of Scope
- Public Reporting

2018 Clinical Performance Priorities

<table>
<thead>
<tr>
<th>Priority</th>
<th>Priority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Readmissions</td>
<td>30-Day Inpatient Mortality</td>
</tr>
<tr>
<td>Appointment Availability</td>
<td>ED Flow: Treat and Release</td>
</tr>
<tr>
<td>Hospital Flow: Treat and Admit</td>
<td>Order Cycle Time</td>
</tr>
</tbody>
</table>
Reinforcement of a culture that supports performance excellence and learning.

Aligned and working toward the same results

Commitment to both learning and sharing best practices
5. Values-driven Affiliations

- **2009**: Sentara Northern Virginia Medical Center
- **2011**: Sentara Rockingham Memorial Hospital
- **2011**: Sentara Martha Jefferson Hospital
- **2013**: Sentara Halifax Regional Hospital
- **2011**: Sentara Princess Anne Hospital
- **2014**: Sentara Albemarle Medical Center
Performance Improvement
Performance Improvement

2011  ➔  2016

Data Points
1  Overall
2  Inpatient Mortality
3  Complications
4  ALOS
5  HCAHPS

Profiled Health System
2011 Comparison group n=100
2007-2011 Comparison group: n=100

Profiled Health System
2016 Comparison group n=113
2012-2016 Comparison group: n=112
Performance Improvement

2016

Data Points
1. Overall
2. Inpatient Mortality
3. Complications
4. ALOS
5. HCAHPS

Profiled Health System
2011 Comparison group n=100
2007-2011 Comparison group: n=112

2016 Comparison group: n=113

Stair step. Then consistent

Profiled system is statistically BETTER THAN expected (95% confidence)
Performance Improvement | System-wide Alignment
2008 Inpatient Mortality & Complications

Inpatient Mortality

Complications

Hospital Key
H1: Sentara Bayside
H2: Sentara Careplex
H3: Sentara Leigh
H4: Sentara Norfolk Gen
H5: Sentara Obici
H6: Sentara Virginia Beach
H7: Sentara Williamsburg

2008 Level of Achievement
Performance Improvement | System-wide Alignment

2013 Inpatient Mortality & Complications

**Hospital Key**
1: Sentara Halifax Regional
2: Sentara Martha Jefferson
3: Sentara CarePlex
4: Sentara Leigh
5: Sentara Norfolk Gen
6: Sentara Northern VA
7: Sentara Obici
8: Sentara Princess Anne
9: Sentara RMH
10: Sentara Virginia Beach
11: Sentara Williamsburg
Performance Improvement | System-wide Alignment

2016 Inpatient Mortality & Complications

Inpatient Mortality

Complications

Hospital Key
1: Sentara Martha Jefferson
2: Sentara Albemarle NC
3: Sentara CarePlex
4: Sentara Halifax
5: Sentara Leigh
6: Sentara Norfolk Gen
7: Sentara Northern VA
8: Sentara Obici
9: Sentara Princess Anne
10: Sentara RMH
11: Sentara Virginia Beach
12: Sentara Williamsburg
Performance Improvement | System-wide Alignment

System A

Sentara

Highly reliable goal-setting

Horizontal leadership

Accountability across all levels of leadership

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2016 Mean HAI SIR

2016 Healthcare-Associated Infections: Standardized Infection Rate Detail

SIR = Standardized Infection Ratio
Virginia Hospitals
IBM Watson Performance
(n=72)

<table>
<thead>
<tr>
<th>VA Hospitals</th>
<th>33% (24)</th>
<th>19% (14)</th>
<th>14% (10)</th>
<th>17% (12)</th>
<th>17% (12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>VA Hospitals (W/o Sentara)</td>
<td>28% (17)</td>
<td>18% (11)</td>
<td>16% (10)</td>
<td>18% (11)</td>
<td>20% (12)</td>
</tr>
<tr>
<td>Sentara VA Hospitals</td>
<td>64% (7)</td>
<td>27% (3)</td>
<td>0% (0)</td>
<td>9% (1)</td>
<td>0% (0)</td>
</tr>
</tbody>
</table>

National Quintile Key

- Green: > 80 to 100
- Yellow: > 60 to 80
- Orange: > 40 to 60
- Red: > 20 to 40
- Gray: > 0 to 20
Performance Improvement | National Recognition

2012 - 2016 Rate of Improvement

2016 Performance

Watson Health™
15 TOP HEALTH SYSTEMS
2018

Quintile Key
- > 80 to 100
- > 60 to 80
- > 40 to 60
- > 20 to 40
- > 0 to 20
What’s next for Sentara?

1. Journey to becoming a highly predictable organization.
2. Pursuit of higher quality and lower total cost of care across the continuum.
3. Continue to scale High Performance as the organization continues to grow and evolve.

“The true finish line is always the one yet to come.” - Sergio Marchionne
5 Keys to Success

1. Performance excellence
2. Accountability for results
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