

## **MEDIA BACKGROUND**

### **Hospital Quarterly: Performance of NSW public hospitals October to December 2012**

#### **Emergency Departments, October to December 2012**

More than half a million patients (579,776 patients) attended NSW emergency departments (EDs) from October to December 2012. This is 3% more than the same quarter a year ago.

Almost half of all emergency attendances (45%) were for patients in the semi-urgent (triage 4) category; 32% were in the urgent category (triage 3), 12% in the non-urgent category (triage 5) and 11% in the emergency category (triage 2). Patients in the resuscitation category (triage 1) accounted for less than 1% of all ED patients.

*Note:* We have simplified descriptions of the triage categories, in line with those used by other organisations including the AIHW and the NSW Ministry for Health. *page 3*

#### **Arrivals by ambulance**

From October to December 2012, there were 140,362 arrivals by ambulance to NSW public hospital emergency departments. This is a 3% increase since a year ago.

For patients arriving by ambulance, 64% were transferred into the care of ED staff within 30 minutes. This compares with 66% a year ago. *page 5 figure 4*

#### **Time to start treatment**

At a state level, we report the times that ED patients start treatment in four triage categories, triage 2 to triage 5. The Bureau does not report time to treatment for triage 1 patients (e.g. critical injury, cardiac arrest) as this category is extremely time sensitive, representing a 2 minute window to begin treatment.

- Triage 2 – emergency (e.g. chest pain, severe burns)  
The median time to start treatment was 8 minutes (unchanged) and 95th percentile time to start treatment was 33 minutes (5 minutes shorter than same time last year).
- Triage 3 – urgent (e.g. moderate blood loss, dehydration)  
The median time to start treatment was 21 minutes (2 minutes shorter) and 95th percentile time to start treatment was 111 minutes (13 minutes shorter than same time last year).
- Triage 4 – semi-urgent (e.g. sprained ankle, earache)  
The median time to start treatment was 29 minutes (4 minutes shorter) and 95th percentile time to start treatment was 156 minutes (20 minutes shorter than same time last year).
- Triage 5 – non-urgent (e.g. small cuts, abrasions)  
The median time to start treatment was 27 minutes (4 minutes shorter) and 95th percentile time to start treatment was 149 minutes (25 minutes shorter than same time last year).

The median times to start treatment were the same or shorter compared to the same quarter in 2011. The 95th percentile times to start treatment were all shorter in each triage category.

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### **Leaving the emergency department**

Hospital Quarterly reports how NSW hospitals are performing against the National Emergency Access Target (NEAT). The annual target for NSW in 2012 is for 69% of all patients to leave emergency departments within four hours. In October to December 2012, 64% of patients left NSW EDs within four hours. In 2012 as a whole, 60% of patients left NSW EDs within four hours.

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The median time to leaving the ED for all patients was three hours and 6 minutes. This is 10 minutes less than the same quarter in 2011. The 95th percentile time to leaving the ED was 11 hours and 13 minutes after presentation. This is one hour and 15 minutes less than the same quarter in 2011.

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The patients who received treatment in the ED and were subsequently transferred to a ward, a critical care unit or an operating suit in the hospital generally spent the longest time in the ED of all ED patients.

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### **Elective Surgery, October to December 2012**

During this quarter, 52,133 elective surgery procedures were completed in NSW public hospitals or in facilities contracted by NSW public hospitals. This is 4% more than the 50,173 surgical procedures completed in the same quarter in 2011.

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Due to a major upgrade to the information system at The Children's Hospital at Westmead, results from this hospital have been excluded from NSW current and previous quarters to enable comparisons over time.

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From October to December 2012, 93% of all elective surgery patients were admitted within the recommended time for the urgency of their care. For urgent surgery, 96% of patients were admitted within the recommended 30 days, 92% of semi-urgent patients were admitted within 90 days and 92% of non-urgent patients were admitted within 365 days.

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The median waits for urgent and semi-urgent surgery were stable. The median wait time for non-urgent surgery was 224 days, 9 days more than the same quarter in 2011.

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The 90th percentile wait time for urgent surgery was 27 days. The 90th percentile wait time for semi-urgent surgery was 88 days, one day less than the same quarter in 2011; non-urgent surgery was 363 days, similar to the same quarter in 2011.

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The procedures with the longest median waiting times for this quarter were:

- nasal septoplasty (328 days)
- total knee replacement (291 days)
- myringoplasty/tympanoplasty (290 days)

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The procedures with the shortest median waiting times were:

- other-general (21 days)
- coronary artery bypass graft (29 days)
- cystoscopy (29 days)
- hysteroscopy (29 days)

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The surgical specialities with the highest number of patients receiving elective surgery were:

- general surgery (13,771 patients)
- orthopaedic surgery (7,829 patients)
- gynaecology (6,954 patients)

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The surgical specialities with the lowest number of patients who received elective surgery were “other medical” (432 patients) and cardio-thoracic surgery (863 patients).

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Surgical specialities with the highest number of patients waiting longer than 12 months for elective surgery were:

- Ear nose and throat surgery (148 patients)
- Orthopaedic surgery (131 patients)

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There were 67,438 patients ready for surgery on the waiting list at the start of the October to December quarter. There were 66,450 patients ready for surgery on the waiting list at the end of the quarter. Of these patients, 1% were in the urgent category, 15% were in the semi-urgent category and 83% were non-urgent.

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## **Admitted Patients, October to December 2012**

There were 440,144 admitted patient episodes from October to December 2012. This is 4% more than a year ago. The average length of stay was 3.2 bed days, 3% less than the same time in 2011.