

# ACT Public Health Services Quarterly Performance Report

September 2011



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For the 2011–12, the Health Directorate has restructured the Quarterly Report to ensure that it is informative and provides a visual demonstration of the performance against both existing performance targets as well as those implemented through the National Health Reform. The National Health Reform has introduced a number of performance targets relevant to both the performance of our Emergency Departments as well as ensuring that we provide timely access to elective surgery.

The Health Directorate has continued to work with the individual health services to develop reporting tools that support effective management of our available resources and ensure that clients within the ACT and surrounding region are able to both gain access to services as well as accessing information on the performance of healthcare services.

The ACT Public Health Services report for the first quarter of 2011–12 shows that the increased investment in the Territory's public health services is working to provide improved access to care.

## Public Hospitals

- Results for 2010–11 show that our public hospitals had access to an average capacity of 926 beds during last financial year, an additional 256 beds up on the 670 beds that were available in 2001-02 when we were first elected to Government – a 33% increase over eight years.
- And we're not stopping there, with another 22 sub-acute beds to come on line over the next four years as part of the Commonwealth's commitment to improving access to hospital services.
- This has assisted our public hospitals to manage occupancy rates, with a first quarter of 2011–12 result of 88 percent. This result is an improvement on the 90 percent recorded for the same period last year.
- Preliminary data for the first quarter of 2011–12 suggests a 6 percent increase in cost weighed separations for our ACT Public Hospitals, with particular growth in cancer services which saw a 28 percent growth in cost weighted activity compared with the same period last year.
- In the first quarter of 2011–12, there were almost 1,100 births at our public hospitals.

- Outpatient occasions of service grew by 7 percent in the first quarter of 2011–12 compared with the same period in 2010–11.
- The average waiting time for public dental health services for the first quarter of 2011–12 was 11 months, below the target of less than 12 months.
- Childhood immunisation rates exceed the national target of 90 percent at 94 percent to September 2011.
- The Walk-in Centre (WiC) is now an established part of our health service infrastructure, providing the community with another option for the treatment of minor and one-off conditions.
- In the first quarter of 2011–12, 4359 clients presented to the WiC for treatment with only 30 percent of those patients requiring referral to an alternative service, mostly their GP, and only 4 percent being referred to an Emergency Department for treatment.
- The reduction in referrals to alternative treatment sources has shown that the community is becoming more aware of the services available through the Walk in Centre.

## Surgery

- Our public hospitals provided record levels of access to elective surgery in 2010–11. This progress has continued into the first quarter of 2011–12 with 2,992 elective surgery procedures being completed in the first quarter, a 9 percent increase on the 2,754 reported for the same period in 2010–11.
- This increase in access to elective surgery has resulted in a 20 percent reduction in the number of people waiting for surgery in the ACT.
- The promising results has also led to a significant decline in the number of patients waiting beyond the clinically recommended timeframes to access their surgery, with the result of 1,166 long wait patients at the end of September 2011 almost half the 2,121 recorded for the same period in 2010. Whilst this is still too high, our commitment to improving access will result in this number reducing in future reports.





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- The Health Directorate now report the six month moving median wait time to access elective surgery. This ensures that any improvement of deterioration in the way we manage the elective surgery waiting list is evident so we can adjust management to improve access as required. The result of 64 days in the six months to September 2011 is a vast improvement on the 83 days reported for the six months to April 2011, which is evidence that our approach to management of the wait list is paying off.
- The increased access to elective surgery is particularly pleasing given the continued demand for emergency surgery. In the first quarter of 2011–12, 1664 people had emergency surgery, which equates to 36 percent of all surgical activity being performed as emergency procedures.

## Emergency Departments

- The Health Directorate is committed to improving waiting times in our emergency department services and is working towards meeting the newly implemented National Emergency Access Targets (NEAT).
- In the first quarter of 2011–12, ACT Hospital Emergency Departments saw over 28,911 presentations, a 4 percent increase in presentations compared with the same period last year.
- Admissions to hospital via the emergency department have also grown, with 7,205 (10 percent growth) admissions reported for the first quarter of 2011–12.
- Despite the increase demand for emergency care, the proportion of patients admitted to a hospital bed within eight hours of being seen in the emergency department in the year to September 2011 was 77 percent. This result is above the target of 75 percent, and an improvement on the 72 percent recorded for the same period last year.
- ACT Public Hospital Emergency Departments met or exceeded national targets for timely access to emergency care in two of the five triage categories. Triage Category one, our most urgent category of presentations, as well as triage category five, were seen within clinically recommended times.
- Targets were not reached for triage category two, three and four presentations.

- Our emergency department staff are currently reviewing their processes, and working with their colleagues throughout the hospitals, to work out ways of eliminating barriers that delay quick access to services.
- This process will result in the development of initiatives that will be implemented to improve the way patients access hospital services, as well as how they move through the hospital in a more patient-centred and efficient manner.

## National Health Reform

- The National Health Reform agenda was agreed to by all States and Territories in August this year.
- A set of performance targets were included in the agreement to ensure timely access to services were a priority for all health sectors across the Nation.
- The National Emergency Access Target requires that 90 percent of presentations have a length of stay in the emergency department of no more than four hours.
- The first target of 64 percent is to be achieved by December 2012. In the calendar year to September 2011, ACT public hospital emergency departments are achieving 57 percent with a length of stay less than four hours. The Health Directorate and key stakeholders within the Emergency Department continue to work collaboratively to develop strategies to ensure we meet this target.
- With the introduction of the National Elective Surgery targets (NEST), ACT Hospitals have been able to demonstrate 94 per cent of Category 1 patients receive treatment within 30 days, with the first target of 95 percent to be achieved by December 2012.
- 45 percent of category 2 patients receive treatment within 90 days, with the first target of 55 percent to be achieved by December 2012.
- 79 percent of category 3 patients access their procedure within 365 days, just below the target of 82 percent set to be achieved by December 2012.





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## New South Wales Activity

- The ACT is committed to servicing the health needs not only of the residents of the ACT, but of the surrounding region.
- Of the almost 29,000 presentations to ACT public hospital emergency departments, approximately 11 percent present from NSW.
- NSW residents also account for 22 percent of all admissions into our public hospitals, and approximately 30 percent of all surgical activity in the ACT is delivered to NSW residents.

## Medicine

- Improvements in monitoring and reporting on Medical Waiting lists has also been undertaken in 2010–11 with greater visibility now available on the performance of Endoscopy and Cardiology.
- Medical services at our public hospitals are a large portion of the total activity generated in the health services of the ACT.
- Endoscopy services provided over 1,100 procedures in the first quarter of 2011–12. The Health Directorate are managing medical waiting lists in the same manner as their surgical counterparts. Timeliness to endoscopy procedure by urgency category is currently below the desired targets. However there is a great deal of work underway to ensure timely access to care in the future for this service.
- The median waiting time for patients requiring access to interventional cardiology services was 8 days with 326 patients being treated within the first quarter.

