

Design

Assessment – The Emergency Department was hitting the goal of arrival to EKG read by the ED physician within 10 minutes only 47 % of the time.

Create Buy-In – Held a meeting with the frontline care providers to determine barriers and potential solutions.

Proposed Solution – Remove direct bedding process of placing patients immediately into a bed upon arrival to the Emergency Department.

Direct Bedding is an evidence-based practice that has been shown to improve the timeliness of the patient's care and improve the perception of care.

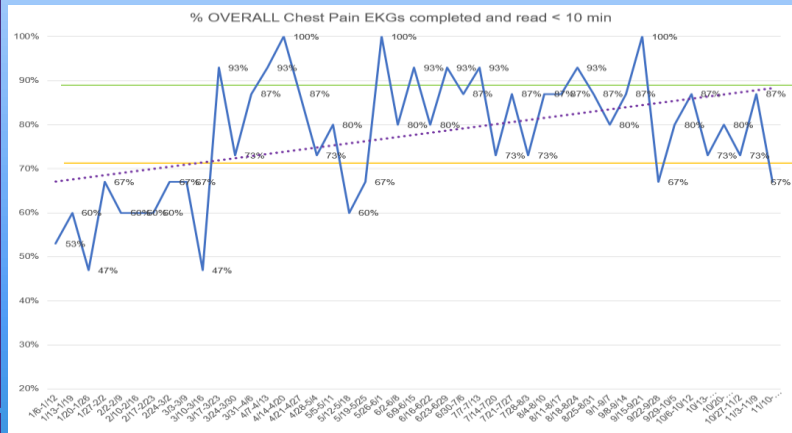
Implications

Include frontline care providers in process development which identifies barriers and solutions as well as creates employee buy-in.

Trialing processes that are not Evidence Based may improve patient care and outcomes.

Purpose

To complete an EKG and have it read by an ED physician within 10 minutes of arrival for all patients with a chief complaint of chest pain.



Yellow – 50th Percentile, Green 90th Percentile

Method

Initial Process Change – removed the direct bedding process and implemented an EKG room in triage.

Monitoring – completed randomized audits of 15 chest pain records weekly to track arrival to EKG read times.

Feedback – An email was sent to the frontline staff weekly with the percentage of patients that met the goal of arrival to EKG read by the ED Physician within 10 minutes.

Results

From initial implementation of the process to current state, the arrival to EKG read within 10 minutes has increased from 47 % to 80 % with multiple weeks of 100 % of the patients meeting our goal.

References

1. DeFlicht, C., Geeting, G., and Paz, H. (2015). Reinventing emergency department flow via healthcare delivery science. Health Environments Research and Design Journal. 8, (3), 105-115.
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3. Marino, P., Mays, A., Thompson, E. (2015). Bypass rapid assessment triage: How culture change improved one Emergency Department's safety, throughput and patient satisfaction. Journal of Emergency Nursing. 41, (3), 213-220.