Bankstown / Lidcombe Hospital: Emergency department (ED) overview April to June 2017

	last year	one year ago
All presentations: 13,221 patients	13,037	1.4%
Emergency presentations: ² 13,042 patients	12,929	0.9%

Bankstown / Lidcombe Hospital: Time patients waited to start treatment³

April to June 2017

	Same period last year	NSW (this period)
Triage 2 Emergency (e.g. chest pain, severe burns): 2,445 patients	2,635	
Median time to start treatment ⁴ 9 minutes	9 minutes	8 minutes
90th percentile time to start treatment ⁵ 27 minutes	32 minutes	26 minutes
Triage 3 Urgent (e.g. moderate blood loss, dehydration): 5,883 patients	5,815	
Median time to start treatment ⁴ 23 minutes	19 minutes	20 minutes
90th percentile time to start treatment ⁵ 76 minutes	62 minutes	67 minutes
Triage 4 Semi-urgent (e.g. sprained ankle, earache): 4,097 patients	3,922	
Median time to start treatment ⁴ 26 minutes	20 minutes	25 minutes
90th percentile time to start treatment ⁵ 91 minutes	70 minutes	99 minutes
Triage 5 Non-urgent (e.g. small cuts or abrasions): 507 patients	447	
Median time to start treatment ⁴ 25 minutes	21 minutes	23 minutes
90th percentile time to start treatment ⁵ 98 minutes	57 minutes	101 minutes

Bankstown / Lidcombe Hospital: Time from presentation until leaving the ED

April to June 2017

Attendances used to calculate time to leaving the ED:6 13,221 patients

Percentage of patients who spent 72.8% four hours or less in the ED

Same period	Change since
last year	one year ago
13,037	1.4%
77.7%	

Same period Change since

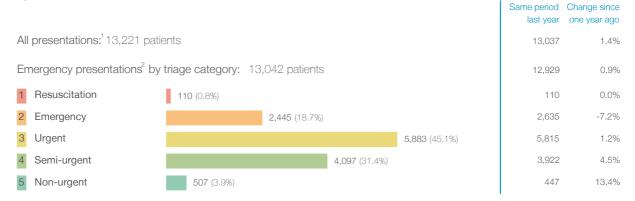
- Suppressed due to small number of patients and to protect privacy. Relevant graphs are also suppressed.
- 1. All emergency and non-emergency attendances at the emergency department (ED).
- 2. All attendances that have a triage category and are coded as emergency presentations or unplanned return visits.
- 3. Some patients are excluded from ED time measures due to calculation requirements. For details, see the Technical Supplement: Emergency department measures, July to September 2016.
- 4. The median is the time by which half of patients started treatment. The other half of patients waited equal to or longer
- 5. The 90th percentile is the time by which 90% of patients started treatment. The final 10% of patients waited equal to or longer than this time.
- 6. All presentations that have a departure time.

Note: Presentation time is the earlier time recorded for clerical registration or the triage process. Treatment time is the earliest time recorded when a healthcare professional provides medical care relevant to the patient's presenting problems.

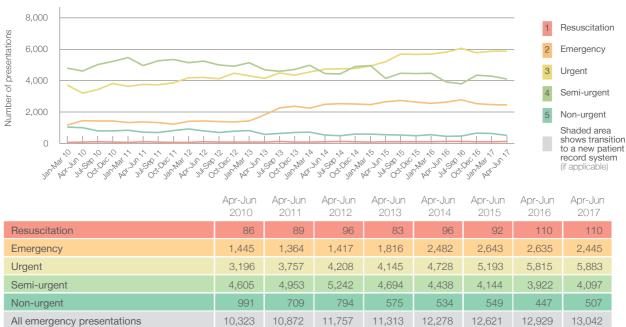
Source: Health Information Exchange, NSW Health (extracted 21 July 2017).

