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Patient Length of Stay in The Emergency Department (ED) Can Be Significantly Reduced by Redesigning The Pathology Process

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ABSTRACT:

Background: The Australian Council on Healthcare Standards published data in 2003 highlighting major deficiencies in laboratory turn around times for urgent tests.

Intervention: Redesign of the pathology process, encompassing all aspects of the Request-Test-Report cycle.

Principle Findings: Redesigning the pathology process achieved a highly significant ($p < 0.001$) 29 minute reduction in the Median Length of Stay for 'ALL patients' in the ED. Benefits were demonstrated across each decile of length of stay. Additionally, significant nursing time was saved.

Implications for Policy/Practice: The highly significant reduction in patient Length of Stay in the ED demonstrated in this study provides substantial gains that are directly beneficial to the patients and to the efficiency and cost-effectiveness of the healthcare system. Extrapolating data from this study to the 3375 patients attending Queensland Health ED facilities each day could result in savings of 1518 patient hours per day. Using the Trial average length of stay, this would equate to the ability to treat an additional 526 patients each day potentially without additional ED beds.

This research paper is to be published in a renowned research Journal and the Qualcon 2005 Team has agreed not to publish the manuscript at this time.