

**Quality and Productivity Commission**  
**30<sup>th</sup> Annual Productivity and Quality Awards Program**  
*Champions of Change: Together We Make a Difference*

**2016 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT: TRANSPARENT, REALTIME TEAM-BASED HUDDLE**

**DATE OF IMPLEMENTATION/ADOPTION:** 5/2015  
 (Must have been implemented at least one year - on or before July 1, 2014)

**PROJECT STATUS:**                       Ongoing               One-time only

**HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT?**               Yes               No

**EXECUTIVE SUMMARY:** Describe the project in 15 lines or less using Arial 12 point font. State clearly and concisely what difference the project has made.

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As part of the Affordable Care Act, DHS has transformed and expanded outpatient specialty practice. With this expansion, the biggest issue has been aligning front-line clinics staff with the new ambulatory leadership missions. Unifying teams in outpatient specialties for over 168 clinics is challenging and nearly impossible on a daily basis. We introduced the **HuddleGRAM**, a platform on enterprise DHS software, that systematizes the process of clinical team huddles for all outpatient specialty clinic unit based teams(UBT). This allows for an open and transparent forum. In addition, it allows for bidirectional communication of the specialty clinics between front line staff and ambulatory leadership management.

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$	\$	\$	<input checked="" type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

<b>SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS</b> LAC+USC Ambulatory Care 1100 NORTH STATE ST, LA, CA	<b>TELEPHONE NUMBER</b> 323-409-5101
<b>PROGRAM MANAGER'S NAME</b> Dr. Wei-An (Andy) Lee Medical Director, Specialty Services	<b>TELEPHONE NUMBER</b> 323-409-5181  <b>EMAIL</b> welee@dhs.lacounty.gov
<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> <small>(PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME)</small> Gerardo Pinedo  SIGNATURE ON FILE	<b>TELEPHONE NUMBER</b> 213-240-8104  <b>EMAIL</b> Gpinedo@dhs.lacounty.gov
<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> Mitchell H. Katz, M.D.  SIGNATURE ON FILE	<b>TELEPHONE NUMBER</b> 213-240-8101

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**1<sup>st</sup> FACT SHEET – LIMITED TO 3 PAGES ONLY:** Describe the **Challenge, Solution, and Benefits** of the project. State clearly and concisely what difference the project has made. Use Arial 12 point font

**Challenge:**

- Siloed Communications: Disconnection between frontline staff and management regarding daily operational challenges.
- Overload of specialty clinics to manage: 33 Orchid core locations with over 168 specialty clinics.
- Lack of frontline staff engagement: No unit based communication channels that involve the multidisciplinary front line staff with nurses and physicians on a routine daily basis.

**Solution:**

- HuddleGRAM application: an enterprise-level webpage with assigned huddlers from each 33 ambulatory care locations to huddle and make transparent front-line engagement.
- Information is recorded in real-time.
- There is bidirectional communication between frontline staff and management regarding the communication.
- Urgent information pertaining to safety and new policies are rapidly communicated and share with local front-line staff.

**Benefits:**

- More engagement from front-line staff.
- Transparent, democratized platform for physicians and nurses to work together.
- Allows management to address issues that are emerging in real-time.

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**LINKAGE TO THE COUNTY STRATEGIC PLAN (DETAIL IS REQUIRED FOR COUNTY DEPARTMENTS):** Use Arial 12 point font

**Integrated Services Delivery:** Maximize opportunities to measurably improve client and community outcomes and leverage resources through the continuous integration of health, community, and public safety services.

- More engagement from front-line staff.
- Transparent, democratized platform for physicians and nurses to work together.
- Allows management to address issues that are emerging in real-time.
- Reduce the mismatch of supply and demand for face-to-face specialty visits: Each day during the huddle, teams are trained to discuss the patient capacity. More awareness allows the team to assess the clinic demand daily.
- Efficacious and Safe: The HuddleGRAM provide a realtime status of trained huddle leads that lead discussions within each clinic. This provides reassurance that information is discussed at the front-line staff; therefore confirmation that information is communicated effectively to prevent any misinformation.

**Operational Effectiveness/Fiscal Sustainability:** Maximize the effectiveness of processes, structure, operations, and strong fiscal management to support timely delivery of customer-oriented and efficient public services.

- Efficient system: The huddle lead are growing month to month, and the leads are becoming more efficient in communication high impact, ambulatory care missions.
- Sustainable and cost-effective: With the growth of the volume of huddlers, there is redundancy in the system to provide daily huddles within each clinic without any added institution cost.

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**COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFIT):** If you are claiming cost benefits, include a calculation on this page. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation. Use Arial 12 point font

**Cost Avoidance:** Costs that are eliminated or not incurred as a result of program outcomes.

**Cost Savings:** A reduction or lessening of expenditures as a result of program outcomes.

**Revenue:** Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

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