

Better Emergency Care, Faster:

Clinical Workflows for Accelerating Patient Throughput



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Emergency care can't wait for a callback

The Emergency Department (ED) is the front door to the hospital. When ED care teams and operations run efficiently, the patient can flow smoothly from one step in their treatment to the next. Hospitals aim for the entire patient journey in the ED to take no more than a few hours. However, emergency care teams know that many things can and will come up during the patient's visit that can delay care. Any care delay puts patients at risk and places additional strain on the ED.

ED care delays are associated with higher rates of patients leaving without being seen (LWBS), ED overcrowding, decreased patient satisfaction, decreased safety, and higher morbidity.¹ While some care delays are unavoidable, many EDs are relying on outdated communication technologies and processes to facilitate their workflows and inadvertently creating avoidable delays that increase the risk of harm.

Examples of avoidable care delays include:

- ED providers spending extra time trying to look up on-call specialists because the hospital uses a manual scheduling system.
- Treatment decisions being delayed while the ED provider waits for a call back from the on-call specialist.
- Team members making multiple phone calls, playing phone tag, or waiting for a response to a page as they attempt to collaborate with other team members.
- Delays in reviewing diagnostic tests because the provider didn't know results had been received.

¹ www.ncbi.nlm.nih.gov/pmc/articles/PMC4033834/



Challenges faced by today's emergency departments

When operational inefficiencies happen at scale, emergency departments face significant challenges in delivering safe, high-quality care, and the financial health of the hospital suffers. US health systems lose out on potentially millions of dollars each year due to patients leaving without being seen (LWBS).²

Let's explore some of the challenges facing today's EDs in more detail.

Poor patient throughput leads to emergency department crowding

When the patient load exceeds ED capacity, crowding occurs. There is widespread and increasing levels of overcrowding in America's EDs. Overcrowding stretches staffing resources thin and limits the ED's ability to deliver timely and appropriate care that adheres to guideline-recommended treatment.³

² www.ncbi.nlm.nih.gov/pmc/articles/PMC7972384/

³ www.ncbi.nlm.nih.gov/pmc/articles/PMC6117060/





Hospitals with crowded emergency departments have higher rates of LWBS

The percentage of patients that left without being seen (LWBS) is often correlated to having a high number of patients in the waiting room.⁴ Patients that LWBS are considered a higher risk, as many have acute illnesses or require urgent medical intervention. Losing patients prior to treatment increases the chance for harm and opens the hospital to legal risk, as well as lost revenue opportunities.⁵

Overcrowding also leads to long wait times and poor outcomes

Many hospitals across the US are also seeing emergency department wait times balloon far beyond the four-hour maximum boarding time recommended by the Joint Commission.⁶ Extended wait times and stays in the ED increase the rate of adverse events and reduce the quality of care patients receive.⁷

⁴ www.ncbi.nlm.nih.gov/pmc/articles/PMC7514399/

⁵ www.reliasmedia.com/articles/104251-lwbs-patients-tremendous-risk-potential-for-ed-staff

⁶ patientengagementhit.com/news/more-patients-lack-care-access-as-emergency-department-wait-times-spike

⁷ www.ncbi.nlm.nih.gov/pmc/articles/PMC8742612/



ED workflows can make or break emergency care

From the moment a patient arrives in the ED (and sometimes before), a series of interdependent actions among care team members are initiated to support their care and keep them moving quickly through the ED. Outdated communication methods like pagers, manual physician scheduling, and games of phone tag slow down ED workflows. As patient loads increase, caregivers need smarter ways to communicate in order to respond quickly to patient needs and prevent delays.

Chief Medical Information Officers (CMIOs), Chief Nursing Officers (CNOs), and other healthcare leaders looking to improve patient throughput, reduce emergency department crowding, and decrease rates of LWBS should focus on adding efficiency to their ED workflows.

