“A Study on Turn Around Time for Initial Assessment of Emergency Patients by Doctors at Sri Action Balaji Medical Institute, Delhi”

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Content

Introduction

- The emergency department is responsible for providing medical care to patients who have suffered serious trauma or injury.
- An initial assessment is necessary to determine the plan of care and desired outcome, and the time taken for the assessment has a direct impact on patient outcomes.
- Sri Action Balaji Medical Institute offers thorough emergency care, and this study aims to determine how quickly doctors in the Emergency Department complete their initial assessments of patients in Triage category Yellow and triage Green .
- This study investigates the turnaround time of the initial assessment performed by doctors in the Emergency Department at Sri Action Balaji Medical Institute to improve patient outcomes and satisfaction.
- These findings may help improve outcomes for patients in the ED and the time taken for the assessment has a direct impact on patient outcomes.

Objectives

1. To assess the turnaround time for emergency department initial assessment by doctors.

2. To analyze factors contributing to initial assessment delays.

3. To propose interventions for increasing efficiency and decreasing the duration of initial assessments in emergency departments.

Methodology

- **Study Design:** Retrospective Cross Sectional Study
- **Study Duration:** 2 Months
- **Study Sample:** 300 Emergency Patients
- **Sampling Technique:** Convenience Sampling
- **Inclusion Criteria:** All Emergency admissions (Triage Category 2nd and Category 3rd) i.e. Triage Yellow and Triage Green Color .
- **Exclusion Criteria:** Those patients who require immediate resuscitation (Triage Category 1st or Red Color)

Result & Discussion

- **Objective 1: 1 To assess the turnaround time for emergency department initial assessment by doctors.**

- ❑ This study's primary goal is to evaluate how quickly clinicians complete their first evaluations of Triage 2nd and Triage 3rd category patients in emergency departments.
- ❑ The maximum period for the initial examination of emergency patients, excluding those who need rapid resuscitation, is established at 10 minutes according to hospital regulations.

- **Objective 1: 1 To assess the turnaround time for emergency department initial assessment by doctors.**

S.No	Patient's UHID	Admitting Physician's Name	The time at which the patient arrived in the emergency department (t1)	The time at which the doctor performed the initial assessment (t2)	the time frame of the assessment procedure (t3) t3= t2-t1

- **Objective 1: 1 To assess the turnaround time for emergency department initial assessment by doctors.**

