

A QUALITATIVE EXPLORATION OF FACTORS INFLUENCING PATIENT FLOW IN AN EMERGENCY DEPARTMENT

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BACKGROUND AND STUDY AIM

Patient flow affects the efficiency and quality of care in emergency departments. Improving flow requires understanding the work processes that cause flow problems. This is especially important for developing countries and developing emergency care systems where flow issues are often compounded by resource constraints. Conducting research in developing countries is essential to determine if knowledge on patient flow is generalizable from developed settings as well as gaining potential new insights from developing settings. The Caribbean is one region with developing emergency care systems and limited research in the area. The goal of this study was to understand and map ED patient flow in a Trinidad and Tobago, identifying factors influencing flow.

STUDY DESIGN AND METHODS

Setting: Emergency Department in Trinidad and Tobago.
Design: multiple qualitative methods.
Analysis: Thematic analysis

Non-participant observations (48 hours): focused on ED layout, structure of staffing groups
Observational process mapping (155 hours): direct observations of steps taken by patients during their ED journey as well as what was happening around the patient. The organizational process and not the clinical process was the focus.
Informal conversations: used to clarify activities and steps in the process.
Review of process maps: maps reviewed with key staff members for validation and to provide feedback to staff.

STUDY FINDINGS

- 143 patient journeys mapped.
- Six broad themes identified:
- 1)ED organisational work processes
 - 2) ED design and layout
 - 3) Material resources within and outside ED
 - 4) ED nursing staff levels, roles, skill mix and use
 - 5) ED non-clinical staff
 - 6) External clinical and non- clinical departments

A conceptual model of factors influencing ED patient flow was developed from the study findings and literature reviews. The factors identified have been re-organized into categories based on the fishbone diagram with explanations as to how the factor influenced patient flow

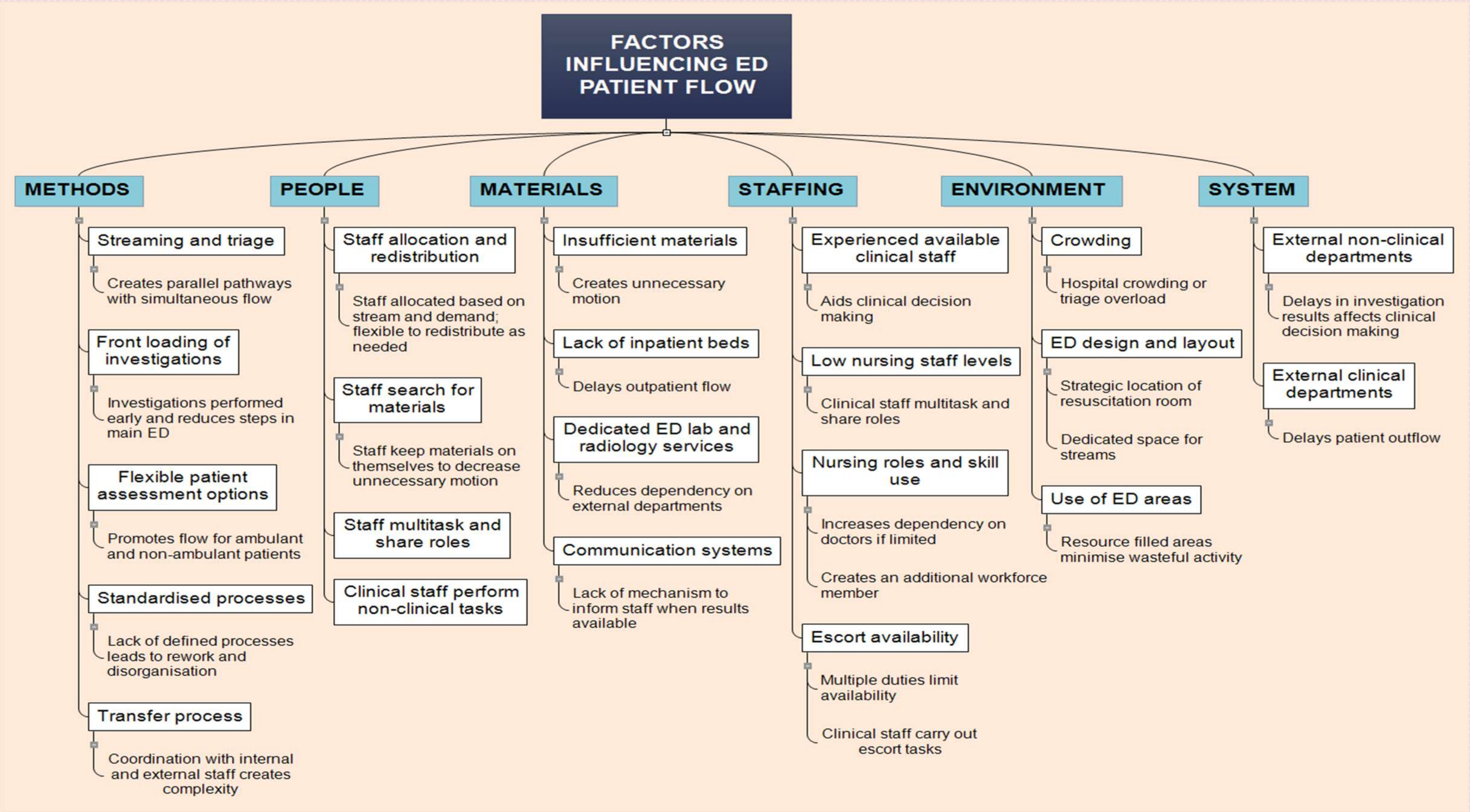


Figure 1. Conceptual model of factors influencing ED patient flow

DISCUSSION AND IMPLICATIONS

The findings may be used to strengthen the emergency care system in the local context and it may also be transferable to other settings with similar contextual and environmental factors. The conceptual model may be used to systematically examine the ED patient flow process, optimize interventions and inform policy and practice to improve patient flow. The study also suggests that factors affecting ED flow are shared across developed and developing settings. Combining this knowledge can build robust, effective systems

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