

Scottsdale Healthcare ER created short-wait model

Recent news articles on Arizona's emergency-care system cite the low marks it received in a December report from the American College of Emergency Physicians. Should residents of the Northeast Valley be concerned about our hospitals' ability to provide emergency care? I offer an emphatic "no" to that question.



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In fact, Scottsdale Healthcare has consistently been ahead of the curve when it comes to improving patient care, adding emergency beds, investing in medical talent, preparing for large-scale disasters and forging partnerships with local, state and federal agencies.

Several years ago, we launched a project that has made a profound difference in patient care. Studying how each hospital service interacts from the

time a patient arrives until he or she goes home decreased ER wait times, improved quality of care and improved patient satisfaction. It's a model that others are only now beginning to follow.

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As a result, Scottsdale Healthcare ER patients typically spend an average of 3 hours "from door-to-discharge," compared to Arizona's average of 5 hours and 37 minutes. The national average ER wait time is 4 hours, according to a June 2007 study by Press Ganey Associates.

ER wait times are updated every 3 minutes on www.shc.org, providing an honest look at the time it takes to get a patient from the ER's front desk to an exam room, reflecting the patient in the waiting room with the longest wait. Of course, heart attack and other critical patients will have priority. The benchmark door-to-heart-catheterization balloon time is under 90 minutes.

Scottsdale Healthcare Osborn is the Northeast Valley's only Level I trauma center, and its ER includes a primary stroke center. Both the Osborn and Shea hospitals are chest-pain centers and members of the Arizona Cardiac Arrest Consortium.

Scottsdale Healthcare Shea has the Northeast Valley's only dedicated pediatric ER, separate from the adult emergency department and staffed by pediatric specialists. Pediatric surgeons and anesthesiologists can care for children requiring emergency surgery.

Our hospital at Scottsdale Healthcare Thompson Peak and the expansion of the ER and trauma center at Scottsdale Healthcare Osborn have helped keep pace with population growth, another issue noted in the ACEP report. All three hospitals have flexibility to handle increased volume as well as local disasters.

Emergency departments and trauma centers do face significant challenges in

providing care 24/7, and lawmakers should take action to address these issues. Arizona can in the upcoming legislative session improve the medical-liability environment and attract and maintain a broader workforce willing to take call in our emergency departments and trauma centers by supporting the burden-of-proof bill sponsored by state Sen. Carolyn Allen, R-Scottsdale. We also must make sure that state budget cuts do not negatively impact hospitals' ability to provide emergency and trauma care.

Nine out of 10 patients tell us they would recommend our ER to others. While Scottsdale Healthcare is better positioned than most for providing timely, quality emergency care, we continually look at how to improve the care we provide to our community.

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