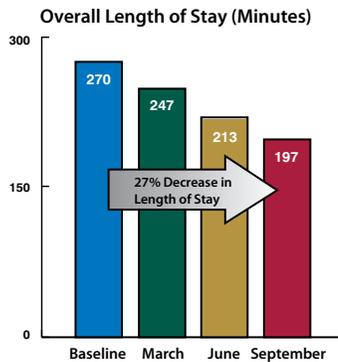




**IMPERATIVE:
CASE STUDY:**

**Reduced Length of Stay
Henrico Doctors' Hospital**



“We chose Compirion because we felt they were unique. They worked onsite, side by side with hospital staff on a real-time basis. No one else we saw does that.”

*– Beemal Shah,
Associate Administrator*



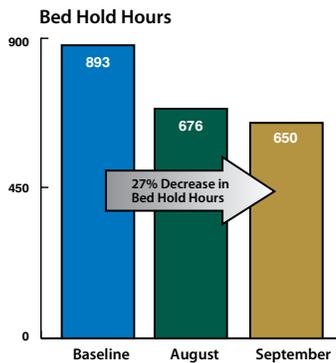
RICHMOND, VIRGINIA... Henrico Doctors' Hospital is a full service acute care hospital in Richmond, Virginia, closely located to its competitor St. Mary's Hospital. Early in the year, Henrico's administration noted a marked decrease in volume of patients hospital-wide. Meanwhile, St. Mary's volume was increasing. After investigation, the problem was found to be in the Emergency Department and compounded throughout the facility. Most notably, the issue began with a long Emergency Department length of stay, creating staff, physician and patient dissatisfaction. Overall length of stay was 270 minutes, over 470 minutes for admitted patients, and over 216 for discharged patients on average. Bed hold hours for admitted ED patients waiting transfer to an inpatient bed had risen to around 1500 hours per month. Gallup® scores for patient satisfaction were at the 11th percentile. Patients began leaving without being treated at a rate twice the national average. Hospital administration decided something needed to change.

In March, upon recommendation by the Emergency Department's physician's group, Henrico Doctor's hospital administration enlisted the help of Compirion Healthcare Solutions, LLC, a healthcare process improvement consulting firm based in Elm Grove, Wisconsin. Compirion's services were engaged from March through October.

According to Associate Administrator, Beemal Shah, “We chose Compirion because we felt they were unique. They worked onsite, side by side with hospital staff on a real-time basis. No one else we saw does that.”

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Henrico Hospital Improves Length of Stay *(continued)*



“The Compirion team provided structure, made sure data was gathered more frequently, and ensured faster change implementation”

*– Patti Aldredge,
Director of Emergency Services*

Because this was a hospital-wide commitment, over 90 people were involved in the improvement process including hospital administration, physicians, bedside nurses, ancillary unit directors, housekeeping staff and others. The group worked together to identify pilot initiatives and then built Core Teams around these initiatives. Goals included retooling triage in the ED, increasing patient satisfaction scores to the top quartile, decreasing overall length of stay to under 180 minutes, decreasing bed hold hours for admitted patients to less than 500 hours per month and decreasing the number patients leaving without treatment to less than 1% of volume. The percentage of patients who left without being seen (LWBS) was 4%, double the national standard. This represented a significant loss in hospital revenue. Compirion worked side-by-side with the Core Teams providing mentoring, leadership, coaching, and process improvement facilitation while encouraging camaraderie and teamwork.

According to Patti Aldredge, Director of Emergency Services, “The Compirion team provided structure, made sure data was gathered more frequently, and ensured faster change implementation.”

Tonya Kirby, Clinical Consultant for Compirion stated, “Getting everyone on board was the toughest part for us. We initially gained their trust with small ‘big’ wins. Once they saw improvement on the front end, they were able to ‘dig in’ on the harder ones.”

