

## MDS Alert

### Case Study: Bringing On an MD + NP Hospitalist Team Proves to Be a Smart Move for This SNF Provider

**The approach achieved several goals at once, including reducing rehospitalization.**

SNFs looking to reduce emergency department visits and rehospitalizations -- and tap a new market of higher acuity patients -- might consider the model adopted by Providence St. Joseph Care Center.

The nursing facility has accomplished those goals and more by hiring an adult nurse practitioner (ARNP) full-time and a medical doctor part-time, both of whom are hospitalists, says **Sally Denton, RN**, executive director/administrator of the center in Spokane, Wash. St. Joseph's is part of a multiprovider system that includes two hospitals.

The primary reason for making the change, says Denton, was to decrease hospital readmissions and ED transfers.

The ability to manage higher acuity patients is an "additional benefit."

Having the hospitalists available has decreased the number of patients "with revolving hospital readmissions that were unnecessary or frivolous," says Denton. "By frivolous, I'm referring to instances where the family demanded we send the person to the ED or hospital so a doctor could see him/her because we didn't have a doctor or NP immediately available on site."

Having a hospitalist available also helps the facility respond quickly to a change in condition, such as a urinary tract infection, to prevent the person from developing sepsis, Denton says. In addition, the "ARNP hospitalist acts as a primary care provider for the majority of our patients."

The approach has led to higher quality, more costaffordable care -- and "it plays into our system's goal in terms of becoming an accountable care organization, which is a strategic plan over the next two years," Denton relays.

#### Managing Patients With Mechanical Hearts, Other Complex Conditions

Since starting the program as a pilot in October 2009 and formalizing it in December 2010, the SNF has seen its patients' severity of illness increase, Denton relays.

About 25 percent of the patients are higher acuity, Denton reports. "With a score of 4 being highest, our patients run from 2.5 to 3" on severity of illness (SOI) coded in hospitals upon discharge, she explains. The overall length of stay for Medicare patients is 30 days.

Providence St. Joseph Care Center takes patients with mechanical hearts, wound vacs, TPN, and multiple IV antibiotics. The nursing facility doesn't accept patients with vents but will take someone with a fairly well-established tracheostomy, Denton says.

"We are a place in the community where people with mechanical hearts can go to transition to the community," Denton reports. Sometimes the patients who receive the mechanical hearts are waiting for a human heart transplant. If not, the mechanical heart becomes a prosthesis, she adds. "The patients with the mechanical hearts can go home if they have a 24/7 caregiver in case of equipment malfunction."