



Shorter Stays in Emergency Departments National Research Project

SURVEY

(Emergency Department Clinical Directors and Service Managers, DHB Management)

NAME OF RESEARCHERS: Dr Peter Jones, Dr Peter Carswell, A Prof Toni Ashton, Ms Linda Chalmers, Dr Susan Wells, Dr Tim Tenbensel, A Prof. Papaarangi Reid, Dr Elana Curtis, Ms Joanna Stewart, Prof Shanthi Ameratunga.

Thank you for helping with this research, which aims to investigate how the 'Shorter Stays in Emergency Departments' policy was implemented across New Zealand. The survey is in 4 sections. Section A covers changes made in ED, section B covers changes within the rest of the hospital and section C covers changes made in the wider community. Section D relates to DHB funding changes.

Please complete all sections that you believe apply to your role, or that you have knowledge of. If the section does not apply to you, please indicate the person in your DHB that you think would best be able to answer that section in the space provided. If there is insufficient space for you to complete your answer, please continue on a separate sheet.

Shorter Stays in ED Survey

1. Site and Participant Information
1.1. DHB
1.2. Site
1.3. Role: ED Clinical Director ED Service Manager
Other State
The Following Questions Relate to The Introduction of the Shorter Stays in ED (SSED) Health Target in NZ in July 2009. Please tick the box that applies or enter free text where appropriate
2. Who were the SSED Target Champion(s) in your Organisation? (Tick all that apply)
No Champion CEO ED Clinical Director ED Service Manager
ED Nurse Manager ED SMO Other Clinical Director Other Manager
Other Nurse Manager Other SMO
State which department if not ED
3. When did your DHB start implementing changes to meet the SSED Target?
4. When implementing the SSED target did your organisation consider how equity objectives with respect to Māori or other high need groups could be met? Yes No





A. CHANGES in the EMERGENCY DEPARTMENT

Yes	No	Go t	o A.4				
A.1.1. If Yes, please how did	the physical	structure of you	r ED change?				
Physical Change	Tick if Applies	Number of Beds	Estimated Cost (\$NZ)	Date Change Occurred (Month / Year)			
A new ED was built		Old ED New ED					
New bed spaces were made available to the existing ED							
A Short Stay ward was built in ED							
Existing ED beds were redesignated Short Stay							
Existing Other beds were redesignated Short Stay							
A.2. Did the physical structure cha	nge in ED for	any other reason	n than to mee	t the SSED Target?			
Yes	No	Go to A.3					
A.2.1. If Yes, please indicate why the physical structure of your ED changed							
A.2.2. If Yes, please indicate how the physical structure of your ED changed							
A.2.3. If Yes, how many new			- FD kelle				
A.2.3. If Yes, how many new A.3. Please Comment on Any other			ne ED help me	eet the SSED Target			

A.1. Did the Physical Structure of your ED Change in order to help meet the SSED Target?

Shorter Stays in ED National Research Project (HRC 10/588, MEC 10/06/060) Survey CD and SM





Yes	Please fill in the	e following table No	Go to A.5
Role		Full Time Equivalent (FTE)	Date Employed
			(month/year)
Senior Do	ctors		
Medical O	Officers Special Scale		
Registrars			
House Off	icers		
Clinical Nu	urse Specialists		
Emergence Practition	•		
Physicians	S Assistants		
Senior Nu	rses		
Nurses			
Health Ca	re Assistants (Non		
Orderlies			
Clerical St	aff		
Managers			
External C	Consultants		
Māori Kai	awhina/Navigators		
Pacific soc	cial work/support		
Other (sta	ite)		