## Capital Region Cancer Service

- Despite the increase in demand for radiation therapy services, waiting times for radiotherapy services have improved, with nearly 100 percent of all patients receiving care within standard timeframes in the first quarter of 2011–12.
- There were a total of 4,386 breast screens performed for ACT residents in year to September 2011.
- Strong demand for BreastScreen services and radiographer shortages continue to put pressure on waiting times for appointments. Identifying and implementing strategies to improve performance in this regard remains a priority.

## Mental Health, Justice Health and Alcohol and Drug Services

- Seven day post discharge contact refers to direct contact with the consumer by community services following an inpatient admission. Not all consumers will be contacted by community services as they are either referred out of area (ACT) or prefer follow-up by non-public mental health services.
- The use of seclusion in the ACT mental health services continues to remain low; however from time to time there may be a 'spike'. The September 2011–12 year to date result indicates that seclusion is used as a last resort and kept to an absolute minimum resulting in a very low rate.
- Twenty-eight day unplanned readmission rate is variable depending on the complexity of individual consumer's needs. It is also known that community follow-up by mental health services, carer involvement and other community supports are key factors in the reduction of a readmission within 28 days of an initial inpatient admission.





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## Rehabilitation, Aged and Community Care Services

- The average waiting time for an Aged Care Assessment Team review remains below the target of 2 days, with the September 2011–12 year to date result of 1.9 days.
- The number of bed days utilised from patients waiting for a nursing home has increased in the year to September 2011–12.

## Quality and Safety

- The rate of unplanned return to hospital remains below target at both our public hospitals. The target is set higher at Canberra Hospital due to the more complex clinical needs of the patients that this hospital treat, meaning that there is a slightly higher chance that they will require readmission to hospital for follow up treatment.
- The rate of unplanned return to the operating theatre counting methodology is under review at Canberra Hospital. Recent results indicate that the moving average rates at both hospitals remain under target.
- The way hospital acquired infection rates are currently counted and reported in the ACT will change in the next quarterly performance report, with methodology to be consistent with that used by the Australian Institute of Health and Welfare through the MyHospitals website.





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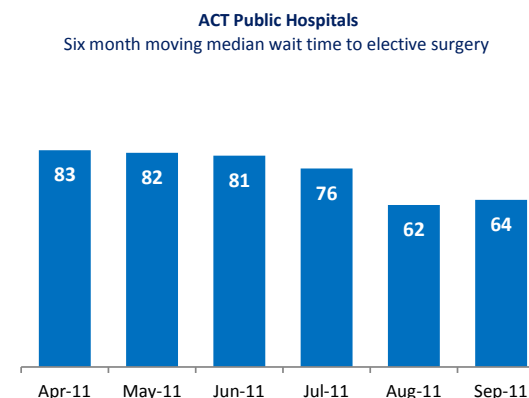
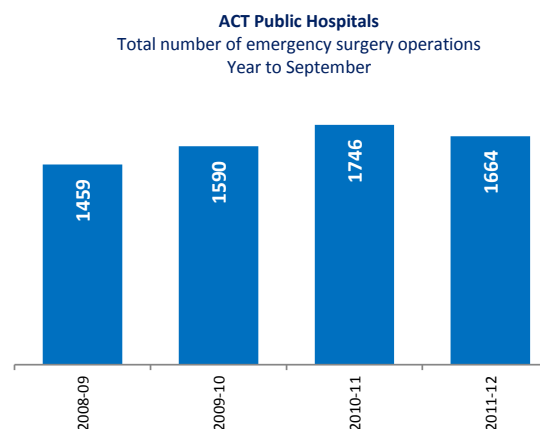
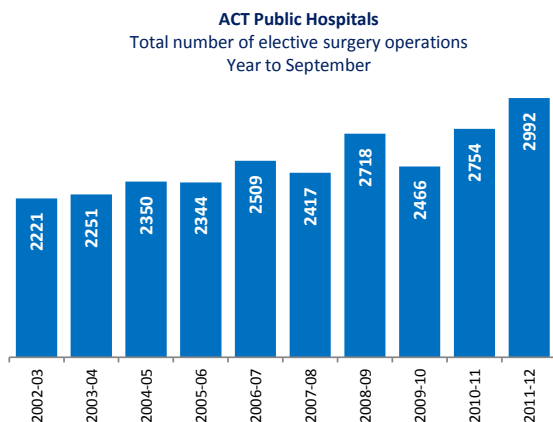
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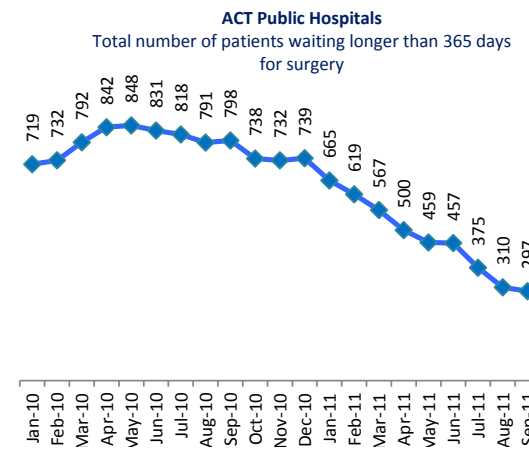
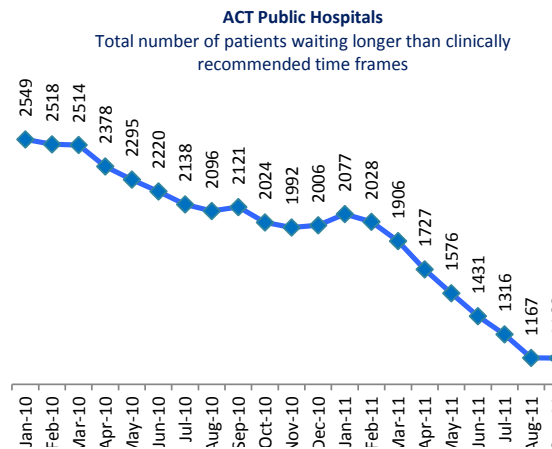
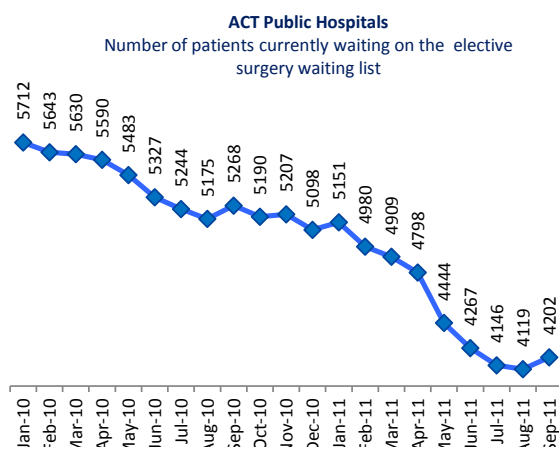
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## Record levels of access to elective surgery in the first quarter of 2011–12



## Reducing the number of patients waiting too long for care in the first quarter of 2011–12





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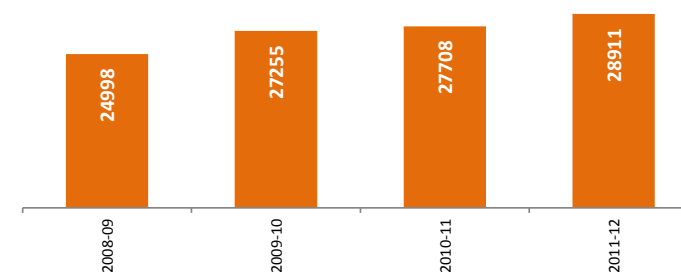
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## Improvements in waiting times for emergency department care

