### **Baptist Health South Florida**

### From the SelectedWorks of Sandra Bastidas

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### Get in or Get out: Implementation of an observation unit in a community hospital

Sandra Bastidas, West Kendall Baptist Hospital Olivia White, West Kendall Baptist Hospital Carmen Avila-Quintana, West Kendall Baptist Hospital



# "Get in or Get out!"

# Implementation of an Observation Unit in a Community Hospital

Sandra Bastidas, BSN,RN-BC, Olivia White, BSN, RN, Carmen Avila-Quintana, BSN,CMSRN

### Problem

Observation care allows practitioners time to decide whether the patient meets criteria from inpatient services or if they can be discharged. According to different regulations, observation status should be within 48 hours. At West Kendall Baptist Hospital (WKBH) the length of stay (LOS) of patients in the observation unit was between 38-42 hours before a decision was made to admit or discharge the patients. A pilot project was created to reduce patient's LOS to a target goal of 24 hours while still providing the best and safest treatments to patients.

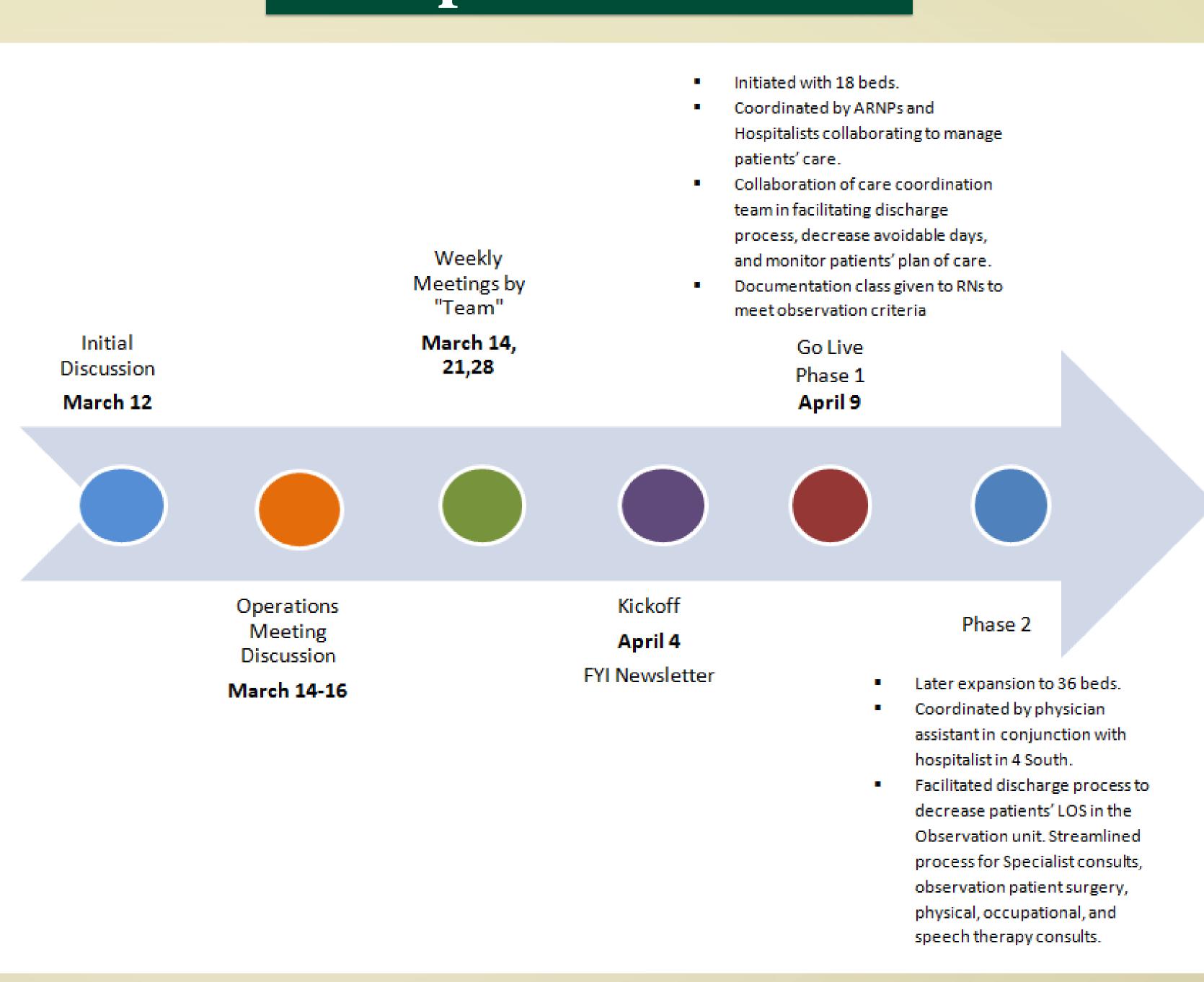
# Population

Patients admitted for observation with an age range of 18 years and above. Diverse cultural backgrounds as well as different diagnoses.



# West Kendall Baptist Hospital BAPTIST HEALTH SOUTH FLORIDA

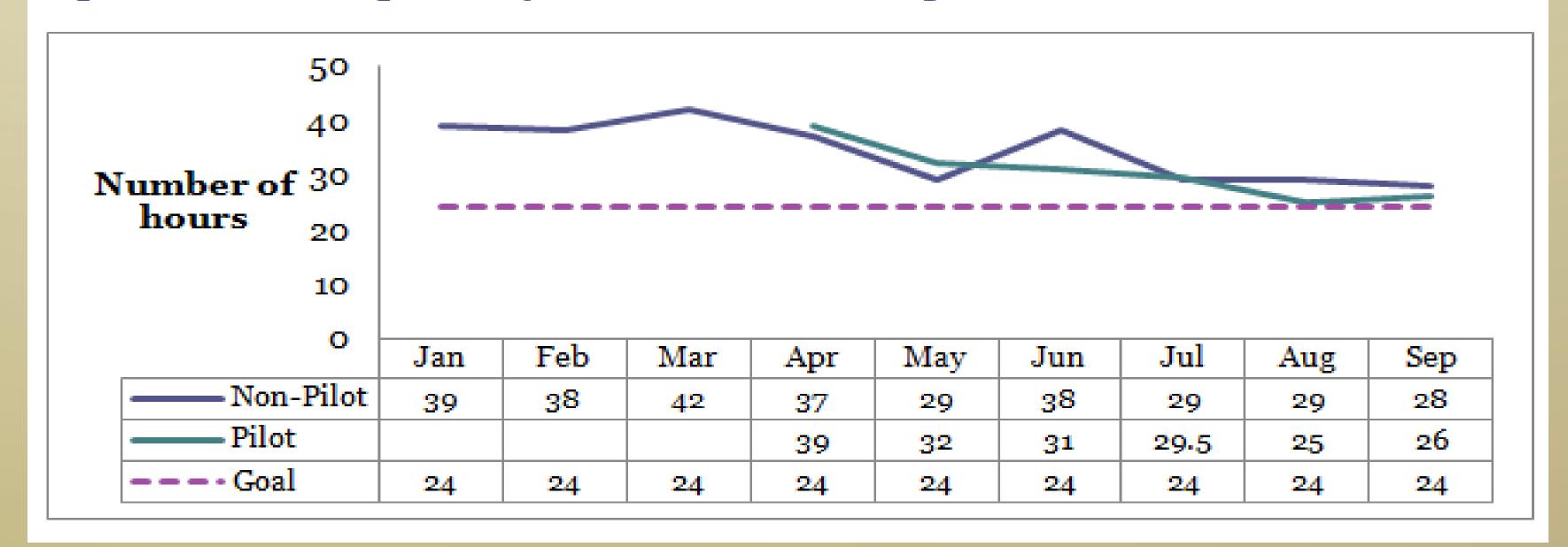
## Implementation



# Figure 1: Comparison of length of stay

Length of stay (LOS)

Figure 6: Median length of stay (hours) of observation patients



## Outcomes

After the implementation of the pilot project a significant decrease in the patient's LOS was noted. Prior to implementation LOS average 40 hours. Post implementation the LOS decreased to an averaged of 29 hours from May 2012 to September 2012 (see Figure 1).

### Conclusion

The observation unit was successful in reducing and sustaining the reduction in patient's LOS. This was accomplished as a result of collaborative inter-professional approach sustained throughout the pilot project.



### References

Centers for Medicare Services. (2014). Retrieved from http://www.cms.gov/Regulations-and-Guidance/ Transmittals/downloads/R2282CP.pdf

Ross, M.A., Hoekenberry, J.M., Mutter, R., Barrett, M., Wheatley, M., & Pitts, S.R. (2013). Protocol driven emergency department observation units offer savings, short stays, and reduced admissions. *Health Affairs*, 32(12), 2149-2156.