LWOT Reduction Plan Success Story: Advocate Trinity Hospital

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The Leaving Without Treatment (LWOT) Reduction Plan Success Story

- Busy 19-bed ED with an 8-bed Fast track area in an urban Emergency Department located on the southeast side of Chicago.

- Approximately 71% of Trinity’s patient admissions come from the ED, which serviced nearly 40,000 patients in 2011.
The Leaving Without Treatment (LWOT) Reduction Plan Success Story

• 12.4% of patients arriving in the ED leave without being seen during high acuity times (11a-11p) daily...peaked as high as 20%.

• Through "Process Improvements" the ED has reduced the percentage of LWOTs 1.1%.
Trinity’s Emergency Department – Past
Broken Processes

- Long turn around time for lab and radiology results
- Slow Fast Track
- Long wait times in ED waiting room
- Long disposition times
- Increased number of holders
- Delays in transportation
- Delays in triage process
- Delays in patient registration
Trinity’s Emergency Department – Present
Trinity’s Best Practices

ED Operations
- Creating the ED Throughput Steering Committee
- Creating the “Greeter” position
- ED Unit Base Council
- Rounding in the ED at night
- PA’s added to the ED Team
- Level of Care Screening in the ED
- New ED Physician Group

House-wide Throughput
- High Census Alert Process
- Escalation process on patient throughput
- Bed Huddles at 9:30am, 3:30pm, and 3:00am
- Leader Patient Rounds
- Centralized Transportation Support 7:00am – 11:00pm

Data Technology
- Establishing TAT for support departments
- Utilizing the tracking board
- Tele-Tracking Electronic Bed Management System

Performance Improvement
- Re-implement ED Dashboard and Create Daily Flash Report
- Posting metrics daily in the ED
- Re-education on patient flow

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Creating the “Greeter” position

- **Scope** – Greeter promotes the patient centered care model by expediting patient flow and promoting patient satisfaction.

- **Process Change** – Greeter notifies the triage nurse about any change in patients’ health complaint.
ED Unit Based Council

- **Scope** – Develop a shared governance model which provided the ED team a voice to address concerns.

- **Process Change** – Associates conduct regularly scheduled shared governance unit based meetings to proactively develop solutions to present to the leadership team.
New ED Physician Group

- **Scope** – The new ED physician group had a vision around quality, safety, compassion, partnership, performance improvement and patient throughput.

- **Process Change** – Their contributions with performance improvement was evidenced by a decrease in LWOTs, LOS and improved turn around times.
High Census Alert Process

- **Scope** – House-wide notification of increasing patient census.

- **Process Change** – A collaborated effort with healthcare teams to coordinate patient flow.
Bed Huddles 9:30am, 3:30pm and 3:00am

• Scope – Optimizing with all resources to expedite the coordinated plan of care in anticipation of the patient discharge.

• Process Change – A collaborated group of healthcare professionals focused on the discharge plan of care.
Leader Patient Rounds

- **Scope** – To demonstrate to patients and families the commitment to provide quality care, keeping patients and their families informed and promoting a patient centered care model.

- **Process Change** – Leadership rounding with patients to ensure quality care and patient satisfaction.
Establishing Turn Around Times for Support Departments

• Scope – Establishing standard turn around times for ancillary departments.

• Process Change – Ancillary departments have established turn around times for results that are aligned with the performance improvement goals of the ED.
Utilizing the Tracking Board; Throughput Alerts

- **Scope** – Visual representation of alerts needed to move the patient through the continuum of care.

- **Process Change** – The healthcare team can respond timely to expedite the patient through the continuum of care.
Posting Metrics and Sending Emails Daily to Associates

- **Scope** – Associate notification of the ED daily performance metrics.

- **Process Change** – Associate ownership of ED throughput metrics
Reeducation on Patient Flow

- **Scope** – Provides associate education regarding the expectations of moving the patient through the continuum of care.

- **Process Change** – Associates were able to articulate their roles, expectations and utilize resources to move patients through the continuum of care.
# ED Performance Metrics

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<thead>
<tr>
<th></th>
<th>Average National Performance (50%)</th>
<th>National Best Demonstrated Practice (10%)</th>
<th>Trinity 2010</th>
<th>Trinity 2011</th>
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</thead>
<tbody>
<tr>
<td>ED LOS Discharged Patients (mins.)</td>
<td>150</td>
<td>97</td>
<td>232</td>
<td>156</td>
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<tr>
<td>Left without Being Seen</td>
<td>2.3%</td>
<td>0.79%</td>
<td>2.2%</td>
<td>1.1%</td>
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Trinity’s Emergency Department – Future
Sustain the Value and Delivery of Quality Care

- Hourly Rounding for Outcome
- Discharge Phone Calls
- Bedside Shift Report
- Inpatient Pull Team
- Hand off Process
- Automatic Initiation of Standing Order Sets in Triage
- Key Words at Key Times

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What do we want the future state in the ED to look like?

- Improved workflow efficiency from door to doc and beyond
- Expedite patients to where they need to be ASAP
- Improve utilization of Fast Track
- Focus on patient quality
- More collaborative team assessment on the front end
- Limited time in Triage
- Less shifting of the patient from person to person
- Maintain high safety standards

Reduction in LWOT’s Scores
Trinity’s ED Recognitions

Article: Metro Health, Spring 2011 – *State of Emergency: The Future of Emergency Departments*

Article: Nursing NOW newsletter, Vol. 1: Issue1 2011 – *Emergency Department: A First Step on the Road to Success and STEMI Improvements Lead to Improved Team Work*

Radio: WVON broadcast March 16th 2011– Trinity’s Emergency Department, Dr. Anwer Hussain

Award: Mission Lifeline STEMI –Receiving Center Performance Achievement Award 2011– Bronze Level

Article: Chicago Tribune, July 13, 2010 – *Health Overhaul May Mean Longer ER Waits and Crowding – was also picked up by USA Today, CBS News, MSNBC, and NPR radio*

Award: Emergency Medicine Excellence Award 2010

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