

## Data Supplement S1: Aggregated advice for physicians learning to manage departmental flow From Chan et al., Coaching for Chaos

<b>Advice for Individual Physicians</b>	
<ul style="list-style-type: none"> <li>○ Utilizing parallel processes - Know what resources are available and anticipate team members' abilities to do tasks (i.e. write orders for one room's nurses, go to another area, do same)               <ul style="list-style-type: none"> <li>▪ Recognize need to leave bedside of sick patients</li> <li>▪ Write orders and walk away</li> </ul> </li> <li>○ Using an Organizational system               <ul style="list-style-type: none"> <li>▪ Conduct follow-up investigations before seeing new</li> <li>▪ Prioritize reassessments</li> <li>▪ Be mindful of time/ Wait time for patient / Time in Dept.</li> <li>▪ Own personal time spent</li> </ul> </li> <li>○ Seeing sickest patients first               <ul style="list-style-type: none"> <li>▪ Pay attention to Triage scores (e.g. CTAS, EIS)</li> <li>▪ Attend to abnormal vitals</li> <li>▪ Provide analgesia for patients in pain</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>○ Keeping patient disposition in mind               <ul style="list-style-type: none"> <li>▪ Consider it as early as possible</li> <li>▪ Incorporate gestalt</li> <li>▪ Group patients by "complaint"</li> </ul> </li> <li>○ Double-checking / Displaying meticulousness</li> <li>○ Being efficient with testing               <ul style="list-style-type: none"> <li>▪ Hone/Use your clinical gestalt so as only to order necessary tests/investigations that answer an emergent question</li> </ul> </li> <li>○ Visually inspecting patients               <ul style="list-style-type: none"> <li>▪ Order tests after seeing patient (so as not to over order)</li> </ul> </li> <li>○ Being Mindful of yourself and your abilities               <ul style="list-style-type: none"> <li>▪ Be mindful of cognitive load</li> <li>▪ Don't see more patients than can manage</li> </ul> </li> <li>○ Seeing simple stuff first then seek out complex cases               <ul style="list-style-type: none"> <li>▪ See quick things yourself</li> </ul> </li> </ul>
<b>Team/Systems-related Advice</b>	
<ul style="list-style-type: none"> <li>○ Diagnosing the problem in department flow</li> <li>○ Being aware that triage notes are not always accurate               <ul style="list-style-type: none"> <li>▪ Read Triage Note to double check that they are not mis-triaged                   <ul style="list-style-type: none"> <li>• Subjectivity of CTAS</li> </ul> </li> <li>▪ Trust objective parts of triage (eg. Vital signs)</li> </ul> </li> <li>○ Calling for help               <ul style="list-style-type: none"> <li>▪ Delegate to your team, but check in with them.                   <ul style="list-style-type: none"> <li>• Trusting team                       <ul style="list-style-type: none"> <li>○ Trusting nurses</li> <li>○ Trusting residents</li> <li>○ Trusting consultant</li> </ul> </li> <li>• Encourage others to come to you with problems (create positive culture)</li> <li>• Use your resources</li> <li>• Communicate with consultant                       <ul style="list-style-type: none"> <li>○ keeping track of consultants called</li> </ul> </li> </ul> </li> </ul> </li> <li>○ Keeping overall departmental situational awareness at all times               <ul style="list-style-type: none"> <li>▪ Gather all available information from all sources</li> <li>▪ Free up nursing resources</li> <li>▪ Maintain awareness of expectant volume</li> <li>▪ Anticipate incoming patients via EMS</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>○ Gathering geographic / space information               <ul style="list-style-type: none"> <li>▪ Where all the sick patients are</li> <li>▪ Where all the patients who are in critical care beds who are movable are</li> <li>▪ Who is in [monitored] beds?</li> <li>▪ Who doesn't necessarily need an [monitored] bed?</li> <li>▪ Who could potentially move to RAZ; as well as trying to get a sense of what my capacity in other parts of the hospital are</li> <li>▪ How many beds do I have?</li> <li>▪ How many available medicine and non-medicine beds are there?</li> <li>▪ How many DWAs are available (DWAs: designated waiting area)?</li> <li>▪ How many contingency beds do I have?</li> <li>▪ How many unit beds do I have?</li> <li>▪ How many patients are we expecting?</li> <li>▪ How many critical patients are we expecting to come in?                   <ul style="list-style-type: none"> <li>• Speak with nurses (especially at charge desk and triage booths)</li> <li>• Communicate with other departments in hospital</li> <li>• Speak with EM colleagues</li> </ul> </li> </ul> </li> <li>○ Maintaining Geographic / Spatial awareness               <ul style="list-style-type: none"> <li>• Do not waste travel time / be personally more efficient</li> <li>• Rearrange patients to optimize ability to observe</li> <li>• Recognize need to go between rooms</li> <li>• Make due with space available, seeing patients where you can</li> </ul> </li> </ul>