

# Reducing the ED Treatment Time



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## Outline

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# Project Charter

## ■ Problem Statement

- NY State Hospital treatment time is significantly above the national average

## ■ Project Objective

- Goal is to reduce the length of stay in the emergency room

## ■ Project Scope

- Treatment times in New York State Emergency Room Department

# Project Charter

- **Response Variable:**
  - Treatment Time in minutes
- **Defect Definition:**
  - Any treatment time longer than 90 minutes
- **Quantification of Problem:**
  - Conditions: Inadequate staff, not enough equipment, excess number of patients
  - Extent: National average is 90 minutes, NY State average is 170 Minutes
  - Performance: Treatment times over 90 mins and satisfactory level of patients after discharge
  - Time Frame: Data set looks at 2020 NY State averages
  - Specifications: Reduced time of stay should result in improved customer satisfaction and increased revenues

# DEFINE

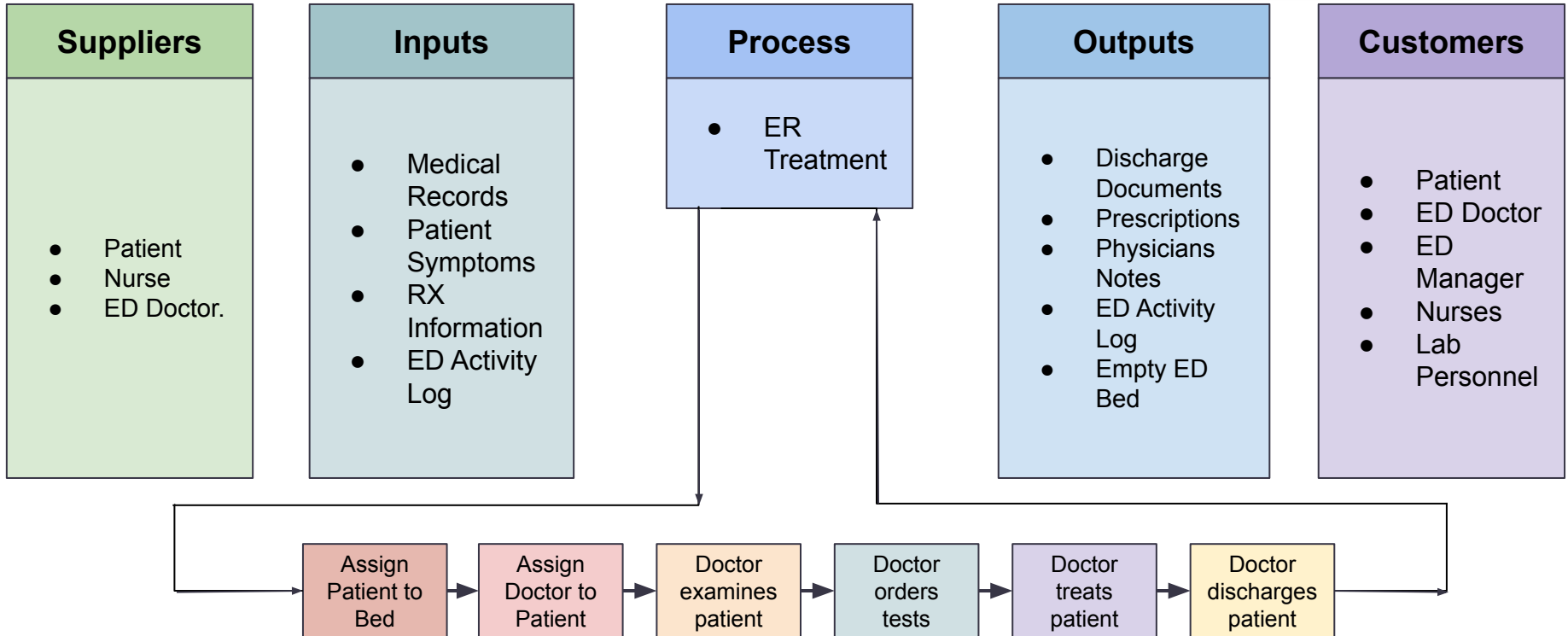


DEFINE

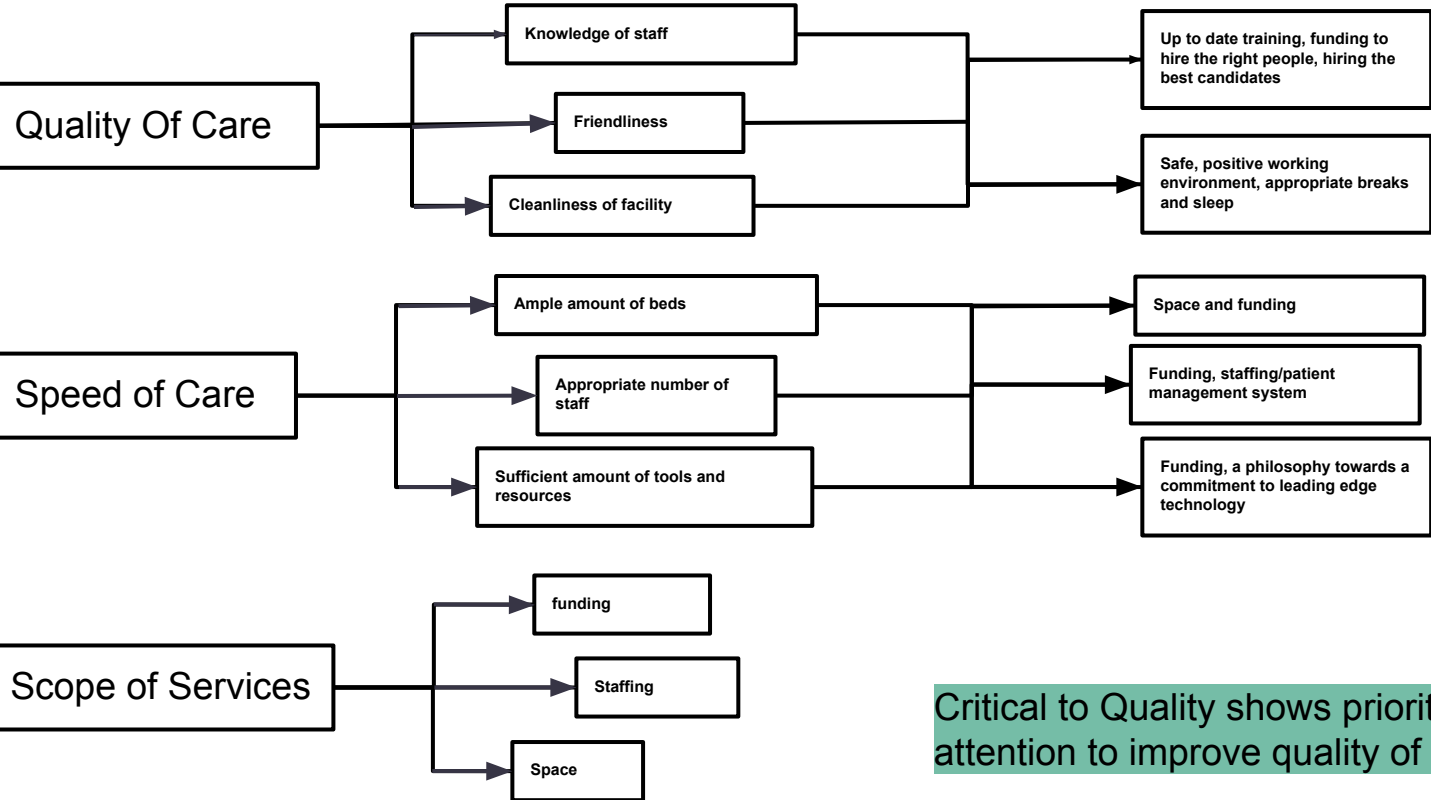
- **SIPOC** - Helped visualize the process from beginning to end
- **CTQ** - Helped define key services that the patients needed
- **Histogram** - Helped summarize and visualize the the wait times (discrete data)