The Triage Team initiatives in the Emergency Department made a huge difference hospital-wide. They saw an immediate improvement in door-to-doctor time by putting a physician in triage. Inpatients were quickly identified and moved to beds. The team then looked hard at improving Fast Track turnaround time for low-acuity patients and at Core Measures indicators for AMI and pneumonia patients. The non-critical patients were sent to Quick Registration, which shortened wait times and increased patient satisfaction. The team also instituted parallel processing with mid-level practitioners to keep door to disposition/treatment time at less than 60 minutes. Together, these initiatives worked to lower the number of patients who left without being seen (LWBS) to the 1% goal and \$18,500 in billable volume was gained. For AMI patients, a Heart Watch packet that contained protocols for patient care, a timing sheet and other key materials, was developed and implemented along with an AMI tackle box that contained key drugs for treatment. Protocols for blood culture before antibiotic and antibiotic within 4 hours were instituted for pneumonia patients.

The Charge Nurse Team under the guidance of Compirion staff instituted hourly rounding, wherein all inpatients, along with their friends and family, were monitored by the Charge Nurse on an hourly basis. This ensured that patients were triaged appropriately, and that friends and family were kept comfortable and informed of the patient’s condition. Charge Nurse Rounding contributed to another climb in patient satisfaction scores. Gallup® rankings, which were in the 11th percentile before the Compirion engagement, peaked at the 95th percentile.

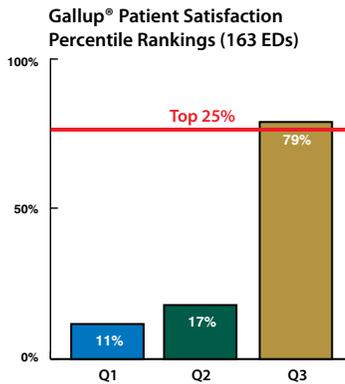
Joyce Evans, the Project Manger for Compirion, worked closely with Patrick McGrady, Director of the Medical and Surgical Unit to get hospital staff cooperation. “What Compirion does is to help change behavior by coaching on setting standards and accountability through positive relationships. Mr. McGrady was a shining star on the hospital side that really helped move things along. He really wanted to learn from the experience and he held his people accountable.”

Compirion Healthcare Solutions, LLC

890 Elm Grove Road | Building 2, Suite 200 | Elm Grove, WI 53122
866.NO1.HOSP (866.661.4677) Ext. 102 | www.compirion.com/henrico

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Henrico Hospital Improves Length of Stay *(continued)*



“The Compirion team brought focus and attention to the project. They were able to get contributions from the hospital staff in the form of ideas, provide idea implementation and keep everyone on task. Their ability to bring consistency and accountability is what made the project work”

*– Ben Warner,
Vice President of Nursing*

To handle the increase in volume from the ED, more beds on the floors needed to be available during peak hours. The Bed Control Team, working with the Director of Case Management, looked at the DRGs of all patients who were there more than 3 days. They looked at how the case was handled, what the Dr.’s report said and what Medicare allowed. If the patient was deemed ready to be discharged, they made sure the physician wrote the discharge order within 2 hours. The average time of day discharge for inpatients moved from 5pm to 2:16 pm for a 27% improvement.

At the end of the improvement project, arrival to treatment time had dropped from 77 to 21 minutes, patient satisfaction had increased 563% and ED point of service collections had increased 30%.

Beemal Shah added, “Globally we are very satisfied with the project results. In some cases we exceeded goals, and in most cases met them. Compirion is continuing to assist us in meeting a few that are close. The discipline is in place. We continue to meet weekly to review the metrics and to maintain our Core Teams with a structured accountability.”

As part of their Sustainable Results Program, the Compirion team returns twice during the year at no charge to the hospital to review and make any adjustments.

Vice President of Nursing Ben Warner stated, “The Compirion team brought focus and attention to the project. They were able to get contributions from the hospital staff in the form of ideas, provide idea implementation and keep everyone on task. Their ability to bring consistency and accountability is what made the project work.”

For more information on Compirion’s sustainable healthcare solutions call **1-866-661-4677**, or visit **www.compirion.com/henrico**

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