Below is the content that will appear in the VITAL2015 poster compendium and on your VITAL2015 poster. Please review and **use track changes** to make any edits or comments, as well as to address any questions or comments from America’s Essential Hospitals staff.   
  
America’s Essential Hospitals staff will create and print your poster for you. You will receive a pdf of your poster by April 1 for final approval.

**Return your review and any accompanying materials to** [**Kristin Sinko**](mailto:ksinko@essentialhospitals.org) **no later than 5 pm ET, Friday, March 20.**Compendium abstract: **Harbor-UCLA Medical System**

**Patient Flow Intervention**

Patient flow through the emergency department (ED) is a complex and important hospital management issue. Lack of available monitored beds in other departments can force admitted patients to remain in the hospital’s ED longer than necessary. To reduce the time patients remained unnecessarily in the ED, Harbor-UCLA Medical System launched a process to assess inpatient bed use with the goal of freeing up space for ED patients.

As part of the intervention, monitored bed coordinators (MBCs) evaluated patients in step-down unit beds to determine whether they could be transferred to a less-intensive level of care. MBCs discussed possible transfers with supervising resident physicians, who could authorize the moves. During the intervention, MBCs evaluated more than 7,000 patients, made more than 5,400 contacts with physicians, and transferred more than 2,000 patients. The hospital noticed a 30 percent – or 100 minute – decrease in the amount of time patients spent in the emergency department due to increased availability of inpatient beds.

Poster content:  
**Harbor-UCLA Medical Center**

**Patient Flow Intervention**

**Overview**

To reduce the length of time patients remained unnecessarily in the emergency department (ED), Harbor-UCLA Medical Center launched a process to assess inpatient bed use with the goal of freeing up space for ED patients. The intervention used monitored bed coordinators (MBCs) to audit all inpatient step-down unit beds to determine whether those patients could be safely transferred to a less-intensive level of care.

**Premise/Problem**

Patient flow through the ED is a complex and critical hospital management issue and a lack of available monitored beds in other departments can force admitted patients to remain in the hospital’s ED longer than necessary.

**Methodology**

**Intervention/Innovation**

MBCs audited all inpatient step-down unit beds to determine the appropriateness of the level of care. Patients who were not appropriately kept in the ED were flagged by MBCs, who discussed potential transfers with supervising resident physicians.

**Success/Outcomes**

During the intervention, MBCs evaluated more than 7,000 patients, made more than 5,400 contacts with physicians, and downgraded more than 2,000 patients. The hospital noticed a 30 percent – or 100 minute – decrease in the amount of time patients spent in the ED.