

Quality Report Card

Licking Memorial Health Systems



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EMERGENCY CARE

Emergency Medicine Nurse Practitioners and Physician Assistants

Nurse practitioners (NPs) and physician assistants (PAs) are advanced healthcare providers who work in many different settings, including primary care, surgical services, emergency medicine, and a variety of other specialties. These types of care providers began practicing medicine in the United States in the 1960s in response to physician shortages, and their role within the healthcare industry has grown continuously since then. According to the Bureau of Labor Statistics, there are over 130,000 NPs and nearly 100,000 PAs in the United States, and both professions are expected to grow by about 35 percent over the course of the next decade.

While the requirements to become either an NP or a PA are different, both receive extensive education and training. NPs receive certification through the American Nurses Credentialing Center or the American Academy of Nurse Practitioners, and PAs receive certification through the National Commission on Certification for Physician Assistants. Both are required to participate in continuing medical education, and/or complete a recertification exam periodically in accordance with national guidelines.

While their medical expertise does not match that of a physician, NPs and PAs are highly valuable additions to a medical team. In general, NPs are authorized to practice greater independence in clinical decision-making, though both provide many of the same services. Each provider's specific duties vary based on state law, the policies of the employer, and

their education and level of experience. These duties, which often overlap with those of a physician, may include:

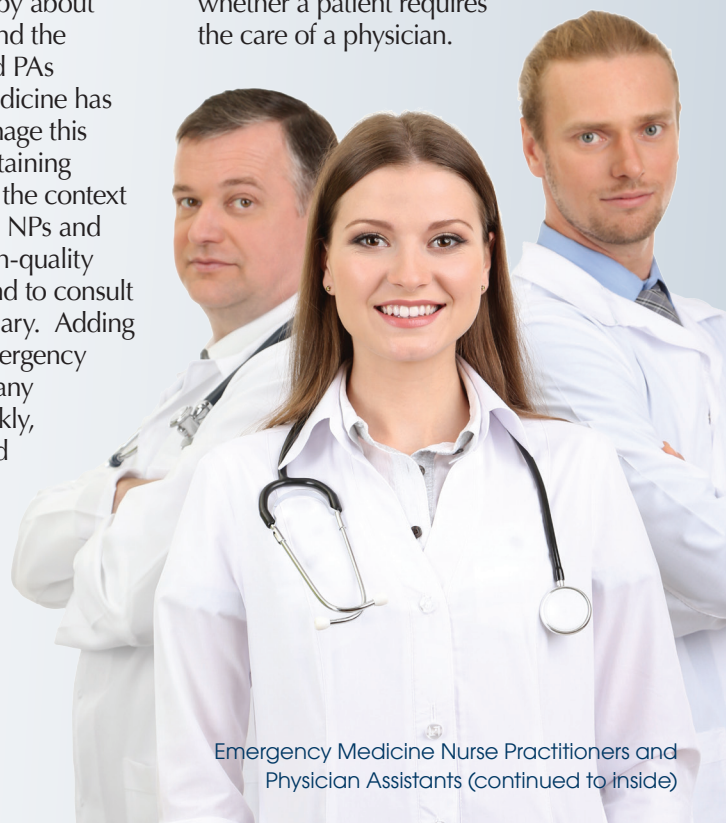
- Taking a patient's medical history
- Conducting physical examinations
- Diagnosing and treating illnesses
- Ordering and interpreting tests
- Offering recommendations for preventative care
- Assisting with surgical procedures
- Prescribing medication
- Delivering babies

Emergency department visits in the United States have increased by about 20 percent since the 1990s, and the increasing number of NPs and PAs specializing in emergency medicine has helped many hospitals to manage this significant growth while maintaining positive patient outcomes. In the context of an emergency department, NPs and PAs are trusted to provide high-quality care to a variety of patients and to consult with a physician when necessary. Adding these care providers to an emergency department staff allows for many patients to be seen more quickly, which often leads to improved patient satisfaction.

