



*David Ficklen, M.D.  
Chief Medical Officer  
Huntsville Memorial Hospital*

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## Hospital Stats

**Headquarters:** Huntsville, TX

**Locations:** 1

**Physicians:** 200

**Departments:**

24-hour Trauma IV Emergency Center

Inpatient/Outpatient Surgery

Diagnostic Imaging

Mammography

Women's Health Center

Birthing Suites

Inpatient/Outpatient Rehabilitation

Cardiac Rehabilitation

HMH Outpatient Counseling Services

HMH Medical Clinic

Home Care

Wound Care Center

Beginnings Prenatal Program

Wellness & Healthy Living Programs

Joe G. Davis School of Vocational Nursing

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# HUNTSVILLE MEMORIAL HOSPITAL

## OVERVIEW

Huntsville Memorial Hospital (HMH) is a 123-bed hospital. An affiliate of the Memorial Hermann healthcare network, the hospital meets a growing need in the Houston-area, discharging more than 5,200 patients annually. In the last two years alone, Huntsville Memorial Hospital has expanded its quality care services to include a Wound Care Center, Pulmonary Services, C.A.R.E. Program and a Clinical Decision Nursing unit.

## CHALLENGE

The hospital's call scheduling system had not kept up with its rapid growth and often left the emergency medicine department frantically piecing together processes and requests from a variety of departments. That led to the ER often not having critical specialties on call – detrimental to the hospital's trauma program status as a Level IV facility.

- **Outdated System:** A white-dry erase board in the ER provided little to no means to make, track or share scheduling changes. The dated system also failed to meet federal regulations that require hospitals to keep a five-year log of call schedules.
- **Inefficient Process:** A lack of structure meant physicians shared their schedule changes with any nurse answering the phone and no one was responsible for recognizing or communicating the effects.
- **Time Consuming:** Without a single person or location to find an updated and accurate schedule, staff mistakenly called the wrong physicians and spent valuable time tracking down the correct providers.
- **Unhappy Staff:** A growing animosity between physicians and the ER staff developed due to the ever-changing schedules and the passing off of accountability.
- **Compromised Patient Care.** The inefficient system began to impact the quality of patient care that the hospital had long been recognized for.

The Hospitals "Down to earth and up to the minute" motto was not holding true for the call scheduling system. Dr. David Ficklen, M.D., joined the team as chief medical officer – charged with improving the scheduling system.

## **SOLUTION**

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Committed to delivering high quality care, Dr. Ficklen recognized the hospital needed an intuitive system that was specifically designed for a hospital's complex scheduling management needs. This included the ability to:

- ✓ **Merge several department calendars** into one view and tracking every scheduling change to ensure proper coverage.
- ✓ **Quickly and easily maneuver** the system without technical expertise or extensive staff training.
- ✓ **Accompany a trusted partner** to implement the system and provide technical support for staff with tight schedules.
- ✓ **Deliver a significant return on investment** for staff, physicians and patients in a short period of time.

Dr. Ficklen found that – and more – in the Call Communicator from Adjuvant.

That decision did not come without extensive analysis. Dr. Ficklen called on the hospital's Information Technology Director John Heemann to research on-call management software used at other hospitals experiencing similar problems. After an extensive search, Heemann identified only two companies that could meet the hospital's complex scheduling needs.

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*- Dr. David Ficklen  
Chief Medical Officer*

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Dr. Ficklen evaluated both solutions online and arranged demonstrations. He assumed it would be comparing apples to apples and that the decision would come down to specific features. He learned otherwise.

“The other provider clearly had not had input from hospitals when they designed their tool,” Dr. Ficklen said. “Beyond that, I got the impression it was some guy in his dorm room. . . . I just wasn't confident about their expertise or their ability to help us through the implementation and training.”

Impressed that Adjuvant designed Call Communicator with input from physicians and hospitals, Huntsville Memorial Hospital chose Adjuvant for the capabilities of its software and commitment to becoming a trusted partner.

