



CASE STUDY

# Anderson Regional Medical Center

Over 30% Improvement in  
the Percentage of Patients  
Discharged by Noon



[KeystoneHealthcare.com](http://KeystoneHealthcare.com)



## INTRODUCTION

Anderson Regional Medical Center (ARMC) is an acute care hospital and part of the Anderson Regional Health System, one of the largest hospital systems in Mississippi. Located in Meridian, MS, the ARMC features a 260-bed facility with an average daily census of 123 and over 39,000 annual emergency department (ED) visits.

## The Challenges

- **Frequent Incoming Transfers:** With a large number of incoming transfers, streamlining the transfer process proved challenging.
- **Poor Documentation Standardization:** With so many clinicians in the hospital, staff struggled to standardize documentation.
- **Staff Tension:** Hospital physicians were resistant to working with APPs, leading to inefficiently utilized time.
- **Difficulty Finding Nocturnists:** The hospital struggled to find nocturnists, impacting the number of Discharges Before Noon.
- **Inconsistent Patient Volumes:** High, unpredictable patient volumes led to inconsistent revenue and margins.

## The Solutions

Keystone Healthcare™ began managing Anderson Regional Medical Center's Hospitalist Program in March 2017. Working closely with the ARMC team, Keystone Healthcare™ implemented the following high-impact strategies to target areas of opportunity concerning efficiency and volume management:

- **HM Medical Leadership:** Keystone Healthcare™ placed a strong HM medical leader to ensure long-term success.
- **Clinician Teams:** Clinician teams were created to enable a flexible staffing model that would accommodate high-volume days.
- **Improved Education for Physicians:** Physicians were educated on the benefits of working with APPs to improve their time management.
- **APP Placed on Night Schedule:** To relieve some of the pressure on the nocturnist, an APP was placed on the hospital's night schedule.
- **Advance Scheduling:** To enable clinicians to sign up for open shifts, the hospital began posting the schedule three months ahead of time.
- **ED Transfer Agreement:** Emergency and hospital teams worked together to develop an agreement allowing the ED to accept transfers from outlying EDs to the inpatient setting.
- **Improved Relationships:** The hospital developed relationships with local primary care providers to accept admissions directly from their offices.



**In addition to a high volume of ED visits, the hospital's metrics struggled. Discharges Before Noon hovered around 50%.**



## The Results

With the partnership of Keystone Healthcare™, the Anderson Regional Medical Center team improved the Discharges Before Noon metric by over 30%. A number of other areas were also positively impacted, including capacity management and scheduling.

INCREASED PATIENTS  
DISCHARGED BY NOON FROM  
**56% TO 74%**

GREW PROGRAM BY  
**7%**  
ANNUAL DISCHARGES

ASSUMED RESPONSIBILITY FOR  
**MAJORITY OF  
ICU PATIENTS**  
IN THE FIRST YEAR

**IMPROVED**  
TELEMETRY UTILIZATION  
AND BED MANAGEMENT  
**METRICS**

**REDUCED  
DIVERSION  
HOURS**  
FOR THE ICU  
AND TELEMETRY

ESTABLISHED DAILY  
MDTMs TO  
**IMPROVE  
COMMUNICATION**

**“The providers feel that they work with  
Keystone Healthcare™, not for them.”**

– Hatem Mourad, Medical Director, ARMC



## About Keystone Healthcare™

Keystone Healthcare™ is a leading provider of Emergency Medicine and Hospital Medicine physician staffing and management services for hospitals. Headquartered in Tampa, Florida and with additional offices nationwide, Keystone Healthcare™ efficiently delivers high-quality, patient-centered care through strong physician leadership and involved management that drive our modern and integrated business model and performance metrics.



**Ready for an Engaged Emergency Medicine  
& Hospital Medicine Partner? Contact Us!**

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