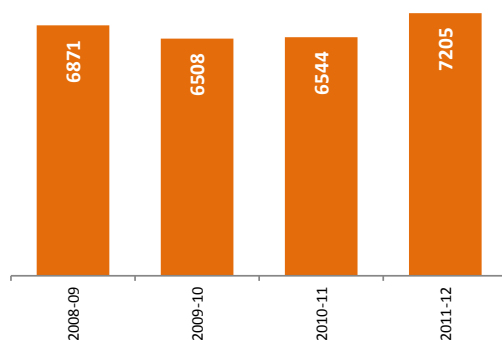
Emergency department presentation seen on time			
Year to September	2010-11	2011-12	Target
Category 1 (immediately)	100%	100%	<b>100%</b>
Category 2 (<10 mins)	79%	73%	<b>80%</b>
Category 3 (<30 mins)	57%	48%	<b>75%</b>
Category 4 (<60 mins)	54%	47%	<b>70%</b>
Category 5 (<120 mins)	75%	81%	<b>70%</b>
Total All Categories	60%	54%	<b>70%</b>

**ACT Public Hospitals**  
Presentations to the emergency departments  
Year to September

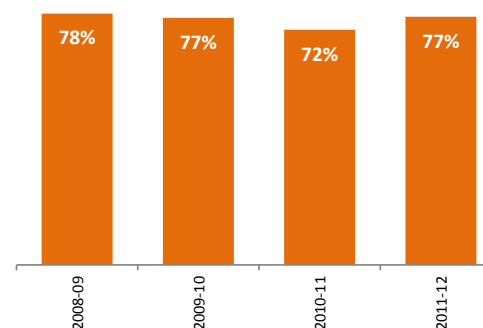


## Access to ward beds from the emergency department

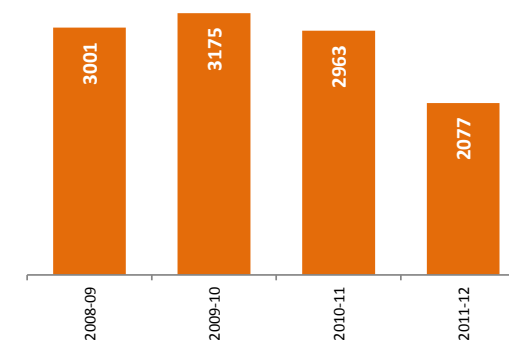
**ACT Public Hospitals**  
Admissions via the emergency department  
Year to September



**ACT Public Hospitals**  
Access Block  
(% of patients admitted to a bed within 8hrs)  
Year to September



**ACT Public Hospitals**  
Did not wait for treatment  
Year to September



# National Emergency Access Target (NEAT)



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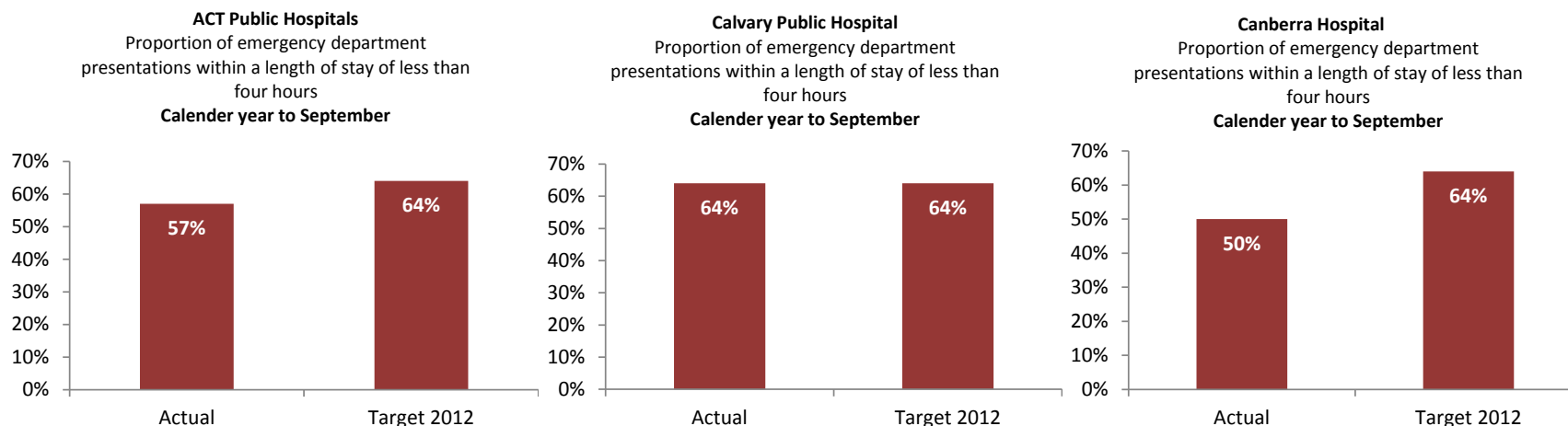
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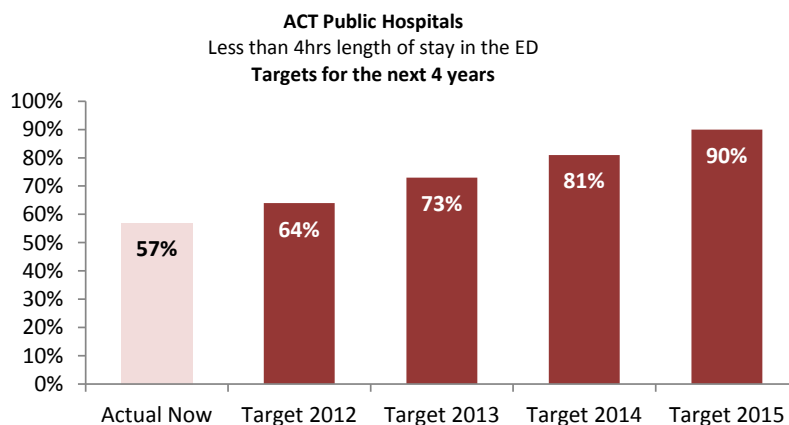
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## 90 percent of all emergency department presentations to have a length of stay less than four hours



