

**St. Charles
Parish Hospital**



Managed by
Ochsner[®]
Health System

Parish Council Update

November 18, 2019

Who We Are



- Established in 1959
- Non-profit community hospital with 59 beds (inpatient and outpatient)
 - Medical Surgical (31),
 - Behavioral Health Unit (20)
 - Emergency Room (14)
 - Intensive Care Unit (8)
 - Rehabilitation Services (PT/OT/ST)
 - Cath Lab Services
 - Diagnostic Imaging Services
- Joint Commission Accredited
- 2014 St. Charles Parish Hospital signed a management agreement with Ochsner Health System.

Current Specialties at SCPH

- Inpatient Psychiatry
- Hematology/Oncology
- Hepatology
- General Surgery
- Gastroenterology
- OB/GYN
- Orthopedics/Sports Medicine
- Pain Management
- Urology
- Podiatry
- Cardiology
- Primary Care
- Nephrology (Community)
- Dermatology (Community)
- ENT (Community)
- Pediatric Plastic Surgery and Orthopedic Surgery (currently surgery only)



Keeping Care Local



East Bank Development

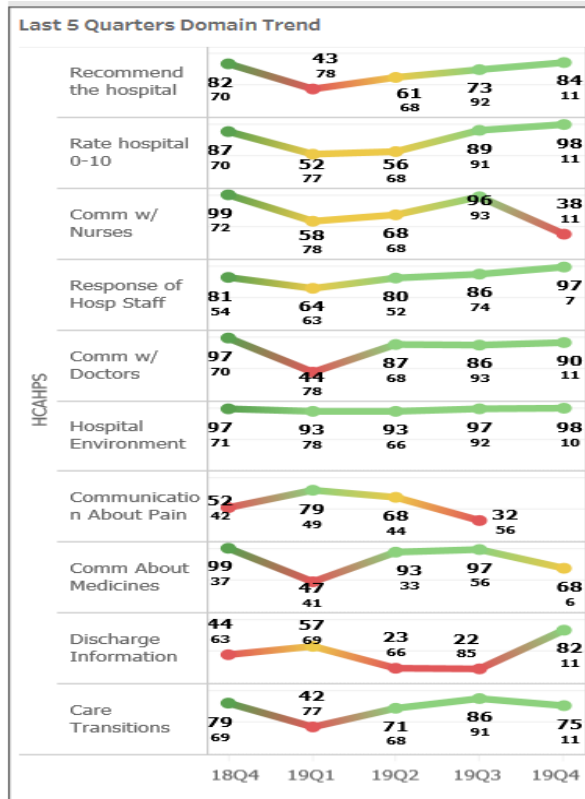


- ❖ Ochsner OBGYN
- ❖ Ochsner Urology
- ❖ Ochsner Primary Care
- ❖ Ochsner Retail Pharmacy
- ❖ Ochsner Pediatrics
- ❖ Community Urgent Care
- ❖ Addiction Recovery Resources
- ❖ MORE TO COME!