Bankstown / Lidcombe Hospital: Patients presenting to the emergency department

April to June 2017



Emergency presentations² by quarter, April 2012 to June 2017 [‡]



Bankstown / Lidcombe Hospital: Patients arriving by ambulance

April to June 2017

	last year	one year ago
Arrivals used to calculate transfer of care time: 7 3,764 patients	3,573	
ED Transfer of care time		
Median time 13 minutes	13 minutes	0 minutes
90th percentile time 27 minutes	24 minutes	3 minutes

Same period Change since

^(†) Data points are not shown in graphs for quarters when patient numbers are too small.

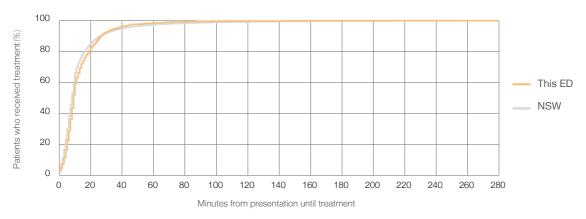
^(±) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after transition to a new information system is not directly comparable. For more information, see Background Paper:

Approaches to reporting time measures of emergency department performance, December 2011.

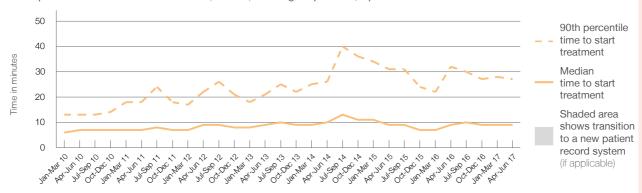
Bankstown / Lidcombe Hospital: Time patients waited to start treatment, triage 2 April to June 2017

Triage 2 Emergency (e.g. chest pain, severe burns)		NSW (this period)
Number of triage 2 patients: 2,445	2,635	
Number of triage 2 patients used to calculate waiting time: 3 2,441	2,627	
Median time to start treatment ⁴ 9 minutes	9 minutes	8 minutes
90th percentile time to start treatment ⁵ 27 minutes	32 minutes	26 minutes

Percentage of triage 2 patients who received treatment by time, April to June 2017



Time patients waited to start treatment (minutes) for triage 2 patients, April 2012 to June 2017 †‡



	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012	Apr-Jun 2013	Apr-Jun 2014	Apr-Jun 2015	Apr-Jun 2016	Apr-Jun 2017
Median time to start treatment ⁴ (minutes)	7	7	9	9	10	9	9	9
90th percentile time to start treatment ⁵ (minutes)	13	18	22	21	26	31	32	27

 $^{(\}dagger)$ Data points are not shown in graphs for quarters when patient numbers are too small.

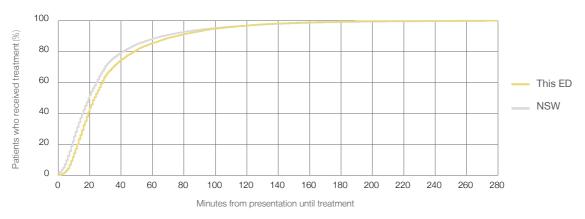
^(±) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after transition to a new information system is not directly comparable. For more information, see Background Paper:

Approaches to reporting time measures of emergency department performance, December 2011.

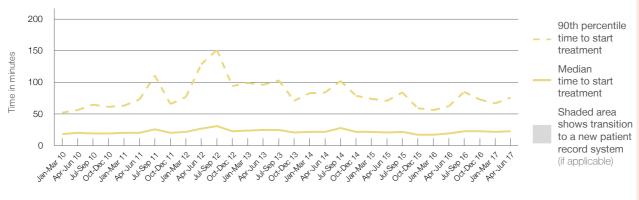
Bankstown / Lidcombe Hospital: Time patients waited to start treatment, triage 3 April to June 2017

Triage 3 Urgent (e.g. moderate blood loss, dehydration)	Same period last year	NSW (this period)
Number of triage 3 patients: 5,883	5,815	
Number of triage 3 patients used to calculate waiting time: 3 5,801	5,713	
Median time to start treatment ⁴ 23 minutes	19 minutes	20 minutes
90th percentile time to start treatment ⁵ 76 minutes	62 minutes	67 minutes

