Hospital Name:
University of Michigan Medical Center

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2006 ED Volume: 74,478
Growth from 2005: 2.1%
Total Staffed Hospital Beds: 808
Acute ED Beds: unknown
Fast Track: Yes
Clinical Decision Unit: Yes

Problem to be Resolved:
ED patient boarding

Key Words:
- Discharge trigger
- ED boarding

Lessons Learned:
After resistance to change from some staff members, a new plan was established so that process changes would only be put into effect one day each week, specifically "Change Tuesdays." UMMC found that overall the staff was more receptive to this gradual, predictable change.

Reason for Change:
The University of Michigan Medical Center established a multidisciplinary committee to find solutions to reduce ED boarding.

Implementation:
The multidisciplinary committee focused on improving the hospital's discharge process, with the goal of decreasing bed turnover time so that more patients could be admitted into the hospital.

Under the previous system, staff was notified that a patient was ready to be discharged by a light above the patient's door, signaling that the physician had completed the discharge order. However, depending on what a nurse was doing, the light was not always seen in a timely manner. The new system begins the discharge process by sending out a page to the attending nurse and technician once the physician has entered the discharge order. The system also identifies whether or not the registration process has been completed or additional assistance is needed, and notifies the appropriate staff.

Before implementing change throughout the hospital, UMMC tested the proposed plan in pilot projects in a few select units. Those who participated in the pilots were asked for feedback after each shift, so that refinements could be made before the project was introduced to the whole hospital.

Results/Impact:
UMMC has decreased its average bed turnover time from 39 minutes to just 25 minutes after implementing the pending discharge trigger system.

While only 25 percent of providers have embraced the new system and are using the new discharge triggers, the hope is that they can increase this to 90 percent through greater in-hospital promotion.