

Hospital Surveys – Part A

RESPONSES—March, 2002

I. General Agency Information Responses: 207

A. Type of hospital (check all that apply):

For Profit	<u>51 (25%)</u>
Private Not for Profit	<u>70 (34%)</u>
State	<u>0 (0%)</u>
County	<u>27 (13%)</u>
City	<u>4 (2%)</u>
Hospital District	<u>59 (29%)</u>
Hospital Authority	<u>7 (3%)</u>

B. Number of healthcare personnel within your hospital:

Active Medical Staff	<u>131 avg. (22,475\171 responses)</u>
Midlevel Provider	<u>22 avg. (2,458\113 responses)</u>
RN	<u>163 avg. (26,613\163 responses)</u>
LVN	<u>40 avg. (6,331\160 responses)</u>
Clinical Assistants/Tech.	<u>77 avg. (10,678\138 responses)</u>

C. How many licensed beds are in your institution? Responses: 204

<20	<u>15 (7%)</u>
20-50	<u>69 (34%)</u>
51-100	<u>34 (17%)</u>
101-200	<u>35 (17%)</u>
201-400	<u>28 (14%)</u>
>400	<u>23 (11%)</u>

D. How many beds are actually being operated/staffed? Responses: 202

<20	<u>32 (16%)</u>
20-50	<u>67 (33%)</u>
51-100	<u>32 (16%)</u>
101-200	<u>35 (17%)</u>
201-400	<u>26 (13%)</u>
>400	<u>10 (5%)</u>

ICU Beds Responses: 199

0	<u>58 (29%)</u>
1-3	<u>17 (9%)</u>
4-10	<u>67 (34%)</u>
11-20	<u>27 (14%)</u>
21-30	<u>6 (3%)</u>
31-40	<u>9 (5%)</u>
>40	<u>15 (8%)</u>

ER Beds Responses: 199

1	<u>11 (6%)</u>
2-5	<u>74 (37%)</u>
6-10	<u>43 (22%)</u>
11-20	<u>36 (18%)</u>
21-30	<u>21 (11%)</u>
31-40	<u>5 (3%)</u>
>40	<u>9 (5%)</u>

E. Does your institution actively participate in the RAC? **Responses: 201**

Y 178 (89%)

N 23 (11%)

F. Does your institution receive Disproportionate Share funding? **Responses: 203**

Y 93 (46%)

N 110 (54%)

G. Is your hospital designated as a critical access facility? **Responses: 198**

Y 46 (23%)

N 152 (77%)

1. Do you have hospital-based EMS at your facility? **Responses: 199**

Y 47 (24%)

N 152 (76%)

2. Is the next nearest EMS service within 35 miles of your hospital? **Responses: 193**

Y 183 (95%)

N 10 (5%)

H. Is your facility a designated trauma facility? **Responses: 206**

Y 111 (54%)

N 95 (46%)

1. If no, are you seeking designation? **Responses: 87**

Y 37 (43%)

N 50 (57%)

I. If yes, what level of designation have you achieved? **Responses: 142**

I 6 (4%)

II 6 (4%)

III 31 (22%)

IV 89 (63%)

J. Do you function as the "Lead Facility" within your RAC? **Responses: 195**

Y 20 (10%)

N 175 (90%)

K. What is the distance to the next highest level of care from your facility? **Responses: 206**

<10miles **47 (23%)**

10-20miles **20 (10%)**

21-50miles **67 (33%)**

51-100miles **49 (24%)**

>100miles **18 (9%)**

N/A **5 (6%)**

L. How many transfer agreements does your hospital currently have with other facilities?

Responses: 204

<5 **128 (63%)**

5-10 **51 (25%)**

11-15 **10 (5%)**

16-20 **2 (1%)**

>20 **13 (6%)**

M. How many patients does your hospital transfer to acute care facilities in an average month?

Responses: 203

<5	<u>44 (22%)</u>
5-10	<u>55 (27%)</u>
11-15	<u>20 (10%)</u>
16-20	<u>24 (12%)</u>
>20	<u>60 (30%)</u>

N. How many acute transfers does your hospital receive from other facilities per month?

Responses: 204

<5	<u>139 (68%)</u>
5-10	<u>18 (9%)</u>
11-15	<u>15 (7%)</u>
16-20	<u>2 (1%)</u>
>20	<u>30 (15%)</u>

O. Does your facility have communication with EMS prior to patient arrival? **Responses: 186**

Y 179 (96%)

N 7 (4%)

P. If yes, please describe. **Responses: 186**

Radio	<u>162 (87%)</u>
Cell Phone	<u>100 (54%)</u>
Dispatch	<u>61 (33%)</u>
Other (please specify)	<u>19 (10%)</u>

