Armidale and New England Hospital: Emergency department (ED) overview
April to June 2017

		Same period last year	Change since one year ago
All presentations:[1]	3,923 patients	4,016	-2.3%
Emergency presentations:[2]	3,774 patients	3,849	-1.9%

Armidale and New England Hospital: Time patients waited to start treatment[3]
April to June 2017

		Same period last year	NSW (this period)
Triage 2 Emergency (e.g. chest pain, severe burns): 251 patients		249	
Median time to start treatment[4]	9 minutes	8 minutes	8 minutes
90th percentile time to start treatment[5]	40 minutes	28 minutes	26 minutes
Triage 3 Urgent (e.g. moderate blood loss, dehydration): 1,065 patients		1,187	
Median time to start treatment[4]	27 minutes	24 minutes	20 minutes
90th percentile time to start treatment[5]	90 minutes	75 minutes	67 minutes
Triage 4 Semi-urgent (e.g. sprained ankle, earache): 2,137 patients		2,156	
Median time to start treatment[4]	38 minutes	34 minutes	25 minutes
90th percentile time to start treatment[5]	147 minutes	143 minutes	99 minutes
Triage 5 Non-urgent (e.g. small cuts or abrasions): 308 patients		249	
Median time to start treatment[4]	25 minutes	22 minutes	23 minutes
90th percentile time to start treatment[5]	112 minutes	106 minutes	101 minutes

Armidale and New England Hospital: Time from presentation until leaving the ED
April to June 2017

		Same period last year	Change since one year ago
Attendances used to calculate time to leaving the ED:[6]	3,923 patients	4,016	-2.3%
Percentage of patients who spent four hours or less in the ED	78.4%	83.6%	

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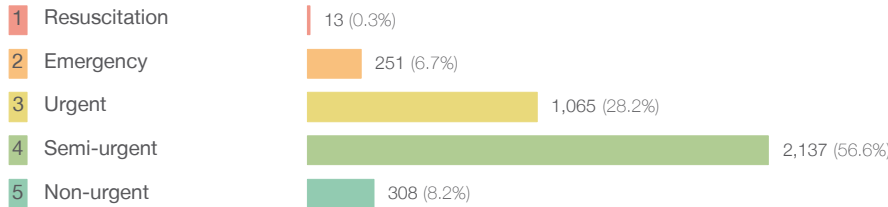
Source: Health Information Exchange, NSW Health (extracted 21 July 2017).

Armidale and New England Hospital: Patients presenting to the emergency department
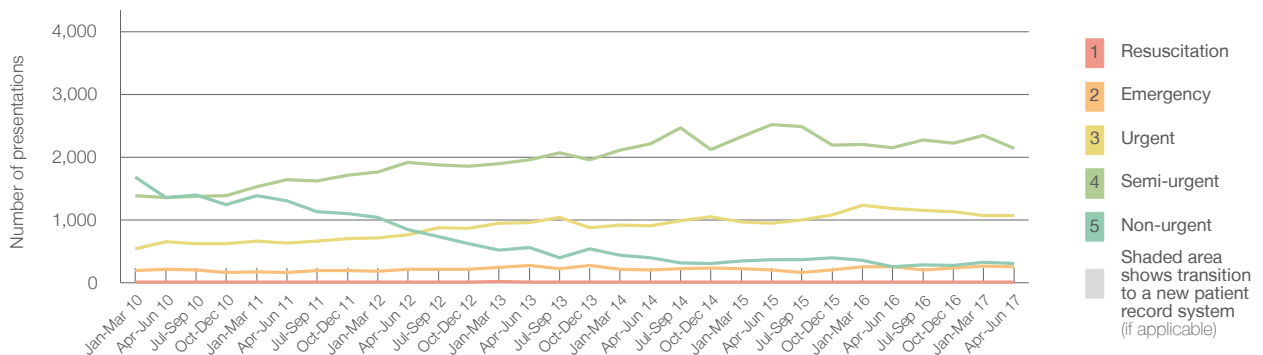April to June 2017

