



RAPID ASSESSMENT ZONE (RAZ)

QUALITY IMPROVEMENT TRIAL
FEBRUARY 4TH - APRIL 30TH, 2019

► BACKGROUND

The Rapid Assessment Zone (RAZ)

- Additional geographic space next to the acute care Emergency Department (ED)
- Currently operates 1300-2100, 7 days a week
- Designated ED physician and ED Nurse
- Assesses and cares for CTAS Level III patients (no telemetry or resuscitation capacity)

Canadian Triage Acuity Scale (CTAS)

Level	Urgency	Guideline Time to see a Physician
CTAS I	Resuscitation	NOW
CTAS II	Emergent	=<15 mins
CTAS III	Urgent	=<30 mins
CTAS IV	Semi-Urgent	=<1 hour
CTAS V	Non-Urgent	=<2 hours

► PROBLEM STATEMENT

UHNBC experiences capacity issues and the ED struggles with flow challenges. The importance of moving patients through the system in as efficient a manner as possible is tremendously important. It has been observed that the number of CTAS III (RAZ appropriate patients) has slowly been increasing over the years. In particular, the morning hours from 0900-1300 have a large number of patients that could be seen in RAZ, if it were open. By the time RAZ opens at 1300, there is a backlog of patients waiting to be seen. This leads to frustrated patients and a more difficult, stressful working environment for staff and physicians.

► CHANGE IDEAS

- Increase RAZ hours by 4 hours per day, 7 days a week
- Trial held for 12 weeks (February 4th- April 30th, 2019)
- Open from 0900-2100 (instead of 1300-2100)

