

# Healthcare and ED Innovations

Special Focus One The Practice of Emergency Medicine

# Nothing to Disclose, No Financial Conflict of Interest

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# Agenda

- Healthcare Pre and Post Pandemic
- Design Thinking
- ED Innovations Pre-Pandemic
- ED Innovations Post Pandemic
- The Future of Emergency Medicine

# Partial List of EM Innovations

- Emergency Medicine – 1968
- First ED Triage Systems – 1965-1980
- RVU Incentive Pay – 1987
- Hospitalist - 1995
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- Emergency Department Palliative Care – 2012
- Alternatives to Opioids and MAT - 2016

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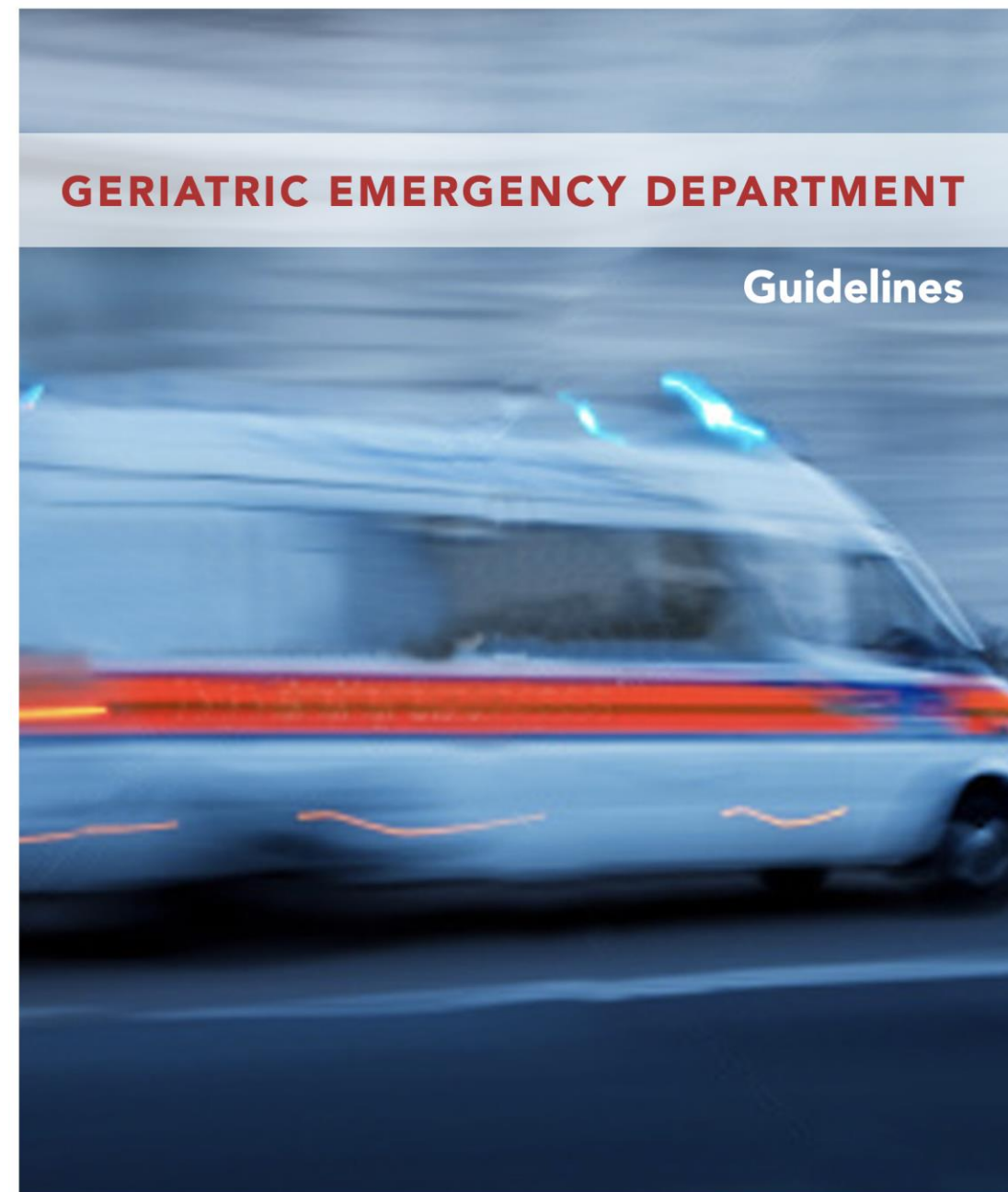
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# Geriatrics

- 2009 – First GED
- 2013 – GED Guidelines Published
- 2017 – ACEP Accredits GED's
- 2021 – Over 300 Accredited GED's



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# SM, 25 yo business owner

- Diagnosed with Glioblastoma October 14th
- December 7th After Chemo and 2 Surgeries Told There was Nothing Else They Could Offer
- She was Going to Die in Weeks.
- Told to Stay in the Hospital and Let Hospice Make it Easier.
- Now What?