Local patients visited the Licking Memorial Hospital (LMH) Emergency Department more than 55,000 times in 2015. The triage process ensures that patients with life-threatening conditions receive immediate

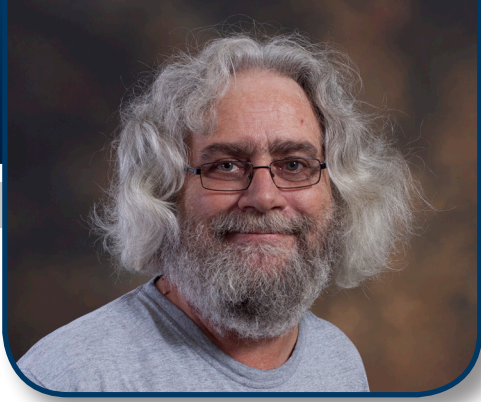
care from a physician, while those with less serious illnesses and injuries are seen as efficiently as possible in the order of the severity of their condition.

For patients who visit the LMH Emergency Department with non-life-threatening conditions, an NP or PA may be able to provide care more quickly than a physician, without compromising the quality of that care. Emergency medicine NPs and PAs are highly experienced and knowledgeable regarding a wide variety of procedures, and are trained to recognize their limitations and to quickly determine whether a patient requires the care of a physician.



Emergency Medicine Nurse Practitioners and Physician Assistants (continued to inside)

Patient Story – Joseph Harig



Joe Harig came to a crowded Emergency Department (ED) this past winter with extreme abdominal pain and was met with proactive and excellent service. He thought he was suffering from appendicitis and could hardly walk. Even though both waiting rooms were full, he was attended to almost immediately, thanks to a Physician Assistant who initiated his care.

“They were very forthcoming that there were no beds available, but were proactive in using a Physician Assistant (PA) to start my process, and I was treated in a nearby triage room,” explained Joe. “Normally, hospitals really don’t do much for you until you are in a bed, but in this case, I was very appreciative of how Licking Memorial Hospital (LMH) handled the rush,” he continued. Joe also added that all of the staff members were very professional and compassionate, never showing any signs of stress due to the high volume of patients.

Joe’s PA was able to complete his evaluation, draw blood, start an IV and schedule the necessary computed tomography (CT) scan. Not only did the use of the Physician Assistant free up the physicians to treat patients in a timely manner, but it also decreased Joe’s wait time and improved his care. Despite the crowd, he was placed in a patient room

following a completed scan, which occurred within four hours of his arrival at the ED.

“My PA was very proficient and had a wonderful rapport with the nurses and staff! I can’t say enough about the excellent decision to utilize Physician Assistants in the ED,” Joe commented. “Whoever came up with this idea certainly was thinking outside of the box. It is a very proactive move that shows why LMH is a leader among Central Ohio hospitals.”

Joe was diagnosed with a severe intestine infection and treated with antibiotics. He spent four days at LMH and commented that the staff, physicians and food were fantastic. “The staff was very well-trained and consistent and they kept me apprised of my condition and treatment. The coordination and communication between the ED and my physicians was excellent.”

Joe noticed the same attentiveness with other patients when a mother brought in a baby who had cut her foot. The LMH staff member at the registration desk immediately assisted them upon arrival by cleaning and re-bandaging the infant’s bleeding wound. Joe also heard people in the ED talking about how much they liked the idea of being seen by the Physician Assistant before seeing the ED physician. Patients discussed how this arrangement made the wait time seem much shorter and felt like the Hospital really cared about them as a person and not just a number waiting to be seen. “It seemed like

everyone was pitching in to help and that the staff really cared about the patients and their families,” he added.

Pointing out that numerous aspects of LMH have changed and improved over the years, Joe discussed his wife’s experiences concerning his wife, who was treated at LMH just last summer, as well as those of his autistic son, who has undergone various procedures over the years. He noted differences in physician communication, scheduling and explanation of procedures. “You can have a bad experience anywhere, but when you find a facility that is willing to change and make things better, that’s an organization that is certainly moving in the right direction,” he concluded.

“I felt empowered by the care I received, along with the way the staff communicated with me and supported each other. I will certainly recommend LMH to anyone in need of care. I also would like to personally thank the Hospital for utilizing Physician Assistants in the ED. A small change can make a big difference to so many people.”

