



<b>PROJECT NAME</b>	
Long Wait Times	
<b>PROBLEM STATEMENT/DESCRIPTION</b>	
Long wait times in the emergency department (ED) leading to patient dissatisfaction & potential delays in care.	
<b>SIGNIFICANCE/IMPACT</b>	
Background: Recent patient feedback have highlighted that the average wait time in the ED has increased by 20% over the past 6 months.	
<b>MISSION &amp; VISION STATEMENTS</b>	
<b>Mission Statement</b> -To enhance patient care by significantly reducing wait times in the ED through innovative processes, dedicated teamwork, & a commitment to continuous improvement.	
<b>Vision Statement</b> -To create an environment where every patient receives timely, efficient, & compassionate care, setting a new standard for emergency services & patient satisfaction.	
<b>TEAM MOTTO</b>	
Quick Response, Quality Care	
<b>PRIMARY OBJECTIVES</b>	
Primary Goal: Reduce the average patient wait time in the ED by 15% within the next 3 months.	
Secondary Goal: Improve patient satisfaction scores r/t wait times by 10% within the same time frame.	
<b>PERFORMANCE ASSESSMENT</b>	
<ul style="list-style-type: none"> <li>• Wait time metrics- current avg. wait time from arrival to initial assessment/from assessment to start of treatment/from treatment to discharge/admission/transfer.</li> <li>• Use patient satisfaction surveys to focus on ED experience.</li> <li>• Assess current patient flow-utilize flow mapping.</li> <li>• Look at the staffing levels during ED peak times.</li> <li>• Assess equipment/technology/documentation/education changes that were implemented to streamline the process.</li> <li>• Utilize staff &amp; patient feedback.</li> <li>• Conduct regular audits &amp; benchmarking to compare with similar hospitals to gauge progress.</li> </ul>	
<b>SCOPE/PARAMETERS</b>	<b>TIMELINE</b>
<b>In Scope:</b> All processes r/t patient intake, triage, & initial assessment in the ED.	Planning Date/Implementation Date/ End Date: <ul style="list-style-type: none"> <li>• Initiation: Project charter developed &amp; approved (1 week).</li> </ul>

**KHA PI TEAM CHARTER 2025**



**Out of Scope:** Processes r/t inpatient care & other hospital depts.

- Planning: Specific tasks & strategies to achieve goals defined (2 weeks).
- Implementation: Project carried out (8 weeks).
- Monitoring: Project progress observed, & results documented (ongoing).
- Ending: Project ended, & summary report written (1 week).
- Sustainment: See below.

**BUDGETING**

Total Budget: \$50,000  
 Training Sessions: \$10,000  
 Data Collection Tools: \$5,000  
 Staff Overtime: \$15,000  
 Consultant Fees: \$10,000  
 Miscellaneous Expenses: \$10,000

**S.M.A.R.T. GOAL (Outcome Measure)**

(Hospital name) will reduce the average patient wait time in the ED by 15% within the next 3 months by implementing process improvements & staff training, as measured by the hospital's EHR system, staff feedback, & patient feedback surveys.

**GOAL STRATEGIES**

- Train all triage nurses on & initiate rapid triage protocols- prioritize patients based on severity of condition.
- Bed management system- to ensure allocation of beds & reduce bottleneaking.
- Enhance communication-use interdisciplinary rounding to communicate/collaborate.
- Use real-time updates on patient's location, status, & wait times to keep staff informed.
- Streamline documentation in EHR to reduce delays.
- Increase staffing at peak times.
- Keep the patient/families in the loop-use pre-arrival instructions & explanations, use ADIET and ask for patient feedback.
- Regular touchpoints with team & staff for feedback to improve process & communication.

**MEASURES (Process, Balancing, Structure)**

**Process:** Time measurements of-Average time from patient arrival to triage or average time from triage to physician/APRN/PA. The number of patients seen per hour by triage nurse (measures the workload and notes peak times.

**Outcome:** Average wait time. Percentage of patients LWBS. Patient satisfaction scores.



**MILESTONE ACHIEVEMENTS**

**w/ Dates & Comments**

Week 1: Project charter approved.

Week 3: Planning completed; specific tasks and processes defined.

Week 7: Training sessions conducted; initial feedback collected.

Week 11: Mid-project review; average wait time reduced by 10%.

Week 15: Project completion; average wait time reduced by 18%, patient satisfaction scores improved by 12%.

**STAKEHOLDERS & PROJECT TEAM MEMBERS**

Team Member Role	Stakeholder Name	Meetings held/Who Attended	Responsibility Assignment
Sponsor: Chief Operating Officer			Allocation of resources.
Team Lead: ED Director			Provides overall direction. Presents touchpoints & findings along the way to the COO, CMO, and Board.
Process Owner: ED Manager			Manages day-to-day operations & ensures project milestones are met.
Team Members: <ul style="list-style-type: none"> <li>• Triage Nurses</li> <li>• ED Physicians</li> <li>• ED frontline staff</li> <li>• ED Registration</li> <li>• Data analyst</li> <li>• Patient/families</li> </ul>			Implement changes in triage processes. Provide input on patient flow improvements. Assist with data collection & patient feedback surveys. Feedback given via surveys.

**RISKS/BARRIERS**

Risk Barrier(s)	Plan to Address



<p><b>Potential Barrier:</b> Resistance to change from staff.</p>	<p><b>Strategy:</b></p> <ul style="list-style-type: none"> <li>• Conduct training sessions &amp; involve staff in the planning process to gain buy-in &amp; ensuring that all team members understand their roles &amp; the project's objectives.</li> </ul>
<p><b>FEEDBACK INCORPORATION</b> <span style="float: right;"><b>ADJUSTMENTS w/Dates &amp; Rationale</b></span></p>	
<p>Week 7: Initial feedback from staff &amp; patients collected.</p>	<p>Adjusted triage process to include additional triage nurse during peak hours to reduce bottlenecks. Rational: Initial feedback indicated that peak hours were causing significant delays.</p>
<p>Week 11: Mid-project feedback collected.</p>	<p>Implemented a fast-track system for non-critical patients to be seen by an APRN. Rationale: Mid-project review showed that non-critical patients were contributing to overall wait times.</p>
<p><b>SUSTAINMENT PLAN</b></p>	
<ul style="list-style-type: none"> <li>• Performance Audits</li> <li>• Staff/Patient Feedback Surveys</li> <li>• Ensure ongoing commitment from leadership- continually prove proof of concept/ROI</li> <li>• Incorporation of a project champion</li> </ul>	
<p><b>EXPANSION</b></p>	
<ul style="list-style-type: none"> <li>• Identify targeted areas/departments/other hospitals in system.</li> <li>• Set goals &amp; have stakeholder engagement/Leadership commitment to expansion project.</li> <li>• Form expansion Team.</li> <li>• Use best-practice guidelines.</li> <li>• Training/education.</li> <li>• Budget &amp; adequate staffing.</li> <li>• Monitor &amp; report: Data collection.             <ul style="list-style-type: none"> <li>○ Use communication avenues to keep stakeholders, team &amp; frontline staff of progress via:                 <ul style="list-style-type: none"> <li>✓ System emails/System news blasts</li> <li>✓ Tell stories of success</li> </ul> </li> </ul> </li> </ul>	