

## ER Provincial Summary Report - September 2022

Provincial, Sub-Region and Site Level

### November 1, 2022

Prepared by: Health System Performance and Support (HSPS), Ontario Health

#### Notes:

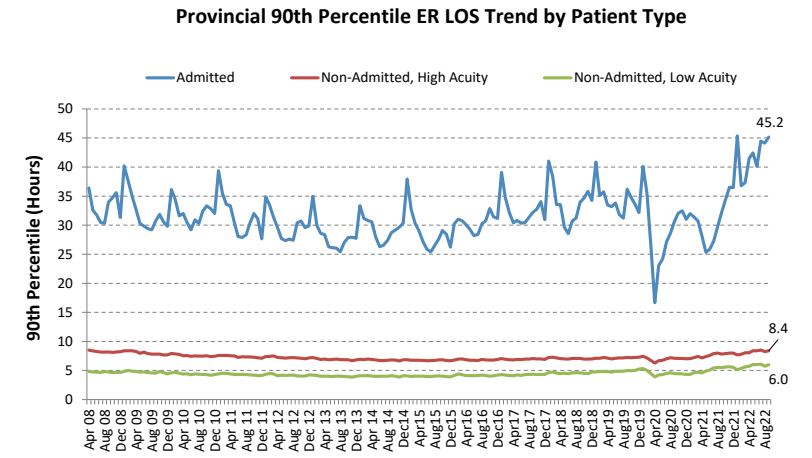
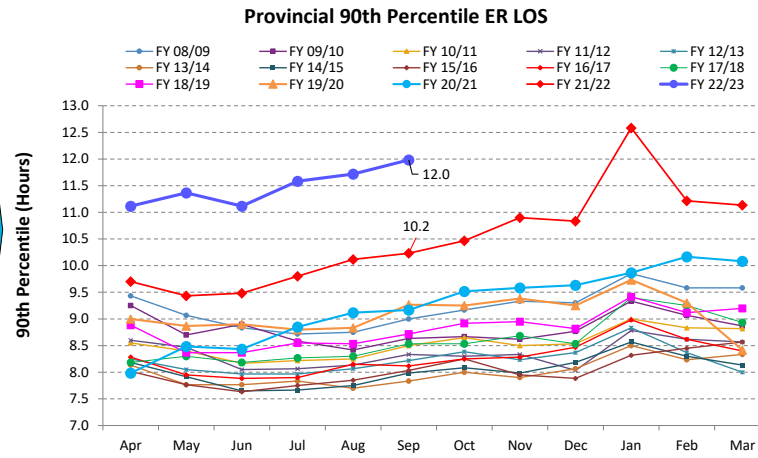
1. Wait times are not displayed when categories have no volume or volume is below 6 cases. Therefore, "NV" or "LV" will be shown when presented in tabular form. In the graphical form, lines are not connected when data is NV or LV for at least two consecutive months.
2. ER Data: FY 21/22 YTD Data Inclusion: April 2021 to September 2021; FY 22/23 YTD Data Inclusion: April 2022 to September 2022
3. NS: This facility either does not offer the service, is not required to report or no data is available.
4. RI (Reporting Issues): Please note that this facility did not meet the data quality criteria for reporting purposes. However the facility's data has been incorporated in the Sub-Region and Provincial level data (where applicable).
5. ER hospital groups are updated based on the final Level 3 data for FY19/20
6. Due to the impact of the COVID-19 pandemic on the health system, results from March 2020 onwards may not conform to historical trends.

*Parts of this material are based on data and information compiled and provided by CIHI. However, the analyses, conclusions, opinions and statements expressed herein are those of the author, and not necessarily those of CIHI.*

# Question: Have there been improvements in ED wait time performance in Ontario?

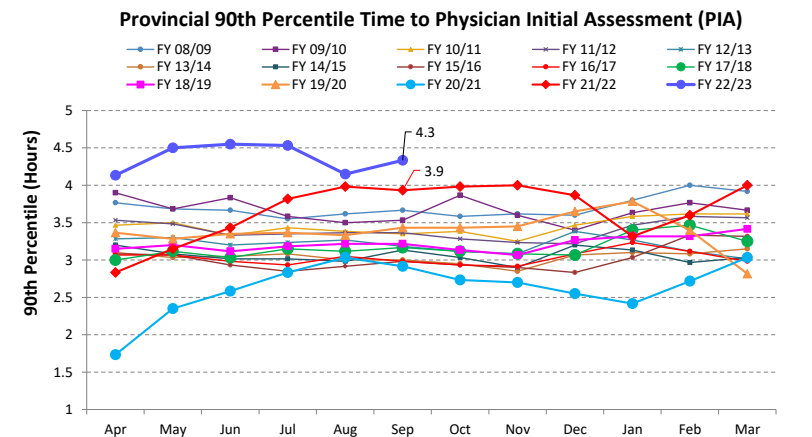
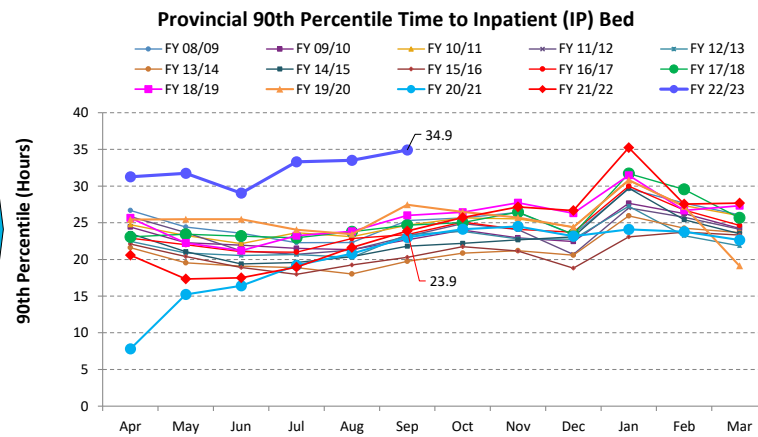
## ED LENGTH OF STAY