# DEFINE – SIPOC

DEFINE



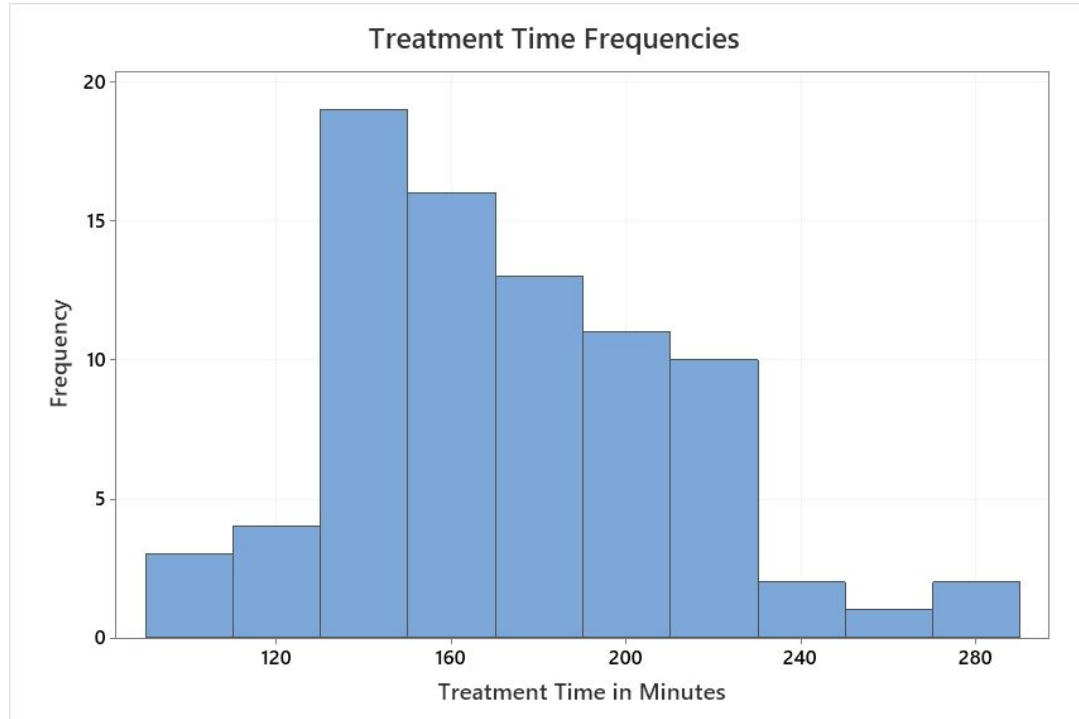
# DEFINE – CTQ



Critical to Quality shows priorities that need more attention to improve quality of care

# DEFINE – Histogram

DEFINE



Created a histogram to show treatment time frequencies in New York State Emergency Room department

# MEASURE



MEASURE

- **Descriptive statistics** - Summarized data to represent entire population to help analyze data easily and quickly
- **Capability analysis** - Helped assess if the system is able to meet requirement specifications
- **Hypothesis test** - Showed the distribution of data and helps assess the data to show any significant differences

# MEASURE – Descriptive Statistics



MEASURE

## Statistics

<u>Variable</u>	<u>N</u>	<u>N*</u>	<u>Mean</u>	<u>SE Mean</u>	<u>StDev</u>	<u>Minimum</u>	<u>Q1</u>	<u>Median</u>	<u>Q3</u>
treatment times minutes	81	0	174.06	4.19	37.72	104.00	146.50	169.00	202.00

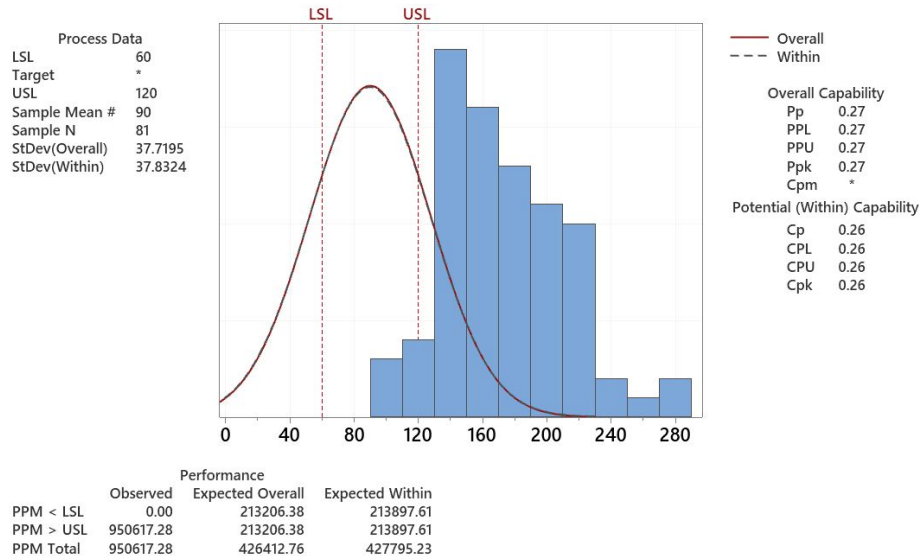
<u>Variable</u>	<u>Maximum</u>
treatment times minutes	287.00

- Mean of data is 174.06 minutes
- Standard deviation is 37.72 minutes
- Minimum time of 104 minutes
- Median time of 169 minutes
- Maximum time of 287 minutes

# MEASURE – Capability Analysis



Process Capability Report for treatment times minutes



- Value of Cpk and Cp is 0.26 which is low.
- Not capable nor centered.
- Lower specification limit is 60
- Upper specification limit is 120
- The graph is skewed to left

# This estimated historical parameter is used in the calculations.

The actual process spread is represented by 6 sigma.

# MEASURE – Hypothesis Test



MEASURE

## Test

Null hypothesis  $H_0: \mu = 90$

Alternative hypothesis  $H_1: \mu \neq 90$

<u>T-Value</u>	<u>P-Value</u>
20.06	0.000

- Null is set to 90 because that is the accepted average treatment time
- T-value of 20.06 which compares the data of what is expected under the null hypothesis.
- P-value of 0.00
- Reject null hypothesis, in favor of the alternative

