From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Emergency department (ED) overview October to December 2016		
	Same period last year	Change since one year ago
All presentations:1 3,051 patients	2,858	6.8%
Emergency presentations: ² 2,958 patients	2,789	6.1%
Singleton District Hospital: Time patients waited to start treatment ³ October to December 2016		
	Same period last year	NSW (this period)
Triage 2 Emergency (e.g. chest pain, severe burns): 164 patients	174	
Median time to start treatment ⁴	7 minutes	8 minutes
90th percentile time to start treatment ⁵ 28 minutes	27 minutes	26 minutes
Triage 3 Urgent (e.g. moderate blood loss, dehydration): 733 patients	692	
Median time to start treatment ⁴	24 minutes	20 minutes
90th percentile time to start treatment ⁵ 64 minutes	75 minutes	67 minutes
Triage 4 Semi-urgent (e.g. sprained ankle, earache): 1,773 patients	1,658	
Median time to start treatment ⁴ 37 minutes	36 minutes	25 minutes
90th percentile time to start treatment ⁵ 104 minutes	104 minutes	97 minutes
Triage 5 Non-urgent (e.g. small cuts or abrasions): 283 patients	259	
Median time to start treatment ⁴	27 minutes	24 minutes
90th percentile time to start treatment ⁵ 96 minutes	81 minutes	103 minutes

Singleton District Hospital: Time from presentation until leaving the ED

October to December 2016				Change since one year ago
Attendances used to calculate time to le	eaving the ED:6 3,051 patients		2,858	6.8%
Percentage of patients who spent four hours or less in the ED		91.1%	90.8%	

* 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, January to March 2016.
- 4. The median is the time by which half of patients started treatment. The other half of patients waited equal to or longer than this time.
- 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.

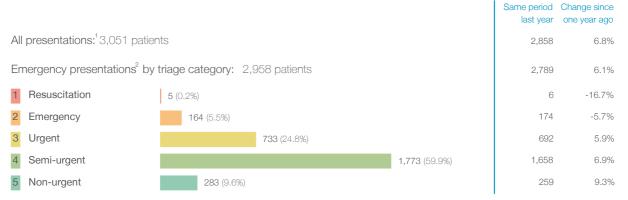
Source: Health Information Exchange, NSW Health (extracted 24 January 2017).

District group 2 hospitals (C2) Hunter New England Local Health District

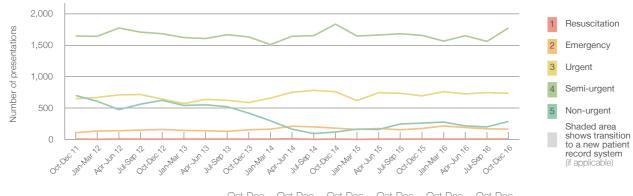
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From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Patients presenting to the emergency department October to December 2016



Emergency presentations² by quarter, October 2011 to December 2016 [‡]



	2011	2012	2013	2014	2015	2016
Resuscitation	5	< 5	< 5	< 5	6	5
Emergency	105	157	155	183	174	164
Urgent	649	642	587	759	692	733
Semi-urgent	1,647	1,682	1,629	1,834	1,658	1,773
Non-urgent	696	623	419	117	259	283
All emergency presentations	3,102	3,104	2,790	2,893	2,789	2,958

Singleton District Hospital: Patients arriving by ambulance

October to December 2016

Arrivals used to calculate transfer of care time: ⁷ 248 patients

ED Transfer of care time

Median	time
IVICUIUII	ULLIC

90th percentile time

5 minutes

16 minutes

	Change since one year ago
7 minutes	-2 minutes
16 minutes	0 minutes

District group 2 hospitals (C2) Hunter New England Local Health District

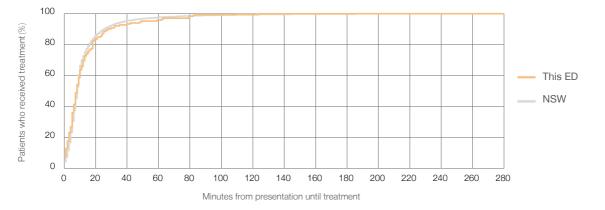
^(†) Data points are not shown in graphs for quarters when patient numbers are too small.

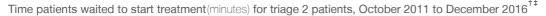
Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after (\pm) trans For more information, see Background Paper: Approaches to reporting time measures of emergency department performance, December 2011.