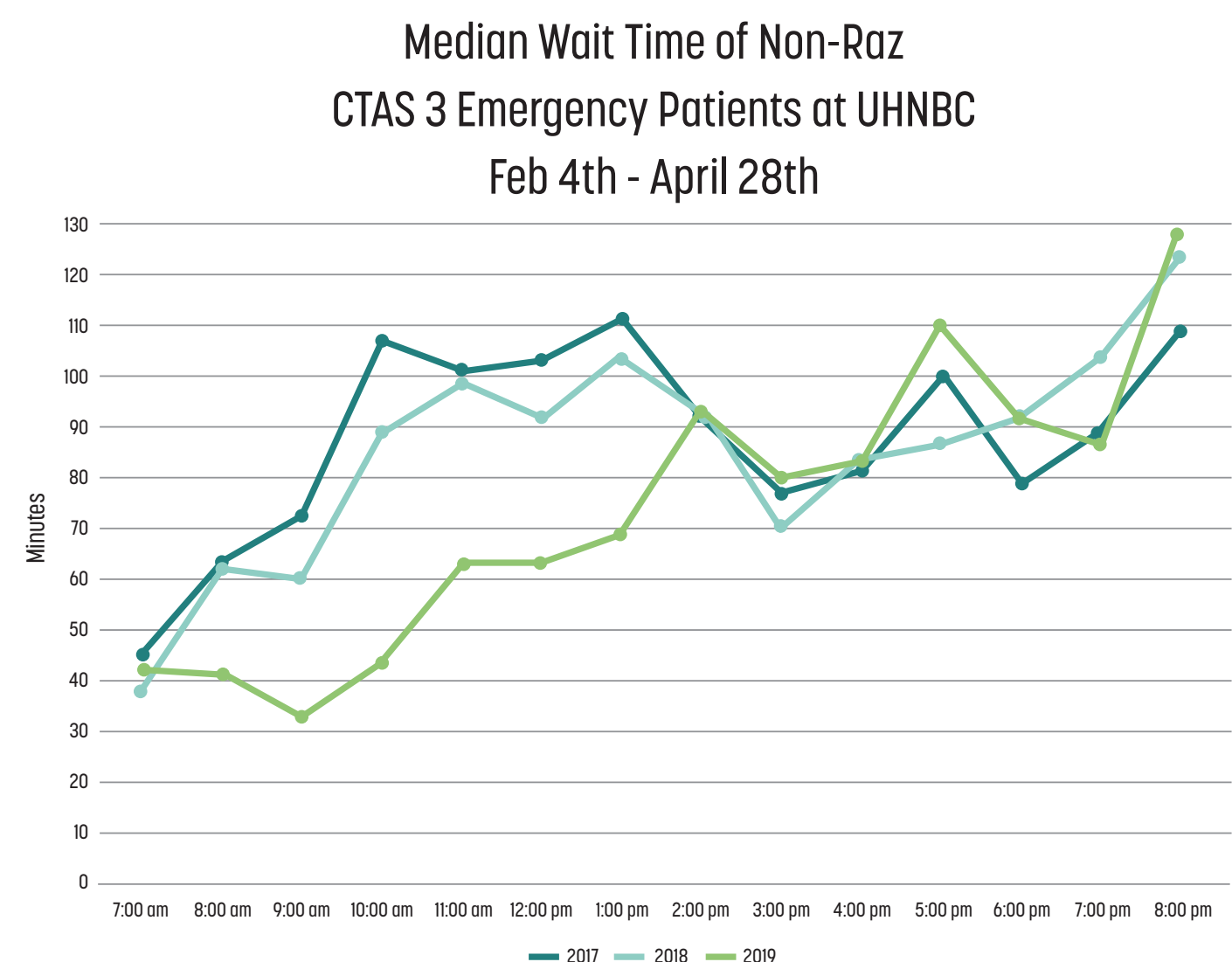
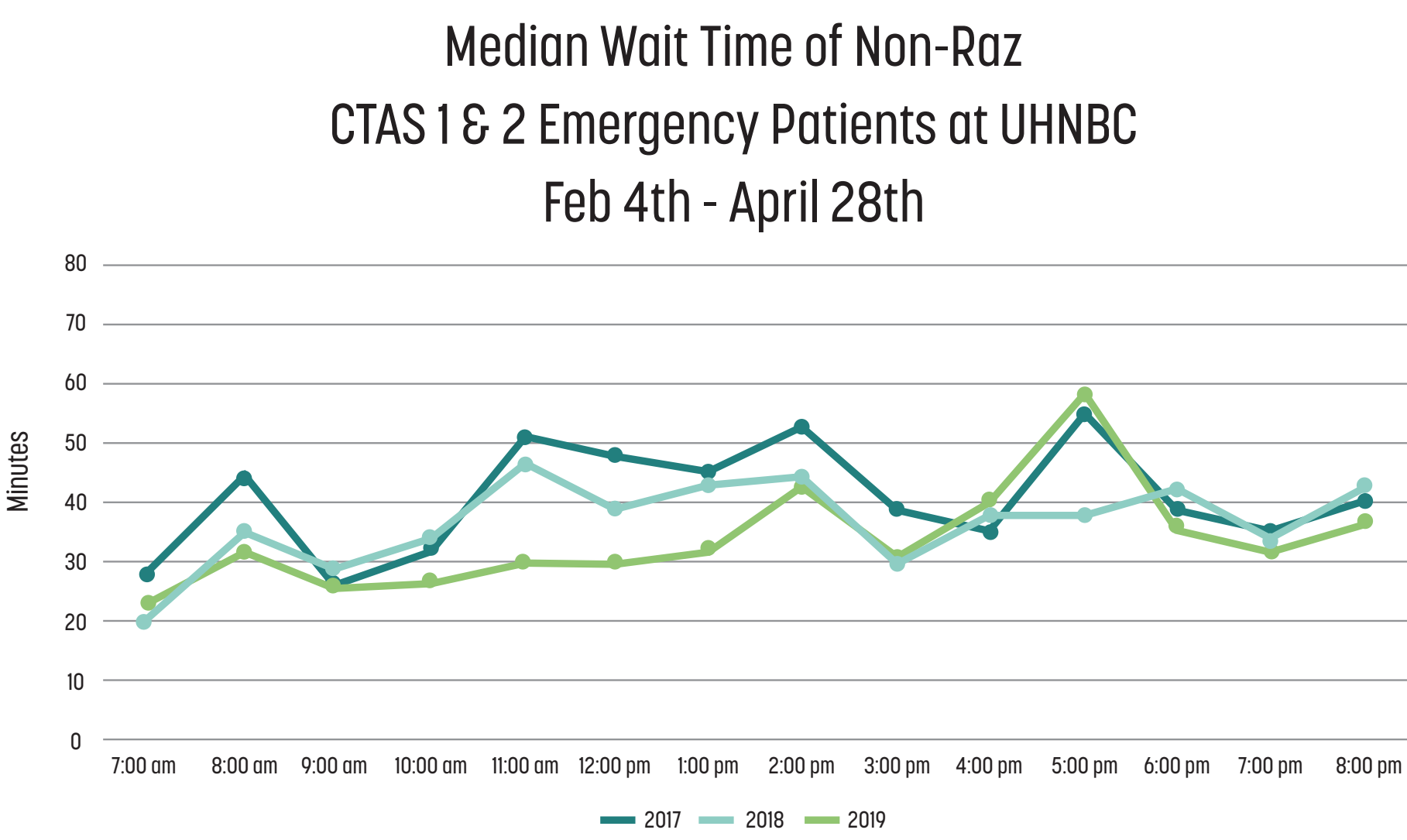
