

Arizona Health System Aims to Increase Referrals and Create Capacity with ABOUT™ as a Partner



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Derek Feuquay, MD Chief Medical Officer, Northern Arizona Healthcare



HEALTH SYSTEM SNAPSHOT

- Largest healthcare organization in the northern Arizona region
- Nonprofit health system consisting of two hospitals, a freestanding emergency department, and many other facilities
- More than 3,000 physicians, nurses, and other experts
- Serves a population of 700,000-plus in a region that spans 50,000 square miles

CHALLENGES

- Simplify and accelerate the patient transfers process for referring providers
- Keep patients closer to home and reduce leakage to Phoenix hospitals by capturing more referrals from the region's healthcare providers
- Boost referral capture in areas of opportunity, especially neurology and gastroenterology
- Create more bed capacity by accelerating patient throughput, reducing average length of stay (ALOS), and improving timeliness of discharge to home and alternate lower acuity care settings

SOLUTION

Northern Arizona Healthcare, empowered by a strong partnership with ABOUT, has pursued a multifaceted approach that includes:

- A more sustainable and efficient transfer center staffing model
- Single-provider acceptance, designed and implemented with guidance from Dr. Darin Vercillo, Chief Medical Officer at ABOUT
- End-to-end Care Orchestration solutions for simplifying and accelerating patient transfers and expediting post-acute care placement
- Best practices, change management, and actionable insights, delivered by a dedicated team of ABOUT clinical, operational, and business experts

RESULTS

In less than two years, Northern Arizona Healthcare has documented several significant improvements, including:

- Simplified patient transfer process that requires less back-and-forth calling
- 19% increase in transfer volume for the first year
- 18-minute reduction in time from transfer request to medical acceptance
- Faster, less labor-intensive post-acute care placement process for care coordinators
- Overall decrease in ALOS ranging from 11 25%, equating to almost a half- to full-day reduction

ABOUT NORTHERN ARIZONA HEALTHCARE

Northern Arizona Healthcare (NAH) is the largest healthcare organization in a region that encompasses 50,000-plus square miles. NAH's team of more than 3,000 physicians, nurses, and other experts serve more than 700,000 people in communities across the region. Facilities include two hospitals — Flagstaff Medical Center and Verde Valley Medical Center — as well as primary care and specialty physician clinics, a freestanding emergency department in Sedona, outpatient surgical centers, Cardiovascular Institute, Cancer Centers of Northern Arizona Healthcare. EntireCare Rehab & Sports Medicine, Children's Health Center, Orthopedic & Spine Institute, and Guardian Air and Guardian Medical Transport. NAH is a nonprofit organization.

CHALLENGES AND OPPORTUNITIES

A Top Priority: Closer-to-Home Healthcare

How do you efficiently and expeditiously transfer patients into your health system's flagship hospital when your service area comprises more than 50,000 square miles? For Northern Arizona Healthcare (NAH). this tall order is magnified by a number of factors, including a diverse array of referral sources, from community critical access hospitals to Indian Health Service clinics and hospitals. And, like virtually every health system across the country, NAH has struggled with the COVID-19 pandemic and its aftermath, especially the persistent shortage of nurses and clinical staff.

Despite these formidable challenges, NAH possesses a strong resolve to provide advanced care to the more than 700,000 residents of northern Arizona and beyond.

"We really want to keep patients as close to home as possible," says Kathryn Feuguay, MD, hospitalist and Transfer Center Medical Director. "For many patients in our service area, it's two to three hours by ground to Flagstaff Medical Center. Transfers to Phoenix might require another two hours of travel, and not just for patients, but for their family members."

A FOCUS ON DEMAND AND CAPACITY

What's good for patients and families is also good for the health system. In fact, NAH depends on patients from outside the health system for a vast majority of its transfers. "The transfer center is truly our front door to growth," explains Jim Elco, Vice President of Strategy and Financial Planning.

