

The Hospitalization Preparation Service Center in Taiwan promotes patient-centered self-service hospitalization measures to reduce bedwaiting times and alleviate the burden on nursing staff

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Background

Background-Extended waits at inpatient prep center lead to declining patient health, heightened family anxiety, reduced satisfaction, and increased nurse stress, impacting service quality and doctor-patient relationships. Purpose-An efficient preparation team reduces the nursing workload, ensuring patients receive timely care.

Methods

In 2023, the prep team introduces patient-centered self-admission: appointment scheduling, mobile app usage, online guides, and patient-directed ward entry. Criteria include: prior hospitalization, patient consent, lucidity, mobility, caregivers' presence, induction of labor, and family agreement. Patients must contact ward staff before arrival to coordinate check-in times.

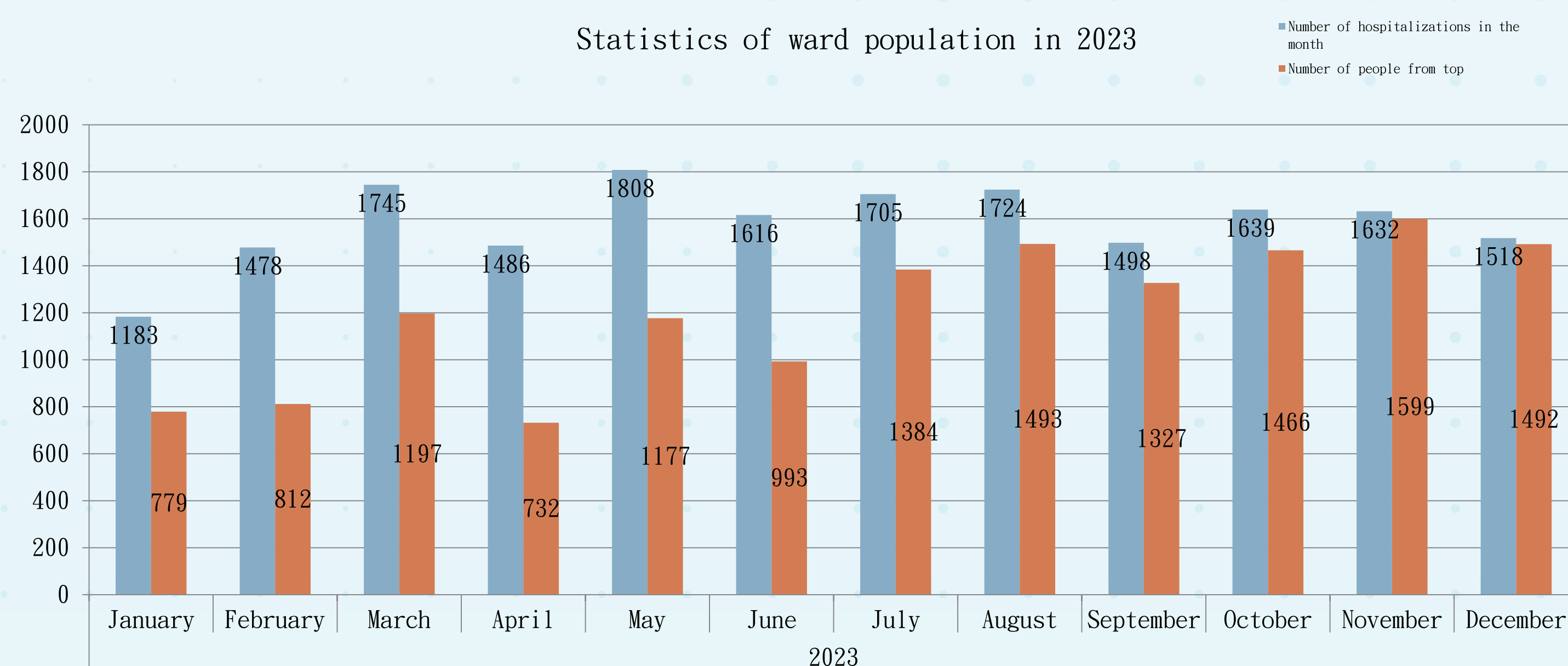
Admission Preparation Center Criteria for Hospitalized Patients to Move to the Ward

condition	Conditions for patients to go to the ward on their own	Conditions from conveyor belt to ward
1	Not the first hospitalization The patient agrees to go on his own	first hospitalization
2	The patient agrees to go on his own	No family members accompany the patient
3	Conscious No life support equipment pipelines used People who can walk on their own	You can go there by yourself
4	Nursing home residents accompanied by caregivers	There are family members accompanying the patient, but the patient is elderly, has limited mobility, is a third-tube patient, is a young child, has labor symptoms, and is pregnant with tocolysis.
5	Pregnant woman admitted to hospital for labor induction	Pregnant woman admitted to hospital for labor induction
6	Young children are accompanied by their family members, and those who agree to go by themselves	first hospitalization