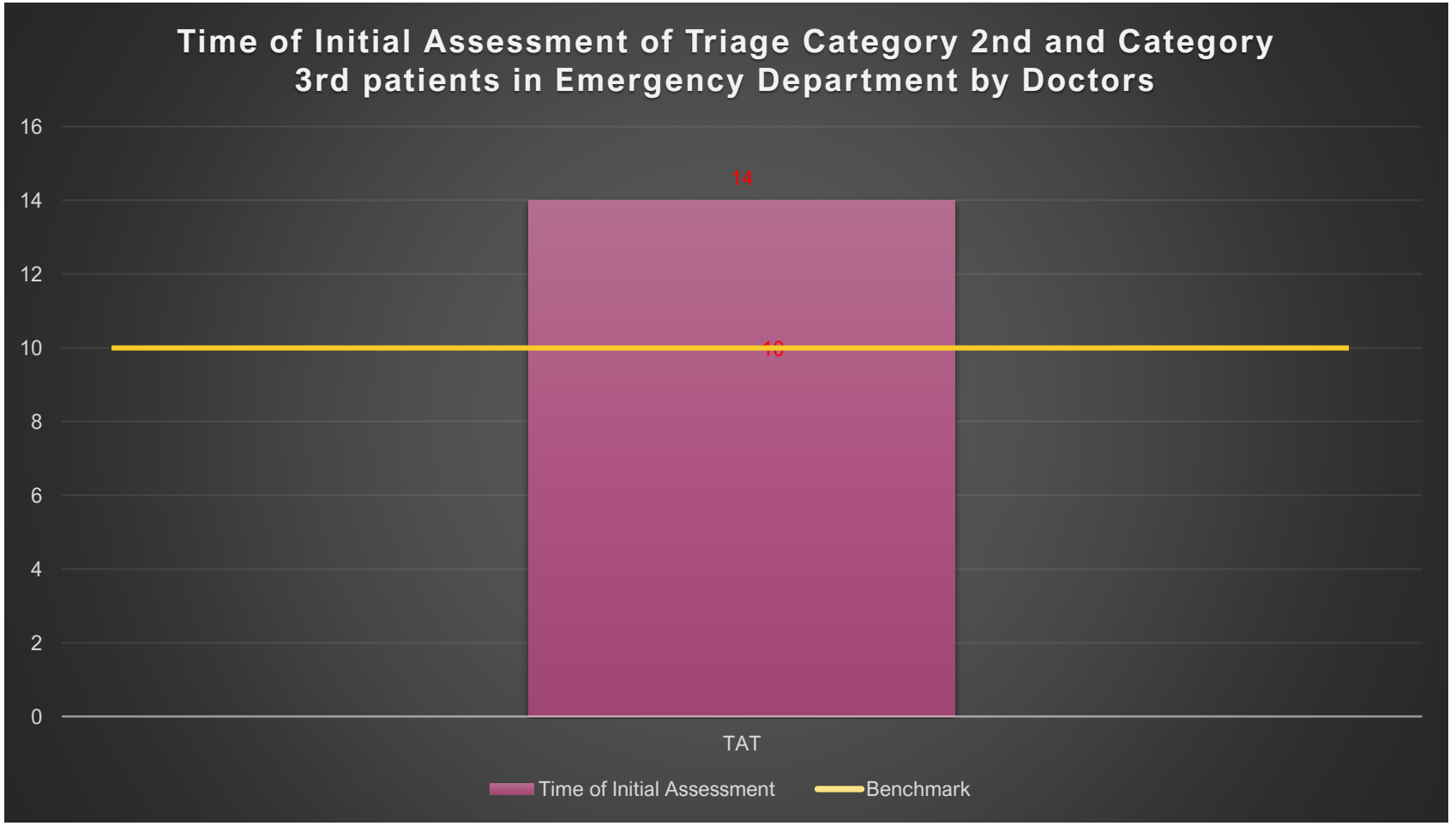


Fig : Average Turn Around Time of Initial Assessment (March)

- **Objective 1: 1 To assess the turnaround time for emergency department initial assessment by doctors.**

  - As per the gathered information and analysis, it was found that the average time of the initial assessment was **14 minutes**, which is 4 minutes more than the prescribed benchmark of 10 minutes.

  - Longer turnaround times may affect the need for fast medical care, making patients who require urgent care wait longer.

- **Objective 1: 1 To assess the turnaround time for emergency department initial assessment by doctors.**