		Same period last year	Change since one year ago
All presentations:[1] 3,923 patients		4,016	-2.3%
Emergency presentations[2] by triage category: 3,774 patients		3,849	-1.9%
1 Resuscitation	13 (0.3%)	8	62.5%
2 Emergency	251 (6.7%)	249	0.8%
3 Urgent	1,065 (28.2%)	1,187	-10.3%
4 Semi-urgent	2,137 (56.6%)	2,156	-0.9%
5 Non-urgent	308 (8.2%)	249	23.7%

Emergency presentations[2] by quarter, 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
Resuscitation	9	10	6	10	7	7	8	13
Emergency	213	162	209	278	205	202	249	251
Urgent	656	630	764	955	902	946	1,187	1,065
Semi-urgent	1,360	1,640	1,915	1,957	2,214	2,519	2,156	2,137
Non-urgent	1,357	1,302	844	555	400	366	249	308
All emergency presentations	3,595	3,744	3,738	3,755	3,728	4,040	3,849	3,774

Armidale and New England Hospital: Patients arriving by ambulance
April to June 2017

		Same period last year	Change since one year ago
Arrivals used to calculate transfer of care time:[7] 436 patients **		400	
ED Transfer of care time			
Median time	4 minutes	4 minutes	0 minutes
90th percentile time	28 minutes	26 minutes	3 minutes

(†)   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.

(**) Interpret with caution: total ambulance arrivals include more than 30% of records for which transfer of care time cannot be calculated.

Armidale and New England Hospital: Time patients waited to start treatment, triage 2
April to June 2017

			Same period last year	NSW (this period)
Triage 2 Emergency (e.g. chest pain, severe burns)				
Number of triage 2 patients: 251			249	
Number of triage 2 patients used to calculate waiting time:[3] 248			245	
Median time to start treatment[4]		9 minutes	8 minutes	8 minutes
90th percentile time to start treatment[5]		40 minutes	28 minutes	26 minutes

Percentage of triage 2 patients who received treatment by time, April to June 2017
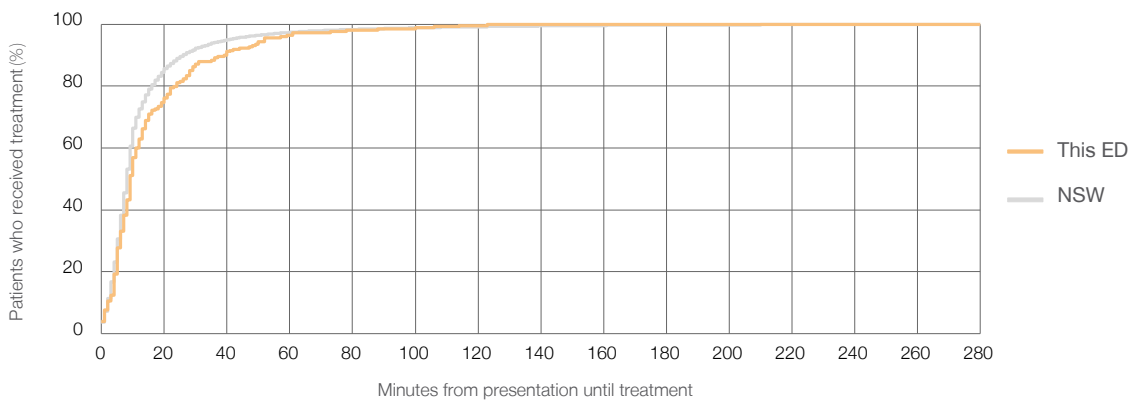
Time patients waited to start treatment (minutes) for triage 2 patients, April 2012 to June 2017[†‡]
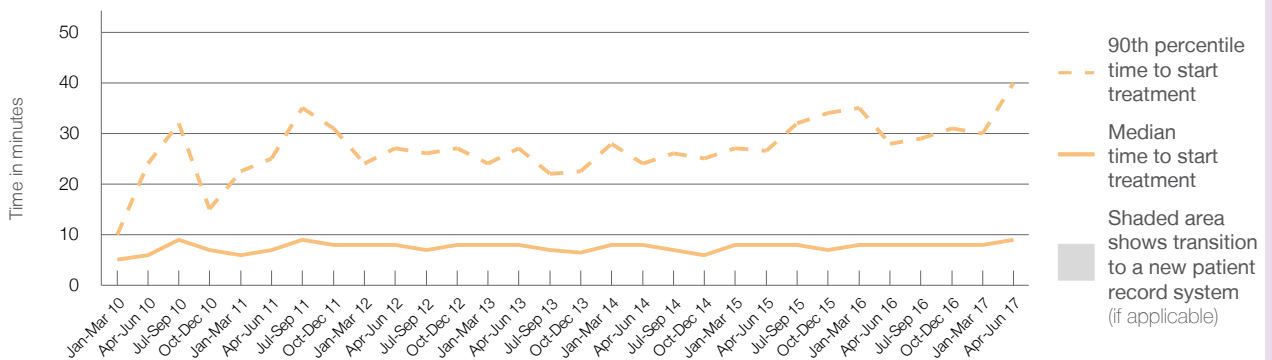
Legend:
- 90th percentile time to start treatment
- Median time to start treatment
- Shaded area shows transition to a new patient record system (if applicable)

