



# Fort Carson-MEDDAC News

## Emergency Department works to improve patient flow

By: Stacy Neumann, Medical Department Activity Public Affairs

A new nurse greeter, quicker treatment for pain, primary care greeter teams, and less time in triage – times are changing in the Evans Army Community Hospital Emergency Department. The goal is to move beneficiaries more efficiently through the ED. It's a transformation that began with the external renovation of the department and has now moved to an internal one.

"We moved into the space and what we eventually realized was that we needed to reevaluate the way we worked," said Cindi McKnight-Smith, Assistant Clinical Nurse Officer in Charge of the Department of Emergency Medicine. "We know people want to get in here and see a doctor as soon as possible. We're doing our best to get that done."

McKnight-Smith is the project owner of an Army Lean Six Sigma process designed to streamline the patient flow through the Emergency Department. A core group of nine people began to study the issue in February and changes are ongoing to decrease the amount of time it takes to get through the treatment process.

Maj. Matthew Angelidis, Chief of Emergency Medicine added, "We want patients to know their voices have been heard. We are developing care that will be faster and more efficient. This is my ED; our families get care here too. We're providers and patients here. I care how we deliver care; we want to make it better."

One of the biggest changes implemented in October is the inclusion of medical personnel in the lobby. A registered nurse greets and makes the initial patient assessment.

McKnight-Smith explained, "We have eyes on a patient as soon as they walk through the door. Nurses are trained to look for signs indicating urgency and emergent symptoms."

The nurse determines the patient's status. If it is appropriate, the nurse may work with another new addition. A Primary Care Greeter Team stationed inside the emergency room can help patients with non emergent issues by providing same day appointments with the patient's Family Medicine Clinic. This team cannot be found at any of the local community



# Fort Carson-MEDDAC News

hospitals and provides a unique patient centered service to Ft Carson's blossoming population.

"We want them to be seen by their team. Consistent care benefits them," McKnight-Smith emphasized.

If the nurse determines the ED is where the patient should be seen, another improved practice goes into effect. The staff calls it "pull until full." Rather than triaging in a separate area, the patient gets pulled right into a room where a nurse can begin the process. Each of the 17 beds is filled. In addition, a Triage Treatment room is in the works to allow providers to continue treating patients until they too, can be moved into a bed. This specialized area will be equipped with comfortable chairs, televisions and call buttons for nursing.

Finally, ED visitors may notice that the initial protocols for treatment have changed. Previously, there was no treatment before a doctor arrived. Now, nurses are able to treat pain, nausea, draw blood, start IVs, and order lab work before a patient sees a doctor. It means less waiting time for patients and helps get results to the doctor before he or she sees the patient

McKnight-Smith said there are also many behind-the-scenes changes that beneficiaries won't notice but will improve daily operations. These include new monitors at nurses' stations and a voice communication system. The department is working with primary care clinics and subspecialty clinics to develop improved follow up care, including next day cardiology treadmill stress tests, next day primary care appointments, and expediting interactions with the Laboratory and Radiology Departments.

Angelidis added, "Small changes can make a difference. We directly interact with every other department on a daily basis. There are lots of steps for us to look at to improve your experience."

Angelidis notes that the overall length of stay in the Evans ED is well under the approximately four hour national average. Less than two percent of patients leave the department without being seen. Nationwide, that number is above five percent. He says the EACH goal is the same as the patient's goal – to get people to a health care professional.

"We don't want people to walk out the door unseen. It's a risk. It's a danger and can be detrimental to your health," said Angelidis. "I want you to know, when you need us, we're there."