- Shorter patient journeys through the ED can improve access to treatment and increase the quality of care and are associated with improved patient satisfaction, shorter LOS, and reductions in mortality and morbidity.⁸
- Hospitals with healthy patient throughput rates are more likely to qualify for accreditations from The Joint Commission and improve their HCAHPS scores for patient satisfaction and engagement, both of which are tied to reimbursements from federally funded Medicare and Medicaid Programs.
- EDs that qualify for the accreditations mentioned above may improve access to and reduce the cost of liability insurance by enhancing their risk management effort.⁹

In this eBook, you will follow a trauma patient as she journeys through the ED - from transport and ED triage to critical diagnostics and inpatient admission and **learn how the TigerConnect Clinical Collaboration Platform allows hospitals to manage ED workflows more effectively to improve ED throughput.**

8 www.ncbi.nlm.nih.gov/pmc/articles/PMC5051606/

9 www.jointcommission.org/resources/news-and-multimedia/fact-sheets/facts-about-benefits-of-joint-commission-accreditation/





A patient journey through the ED with TigerConnect

When it comes to care quality in the emergency department, time is of the essence. In the following scenarios, we will follow a patient and her care teams as they journey through an ED using TigerConnect to power its workflows.

Patient profile

A 72-year-old female has been involved in a single-vehicle accident. When emergency medical services (EMS) arrive, they find that the victim is awake, but disoriented. She has an injured wrist and shows signs of a possible concussion. With a phone call from the responding emergency medical technician (EMT) to the hospital, the patient's journey through the ED begins.



Workflow: Trauma response pre-admit integration with EMS

The hospital's emergency department receives a call from EMS letting them know that the car accident victim is en route. Using TigerConnect, the ED triage nurse initiates a secure, HIPAA-compliant text message with the EMT to collect important patient data and prepare the responding care team for the patient's arrival.

Critical patient information is delivered en route

The EMT responds to the TigerConnect message with a photo of the patient's driver's license and health insurance information to the triage nurse so staff can enter the information into the EHR before the patient arrives. The EMT also sends a photo of the injured wrist and lets the triage nurse know they will arrive in ten minutes.

The Trauma Response Team is activated in TigerConnect

The ED triage nurse reviews the photos and information sent by the EMT and activates

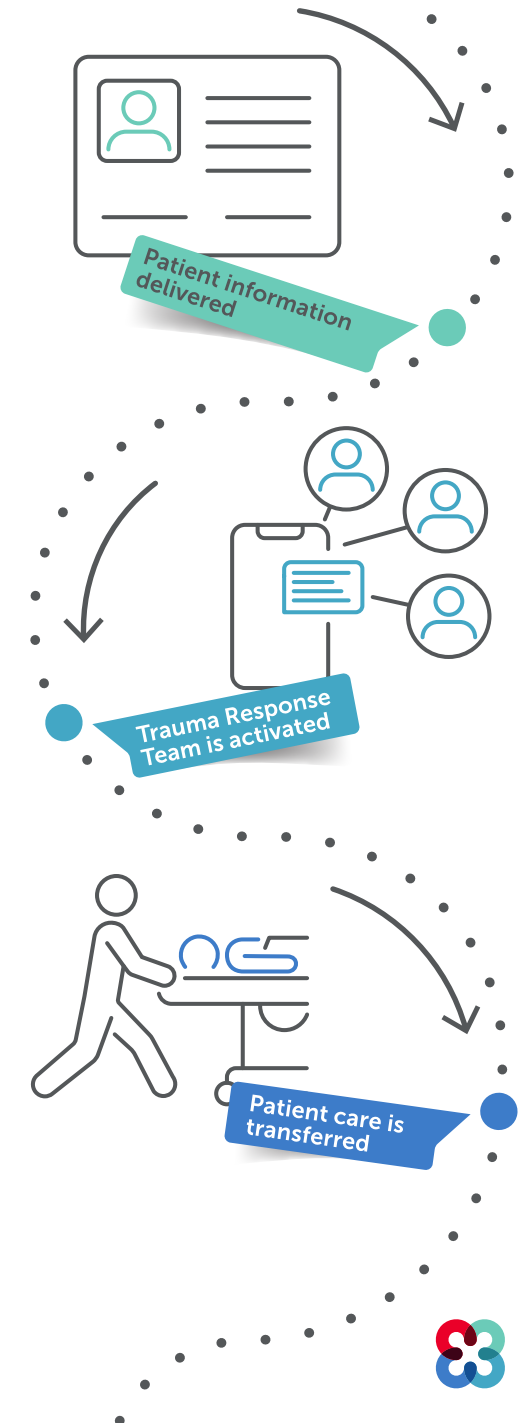
the appropriate Trauma Response Team in TigerConnect (house supervisor, ED physician, trauma physician, ED charge nurse, phlebotomy, respiratory therapy, pharmacist). A secure group message is automatically created for team members to communicate.

