



3/29/2023

CLPDC 101: The Benefits and Basics of the Data Center

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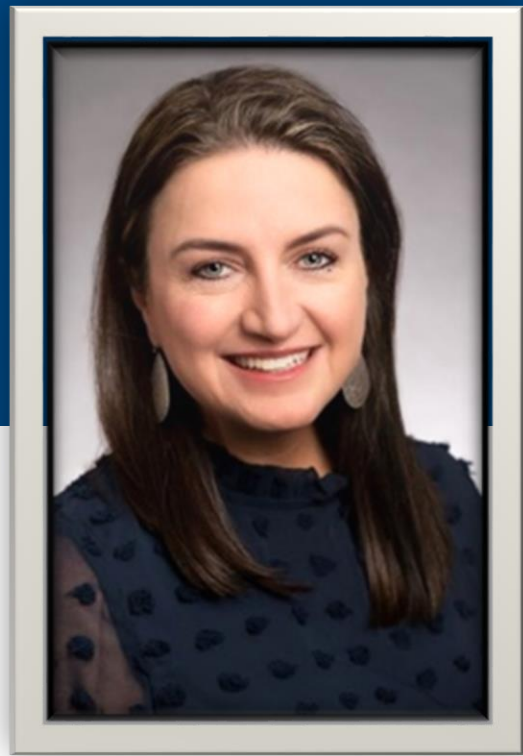
Diane Kaulen, MS, CCLS

Erika Croswhite, MA, CCLS

Susan K Gorry, MA, CCLS



Benchmarking Leadership

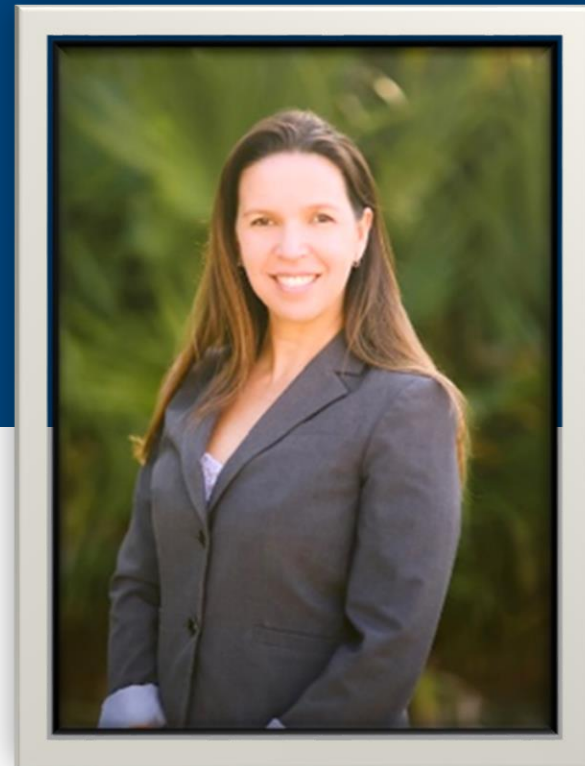


Alyssa Luksa

Current Co-Chair

Director of Child Life
and Expressive
Therapies

Children's Memorial
Hermann Hospital



Diane Kaulen

Current Co-Chair

Sr. Community
Initiative Coordinator
Public Health

Texas Children's
Hospital

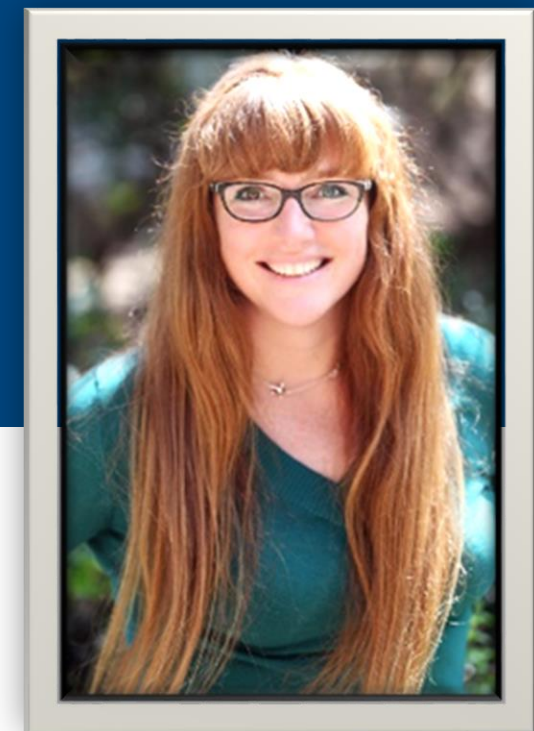


Erika Croswhite

Upcoming Chair

Child Life Manager

Children's Hospital of
Colorado



Susan Gorry

Upcoming Co-Chair

Child Life Specialist
Supervisor

Children's Hospital
Los Angeles

CLPDC 101: The Benefits and Basics of the Data Center



Goals of the Webinar

To discuss the history of the CLPDC

To review the importance of the data center to the child life profession

To identify key terms in the data collection

To demonstrate program examples

To explain how to use the CLPDC data to elevate your conversations

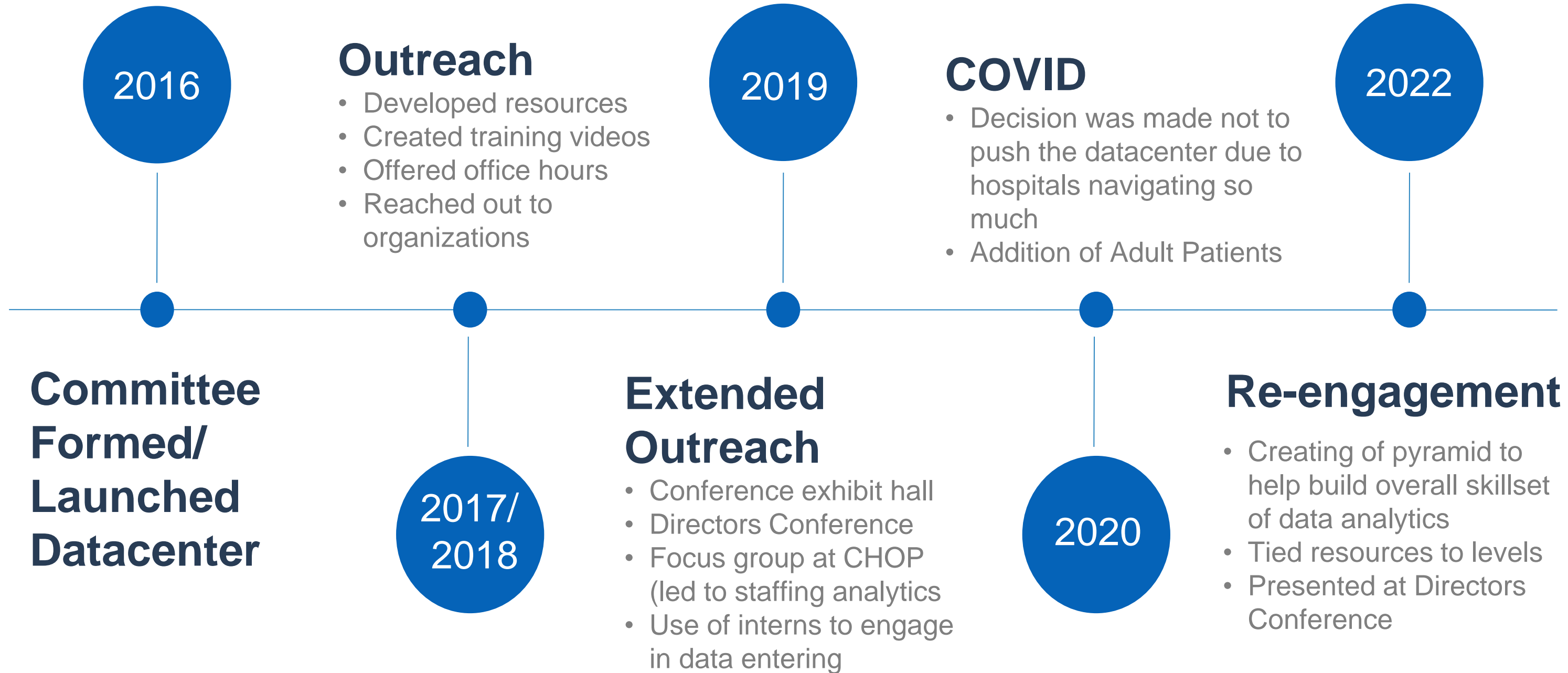


Benchmarking Committee

Committee Goals

- To assist programs to increase understanding of the purposes of annual data and how to utilize the information for benchmarking information.
- To assist programs to increase understanding of the purpose of the quarterly data and how this data can be utilized to examine individual hospitals workflows, staffing allocations and/or staffing requests.
- To assist programs to increase understanding of the purpose of the staffing calculator and how this data can be utilized to align staffing to patient needs.

Most importantly, we are here to help you
navigate data to impact change



Why is this important?

The 5 why's



Easy access to program benchmarking



Contributes to program growth and development



Prepares leaders to speak the professional language with health care leaders



Elevates our presentations and conversations



Greater good for our profession: Community of leaders speaking the same appropriate language



How do we begin



- Why we enter data
- How does this help our program
- Navigating balance

- Making it apart of a career ladder
- Building skillsets
- Performance management

- Review with financial reports
- Identify trends and unexpected changes

- Strengthen our data muscle to we are prepared at a moments' notice



I'm not a program leader, how can I contribute?