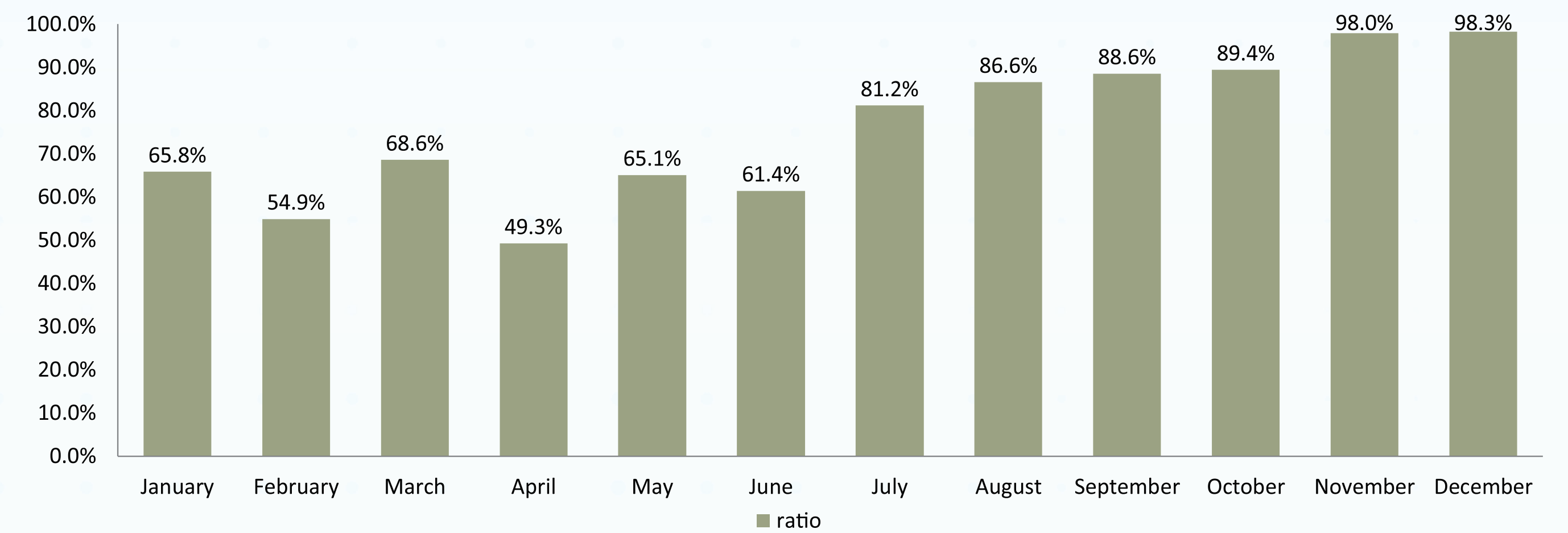
Results

“Analysis” : 1. Statistical analysis of patient bed waiting times in each ward. 2. Evaluation and review of processes. 3. Deployment of nursing staff focusing on self-admission criteria. “Intervention conditions” : 1. Physical bed wait <30 mins. 2. Virtual bed wait <60 mins. “Findings” : 1.The ratio of hospitalized patients being admitted to the wards increased from 65.8% to 98.3%. 2.Virtual bed delay decreased from 75% to 67.4%, with the average wait time dropping from 1h 43m to 1h 27m. 3.Patient wait time reduced to < 15 mins.

Statistics of ward population in 2023



years	2023											
month	January	February	March	April	May	June	July	August	September	October	November	December
Number of hospitalizations in the month	1183	1478	1745	1486	1808	1616	1705	1724	1498	1639	1632	1518
Number of people from top	779	812	1197	732	1177	993	1384	1493	1327	1466	1599	1492
ratio	65.8%	54.9%	68.6%	49.3%	65.1%	61.4%	81.2%	86.6%	88.6%	89.4%	98.0%	98.3%
entity	1147	1393	1642	1405	1732	1499	1591	1622	1445	1582	1536	1432
virtual	36	85	103	81	76	117	114	102	53	57	96	86