Prove our Value: Quality-Inpatient

St. Charles Quality Dashboard Page 1																
Category	Goal		Metric	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	2019 YTD	2018	2017
Core Measures - CareDiscovery																
IMM-2 (Oct-Mar)	99.8%	95.2%	Influ. Immunization													
IMM- HR Employee (Oct-Mar)			Influ. Immunization													
PC-01 COMPLIANCE	100.0%	96.9%	El. Deliv. < 39 wks											N/Ap	N/Ap	N/Ap
ED -1	Median Time in Min.		ED Arrival to ED Departure for Admitted Pts													
ED- 2	Median Time in Min.		Admit Decision Time to ED Departure Time for Admitted Pts.													
HBIPS PACS																
Prelim Occurrence Reporting																
Number of Falls	N/Ap	Number of Falls		0	0	2	0	0	0	0	1	1	0	4	5	6
Falls Rate	≤ 1.75	Inhospital Falls: Per 1000 pt days		0.00	0.00	5.12	0.00	0.00	0.00	0.00	3.20	3.50	0.00	1.25	1.44	1.27
Rates of Falls with Injury	0	Inhosp Falls w/ Harm: Per 1000 pt days		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.58	0.21
Falls w/ Maj Harm/Death	0	# Falls w/Major Harm/Death		0	0	0	0	0	0	0	0	0	0	0	0	0
HAPU Rate	0%	# Pts / Dchs (%)		0	0	0	0	0	0	0	0	0	0	0.00	0.00	0.25
Hosp Acq Stage 3/4 PUS	0	Patients with Stage 3/4 PUs		0	0	0	0	0	0	0	0	0	0	0	0	0
Medication Error (harm)	0	NQF "with harm" status err reporting		0	0	0	0	0	0	0	0	0	0	0	0	0
Infection Control - Internal Data																
Catheter Associated UTI (CAUTI) ^H	≤ 1	Number of Infections		0	0	0	0	0	0	0	0	0	0	0	1	1
CAUTI Rate ^H	≤ 0.9	# infections / by device days * 1000		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.55	
Central Line Associated Bloodstream Infection (CLABSI) ^H	Zero (0)	Number of Infections		0	0	0	0	0	0	0	0	0	0	0	1	0
CLABSI Rate ^H	≤ 0.8	# infections / by device days * 1000		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.45	0.00
Adult Vent Asso Pneum (VAP)	Zero (0)	Number of Infections		0	0	0	0	0	0	0	0	0	0	0	0	0
VAP Rate Adult	≤ 0.4	# infections / by device days * 1000		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
COLO SSI (NHSN Codes Only)	Zero (0)	Number of Infections		0	0	0	0	0	0	0	0	0	0	0	0	1
COLO SSI Rate (NHSN Codes Only)	≤ 4.0%	# infections / procedures * 100		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	12.50%
ABD HYST SSI (NHSN Codes Only)	Zero (0)	Number of Infections		0	0	0	0	0	0	0	0	0	0	0	0	0
ABD HYST SSI Rate (NHSN Codes Only)	≤ 1.0%	# infections / procedures * 100		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Cath Hospital Acquired Only (CAUTI)	≤ 1 Event	Number of Hospital Acq Infections only		0	0	0	0	0	0	0	0	0	0	0	1	0
Cdifi Rate (NHSN Codes Only)	≤ 1 Event	Hospital Acquired only per 1000		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.27	0.00
Cath Hospital Acquired Only (CAUTI)	≤ 1 Event	Number of Hospital Acq Infections only		0	0	0	0	0	0	0	0	0	0	0	0	0
Cdifi Rate (NHSN Codes Only)	≤ 1 Event	Hospital Acquired only per 1000		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
30 Day Re-admit Rates																
ALL Medicare Readmits (CareDiscovery)	≤ 14%	ALL Medicare 30 day readmits OHS to any OHS facility		7.19%	8.47%	6.83%	12.50%	5.88%	8.93%	3.23%	3.77%				8.56%	12.62%
Risk Adjusted Measures																
RAMI (CareDiscovery) POA Adj	≤ 0.85	Actual to Exp (All Payor Adult Excludes SNF, PSYCH, PEDs, Newborns, and REHAB)		0.00	0.72	1.18	0.00	0.00	0.00	0.00	0.00	0.00		0.30	0.79	0.83
ECRI (CareDiscovery) POA Adj	≤ 0.65			0.00	6.08	0.00	2.96	0.00	1.26	0.00	0.00	0.00		0.60	0.66	0.65
RAMI - Sepsis as PDX (CareDiscovery) POA Adj by Qtr	≤ 1.0														0.51	0.54
Raw Mortality																
Raw Mortality	< 2%	All Payor, All Ages Inpatient		0.73%	1.55%	1.78%	0.00%	0.00%	2.26%	2.38%	2.31%	1.38%	2.59%	1.38%	0.57%	0.66%