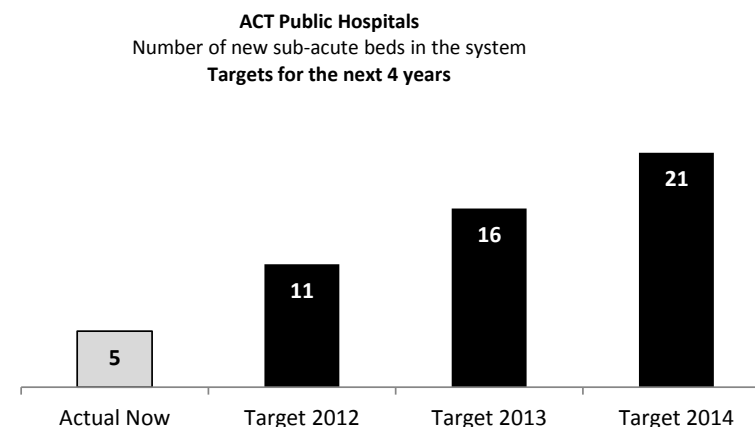
## Emergency department waiting time

Target – 90% of all presentations have an ED LOS than 4 hours



## New sub-acute bed capacity

Target – at least 21 new sub-acute beds in the system by 2014







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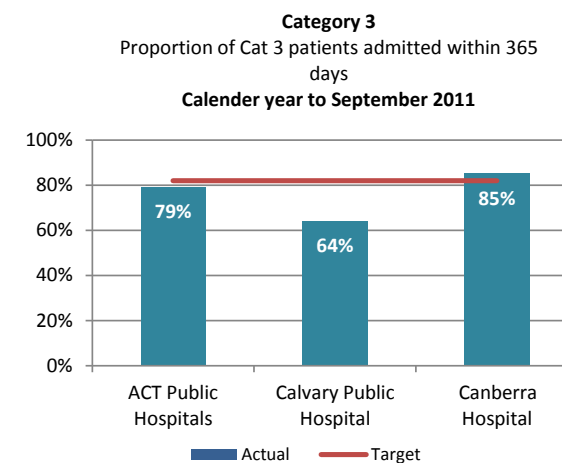
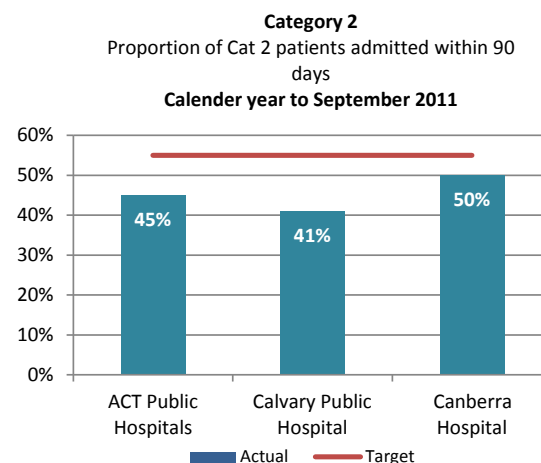
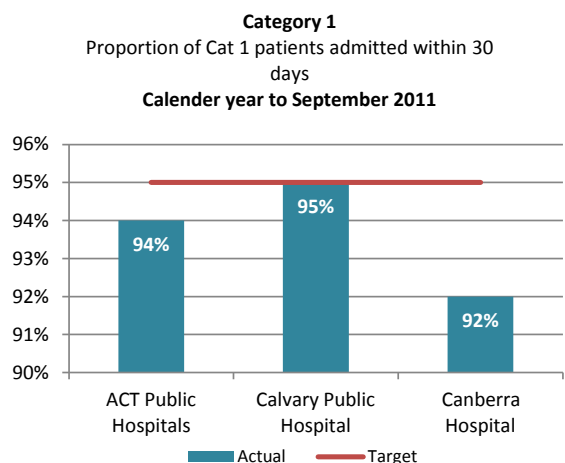
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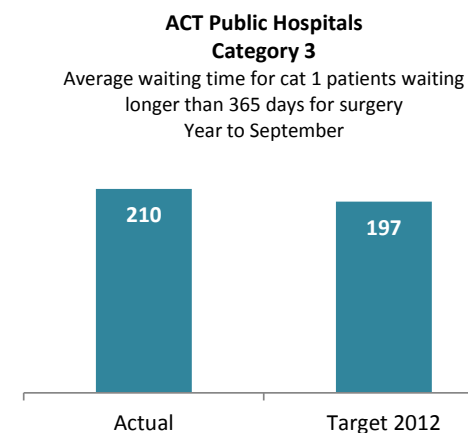
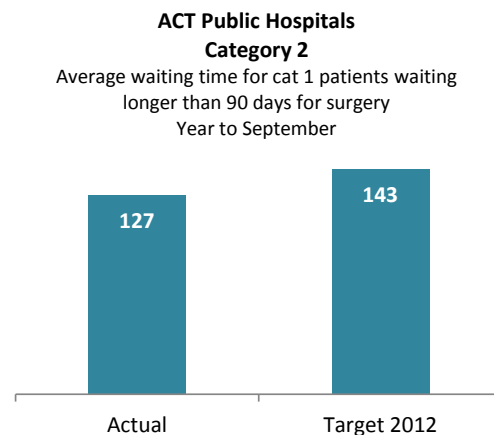
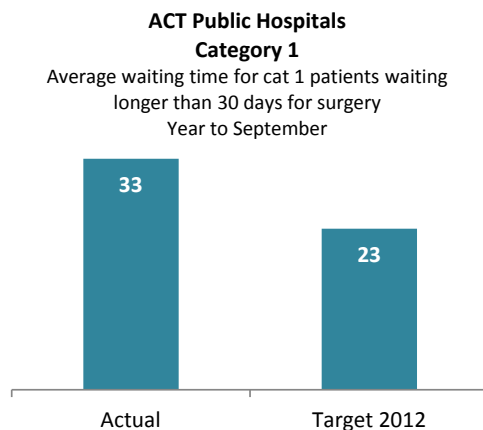
## Part 1 – National Elective Surgery Target

Improvement in patients treated within clinically recommended time



## Part 2 – National Elective Surgery Target

Reduction in patients waiting longer than standard timeframes target



# New South Wales patients accessing treatment in ACT Public Hospitals



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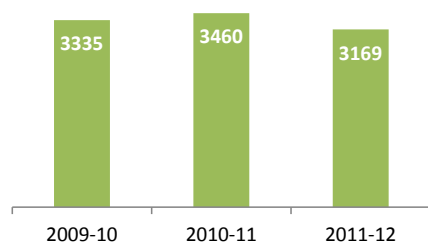
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## Emergency department activity for our region

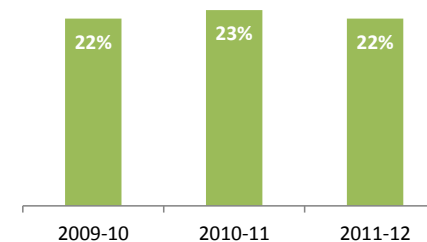
**ACT Public Hospitals**  
NSW patients  
Presentations to the emergency department  
Year to September



**ACT Public Hospitals**  
NSW patients  
Proportion of all patients who present to the emergency department who reside in NSW  
Year to September



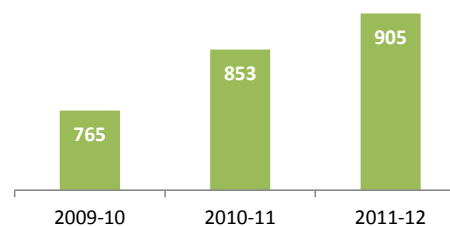
**ACT Public Hospitals**  
NSW patients  
Proportion of all patients who are admitted to hospital as an inpatient who reside in NSW  
Year to September



