LEAN in the Right Direction to Improve Emergency Department Care
Veronica Palustra, RN, PHN, MSN
El Camino Hospital

Problem:
Prolonged length of stay (LOS) in emergency departments (ED) is a national crisis. LOS is measured as the number of minutes when the patient arrives at the ED to the time the patient is discharged home.

Evidence:
The Institute of Medicine (IOM) described this as a “national epidemic” because overcrowding compromises the patients’ experience by delays in treatment and higher risks for errors. These risks increase inpatient LOS, cost to the patient, cost to the organization, and an increase in mortality and morbidity of the patients.

Strategy:
Strategies to meet the increased demands on Nursing were addressed in a rapid process improvement (RPI) project engaging the front line staff. The RPI utilized “LEAN” methods (a set of management practices from the TPS, Toyota Production System) to improve efficiency and quality in healthcare. By holding ourselves accountable to this process we looked to eliminate waste through identifying non-value-added activity (NVA) to achieve a more valuable patient experience.

Practice Change:
LOS decreased when patients were brought to an exam room immediately after triage. Implementing a team approach to care was paramount to our evaluative process. Work to facilitate throughput, improve communication and collaboration was realized when the patient was met by a provider and RN simultaneously to discuss the plan of care.

Evaluation:
Weekly team meetings to review data and decide on improvements based on root cause analysis resulted in a positive change.

Results:
A decrease in LOS by 5 minutes, equivalent to 20% of our overall goal was achieved in an eight-month period following initial implementation with an 11% improvement in patient satisfaction scores.

Recommendations:
To create a culture of continuous improvement, transparency is vital in daily huddles and a timely white board to display outcomes.

Lessons Learned:
Providing live time, frequent and meaningful updates about the process resulted in staff feeling enabled and empowered to make change, and patients felt more respected and valued.
Bibliography:


