

Impact of a newly established hospitalist training program on patient LOS and RIW.

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Introduction

Studies have shown advantages of hospitalists running medical services. Among them, shorter lengths of stay (LOS). Sunnybrook's Hospitalist Training Program started on July 2005 in Toronto. We sought to find out whether LOS in Sunnybrook was shorter for the hospitalist team (Hsp) and whether there were any differences in disposition upon discharge compared to the other Clinical Teaching Units.

Methods

Data from patients discharged from medical wards at Sunnybrook HSC between July 1, and December 31, 2005 were obtained from Health Data Office: attending team (Hsp), Teaching Unit (CTU)), patient's age and sex, LOS, main diagnosis, Case Mixed Groups Code (CGM), Resource Intensive Weight (RIW), and disposition upon discharge. Multivariable analysis for LOS and disposition upon discharged were carried out. A propensity score was calculated for LOS.

Results

1716 patients were discharged during the study period. (CTU) 1451 (52% female) and Hsp 265 (56% Female). Age, RIW, and LOS median and (1st interquartile, Q1; 3rd interquartile, Q3) for Hsp were 79 (63, 86); 1.28 (0.88,2.36), 9 (4,17), and for CTU 77 (63,85), 0.92 (0.72,1.58) and 5 (2,11). After adjusting for RIW and selective admission, mean (95%CI) LOS for Hsp was 7.5 (6.0-8.1) and 6.5 (6.3-6.8) days for CTU with P-value of 0.0571.

Disposition

(n)	Home %	Support Services %	Transfer Acute Hospital %	Transfer LTHCF *%	Died %	Signed out %	Transfer other facilities %
Hsp (265)	40	11	20	18	10	1	0
CTU (1451)	53	9	8	17	11	1	1

*Long Term Health Care Facility

Multivariable analysis showed that admitting team, age, and RIW all had a significant effect on the odds ratios of disposition. Increasing age and RIW increased Odds Ratio of discharge to long term facility or dying.

Conclusion

Inception of the hospitalist training program did not decrease LOS. Odds Ratios for transfer to long term care facility and discharge with support services compared to discharge home were higher for Hsp and associated with age and RIW. Other unaccounted factors could include Staff Experience.