

Memorandum

To: 2017 Council

From: Dean Wilkerson, JD, MBA, CAE
Executive Director & Council Secretary

Date: September 26, 2017

Subj: Amended Resolution 13(16) ED Boarding and Overcrowding is a Public Health Emergency

The 2016 Council and the Board of Directors adopted Amended Resolution 13(16):

RESOLVED, That ACEP request that the Secretary of the Department of Health and Human Services (HHS) under section 319 of the Public Health Service (PHS) Act determines that emergency department boarding and hallway care is an immediate threat to the public health and public safety; and be it further

RESOLVED, That ACEP work with the United States Department of Health and Human Services, the United States Public Health Service, The Joint Commission, and other appropriate stakeholders to determine the next action steps to be taken to reduce emergency department crowding and boarding with a report back to the ACEP Council at the Council's next scheduled meeting; and be it further

RESOLVED, That ACEP publicly promote the following as sustainable solutions to hospital crowding which have the highest impact on patient safety, hospital capacity, ICU availability, and costs:

1. Smoothing of elective admissions as a mechanism for sustained improvement in hospital capacity.
2. Early discharge strategies (e.g., 11:00 am discharges, scheduled discharges, staggered discharges) as a mechanism for sustained improvement in hospital capacity.
3. Enhanced weekend discharges as a mechanism for sustained improvement in hospital capacity.
4. The requirement for a genuine institutional solution to boarding when there is no hospital capacity, which must include both providing additional staff as needed AND redistributing the majority of ED boarders to other areas of the hospital.
5. The concept of a true 24/7 hospital.

ACEP continues to work with HHS and the appropriate committees of jurisdiction to identify emergency department boarding solutions, which include a variety of options. This issue was addressed specifically in comment letters responding to the 2018 proposed Medicare Physician Fee Schedule and the 2018 proposed Outpatient Prospective Payment System rules. ACEP has continued efforts to work with The Joint Commission, most recently at a meeting in June 2017, and with other stakeholders to address and eliminate boarding in the ED

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Regarding the second resolved, in June 2016, the Board reviewed the updated information paper, [“Emergency Department Crowding High-Impact Solutions”](#) The Emergency Medicine Practice Committee and representatives from the Emergency Nurses Association, the Society of Emergency Medicine Physician Assistants, and the American College of Osteopathic Emergency Physicians collaborated on the revisions. ACEP has in the past and will continue to hold meetings with TJC and other organizations about boarding.

The Public Relations Committee updated ACEP’s crowding and boarding messaging to include the solutions proposed in the resolution. Boarding solutions were promoted to news media organizations, including WLOS-TV in Asheville, NC, which received ACEP’s journalism award, an Emmy, and an Edward R. Murrow award

ACEP sponsored the Hospital Flow Conference in Boston, MA in May 2017. The conference focused on improving hospital efficiency, capacity, and flow and provided participants with the knowledge and tools needed to eliminate ED boarding, improve hospital capacity, enhance patient safety, shorten length of stay, and improve patient and staff satisfaction. The processes discussed do not add cost or staff, are associated with significant and sometimes dramatic savings to the institution, and focus on a small number of practically proven key processes that can dramatically improve overall hospital capacity. The conference provided an introduction to these processes, followed by workshops to discuss the practical details, both procedural and political, in implementing institutional change. The faculty included individuals who have had firsthand experience in implementing these processes at their own institutions. There were 233 attendees. [Resources](#) are available on ACEP’s and cosponsor’s Websites.