

Was this innovation submitted to the Emergency Care Innovation of the Year Award contest last year?

YES

NO

INNOVATION TITLE:

HOSPITAL:

Innovation Category: *select all that apply*

**Safety and Quality:** Practices implemented to improve desired health outcomes through quality and safety practices. These innovations strive to decrease the prevention of harm and errors for patients and are built on a culture of safety.

**Flow and Efficiency:** Efforts to optimize patient flow through various operational techniques including flow improvement efforts such as Lean, Six Sigma, Change Management. Strategies that strive to increase throughput efficiency and improve integration throughout the organization.

**Care Coordination:** Practices that strive to integrate all levels of care - from pre-admission all the way through the patient's care plan. These methods use deliberation organization of patient care activities to facilitate the appropriate delivery of health care services.

**Patient Experience:** Techniques that improve patient experience through all the different levels of patient care. These strategies deal with all touch points of people, processes, policies, communications, actions in the healthcare environment and patients' perceptions of how well these strategies are employed in the organization.

**Cost-Consciousness:** Practices that aim to safely reduce the costs of acute care through improved efficiency.

Hospital:

Location:

Contact:

Innovation Summary:

Category: *(check all that apply)*

- A:** Arrival
- B:** Bed Placement
- C:** Clinician Initial Evaluation
- D:** Disposition Decision/ Throughput
- E:** Exit From the ED

Hospital Metrics:

- Annual ED Volume:
- Hospital Beds:
- Ownership:
- Trauma Level:
- Teaching Status:

Key Words:

*(check all that apply or add additional)*

- |   |  |  |                                       |
|---|--|--|---------------------------------------|
| <input type="checkbox"/> Care Transitions       | <input type="checkbox"/> Door-to-Doc         | <input type="checkbox"/> Left-Without-Being-Seen | <input type="checkbox"/> Scheduling   |
| <input type="checkbox"/> Care Manager           | <input type="checkbox"/> ESI                 | <input type="checkbox"/> Length of Stay          | <input type="checkbox"/> Telemedicine |
| <input type="checkbox"/> Communication          | <input type="checkbox"/> Fast Track          | <input type="checkbox"/> Medical Home            | <input type="checkbox"/> Triage       |
| <input type="checkbox"/> Consults               | <input type="checkbox"/> Follow-Up           | <input type="checkbox"/> Patient Satisfaction    | <input type="checkbox"/> Wait Times   |
| <input type="checkbox"/> Continuity of care     | <input type="checkbox"/> Frequent Flyer      | <input type="checkbox"/> Patient Volume          | <input type="checkbox"/>              |
| <input type="checkbox"/> Crowding               | <input type="checkbox"/> Geriatric           | <input type="checkbox"/> Queing                  | <input type="checkbox"/>              |
| <input type="checkbox"/> Discharge Instructions | <input type="checkbox"/> Hand-Offs           | <input type="checkbox"/> Rapid Intake            | <input type="checkbox"/>              |
|   | <input type="checkbox"/> Information Systems | <input type="checkbox"/> Registration            | <input type="checkbox"/>              |
|   | <input type="checkbox"/> Lean                | <input type="checkbox"/> Safety Net              | <input type="checkbox"/>              |

**Tools Provided:** (list all any additional materials related to this tool. e.g., communication materials, Process Flow Images, additional graphs displaying results, patient information collection tools, job descriptions, policies etc.)

**Clinical Areas Affected:**

(check all that apply or add additional)

- |  |   |
|--|---|
| <input type="checkbox"/> access readmissions       | <input type="checkbox"/> inpatient units      |
| <input type="checkbox"/> ambulatory surgery center | <input type="checkbox"/> laboratory           |
| <input type="checkbox"/> ancillary departments     | <input type="checkbox"/> neurology            |
| <input type="checkbox"/> anesthesiology            | <input type="checkbox"/> nursing home         |
| <input type="checkbox"/> cardiology                | <input type="checkbox"/> orthopedics          |
| <input type="checkbox"/> clinics                   | <input type="checkbox"/> outpatient units     |
| <input type="checkbox"/> ED                        | <input type="checkbox"/> psychiatric consults |
| <input type="checkbox"/> EMS                       | <input type="checkbox"/> psychiatry           |
| <input type="checkbox"/> environmental services    | <input type="checkbox"/> radiology            |
| <input type="checkbox"/> fast track                | <input type="checkbox"/> registration         |
| <input type="checkbox"/> geriatric                 | <input type="checkbox"/> respiratory therapy  |
|  | <input type="checkbox"/> surgery              |
|  | <input type="checkbox"/> triage               |
|  | <input type="checkbox"/>                      |
|  | <input type="checkbox"/>                      |
|  | <input type="checkbox"/>                      |
|  | <input type="checkbox"/>                      |

**Staff Involved:**

(check all that apply or add additional)

- |  |   |
|--|---|
| <input type="checkbox"/> administrators              | <input type="checkbox"/> physical therapists          |
| <input type="checkbox"/> ancillary departments       | <input type="checkbox"/> physicians                   |
| <input type="checkbox"/> case management             | <input type="checkbox"/> registration staff           |
| <input type="checkbox"/> clerks                      | <input type="checkbox"/> social workers/case managers |
| <input type="checkbox"/> clinic registration         | <input type="checkbox"/> technicians                  |
| <input type="checkbox"/> communications              | <input type="checkbox"/> toxicologists                |
| <input type="checkbox"/> consult services            | <input type="checkbox"/>                              |
| <input type="checkbox"/> ED palliative care team     | <input type="checkbox"/>                              |
| <input type="checkbox"/> ED staff                    | <input type="checkbox"/>                              |
| <input type="checkbox"/> IT staff                    | <input type="checkbox"/>                              |
| <input type="checkbox"/> nurses                      | <input type="checkbox"/>                              |
| <input type="checkbox"/> nursing home administration | <input type="checkbox"/>                              |
| <input type="checkbox"/> pharmacists                 | <input type="checkbox"/>                              |

**Innovation**

Briefly describe the innovation/process and problem that it addresses.

**Background**

Explain how the innovation works and why your organization chose this solution over others.



**Innovation Implementation**

*This is where you can go into more depth about the details of the innovation and how it was implemented at your institution. Describe what resources were needed to start up the innovation and what will be required to sustain it. Briefly describe your team and their role.*

**Timeline**

*How long did it take to implement this innovation? When did you begin the planning process? How long did each step take?*

**Results/Evaluation**

*Feel free to include graphs/charts and/or other attachments that display your results - submit with your completed form to [urgentmatters@gwu.edu](mailto:urgentmatters@gwu.edu)*



**Cost/Benefit Analysis**

*Describe the breakdown of the costs for implementing this innovation and provide a comparison to the costs saving.*

**Advice and Lessons Learned**

*Provide at least 3 and no more than 10 lessons for the reader who might want to implement this tool at their own institution – e.g., How to get staff buy-in, did this require specific partnerships to succeed? What would you have done differently?*

**Sustainability**

*Describe how the organization is working to sustain the results? What are the next steps around this work?*



**Email completed submission forms and additional attachments to  
[urgentmatters@gwu.edu](mailto:urgentmatters@gwu.edu)**

**Include any additional information below**

