

The Development of the Patient Transfer Center at Ochsner Medical Center

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ABSTRACT

Transfers are a major source of patients for the Ochsner Medical Center. To facilitate transfers, a “transfer center” was developed. This article describes the rationale for this center, how it was developed, and the results of its implementation.

The Ochsner Medical Center is a 473-bed tertiary and quaternary care full-service facility. Referrals are a major source of patients for the facility and medical group. Prior to development of a transfer center, the transfer process was at best inconsistent. Referring physicians would either attempt to call an accepting physician specialist or contact personnel in the Ochsner emergency room. The emergency room personnel would then contact an accepting specialist, who would call the nurse supervisor, who would call bed control to ensure bed availability. This inconsistent process was cumbersome and frequently led to loss of referrals.

To improve the transfer process, Ochsner opened its Transfer Center in mid-2008. The Transfer Center is a registered nurse-staffed, 24/7 service to referring physicians and hospitals designed to ease the transfer of patients needing tertiary or quaternary care into the Ochsner system.

RATIONALE

The strategic rationale for providing such a service came down to three major points. First, the hospital has the capability to meet a community need for tertiary and quaternary care. Many facilities within the Gulf Coast region lack full subspecialty call coverage for their emergency departments. Likewise, as the average life expectancy continues to increase and the



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physician shortage worsens, the need for subspecialty staff to handle emergency care is likely going to increase. Many small communities in our region lack some subspecialties for emergencies, and Ochsner felt it could help meet that need by ready availability of the Ochsner medical group and an easy to access system.

Second, the Ochsner system would benefit by continued growth of its scope and market. The health system expanded post-Katrina with the purchase of three hospitals in the greater New Orleans area and a significant increase in its medical group. However, the population growth of the region post-Katrina has been slower than originally anticipated. Given the length of time for the region to fully repopulate and to meet the system’s business and growth needs, Ochsner needed to expand its reach. The Transfer Center, in addition to the service it provides to referring hospitals and physicians, has enabled Ochsner to continue to increase the number of discharges of patients who live 25–150 miles from the campus each quarter since it was opened.

Third, the strategy helps maximize Ochsner’s strength: caring for complex tertiary and quaternary patients. Ochsner’s expertise in cardiovascular care, oncology, surgery, neurosciences, transplant, pediatrics, and critical care is well documented, and the Transfer Center has enabled referring facilities and doctors to access that depth and skill through the

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redesigned processes. The depth in the group practice has strengthened significantly in 2007 and 2008. Ochsner now has nearly 500 medical group practice members practicing in the New Orleans region and call coverage for every service needed. This broad specialty coverage is not the case for many smaller facilities across the region.

RESULTS

Prior to Ochsner developing the transfer center, our process for transfer acceptance was inconsistent. As mentioned previously, the process typically started with a phone call to the facility, answered by a technician or administrative support person in the Emergency Department. That individual, frequently with minimal/no medical training, would work with an Ochsner specialist to accept the patient and coordinate communication between the referring doctor and accepting doctor. From there, the staff member would attempt to coordinate with bed control for bed assignment, admitting for financial clearance, and flight care for transporting appropriate patients. Unfortunately, this technician had other roles in the Emergency Department, thus leading to fragmented communication and minimal focus on the referring physician and referring facility and limited ability to expedite the process.

Under the redesigned structure, the center has a goal to accept each transfer within 10 minutes, with one phone call. While not currently 100% successful, the Transfer Center has shown tremendous progress. The current structure and process includes:

- Transfer Center staffed 24/7 with registered nurses whose sole role is to coordinate transfers into the hospital.
- Bed Control as a component to ensure expedited bed assignment.

- A case manager from Ochsner's Case Management team within the center to conduct the appropriate financial clearance after the patient has been accepted.
- Flight Care and Patient Transport participation on the Transfer Center team to ensure appropriate and timely communication and dispatch should helicopter or air transit be needed.

The redesigned process has provided many benefits, such as:

- Expedited transfer and more timely care for critical patients.
- Centralized intake for all transfers, with an expanded ability to track data on which institutions and physicians are referring to the Ochsner facility, allowing it to know its business better.
- Improved communication back to the referring physician. Ochsner has suffered with the reputation—deservedly—that it was not good at communicating with referring doctors. Part of the Transfer Center's role is to ensure that the referring physician receives feedback from Ochsner regarding the patient's outcome.
- Transfer volume growth of 30%, to an average of 80 transfers/week, within 4 months of developing the center.

In summary, the Transfer Center has enabled the Ochsner Medical Center to leverage its strength as a multispecialty group practice. This has produced timely access to care for patients throughout the region. In addition to meeting a community need, the center has produced positive financial results and fostered new referral relationships. Near-term goals for the Transfer Center include transfer acceptance with one phone call 80% of the time and 25% growth of our transfer business over the next 3 years.