

Debbie Hay

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03:50:58 [Start of recorded material]

Interviewer: Give us your name.

Debbie Hay: I'm Debbie Hay. I'm the President of Texas Institute for Surgery. I am an RN by trade, but I have been an administrator of this facility since it opened in November of 2004.

Interviewer: What makes TIS unique?

03:51:41 Debbie Hay: Texas Institute for Surgery was founded by a group of physicians and joint ventured with a community hospital, Presbyterian Hospital of Dallas, and that combination is what makes it unique, is the fact that physicians are involved in the processes and the decisions that are made here, but we have the support of a large hospital system. Uh, the efficiency that we have here is very important. We have one floor where we do surgical cases so the patients are able to enter on one floor, go to pre-op, go to surgery, go to PACU and be discharged all in the same area; so we get a great deal of efficiency by that.

03:52:21 And I think just the fact, the quality of the physicians we have and the, uh, that efficiency is what makes us unique. And then the biggest thing is the compassion for our patients. Our staff is well-seasoned, well-trained; they're highly qualified to do what they do. We do surgery all day every day here. That's all we do, and so we're

very good at it. And that makes us unique and it makes us very good at what we do. Then I have patient comments all the time from patient satisfaction surveys about the compassion of our staff.

03:52:51 So I feel the nurses here, and being a nurse myself I can say this, the nurses here feel that they can give good patient care and that they can do what they feel positive about -- the reason they went into nursing.

Interviewer: You have very low turnover.

03:53:22 Debbie Hay: Uh, I think that the -- I think the staff that work here are staff that enjoy patient care and having the time to spend with patients. And this kind of model provides that for them. So maybe where a nurse might have been burnt out and didn't want to continue doing what they were doing, this gives them the opportunity to come here and do something that is, uh, what they like doing. So it maybe prolongs nurses to -- allows them to be in the nursing profession a little bit longer.

03:53:53 and then I think the nurses just like the fact that the doctors respect them and that they listen to them. Uh, we just have a great group of physicians that work here and so that's what makes it so good for the staff because they do listen and respect the staff. And for a nurse that's very important, so because of that we have very little turnover. The nurses once they get here they like to stay here and

we like that because that increases our efficiency and makes it better for the patients and the physicians.

Interviewer: Tell me about what it means to be the first wireless HD facility.

03:54:35 Debbie Hay: Well, one of the visions of Texas Institute for Surgery is to be an innovative leader in the surgical field. So by doing that we want to provide our physicians and our staff with the latest technology, the latest advancements that we can so we can provide the best patient care. One of the ways that we've been talking about for about a year now and finally made the decision to do was move to HD.

03:54:54 Uh, the, the clarity of the pictures is just phenomenal, and certainly you can see that in your own home TV, the difference between regular TV and HD TV. So when you bring that in to the surgical field, it just allows the physician better clarity to work with, may decrease the amount of time that it takes in the OR because they see what they need to see better; but certainly does increase their ability to see what they're doing.

03:55:21 And so because we want to be an innovator, the fact -- when Striker came to us with the idea of wireless technology for the monitors, we thought man, what a great fit; because we like being out there on the cutting edge. But we also like things that are going to be really good for our business. We don't want to do cutting edge just for the

sake of doing cutting edge. We want to do something that has an effect on our business.

03:55:44 So the wireless technology, in my mind, in the future will allow a greater flexibility in the OR. You'll be able to put monitors in places where you might not have been able to put monitors before, uh, and it decreases cable breakage and usage, so it may decrease the amount of delay you have in surgeries because something goes wrong. Uh, it's just a great technology, and then as Striker pointed out to me, we're ahead of the consumer industry.

03:56:10 And so you think about this being used in your home where now you may have a TV that doesn't have to be cabled. It's just wireless and you can put it anywhere you want in your house, and I just think that's an exciting idea. So we're really excited to be part of this and really glad to be partnered with Striker to be able to do this.

Interviewer: How can that improve patient care?

