

ANALYSIS ACTIVITY

STUDENT INFO:

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Waiting time in Emergency Department (ED) is determined by triage, an assessment that determines the severity of patient's case. However, waiting time in ED should not exceed one hour. Within 20 – 30 minutes from check-in, the patient must be examined triaged. This analysis aims to identify the causes of prolonged waiting times in ED at X hospital and suggests a number of solutions to ensure timely care.

SCOPE

The analysis investigates a problem in the performance of a group of 15 Emergency Department nurses and distributed across 3 shifts (5 staff per shift). They are directly responsible for initial patient intake and early-stage care. Their responsibilities include screening patients, recording their medical data, doing initial vital sign diagnosis, and prioritizing their admission to the emergency doctors accordingly.

SITUATION

Actual:

Hospital beneficiaries complain about long waiting hours. After arriving at the ED, a patient has to wait for up to 4 hours before being attended to leading to dissatisfaction and medical complications.

Desired:

When arriving at the ED, a patient must be triaged and admitted in a reasonable time that does not exceed 30 minutes.

Gap:

Waiting time in ED must not exceed 40 minutes. However, patients arriving at X hospital ED have to wait for up to 4 hours. The patients wait up to 7 times longer than the desired time.

CAUSE ANALYSIS

Potential causes of the problem:

1. Knowledge & skills:

Staff received limited triage training for high-volume situations, which lead to triage process takes longer than average time.

2. Motivation:

Absence of incentives, overload, and lack of recognition lowered staff morals.

3. ED understaffed:

Each shift has 5 staff regardless of patient numbers, which may cause overload.

4. Management issues:

Handover process being inefficient because of limited cross-shift communication. This might lead to redundancy in some processes and extended wait time.

RECOMMENDATIONS

The table below suggests solutions to the problem with the number of cause each solution addresses:

Category	Solution	Cause addressed
Instructional	Providing rapid triage training to nurses, focusing on prioritization during high inflow.	1
Intervention	Communication and handover skills training to ensure efficient cross-shift handover.	4
Non-instructional	Increase staff number during peak hours to avoid overload.	3
Intervention	Digitize patient intake documentation and triage through AI.	2, 3
	Develop a recognition program.	2
	Regular review of staff needs, patient rates, and system.	2, 3