

# Advanced Practice Provider in Triage Impact on Emergency Department Crowding Metrics

Laurie Scheid, MSN, FNP-C, ENP-C  
Vanderbilt University School of Nursing



## Introduction

Emergency department (ED) crowding is a concerning trend seen nationally and locally that negatively impacts:

- Patient morbidity and mortality
- Patient and staff satisfaction
- Cost of Care

## Problem

- Worsening trends in free-standing ED crowding metrics over past 6 months.
- High length of stay (LOS) and left without being seen metrics (LWBS)
- Current system limited interaction between providers and triage staff to facilitate front-end flow.

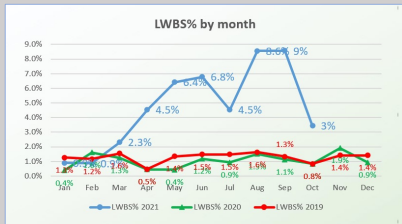


Figure 1: Left without being seen trends from 2019 to October 2021

## Aim & Objectives

### Aim:

- Positively impact ED crowding metrics utilizing a provider in triage (PIT)

### Objectives:

1. Measure impact of PIT on LWBS rate by comparing 2 weeks pre- and post-implementation LWBS rates.
2. Measure impact of PIT on LOS for discharged patients by comparing pre- and post-implementation daily median LOS.

## Methods

### Plan

- Develop front-end process
- Present evidence for change
- Daily huddle/coaching
- Increase advanced practice provider (APP) coverage

### Do

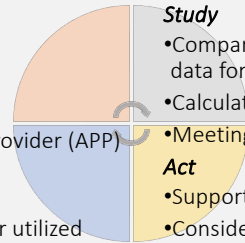
- PIT advanced practice provider utilized
- Retrospective data collection for 2 weeks

### Study

- Compared pre- and post-implementation data for each metric
- Calculate daily median LOS & LWBS rate
- Meetings to discuss project performance

### Act

- Support for adoption
- Consider implementation at other sites



## Results

### Daily Median Length of Stay (LOS) in Minutes

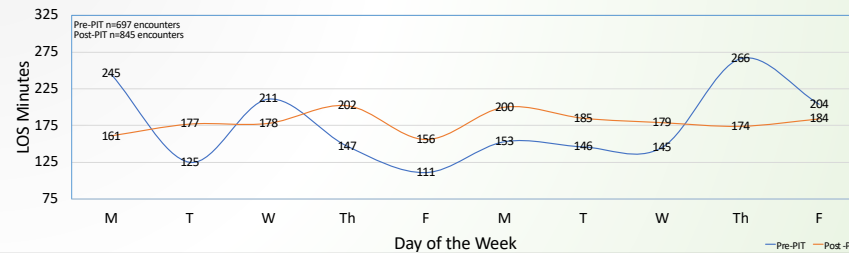


Figure 2: Pre- and post-implementation median LOS trends

### Left Without Being Seen (LWBS)

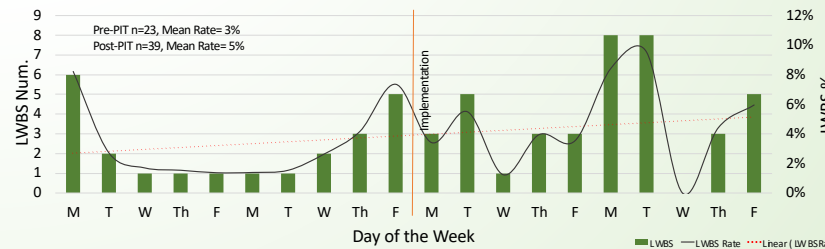


Figure 3: Pre- and post-implementation left without being seen trends.

## Implications for Practice

- Daily census averaged 15 patients higher during pilot

