

'ESP' - Emergency Surgical Pathway

A Successful Redesign of Emergency Surgical Flow at the Flinders Medical Centre

Jason Cloonan,
Clinical Service Co-ordinator, Ward 5D & ESP



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Observations

- > Flinders Medical Centre (FMC) is the only hospital in the Southern area that receives acute surgical service referrals resulting in a large number of assessments
- > FMC Emergency Department (ED) was the only access point for these patients
- > Patients waiting for review by an inpatient team in the ED does not add value to the patients stay



Who is a sorted patient?

Doctor Accepted

- > All patients that are referred to and accepted by an inpatient team for assessment/admission.
- > This includes referrals to the inpatient team from: Specialists, General Practitioners, FMC Community Nurses, Hospital @ Home and Allied Health.

Readmission

- > Patients re-presenting to the FMC ED, within 24 hours of discharge, for an ailment that is directly related to the reason for their previous admission.



Phase 1

> 8 Week Trial

- 19th October - 10th December 2009

> Scope

- Medical and Surgical patients
- Dedicated area and staff
- 7am – 7pm

> Outcomes

- 174 patients, 38 medical & 136 surgical
- 95% patient satisfaction
- 46% reduction in triage to bed time.



Phase 2

'ESP' – Emergency Surgical Pathway

> 12 Week Trial

- 18th January - 18th April 2010

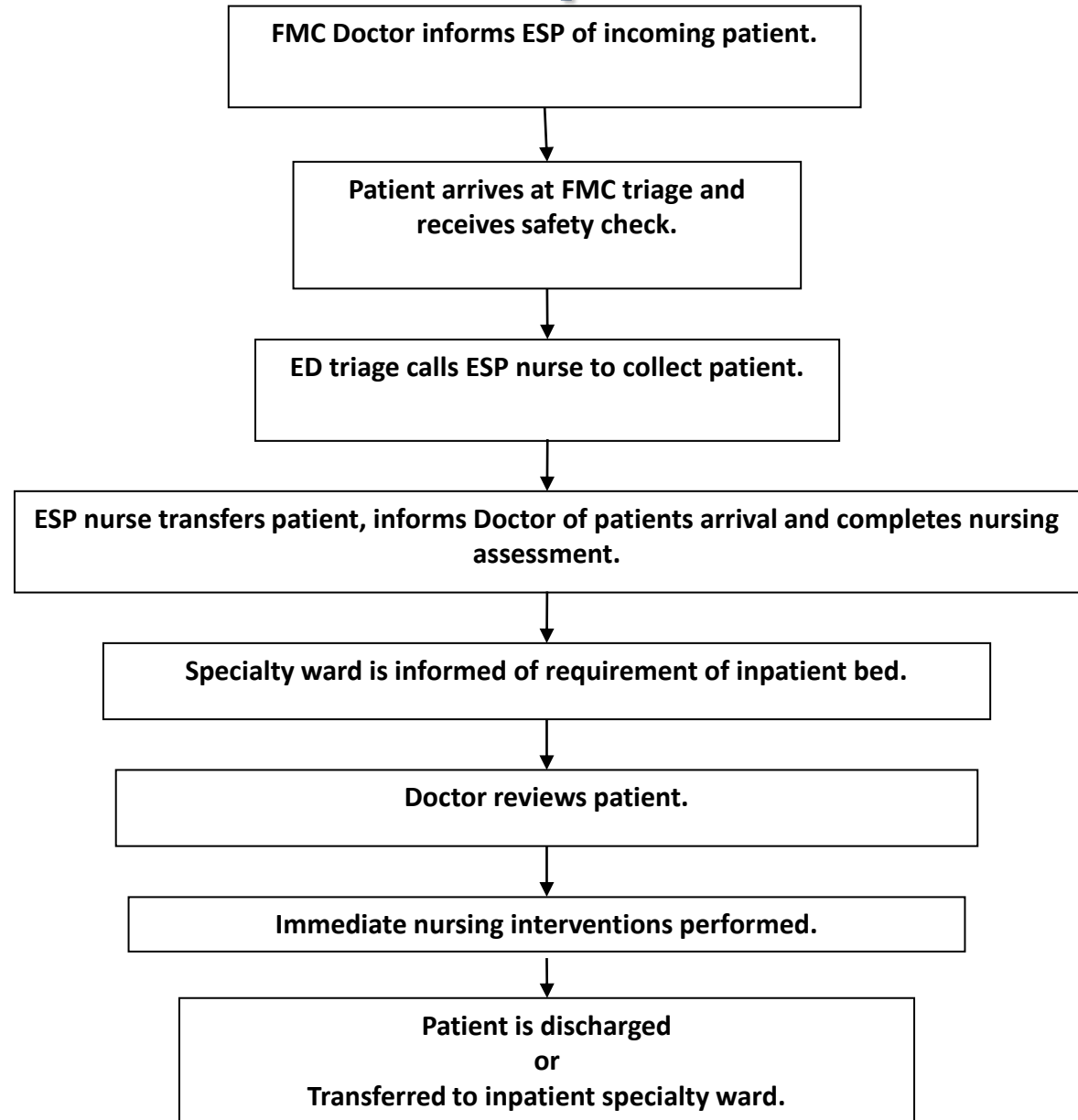
> Scope

- Surgical Division patients
- 24 hours a day

> Structure

- Reallocation of space and staff
- 4 dedicated beds within existing 28 bed short stay emergency surgical ward
- No new/additional resources

The ESP process





Safety

- > Triage safety check for all ESP patients
- > Triage category 1 & 2 patients remain in ED
- > ESP patient receives a full set of observations on arrival
- > Medical review within 2 hours
- > If patient deteriorates – MET, HDU, ICCU



Equity

- > Majority have already waited > 6 hours in another hospital
- > Patients from GP's/Private rooms are complex and already known to the team
- > ESP patients avoiding the ED allows ED staff to have more time to care for ED patients

