



# Transforming Health Care

## Growing a Culture of Change

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# Virginia Mason Medical Center

## Leapfrog Hospital of the Decade

- Seattle-based integrated system
- 500 employed physicians
- 800,000 outpatient visits;  
17,000 hospital visits
- Graduate Medical Education
- Research Center
- Virginia Mason Institute



# Changing a Culture to Deliver Value

## Change is an Affair of the Heart

### 1. Strategic plan

to define ourselves and our decision rules

### 2. Physician compact and reorganization

to ensure accountability

### 3. Reliable production systems

to reduce variation in care

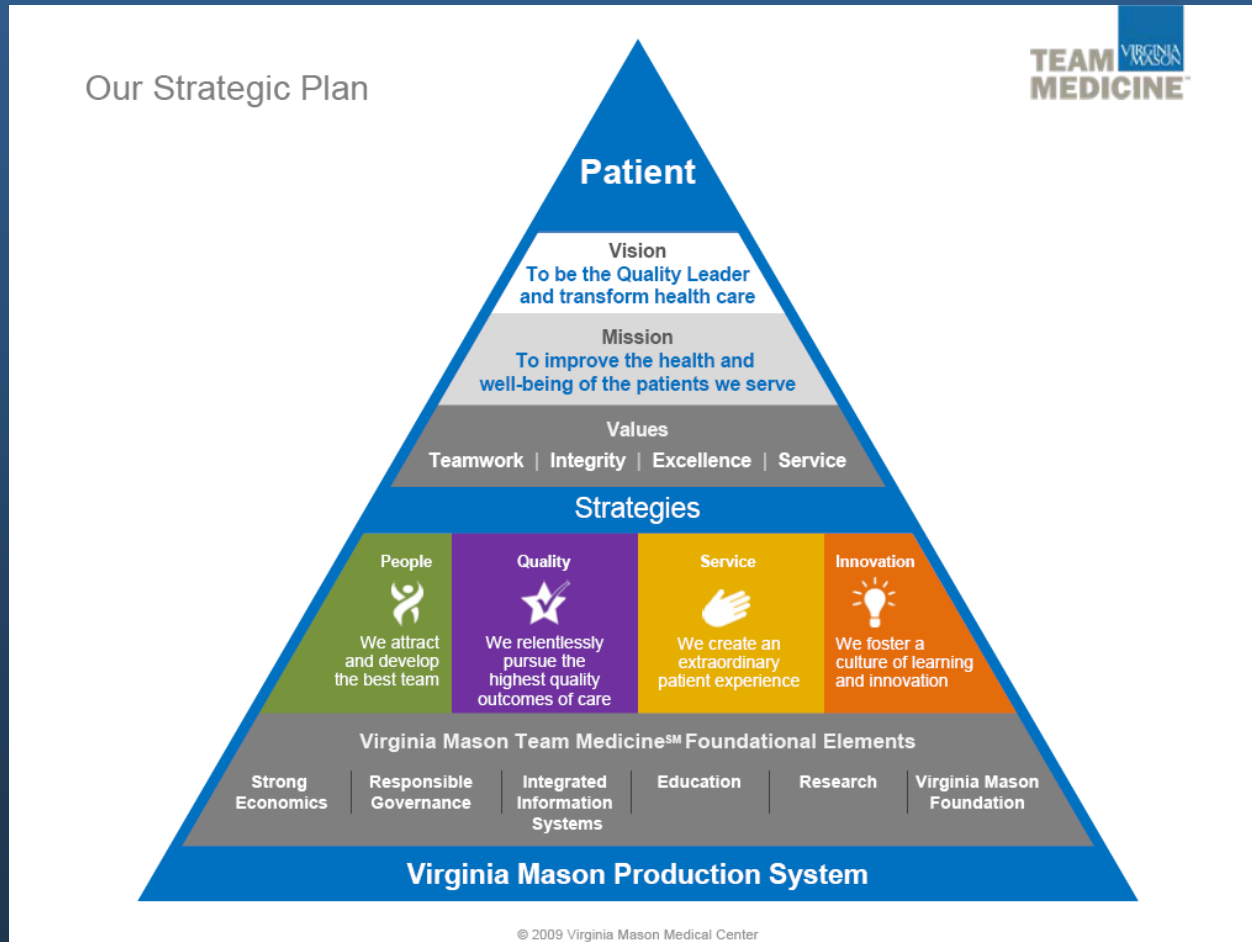
### 4. Marketplace Collaboratives

to redesign care with customers



# 1. Strategic Plan

## Defining Ourselves and Our Decision Rules



# 2. Physician Compact Defining Mutual Accountability

## VIRGINIA MASON MEDICAL CENTER PHYSICIAN COMPACT

### Organization's Responsibilities

#### Foster Excellence

- Recruit and retain superior physicians and staff
- Support career development and professional satisfaction
- Acknowledge contributions to patient care and the organization
- Create opportunities to participate in or support research

#### Listen and Communicate

- Share information regarding strategic intent, organizational priorities and business decisions
- Offer opportunities for constructive dialogue
- Provide regular, written evaluation and feedback

#### Educate

- Support and facilitate teaching, GME and CME
- Provide information and tools necessary to improve practice

#### Reward

- Provide clear compensation with internal and market consistency, aligned with organizational goals
- Create an environment that supports teams and individuals

#### Lead

- Manage and lead organization with integrity and accountability

### Physician's Responsibilities

#### Focus on Patients

- Practice state of the art, quality medicine
- Encourage patient involvement in care and treatment decisions
- Achieve and maintain optimal patient access
- Insist on seamless service

#### Collaborate on Care Delivery

- Include staff, physicians, and management on team
- Treat all members with respect
- Demonstrate the highest levels of ethical and professional conduct
- Behave in a manner consistent with group goals
- Participate in or support teaching

#### Listen and Communicate

- Communicate clinical information in clear, timely manner
- Request information, resources needed to provide care consistent with VM goals
- Provide and accept feedback

#### Take Ownership

- Implement VM-accepted clinical standards of care
- Participate in and support group decisions
- Focus on the economic aspects of our practice

#### Change

- Embrace innovation and continuous improvement
- Participate in necessary organizational change



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# 3. A Journey to Reliable Systems

