

Measuring Quality and Implementing Change in Emergency Departments

The Urgent Matters Learning Network (UMLN) II

**AHRQ Annual Meeting
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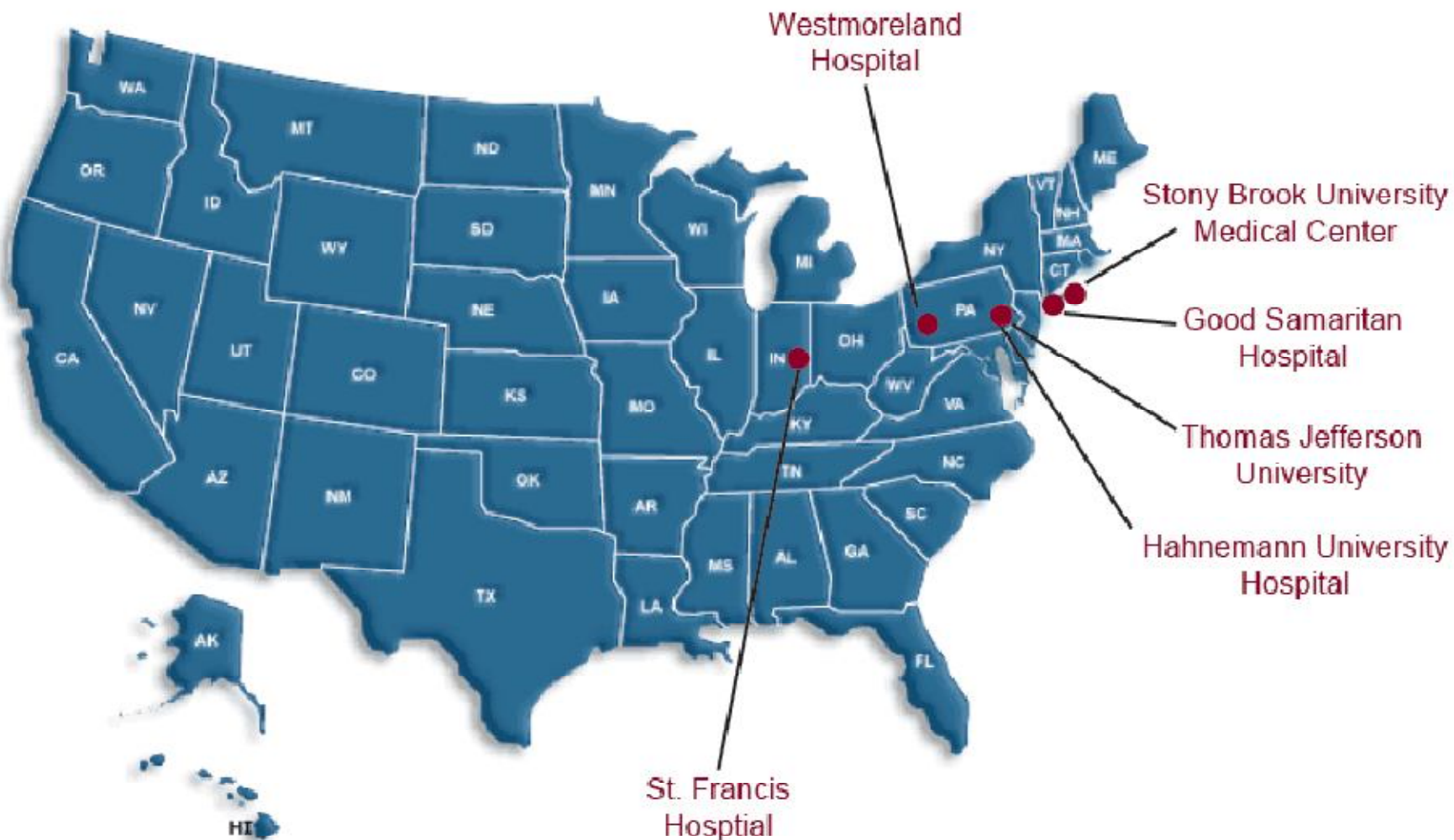
TRANSFORMING HEALTH CARE THROUGH RESEARCH AND EDUCATION