	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)	6	7	8	8	8	8	8	9
90th percentile time to start treatment[5] (minutes)	24	25	27	27	24	27	28	40

(†) 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.

Armidale and New England Hospital

District group 1 hospitals (C1)
Hunter New England Local Health District

Armidale and New England Hospital: Time patients waited to start treatment, triage 3
April to June 2017

			Same period last year	NSW (this period)
Triage 3 Urgent (e.g. moderate blood loss, dehydration)				
Number of triage 3 patients: 1,065			1,187	
Number of triage 3 patients used to calculate waiting time:[3] 1,032			1,131	
Median time to start treatment[4]		27 minutes	24 minutes	20 minutes
90th percentile time to start treatment[5]		90 minutes	75 minutes	67 minutes

Percentage of triage 3 patients who received treatment by time, April to June 2017
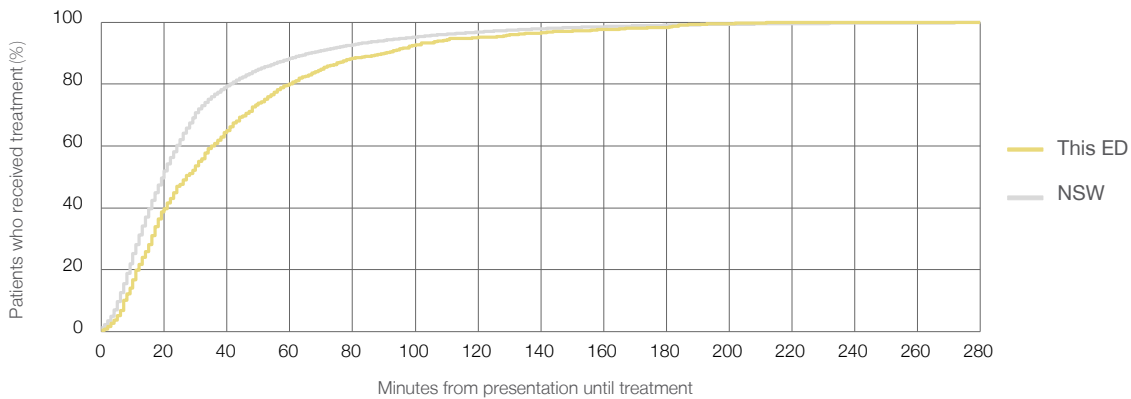
Time patients waited to start treatment (minutes) for triage 3 patients, April 2012 to June 2017[†‡]
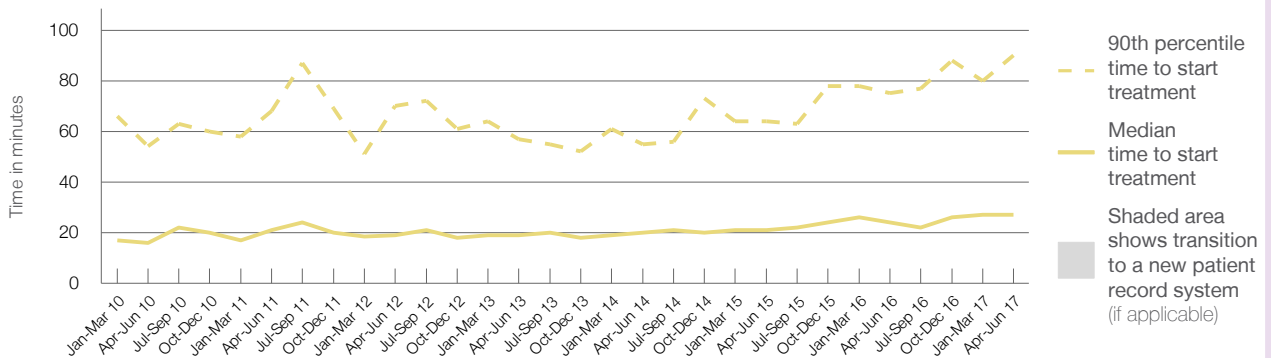
90th percentile time to start treatment

