

## Quint Studer: Four Best Practices for Improving Emergency Department Results

Written by Lindsey Dunn  
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The emergency department is one of the most critical departments within a hospital because a hospital's overall perception is largely dependent of the success or failure of its ED, says Quint Studer, founder of the Studer Group. As recent media reports have shown, problems in the ED can have a negative impact on the reputation of an entire institution, even if the performance of its other departments are strong.

"With inpatient stays, a hospital usually has several days to rectify any problem. Providing quality care and service is much more urgent in the ED," says Mr. Studer.

In addition to improving hospital reputation, an efficient ED can also improve a hospital's bottom line. Studies have shown that 45 percent of all hospital inpatient admissions come from the ED, so departments that can reduce the number of ED patients who leave without being seen can bring additional income to their facility. While most hospitals can expect at least 2 percent of patients to fit into this category, facilities that can retain two to three additional patients per day could bring in as much as \$200,000-\$300,000 in additional revenue over the course of a year, says Mr. Studer.

Here are four best practices for improving ED results from the Studer Group.

**1. Hourly rounding on patients.** One of the easiest best practices to implement to improve ED results is hourly rounding on patients, says Mr. Studer. During rounding, an employee, typically a charge or triage nurse, provides status updates to patients waiting to be seen. The employee may make a general announcement to the group, and should also speak with individual patients, when appropriate. "A patient with sprained wrist, for example, is likely to understand if they can't be seen right away, but if you don't keep them updated you risk them feeling forgotten or unimportant," says Mr. Studer.

Although rounding seems like a simple practice, it can lead to big results. When Baptist Hospital of Miami implemented hourly rounding in its high-volume ED, it increased its ED patient satisfaction scores from the 6th to the 99th percentile in one year, says Mr. Studer.

**2. Key words at key times.** During rounds, it is important that hospital employees provide key information to patients at key times. Doing so reduces patient anxiety and builds loyalty, says Mr. Studer. He recommends using the acronym "AIDET," described below, to help employees convey this information at the appropriate time.

- Acknowledge — Acknowledge the patient by name. Make eye contact. Ask: "Is there anything I can do for you?"
- Introduce — Introduce yourself, your skill set, your professional certification and experience.
- Duration — Give an accurate time expectation for tests, physician arrival and overall treatment.
- Explanation—Explain step by step what will happen, answer questions and leave a phone number where you can be reached.
- Thank—Thank the patient for choosing your hospital and for their communication and

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cooperation. Thank the family for assistance and being there to support the patient.

**3. Manage flow.** Perhaps the most important practice for a successful ED is managing patient flow, says Mr. Studer. The first step to managing this process is measuring patient demand by hour and matching that demand to staffing. Mr. Studer recommends hospitals use a real-time flow dashboard to analyze patient movement through each step of an ED visit at various times of the day.

Mr. Studer also suggests creating different flow pathways for different patients. "Our goal is not to put patients in back in an ED room if we don't have to," he says. For example, patients with minor injuries can be "fast-tracked," which means that they can be treated from the waiting area or taken back for a test and moved to a separate "results" waiting area — an area reserved for patients who can be discharged quickly once test results are reported to them, he says.

**4. Follow-up phone calls.** Studies by the Studer Group have found that calling patients after their discharge from the ED greatly increases their satisfaction and overall perception of the ED. According to a study by the Studer Group, none of the EDs studied that provided follow-up calls to patients received satisfaction rankings below the 70th percentile, and, in most cases, these hospitals reached the 90th percentile. Few hospitals that did not provide such calls received rankings above the 50th percentile.

These calls are typically completed by nurses the day after a patient's visit and are used to repeat discharge instructions and gain patient feedback on their experiences, says Mr. Studer. Repeating discharge instructions while the patient is at home increases the likelihood that the patient will remember and follow the instructions and can reduce readmissions, which in many cases are no longer reimbursed by payors, he says.

*Quint Studer is a recognized leader and change agent in the healthcare industry and has more than 20 years of healthcare experience. Learn more about [Studer Group](#).*