03:58:01 Debbie Hay: The wireless. . . Well, certainly the HD I can speak to. The wireless -- I'm not really sure how that applies to improved patient care. So you want me to talk on the HD and how that will? Okay. I'll get a thought together here.

03:58:26 I believe the HD quality will help improve patient care by increasing the -- let me think. Let me start again. I'm trying to think

of how to work in clarity. Because really the only thing I can think of is just giving them a better picture.

Interviewer: Does it allow for better recovery? Why did Striker win the bid?

03:59:06 Debbie Hay: You think John would like me to tell that?

Interviewer: Maybe not.

03:59:12 Debbie Hay: Let me think about that. No. Absolutely. Uh, mm-hmm. Well, I'm not going to go into details. How's that? Uh, okay. TIS chose to partner with Striker for several reasons. Number one is the quality of the product that they brought, and when they brought this in here and the physicians used it, they realized the clarity of the, of the picture; and also the staff realized the, uh, ease of use -- how quickly they were able to adapt to this new product and be able to use it. So I think those were the two -- part of the two main reasons why we chose Striker.

03:59:50 Uh, I think their reputation is, is great. We -- obviously we checked them out with everybody that we knew that was using them and we got nothing but positive comments about them. And then I think from a service aspect, the service tech that came in here and showed the product was outstanding. He knew his product. He sold it well. He was able to explain to the doctors and to the staff what the nice features were and he just did a great job of presenting his product.

04:00:18 But when we saw the product in its entirety, it really did seem like it was the best one that was out there. Don't show John that please.

Interviewer: Are you familiar enough with what the product line is that you could tell us what it is?

04:00:43 No. No. Just why something is all I know. You're like over me. Get John Lazano in here. He'd be good at that. Or Tracy. Tracy's good at that.

Interviewer: Uh, with respect to the wireless HD platform but then all these innovations and technology, what does it mean for workflow.

04:01:22 Debbie Hay: The Striker system helps us improve the workflow by centralizing the controls. The system we had prior to this -- we had two flat panels, a computer screen, a CP, uh, a CPU and then the monitors that ran the whole system took up a whole nursing documentation station to get it to operate. Now we have one monitor. Uh, we have our medical records monitor still in the room and we do have one monitor. But we were able to get rid of one monitor out of the nursing document station -- documentation station -- and free up space in the OR for other things that we needed to get in there.

04:02:03 So, uh, I think from the staffing standpoint, the efficiency of having fewer panels to have to deal with was important. Uh, I think too that just the ease of use. It's just very easy to look at it and know what

you're supposed to do and follow the prompts. Uh, there really is not a lot of guesswork to what it takes to operate it.

Interviewer: What's the reaction?

04:02:47 Debbie Hay: Well, in making the decision to use the Striker system we asked our own staff, not just the physicians, but our staff, which, which system they preferred. Uh, the staff clearly preferred the Striker system, and I think that this first week of operation has proved them correct. They've been happy with the operations. It's been exciting just because we've all been able to go in and watch the new pictures and go, "Wow! What a great picture that is."

04:03:10 Uh, I think we're yet to realize all the things that we're going to get out of this system, but we'll see that as we move forward in implementation in all of our OR's, and then when we get our external communication, our boardroom wired and be able to then start teaching sessions by utilizing the system; I think then we'll really start seeing the full effect of this system on how we do our business.

Interviewer: Talk about the teaching.

04:03:45 Debbie Hay: We do a lot of teaching here. We have residents that come to work with our physicians. We have, uh, students who -- well, we have -- we do a lot of athletic or sports medicine here, so we ask trainers to come in and observe surgery so

they can see what these injuries are. And when we talk about it, what does that mean? And so I think that is, uh, really important to have that ability though to show them and let them see without letting them be in the room; because obviously sterility is an issue in the OR. Uh, we also have some external training opportunities where our physicians will be doing simulcasts for symposiums that are off site.

04:04:24 And so this gives us an opportunity now to really give them a great picture of what we're seeing in the OR. It gives them the ability to record so that they can take these to the symposiums where they teach. Uh, we have a lot of physicians here who do a lot of teaching; and so this really gives them something so that they can take that out, show it, show it well, and really be able to teach somebody to do the things that they do.