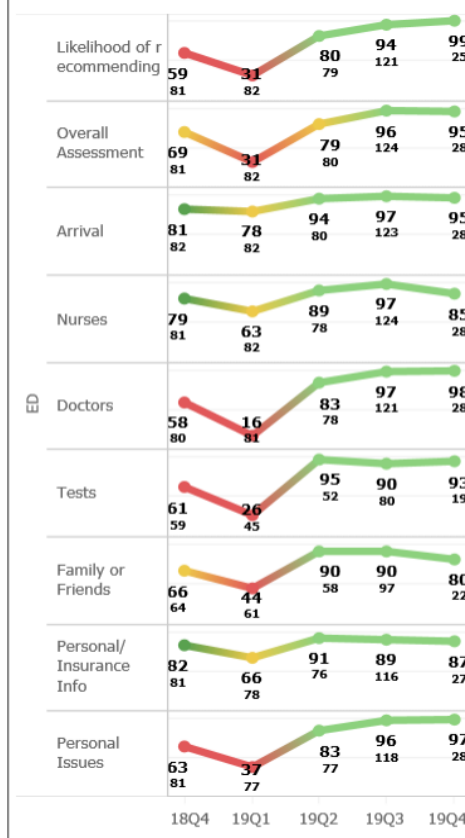
Prove our Value: HCAHPS



	2018					2019 YTD				
	Q1	Q2	Q3	Q4	YTD	Q1	Q2	Q3	Q4	YTD
Recommend the hospital	71	76	78	82	77	43	61	73	84	61
Rate hospital 0-10	94	91	94	87	92	52	56	89	98	73
Comm w/ Nurses	98	98	96	99	98	58	68	96	38	81
Response of Hosp Staff	96	94	91	81	91	64	80	86	97	81
Comm w/ Doctors	89	87	92	97	92	44	87	86	90	79
Hospital Environment	98	96	94	97	97	93	93	97	98	95
Communication About Pain	92	44	28	52	58	79	68	32		59
Comm About Medicines	98	36	89	99	93	47	93	97	68	89
Discharge Information	59	94	64	44	66	57	23	22	82	33
Care Transitions	85	99	77	79	88	42	71	86	75	72

Prove our Value: EDCAHPS

Last 5 Quarters Domain Trend



	2018					2019 YTD				
	Q1	Q2	Q3	Q4	YTD	Q1	Q2	Q3	Q4	YTD
Likelihood of recommending	62 98	68 100	97 90	59 81	76 369	31 82	80 79	94 121	99 25	82 307
Overall Assessment	55 101	58 100	96 92	69 81	74 374	31 82	79 80	96 124	95 28	82 314
Arrival	85 101	88 100	96 93	81 82	89 376	78 82	94 80	97 123	95 28	93 313
Nurses	58 101	54 99	93 94	79 81	74 375	63 82	89 78	97 124	85 28	89 312
Doctors	53 100	40 100	98 94	58 80	69 374	16 81	83 78	97 121	98 28	83 308
Tests	44 76	49 69	88 65	61 59	62 269	26 45	95 52	90 80	93 19	85 196
Family or Friends	47 88	50 81	96 70	66 64	68 300	44 61	90 58	90 97	80 22	80 235
Personal/Insurance Info	75 97	69 95	98 90	82 81	84 363	66 78	91 76	89 116	87 27	85 297
Personal Issues	64 97	60 97	95 89	63 81	76 364	37 77	83 77	96 118	97 28	86 299

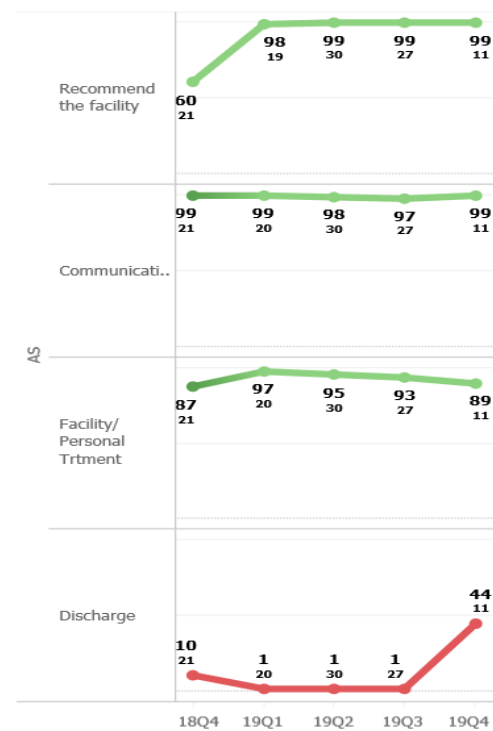
Prove our Value: Outpatient Diagnostic



	2018					2019 YTD				
	Q1	Q2	Q3	Q4	YTD	Q1	Q2	Q3	Q4	YTD
Likelihood of recommending	32 193	22 177	47 246	62 196	40 812	53 196	86 155	79 173	95 55	76 579
Overall Assessment	28 193	14 179	58 248	73 197	44 817	67 196	84 154	96 173	92 55	85 578
Facility	31 198	28 183	54 247	60 200	43 827	52 196	85 155	82 175	76 56	73 582
Personal Issues	38 193	20 181	61 251	63 196	46 820	65 194	84 154	94 172	88 55	84 575
Registration	38 196	40 183	66 250	84 198	59 827	87 194	94 156	96 175	98 56	94 580
Test or Treatment	42 198	11 182	52 250	87 200	45 829	82 197	79 156	94 175	93 56	87 582

