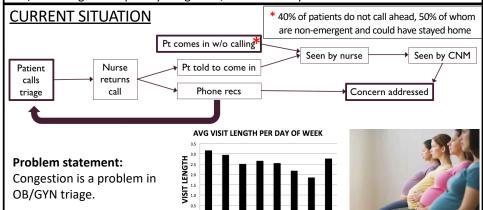
# TITLE: DECREASING CONGESTION IN OB/GYN TRIAGE

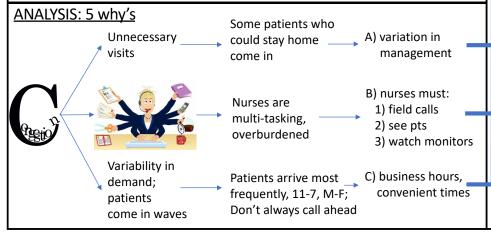
#### **BACKGROUND**

OB/GYN triage is a dedicated resource for obstetric emergencies + L&D overflow. OB/GYN triage is frequently congested, and visits may take over 2 hours.



### **GOAL**

Our goal is to decrease non-emergent visits by Increasing the percentage of patients calling ahead for triage from 60% to 80% by end of Week 5 of plan implementation.



DATE: 2/20/18 OWNER: M3 Student YY

#### **RECOMMENDATIONS**

- —A) Variation in phone management re: whether patient needs to come in Rec: create standard protocol for most common complaints (e.g. nausea)
- B) Workflow requires switch-tasking by nurses

Rec: dedicate one nurse to calls and monitoring, other to seeing pts

- C) Uneven flow of work; most pts arrive afternoon/early evening

  Rec: instruct all pts to call ahead to: 1) forestall unnecessary visits, and
  - 2) create potential to level arrival times if visit is needed, but not time critical
- D) Patient-centered care

Rec: redecorate triage waiting area to be more appealing to patients

### PLAN: Start Date March 1, 2018

Action	Week 1	Week 2	Week 3	Week 4	Week 5
YY and MG to get nurses and CNMS on board.					
YY, MH, and MJG create protocols & surveys.					
Division of labor implemented.					
"Call ahead" implemented by Ob/Gyn.					
Protocol implemented.					

YY will monitor progress to plan and report **Red/Green** status of items weekly.

## FOLLOW-UP



MJG will measure progress, and report the following data at weekly project team meetings:

- 1) % emergent and % non-emergent visits
- 2) Call ahead rates
- 3) Average visit length