



Director's Desk

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Prevention. It's not always the first word that comes to mind when we think about

DHS. More often, images

of Emergency Departments (though less crowded ones! – see "Code Black" article below) and inpatient units, or high-tech specialty and surgical services dominate. However, taking care of our patient population well means we should be placing prevention-related health activities front and center. That's the way we will be able to keep people healthy and ultimately enhance their lives. This month's issue highlights several prevention-related initiatives:

FluFIT: A combined influenza (flu) vaccine and colorectal cancer screening initiative is being rolled out to increase compliance rates with these two

critical interventions;

Geriatrics eConsult portal: Advice is now available through eConsult on managing the needs of our elderly patients, including advice on how to prevent polypharmacy and implement Advanced Care Plans;

Tobacco screening and cessation assistance: Through partnership with 1-800-NO-BUTTS, we are able to provide help to our patients willing to consider quitting;

SIDS prevention: Through partnership with the Baby Box Company, we are helping our new moms prevent Sudden Infant Death Syndrome;

Healthy Living: The ACN has launched classes focused on nutrition and active lifestyles.

Thank you to all who are working to bring these programs and services to our patients. We want to fully commit ourselves to the health and wellness of our patients; together, our health prevention efforts can make a tremendous difference!

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LAC+USC: no more "Code Black"

By Michael Wilson

The severe overcrowding at LAC+USC Medical Center that inspired the Code Black documentary and CBS television series has been substantially reduced, new research finds.

A [study](#) published in the April issue of the *American Journal of Medicine* describes transformational efforts undertaken to markedly reduce patient wait-times and overcrowding, and improve patient flow throughout the hospital — reducing time spent in "Code Black," the most critical level of hospital overcrowding.

The study describes efforts by physician and nurse leaders to implement a series of no-cost, efficiency interventions to improve patient flow. For example, hospital staff developed and enforced strict criteria for telemetry, step down and intensive care units to move inpatients more efficiently through the continuum of care, freeing beds for hospital-admitted patients in the Emergency Department. The result was a remarkable improvement in dangerous and critical overcrowding in the hospital.

"Like other safety net hospitals in high density urban areas, LAC+USC has historically been ground zero for emergency services



demand," said Los Angeles County Supervisor Hilda L. Solis. "I commend the LAC+USC clinical and administrative staff for their efforts to innovate and to overcome these operational challenges, and for continuing to deliver excellent care to our most vulnerable and often underserved patients from across the County."

At baseline, the hospital spent an alarming 55% of time in dangerous (Code Red) or critical (Code Black) overcrowding conditions; after the interventions, the hospital spent <5% of its time in such conditions.

"The improvement in patient flow is a result of teamwork across many professional disciplines," said lead author and LAC+USC director of inpatient services Charles Coffey Jr., MD, MS. "As a result, patients are able to get the high-value hospital care they need and deserve in a much more time-

ly manner."

Senior author and hospital chief medical officer Brad Spellberg, MD, said the efforts should improve patient satisfaction and reduce staff burnout. "It's noteworthy that the hospital achieved these goals with existing staff and without having to purchase new technology, and by improving our processes. I guess CBS will have to change the name of the show!"

DHS gets FluFIT: Flu shot + colorectal cancer screening combo saves lives

By Michael Wilson

DHS primary care teams have launched an innovative approach to get patients screened for colorectal cancer by offering it together with a flu shot. FluFIT, a national evidence-based program to increase colorectal cancer screening rates by offering fecal immunochemical tests (FIT) to eligible patients during annual influenza immunization campaigns, is now being implemented across DHS sites.

Colorectal cancer is the second leading cause of cancer death

in the United States. Most of these deaths could be prevented with routine screening. FIT home kits are a non-invasive and inexpensive form of screening.

Upwards of 62,000 DHS-empaneled patients between 50 and 75 years old are eligible for the FIT screening. The FluFIT program is promoted through FluFIT and Wellness Fairs, clinic encounters, fliers and posters, mailers, robocalls, and MyWellness patient portal notices.

"FluFIT is effective because it is a patient-centered, "two for one" approach," says Dr. Heather Schickedanz, director of primary care

(See 'FluFIT' on 2nd page)

(‘FluFIT’)

at Olive View-UCLA Medical Center. “Our efforts at promoting the annual flu shot creates an opportunity to message the importance of colorectal cancer screening. For eligible patients, we offer both of these life-saving annual wellness measures at the same time,”

New DHS-wide nursing protocols and workflows have been established to accomplish this broad population health initiative in a system-wide, coordinated approach across our organization. If done yearly and with good follow-up, the FIT can prevent colorectal cancer or help catch it early when it can be cured. Colorectal cancer screening programs that emphasize the use of FIT as initial screening, followed by a colonoscopy only if the FIT screening is abnormal, are effective and safe.