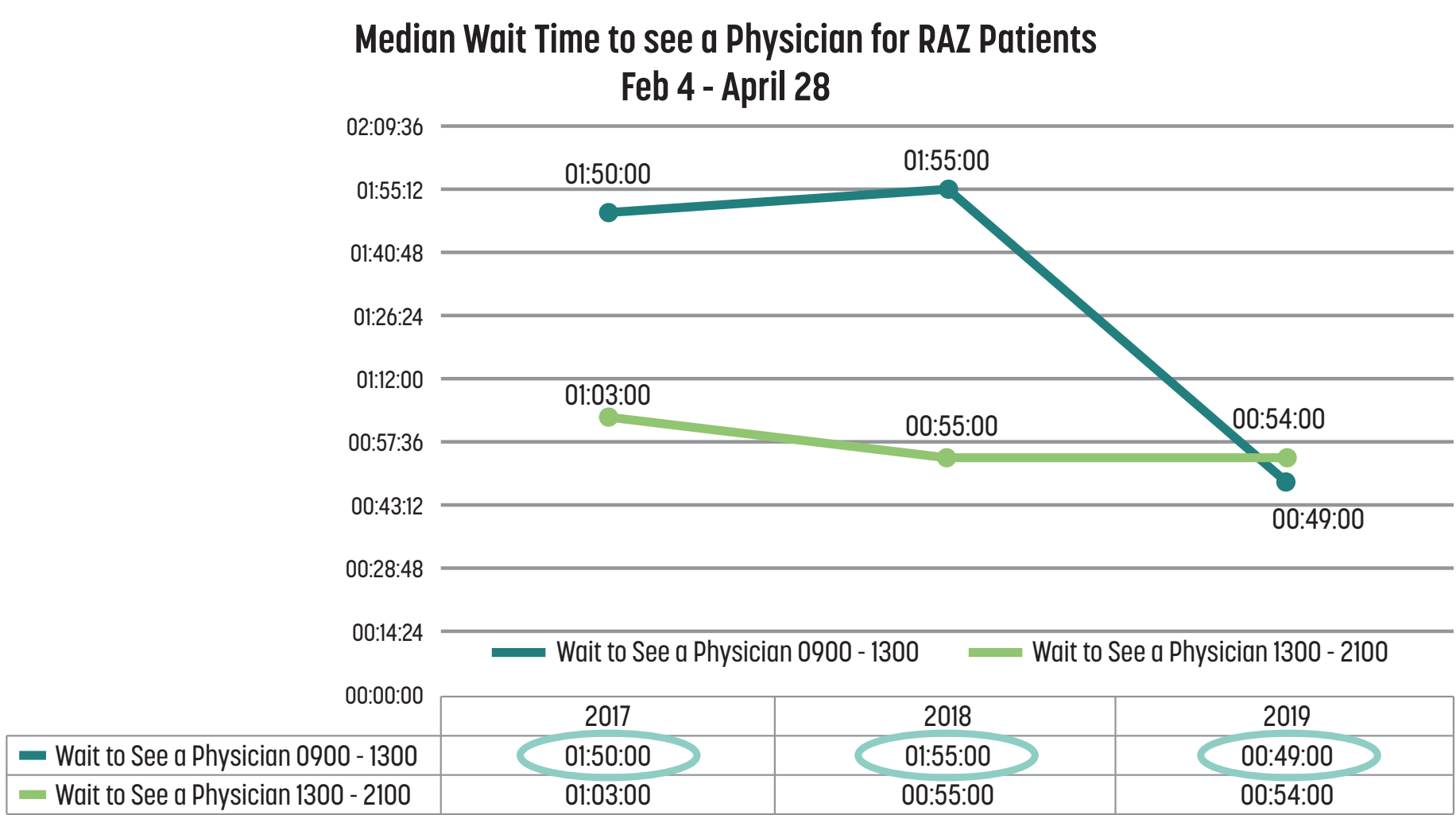
► PATIENT/CUSTOMER

