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Community Orthopaedic Trauma
Care

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Disclosure

None

Overview/Purpose

- Briefly summarize how we handle the orthopaedic trauma call in a relatively rural community setting
- Illustrate the point that there isn't a single "best solution"
- Each hospital and each community has its own unique factors to consider

Geography

- San Luis Obispo County
 - Population of 250,000
 - 3,600 Square Miles
 - LA county has 40 times the population with only 20% more area
- Northern Santa Barbara County
 - Santa Maria area 150,000

Geography

- Divided into four distinct regions
 - North County
 - San Luis Obispo
 - South County
 - Santa Maria

How Did We Get Here

- Each region resolved the orthopaedic call panel “problem” uniquely
- Believe meeach hospital had a problem with getting coverage!
- I will attempt to give a brief summary of our experience over the past 15 years

North County

- Twin Cities Hospital
 - Tenet (for profit)
 - Fifteen years ago call was mandatory
 - Call panel divided equally
 - Eight years ago
 - Negotiations began with hospital for stipend

North County

- Bylaws changed to voluntary
 - Resulted in two providers dropping off the panel
- Five years ago incomplete coverage (holidays and weekends uncovered)
- Finally a stipend of \$200/day had little effect
- Rate increased to \$500/day
- Incomplete call coverage continued
 - Urgent cases transferred to Tenet facility in San Luis Obispo twenty miles away

North County

- Two years ago hospital attempted to hire locums and bring in a new provider unsuccessful
- Delphi already provided services for other specialties and extended it to cover orthopaedics
- Currently 24/7 365 coverage by Delphi

North County

- Impact
 - Most providers are happy
 - No more ER call, concentrate on elective practice
 - Able to work out amicable cross coverage
 - SLO call panel not exposed to transfers
 - One provider dropped off call panel and moved all elective cases to a non Tenet facility

San Luis Obispo

- Fifteen years ago three hospitals
 - All three covered by one on call orthopaedist at a time who called for help if necessary
 - Call was required for full staff privileges and equally shared among providers

San Luis Obispo

- Ten years ago
 - I began negotiations for a stipend
 - County facility closed
 - One non-profit facility refused to negotiate
 - Enforced bylaws to mandate call
 - Resulted in boycott/withdrawal of privileges

San Luis Obispo

- For profit facility Sierra Vista (Tenet) began negotiating
 - Only with the threat of boycott and formation of Trauma Team Concept was a stipend granted \$1500/day
- Five years ago
 - French Hospital purchased by CHW began negotiations and eventually granted stipend \$500/day
 - Sierra Vista lowered stipend (\$1100/day with built in raises \$50/day/year)

San Luis Obispo

- Currently
 - Both hospitals are covered 24/7 365
 - Equally divided by providers
 - Impact
 - Call panel and hospital happy currently
 - Multiple changes are on the horizon!

South County

- Fifteen years ago
 - Community based non profit facility
 - Call divided un-equally among call panel
 - Call mandatory unless otherwise covered
 - The majority provider became unhappy with ER exposure (liability, poor patient compliance, difficult lifestyle, large percentage of patients were unfunded, lack of hospital support)
- I started my practice with the support of the hospital and took the majority of the call

South County

- Ten years ago
 - I began negotiating for a stipend
 - Met with the usual we simply don't have the money, if we do it for you. . . .
- Bylaws enforced to mandate call
- I dropped off the call panel and withdrew my privileges for 3 1/2 years
- Hospital hired an Orthopaedic Hospitalist

South County

- Five years ago
 - Arroyo Grande Hospital became a CHW facility
 - Hospitalist remained
 - Call became voluntary
 - Stipend granted \$1000/day
- Currently the Hospitalist takes 3/4 of the call with two other providers taking the rest
- Impact has been a relatively good relationship between hospital and providers

Santa Maria

- Fifteen years ago
 - Two hospitals
 - Call mandatory for privileges
 - Divided equally among providers
 - No compensation

Santa Maria

- Ten years ago
- Multiple changes
 - One hospital closed
 - New group of providers came to town supported by the remaining hospital
 - Multiple providers left, retired or changed practice

Santa Maria

- Five years ago
 - Negotiations with hospital for a stipend began and resulted in success
- Currently
 - CHW facility with a stipend in place (\$1200/day)
 - Covered 24/7 365
 - Call divided equally by four providers
 - Has resulted in good relationship between hospital and providers

Summary and Conclusions

- This one area of California has five hospitals
 - Three CHW
 - Two Tenet
- The Orthopaedic ER call panel problem lead to three distinct solutions

Summary and Conclusions

- Community based private practitioners providing full coverage for a stipend
 - One Tenet and two CHW hospitals
- Hospitalist combined with private practitioners with a stipend
 - CHW hospital
- Large Contracted Provider-Delphi exclusively
 - Tenet hospital

Thank You and Good Luck!

Questions