Prove our Value: Ambulatory

Last 5 Quarters Domain Trend



	2018					2019 YTD				
	Q1	Q2	Q3	Q4	YTD	Q1	Q2	Q3	Q4	YTD
Recommend the facility	84 20	99 44	95 41	60 21	93 126	98 19	99 30	99 27	99 11	99 87
Communication	49 20	63 44	77 42	99 21	79 127	99 20	98 30	97 27	99 11	99 88
Facility/Personal Trtment	28 20	33 44	69 42	87 21	51 127	97 20	95 30	93 27	89 11	95 88
Discharge	4 20	1 44	6 42	10 21	2 125	1 20	1 30	1 27	44 11	1 88

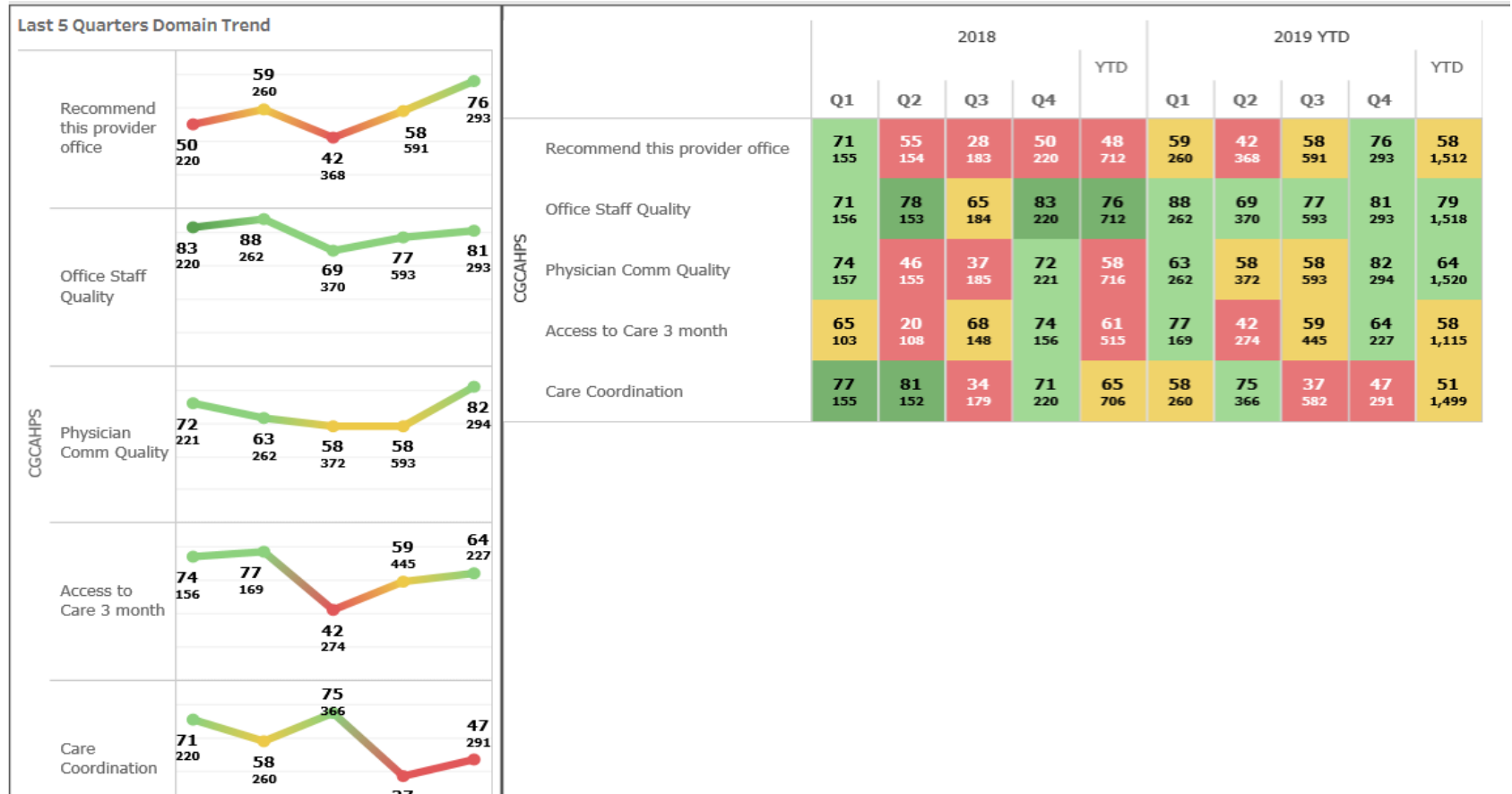
AS

AS

Prove our Value: Quality-Clinics

Healthy Planet - River Region							
Top 7 Measures	RIVER REGION 10/14	RIVER REGION 10/21	RIVER REGION 10/28	RIVER REGION 11/04	GOAL	Variance to Target	System
Breast Cancer Screening	88%	89%	88%	89%	86%		86%
Cervical Cancer Screening	83%	83%	84%	84%	80%		79%
Colorectal Cancer Screening	81%	81%	81%	81%	80%		78%