1

Use your numbers to tell the story – will see in a minute how to use it in every day language

2

Support how data is helping the profession

3

Encourage your teams/leadership in participating in the CLPDC



Data Collection

- Good ol' paper and pen
- Excel sheet tracking
- Online survey data entry
- Pulled from existing metrics at site

Benchmarking Data Collection Tool -

For CLC Children's Hospital

* Required

Staff Member *

Choose

Date of Service *

MM DD YYYY

/ / 2016

Length of Shift *

Your answer

Area *

Choose

of Patients Seen *

Your answer

SUBMIT

| Ambulatory Encounters | | | | | | | | | |
|-----------------------|----------------------------------|----------|----------|----------|----------|----------|----------|----------|----------|
| | A | B | C | D | E | F | G | H | I |
| 1 | Name: | | | | | | | | |
| 2 | Location: local setting use only | | | | | | | | |
| 3 | August | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 4 | Total Length of Scheduled Shift | | | | | | | | |
| 5 | Acute Care Encounters | | | | | | | | |
| 6 | Time Spent Inpatient | | | | | | | | |
| 7 | Critical Care Encounters | | | | | | | | |
| 8 | Time Spent Critical Care | | | | | | | | |
| 9 | Radiology Encounters | | | | | | | | |
| 10 | Time Spent Radiology | | | | | | | | |
| 11 | Pre-Surgery Encounters | | | | | | | | |
| 12 | Time Spent Ambulatory | | | | | | | | |

| Quarterly Summary | | | | | | | | | | |
|--|-----|-----|-------|-----------|-------|-----|------|-----------|---|--|
| Use this tab when the only daily data collected is from the monthly tabs in this workbook. | | | | | | | | | | |
| | Jan | Feb | March | Qtr Total | April | May | June | Qtr Total | J | |
| Acute Care Encounters | | | | 0 | | | | 0 | | |
| Scheduled hours | | | | 0 | | | | 0 | | |
| Critical Care Encounters | | | | 0 | | | | 0 | | |
| Scheduled hours | | | | 0 | | | | 0 | | |
| Radiology Encounters | | | | 0 | | | | 0 | | |
| Scheduled hours | | | | 0 | | | | 0 | | |
| Pre-Surgery Encounters | | | | 0 | | | | 0 | | |
| Scheduled hours | | | | 0 | | | | 0 | | |
| Ambulatory Encounters | | | | 0 | | | | 0 | | |
| Scheduled hours | | | | 0 | | | | 0 | | |
| Emergency Department Encounters | | | | 0 | | | | 0 | | |
| Scheduled hours | | | | 0 | | | | 0 | | |



Key to collecting data



Focus needs to be around patient care



Data should be simple



Don't get into the weeds





Benchmarking Committee





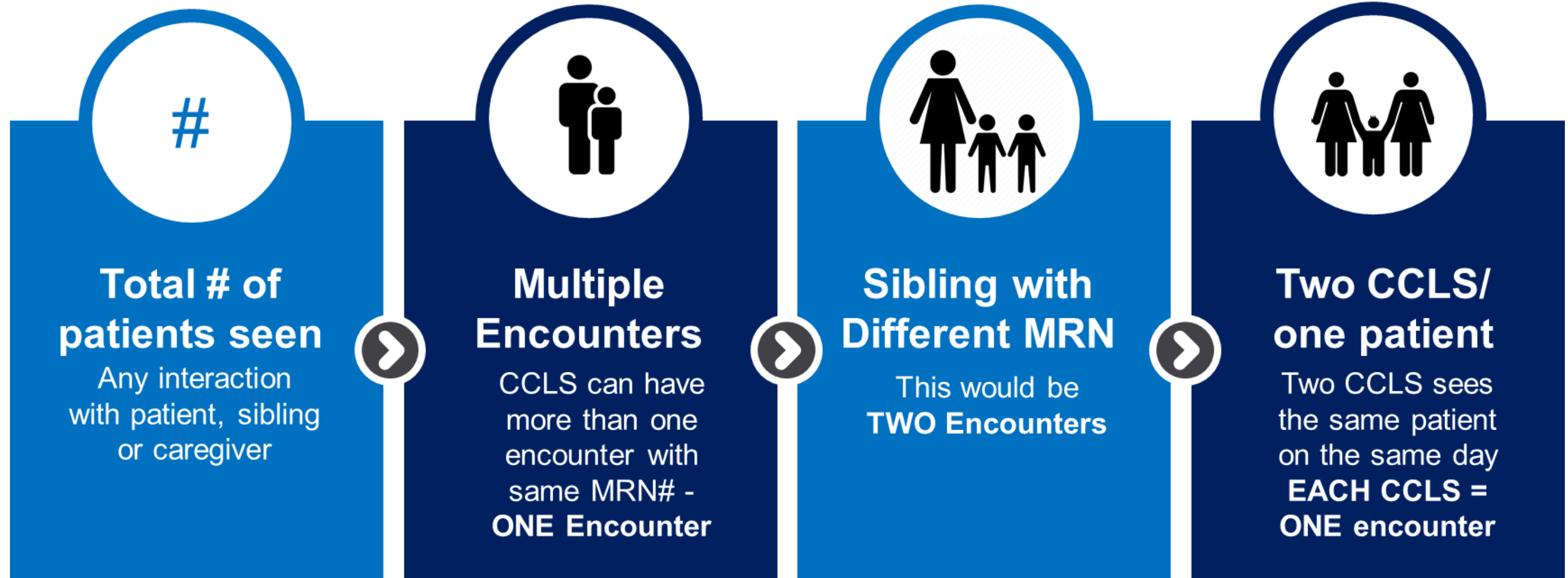
**Don't feel like you
have to show off
superpowers.**

**Be HONEST with
what you do each
day.**

What is defined as a patient encounter?



CLPDC



Defining location?



-  Acute Care
-  Critical Care
-  Outpatient
-  Emergency Center
-  Radiology
-  Surgery
-  Adult Patients

The goal is to capture the average number of patients that a child life specialist serves during their shift in each of these areas



If you are a CCLS who works in multiple areas, just break up your shift into the hours you work in each area



Acute Care

4 hours, 3 patients



Surgery

2 hours, 4 patients



Critical Care

2 hours, 1 patient


CCLS day looked like this:

- 3.5 hours in Acute Care and saw 3 patients
- 1.5 hours in Surgery and saw 4 patients
- 1.5 hours in critical care, 1 patient
- 1 hour in a meeting
- 30 minutes checking emails


The extra work
(meetings, emails, etc)
would be divided among the three areas

What is CPFI?


(Capacity for Family Impact)




Measures the
impact a CCLS
has in any given
hour



Identifies the
number of
patients seen
during a
scheduled shift




Examines this
ratio in 7
different
locations





What is HPPE?



(Hours Per Patient Encounter)




Measures how long it will take a CCLS to care for a patient



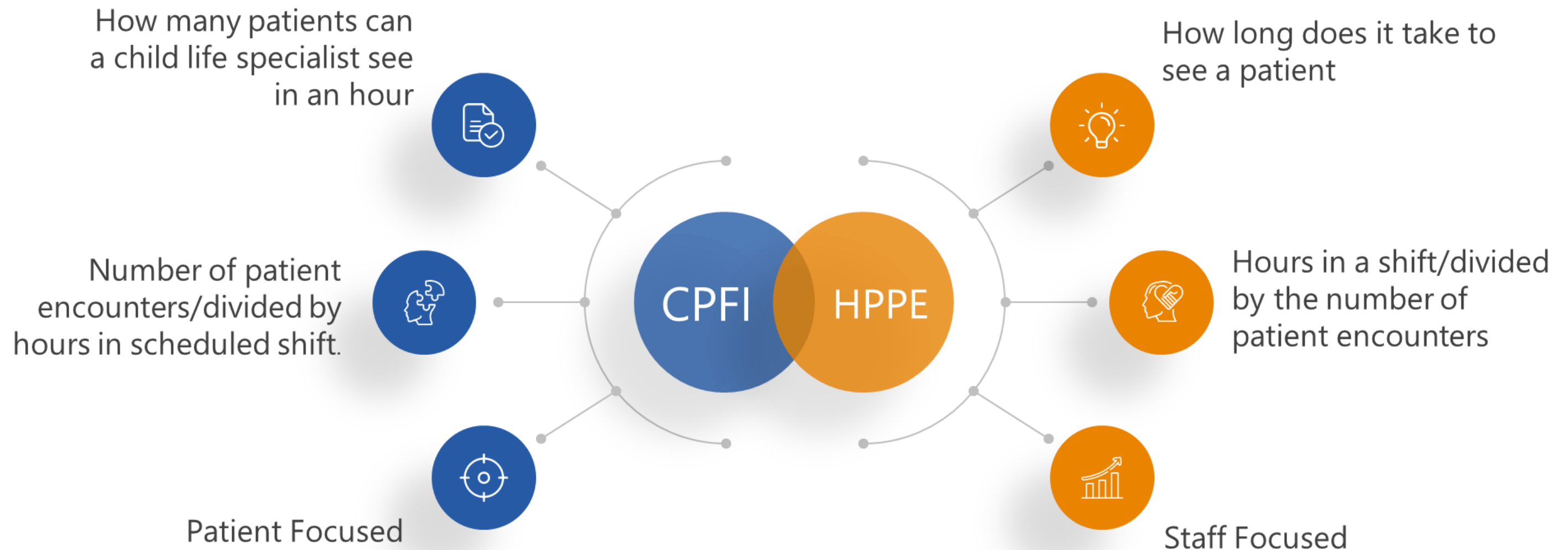
Identifies the scheduled shift divided by the number of patients seen



Examines this ratio in 7 different locations



Comparison



Example: I work in Day Surgery. In my 8 hour shift I see 15 patients

My CPFI is 1.8. - This means a CCLS can see two patients an hour

My HPPE is .53 – This means it will take a CCLS little over 30 minutes to see a patient



Your participation counts

POWER IN
NUMBERS





Minimum number of hospitals to see larger and more obvious differences: 60 hospitals

Optimal number of hospitals to find deeper effects on productivity: 130 hospitals

