Patient Throughput

Breaking Down Barriers to Timely and Effective Care

Discharge Optimization Helps Drive Better Outcomes

Quality of Care, Patient Safety, and Health System Performance Are at Stake

Acute care represents the largest source of revenue for most hospitals and health systems, as well as having the greatest impact on patient outcomes. Not surprisingly, a lot of time, energy, and resources are focused on increasing inpatient transfers and admissions. But these efforts often are sabotaged by discharge delays — which increasingly stem from unwieldy referral management processes to post-acute care (PAC) or behavioral health facilities.

The adverse impacts are far-reaching. Besides frustrating patients, family members, and caregivers, throughput bottlenecks can reduce quality of care and limit the health system's ability to admit new patients, negatively affecting the organization's financial performance.

In recent years, throughput has deteriorated significantly, driving up average length of stay (ALOS) and compromising effective care orchestration: the ability to deliver healthcare services precisely when needed, in the most appropriate setting.

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Quite simply, to prevent throughput bottlenecks, health systems must address shortcomings in the discharge process. The good news is, it's possible to streamline and accelerate inpatient discharges through a multifaceted solution involving three overarching and complementary strategies:

- Adopting proven processes and protocols

- Implementing purpose-built technology

- Empowering staff and reducing their administrative burden

UNDERSTANDING THE WHOLE STORY

At first glance, a number of possible barriers to patient throughput present themselves. Insufficient capacity is one of the most commonly cited culprits, along with inadequate system load balancing. COVID-19 has played a role during the past few years, although patient throughput issues were present prior to the pandemic and likely will continue long after the end of the public health emergency.

A commonly overlooked factor is the referral management process — specifically, delays in discharging acute-care patients to PAC facilities or home-based recovery.

Factors Contributing to Acute Care Discharge Delays

- ✕ Manual, paper-based PAC referral systems

- ✕ Siloed departments and disjointed processes

- ✕ Inconsistent discharge standards

- ✕ Lack of visibility to system-wide capacity and performance

- ✕ Prior authorization delays by third-party payers

- ✕ Patient transportation hold-ups

- ✕ Lack of data insights on PAC network acceptance, denial, and performance trends

- ✕ Inability to efficiently reach numerous PAC providers to discharge complex patients

PAIN, RISKS, AND COSTS AT ALL LEVELS

Who feels the pain when patient throughput is impeded? The question might be better framed as: Who *doesn't* feel the pain? Consider the impacts at every stakeholder level:

PATIENTS
At risk for negative health outcomes and dissasfaction with the provider.

CAREGIVERS
Families and other care assistants feel helpless and stressed knowing where their patients are — and where they should be.

HEALTH SYSTEMS
Realizing increased costs and decreased revenue due to avoidable inpatient days and missed referral opportunities.
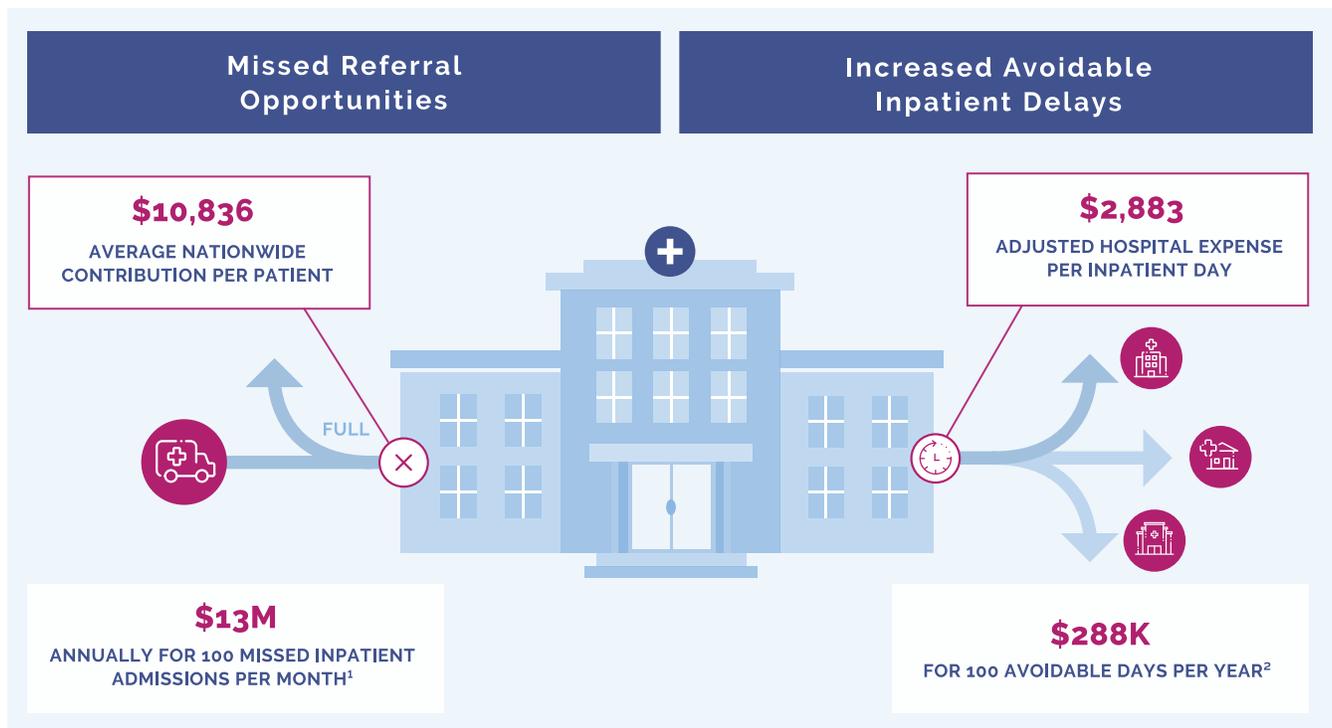
HEALTH PROVIDERS
Risk for increased burnout due to not being able to care for the right patients at the right time due to capacity and throughput barriers.