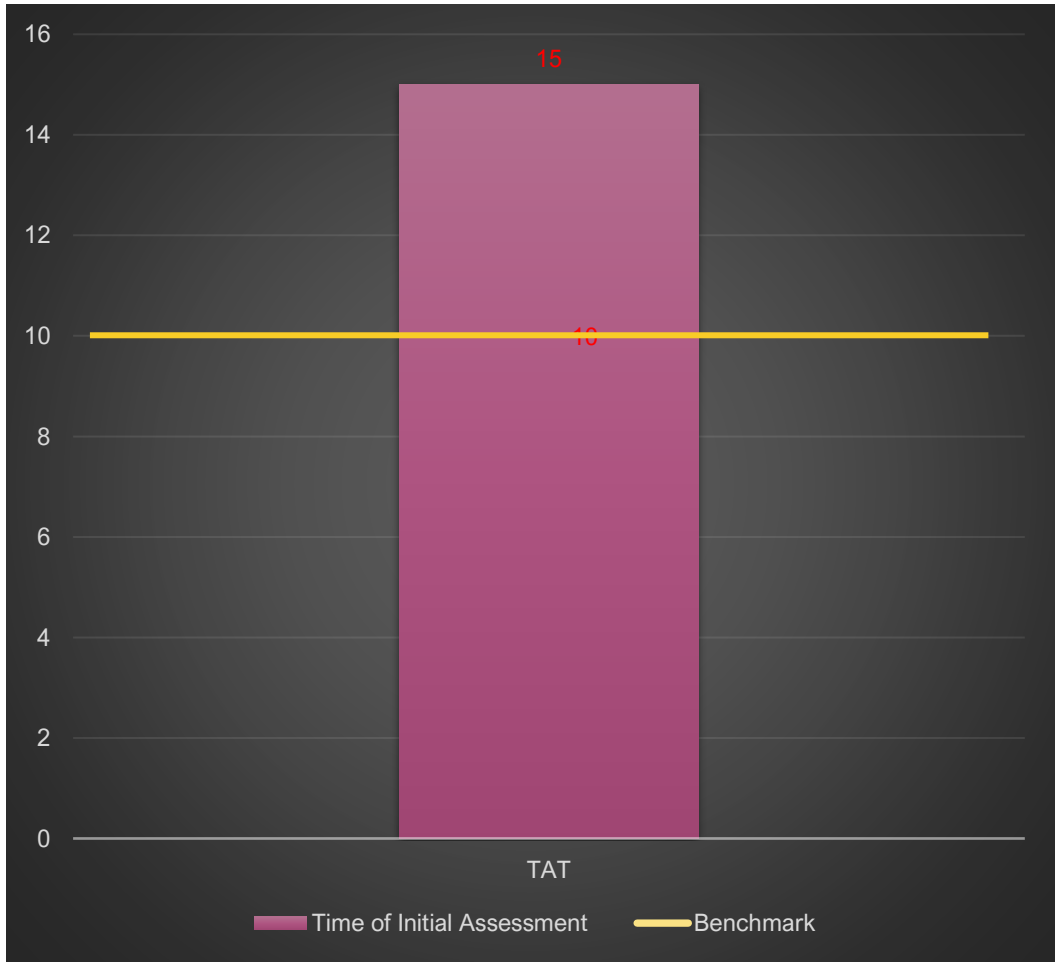


Fig: Average Turn Around Time of Initial Assessment (April)

