Health Services
LOS ANGELES COUNTY

January 23, 2009

Los Angeles County
Board of Supervisors

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TO: Each Supervisor

FROM: John F. Schunhoff, Ph.D.
Interim Director

SUBJECT: **STATUS REPORT ON KEY INDICATORS OF PROGRESS, HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED TO THE TRANSITION TO THE NEW LAC+USC MEDICAL CENTER – PROGRESS REPORT #4 (Agenda Item #S-1, January 27, 2009)**

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This is to provide your Board with the bi-monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This is a full monthly report with trends to include the period of December 1 to 31, 2008.

Key indicators are summarized as follows:

Census Trending – ADC includes Psychiatric & Newborn Patients

The Average Daily Census (ADC) from December 2008 was 525 out of 671 licensed beds, an estimated 76% utilization rate (78% occupancy). This is an increase from an ADC of 491 for the prior month. The census for Medical/Surgical (Med/Surg) is at capacity, an estimated 94% utilization (96% occupancy) during the week of January 18, 2009. Census in specialty areas continues to improve. Detailed analysis of specialty bed trends will be provided in the next report as directed by your Board.

Diversion Data

Emergency Department (ED) saturation diversion averaged 40% for the month of December 2008 which is a decrease of 10% from the month of November 2008. There continues to be no diversion to trauma patients. Based on the Base Hospital Logs, an average of 1 patient per day is diverted from LAC+USC during the period that ED diversion is requested by the hospital.

In response to your additional request related to Harbor-UCLA Medical Center (Harbor), an average of 2 patients per day are diverted from Harbor during the period that the ED is on diversions, as reflected by an analysis of the Base Hospital Logs.

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Your Board also raised questions regarding diversion, central base station, specialty services and residency training which will be addressed in the next bi-monthly report.

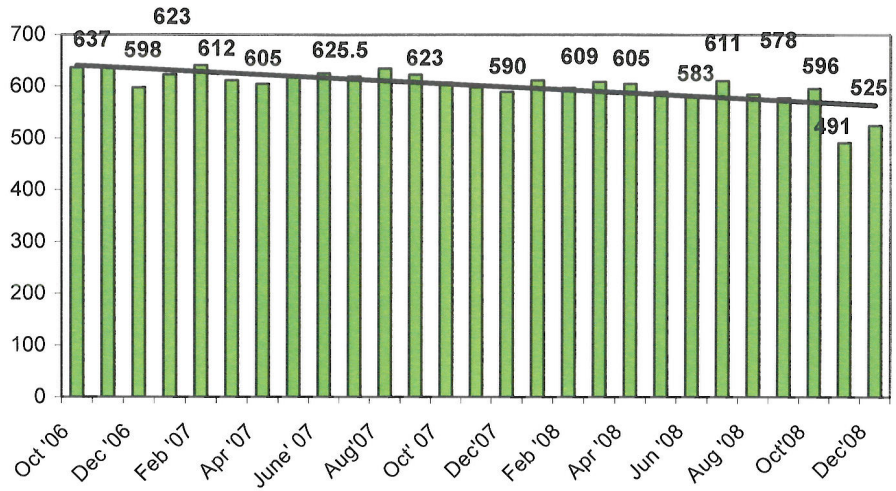
If you have any questions or need additional information, please contact me or Carol Meyer, Interim Chief Network Officer at (213) 240-8370.