- Provincial 90th Percentile ER LOS in September 2022 was 12.0 hours. This was a(n) 17.1% increase compared to September 2021.
- Provincial 90th Percentile ER LOS for admitted patients was 45.2 hours. This was a(n) 40.5% increase compared to September 2021.
- Provincial 90th Percentile ER LOS for Non-Admitted, High Acuity patients was 8.4 hours. This was a(n) 7.0% increase compared to September 2021.
- Provincial 90th Percentile ER LOS for Non-Admitted, Low Acuity patients was 6.0 hours. This was a(n) 8.8% increase compared to September 2021.



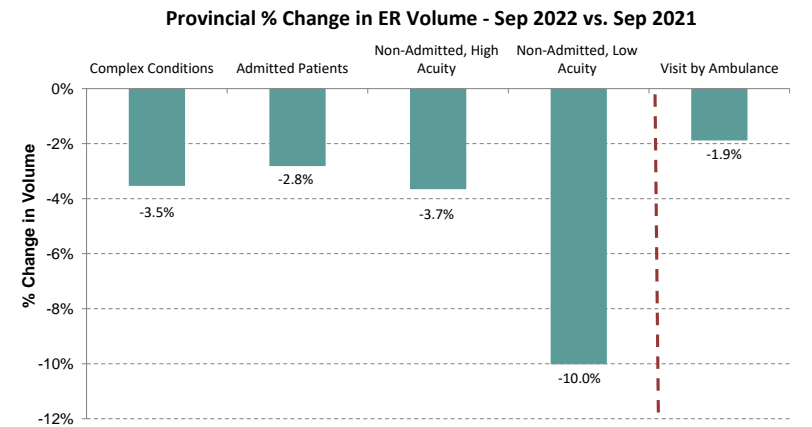
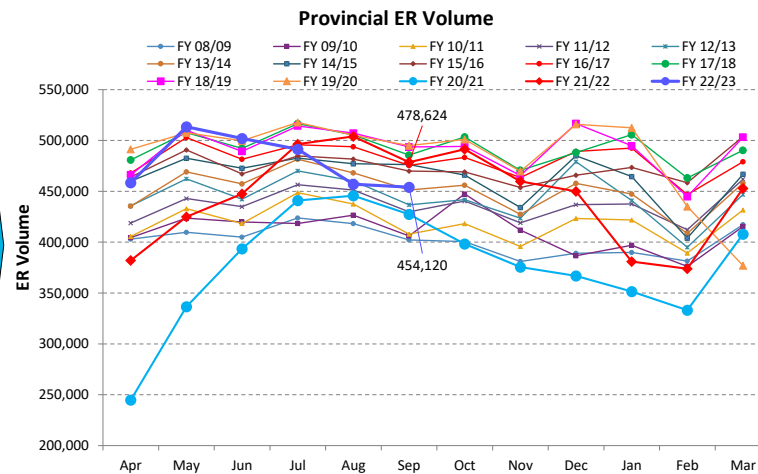
## TIME TO IP BED / TIME TO PIA

- Provincial 90th Percentile Time to Inpatient Bed for September 2022 was 34.9 hours. This was a(n) 46.3% increase compared to September 2021.
- Provincial 90th Percentile Time to PIA for September 2022 was 4.3 hours. This was a(n) 10.2% increase compared to September 2021.