## Attitudes and Tools to Achieve Zero Defects

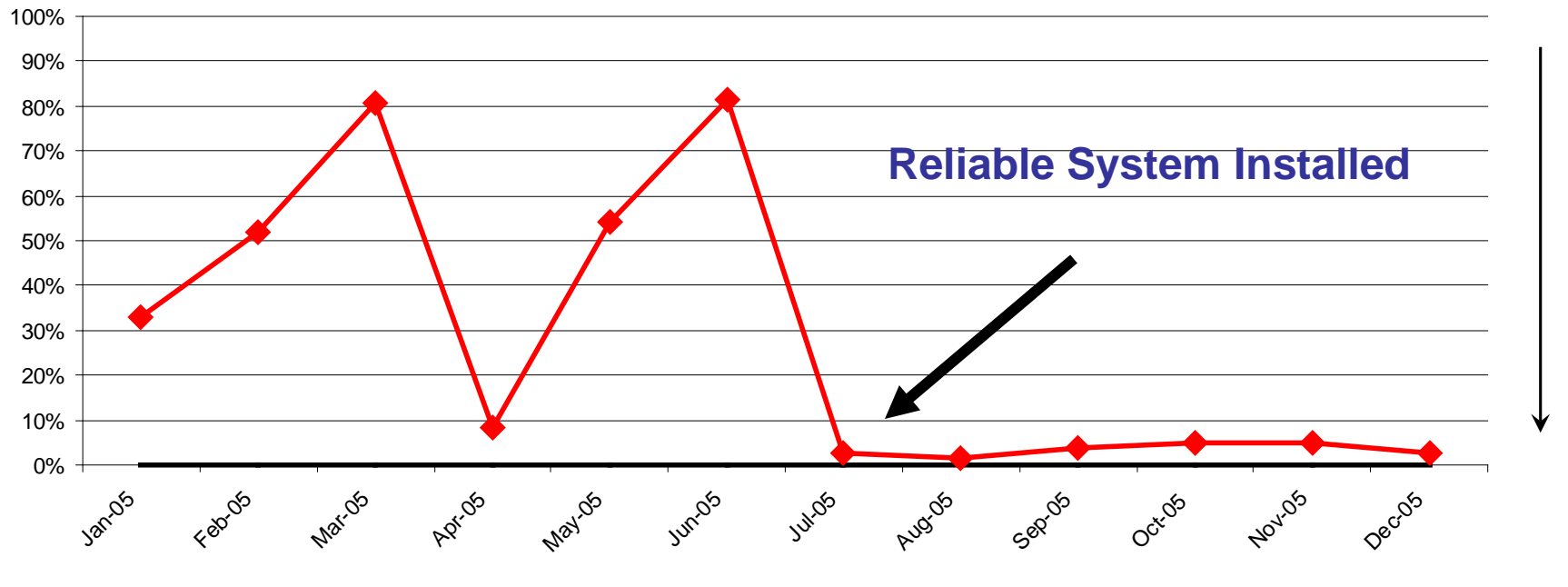




# Reliable Systems

## "Best Doctors" Not Sufficient

Safe Medication Ordering



Percent Defects in Med Orders at VMH



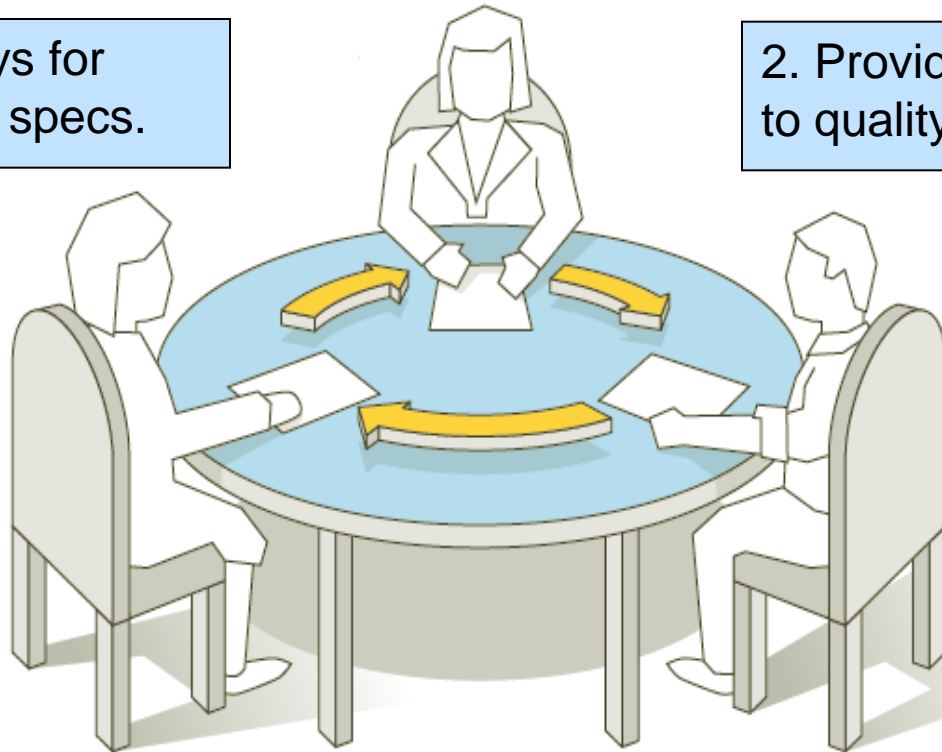
# 4. A Marketplace Collaborative

1. Employer uses purchasing power to define products and quality specifications.

4. Employer purchases product.

3. Health plan pays for delivery of quality specs.

2. Provider produces product to quality specs.





# Employer Defines Quality

## Better

1. Evidence-based care: what works
2. 100% patient satisfaction

## Faster

3. Same-day access
4. Rapid return to function

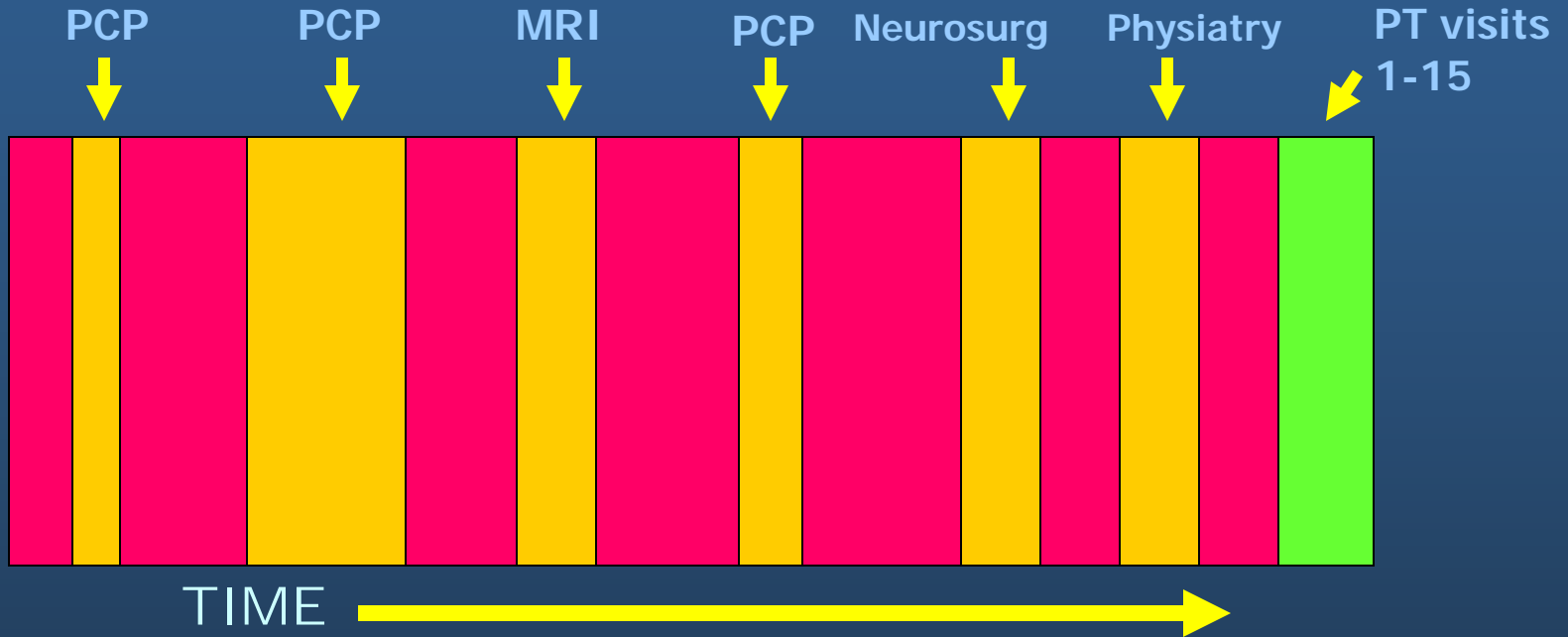
