

MEDIA BACKGROUND

Hospital Quarterly: Performance of NSW public hospitals January to March 2012

Emergency Departments, January to March 2012

More than half a million patients (540,301 patients) attended NSW public hospital emergency departments (EDs) from January to March 2012. This is 3% more than a year ago. However, due to 2012 being a leap year, part of the increase in attendances and admissions in this quarter, compared to the same quarter last year, is explained by the additional day in February.

Almost half of all emergency attendances (45%) were for patients in the potentially serious (triage 4) category; 31% were in the potentially life threatening category (triage 3), 14% in the lowest urgency category (triage 5) and 9% in the imminently life threatening category (triage 2). Patients in the immediately life threatening category (triage 1) accounted for less than 1% of all ED patients.

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Arrivals by ambulance

From January to March 2012 there were 131,942 arrivals by ambulance to NSW public hospital emergency departments. This is a 5% increase since a year ago.

For patients arriving by ambulance, 69% were transferred into the care of emergency department staff within 30 minutes. This compares with 66% a year ago and 72% two years ago.

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Time to start treatment

At a state level, we report the median times and 95th percentile times by which emergency department (ED) patients start treatment for triage categories 2 to 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 – imminently life threatening (e.g. chest pain, severe burns)
The median time to start treatment was 8 minutes and 95th percentile time to start treatment was 32 minutes.
- Triage 3 – potentially life threatening (e.g. moderate blood loss, dehydration)
The median time to start treatment was 22 minutes and 95th percentile time to start treatment was 114 minutes.
- Triage 4 – potentially serious (e.g. minor head injury)
The median time to start treatment was 31 minutes and 95th percentile time to start treatment was 167 minutes.

- Triage 5 – less urgent (e.g. small cuts or abrasions)
The median time to start treatment was 30 minutes and 95th percentile time to start treatment was 172 minutes. *page 7 figure 5*

The median times to start treatment were unchanged for triage 2, but shorter across all of other triage categories compared to the same quarter in 2011. The 95th percentile times to start treatment were shorter across all triage categories. *page 7*

There is variation between hospitals when comparing time from presentation until treatment by triage category. Following are examples of the ranges of results from January to March 2012 for larger hospitals using one of the two predominant information systems:

- The median time to start treatment for all triage 2 patients was five minutes at Orange Hospital, compared with 13 minutes at Fairfield Hospital.
- The 95th percentile time to start treatment for triage 2 patients was 16 minutes at Concord Hospital, compared with 52 minutes at Wyong Hospital.
- The median time to start treatment for all triage 4 patients was 15 minutes at Nepean Hospital, compared with 53 minutes at Tamworth Hospital.
- The 95th percentile time to start treatment for triage 4 patients was 82 minutes at Nepean Hospital, compared with 253 minutes at Manning Base Hospital.

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Leaving the emergency department

Hospital Quarterly now reports how NSW hospitals are performing against the National Emergency Access Target (NEAT). The NEAT for NSW in 2012 is for 69% of all patients to leave emergency departments within four hours. In January to March this year, 59% of patients left NSW emergency departments within four hours. *page 13*

Hospital Quarterly now reports on the times that all patients leave the ED, not just admitted patients (as reported in previous issues). Due to the change in reporting, the information in this issue of *Hospital Quarterly* cannot be compared to past issues. Five year graphs for all patients are available to compare performance over time. *page 12*

The median time to leaving the ED for all patients was three hours and 19 minutes. The 95th percentile time to leaving the ED was 11 hours and 55 minutes. These times are shorter than the same period last year. *page 10*

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. *page 11*

There is variation between hospitals when comparing the time to leaving the ED. The following examples show the ranges of results from January to March 2012 for larger hospitals using one of the two predominant information systems:

- The median time to leaving the ED ranged from two hours and 47 minutes at Orange Hospital to five hours and 11 minutes at Blacktown Hospital.
- The 95th percentile time to leaving the ED ranged from nine hours and 18 minutes at Concord Hospital to 22 hours and 36 minutes at Blacktown Hospital.

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The median and 95th percentile

Reporting on the times that the median and 95th percentile of patients start treatment or leave the ED is a common international approach to measuring wait times. *Hospital Quarterly* now includes information that shows these measurements used in our reports.

The median times are the times by which half of patients started treatment or left the ED.

For example: if the median time to start treatment is 23 minutes, this means half of patients started treatment between 0 and 23 minutes after arriving at the ED. The other half waited 23 minutes or longer for treatment.

The 95th percentile times are the times by which 95% of patients started treatment or left the ED. We use this value to indicate the longest times that patients waited for treatment or to leave the ED.

For example: if the 95th percentile time to treatment is 125 minutes, this means 95% of patients were seen between 0 and 125 minutes after arriving at the ED. The last 5% of patients (or 1 in 20) waited 125 minutes or longer for treatment.

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Elective Surgery, January to March 2012

During this quarter, 48,131 elective surgery procedures were completed in NSW public hospitals or in facilities contracted by NSW public hospitals.

This is 6% lower than the 51,429 surgical procedures completed from October to December 2011 (previous quarter) and 4% more than the 46,488 surgical procedures completed from January to March 2011 (same quarter, one year ago).

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However, due to 2012 being a leap year, part of the increase in elective surgery in this quarter, compared to the same quarter last year, is explained by the additional day in February.

From January to March 2012, 91% of all elective surgery patients were admitted within the recommended time for the urgency of their care. For urgent surgery 94% of patients were admitted within the recommended 30 days, 88% of semi-urgent patients were admitted within 90 days and 91% 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 233 days, 16 days more than the same quarter in 2011.

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Admitted Patients, January to March 2012

There were 412,526 admitted patient episodes from January to March 2012. This is 4% more than a year ago. However, due to 2012 being a leap year, part of the increase in admitted patient episodes in this quarter, compared to the same quarter last year, is explained by the additional day in February. The average length of stay was unchanged at 3.4 bed days.