## VOLUME

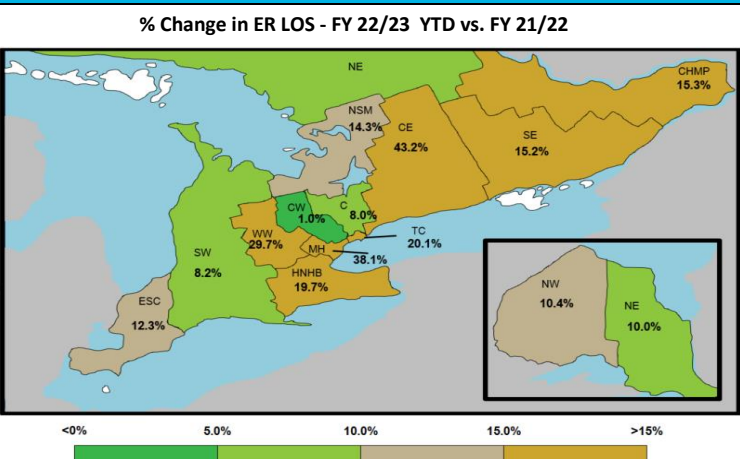
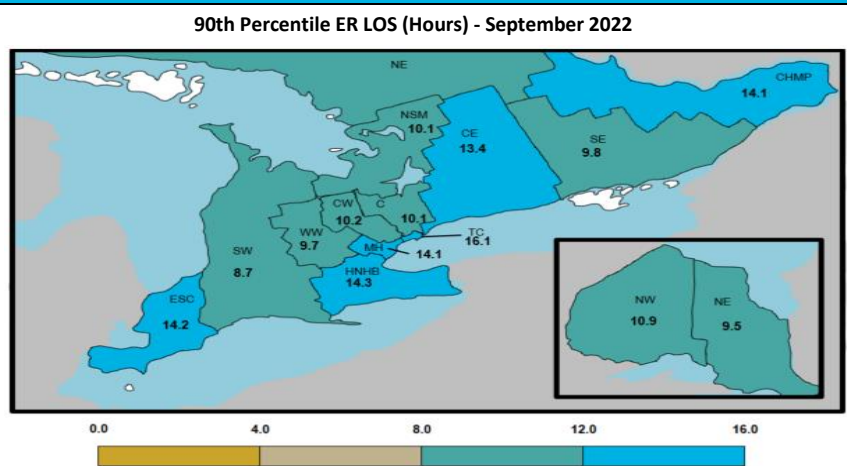
- September 2022 ER volumes were 454,120. This was 5.1% lower compared to September 2021.
  - The decrease in volumes was driven by Non-Admitted, Low Acuity patients which decreased by 10.0%. This patient group accounted for 22.9% of total ER volume for that month.
  - September 2022 ambulance volumes were 87,690 and down 1.9% compared to September 2021.
  - Please note there were 4 sites with Reporting Issues (RI) in September 2022.
- Note: February 2012, 2016 and 2020 were 29 days long (leap year). In order to ensure comparability with previous February data, the volume was adjusted to reflect 28 days of data (i.e., the daily average volume was subtracted from the reported February 2012, 2016 and 2020 volume for 29 days). February 2012, 2016 and 2020 actual volumes were 426,979, 474,814 and 450,598 respectively.



# Question: What is the variation in ER performance at the sub-region, hospital group and site level?

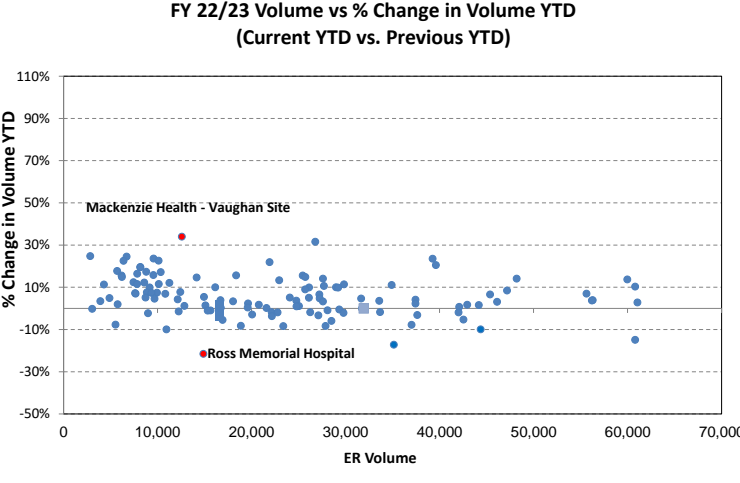
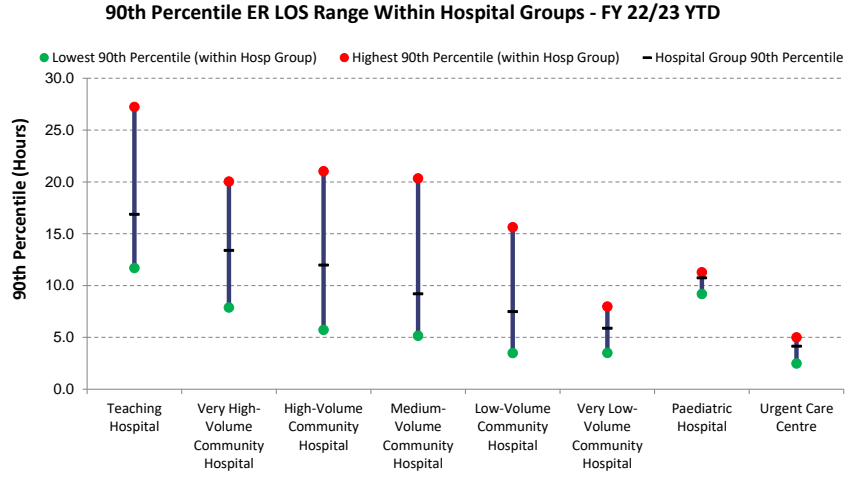
**SUB-REGION OVERVIEW**

- The Sub-Regions with the longest 90th Percentile ER LOS were Toronto Central and Hamilton Niagara Haldimand Brant Sub-Regions. The Sub-Regions with the shortest 90th Percentile ER LOS were South West and North East Sub-Regions.
- 0/14 Sub-Regions had a 90th Percentile ER LOS less than or equal to 8 hours.
- None of the Sub-Regions showed improvement in 90th Percentile ER LOS this fiscal YTD compared to last fiscal YTD.
- The Sub-Regions where ER LOS showed the greatest increase were Central East and Mississauga Halton Sub-regions.



**HOSPITAL GROUP/ VOLUME TRENDS**

- In the current fiscal YTD, the Very Low-Volume Community Hospital group had the shortest 90th Percentile ER LOS (excluding UCCs) while the Teaching Hospital group had the longest ER LOS at the 90th Percentile.
- In the current fiscal YTD, the Teaching Hospital group had the greatest variation in ER LOS between its peer hospitals.
- 88 (73.9%) hospitals experienced an increase and 31 (26.1%) hospitals experienced a decrease in their current fiscal YTD volumes compared to their previous fiscal YTD volumes.
- Mackenzie Health - Vaughan Site and Ross Memorial Hospital experienced the greatest change, a 34% increase and 22% decrease in volumes, respectively.



**IMPROVEMENT**

- For current fiscal YTD (22/23) compared to previous YTD (21/22), the three hospitals showing the greatest improvement in 90th Percentile ER LOS were (excluding UCC):
- South Bruce Grey Health Centre - Durham from the Very Low-Volume Community Hospital Group with a reduction of 14.6%.
- Grey Bruce Health Services - Lions Head Hospital from the Very Low-Volume Community Hospital Group with a reduction of 14.3%.
- Quinte Healthcare - Prince Edward County Memorial from the Low-Volume Community Hospital Group with a reduction of 6.2%.

**Most Improved Sites by Hospital Group - Based on % Change in 90th Percentile ER LOS \***

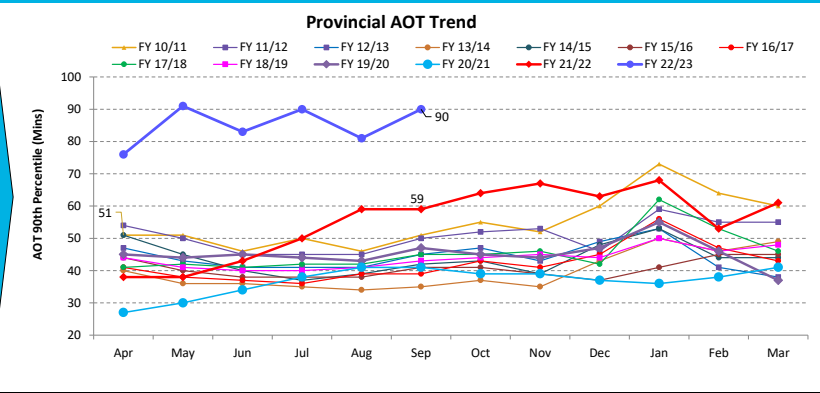
Site	Sub-Region	90th Percentile			Time to PIA (Hrs)	Time to IP Bed (Hrs)
		Current Fiscal YTD	Previous Fiscal YTD	% Change		
<b>Teaching Hospital</b>						
Unity Health Toronto - St. Michael's	Toronto Central	14.8	14.1	5.3%	4.0	23.5
Thunder Bay Regional Health Sciences Centre	North West	11.7	10.3	13.2%	3.8	35.0
<b>Very High-Volume Community Hospital (85,000 and over ER visits)</b>						
Mackenzie Health	Central	9.9	9.9	-0.2%	1.8	47.6
Humber River Hospital - Wilson Site	Central	11.2	10.9	3.5%	5.5	12.9
<b>High-Volume Community Hospital (between 50,000 and less than 85,000 ER visits)</b>						
Toronto East Health Network - Michael Garron Hospital	Toronto Central	12.9	13.2	-2.8%	3.7	19.9
Scarborough Health Network - Centenary	Central East	10.7	10.5	2.2%	2.9	26.7
<b>Medium-Volume Community Hospital (between 30,000 and less than 50,000 ER visits)</b>						
Timmins & District General Hospital	North East	5.2	5.3	-1.9%	2.4	9.4
Joseph Brant Hospital	Hamilton Niagara Haldimand Brant	7.3	7.3	0.2%	2.6	14.3
<b>Low-Volume Community Hospital (between 17,500 and less than 30,000 ER visits)</b>						
Quinte Healthcare - Prince Edward County Memorial	South East	4.6	4.9	-6.2%	2.1	23.2
Huron Perth Healthcare Alliance - Stratford General Hospital	South West	6.6	6.8	-2.0%	3.2	6.9
<b>Very Low-Volume Community Hospital (less than 17,500 ER visits)</b>						
South Bruce Grey Health Centre - Durham	South West	3.5	4.1	-14.6%	1.3	2.1
Grey Bruce Health Services - Lions Head Hospital	South West	3.6	4.2	-14.3%	1.8	1.2
<b>Paediatric Hospital</b>						
Hospital For Sick Children	Toronto Central	11.3	8.8	28.0%	6.6	8.3
Children's Hospital of Eastern Ontario - Ottawa Site	Champlain	10.8	8.2	31.0%	7.2	19.2
<b>Urgent Care Centre</b>						
Kingston Health Sciences Centre - Hotel Dieu	South East	5.0	4.8	4.2%	2.6	1.7
Niagara Health System - Port Colborne General Site	Hamilton Niagara Haldimand Brant	4.0	3.7	8.6%	2.8	NV

