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8 Statistics for Hospitals to Track Weekly

Written by Leigh Page | [March 28, 2011](#)

The senior leadership team at Sacred Heart Hospital in Eau Claire, Wis., reviews eight statistics on a weekly basis. Here Faye Deich, Sacred Heart's COO, reviews each statistic and why it is measured.

1. Weekly gross revenue. The hospital compares gross revenue with its targets. This gives leadership an opportunity to adjust expenses if revenue has been falling. "You can't wait until the end of the month to know about this," Ms. Deich says. "If you know that revenue is less than anticipated, then you can adjust expenses." The weekly report also breaks down gross revenue by several key high revenue areas, such as surgery, ED, catheter lab and radiology.

2. Admissions. While hospital staff check the patient census throughout the day, senior management examines admissions on a weekly basis. "If admissions are high, we focus attention on throughput," Ms. Deich says. "Are patients being discharged on time? Are they getting services such as CT scans in a timely manner?"

Conversely, if admissions are low, leadership will need to consider sending employees home. "This is not a popular decision, a report on admissions levels helps everyone understand why," Ms. Deich says. Employees directly involved in patient care might be sent home first. If low admissions continue for more than two days, people in fixed services, such as marketing or business services, might be asked to stay home too. In addition, leadership might decide to cancel some travel or put off minor purchases to ensure budget targets are met.

3. Outpatient visits. Leadership also reviews outpatient visits, even though this metric is not a significant part of Sacred Heart's operations. Weekly visits for surgery, labs, radiology and overall outpatient volume are compared with targets. "If you are not hitting your numbers you start asking questions to uncover the reason for negative fluctuations," Ms. Deich says.

There may be some obvious answers. For example, admissions are often down on spring break because, with schools closed, some physicians are on vacation with their kids and are not admitting patients. "If this goes on for three weeks we might start asking a number of other questions about physician referrals, technology need and availability, service standards or competitor positioning," she says.

4. Number of births. This statistic just involves nursery operations. If births are down and coverage isn't needed, some employees would be asked not to come in.

5. Patient satisfaction scores. Press Ganey satisfaction scores are broken down by inpatient, outpatient and ED patients. "We don't want to get all excited about the scores, but there are several we just want to review," Ms. Deich says. "What we are looking for is trends and patterns." Comments by patients are also reviewed. Positive reviews are passed on to relevant leadership for staff commendations.

6. Cash collections. The hospital does not look at claims weekly but it does review cash collections, which are also looked at monthly. If collections fall, leadership would want to know the reasons. A significant drop would require cutting expenses.

7. Patients with extended lengths of stay. Some patients stay for longer periods of time either because they are still too sick for discharge or because a nursing home bed or other accommodation at the appropriate care level cannot be found. The hospital may get some extra reimbursement for longer-stay patients who show complications. But if the patient should be sent to a lower level of care and nothing is unavailable locally, hospital staff may look farther afield. "It's a matter of proper utilization of healthcare resources and the right type of care for the patient," Ms. Deich says.

8. Specific admissions for a particular episode. The hospital does not examine infection rates weekly. Because this requires examining medical records, it is very resource-intensive and is done monthly instead. But the hospital does check specific admissions for a particular episode, such as H1N1 during the outbreak last year.

Learn more about [Sacred Heart Hospital](#).