



Steven Cabrales, M.D.
Vice President of Medical Affairs

Hospital Information

Location: Monterey, CA
Medical Staff: 399
Employees: 2,048
Beds: 248
2014 ED Visits: 50,687
2014 Births: 1,121
2104 Admissions: 11,041

" . . . Call Scheduler rose to the top because of its ease of use and affordability"

Patients waited in the emergency department at Community Hospital of the Monterey Peninsula (CHOMP) while a paper system left staff scrambling to find the right on-call calendar and calling physician after physician, thinking they were the one on call.

"They would spend hours trying to figure out who was on call and sometimes they would go a whole shift without knowing who was on call," said Fatima Silva, Emergency Associates Program Manager at CHOMP.

Every Monday morning Silva listened to messages about the challenges. "It became a patient care issue," said Dr. Steven Cabrales, who had recently joined the hospital as vice president of medical affairs.

It couldn't continue. "It was frustrating for everybody," he said.

As CHOMP's tagline says, when it comes to your health, everything matters. Its on-call scheduling system needed to reflect that same commitment.

A Better Way

Silva researched and reviewed six different companies that could provide an electronic system before selecting Adjuvant's Call Scheduler Enterprise.

"As I was working with EA Health, Call Scheduler rose to the top because of its ease of use and affordability," said Cabrales who had worked with other electronic on-call systems in the past.

He quickly became an advocate for Call Scheduler and sought to implement the new system quickly.

The emergency department for the 248-bed hospital in Monterey, California, depends on a variety of independent physicians and specialty clinics in the community to provide patient care for about 51,000 visits annually. For years, the hospital drafted the on-call schedule in a Microsoft Word document and constantly made updates manually before faxing the calendar back to the clinic.

"By the time we resent a new schedule, we'd have more change requests," said Silva, who noted that holidays and summers were even more time consuming and difficult to manage. "It was a manually intensive process with multiple verification steps between the clinics and hospital".

"No more calls in the middle of the night to the wrong physician"

As soon as Call Scheduler was put in place, the hospital uncovered a series of gaps and inefficiencies in its current paper system.

"There were 5-7 unnecessary steps to create the schedule," Silva said of the old system.

More than Relief

Within days of implementing Call Scheduler, CHOMP saw a difference in the emergency department. No more patients waiting for the "right physician" to be called. No more calls in the middle of the night to the "wrong" physician. No more Monday morning messages for Silva.

"The time spent hunting down changes and implementing changes has been eliminated," Cabrales said.

Within months of implementation, it had been transformational.

"It's something that I now don't have to think about," he said.

Call Scheduler did not only rid the hospital of the on-call challenges, but it also brought new opportunities, including increased collaboration among providers.

"Now everyone can see an up-to-the-minute list of who they can call on," Cabrales said. So, they're [providers]reaching out more.

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Gaining Buy In

While Cabrales knew the advantages a new system would bring to CHOMP, he recognized the need to communicate the benefits to partner physicians and clinic managers.

He first shared the idea and gathered feedback during the monthly meetings he started as a new hospital administrator in the community. He also introduced the idea of Call Scheduler to the Emergency Call Compensation Committee. The committee had discussed how an inaccurate schedule led to physicians not being paid correctly for their on-call time.

When CHOMP was ready to implement Call Scheduler, Dr. Cabrales hosted two lunchtime information sessions, focused on bringing together the community's physicians and practice managers.

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"They had to see how this impacts them directly," Silva said.

The opportunity to connect and socialize over lunch created a draw and attendance was high. About 90 percent of the physicians who use the hospital's on-call system attended one of the sessions, Silva said.

The 'Wow' Effect

CHOMP followed the sessions with additional training opportunities for practice managers.

"As I was showing the system to one of the office staff, she kept saying over and over again 'wow,'" Silva said. "And it didn't stop. She was so amazed."

That amazement and desire to use it made for an easy transition to Call Scheduler.

"It's been incredibly easy all around," Cabrales said.

Throughout the implementation process, CHOMP's team members never felt like they were doing it alone. Thanks to the support of the Call Scheduler team, CHOMP's administrators had guidance in creating a plan to get the results they desired.

"I cannot say enough about the Call Scheduler team," Silva said. "They were very attentive to our needs and made us a priority. We felt like we were their only customer."