A.5. Were new roles created for ED staff to help meet the SSED Target?									
Yes		Ple	ease fill in the following	table	No		Go to	o A.6	
Title			Role	FTE		evious R nis perso		Previous FTE (this person)	Date of Change (month/year)
Bed Coordin	ator								
Flow Manag	er								
Breach Avoid Facilitator	dance								
Other (State	Title)								
Other (State	Title)								
A.6. We	re staff	cha	anges in ED made for an	ny other r	easo	n than t	o mee	et the SSED Targ	et?
Yes				No		Go to A	4.7		
A.6.1. If Yes, please indicate why the staff numbers/roles in your ED changed									
A.6.	2. If Y	es,	please indicate how the	staff nun	nber	s/roles i	n your	ED changed	
_			y other comment on EC troduction please make		_	es that o	ccurre	d around the ti	me of the





A.8. Process Changes in the ED

Please indicate the process changes that occurred in ED in order to help meet the SSED Target

ED Processes	Tick if this process changed in your ED	FTE Used on this change	Estimated Cost (\$NZ)	Date of Change (month/year)
Triage				
Primary Nurse Assessment				
Nurse Treatment / Protocol				
Doctor Assessment / Protocol				
Allied Health Assessment / Protocol				
Availability of Investigations				
Admission Process				
Discharge Process				
Māori Specific Protocol / Process				
Pacific Specific Protocol / Process				
Other (State)				

A.9. Please describe how the ED processes changed and/or make any comments on process changes in the ED that occurred in order to help meet the SSED target.

A.10. If you feel someone else in your DHB is best equipped to answer Section A please state their name / contact details here:





B. CHANGES in the HOSPITAL

Yes		No	Go to B.2				
B.1.1. If Yes, how did the physical structure of your hospital change? (tick all that apply)							
Physical Change	Tick if Applies	Type of Bed (Medical, Surgical, Rehabilitation etc)	Number of Beds	Estimated Cost (\$NZ)	Date Change Occurred (Month / Year)		
More Short Stay bed spaces were built							
More Long Stay bed spaces were built							
More Rehabilitation bed spaces were built							
Other Physical Change (State)							
B.2. Did the physical stru SSED Target? Yes B.2.1. If Yes, please		No	Go to B.3		eet the		
B.2.2. If Yes, please	indicate ho	w the physical stru	ucture of your hos	spital changed			
B.3. Please Comment on Target	Any other P	hysical Changes r	nade to the Hosp	ital help meet	the SSED		

B.1. Did the Physical Structure of your Hospital change in order to help meet the SSED Target?





B.4. Were more Staff employed in the Hospital to help meet the SSED Target?

Yes	Please fill in the following table	No	Go to B.5	

Role	Full Time	Department(s)	Date Started
	Equivalent (FTE)		(month/year)
			(month) year)
Senior Doctors			
Medical Officers Special			
Scale			
Registrars			
House Officers			
Clinical Nurse Specialists			
Emergency Nurse			
Practitioners			
Physicians Assistants			
Senior Nurses			
Nurses			
Health Care Assistants (Non			
Clinical)			
Orderlies			
Clerical Staff			
Managers			
External Consultants			
Māori Kaiawhina/Navigators			
Pacific social work/support			
Other (state)			





Yes	Please fill in the following table No			to B.6	
Title	Role	FTE	Date Created (month/year)	Previous Role (this person)	Previous FTE (this person)
Bed Coordinator					
Flow Manager					
Breach Avoidance Fa	cilitator				
Other (State Title)					
Other (State Title)					
Other (State Title)					
Yes	changes in Hospital made	No	Go to B.7		
B.6.2. If Yo	es, please indicate how the	e staff number:	s/roles in you	ur Hospital change	ed





B.8. Process Changes in the Hospital

Please indicate the process changes that occurred in the hospital in order to help meet the SSED Target

Hospital Processes	Tick if this process changed in your Hospital	FTE Used on this change	Estimated Cost (\$NZ)	Date of Change (month/year)
Admission Process				
Primary Nurse Assessment				
Nurse Treatment / Protocol				
Doctor Assessment / Protocol				
Allied Health Assessment / Protocol				
Availability of Investigations				
Discharge Process				
Māori Specific Protocol / Process				
Pacific Specific Protocol / Process				
Other (state)				

B.9. Please describe how the processes changed in your hospital and/or make any comments on process changes in the hospital that occurred in order to help meet the SSED target.

