IDENTIFYING INFORMATION	
Name:	**Admissions to hospital from the emergency department**
Short/Other Names:	n/a
BACKGROUND, INTERPRETATION AND BENCHMARKS	
Description:	The percent of emergency department visits by continuing care homes – type A (formerly long term care) or continuing care homes – type B (formerly designated supportive living) residents, which resulted in admission/transfer to hospital. Data is grouped and presented according to continuing care setting: continuing care – type A (formerly long term care) or continuing care – type B (formerly designated supportive living - levels 4 [DSL4], and 4D [DSL4D]).
Rationale:	To provide information regarding what proportion of continuing care homes – type A or continuing care homes– type B residents who visit an emergency department are admitted to hospital.
Interpretation:	None
Target/Benchmark:	No benchmarks have been identified.
INDICATOR CALCULATION	
Calculation:	Percentage admitted to hospital = $\left(\frac{\text{Total number of hospital admissions from the emergency department for continuing care homes - type A or type B residents}}{\text{Total number of emergency department visits for continuing care homes - type A or type B residents}}\right) \times 100$ **Type of Measure:** Percentage **Adjustment Applied:** None
Denominator:	The total number of emergency department visits for continuing care homes – type A or continuing care homes – type B residents at the time of visit. Visits with an MIS_CODE beginning with “71310” are included. Visits to an emergency department on the day of admission to a continuing care facility are not included.

Numerator:	The total number of admissions to hospital for continuing care homes – type A or continuing care homes – type B residents at the time of visit. Visits with an MIS_CODE beginning with "71310" are included. Admission/transfer to hospital is based on the following disposition codes in the emergency department dataset: ▪ 06: Admit to reporting facility as inpatient to special care unit or OR from ambulatory care visit functional centre ▪ 07: Admit to reporting facility as an inpatient to another unit of the reporting facility from the ambulatory care visit functional centre ▪ 08: Transfer to another acute care facility directly from ambulatory care visit functional centre (includes transfer to another acute care facility with entry through ED)
DATA DETAILS	
Data Sources:	Alberta Continuing Care Information System (ACCIS) National Ambulatory Care Reporting System (NACRS) Discharge Abstract Database (DAD)
Reporting Frequency:	Annually (by fiscal year [starts April 1, ends March 31]) **First Available Year:** 2018-19 **Last Available Year:** 2022-23
Geographic Coverage:	The province of Alberta excluding the military and prisoners.
Reporting Levels:	Province, zone