\* Values in the '%Change' column may differ from calculations using the numbers within the table as trailing decimals are rounded to one digit.

# Question: Have there been improvements in Ambulance Offload Time?

## AMBULANCE OFFLOAD TIME

- Provincial 90th Percentile Ambulance Offload Times (AOT) in September 2022 was 90 minutes. This was a(n) 52.5% increase compared to September 2021.
- Since April 2010, AOT has increased by 76.5%.
- In the current fiscal YTD, Hamilton Niagara Haldimand Brant and Central East Sub-Region(s) had the highest ambulance volume.
- In the current fiscal YTD, North East and South East Sub-Region(s) had the lowest AOT Rank.



### Ambulance Volumes and AOT by Sub-Region - FY 22/23 YTD

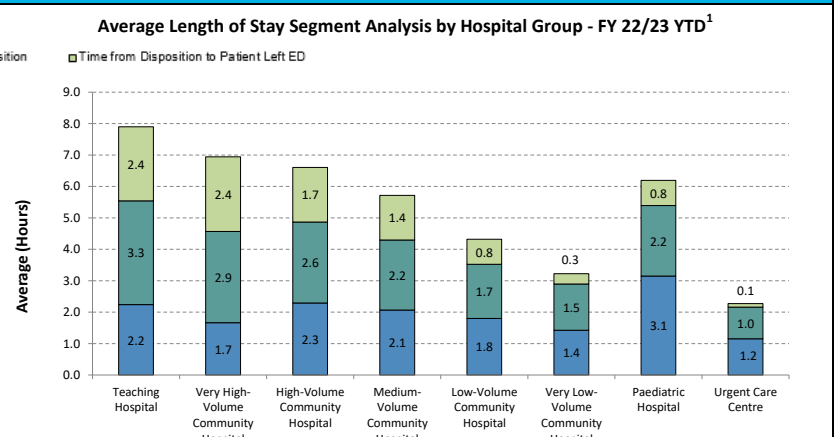
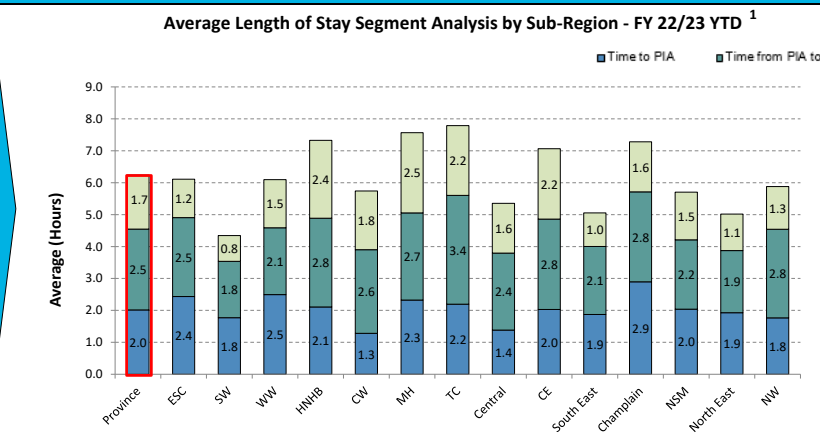
Sub-Region	Ambulance Volume	AOT 90th Percentile (minutes)	AOT Rank
Hamilton Niagara Haldimand Brant	62,676	151	14
Central East	60,110	143	13
Toronto Central	58,308	81	9
Central	58,136	38	3
Champlain	53,809	113	12
South West	45,578	94	10
Mississauga Halton	34,098	70	7
Erie-St.Clair	28,301	67	6
South East	28,223	29	2
Central West	27,676	42	4
North East	26,641	24	1
Waterloo Wellington	26,564	102	11
North Simcoe Muskoka	24,760	44	5
North West	12,778	74	8

Note: For Sub-Regions with the same 90th Percentile AOT, the same AOT rank is assigned.

# Question: What factors are contributing most to ER Length of Stay?

## LOS SEGMENT ANALYSIS

- In the current fiscal YTD, the longest average LOS segment in the province was Time from PIA to Disposition (2.5 hours), followed by Time to PIA (2.0 hours).
- In almost all Sub-Regions and hospital groups, the longest average LOS segment was Time from PIA to Disposition.
- In almost all Sub-Regions and hospital groups, the shortest average LOS segment was Time from Disposition to Patient Left ED.



