

Hospital Name:

Doctors Community Hospital

Address:

8118 Good Luck Road
Lanham, Maryland 20706

Contact:

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2005 ED Volume: 53, 869
Growth from 2004: unknown
Total Staffed Hospital Beds: 185
Acute ED Beds: 23
Fast Track: Yes
Clinical Decision Unit: No

Problem to be Resolved:

ED Throughput

Key Words:

- ED throughput
- Bed meetings
- Rapid response nurse

Lessons Learned:

The NHS training emphasized the importance of obtaining support from hospital executives and other hospital departments. Thus participants received assistance with business plan development and presentation skills, so that they might be more successful in earning the support of the hospital board members.

Reason for Change:

Doctors Community Hospital was one of seven Maryland hospitals to participate in the "New Ways of Working" program, a project overseen by the American Hospital Association and the Maryland Hospital Association. The project was inspired by a similar project of the National Health Service (NHS) in the U.K., which has made great progress in improving hospital workflow and patient care.

Each participating hospital chose a specific problem or issue that their institution faced, and formed a team of physicians, nurses, and other staff members whose purpose was to address this issue. Doctors Community Hospital chose to address the issue of throughput in the ED.

Implementation:

Doctors Community Hospital's Improving Workflow Committee (IWC) was created to help implement all of the changes necessary for this project, including creating a new ED position whose role was to facilitate interdepartmental coordination. IWC also put in place a system to track beds throughout the hospital. Additionally, IWC established a Rapid Response Nurse (RRN) position, whose role is to contribute to the overall quality of care received by patients in the ED. The RRN is involved with overseeing patient throughput in the ED and offering clinical experience as needed.

One of the most significant changes implemented by the IWC has been to hold daily bed meetings. These meetings, now held twice each day, offer a forum for coming up with interdepartmental strategies to help alleviate any problems the hospital is facing. During the meetings, participants discuss the status of beds and patients, any bottlenecks to the flow process, ideal discharge strategies, and ways to prioritize which patients will receive any available beds.

Results/Impact:

Doctors Community Hospital was able to reduce its average monthly diversion hours from 188 per month in January through April 2006 to 105 hours for the months of May through November 2006. The hospital believes that this reduction is a direct result of the efforts of the RRN. The RRN was also successful at improving patient care, particularly by preventing a number of adverse events that otherwise would have resulted in patient transfers to the CCU.