

**CASE STUDY ST. MARY'S
HOSPITAL AND REGIONAL
MEDICAL CENTER**



Patient Satisfaction Outshines Fresh Paint in Grand Junction Birth Market



Background:

St. Mary's Hospital and Regional Medical Center

St. Mary's Hospital and Regional Medical Center serves western Colorado and eastern Utah. As the largest healthcare facility in the region, St. Mary's offers the highest level of care and technology, including the most comprehensive perinatal services in the area. St. Mary's Medical Center is consistently recognized nationally for its clinical quality and superior patient care.

Challenge:

Maintain Competitive Edge in Regional Perinatal Care Market

With an already healthy regional lead in birth volume, St. Mary's delivers approximately 2,200 babies per year. Its nearest competitor just three miles away, Community Hospital had stopped delivering babies in 2000 but recently completed construction on a new \$50 million campus with an eight-bed Labor Delivery Recovery and Postpartum (LDRP) unit called The Birth Place, which began operating in 2016. Offering L&D services where it didn't before in a shiny new facility, Community Hospital set out to challenge St. Mary's regional dominance, and hospital leaders needed a strategy to maintain and grow their competitive edge.

Solution:

Add Obstetric Emergency Department to Complement NICU Value

Partnering with Ob Hospitalist Group, St. Mary's opened a Type A Obstetric Emergency Department (OBED) in December 2014. The OBED, combined with the hospital's Level IIIB Neonatal Intensive Care Unit, together presented a formidable magnet for St. Mary's. Having hospitalists serving the unit 24/7 bode well for patient satisfaction because of shorter wait times and superior sub-specialty OB service.

Results:

St. Mary's Preserved its Birth Market Dominance and Improved HCAHPS Scores

Publicity about St. Mary's new OBED and its ability to mitigate any emergent childbirth situation raised awareness among families and employers in the community. "We met with the Chamber of Commerce. Team Lead Dr. Michael White, some of our Maternal and Fetal Medicine (MFM) doctors, and our NICU transport team all attended to talk with area employers about what defines us and separates us from the rest of the pack," explained Marilyn Melison, former interim director of women's services at the hospital. "There is a lot of talk in the community about the new facility. I personally think it's a great model. It's brilliant."

Dr. White also appeared on a morning television program for mothers to talk about Vaginal Birth After Cesarean (VBAC). "He was very clear that St. Mary's is the only facility in the region that can handle VBACs," Melison said.

An added benefit came when St. Mary's experienced even higher HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) scores. In fact, Labor and Delivery was the hospital's highest-performing department in patient satisfaction.

"OB/GYN had the highest scores in the building last year for HCAHPS," Melison added, "and we have a banner up to prove it!"

Local physicians soon realized the advantage OBHG hospitalist coverage afforded them. "Some of our family practice physicians like to do deliveries. I know they really appreciate having the OB hospitalists there to provide back-up on their deliveries," said Jaina Muhlestein, Clinical Nurse Manager for Labor and Delivery at St. Mary's.

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— Marilyn Melison
Interim Director of Women's Services
St. Mary's Hospital and Regional Medical Center

Muhlestein was quick to note the appreciation nurses developed for the hospitalists.

"The hospitalists work well and communicate well with the nursing staff," she said. "Our nurses really enjoy working with the hospitalists because they are approachable and they can learn and ask questions. Their use of evidence-based medicine practices really sets them apart."



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Written and published by OBHG Media.