

INOVA LOUDOUN DISASTER PLANNING BENEFITS EVERY PATIENT

CASE STUDY

Inova Loudoun Hospital
Leesburg, Virginia

Inova Loudoun Hospital, located in the Washington, DC suburb of Leesburg, Virginia, is a not-for-profit healthcare institution with 155 inpatient beds, 61 medical/surgical/pediatric beds, 11 intensive care beds and seven special care nursing beds. It serves area residents with 533 healthcare providers and over 1,600 employees.

Challenge:

Inova Loudoun's process for identifying dischargeable patients was time consuming, inconsistent, and posed potential threats to patient safety. The process required the Nursing Supervisor to call the Charge Nurse, who compiled a list of eligible patients. The list of eligible patients was based on Staff Nurses' individual assessments. This inconsistent approach potentially threatened patient safety in two ways. First, discharging patients too soon could put them at risk for readmission and/or serious complications. Second, not discharging suitable patients in a timely fashion could reduce the availability of beds for those who needed them.

The terrorist attack of September 11, 2001 underscored to the hospital just how important improving its discharge eligibility identification process really was. Inova Loudoun's new strategic plan required all beds that could be made available during another terrorist attack or other disaster be made available

ASAP. This required its discharge eligibility identification process to become efficient and effective. The process needed to be criterion-based, standardized and objective. And to be approved as part of the hospital's overall Emergency Management Plan, it had to be proven.

Solution:

Inova Loudoun staff developed a standardized discharge eligibility identification process by implementing the QuadraMed Acuity, Productivity and Benchmarking — AcuityPlus™ — system, which included Indicator Detail by Patient Report.

Inova Loudoun Hospital transformed a time consuming, inconsistent process of identifying patients who met discharge criteria into one that can free-up beds for the surge of patients who need them during a crisis.

QuadraMed Care-Based Revenue Cycle Solutions

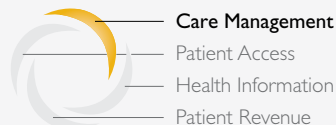


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Using AcuityPlus, the Nursing Supervisor generated reports for each classifying unit, then reviewed all the indicators selected for Type II patients against the Indicator Exclusion list. The Indicator Exclusion list consisted of specific indicators that, when selected, may render the patient ineligible for discharge. The Charge Nurse then received this refined list and contacted physicians to discuss pending releases. Discharge protocol included follow-up instructions, emergency contact information, and telephone calls to patients the day following discharge.

Management needed to know the new discharge eligibility identification process would work when it was needed most – during a high alert, terrorist attack, or natural disaster – and that it would work safely, without discharging patients too soon.

The hospital conducted two 30-day retrospective reviews. Type II patients were successfully identified using the Indicator Detail by Patient Report and screened for exclusionary indicators. This generated a list of dischargeable patients and the actual discharge date was noted.

Results:

When Inova Loudoun followed-up on its potential dischargeable patients the results revealed 61 percent were discharged within 24 hours, 7.7 percent were discharged within 48 hours and 32.3 percent were discharged within 72 hours. The process worked.

Using QuadraMed AcuityPlus, Inova Loudoun transformed a time consuming, inconsistent process of identifying patients who met discharge criteria into one that can free-up beds for the surge of patients who need them during a crisis. The new process was criterion-based, standardized, objective, and safe. It was accepted as part of the hospital's Emergency Management Plan and met the requirements of a new Virginia-mandated surge capacity plan.

In addition to providing an objective, standardized approach for discharge during a high alert, terrorist event or disaster, the AcuityPlus system enabled Inova Loudoun Hospital to assess discharge readiness on a daily basis, facilitate patient discharge during peak census, and assist nurses to identify patient discharge planning needs.