The ED triage nurse adds the EMT to a group message, passes along the patient information the EMT has shared, and updates the group with the patient's estimated arrival. The trauma response team sends any questions they have to the EMT in the group message while they prepare for the patient's arrival.

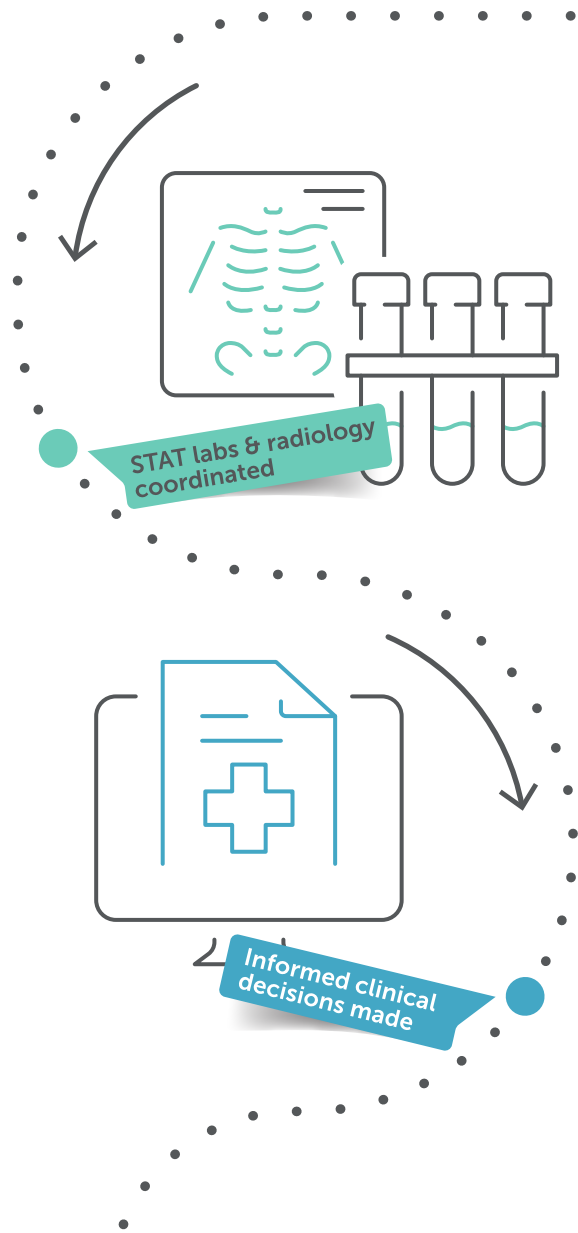
Patient care is transferred from EMS to the ED

EMS arrives with the patient and care is transferred to the Trauma Response Team. The trauma team conducts its own assessment and confirms that the patient has a possible concussion and injured wrist. The trauma team determines that an urgent CT scan is needed to assess for possible brain injury, in addition to a wrist X-ray and STAT labs.

Shorter time from arrival to patient assessment with faster collaboration between providers with TigerConnect, compared to a typical hospital workflow.



Workflow: STAT lab and radiology



The trauma physician orders a wrist X-ray, head CT scan, and a series of labs to inform the next steps in the patient's care. Because the hospital has integrated TigerConnect with its EHR, appropriate care providers are automatically notified as soon as orders are entered into the EHR.

STAT labs and radiology are rapidly coordinated

The ED nurse receives an automatic TigerConnect notification of the STAT labs order and proceeds to collect a blood sample, which they send to the lab. The radiology tech also receives the STAT order notification for X-ray and CT scan in TigerConnect, which they were able to begin coordinating when they received the EMT's images of the wrist prior to arrival.