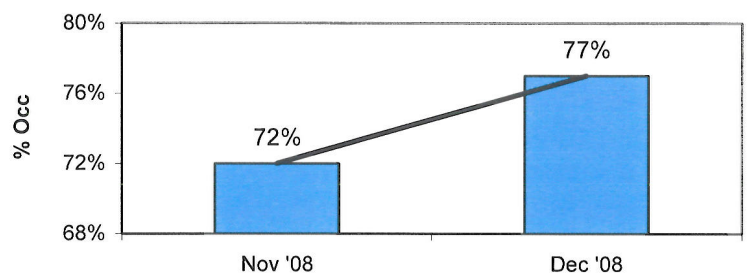
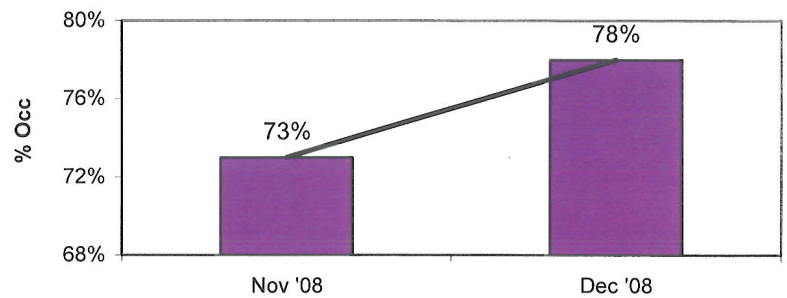
JFS:pm

Attachments

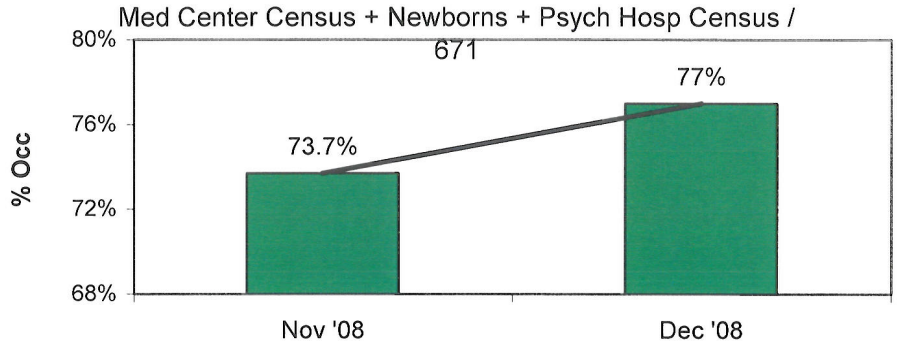
c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors

LAC+USC Medical Center
Operational Monitoring Report
Reporting Period –Dec 2008

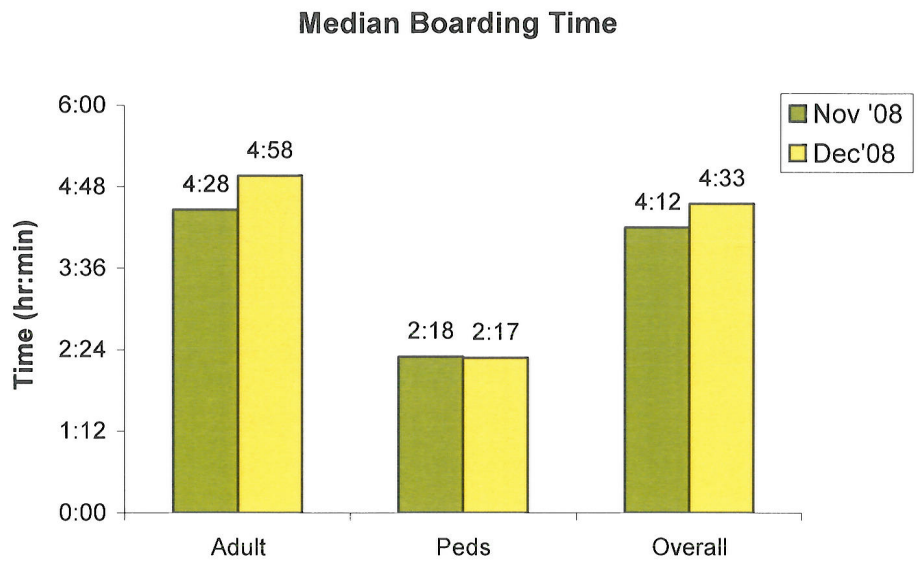
Indicator	Definition	Data	Comments
Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics			
1a. **Average Daily Census (ADC)**	**ADC:** A measure of the total number of inpatients occupying licensed beds on a daily basis reported as the arithmetic mean. **Calculation:** Total number of admitted inpatients at 12:00 AM midnight daily, summed over the month and divided by the total number of days in the month. **Source of Data:** Affinity	**ADC**  Note: Average Daily Census number reported includes Medical Center + Psych + Newborns Census.	ADC provided as background information.