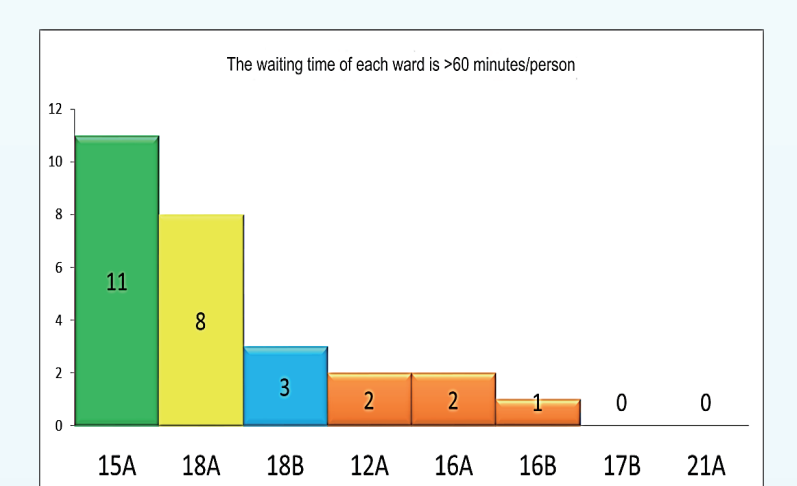
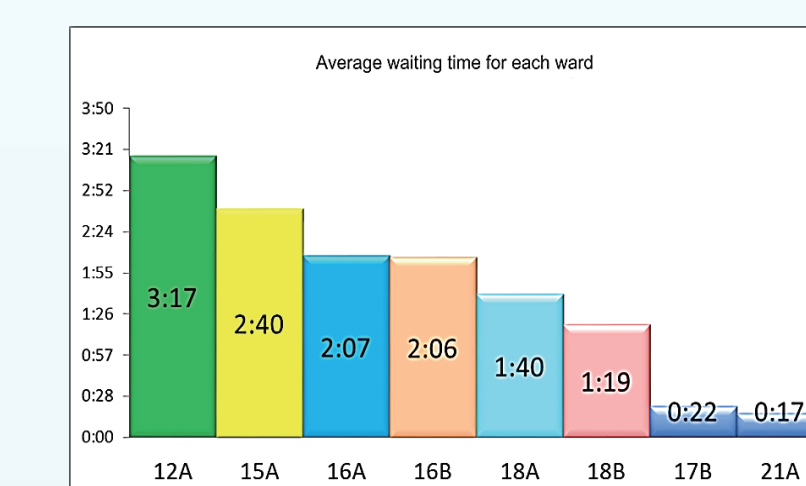
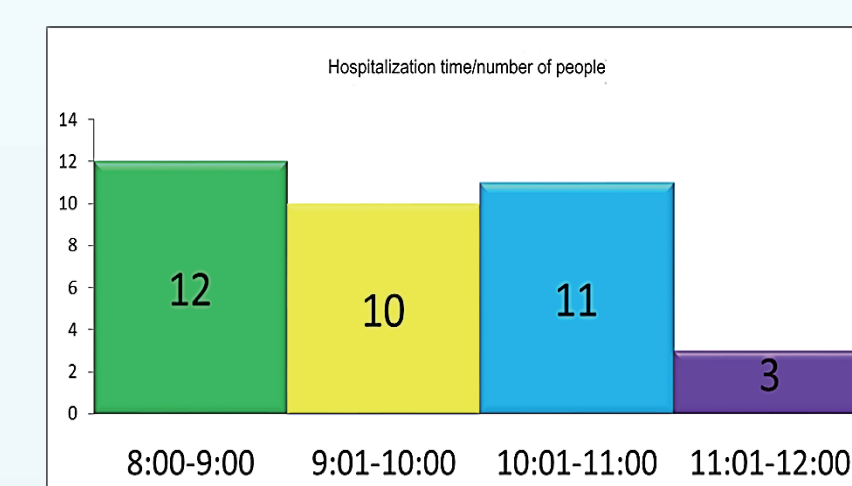
1. The ratio of hospitalized patients being admitted to the wards increased from 65.8% to 98.3%.

2023 Virtual Bed Statistics

virtual bed	January	February	March	April	May	June
Total number of hospitalizations	36 people	85 people	103 people	81 people	76 people	117 people
>60 minutes Number of people	27 people	66 people	79 people	62 people	50 people	91 people
Latency rate	75 %	77.7 %	76.7 %	76.6 %	65.8 %	77.8 %
average wait time	1 Hour 43 minutes	1 Hour 52 minutes	1 Hour 44 minutes	1 Hour 57 minutes	1 Hour 32 minutes	1 Hour 59 minutes

Total number of hospitalizations	July	August	September	October	November	December
>60 minutes Number of people	114 people	102 people	53 people	57 people	96 people	86 people
Latency rate	84 people	67 people	43 people	39 people	68 people	58 people
average wait time	73.7 %	65.7 %	81.1 %	68.4 %	70.8 %	67.4 %
Total number of hospitalizations	1 Hour 38 minutes	1 Hour 29 minutes	1 Hour 56 minutes	1 Hour 40 minutes	1 Hour 56 minutes	1 Hour 27 minutes

2.Virtual bed delay decreased from 75% to 67.4%, with the average wait time dropping from 1h 43m to 1h 27m.



3.Patient wait time reduced to < 15 mins.

Conclusions

Thorough analysis and cross-unit cooperation expedite patient admissions. Meticulous planning and implementation reduce waiting times, optimize bed utilization, and enhance patient services, ultimately improving nursing efficiency.

Relevance to HPH

Relevance to Health Promotion Hospitals and Health Services HPH: Prep center integrates admissions, collaborates with hospitals. Form team, plan, promote self-admission, integrate, evaluate. Enhances patient experience. Relationship to conference theme : Prep center empowers, enhances satisfaction, improves efficiency. Relationship with one of the Health Promotion Hospitals and Health Services HPH Task Force : Interdepartmental cooperation vital for project execution. Prep center prioritizes patient-centered measures, enhancing healthcare quality.

Keywords

Nursing resources 、nursing staff 、 bed availability.