



Hospitalist Clinical Process Improvements Save \$8 Million and Improve Outcomes

An examination of performance results at the Regional Medical Center of Orangeburg and Calhoun Counties (RMC) revealed that numbers for patient mortality, length of stay, and cost per hospitalization were higher than desired while quality measures were lower than national benchmarks.

HIGHLIGHTS

Location:

Orangeburg, SC

Scope and Services:

The Regional Medical Center (RMC) is an acute-care, regional medical center owned by Orangeburg and Calhoun counties. Serving a six-county area, the facility has a multitude of specialties and programs that offer state-of-the-art healthcare, including a 24-hour emergency department and a proactive, community-wide wellness program.

Solutions:

CareDiscovery®
CareDiscovery® Quality Measures

With aspirations of becoming one of the Truven Health 100 Top Hospitals®, leadership at RMC were compelled to examine the cause of the facility's low scores and focus on improving them. The suboptimal numbers were attributed to multiple factors, including wide variation of physician practice, limited adherence to clinical standards of care, critical-care complications, inconsistent documentation, limited application of data, lack of timely communication between physicians and ancillary staff, and high utilization of locum tenens physicians.

Course of Action

The RMC quality department first focused on the hospitalist program. They paired the challenges specific to hospitalists with initiatives designed to raise the facility's scores against benchmarks for mortality, core-measure compliance, length of stay, and cost per hospitalization.

RMC turned to clinical performance improvement solutions from Truven Health AnalyticsSM to identify priorities that would make the most impact. After identifying critical care as an opportunity for improvement, the team examined all of their severity-adjusted diagnostic-related groups, or DRGs, and employed initiatives to address critical-care complications, develop protocols, standardize care, and implement a compensation program to incentivize core-measure compliance.

For example, the hospitalists started a large multidisciplinary effort to look at sepsis and see how they could improve the facility's sepsis benchmarks. They also identified specific complications in the intensive care unit, such as ventilator-associated pneumonia and blood catheter-related infections. The team created multidisciplinary committees and protocol development — like specific order sets to standardize treatment. Those actions enhanced communication and fostered both ownership of and compliance with the program, resulting in significant improvement.

“It is very significant for our community to know that if they are cared for by RMC’s hospitalists, they have a 38 percent better chance of surviving their illness compared to the national average.”

Brian Kendall, MD

Medical Director, Hospitalist Service
Regional Medical Center

Using the severity-adjusted benchmarking data from the Truven Health CareDiscovery® clinical performance solution, RMC was able to evaluate the hospitalists’ performance and results with objective metrics. Making physicians aware of the data, promoting the use of evidence-based protocols, and tying their performance to monetary incentives advanced perfect care hospital-wide.

Results

The initiatives paid off. Based on a review of the top 20 DRGs, the hospitalist program demonstrated more than \$5 million in savings to the hospital. Successful use of the information within CareDiscovery enabled RMC to develop a template for value-based purchasing from their hospitalists.

“Detailed data and hospitalist awareness of that data is critical to meeting our goals,” said Brian Kendall, MD, medical director, hospitalist service, RMC. As a result, RMC achieved substantial improvements in all the areas they set out to change:

- Reduced mortality rate by 39 percent (38 percent better than national average), resulting in 74 lives saved
- Improved perfect care for heart failure and pneumonia core measures by 22 percent
- Reduced length of stay by 20 percent, equating to a \$1.3 million cost reduction
- Improved case-mix index by .2, translating into \$3 million

Combining the \$5 million in staff resource savings and \$3 million attained by improving the case-mix index, this effort saved the hospital an impressive \$8 million overall.

Participation in the project helped to more strongly align the hospitalists with the quality department and its initiatives and provided them with an understanding of how the data can affect their care. After having such a positive experience, RMC has become a more data-driven organization and now relies heavily on the numbers for fundamental strategic planning.

In 2010, RMC was acknowledged for its accomplishments in the pursuit of excellence in Clinical Performance with a Truven Health Healthcare Advantage Award in Clinical and Health Outcomes. The Healthcare Advantage Award was established in 2005 to honor and recognize customers who have used solutions and tools from Truven Health Analytics to achieve outstanding success at their organizations.

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