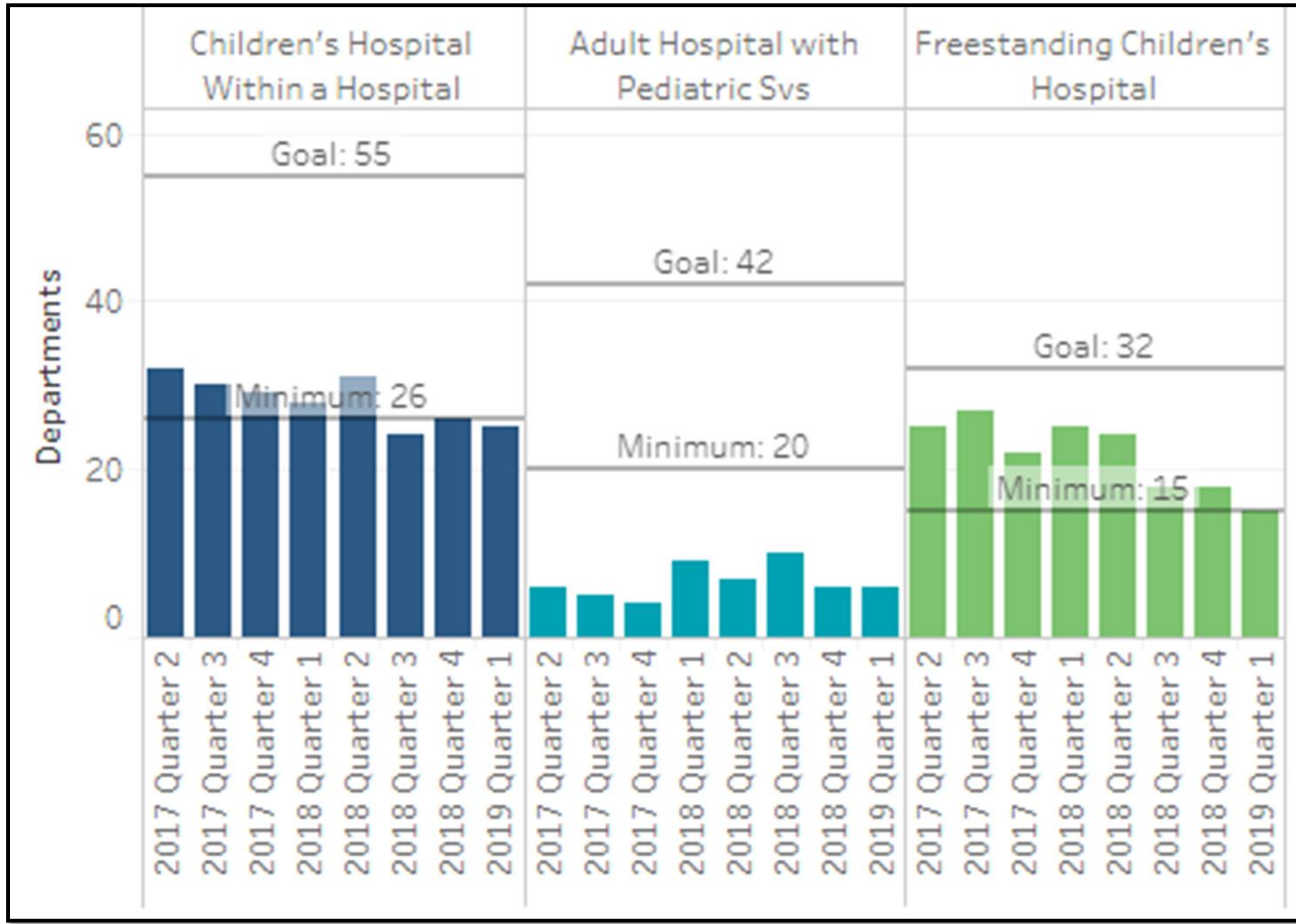
Determining Critical Mass

Hospitals with a Child Life Department





CLPDC: Power Analysis



Common Questions

I am late putting in my data, can I still enter it?

YES

I only have some of the information, can I still enter data?

YES

I am lost, who do I contact for help?

datacenter@childlife.org

Who can enter data for an organization?

Any one whose ACLP profile is associated with that organization

I am leaving the organization, how do I identify the new person who can enter?

Change your profile with ACLP and ensure the person taking over has their profile linked to that organization.



Benchmarking Data at your Fingertips

Annual Data

Includes general benchmarking information (hours of operation, bed, staffing)

Without Subscriptions

Generalized reports summarizing all organizations

With Subscription

Reports specific to organizations

Quarterly Data

Includes information about Capacity for Patient Impact (CPFI)

