
Collaboration for Emergency Access Research CLEAR

Initiative Type

Service Improvement

Status

Deliver

Added

27 June 2017

Last updated

05 December 2022

URL

<https://test.clinicalexcclence.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

Jul 2016

Jul 2017

Implementation sites

Queensland Hospital Emergency Departments

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Aim

Findings from the Clinical Excellence Division-led CLEAR project paved the way for changes to the way emergency department (ED) performance is measured in Queensland.

Benefits

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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