

Anatomy of a Successful ED Group Transition

Many believe the saying that *“the ED is the front door to the hospital”*. If so, what does the idealized front door to your hospital look like?

These three questions can open the door to your future:

- **When your community thinks of your emergency department, do they associate it with an incomparable quality of care?**
- **Does your ED have the confidence of your medical staff?**
- **Does your ED have a positive financial impact on your hospital?**

If you cannot answer all three questions positively, perhaps you have been considering changing your ED contract management group but have been delaying this decision for fear of the unknown. MEP, established in 1997 in Rockville Maryland, will share with you what that future can look like. By using a recent experience, whereby a hospital client trusted MEP to implement a number of much needed changes, we will demonstrate how those changes resulted in a positive impact on the patients, the medical staff and on the financial bottom-line. The information and data presented here were directly provided by our client hospital and after consideration, I am sure you will agree it conclusively demonstrates what a resounding success MEP has been and can be for your ED, in a very rapid time period.



Pre-MEP	Post-MEP
<ul style="list-style-type: none">• High emergency physician turnover• Variable quality• No systematic quality reviews • Increasing time to patient evaluation• Low patient satisfaction• Low medical staff satisfaction • Frequent transfers• Admissions flat	<ul style="list-style-type: none">• No emergency physician turnover• Board certified emergency physicians• State of the art web based quality reviews • Lowest seen times to physician• Record high patient satisfaction• Respect of referral physicians • Decreasing transfer rate• Increasing acuity and number of admitted patients

These changes occurred for two major reasons:

- **MEP leadership is committed to support the transition.**
- **MEP's "process-driven" culture achieves results.**

At MEP, we know the steps to success and believe quality begins:

- **by choosing great people**
- **by clearly defining success**
- **by providing continuous feedback.**

When it comes to our own family's personal healthcare decisions, we all know there are large differences between physicians. Not all physicians have the same service skills, quality record, or efficiency. And yet we all know that the best emergency physicians excel at all three. Very few organizations, except MEP, have been able to objectively quantify and reward superior performance for all three talents.

In order to identify these exceptional physicians, MEP has developed one of the most sophisticated recruiting-tracking systems in the industry. By literally tracking thousands of emergency physicians around the country, MEP can identify and recruit those physicians who fit our criteria as premiere providers of emergency care. Using our proprietary rating system, we judge experience, education, and resumé quality, as well as the likelihood that an individual would live near our client hospital. We further identify exceptional candidates by using MEP's comprehensive behavioral trait analysis system, which includes an in-depth on-site interview process. This signature process determines a candidate's practice style and gives MEP insight into an individual's ability to work in with others in a team environment and to work within the unique demands of the MEP system. Historically, MEP has offered employment to less than 10% of candidate applicants. MEP rewards these exceptional performers with above market salaries and partnership opportunities.

In the case of our recent client hospital, they were faced with a pre-existing ED group plagued with turnover rates approaching 30% per year and no commitment to staff the facility with emergency medicine residency trained physicians. After the transition period, MEP successfully recruited 6 board eligible / certified emergency physicians to relocate to a semi-rural area of southern Maryland.

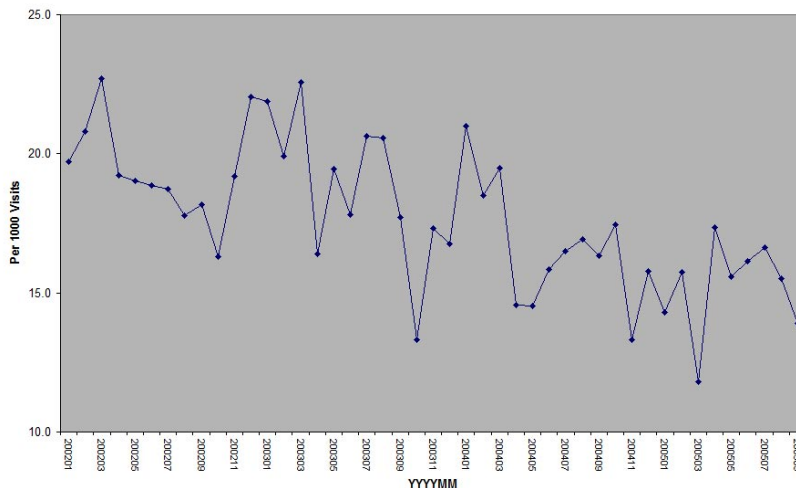


Previously only 4 ACEP member ED physicians within 60 minute drive of hospital.
 Post recruiting has increased to ten! Pushpin denotes ACEP physician location.

The key to consistently high levels of physician quality is also due to the orientation program they receive at signing. The purpose is to familiarize them with the unique cultural values, mission and vision of MEP.