Without Subscriptions

Generalized reports summarizing all organizations

With Subscription

Reports specific to organizations

Staffing Calculator

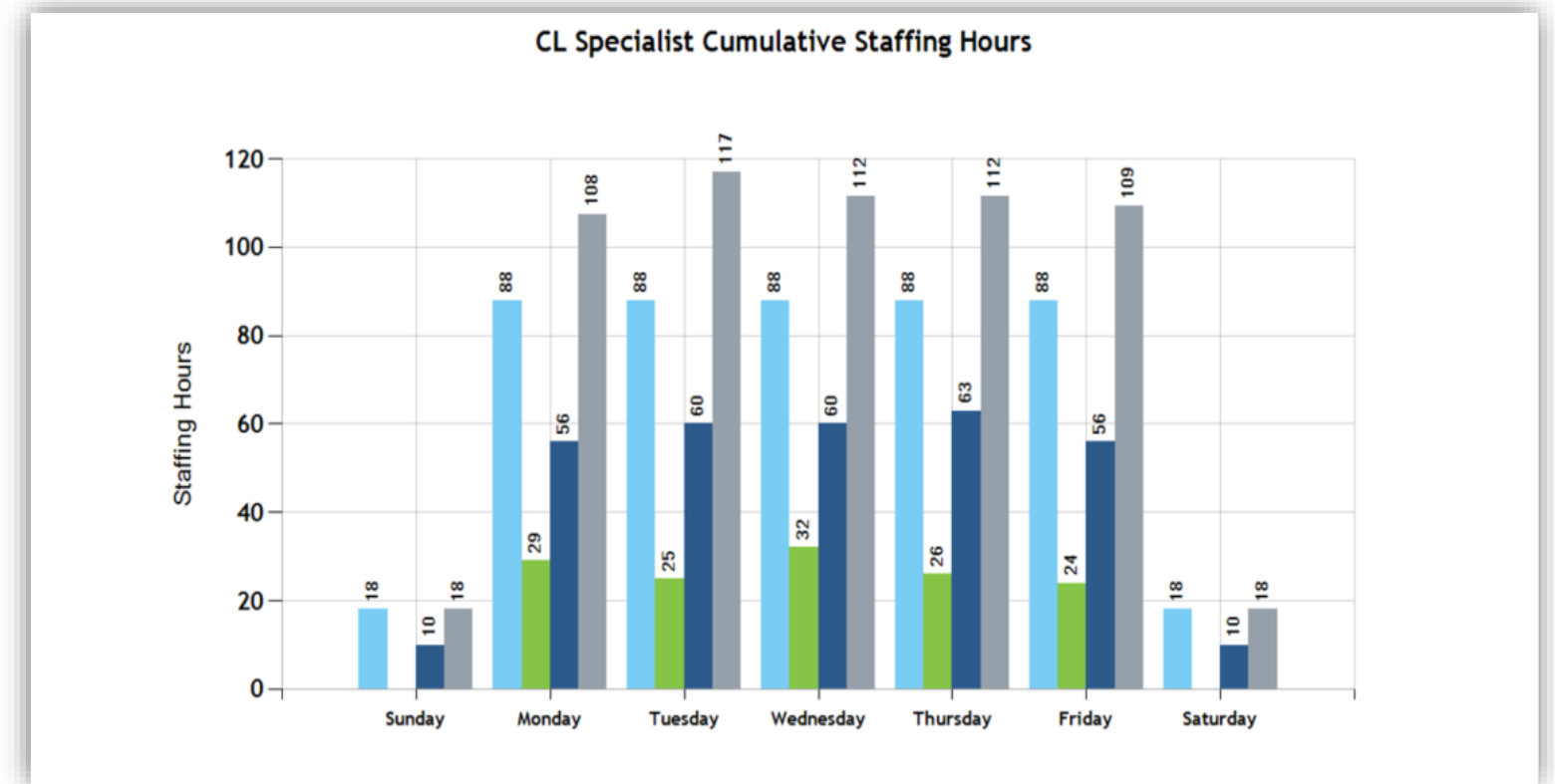
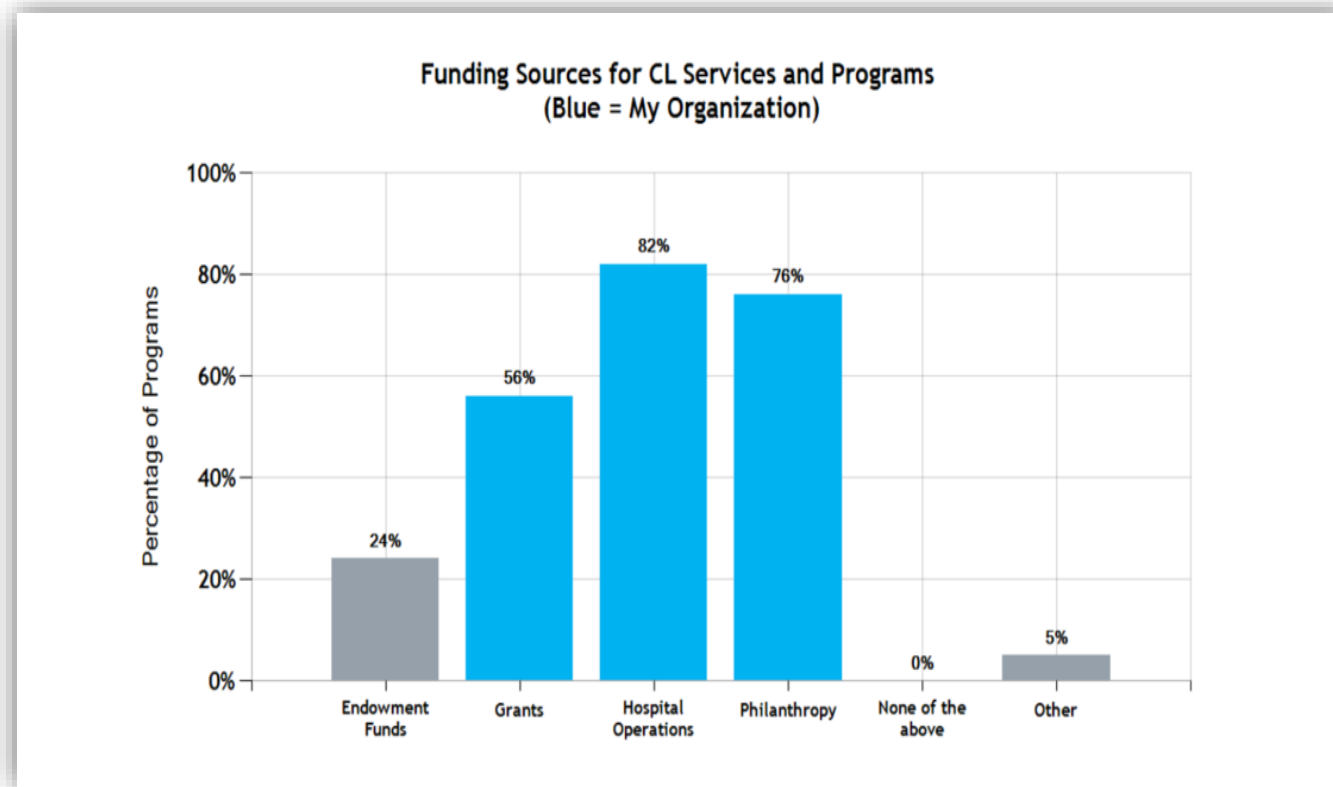
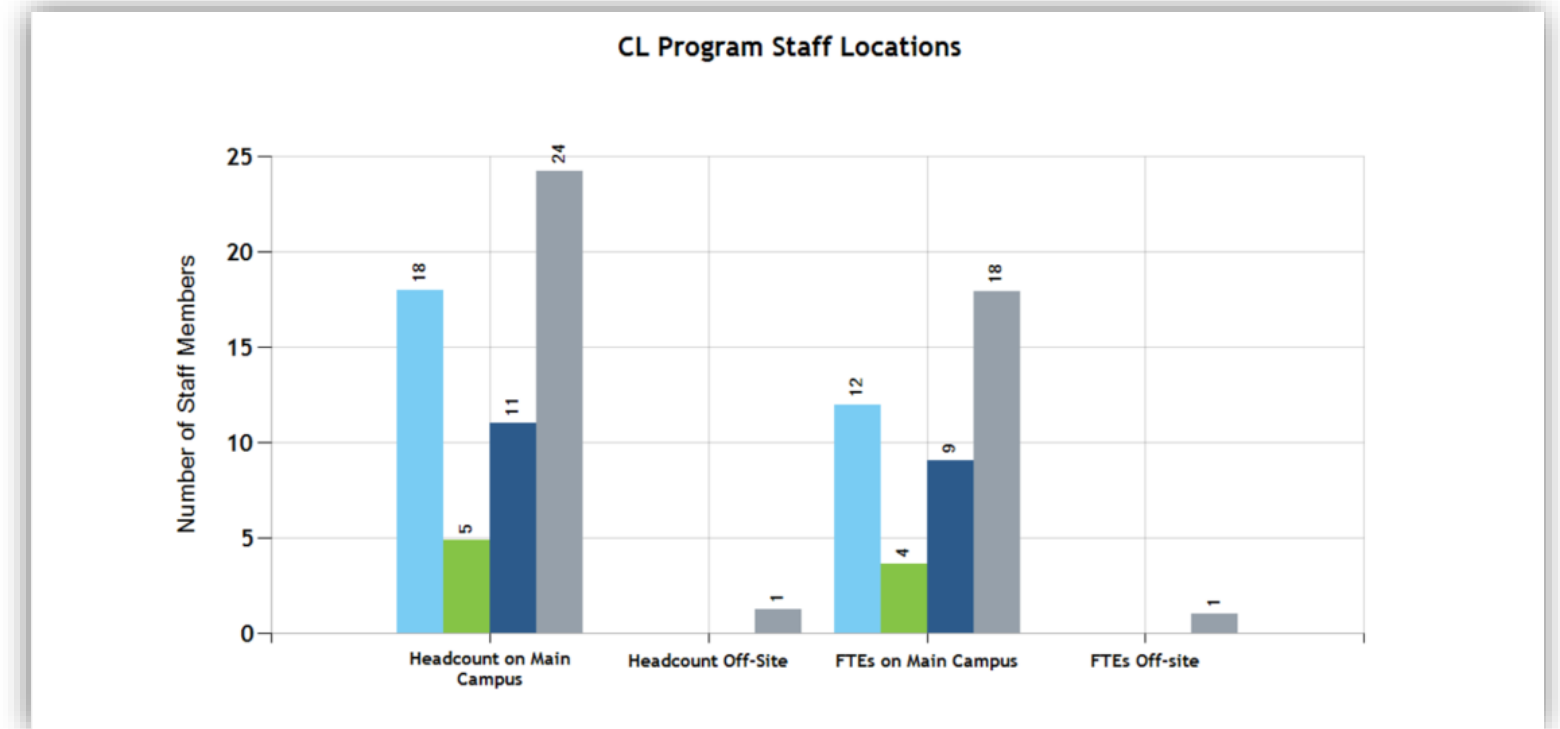
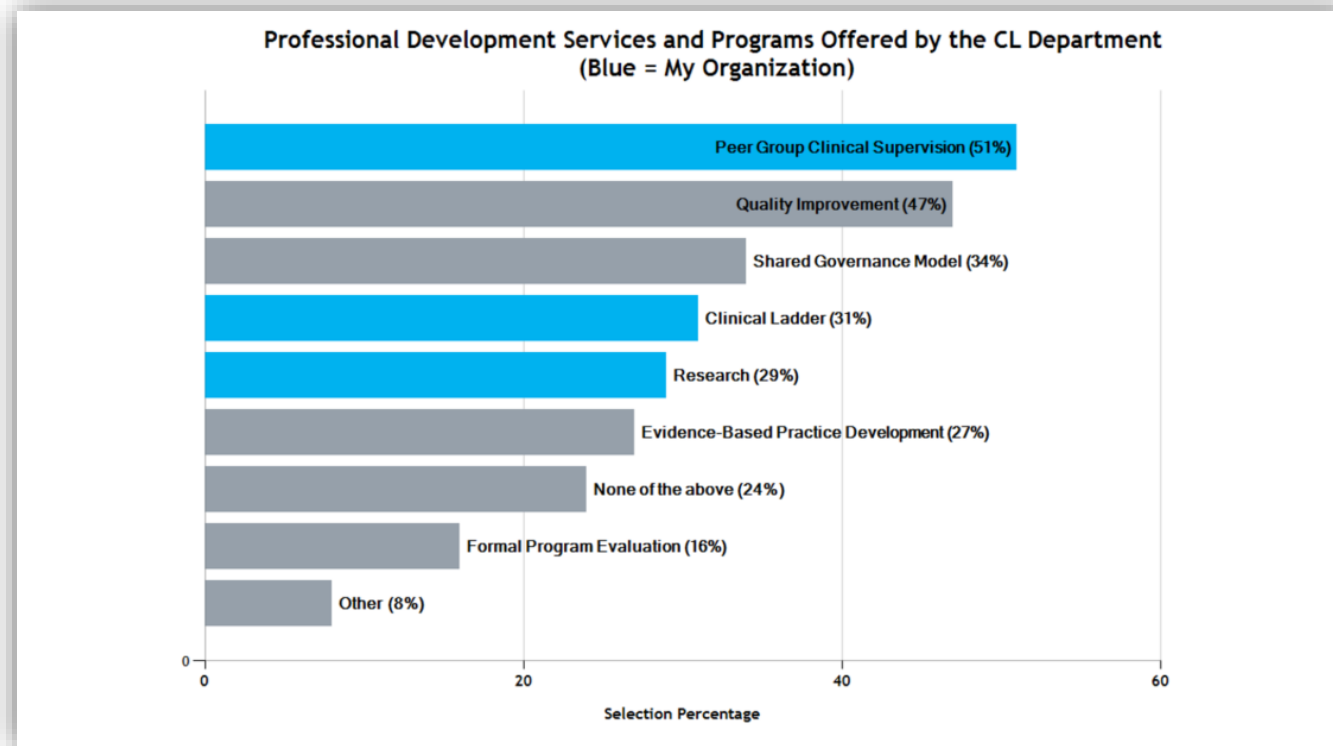
Includes emotional acuity information and turns all your data into Hours Per Patient Encounter (HPPE)

Subscription Only

Reports are only available with subscription



Benchmarking Annual Data: Without A Subscription



Visuals on how your organization compares to all organizations that use the data center.

Benchmarking Annual Data: **With A Subscription**



| Hospital | # of Beds | Art Therapy | Activity Coordinators | Music Therapist | Gaming Specialist | Event Coordinator | School Teachers | CCLS | Leaders |
|--|-----------|-------------|-----------------------|-----------------|-------------------|-------------------|-----------------|------|---------|
| Organization A (close by hospital) | 398 | 2 | 0 | 2 | 0 | 0 | 1 | 23 | 2 |
| Organization B (close by hospital) | 340 | 2 | 5 | 2 | 1 | 0 | 2 | 30 | 2 |
| Organization C (competing hospital) | 448 | 3.5 | 10 | 3.5 | 2 | 1 | 5 | 65 | 4 |
| Organization D (competing hospital) | 495 | 3 | 15 | 3 | 2 | 2 | 10 | 72 | 5 |
| Organization E (similar hospital in another state) | 476 | 2.5 | 8 | 2.5 | 1 | 0 | 3 | 61 | 3 |
| Organization F (similar hospital in another state) | 408 | 3.5 | 13 | 3.5 | 1 | 1 | 8 | 75 | 3 |
| Organization G (your hospital) | 450 | 2 | 10 | 2 | 0 | 0 | 4 | 70 | 3 |