Percentage of triage 3 patients who received treatment by time, April to June 2017



Time patients waited to start treatment (minutes) for triage 3 patients, April 2012 to June 2017 †‡



	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012	Apr-Jun 2013	Apr-Jun 2014	Apr-Jun 2015	Apr-Jun 2016	Apr-Jun 2017
Median time to start treatment ⁴ (minutes)	20	20	27	25	22	21	19	23
90th percentile time to start treatment ⁵ (minutes)	56	73	129	96	84	71	62	76

 $^{(\}dagger)$ Data points are not shown in graphs for quarters when patient numbers are too small.

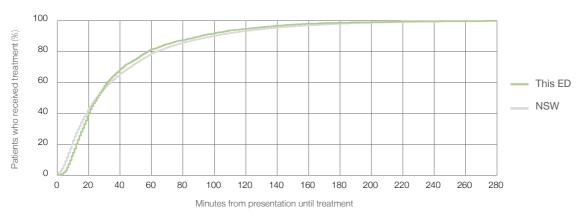
^(±) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after transition to a new information system is not directly comparable. For more information, see Background Paper:

Approaches to reporting time measures of emergency department performance, December 2011.

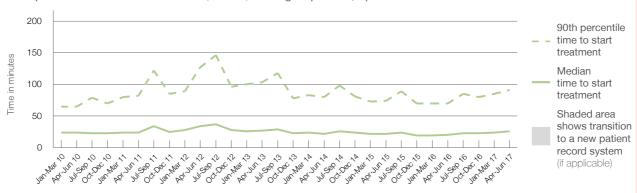
Bankstown / Lidcombe Hospital: Time patients waited to start treatment, triage 4 April to June 2017

Triage 4 Semi-urgent (e.g. sprained a	Same period last year	NSW (this period)	
Number of triage 4 patients: 4,097	3,922		
Number of triage 4 patients used to calc	3,781		
Median time to start treatment ⁴	26 minutes	20 minutes	25 minutes
90th percentile time to start treatment ⁵	91 minutes	70 minutes	99 minutes

Percentage of triage 4 patients who received treatment by time, April to June 2017



Time patients waited to start treatment(minutes) for triage 4 patients, April 2012 to June 2017 †‡



	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012	Apr-Jun 2013	Apr-Jun 2014	Apr-Jun 2015	Apr-Jun 2016	Apr-Jun 2017
Median time to start treatment ⁴ (minutes)	24	24	34	27	22	22	20	26
90th percentile time to start treatment ⁵ (minutes)	65	82	127	103	80	74	70	91

 $^{(\}dagger)$ Data points are not shown in graphs for quarters when patient numbers are too small.

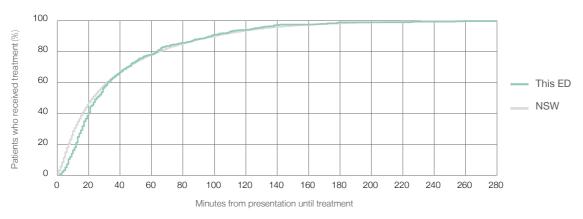
^(‡) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after transition to a new information system is not directly comparable. For more information, see Background Paper:

Approaches to reporting time measures of emergency department performance, December 2011.

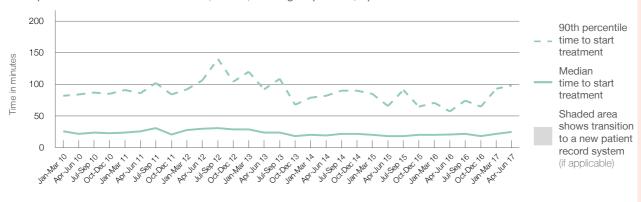
Bankstown / Lidcombe Hospital: Time patients waited to start treatment, triage 5 April to June 2017