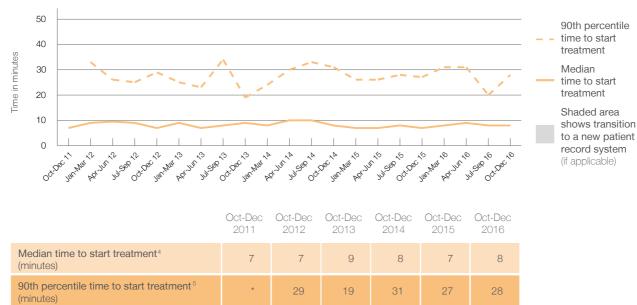
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Time patients waited to start treatment, triage 2 October to December 2016 NSW Same period Triage 2 Emergency (e.g. chest pain, severe burns) (this period) last year Number of triage 2 patients: 164 174 Number of triage 2 patients used to calculate waiting time:³ 164 170 Median time to start treatment⁴ 8 minutes 7 minutes 8 minutes 90th percentile time to start treatment⁵ 28 minutes 26 minutes 27 minutes

Percentage of triage 2 patients who received treatment by time, October to December 2016







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

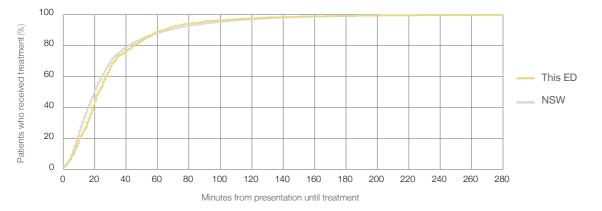
^(±) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after trans For more information, see Background Paper:

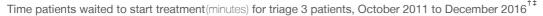
Approaches to reporting time measures of emergency department performance, December 2011.

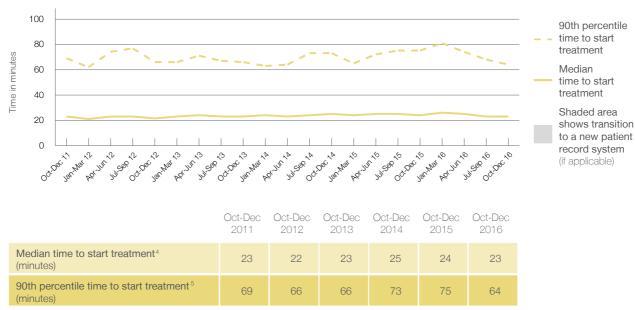
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Time patients waited to start treatment, triage 3 October to December 2016 NSW Same period Triage 3 Urgent (e.g. moderate blood loss, dehydration) (this period) last year Number of triage 3 patients: 733 692 Number of triage 3 patients used to calculate waiting time:³ 714 665 Median time to start treatment⁴ 23 minutes 24 minutes 20 minutes 90th percentile time to start treatment⁵ 64 minutes 67 minutes 75 minutes

Percentage of triage 3 patients who received treatment by time, October to December 2016







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

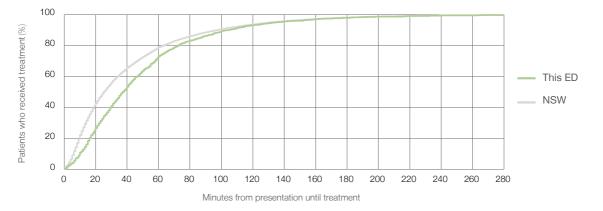
^(±) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after trans For more information, see Background Paper:

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

From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Time patients waited to start treatment, triage 4 October to December 2016 NSW Same period Triage 4 Semi-urgent (e.g. sprained ankle, earache) (this period) last year Number of triage 4 patients: 1,773 1.658 Number of triage 4 patients used to calculate waiting time:³ 1,696 1,564 Median time to start treatment⁴ 37 minutes 36 minutes 25 minutes 90th percentile time to start treatment⁵ 104 minutes 104 minutes 97 minutes

Percentage of triage 4 patients who received treatment by time, October to December 2016



Time patients waited to start treatment(minutes) for triage 4 patients, October 2011 to December 2016^{††}



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

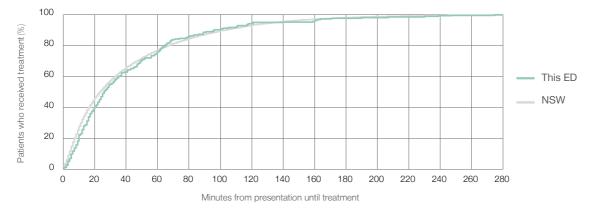
^(±) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after trans For more information, see Background Paper:

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

From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Time patients waited to start treatment, triage 5 October to December 2016 NSW Same period Triage 5 Non-urgent (e.g. small cuts or abrasions) (this period) last year Number of triage 5 patients: 283 259 Number of triage 5 patients used to calculate waiting time:³ 253 231 Median time to start treatment⁴ 26 minutes 27 minutes 24 minutes 90th percentile time to start treatment⁵ 96 minutes 103 minutes 81 minutes

Percentage of triage 5 patients who received treatment by time, October to December 2016



Time patients waited to start treatment(minutes) for triage 5 patients, October 2011 to December 2016^{††}



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

^(†) 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 trans For more information, see Background Paper:

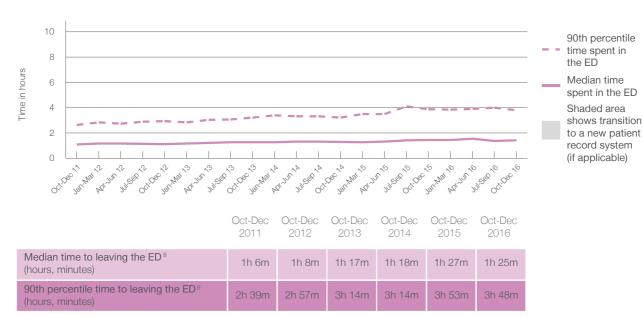
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Time patients spent in the ED October to December 2016 NSW Same period (this period) last vear All presentations:1 3,051 patients 2,858 Presentations used to calculate time to leaving the ED:⁶ 3,051 patients 2,858 1 hours and 2 hours and Median time spent in the ED ⁸ 1 hours and 25 minutes 27 minutes 41 minutes 3 hours and 6 hours and 90th percentile time spent in the ED⁹ 3 hours and 48 minutes 53 minutes 54 minutes

Percentage of patients who left the ED by time, October to December 2016



Time patients spent in the ED, by quarter, October 2011 to December 2016



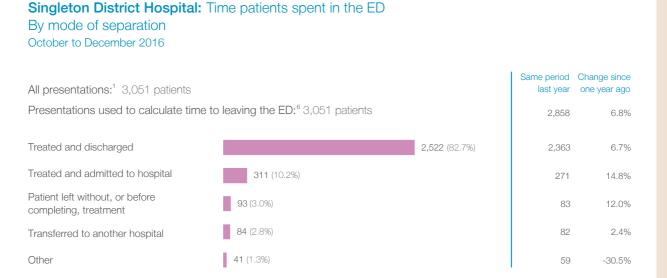
^(†) Data points are not shown in graphs for quarters when patient numbers are too small.

^(‡) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after trans For more information, see Background Paper: Approaches to reporting time measures of emergency department performance. December 2011

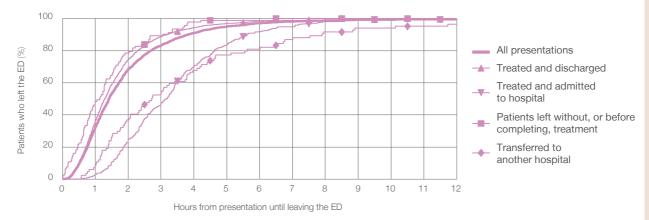
Singleton District Hospital

More information is available on BHI's interactive portal at www.bhi.nsw.gov.au/healthcare_observer

From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.



Percentage of patients who left the ED by time and mode of separation, October to December 2016



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

Treated and discharged	36.3%	74.7%	88.8%	94.3%	98.3%	99.2%	99.6%	99.6%
Treated and admitted to hospital	2.9%	24.8%	47.3%	70.4%	92.0%	98.1%	99.4%	99.7%
Patient left without, or before completing, treatment	48.4%	78.5%	89.2%	97.8%	98.9%	100%	100%	100%
Transferred to another hospital	8.3%	36.9%	53.6%	67.9%	81.0%	91.7%	94.0%	96.4%
All presentations	32.5%	68.5%	83.3%	91.1%	97.1%	98.9%	99.4%	99.5%

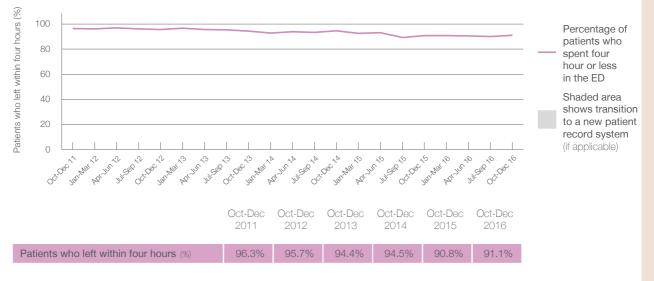
 $^{(\}dagger)$ $\;$ Data points are not shown in graphs for quarters when patient numbers are too small.

^(‡) Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before and after trans For more information, see Background Paper: Approaches to reporting time measures of emergency department performance, December 2011.

From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

Singleton District Hospital: Time spent in the ED Percentage of patients who spent four hours or less in the ED October to December 2016 Same period Change since last year one year ago All presentations at the emergency department:¹ 3,051 patients 2,858 6.8% Presentations used to calculate time to leaving the ED:⁶ 3,051 patients 2,858 6.8% Percentage of patients who spent four hours or less in the ED 91.1% 90.8%

Percentage of patients who spent four hours or less in the ED, by quarter, October 2011 to December 2016^{†‡}



- * 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.
- 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.
- 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, January to March 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 final105% 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 24 January 2017).

Transfer of care data from Transfer of Care Reporting System (extracted 24 January 2017).

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