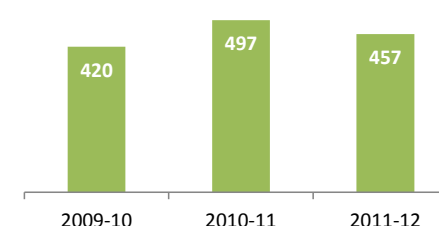
## Meeting the surgical needs of our region

Year to date September 2011		
ACT Public Hospitals	Elective	Emergency
Total all Patients	2992	1664
Total NSW	905	457
% NSW patients	30%	27%

**ACT Public Hospitals**  
NSW patients  
Elective surgery operations  
Year to September



**ACT Public Hospitals**  
NSW patients  
Emergency surgery operations  
Year to September





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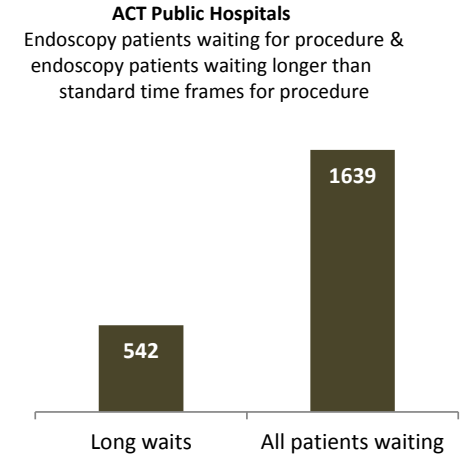
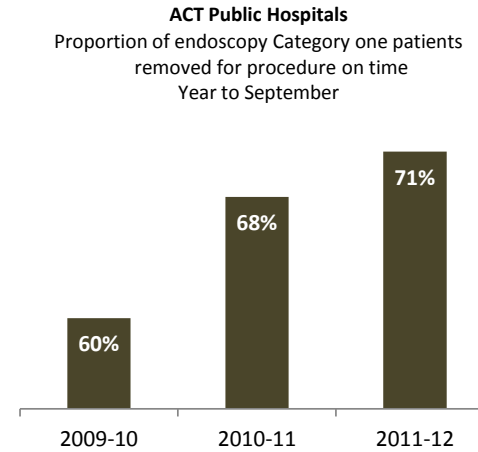
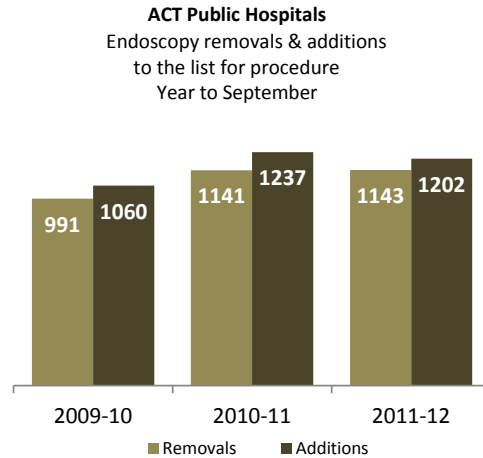
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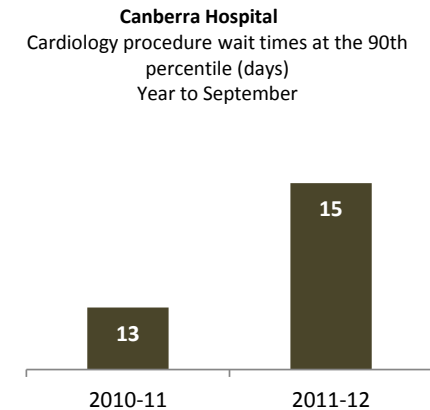
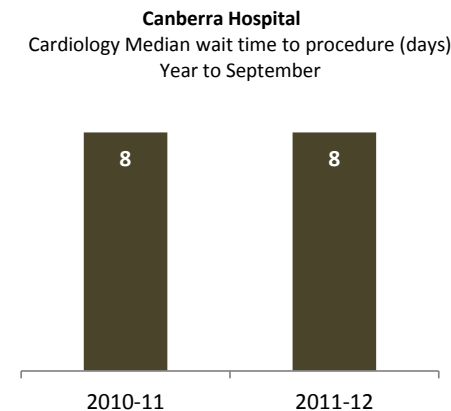
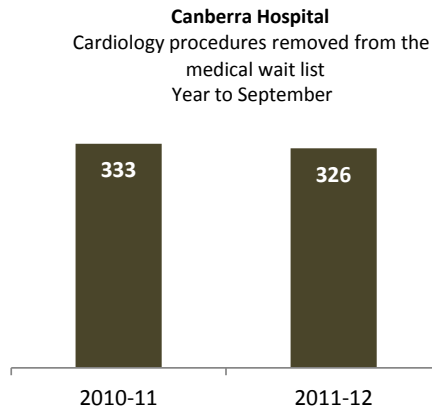
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## Endoscopy procedures completed at ACT Public Hospitals



## Cardiology procedures completed at ACT Public Hospitals





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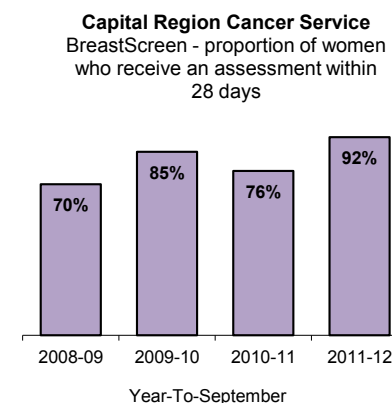
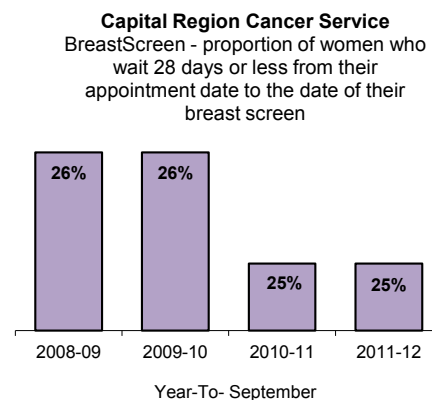
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## Percentage of radiotherapy patients who commence treatment within standard timeframes and Breast Screening

### Radiation Therapy Access

Year to September	2009-10	2010-11	2011-12
Urgent : within 48 hours	100%	100%	100%
Semi-urgent: with 4 weeks	100%	100%	100%
Non-urgent : within 6 weeks	94%	99%	99%
Total - All Radiotherapy Patients	97%	99%	100%



