

OCTOBER 9, 2018

VOLUME 34 NUMBER 12

WELCOME NEW PRODUCTIVITY SOFTWARE CLIENTS

Quantify is an AMS developed and owned productivity monitoring software tool for tracking and measuring department and organization performance. This month we welcomed new clients in Indiana, Minnesota and New Hampshire. For more information, see the enclosure to the Biweekly “*Labor Productivity Monitoring*”.

AMS ATTENDS WOMEN LEADERS IN HEALTHCARE CONFERENCE



Jennifer Schuster, Principal, Shari Robbins, Vice President, and Linda Mynahan, Manager, attended the 17th Annual Women Leaders in Healthcare Conference offered by the Massachusetts Health and Hospital Association (MHA). The keynotes were delivered by Julie K. Silver MD, Associate Professor and Associate Chair, Department of Physical Medicine & Rehabilitation at Harvard Medical School and Myechia Minter-Jordan MD, MBA, President and CEO of the Dimock Center, Roxbury, MA. The speakers revealed their toughest challenges and offered perspective on how they changed those challenges to opportunities. Specifically, maintaining a healthy work-life balance by being organized, strategizing your schedule, and surrounding yourself with support—both at work and at home—to bring your best to both worlds.

This conference is one that is always highly attended by women leaders across Massachusetts. With over 300 women there, it clearly proves there is strength that comes from sharing similar professional perspectives and challenges, connecting/reconnecting with the professional networks and the understanding that women’s issues within the industry are discussed in a focused forum. This latter point was substantiated in a recent publication on March 28, 2018, by the **Harvard R.H. Chan School of Public Health** entitled, “Exploring the Challenges Facing Women Leaders in Health Care.”¹ In this article, they acknowledge that it is “more difficult for women to assert their authority or demonstrate the same management traits that are commonly encouraged in men.”¹ Good news is that there has been an increase in women leadership at the top as currently, 46% of Hospital CEO’s in Massachusetts are women.

The central theme of the conference is that narrowing the gender gap is an important strategy to bring meaningful change to our nation’s healthcare system.

¹ Ellis, Lisa D. March 28, 2018. Exploring the challenges facing women leaders in health care. Harvard T.H. Chan School of public Health. Retrieved from <https://www.hsph.harvard.edu/ecpe/challenges-facing-women-leaders-health-care/>

MASSACHUSETTS ALREADY HAS MANDATED NURSE STAFFING RATIOS IN ICUS



In November, voters in Massachusetts will consider a Referendum Ballot question—“The Patient Safety Act”. If passed, this act would establish rigid and fixed nurse-to-patient staffing ratios of 1 RN nurse for 4 patients in medical/surgical and 1:5 in psychiatric units. California, the only state with mandatory nurse staffing ratios (which includes more than RNs), has mandated 1:5 in medical/surgical units and 1:6 in psychiatric units. Only 26 states (and Washington, DC) can offer referendum ballot questions, and Massachusetts is one of those states.

On October 3, 2018, the **Massachusetts Health Policy Commission** (a state agency) released its analysis that the mandated nurse staffing ratios would cost \$676 to \$949 million in annual increased costs once fully implemented. Massachusetts already has mandated nurse staffing ratios in Intensive Care Units (ICUs). Passed by the Legislature in 2014 in part *to avoid a ballot referendum*, the law required each ICU nurse be assigned up to two patients. This law applies to all types of Intensive Care Units, including Burn Units and Neonatal Intensive Care Units.

Massachusetts was the first with another regulation and is the only state in the U.S. to successfully ban ambulance diversion as described in the AMA Journal of Ethics story by Laura Burke, MD in June 2010. This state Department of Public Health (DPH) directive prohibited ambulance diversions except in cases of internal hospital disasters that rendered the emergency department unusable. This policy was enacted after a decade of efforts made by the Massachusetts DPH to encourage hospitals to voluntarily limit ambulance diversion.

DISRUPTIVE TECHNOLOGY, ARTIFICIAL INTELLIGENCE SEMINAR NOVEMBER 1



On Thursday, November 1, six speakers will present the state of the art on the emerging developments in Disruptive Technology, Artificial Intelligence at the **ACHE Massachusetts Fall seminar at the DoubleTree Hilton** in Westborough MA at a meeting cosponsored by the Massachusetts Health and Hospital Association. This arena is changing the way our organizations approach everything. Three of the speakers have “innovation” in their job title, and they are from GE Healthcare, Partners Healthcare, and Harvard Pilgrim Health Care. IBM Watson Health is also on the program.

John Christoforo, President & Chief Executive Officer, Beth Israel Deaconess HealthCare, Needham, MA and Alan Goldberg, Principal and President, spoke to the first keynote speaker, Mike Weissel, Executive Vice President, Optum, on October 2, 2018, about his upcoming address. Optum is part of the United Healthcare Group, which is one of the Dow Jones Industrials 30 stocks. “John and I were extremely impressed with Mike’s knowledge on this topic and how he plans to bring this information in such an understandable way to ACHE. I was also struck by the fact that Mike is specifically preparing his presentation for ACHE,” said Alan. Complete details are attached to the Biweekly. To register http://massache.org/event_2018_11_01_online_registration.asp.