Health experts recommend colorectal cancer screening for all average-risk adults between the ages of 50 and 75 years. The DHS Colorectal Cancer workgroup is involved in FluFIT and numerous other initiatives to improve our patients’ screening rates and reduce health disparities. The flu shot is recommended every year for most people over 6 months old, and older adults are among the populations particularly susceptible to severe illness caused by the influenza virus.

“The FluFIT protocol was the first approved by the new DHS primary care Interdisciplinary Practice Committee. We are developing several other innovative, team-based care initiatives,” says Debra Duran, RN and Chief Nursing Officer in the Ambulatory Care Network. “Through development, training and implementation of these protocols across our vast health system, we can achieve better popula-



Heather Schickedanz, MD (Olive View-UCLA Primary Care Director) and Debra Duran, RN (Ambulatory Care Network, Chief Nursing Officer) join the American Cancer Society and DHS participants of the “80% by 2018” Colorectal Cancer Roundtable event on March 28, 2018.

tion health.”

Schickedanz and Duran also hope that the FluFIT campaign will encourage DHS employees to get the same preventive care for themselves and their loved ones. “These are simple measures that save lives. All DHS employees should make sure they are up to date with their own personal colon cancer and other recommended cancer screenings. And, we should all get the flu shot every year!” Soon, it will be time for DHS to prepare for our 2018-19 FluFIT season.

Geriatric resources now available on e-Consult

Geriatric Medicine Resources Navigation is now LIVE on eConsult. Relevant, printable community resources for older adults are listed by condition and need. Basic patient information and resource needs can also be provided within the portal to request a Geriatrics Navigator to reach out to your patient by phone to provide support and a warm handoff to community services.

Navigation support was developed in direct response to the

Fall 2017 “LA County Geriatrics Needs Assessment Survey.” Based on clinician needs, Expected Practice on Polypharmacy in older adults has been published, and additional tools for clinical care, including an Expected Practice on Advance Care Planning, are being developed. Geriatric Medicine is now also listed on the services tab on the DHS website.

The Health Agency Geriatrics Workgroup is dedicated to improving the health and well-being of older adults in L.A. County by promoting high quality, interdisciplinary, culturally sensitive geriatrics care and services that are seamlessly coordinated across care teams, agencies and the community.

Initiatives

PRIME Perspectives Tobacco screening and counseling

By Paul Giboney, M.D.

One of the highly incentivized improvement areas in the PRIME program (present in 4 different projects) is assessing patients for tobacco use and providing counseling to support cessation efforts. DHS care team members have made tremendous strides in incorporating assessment for tobacco use into their regular interactions with patients. Nurses, certified medical assistants, and providers, along with other team members screen patients for tobacco use in the vast

majority of clinical interactions.

A key challenge has been to provide to those who screen positive, the best smoking cessation resources available. Along with our DHS-based counselors, educators and other dedicated professionals, we have also built an effective partnership with the California Smokers’ Helpline (1-800-NO-BUTTS). In this partnership, we use eConsult to connect our patients directly to the Helpline. We have eConsulted over 600 patients to the Helpline since the beginning of the collaboration. The PRIME outcomes have shown the difference all of our efforts have made. In the first year of PRIME, DHS met the tobacco measure at a rate of 70%. Now, at the mid-point of year three, our rate is 93%! Thank you to everyone involved in helping our patients live healthier!

Around DHS

Rancho re-accredited as top epilepsy treatment facility

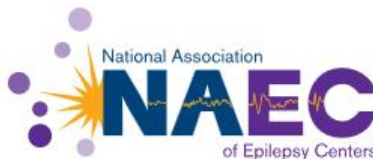
By Rochessa Washington

Rancho Los Amigos National Rehabilitation Center (RLANRC) has recently been re-accredited by the National Association of Epilepsy Centers (NAEC, www.naec-epilepsy.org) as a Level 4 Center for 2018-2019.

The top step, level 4 indicates that a facility has “the professional expertise and facilities to provide the highest-level medical and surgical evaluation and treatment for patients with complex epilepsy.” Rancho’s name was also sent to US News and World Report for consideration in their hospital rankings assessment.

Epilepsy affects approximately 1.2% of all Americans, with approximately one-third uncontrolled by medications alone. For those with refractory, drug-resistant epilepsy, expert guidelines recommend these patients be referred to an epilepsy center for advanced levels of evaluation and treatment.

The Rancho Epilepsy Center was established in 2007 with the building of the epilepsy monitoring unit, the only one in DHS and the central referral site serving all of DHS. The first intracranial electrocorticography monitoring study at Rancho was performed in 2011. Vagus nerve stimulator implantations quickly followed, and stereotactic EEG and responsive neurostimulation capabilities are slated to begin in 2018. The epilepsy program thrives as a strong partnership between Rancho and LAC+USC capitalizing on the strengths and resources on each side. In 2011, the joint venture program was recog-



nized with a Special Merit Plaque Award in the DHS Productivity and Quality Awards.

