

# GALLOWAY POINT OF VIEW Improving Clinical Utilization

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Given the importance of value and performance, it has become vital to turn a critical eye on your clinical operations. If hospital leadership expects to achieve efficiencies, stay competitive, maintain compliance and quality of care, the performance of individual services must be continuously measured, monitored and assessed.

But improving clinical utilization can be a tricky, complex task. Evaluating and identifying improvement areas and introducing appropriate interventions can be time consuming – particularly because opportunities are often spread across all

service lines and most DRGs. Variation among practitioners for the same DRG adds another level of complexity when it comes time to assess the organization and drive a cohesive improvement process.

The Galloway team has had the opportunity to work with dozens of hospitals to drive targeted clinical intervention, leveraging top performing practices to assess and identify the best design for improvement within the overall clinical utilization architecture. Based on this work, we've identified five (5) key steps in the trajectory of a focused clinical intervention:

- Assess and Segment: Leverage interviews, competitive intelligence, and benchmarking of costs and
  quality outcomes to gather information. Identify cost improvement opportunities by service line and
  utilize physician scorecards to quantify performance, influence, and align with the organization.
- Alignment: Reach agreement on the need to change, the scope and scale of the problem and the list
  of focused interventions.
- **Design Intervention:** Introduce recommended interventions in waves to generate quick results and build momentum.
- *Implementation:* Enable senior team oversight and equip staff with expert content, tools and skills to drive implementation.
- Maintain Control: Establish metrics to monitor new practice initiatives and utilization; institute
  information flags to suggest when behavior or processes are going off track.

Here's how we typically map the process out for clients:

Assessment

# Alignment

# Intervention Design

**Implementation** 

# **Targeted Scope**

The elements of performance and organizational design necessary to understand the levers of success

# **Confront Reality**

Agreement on need to change

Agreement on scope and scale of the problem

Agreement on list of focused interventions

#### **Initiative Teams**

Seven highly structured meetings

Detailed design and implementation plans

Senior team integration and sponsorship

#### **Targeted Individuals**

Individual process TBD

# **Typical Domains**

Targeted utilization, practice variation, off quality

Process and / or behavior

# Rigorous Project Management and Oversight

Extend CMO / CNO / Senior Leader

Role model senior team oversight behavior

Transition Initiative Teams to implementation oversight

Establish, equip, and / or staff the PMO

### "As Needed" Content Expertise and Implementation Assistance

Run design and implementation teams for complex issues with expert content and facilitation

Equip leaders to drive implementation with expert content, tools, and behaviors / skills

Improving clinical utilization is top of mind these days. With the emphasis on value and performance in the new healthcare, there is no better time than the present to tackle this challenge. To learn more about Galloway's proven methodology for driving clinical utilization gains, please contact Boe Young at 770-876-4186 or byoung@gallowayconsulting.net.

#### **ABOUT OUT EXPERT**



Don Bialek, MD, is an industry expert and established consultant with over 25 years in the healthcare industry. He has extensive experience in clinical medicine, senior operating and management roles, as well as consulting. Serving as Chief Medical Officer to Galloway Consulting, Don brings the physician perspective to our work in quality and physician engagement that is key to successful transformation.