ESP TRIAL OUTCOMES



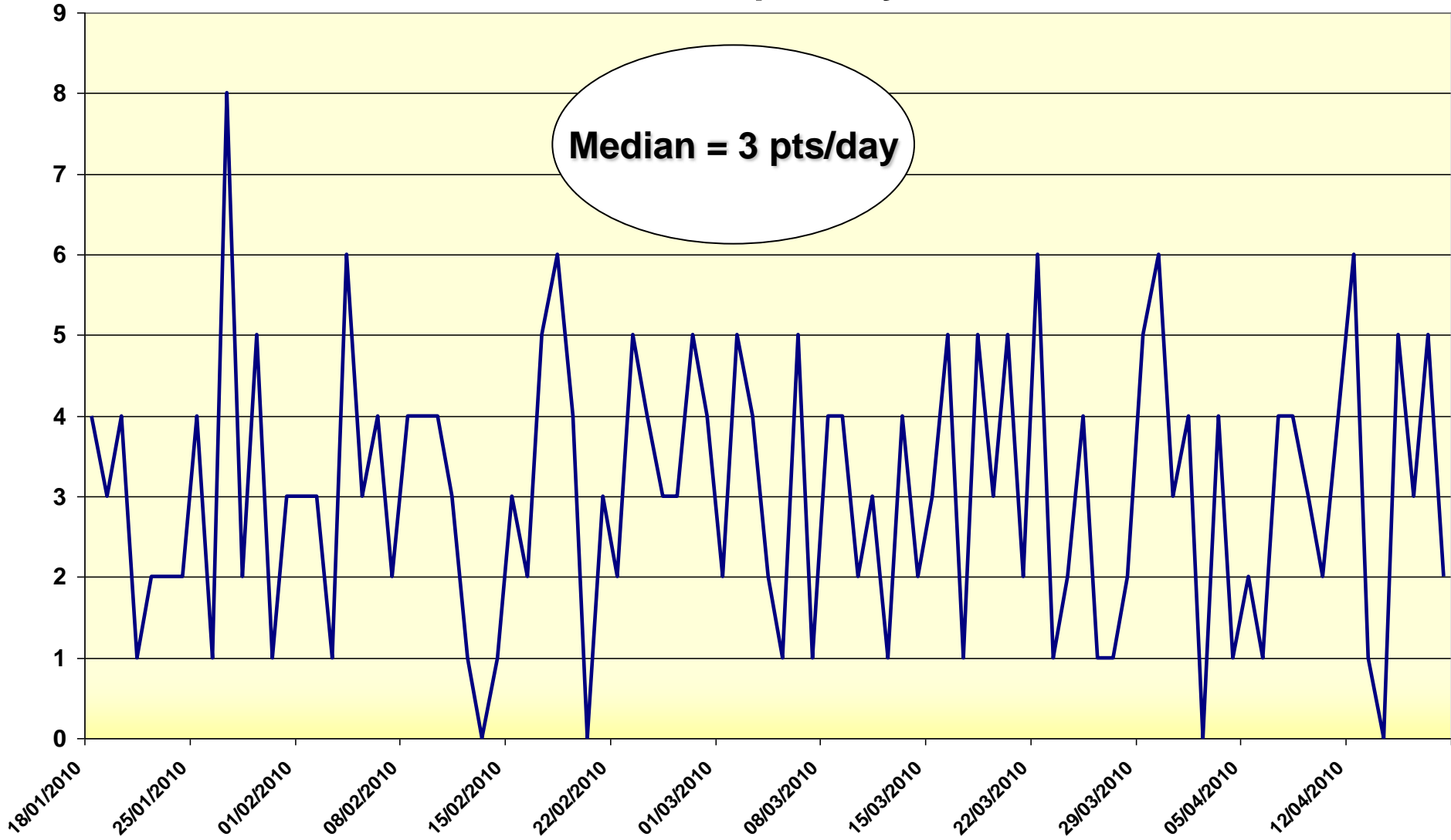
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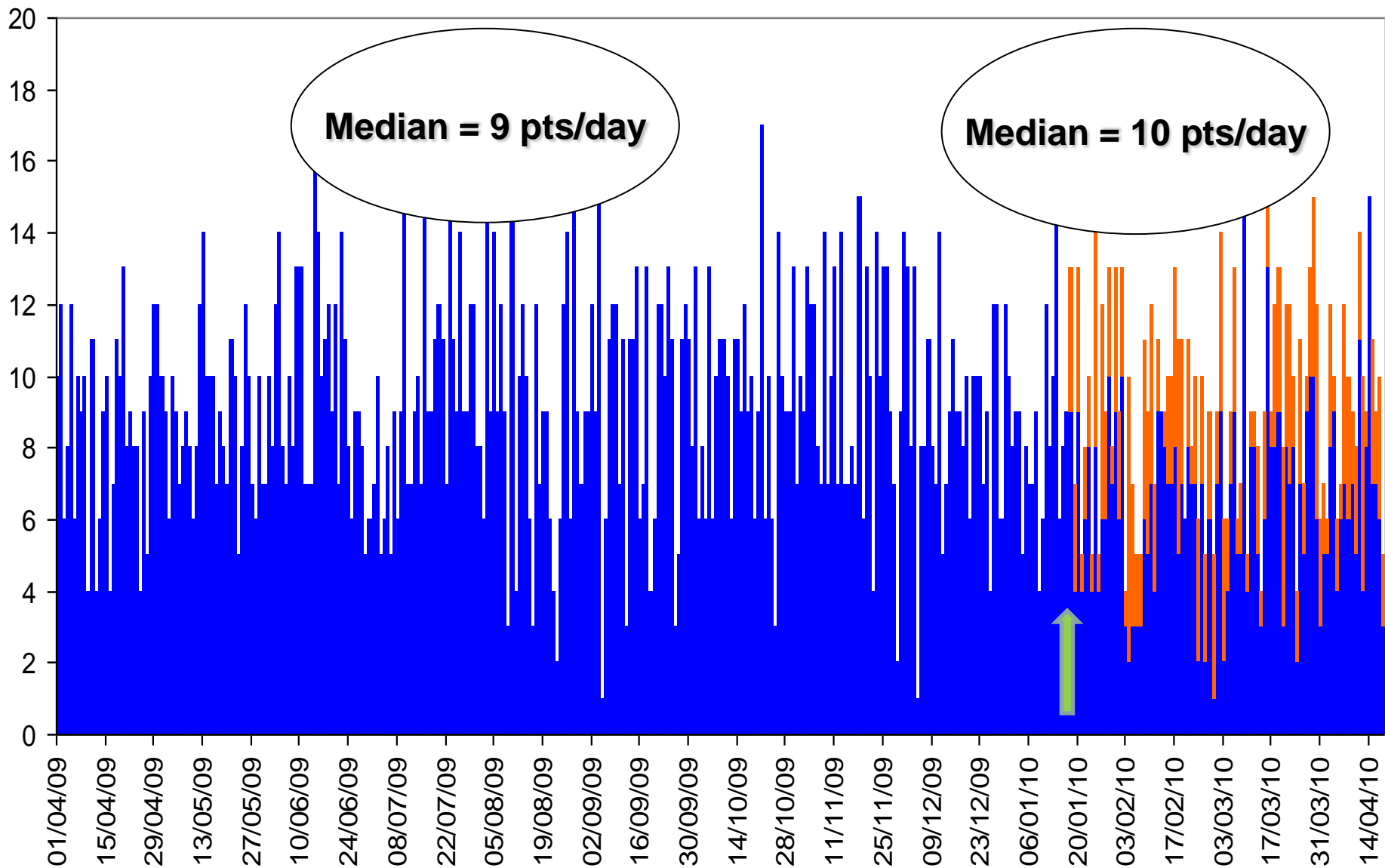
Count of Patients per Day in ESP



Median = 3 pts/day

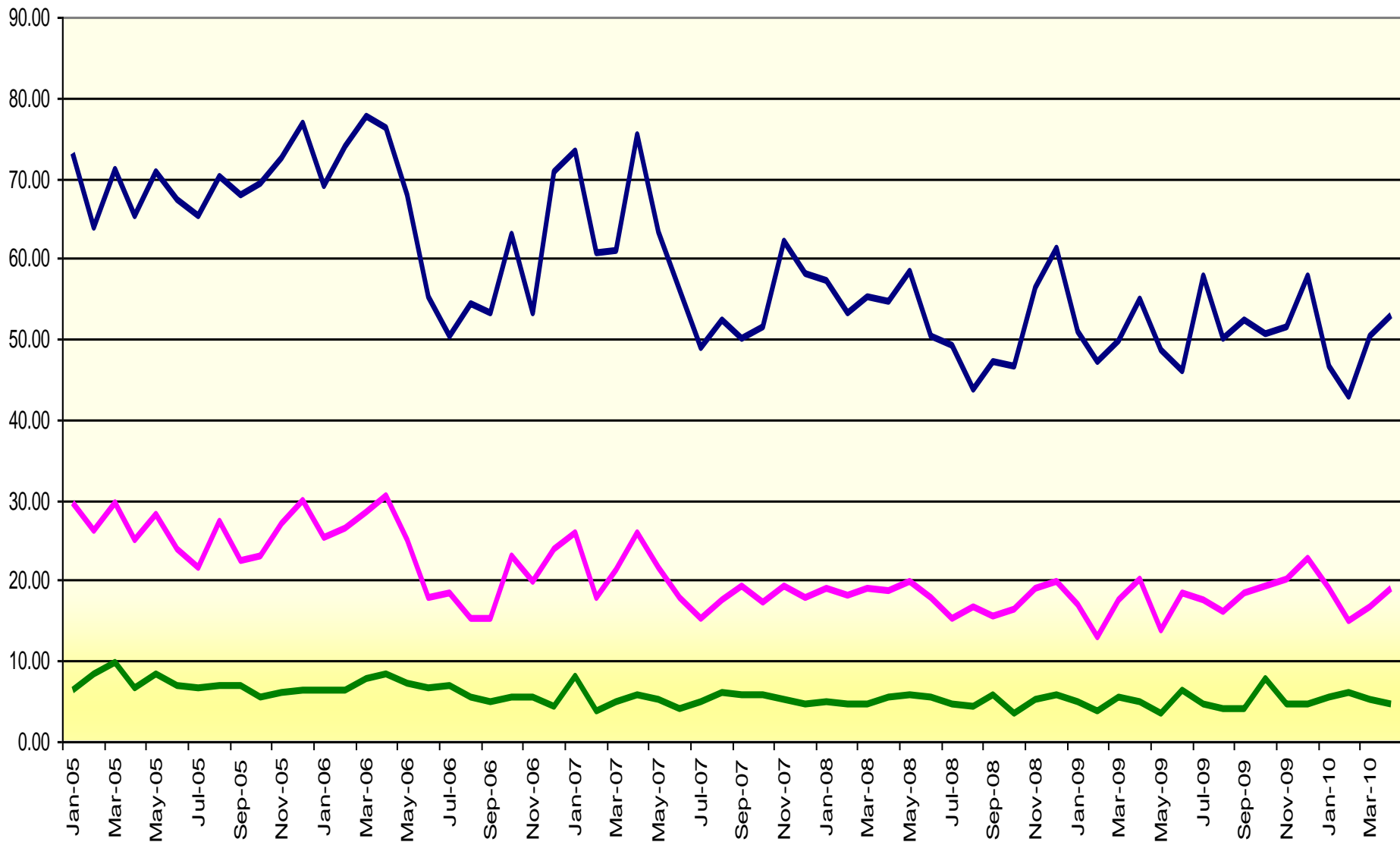
Number of patients admitted to Ward 5D

ward 5D excl transfers from ESP ward ESP



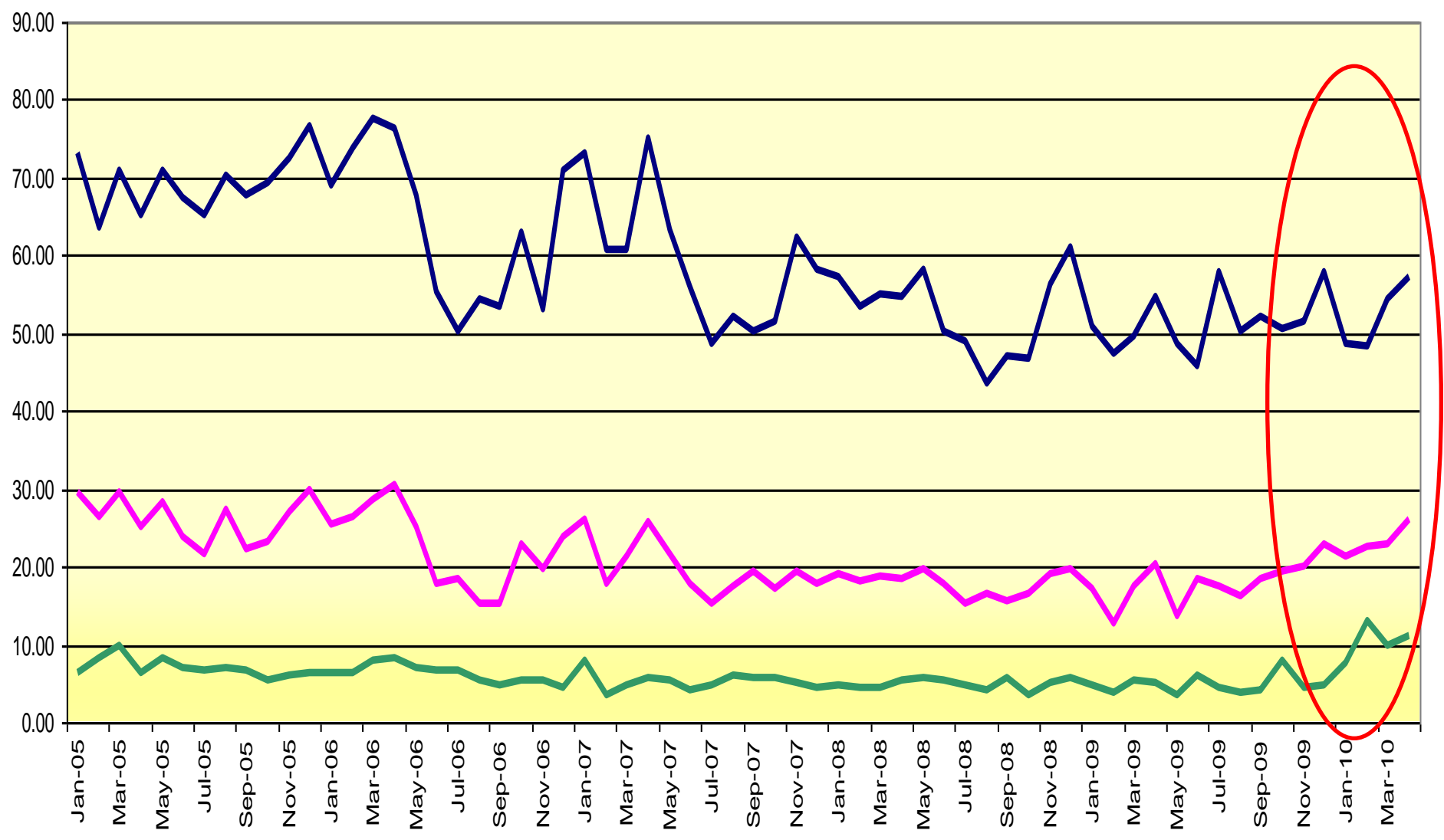
ED LOS of Surgical Patients excluding ESP

— % ED LOS ≤ 8hr — % ED LOS ≤ 4hr — % ED LOS ≤ 2hr



ED LOS of Surgical Patients including ESP

— % ED LOS ≤ 8hr — % ED LOS ≤ 4hr — % ED LOS ≤ 2hr





What does it mean for the Flinders Medical Centre ED?

- > ESP has improved the number of patients through ED
 - < 2 hours by 3.90%
 - < 4 hours by 5.73%
 - < 8 hours by 5.05%

Since the trial ended



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Decreased
CSC
supervision

Rumours,
Rumours,
Rumours!

Changes to
other systems

Medical staff
requesting ED
review

Perception that
ESP was not
suitable

No ESP
Capacity

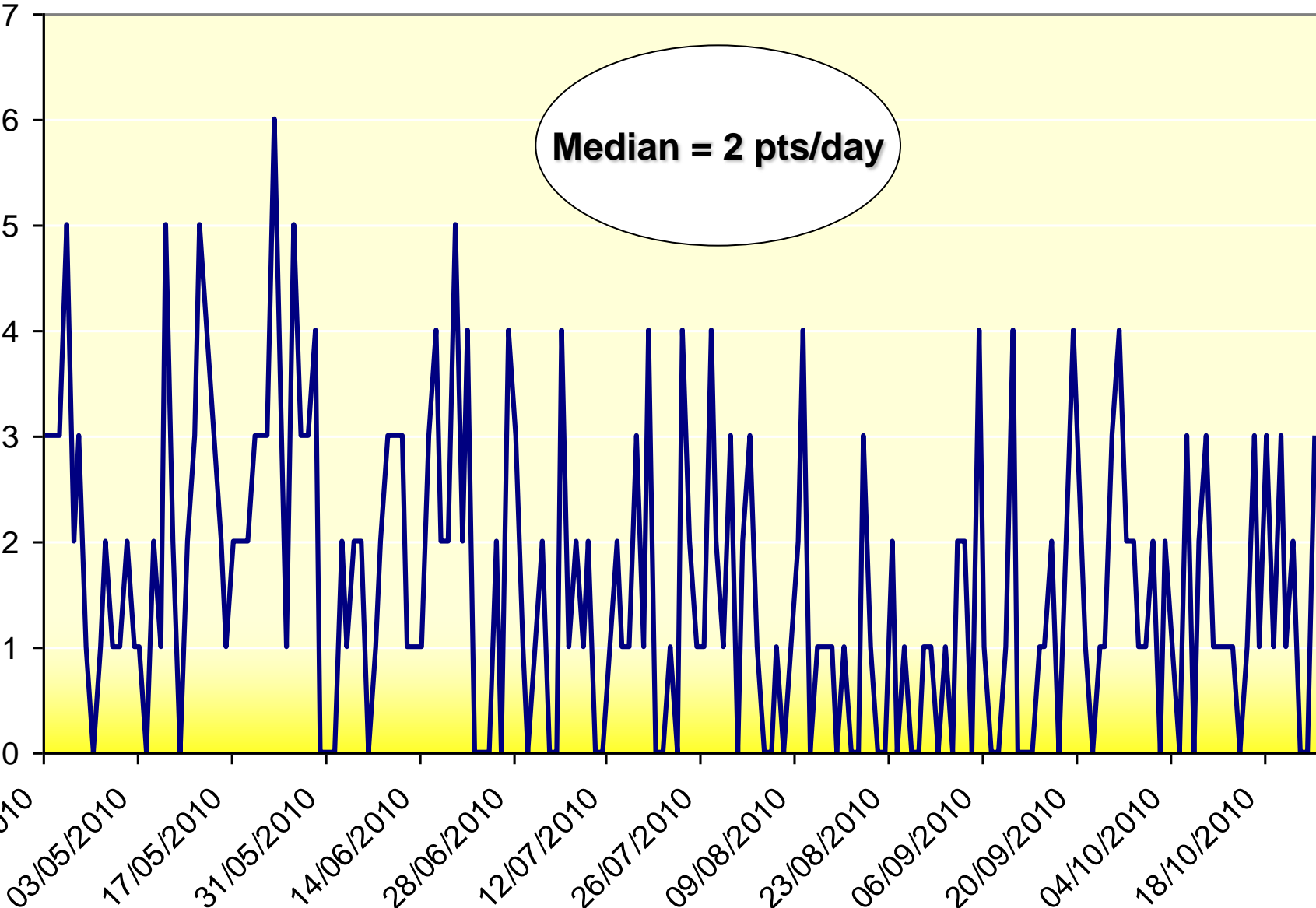
Changing
Senior Medical
Staff



No ESP Capacity

- > ESP has been open for 188 days
- > ESP was closed for 45 days.
- > Decreased capacity to two beds for a number of days.
- > Treatment room (one bed) was used if no capacity available.

Count of Patients per day in ESP



Median = 2 pts/day



What does it mean for the Flinders Medical Centre ED?

- > ESP has improved the number of patients through ED
 - < 2 hours by 4.19% (76%)
 - < 4 hours by 4.78% (26%)
 - < 8 hours by 3.06% (6%)



What does it mean for the Division of Surgery and Specialty Services?

- > **5,920** patients admitted to surgical wards in 2009.
- > ESP will see **893** patients per year.
- > ESP will therefore decrease the number of surgical patients in the ED by **15%**
- > **Without any extra resources!**



Summary

> Patient satisfaction

- ‘A great improvement on previous admissions’
- ‘I am pleased with the way I have been treated, efficient and organised, thankyou’

> ESP has been a success for 580 patients!

- Surgical patients are reviewed in a timely, safe and appropriate setting



Next steps

- To consolidate current practice & 1st time quality
- Continue to orientate new nursing and medical staff
- Improve nursing care to support patients in ESP – NIPP, IV cannulation
- Work towards the development of a Acute Surgical Unit including ESP
- Implementation of ESP process into the SA health strategic plan – direct access pathways



Acknowledgements

- > Annette Boonen, Nursing Director, Surgical and Specialty Services, Flinders Medical Centre.
- > Margaret Martin, Deputy Director, Surgical and Specialty Services, Flinders Medical Centre.
- > Pamela Everingham, Executive Project Office, Flinders Medical Centre.
- > Special thanks to Ward 5D Staff



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