The primary focus of providing care is the assurance of quality. Prior to MEPs beginning at our client hospital there was no systematic quality review in place; so before any newly constituted full time staff is in place, MEP steps in and begins to establish system protocols. It is immediately necessary to properly track and monitor standard quality markers such as turn around times (TAT's) and left without being seen (LWBS). In addition, we institute our WebQI system. This allows HIPAA compliant online quality reviews of provider care. When this process was instituted, for example, at our first client hospital, we witnessed a 15% reduction in return visits requiring admissions.

Return Visit Readmits



This graph illustrates the benefit of our internal QI process – Web QI. Since the implementation of Web QI we have seen a steady drop in the number of patients that require admission during a return visit to the Emergency Department.

The intent of WebQI is to have every practitioner (physician and mid level provider) review charts and have their charts reviewed by their peers. This unique process provides every practitioner with specific and timely feedback in a protected environment. The end result is measurable improvement in the quality of care provided.

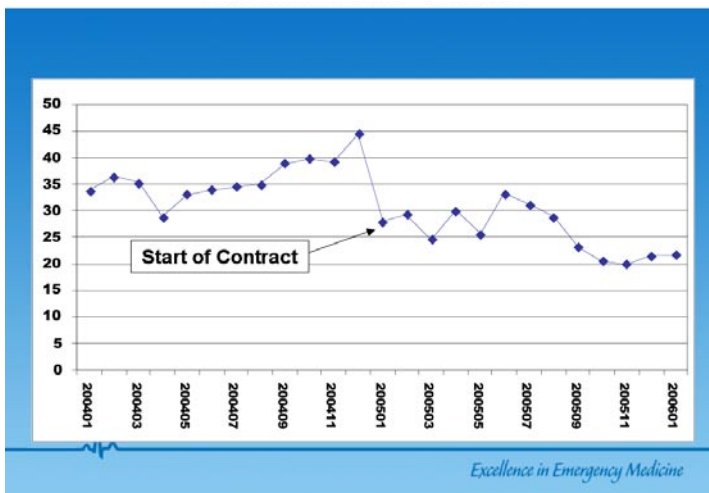
Satisfaction

Another benchmark to providing exceptional care is the delivery of a service product both respected and valued by patients and referral physicians. MEP believes the delivery of true quality care mandates that patients and referral physicians are highly and consistently satisfied with the care provided.

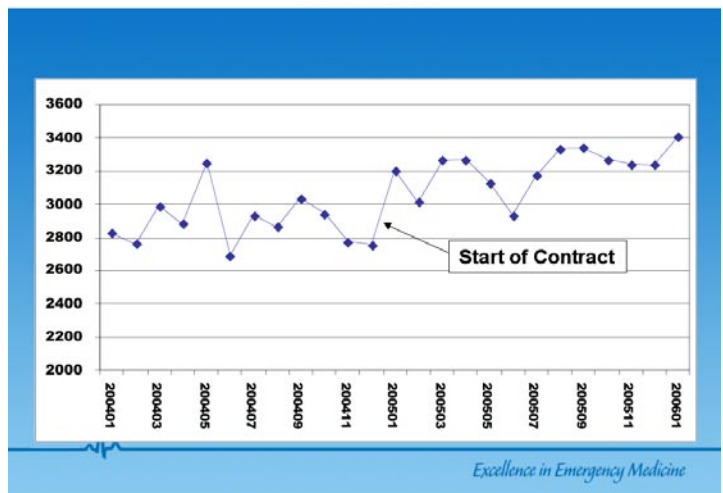
Over time, our organization has committed resources, both in terms of management time and financial resources, to build what we believe to be a unique method of monitoring physician satisfaction. Each month, a minimum of 20 patient satisfaction surveys are completed for each provider. The surveys ask questions regarding the medical care received from the emergency physicians and mid-level providers. These results, including specific patient comments, are published on our internal website and are available for each practitioner to view. This initiative has become a vital component of our comprehensive coaching process.

One of the key measurements MEP and most national survey companies track is time to physician evaluation. This is commonly known as “Room to Physician time”. The three key time drivers in emergency department service are 1) Arrival to Room, 2) Room to physician evaluation and 3) Total time in department. As you can see from the following graphs, despite significant increases in patient volume, MEP was able to dramatically reduce the room to physician evaluation time.

Room to MD Times



Volumes



Healthy Living



Emergency Care Center staff members pictured from the left: Jennifer McQuiston, M.D.; Peter Farlowe, M.D.; Stelita Battle, Nurse Technician; Jennifer Adams, R.N.; Nelson Figueroa, R.N., Director of Emergency Care Center and Express Care.

