Emergency Department Best Practice Gap Analysis

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Custom Learning Systems

Emergency Department Best Practice Gap Analysis

BOTTLENECK 1: Triage

ED Orientation Video: An ED orientation video that describes triage and fast track, introduces primary care nurse, explains bed-to-doctor wait, conducts a facility tour, reviews visitor policy, highlights ambulance arrivals, presents care team, and solicits complaints.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Triage Short Form: A Triage Short Form that focuses on chief complaint, leaving history and vital signs to be collected later.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Doctor in Triage: A physician at the front end of the patient's visit where they are triaged by the RN and seen by the Physician simultaneously.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

E.D. Nurse Leadership Rounding: E.D. nurse leaders pro-actively rounding at the beginning of their shift.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Scripting: A comprehensive set of scripts developed to prescribe a precise format for communicating key service standards to patients and their families.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

BOTTLENECK # II - Registration

Bedside Registration: Create a system to register patients at their bedside during patient downtime, following quick registration to generate MRN.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Dedicated Fast Track For Non-Urgent Care: A dedicated fast track that establishes explicit inclusion/ exclusion criteria for non-urgent care with dedicated staff and space, not overridden by volume in main ED.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

BOTTLENECK # III – Emergency Physician

E.D. Charting Scribe: A paramedic, LPN, or pre-medical student responsible for relieving physicians of documentation data.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Dedicated ED Communication Nurse: An ED Charting Scribe (paramedic, LPN, or pre-medical student) to relieve physicians of documentation duties.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Patient Delay Updates – Patient Support / Liaison Position: An employee responsible for circulating throughout the emergency department, providing delay information, answering patient questions and serving as a liaison between patients and medical staff.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

ED Pain Triggers – Expediting Pain Relief: A pain assessment scale to expedite triage decisions on those going to waiting room and those being sent immediately to a bed for pain relief.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Preemptive Test Guidelines: Create preemptive test guidelines that allows for earlier initiation of ancillary testing through the use of standing orders for common conditions.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Proactive Blood Draws: A process for earlier blood draws on IV patients, and transporting samples to the lab in advance of physician orders.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

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- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Gridlock Bed Turnover: A separate waiting area for non-urgent, ambulatory patients that can vacate ED beds while awaiting diagnostic test results, thus freeing beds earlier for the next patient.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

ED Physician Service Profiling: A system for measuring physician service that may include: benchmarking individual and group performance, reviews by department of individual and group scores, strategies for improvement, and one-on-one coaching for poor performers.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

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- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

BOTTLENECK # IV – Radiology

Express Radiology Consult: A process that modifies radiology queue (processing, radiologist interpretation, dictation) to allow ED studies to jump the line.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Dedicated Transport Tech: Responsible for all transport of ED patients to radiology in order to remove delay associated with transport of ED patients to radiology.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Emergency Physician First Look: A system whereby EPs first to ready plain film x-rays, followed by radiologist later performing comprehensive over read.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

BOTTLENECK # V - Laboratory

Dedicated Phlebotomist: A dedicated phlebotomist responsible for all ED blood draws, order entry, transport of samples, and flags results for rapid EP review.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Express Laboratory Turnaround: An express laboratory turnaround by assigning responsibility within the lab for expediting ED samples, and identifying and resolving throughput bottlenecks in real time.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Diagnostic Results Flagging: A diagnostic results flagging system to establish clear processes for pushing test results to physicians.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

BOTTLENECK # VI – Inpatient Admission

Preemptive Bed Request: A preemptive bed request whereby the admission order and bed request happens simultaneously.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Admitting Physician Backup: A "ladder of authority" for obtaining admitting orders and reins in other Physicians through established consequences for delayed response times. This engages Doctors in removing barriers to access for inpatient beds.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Emergency Physician Admit Authority: Amend bylaws to hardwire patient transfer on EP's holding orders.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Hospitalist Admission: Use hospitalists to write admitting orders for ED patients.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Centralized Bed Control: A centralized bed control system to ensure a method for clear information regarding bed status and clear clinical authority.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

Instant Bed Status Alerts: An automated system to relay bed status information.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

No-Delay Nurse Report: A system whereby patient report is faxed to inpatient ward, with rapid or immediate patient transfer following.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5 ☐ 4 ☐ 3 ☐ 2 ☐ 1

BOTTLENECK # VII - Discharge

Month Long Exit Interview / Survey Process: A 30-day period, customer "exit interview" to provide results to management and staff.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

Streamlined ED Checkout: A process for the hospital to redirect patient flow in ED to facilitate collection of patient co-pay at time of service. The goal is to set patient expectations in relation to payment and alleviate inconvenience associated with billing.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

BOTTLENECK # VIII – Staff Attitude & Service Skills

Staff Attitude & Service Skills: All Emergency Department personnel are provided with an annual special 6 hour, Service Excellence focused, high impact communication skills workshop.

Current or similar process:

Rate the effectiveness of your current/similar Best Practice:

- ○ Implemented/Effective
- ○ Implemented / Not Effective
- ○ Under Development
- ○ No Process in Place
- ○ N/A

Rate your interest in implementing this new/improved practice: *(HIGH = 5)*

- ☐ 5
- ☐ 4
- ☐ 3
- ☐ 2
- ☐ 1

ED Best Practice Gap Analysis Summary

Description		Effective					Priority				
I.	**TRIAGE**	**A**	**B**	**C**	**D**	**E**	**5**	**4**	**3**	**2**	**1**
	E.D. Orientation Video	○	○	○	○	○	☐	☐	☐	☐	☐
	Triage Short Form	○	○	○	○	○	☐	☐	☐	☐	☐
	Doctor in Triage	○	○	○	○	○	☐	☐	☐	☐	☐
	E.D. Nurse Leadership Rounding	○	○	○	○	○	☐	☐	☐	☐	☐
	Scripting	○	○	○	○	○	☐	☐	☐	☐	☐
II.	**REGISTRATION**										
	Bed Side Registration	○	○	○	○	○	☐	☐	☐	☐	☐
	Dedicated Fast Track for non-urgent care	○	○	○	○	○	☐	☐	☐	☐	☐
III.	**EMERGENCY PHYSICIAN**										
	E.D. Charting Scribe (Clinical Extender)	○	○	○	○	○	☐	☐	☐	☐	☐
	Dedicated Communication Nurse (Clinical Extender)	○	○	○	○	○	☐	☐	☐	☐	☐
	Patient Delay updates – Patient Support/Liaison Position	○	○	○	○	○	☐	☐	☐	☐	☐
	Pain Triggers – Expediting Pain Relief	○	○	○	○	○	☐	☐	☐	☐	☐
	Preemptive Test Guidelines	○	○	○	○	○	☐	☐	☐	☐	☐
	Pro-active Blood Draws	○	○	○	○	○	☐	☐	☐	☐	☐
	Gridlock Bed Turnover	○	○	○	○	○	☐	☐	☐	☐	☐
	E.D. Physician Service Profiling	○	○	○	○	○	☐	☐	☐	☐	☐
IV.	**RADIOLOGY**										
	Express Radiology Consult	○	○	○	○	○	☐	☐	☐	☐	☐
	Dedicated Transport Tech	○	○	○	○	○	☐	☐	☐	☐	☐
	Emergency Physician First Look	○	○	○	○	○	☐	☐	☐	☐	☐
V.	**LABORATORY**										
	Dedicated Phlebotomist	○	○	○	○	○	☐	☐	☐	☐	☐
	Express laboratory turnaround	○	○	○	○	○	☐	☐	☐	☐	☐
	Diagnose Results Flagging	○	○	○	○	○	☐	☐	☐	☐	☐
VI.	**INPATIENT ADMISSION**										
	Pre-emptive Bed Request	○	○	○	○	○	☐	☐	☐	☐	☐
	Admitting Physician Back-up	○	○	○	○	○	☐	☐	☐	☐	☐
	Emergency Physician Admit Authority	○	○	○	○	○	☐	☐	☐	☐	☐
	Hospitalist Admission	○	○	○	○	○	☐	☐	☐	☐	☐
	Centralized Bed Control	○	○	○	○	○	☐	☐	☐	☐	☐
	Instant Bed Status Alerts	○	○	○	○	○	☐	☐	☐	☐	☐
	No-Delay Nurse Report	○	○	○	○	○	☐	☐	☐	☐	☐
VII.	**DISCHARGE**										
	Month Long Patient Exit Interview	○	○	○	○	○	☐	☐	☐	☐	☐
	Streamline E.D. Checkout	○	○	○	○	○	☐	☐	☐	☐	☐
VIII.	**STAFF ATTITUDE & SERVICE SKILLS**										
	ER Staff Service Skills Training	○	○	○	○	○	☐	☐	☐	☐	☐
	Total										