# ANALYZE

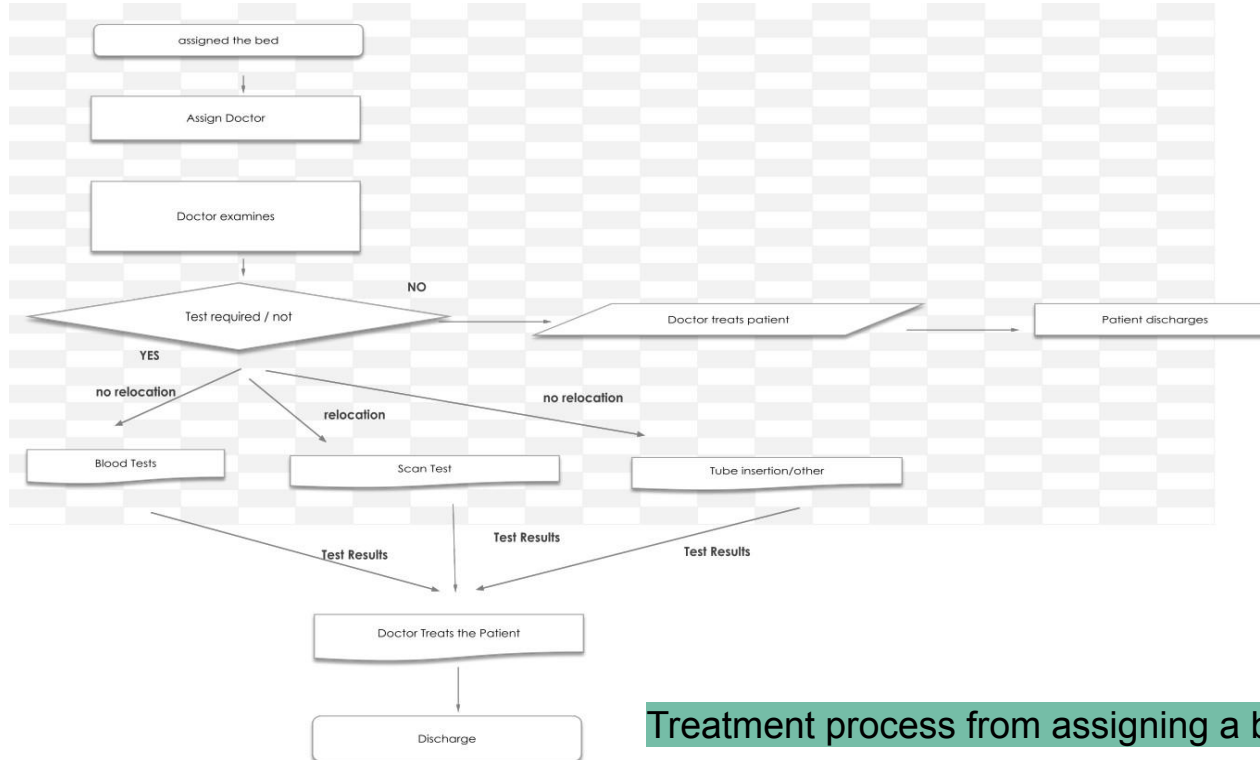


## ANALYZE

- **Flow chart-** Graphical tool that depicts distinct steps of a process in sequential order
- **5 Why-** Fully understand the root cause of a problem so that solutions or improvements may be identified
- **Fishbone diagram-** Graphical method for hypothesizing a chain of causes and effects, sorting out potential causes, and organizing relationships between variables