Hemoglobin A1c Control	75%	75%	74%	74%	80%	194	75%
Blood Pressure Control	81%	82%	82%	82%	82%		80%
Eye Exam	84%	84%	84%	84%	83%		77%
Statins Therapy for Prevention and Treatment of Cardiovascular Disease	84%	84%	84%	84%	82%		83%

Prove our Value: CG CAHPS



Serving More Patients: Same Day Response YTD: 97.84%

Patient Initiated Messages

Percent value greater than 95 is in Green. Percent value is in between 85 and 95 is in Yellow. Percent value less than 85 is in Red.

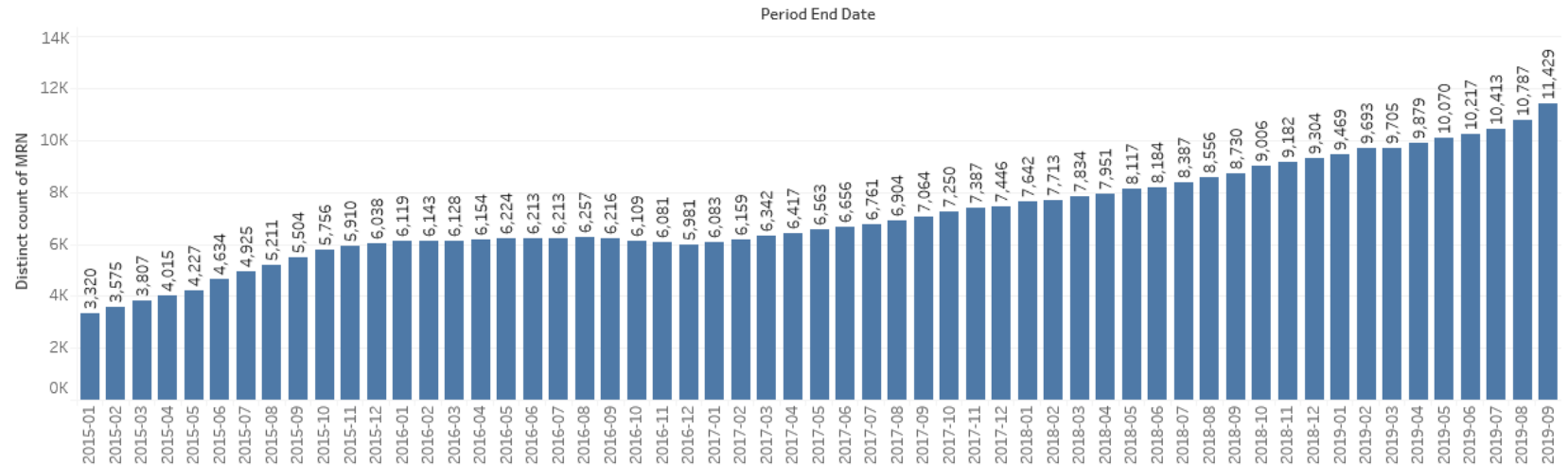
Answered Same Day %
98.72%

	Distinct Message Count	Answered Same Day Count	Answered Same Day %	Distinct Message Count	Answered Same Day Count	Answered Same Day %
CC Region	OCTOBER 2019	OCTOBER 2019	OCTOBER 2019			
ST. CHARLES REGION	5,711	5,638	98.72%	5,711	5,638	98.72%
Grand Total	5,711	5,638	98.72%	5,711	5,638	98.72%

