

FLOWERS HOSPITAL EMERGENCY DEPARTMENT



235-bed hospital achieves stability and thrives, thanks to a cohesive team and streamlined triage process.

EXECUTIVE SUMMARY

When Flowers Hospital turned to ECI Healthcare Partners in September 2012, its emergency department was unstable and struggling to treat and triage patients efficiently. The ED's current medical director was set to leave the program, and the department faced gaping schedule holes. After partnering with ECI Healthcare Partners, the program steadily stabilized. Among the changes the physician staffing and management group made: It installed strong clinical leadership, recruited quality providers who are committed to the community, and implemented multiple process improvements, such as inserting a provider in triage to combat struggling left without being treated (LWOT) rates and door-to-provider times. Over the past year, these improvements resulted in:

20% increase in patient volume

79% decrease in door-to-provider times

50% decrease in LWOT rates

BACKGROUND

Before partnering with ECI Healthcare Partners, Flowers Hospital's emergency department was in a state of flux, relying heavily on locum tenens physicians to cover its schedule. This challenge came to a head when the facility's previous medical director left the program, and the already sparse roster of physicians dwindled to only two doctors. Like many hospitals, the facility faced a recruiting challenge to attract sufficient numbers of qualified providers and physician leaders.

The Hospital's ED door-to-provider times were over an hour, which resulted in LWOT rates in excess of 6 percent. To turn the tide, Flowers Hospital sought a partner that would facilitate strong leadership; a core group of reliable, committed doctors; and have process improvement expertise to increase efficiency in care delivery. The immediate need for change required ECI Healthcare Partners to start up services to Flowers Hospital within three weeks.

A TURNING TIDE

Immediately after partnering with Flowers Hospital, ECI Healthcare Partners' team of emergency medicine recruiting experts, along with Regional Director Mike Frye, MD, FACEP, got to work. Their mission: to work closely with the department's new medical director to build up a core group of physicians.

“We came into a very difficult staffing and management situation not uncommon in today's emergency medicine staffing environment,” says Dr. Frye. “After we built and helped stabilize a solid core group of docs, things improved significantly.”

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Mike Frye, MD, FACEP
REGIONAL DIRECTOR

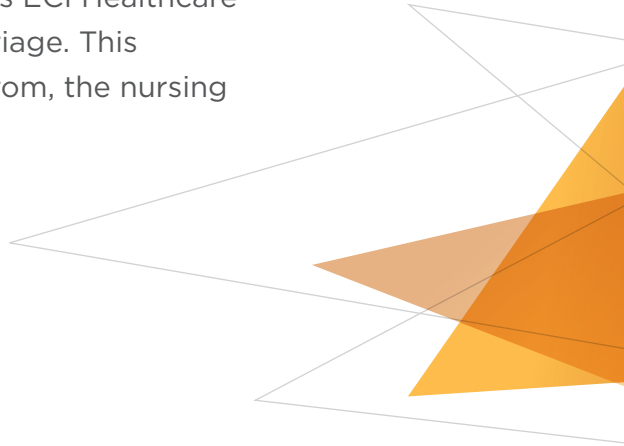


Putting a reliable, quality team in place was just the beginning. The process adjustments ECI Healthcare Partners helped Flowers Hospital's ED make to patient flow not only improved care quality and efficiency but also had a substantial impact on department performance and patient and provider satisfaction.

In concert with stabilizing the staff, Dr. Frye turned to another priority on his task list: addressing too-long door-to-provider times. One of the major process changes ECI Healthcare Partners implemented was inserting an advanced practice provider (APP) in triage. This required buy-in from the entire clinical team, plus close work with, and input from, the nursing and administrative staff.

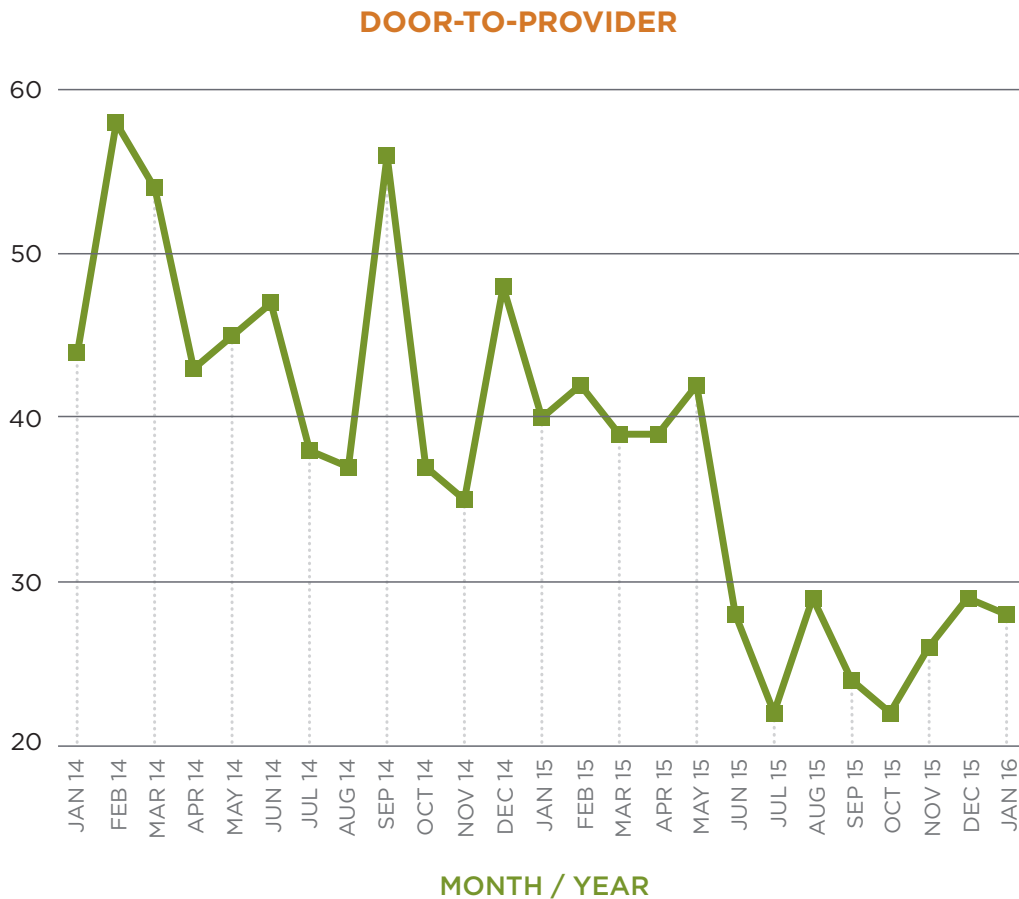
“Process change takes time ... you need nursing and administrative input to implement a whole new process where you're utilizing rooms in different ways and treating patient flow completely differently,” says Dr. Frye.

