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Rural Focus

A Systemized Approach to a Regional Hospital in a Rural Setting

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Carilion Franklin Memorial Hospital is located approximately 25 miles south of our parent organization, Carilion Clinic. The hospital's community health needs assessments have shown us that our community wants access to care locally. The best way to honor this request is by providing not only access to primary care but access to other needed services as well. Our hospital is extremely fortunate to be a member of Carilion Clinic and to share the many resources that our health system has to offer. By working with our system, we have been able to improve our hospital and deliver more to our community.

Most of my work here at Carilion Franklin Memorial Hospital has been focused around systemizing each department so that they report up to our home base in Roanoke. This process aids our hospital in gaining needed resources and sharing policy, procedures, staffing, and more. We also gain consistency, efficiency, and the right healthcare culture. While it is important to maintain the culture of our community, we must also gain the appreciation of a strong health system culture and that culture should be consistent throughout each of our facilities. To provide, protect, and preserve the culture, all of the hospitals that make up the system must work towards the same mission, vision, and values that we have promised our communities.

A systemized approach to the way we provide care to our communities has benefited our hospital greatly. This article shares the work we have done to systemize many departments within our hospital, including the risk management and quality department, emergency department, radiology department, surgical services, and case management department.

Systemizing Departments

Our organization's risk management and quality departments now reside at the system level and share oversight of each hospital within our system. Our patient

advocacy department manages all complaints and patient advocating throughout the system. This move has brought about much relief in the way we were managing patient advocacy and complaint issues. For example, it cut down the number of staff working to address issues such as complaints or billing questions. All patient advocacy issues now go directly to one area systemwide. By systemizing, our patient advocacy group provides consistency in the initial intake and follow up of all complaints and compliments.

→ Organization Profile

Carilion Franklin Memorial Hospital is in Rocky Mount, Virginia, and is one of seven hospitals that make up the Roanoke, Virginia-based Carilion Clinic. The hospital is located in the foothills of the Blue Ridge Mountains and serves a population of roughly 55,000 people of Franklin and neighboring counties. Carilion Franklin Memorial Hospital has 21 staffed inpatient beds, four ICU beds, 12 emergency department beds, and a 14-bed pre- and post-surgical unit.

Our case management teams now work more closely as a system thus utilizing any and all resources available to them for issues such as placement into long-term facilities or dealing with dynamic family issues. Our local case management team now reports up to our system and they share information and resources to better place our patients as needed. Our team here participates in discharge planning with the rest of the system. There is much more collaboration systemwide and more resources to pull from.

By creating a systemized approach in our emergency department, we can provide shared staffing, even from a leadership perspective. Our Senior Director of Nursing oversees more than one emergency department. Our nursing educators are shared among each hospital for consistency in orientation and competencies. The emergency departments work together to come up with ways to provide efficient and consistent care. This leadership and education model has created some excellent ideas such as tele-triage. We have reduced our left without being seen (LWBS) rates from 5 percent to just under 2 percent. Our 12-bed, 21,000 visits per year, third-busiest emergency department in the system, reduced its LWBS by implementing a system-approved tele-triage program in which our emergency department providers log on from home or in a different location. Our providers will sign on during our busiest times and triage, assess, treat, and discharge patients from the waiting room. This allows us to disposition those lower-acuity patients in a timely manner and get them on their way to better health.

Our radiology department also “systemized” two years ago to share leadership, resources, and become more consistent with the rest of the system. By doing so, our hospital gained a brand-new CT scanner that would have otherwise been placed in another area. This relationship also allowed our hospital to gain a second ultrasound room complete with a new ultrasound machine to bring down a backlog of patients waiting for an ultrasound, both from our own community as well as our Roanoke and other neighboring communities. This department also shares leadership knowledge and collaboration throughout the system.

Our surgical services are the most recent department to systemize. We are currently in the final phase of a complete operating room renovation, which has included expanding our pre- and post-surgical unit from eight to 14 beds, expansion of both of our operating rooms from 300 square feet to 600 square feet each and a complete renovation of our procedure rooms and central sterile department. In other words, we have moved forward from operating out of a 1952 operating room into a brand-new, stainless steel, 2023 surgical suite. Systemizing our surgery department will allow for sharing of staffing (e.g., providers, nurses, and nurse anesthetists), as well as the sharing of competencies, policies, and processes. It will also allow for a better pipeline of patients that can be scheduled for surgery at our own facility. Because we are a short 25 miles from our home base of Roanoke, patients are more likely to come to our facility for surgery rather than wait an extended period for surgery elsewhere. It is our goal to gain further resources from a consistency standpoint for the rest of

→ Key Board Takeaways

The support of Carilion Franklin Memorial Hospital’s board has been critical to developing a more systemized approach to providing care and leadership has found it important to:

- Keep the board informed of all changes and progress along the way.
- Discuss the benefits of working closely with the system (e.g., the ability to share resources and collaborate, develop more efficient processes, have a consistent culture, etc.).
- Bring in dyad leadership to provide presentations on the success or challenges of each department.
- Have the Carilion Franklin Memorial Hospital board chair also serve on the system board of directors.
- Ensure that community outreach provides regular community health needs assessment updates to the board.

the operating room and surgical services. One such gain will be the eventual offering of robotics services within our operating rooms. Consistency in this department from an outpatient standpoint is of profound importance. This plan will allow our surgical department to provide much of the same services from an outpatient perspective that we have at our system in Roanoke. By systemizing our surgical services, we have been given the opportunity to grow our outpatient surgery program. In February 2023, our outpatient surgery cases increased by more than 89 percent compared to the same month in 2022. In fact, our OR has grown from having just four surgeons four years ago to now having 22 surgeons utilizing our OR space.

Systemization within Carilion Franklin Memorial Hospital has been both a challenge and a rewarding benefit. We continue to reap the rewards of being a valued member of a great organization and our community is very supportive of what Carilion Clinic has to offer. Our board of directors has been extremely supportive as each member represents a different area of our footprint. As administrator, I provide an update each month and show the progress that each department has made. I have also begun inviting the dyad leadership of each department to attend our board meetings and speak for themselves about the success of the department. For example, I recently invited our Emergency Services Vice President and Senior Director to come and present growth and data to our board. During that presentation, they shared with our board the success of their tele-triage program and how that program decreased our LWBS rates. They also shared news about staffing in the ED, boarding times, etc. Growing each of our systemized departments and services has been key to survival. Our community has gained services it wants and needs, based on our community health assessments, and we have shown, with the help of Carilion Clinic, that our place in the community stands firm. Our Carilion Clinic culture is solid in this small regional hospital because of the work that we have done to improve our communities.

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