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UMLN II Hospitals

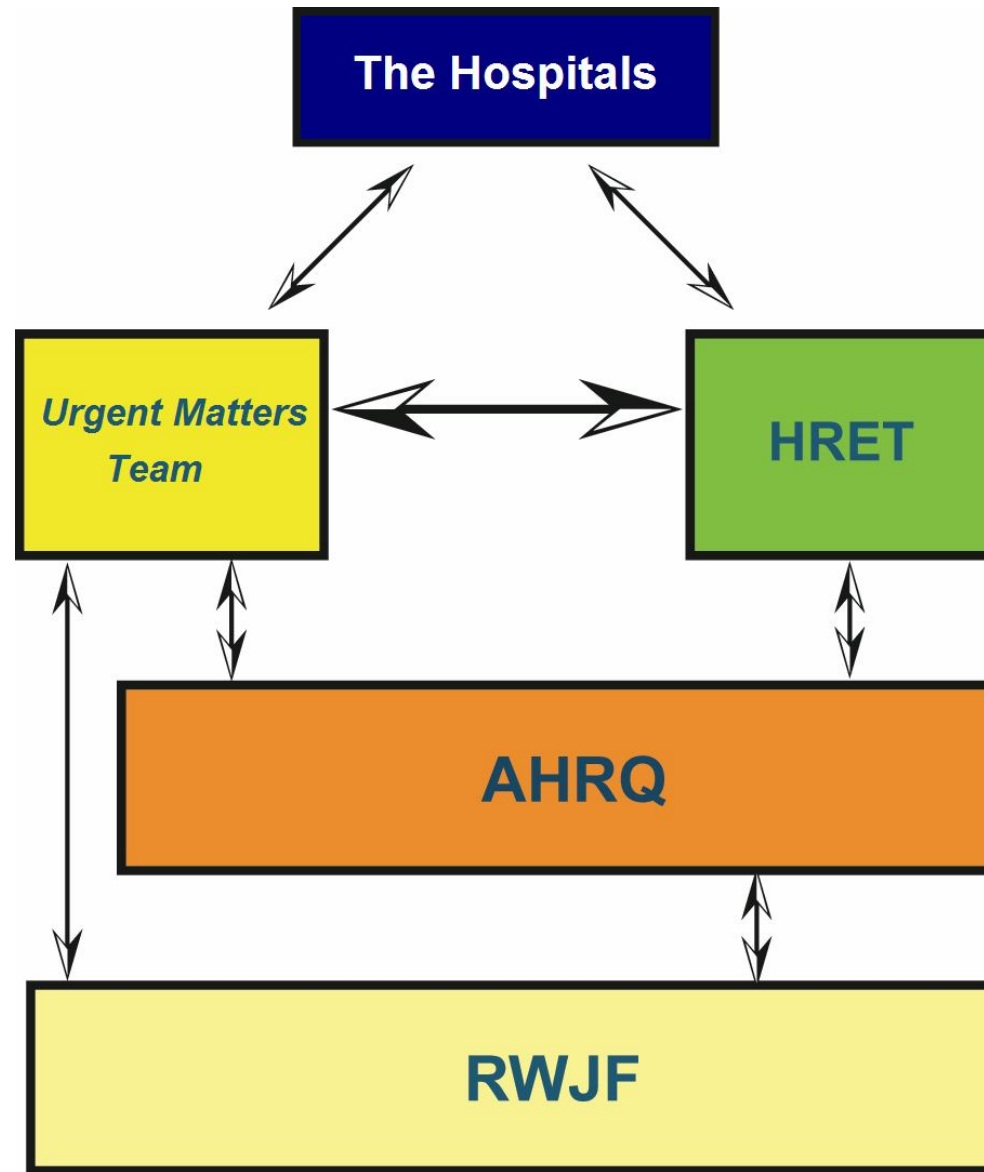


UMLN II Hospital Requirements

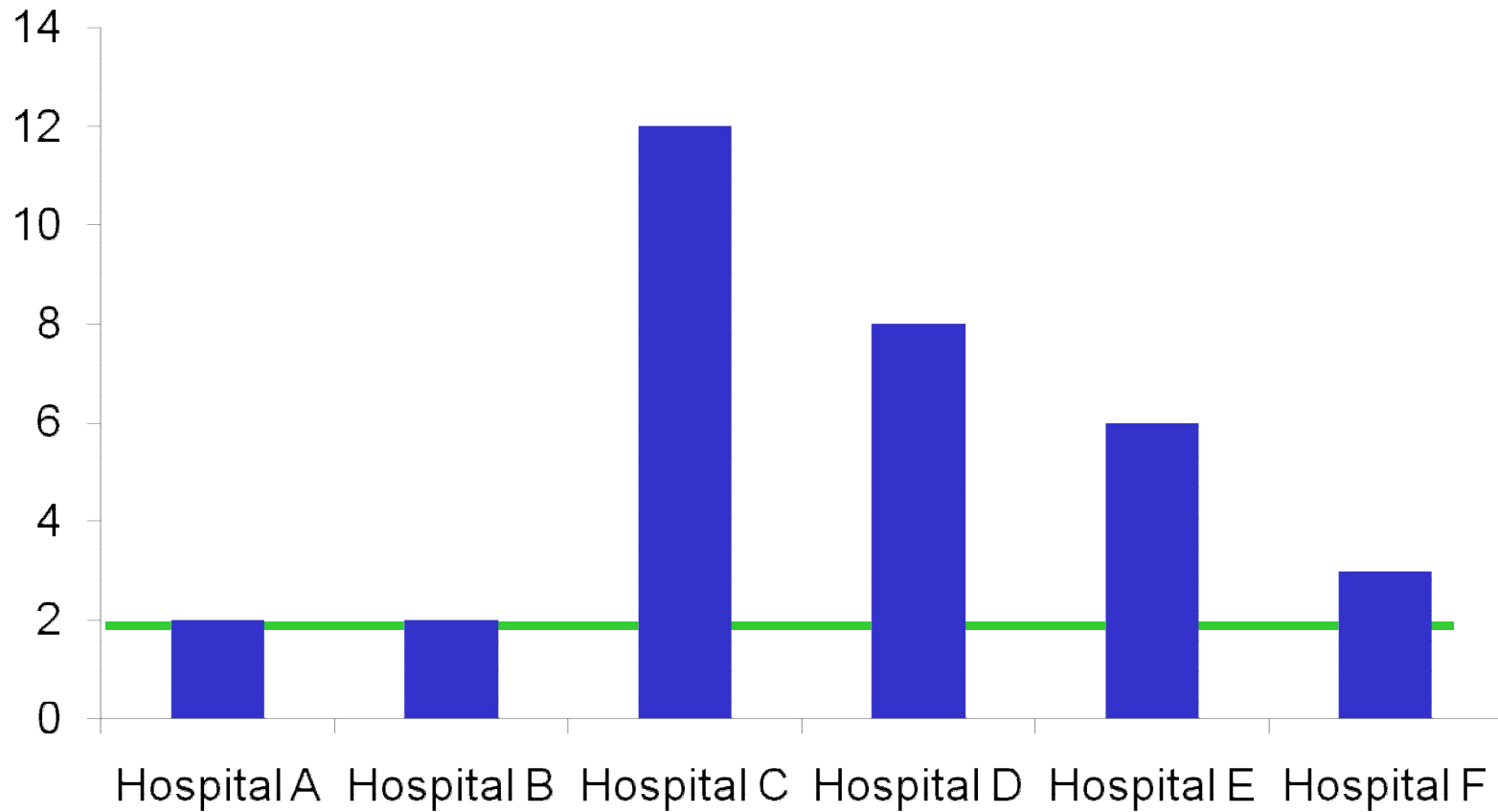
- Form a multi-disciplinary, hospital-wide team
- Select and implement improvement strategies
- Complete an implementation plan and monthly progress reports
- Participate in UMLN II meetings
- Field-test standard performance measures
- Participate in the evaluation of the strategies



UMLN II Framework



Percent of Patients That Leave Before Being Seen



UMLN II Strategies (Examples)

- Open Bed Policy (Hahnemann)
- Consultation Process (Stony Brook)
- “Revitalizing” Fast Track (Thomas Jefferson)
- ESI III “Mid-Track” (Good Samaritan)
- Standardize Triage Process (St. Francis)
- ED/Inpatient Report Tool (Westmoreland)



UMLN II - Goals

- (1) Evaluate the implementation of strategies to improve patient flow.**
- (2) Advance the development of performance measurement in the ED.**
- (3) Promote the spread of promising practices to a wider audience.**

UM LN II Evaluation Questions

- What factors motivated, supported, or impeded the implementation of the strategies?
- What changes in patient flow occurred after the implementation of the strategies?
- What resources were used for the implementation of the strategies, and what were the associated costs?



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UMLN II Performance Measures

- Time from ED arrival to ED departure (admitted/discharged)
- Time to pain management for long bone fracture (admitted/discharged)
- Time to chest X-ray (admitted/discharged)
- Admit decision time to ED departure time (admitted)

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Preliminary Thoughts

- Hospitals frequently encounter challenges during implementation.
- Our ability to attribute improvement to specific interventions is limited.
- Implementation is time intensive.