

IMPROVING HOSPITAL MEDICINE METRICS AND COLLABORATION BETWEEN FACILITIES

CASE STUDY

PARTNERSHIP BACKGROUND

A health system in Virginia chose SCP Health (SCP) to help address staffing and care coordination objectives for four of its Hospital Medicine programs.

GOALS

- ▶ Decrease length of stay
- ▶ Lower readmission rates
- ▶ Improve clinical documentation
- ▶ Recruit and retain a full schedule of providers

STRATEGY

To begin, SCP executed a rapid yet thoughtful provider hiring process—converting candidates from contract offer to first day in under 96 hours. This also resulted in a fully staffed schedule in under three months for all four programs—two of which historically struggled with complete provider coverage. This fully rejuvenated schedule allowed providers to take a lighter patient load, enabling them to spend more time with each patient and family, execute more careful and consistent documentation, and develop each patient’s discharge plan more thoroughly, thus allowing the hospital to collect the right payments.

To ensure these shifts were sustainable, SCP addressed outdated, ineffective, or disengaging processes and norms that were hindering provider and patient success in the long run. This included planning ahead for patients’ post-discharge needs (medications, therapies, transportation, etc.), submitting timely preauthorization requests, and building bridges to PCPs, case managers, and skilled nursing facilities.

The final step in SCP’s approach was to set up communication channels connecting the members of each individual program, as well as building a relationship between the four programs as a whole. From regional meetings to data dashboards, these similar facilities accomplished much more together than they could have if they’d stayed siloed.

IMPACT

Just six months into its partnership with SCP, this health system was able to see significant, positive changes in many of its key metrics, including:

- ▶ **Length of stay:** Decreased from 6 to 4.8 days
 - ▶ **Readmission rates:** Decreased from 20% to 14%
 - ▶ **Provider patient load:** Decreased from 30+ to 16-18 encounters/day
 - ▶ **Average RVU:** Increased from 1.7 to 2.2
- All four programs remain fully staffed



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