The LMH Emergency Department managed 55,627 patient visits in 2015. The Emergency Department is open 24 hours a day, seven days a week. Patients may not be seen in the order of arrival since those with the most acute conditions must be seen first. Patients are invited to visit the home page of the Licking Memorial Health Systems website, LMHealth.org, to check the approximate number of patients in the waiting area.

Emergency Medicine Nurse Practitioners and Physician Assistants (continued from front)

The LMH Emergency Department currently benefits from the support of one Nurse Practitioner and two Physician Assistants:

Jennifer A. White, C.N.P., joined LMH in 2014. She earned her Bachelor of Science in nursing degree and Master of Science in nursing degree at The Ohio State University in Columbus. She is certified as a family nurse practitioner by the American Academy of Nurse Practitioners.

Cameron S. Evans, PA-C, joined LMH in 2015. He earned his Bachelor of Science degree in health sciences and Master of Physician Assistant Studies degree from Butler University in Indianapolis, Indiana. He is certified by the National Commission on Certification of Physician Assistants.

Allan R. Thomas, PA-C, joined LMH in 2016. He earned a Bachelor of Science degree in human health and a Master of Science degree in physician assistant studies at the University of Nebraska in Lincoln, Nebraska. He also graduated cum laude from Upper Iowa University in Fayette, Iowa, with a Bachelor of Science degree in business management. He is certified by the National Commission on Certification of Physician Assistants.

Emergency Care – How do we compare?

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your healthcare choices.

1. During 2015, there were 55,627 visits to the Licking Memorial Hospital (LMH) Emergency Department (ED).

	LMH 2013	LMH 2014	LMH 2015	National ⁽¹⁾
Median length of stay in the ED for all patients*	2 hr. 39 min.	2 hr. 50 min.	2 hr. 59 min.	4 hr. 21 min.⁽¹⁾
Median length of stay in the ED for patients not admitted to the Hospital*	2 hr. 31 min.	2 hr. 41 min.	2 hr. 50 min.	2 hr. 41 min.⁽²⁾
Median length of stay in the ED for patients admitted to the Hospital*	3 hr. 43 min.	4 hr. 5 min.	4 hr. 5 min.	4 hr. 58 min.⁽²⁾
Median length of time from arrival until seen by a physician*	45 min.	30 min.	26 min.	29 min.⁽²⁾
Median length of time from the ED physician's decision to admit a patient until the patient arrives at the Hospital's patient room	1 hr. 8 min.	1 hr. 24 min.	1 hr. 23 min.	1 hr. 55 min.⁽²⁾
Percentage of patients who are in the ED for more than 6 hours	3.4%	5.3%	5.7%	7.4%⁽¹⁾

***LMH data represented on this table reflect nearly 100 percent of all ED visits, while goals reference Centers for Medicare & Medicaid Services hospital comparative data, which use a small sampling of all U.S. emergency department patients.**

2. LMH operates two urgent care facilities: Licking Memorial Urgent Care – Pataskala and Licking Memorial Urgent Care – Granville. Patients are encouraged to visit Urgent Care rather than the ED when they have illnesses and injuries that are not life threatening, but need immediate attention, such as ear infections, minor fractures and minor animal bites. Urgent Care visits usually require less time and lower costs than visits to the ED. During 2015, there were 22,441 visits to Licking Memorial Urgent Care – Granville, and 8,326 visits to Licking Memorial Urgent Care – Pataskala.

	LMH 2013	LMH 2014	LMH 2015	Goal
Urgent Care (Granville) time to see physician	18 min.	26 min.	19 min.	less than 30 min.
Urgent Care (Pataskala) time to see physician	14 min.	19 min.	17 min.	less than 30 min.
Urgent Care (Granville) average length of stay	47 min.	54 min.	49 min.	less than 1 hr.
Urgent Care (Pataskala) average length of stay	53 min.	48 min.	47 min.	less than 1 hr.

3. Emergency angioplasty restores blood flow in a blocked heart artery by inserting a catheter with a balloon into the artery to open the vessel. The procedure has been proven to save lives during a heart attack, and it is most effective when performed within 90 minutes of the patient's arrival to the ED to minimize irreversible damage from the heart attack.