The radiology tech messages the ED nurse to coordinate transport to radiology. The X-ray and CT scan are completed and the patient is brought back to the ED while the care team waits for the results.

Informed clinical decisions are made quickly

The radiologist reviews the X-ray images and dictates their findings - the patient has a broken wrist and the CT scan is negative, but she remains disoriented. Cloud-based systems integration with the EHR triggers an automatic TigerConnect notification to the trauma physician when the lab results and radiology study are ready for review. The provider reads the notification and reviews both in the EHR.

54.5 minutes saved using TigerConnect for ED stat labs.*

38.5 minutes saved using TigerConnect for ED stat rad.**

* The TigerConnect ED stat lab workflow takes an average of 65 minutes, compared to 119.5 minutes without TigerConnect. Time estimates based on select client implementations. Actual results may vary.

**The TigerConnect ED stat rad workflow takes an average of 51.5 minutes, compared to 90 minutes without TigerConnect. Time estimates based on select client implementations. Actual results may vary.



Workflow: Emergency department consultation

After reviewing the wrist X-ray, the trauma physician determines that a consultation with an orthopedic specialist is needed. Using TigerConnect, the trauma physician communicates with the consulting provider in real-time.

On-call specialist receives context-rich notification

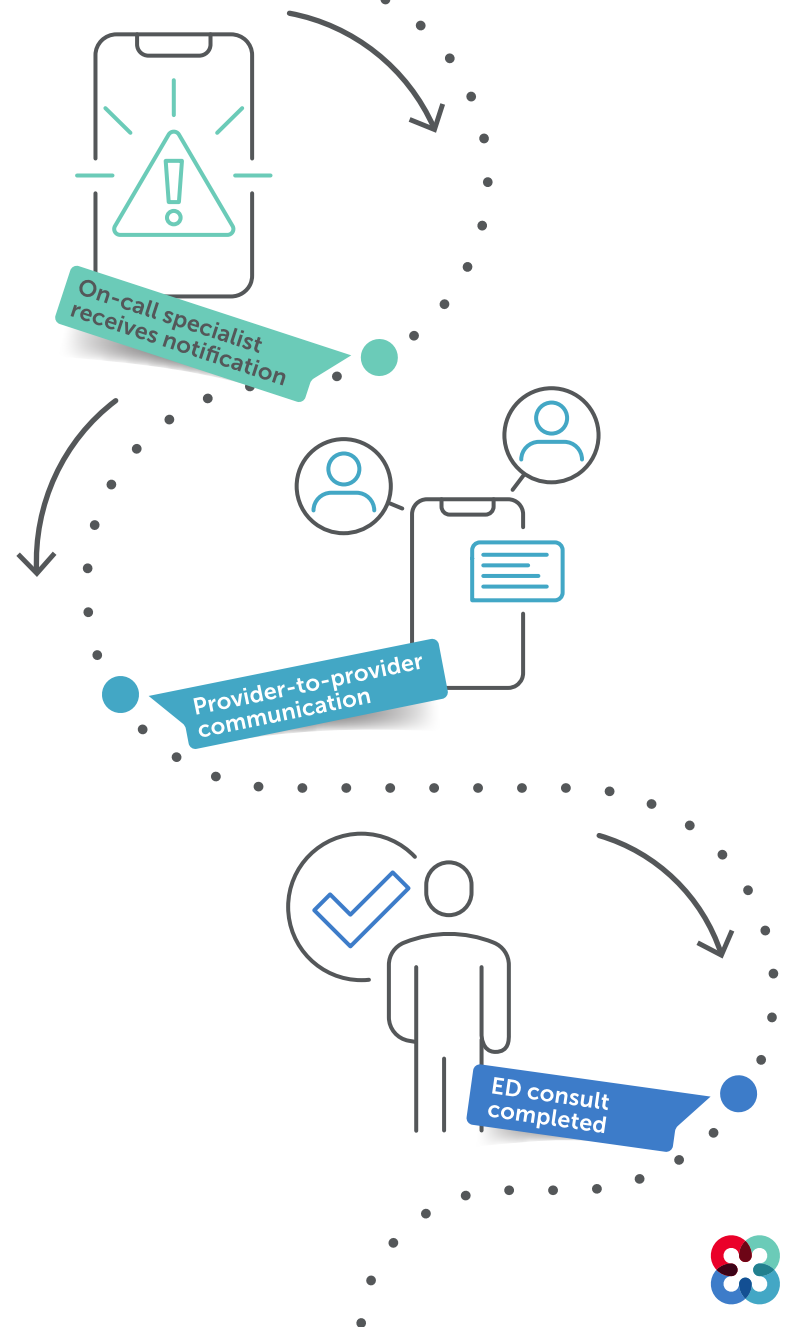
The trauma physician orders the consult in the EHR, which triggers TigerConnect to automatically pull relevant patient information into a group message between the physician and the on-call orthopedic specialist.

