

The Valley **Breeze**

InstaCare Program at Landmark speeds Emergency Dept. work

By Laura Orchard Ward, Valley Breeze Correspondent

Woonsocket: With emergency volume up to more than 4,000 patients a month and the average waiting runtime for walk-ins down to 30 minutes or less, the remarkable results of the new InstaCare program at Landmark Medical Center have left even its originator, Dr. Emilio Belaval, in awe.

“We have gone up in volume 36 percent in 15 months, which is basically unheard of in emergency medical circles,” said Belaval, Chairman of the Emergency Department at Landmark. “When we took over a year ago, we only had 32,000 visits a year. At that time we instituted Fast Track Express Care, which the hospital didn’t have. Part of what happened is that in our success with Fast Track, the volume started increasing.

“We tried to work at getting more of the ambulances in and were already at 43,000 (patients a year.) At that time it was obvious that something had to be done because things started getting a little difficult.”

The answer was Belaval’s brainchild, InstaCare. The new program not only slashes the time spend waiting to see a doctor in an emergency room from hours to 30 minutes or less, but Belaval says it is a highly cost effective plan for Landmark Medical Center.

“What makes InstaCare different is how cost effective and simple it is compared to other plans,” Belaval noted. “Most places that provide a triage have to increase their staff of physicians markedly. They may have to get medical scribes and have lots of expenses in the restructuring old the ER and everything else. The way we set up InstaCare is to actually have the same purpose of seeing people immediately through the triage, but it doesn’t require a lot of restructuring and the changes are mostly cosmetic. It’s a common sense approach and it’s very inexpensive to establish.”

According to Belaval, about 60 percent of the patients who visit an emergency room do not have a condition serious enough to require a bed. Many patients can be seen by a nurse practitioner or a physician assistant instead of having to wait hours to see a doctor. This in turn, frees up many

of the beds used before for patients with sore throats or sprained ankles for the more seriously ill patients a doctor must see or those who require extensive testing.

“What we’re doing is changing the whole concept,” Belaval explained. “All emergency rooms go first through a nursing triage, then a registration process and then, if you’re lucky you go to a bed. If not, you go to the waiting room to wait for a bed to become available. With the overcrowding that a lot of the hospitals have these days, you can be in the waiting room for quite awhile with a system like that. The important thing is that we have the patients seen immediately when they come to us – that’s the crux of everything. Facilitating that interaction with the provider (doctor, physician assistant or nurse practitioner) obviously cuts down a lot on our turnaround time.”

An unexpected but welcome development in response to the effectiveness of InstaCare, Belaval noted, is that the other departments directly related to emergency patient care, such as X-ray and laboratories “have had to go on the bandwagon. InstaCare has been a chance to revamp the whole situation, making it work more efficiently.”

Belaval credits the administration at Landmark for being so open to his innovative ideas, as well as the hard work of Clinical Director of Provider Services Paul Vallera for making InstaCare such a success.

Although Woonsocket does not have an private emergency care facility such as the ones in Lincoln, Cumberland and North Smithfield, Landmark’s vice president of Development and Public relations, Mary Kozik, said that Landmark’s InstaCare is not attempting to be an urgent care center.

She agrees, however, that they will have to overcome the notion many people have that if you go to a hospital emergency room, you will be there for a long time.

“I think we do compete (with urgent care),” Kozik acknowledged. “People think it’s faster to go to an urgent care center than an emergency department because of the horror stories you’ve always heard – like waiting five hours. So we looked at improving our care to compete. We’re not professing to be an urgent care center, but then an urgent care center is not a hospital. We’re a hospital so we are here with physicians and all that you need, and we’re also a hospital with an incredible emergency department that has become much more efficient and yet continues to provide incredible quality of care.”

“It’s proven to be incredibly successful. A year ago at this time we were seeing about 90 to 100 patients a day. Now we’re seeing u to 160 patients a day. It’s faster and more efficient so we’re able to handle the volume more but also, more people are coming to us because they have heard about the program.”

In the month of December we saw more than 4,000 patients in our ED, so we're closely becoming the second largest emergency department in the state next to Rhode Island Hospital, Kent Hospital right now is second, but we're catching up to them."

Here's what to expect on a visit to Landmark's ED

According to Landmark, here is what you can expect from its new InstaCare system, which is open from 9 a.m. to 11 p.m. every day:

- ❖ Upon arrival, patients will be requested to provide basic personal information to a greeter who enters it into a computer. A wireless computer system, which was installed by Landmark's Information Systems Department in accordance with Belaval's plan, can be wheeled around to where the patients are so that registration can be done while a patient is being treated.
- ❖ Based on the severity of the injury or illness, patients will be directed to the appropriate caregiver – a physician, a physician assistant, a nurse practitioner or other medical provider.
- ❖ In order to allow clinicians to easily identify each patient, a wristband will be provided.
- ❖ Family members will be asked to wait in the waiting area except when accompanying a child.
- ❖ The registration process will occur at bedside or after treatment, depending on diagnosed condition.
- ❖ If a patient has been treated and registration has not been completed, patients will have to visit the registration desk upon discharge.