

Emergency waiting times is a relevant quality indicator for emergency structures, as shown in the work of the National Expertise Mission and Hospital Audits (MEAH, 2007). Its lengthening poses a serious problem for emergency departments because the long-awaited patient is likely to feel more pain or suffer from serious complications. Some dissatisfied patients react angrily on the spot while, unfortunately, others prefer to leave without being treated. The situation gets much more complicated when a patient dies in the waiting time. (THOMPSON, DODD, 2012) In this context, the present study aims to describe the factors favoring the extension of the waiting period at the emergency department of CHUI Casablanca. This is a quantitative descriptive research that targets about 50 health care staff (doctors and nurses) selected through comprehensive sampling. Data collection was carried out using a questionnaire survey and the use of a group focus guide as a complement to this study. The results of this study have shown that the factors leading to the extension of the waiting period are multiple, affecting the organization, the patients, the personnel and the environment. This research has proven that the patient waiting time is considerably high. This was highly supported by 62% of respondents, while other highlights of the study revealed that: 86% of participants reported lack of coordination between emergency services and upstream and downstream services; 82% of respondents felt that the equipment at the emergency department level was insufficient; 86% of participants argued that the lack of staff negatively affected the patient's waiting time; 100% of the respondents said that the emergency department recognizes an abuse of use by false emergencies. The present study made recommendations to reduce the waiting time of patients, insisted much more on their triage and orientation at the reception, the supply of the SU with the necessary equipment, strengthening the workforce Nurses and doctors, and improved coordination between the various services. Keywords: time to wait, factors favoring, emergency department.