

HOSPITAL REPORT 2005: Emergency Department Care

The McGuinty government and the Ontario Hospital Association today released *Hospital Report 2005: Emergency Department Care*, a quality improvement tool that includes data independently gathered and analyzed by researchers from the Hospital Report Research Collaborative based at the University of Toronto. The previous report on emergency department care was produced in 2003.

Hospitals participate voluntarily in the hospital report process because they see the potential for the project to lead to better health care. This report covers 85 per cent of emergency department visits in hospitals, and includes results for 92 out of 124 hospital corporations with emergency departments.

The report on emergency care looks at five areas: clinical utilization and outcomes (patient care), patient satisfaction, system integration and change (dealing with change), financial performance and condition, and women's health.

It includes scores for a variety of indicators or measures in each of the five areas as well as a provincial average for each measure. Results are also reported by hospital type and Local Health Integration Network (LHINs) boundaries.

Some of the key findings from *Hospital Report 2005: Emergency Department Care*:

Clinical Utilization and Outcomes (Patient care)

There are only 3.2 per cent of pneumonia patients seen in the emergency department, who are admitted to hospital and have a length of stay of two days or less. Similarly, hospital emergency departments are performing well on the management of asthma reflected by relatively low return rates.

The report indicates that X-rays are being over-used relative to clinical guidelines for X-ray use for ankle and foot injuries. The results suggest that guidelines are not being followed consistently.

Patient Satisfaction (How patients feel about their care based on experience)

Emergency departments score highest when patients are asked whether they are treated with courtesy and respect. The lowest scores occur when assessed on how well information was communicated to patients and/or their family during their emergency department stay.

Small hospital emergency departments have higher scores than larger emergency departments on all patient satisfaction indicators. Emergency departments in the Greater Toronto area (GTA) score significantly lower on patient satisfaction than emergency departments in other parts of the province.

System Integration and Change (Dealing with change)

The report shows there has been a system-wide improvement since 2003 in the use of standardized protocols or practice guidelines by hospital emergency departments in treating a number of conditions.

Provincial scores are lowest for internal coordination of care (strategies used to address patient flow) and external partnerships (relationships with external health care providers and agencies). These two indicators will increase in importance with the implementation of Local Health Integrated Networks (LHINs) in Ontario.

Hospitals have increased the regular use of clinical practice guidelines for chest pain from 60 percent of emergency departments to 78 per cent in 2004. The regular use of guidelines to diagnose and treat pneumonia rose from 13 per cent to 32 per cent.

Financial Performance and Condition

More than 86 per cent of staff hours were spent on activities related to the operation of the emergency department. The remaining 14 per cent was accounted for by vacation time, sick time, and other benefits. Slightly more than 85 per cent of the hours worked by nursing personnel were spent on patient care activities.

Women's Health Perspective

On average, more women than men used the emergency department in 2003-04 and more women than men in the 20-44 year age group were triaged as needing urgent care.

Women visited the emergency department more often than men for conditions such as asthma and depression. Overall, women were significantly less satisfied than men on all indicators of patient satisfaction.