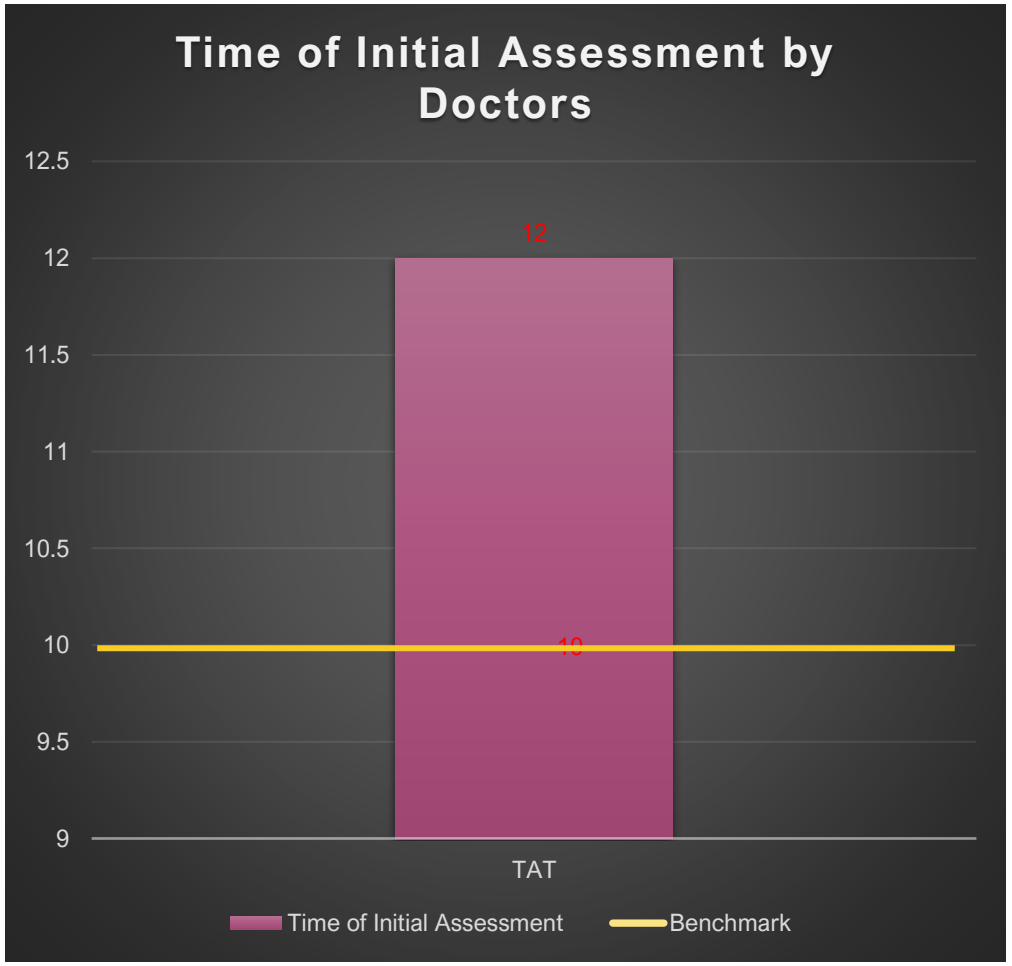


Fig: Average Turn Around Time of Initial Assessment (May)

Objective 2nd - To analyze factors contributing to initial assessment delays.

1. The arrival of the patients and their triage:

When patients are first triaged and their conditions are evaluated for severity, delays might happen. The procedure of assigning priority levels and starting the evaluation might be delayed due to issues including congestion, a high patient load, and a lack of staff.

- **There are several aspects of this procedure that might cause delays:**

a) **Overflowing of Patients:** High patient traffic or congestion in the emergency room might put a burden on the services there and delay the first assessment. It may be difficult to quickly accommodate all patients due to physical space restrictions, a lack of exam rooms, and a staffing shortage.

b) Insufficient Staffing: Delays in the initial assessment may be caused by insufficient personnel levels during peak hours or times of an increase in patient intake. Patients may have to wait longer for evaluations when there aren't enough medical personnel on hand to do so quickly.

c) Triage Precision: The turnaround time for the initial evaluation might be impacted by the precision and efficacy of the triage procedure itself. A patient may not receive the essential medical care on time if the severity of their disease is not properly determined during triage.

Objective 2nd - To analyze factors contributing to initial assessment delays.

2. Resource Availability

- Initial evaluation delays may result from a lack of key resources, including exam rooms, medical equipment, and diagnostic services. Longer patient wait times might delay doctors' examination of the patient due to a lack of resources.

3. Levels of staffing

- Initial assessments is delayed by inadequate staffing levels, especially during busy times or periods of a rise in the number of patients. The entire turnaround time may be impacted by patient wait times that are prolonged due to a lack of medical staff.

Objective 2nd - To analyze factors contributing to initial assessment delays.

3. Processes for documenting and administrating:

- Initial assessments may be delayed by protracted paperwork processes and administrative activities include gathering patient data, confirming insurance information, and filling out relevant documents. Physicians could need to spend more time on administrative tasks, which would leave less time for providing direct patient treatment.

4. Analyses and results of diagnostic tests:

- The need for diagnostic tests, such as laboratory investigations, radiographic imaging, or specialist therapies, cause delays in the initial assessment. By delaying a complete review while awaiting test results, patients' turnaround times may be prolonged.

Objective 3rd - To propose interventions for increasing efficiency and decreasing the duration of initial assessments in emergency departments.

1. **Improvements to the triage process**:

- Prioritizing evaluations may be achieved by using a designed effectively triage system that rapidly and reliably classifies patients depending on the seriousness of their conditions. This prevents delays for individuals who need urgent treatment and guarantees that individuals with more serious diseases get quick attention.
- Several tactics can be used to speed up the triage process. This comprises:

  Simple Triage Rules: Making consistent and accurate evaluations is made possible by the development of clear and thorough triage rules that specify the standards for each class, such as emerging, urgent, and non-urgent. These recommendations ought to take the emergency department's particular requirements and goals into account.