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# Timeline – The ALTO Journey

- 2014 Acute Pain Fellowship
- 2015 recovery walk and Michael
- 2016 ALTO Prevention Program Started
- 2016 Opioid Overdose Recovery Program – MAT and Warm Handoff
- 2017 Meeting with Booker and Pascrell
- 2018 ALTO and POWER Acts
- OCT 24 2018 Signed into Law
- 2019 State and Hospital Initiatives
  - Opioid Reduction Options
  - ALTO Hospital Wide
  - Nation-wide State Initiatives
- December 2019 - ALTO Act Funding Approved
- March 17<sup>th</sup> 2020 – First ALTO Funding
- August 2020 – Second ALTO Funding
- December 2020 - X-Waiver Legislation
- January 2021 – Third ALTO Funding



# Pandemic Innovations - 2020

- COVID Related Innovations
- ACEP Innovation Center
  - Health disparities
  - Telemedicine
  - Emergency department critical care
  - Future of EM

# The ACEP Innovation Program

A New “Design Thinking” Tool For  
ACEP

Innovation

## Why Design Thinking Works

It addresses the biases and behaviors that hamper innovation. by  
Jeanne Liedtka

From the Magazine (September–October 2018)



Marcos Chin

**“The secret of change is to focus all of your energy, not on fighting the old, but building on the new.”**

Socrates (470-399 BC), Philosopher

# The Steps of Design Thinking

1. Identify the team
2. Identify/define the problem or initiative
3. Develop a possible solution or knowledge base
4. Test it
5. Redefine

# The Steps

- Identify the team
  - The committee leaders, staff, liaisons, committee chair
- Identify/define the problem or initiative
- Develop a possible solution or knowledge base
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# The Steps

- Identify the team
- Identify/define the problem or initiative
  - Health care disparities and inequities exist in medicine
  - Current and future pandemics
- Develop a possible solution or knowledge base
- Test it
- Redefine

# The Steps

- Identify the team
- Identify/define the problem or initiative
- Develop a possible solution or knowledge base
  - Incubator one
  - Incubator two
- Test it
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# The Steps

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  - Presentation to a defined group
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# Incubator one –

## Health care disparities and inequities exist in medicine

- Identify the team
  - Dr Aisha Terry
  - Staff – Faeza Faruq
  - The 14 Committees and leaders
- Identify/define the problem or initiative
  - Health care disparities and inequities exist in emergency care
- Develop a possible solution or knowledge base
  - This is the initial goal and objective
- Test it
  - TBD either as a web site bucket, paper or presentation
- Redefine
  - From comments during the testing

# The Committees – Health Care Disparities

- Academic affairs
- Communication committee
- Disaster preparedness
- Education committee
- Emergency medicine practice
- EMS
- Ethics
- Federal government affairs
- International EM
- Medical legal
- Policy and injury prevention
- Quality and patient safety
- Research
- State legislative and regulatory

# Incubator two –

## Current and future pandemics have changed the future of emergency medicine

- Identify the team
  - Dr Bill Jaquis
  - Staff – Sam Shahid
  - The 16 Committees and leaders
- Identify/define the problem or initiative
  - The Current and Future Pandemics
- Develop a possible solution or knowledge base
  - This is the initial goal and objective
- Test it
  - TBD either as a web site bucket, paper or presentation
- Redefine
  - From comments during the testing

# The Committees – Pandemic and Future

- CEDR
- Coding and nomenclature
- Communications committee
- Disaster preparedness
- Emergency medicine practice
- Ethics committee
- Federal government affairs
- International EM
- Medical legal
- Pediatric emergency medicine
- Public health, injury prevention
- Quality and patient safety
- Research committee
- State legislative and regulatory
- Well-being committee

# Next Step

- Each incubator will meet as a group and discuss the project
  - Zoom Retreat
  - Each Committee Mini Presentation
  - Facilitated Discussions
  - Project Evolution
- The project scope may require multiple meetings of each incubator

# More Thoughts

- Our committee structure is perfect as our innovation team
- The problems or initiatives
  - Should meet our mission, vision or our strategic plan.
  - Should focus on
    1. Our patients
    2. Emergency Department
    3. Emergency Physicians
    4. Practice of EM
    5. ACEP staff will all work..
- The same process can be continued every year.
  - Identify the one or two problems or initiatives
- Best if we can have a place for innovations, “The Incubator” room
  - Very Chill
  - Ultra comfortable
  - All walls are Dry Erase
  - Can this be a virtual

# Other topics can fit into this process

- Workforce
- Membership
- Communication
- Best practice initiatives
- Practice ownership
- Future accreditations



# The Future of EM – Our Natural Evolution

- Internal Medicine
- Anesthesia
- General Surgery

# The Evolution – Beyond Bricks and Mortar

- Post Acute Care
- Acute Unscheduled Care
- ED Critical Care
- After Hours Coverage
- TeleHealth
- Mental Health Urgent Care
- Nursing Home ED
- Addiction Centers
- Palliative Care