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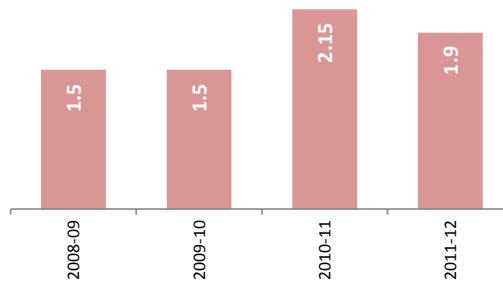
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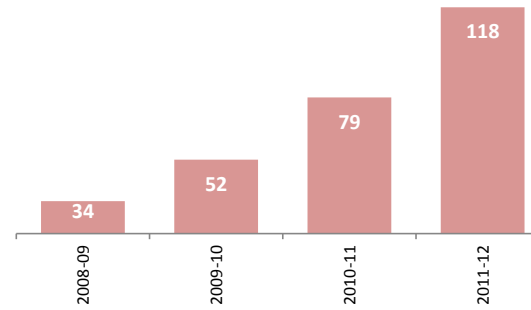
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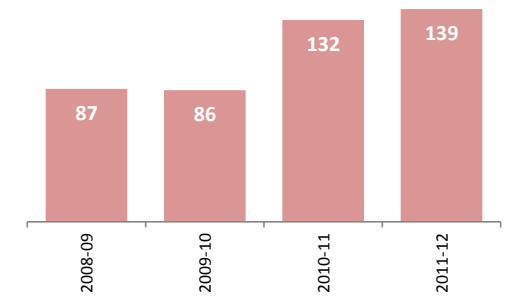
**Rehabilitation, Aged and Community Care Services**  
Average Waiting Time (in days) for ACAT Assessment  
Year to September



**ACT Public Hospitals**  
Nursing Home Type Patients  
Number of separations  
Year to September



**Rehabilitation, Aged and Community Care Services**  
Number of people assessed in falls clinic  
Year to September





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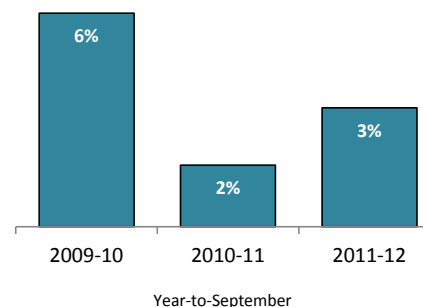
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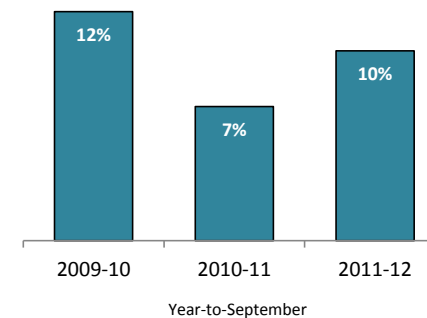
## Mental Health

Year to September	2009-10	2010-11	2011-12
% Inpatients contacted within 7 days post-discharge	76%	74%	73%

**Use of Seclusion in Mental Health ACT**  
(Seclusion Episodes as % of Admission Episodes)

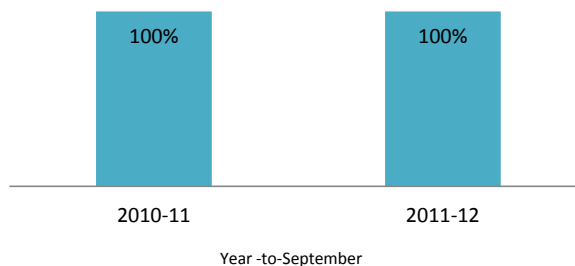


**28 Day Unplanned Readmission Rate**  
Mental Health ACT

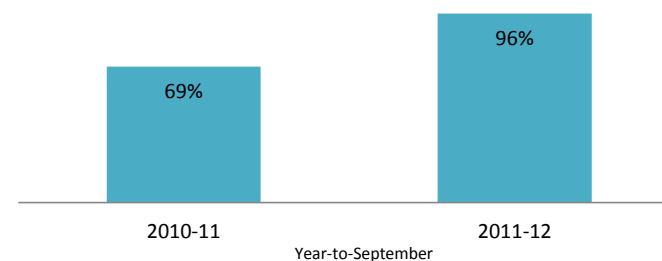


## Justice Health

**Proportion of offenders and detainees at the Alexander Maconochie Centre with a completed health care assessment within 24 hrs of detention**



**Proportion of offenders and detainees at Bimberi Youth Detention Centre with a completed health care assessment within 24hrs of detention**





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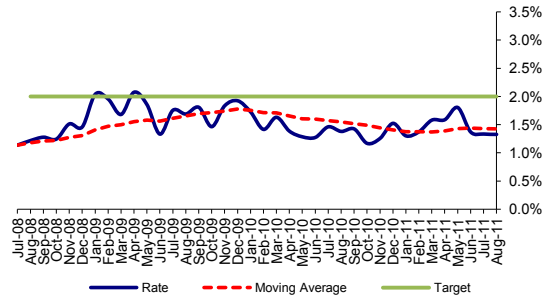
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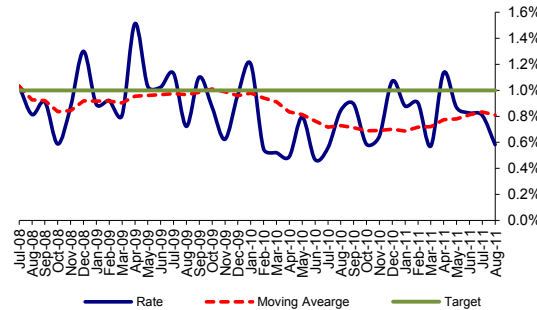
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## Canberra Hospital

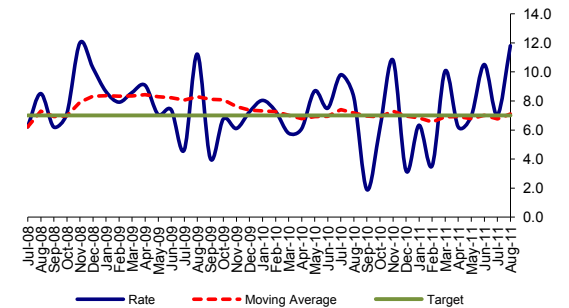
**Canberra Hospital**  
Rate of unplanned hospital admissions within 28 days



**Canberra Hospital**  
Unplanned return to operating theatre within an episode of care

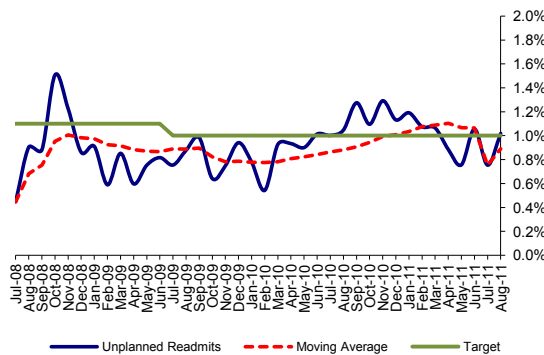


**Canberra Hospital**  
Hospital Acquired Infection Rate (per 10,000 occupied bed days)

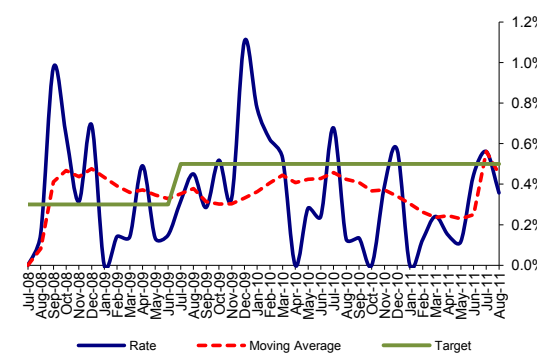


## Calvary Public Hospital

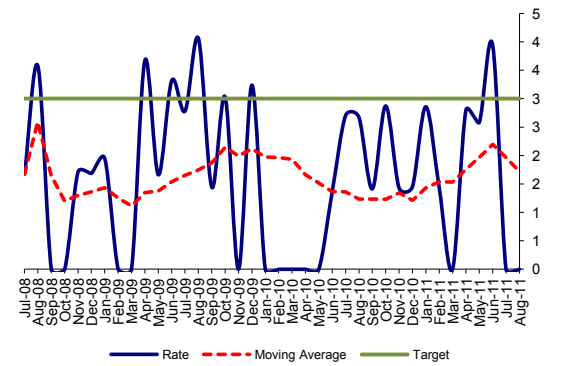
**Calvary Public Hospital**  
Rate of unplanned hospital admissions within 28 days