Interviewer: How important is the technology aspect of these facilities in terms of maintain your standards and the mission for TIS?

04:05:19 Debbie Hay: Okay, let me think how to start this off, because you had a lot of pieces in there and I'm trying to think of how to bring that in. How does the technology advance our mission? That's basically the question. Right? Okay. Okay.

04:05:46 One of the missions of TIS is to be innovative and provide high quality. And the only way you can do that is to stay on top of technology. Things change so quickly in the technology field that if

you aren't staying up with technology, you find yourself behind very quickly. So we feel this is very important for us to do this and also it's important for us because a lot of the residents coming out of training right now are used to these systems. They're training on these systems. So it's important for us to have these systems available for new physicians that come on board and to attract new physicians.

04:06:20 Uh, and it's also important though for our physicians, because of the quality of our physicians, it's important for us to provide them with the best that we can give them so that they can do the best job they can.

Interviewer: How would you define the OR's -- future surgery?

04:06:54 Debbie Hay: Let me answer that one first. Okay. So how are we -- how does this relate to the future? Is that what you want to know?

Interviewer: Yes. The second part of question was how would you rate this technology?

[Director's comments.]

04:08:24 Debbie Hay: By outfitting the OR's with this latest technology, I see this leading TIS into the future as well as other facilities possibly, uh, going into the future. The technology is, uh,

it's like when we went from open surgeries to laparoscopic surgeries. All of a sudden the patients were able to get back to work sooner, get back to life sooner. There was less, uh, it was less invasive to do these procedures, and so it was just better for everybody, and I think that the technology is coming along right now to make that even better.

04:08:54 The shorter the surgery, the less you do in the patient, the quicker their recovery. It's just less injury so less injury is quicker recovery and I think that's what these new, uh, HD systems are doing for us. I believe also that one of the things about these new systems with Striker is the ability to bring in new modules. So as things are coming along, in the future we'll be able to grow this system, add things to it. So it allows us to move with technology.

04:09:25 And I think that's important for us, uh, because as I said, we want to stay ahead in technology. So that piece of it was very important. Now tell me your second question again.

Interviewer: You kind of answered it. How do you rate this?

04:09:51 Debbie Hay: It's hard to say how I'd rate this as a technology, as an advancement in surgery, because surgery has advanced so much in the past ten, fifteen, twenty years that it's hardly the same thing as it was when I came out of nursing school and did surgery 30 years ago. Uh, but it's certainly and

advancement, uh, as we move forward. Uh, I just -- it's hard for me to rate it.

Interviewer: It's probably something to look back on.

04:10:19 Debbie Hay: Yeah. And say that was great. But right now it's new technology.

Interviewer: How important is it for surgery and the field to have these kind of vendor relationships in terms of developing new procedures, techniques that help?

04:10:50 Debbie Hay: I think it's very important to have these vendor relationships with -- and especially with Striker and companies like this -- because they're out there developing the technology. We aren't necessarily seeing that development of the technology. So unless you are closely tied with each other, I think that you don't know. You don't even know that this is out there. I don't think that we were aware of the wireless technology until we started down this road and they came in and said, "Hey, this is the latest and greatest. Can we try it?" And we said, "Heck, yeah. Let's go for it."

04:11:20 So I think that it's, uh, it's very important to have a strong relationship with all the vendors, not just Striker, but all of our vendors; because they bring us the innovation and they're the ones who keep us on the cutting edge. And our physicians too are very involved with developing new products, new procedures. So that is

important to our physicians to be able to be tied with these vendors and be able to help develop things; because they're the users so they know what works well and what doesn't work well. They have the ideas. They have the innovations. It's great to have somebody who can take those ideas and help them develop them.

04:11:56 So certainly vendor relations are very important.

Interviewer: Is there a collaborative relationship with Striker and the surgeons?

04:12:21 Debbie Hay: Yeah. We haven't done that with Striker. So I don't know what you want. . . .

