

# CASE STUDY: Clinical Integration



## Hospital Information

Location: Louisiana  
ED Volume: 36,000 annual visits

## TeamHealth Services

Emergency Medicine  
Hospital Medicine

## Results

Door-to-bed-time <22 minutes  
Door-to-provider times <25 minutes  
Reduced length of stay  
Increased room capacity

**“Overall patient satisfaction scores are the highest in the hospital system.”**

*- Chief Executive Officer -*

## Challenge

A Louisiana hospital was unhappy with its hospital medicine provider's performance. The group failed to embrace the required metrics and perform in alignment with the hospital's mission and vision. The hospital also did not want just another vendor; they wanted a partner, similar to the relationship they had achieved with TeamHealth for their emergency medicine services.

## Solution

Because of TeamHealth's success in the emergency department (ED), the hospital extended the existing partnership to include hospital medicine (HM) services.

Recognizing the value of facility medical directors as the linchpin to success, TeamHealth ensured solid leadership by recruited a full-time facility medical director for HM as well as an assistant medical director for Emergency Medicine (EM) to support the EM facility medical director. With strong leadership in place for both departments, recruiting excelled and both departments were held accountable for meeting mutually aligned goals of the hospital and the EM and HM teams.

At the start of the contract, TeamHealth conducted an annual “Expectations Meeting” with hospital leaders in order to set goals for the year. The EM and HM leaders meet frequently to ensure progress on attaining the identified expectations.

The hospital was quickly benefiting from the TeamHealth EM and HM leaders collaborative resolution of issues and development of innovative solutions. The medical directors work together with the hospital's administrative and clinical staff to implement focused solutions that are improving metrics and meeting the hospital's strategic goals. Some of the new initiatives include hiring Scribes and implementing a Patient Call Back program.

## Results

Metrics are better than ever - readmit rates have improved along with patient satisfaction scores. Even with high volumes in the ED, the average door-to-bed time is 22 minutes or less and the door-to-provider time averages 25 minutes. In the HM program, hospitalists have successfully reduced the average length of stay and are quickly turning over rooms, resulting in increased capacity. These positive results are possible and sustainable due to the continued and truly collaborative team environment that now exists in the EM and HM programs.