The financial costs are often hidden and always significant.

Missed Referral Opportunities	Increased Avoidable Inpatient Delays

$10,836
AVERAGE NATIONWIDE CONTRIBUTION PER PATIENT

FULL

$2,883
ADJUSTED HOSPITAL EXPENSE PER INPATIENT DAY

$13M
ANNUALLY FOR 100 MISSED INPATIENT ADMISSIONS PER MONTH[1]

$288K
FOR 100 AVOIDABLE DAYS PER YEAR[2]

Clearly, patient throughput bottlenecks touch every aspect of healthcare, from the welfare of patients and caregivers to the financial viability of the health system. Given the complexity and magnitude of the problem, how are health systems knocking down the barriers to patient throughput?

A MULTIFACETED SOLUTION TO A COMPLEX CHALLENGE

Effective patient throughput helps ensure patients receive the right care, in the right place, at the right time. But with increasing complexity in the patient journey, coupled with growing difficulty in achieving timely discharges, reaching this goal has become more elusive. Today, breaking down throughput barriers must be multifaceted, involving processes, technology, and, above all, people.

1   University of Utah David Eccles School of Business study, using nationwide data from a variety of sources, including AHA Hospital Statistics and AHRQ Online Database

2   https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/

Adopting Proven Processes & Protocols
From health systems that are overcoming patient throughput barriers, a number of best practices have emerged, including:

Measurement and analysis — obtaining a clear picture of the patient journey to identify and eliminate bottlenecks wherever they occur

Discharge planning upon admission — laying out a clear pathway to discharge, with a backup plan, that's embraced by the entire care team and communicated to the patient

Multidisciplinary rounds — conducted early in the day, bringing together all stakeholders in patient care (hospitalists, nurses, pharmacists, physical therapists, etc.) to proactively identify the needs of patients and keep them moving on the pathway to discharge

Cross-departmental collaboration — breaking down silos through technology-enabled information sharing, as well as through side-by-side work arrangements, such as embedding a care manager or social worker in the emergency department to help evaluate patients for the appropriateness of admission or discharge

Advance transportation arrangements – notifying transportation vendors of upcoming discharges, helping to ensure timely patient transfers to the accepting facility

Use of discharge lounge — when needed, moving discharge-ready patients out of their acute-care bed to a dedicated area where they can wait for a ride

Revamping the referral management process — including adoption of an automated system enabling faster, more standardized transitions to rehab, skilled nursing, and other PAC facilities and services

Boosting acceptance rates — by establishing a curated network of vetted facilities and services, with the data and insights to hold them accountable

TACKLING PAC PLACEMENTS – ENABLING BEST PRACTICES

Delays in PAC discharges create one of the biggest barriers to patient throughput. In fact, for patients who need post-acute care, ALOS has increased 24% since 2019. This has prompted health systems to make sweeping changes to the full scope of their referral management practices.

For a growing number of health systems, the transformation involves technology that removes paperwork and manual tasks from the process, while simplifying patient transfers to a curated set of PAC facilities. The technology goes hand in hand with best practices, which include:

- Identifying high-performing PAC providers to include in your curated network

- Securing agreements with PAC providers to ensure they will accept challenging cases

- Offering to educate PAC providers about how to use your PAC technology platform

- Holding meetings with PAC providers to discuss expectations and opportunities for improvement, backed by performance data

- Engaging with patients early in their hospital stay to identify a preferred set of PAC options

- Bringing financial authorization processes in-house to reduce wait times and lessen uncertainty about PAC transfers

Supported by the right technology, all of these elements work in tandem to accelerate PAC transfers and ensure the placement of patients with the best PAC facilities and services meeting their needs.

Technology: Think Holistically

Taking control of patient throughput can start with referral management improvements, and is maximized when also addressing demand and capacity within the larger context of care orchestration. The choice of a technology platform should empower this holistic approach.