**Calvary Hospital**  
Unplanned return to operating theatre within an episode of care



**Calvary Hospital**  
Hospital Acquired Infection Rate (per 10,000 occupied bed days)



# Selected activity statistics



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	Year-to-Sept*		% VAR
	2010-11	2011-12	
<b>Health Directorate cost-weighted separations ( Round 13-DRG version 5.2)</b>			
Output 1.1 – Acute services	21,642	23,027	6%
Output 1.2 – Mental Health, Justice Health and Alcohol and Drug Services	915	1,026	12%
Output 1.5 – Cancer services	1,045	1,339	28%
Output 1.6 – Rehabilitation, Aged and Community Care	1,585	1,289	-19%
<b>Total cost weighted separations</b>	<b>25,186</b>	<b>26,680</b>	<b>6%</b>
<b>Inpatient Activity</b>			
Day only patient days (total across all outputs)	12,302	13,509	10%
Overnight patient days (total across all outputs)	65,729	70,062	7%
Nursing Home Type Patient (NHTP) Bed-Days (on separation) **	1,707	1,411	-12%
Day of Surgery Admission rate	89%	88%	-1%
NSW residents as a proportion of total hospital separations	23%	22%	-4%
Emergency surgery as a proportion of total surgery	63%	56%	-11%
Allied health services – Provided in ACT public Hospitals	21,379	21,257	-1%
Bed Occupancy Rate (overnight adult medical and surgical beds)	90%	88%	-2%
Total number of births in ACT public hospitals	1,075	1,089	1%
Number of births by caesarian in ACT public hospitals	253	308	22%
<b>Admissions via Emergency department</b>	<b>6,544</b>	<b>7,208</b>	<b>10%</b>
Admissions to Emergency Department observational wards	2,605	2,890	11%
Admissions from the Emergency Department to ICU, Surgery, and general wards	3,939	4,318	10%
<b>Emergency Department Activity</b>			
Category 1 Seen (immediate – 2 mins)	103	111	8%
Category 2 Seen (within 10 mins)	2,500	2,964	19%
Category 3 Seen (within 30 mins)	8,282	9,081	10%
Category 4 Seen (within 60 mins)	10,844	11,889	10%
Category 5 Seen (within 120 mins)	3,016	2,789	-8%
Emergency Department Presentations seen	24,745	26,834	8%
Did Not Waits	2,963	2,077	-30%
Total Emergency Department Presentations	27,708	28,911	4%
<b>Walk-in-Centre</b>			
Total presentations	4,358	3,494	-20%
Patients treated	3,155	2,295	-27%
WIC – % presentations who did not wait	2%	1%	-50%
% Treated within the WIC	72%	66%	-9%
<b>Elective Surgery</b>			
Additions to the public hospital elective surgery waiting list	3,305	3,506	6.1%
Numbers of people on the elective surgery waiting list	5,268	4,202	-20.24%
Removals from the list for surgery	2,754	2,992	9%
Removals from the list for other reasons	660	648	-2%

	Year-to-Sept*		% VAR
	2010-11	2011-12	
Patients on the list recorded as “not ready for care”	658	891	35%
Hospital Initiated Postponements	283	324	14%
<b>Median waiting time to care by patient urgency category</b>			
Category one patients (admission required within 30 days)	13	14	
Category two patients (admission desirable within 90 days)	102	96	
Category three patients (admission desirable within 365 days)	197	228	
<b>Elective endoscopies</b>			
Median waiting time to care by patient urgency category			
Category one patients (admission required within 30 days)	17	17	
Category two patients (admission desirable within 90 days)	95	112	
Category three patients (admission desirable within 365 days)	359	291	
<b>Breast screens</b>			
Total number of women with Breastcreens in the ACT	3,151	4,386	39%
Participation rate of breast screens for ACT women aged 50-69	54%	51%	-6%
Additions to the Cervical Cytology Register	8,832	8,593	-3%
<b>Rehabilitation, Aged and Community Care</b>			
Allied health services – Number of regional services	6,220	5,551	-11%
Community Nursing – Number of Nursing (Domiciliary and clinic based occasions of service)	21,379	21,257	-1%
Proportion of aged care and rehabilitation clients discharged with a comprehensive discharge plan	100%	100%	0%
<b>Mental Health</b>			
Community Services by Group			
Adult	43,888	45,840	4%
Child & Adolescent	12,585	14,694	17%
Older persons	4,779	4,730	-1%
Proportion of mental health committees with consumer and care representation	100%	100%	0%
<b>Dental Services</b>			
Mean Waiting (time in days) for persons on the Centralised Waiting and Recall List	11	11	0%
Proportion of urgent patients seen with standard waiting times	100%	100%	0%
Immunisation Coverage – Primary Immunisation schedule measured at 1 year of age (in accordance with the Australian childhood Immunisation Register)	94%	94%	0%
<b>Outpatient Care – Non Admitted Services</b>			
ACT public hospitals	77,845	83,451	7%
Cancer services	13,884	14,698	6%
Aged care and rehabilitation services	308	292	-5%
<b>Total outpatient occasions of service</b>	<b>92,037</b>	<b>98,441</b>	<b>7%</b>

\* Note: Cost-weighted separations for YTD September 11 are preliminary estimates only.





