A private North Carolina hospital needed to match treatment capacity to rising demand. The president of the hospital proposed that the emergency department staff find an alternative site to treat patients with less urgent needs, and that they finalize an option in three days. The hospital did not have any vacant space near the emergency department. An off-site preoperative work-up area, however, was in use only during the day shift on weekdays. This 10-bed unit was once the intensive care unit. The team realized this area was well-configured for a fast track and might be used in the evening to take the pressure off the emergency department during peak volume hours.

A task force, including leaders from a number of the hospital’s departments, gathered. Over the next three days, those leaders considered every possible issue in connection with turning the preoperative area into a fast track during the evenings. The list below shows obstacles they knew they faced.

**Figure 10.1: Challenges to Implementing a Proposed New and Off-site Fast Track**

- Find nursing staff to cover eight more hours a day despite current vacancies
- Find medical providers to cover eight more hours a day, not included in a recently arranged schedule
- Arrange for appropriate linens and supplies
- Ensure access to medications and their security
- Assure the area would be clean and ready for surgical patients arriving at 5:30 a.m.
- Provide signage and assistance to guide patients 250 feet from the ED to the new area
- Adjust the computerized real-time tracking system to include these patients
- Ensure triage guidelines for patients sent to new unit go with the patients
- Provide registration capability in new unit