	LMH 2013	LMH 2014	LMH 2015	Goal
Average time to opened artery	54 min.	56 min.	1 hr.	1 hr. 1 min.⁽¹⁾
Percentage of patients with arteries opened within 90 minutes	98%	100%	100%	96%⁽²⁾
Median time from arrival to completion of EKG	3.0 min.	2.0 min.	4.0 min.	7.3 min.⁽¹⁾

4. Patients who are seen in the ED and return home sometimes can develop further problems that warrant a return to the ED. A high number of patients who return to the ED within 24 hours after being seen can possibly signal a problem with patient care and an ED's ability to accurately diagnose and treat a patient's condition. For this reason, LMH measures the rate of patients who return to the ED within 24 hours to ensure that they have their conditions managed correctly. LMH sets aggressively stringent goals for this, as listed below.

	LMH 2013	LMH 2014	LMH 2015	Goal
ED patients who return to the ED within 24 hours of discharge	1.3%	1.2%	1.3%	less than 2%

5. A high rate of patients who return to the hospital within 72 hours after an ED visit and are admitted can possibly signal a problem with patient care. These cases are very heavily reviewed and scrutinized, and LMH sets aggressively stringent goals for this indicator, as listed below.

	LMH 2013	LMH 2014	LMH 2015	Goal
Patients admitted to the Hospital within 24 hours of discharge	1.3%	1.2%	1.3%	less than 1%

Emergency Care – How do we compare? (continued on back)



Check out our Quality Report Cards online at www.LMHealth.org.

6. For personal reasons, some patients may elect to leave the Emergency Department prior to completing any recommended treatment. Doing so can place the patient at serious health risk. As a measure of ensuring patient safety, LMH measures the percentage of patients who elect to leave the Emergency Department prior to completing their treatment.

	LMH 2013	LMH 2014	LMH 2015	Goal
ED patients who left before treatment was complete*	4.4%	6.6%	6.3%	less than 3%

7. Understanding a patient's pain level is important to LMH, and patients who arrive in the ED will be asked to describe their level of pain when first seen by a doctor or nurse. This helps to ensure quick identification of patients experiencing pain which allows for faster pain control.

	LMH 2013	LMH 2014	LMH 2015	Goal
Assessment of pain completed	99%	95%	96%	greater than 95%

Data Footnotes: (1) Comparative data from the Midas Comparative Database. (2) Centers for Medicare/Medicaid Services, HospitalCompare Website results.

Health Tips – The Importance of Establishing a Primary Care Physician

What happens when an individual gets sick and does not have a primary care physician (PCP)? These patients may have to visit the emergency room or urgent care, even when the illness does not require emergency care. A PCP, such as a family practice physician or pediatrician, provides the first consult for an undiagnosed health concern. A PCP's specialized training and experience allow them to treat both acute and chronic illnesses, as well as focus efforts on preventive medicine.

Why Establish a Primary Care Physician?

Preventive Care – Regular health screenings can identify health problems early, when chances for successful treatment are much greater. A PCP can advise a patient regarding which screenings are needed, based on age, family history, lifestyle choices and other factors.

Patient Medical History – With regular check-ups, PCPs are able to stay up-to-date on a patient's medical history, allowing them to better diagnose health issues when they arise.

Specialist Referral – For patients who experience a health concern that requires a specialist, a PCP can discuss the options and provide a referral.

Manage Chronic Illness – It is important to receive care for chronic conditions including asthma, diabetes hypertension, COPD, and others. PCPs can help manage symptoms and provide long-term health plans.

Lower Cost – Preventive care may mean fewer emergency room visits and hospital admissions. Overall healthcare costs are lower when a patient maintains good health with the advice of a PCP.

Patient-Provider Communication – Acting as the central contact point to coordinate a patient's overall healthcare strategy, a PCP takes into account the family history and existing conditions a patient may have, as well as the care a patient receives from other specialists. PCPs are available to answer questions and suggest healthcare resources, such as programs or support groups.



Licking Memorial Health Systems

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Visit us at www.LMHealth.org.

Please take a few minutes to read this month's report on **Emergency Care**. You'll soon discover why Licking Memorial Hospital is measurably different ... for your health!

The Quality Report Card is a publication of the LMHS Public Relations Department. Please contact the Public Relations Department at (220) 564-1572 to receive future mailings.

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