Ocmulgee

EVIDENCE-BASED CASE STUDY

Healthcare | Medium company

A 170-bed hospital cuts patient cycle time by 11.2%: Technology and data

HEALTHCARE | MEDIUM | TECHNOLOGY AND DATA

-11.2%	-27%	+3.78 pts
TOTAL CYCLE TIME [1]	INVESTIGATION CYCLE TIME [1]	OVERALL EFFICIENCY [1]

PROBLEM

Patients moved through disconnected steps with long waits and low process efficiency. Delays occurred across registration, assessment, consultation, investigation, radiology, and pharmacy work.

SOLUTION

The hospital mapped the full visit, used A3 problem solving, reorganized work, and changed triage and waiting areas. The team used measured delays to focus changes on the handoffs that affected the complete patient journey.

RESULT

Total cycle time fell from 75.8 to 67.34 minutes. Overall process efficiency rose from 16.35% to 20.13%.

BUSINESS LENS

Process economics: the intervention improved capacity without framing patient care as a simple labor-cutting exercise.

ASSUMPTIONS AND LIMITS

One hospital, short study period, no control group, equipment failures, and changing patient demand. Bed count is an operating-scale proxy because employee count is absent.

DEPARTMENT APPLICATION

TECHNOLOGY AND DATA

Pre- and post-measures guided changes.

Application analysis based on the cited source. It is not a separate measured result.

Prepared by Ocmulgee Business Process Solutions from the cited independent source. This is not an Ocmulgee client engagement or an original Ocmulgee result.

SOURCE [1]

Naidoo and Mahomed, 2016. Impact of Lean on Patient Cycle and Waiting Times at a Rural District Hospital. https://doi.org/10.4102/phcfm.v8i1.1084

Peer-reviewed action-research case | Size basis: A 170-bed hospital. The library uses the published 100-499-bed healthcare band as its Medium operating-scale proxy.

Healthcare journal review: medium hospitals have 100-499 beds: https://doi.org/10.3390/healthcare12222218