Holding, Crowding, and Patient Flow

Description
For years, the issue of emergency department (ED) crowding, and the practice of holding admitted patients in the ED, have created challenges to providing emergency care.1-3 A complex issue, crowding has been defined as, “a situation in which the identified need for emergency services outstrips available resources in the emergency department, hospital, or both.”4 Many agree this is a hospital/community-wide issue and not an isolated emergency department issue.4-7

The Institute of Medicine (IOM) notes the practice of holding admitted patients in the ED is a primary cause of ED crowding, and ED crowding represents an obstacle to the safe and timely delivery of healthcare.8 The challenge for emergency nurses is to provide a standard of care comparable to the requisite level of care, regardless of location.

Researchers have linked ED crowding with adverse patient outcomes and impaired access to care.9-13 The Institute for Healthcare Improvement demonstrated that regardless of the location, crowding and holding admitted patients is a result of ineffective hospital flow processes.5 Recognizing patient flow is a hospital-wide system issue, the Joint Commission established the standard “The hospital manages the flow of patients throughout the hospital.”14 Consequently, what many used to describe as an ED problem is now acknowledged as a hospital-wide problem.5,7,14,15 These ineffective flow processes can result in increased costs, compromise the quality of care, and jeopardize the public’s faith in healthcare.7,15

As frontline healthcare providers, emergency nurses are well-positioned to contribute to innovative solutions and strategies to develop evidence-based practices. The need for rigorous, sustainable, evidence-based solutions is necessary to effectively address holding, crowding, and patient flow. This requires multidisciplinary collaboration across the care continuum.

ENA Position
It is the position of the Emergency Nurses Association that:
1. Crowding, holding, and patient flow is a hospital-wide system issue.
2. Emergency nurses advocate for a systems approach to solutions looking at patient flow.
3. Emergency nurses integrate successful methods of disaster response and daily surge protocols in the development and implementation of crowding solutions.
4. Emergency nurses are encouraged to engage all stakeholders, including the community, to identify, implement, evaluate, and disseminate solutions.
5. Emergency nurses engage in research addressing crowding, holding, and patient flow.

Background
The extent of the crowding problem has been exposed in multiple national survey findings, such as the National Hospital Ambulatory Medical Care Survey, as well as other commissioned reports dating back to 2001.2,3,9,15,16 The 2003 Government Accounting Office (GAO) report on hospital EDs revealed a majority of urban EDs were operating at or above capacity.3 The Centers for Medicare and Medicaid Services now require public reporting of ED metrics around throughput and holding.17

There exists more data than ever before around crowding metrics and the impact on quality outcomes, however, there continues to be a lack of evidence-based solutions to effectively test interventions with sustainable long-term results.18 The challenge of defining and measuring ED metrics and inconsistencies in comparing data points eventually resulted in a shift to examining efficiency performance parameters. Ultimately, this evolved into the analysis of patient flow.18,19
An early, important conceptual model, described by Asplin and colleagues, employs an operations management approach evaluating input, throughput, and output.\textsuperscript{16,17} Multiple interventions have been described for streamlining patient flow focused on the elements of safety, quality, capacity, and capabilities.\textsuperscript{5,7,9,14,21} Citing issues of inadequate resources for the demand, some have reported success in “effectively managing large volumes of patients by implementing a comprehensive hospital-wide surge protocol”\textsuperscript{5,17,22} similar to a disaster response.\textsuperscript{21,22}

Healthcare leaders have extended beyond facility boundaries to the community, government, and other agencies in an effort to develop a “continuum of care” approach.\textsuperscript{9} With the implementation of the Affordable Care Act, patient volumes are forecast to increase, signaling the importance of emergency nurses to reach out and partner with all identified stakeholders to develop solutions.\textsuperscript{5} It will require all healthcare professionals to engage in evidence-based research activities in order to identify best practice for our patients.\textsuperscript{18}

References


Position Statement


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This Position Statement combines and replaces Holding Patients in the Emergency Department (5/2006) and Improving Flow/Throughput to Reduce Crowding (10/2010).

Developed: May 2014
Approved by the ENA Board of Directors: July 2014

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