

# Total Time Spent in Emergency Department (Hours, Percentile)

Name	Total Time Spent in Emergency Department (Hours, Percentile)
Short/Other Names	Not applicable
Description	This indicator measures the time interval between the earlier of triage date/time or registration date/time and the date/time when a patient leaves the emergency department (ED).
Interpretation	The 90th or 50th percentile of this indicator represents the maximum length of time that 90% or 50% of patients spend in the ED. A small number is desirable for this indicator.
HSP Framework Dimension	Health System Outputs: Access to comprehensive, high-quality health services
Areas of Need	Getting Better
Geographic Coverage	Prince Edward Island, Nova Scotia, Quebec, Ontario, Manitoba, Saskatchewan, Alberta, British Columbia, Yukon
Reporting Level /Disaggregation	National, Province/Territory, Region, Facility, Corporation, Peer group
Indicator Results	<a href="https://www.cihi.ca/en/quick-stats">https://www.cihi.ca/en/quick-stats</a>
<b>Identifying Information</b>	
Name	Total Time Spent in Emergency Department (Hours, Percentile)
Short/Other Names	Not applicable
<b>Indicator Description and Calculation</b>	
Description	This indicator measures the time interval between the earlier of triage date/time or registration date/time and the date/time when a patient leaves the emergency department (ED). The indicator is measured in hours, usually using the 90th percentile and/or 50th percentile, which represents the maximum length of time that 90% and/or 50% of patients stay in the ED.
Calculation: Description	Unit of analysis: Single ED visit
Calculation: Geographic Assignment	Place of service
Calculation: Type of Measurement	Number - Number of hours, percentile
Calculation: Adjustment Applied	None
Calculation: Method of Adjustment	Not applicable
Denominator	<b>Description:</b> All emergency visits <b>Inclusions:</b> 1. Unscheduled emergency visits  2. ED visits with a valid and known registration date/time or triage date/time and a valid and known date/time when a patient left the ED  <b>Exclusions:</b> 1. Scheduled emergency visits  2. ED Visits with Visit Disposition = 02 from 2013–2014 to 2017–2018, and Visit Disposition = 61 as of 2018–2019  3. Visits with both unknown/invalid registration and triage date/time OR with unknown/invalid patient left ED date/time
Numerator	
<b>Background, Interpretation and Benchmarks</b>	
Rationale	Time is crucial to the effectiveness and outcome of patient care, especially for emergency patients. In conjunction with other indicators, this can be used to monitor the total length of time patients spend in the ED in an effort to improve the efficiency and, ultimately, the outcome of patient care. Many factors can influence the indicator results, including the availability of inpatient beds, triage level, the overall patient population and hospital resources. The 90th or 50th percentile of this indicator represents the maximum length of time that 90% or 50% of patients spend in the ED.
Interpretation	A small number is desirable for this indicator.
HSP Framework Dimension	Health System Outputs: Access to comprehensive, high-quality health services
Areas of Need	Getting Better
Targets /Benchmarks	Not applicable
References	Not applicable
Availability of Data Sources and Results	

Data Sources	NACRS
	<b>Type of Year:</b> Fiscal
Available Data Years	<b>First Available Year:</b> 2013 <b>Last Available Year:</b> 2019
Geographic Coverage	Prince Edward Island, Nova Scotia, Quebec, Ontario, Manitoba, Saskatchewan, Alberta, British Columbia, Yukon
Reporting Level/Disaggregation	National, Province/Territory, Region, Facility, Corporation, Peer group
Result Updates	
Update Frequency	Every year in Quick Stats; every month in YHS: Insight
	<b>Web Tool:</b>
Indicator Results	Quick Stats <b>URL:</b> <a href="https://www.cihi.ca/en/quick-stats">https://www.cihi.ca/en/quick-stats</a>
Updates	Not applicable
Quality Statement	
Caveats and Limitations	Not applicable
Trends	Coverage in the National Ambulatory Care Reporting System (NACRS) changes over time as more jurisdictions participate.
Issues	For more information on NACRS coverage, please refer to the Coverage tab in the pre-formatted NACRS Quick Stats: <a href="https://www.cihi.ca/en/quick-stats">https://www.cihi.ca/en/quick-stats</a> . Quick Stats results from the previous year can be found here: <a href="https://www.cihi.ca/sites/default/files/document/nacrs-2017-2018-qs-static-table-en.xlsx">https://www.cihi.ca/sites/default/files/document/nacrs-2017-2018-qs-static-table-en.xlsx</a> .  These static tables include both 50th and 90th percentiles at jurisdictional levels. Additional breakdowns based on the 90th percentile are provided by peer group, age and main problem.
Comments	Additional results based on the 50th percentile can be found in the interactive tables, and include breakdowns by main problem, triage level, visit disposition, age and sex: <a href="https://apps.cihi.ca/mstrapp/asp/Main.aspx?server=apmstrextpd_i.cihi.ca&amp;project=Quick+Stats&amp;uid=pce_pub_en&amp;pwd=&amp;evt=2048001&amp;visualizationMode=0&amp;documentID=5C3D461F11E8D6F520190080EFE53D3B&amp;hiddensections=header,path,dockTop,dockLeft,footer">https://apps.cihi.ca/mstrapp/asp/Main.aspx?server=apmstrextpd_i.cihi.ca&amp;project=Quick+Stats&amp;uid=pce_pub_en&amp;pwd=&amp;evt=2048001&amp;visualizationMode=0&amp;documentID=5C3D461F11E8D6F520190080EFE53D3B&amp;hiddensections=header,path,dockTop,dockLeft,footer</a> .  Depending on the acuity of the case or hospital procedures, triage may occur before registration or vice versa. Therefore, the earlier of these 2 events is used as the starting point for calculation of this indicator.  Indicator results are also available as of 2014 in <a href="#">Your Health System: Insight</a> .