Objective 3rd - To propose interventions for increasing efficiency and decreasing the duration of initial assessments in emergency departments.

- **Periodic Triage Reviews:** Regular triage audits assist to discover opportunities for improvement and to make sure that defined standards are being followed. The precision of triage classification may be evaluated, any delays or obstacles in the process can be found, and comments for ongoing quality improvement can be given.

2. Maximizing staffing:

- Assessment delays can be minimized by ensuring enough personnel and a proper distribution of medical specialists across the emergency room.
- This might entail keeping an eye on trends in patient load, altering staff schedules to coincide with busy times, and thinking about using more support workers or advanced practice clinicians to help with initial evaluations.

Objective 3rd - To propose interventions for increasing efficiency and decreasing the duration of initial assessments in emergency departments.

3. **Assessment protocols that are standardized:**

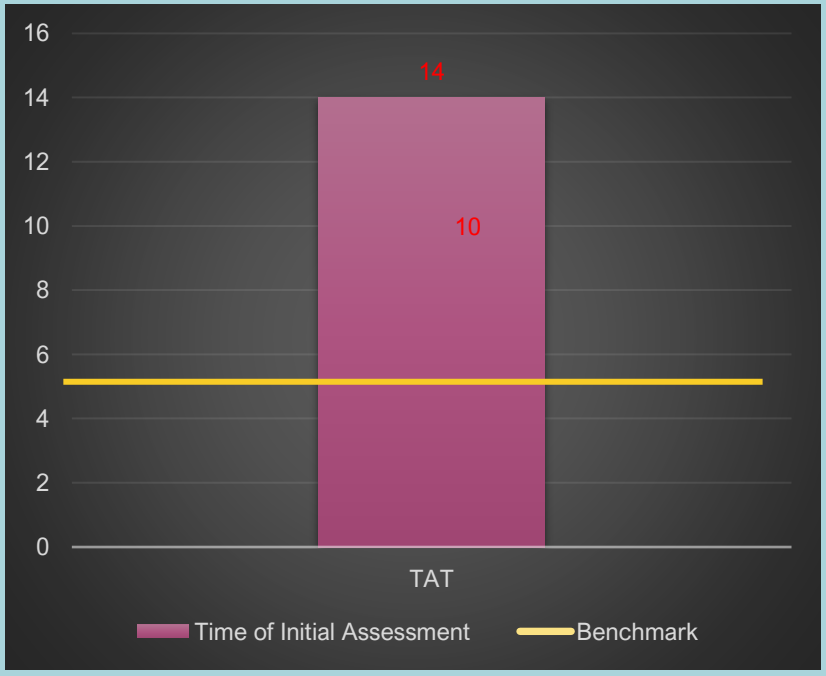
- By being created and used, standardized evaluation techniques can increase output and reduce variability in initial assessments. These processes can provide precise directions for diagnostic tests and suggestions, clarify the important components of assessments, and expedite the information-gathering process. Standard processes ensure that all necessary actions are carried out quickly and consistently.

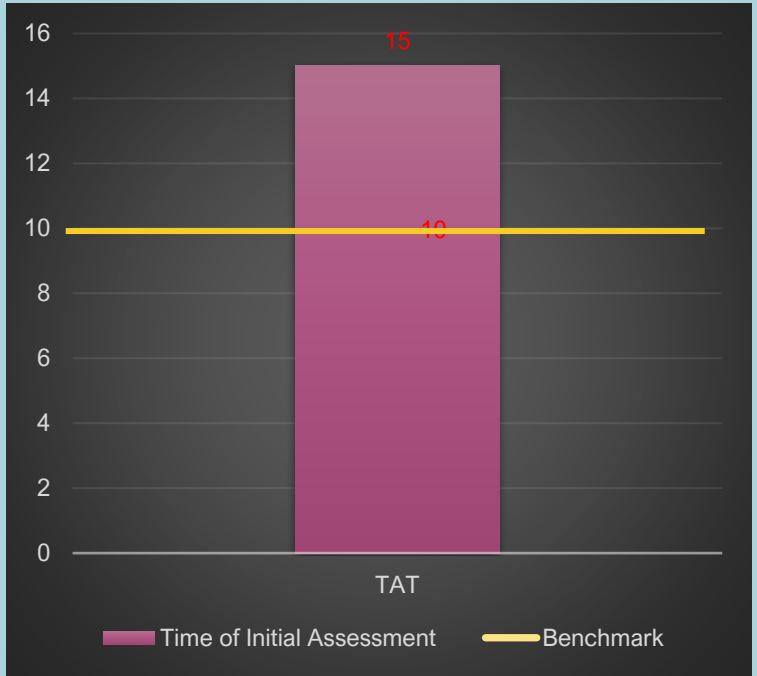
4. **Consistent Quality Enhancement**:

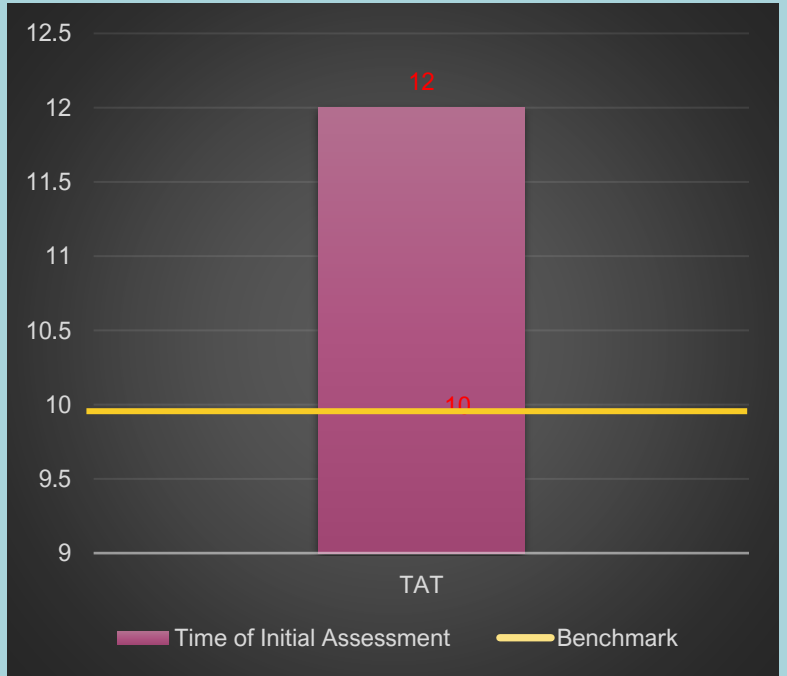
-]The initial assessment approach may be made more efficient by identifying bottlenecks and potential improvement areas by creating a culture of continual quality improvement. Frequent assessment of performance, analysis of data, and feedback systems can identify areas where processes can be improved, system inefficiencies can be fixed, and evaluation procedures can be improved.

Conclusion

- The intent of the study, "A Study on Time Taken for Initial Assessment of Emergency Patients by Doctors at Sri Action Balaji Medical Institute," was to measure the length of time medical officers took to evaluate inpatients as well as the causes that caused delays.
- The hospital's maximum allowable time for non-resuscitation cases was 10 minutes, however the typical turnaround time for initial assessment by doctors in the emergency department was determined to be 14 minutes.

