



The Case for Supporting Clinician Work-Life Balance

WITH OUR PARTNER, JEWISH SOCIAL SERVICE AGENCY



"Initially, when we were a smaller organization, all nurses and case managers rotated through being on-call," says Joy Sexton, RN, BSN, hospice director, Jewish Social Service Agency (JSSA) Hospice. "Then, as we got bigger and busier, the impact of covering the calls was felt on the on-call nurse's schedule. She might be up all night with a patient and covering calls. Then she wouldn't be able to see all of her patients the next day because she had to sleep, which affected the schedule."

Eventually, JSSA Hospice, which has a current ADC of 233, hired a nurse-based triage service to address higher call volumes. One of Sexton's priorities was ensuring the service provided customized care to JSSA Hospice's unique patient population.

"One thing I was concerned about was making sure the call center nurses understood how our organization is different," she says. "We are part of a social service agency and serve a large population of the Orthodox Jewish community in Maryland. Our patients have different cultural concerns, and we wanted to convey that to the triage service. People who have chosen us expect that we have a cultural understanding of the Orthodox Jewish community. It was important that we found a service that could be personalized to our patient population."

She says outsourcing after-hours triage has proved valuable.

"It's not like an answering service where someone takes a message and passes on the call – there's real action behind this type of service," Sexton explains. "There's value in the service because the people answering the calls are trained hospice nurses, so they know what questions to ask, they can look at the patient's medical record and see what medications they're prescribed and at what dosage, and they can translate that to a family member."

There have been many times when the number of calls resolved by the call service far outweighs the calls passed along to the on-call nurse. It helps us have better utilization of our on-call staff. There's no replacement for having trained nurses answer our after-hours calls."

Utilizing the service has helped JSSA Hospice retain its nurses as well. "Without the service, I don't know where our staff would be," says Sexton. "If every time we had a change in the organization, we had to rotate routine staff back to on-call, I think we'd be in a tough place and staff would have left."

"We've eliminated staff turnover by being proactive to implement strategies like an outsourced, nurse-based triage service."

"If we had to staff for after-hours calls ourselves, it would be a nightmare. The service saves us a huge number of headaches," says Sexton. "It also helps with cost-savings because we don't have to make unnecessary on-call visits."

It has also helped with patient satisfaction.

"One of the questions all hospices have to ask based on the CAHPS survey is, 'How well do you feel like your issues were addressed after-hours?' We consistently score really well. This contributes to overall satisfaction," she says.



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