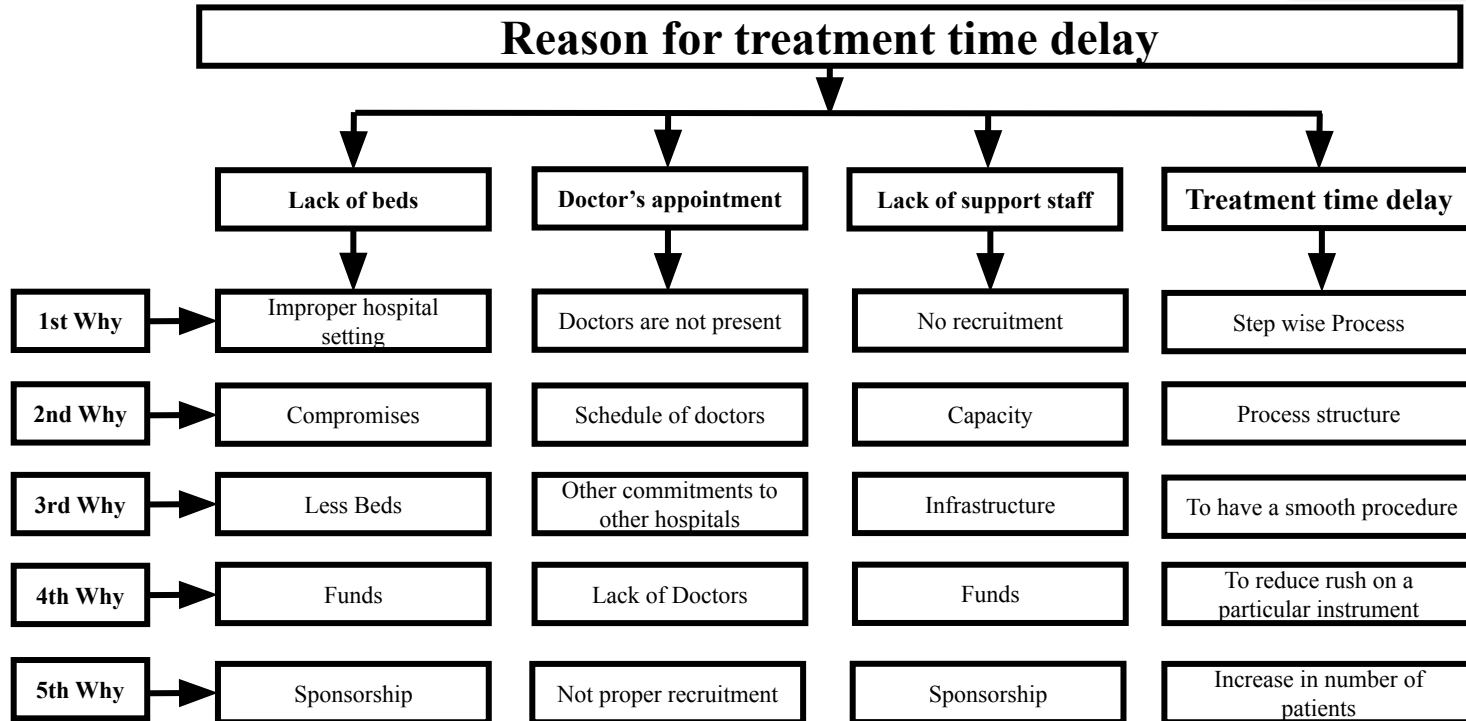
# ANALYZE – Flow chart

ANALYZE



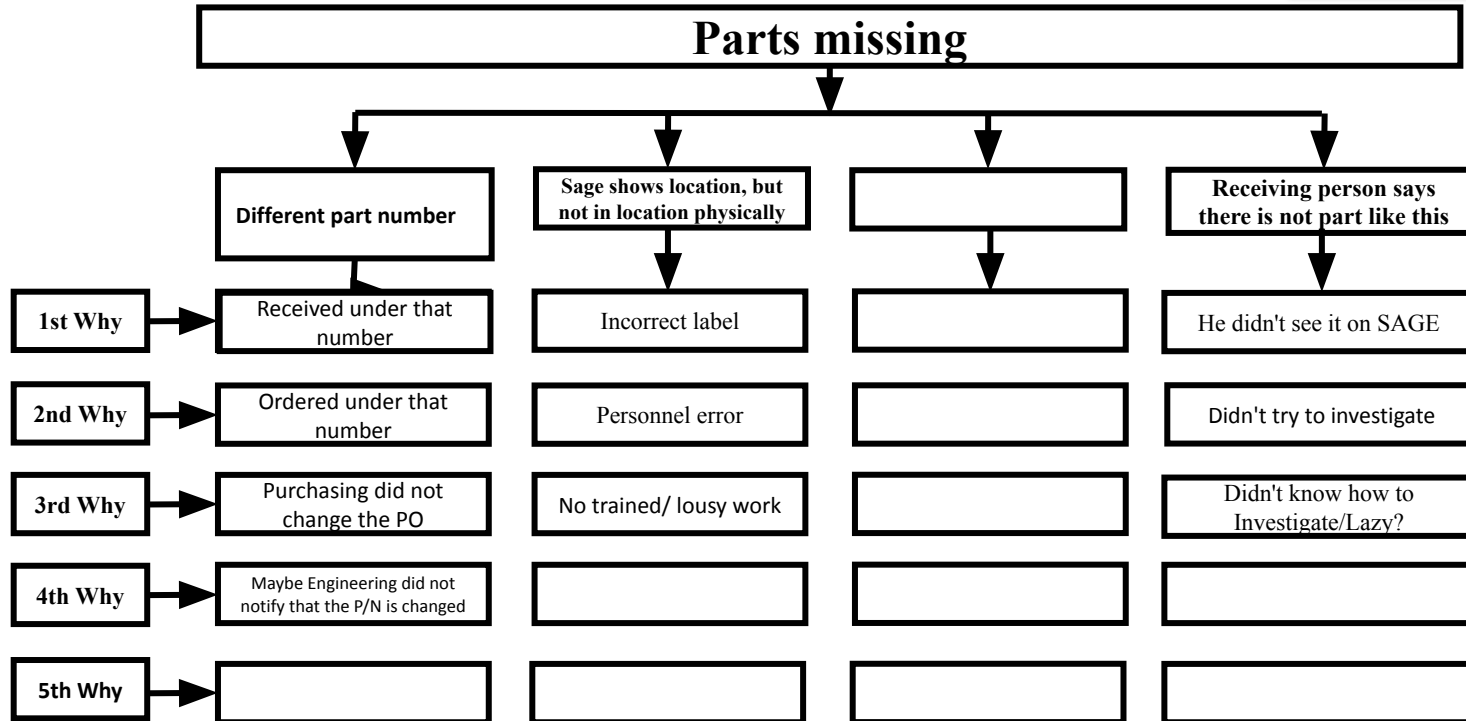
Treatment process from assigning a bed to discharge