## More Affordable

5. Affordable price for employer and provider



# Uncomplicated Back Pain

## Ninety Percent Avoidable Care

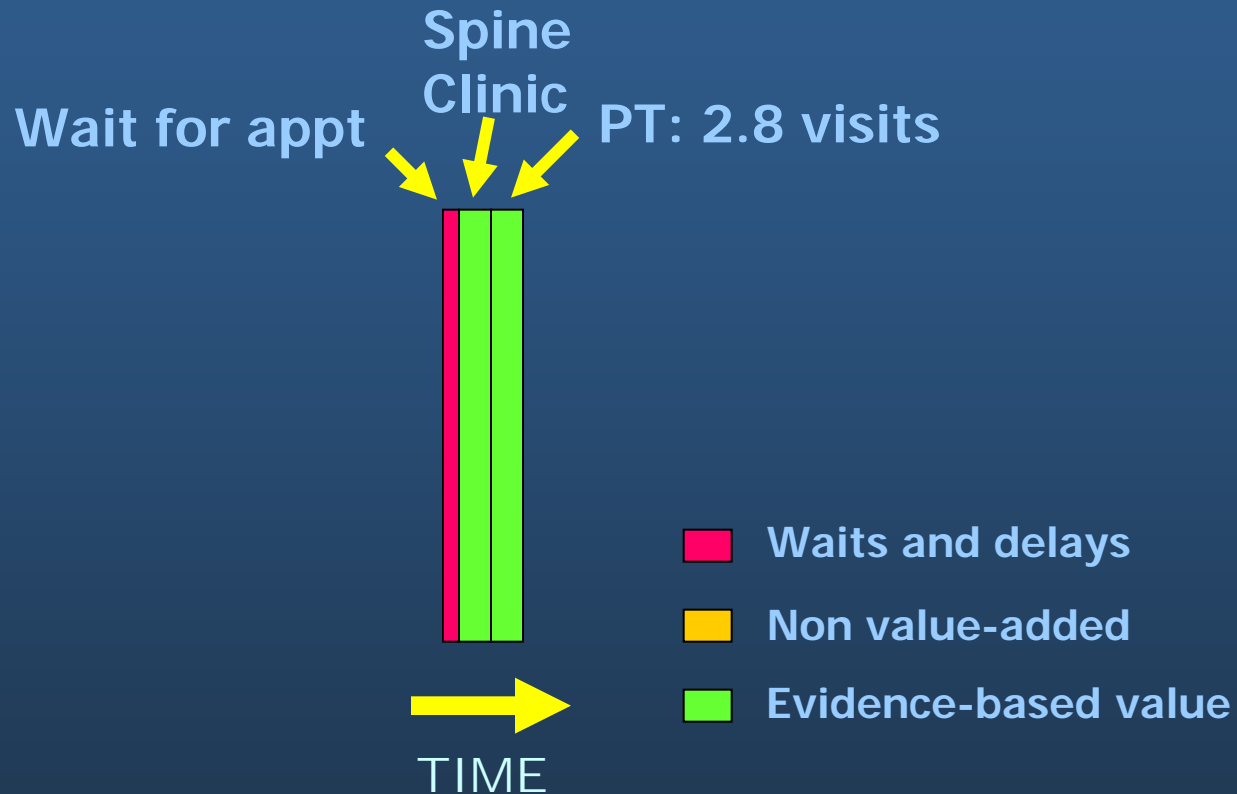


- Waits and delays
- Non value-added
- Evidence-based value

Waiting has indirect cost to employer of over \$18/hr



# Uncomplicated Back Pain Redesigned to Reduce Avoidable Care



Waiting has indirect cost to employer of over \$18/hr



# Evidence-Based Medicine Mistake-Proofing Advanced Imaging

## MRI Back Exam

Exam Requested\*

- mr cspine                       mr tspine  
 mr cspine w/ w/o contrast       mr tspine w/ contrast

Current Weight\*

lbs  kg Max Table Weight 200 kg

ICD9 Code(s)

Indications (select all that apply):\*

- Motor deficit (781.99)  
 Unremitting pain despite 6 weeks of appropriate therapy (appropriate therapy is defined as 2 weeks of MRI documentation of lack of improvement)  
 Document in relevant history field and apply appropriate ICD 9 code  
 Strong suspicion of systemic disease  
 Document in relevant history field and apply appropriate ICD 9 code  
 Neurogenic Claudication(435.9)  
 Cauda Equina(344.60)  
 Upper motor neuron findings: use myelopathy codes  
      Unspecified Region (722.70)  
      Cervical (722.71)  
      Thoracic (722.72)  
      Lumbar (722.73)  
 Significant trauma or fall  
 Document in relevant history field and apply appropriate ICD 9 code  
 Consult has been performed by physical medicine.

