



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
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CIRCULAR LETTER: DHCQ 10-02-531

TO: Acute Care Hospital Chief Executive Officers
Chief Nursing Officers
Emergency Department Directors

FROM: John Auerbach, Commissioner, Department of Public Health

Alice Bonner, PhD, RN
Director, Bureau of Health Care Safety and Quality

DATE: February 25, 2010

RE: 1) Reducing Emergency Department Patient Boarding and
2) Submitting Code Help Policies to the Department of Public Health

The Department and the Boarding and Patient Flow Task Force are focused on efforts to reduce and eventually eliminate the boarding of patients in the emergency departments of Massachusetts. The goal of our efforts to eliminate ED crowding is to maintain the hospitals' capacity to accept and manage new patients presenting for emergency care, which requires that hospitals move admitted patients out of the ED as quickly and safely as possible (according to the literature, ideally within 30 minutes). In Massachusetts, we define a "boarder" as a patient who remains in the ED two hours after the decision to admit. Boarding in the emergency department has been shown to result in longer hospital lengths of stay, higher rates of recurrent myocardial infarction, increased mortality, and is associated with multiple other adverse events.

Update on Efforts to Reduce Patient Boarding

Inefficient care transitions (transfer of a patient to another setting or another service within the hospital) have been identified by the Task Force as a priority issue. A subgroup of the Boarding and Patient Flow Task Force is working on smoothing care transitions from hospitals to skilled nursing facilities in an effort to improve patient flow and reduce boarding in the emergency department. This is an opportunity for collaboration between extended care facilities and hospitals; members of the subgroup will identify best practices, as well as areas for improvement. DPH has also been working with DMH, MHA and other organizations to develop policies to expedite the disposition of behavioral health patients to appropriate settings.

In addition, the Bureau of Health Care Safety and Quality, through its Division of Health Care Quality, will provide additional training to its hospital surveyors on identifying boarding issues in the emergency department. We hope that this will help to highlight and resolve specific issues within emergency departments.

Code Help Policies

In previous correspondence from the Department, most recently in September, 2009 in circular letter DHCQ 09-09-522,

http://www.mass.gov/Eeohhs2/docs/dph/quality/hcq_circular_letters/dhcq_0909522.pdf

hospitals have been advised to update their Code Help policies (the goal of which is to move all admitted patients out of the Emergency Department within 30 minutes), including the specified triggers for activation of the policy, a defined activation process, and a plan for regular testing. The Code Help policy should also state that if implementation of the Code Help policy does not eliminate the burden of admitted patients in the ED in a timely fashion, or if the severity of the initial situation warrants it, then the hospital must implement its appropriate emergency management / disaster plans and protocols to create additional inpatient capacity.

It has been several years since the Department requested a copy of each hospital's Code Help policy. We are now requesting that a current version of each hospital's Code Help policy be sent electronically for review by March 12, 2010 to:

DPH.DHCQ@massmail.state.ma.us

Please be sure to include the name, phone number, and e-mail of the contact person should the Department have any questions about the policy that is submitted.

Department's Division of Health Care Quality Phone Line

In the event that you or your ED staff have concerns about unusual situations related to boarding in the emergency department, a phone line is available 24 hours a day for consultation with or reporting to the Department at 800-424-4666. Please ask for the clinician on call.

Thank you for your continued support in these efforts to improve patient flow and care throughout the facilities in the Commonwealth.