The goal of improving patient flow is to maximize service capacity. How many patients can be cared for without sacrificing quality of care. Here are six vital action steps to begin improving flow on the front end to help achieve this goal:

1. Measure your patient demand by hour and design a system to handle it.
2. Make sure your triage processes enhance flow, not form a bottleneck. Use a system to segment patient flow.
3. Design and fully deploy a “fast track” approach to your uncomplicated patients.
4. Commit to the “right stuff”—the right space, the right staffing mix, and the right staff.
5. Establish a results-waiting area.
6. Devise and implement a reliable method to track patients and results.

These six indispensable actions provide a compelling approach to improving emergency department flow, safety, and service, particularly when paired with the critical patient flow concepts listed below.

**Figure 7.2: Critical ED Patient Flow Concepts**

- The front door and your front end processes drive flow.
- Triage is a process, not a place.
- Get the patient and the doctor together as quickly and efficiently as possible.
- Fast track is a verb, not a noun.
- Keep your vertical patients vertical and in motion.
- Patients who need few or limited resources should not routinely wait behind those patients who need multiple resources—regardless of how heavy the ED patient volume is.
- For horizontal patients, real estate matters. For vertical patients, speed matters.
- We want to be fast at fast things and slow at slow things.
- Flow occurs when doctors do doctor stuff and nurses do nurse stuff.
- Good IT won’t fix bad processes—and mediocre IT makes things even worse.
- Making people unhappy and then sending them a bill is not a healthy business model.
- Satisfaction does matter—for you, your team, and your patients.