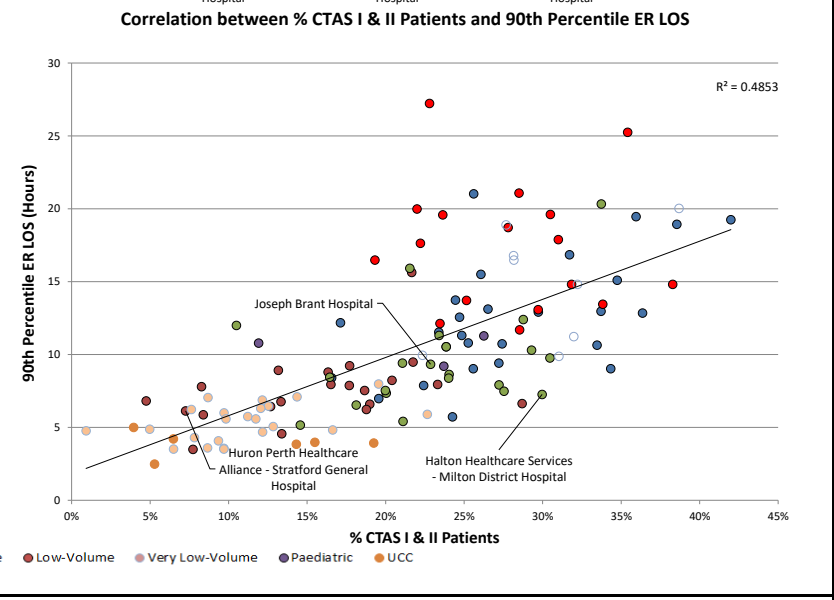
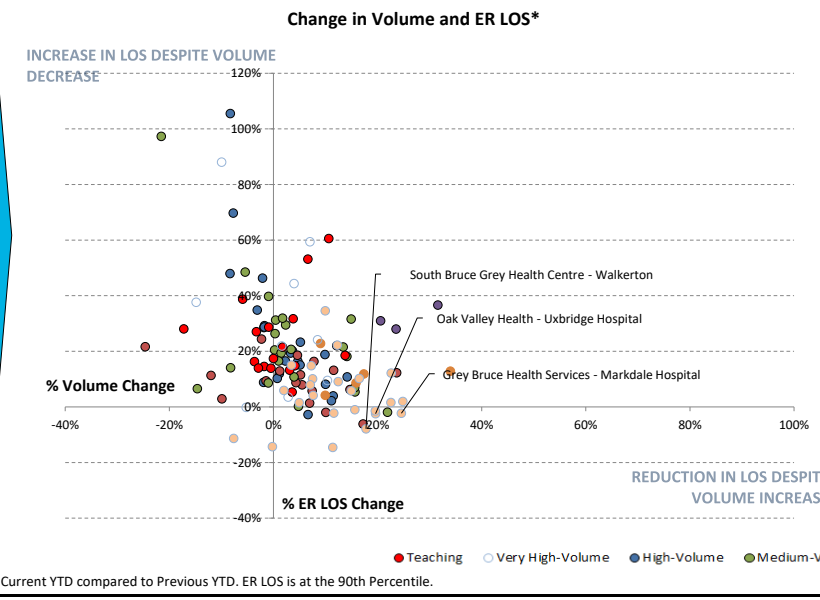
## VOLUME & COMPLEXITY

**VOLUME**

- 11/125 (9%) sites were able to reduce ER LOS despite an increase in their volumes. 9 of the 11 hospitals (82%) that were able to reduce ER LOS despite increasing volumes were from Very Low-Volume Community Hospital Group and Low-Volume Community Hospital Group
- The following hospitals achieved the greatest improvement in ER LOS while at the same time facing the greatest increase in volume:
  - Grey Bruce Health Services - Markdale Hospital faced an increase in volume of 24.6% but reduced ER LOS by 2.3%
  - South Bruce Grey Health Centre - Walkerton faced an increase in volume of 17.8% but reduced ER LOS by 7.9%
  - Oak Valley Health - Uxbridge Hospital faced an increase in volume of 19.6% but reduced ER LOS by 2.4%

**COMPLEXITY**

- In general, hospitals with a higher percentage of complex CTAS I and II patients had a higher 90th Percentile overall ER LOS
- 44/125 (35%) hospitals provided care to an ER population with greater than 25% CTAS I & II patients. Within these hospitals, the following sites had the lowest 90th Percentile ER LOS:
  - Huron Perth Healthcare Alliance - Stratford General Hospital (6.6 hours)
  - Joseph Brant Hospital (7.3 hours)
  - Halton Healthcare Services - Milton District Hospital (7.5 hours)

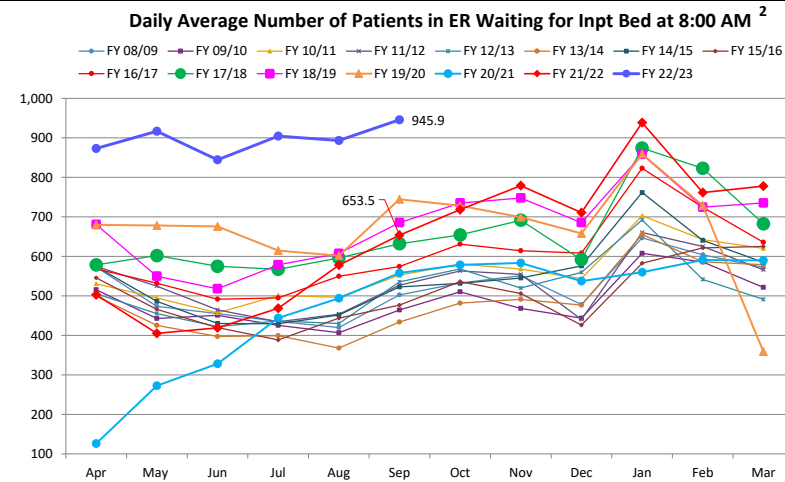


1 This analysis only includes visits with complete information for all segments

# Question: What does the admitted patient population look like?

## TIME TO INPATIENT BED

- At the provincial level, the daily average number of patients in ER waiting for a hospital bed at 8:00 AM was higher in FY 22/23 YTD period compared to the previous fiscal YTD. In September 2022 the number was 945.9. This was an increase of 44.7% compared to September 2021.
- The Sub-Region with the lowest daily average number of patients in ER waiting for a hospital bed at 8:00 AM was North West Sub-Region. The Sub-Region with the highest daily average number of patients in ER waiting for a hospital bed at 8:00 AM was Toronto Central Sub-Region.
- In September 2022, the Sub-Region with the lowest ER LOS for admitted patients was South West Sub-Region (32.8 hours). None of the Sub-Regions had improvement in ER LOS of admitted patients compared to September 2021.



## Sub-Region View: Daily Avg # Pts Waiting for IP Bed at 8AM, ED LOS (Admitted), Time to IP Bed<sup>2</sup>

	Waiting in ER for IP Bed at 8 AM	Admitted ER LOS (hours)	Time to IP Bed (hours)
	Daily Average Volume	90th Percentile	90th Percentile
	Sep22	Sep22	Sep22
Province	945.9	45.2	34.9
Toronto Central	130.4	48.9	38.4
Central	120.2	42.8	35.0
Hamilton Niagara Haldimand Brant	120.0	50.0	40.5
Central East	99.3	50.3	39.2
Mississauga Halton	91.2	52.2	41.8
Champlain	74.6	40.8	27.7
Central West	62.1	56.2	49.7
South West	52.0	32.8	22.9
North East	40.2	35.6	28.3
Erie St.Clair	35.0	36.5	28.3
North Simcoe Muskoka	34.8	33.5	26.2
Waterloo Wellington	34.3	33.3	26.4
South East	32.0	34.9	26.8
North West	19.9	48.6	39.3

Daily Average Volume % change	90th Percentile % change	90th Percentile % change
>= 0%	>=0%	>=0%
-15% to 0%	-15% to 0%	-15% to 0%
<-15%	<-15%	<-15%

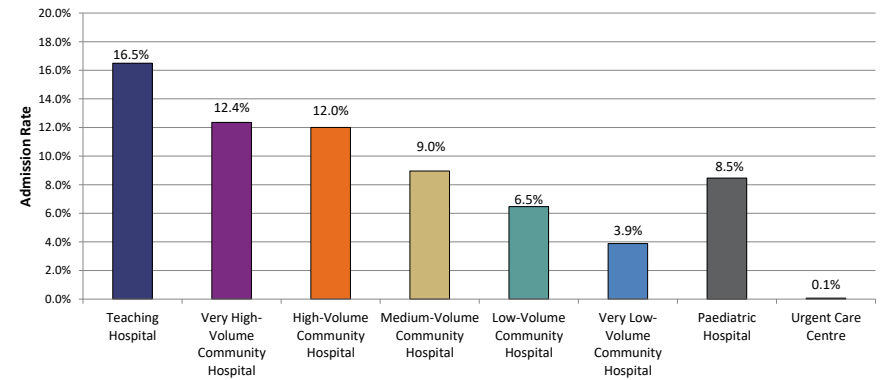
## ADMISSION RATE

- Provincially, the admission rate in September 2022 was 11.2%. This was an increase of 0.3% compared to September 2021 and an increase of 1.0% compared to April 2008 baseline. The Erie St.Clair Sub-Region experienced the largest change in admission rate, a(n) 1.1 percentage point increase compared to September 2021.
- Toronto Central had the highest admission rate in September 2022 at 14.4%. South East Sub-Region had the lowest admission rate in September 2022 at 8.5%.
- Teaching Hospitals had the highest admission rate in the FY 22/23 YTD period at 16.5%. Very Low-Volume Community Hospitals had the lowest admission rate in the FY 22/23 YTD period at 3.9% (excluding UCC).

**Sub-Region View: Admission Rate**

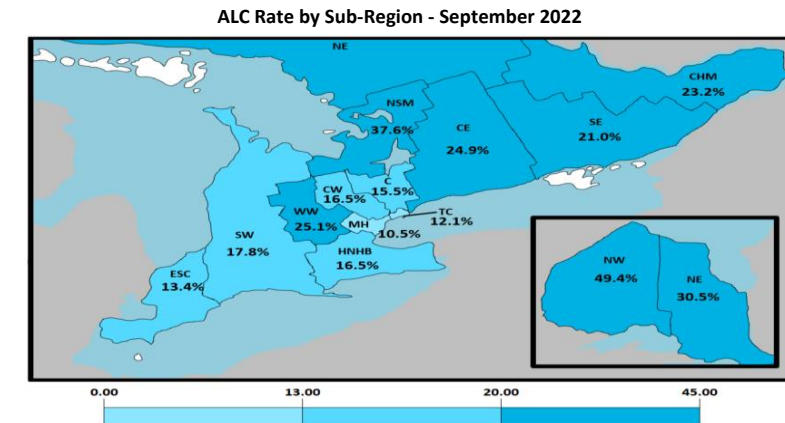
Sub-Region	Admission Rate			% Change	
	Sep22	Sep21	Apr08	Sep22 vs Sep21	Sep22 vs Apr08
Province	11.2%	10.9%	10.2%	0.3%	1.0%
7 Toronto Central	14.4%	14.2%	13.8%	0.14%	0.6%
4 Hamilton Niagara Haldimar	13.5%	13.4%	13.7%	0.11%	-0.2%
1 Erie St. Clair	13.3%	12.2%	9.5%	1.1%	3.8%
6 Mississauga Halton	13.1%	12.7%	11.2%	0.45%	2.0%
13 North East	11.4%	11.0%	9.7%	0.4%	1.75%
3 Waterloo Wellington	11.0%	10.7%	9.90%	0.28%	1.13%
14 North West	10.95%	11.6%	9.86%	-0.7%	1.08%
9 Central East	10.93%	10.2%	10.0%	0.8%	0.9%
11 Champlain	10.91%	10.4%	9.2%	0.49%	1.70%
8 Central	10.4%	10.3%	10.8%	0.11%	-0.4%
12 North Simcoe Muskoka	9.8%	9.8%	9.0%	0.0%	0.8%
5 Central West	9.1%	9.9%	12.1%	-0.8%	-3.1%
2 South West	8.7%	8.16%	7.2%	0.54%	1.5%
10 South East	8.5%	8.24%	6.4%	0.27%	2.1%

## Admission Rate by Hospital Group - FY 22/23 YTD

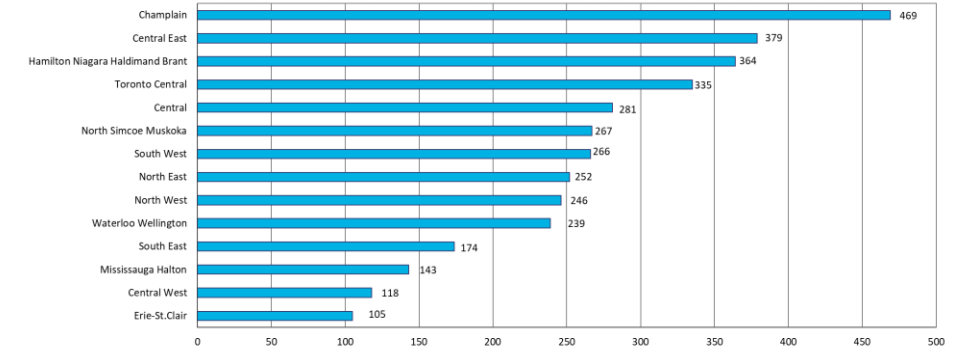


## ALC<sup>3</sup>

- In September 2022, all 14 Sub-Regions had an acute care ALC rate greater than 10%. The highest acute ALC rates were in North West Sub-Region (49.4%), North Simcoe Muskoka Sub-Region (37.6%) and North East Sub-Region (30.5%).
- By Sub-Region, Champlain Sub-Region had the highest number of patients designated ALC on the waitlist in acute care, followed by Central East Sub-Region.
- For more detailed ALC information, please see the Provincial Monthly Alternate Level of Care Performance Summary Report.



## Number of Patients Designated ALC in Acute Care by Sub-Region (September 2022)



<sup>2</sup> Please note that effective September 2014 data, for the purposes of ATC ED performance reports, the indicator "Daily Average # of Patients Waiting for an Inpatient Bed at 8AM" will show values to one decimal point at all levels of aggregations including Sub-Region and Province. This change will be applied to all historic months since April 2008.

<sup>3</sup> **Interpretation Note:** During the data stabilization period, patients designated ALC and transferred to Reactivated Care Centre (RCC) sites under Humber River Hospital, North York General Hospital, Southlake, Markham Stouffville, Mackenzie Health, Sunnybrook Hospital, St Joseph's Health Center Toronto, Unity Health Toronto, Trillium Health Partner, and William Osler Health System will be reported separately from regularly monthly performance reports. Therefore, the figures presented herein do not include the patient population designated ALC at RCC sites.