Implementing an APP in triage shortened the time between a patient's arrival and when he or she saw a provider. It also enabled providers to begin work-ups upon patient arrival and to discharge lower acuity patients from triage faster. The installation of an APP in triage also allowed physicians more time and resources to focus on providing timely care to higher acuity patients.



RESULTS

Within 13 months of solidifying a cohesive core group of providers and implementing a provider in triage, Flowers Hospital began to experience a significant decrease in door-to-provider times—from a high of over an hour, to less than 25 minutes, a 79 percent decrease.



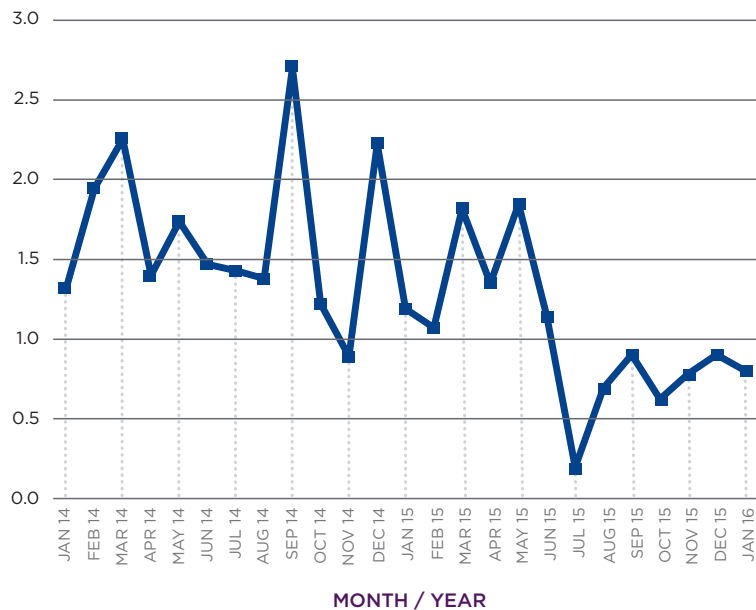
79% decrease
IN DOOR-TO-PROVIDER TIMES



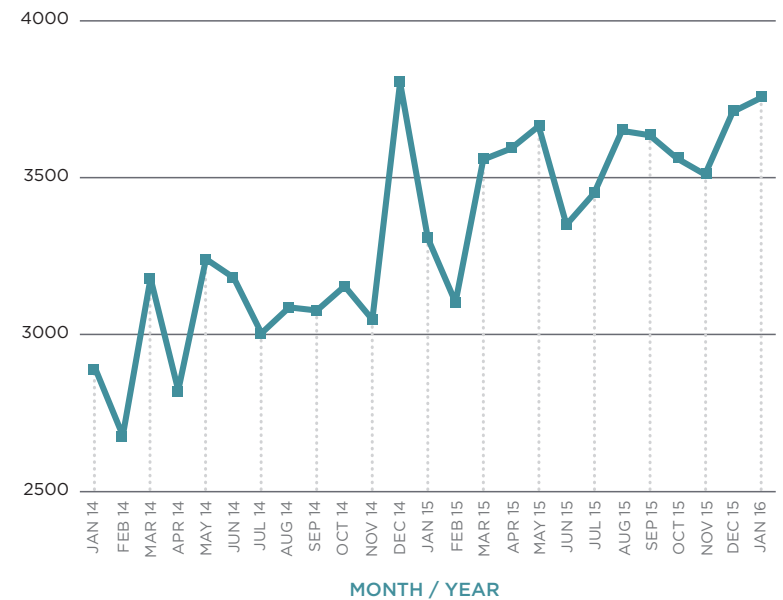
Improved door-to-provider times directly affected other department metrics too. **Concurrent with a 50 percent decrease in LWOT rates, the ED saw a 20 percent increase in patient volume** — a direct result of improved word of mouth in the community. At the same time, stronger clinical leadership and a more streamlined practice environment improved physician satisfaction and reduced turnover.

“Since we’ve reduced door-to-doc times, volume has been going through the roof,” says Dr. Frye. “The ED is flowing much better. We’ve overcome an extremely difficult situation and arrived at a great spot.”

LWOT RATES



PATIENT VOLUME





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