Easy provider-to-provider communication is enabled

The trauma physician and on-call orthopedic specialist have the option to text or hop on a call in the TigerConnect app to discuss information related to the consult request.

ED consult is completed quickly

After discussing the case with the orthopedic specialist, the trauma physician is ready to make informed decisions for the next steps in the patient's care.

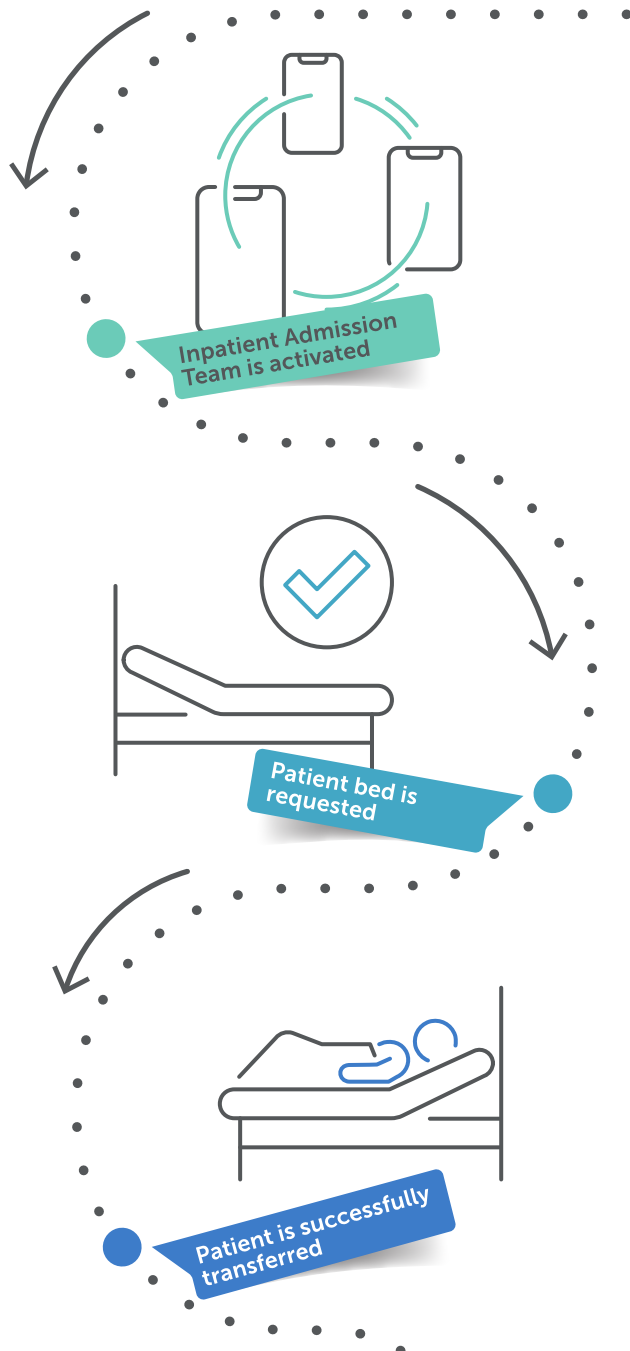


Shorter time to consult—**24.5 minutes saved.***

* The TigerConnect ED physician consult workflow takes an average of 9.5 minutes, compared to 34 minutes without TigerConnect. Time estimates based on select client implementations. Actual results may vary.