Closing this "front door," on the other hand, erodes market share and revenue. It also prevents the health system from realizing its full potential in areas of strength. In particular, analysis showed that NAH was turning away a considerable amount of business from two areas of specialization: neurology and gastroenterology, according to Elco.



Overcoming barriers to the flow of patients into NAH meant examining every facet of the transfer process, including staffing, protocols, and technology.

Because capacity is so crucial for determining acceptance of transfer requests, the health system also needed to take a close look at how patients are discharged from hospital acute care to a post-acute care facility or to home.

"Over a period of two years, our average length of stay (ALOS) was higher than it's ever been," explains Lisa Davison, Director of Care Management. "At times patients have bypassed us, going to Phoenix because we didn't have the beds or staff to care for them. That's difficult for us, but even harder for patients and their families."

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Ultimately, NAH leaders understood that keeping patients closer to home required a dual focus. "We had to devote time and resources to improving both demand and capacity," says Derek Feuquay, MD, Chief Medical Officer. "If we created capacity, but lacked a simple process for accepting patients, we'd lose money by having unfilled beds."



A MULTIFACETED APPROACH

New Transfer Center Staffing

Despite the inherent challenges of serving a vast and diverse region, NAH has never wavered from its goal of ensuring access to high-quality, closer-to-home healthcare for residents of the region. But it has required a multipronged approach and everyone pulling together for the common good.

In early 2021, the transfer center transitioned to a new staffing model. Under the previous model, nurses obtained an initial patient history from the referring provider and then relayed this information to the emergency room physicians who were staffing the transfer center. These ER physicians then called the referring providers to get more detail and determine acceptance or denial of transfer requests.

"Staffing the transfer center with ER physicians proved to be unsustainable economically," says Dr. Derek Feuquay. "In addition, we really wanted those physicians to focus on clinical work in our facilities."

In Tandem with SPA

NAH moved to a staffing model that relies primarily on med-surg nurses, who possess the clinical skills and specialized training to handle a full spectrum of transfer center responsibilities from querying referring providers for essential information to calling the appropriate on-call physician for an acceptance decision. Built into this more efficient process is another crucial change for the health system: single-provider acceptance (SPA).

"Thankfully, we were able to meet with Dr. Vercillo," says Dr. Kathryn Feuquay, referring to Darin Vercillo, MD, Chief Medical Officer at ABOUT. "He introduced us to the SPA model, which made it a lot more feasible to revamp the entire workflow of our transfer center. With our current staffing model and SPA, a majority of these cases go smoothly. The transfer center nurse knows who to call, who's going to accept the patient, and who's going to admit the patient."

Empowered by the Right Technology

To perform their jobs as effectively as possible, transfer center nurses needed the right technology at their fingertips, and they got it with the ABOUT™ Orchestration Suite. Customizable templates prompt staff to capture essential detail about the patient (which automatically integrates with the patient's EHR in NAH's Cerner system). With this robust set of information, nurses know which on-call physician to contact for an acceptance decision.

"Having the ABOUT solution is very empowering for our nurses in their decision-making," says Angela Balouch, Clinical Care Operations Director. "It ensures that everyone is getting the same information and following the same process, regardless of who's sitting in the chair. This consistency helps build confidence, relationships, and trust with providers."

Balouch's colleague, Stefanie Green, Clinical Manager, Clinical Care Operations, agrees, adding: "Because we're capturing the right information upfront, there's less back and forth on the phone." And, as Dr. Kathryn Feuquay points out, "being on the phone is a provider's least favorite part of the day."

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Tackling Throughput and ALOS

Besides helping NAH drive demand and standardize its transfer center operations, ABOUT is assisting the health system with creating patient capacity. Specifically, the ABOUT Post-Acute Cloud is a key tool for enabling NAH to accelerate throughput and decrease ALOS.

Using the Post-Acute Cloud, Davison's Care Management team accomplishes Post-Acute placements without the conventional time-consuming process of printing out forms and sending multiple faxes (potentially reaching a wrong number) to skilled nursing, rehabilitation, and other types of facilities.

