Program Evaluation: Improving Access to Healthcare in the Emergency Department to Identify, Monitor, and Create Solutions for Efficient Throughput of Patients

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Abstract

**Background:** Emergency departments (EDs) are safety nets to health care access in the United States and are overcrowded. Longer wait times are associated with higher morbidity and mortality. Provider in triage (PIT) was implemented in 2016 at the Legacy Salmon Creek ED in an effort to care for patients when no hospital rooms are available. A program evaluation of PIT has never been done.

**Problem:** The goal is to assess the efficacy of patient throughput during PIT at LSC ED.

**Intervention:** This program evaluation, guided by the Iowa model, identifies, monitors, and creates solutions to enhance the throughput of patients in the ED at Legacy Salmon Creek Hospital.

**Methods:** This evaluation is a prospective cohort including both qualitative and quantitative data. A survey and population study informed solutions, metrics were compared monthly to national and state averages to set benchmarks. This evaluation set a goal to perform 10% better in all metrics by March 10, 2021.

**Results:** The majority of patients seeking care at LSC ED are 25-50 y.o. with complaints of abdominal pain, injury, fever or chest pain. PIT has decreased time to provider to 15 minutes and LWBS below 1%. LOS increased by 15 min compared to 2019. 80% patients are highly satisfied. All measures were 10% better than state and national averages.

**Conclusion:** PIT provides timely and effective care when no rooms are available, however length of stay increased. Understanding your population and stakeholder perspectives can further improve health care access at Legacy Salmon Creek Hospital.