

CASE STUDY
GOOD SAMARITAN HOSPITAL



Ob Hospitalist Group partnership enables OB/GYN and midwifery practices to thrive



Background:

- Community hospital located in Suffern, NY
- Part of Bon Secours Charity Health System, a member of the Westchester Medical Center Health Network (WMCHHealth)
- Performs about 3,500 deliveries per year
- OBHG partner since June 2017

Challenge:

Good Samaritan wanted to improve patient safety in the L&D, relieve community OB/GYNs from the burden of call and have reliable backup for the midwifery practice.

When Dr. Patricia Pollio accepted the Director of OB/GYN position at [Good Samaritan Hospital](#) in 2011, one of her goals was to implement a 24/7 OB hospitalist program. She wanted to reduce the number of potential harm events by having full-time OB coverage. She also acknowledged that she had an aging department with many providers having been on staff for more than 25 years.

“They had a burden of service call and handling the emergency room’s unregistered patients, and they were really getting burned out,” said Dr. Pollio. “I wanted to reduce liability and achieve better outcomes while also deferring some of the extra stress on my medical staff.”

Additionally, Good Samaritan had a free-standing midwifery practice that was providing full-time coverage for their patients. The practice required back-up OB/GYN support

to comply with regulations and in case of emergencies. As the OB/GYNs were less willing to provide that backup, it threatened the ability for the midwifery practice to continue to see patients.

The personnel providing midwifery care changed, and the OB/GYN practice that was backing them up decided to discontinue coverage. This would have most likely caused the midwifery practice to fold.

“This was a huge problem because a portion of our local community really wanted the midwifery service,” said Dr. Pollio.

Solution:

OBHG provided hospital coverage, eliminating the burden from community OB/GYNs and supporting the midwifery practice.

In 2014, Good Samaritan set up a committee to explore OB hospitalist models and began having initial discussions with Ob Hospitalist Group (OBHG). Good Samaritan's integration with the [Westchester Medical Center Health Network](#) provided the capital to fund the OBHG partnership, and the program started in June 2017.

"We looked at different hospitalist models and we explored potentially setting up our own hospitalist program," said Dr. Pollio. "But we just felt that we wanted to go to the experts. OBHG brought their experience to the table, and they helped negotiate all of the logistics of the regulatory requirements for establishing the OB emergency department."

In addition to her role as department director, Dr. Pollio is also a private practitioner in a large, private OB/GYN group as well as president of the Good Samaritan medical staff.

"Roughly 75 percent of my time is spent caring for my patients clinically and 25 percent is administrative. Creating our own OB hospitalist program was more than a 25-percent administrator could do," she said. "The insurance of OBHG having us covered is invaluable, and it would have been hard to piece together on our own, I think."

Now, OBHG hospitalists serve as the primary support for the midwifery practice in several ways: as on-site coverage, as physician backup when one of the CNMs is on call and as the primary provider when there is not a midwife on call. They work collaboratively and use well-defined criteria to determine when it is appropriate for the midwives to consult with the OB hospitalists. This also takes the burden off private-practice OB/GYNs who can now focus solely on their own patients.

"Because the OBHG hospitalists were in place, the midwifery practice was able to maintain the service line and build their staff up," said Dr. Pollio.

"We would never want to go back to not having a hospitalist program. We don't have the infrastructure administratively to do this on our own."

— Dr. Patricia Pollio, Director of OB/GYN
Good Samaritan Hospital

Results:

An OBHG hospitalist partnership enabled OB/GYN and midwifery practices to thrive.

Dr. Pollio works closely with OBHG Site Director Dr. Fred Nichols to ensure that OB shifts are covered and to troubleshoot any clinician issues. She says that two years into the partnership, doctors and patients alike are happy about the collaboration.

"All the doctors were very thrilled to know that they weren't going to get dragged into situations because their backup doctor wasn't in house," said Dr. Pollio. "I think OBHG's partnership is really ideally suited for a community hospital with as many deliveries as we do."

But physicians and midwives are not the only ones benefiting from this partnership, the patients are reaping the benefits too. According to Dr. Pollio, the endorsement of patient advocates and doulas in the community has been a strong driver of Good Samaritan's reputation and utilization.

"It's been pretty remarkable to see how well received the hospitalists have been," she said.

The OB hospitalist support allows them to keep their midwifery practice going and will eventually support the development of a full midwifery program.

"We would never want to go back to not having a hospitalist program," said Dr. Pollio. "We don't have the infrastructure administratively to do this on our own."



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