Workflow: ED-to-inpatient transfer



After reviewing labs and radiology exams and consulting with the orthopedic specialist, the trauma physician decides the best course of action is to admit the patient to the hospital floor for further observation.

The Inpatient Admission Team is activated

Once the trauma physician enters the admission order, the Inpatient Admission Team is activated in TigerConnect (which includes the house supervisor, ED charge nurse, and ED unit clerk). A group message is automatically sent to the team members, including patient demographics, relevant clinical information, and reason for admission.

A patient bed is requested and efficiently coordinated

The house supervisor then adds the inpatient charge nurse to the group message to request a bed. The inpatient charge nurse replies with the patient's assigned bed number and the receiving nurse's name. The inpatient charge nurse also forwards the bed information to the receiving nurse and responding care team to let them know that the patient is on her way.

The patient is successfully transferred from the ED to the Inpatient Unit

To finalize the transfer, the receiving nurse texts or calls the ED nurse via TigerConnect to determine the transfer time and complete the clinical handoff. The ED nurse then messages transport to let them know the patient is ready and transport picks up the patient.

When transport is complete, the ED nurse sends a message to the patient's family via TigerConnect Patient Engagement letting them know that the patient has been admitted to the inpatient unit. The message includes the patient's room and bed number. The patient continues her recovery with the support of the hospital's inpatient care team.

The hospital's inpatient workflows using TigerConnect will decrease the patient's length of stay (LOS) and improve safety with better care team communication. Shorter inpatient LOS will help to support the hospital's ED efficiencies by freeing up resources for additional admissions.

65 minutes saved transferring from ED to Inpatient.*

* The TigerConnect ED-to-Inpatient transfer workflow takes an average of 41 minutes, compared to 106 minutes without TigerConnect. Time estimates based on select client implementations. Actual results may vary.





Wayne Healthcare increases ED capacity by 20% with TigerConnect

After implementing TigerConnect for their ED workflows, Wayne Healthcare increased ED capacity by 20% while decreasing the time from calling for a bed to the time the patient was received in their bed by 13%.

Additionally, 83% of staff believed TigerConnect had streamlined and improved their communication process for admissions.

The increase in capacity enabled Wayne Healthcare to efficiently manage an increase in patient volume during COVID-19 case surges.

“As the ED Unit Clerk, TigerConnect has helped me be able to obtain the information I need to be able to record with each admission. I am able to get that information out to the floor faster.”

—Emergency Department UC
Wayne Health



Enhance clinical workflows with TigerConnect

The ability to deliver safe and responsive emergency care shouldn't be dependent on a callback, but all too often it is. Slowdowns in patient flow directly contribute to ED crowding, poor ED throughput, and higher rates of patients leaving without being seen.

