



**CRISP  
REGIONAL**



***“We Go Farther So You Don’t Have To”***

# Chest Pain

Budget - \$259,758.06

## Major Resources & Activities:

- Purchased the 6 LifePak 15 upgrades. 4 for Crisp EMS and 2 for Dooly EMS.
- Purchased LifeNet Premium Receiving Station.

## Outputs & Outcomes:

- Decrease of inappropriate patient transfers
- Decrease transfer time for STEMI patients
- Percentage increase of appropriate patients treated at Crisp Regional ED.
- Gain medical interpretation

## Performance Measures:

We have seen an increase in the number of MI patients brought in by EMS. We averaged 4.5/mth in 2015 and are trending at 5.2/mth in 2016.

We will continue with this project and push on toward providing more cardiology services.



# School Based Clinic

Budget \$67,888.00, Remaining

## Major Resources & Activities

- Partnered with Crisp County Board of Education
- Partnered with AAPHC for school clinic.
- Renovate existing school nurse area to become a true clinic.
- Purchase Telemedicine cart for mental health consults with Psychiatrist. AAPHC is working to place a LCSW in the school at least once a week.

## Outputs & Outcomes

- Increase access to healthcare for those without
- Decrease improper use of ED as primary access point for healthcare
- Increase access to mental health for children
- Decrease absenteeism

## Performance Measures

- We have seen a slight decrease in pediatrics in the ED especially in our Medicaid patients. We saw 55 Medicaid Peds last September and 49 this September. 60 last October and 51 this October.
- School attendance has increased by 1% compared to last school year.  
2015-16 - 95.76%  
2016-17 - 96.16%
- Our plans are to continue this project. The clinic numbers continue to increase and the mental health piece will add to volume. The FQHC needs 250 visits per month to be sustainable. They feel this will come with time.



# Nursing Home

\$20,772.29

## Major Resources & Activities

- EMS Telemedicine
- Implement the use of telemedicine via EMS when they are called to transport patient to hospital

## Outputs & Outcomes

- Performed several telemed consults which resulted in transport
- The impact has not been significant because there haven't been many opportunities to perform telemed consults.

## Performance Measures

- No significant impact on readmissions

# Remote Treatment Stroke Center Designation

Budget \$149,848.20

## Major Resources & Activities

- Telemedicine units in ED & ICU
- AcuteCare 24/7 Emergency Neurology Services
- Increased bandwidth

## Outputs & Outcomes

- Goal was to reduce outmigration. We have seen a slight reduction.
- Increase the number of stroke patients treated at Crisp Regional. We have seen a slight increase. We began offering 24/7 emergency neurology consults since April. Have done 10 consults.
- 12 Months Prior to Starting the Program (April 2015 – March 2016): 59% of the patients in our service area (3 counties) were admitted to hospitals other than CRH with primary diagnosis of a stroke.
- April 2016 – June 2016: 58% of the patients in our service area (3 counties) were admitted to hospitals other than CRH with primary diagnosis of a stroke. (June is the most current data available for outmigration.)
- We are nearing our site inspection for RTSC.

## Performance Measures

- Holds us to a higher standard and let's patients know that we've gone the extra mile to offer them the most quality stroke treatment available to our hospital.
- Issue is sustainability due to the cost.



# Frequent Fliers

Budget \$71,703.00

## Major Resources & Activities

- We have utilized funds to purchase two portable telemed carts for EMS.
- Supplemented a Community Paramedic salary along with a percentage of time for the other paramedics salary reimbursement.

## Outputs & Outcomes

- Goal is to reduce 30-day readmits and ED Frequent Fliers. Of the 27 patients in the program, we have only had 6 patients readmit since the program began in January. Savings generated by reducing these readmits and Frequent Fliers is \$206,684.
- Patients to become compliant with their chronic illnesses.

## Performance Measures

- We have seen a reduction in overall patient readmissions. 25.6/mth in 2015 and trending at 17.25/mth in 2016.
- We have reduced the ED visits of the patients we follow by approximately 40%.
- Patients we follow are becoming more compliant with their chronic illnesses
- We will continue this program.



# Patient Experience

Budget \$86,656.33

## Major Resources & Activities

- Contracted with Studer Group

## Outputs & Outcomes

- Implement an organization-wide leadership evaluation system to hardwire objective accountability.
- Increase alignment and accountability of providers.
- Create a process to assist leaders in developing skills and leadership competencies necessary to attain desired results.
- Expected outcomes:
  - Improved HCAHPS (We have made improvements in overall HCAHPS from FY2016 to Q1FY2017. In June of 2016 we went from a 2 Star rating to a 3 Star rating.)
  - Improve pay-for-performance success.

## Performance Measures

- Improved HCAHPS
- Decrease in Turnover
- Improved Employee Satisfaction





# CRISP REGIONAL

## Impact Summary

Chest Pain - We are identifying earlier and transporting to appropriate facility.

School - Positive impact bc it has furthered CRH role in the community as a care provider. Created collaborative relationships. May not be sustainable if the other FQHC is able to move enough visits off to where it has to be subsidized.

Nursing Home - Have the ability to screen patients prior to a transfer.

Stroke - We are providing a higher level of care to our patients. Not sustainable given the current cost.

Frequent Fliers - Reducing readmissions and making patients become compliant with their chronic illnesses.

Patient Experience - Create a culture of accountability and improved patient perception.

## Lessons Learned

- ▶ Physician buy-in imperative
- ▶ Other entities bring different strengths and value
- ▶ Various avenues for providing healthcare
- ▶ These projects take time to properly implement.