Indicator	Definition	Data	Comments
Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics			
1b. **Occupancy Rate LAC+USC Medical Center**	**Definition**: A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period. **Calculation:** The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds. **Source of Data:** Affinity **Target:** 95%	1. Medical Center Licensed Occupancy Rate (excluding Newborns) = Med Center Census – Newborns / 600 Med Center Census – Newborns / 600  2. Medical Center Licensed Occupancy Rate (including Newborns) Med Center Census + Newborns / 600 Med Center Census + Newborns / 600  	For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.

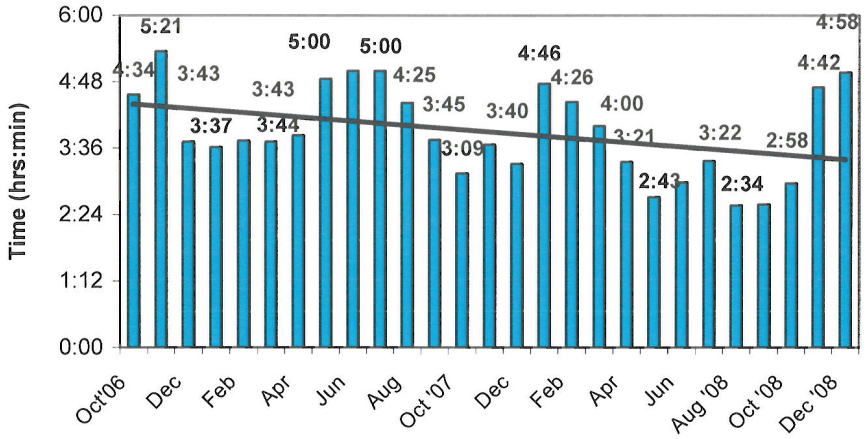
LAC+USC Medical Center
Operational Monitoring Report
Reporting Period –Dec 2008

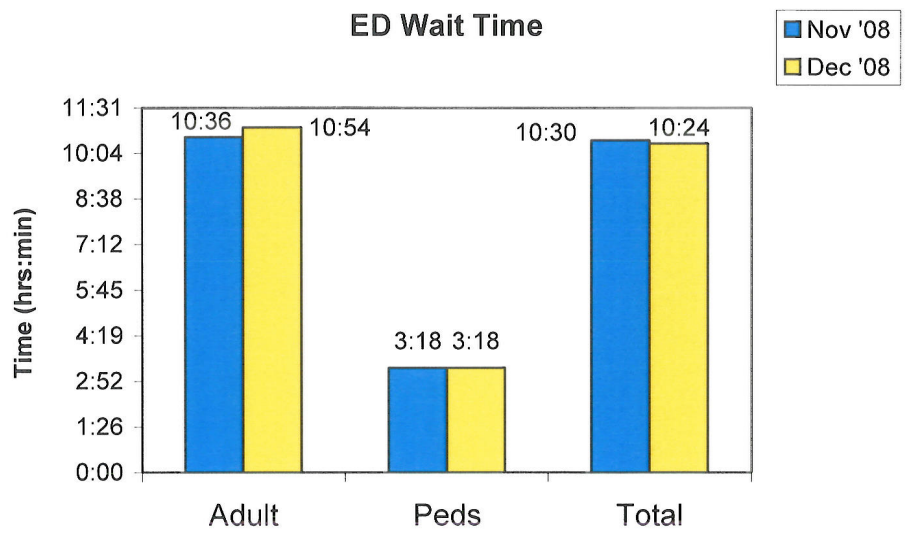
Indicator	Definition	Data	Comments
		3. Healthcare Network Budgeted Occupancy Med Center Census + Newborns + Psych Hosp Census / 671  Medical Center = New facility Healthcare Network = New facility + Psychiatric Hospitals	