Median time to start treatment

Shaded area shows transition to a new patient record system (if applicable)

	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)	16	21	19	19	20	21	24	27
90th percentile time to start treatment[5] (minutes)	54	68	70	57	55	64	75	90

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(‡) 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.

Armidale and New England Hospital

District group 1 hospitals (C1)
Hunter New England Local Health District

Armidale and New England Hospital: Time patients waited to start treatment, triage 4
April to June 2017

		Same period last year	NSW (this period)
Triage 4 Semi-urgent (e.g. sprained ankle, earache)			
Number of triage 4 patients: 2,137		2,156	
Number of triage 4 patients used to calculate waiting time:[3] 1,952		1,937	
Median time to start treatment[4]	38 minutes	34 minutes	25 minutes
90th percentile time to start treatment[5]	147 minutes	143 minutes	99 minutes

Percentage of triage 4 patients who received treatment by time, April to June 2017
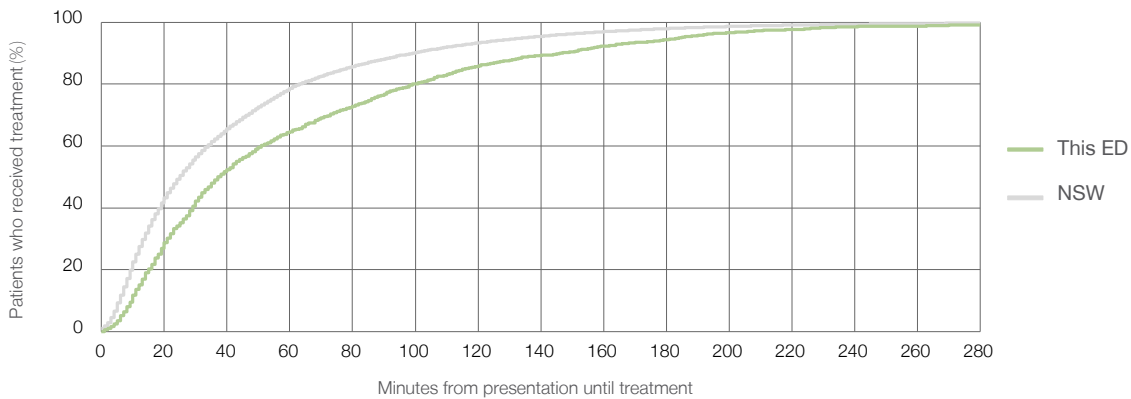
Time patients waited to start treatment (minutes) for triage 4 patients, April 2012 to June 2017[†‡]
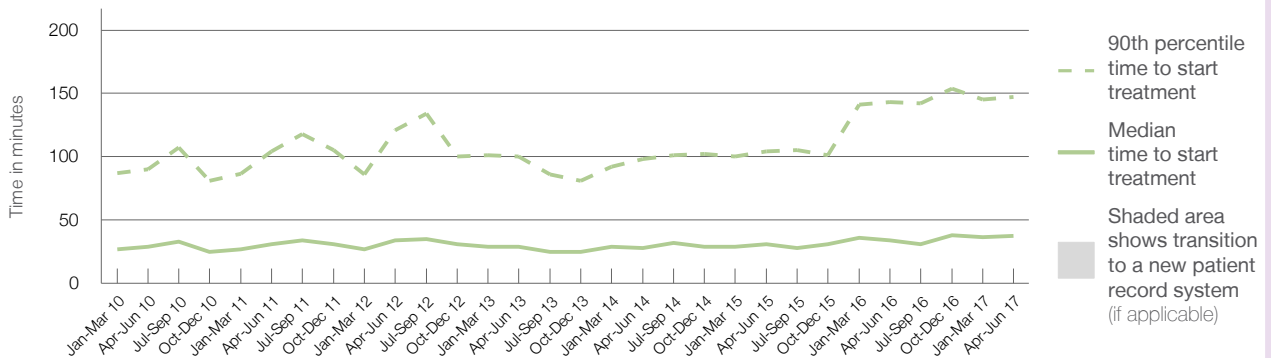
90th percentile time to start treatment