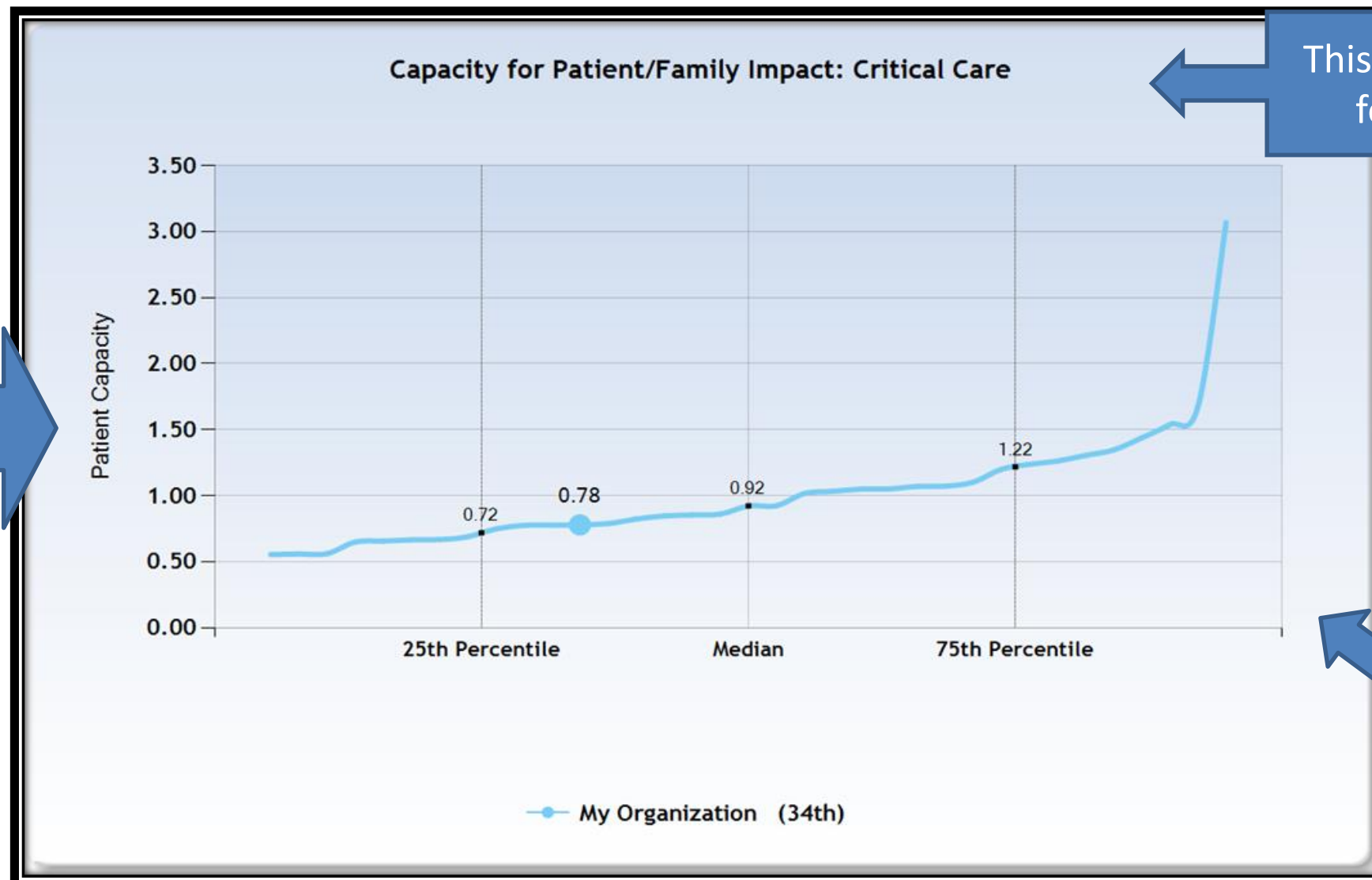
This data can provide details on specific organizations and provide comparisons around key data points. This is helpful when you want to compare yourself to another hospital that is relevant to your organization.

Benchmarking Quarterly Data: Without Subscription

Key Points:

- My CPFI = .78
- That means if this unit is staffed for an 8-hour day, around 6 patients/families to receive services
(.78 x 8-hour shift = 6.24 encounters per day)
- Out of all the organizations entering data into the data center, your organization is in the 34th percentile.

This axis has the Capacity for Patient Family Impact scale- the number of patient/family encounters per staffed hour (a rate).



This title shows the area of service where Capacity for Patient Family Impact is being measured.

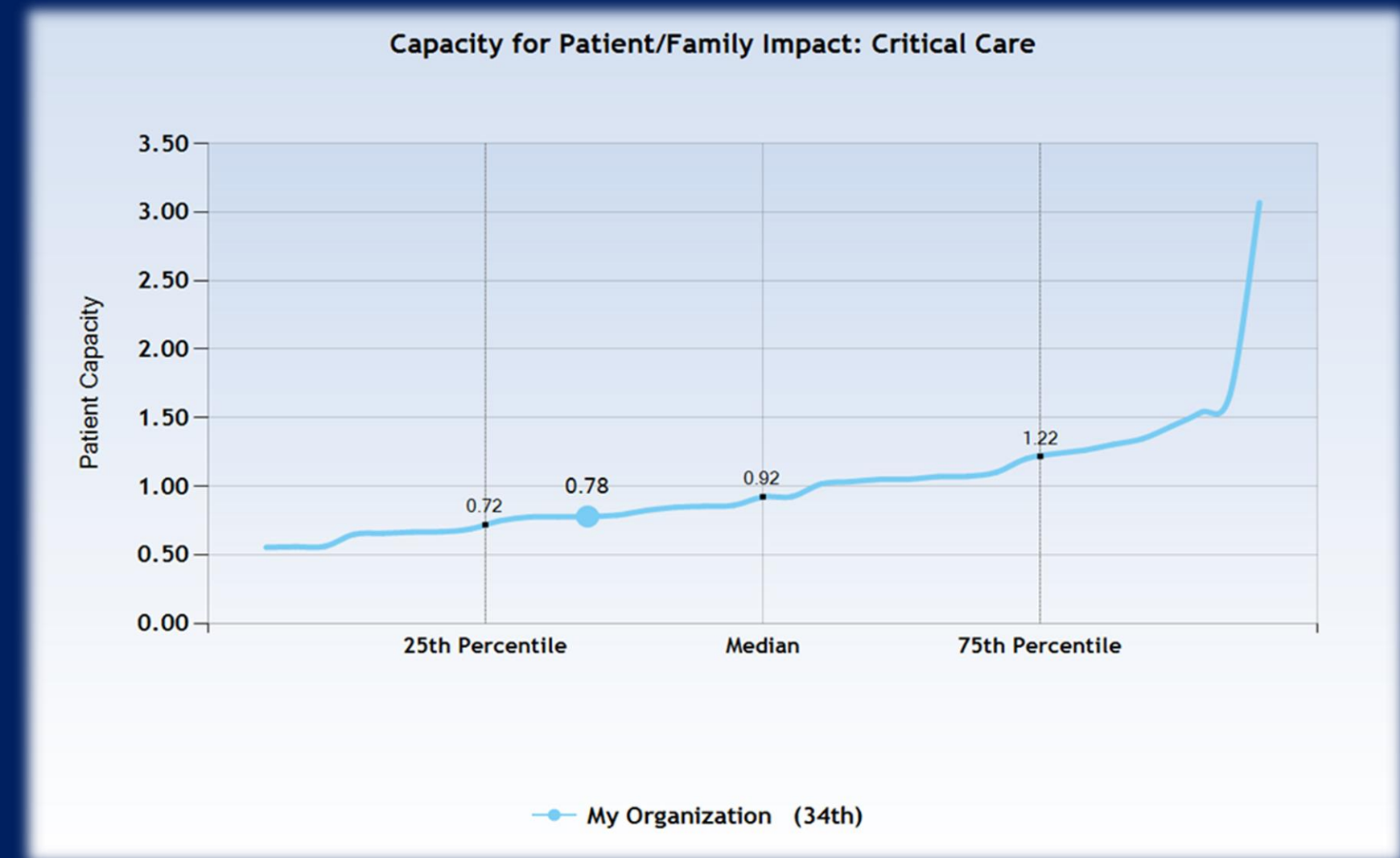
This line graph shows the Capacity for Patient Family Impact for all reporting programs. The 25th, 50th (median), and 75th percentiles are noted.

Benchmarking Quarterly Data: Without Subscription

The percentile is only half the story

This range can be impacted by:

- Size of the unit
- Number of beds
- Medical acuity
- Emotional acuity
- Areas of critical care
- Extra supports or responsibilities



Benchmarking Quarterly Data: **With A Subscription**



| Account Name | Critical Care Summary | | | Emergency Department | | | Inpatient Acute Care | | | Outpatient Ambulatory | | |
|----------------------------------|-----------------------|-----------|----------------|----------------------|-------------|--------------|----------------------|-----------|------------|-----------------------|-----------|------------|
| | Encounters | Scheduled | Capacity for P | Encounters | Scheduled S | Capacity for | Encounter | Scheduled | Capacity f | Encounter | Scheduled | Capacity f |
| [REDACTED] | 1,380 | 1,601 | 0.86 | 900 | 821 | 1.10 | 2,062 | 2,281 | 0.90 | 1,005 | 1,336 | 0.75 |
| [REDACTED] | 1,182 | 1,601 | 0.74 | 467 | 789 | 0.59 | 1,805 | 2,513 | 0.72 | 96 | 189 | 0.51 |
| Carle Foundation Hospital | | | | | | | | | | | | |
| [REDACTED] | 139 | 212 | 0.66 | 101 | 72 | 1.40 | 480 | 500 | 0.96 | 821 | 1,536 | 0.53 |
| [REDACTED] | 890 | 1,261 | 0.71 | 3,049 | 2,666 | 1.14 | 4,154 | 5,050 | 0.82 | 1,119 | 1,524 | 0.73 |
| [REDACTED] | 948 | 488 | 1.94 | 758 | 440 | 1.72 | 429 | 440 | 0.98 | | | |
| [REDACTED] | 494 | 447 | 1.11 | 797 | 837 | 0.95 | 1,733 | 1,929 | 0.90 | 270 | 349 | 0.77 |
| [REDACTED] | 644 | 1,416 | 0.45 | 754 | 876 | 0.86 | 1,158 | 1,500 | 0.77 | 506 | 681 | 0.74 |
| [REDACTED] | 1,195 | 1,495 | 0.80 | 2,498 | 2,821 | 0.89 | 5,014 | 3,234 | 1.55 | 3,236 | 2,892 | 1.12 |
| [REDACTED] | 326 | 341 | 0.96 | 167 | 196 | 0.85 | 949 | 891 | 1.07 | 0 | 0 | |
| [REDACTED] | 293 | 1,200 | 0.24 | 889 | 1,440 | 0.62 | 1,443 | 1,920 | 0.75 | 636 | 960 | 0.66 |
| [REDACTED] | 2,388 | 8,476 | 0.28 | 2,576 | 5,252 | 0.49 | 3,715 | 8,814 | 0.42 | 3,478 | 8,580 | 0.41 |
| [REDACTED] | 503 | 504 | 1.00 | 1,990 | 1,580 | 1.26 | 1,742 | 1,616 | 1.08 | 1,086 | 504 | 2.15 |
| [REDACTED] | 546 | 648 | 0.84 | 1,512 | 911 | 1.66 | 4,710 | 3,490 | 1.35 | 7,863 | 4,094 | 1.92 |
| [REDACTED] | 15 | 20 | 0.75 | 15 | 20 | 0.75 | 1,207 | 1,234 | 0.98 | 1 | 2 | 0.50 |

Details on how your organization compares to specific organizations that use the data center.

