"Staff nurses want to come into work every day, they want to practice at the highest level of their license and they want to positively impact patient care. And when we have the right number of nurses taking care of the right number of patients, good things happen."

—MaryPat Sullivan, RN
CNO/Chief Experience Officer
Overlook Medical Center
Summit, N.J.

The C-suite at Overlook Medical Center in Summit, N.J., had an objective to improve clinical outcomes and reduce labor costs. They identified three key initiatives to achieve this objective: streamline throughput, engage staff and improve resource utilization for cost reduction. As they worked to accomplish their objective, the medical center achieved something far greater than the clinical and executive staff could have expected: a cultural transformation.

Targeting Throughput, Engagement and Costs
Situated on the edge of the Watchung Mountains in northern New Jersey, Overlook, part of the Atlantic Health System, is a 504-bed, nonprofit teaching hospital located in a residential area. Because of its unique location, it is difficult for the health system to grow in size, despite increasing patient numbers, according to MaryPat Sullivan, RN, Overlook’s CNO and chief experience officer. “As a result, throughput was a challenge,” she says.

At the same time, the medical center wanted to improve staff engagement regarding scheduling and resource utilization. The idea was to help nursing staff gain more control over their work environment, which could quickly become overwhelming due to a patient census Sullivan describes as volatile.

“We’ve budgeted for an average of 335 patients per day, and we range anywhere from 260 to 420 patients, so planning for us is complicated,” she explains.

Sullivan and her team needed a solution that allowed staff to forecast patient throughput. In addition, they wanted to empower executives and all patient care staff—from nursing to pharmacy to environmental services—with readily available information to ensure the highest quality, most efficient patient journey.

“The C-suite executives needed a dashboard to monitor throughput to see how we’re assisting patients with transitions throughout the organization,” Sullivan says. “The staff wanted to know information such as, ‘What could patient census look like on any given unit one week, four weeks, eight weeks or 12 weeks out?’ We needed to accurately forecast to strategic and near-term timelines and manage to actual census in real time.”

Implementing Strategy for Results
To help leaders address these challenges, Overlook implemented the McKesson Integrated Capacity Management strategy. This strategy uses three integrated solutions to move patients successfully through the system with the care they need in the time allotted by the Centers for Medicare & Medicaid Services. The McKesson Capacity Planner provides predictive analytics to align patient demand with capital and physical resources; McKesson Performance Visibility enables transparency for length-of-stay reduction, improved patient flow and quality performance; and ANSOS One-Staff workforce management facilitates accurately deployed staff, based on patient demand and acuity and staff scheduling needs.

Since implementation of the ICM strategy, Overlook has completely transformed its bed-round process. Previously, the
nursing staff at Overlook would meet several times throughout the day to discuss patient status.

Now, using capacity management, nursing has instant access to complete real-time patient status, saving valuable time and improving throughput. Additionally, aligning forecast capacity with real-time demand provides nursing with greater control, improving staff satisfaction.

Having predictive data that can be accessed by both clinical staff and the executive team creates unrivaled transparency within the organization, empowering staff, according to Tamira Harris, PhD, CPHQ, business advisor, McKesson. “Staff can use information at their fingertips to make changes, and they have the confidence to do so with highly accurate data,” she reports. “This reduces last-minute shuffling in the staffing office.”

Since implementing an ICM strategy, Overlook has seen improvements, including $3,400 estimated daily labor cost savings from flexible nursing units, $9,931.61 per day savings in critical care and $250,000 savings from reduced overtime.

In addition, the medical center has drastically improved boarded patient hours in its ED. According to Sullivan, prior to using an ICM strategy, Overlook was averaging approximately 9,000 boarded patient hours per month, which resulted in overtime, poor patient experience and staff dissatisfaction. At press time, the organization has decreased boarded patient hours by 80 percent, to just over 1,800 boarded patient hours.

A “Great Leveler”

An unintended, yet welcomed, consequence of implementing the strategy, say Sullivan and Harris, is the way it has brought clinical staff and leadership together, transforming the organization’s culture.

“The solutions that enable this strategy provide a single source of truth,” Harris says. “Everybody sees and shares the same information and understands what everybody else is talking about. It’s a powerful mechanism for building relationships between staff and executives.”

One of the nurses at Overlook perhaps put it best, recalls Sullivan. “One night, I was making night shift rounds, and we were all talking about the solutions, how we’re utilizing them, how we can be more efficient and some of the success stories we’ve already seen around quality,” Sullivan says. “One of the nurses called the Integrated Capacity Management strategy a ‘great leveler’— because it breaks down silos.”

To learn more about McKesson’s Integrated Capacity Management strategy, download the white paper Integrated Capacity Management for Health Systems: A Proactive Solution to Today’s Capacity Challenges from http://content.mckesson.com/ICMWPLPSocial.