- Lower acuity CTAS III level patients

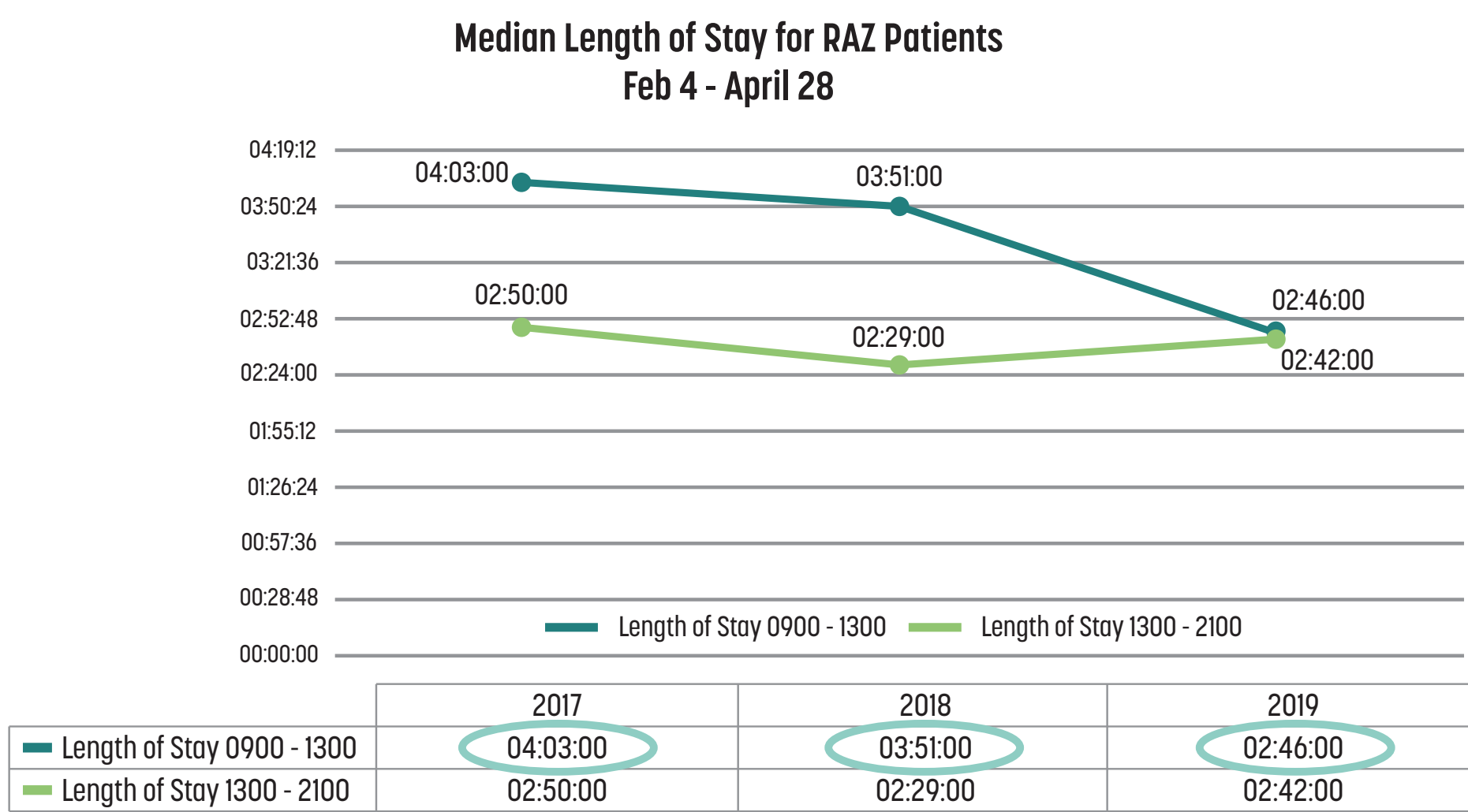


► RESULTS

As a result of the trial, wait times to see a physician, for RAZ patients, decreased by over 1 hour from 0900-1300. Likewise, all other ED patients experienced a decrease in wait time to see a physician from 0900-1300 (grey line in graphs below). From 1300-2100, when there was no changes trialed, there was no significant difference in wait times.



In addition, the length of time spent in the ED was decreased for RAZ patients, therefore improving flow.