Staffing Calculator: With A Subscription



CLPDC now has a staffing calculator. The goal is to:

- Calculates recommended staffing based on
 - Specific areas
 - Patient volumes
 - CPF
 - Non productive replacement factor
 - Emotional Acuity

*This will be discussed in more detail in another webinar

The screenshot shows the 'CUSTOM CALCULATOR' interface. At the top, there are navigation tabs: Home, Enter Data, Compare Data, and Run Reports. The current page is 'Enter Data > Staffing Calculator'. Below this, there are several calculator options: Critical Care Calculator, Emergency Dept Calculator, Inpatient Calculator, Outpatient Calculator, Pre-Surgery Calculator, Radiology Calculator, Children of Adult Patients, and Custom Calculator. The 'CUSTOM CALCULATOR' section has a blue header with the text 'Submit your data below and click Save to see the calculations.' Below this, there are two columns for data entry: 'Jan-Mar 2022' and 'Jan-Mar 2021'. The 'Service Area Details' section includes the following fields:

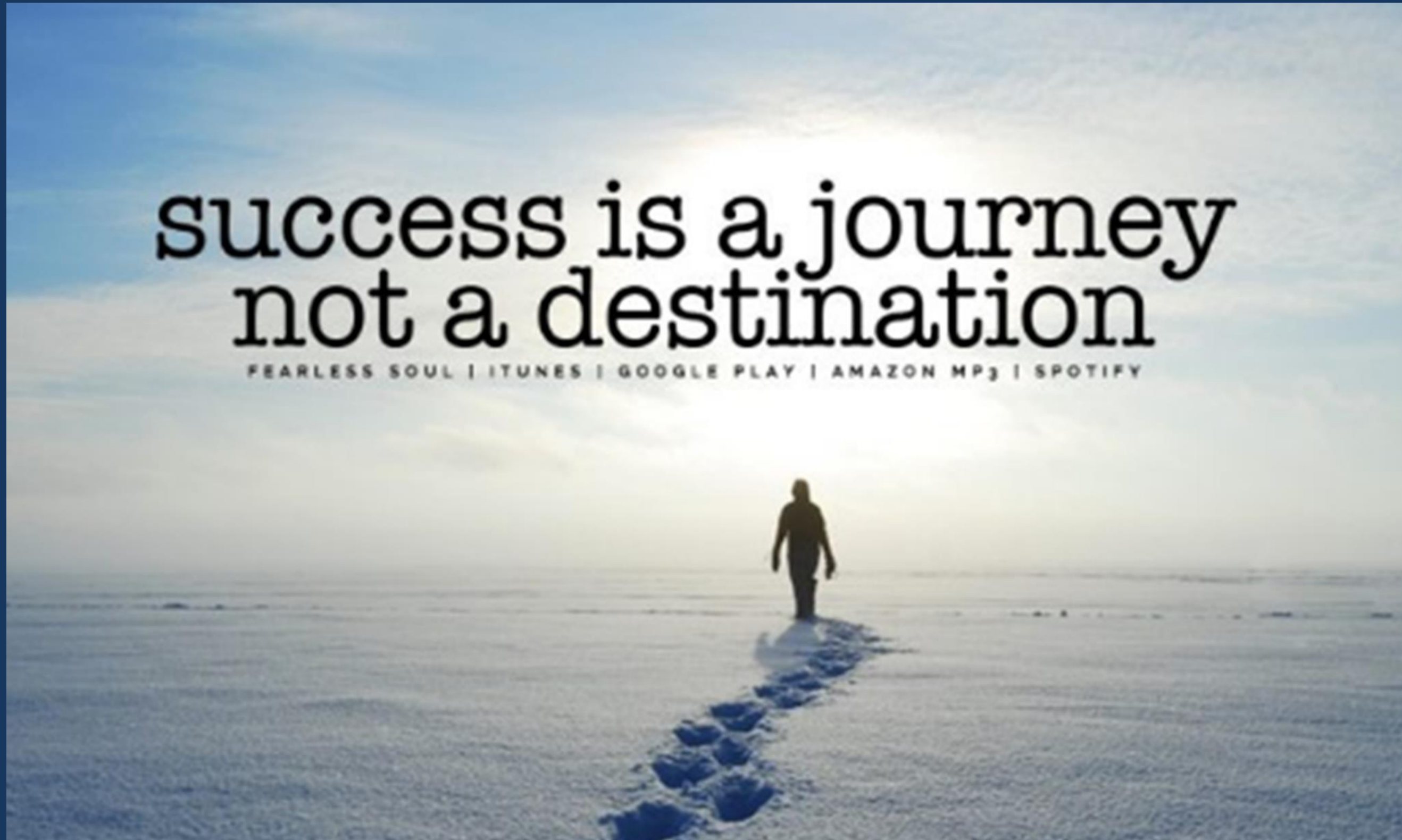
| Field | Jan-Mar 2022 | Jan-Mar 2021 |
|---|--------------|--------------|
| Average Number of Operating Days per Week | 7 | |
| Total Quarterly Encounters | 1,054 | |
| Total Quarterly Scheduled Staff Hours | 754 | |
| Average Daily Census | 127 | |
| Percentage Screened Positive | 30% | % |
| Non-productive/Replacement Factor | 0.11 | |

The 'Staffing Calculations' section shows the following results:

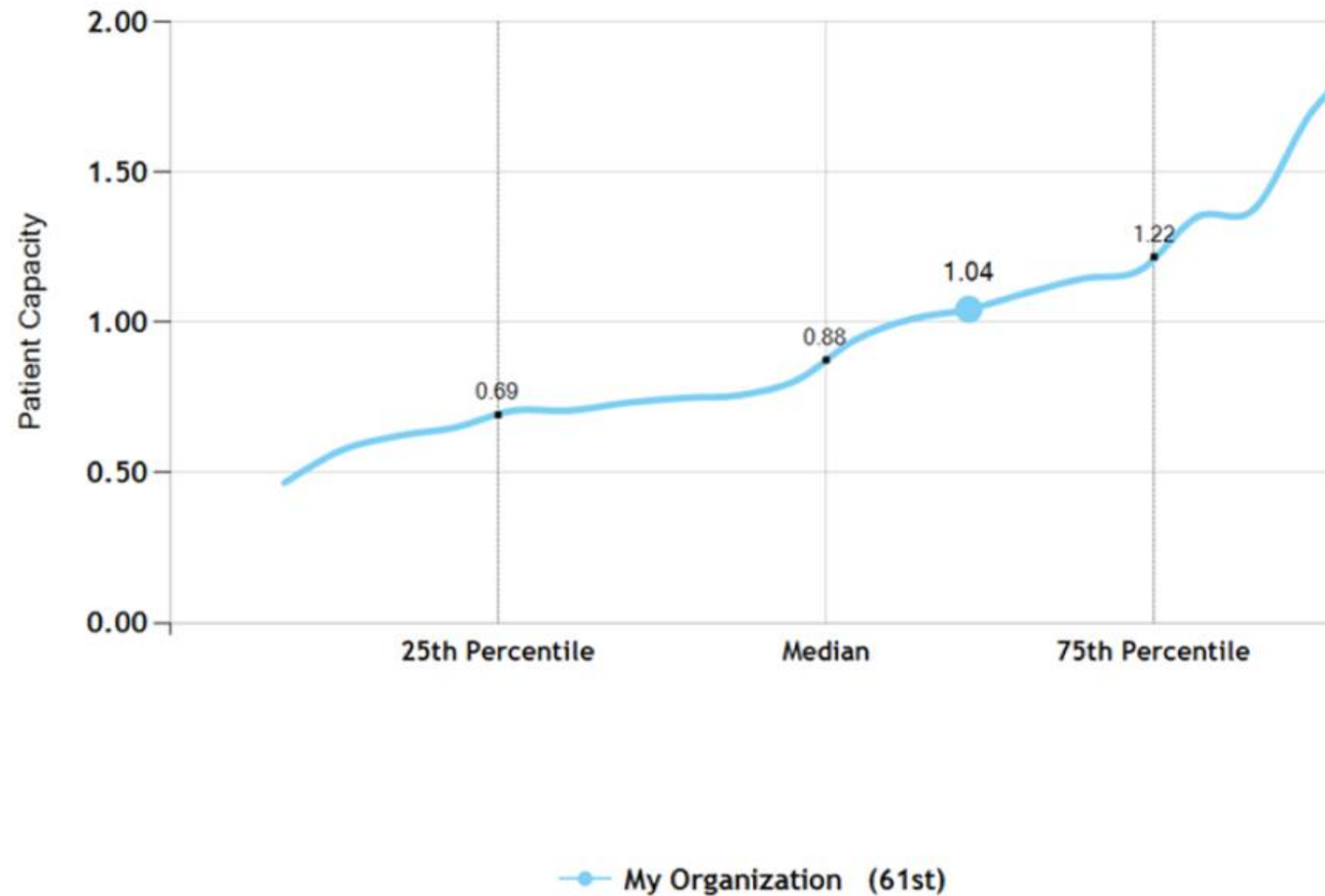
| Calculation | Value |
|---|-------|
| Total Operating Days per Year | 364 |
| Average Number of Patients Seen Per Day | 12 |
| Urgent Need | 27 |
| Capacity for Patient/Family Impact | 1.398 |
| Average HIPPE | 0.72 |
| FTEs Needed to Meet Percent Screen Positive | 5.95 |

At the bottom of the page, there are three buttons: Save, Cancel, and Save & Home.

Elevating the Conversation



Capacity for Patient/Family Impact: Critical Care



On Average How Many Patients Can You See

CPFI= 1.04
6 patients a day

We have the capacity to provide quality services to 6 patients



What does this data tell you?

After looking at the data, one organization decided they had their team pulled in too many directions.