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## Emergency department

Triage category	<p>Patients presenting to an emergency department are seen on the basis of clinical urgency as determined by trained medical professionals. Patients are classified into one of five categories, and their access to treatment is based on this clinical categorisation:</p> <ol style="list-style-type: none"> <li>1. Resuscitation—treatment to commence immediately</li> <li>2. Emergency—treatment to commence within 10 minutes</li> <li>3. Urgent—within 30 minutes</li> <li>4. Semi-Urgent—within 60 minutes</li> <li>5. Non-urgent—within 120 minutes.</li> </ol>
Target waiting times	<p>The proportion of patients seen at emergency departments within standard waiting times (as set by the Australasian College of Emergency Medicine)</p> <ol style="list-style-type: none"> <li>1. Resuscitation—100% seen on time</li> <li>2. Emergency—80% seen within 10 mins</li> <li>3. Urgent—75% seen within 30 mins</li> <li>4. Semi-urgent—70% seen within 60 mins</li> <li>5. Non-urgent—70% seen within 120 mins.</li> </ol>
Access block	<p>The proportion of patients admitted to hospital via the emergency department who wait less than eight hours from the time that treatment commences to the time that the patient is transferred to a hospital ward.</p>

## Elective surgery

Urgency category	<p>Patients listed for elective surgery at ACT public hospitals are assigned one of three priority categories based on their surgeon's opinion about the urgency of the need for surgery in accordance with the definitions in the National Health Data Dictionary:</p> <ol style="list-style-type: none"> <li>1. Urgent—admission within 30 days is desirable for a condition that has the potential to deteriorate quickly to the point that it may become an emergency</li> <li>2. Semi-urgent—admission within 90 days is desirable for a condition causing some pain, dysfunction or disability but which is not likely to deteriorate quickly or become an emergency</li> <li>3. Non-urgent—admission at some time in the future acceptable for a condition causing minimal or no pain, dysfunction or disability, which is not likely to deteriorate quickly and which does not have the potential to become an emergency (Health Directorate establishes a 365 day maximum desirable waiting time for category three patients).</li> </ol>
Median waiting time	<p>The waiting time at the fiftieth (50th) percentile for all patients admitted for elective surgery at an ACT public hospital in a given period (and for a given patient urgency category).</p>
Waiting times	<p>The proportion of patients admitted for surgery within a given period who are admitted within standard waiting times for their condition.</p>
Removals for surgery	<p>The number of people, in a given period, who are removed from the ACT public hospitals elective surgery waiting list for surgery.</p>





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Patients waiting longer than one year for surgery	The number of patients still on the elective surgery waiting list (and who are listed as "ready for surgery") who have been waiting longer than 365 days (at a given census date).
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Long wait patients accessing elective surgery	The number of patients on the ACT public hospitals' waiting lists who have had surgery within a given period whose waiting time was longer than the standard waiting time for their condition when admitted for surgery.
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Hospital initiated Postponements	The proportion of elective surgery patients booked for surgery in a given period who have their surgery postponed by the hospital (for reasons such as substitution for a more urgent patient, no beds available, etc.).
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## Endoscopy

Urgency category	See entry for elective surgery.
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Median waiting time	See entry for elective surgery.
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## Dental services

Waiting times (urgent)	The proportion of dental health program clients assessed as in need of emergency services who receive care within 24 hours of a request.
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Waiting times (general)	The average waiting time (in months) that clients of the adult centralised waiting list wait for care from the time of the request of an appointment to the date of the appointment with the dental health program.
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## Radiotherapy

Waiting times (urgent)	The proportion of new radiotherapy patients who are assessed as in need of urgent access to treatment who are provided with treatment within 48 hours of a request.
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Waiting times (general)	The proportion of all new radiotherapy patients who are provided with treatment within 28 days of a request.
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## Breast screening

Wait time to assessment	The proportion of women requiring assessment who wait 28 days or less from their breast screen appointment to their assessment appointment.
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Wait time to appointment	The proportion of women who wait 28 days or less from their appointment date to the date of their breast screen.
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Number of screens	Number of ACT women who are provided with breast screens within a given period.
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Participation rate	The proportion of women in the ACT in the targeted age group for breast screening (50 to 69 years) who have had a breast screen within the last two years at any given time.
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## Bed usage

Occupancy rate	The proportion of available overnight adult medical and surgical beds that are used on average over a given period.
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## Patient safety

Unplanned return to Hospital within 28 days	<p>The proportion of patients who are readmitted within 28 days to the same hospital in which they were previously a patient, where the readmission was:</p> <ul style="list-style-type: none"> <li>• unexpected for further treatment of the same condition for which the patient was previously hospitalised</li> <li>• unexpected admission for treatment of a condition related to one for which the patient was previously hospitalised</li> <li>• unexpected admission for a complication of the condition for which the patient was previously hospitalised.</li> </ul>
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Unplanned return to the operating theatre	The proportion of patients who are required to return to the operating room for a further procedure related to complication(s) of a previous operation/procedure within a single admission.
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Hospital acquired infection rate	The incidence of blood stream infections such as staphylococcus aureus (golden staph) acquired within ACT public hospitals, reported as the number of infections per 10,000 non-same day occupied bed days.
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## Mental health

Use of seclusion	The proportion of patients who are separated from a psychiatric inpatient unit who were subject to seclusion during their inpatient episode.
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Clients seen within seven days post discharge from hospital	The proportion of clients seen at or contacted by an ACT Health community facility during the seven days post-discharge from the inpatient service.
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Consumer and carer representation	The proportion of Mental Health ACT committees upon which consumers and carers are represented.
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## Immunisation

Childhood immunisations	The proportion of children at one year of age fully immunised in accordance with the Australian Childhood Immunisation Register Schedule.
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## Inpatient separations (Admitted patients)

Cost weighted separations	The number of separations (completed episodes of care) expressed in cost weighted terms. "Cost weighting" allocates a weight for each hospital episode based on the average level of resources used for each type of episode (with the average episode receiving a weight of "1"). As examples, a standard dialysis episode has a weight of 0.17 of the average and a knee replacement has a weight of about "5" (or five times the average). ACT Health used national public hospital cost weights (Round 13) for counting of hospital episodes in 2011–12.
NSW separations	The proportion of patients separated from ACT public hospitals whose residential address is in NSW.
Patient days	In accordance with national definitions, the number of days that a patient spends in hospital. All day only (or same-day) patients are counted as spending one full day in hospital (regardless of the time actually spend in hospital). For non same-day patients, the number of days is calculated by subtracting the separation date from the admission date (in full days).
Nursing home type patient days	The number of patient days on separation for all patients who have been classified as nursing home type patients.
Emergency surgery as a proportion of all surgical services	The proportion of patients who have surgery as a result of an emergency against the total number of surgical procedures.
Day of surgery rate	The proportion of all elective surgery cases who are admitted to hospital on the same day that they have their surgery.
Births	The number of births reported at our public hospitals in a given period.
Caesarean births	The number of births at public hospitals that are reported as being undertaken as caesarean sections.

## Mental health

Community services	The number of community based services provided to each of the three client groups: <ul style="list-style-type: none"> <li>• Adults</li> <li>• Children and adolescents</li> <li>• Older people.</li> </ul>
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The data is correct as at the time of publication. However, some changes to published data may be apparent in subsequent reports due to the availability of more up to date data.

The results and trends noted in the report should be considered in terms of national trends, changes in the level of demand, targets (where appropriate) and recent initiatives aimed at improving performance.

Large amounts of health service information, particularly hospital data, is categorised in accordance with the relative resource usage of the particular service (this is referred to as cost weighted activity).

The allocation of particular codes (or cost weights) in relation to the type of services provided can take some time to complete, especially in relation to those patients who require a range of services during a single hospital stay.

Cost weights are updated regularly to reflect changes in costs and practice. Care needs to be taken in comparing data in this report with data presented in previous reports in previous years that may be presented using earlier versions of the National Public Hospital Cost Weights.

Cost weights in this report are provided using Round 13 National Public Cost Weights.

For further information about cost-weights, visit the Commonwealth Department of Health and Ageing website:

<http://health.gov.au/internet/wcms/publishing.nsf/Content/Casemix-1>

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