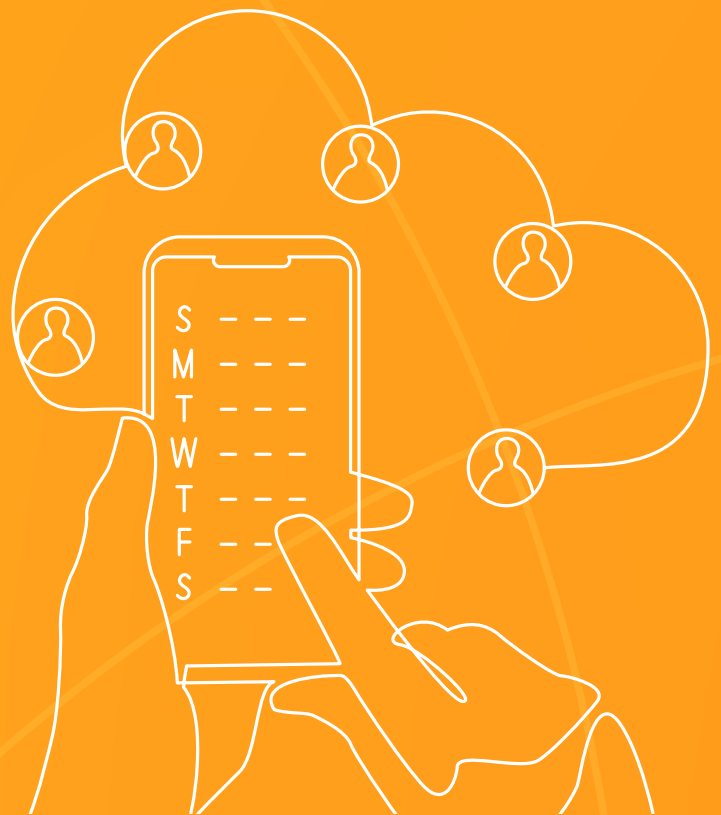




The Real Cost of On-Call Scheduling

How Call Schedules Impact Time to Treatment, Provider Satisfaction, and Patient Care



Introduction

The impact of call schedules is more widespread than you might expect. Whether it's a paper calendar pinned to the bulletin in the nurse's station or a centralized file on the hospital intranet, an on-call schedule can help accelerate—or immobilize—critical patient care.

“Every unit had a three-ring binder that basically had a copy of the paper schedule. Everybody got a paper copy of it and put it in the three-ring binder and that was the call schedule for the month. Hopefully it was accurate, sometimes it wasn't.”

– Dr. Scott James

Emergency Physician and Medical Director at Children's Hospital and Medical Center Omaha (CHMC)

How On-Call Schedules Actually Impact Your Hospital

Let's take the emergency department (ED) as an example. Do you know where call schedules are located in the ED? Chances are, you can find them in more than one place. Most likely, they all reflect different information.

The result? Care delays and miscommunication—which is tied to 80% of all medical errors.¹

For example:

A patient arrives in the ED in need of emergent care from a specialist. A nurse, provider, or other care team member walks to the nurse's station, looks at the schedule, and contacts a provider who says, “I'm not on call. I swapped shifts with Dr. Green last week!” Or—even worse—the care team member can't get in touch with any provider and is left trying to decipher who is on call while the patient is left waiting.



Delayed Time to Treatment,
Poor Patient Experience



Frustrated Providers
and ED Staff



Decreased Throughput and
Operational Efficiency

What's worse is when the inefficient process is repeated, department by department, throughout your entire hospital. And the problem is not limited to hospitals still using pen and paper to manage call schedules.

On-call schedules are foundational to clinical communication, and delayed or inadequate communication can directly increase patient risk, decrease provider satisfaction, and lead to detrimental patient outcomes.

Let's Quantify It: On-Call Scheduling by the Numbers

How are on-call schedules impacting my hospital?

Speed to Care

As much as **40%** of communication time is spent attempting, but failing, to reach the correct provider or searching for contact information.²



3,300+

Hours Annually Diverted From High-Value Activities

Centralized on-call scheduling has saved our clients anywhere from 7-20 minutes per communication. Saving 10 minutes per communication could help a 300-bed hospital that sends 20,000 messages annually reclaim 3,333 hours of nurses' time per year.³