Median time to start treatment

Shaded area shows transition to a new patient record system (if applicable)

	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)	29	31	34	29	28	31	34	38
90th percentile time to start treatment[5] (minutes)	90	104	121	100	98	104	143	147

(†) 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.

Armidale and New England Hospital: Time patients waited to start treatment, triage 5
April to June 2017

		Same period last year	NSW (this period)
Triage 5 Non-urgent (e.g. small cuts or abrasions)			
Number of triage 5 patients: 308		249	
Number of triage 5 patients used to calculate waiting time:[3] 248		196	
Median time to start treatment[4]	25 minutes	22 minutes	23 minutes
90th percentile time to start treatment[5]	112 minutes	106 minutes	101 minutes

Percentage of triage 5 patients who received treatment by time, April to June 2017
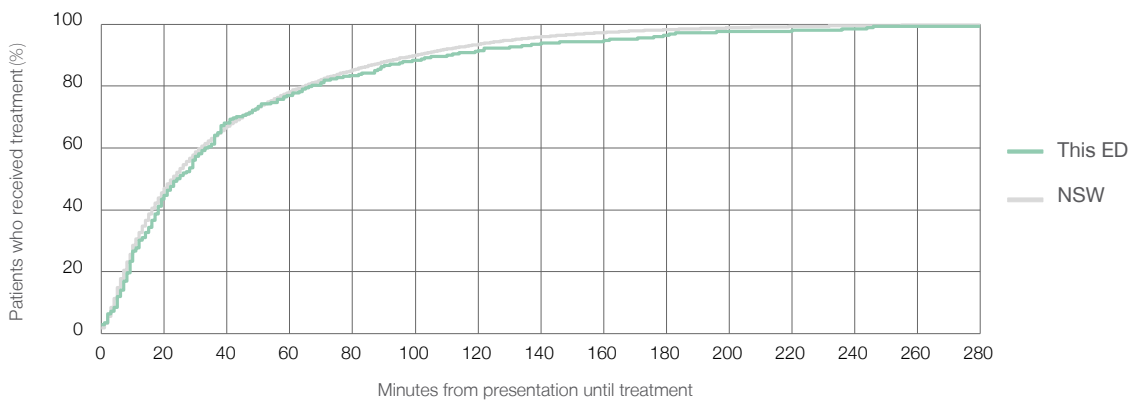
Time patients waited to start treatment (minutes) for triage 5 patients, April 2012 to June 2017 [†‡]
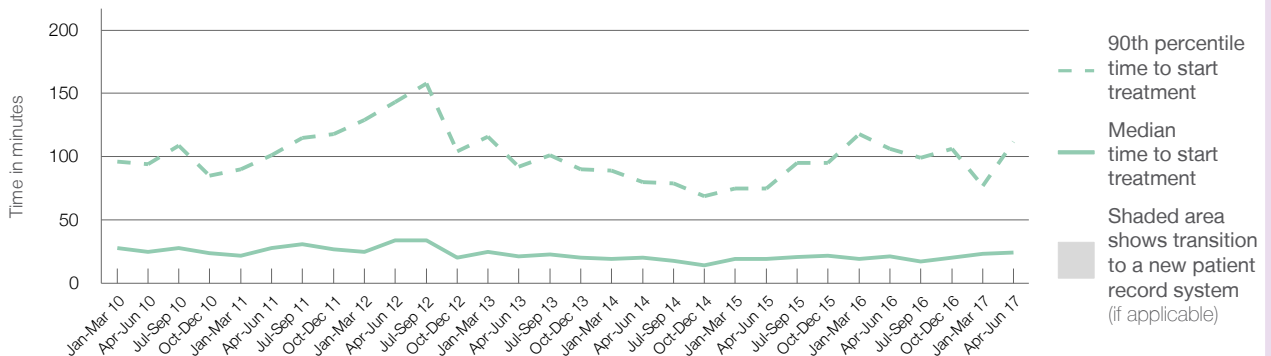
90th percentile time to start treatment

Median time to start treatment

Shaded area shows transition to a new patient record system (if applicable)

	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)	25	28	34	22	20	19	22	25
90th percentile time to start treatment[5] (minutes)	94	101	143	92	80	75	106	112

(†)   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.

