Emergency Department Length of Stay for Admitted Patients
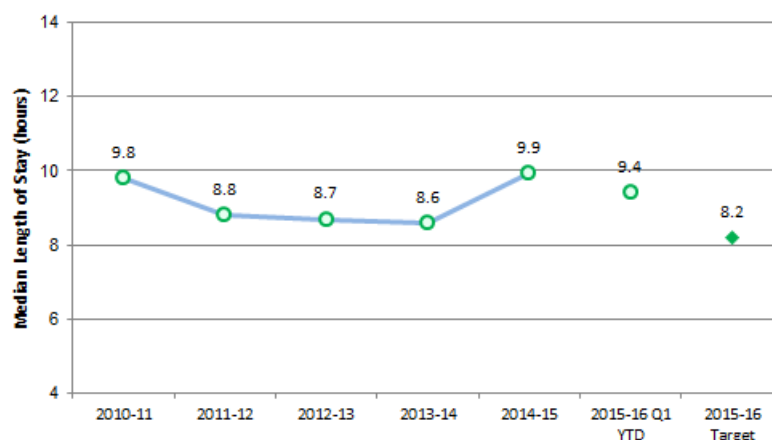
Measure Definition

The average patient's length of time (hours) in the emergency department before being admitted to a hospital bed at the busiest emergency departments. This is calculated as the median length of stay which means that 50 per cent of patients stay in the emergency department this length of time or less, before being admitted. This measure is the time between when a patient is assessed by a nurse in the emergency department until the time they are admitted. AHS is performing better than the national average of 9.8 hours.
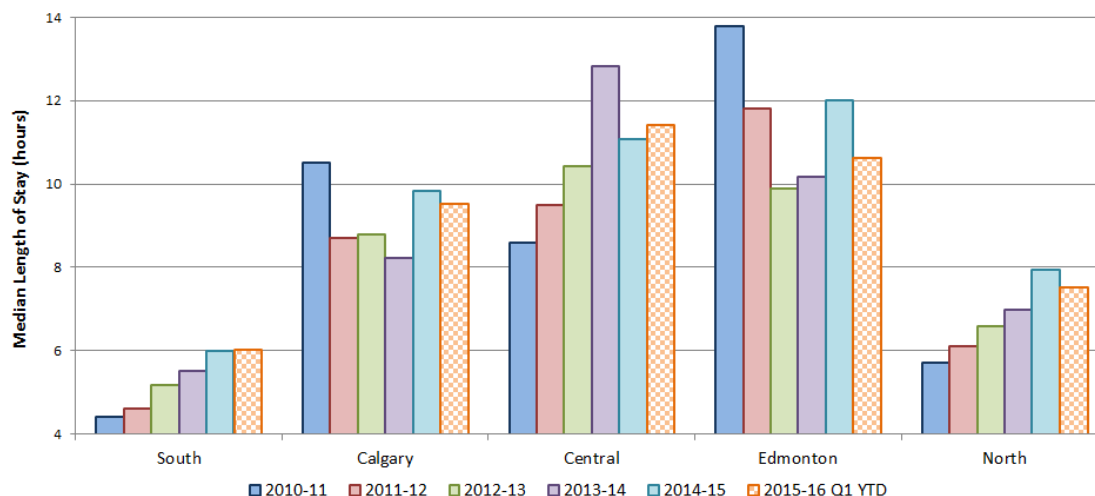
Understanding this Measure

This measure reflects the performance of the entire system. It is influenced by our ability to manage complex patients in primary care, efficiencies in the Emergency Department, efficiencies and capacity in the acute care (when staying in hospital), better quality of care and integration with community services in reducing unplanned readmissions, timely placement of patients into continuing care (e.g., long-term care) and linking patients to the appropriate services in the community after a stay in hospital.

ED Length of Stay for Admitted Patients - Annual

ED Length of Stay for Admitted Patients - by Zone

ED Length of Stay for Admitted Patients – Actions

Provincial/ Strategic Clinical Network (SCN)	• CoACT implementation is underway in all zones which will start to demonstrate a positive impact on efficiency and emergency department flow.
South	• Collaborate with the ED physicians and the hospitalists to improve efficiency in the decision to admit and admission orders process. • Collaborate with Paladin Services Security Company to improve flow for patients in the ED awaiting inpatient admission. • Continue to utilize daily bed huddles to ensure patient discharges are identified in timely manner.
Calgary	• Collaborate with mental health services to decrease length of stay for admitted patients. • Develop improved processes to support transfer of ED admitted patients to inpatient units. • Site-based improvement teams aligning staffing resources and processes to achieve AHS Triage to Physician Initial Assessment target.
Central	• Revised Overcapacity Protocol being trialed at Red Deer Regional Hospital. • Ongoing collaboration with rural sites to repatriate patients and receive diverted ED patients.
Edmonton	• Expand the Inner City Support Team in-reach to the Royal Alexandra Hospital (RAH) ED. • Extend hours of the CREMS team (Crisis Response & EMS). • Increase trauma team activations at RAH and University of Alberta hospitals to 40%. • Changing OBS/Gyne and Surgery consult models, developing admission protocols and reviewing nursing model to improve length of stay from triage to admission to ward. • Reduce wait times in community with EMS/ED Transfer of Care project. • Decrease wait time of Inter Facility Transfer stretcher for patients being transferred between EDs.
North	• Delivery of CTAS training to triage nurses. • Engagement between ED and EMS for continued review of existing processes.

IN SUMMARY

Other initiatives are underway including operationalizing in-progress bed movement process to move patients to vacant beds in a more timely fashion.

AHS has created care units in some of its urban hospitals – called the Rapid Transfer Unit in Edmonton and the Rapid Access Unit in Calgary. These units are located next to the EDs and allow care providers to observe patients receiving treatments for a longer period of time, with the goal of being able to send them home rather than admit them to hospital. This promotes quality and safe care for patients and frees up space in the ED and hospital units for other ED patients.

ED Length of Stay for Admitted Patients – Zone and Site Details

The average patient's length of time (hours) in the emergency department before being admitted to a hospital bed at the busiest emergency departments.

ED LOS Admitted - Busiest Sites	2012-13 **	2013-14**	2014-15**	Q1 YTD 2014-15 Last Year	Q1 YTD 2015-16 Current	Trend *	2015-16 Target
Provincial	8.7	8.6	9.9	9.4	9.4	→	8.2
South Zone Total	5.2	5.5	6.0	6.0	6.0	→	5.1
Chinook Regional Hospital	5.6	6.0	6.0	6.1	5.9	↑	5.5
Medicine Hat Regional Hospital	4.8	5.1	5.9	5.9	6.1	↓	4.7
Calgary Zone Total	8.8	8.2	9.8	9.1	9.5	↓	8.3
Alberta Children's Hospital	6.5	6.3	6.8	6.5	6.6	↓	6.4
Foothills Medical Centre	8.5	8.0	8.9	8.2	8.5	↓	8.3
Peter Lougheed Centre	9.8	9.1	11.5	10.8	11.1	↓	8.8
Rockyview General Hospital	9.4	8.6	11.1	9.9	10.5	↓	8.7
South Health Campus	N/A	8.1	10.2	9.4	10.6	↓	8.3
Central Zone Total	10.4	12.8	11.1	11.0	11.4	↓	9.0
Red Deer Regional Hospital Centre	10.4	12.8	11.1	11.0	11.4	↓	9.0
Edmonton Zone Total	9.9	10.2	12.0	11.2	10.6	↑	8.8
Grey Nuns Community Hospital	13.3	16.8	23.5	21.1	19.6	↑	9.4
Misericordia Community Hospital	12.0	12.5	17.0	14.0	16.3	↓	9.3
Royal Alexandra Hospital	9.7	9.9	11.5	10.8	10.5	↑	8.8
Stollery Children's Hospital	7.8	7.4	8.6	7.8	8.1	↓	7.7
Sturgeon Community Hospital	13.4	20.5	28.4	26.1	22.3	↑	9.4
University of Alberta Hospital	9.2	9.1	10.4	9.8	8.8	↑	8.6
North Zone Total	6.6	7.0	7.9	7.8	7.5	↑	6.5
Northern Lights Regional Health Centre	5.4	5.9	6.3	6.0	5.9	↑	5.3
Queen Elizabeth II Hospital	8.3	8.6	11.0	11.3	10.8	↑	8.2

N/A: No results available. South Health Campus opened February 2013.
*Trend: ↑ Improvement → Stability ↓ Area requires additional focus
** The data for the ED Admitted measure by fiscal year for zones and sites has been updated as of November 2, 2015.

ED Admissions from ED - Busiest Sites	2012-13	2013-14	2014-15	Q1 YTD 2014-15 Last Year	Q1 YTD 2015-16 Current
Provincial	130,323	133,310	137,391	34,419	34,828
South Zone	11,475	11,656	11,939	3,090	2,906
Calgary Zone	52,473	54,634	56,732	13,925	14,329
Central Zone	8,901	8,815	9,255	2,240	2,452
Edmonton Zone	49,988	50,644	51,858	13,248	13,332
North Zone	7,486	7,561	7,607	1,916	1,809