

Hospital Name:
Adventist GlenOaks Hospital

Address:
701 North Winthrop Avenue
Glendale Heights, IL 60139

Contact:
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2006 ED Volume: 16,055
Growth from 2005: -5.3%
Total Staffed Hospital Beds: 62
Acute ED Beds: 19
Fast Track: No
Clinical Decision Unit: No

Problem to be Resolved:
The hospital was looking to redesign its ED to reduce/eliminate waiting

Key Words:

- No-wait ED
- Bedside triage
- Bedside registration

Lessons Learned:
Although Adventist GlenOaks Hospital has been able to successfully convert to a no-wait ED, they caution that this is not a step that all hospitals are ready to take. Years of preparation were necessary for Adventist GlenOaks to eliminate waiting in the ED, which had periodically decreased its wait times prior to eliminating waiting altogether.

Reason for Change:

Over the last few years, Adventist GlenOaks Hospital had successfully reduced waiting in its ED. The department first adopted a policy which required patients to be seen within 30 minutes of arrival. After this was accomplished, they set a new goal, aiming to see patients within 15 minutes of arrival. Again, the successful completion of this goal motivated the hospital to seek to decrease wait times even more.

Implementation:

After hearing about the concept of a no-wait ED, the ED's physician director visited a hospital which had effectively eliminated its ED. Although he was skeptical at first, after spending a day talking with doctors, nurses, patients, and technicians at this hospital, he became convinced that Adventist GlenOaks could not only adopt such a concept, but could do it better. Once he determined that this was a good model to follow, the physician director brought other key staff members to site-visit this facility.

Before it could completely eliminate waiting, Adventist GlenOaks Hospital had to make sure that the proper processes and support were already in place. They had already instituted best practices including bedside triage and bedside registration, which eliminate any unnecessary delays prior to treatment. Additionally, lab and radiology staff were met with and agreed to treat tests from the ED as priority, which eliminated any unnecessary treatment delays in the ED as patients would not be held up in ED beds waiting for test results.

By eliminating a physical waiting room, Adventist GlenOaks Hospital was able to expand the treatment capacity of its ED, putting treatment rooms in the area that was once the waiting room. These additional treatment rooms have provided the necessary capacity to enable patients to be seen immediately upon arrival in the ED.

When patients arrive in Adventist GlenOaks ED, a greeter meets them and calls a nurse to bring them to a treatment room. Once the patient is in the room, his or her vital signs are taken and a patient chart is created bedside during bedside registration. The patient is then seen by a physician, much sooner than with typical triage and registration systems.

Results/Impact:

Adventist GlenOaks Hospital redesigned its ED without a waiting room, and has successfully been able to accommodate patients arriving in the ED without any delays. Patients are now immediately brought to treatment rooms so that treatment can begin right away.