Armidale and New England Hospital

District group 1 hospitals (C1)
Hunter New England Local Health District

Armidale and New England Hospital: Time patients spent in the ED
April to June 2017

		Same period last year	NSW (this period)
All presentations:[1]	3,923 patients	4,016	
Presentations used to calculate time to leaving the ED:[6]	3,923 patients	4,016	
Median time spent in the ED [8]	2 hours and 18 minutes	2 hours and 4 minutes	2 hours and 46 minutes
90th percentile time spent in the ED [9]	5 hours and 24 minutes	4 hours and 51 minutes	7 hours and 5 minutes

Percentage of patients who left the ED by time, April to June 2017
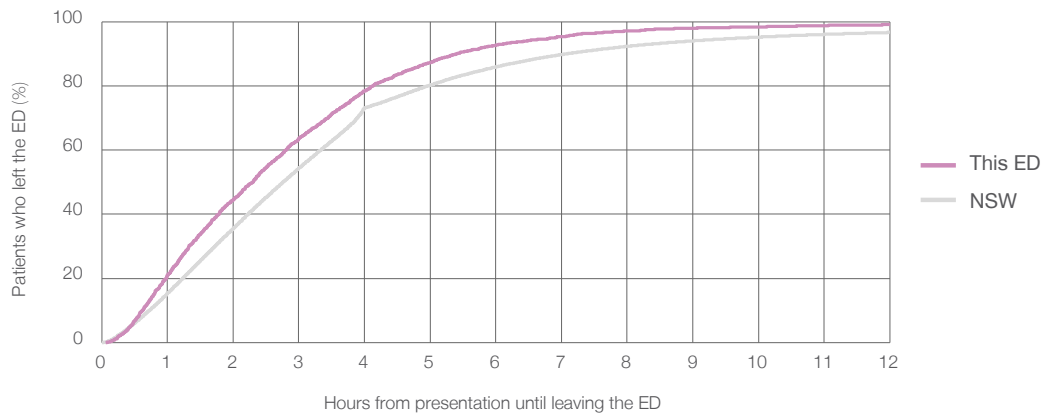
Time patients spent in the ED, by quarter, April 2012 to June 2017 [†‡]
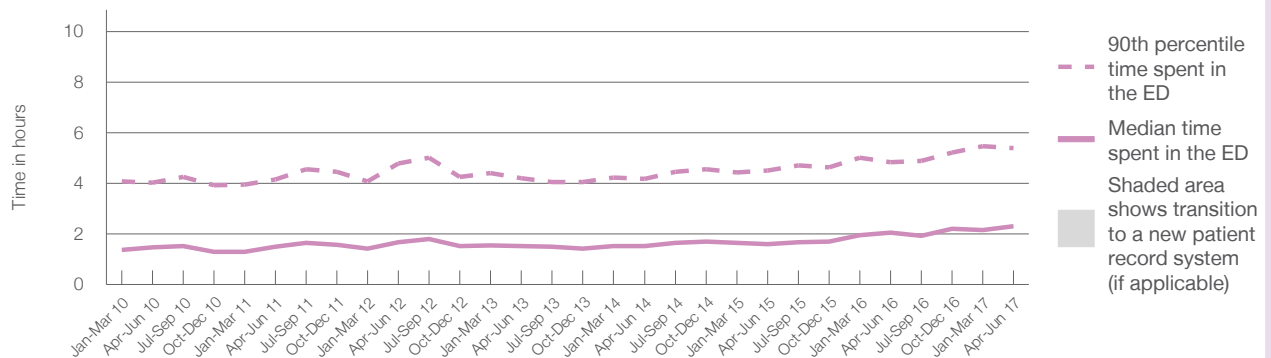
	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012	Apr-Jun 2013	Apr-Jun 2014	Apr-Jun 2015	Apr-Jun 2016	Apr-Jun 2017
Median time to leaving the ED [8] (hours, minutes)	1h 29m	1h 30m	1h 41m	1h 31m	1h 32m	1h 37m	2h 4m	2h 18m
90th percentile time to leaving the ED [9] (hours, minutes)	4h 2m	4h 9m	4h 47m	4h 12m	4h 11m	4h 31m	4h 51m	5h 24m

