



Case Study:

Integrated Care Protocol Improves Metrics

Hospital Information

South Florida Baptist Hospital
Plant City, Florida

- 39,000 ED patients per year

TeamHealth Services

Emergency Medicine

Results

- 24% reduction in ED length of stay (LOS) for admitted patients
- 14% reduction in ED LOS for discharged patients
- 65% drop in LWOT rate (2.02% to 0.71%)



Thanks to TeamHealth’s innovation and willingness to forge collaborative relationships across service lines, we have been able to achieve significant performance improvements. They are a true partner in our success.

Dr. Stephen Butler

Chief Medical Officer, South Florida Baptist Hospital

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Challenge

South Florida Baptist Hospital is a 147-bed community hospital and part of the 15-hospital BayCare Health System in Central Florida. Several years ago, BayCare decided to tackle performance improvement initiatives across the system with the goal of being ranked among what was then the Truven Health Analytics 100 Top Hospitals. The listing of top performing health systems in the nation, now known as the Watson Health 100 Top Hospitals, is based on publicly available quality, safety and patient satisfaction metrics and data. At South Florida Baptist Hospital, the health system engaged its emergency department management partner, TeamHealth, to develop solutions that could improve ED performance.

Solution

TeamHealth’s ED medical director implemented TeamHealth’s Zero-time Integrated Pathway (ZIP) model. Through this model, emergency medicine physicians focus on identifying key diagnosis “triggers” to prompt hospitalist contact within 45 minutes. The emergency medicine and hospital medicine physicians then work in a concurrent fashion (instead of linearly) to admit the patient. With the ZIP model, collaborating physicians achieve greater speed and accuracy of their hand-off and improved patient outcomes. In addition, the shortened duration of patient throughput and improved communication between clinicians lends itself to enhanced patient experience.

At South Florida Baptist Hospital, TeamHealth led the implementation of ZIP with support from hospital administration and in collaboration with the hospital’s independent hospital medicine practice. The ED medical director began attending the hospital medicine department’s monthly meetings and the two practices worked together to develop the communication and coordination necessary to make the program a success.

Results

The ZIP model led to a dramatic improvement in ED throughput. In the last full quarter prior to implementing ZIP, the length of stay for admitted patients was 270 minutes, and it was 152 minutes for discharged patients. Door-to-provider time was 21 minutes and more than 2% of patients left without treatment. In the same quarter one year later, LOS dropped to 205 minutes for admitted patients and 131 minutes for discharged patients. Door-to-provider time decreased to 17 minutes and LWOT fell to just 0.71%. **Best of all, these improvements came with zero cost to the hospital – they were all achieved within existing infrastructure and with existing staff.** And in 2019, the health system was named among IBM Watson Health’s top 20 best performing large health systems in the country.

EM/HM Integrated Services Goals: Chest Pain

EM Clinician	HM Clinician	
<ul style="list-style-type: none"> • Review EKG to rule-out STEMI • History and physical exam • Contact hospitalist • Determine suitability for rapid rule-out with stress test if ED chest pain center available 	<ul style="list-style-type: none"> • At the start of shift, notifies ED of clinician holding the call pager • Returns ED call within 10 min of page, presents to ED within 30-45 min after being notified of potential admission 	0-45m
<ul style="list-style-type: none"> • Face-to-face hand-off with HM clinician • Follow-up critical labs/imaging to rule-out other life-threatening causes of chest pain (PE, dissection, etc.) • Determine need for cardiology consultation • Manage acute cardiovascular complications (arrhythmia, etc.) 	<ul style="list-style-type: none"> • Face-to-face hand-off with EM clinician • History and physical exam • Follow-up critical labs/imaging to rule-out other life-threatening causes of chest pain (PE, dissection, etc.) • Direct discussion with cardiology to determine availability of same-day stress testing 	45-90m
<ul style="list-style-type: none"> • Ensure transport team ready for transport 	<ul style="list-style-type: none"> • Orders complete • Consult ED case manager to determine admission/observation status • Determine optimal stress test type/timing • Ensure core measures met on orders 	90-120m

ED
Telemetry Bed