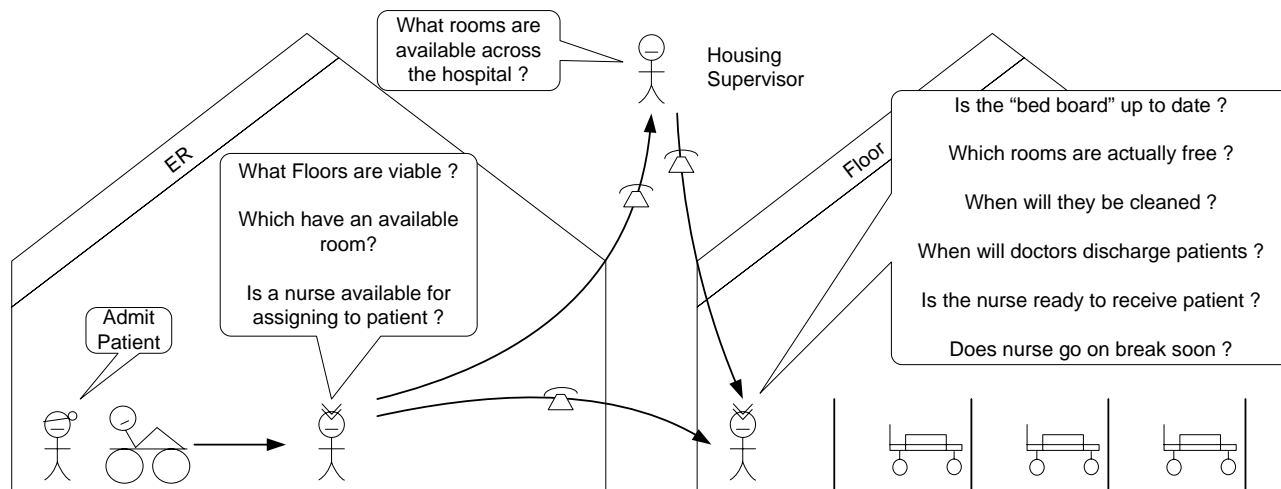


ISSUE : Long "Patient To Bed" (P2B) times causing patient distress

BACKGROUND

once an ED patient has been admitted as an inpatient it takes time before that patient arrives in his/her room. When this time (P2B) is long it is causing added distress to patients.

CURRENT CONDITION



Takes a long time to determine room availability

Patient has to wait for after room is assigned for directives processing

Nurse availability on floor can cause significant wait times

Rooms are empty but waiting for cleanup

PROBLEM ANALYSIS

Problem : Takes a long time to determine room availability

Why : Bed boards are inaccurate

Why : Patient discharges / Room cleanup is sporadic

Why : Partly because "out of hospital" doctors with variable discharge times

Why : Unaware (for a time) that bed requires cleanup

Problem : Patient has to wait even after room assignment

Why : "Advance Directives" does not start until after bed assignment

Problem : Patient has to wait even if a room is available

Why : Nurse is not on duty or not ready to receive patient

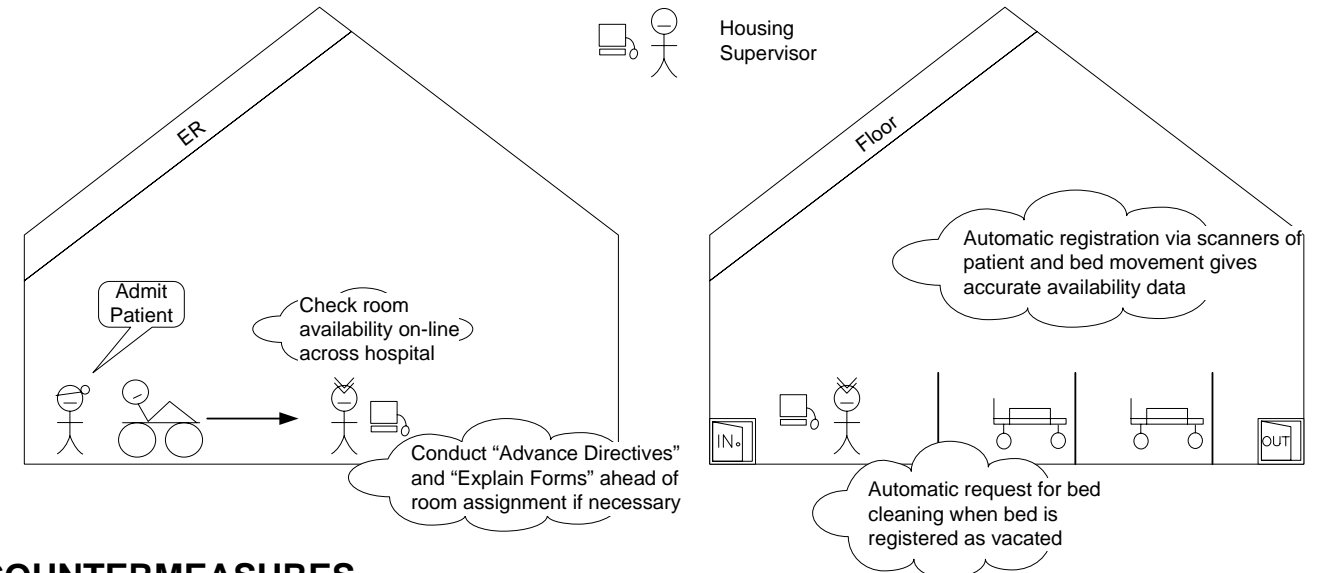
Why : Nurse can be on or near a break or be busy with another patient

Why : Particular problem near shift changeover because it impacts a large number of nurses

(See P2B value stream map for details)

TARGET CONDITION

TO	Bill
BY	Jane
DATE	July 2006



COUNTERMEASURES

- Use admin or volunteer resources to check bed availability on a high frequency basis and update "bed board"
- Start "Advance Directives" before patient bed is assigned

IMPLEMENTATION PLAN

What	Who	When	Outcome
Use additional admin resources with "Go See" approach to keep bed boards accurate and initiate cleanup requests	John	Month of August	Collect wait time data and do before/after comparison on impact of accurate room availability information
Investigate automated bed availability and notification systems in use at hospitals. Visit a working hospital site.	Amy	Month of August	Cost and implementation details for an automated system for room availability hospital wide
Implement better room availability process based on results of August activities	Amy	Sept-Nov	Reduced patient wait times and staff times in finding rooms

FOLLOW UP

- Monthly tracking of outcome values
- Monthly estimation of annual costs / savings
- Monthly update of VSM
- Report out in December

Costs / Savings	Value
Bed Availability System implementation cost (Projected over 12 months)	xxx
Staff time saved per year in tracking bed availability and converted to approx dollar savings	xxx

Outcome	July	Aug	Sep	Oct	Nov	Dec
Characteristic patient wait time (95% of patients have a wait time less than xx minutes)	xxx	xxx	xxx	xxx	xxx	xxx
Average patient wait time	xxx	xxx	xxx	xxx	xxx	xxx