B.10. If you feel someone else in your DHB is best equipped to answer Section B please state their name / contact details here:





C. CHANGES in the COMMUNITY

Yes		ill in table did the phys	No Go		nown are change?	
Physical Change		Tick if Applies	Type of Beds / Intervention / Service	Number of Beds / Services	Estimated Cost (\$NZ)	Date Change Occurred (Month / Year)
More Rest Hom Residential Care were built / ope	e bed spaces ened					
More Accident a Clinics were bui						
More General P were built / ope						
Interventions to attendances we	•					
Availability of Ir	vestigations					
Other Physical ((State)	Change					
Yes Yes	If Yes, please	et? indicate wh	No Go to the physical structure with the physical structure.	o C.3 Unkr	nown y healthcare c	changed
C.2.2.	if Yes, please	indicate no	w the physical structur	e of communi	ty nealthcare	cnanged
	comment on	_	hysical Changes made	to community	y healthcare 1	to help

C.1. Did the Physical Structure of Community Healthcare change in order to help meet the SSED





C.4. Were more Staff emplo	yed in the Communit	ry to help meet the SSED	Target?
Yes Please fill in ta	able No	Go to C.5 Unknowr	
Role	Full Time Equivalent (FTE)	Site / Role	Date Started (month/year)
General Practitioners			
Medical Officers Special Scale			
Geriatricians			
Clinical Nurse Specialists			
Emergency Nurse Practitioners			
Physicians Assistants			
Senior Nurses			
Nurses			
Health Care Assistants (Non Clinical)			
Clerical Staff			
Managers			
External Consultants			
Māori Kaiawhina/Navigators			
Pacific social work/support			
Other (state)			





Yes	Please fill in the fo	llowing table No	Go to C.6		
ile	Role	FTE	Date Created (month/year)	Previous Role (this person)	Previous FTE (this person)
C.6. Were sta	aff changes in the Com	munity made for any	y other reasc	on than to meet t	he SSED
Yes		No O	Go to C.7	Unknown	
C.6.1. If	f Yes, please indicate w	ny the staff numbers	/roles in you	r Community cha	nged
C.6.2. I	f Yes, please indicate h	ow the staff number	s/roles in you	ur Community ch	anged

of the SSED target introduction please make them here.





C.8. Process Changes in the Community

Please indicate the process changes that occurred in the Community in order to help meet the SSED Target

Community Processes	Tick if this process changed in your Community	FTE Used on this change	Estimated Cost (\$NZ)	Date of Change (month/year)
Admission Process				
Nurse Treatment / Protocol				
Doctor Assessment / Protocol				
Allied Health Assessment / Protocol				
Availability of Investigations				
Discharge Process				
Māori Specific Protocol / Process				
Pacific Specific Protocol / Process				
Other (state)				

C.9. Please describe how the processes in the Community changed and/or make any comments on process changes in the community that occurred in order to help meet the SSED target.

C.10. If you feel someone else in your DHB is best equipped to answer Section C please state their name / contact details here:





D.1. Was your DHB budget allocation altered as a result of the SSED Target									
Yes	No	Go to D.2	Unknown						
D.1.1. Please state how the budget allocation changed									
Increased Decreased	Amount (\$NZ) Amount (\$NZ)								
D.2. Did your DHB reallocate funding as a result of the SSED Target (2008-2012)?									
Yes please fill in table No Go to D.3 Unknown									
Site of Care	Budget Increased	Amount	Budget Decreased	Amount Decreased					
	Yes/No	Increased \$NZ	Yes / No	\$NZ					
ED									
Hospital									
Primary Care									
Long Term									
Residential Care									
Māori Health									
Pacific Health									
Other									
D.3. Please mal	ke any other commer	nts related to funding	and budgets you thin	nk may be relevant					
to the SSED target									

D.4. If you feel someone else in your DHB is best equipped to answer Section D please state their

name / contact details here: