

**Hospital Name:**

Albert Einstein Medical Center

**Address:**

5501 Old York Road  
Philadelphia, PA 19141

**Contact:**

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2006 ED Volume: 65,000  
Growth from 2005: unknown  
Total Staffed Hospital Beds: 701  
Acute ED Beds: 37  
Fast Track: Yes  
Clinical Decision Unit: Yes

**Problem to be Resolved:**

Prolonged hospital average length of stay (5.4 days) and frequent ambulance diversion (average of 177 hours per month)

**Key Words:**

- Length of Stay
- Diversion
- “Speed dating”

**Lessons Learned:**

One important lesson that can be learned from the Albert Einstein experience is that sometimes it is necessary to listen to advice from outsiders.

**Reason for Change:**

Albert Einstein Medical Center experienced a great increase in patient volume over a short period of time. The ED was redesigned and new beds were added, however this did not ease the pressure of the increased volume. The hospital hired outside consultants to complete a study to examine the problem and identified Albert Einstein’s biggest problems as long average length of stay, at 5.4 days, and frequent ambulance diversion, averaging 177 hours per month.

**Implementation:**

Top hospital administrators were very supportive of making changes to correct these problems, as it was easy to see that these problems had negative effects on the hospital’s financial situation. The hospital’s leadership proposed several changes to the Care Management Department, which supported these changes as they would ultimately make their work more efficient.

One of the first changes made to the Care Management Department was to designate one individual to be responsible for all communication with each specific insurance payer. This increased efficiency, as previously several care managers might have been making calls to the same insurance payer on a given day. It also meant that these individuals were building relationships with the payers.

Discharge rounds were redesigned to increase efficiency. A series of rooms were set up to facilitate the discharge process, with each room representing a different floor of the hospital, and the care managers responsible for patients on a given floor gathered in the designated room. Residents could go from room to room to meet with each of the care managers, a much faster and more convenient process than the standard discharge procedure. The inspiration for this innovation came from the concept of speed-dating, where a series of mini-dates are compacted into an hour long event.

Care managers were also brought into the ED, where one of their biggest tasks was to make sure that only those patients who truly needed care in a hospital setting are admitted. This need is determined by the InterQual criteria, which is a standard criteria used to determine medical necessity. Albert Einstein’s ED has seen a decrease in the percentage of ED admissions since adding care managers to the ED.

**Results/Impact:**

Since acting on these recommendations, Albert Einstein Medical Center has been successful at improving patient flow throughout the facility. Specifically, ambulance diversion has reduced from 177 hours per month in FY 2004 to an average of only 8 hours per

**California  
ED  
Diversion  
Project**

month in FY 2006. Additionally, average length of stay has gone from 5.4 days in FY 2004 to 5.0 days in FY 2006.

Prior to starting this project, Albert Einstein rarely used outside consultants to analyze and implement operational changes. However, in this instance, hospital leadership recognized the importance of getting an unbiased, outside perspective on the nature of the problems within their facility. Hospital leaders now recognize the importance of listening to what consultants have to say, and adjusting the consultants' advice to fit their specific needs.