- AHERN available (not currently using)
- Designated Red Phone
- Dedicated Land Line
- Hospital phone
- Land line for telemetry from HFD
- Land phone
- MEDCON devoted line
- Other [2 responses]
- Phone to phone
- Regular Land (phone) lines
- Satellite phone
- Scanner
- Telemetry
- Telephone [4 responses]
- Telephone—they phone us

Q. Please list the (estimated) average number of FTE's (in a 24 hour period)...

	...in the ED	...in the hospital
RN	8.5 FTEs avg. (1,469\173 responses)	73.0 FTEs avg. (12,486\171 responses)
LVN	1.6 FTEs avg. (202\123 responses)	20.3 FTEs avg. (3,361\166 responses)
TECH	3.4 FTEs avg. (421\123 responses)	31.5 FTEs avg. (4,469\142 responses)
Resp. Therapy	1.2 FTEs avg. (94\81 responses)	7.5 FTEs avg. (1,134\152 responses)
Radiology tech	1.4 FTEs avg. (122\87 responses)	9.3 FTEs avg. (1,551\166 responses)
Other	2.6 FTEs avg. (196\74 responses)	85.2 FTEs avg. (6,645\78 responses)

R. What is the average time on diversion per month? (i.e. the number of hours your hospital request closure to ambulance traffic) **Responses: 197**

0-5 **161 (82%)**
5-10 **5 (3%)**
10-20 **8 (4%)**
20-30 **8 (4%)**
30-50 **2 (1%)**
>50 **13 (7%)**

S. Please list the reasons for diversion. **Responses: 207**

no ICU beds	<u>79 (38%)</u>
staffing issues	<u>23 (11%)</u>
no radiology/ CT	<u>24 (11%)</u>
no OR availability	<u>6 (3%)</u>
other	<u>81 (39%)</u>

Cath lab down

Do Not Divert [32 responses]

- we stabilize and transfer if necessary
- never divert; closest hospital is 65 miles
- in the year I've been here, it hasn't happened and not likely will
- activate our disaster plan if necessary
- not applicable [5 responses]
- so far that hasn't been a problem
- (we have a) first aid suite only
- we have never been on diversion [4 responses]
- no diversion this past year [3 responses]
- no diversion status documented for emergency\trauma patients

EKG down

Equipment failure [2 responses]

ER diversion

ED saturation [11 responses]

- rarely happens
- rare; we hold ER and recovering, don't close for lack of ICU which could cause trauma diversion
- if ED unable to manage patients due to 1) monitoring capacity exceeded; 2) MO hospital beds and ED backfilled

Flux ambulance traffic and patient load

Higher level of care [3 responses]

Multiple trauma victims from MVCs off I-45 temporary (<4 hours) exceeded available staffing and resources

No acute care beds [5 responses]

No beds [6 responses]

No critical care beds

No open floor beds

No medical beds

No med-surg beds [2 responses]

No orthopedic coverage

No telemetry beds available [6 responses]

No psychiatric beds

Only once in the last 2 years due to ER overwhelmed with patients

Only divert for internal crisis

Only if hospital full—ER full to capacity holding critical pts.

Other

Rarely happens

Specialty care

Specialty physician care

T. Is your facility currently experiencing a nursing shortage? **Responses: 200**

Y 150 (75%)

N 50 (25%)

U. How many nursing FTE position's are currently vacant in your hospital? **Responses: 160**

26.9 FTEs avg. (4,305\160 responses)

V. How many ED visits do you have daily? **Responses: 204**

<2 **17 (8%)**

3-6 **29 (14%)**

7-20 **34 (17%)**

21-50 **49 (24%)**

51-100 **42 (21.5%)**

101-200 **23 (11%)**

201-300 **9 (4%)**

>310 **1 (0.5%)**

W. What percentages of patients seen in the ED are admitted to the hospital? **Responses: 200**

<10% **47 (24%)**

10%-20% **93 (47%)**

20%-30% **40 (20%)**

>30% **20 (10%)**

X. What is the average length of stay in the ED (in hours)? **Responses: 199**

<1 **18 (9%)**

1-2 **74 (37%)**

2-3 **65 (33%)**

3-4 **24 (12%)**

4-5 **10 (5%)**

5-6 **3 (2%)**

>6 **5 (3%)**

Y. Please describe the operative capabilities in your hospital. **Responses: 207**

24-hour in-house coverage **53 (28%)**

On-call coverage **145 (70%)**

Maximum number of operative suites available in a 24-hour period **109 (53%)**

Minimum number of operative suites available in a 24-hour period **100 (48%)**

Z. What specialty services are offered at your institution? **Responses: 207**

Orthopedics	<u>139 (67%)</u>
General Surgery	<u>179 (87%)</u>
Plastic Surgery	<u>83 (40%)</u>
Obstetrics/GYN	<u>149 (72%)</u>
ENT	<u>106 (51%)</u>
Neurosurgery	<u>53 (26%)</u>
Pediatrics	<u>105 (51%)</u>
Other	<u>64 (31%)</u>

