Emergency Rooms across the country are infamous for long wait times. However, hospitals are complex networks of admissions and discharges that vary across different departments. Our team took a comprehensive look across various departments to find areas for improvement.

Continuing work on discharge planning and care management, we learned that consistency and accountability were key to achieving results. Monthly dashboards, monthly taskforce meetings, and daily bed board meetings kept us on track to meet our goal and sustain improvements.

Our initial findings indicated that a majority of delays were taking place in the inpatient areas of care. Thus, we focused our efforts on the nursing units (med/surg), care management, EVS, Bed Control, and the ICU/IMU. Our goal was to achieve small wins and improve specific processes.

Key Learnings:
- We saw lower LWOBS rates as well.

The Throughput Taskforce created and approved a sustainability plan that identified the various ongoing activities of this work with its corresponding responsible person(s), due dates and frequency of reporting for each action.

Continuing work on discharge planning and care management (interdisciplinary plan of care rounding (POC)) and targeted date of discharge (TDOD) work, EVS improvements, ED patient flow, & ICU/IMU efficiencies.

Results - Metrics:
- ALCOS: 4.8 days
- FY19 Target: 4.5 days
- We saw lower LWOBS rates as well.

References: