
CONFERENCE ABSTRACT

Their safety first: An app to reduce waiting time due to derivations in Emergencies

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Problems: in Emergency Departments can be addressed viewing them as part of larger health and social systems. Policies based on information sharing and integrated attention are systematically proving to be effective.

The problem of long waiting times in Emergency departments is general. For sure, they create anxiety and dissatisfaction in the patients and their families. More importantly, it is known that every increase in waiting time also increases the risks for the patients and threatens their safety. Finally, a patient in waiting often is using resources (boxes, beds) that other patients need to use, therefore increasing waiting times for other patients as well.

One point where waiting times and the associated risks can be reduced is acting on the final leg of the assistance process at Emergencies, where it meets other sanitary and sociosanitary levels: Namely, when the decision has been made to send the patient to an intermediate care bed in a sociosanitary center. The process involves coordination among the two centers (today, usually done by phone or email, or even by inappropriate apps such as Whatsapp). It is long and error prone process, takes up a good fraction of some of the involved professional times and creates stress, both for them and the patients.

Our bed marketplace app MINT allows sociosanitary centers to publish their bed availability, and makes it easier for clinicians to find appropriate beds and reserve them. More precisely, one center can publish offers indicating number of beds of different kinds, features such as isolation, and time of availability, at their convenience. The requesting center can either select with a few clicks among the available offers from its network of assistential partners, or create a brand new request for a bed if none with the required characteristics is in offer. Both ends receive notifications in their smartphones when outstanding requests exist, and when one has been accepted, rejected or modified.

This results in shorter waiting times, lower error rates, and less time spent in bureaucracy and paperwork by staff. Also, patients and their families can be informed sooner and directly, reducing uncertainty and anxiety.

Although there will always be special cases which will require phone calls, the goal is that the large majority (up to 80%) of all derivations are handled smoothly via the app. This should result in a huge savings in time by the professionals in charge. An additional advantage of the immediateness is that it is now possible to involve the patients and their families: The choice of destination center, when several options are available, can be made jointly thanks to the app, which is much harder or slower with current methods.

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Potential barriers are technological (centers must provide smartphones and wi-fi) and organizational (staff has to learn to trust the system, and gradually drop paper).

The system is currently under test at a hospital in Barcelona, with another one joining soon the experience. Results, with quantification, will be available by the time of presentation.

Keywords: intermediate care; care transitions; smartphone app; marketplace; time reduction
