

Quality and Productivity Commission
34th Annual Productivity and Quality Awards Program
“Leading with Excellence”

2021 APPLICATION

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

NAME OF PROJECT: WHEN SECONDS MATTER-CRITICAL CARE TRANSPORT TEAM

DATE OF IMPLEMENTATION/ADOPTION: OCTOBER 1ST, 2018

(Must have been fully implemented for a minimum of at least one year - on or before July 1, 2020)

CHECK HERE IF THIS PROJECT IS BEING SUBMITTED FOR THE **COVID-19 IMPACT AWARD ONLY**. (Projects must be implemented on or before December 31, 2020. **Note:** Projects implemented less than one year ago will not be eligible for any other PQA awards. In addition, once a project is submitted, you cannot submit the same project for awards consideration in subsequent years).

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.

1 Critical Care Transport (CCT) is the movement of critically ill patients who require higher
 2 level of care from one medical facility to another while maintaining advanced level of care
 3 during transport. Olive View-UCLA Medical Center (OVMC) lacks certain specialty
 4 services and needs to transfer to tertiary hospitals. After immediate stabilization, the
 5 patients often waited a long time for transportation to the other facility due to limited
 6 numbers of available CCT teams in the community. The time of arrival for the CCT crew
 7 varied significantly and it was often more than eight hours. This was a major challenge
 8 that we needed to address when a patient required emergent lifesaving measures and
 9 could not afford to wait for the next available transport crew. OVMC leadership
 10 collaborated with other LA County agencies to develop a program that could help expedite
 11 these emergency transportations. OVMC coordinated with Emergency Medical Service
 12 Agency and Los Angeles City Fire Department to put together its own team. Utilizing
 13 existing resources, the team is comprised of Registered Nurses and Respiratory
 14 Therapists. OVMC CCT was launched on October 1, 2018 and reduced the pick-up time
 15 from eight hours to an average of 33 minutes with annual estimated savings of \$194,794.

BENEFITS TO THE COUNTY

| (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 |
|--|--|---|--|-----------------------------------|
| \$ 194,794 (ELIMINATED COST TO COUNTY) | \$0 | \$ 0 | \$ 194,794 | ✓ |

ANNUAL = 12 MONTHS ONLY

SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS
 Olive View – UCLA Medical Center Department of Emergency
 14445 Olive View Drive, Sylmar CA 91342

TELEPHONE NUMBER
 (747) 210 4324

PROGRAM MANAGER'S NAME
 Melanie Potts MSN RN and Hyung (Henry) Kim M.D. FACEP, FAAEM
 Associate Chief Medical Officer

TELEPHONE NUMBER
 (747) 210 4324

PRODUCTIVITY MANAGER'S NAME AND SIGNATURE **DATE**
(PLEASE CALL (213) 893-0322 YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME)
 Joselin Escobar Duran *Joselin Escobar* 6.23.21
 Assistant Hospital Administrator III

TELEPHONE NUMBER
 (747) 210 3001
EMAIL
joescobar@dhs.lacounty.gov

DEPARTMENT HEAD'S NAME AND SIGNATURE **DATE**
 Christina Ghaly, M.D. *Christina Ghaly* 06/25/2021

TELEPHONE NUMBER
 213-288-8050

****ELECTRONIC, WET, OR SCANNED SIGNATURES ARE ACCEPTABLE****

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1st FACT SHEET – LIMITED UP TO 3 PAGES ONLY: Describe the **challenge(s), solution(s), and benefit(s)** of the project **to the County**. What quality and/or productivity-related outcome(s) has the project achieved? Provide measures of success **and specify assessment time frame**. Use Arial 12 point font.

Challenges

Olive View – UCLA Medical Center strives to provide our patients, the right care, at the right time, in the right place, and by the right provider. Like many other hospitals in the country we have certain services that are not provided in our facility including Neurosurgery, Trauma, Cardiothoracic, Neuro-Critical Care and Burn among others. For patients requiring these services, intra-facility transfers of patients to one of our sister hospitals or other external facilities for higher level of care are arranged via Medical Alert Center. The challenge was the need to transport patients who require emergent cardiovascular operations or patients with intracranial hemorrhage who needed neurosurgery expertise to another facility for a higher level of care in a timely manner. These patients’ lives were on the line and could not afford to wait for a prolong time for the next available critical care transport crew.