As a starting point, the technology should be purpose-built for care orchestration and usable across all care settings, enabling systemwide control, communication, and visibility. Other IT systems, such as electronic health record (EHR) and bed management, simply don't address patient throughput and other facets of effective care orchestration. At the same time, the technology platform should be fully interoperable with your EHR and other IT systems.

Aggregating data from all of these systems, an industry-leading care orchestration solution will offer advanced data and analytics capabilities, including actionable insights into referral patterns, performance, volume, and barriers to efficient throughput.

Advanced functionality within the technology platform can pay off in big ways. For example, a PAC placement component will streamline the process of matching patient needs to the optimal PAC setting, lowering the risk of readmission and drastically reducing the time staff spend on administrative work. Automated transportation coordination delivers further efficiencies to PAC placements.

Lastly, don't overlook intangibles that can help you realize a robust return on your technology investment — including access to your technology partner's clinical, operational, business, and change management expertise.

The Right People, Strategically Deployed

Even in the face of severe staffing challenges, many health systems have demonstrated an ability to hire and retain high-quality staff who are fundamentally important to eliminating discharge delays and accelerating patient throughput. These individuals possess strong communication skills, high emotional intelligence, innovative problem-solving skills, and complete buy-in to standardized care models and pathways. In addition, they are deployed in strategic ways, such as:

- Being change agents, enlisting frontline staff to participate in change management initiatives, by including their real-life perspectives and building credibility with their peers

- Leading among peers by tapping into their expertise and influencing others to follow standard work and processes

Enabling these efforts, social workers and care managers are equipped with proven technology streamlining PAC placements. This reduces administrative tasks, eliminating paper- and fax-based transfer requests, and enabling them to work at "top of license".

EVALUATING THE SUCCESS OF A THROUGHPUT INITIATIVE

With all elements of an effective patient throughput initiative working in sync, the positive impacts are felt across the entire healthcare ecosystem.

PATIENT TRANSITIONS

Less downstream congestion translates to more efficient transitions and transfers on the front end. For patients who are acutely ill or injured, this means faster access to advanced, potentially lifesaving, medical care. Following treatment, it also enables more timely transitions to a hospital bed and finally to the most appropriate post-acute care setting, whether it's a rehab/skilled nursing facility or home with services.

SYSTEM CAPACITY

Effective patient throughput can significantly reduce ALOS, which frees up beds, staff, and resources to accommodate more incoming acute-care patients. It also helps decrease ED boarding, allowing emergency physicians and support staff to focus more fully on the most severely injured and ill patients.

PATIENT OUTCOMES

Patients who receive more timely healthcare services also receive higher quality care and experience better outcomes. In addition, prompt and appropriate PAC discharges lessen the likelihood of readmission and its associated health risks, including hospital-acquired infections and injury-causing falls. The icing on the cake: Patients and their families experience greater satisfaction and will demonstrate loyalty to your health system.

STAFF PRODUCTIVITY

No longer burdened by administrative tasks, clinical staff can devote more time to core responsibilities and work at the top of license. Overall, the time consumed by administrative duties decreases dramatically. For example, automation can dramatically reduce the time required for PAC placements from 20 hours to just two hours per employee on a weekly basis.

TOP AND BOTTOM LINES

Improving patient throughput can significantly drive both revenue enhancement and cost savings. By creating capacity, faster throughput opens the door to more acute-care (high-margin) patients. It also enables you to say "yes" more quickly and consistently to referring providers, who experience higher satisfaction and feel inclined to send more of their patients to you.

On the cost side, faster throughput reduces avoidable days and associated expense to the health system (think $2,883 per inpatient day). By improving the PAC discharge process, you also decrease the risk of patient readmission, which costs an average of more than $14,000 per patient.

PARTNER WITH THE CARE ORCHESTRATION LEADER

For addressing patient throughput and other facets of effective care orchestration, ABOUT offers the most comprehensive solution, encompassing technology and consulting expertise. Today ABOUT partners with more than 100 health systems nationwide. Thanks to streamlined patient throughput, coupled with increases in demand and capacity, these organizations report significant impacts to their business.

34%
REDUCTION IN ALOS

30 min
DECREASE IN RESPONSE TIMES TO TRANSFER REQUESTS

29%
BOOST TO INBOUND PATIENT TRANSFERS

20%
DECREASE IN LEAKAGE TO OTHER HEALTH SYSTEMS

100%
RETURN ON INVESTMENT IN 151 DAYS AND A LONG-TERM ROI OF 500%

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About Us

ABOUT offers a flexible, purpose-built solution that
empowers hospitals and health systems to operate as
one connected network of care. We enable easy access
for clinicians to move patients into and out of the acute
care setting — getting them to the next, best care
setting faster and easier. Complemented by our clinical
experts and best practices, we provide health systems
the necessary controls and insights to grow with
resilience, drive clinician effectiveness, and improve
patient outcomes.

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