

Improved Arrangements in Bed Waiting Time by the Team Leader Mode

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ABSTRACT

According a 2011 outpatient survey on hospital admission at our hospital there was 59.5% overtime in waiting for hospital admission and arrangement of ward beds and a 66.9% patient satisfaction rate for the admission process. Therefore, a team was established to create a communication strategy that could lower the waiting time for hospital admission. The team found that the reasons for the prolonged waiting time were a lack of clear priority for ward beds, inability to control the number of empty beds available and the number of patients being admitted, and a lack of set time for patients to be discharged and admitted. We established a regulation system that set new rules for admission priority and used a computer-aid program to pre-schedule discharge and admission times, enabling us to better facilitate control and regulation of the number of ward beds, The delay time for hospital admission dropped to 7.7% and patient satisfaction rose to 85.3%. The team also utilized communication and cooperation, standardized group strategies and a smooth admission process to ensure patient safety. We suggest extending this strategy to other medical services to improve the overall medical quality and efficiency.

Key words : Team leadership model, Waiting time, Patient satisfaction

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運用團隊領導模式改善排床等候時間

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摘 要

統計門診2011年預住院等候時間，安排床位逾時率達59.5%，病患對辦理住院滿意度僅66.9%。故引發小組藉由運用團隊領導溝通模式，降低逾時率之專案。經調查發現有未明定當日住院訂床優先順序、未能掌握空床數及預住院名單、未規範病患離院及預住院報到時間等原因，以致造成逾時。透過擬定控制與簽立床位制度規範、規劃電腦預約出院及住院開單制度、建置電腦預約出院及住院開單系統、擬定住院適應症優先順序等改善措施。安排床位逾時率降至7.7%，病患對辦理住院滿意度升至85.3%。團隊透過溝通協調，群策群力對策標準化，順暢流程更保障病患安全，讓病患擁有及時就醫權利。建議平行推展至其他照護流程，提升醫療服務品質及效率。

關鍵詞：團隊領導模式、等候時間、住院滿意度

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接受日期：2013年2月19日