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## RESULTS

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Throughout the process, Huntsville Memorial Hospital leaders focused on receiving measurable results for their staff, physicians and patients. They wanted a system that further enhanced the quality of patient care while boosting their bottom line.

Soon after the implementation of Call Communicator, they began to see results, including:

### **Even Better Patient Care**

Call Communicator provided a system that allows the hospital to have more consistent and appropriate coverage in order to best serve the various patients, particularly in the ER.

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*“The (Adjuvant) staff is responsible and flexible.*

*They have been true partners and problem solvers.”*

*- Dr. David Ficklen  
Chief Medical Officer*

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### **Time and Money Savings**

Implementing Call Communicator has allowed the hospital’s medical teams to spend more time doing what they do best – caring for patients. Its ability

to automate the scheduling process enables hospital staff to focus on the core functions and delivers a financial boost to the hospital’s bottom line.

### **Improved Communication**

Because the software was developed based on best practices, HMH quickly developed and implemented a best practices system focused on heightened communication and patient care. The process allowed hospital staff to receive answers for some key, underlying questions such as, “What does it mean to be on call?” and “Is it call when I’m seeing my private patients?” A shared understanding between ER staff and physicians has improved relations, morale and productivity.

### **Positioned for Growth**

Adopting a new on-call management system allowed Dr. Ficklen to gain trust and build buy-in with an overall vision for improved patient care. This early success is already helping to pave the way for other improvements within the HMH System. “It’s been the easiest and yet the most impactful change we’ve made,” he said. “The (Adjuvant) staff is responsive and flexible; they have been true partners and problem solvers.”

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## KEYS TO SUCCESS

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Even though the process had been mandated by the administration, Dr. Ficklen knew that he really only have one shot to make an impression on the physicians. A successful roll out was critical to making lasting change. Here are some keys to the hospital's successful implementation:

### **Connect with Core Team**

An active physician himself, Dr. Ficklen knew that it wasn't the doctors he needed to convince and train—it was their staff who bore the brunt of the scheduling responsibility. He invited a staff representative from all departments to attend a session where he asked for their input. He empathized with their plight and convinced them that he understood the issues involved. He and his staff then unveiled Call Communicator as a solution and showed a demo.

### **Gain Staff Buy-In**

Dr. Ficklen used every staff meeting and gathering as an opportunity to highlight the critical need for an on-call system and its impact on patient care.

### **Use On-Site Training**

When it came time to roll out the on-call management system, Adjuvant sent a trainer to be on site at HMH for a number of days. In addition to training, she was available to answer questions, hold hands and problem solve. The onsite presence put staff at ease and in just a few days users were feeling confident utilizing the tool on their own.

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*“The Adjuvant staff has come to our rescue on more than one occasion. We're grateful they are such proactive partners in our success.”*

*- Dr. David Ficklen  
Chief Medical Officer*

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### **Set and Uphold Expectation**

Achieving short and long term results rest on participation and quick adoption. At Huntsville Memorial Hospital, Call Communicator became the new standard and management required all physicians to use the new system. This also was necessary to overcome liability issues and comply with federal regulations.

### **React to Resistance**

When hospital leaders learned that the ER nursing staff was not complying with the new process, they identified the source of their resistance. They learned nurses were reluctant to tell physicians who used the old methods to comply. Dr. Ficklen called a special nursing meeting, assured the nurses they could ask for compliance without backlash and the hospital reaped the benefits of their heightened participation.

## **AN ADDED BONUS:**

*Midway through the roll-out, the hospital faced direct staffing issues when the medical staff coordinator and the IT project coordinator accepted new positions.*

*Both individuals had played instrumental roles in the implementation and ongoing management of the new on-call system. The loss of the two people with the essential skills could have crippled the short- and long-term success of the new system.*

*But it didn't. Adjuvant's staff stepped up to help bridge the gap in staffing and prevented any interruption in service – proving itself as a true partner.*