Serve More Patients

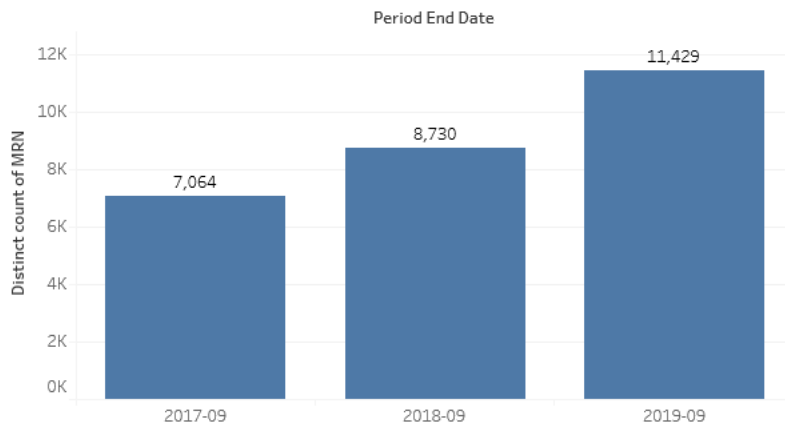
Divisional Clinic Unique Patients Dashboard 12-Month Rolling Periods

Trended Divisional UP Graph



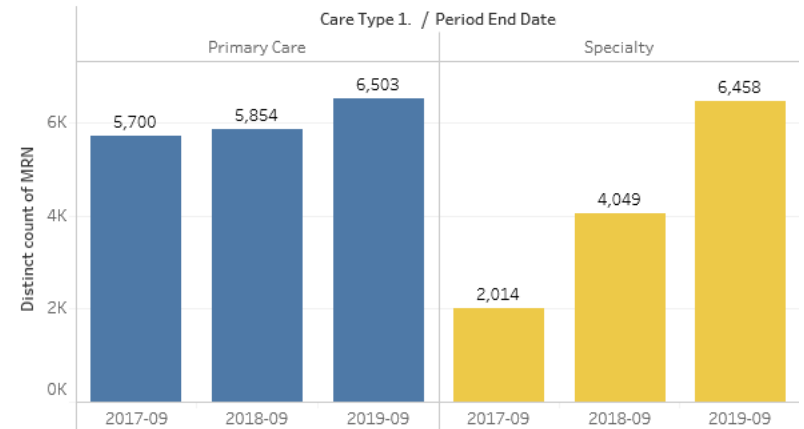
Serve More Patients

UP by Division Graph



Distinct count of MRN			Period End Date			% Difference	
2017-09	2018-09	2019-09	2017-09	2018-09	2019-09	2017-09	2019-09
7,064	8,730	11,429				23.6%	30.9%

UP by Division Prim v Spec



Care Type 1.	Distinct count of MRN			Period End Date			% Difference	
	2017-09	2018-09	2019-09	2017-09	2018-09	2019-09	2017-09	2019-09
Primary Care	5,700	5,854	6,503				2.7%	11.1%
Specialty	2,014	4,049	6,458				101.0%	59.5%

Strategic Priorities

➤ Outpatient Growth

- East Bank Expansion (Increased Multispecialty Clinics, ODC, Adult Therapy, and Pediatric Therapy)
- Hematology/Oncology and Chemotherapy
- Ochsner Cardiology
- Orthopedics, GI, and other Surgical Specialties
- Outpt Pediatric Surgery
- Optometry/Ophthalmology

➤ Psychiatry Center of Excellence

- Maintain current 20 BHU beds
- Expand Inpatient Psychiatry to include 10 MedPsych beds
- Begin Outpatient and IOP
- Social Workers in Primary Care

➤ DTE – OccMed Focus

- SCP Industry Eager for Local One Stop OccMed Services

➤ Community Connectivity

- Working Together to meet your Emergency Needs
- Sharing your Healthcare goals
- Community update Townhall



Questions

