

Hospital Name:
Grady Health System

Address:
80 Jesse Hill Jr. Dr., SE
Atlanta, Georgia 30303

Contact:
Leon L. Haley, Jr., MD, MHSA,
FACEP
Chief of Emergency Medicine
Deputy Senior Vice President
(404) 616-6419
Leon_Haley@emoryhealthcare.org

2006 ED Volume: 155,681
Growth from 2005: -9.1%
Total Staffed Hospital Beds: 778
Acute ED Beds: unknown
Fast Track: No
Clinical Decision Unit: Yes

Problem to be Resolved:
Low patient satisfaction resulting
from overcrowding in the ED

Key Words:

- Patient Care Unit
- Patient satisfaction
- Left without being seen (LWBS)

Lessons Learned:
Combining the concepts of
observation medicine and case
management has helped Grady
Health system decrease short stay
admissions, admissions to
telemetry beds, cost, and relapse
rate, while increasing patient
satisfaction and follow-up care.

Reason for Change:

Grady Health System was receiving low patient satisfaction score, particularly in those areas relating to patients' perception of care and wait times. The hospital was suffering from long delays to move admitted patients from the ED, long throughput times in the ED, increasing ambulance diversion, and increasing left without being seen (LWBS) rate. The solution was to create a procedure to improve patient flow in the ED for patients with specific diagnoses.

Implementation:

The Care Management Unit (CMU) was created to treat patients with specific diagnoses, which were identified as being some of the most common diagnoses seen in the ED. The unit, made up of seven beds, was set up to essentially combine observation medicine with case management. The CMU was staffed with four dedicated case managers and four dedicated CMU nurses. Goals for the CMU were to improve access to primary care, decrease relapse rates, decrease admission on telemetry beds, decrease short stay admissions, and decrease cost.

Initially there were four diagnoses selected for admission into the CMU. These four diagnoses are chest pain with low to moderate risk, heart failure, asthma, and hyperglycemia. Chest pain patients make up more than half of all CMU patients. For the CMU, Grady identified the most common diagnoses seen in the ED, and focused their improvements on these conditions in order to maximize the impact of any changes that they made.

Results/Impact:

Since implementing the CMU, Grady Health System has seen the following changes:

- Decrease in short stay admissions
- Decrease in number of admissions to telemetry beds
- Decrease in cost
- Decrease in relapse rate
- Increase in patient satisfaction

Fifteen percent of CMU patients are admitted into the hospital, with the other 85 percent discharged after staying in the CMU. The average length of stay in the CMU is just shy of 16 hours.

To meet the goal of improving access to primary care, every patient seen in the CMU is given an appointment within 48-78 hours. Between 41 and 44 percent of these patients actually keep the appointments.