Solution - Program Description

The Critical Care Transport program was developed with the objective for OVMC to assemble its own transport team for the appropriate emergent cases with the understanding that there are patients that may be able to wait longer safely for an external transportation crew. When designing the CCT program, the main goal was to ensure that patients reached the appropriate medical facility in a timely manner. The OVMC CCT team is activated when the external transport crew’s estimated time of arrival is not acceptable based on the clinical condition of the patient. Olive View’s hospital leadership, medical administration, Pharmacy, Respiratory Therapy, and nursing teams collaborated with other LA County services in developing policies and procedures to get this program implemented. It took approximately one year from the planning phase to the acquisition of the equipment, completion of the staff training, and eventually getting the program off the ground. Experienced Registered Nurses from the Emergency Department, Intensive Care Unit, and Cardiology, Respiratory Therapists, and Pharmacists were approached to be part of the CCT team.

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The CCT team was equipped with medical supplies that are needed to provide advanced care for the patient. The team was trained to assess the patient’s condition, attend to patients’ needs quickly and accurately, and identify and troubleshoot potential complications that may arise during transport. The education included a range of topics, the team learned to troubleshoot dislodged chest tubes, manage intravenous medication drips, perform procedures during an emergency situation such as cardiopulmonary resuscitation (CPR), airway insertion, and defibrillation while working in a confined mobile space. In addition, the team received hands-on training which included ambulance ride-along training and helicopter safety. All the training the team received enhanced their nursing and respiratory care skills set. Once the CCT team is activated, either the nurse who is taking care of the patient or other nurses who are trained in critical care transport join the basic life services crew to form a critical care team. Other ancillary services such as Respiratory Therapists are also included if the patient’s condition requires ventilatory support. In a medical emergency, there are circumstances when a healthcare facility is not equipped in providing the appropriate level of care in a timely manner. The time it takes a patient to be transported and reach a medical facility for higher level of care, along with the care the patient receives en route, could mean the difference between life and death. For this reason, it is exceedingly important for trained and qualified medical professionals to be on hand and ready to transport patients safely. Olive View’s leadership, Medical staff, Registered Nurses from the Emergency Department, Intensive Care Unit, and Cardiology, Pharmacists, Respiratory Care staff, Nursing Educators, LA County Emergency Medical Services, Alert Crew Los Angeles Fire Department Air Operations, and Medical Alert Center all collaborated and contributed to making this program a successful one.

Benefits

The Olive View CCT program was launched on October 1, 2018. The data collected was from implementation in October of 2018 through December of 2020. The CCT team transported a total of 30 patients with 25 ground ambulance, and five helicopter transports. Based on these results, Olive View CCT team greatly reduced the time of CCT activation to the team leaving the hospital from the baseline of eight hours to an average time of 33 minutes. In addition, there is an estimated annual savings for LA County Department of Health Services of \$194, 794.

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Linkage to the County Strategic Plan – 1 page only. Which County Strategic Plan goal(s) does this project address? Explain how. Use Arial 12-point font.

County Strategic Plan and Goal

County Goal III

Strategy III.3 – Pursue operational effectiveness, fiscal responsibility, and accountability

The CCT program exemplifies operational effectiveness by using its strategy to use existing resources and intra-departmental collaboration resulting in a significant reduction of wait time from transport activation to departure time to provide high quality care. In addition to the clinical excellence, the estimated cost savings for LA County DHS of \$194, 794 was also noted.

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COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY): If you are claiming cost benefits, include a calculation on this page. Please indicate whether these benefits apply in total or on a per unit basis, e.g., per capita, per transaction, per case, etc. 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. Please indicate whether these are costs to the County or to other entities.

Cost Savings: A reduction or lessening of expenditures as a result of program outcomes. Please indicate whether these were expenditures by the County or by other entities.

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

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|---|--|---|--|-----------------------------------|
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Estimated Benefits to the County

Previously, when a patient required emergency medical transport, there was a need to utilize private ambulance or private helicopter. In which case, the hospital would incur those expenses that would come out of the already limited budget.

An unexpected additional benefit of this program is the cost savings. Looking into service charges, the base rate for transporting patients via private helicopter averages \$30,000 and ambulance rates start at \$2,540. Additional charges are accrued for special ancillary services, including but not limited to mileage rate \$19 per mile, crew with Registered Nurse and Respiratory Therapist approximately \$3,229, and medical supplies and equipment (i.e. ventilator \$194, Oxygen \$100, medical supplies \$29).

Program Outcome

Average Ground Transport cost: \$ 7,204

Average Air Transport cost: \$ 33,714

2019 Total Number of Transports: 13 (ground transport) + 3 (air transport) = 16

Estimated Annual Cost Avoidance for 2019: \$194,794

Utilizing existing County resources not only allows for the rapid transportation of the patient, but also the cost savings are significant. The program aids the hospital in cutting down expenses every time the facility activates its own CCT team, uses its own equipment, and coordinates with LA County EMS services. Furthermore, the new team saved the added expense of using private helicopter transport, and instead is able to utilize the nearby LA City Fire Department Air Operation to support the transport which cut the transportation time even shorter.