Rancho has the distinction of being the first, and possibly only public hospital in the nation to achieve Level 4 NAEC accreditation. In doing so, Rancho has demonstrated that highly advanced levels of care are possible in spite of the limited resources of a public hospital. A key factor enabling this accomplishment was being a major partner in the University of Southern California (USC) Epilepsy Consortium, a patient-centered ecosystem comprising independent epilepsy centers collaborating in a care partnership. The consortium shares expertise and maximizes the resources and capabilities of each partner center.

The mission of the RLANRC Epilepsy Center is to provide the highest level of epilepsy care and expertise to residents of Los Angeles County who rely on the safety-net health system, irrespective of their financial or insurance status. The program aligns with Rancho’s mission to restore health (one-half to two-thirds of patients who receive resective epilepsy surgery become seizure-free), rebuild life (an epilepsy rehabilitation program at Rancho addresses whole person care, working to improve quality of life and increase vocational and occupational opportunities), and revitalize hope (our patients are no longer defined by their illness and its limitations).

The RLANRC Epilepsy Center Medical Director is Susan Shaw Huang, MD and the Epilepsy Center Surgical Director is Charles Liu, MD, Ph.D. The Director of Epilepsy Monitoring Unit is Hui (Tory) Gong, MD. Other key epileptologists and epilepsy neurosurgeons are Michelle Armacost, MD and Jonathan Russin, MD.

LAC+USC/Baby Box partnership reduces risk of infant harm

By Sandy Correa

Each year, LAC+USC Medical Center delivers about 1,000 babies and is the medical home for hundreds of other newborns born at outside hospitals. Pediatricians are the first doctors these babies and their parents encounter during well-child visits, and it was a group of pediatric residents who had a vision that every baby have a safe place to sleep and that no more infants die due to SIDS (Sudden Infant Death Syndrome).

This determination started the Newborn Care Package Project five years ago. Over time, it became apparent that it was difficult to successfully help families provide a safe sleep environment for their baby. Whether due to financial stressors, socioeconomic conditions or cultural differences, providers found that co-sleeping occurs on a regular basis.



To overcome this barrier, our pediatrics and combined medicine-pediatrics residents formed a partnership with The Baby Box Company to help promote the American Academy of Pediatrics' "Back to Sleep" campaign. LAC+USC Medical Center is now able to provide the community with a safe sleeping box along with other safety supplies. Parents also receive education in the form of handouts and video content filmed by our very own pediatric and medicine-pediatrics residents and faculty attendings.

The education includes various newborn topics such as safe sleep practices, routine newborn care and benefits of breastfeeding. We are starting the program in our outpatient clinics and will expand to inpatient (NICU and newborn nursery) and Pediatric Emergency Department.

This project is a huge advancement in the care we provide to our patients. Every baby will now have a safe place to sleep – and together, as a community, we are taking steps to ensure a better and safer future for them.

Celebrity sighting



LA Dodger Yasiel Puig and LA Laker Kyle Kuzma stopped by the LAC+USC Medical Center Pediatrics Department to sign autographs and bring well-wishes to their young fans on April 12. The athletes spent time interacting with patients and staff in the Child Life Play Center before visiting kids on the inpatient ward. Hospital chief executive Jorge Orozco welcomed the athletes and presented them with scrolls on behalf of LA County Supervisor Hilda L. Solis.

Attention Diabetes Providers

The Endocrinology/Diabetes workgroup and MLK Outpatient Center is pleased to offer English and Spanish diabetes and lifestyle classes on the 3rd Saturday morning of each month as part of the Saturday Spa Program at MLK Outpatient Center. These classes are perfect for DHS patients who cannot attend weekday classes and are in addition to the POWER obesity program at MLK Outpatient Center and the Roybal Weight Loss and Support Group, both offered on Monday afternoons.

ACN expands healthy living program

By Debra Duran, RN

This past January marked the launch of the "Eat Healthy, Be Active" nutrition and healthy living program offered throughout Ambulatory Care Network (ACN) clinics. The program follows a national curriculum and was made possible by a grant from the U.S. Centers for Disease Control (CDC).

Over 150 participants attended the first round of classes held at the Mid-Valley and Roybal Comprehensive Health Centers. The program consists of weekly classes for 6 weeks offered in either English or Spanish.

Classes are taught by the ACN team of health educators and health education assistants. A unique aspect to these classes are live cooking demonstrations though a collaboration with the chefs from Morrison. The Morrison partnership also gives patients opportunities to interact with Morrison's Registered Dietitians who attend many of the classes to talk about basic food nutrition and answer patient's questions.

The next round of classes is already being offered at El Monte and Hudson Comprehensive Health Centers with classes at the High Desert, Humphrey, and Long Beach clinics to be scheduled soon.

All patients are welcome and providers can make referrals by contacting Janeth Bravo at (213) 288-9027 or JBravo@dhs.lacounty.gov.



Upcoming Events

May 3, 2018 — 9:30am - 3:30pm: Humphrey HC joins DPH and DPSS to host 2nd Annual Synergy Health Fair and CalFresh Awareness Event with over 20 community-based organizations.