

Emergency Department Length of Stay for Admitted Patients

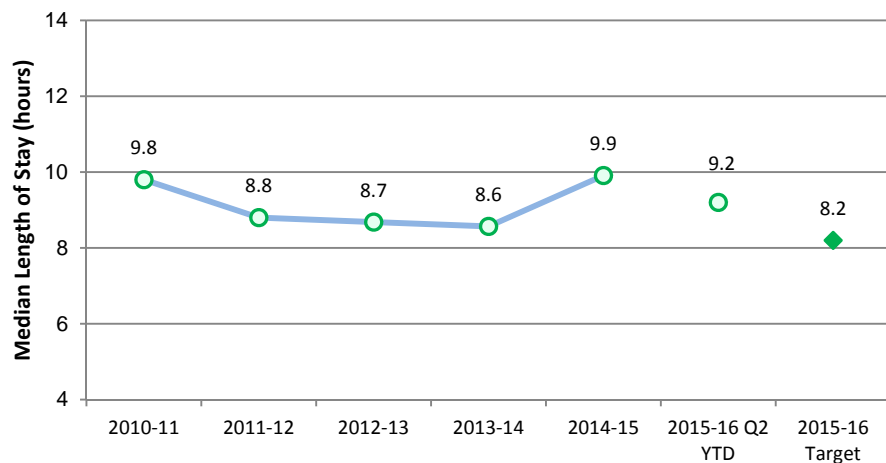
Measure Definition

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.

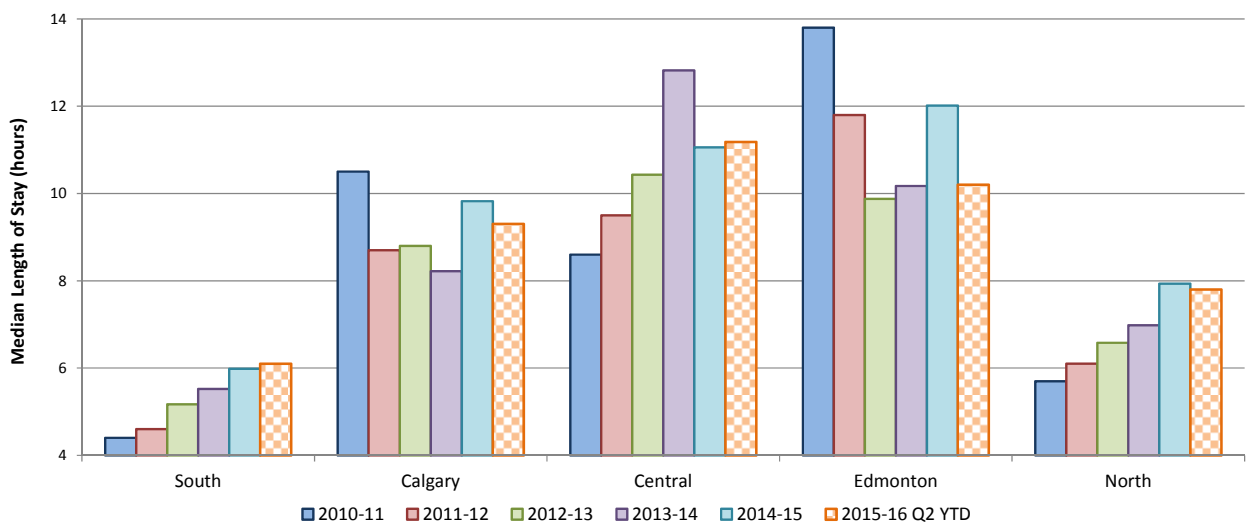
Understanding this Measure

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 | <ul style="list-style-type: none"> CoACT implementation is underway in all zones which will start to demonstrate a positive impact on efficiency and emergency department flow. |
| South | <ul style="list-style-type: none"> Collaborate with ED physicians and 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. Mapped expectations of appropriate off-service use of beds to apply to admitted patients when on-service bed is unavailable. |
| Calgary | <ul style="list-style-type: none"> 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. The Acute Admissions Area opened at South Health Campus (SHC) to offload up to five emergency inpatient holds each morning. Pilot started at Foothills Medical Centre (FMC) to support both timely transfer of patients to inpatients and prompt ED discharge. Collaborating with the Alberta Children Hospital mental health liaison to ensure optimal patient movement with FMC and SHC adolescent unit. |
| Central | <p>At Red Deer Regional Hospital:</p> <ul style="list-style-type: none"> Ongoing collaboration and efforts with rural sites to repatriate patients and receive diverted ED patients. Proposal for Emergency Medical Services (EMS) Transportation/Discharge Lounge under review. Exploring strategies to utilize rural hospital capacity to provide an enhanced level of restorative/rehabilitative care for subacute patients. Enhanced utilization of Medworxx data is being used to identify and address delays that extend hospital length of stay. General Internal Medicine Clinic implementation planning is underway in effort to reduce inpatient length of stay. |
| Edmonton | <ul style="list-style-type: none"> Reviewed OBS/Gyne and Surgery consult models, admission protocols and nursing model to improve length of stay from triage to admission to ward. New ED to ED protocol developed. Implemented ED avoidance strategy for patients with minor orthopedic injuries by admitting through the Plaster Rooms. Trial of pre-hospital trauma team activation by EMS and STARS has been implemented successfully and will be spread to all three Trauma sites. Expanded hours of Inner City Support Team to 7 days/week at the Royal Alexandra Hospital ED as of September 2015. CREMS (Crisis Response and EMS) expanded service hours Monday to Friday from 12 to 18 hours in September 2015. |
| North | <ul style="list-style-type: none"> Initiative underway with Primary Care Network to monitor ED utilization reports. Triple AIM project at Queen Elizabeth II with ED flow nurse investigating options involving other community supports for high use ED patients. |

IN SUMMARY

Q2 year-to-date, provincially and four zones have shown an improvement in wait times compared to the same period as last year.

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.

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 | Q2 YTD | | Trend * | 2015-16 Target |
|--|-------------|-------------|-------------|-------------------|-----------------|----------|----------------|
| | | | | 2014-15 Last Year | 2015-16 Current | | |
| Provincial | 8.7 | 8.6 | 9.9 | 9.7 | 9.2 | ↑ | 8.2 |
| South Zone Total | 5.2 | 5.5 | 6.0 | 6.0 | 6.1 | ↓ | 5.1 |
| Chinook Regional Hospital | 5.6 | 6.0 | 6.0 | 6.2 | 6.0 | ↑ | 5.5 |
| Medicine Hat Regional Hospital | 4.8 | 5.1 | 5.9 | 5.9 | 6.2 | ↓ | 4.7 |
| Calgary Zone Total | 8.8 | 8.2 | 9.8 | 9.4 | 9.3 | ↑ | 8.3 |
| Alberta Children's Hospital | 6.5 | 6.3 | 6.8 | 6.5 | 6.4 | ↑ | 6.4 |
| Foothills Medical Centre | 8.5 | 8.0 | 8.9 | 8.5 | 8.6 | ↓ | 8.3 |
| Peter Lougheed Centre | 9.8 | 9.1 | 11.5 | 11.0 | 10.7 | ↑ | 8.8 |
| Rockyview General Hospital | 9.4 | 8.6 | 11.1 | 10.4 | 9.9 | ↑ | 8.7 |
| South Health Campus | N/A | 8.1 | 10.2 | 10.0 | 10.6 | ↓ | 8.3 |
| Central Zone Total | 10.4 | 12.8 | 11.1 | 11.0 | 11.2 | ↓ | 9.0 |
| Red Deer Regional Hospital Centre | 10.4 | 12.8 | 11.1 | 11.0 | 11.2 | ↓ | 9.0 |
| Edmonton Zone Total | 9.9 | 10.2 | 12.0 | 11.6 | 10.2 | ↑ | 8.8 |
| Grey Nuns Community Hospital | 13.3 | 16.8 | 23.5 | 22.5 | 18.2 | ↑ | 9.4 |
| Misericordia Community Hospital | 12.0 | 12.5 | 17.0 | 15.3 | 13.6 | ↑ | 9.3 |
| Royal Alexandra Hospital | 9.7 | 9.9 | 11.5 | 11.1 | 9.9 | ↑ | 8.8 |
| Stollery Children's Hospital | 7.8 | 7.4 | 8.6 | 7.8 | 7.4 | ↑ | 7.7 |
| Sturgeon Community Hospital | 13.4 | 20.5 | 28.4 | 27.9 | 19.9 | ↑ | 9.4 |
| University of Alberta Hospital | 9.2 | 9.1 | 10.4 | 10.3 | 8.8 | ↑ | 8.6 |
| North Zone Total | 6.6 | 7.0 | 7.9 | 8.1 | 7.8 | ↑ | 6.5 |
| Northern Lights Regional Health Centre | 5.4 | 5.9 | 6.3 | 6.4 | 6.3 | ↑ | 5.3 |
| Queen Elizabeth II Hospital | 8.3 | 8.6 | 11.0 | 10.7 | 11.2 | ↓ | 8.2 |

N/A: No results available. South Health Campus opened February 2013.

*Trend: ↑ Improvement → Stability ↓ Area requires additional focus

| ED Admissions from ED - Busiest Sites | 2012-13 | 2013-14 | 2014-15 | Q2 YTD | |
|---------------------------------------|----------------|----------------|----------------|-------------------|-----------------|
| | | | | 2014-15 Last Year | 2015-16 Current |
| Provincial | 130,323 | 133,310 | 137,390 | 68,972 | 69,337 |
| South Zone | 11,475 | 11,656 | 11,939 | 6,022 | 5,793 |
| Calgary Zone | 52,473 | 54,634 | 56,732 | 28,184 | 28,434 |
| Central Zone | 8,901 | 8,815 | 9,254 | 4,577 | 4,775 |
| Edmonton Zone | 49,988 | 50,644 | 51,858 | 26,318 | 26,698 |
| North Zone | 7,486 | 7,561 | 7,607 | 3,871 | 3,637 |