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Backgrounder: Inspiring Healthcare Innovation Grant Recipients

- **Luther Midelfort Chippewa Valley – Mayo Health System (Bloomer)** has completed a detailed analysis of its emergency room systems and, based on the results, will be implementing an emergency room redesign to increase the quality and scope of services it provides. As part of the redesign, the medical center will work to link each of its four facilities together electronically and by standardizing treatment protocols, training, and key processes. As a result, staff will be able to avoid costly duplications in service and provide better quality and faster care. With better quality care, recovery time and costs will be reduced, allowing patients to get back to their daily routines more quickly.
- **Chippewa Valley CARE Coalition (Eau Claire)** is hoping to improve end-of-life care in the Chippewa Valley. The coalition sees a lack of dialogue and preparedness among families for making decisions about how much or how little care is desired in end-of-life scenarios. Through a multi-faceted communications program, the coalition seeks to educate area families about the types of conversations that are helpful to have before a health crisis occurs. They also want to show people how they can complete the paperwork that documents their end-of-life wishes, as well as motivate families to talk about the issues. An additional goal is to educate people with a terminal condition who do not want resuscitation about the need to wear “do not resuscitate” bracelets to alert rescue and medical personnel of their decision. A good public response to this project will improve health care quality by helping people define the specific care they desire. This will, in turn, reduce costs to the health care system because undesired treatments will not be ordered.

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- **Luther Midelfort – Mayo Health System (Eau Claire)** recently received recognition from the American Medical Group Association® for its reconfigured system of health care delivery and tools for patients suffering from chronic diseases, such as diabetes, heart failure, hypertension, and asthma. Developed in cooperation with chronic illness experts, this system standardizes how physicians approach office visits and overall care for patients and creates an interdependence between specialists and primary care doctors in terms of patient information sharing and treatment schedules that can help postpone episodes/flare-ups of chronic diseases. With the assistance of this grant, Luther Midelfort will collect and analyze data to determine if the system is making a difference in the quality of health care in the short and long run and if it is achieving a significant cost efficiency. Ultimately, Luther Midelfort will work to share its results with the medical community and ensure that its model has broad-base applications for the health care market as a whole.
- **Marshfield Clinic® (Eau Claire)** will conduct a mixed-methods study designed to improve patient/clinician communication and discover best practices criteria to be used when a patient decides whether or not to schedule health screening following a clinician's recommendation. National compliance with health-screening recommendations is variable, being better for breast cancer screening than that for colorectal cancer, for example. By researching the individual elements that go into the decision of whether or not to schedule a screening, doctors and medical staff can better address those issues and further encourage participation in colorectal cancer screening. A higher screening rate for preventable or treatable disease can help reduce unnecessary deaths, illness and high health care costs.
- **Memorial Medical Center (Neillsville)** will upgrade its laboratory reporting from a paper-based system to an electronic system thanks to the grant. The savings on paper and duplication efforts alone for the more than 145,000 billable tests performed in the lab

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each year will be an initial \$40,000. On top of that, the medical center will improve patient safety with the electronic specimen management capability and will greatly speed up order and results communication, allowing physicians to access test results on their computers almost immediately after the tests are completed. For emergency room and hospital room emergency cases in particular, quicker reporting times are vital. The new computer software will also link directly to the billing system and will help ensure patients do not experience billing problems, such as double billing and other issues that can cause delays in insurance payment.

- **Sacred Heart Hospital (Eau Claire)** is developing a bed management system that will streamline patient placement so that the right patient is in the right bed at the right time; assuring patients receive appropriate care as quickly as possible. This new system is made possible by a software program that helps hospital personnel better assess which beds are open, how soon a bed will open and details about the patients in the beds or needing beds. This system will help cut down patient wait times in emergency rooms and doctor's offices for those who will be referred or admitted to other areas. In addition to the software, the grant will help Sacred Heart shift some of the responsibilities of existing staff so they can focus more on being case managers to help make sure patients get the appropriate level of care. In the end, this new system will allow the hospital to care for a larger number of patients with the same number of beds. At the same time, the system will enhance the quality of care given and patient satisfaction due to shorter wait times and readily available information.
- **Vernon Memorial Healthcare (VMH) (Viroqua)** will take steps to improve the quality and efficiency associated with a variety of processes from billing management to patient service. VMH will accomplish this by hiring a consulting service to educate and train its staff on Lean Principles and then work together to implement the principles into daily functions. For example, the team will analyze the entire process for a patient to receive

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a hip replacement through the scope of Lean Principles and will find ways to cut out duplication of efforts and other ways to streamline the process. Doing so will not only bring cost savings to the health care system, but it will also minimize inconveniences on patients, improving their satisfaction with the care they receive. Being a small rural hospital, VMH has fewer resources than other larger hospitals. This grant will help VMH acquire the same tools as larger facilities serving patients in their service area.

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