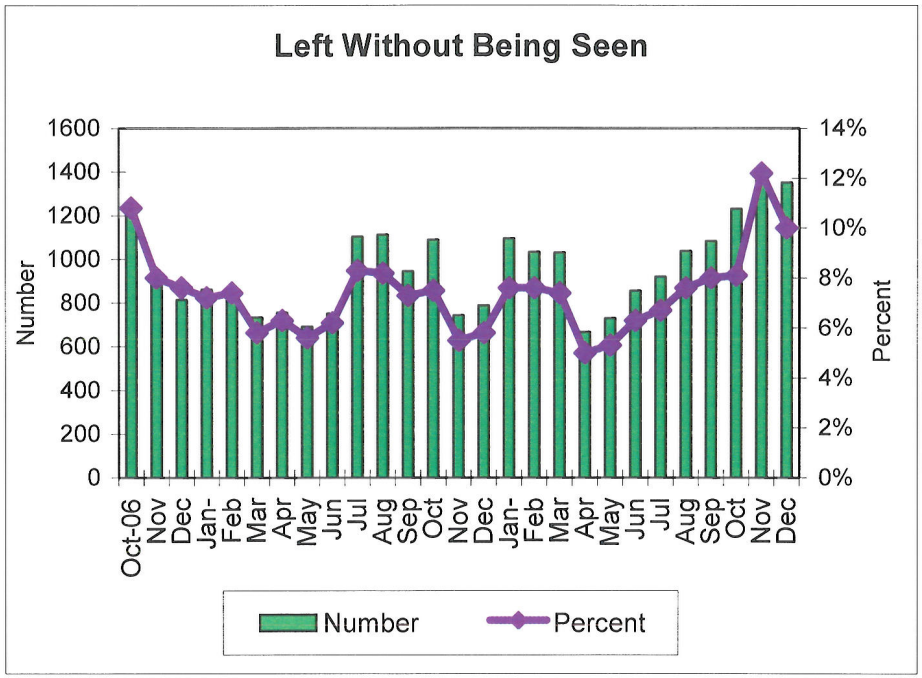
LAC+USC Medical Center
Operational Monitoring Report
Reporting Period –Dec 2008

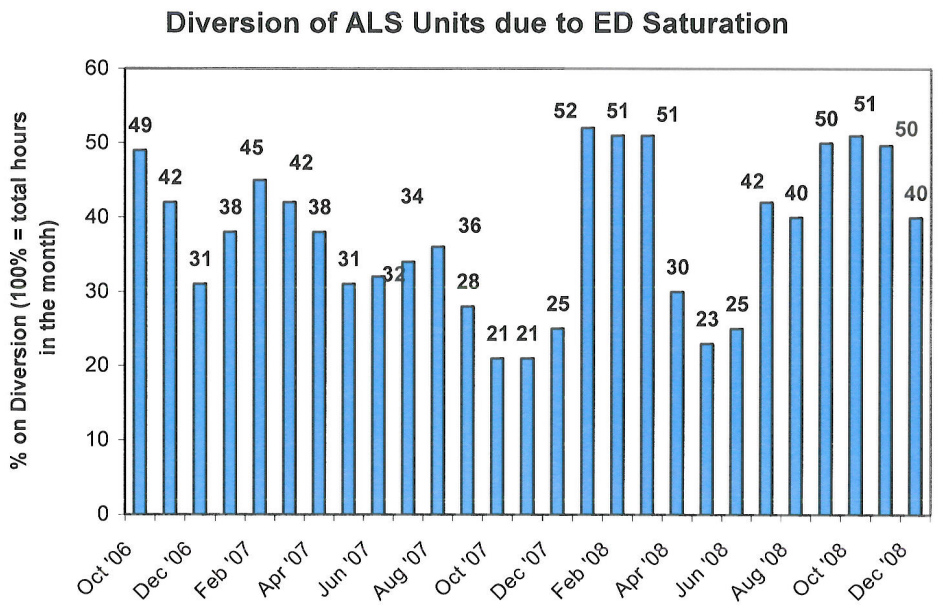
Indicator	Definition	Data	Comments
Indicator #2 - Emergency Department Metrics			
2a. **Median Emergency Department Boarding Time** **(EDBT)** ***Harris Rodde Indicator**	**Boarding Time:** Time from MD Admit time (effective date and time of pre-admit) to time the patient actually leaves the ED en route to assigned bed (effective date and time of the ED disposition). **Calculation:** The middle value in the set of individual boarding times for the month arranged in increasing order. If there is an even number of values, then the median is the average of the middle two values. **Source of Data:** Affinity **Target**: Less than 7 hours.		

