ACUTE BED UTILIZATION
Primary initiatives for 2017-2018 are in progress and remain on track. The components of this work include:

- **Provincial Bed Coordinator**
- **CIS Bed Board**
- **Provincial Overcapacity Policy**

**Provincial Bed Coordinator**
Amanda Clinton, BScN, RN has assumed the role of Provincial Bed Coordinator for Health PEI. This is a new position with responsibility for providing expert strategic and operational planning, analysis and direction with respect to bed management practices. Amanda strongly believes that receiving the right care, in the right place, by the right provider, for the right duration of time along with good communication and collaboration with care providers and staff is essential for both a positive patient experience and improved wellness for Islanders.

Amanda completed her Bachelor’s of Science in Nursing at the University of Prince Edward at the honors level, and has a background practicing in intensive and critical care nursing. She has held the position of Clinical Nurse Educator in Medicine, Orthopedic and Oncology units at the Queen Elizabeth Hospital. A strong advocate for continuing education, Amanda actively promotes continued professional development and learning. Her advanced training in critical care, medical/surgical and oncology nursing practice will benefit this new role.

Since coming to this position in late February, Amanda has already met with many of the hospital leaders and clinical staff involved with bed coordination and patient flow. She is looking forward to growing relationships and collaborating with health care providers and partners to improve patient flow across the province.

**CIS Bed Board**
The functionality of the bed board in CIS has been enhanced to serve as the primary acute bed management tool and principle source of demand and supply information for hospital beds. Validation of the bed board and development of training and reporting processes are being prepared and planned for delivery and implementation throughout Apr-June (Q1, 2018-19). A launch is planned for late spring to enable leaders and clinical staff to view and ask questions about this application and its use.

**Provincial Overcapacity Policy**
Research and consultation activities have been completed for the provincial overcapacity policy. Work continues on finalizing the policy and developing ‘trigger’ points with automated notification and accountability reporting with respect to hospital and emergency department capacities. The intent is for initial policy implementation for a one year period followed by robust evaluation of its effectiveness, and resolution of any outstanding challenges.
EMERGENCY DEPT TO INPATIENT FLOW

During the September 2017 review of Health PEI, the Accreditation Canada Required Organizational Practice (ROP) of Client Flow was ‘unmet’. The goal of this ROP is to improve Client Flow throughout the organization so that emergency department overcrowding is mitigated. The ROP stipulates that targets are set, interventions are identified and implemented, and data is used to measure progress against targets. Work is underway at PCH and planned at QEH to identify improvement opportunities and work toward specific targets relating to patient movement. The new Provincial Overcapacity policy fulfills another component of this ROP in that it will clearly outline over-capacity beds/spaces and establish priorities and conditions under which each bed/space should be utilized.

PROJECT REPORTS

Ten (10) of Twenty (20) projects submitted were accepted for supports during FY2017-18. Two of these initiatives are highlighted below:

PCH EDD Utilization Project

Prince County Hospital - Project Leads:
Dr. Salamoun, Medical Director
Kelley Wright, Director of Nursing
Marla Simmons, Clinical Informatics Lead

Project Start: September 2017

The Prince County Hospital (PCH) Expected Date of Discharge (EDD) project has led to significant improvement in EDD utilization by physicians. The team developed and improved processes, tools and communication with physicians and nursing units, and presented monthly physician and unit-specific reports to update on progress relative to their peers. The team’s efforts resulted in the hospital achieving their 75% EDD utilization target in November 2017.

QEH ‘On the Clock’ Project

Queen Elizabeth Hospital - Project Leads:
Mary Harris, Director of Nursing
Debbie Flood-Vickerson, Associate Director of Nursing
Celie Walsh-Gallison, Patient Flow Coordinator

Project Start: October 2017

The primary focus of the ‘On the Clock’ project at the Queen Elizabeth Hospital is to discharge patients by 11:00am; an associated goal is to increase EDD utilization by physicians to support earlier patient discharge. As part of this initiative, EDD utilization by physicians at the hospital has increased from 46% in September 2017 to 77% in February 2018. This project is planned to spread from Units 1, 2 and 3, to include additional physician groups and in-patient clinical care units.

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