Rapid Assessment Unit – The Difference at the Emergency Department Door

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Rapid Assessment Unit – The Difference at the Emergency Department Door

The Lehigh Valley Hospital-Muhlenberg Emergency Department Team
Lehigh Valley Health Network, Allentown, Pennsylvania

**DESIGN:** A performance improvement and ED remodel project to increase ED capacity and enhance quality of care, while decreasing waiting room times and overall length of stay (LOS)

**INTENTION:** Eliminate traditional triage + Split patient flow = RAPID ASSESSMENT UNIT (RAU)

### Current State

#### Footprint

- **WALK-IN**
- **10 Bed Adult Early Brewing**
- **4 Bed Pediatric Area**
- **27 Chair B3/B4**
- **2 Bed Disposition Area**
- **Ambulance**

#### ED staff
- Direct care nurses
- Non-licensed assistive personnel
- Nurse managers
- Nurse educator
- Physicians
- Advanced practice clinicians
- Registrars

#### LEAN coach

### Methods

#### Guiding Principles
1. Keep vertical patients vertical
2. Attain ‘door to provider’ time < 20 minutes
3. Ensure patients spend < 1 hour in RAU exam room
4. Practice situational decision making

#### Planning
1. Process development by project team members
2. Training by tabletop simulation
3. Process refinement through series of rapid cycle tests

### Outcomes

#### LVH-M RAU Metrics

- **Table 1. RAU Outcome Metrics**
- **7/1/11 – 11/30/11 Pre-RAU Averages**
- **12/1/11 – 6/30/12 Averages**

#### Success Factors

- Training
- Daily 7 am huddles
- Collaborative interprofessional team
- Commitment to guiding principles
- Utilization of LEAN principles
- Continuous ‘in the moment’ coaching between colleagues