

Improving the Efficiency of ED Stock Rooms

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BACKGROUND

The ED has multiple stock rooms across all departments (1W and ART ED), all of which are organized differently.

Residents spend a significant amount of time searching for items which is both frustrating and creates delays in patient care.

Addressing this frustration through PDSA cycles will align with both the **MUSC People and Innovation** pillars.

AIM STATEMENT

Reduce resident time spent looking for stock room items by 20% and improve resident satisfaction by 1 point on Likert scale by December 31, 2021.

MUSC Pillar: People, Innovation

METHODS/INTERVENTION

Label stock room items numerically and create a searchable itemized list. Additionally, rearrange items to be located near like items.

Surveyed residents pre- and postintervention regarding time spent and satisfaction with process.

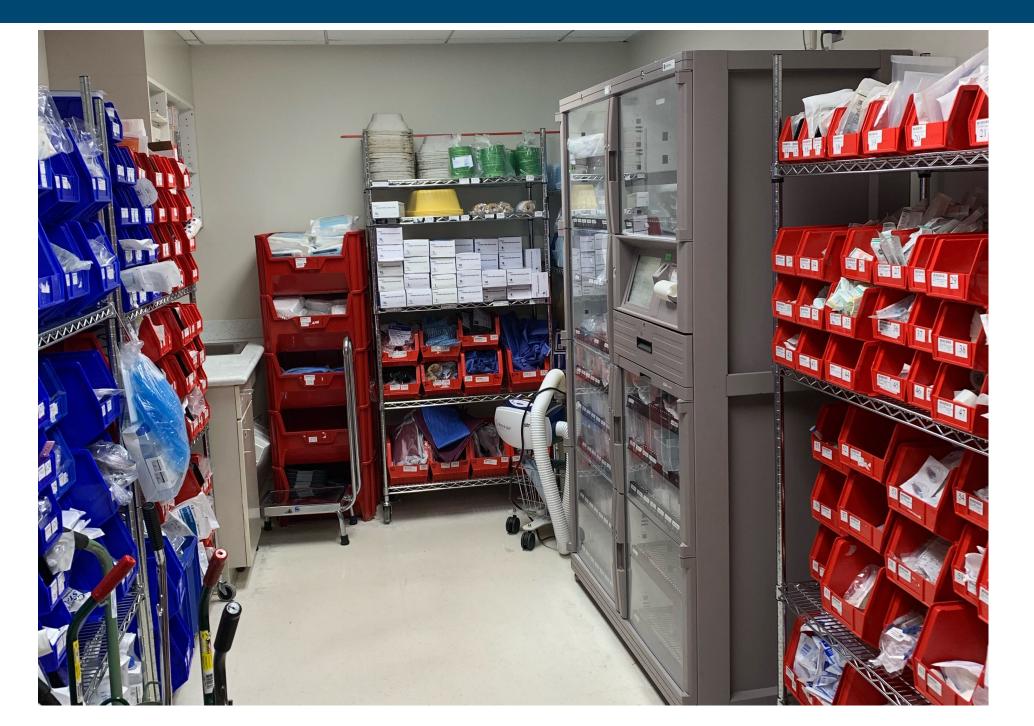


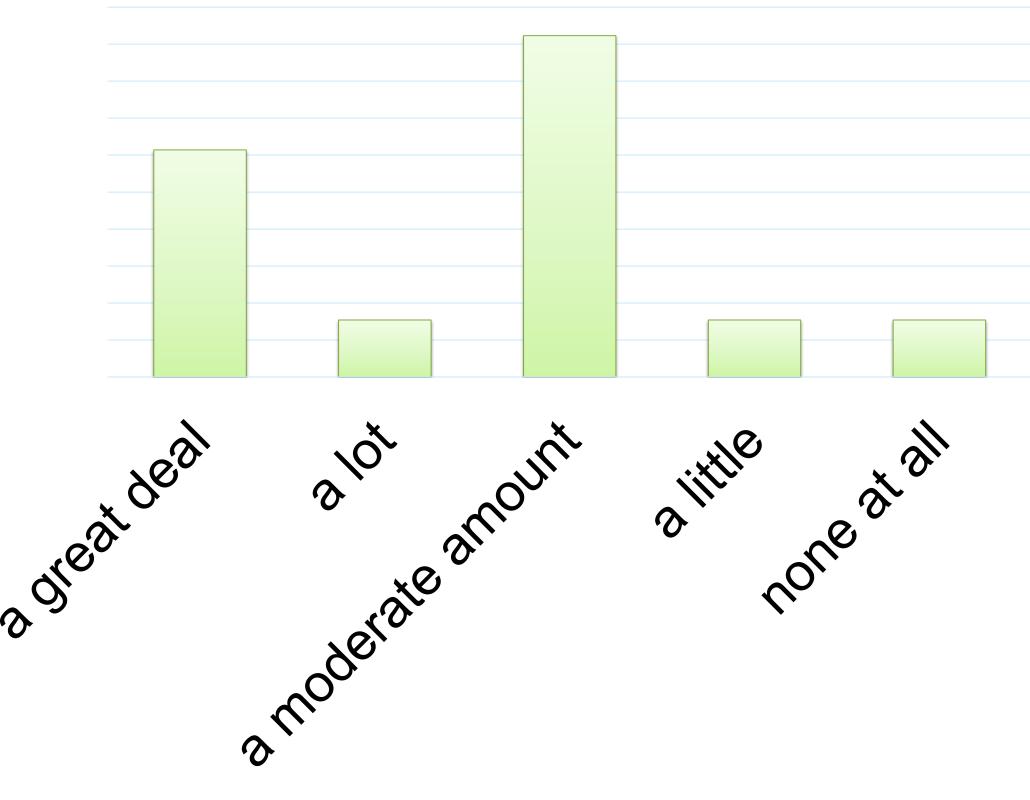
Figure 1. F pod stock room

RESULTS

Survey	# of responses	Who?
Pre	40	 Physicians (35%) Nurses (37.5) EDTs (22.5) APPs (5%)
Post	15	Physicians (93.3%)EDTs (6.7%)

Survey Responses:

Are you aware there is a searchable list for stock room items? Yes- 93%, No-6.6% Have you used the searchable list? Yes- 46.7%, No- 53.3%





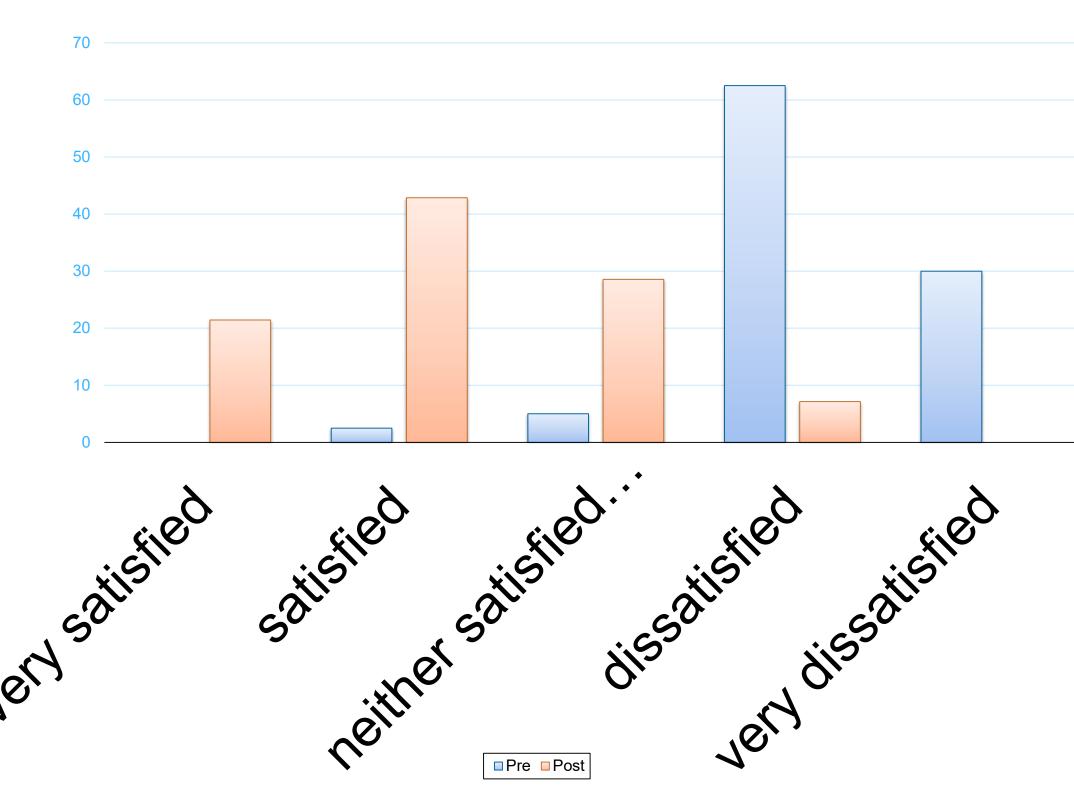


Figure 3. Satisfaction with stock room process (pre and post)

CONCLUSIONS

Having a searchable, itemized list of stock room items in ED reduces time spent looking for items, and improves resident satisfaction.

Searchable list may not be easily accessible as 93% of respondents were aware there was a list, but only 47% had used it.

NEXT STEPS

Expand to all stock rooms and EDs (1W and ART ED)

Improve accessibility (ie QR code in stockroom to link to list, integrate searchable list into ED provider learning home on epic)

BARRIERS/ LIMITATIONS

40 participants (including physicians [35%], APPs, nurses, and ED technicians) responded to presurvey, with only 15 responses to post-survey (physicians [93.3%], and ED technicians).

Data can likely be extrapolated across residency but limits conclusion

Limited survey response could be related to lack of accessibility.