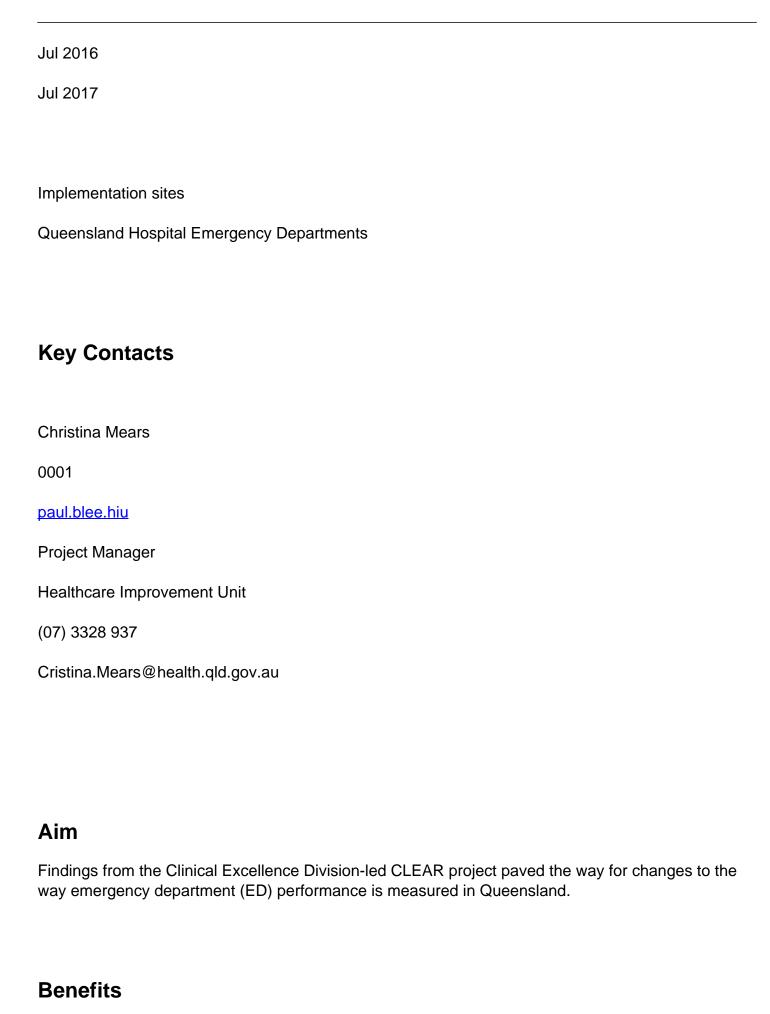
# **Collaboration for Emergency Access Research CLEAR**

Initiative Type
Service Improvement
Status
Deliver
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27 June 2017
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URL
https://test.clinicalexcellence.qld.gov.au/improvement-exchange/clear
Summary
CLEAR uses a suite of indicators including quality and safety targets to measure ED performance against the four-hour emergency access target.
Key dates



The relationship between the risk-adjusted mortality of inpatients admitted acutely from EDs (the emergency hospital standardised mortality ratio [eHSMR]: the ratio of the numbers of observed to expected deaths) and NEAT compliance rates for all presenting patients (total NEAT) and admitted patients (admitted NEAT).

#### **Background**

Retrospective observational study of all de-identified episodes of care involving patients who presented acutely to the EDs of 59 Australian hospitals between 1 July 2010 and 30 June 2014.

### **Solutions Implemented**

Queensland's public hospitals now report emergency access times against this new target. The CLEAR paper was published in the Medical Journal of Australia on 16 May 2016 as The National Emergency Access Target (NEAT) and the 4-hour rule: time to review the target.

#### **Evaluation and Results**

Analysis of 12.5 million ED episodes of care identified that an emergency access target of between 80 to 85 percent provided the best outcomes when a person was admitted to hospital. Based on the CLEAR research, Queensland set a Queensland Emergency Access Target (QEAT) of greater than 80 percent.

## **Further Reading**

Medical Journal Australia Research: The National Emergency Access Target (NEAT) and the 4-hour rule - time to review the target

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