LAC+USC Medical Center
Operational Monitoring Report
Reporting Period –Dec 2008

Indicator	Definition	Data	Comments
		Median Boarding Time (Adult)*  *Dec data is Preliminary data	

Indicator	Definition	Data	Comments
Indicator #2 - Emergency Department Metrics			
2b. **ED Wait Time**	**ED Wait Time:** Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean. **Definition:** Sum of all wait time values during the monthly reporting period divided by the total number of values. **Source of Data:** Affinity **Target:** No target value. Lower numbers are better.	 **Adult Wait Time :** *Excludes Psych, Pediatric and Observation Unit patients **Total ED Wait time:** *Includes Psych, Pediatric and Observation Unit, Jail and adult patients	

Indicator	Definition	Data	Comments
Indicator #2 - Emergency Department Metrics			
2c. **Left Without Being Seen** **(LWBS)** ***Harris Rodde Indicator**	**LWBS:** The total number of patients who left the ED without being seen by a physician reported as a percentage of all ED visits. **Calculation:** The total number of patients who left the ED without being seen divided by the total number of ED patient visits on a monthly basis. **Source of Data:** Affinity **Target:** No target value. Lower numbers are better		

Indicator	Definition	Data	Comments
Indicator #2 - Emergency Department Metrics			
2d. **ED Diversion**	**ED Diversion:** A percentage measure of the time the ED diverts ambulance traffic away from the ED, reported as a function of the reason for diversion on a monthly basis. **Calculation:** The total number of hours of ED diversion for a specific reason divided by the total number of available hours in a month. **Source of Data:** ReddiNet		This is slightly lower than the before move diversion history which generally ranged between 50-60%. Key points: -- Diversion is for paramedic runs only; Basic Life Support ambulances still arrive. -- When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".

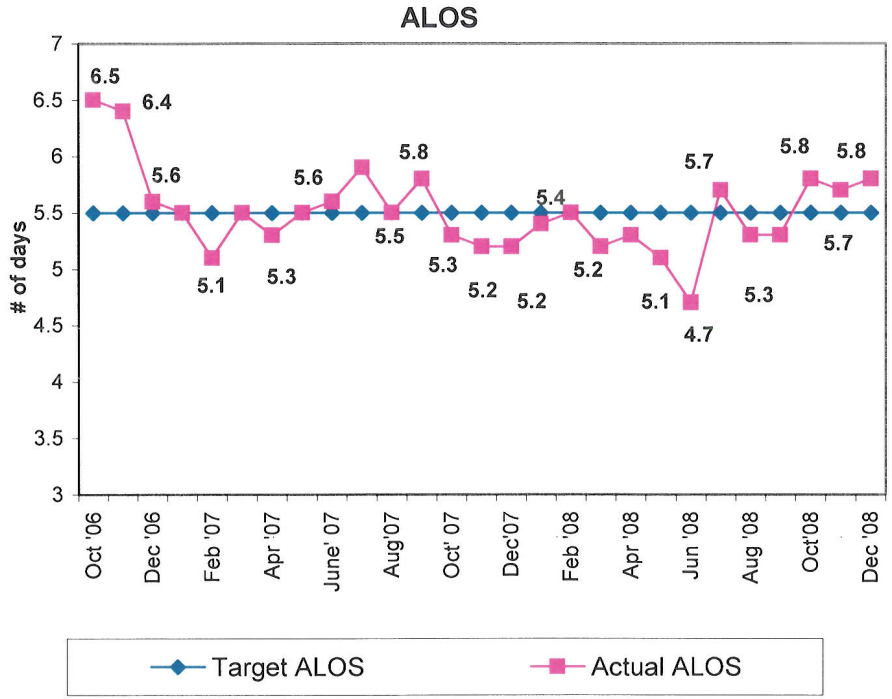
Indicator	Definition	Data	Comments
2e. **Surge Report**		Surge reporting suspended during move weeks. Data not available. Will provide when reinstituted.	
Indicator #3 – Trends for Patient Diversions and Transfers & #4 – Transfers to Rancho Los Amigos Metrics			
3. & 4. **Rancho Los Amigos Hospital (RLAH) Transfers**	**Transfers:** The volume of patients transferred to RLAH for acute hospitalization from the Emergency Department and from Inpatient Units. **Data Source:** Manual record keeping. Cancelled category includes patients who's condition changed leading to higher level of care or discharge home.	**Month of Dec** **Referrals from ER:** **Referrals from Inpatients:**	