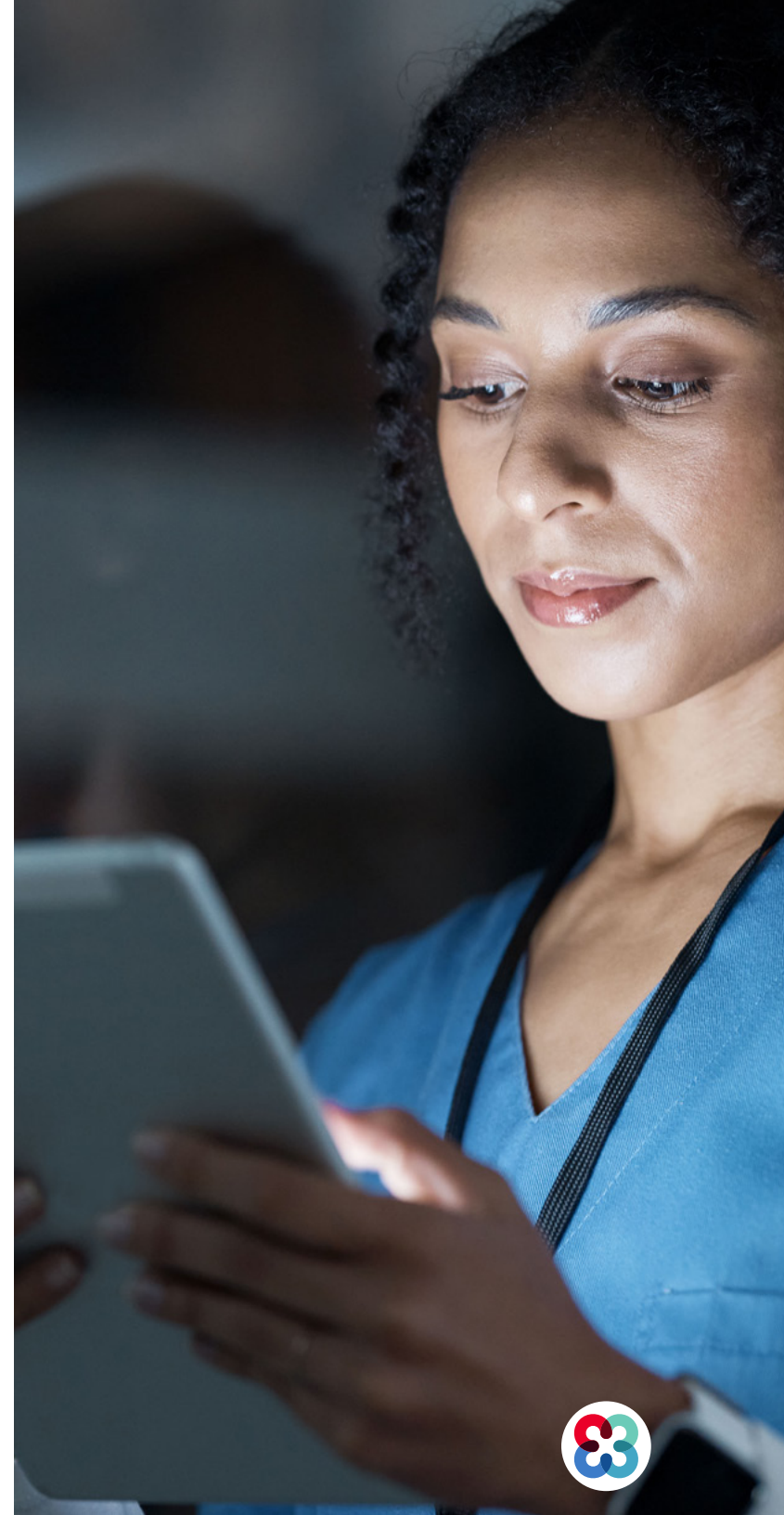
The TigerConnect Clinical Collaboration Platform speeds ED workflows throughout the patient journey by connecting the right providers for the right need and at the right time.

In an emergency department powered by TigerConnect:

- The appropriate response team is activated before the patient even arrives, decreasing door-to-provider time so that care can be delivered faster.
- Relevant patient information is pulled into HIPAA-compliant group messages to keep all team members current on the patient's status.
- Care team members can respond faster with instant alerts for critical test results.
- Providers can quickly look up on-call team members with easy lookups in the roles directory and communicate in real-time with context-rich text messages.
- ED consults are completed quickly because on-call specialist roles are automatically filled via provider scheduling integration. A message between the ED and on-call specialist is instantly created when the consult is requested in the EHR.
- Hospitals can manage their ED capacity more effectively with efficient ED-to-Inpatient Transfers that improve patient flow.

Move patients through the ED faster with TigerConnect and turn time savings into lives saved.

[REQUEST A FREE TIGERCONNECT DEMO TODAY >](#)



About TigerConnect

TigerConnect transforms healthcare with the industry's most widely adopted clinical collaboration platform – uniquely modernizing how doctors, nurses, care teams, patients, and data connect. With solutions spanning care communication, patient engagement, scheduling, alarm notifications, nurse call, and more, TigerConnect accelerates productivity, reduces costs, and improves patient outcomes, safely and securely. Trusted by more than 7,000 healthcare entities for user-friendly yet enterprise-ready solutions, TigerConnect delivers 99.995% verifiable uptime for more than 10 million messages each day.



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