

Beth Israel Deaconess Hospital-Milton

Hospitalist Attending Assignment Project

The Problem

Hospitalist attending assignments were reviewed and revised on a daily basis, dependent upon practitioner schedule, patient acuity and shift. This resulted in patient safety, logistical and communication issues, as well as a significant waste of resources specific to:

- Absence of collated information that would promote a more rapid development of an appropriate daily hospitalist daily patient assignment
- Hospitalist manually created a daily paper assignment (60 minute process) that was distributed and posted on patient care floors – waste of MD time and potential for privacy breach
- Hospitalists did not have ability to update attending physician in Meditech system – resulting in numerous rejected orders (incorrect attending, i.e., may change during a patient's hospitalization)
- Multiple pages/calls made each morning by Pharmacists and Nurses to wrong Hospitalist to clarify orders, request orders, report clinical concerns, and request daily patient list (“The Bible.”)

Aim/Goal

- Standardize the process for electronically updating Meditech with correct Hospitalist attending assignment, eliminating paper lists and electronically establishing a timely ‘one source of truth’
- Single custom Meditech report accessible to all Hospitalists will provide necessary information for the creation of daily patient attending assignments

The Team

- William Burke, Administrator APG Hospitalist Program
- Jessica Crowley, IS Systems Analyst
- Rachel Kleiman-Wexler, Director, Pharmacy Services
- Tom Mailloux/Roger Orcutt, IS Programmers
- Gail Schroth, Director, Patient Business Services
- Daniel Siao, MD, Medical Director Hospitalist Service
- Eileen Pacy, Privacy Officer / Director, HIM

The Interventions (Select Actions Taken)

- Attending physician ‘Sign-up’ function made available as part of July 2013 Meditech 5.66 upgrade. All care providers able to identify current attending physician.
- Single custom Meditech report accessible to all Hospitalists developed to provide collated and necessary information for daily patient attending assignments

The Results/Progress to Date

ORIGINAL ISSUE	IMPACT OF ACTIONS
Inability to develop clinically appropriate patient assignment for hospitalists due to lack of compiled information	1. Report developed, process improved
Manual creation and use of paper attending list	2. Eliminated: 60 minute creation time 3. Eliminated: List distribution transport time 4. Eliminated: Risk for patient privacy breach related to paper list
Numerous daily phone calls/pages to incorrect hospitalist (> 75 – Nursing/ Pharmacy, others)	5. Eliminated
Paper waste and excessive paging (noise reduction on inpatient units/patient experience) - thousands per year	6. Eliminated
Hospitalist unable to change assigned attending in Meditech EMR – system did not permit.	7. Change of attending assignment now possible 8. Electronic “one source of truth” for hospitalist attending physician
Numerous rejected orders (due to assignment of incorrect attending hospitalist in EMR).	9. Eliminated: Rejected orders due to incorrect hospitalist assignment

Lessons Learned

- Increased productive time for Hospitalists to attend to clinical issues
- Elimination of multiple unnecessary process steps (LEAN success)
- Resource reduction – need to apply to other complex processes with high waste potential

Next Steps/What Should Happen Next

- Spread to Private Attending admissions
- Spread to House Officer admissions with House Officer program transition: House Officer as ‘Admitting MD’ / Hospitalist/PCP signs up as Attending MD in a.m.