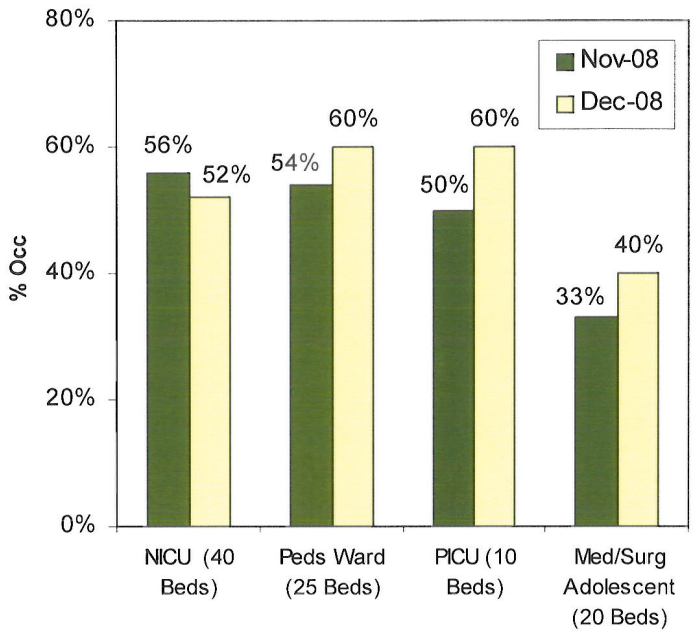
Referrals from ER:

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	24	N/A	-
# Referred to RLAH	10	28	38
# Transfers	10	28	38
# Denied	0	N/A	-
# Cancelled	8	N/A	-
# Patients refused	6	N/A	-

Referrals from Inpatients:

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	37	N/A	-
# Referred to RLAH	33	2	35
# Transfers	28	2	30

Indicator	Definition	Data				Comments
		# Denied	5	N/A	-	
		# Cancelled	2	N/A	-	
		# Patients refused	0	N/A	-	
		Other /Pending	2	N/A	-	
Indicator #5 – Harris Rodde Indicators						
5. **Average Length of Stay (ALOS)** ***Harris Rodde Indicator**	**LOS:** The difference between discharge date and the admission date or 1 if the 2 dates are the same. **Total LOS:** **Calculation:** ALOS is the arithmetic mean calculated by dividing the Total LOS by the Total # of discharges in the monthly reporting period, rounded off to one decimal place.					Overall trend in ALOS for the 2-year period prior to the move reduced to a low range of 4.7 – 5.5 days in 2008. Immediately prior to the move, the ALOS increased as the lower acuity patients were transferred to other facilities. This trend may continue depending on number of transfers.

Indicator	Definition	Data	Comments
	Source of Data: Affinity **Target**: <5.5 days	*Preliminary data pending Auditor-Controller validation	

Indicator	Definition	Data	Comments
Indicator #6 – Pediatric Metrics			
6. **Pediatric Bed Census and Occupancy (%)** **Pediatric ICU (PICU)** **Neonatal ICU (NICU)** **Pediatric Unit** **Adolescent Unit**	**Census:** The total number admitted pediatric inpatients at 12:00 AM midnight of a designated pediatric ward. **Occupancy:** The total number of admitted pediatric inpatients divided by the total number of licensed beds on that unit and reported as percentage. **Source of Data:** Affinity