Manual Tasks



3,000+

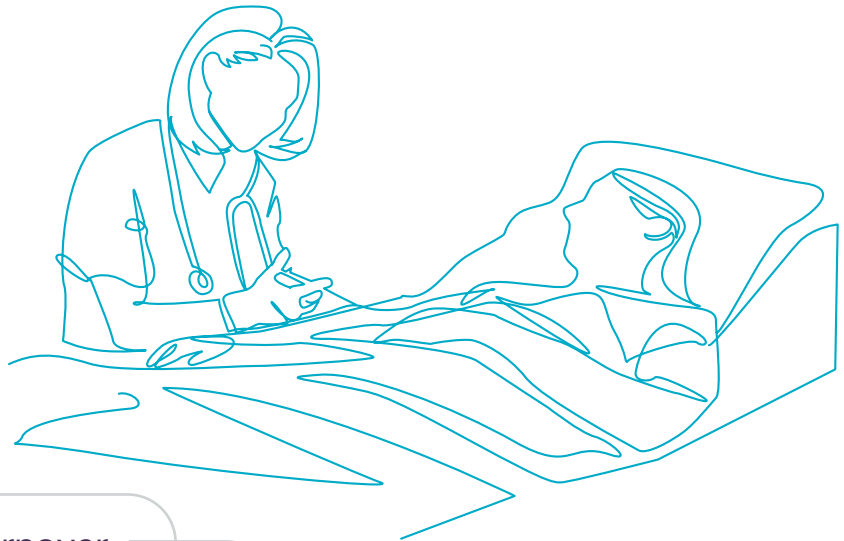
Hours Annually

Roughly 312 hours are spent creating and managing schedules annually per department. Often, physicians are heavily involved in the task. If there are just 10 departments in your hospital, that's more than 3,000 hours annually.

Patient Care

80%

of Serious Medical Errors Tied to Miscommunication



Provider Satisfaction & Turnover



“In the acute care setting, communication failures lead to increases in patient harm, length of stay, and resource use, as well as **more intense caregiver dissatisfaction and more rapid turnover.**”²

**\$250k–
1 Million**

Cost to Replace a Single Physician⁴

\$58k

Cost of Turnover Per Nurse⁵

Inefficient on-call schedule management and communication processes can have significant consequences across your organization. The scheduling and communication challenges that some hospitals face are linked to outdated methods, which should be replaced with the right technology to best manage on-call schedules.

Rather than hiring additional personnel to handle time-consuming manual tasks associated with managing call schedules and keeping them up to date, leading hospitals and health systems implement a single on-call scheduling solution across their enterprise to reap significant benefits.

The Benefits of a Single Enterprise-Wide On-Call Scheduling Platform

1 An Optimized Workflow for Locating and Contacting Providers Across Your Hospital

No more searching for the latest schedule or trying to find Dr. Smith's new cell phone number—all the on-call schedules from across your hospital are available in one place where care team members can contact on-call providers in just a few clicks.

As the dedicated on-call scheduling solution for UK Healthcare, Provider Scheduling powered by Provider Scheduling powered by Lightning Bolt helped decrease time to contact the on-call provider from 8 minutes and 13 seconds to 1 minute and 1 second—an 88% reduction!

2 Significant Time Savings for Clinical Staff and Improved Care Coordination

Physicians, nurses, and other care team members are your hospital's most valuable resources. With an advanced on-call scheduling solution, you can automate and streamline many of the tasks keeping them away from patient care. Further simplify care coordination with a simplified click-to-connect workflow that integrates with other key IT systems to contact providers across your organization.

3 Prevent Patient Leakage

More patients have begun to look for care outside of traditional healthcare settings due to poor patient experiences. To minimize patient leakage, eliminate key barriers slowing down patient care in the ED and elsewhere—inaccurate on-call schedules and inefficient communication.

88%

Reduction in Time to Contact On-Call Providers

“To be able to see who is the surgeon that's going to be taking this case, who's the radiologist on call, who's the infectious disease provider on call—all at a glance—that just has huge value to an organization for patient safety and workflow efficiency.”

– Dr. Corey Joekel

Chief Medical Information Officer, CHMC

4 Improve Care Coordination

Click fatigue and technology overload are prevalent in healthcare. Providers sometimes lament that some technology touted to ease their workload has contributed to dissatisfaction and burnout. But digital scheduling solutions seem to be technology providers want.

A 2017 study found that 96% of physicians didn't want to go back to the old method after implementing a digital scheduling solution, and satisfaction improved by 33%.⁶

5 Single Vendor and Integration Management, Decreased Total Cost of Ownership

Your hospital's current management of on-call schedules may be a mixed bag. Some departments may be using one or more digital scheduling tools while others build call schedules on paper.

Unfortunately, an inconsistent approach to technology burdens your IT team with the challenge of managing and supporting multiple integrations. It also increases the total cost of ownership for your organization, which still needs a single source of truth for on-call schedules.

A Better Approach to On-Call Management

An enterprise-wide on-call scheduling solution offers a more efficient way for your hospital to manage on-call schedules to help accelerate speed to care, improve the patient experience, and drive care team satisfaction. Learn how your organization can get started with an enterprise-wide scheduling solution that drives real results for organizations like yours.

Streamline Your On-Call Schedule Management

Schedule a Demo >

Sources

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lightningbolt

a PerfectServe solution

About PerfectServe

[PerfectServe](#) accelerates speed to care by optimizing provider schedules, streamlining clinical communication, and engaging patients and their families in the care experience. Our cloud-based software simplifies complex clinical workflows and schedules with secure and timely communication by dynamically routing messages to the right person at the right time. We drive more efficient care collaboration in all settings to improve patient outcomes and bring joy back to caregivers. PerfectServe has 25 years of experience and is a trusted partner to more than 500 hospitals and 30,000 medical practices.



To learn more or reserve a demo with an innovative partner rated **Best in KLAS for Clinical Communications** after four consecutive years leading the category, please contact us:

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