"The ABOUT Post-Acute Cloud lets us broadcast placement requests to a mass number of facilities and get responses back on the platform," explains Davison. "It's made the process much more efficient and faster."

She believes that the combination of ABOUT and best practices, such as morning bed meetings to ensure discharge readiness, will help NAH continue to make strides in improving throughput, creating capacity for incoming acute-care patients.

THE RESULTS

Much Accomplished, More to Come

NAH can be proud of all that has been accomplished in streamlining patient transfers and creating capacity, especially considering the newness of many NAH initiatives, as well as the relative recency of the health system's partnership with ABOUT.

One early important win is a 18-minute average decrease in the time from transfer request to medical acceptance. "While there's still room for improvement, a 18-minute decrease can be a lot of time for an ER physician who's concerned about getting a heart attack patient to a higher level of care as quickly as possible," explains Dr. Kathryn Feuguay. She notes that a longer response time increases the likelihood of a patient bypassing Flagstaff and going to a Phoenix facility two hours beyond Flagstaff.

Or, as Elco expresses it: "If we drop the ball, referring providers will follow the path of least resistance to somewhere else, even if it's farther away."

An easier, simpler patient transfer process, on the other hand, not only reduces the time to advanced care, but it builds loyalty among referring physicians, increasing the likelihood they'll call NAH for future transfers.

The health system also has made progress in creating capacity for incoming patients, specifically by reducing ALOS. While the pandemic drove up ALOS and kept it high for several months, NAH recently started to see that metric move in positive direction, decreasing at an overall clip of 11% to 25% — which equates to a half- to full-day reduction in ALOS. "A shorter stay reduces the risk of hospital-acquired infections and injury-causing falls, while it allows us to serve the community better by having beds available for patients who need our care," says Davison.

For NAH, the combination of increased transfer process efficiency and decreased ALOS has yielded impressive measurable gains, including a 19% boost to transfer volume in the first year.



Fueled by a Wealth of Usable Data

Fueling the ongoing improvements in demand, capacity, and throughput is intelligence gleaned from ABOUT decision support, analytics, and reporting. For example, transfer center leaders can gain a clear picture of crucial trends, such as time from initial provider contact to acceptance. The extensive reporting available through ABOUT also supports strategic decision-making.

"I really like the dashboards," comments Dr. Kathryn Feuguay. "If I'm wondering why we lost so many gastro cases last month, I can look it up on my phone and have the answer in minutes. The data might show us, for

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instance, that if we had more gastroenterologists, we could capture this many more transfers. Then, when we tell senior administration we need more coverage, we have the data to back it up — it's not just a gut feeling."

Tapping into ABOUT Expertise

During the interviews for this case study, access to ABOUT Care Orchestration expertise was cited frequently as a primary factor in NAH's patient transfer and throughput improvements.

For example, Dr. Kathryn Feuquay describes the clinical team's guidance as indispensable with the design and implementation of NAH's single-provider acceptance model. The knowledge of these experts, she notes, is rooted not just in their experience with ABOUT, but in their real-world clinical backgrounds.

At a tactical level, Balouch and Green have appreciated the intensive, hands-on training and refreshers provided to their transfer center nurses, as well as the availability of ABOUT experts whenever a question or issue arises. "Every time I've needed assistance, they are there for me," states Balouch. Ultimately, I believe that ABOUT wants us to be successful."

For her, the combination of industry-leading support and technology adds up to a simple value proposition: "With ABOUT you're not only getting a product — you're getting a partnership."



About Us

ABOUT offers a flexible, purpose-built solution that empowers hospitals and health systems to operate as one connected network of care. We enable easy access for clinicians to move patients into and out of the acute care setting — getting them to the next, best care setting faster and easier. Complemented by our clinical experts and best practices, we provide health systems the necessary controls and insights to grow with resilience, drive clinician effectiveness, and improve patient outcomes.



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