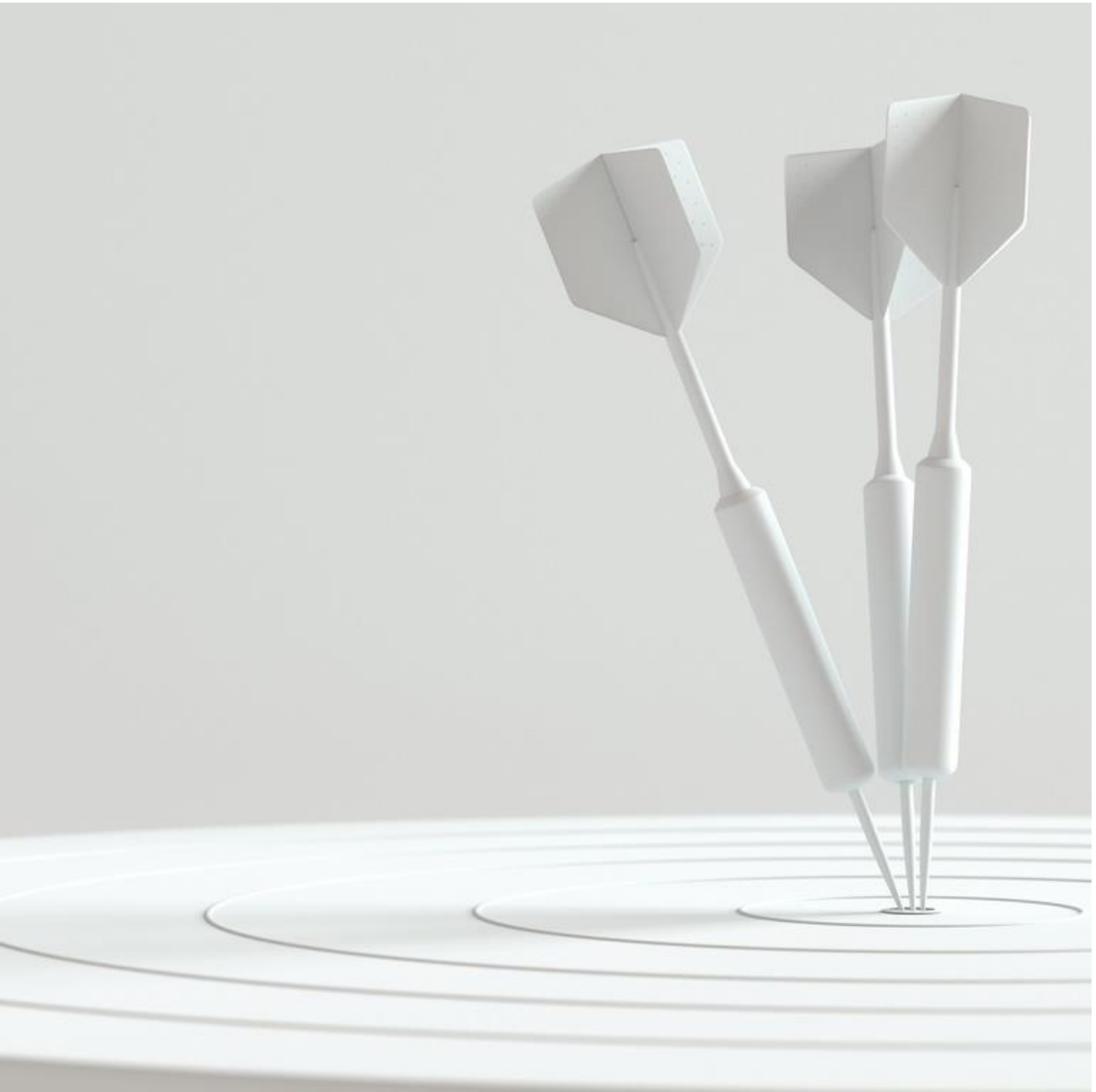






Conclusion

- The study emphasizes the need of resolving the identified causes of initial assessment delays. The emergency department may increase its effectiveness and shorten the turnaround time for initial assessment by putting in place focused interventions.
- The initial assessment approach must be optimized by effective resource allocation, suitable workforce levels, streamlined administrative and documentation procedures, and open lines of communication.
- The uniformity and efficacy of initial assessments may be improved by the use of standard assessment methods and initiatives for ongoing quality improvement, which will improve the results for patients and overall satisfaction. The results highlight the value of continued training and education for health care providers to improve their abilities and effectiveness in doing initial evaluations. Hospital may further streamline and hasten the initial assessment process by taking a patient-centered strategy and utilizing technological solutions, such as medical records that are electronic and communication platforms.



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