Mixing Compassion and Technology Patient Satisfaction on the Rise with Improved Care

When Chip Dullenaar was stung by a bee in his backyard, he thought nothing of it. Having never experienced a bad reaction, he brushed it off and chatted with his wife on a cell phone, casually mentioning the incident. Shortly after hanging up, Chip began to feel ill, as if he were going to lose consciousness. Alone and still lucid enough to convey his location, he quickly grabbed for his cell phone and dialed 9-1-1. His wife, unaware of their situation, discovered paramedics in her yard searching for their caller. Remembering that he had mentioned a bee sting over the phone, she helped to locate Chip in the rear of their home and watched as the medical team began life-saving treatment before rushing him to Hospital. Within hours, Chip had fully regained consciousness and was able to share his thoughts on the experience. "Although I had considerable anxiety, Emergency Care Center physician Dr. David Klein, as well as nurses Eileen Davis, RN and Katie Earls, RN did an excellent job of keeping me apprised of my condition. I had an overwhelming sense of relief and comfort when I arrived at the center. Now that I've seen it firsthand, I am so impressed and proud to live in a community with such excellent care."



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Our New Innovations
Over the past year, the Emergency Care Center (ECC) at Hospital has seen tremendous growth and change. In January 2005, the Hospital contracted with MEP, a group of highly-trained physicians

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When to Choose Express Care

Your child is running a fever and the doctor's office just closed - what do you do? While it's tempting to make a trip to the Emergency Care Center, consider instead going to the Hospital Express Care in Charlotte Hall. With trusted caregivers on hand and ready to help, you can get a quick diagnosis and return to the comfort of your own home. Did you know that the same highly-trained physician group that practices at Hospital are available at Express Care? When you visit Express Care, you'll receive the same compassionate care you'd receive at our hospital, but in a relaxed atmosphere that's similar to your doctor's office. If you are concerned about a minor illness or injury, it can be tempting to head straight for the hospital. It's important to evaluate your situation carefully before making a decision. For lesser ailments, Express Care may be your solution.

Express Care is located at the Medical Center in Charlotte Hall, just off of Road. The center is open 10 a.m. to 8 p.m. most holidays, weekdays, and weekends. Necessary and emergency services are accepted. Please call for operating hours.

The graphics to the left and below are examples of the end result of the large increases in satisfaction and improved community perception of care.

Mailbag



Dear Healthy Living,

My name is Vernell Winchester, and I am the daughter of the late Champion Jack Johnson, who was taken to Hospital on September 24. From the time the rescue squad entered our home, until the doctor pronounced the death of my father, we received the very best care and compassion by those attending to my father and our family. Dr. James McQuiston, Dr. Rajinder Gill and Dr. Enrique Samaniez, skillfully attended to my father while he was in the Emergency Care Center. The nurses were also wonderful, as they checked on him and asked us if we needed anything. We really appreciate what we saw and felt, all of the kindness and gentleness they could do.

Please express our appreciation to each of these wonderful and compassionate individuals. Each one worked very hard to give my father dignity and they could. Thank you for all you have done.

Vernell Winchester
Chapman, MD

Dear Healthy Living,

I just had to let you know how terrific my care was on a recent visit to your ECC. Everyone treated me so well and never left my side. I especially want to praise Dr. James McQuiston and College of Southern Maryland nursing student, Christina Butts. She is going to make a wonderful nurse! We are so fortunate and impressed with the changes and improvements at Hospital.

Marcy Connelly
Londondown, MD

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Dear Healthy Living,

On October 25 we brought our eight month old son, Brayden in for treatment of croup. Being new parents, we were extremely nervous about both his condition and treatment. The ECC staff treated Brayden quickly and with compassion. A big thank you to all those who kept our happy little boy smiling!



Dr. James McQuiston,
ECC Physician

Bill and Sarah Diaz
Great Mills, MD

Dear Healthy Living,

I just wanted to drop you a note to let you know that Hospital has the best ECC that I have been to. Additionally, please pass my compliments to the nurses on the third floor of the hospital. Ya'll are the most wonderful nurses I've ever had. Thanks a lot!

Robert Garow
Mechanicville, MD

Dear Healthy Living,

On September 5, I was blessed with giving birth to a beautiful girl, Ella. I wanted to share with you what a spectacular job your staff did caring for me during this time.

I came in uncertain if I was in labor on September 4. The nurses took me to a birthing room, tested me and confirmed that I was indeed in labor. Although I had several nurses during my 18-hour delivery, each was superb in her duties and each had that special touch in caring for me. In the end, I had to have a cesarean section. To me,

this was very scary. But again, your staff did a great job at caring and reassuring me that everything would be fine - and it was.

