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MISSOURI TEAM QUALITY AWARD RECIPIENT

ED PATIENT THROUGHPUT TEAM

at St. Anthony's Medical Center, St. Louis



ADVANCED MEDICINE. COMPASSIONATE CARE.

PROFILE

St. Anthony's Medical Center is a 767-bed comprehensive healthcare complex in St. Louis County, whose primary focus service lines include Orthopedics, Cardiology, Neurosciences and Emergency Services. St. Anthony's 43-room Emergency Department is among the busiest in the state, treating nearly 70,000 patients annually. St. Anthony's has 3,854 employees and an 850-member medical and dental staff of private practitioners.

OPPORTUNITY FOR IMPROVEMENT

Supporting St. Anthony's Medical Center's mission, vision and strategic plan, the chief hospital officer appointed a multi-disciplinary team responsible for reducing length of stay in the Emergency Department (ED) for patients requiring hospital admission. Timely patient placement was selected because it directly affects quality patient care, patient safety, and patient, physician and employee satisfaction. Over 60% of the hospital's inpatient volume originates in the ED and nearly one-third of adult ED patients are admitted. At team inception, 74% of admitted ED patients exceeded the two-hour industry standard from physician decision to admit to actual admission. The team was chartered to build a culture of shared accountability for the timely movement of patients from the ED to nursing floors.



TEAM ACTIONS

A leadership challenge to "design the ideal patient experience" centered team discussions and activities on collaboration and resource sharing among nursing and ancillary departments. The team evaluated current patient flow issues by using process flow-charting and multiple analysis tools, and obtaining and benchmarking industry best practices. These analyses resulted in a comprehensive picture of patient flow and allowed for the identification and prioritization of the top issues requiring attention. Initiatives included an electronic time stamping notification for bed cleaning; installation of a wireless phone system and e-pagers; daily bed availability briefings; assignment of an admission nurse to the ED during peak hours; and ED information system availability on nursing floors to facilitate de-centralized decision making.

RESULTS

Fiscal Year 2005 Results:

- Required cleaning of hospital bed and room as a reason for delay decreased from 18.7% to less than 1%.
- Patient placement delays greater than two hours decreased 31.5%, while acute care ED admissions increased 8%.
- Average length of stay (per admitted ED patient) decreased 13 minutes, providing a nine hour savings of ED patient care time and space occupied per day.
- Patient satisfaction with "speed of admission" from the ED showed statistically significant improvement in three of four quarters (source: Press Ganey, national leader in patient satisfaction measurement for healthcare).
- ED output improvements resulted in improved ED input indicators: hours on diversion, patients leaving without treatment, and wait times.

FUTURE PLANS

The team will continue efforts to minimize patient placement delays until none exceed the two-hour standard. The ultimate goal is a virtual waiting room for arriving ED patients, and timely acute bed placement is critical to achieving this goal. To ensure ongoing team focus and momentum, identical patient flow goals were established among key department stakeholders for next year; and the team was expanded to include additional areas, such as the Operating Room.

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