Triage 5 Non-urgent (e.g. small cuts or abrasions)	Same period last year	NSW (this period)
Number of triage 5 patients: 507	447	
Number of triage 5 patients used to calculate waiting time: 3 428	371	
Median time to start treatment ⁴ 25 minutes	21 minutes	23 minutes
90th percentile time to start treatment ⁵ 98 minutes	57 minutes	101 minutes

Percentage of triage 5 patients who received treatment by time, April to June 2017



Time patients waited to start treatment(minutes) for triage 5 patients, April 2012 to June 2017 †‡



	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012	Apr-Jun 2013	Apr-Jun 2014	Apr-Jun 2015	Apr-Jun 2016	Apr-Jun 2017
Median time to start treatment ⁴ (minutes)	22	26	30	24	19	18	21	25
90th percentile time to start treatment ⁵ (minutes)	84	86	106	92	82	66	57	98

 $^{(\}dagger)$ Data points are not shown in graphs for quarters when patient numbers are too small.

^(±) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after transition to a new information system is not directly comparable. For more information, see Background Paper:

Approaches to reporting time measures of emergency department performance, December 2011.

7 hours and 22 minutes

Bankstown / Lidcombe Hospital: Time patients spent in the ED

April to June 2017

90th percentile time spent in the ED 9

All presentations: 13,221 patients

Presentations used to calculate time to leaving the ED: 13,221 patients

Median time spent in the ED 8 3 hours and 11 minutes

Same period last year (this period)

13,037

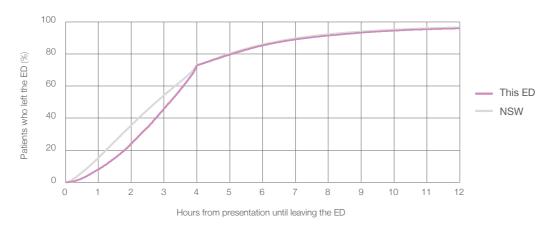
13,037

3 hours and 2 minutes

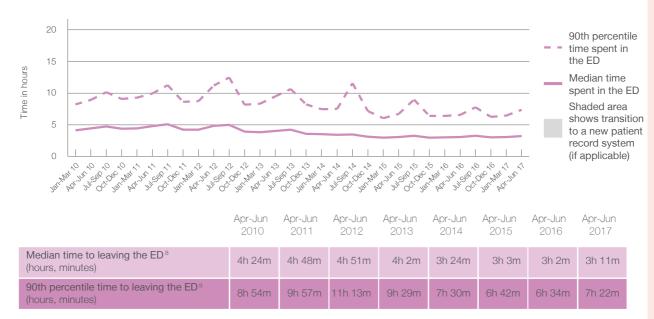
6 hours and 34 minutes

7 hours and 5 minutes

Percentage of patients who left the ED by time, April to June 2017



Time patients spent in the ED, by quarter, April 2012 to June 2017 †‡



 $^{(\}dagger)$ Data points are not shown in graphs for quarters when patient numbers are too small.

^(‡) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after transition to a new information system is not directly comparable. For more information, see Background Paper:

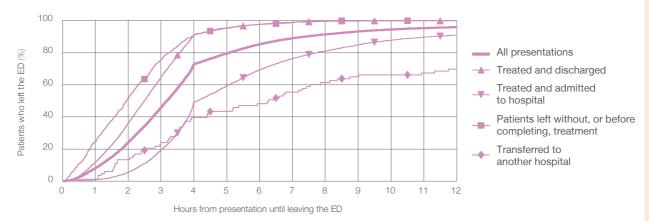
Approaches to reporting time measures of emergency department performance, December 2011.

