

Decreasing Left Without Being Seen

**Team Membership: GMH ED Staff, Sylwia Wright,
RN, MSN, Mark Cichon, DO**



**Gottlieb
Memorial
Hospital**

Background – The Problem

- June 2011, Elmhurst Hospital opens a new hospital several miles west. This made Gottlieb Memorial Hospital's Emergency Department (ED) the closest hospital for many ambulances and patients. The average monthly volume in the ED increases from 1800 per month to 2100. Waiting times increase for ED patients and the number of patients that Left Without Being Seen (LWBS) by a ED physician soars to 10%.

Project Aim Statement

- Identify process issues affecting ED throughput causing increased LWBS by applying best practices such as Standard Operating Procedures (SOPs) for nurses, Emergency Severity Index (ESI) as the triage standard, and implementing a new electronic medical record (EMR).

References Agency for Healthcare Research and Quality, Emergency Nurses Association, American College of Emergency Physicians

Project Goals

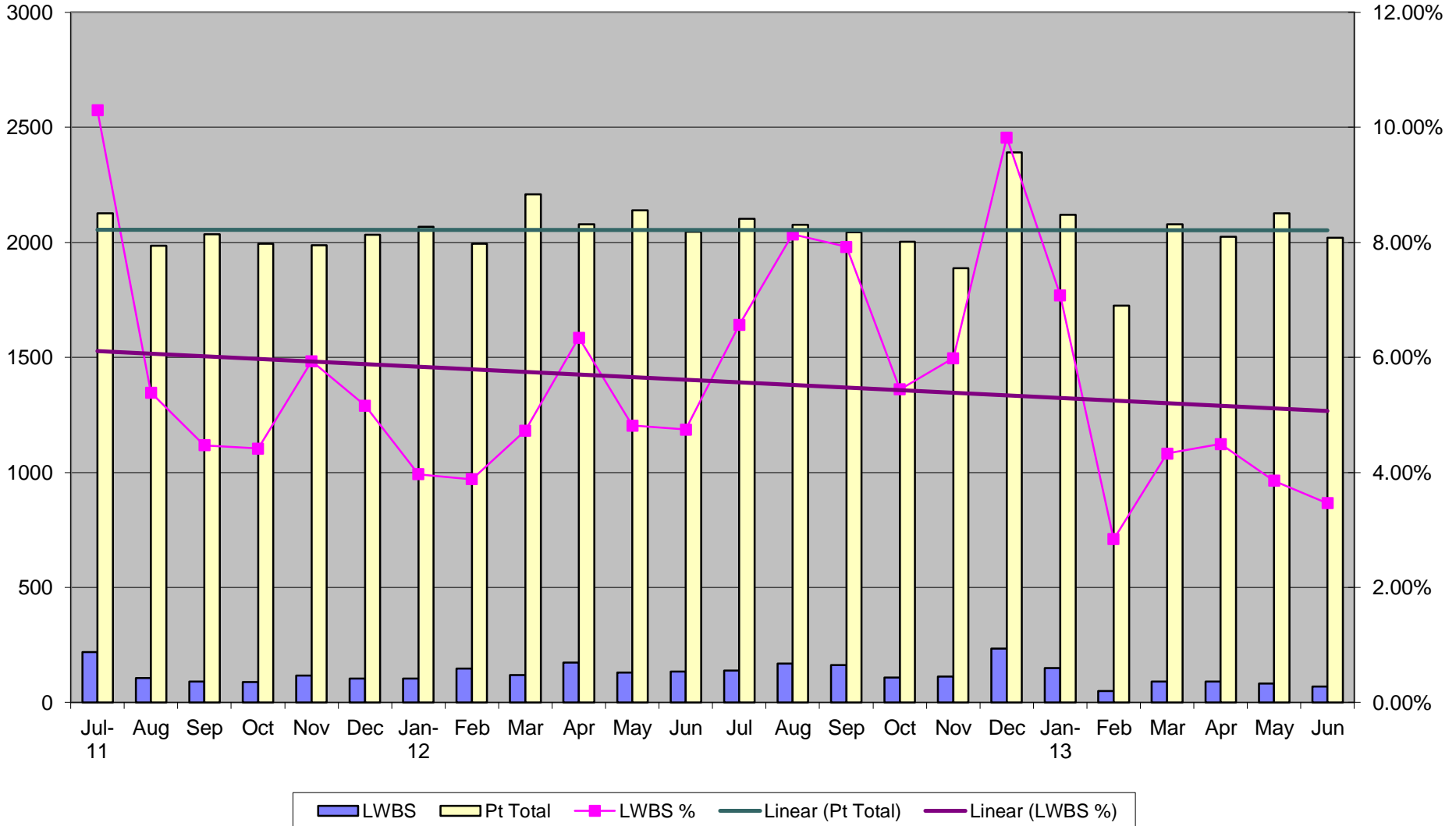
- Decrease LWBS to less than 5% by end of June 2013

Solutions Implemented

- Pull till Full model - Redefined “triage” as a process rather than a location. Nurses bring patients back to an empty room immediately and complete the process at the bedside rather than doing the process in the triage room (December 2012).
- Implemented Emergency Severity Index version 4 as the triage algorithm (December 2012).
- Implemented Standard Operating Procedures for nurses (December 2012).
- Reviewed & revised staffing patterns for physicians and nurses (July 2012 & April 2013).
- Implemented Phlebotomy staffing in ED during peak hours (April 2013).
- Implemented EPIC (January 26, 2013).

Results

FY 2012 thru 2013



Analysis of Results

- LWBS rates have decreased. There have been several spikes throughout the 2 year period.
- ED Volumes have maintained between 2000-2100 per month

Lessons Learned

- Changes need planning and constant reinforcement
- Staff by-in is key to success
- The new EMR with computerized physician order entry and electronic physician documentation eliminated many redundancies
- It is important to evaluate changes and provide feedback

Next Steps

- Review staff performance with chart audits & feedback
- Reinforce methodology
- Provide annual competency on ESI and SOPs
- Continue to review patient flow to identify additional areas of opportunities and redefine processes and eliminate waste
- Implement point of care blood analyzers

Contact Information

- NAME: Sylwia Wright
- TITLE: Director of Emergency Services
- DEPARTMENT: GMH Emergency Department
- TELEPHONE EXT.: 708-681-7692
- E-MAIL ADDRS: sylwia_wright@ghr.rog

A review by Manager/AD/Medical Director/VP is recommended prior to submission.

Reviewed By: __Mary Morrow _____
Date __8/27/2013_____