

The Pathway Nurse in the Emergency Department of ASL CN2: Effectiveness Evaluation of an Organizational Model

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Introduction. Population aging and the rising prevalence of chronic conditions and frailty have led to an increase in Emergency Department (ED) visits, contributing to overcrowding and boarding, with negative impacts on waiting times, patient safety, and quality of care.

ASL CN2 has invested in organizational models that enhance advanced nursing competencies in managing the complexity of clinical care pathways and hospital-community integration.

Methods. A retrospective observational pre-post study (2023 vs. 2024) was conducted following the implementation of the care pathway nurse in the ED.

The following indicators were analyzed: total length of stay, average treatment time, boarding time, rates of patients leaving without being seen, and activations of the Territorial Operations Center (COT).

Results. In the post-intervention period, a statistically significant reduction in the average total ED length of stay was observed (–42 minutes). There was also a decrease in average boarding time (–3 hours and 5 minutes) and treatment time (–33 minutes), a reduction in patients leaving voluntarily, and an increase in COT activations.

Discussion. The introduction of the care pathway nurse was associated with a significant improvement in patient flow management and continuity-of-care indicators. The experience of ASL CN2 highlights how investing in innovative organizational models based on advanced nursing competencies represents a strategic lever for managing complex care pathways.

Keywords: Emergency Department Overcrowding, Pathway Nurse, Care Pathway Management, Continuity of Care

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