Interviewer: Developing this had the patient in mind. . . .what does it mean to the patient?

04:13:28 Debbie Hay: The decision to move forward with a hos -- the deci -- Uh, originally the concept for TIS was to be a surgery center. At a certain point we had to stop and think about -- what about the patients that take longer than 24 hours? And that's how the hospital module was formed. We decided that it was important to be able to have that inpatient capability, to be able to allow the patients a little longer stay if they needed it. So that expanded our capabilities of being able to do more cases by having the inpatient unit.

04:14:05 But I think it all goes back to, uh, even though it's a hospital, it's still run kind of with a surgery center mentality in that it's efficient, it's, uh, quick turnover. And why is that important to the patient? Well, it's important to the patient because you want to be on time to get your surgery done. You don't want to show up and three or four hours later still be told, "We don't know when you're going to make it to the OR." Uh, and I think the doctors need that too, because they need to know that they can get in here and get out of here at a certain time so they can get back to the office or get to the hospital to make rounds or whatever it is that they need to do.

04:14:40 So, those are the things that I think kind of make us unique as a hospital and, uh, and still allow us to provide good quality patient care, but do it efficiently.

Interviewer: Do you have an expectation with your ROI?

04:15:03 Debbie Hay: You don't want to record my answer, because honestly there's no ROI on this. It's an expense. And, and it's not that -- and, and again you know I'm just going to talk to you. It's not something like a product that you're going to use. It's not something like a procedure that we're going to do that we weren't doing currently. Uh, so this kind of thing is kind of a, it's kind of a system you have to have to do business.

Interviewer: It's a prestige.

04:15:30 Debbie Hay: Yeah. It's not -- it's not really something that you're going to be -- well, I mean you have to have a system or you can't do the surgeries -- clearly. But we were already doing the surgeries. It's just the quality of what we were providing the physicians. Now, now I will speak to -- okay I can, I can speak a little bit to that, but I can't really give you numbers on ROI. But I, but I will, I will put a little blurb in here for you.

04:15:50 Yesterday I had a physician come into my office and we were talking about what procedures he could do here. And he was talking to me about an endoscopic procedure he does at another facility. He was telling me about how difficult it was to get it done, how it was an older facility. He didn't like the patient's experience, the patients didn't like the experience. So I started talking to him about the new HD system we had and we went down and we looked at it.

04:16:17 And by the time he left here he wants to bring all of his patients over here to do surgery. So that kind of return on investment is a little hard to quantify. But just the fact that he wants to do that is what, is what we want to hear. How's that? And that truly happened. I didn't make that up.

Interviewer: That's probably one of your big motivators.

04:16:43 Debbie Hay: It attracts physicians. But I can't quantify that for you.

Interviewer: And attracts patients.

04:16:52 Debbie Hay: Yeah. But our patients come here because their physicians come here.

Interviewer: Exactly.

04:16:57 Debbie Hay: Exactly.

Interviewer: Is there anything I haven't covered?

04:17:15 Debbie Hay: No. I think I probably said it enough times. We're great. What can I say? You want me to say. . . .

Interviewer: You're talking about the wireless HD platform and I think it's probably better to keep it neutral.

04:18:17 Debbie Hay: So we want to say something like the HD wireless. . . .

Interviewer: Platform is where innovation meets quality.

04:18:30 Debbie Hay: Okay. The HD wireless platform. . . .

[Director's comments.]

04:18:40 Debbie Hay: The wireless HD platform really is where innovation meets quality, the quality of the product, the quality of the service, but most importantly the quality of care. You want me to do something different or is that good?

04:19:23 Debbie Hay: The wireless HD -- HD wireless. . . .

04:19:29 Debbie Hay: The HD wireless platform -- got it backwards.

04:19:40 Debbie Hay: The wireless HD platform. . . .

[Director's comments.]

04:20:10 Debbie Hay: The wireless HD platform is where innovation meets quality, the quality of product, the quality of service, but most importantly the quality of care.

[End of recorded material]