Maximization of bed utilization of ICU bed: streaming workflow of planned patient transfer from ICU to general wards & elective OT bed preparation

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Keywords:
- ICU
- Bed utilization
- Planned discharge process
- Post-op bed

Introduction
Elective operating cases that required post-operative (post-op) ICU monitoring are one of the major ICU services. Mis-mapping occurs when discharge process for planned discharge case is lengthened and Operating Theatre (OT) calling for a post-op bed at the same time. The situation is further worsen when ICU bed status is tight with long Elective OT list.

Objectives
To identify improvement areas so as to maximize the ICU bed utilization by modifying the planned discharge process and enhancing the communication between OT and ICU to accommodate for post-op bed confirmation & calling.

Methodology
Two surveys were conducted in ICU for 4 four weeks in Nov 2016. In survey 1, all the planned discharge cases were observed. The mean elapsed time (MET) for each task was recorded and the numbers of phone calls between ward & ICU were counted. In survey 2, time slot for all elective operating cases were recorded from OT calling to confirm post-op until patient arrival in ICU.

Result
In survey 1, the MET for the planned transfer process was 3hr 47min (vs the department target