Integrating Ambulatory and Inpatient Care in an Emergency Center Setting

Marian B. Thomas, MSN, RN, BC
Points for Discussion

1. Admissions pod

2. Outpatient changes to reduce overcrowding and treatment delays
History

• Misconception about the EC role

• Construction and inpatient bed closures
Two Key Problems Arose

- Overcrowding
- Treatment Delays
Impact of Bed Closures on the EC

- Clinics sending pts to EC for admission
- Increased EC visits
- Delays in transferring admitted pts to inpatient floors
- Treatment delays due to increased EC volume
- Increased LBT’s
- Decreased patient satisfaction
EC Median Lobby to Treatment Time
( Median = 21 Minutes)
Creation of an Admissions Pod

- **Transitional Emergency Care Unit**
- 10 beds
- Opened and closed based on defined criteria
- Later became a “swing pod”
Staffing the TECU

- Medical oversight by the admitting service
- Nursing care by the Division of Nursing-Nurse Resource Pool
TECU Admission Criteria

- 18 yrs or older
- “Stable” telemetry patients
- Not requiring a negative pressure room
- If needing chemotherapy MUST have received the same therapy previously
Resource Modifications

- Supply room
- Computer access and configuration
- Daily inpatient billing initiated
- Use of inpatient MAR
- Medication delivery
What changed?

- Inpatient admissions orders written and initiated
- Nursing handoffs improved
- Consults were initiated
- Multidisciplinary teams began rounding on EC patients
What Changed?

• Appropriate nursing staff allocation
• Improved utilization of ICU beds
• Increased patient satisfaction
• The Division of Nursing assumed responsibility for Clinical Operations
Issues Addressed by Patient Advocacy

- Total Cases
- Total Complaints

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Total Cases</th>
<th>Total Complaints</th>
</tr>
</thead>
<tbody>
<tr>
<td>3rd qtr 09</td>
<td>90</td>
<td>60</td>
</tr>
<tr>
<td>4th qtr 09</td>
<td>70</td>
<td>50</td>
</tr>
<tr>
<td>1st qtr 10</td>
<td>60</td>
<td>40</td>
</tr>
<tr>
<td>2nd qtr 10</td>
<td>50</td>
<td>30</td>
</tr>
</tbody>
</table>
More Recent Changes in the EC

- TECU closed-opened 45 inpatient beds
- Wait time for an inpatient bed decreased
- Few overnight boarders due to hospital capacity issues
- EC Nursing documentation was revised
- Inpatient orders are initiated in the EC
Changes Made in Outpatient Centers

- Centers focused effort to decrease EC visits
- Specialty clinics developed and utilized
- Outpatient infusions increased
Leukemia Service Changes

- Modified clinic hours
- Created two new specialty clinics
- Improved patient management
Leukemia Center Changes

Admissions Clinic

– Admission orders are written
– Labs are drawn
– IV fluids and antibiotics are initiated
– A handoff report is called to the EC
– Patient is transferred to EC by 15:00
Summary

• Seek help from others

• “If you think you can, you can. And if you think you can't, you're right.”
  Mary Kay Ash