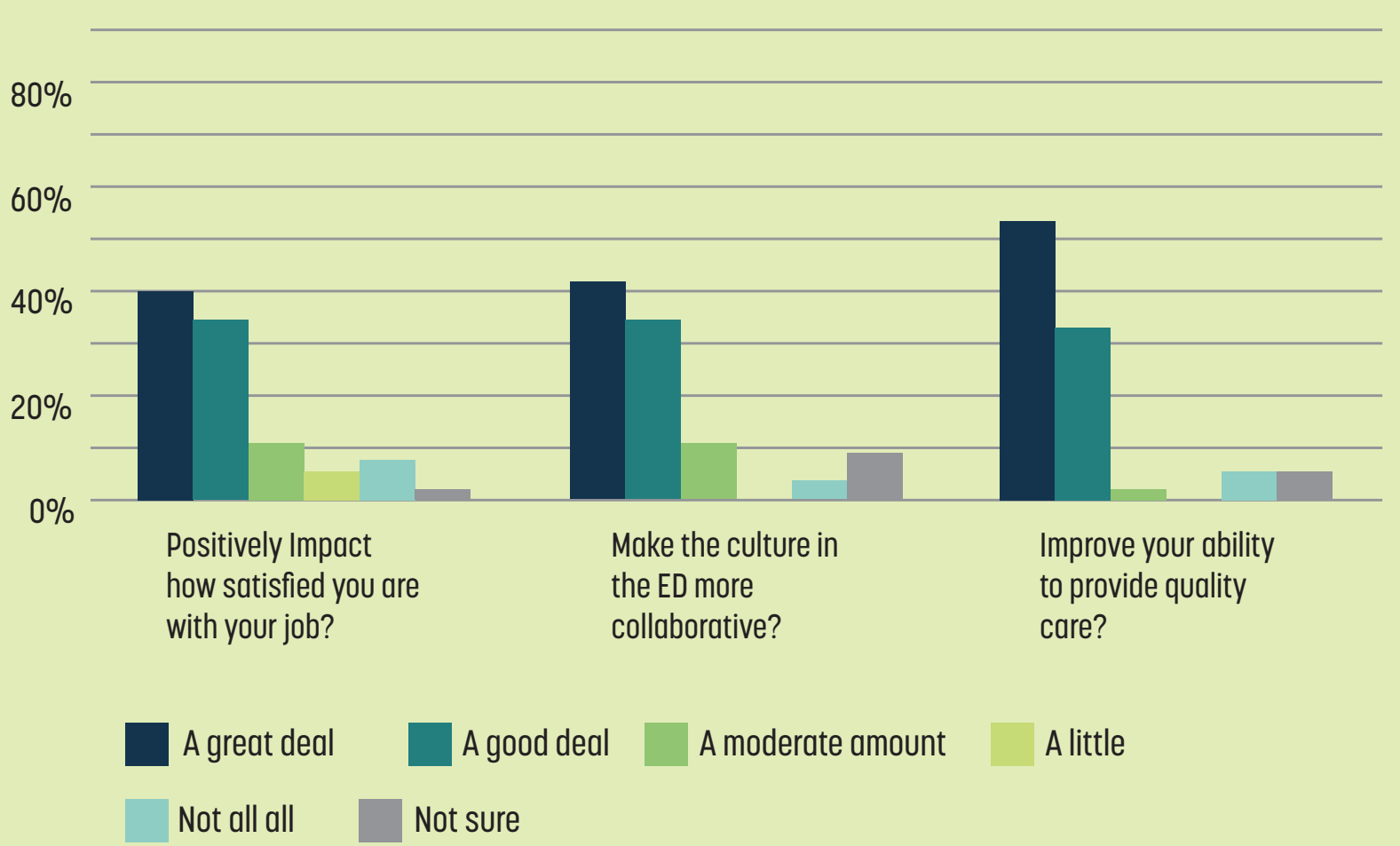
► NEXT STEPS / SUSTAINING THE GAINS

- To work towards sustaining this trial as it was well received by physicians and staff. An APP funding request has been submitted to request a permanent increase in physician time for RAZ, as well as a business case to support Northern Health Nurse time.
- Continued work is underway in the ED to look for ways to deal with improving the flow of patients through the ED and help with UHNBC's overcapacity issues.

► SURVEY OF PHYSICIANS AND STAFF IN THE ED:

Physicians and staff were very supportive of the pilot and when surveyed about their feelings towards the pilot, had many good things to say.

To what extent did the extended hours...



► COMMENTS FROM PHYSICIANS AND STAFF:

- "earlier start has fundamentally changed the atmosphere in ER, less stress for ER Dr, less stress for triage knowing flow will improve, less dissatisfaction for patients re wait times"
- "most importantly it's helping the overall morale for the squad"
- "patients less grumpy which makes my job more pleasant"

PRIMARY EMAIL CONTACT: laura.brough@northernhealth.ca

TEAM MEMBERS: Dr. Laura Brough, Dr. Devin Spooner, Dr. Patrick Rowe, Dr. Patrick Turner, Dr. Matt Janzen, Dr. Kathleen Cuncliffe, Dr. Amy Johnson, Rita Sweeney, Belinda Maidment, Laura Wessman & All ED Nurses