While I was recovering in a postpartum room, I was assigned Stephanie Nelson as my Nurse Technician for the duration of my stay. She performed her duties above and beyond. The first day of my recovery, Stephanie needed to help me get cleaned up and out of the room in a very professional manner. She talked and visited with me and before I knew it, I was ready to go back to bed to visit with my baby girl.

The next day I had several visitors throughout the morning. Though I was overwhelmed with the company, when Stephanie came to check on me, I mentioned this to her. She immediately told me not to worry and put a nice sign on my door and notified the front desk of my wishes. I was so appreciative of this because I know that I wouldn't have been able to turn anyone away myself.

During my stay, Stephanie not only took care of me, but was also cheerful and friendly, and I often felt as though she were another friend stopping by. It was so nice to see her smile each day as she came in to ask me what I needed.

Upon my discharge, she pushed my wheelchair down to the lobby, helped me into the car and even fastened the seat belt. When we drove off, we could still see her waving at the hospital front door. She really is a beautiful, caring and thoughtful person. It is truly lucky to have her as their employee.

Jennifer Muschlag
Lusby, MD

Financial Impact

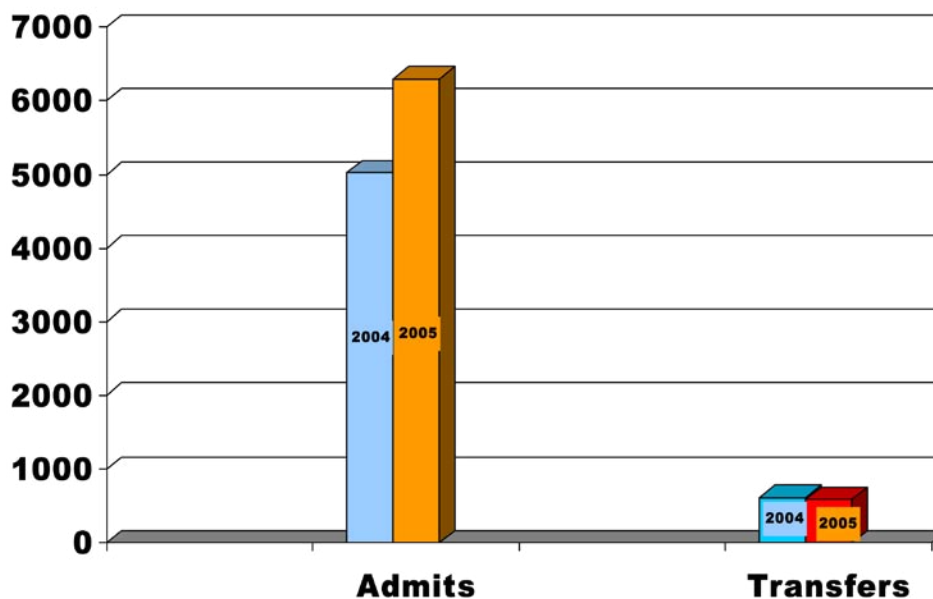
We began with the notion that the “ED is the front door to the hospital”. It is also true that many more patients will use a hospital ED in the course of their lives than any other area of service. Many still considered it the barometer for the hospital and traditionally where the reputation of the institution starts... and in all too many instances where it stops!

There is also a more tangible measurement to consider; revenue generated directly as a by-product of the ED.

With 30-70% of total hospital admissions occurring through the ED, any negative publicity will have a direct impact on the bottom line. In a critical situation patients do not have a choice regarding “closest hospital”. In less urgent circumstances, when a referral physician has a choice of where to admit, there is definite variability in where patients travel for care. Quality of care and patient satisfaction impact a patient’s decision of where to go for emergency care.

The graph below demonstrates the remarkable impact on hospital admissions MEP had at this hospital. Despite a 12% increase in patient volume, transfers were reduced and admissions were up 25%.

**2004 vs 2005
Admissions and Transfers**



How did this occur? There are two primary reasons. First, we believe as a direct result of the quality of MEP physicians, the comfort level in managing higher acuity patients in the ED increased. Secondly, once a medical staff develops confidence in the quality of ED care during initial evaluation, treatment and resuscitation, there is a willingness to admit higher acuity patients. MEP's philosophy, similar to most successful hospitals, is to treat patients whenever appropriate, in their home community.

MEP has had a measurably positive impact on quality, patient satisfaction and financial performance markers at the institutions we serve. We also realize every circumstance is unique so the process we use is simple and consistent:

- **Lead from the top, management focus on a quality service product**
- **Define clear expectations linked with constant monitoring**
- **Bring local physician leadership with national expertise in practice management.**

We have proven our success with our current client hospitals. If your ED group is delivering on your expectations, congratulations! If you would like to make your vision for your ED a reality, MEP would be delighted to discuss how we can make that happen - together.