Bankstown / Lidcombe Hospital: Time patients spent in the ED

By mode of separation April to June 2017

Same period Change since All presentations: 13,221 patients last year one year ago Presentations used to calculate time to leaving the ED:6 13,221 patients 13,037 1.4% 6,556 (49.6%) Treated and discharged 0.1% 6.551 Treated and admitted to hospital 5,638 (42.6%) 5,538 1.8% Patient left without, or before 907 (6.9%) 844 7.5% completing, treatment 83 (0.6%) 25.8% Transferred to another hospital 37 (0.3%) Other 38 -2.6%

Percentage of patients who left the ED by time and mode of separation, April to June 2017 114



1 hour 2 hours 3 hours 4 hours 6 hours 8 hours 10 hours 12 hours

Treated and discharged	11.9%	36.2%	64.7%	91.0%	97.7%	99.5%	99.8%	99.9%
Treated and admitted to hospital	0.8%	5.6%	19.4%	49.0%	69.4%	81.1%	87.8%	91.0%
Patient left without, or before completing, treatment	24.6%	51.6%	75.7%	91.2%	97.7%	99.8%	99.9%	100%
Transferred to another hospital	1.2%	13.3%	24.1%	39.8%	48.2%	61.4%	66.3%	69.9%
All presentations	8.1%	24.2%	46.0%	72.8%	85.3%	91.4%	94.5%	95.9%

 $^{(\}dagger)$ Data points are not shown in graphs for quarters when patient numbers are too small.

^(‡) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after transition to a new information system is not directly comparable. For more information, see Background Paper: Approaches to reporting time measures of emergency department performance, December 2011.

Bankstown / Lidcombe Hospital: Time spent in the ED Percentage of patients who spent four hours or less in the ED April to June 2017

All presentations at the emergency department: 13,221 patients

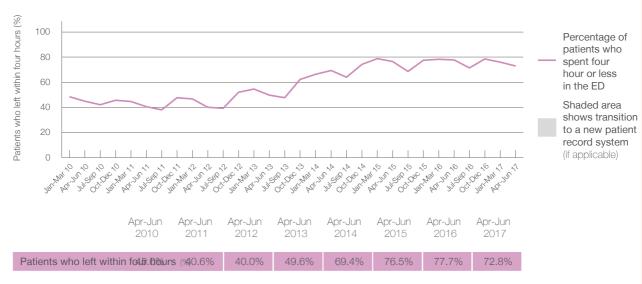
Presentations used to calculate time to leaving the ED:6 13,221 patients

Percentage of patients who spent four hours or less in the ED

72.8%

Change since	Same period
one year ago	last year
1.4%	13,037
1.4%	13,037
	77.7%

Percentage of patients who spent four hours or less in the ED, by quarter, April 2012 to June 2017 11



- * Suppressed due to small numbers and to protect privacy. Relevant graphs are also suppressed.
- † Data points are not shown in graphs for quarters when patient numbers were too small.
- 1. All emergency and non-emergency presentations at the emergency department (ED).
- 2. All presentations that have a triage category and are coded as emergency presentations or unplanned return visits.
- 3. Some patients are excluded from ED time measures due to calculation requirements. For details, see the *Technical Supplement: Emergency department measures, July to September 2016.*
- 4. The median is the time by which half of patients started treatment. The other half of patients took equal to or longer than this time.
- 5. The 90th percentile is the time by which 90% of patients started treatment. The final 105% of patients took equal to or longer than this time.
- 6. All presentations that have a departure time.
- 7. Transfer of care time refers to the period between arrival of patients at the ED by ambulance and the transfer of responsibility for their care from paramedics to ED staff in an ED treatment zone. For more information see Spotlight on Measurement: measuring transfer of care from the ambulance to the emergency department.
- 8. The median is the time by which half of patients left the ED. The other half of patients took equal to or longer than this time.
- 9. The 90th percentile is the time by which 90% of patients left the ED. The final 10% of patients took equal to or longer than this time.

Note: Presentation time is the earlier of times recorded for the start of clerical registration or the triage process.

Treatment time is the earliest time recorded when a healthcare professional provides medical care that is relevant to the patient's presenting problems. For patients who were treated and discharged, departure time is the time when treatment was completed. For all other patients, departure time is the time when the patient actually left the ED.

Note: All percentages are rounded and therefore percentages may not add to 100%.

Sources: ED data from Health Information Exchange, NSW Health (extracted 21 July 2017).

Transfer of care data from Transfer of Care Reporting System (extracted 21 July 2017).