

## MIH CP Assignment Program, Rev 1, 24Jun25

### Goals:

- 1) To efficiently schedule Pt's to a CP to minimize drive time, to maximize previous CP interactions with the Pt, and to minimize the number of In Pt admitting different hospitals for the CP at each shift
- 2) To decrease the lead CP's workload and to allow him/her to better utilize their time on management tasks as opposed to creating manual routing lists multiple times for each shift
- 3) To create an automated daily optimized CP assignment list which can be resorted on a rapid basis for Pt changes or CP call outs/schedule changes
- 4) To create an automated assignment list for Tuck In visits

### Requirements:

- 1) CP daily work location required (Beam, North, etc)
- 2) Each In Pt and each Out Pt must be identified with a valid GPS location
- 3) Each In Pt and Out Pt must be identified with a MRN #
- 4) Each In Pt's admitting hospital must be identified (CMC, Cab, etc)
- 5) In Pt's eligible to be seen by an EMT (Tuck In, no Lasix and no Insulin for example) must be identified
- 6) In Pt Pediatric Pt's must be identified
- 7) Out Pt's will be scheduled with EMT's when possible (as long as Pt care in in the EMT scope and sufficient EMT's are available on the shift). Out Pt's will be secondarily scheduled with CP's when necessary.
- 8) CP's will be assigned a maximum of 4 In Pt's (8 visits)
- 9) EMT's and CP's will be assigned a maximum of 6 Out Pt's (6 visits)

Results:

Initial Morning Assignments:

- 1) CP daily assignments will be created using a ranking system (-2 to approx. 20)
- 2) The Pt with the highest numerical match to a particular CP will be assigned to him. Additional assigned Pt's will be ranked accordingly.
- 3) If a CP saw the Pt the previous day +2 will be added
- 4) If the CP saw the Pt at any time during their In Pt stay window +1 will be added
- 5) CP work location in relation to Pt location:
  - a. Within 5 miles +5
  - b. Within 10 miles +4
  - c. Within 15 miles +3
  - d. Within 20 miles 0
  - e. Greater than 30 miles -2
- 6) If the second, third, and/or fourth In Pt a CP sees is from the same admitting hospital as his first Pt +5
- 7) If the second, third, and/or fourth In Pt a CP sees are geographically near the first In Pt:
  - a. Within 1 mile +5
  - b. Within 2 miles +4
  - c. Within 3 miles +3
  - d. Within 4 miles +2
  - e. Within 5 miles 0
  - f. Greater than 5 miles -2

#### Tuck In Assignments:

- 1) CP Tuck In assignments will be created using a ranking system similar to the initial assignment logic with the Tuck In assigned to the CP (or EMT) with the highest numerical ranking.
- 2) If the CP previously had 8 (or more) Pt assignments scheduled, add -5
- 3) If the EMT previously had 7 (or more) Pt assignments scheduled, add -5
- 4) Tuck In location in relation to average GPS Pt locations of previously assigned Pt's:
  - a. Within 1 miles +5
  - b. Within 3 miles +4
  - c. Within 5 miles +3
  - d. Within 10 miles 0
  - e. Greater than 20 miles -2

#### Out Pt Assignments:

- 1) CP Out Pt assignments will be created using a ranking system similar to the initial assignment logic with the assigned to the CP (or EMT) with the highest numerical ranking.
- 2) EMT certification – add +5
- 3) Pt location in relation to average GPS Pt locations of previously assigned Pt's:
  - a. Within 1 miles +4
  - b. Within 3 miles +3
  - c. Within 5 miles +2
  - d. Within 10 miles +1
  - e. Greater than 20 miles 0

#### Options:

- 1) Include a Pt acuity ranking (0 or -1). The -1 ranking would make the CP with one or more high acuity Pt's rank lower for additional assignments.