DECREASE DOOR TO PROVIDER TIMEFRAME

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AUTHOR NOTE

This capstone was inspired by the long wait times at the local Emergency Department in Northern California and the desire to make a change.

This is a quality improvement project that studied the ED metrics related to the door to provider timeframe.

DECREASE THE WAIT TIME

- BRIEF OVERVIEW

- LONG WAIT TIMES IN THE NORTHERN CALIFORNIA EMERGENCY DEPARTMENT.

- WAIT TIME OVER ONE HOUR.

- NATIONAL AVERAGE OF 24 MINUTES.

- PIVOT NURSE IN THE WAITING ROOM. (ESI/CC/VS)

- TRADITIONAL TRIAGE NURSE.

- EMERGENCY SEVERITY INDEX (ESI)

- KOTTER'S THEORY.

PROBLEM, PURPOSE, AND PROJECT QUESTION

DNP PROBLEM: LONG WAIT TIMES

- NORTHERN CA, ED LONG WAIT TIMES ABOVE NATIONAL AVERAGE TIME.
- 40,000 PATIENTS SEEN ANNUALLY, MEDIAN OF 120 PATIENTS A DAY.
- FAST TRACK/ED

DNP PURPOSE: IMPLEMENT A PIVOT NURSE ROLE INTO THE ED WAITING ROOM.

- EXPERIENCED NURSE, ESI TRAINING, CRITICAL THINKING SKILLS.
- SEAMLESS FLOW OF THE EMERGENCY DEPARTMENT

DNP PROJECT QUESTION:

- WILL IMPLEMENTATION OF A PIVOT NURSE IN THE WAITING ROOM DECREASE THE DOOR TO PROVIDER TIMEFRAME?

THEORETICAL FRAMEWORK

- KOTTER'S EIGHT STEP OF CHANGE THEORY

1. CREATE A SENSE OF URGENCY
2. BUILD A GUIDING TEAM
3. DEVELOP A CHANGE VISION AND STRATEGY
4. UNDERSTANDING AND BUY IN
5. EMPOWER OTHER
6. SHORT TERM WINS
7. DON'T LET UP – BE RELENTLESS
8. CREATE A NEW CULTURE

PROJECT STUDY DESIGN

- THE PROJECT DESIGN AIM WAS TO DECREASE DOOR TO PROVIDER TIMEFRAME BY UTILIZING A QUALITY IMPROVEMENT APPROACH BY APPLYING EVIDENCED BASED METHODS TO IMPROVE CLINICAL AND HEALTHCARE SYSTEM OUTCOMES.

- THE QUALITY IMPROVEMENT PROJECT HELPED IMPROVE THE CURRENT TIMEFRAMES IN THE ED.

- IMPROVING THE TIMEFRAME BY UTILIZING A PIVOT NURSE ALLOWED THE ED TO IMPROVE THEIR FLOW.

IMPLEMENTATION

- Meeting with key stakeholders
- Asking for permission to implement pivot nurse
- Reviewing literature with the key stakeholders
- Reviewing current wait times with key stakeholders
- Training on ESI
- Testing ESI skills and knowledge
- Development of flow map
- Training on vocera (communication devices)
- Kiosk
- Mock patient training
- Ensure staff security

CONCLUSION

Source: Press Ganey 2009 Emergency Department Pulse Report

- THE HYPOTHESIZED DECREASE DOOR TO PROVIDER TIMEFRAME BY PLACING A PIVOT NURSE IN THE WAITING ROOM WAS PROVEN TO BE SUCCESSFUL BY USING THE MANN WHITNEY U TEST.

- THE DNP PROVED THAT REPLACING THE TRADITIONAL TRIAGE NURSE WITH A PIVOT NURSE IMPROVED TIMEFRAME.

- SAFETY, SATISFACTION, AND HEALTH CONCERN WAS A CONSTANT FOCUS FOR THE LEADERSHIP TEAM.

- THE INTERVENTION, TEACHING, IMPLEMENTING, AND RECEIVING FEEDBACK WAS ESSENTIAL IN MAKING THIS PROJECT SUCCESSFUL.

- EDUCATING THE DEPARTMENT ON THE CURRENT STATISTICS OF THE DEPARTMENT AND THE BENEFIT OF ADDING A PIVOT NURSE WAS THE KEY ELEMENT IN THE CHANGE PROCESS.

- ONCE THE STATISTICS FROM THE MANN WHITNEY U TEST WERE POSTED THE DEPARTMENT COULD SEE THE SUCCESS AND UNDERSTOOD THE REASONING TO KEEP THE NEW CULTURE.

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