

The Healthcare Executive's Guide to Navigating Flu Season

*Strategies to Drive Consistent Business Results,
Retain Clinical Staff and Increase Patient Satisfaction
in High-Volume Periods*

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I: BUSINESS IMPLICATIONS OF INCREASED SEASONAL PATIENT DEMANDS

Amid an ongoing shortage of nurses and a competitive environment for physicians, healthcare executives are further challenged to maintain adequate staffing needs in flu season. The influx of additional ER visits, appointment requests and inbound patient calls drive up costs and overburden clinical teams. In fact, the CDC estimates that the flu costs the U.S. approximately \$10.4 billion in direct costs for hospitalizations and outpatient visits, for just adults.

In addition to direct costs, healthcare systems often experience nurse and physician turnover due to burnout. Recent articles in the Wall Street Journal and Medscape cite highly concerning data on this topic, including its effects on depression, relationships and even suicide. Nearly half of generation X physicians state they are burned out, with similar sentiments reported by boomers (39%) and millennials (38%). Across most demographics, approximately half of clinical professionals would consider a substantial pay reduction to gain greater work/life balance.

Flu season compounds these challenges. Increased patient demands keep clinical staff at a frenetic pace throughout the day. Then, patient needs expand after hours and further impair timely responses while eroding quality of life for physicians.

As healthcare leaders, we must consider all of these factors as we guide our organizations to growth, profitability and increased patient satisfaction. I am frequently engaged in conversations with senior healthcare system executives about triage strategies that better address the challenges at hand.

In this whitepaper, I will present data on the business effects of flu season and provide strategies and solutions that deliver measurable results for some of the largest and most successful healthcare systems around the country.

II: THE CURRENT LANDSCAPE: AN ASSESSMENT OF CURRENT ILI DATA AND HISTORICAL RECORDS

The final 2019 CDC FluView Report showed a dramatic national increase of influenza-like-illness (ILI) from 28 states to 37. Now the CDC currently reports regional or widespread influenza activity across all 50 states. Consequently, most healthcare systems are experiencing notably higher Influenza-related triage calls as of January 22, 2020.

More important than the *quantity* of cases, we noticed an interesting shift in the *types* of flu viruses affecting the country. In most recent years, type A(H1N1) has been the predominant flu strain at the beginning of the season, followed by a brief wave of Type B flu at the end. Expert analysis of last year's flu season indicated a different pattern. After Type A subsided, Type B greatly overshadowed Type A cases and extended flu season well into March and April of 2019 in many areas.

2020 is also shaping up to be an unconventional year for a number of reasons. Firstly, it is the earliest onset of flu season since 2003. Secondly, Type B viruses - not Type A - are now the most common. These data points enable us to construct highly informed estimates for the remainder of the season.

2020 Q1 ILI Forecast

We follow these trends and correlate them against 20 years of experience working with nationwide healthcare facilities to draw predictive conclusions. With these historical and current data points, we anticipate a double-impact flu season. In the coming months, Type A has the potential to resurface and extend the wave of illnesses after Type B passes. As of January 22, 2020 the most recent CDC FluView Report appears to validate this forecast, indicating that the number of influenza type B cases reported is now approximately equal to influenza type A cases.

Decades of data indicates that triage call volumes will likely increase approximately 50%, with several regions closer to 100% over baseline. This inundation of calls is what often contributes to staff burnout and attrition, reputational damage across patient populations and degradation of patient care. It is important for healthcare executives to develop a fine acuity to these factors, and to proactively develop and execute strategic approaches to prevent the erosion of clinical staff, patients and revenue. Developing this acuity requires a strong understanding of the warning signs they present.

III: TRIAGE OVERLOAD: THE MOST COMMON WARNING SIGNS

How effectively is your health system prepared to handle expanded triage call volumes? Consider these common *red flags* and determine if you are prepared to manage this season's influx of activity.

Physicians Need a Better Work/Life Balance

Many doctors are frustrated with reduced quality of life during peak sick seasons. They spend long days with patients then devote much of their evenings to field on-call requests -- missing out on valuable family time. In our ongoing dialog with executives across the country, we also hear that these concerns are particularly frustrating to the newest generation of doctors, who often place a high value on their work/life balance.

This mirrors data from a recent [American Medical Association \(AMA\) survey](#), finding that 92% of millennial physicians cite work-life balance as a priority - however only 65% are able to currently achieve this balance.

Many healthcare executives find that reducing physician requirements for nighttime on-call duty serves as both an effective retention tool and a valuable competitive differentiator for attracting top talent in this highly competitive healthcare hiring market.