*NOTE: A spine MRI will likely not be helpful for the patient with back or neck pain if none of these indications are present. The Spine Clinic physician on call will provide help by phone and offer a same day visit to assist in care of the patient. Text page (spine clinic page number) on V-Net and enter the following message: " Dr. --- wishes to speak with you about a patient with neck/back pain in whom an MRI is not indicated. Please call (pager number of ordering provider).*

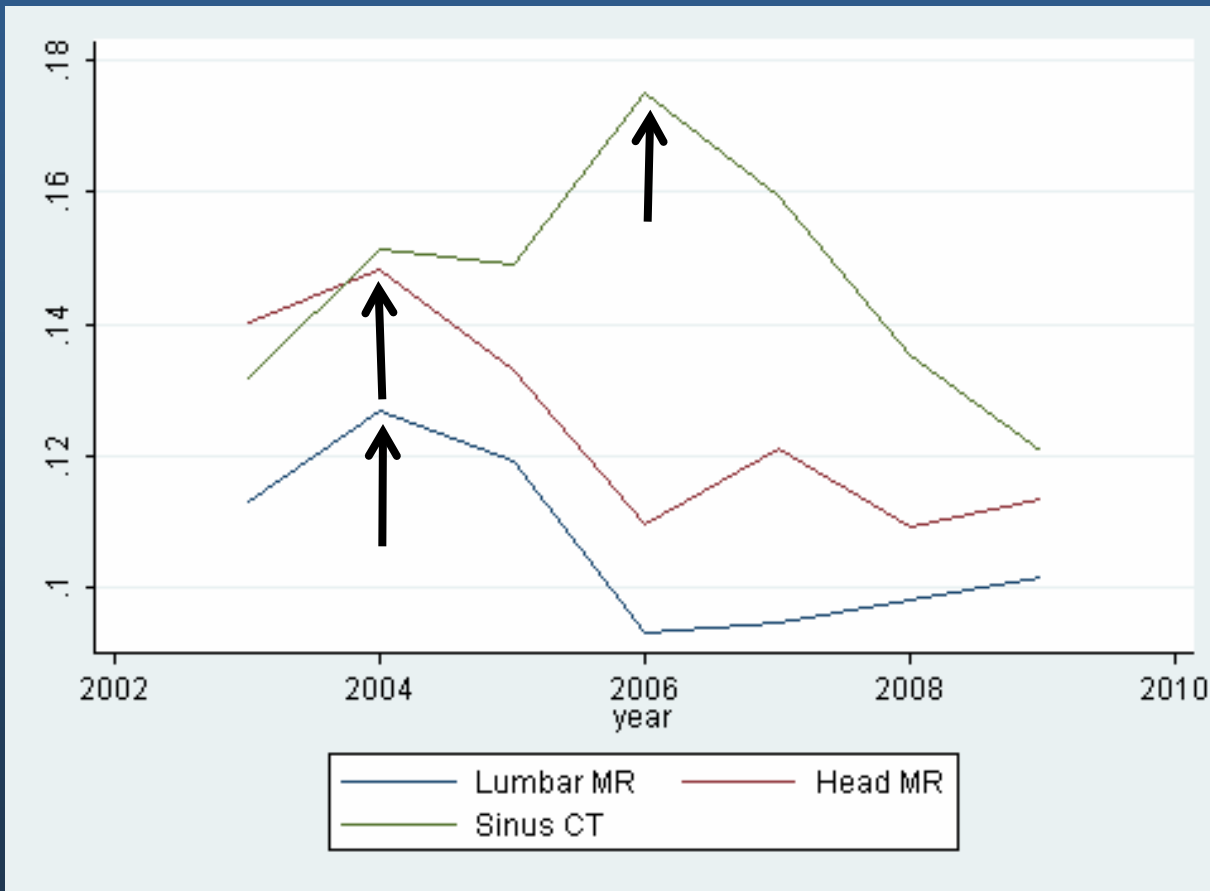
**GO/NO GO MRI ORDER**

**Order must fit evidence based indication for imaging**



# Evidence-based Imaging

## Re-engineered by Providers and Employers



Mistake-proofing  
Implemented ↑

Reduction in imaging

Headache: -23%  
Low back pain: -23%  
Sinusitis: -27%

J Am Coll Radiol 2011;8: 19-25.



# The obstacle is the path.

-Zen aphorism