# ANALYZE – 5 Whys





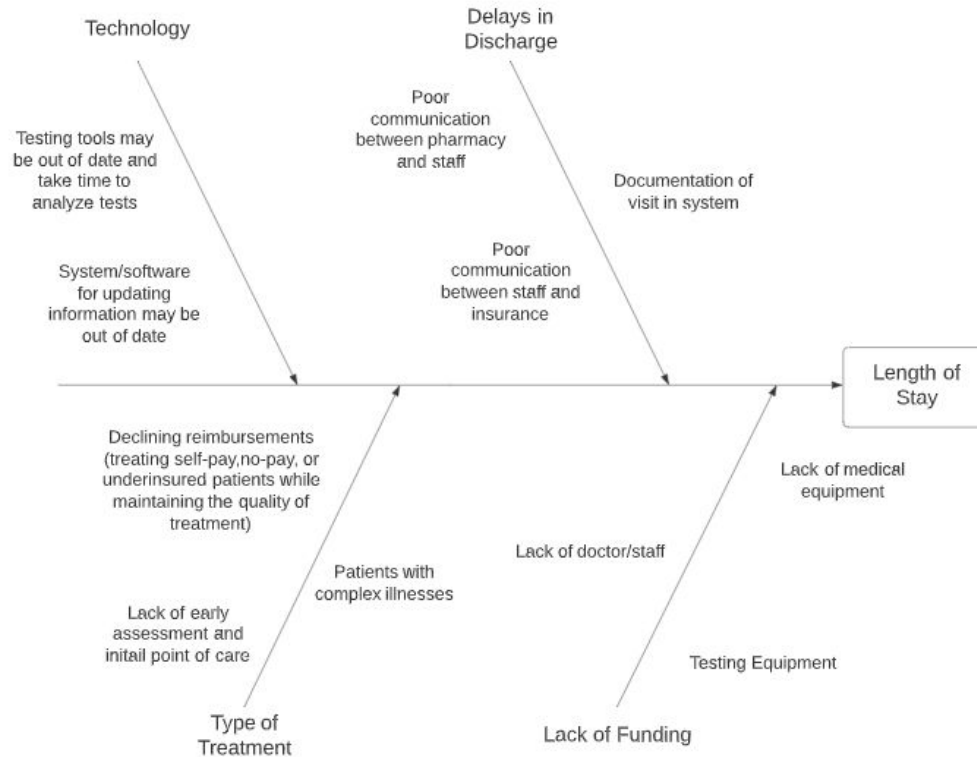
# ANALYZE – 5 Whys



# ANALYZE – Fishbone



ANALYZE



Fishbone diagram shows the causes for the patient length of stay in the emergency room department

# IMPROVE



IMPROVE

- **Selection matrix** - Chart that helped identify, analyze, and rate the strength of each potential solution
- **5's** - Helped mapped out the workplace to make it clean, safe, and well organized to reduce waste and optimize productivity
- **Improved flow chart** - Helped visualize the steps of the process in sequential order