Patient Call Response Times are Increasing

In addition to reducing morale of overworked physicians, the increase of after-hours calls means that patient call response times are often answered less quickly – increasing patient risk and dissatisfaction.

Regardless of the season, patient calls must be handled in appropriate time frames to ensure satisfactory outcomes. As a baseline, your clinical staff should consistently address emergent calls within five minutes, urgent calls within 10 minutes, and approximately 30-45 minutes for non-urgent calls.

When response times fall outside of these time ranges, changes must be made to increase responsiveness and ensure rapid care. One theoretical solution is to hire additional clinical staff. Executives soon find this approach to be an impractical proposition based on the highly competitive job market and the inability to onboard and activate new staff before flu season ends. For many health systems, a reliable triage provider can be an effective way to mitigate immediate flu season demands.

Patients Become Frustrated with Long Wait Times

When on-call physicians become overwhelmed, patients and their caregivers wait too long for return calls. Most importantly, this reduces the quality of care and can also play a role in patient attrition. Patients count on their chosen healthcare provider for quality care, particularly when needed most, such as flu season.

Delays in patient service - whether via triage calls or office visits - have a direct result on satisfaction. The [2018 Vitals Index](#) reported that 1 in 5 patients have changed their healthcare provider due to long wait times.

Healthcare systems that can't meet rapid patient needs often experience reputational damage. This is amplified by the modern ability of patients to quickly post negative experiences and poor reviews on social media. According to a story by MobiHealth News, [survey data](#) shows that 70% of patients are influenced by these online reviews and comments when selecting a healthcare provider.

You Need to Improve Documentation Practices

In this critical age of Patient-Centered Medical Home (PCMH), healthcare providers should look to demonstrate quality levels of patient encounter documentation.

When afterhours calls begin to snowball, some physicians quickly scribble notes and move on to the next call, rather than completing necessary contact statements.

In many scenarios, incomplete documentation is detrimental to the level of follow-up care provided. The PCMH model calls for detailed reports and are linked to decreasing unnecessary or invasive tests and decreasing overall Total Medical Expense (TME). A good triage partner will provide encounter reports that meet the guidelines of the PCMH model and assist with an overall improvement of the patient care and experience.

If you are experiencing any of these challenges, it may be time to explore experienced triage providers to increase physician work/life balance, improve patient service delivery and ensure compliant documentation.

IV: CONSIDERATIONS WHEN EVALUATING TRIAGE PARTNERS

Outsourced triage providers can improve conditions for your patients and your organization. However, there are many key considerations you must evaluate to select the right partner for your needs. These factors include A) Financial considerations that ensure maximum ROI, B) Reputational considerations that help retain patients and deliver consistent revenue, C) Clinical considerations that maintain continuum of care.

Be sure to ask the following questions and conduct due diligence in these areas:

Financial Considerations, including Compliance Requirements and Limiting Exposure

- **Are there hidden surcharges?** Know the fee schedules in advance to avoid unexpected invoices. Don't fall victim to rate card variances that will charge you extra for coverage on overnights, weekends and major holidays. Straightforward triage partners will charge the same rate no matter the day, time or occasion. You should not be penalized for using a service when it is most needed.
- **Do they deliver itemized invoices?** Flu season also creates challenges for every department, including your finance team. Itemized invoices help bookkeepers easily track costs and measure ROI. Choose a triage partner that offers detailed billing statements, including calls and engagements for each physician's patient panel.
- **Do they provide highly detailed encounter reports?** Delivering excellent care is just the beginning. You'll need detailed reports to ensure continuum of care and maintain accurate records. Diligently check to ensure that your provider can deliver highly detailed and fully compliant reports before your office opens each morning.
- **Can they provide statistical analyses and reports on ER utilization rates?** Beyond the obligatory daily updates, your triage partner should be able to provide data-rich custom reports. For example, a detailed ER utilization report will provide greater insight into understanding how your after-hours patient calls affect these statistics.
- **Are you protected?** Cybersecurity issues are a reality of today. We often hear about healthcare data ransoms and breaches. An effective way to prevent costly intrusions is to partner with secure and insured providers. Make sure your chosen

provider employs 24/7 managed firewalls and carries both Professional Liability and Cyber Insurance. These can be costly measures, but are essential to protecting your patients' PHI, PII and PCI.

Reputational Considerations, including Always-On Availability

- **Can the provider deliver reliable service in any condition, including natural disasters?** Your facilities are protected with redundant infrastructure components to survive virtually every type of disaster. Your partners should have at least the same uptime capabilities, if not greater. Seek a triage partner that can ensure always-on operations to guarantee your patients are always well cared for in every instance. Ask if the partner has co-located data centers, unlimited electrical power capabilities and 100% uptime across phone, Internet and fax services. Triage providers will need these technical abilities to meet your needs 24/7/365 without exception or circumstance.
- **Is staffing based on historical data or random hunches?** Ensure that your triage provider is well equipped to meet your needs, especially in peak seasons. A sophisticated triage partner should make staffing decisions based on computer-assisted projections of trending monthly call volume and CDC provided statistics and insights.
- **How are patient concerns resolved?** Any triage service may deliver a report that needs explanation or clarification. There are times when the patient's recollection of a triage encounter does not match the encounter report received by the physician. Insist on 24/7 manager availability and call recording with better than 99.9% reliability to ensure that triage call concerns or reviews are handled quickly and definitively.
- **Is daytime coverage available?** Sometimes, daytime call volume can overwhelm practices. If you could use help handling the burden of flu season daytime calls, see if your provider can relieve office staff and take on daytime triage services to ensure rapid patient response times.

Clinical Considerations: Ensuring Optimal Patient Satisfaction

- **Are calls answered in the order they arrive or are they prioritized before reaching the RN?** Emergent or urgent calls should always be answered first. This ensures that high-priority patients are never left waiting on the line for less urgent calls.
- **How are nurses matched to your patients?** Children have unique healthcare needs - far different from adults and seniors. It is important to have pediatric nurses handle healthcare for children and adult nurses for older patients. When examining triage options, choose a provider that has discreet pediatric and adult nursing teams to ensure the most appropriate care for your patients.
- **Are nurses compensated to improve outcomes?** When hiring a triage partner, you are trusting your reputation to its nursing staff. However, some triage providers pay nurses per call, providing incentives to reduce call times and possibly limit the time your patients need. Ensure that your healthcare system is being represented by a triage partner that pays nurses by the hour, not per call. This enables nurses to focus more on caring for your valued patients rather than earning cash incentives.
- **Can they effectively care for patients in multiple languages?** Providing outstanding care requires that the nurse and the patient can communicate seamlessly without errors. Ensure that the triage partner can provide interpretive services to guarantee effective healthcare for all patients, regardless of their native or preferred language.

If your healthcare system is ready to engage with a triage provider, evaluate the options carefully and select the partner that will best meet the needs for your business, your staff and the specialized needs of your patients.

V: ABOUT THE AUTHOR

Stuart Pologe is a senior executive healthcare professional with a strong reputation for successfully guiding organizations through innovation and growth across a dynamic background of more than 30 years.

Stuart serves as Chief Operations Officer of Night Nurse Inc. where he is responsible for overseeing every aspect of the organization, including finance, information technology, patient

data security, subscriber relations and nursing operations. With his guidance, Night Nurse expanded its service footprint from two states to 40 and created more than 125 new jobs for nurses while maintaining profitable growth each year. Night Nurse now provides critical triage services to some of the busiest and most respected hospitals and universities. Stuart's passion for outstanding service is reflected in the company's 98% practice retention rate.

In his tenure, Stuart was the architect of the company's proprietary software system, drastically increasing operational efficiencies and delivering real-time, data-rich reports, to help subscribing healthcare organizations improve outcomes. Stuart leads Night Nurse's HIPAA compliance initiatives and has become a noted expert on the topic through multiple articles in leading publications such as Healthcare IT News, Baseline and Healthcare IT Leaders. He also spearheads the company's cybersecurity practices to ensure that critical patient data is safe and secure and utilizes his role at Night Nurse to exercise his passion for talent development, mentoring and inclusivity.

In addition to his role as COO of Night Nurse, Stuart has partnered with the National Council of State Boards of Nursing (NCSBN) to further national policy goals and is often called upon for his expertise in triage operations and program cost-benefit analysis.

A passionate community advocate, Stuart serves on the Board of Directors of Jeff's Place, a non-profit organization that provides free bereavement support groups for children, teens, young adults and their families. He is also an active leader in local government in his hometown of Framingham, Massachusetts. He served as a Town Meeting Member and on the Ways and Means committee. After Framingham became a city in 2018, the mayor recognized Stuart's exemplary contributions by appointing him to the Board of License Commissioners. And for nearly 20 years, Stuart has served on the Board of Directors of Natick Pegasus, the public access corporation serving the town of Natick.

About Night Nurse

Since 1999, Night Nurse has specialized in delivery of reliable triage services for the medical community. With more than 20 years of experience, Night Nurse currently serves thousands of private practice physicians, clinics, hospitals and educational institutions across the country. The company provides reliable, highly effective and affordable triage care 365/24/7.

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