Quantify™ — An Enterprise-wide Productivity Monitoring Tool

Quantify™ is a productivity monitoring tool for tracking and measuring department and organization performance. **Quantify** combines AMS' decades of labor productivity improvement experience and proprietary data with additional department-specific and management engineered workload standards. The standards can be developed by AMS or supplied by the user.

*Manage more effectively...
Monitor decision-making results*



With reports and dashboards that are easily accessible via internet by all levels of the organization — from front-line managers to the executive leadership team — **Quantify** helps promote transparency and accountability.

Overcome these productivity challenges...

- Productivity monitoring is inconsistent or non-existent
- Current solution/process is time consuming and manual
- Need to automate and implement management accountability and standardize across the organization
- Need for cost-effective, state-of-the-art solution

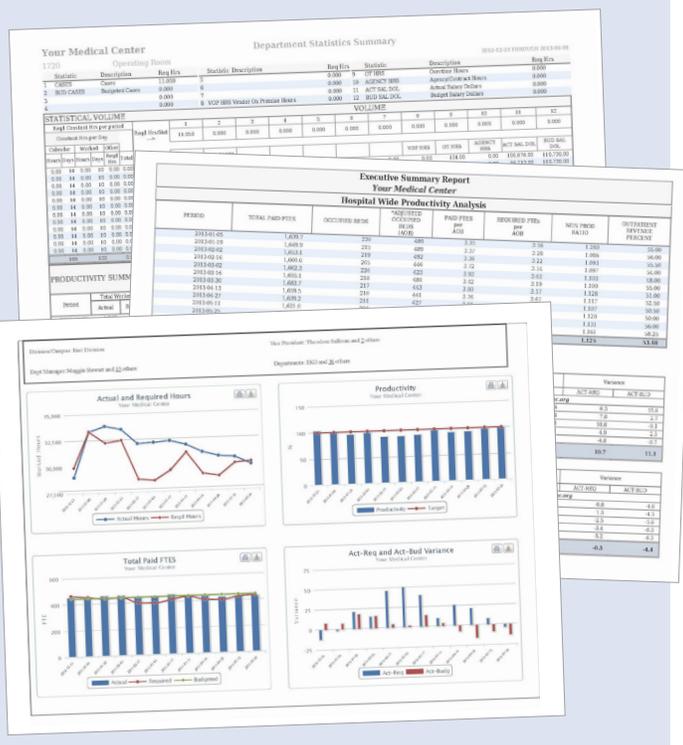
...with these productivity benefits

- Match labor resources to workload demand
- Provide effective patient care
- Encourage accountability for the use of labor resources throughout organization
- Promote transparency
- Promote the stewardship of the cost of providing care
- Provide a catalyst for process improvement

QUANTIFY™

Features and benefits

- “Hosted” reporting system, delivered over the internet, accessible through a web-browser — no software installation required
- Designed using industry standard secure web and database programming technologies
- Interactive dashboard reports
- Consolidates disparate data
- Supports reporting throughout management structures and service lines
- Reports generated in both HTML and PDF formats
- Integrates with AMS Benchmarking
- Easy to update — as your organization changes



To learn more, please contact:

Michael Foley
Principal
mfoley@aboutams.com

Jennifer Owen Schuster
Principal
jschuster@aboutams.com



ACHE of MA Fall Conference

Co-Sponsored by the Massachusetts Health and Hospital Association

Disruptive Technology: Healthcare's Savior?

Thursday, November 1, 2018 | 7:00 - Noon
(Optional lunch immediately following conference.)
DoubleTree by Hilton | Westborough, MA

KEYNOTES

Michael Weissel, Executive Vice President, Optum
Terri Bresenham, Chief Innovation Officer, GE Healthcare

PANELISTS

Chris Coburn, Chief Innovation Officer, Partners HealthCare and President, Partners Healthcare International
Patricia Forts, Deputy Chief of Innovation and Strategy, Harvard Pilgrim Health Care
Iyah Romm, Founder and CEO, City Block
Sarah Sossong, FACHE, Principal, Flare Capital Partners
Moderator: Peter Shorett, Senior Partner, The Chartis Group

Just since 1960, US healthcare spending has risen from \$27B to \$3,500B, increasing the annual spend per US resident from \$150 to over \$10,000! Healthcare's share of our GDP has grown from a hefty 5% to a gigantic 19%. The voracious healthcare beast is starving other vital social needs, with catastrophic results for our citizens, businesses and government and even our own health care industry.

Enter disruptive technologies and innovation: artificial intelligence, genomic engineering, miniaturization, big data, and new pharmaceuticals. Massive investments are being made by all sorts of economic sectors inside and outside the health care industry -- venture capital firms, big pharma, small start-ups, IT, backyard /garage incubators, government payers, commercial payers, and academic medical centers, all searching for the same thing: Higher quality, better outcomes, more access, lower costs and happier/healthier patients.

This conference continues ACHE of Massachusetts' focus on the people and companies making this all happen and who will either constructively contribute to the new health care paradigm (and spend billions doing it) or go down trying.

Investment

\$199 ACHE of Massachusetts/ACHE Members/MHA Members
\$299 Non-members (Join ACHE to receive the Member Rate.)

Registration: http://massache.org/event_2018_11_01.asp