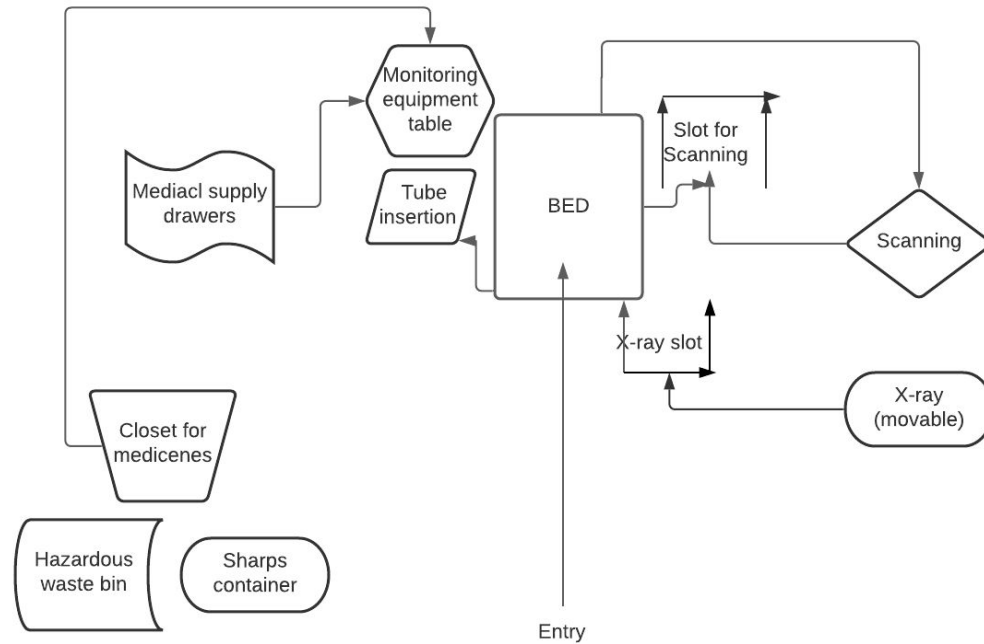
# IMPROVE – Selection Matrix



Solution Selection Matrix							
Project Goal <i>Enter Goal Statement below: (As stated on Project Charter)</i>	Please rank each solution for each criteria by using the 1-5 Scale as indicated below						
	Very Low (less good)		Moderate		Very High (best)		
	1	2	3	4	5		
Potential Solution (Provide Brief Description)	Potential to Meet Goal	Positive Customer Impact	Cost to Implement (1 = \$\$\$ & 5 = \$)	Stakeholder Buy-in	Time to Implement (1 = Long 5 = Quick)	Total Score	Implement? Yes/No
Weighted Criteria	10	9	8	7	5		
<i>Assemble a multi-functionality room( have all the required equipments)</i>	5	4	2	3	3	138	Yes <input type="checkbox"/>
Accurately staffing the ED ( according to the rush at a time )	3	2	5	4	4	136	No <input type="checkbox"/>
Upgrade and invest in advanced technology quality equipments) ( high	4	3	3	3	4	132	No <input type="checkbox"/>

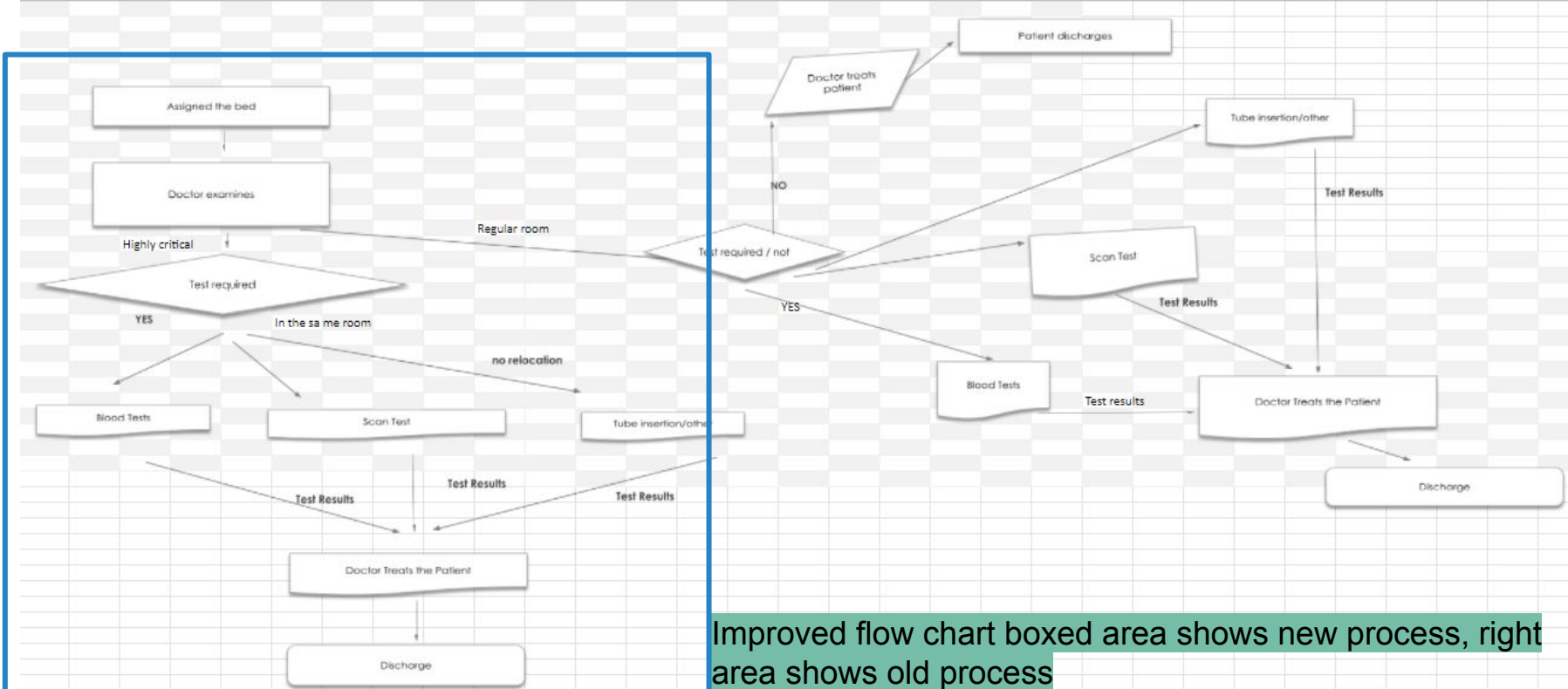
# IMPROVE – 5's

IMPROVE



Created a standard multifunctional room

# IMPROVE – Improved Flow Chart



Improved flow chart boxed area shows new process, right area shows old process

# CONTROL



## CONTROL

- **SOP** - Standard operating procedure helps describe the step-by-step process
- **Mistake proofing** - Helped make whoever is restocking or reorganizing the equipment avoid any possible mistakes and defects by preventing, correcting, and drawing attention to human errors as they occur
- **Checklist** - Helped ensure that all tools and equipment are back in designated spot

# CONTROL – NEW SOP



## Standard Operating Process Maintaining Material Equipment Room

Department: Emergency Room

**Purpose:**

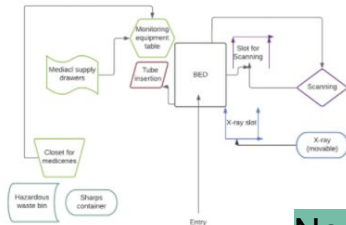
To establish uniform guidelines for setting up the equipment room after each patient. All medical workers are required to follow this SOP.

