

<p>Outcome</p>	<p>Having improved the process there was a desire to look at outcomes. The initial plan was to assess the impact on readmission rates following improved discharge instructions wherein the patient is made more aware of the disease process and their role in self-care. The finance department became interested in the resultant cost savings.</p> <p>The economic analysis was able to quantify substantial cost savings via compliance in the form of reduced length of initial stays and reduced readmission rate. They also projected an improved mortality rate. The findings led to Administration's belief in and commitment to GWTG, and ultimately let to increased resources, including those needed for a dedicated data abstractor.</p>
<p>Process / Timeline:</p>	<p>It took 4 months to implement the revised discharge practices and obtain comparative data for the economic analysis:</p> <ul style="list-style-type: none"> • While implementing revised discharge practices the team met weekly for 15 minutes to review data. • Cost benefit analysis incorporated data from Med Pro, Medi-Qual and core measures • Team included: <ul style="list-style-type: none"> ○ Physician Champion ○ VP of Medical Affairs ○ Finance department to provide cost/day and financial analysis ○ Corporate Compliance for obtaining Med Pro data regarding readmissions, and for statistical help ○ Medical Records department for core measure data ○ Data abstractor to pull information
<p>Findings:</p>	<p>Reduced length of stay, at \$392/day, contributed to hospital's margin:</p> <ul style="list-style-type: none"> • Readmits reduced to 7.7% (vs. state benchmark of 14.7%), along with shorter length of stay (down to 3.6 days) • Original admission stay reduced from 5.5 days to 4.6 days • The financial gains realized by a decrease in our heart readmit rate to 7.7% was \$31,046. <p>(This was based on a LOS of 3.6 days and 22 fewer readmits with variable costs of \$392 per day - realizing our readmits stayed a day less than an actual admission with heart failure).</p> <p>315 heart failure admissions with a decrease LOS of one day = \$111,132 in cost savings</p>

	Predicted 10% reduction in mortality as well.
Impact:	<p>Improved compliance utilizing ABC method: 100% within 4 months.</p> <p>Hospital proactively supports GWTG. Hospital agreed to fund a clinical abstractor (had previously been a non-clinical person); now have 2 clinical abstractors: one collecting data concurrently on floor, the other retrospectively, with plans to cross-train them.</p> <p>Improved perception of hospital: results publicized in the Journal for Medical Quality; profiled in American Hospital's Superior Guide to PI.</p>
Advice:	<p>Involve Finance Director:</p> <ul style="list-style-type: none"> • Explain what you are looking for • Working together as a team to gather and analyze data is critical