In early 1997, Nash General Hospital’s emergency department reached maximum capacity, and patients were experiencing long delays in treatment. The administration formed a team to improve patient flow with the goal of streamlining the processes of triage, treatment, and discharge. The team first compiled dependable baseline statistics for total cycle time for emergency patients: entry to triage, entry to being placed in a room, placement in a room to being seen by a physician, and preparation of discharge order to actual discharge. Meanwhile, the team conducted similar measurements in turnaround times for X-rays and lab studies.

Additional goals, details on the changes implemented, and the overall results are below.

**Figure 10.2: Reducing Waiting Times in the ECC**

### Nash Health Care Systems

#### Reducing Waiting Times in the ECC

**Aim:** To reduce throughput time in the Emergency Care Center for all types of patients (Fast Track, Emergency and Admissions) by 25%.

**Key Outcome:** The duration of time from registration in the ECC to the discharge or admission time from in the ECC.

**Measurements:** 5 charts selected at 4 times per day (1000, 1400, 2200, and 0200)

**Plan:** for 3 types of patients: Emergency, Fast Track and Admissions

<table>
<thead>
<tr>
<th>Time (in Minutes)</th>
</tr>
</thead>
<tbody>
<tr>
<td>90</td>
</tr>
</tbody>
</table>

**Some Details on the Changes:**

**Fast Track**
- Expanded hours of Fast Track from 12-16 hours/day (3)
- Reduced handoffs in Fast Track (3)
- Cross trained NAs to do computerized secretarial duties (3)
- Reassigned NAs coverage to cover the expanded hours in Fast Track (3)

**Triage**
- Changed triage nurse role, assisted with Fast Track when not busy (1)
- Triaged registration done in room if empty (1)
- Used protocol for extremity x-rays (3)

**Other**
- Developed system of cards to let physician know when x-rays, EKG’s, etc., were complete (1)
- Respiratory therapy in Emergency Saturdays, Sunday, and Monday 900-2100, cross trained to do EKG’s, draw blood (5)
- In house admitting physician to do workup upstairs (2)
- Additional Radiology tech added for weekend coverage (4)
- Contact held among the 4 teams of caregivers to determine the best plan for decreasing delays (8)
- Contact held among the 4 teams to determine best efficiency (10)

**Results**
- Decreased wait time in Fast Track by more than 50%
- Decreased wait time in main Emergency by 40%
- Chartered improved patient admission process team to facilitate admission of ECC patients
- These improvements made in spite of 20% increase in patient volume since January 1997

www.studergroup.com/hardwiringflow