**Definitions:**

MS: Medical Staff

**Procedure:**

1. Dispose any waste materials into proper bins
  - a. Infectious waste
  - b. Hazardous waste
  - c. General waste
2. Every equipment should be at it's allocated site if moved around. (color coded)



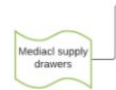
a. X-ray machine placed in the blue taped area



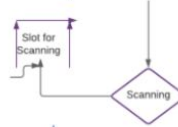
b. Hazardous waste bins in teal taped area



c. Medical supply placed back into drawers and closet located in green area



d. Scanning machine moved back into purple taped area

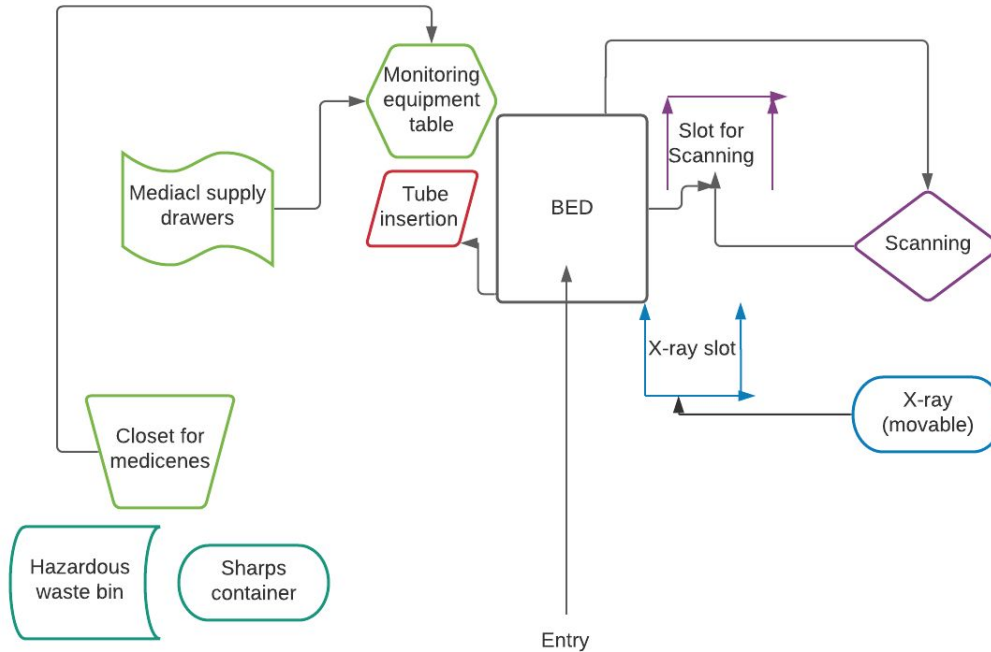


3. Organize and restock any used equipment (syringes, tongue depressors, vials)
4. Sanitize and wipe down surfaces that have been touched
5. Shutdown any equipment or tools
6. Sign book with timestamp to show room has been cleaned

New SOP was created for new material equipment room with instructions for placement of tools

# CONTROL – Mistake Proofing

CONTROL



Standard multifunctional room with areas labeled and colored coded

# CONTROL – Checklist



Multifunctional Room Check Sheet

	Date / Time	Done / (Initials)	Supervisor check
X-ray machine in its place?			
Trash bin emptied?			
Hazardous waste bin emptied?			
Scanning machine reset and on its place?			
Medical drawers restocked according to the SOP?			
Monitoring equipment table organized according to SOP?			
Sharps bin emptied?			
Medicine closet checked and stocked? (SOP)			
Room cleaned and sanitized			

# Questions

# References

- D'Angelo, J. (2020, September 28). *Five challenges facing emergency medicine*. Five challenges facing emergency medicine | Northwell Health. Retrieved November 22, 2021, from <https://www.northwell.edu/news/five-challenges-facing-emergency-medicine>.
- Individual Hospital Statistics for New York*. American Hospital Directory - Individual Hospital statistics for New York. (n.d.). Retrieved November 22, 2021, from [https://www.ahd.com/states/hospital\\_NY.html](https://www.ahd.com/states/hospital_NY.html).
- <https://www.northwell.edu/news/five-challenges-facing-emergency-medicine> - Fishbone data reference