- Burn Care
- Cardiology [11 responses]
- CV Surgery [7 responses]
- Family Practice Cardiology [3 responses]
- CV Surgery [3 responses]
- Emergency Medicine [2 responses]
- Family Practice [2 responses]
- General Practice [2 responses]
- G.I. Lab [4 responses]
- G.I. Colorectal
- Hospice
- Infectious Disease
- Intensive Care Unit
- Internal Medicine
- Maternal-Child
- Neonatology [2 responses]
- Neurology [2 responses]
- Oncology [4 responses]
- Open heart
- Ophthalmology [6 responses]
- Oral-maxillofacial [2 responses]
- Oral surgery
- Other [19 responses]
 - critically ill \ injured are transferred to Children's Dallas
- Pain Management [2 responses]
- Podiatry [5 responses]
- Primary Care
- Psychiatry [3 responses]
- Pulmonology [2 responses]
- Skilled Nursing Rehab
- Transplant Services [2 responses]
- Trauma
- Urology [11 responses]
- Vascular [2 responses]

II Training and Education:

A. Does your hospital pay for (circle all that apply) **Responses: 207**

ACLS	<u>194 (94%)</u>
ATLS	<u>84 (41%)</u>
TNCC	<u>145 (70%)</u>
PALS	<u>161 (78%)</u>
CPR	<u>180 (87%)</u>
ENPC	<u>84 (41%)</u>
OTHER	<u>24 (12%)</u>

ATLS for surgeons only
Appropriate certifications for staff
BHTLS
CEN [5 responses]

- all prep courses for certification and for certification exam when passed. Do not pay employee time, but do not charge a fee for the course for employees

C. E. via HealthNet—Free!
NALS
None
NNR
NRP (Neonatal Resuscitation Program) [7 responses]
PALS
PATLS
PEPP
PHTLS
Pulmonology, psychiatry, nephrology, endocrinology
Service sponsor by hospital

B. How far do your personnel have to travel on average to attend a class? **Responses: 203**

0-10	<u>71 (35%)</u>
10-20	<u>17 (8%)</u>
20-30	<u>24 (12%)</u>
30-40	<u>22 (11%)</u>
50-60	<u>35 (17%)</u>
>60	<u>34 (17%)</u>

C. What is the average time frame hospital personnel must wait to attend a class? **Responses: 196**

<2wks	<u>23 (12%)</u>
2-4wks	<u>42 (21%)</u>
4-6wks	<u>56 (29%)</u>
6-8wks	<u>30 (15%)</u>
>8wks	<u>45 (23%)</u>

D. What types of educational offering are needed in your hospital? (Circle all that apply)

Responses: 207

ACLS	<u>103 (50%)</u>
ATLS	<u>73 (35%)</u>
TNCC	<u>105 (51%)</u>
PALS	<u>109 (53%)</u>
CPR	<u>70 (34%)</u>
ENPC	<u>76 (37%)</u>
OTHER	<u>18 (9%)</u>

All
All current
ATNCC
BCLS
BTLS
CEN
ENPC
ENPC will be offered
EKG 12 lead
Fetal monitoring
I go to DFW area. TNCC @GCC (< 10 miles away)
Inservices required by JCAHO
Looking for 2 hrs of hepatitis for new nursing requirements
N/A
NNR
None
None—all provided
NRP [4 responses]
Other [2 responses]
TNCC

E. Has your hospital ever applied for an educational grant? **Responses: 200**

Y	68 (34%)
N	132 (66%)

F. If yes, has your hospital ever received an educational grant?

Responses: 118

Y 55 (47%)

N 63 (53%)

G. Does your RAC provide education for your hospital-based employees? **Responses: 183**

Y 110 (60%)

N 73 (40%)

H. If so, what types of offerings are provided? **Responses: 183**

In-services **50 (27%)**

TNCC **73 (40%)**

PALS/ENPC **63 (34%)**

ACLS **53 (29%)**

Pre-hospital training **42 (23%)**

ATLS **30 (16%)**

Other **22 (12%)**

ABLS
ACLS
AISS
Annual Trauma Symposium
Annual symposium
BCLS
Bioterrorism course
BTLS
CEU offerings for EMS along with participants meetings
CPR
Crisis intervention
EMS Conference sponsorship for certain #
ER Critical Care EMS Ed. Classes
Fee offset
Heartsaver AED
Injury prevention public education
Miscellaneous topics @ meetings; above classes as requested in grants
PEPP
Per request of participant tuition reimbursement
PHTLS
Trauma coordinator course
Trauma education [2 responses]
Yearly General Seminar