

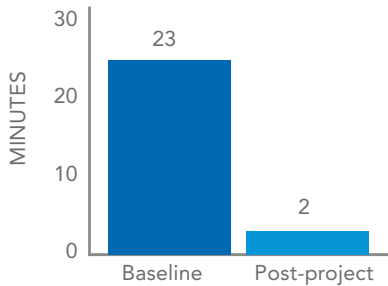
# Front-end Process Redesign in a Community Hospital

CASE STUDY



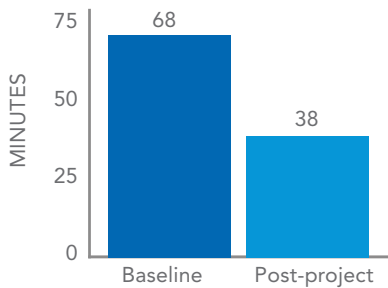
## Arrival to Triage Time

91% IMPROVEMENT



## Arrival to Bed Time

44% IMPROVEMENT



### BACKGROUND

A 300 bed community hospital in Kentucky struggled with higher than desired arrival to triage times, arrival to bed and arrival to provider times, as well as an increased left without being seen rate. The emergency department sees over 58,000 patients a year in a 24 bed department, with 7 fast-track rooms. Blue Jay Consulting, LLC, was asked to provide a combination of enhanced interim leadership and performance optimization to address these concerns.

### APPROACH

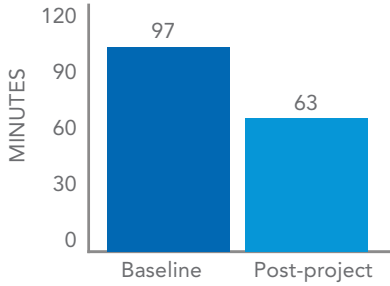
An in-depth operational assessment was completed to identify specific areas of opportunity in the department. Based on the findings, a project plan was developed in coordination with hospital leadership. Priority was placed on redesigning the triage process. Emergency department staff, including nurses, technicians and secretaries, were re-educated on the triage process through a rigorous ESI 5-level training course. A collaborative workgroup, consisting of providers, nurses, technicians, unit secretaries and registrars, was established and charged with developing a comprehensive change plan for triage. This team also reviewed, revised and implemented triage protocols and policies.

The process change was disseminated to all staff through the use of newly implemented communication techniques for the department consisting of shift huddles, reinstated monthly staff meetings, leader rounding in the department and a communication book and bulletin board. Furthermore, bi-weekly charge nurse meetings were implemented. These meetings focused on continuous professional development, and leadership and coaching skills for the charge nurses. Greater accountability was placed on the charge nurses to support the process change and assist in the hardwiring of new implementations.

After the process was implemented, the workgroup continued to collaborate weekly to fine tune the process as needed. The workteam decided they would meet on Thursdays with any changes being implemented the following Tuesday. This created stability in the change process and the opportunity to communicate and educate the staff on the upcoming change. This strategy of fine tuning the process greatly increased staff satisfaction and adoption throughout the implementation.

Arrival to Provider

35% REDUCTION



RESULTS

The arrival to triage time was reduced from 23 minutes to 2 minutes, arrival to bed time was reduced from 68 minutes to 38 minutes, and arrival to provider time was reduced from 97 to 63 minutes. All of these improvements occurred while patient census increased by 14%. The left without being seen rate was decreased from 4.3% to 3.0%, generating over \$500,000 in additional annualized revenue to the organization. Patient satisfaction scores in wait time increased from the 77th percentile to the 90th percentile, and scores in overall nursing increased from the 73rd percentile to the 84th percentile, which was the highest score achieved in over 2 years.

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