

Groups working to keep the ER available for true emergencies

If you show up at a local emergency room for treatment, chances are you're there as a last resort: you or a loved one are very sick, it's the middle of the night, and/or a terrible accident has occurred. That's what hospitals' emergency departments (EDs) are for.

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But if you arrive at the ED and your injury or illness isn't life-threatening, you may be facing a long wait because lots of people are using emergency departments for medical problems that aren't really emergencies. Some situations may not have become emergencies in the first place, if patients had access to more routine care or knew more about when to go to the ED and when not to go.

This excess volume through the ED is frustrating for everyone. It makes for long waits, increases the costs of medical care, makes it harder to run an efficient emergency department, and complicates follow-up for patients.

In Santa Cruz County — where data suggest some patients are using the hospitals' EDs too frequently for medical problems such as colds, coughs, bladder infections, back pain, sprains, and headaches — a group of local medical groups and hospital representatives got together recently to try to figure out ways to reduce unnecessary ED visits while still helping patients get the care they need.

The "ED Alternatives Work Group" was convened in June 2008 by the Health Improvement Partnership of Santa Cruz County. HIP is a local countywide collaborative of health, foundation, government and community leaders including local hospitals as well as the two medical organizations we represent. HIP's goal is to increase access to health care in Santa Cruz County and to build a stronger local health care system.

The ED Alternatives Work Group met

several times to explore the extent of the problem and to come up with some alternatives. Many of the HIP partners (including local safety net clinics) are already providing solutions such as extending medical clinic hours to evenings and weekends, making certain services (such as X-rays and other imaging) available after hours, providing information to patients that helps them make better decisions about when to seek help in the ED, changing to same-day scheduling to make it easier for patients to be seen in their primary care physicians' office, and improving communication among medical providers involved in a patient's care.

We're excited about the opportunity to distribute a booklet called "What To Do When Your Child Gets Sick" to the parents and caregivers of all Santa Cruz County children ages 6 and under. The booklets, available in both English and Spanish, are now included in the First 5 Newborn Kit available in the three hospitals. The HIP group recommended making these booklets available in physician's offices, EDs and urgent care centers and using them to have the important and reassuring conversation about appropriate ED use and alternatives for sick children. A Michigan study of parents who received the same booklet found significant decreases in ED use.

We're confident that through this and other initiatives, HIP's ED Alternatives Work Group will help Santa Cruz County residents make better use of local EDs, which in turn will help our entire health system. We recognize that one of the most important factors in ED use is access to routine care in the first place.

Like some fevers and aches and pains, long waits in the ED are actually symptoms of a bigger problem — one that HIP and its partners are eager to treat.

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