So work was done to refocus energy on direct patient care. Following that work, CPFI increased

| Year | Average CPFI for CCLS team | % increase in CPFI |
|------|----------------------------|--------------------|
| 2017 | 0.70 | |
| 2018 | 0.73 | 4.32% |
| 2019 | 0.85 | 16.5% |

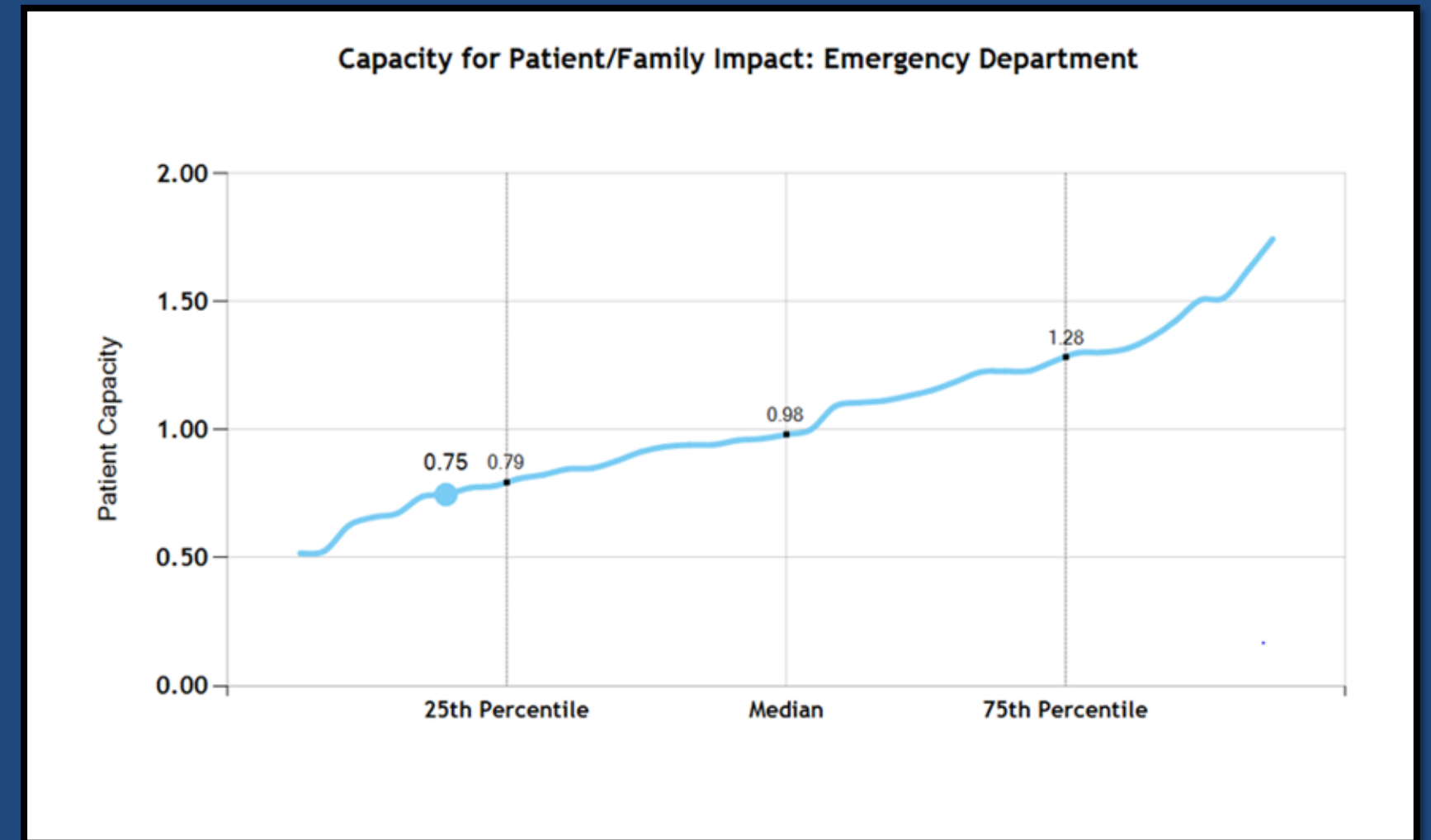
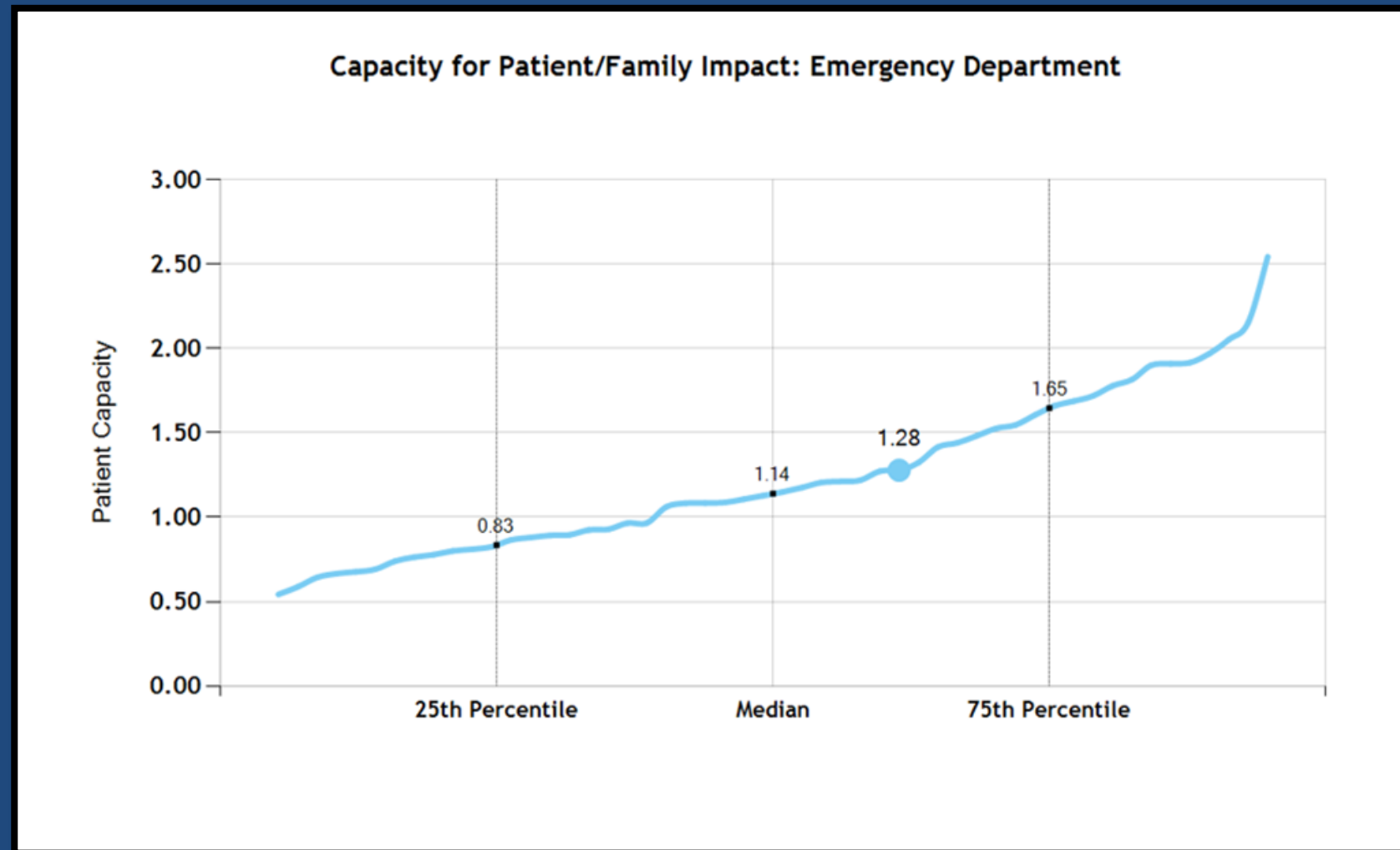




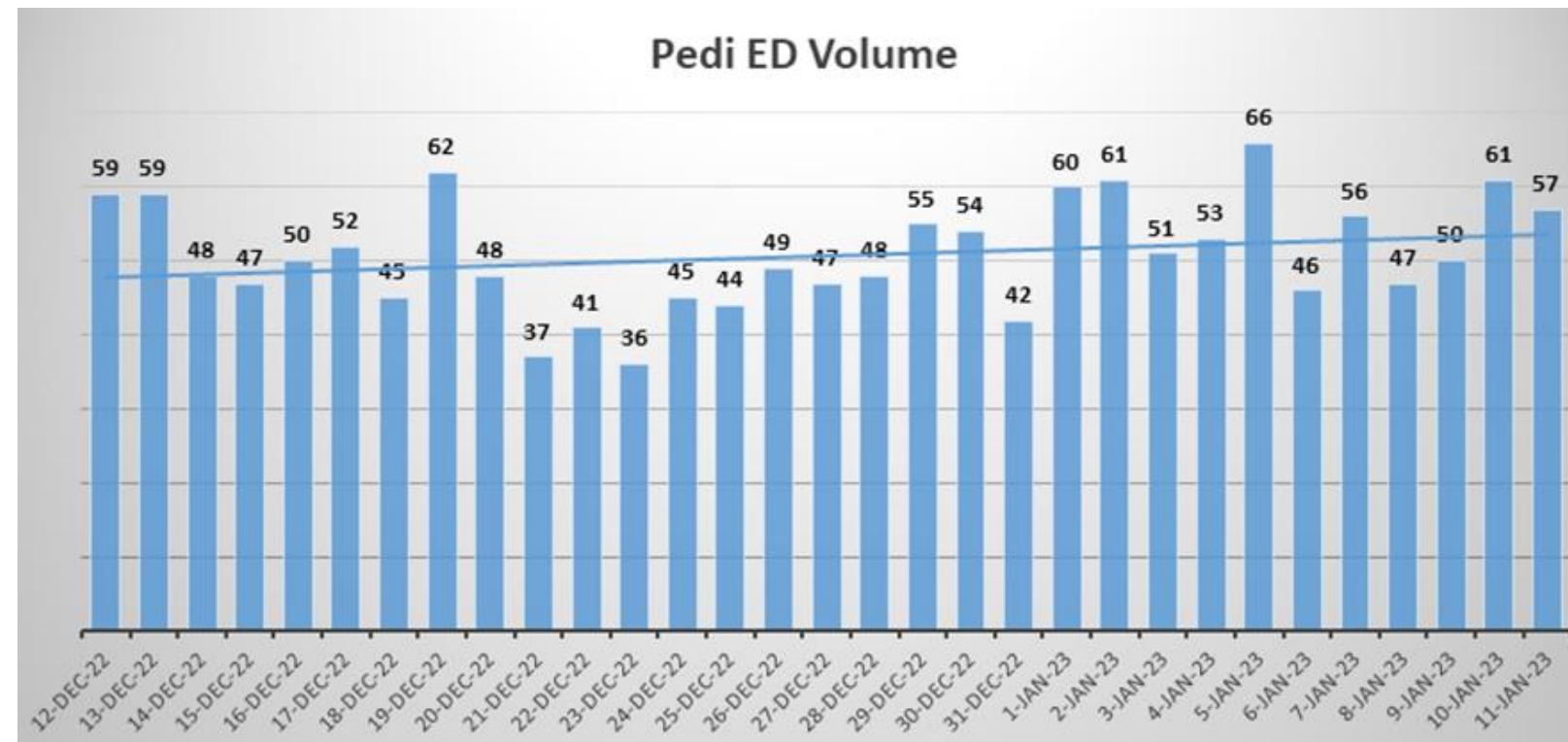
Identifying staff member burnout

April-June

July- Sept.

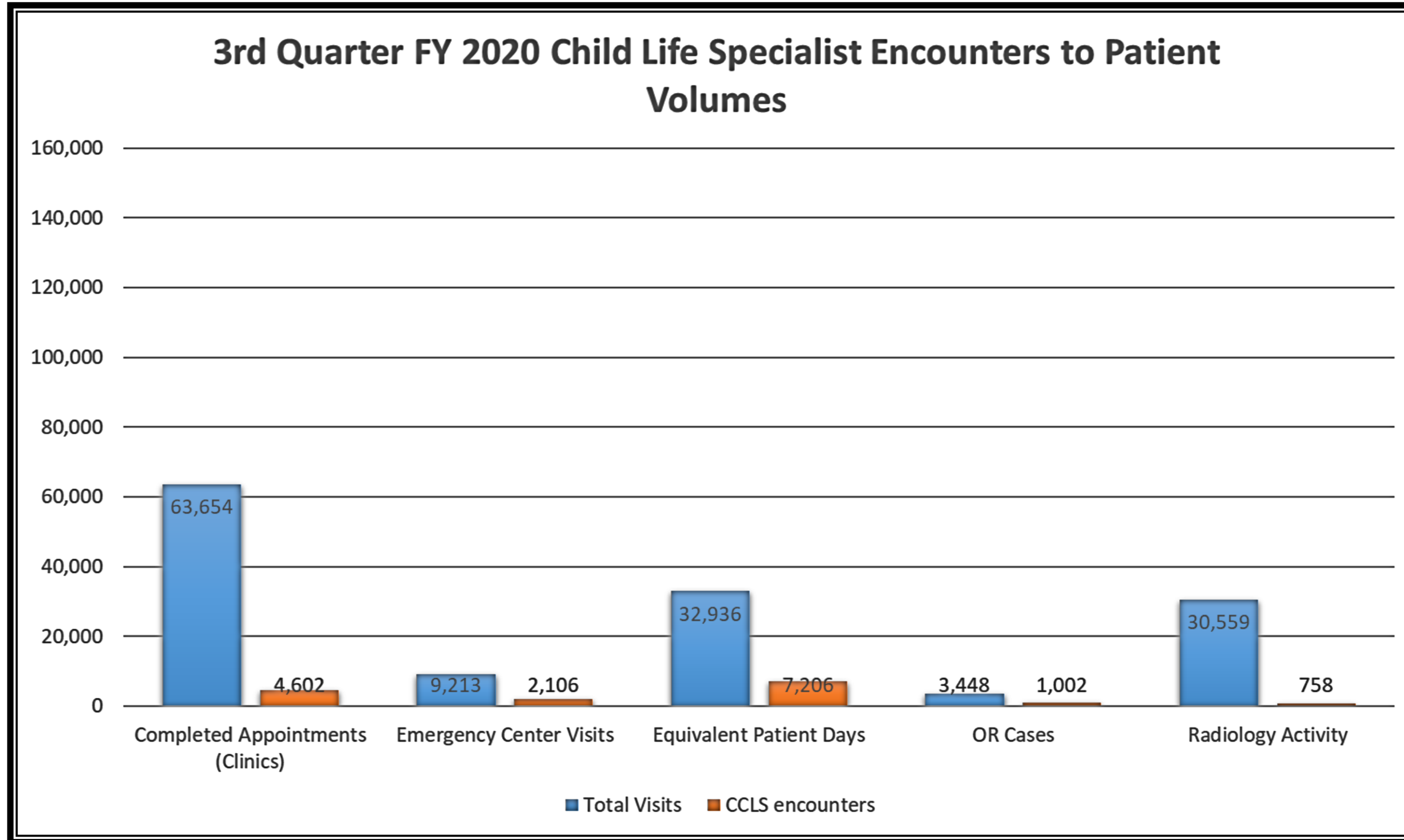


| MRN Encounters | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | Totals | |
|--|---------|----------|----------|----------|------|------|------|------|----------|----------|----------|------|----------|------|------|------|------|----------|----------|------|------|----------|------|----------|----------|------|----------|----------|------|------|------|--------|-----|
| Total Patients MRN's Seen Outpt | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Total Patients MRN's Seen Critical Care | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Total Patients MRN's Seen ED | 9.00 | 5.00 | 7.00 | 6.00 | | | | | 8.00 | 8.00 | 5.00 | | 10.00 | | | | | 7.00 | 8.00 | | | 3.00 | | 5.00 | 4.00 | | 3.00 | 8.00 | | | | 94 | |
| Total Patients MRN's Seen Acute Care | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Total Patients MRN's Seen Radiology | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Total Patients MRN's Seen Pre Surg | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Total MRN Encounters | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 94 |
| number of patients (MRN #) seen by CCLS in shift | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Direct Pt Care (in units) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | Totals | |
| Assessment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Bereavement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Psychosocial | 20.00 | 10.00 | 11.00 | 12.00 | | | | | 23.00 | 20.00 | 15.00 | | 22.00 | | | | | 18.00 | 27.00 | | | 6.00 | | 18.00 | 15.00 | | 15.00 | 19.00 | | | | 251 | |
| Developmental | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 |
| Total Direct Pt Care | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 251 |
| Possible Total | 40.00 | 40.00 | 39.00 | 40.00 | 0.00 | 0.00 | 0.00 | 0.00 | 40.00 | 39.00 | 39.00 | 0.00 | 34.00 | 0.00 | 0.00 | 0.00 | 0.00 | 40.00 | 40.00 | 0.00 | 0.00 | 40.00 | 0.00 | 40.00 | 40.00 | 0.00 | 40.00 | 40.00 | 0.00 | 0.00 | 0.00 | 591.00 | |
| Time In (# ## AM/PM) | 8:00 AM | 12:30 PM | 10:30 AM | 12:30 PM | | | | | 12:30 PM | 10:30 AM | 10:30 AM | | 2:00 PM | | | | | 10:30 AM | 12:30 PM | | | 12:30 PM | | 12:30 PM | 12:30 PM | | 12:30 PM | 12:30 PM | | | | | |
| Time out for lunch | 6:30 PM | 8:00 PM | 7:00 PM | 8:00 PM | | | | | 8:00 PM | 7:00 PM | 7:00 PM | | 5:00 PM | | | | | 7:00 PM | 8:00 PM | | | 8:00 PM | | 8:00 PM | 8:00 PM | | 8:00 PM | 8:00 PM | | | | | |
| Time in from lunch | 7:00 PM | 8:30 PM | 7:45 PM | 8:30 PM | | | | | 8:30 PM | 7:45 PM | 7:45 PM | | 5:30 PM | | | | | 7:30 PM | 8:30 PM | | | 8:30 PM | | 8:30 PM | 8:30 PM | | 8:30 PM | 8:30 PM | | | | | |
| Time out | 9:30 PM | 11:00 PM | 9:00 PM | 11:00 PM | | | | | 11:00 PM | 9:00 PM | 9:00 PM | | 11:00 PM | | | | | 9:00 PM | 10:00 PM | | | 11:00 PM | | 11:00 PM | 11:00 PM | | 11:00 PM | 11:00 PM | | | | | |
| Total Hours | 10.00 | 10.00 | 9.45 | 10.00 | 0.00 | 0.00 | 0.00 | 0.00 | 10.00 | 9.45 | 9.45 | 0.00 | 8.30 | 0.00 | 0.00 | 0.00 | 0.00 | 10.00 | 10.00 | 0.00 | 0.00 | 10.00 | 0.00 | 10.00 | 10.00 | 0.00 | 10.00 | 10.00 | 0.00 | 0.00 | 0.00 | | |
| | 10 | 10 | 9.75 | 10 | 0 | 0 | 0 | 0 | 10 | 9.75 | 9.75 | 0 | 8.5 | 0 | 0 | 0 | 0 | 10 | 10 | 0 | 0 | 10 | 0 | 10 | 10 | 0 | 10 | 10 | 0 | 0 | 0 | | |
| Due the 5th day of the following month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Direct Pt Productivity %: 42.47 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |





Identifying gaps in care



Subscription vs no subscription

Programs with a CLPDC Premium Access receive:

- > Access to all free and premium comparisons and reports
- > Access to all free and premium filters to customize comparisons and reports
- > Access to the premium disaggregated report
- > Access to the staffing calculator

Cost:

- > 1-2 child life FTEs: \$245/year
- > 3-9 child life FTEs: \$495/year
- > 10+ child life FTEs: \$945/year

Multi-Hospital System Discount

Healthcare systems with multiple hospitals/child life programs can obtain staffing calculator or premium access to the CLPDC on one invoice and at a discounted rate. Call 571-483-4500 or email datacenter@childlife.org to obtain this rate.

- > Largest hospital: 100% of rate
- > 2nd largest hospital: 80% of rate
- > Remaining hospitals: 60% of rate

Programs with a CLPDC Staffing Calculator Access receive:

- > Access to free comparisons and reports
- > Access to free filters to customize comparisons and reports
- > Access to the staffing calculator

Cost:

- > 1-2 child life FTEs: \$95/year
- > 3-9 child life FTEs: \$245/year
- > 10+ child life FTEs: \$445/year



Call for Committee Members



VOLUNTEER

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CALL FOR VOLUNTEERS

This next week, the ACLP will be sending out their annual email asking for those who wish to volunteer.

If you are someone.

- Who has experience with the data center or,
- Loves data or,
- Wants to grow in this skillset

Please consider applying for the benchmarking committee.

