Improving the Emergency Department Handoff to Facilitate Inpatient Throughput

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INTRODUCTION

The Emergency Department throughput has been identified as a major factor that can impact care and quality throughout the hospital(I). Delays in patient flow may derive from hand-off issues, availability of beds, and policies that inhibit patient transport (II). The nursing hand-off was a large frustrating factor for all staff as well as a barrier to smooth patient flow.

BACKGROUND

Purpose:
To eliminate delays in throughput and maximize patient flow.

Objectives:
- Determine key issues and solutions that can be addressed as a team.
- Select a workflow process that can impact the bed capacity challenge.
- Identify patient throughput metrics that can provide data pre and post changes.

ACTIONS TAKEN

- Standardize the patient report process
- Inpatient RN would call ED RN in <15 minutes.
- Remove the “No Fly Zone”
- Ensure room is ready prior to the patient being moved to the unit.
- The ED secretaries “instant notified” room control when patient leaves the ED.
- Utilization of PDCA cycle to help improve process.

OUTCOMES

Average Time Report Taken: baseline 24 minutes to 10.7 minutes, a 55% decrease

IMPLICATIONS

- The pull process allowed inpatient RNs control of patient flow which improved organization.
- The process increased the timeliness for access to inpatient care.
- Nursing autonomy was developed due to the bedside nurses helping to create many of the interventions for their unit.

REFERENCES


RESOURCE CONTACT

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