

## Appendix C:

*The number of hospitals that acknowledges the need to work with a particular solution is categorized from the highest to the lowest number together with the name of the solution and associated theme.*

Themes	Solutions	Hospitals/ solution
<i>Healthcare sector</i>	Increase staffing and bed capacity across the whole healthcare system	14
<i>Discharge</i>	Enable discharge predictability with more home care solutions and own downstream facilities	14
<i>Discharge</i>	Share objectives, information and real time capacity data with after care services	13
<i>Internal</i>	Give clinics trust and improvement autonomy but follow central process metrics and external benchmark	11
<i>Management System</i>	Use a flow command center to optimize capacity use and break hospital flow bottlenecks	11
<i>Management System</i>	Use IT-tools to analyze bed capacity use and provide daily real time visibility on hospital capacity	11
<i>Discharge</i>	Have dedicated discharge coordinators or coordinating teams	11
<i>Discharge</i>	Prioritize activities and organize staff to ensure early and efficient daily discharges	10
<i>Discharge</i>	Set early discharge goals and work towards them along the patients' whole hospital journey	10
<i>Entry</i>	Require increased primary care responsibility and support with more knowledge exchange and coordination	10
<i>Entry</i>	Strategic planning: make recurring strategic revisions on fit between demand and capacity	10
<i>Entry</i>	Strategic planning: use predictive analytics to forecast demand patterns and capacity needs	10
<i>Internal</i>	Improve prioritization schemes and develop standards on procedures, roles and staff-bed ratios	10
<i>Internal</i>	Optimize and smooth occupancy rate levels by admitting patients based on length of stay and ICU risk	10
<i>Internal</i>	Understand the tipping point of hospitals' capacity utilization and ensure sufficient capacity buffers	10
<i>Internal</i>	Use an OR block schedule per clinic and plan cases based on downstream bed availability	10
<i>Management System</i>	Build up flexible hospital-wide capacity to handle peaks or capacity unbalances	10
<i>Management System</i>	Ensure sufficient capacity along the whole patient flow when setting objectives to avoid bottlenecks	10
<i>Management System</i>	Use some type of patient coordinators to see and prioritize the needs and process of the patient	10
<i>Transfer</i>	Give specific flow unit or team the task to control and arrange for efficient transfers	10
<i>Entry</i>	Reach, inform and treat patients before they seek acute hospital care	10
<i>Internal</i>	Ensure a high OR-utilization with smart case mixes, all day utilization and quick cancellation refill	9
<i>Internal</i>	Use more digital tools and new treatment methods to reduce lead times	9
<i>Internal</i>	Utilize as much of the week as possible and staff day and week according to real demand patterns	9
<i>Management System</i>	Connect managers and staff across the hospital to break silo mindsets	9
<i>Management System</i>	Put patient flow focus on top of the agenda across the hospital, to change the culture	9
<i>Discharge</i>	Request and work towards increased responsibility from after care services	8
<i>Discharge</i>	Use mutual staffing collaboration between the hospital and after care services	8
<i>Entry</i>	Cooperate with other hospitals to ensure bed capacity and to seek appropriate level of care	8
<i>Entry</i>	Use IT-tools and data-analysis for standardized admissions, early assessments and reduced no-shows	8
<i>Internal</i>	Schedule staff and all clinical activities based on an optimal utilization of the OR-schedule	8
<i>Management System</i>	Work with closer collaboration between clinics or departments across the hospital	8
<i>Transfer</i>	Have standardized handoffs, pre-defined destinations and established incentives for efficient transfers	8
<i>Discharge</i>	Increase prioritization of discharge ready patients when planning procedures and activities	8
<i>Discharge</i>	Provide follow up appointments at discharge to ensure accountability and continuity	7
<i>Entry</i>	Ensure capability to reroute less severe ED patients to outpatient or ambulatory care	7
<i>Internal</i>	Have a structured organization for daily problem solving and capacity optimization	7
<i>Management System</i>	Operational planning: have daily capacity meetings with all clinics or departments of the hospital	7
<i>Transfer</i>	Have clear roles with defined mandates concerning transfers between the ED and the receiving clinic	7
<i>Transfer</i>	Use digital tools to efficiently connect, direct and navigate cleaners, porters and ambulatory patients	7
<i>Internal</i>	Make all employees understand the importance of having a patient flow focus	7
<i>Internal</i>	Operational planning: have daily capacity meetings within the department or clinic	7
<i>Management System</i>	Align objectives, metrics and patient data systems (EHR & CRM) across the organization	6
<i>Healthcare sector</i>	Create healthcare system alignment with clear goals and objectives for each healthcare actor	6
<i>Internal</i>	Improve outpatient processes by implementing standards on schedules and appointments	6
<i>Management System</i>	Share and visualize correct data across the organization to make everyone understand flow implications	5
<i>Management System</i>	Tactical planning: have weekly capacity coordination meetings with all clinics of the hospital	5
<i>Internal</i>	Allocate dedicated capacity for both acute and elective patient flows	4
<i>Internal</i>	Invest in ancillary service capabilities to minimize bottleneck risks in indirect patient activities	4
<i>Internal</i>	Use external facilities or patient hotels to release hospital bed capacity	4