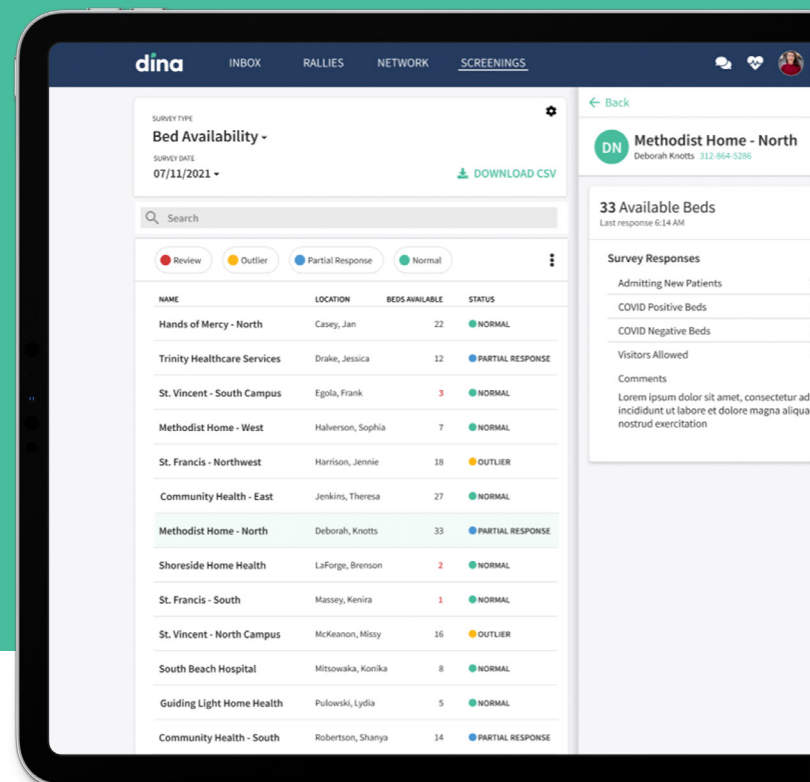


Dina's Bed Availability Tool Saves Jefferson Health Time and Money

Three Hospitals Save \$570,000
By Improving Transitions,
Reducing Length of Stay



NAME	LOCATION	BEDS AVAILABLE	STATUS
Hands of Mercy - North	Casey, Jan	22	NORMAL
Trinity Healthcare Services	Drake, Jessica	12	PARTIAL RESPONSE
St. Vincent - South Campus	Egola, Frank	3	NORMAL
Methodist Home - West	Halverson, Sophia	7	NORMAL
St. Francis - Northwest	Harrison, Jennie	18	OUTLIER
Community Health - East	Jenkins, Theresa	27	NORMAL
Methodist Home - North	Deborah, Knotts	33	PARTIAL RESPONSE
Shoreside Home Health	LaForge, Brenson	2	NORMAL
St. Francis - South	Massey, Kenira	1	NORMAL
St. Vincent - North Campus	McKeanon, Missy	16	OUTLIER
South Beach Hospital	Mitsowaka, Konika	8	NORMAL
Guiding Light Home Health	Pulowski, Lydia	5	NORMAL
Community Health - South	Robertson, Shanya	14	PARTIAL RESPONSE

Challenge:

At the height of the pandemic, Jefferson Health and many other hospitals found it difficult to get their COVID-19 patients to the right post-acute setting.

Bed space was scarce and it could take case managers hours to call individual facilities to determine availability.

As COVID-19 continued to spread, Jefferson needed up-to-date information on the number of COVID-positive and COVID-negative beds available at each Skilled Nursing Facility (SNF) and inpatient rehab facility in their network. Real-time access to this data would help case managers, social workers and discharge planners ensure timely discharges and appropriate placements.



“

By automatically accessing bed availability and start-of-care data from post-acute and home health providers, we can put time back in their day so they can focus on patient care—and get an immediate, positive ROI.

”

Travis Woyner, Vice President of Product, Dina

Solution:

Working with Jefferson Health's three New Jersey hospitals, Dina launched its PAC Bed Availability product to automate daily check-ins with the hospital's SNF and post-acute network partners.

Using text-message-based technology, PAC Bed Availability automatically surveys network partners prior to the start of the daily discharge planning process.

This helped Jefferson:

1. Identify post-acute providers that were accepting COVID-19 patients.
2. Identify which post-acute providers were allowing visitors.
3. Get up-to-date daily dashboards to track bed availability information.



→ Today, Jefferson maintains an efficient discharge process and saves hours of time previously spent calling individual facilities to determine bed space.

Dina and Jefferson: Innovating on Behalf of Patients

"Having access to real-time bed availability is crucial to maintaining proper throughput, said Dina's Chief Medical Officer Dr. Maryann Lauletta. "Not only does it allow for decreased length of stay, but it enables discharges to happen earlier in the day, which is safer and

more satisfying for the patient. In addition, it opens up bed capacity at times when most Emergency Departments are becoming busy, during the late afternoon and early evening, thus allowing sick patients in need of a floor bed to have one available in a timely fashion."

“

It takes four hours for someone on our team to get on the phone and determine who has beds, the Dina tool has made this process a whole lot easier. ”

Melissa Mordecai, director of post-acute care integration for Jefferson Health's three New Jersey hospitals, which serve 42 post-acute facilities in three counties



– .24 days

Length of Stay
Declined 0.24 days*

\$190,000

Per-hospital savings
\$190,000 per year*

\$2.6 million

Potential system-wide savings
(over 14 hospitals) per year*

*Based on 5,366 hospital stays from January 2020–March 2021 at Jefferson Health's three New Jersey hospitals: Cherry Hill, Stratford and Washington Township

PAC Bed Availability: How It Works



Quickly enroll and engage post-acute partners at no cost



Use text message-based tools to automatically survey post-acute partners.



Access daily dashboards to track bed availability.



Share dashboard data with discharge teams.



Focus outreach to providers that have capacity.

“

We're able to find out bed availability in real time without calling around, emailing or texting. The gold standard is to integrate bed availability into the transition workflow and that's the direction we're heading.

”

Melissa Mordecai,
Director of Post-Acute Care
Integration, Jefferson Health -
New Jersey