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Armidale and New England Hospital

District group 1 hospitals (C1)
Hunter New England Local Health District

Armidale and New England Hospital: Time patients spent in the ED
By mode of separation
April to June 2017

		Same period last year	Change since one year ago
All presentations:[1] 3,923 patients			
Presentations used to calculate time to leaving the ED:[6] 3,923 patients		4,016	-2.3%
Treated and discharged	2,675 (68.2%)	2,872	-6.9%
Treated and admitted to hospital	946 (24.1%)	867	9.1%
Patient left without, or before completing, treatment	231 (5.9%)	216	6.9%
Transferred to another hospital	53 (1.4%)	46	15.2%
Other	18 (0.5%)	15	20.0%

Percentage of patients who left the ED by time and mode of separation, April to June 2017 [†‡]
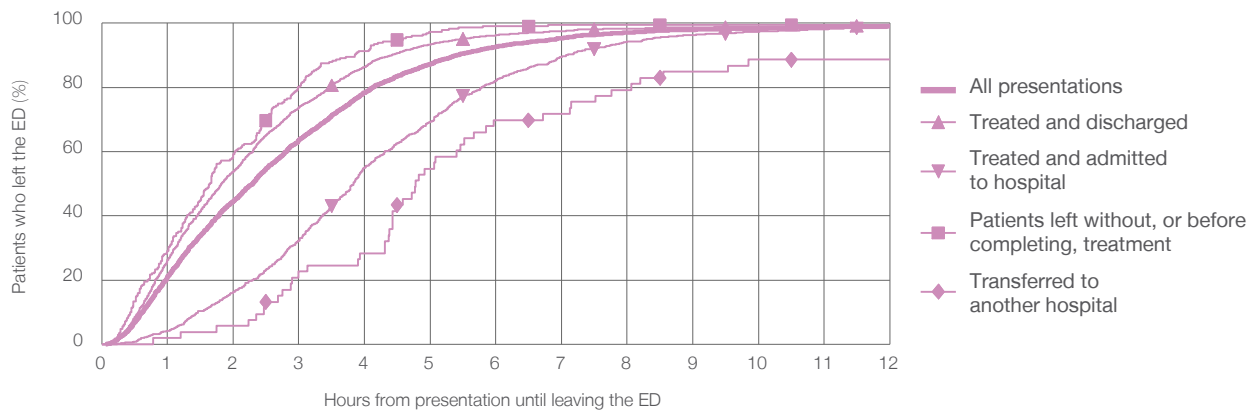
	1 hour	2 hours	3 hours	4 hours	6 hours	8 hours	10 hours	12 hours
Treated and discharged	26.4%	53.9%	73.9%	86.4%	96.2%	98.3%	98.8%	99.4%
Treated and admitted to hospital	4.2%	16.3%	32.3%	55.0%	82.2%	94.3%	97.4%	98.6%
Patient left without, or before completing, treatment	29.0%	59.3%	80.1%	91.3%	99.1%	99.6%	99.6%	99.6%
Transferred to another hospital	1.9%	5.7%	22.6%	28.3%	69.8%	79.2%	88.7%	88.7%
All presentations	21.1%	44.6%	63.6%	78.4%	92.7%	97.1%	98.4%	99.1%

(†) 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.

Armidale and New England Hospital

District group 1 hospitals (C1)
Hunter New England Local Health District

Armidale and New England Hospital: Time spent in the ED
Percentage of patients who spent four hours or less in the ED
April to June 2017

		Same period last year	Change since one year ago
All presentations at the emergency department:[1] 3,923 patients		4,016	-2.3%
Presentations used to calculate time to leaving the ED:[6] 3,923 patients		4,016	-2.3%
Percentage of patients who spent four hours or less in the ED	78.4%	83.6%	

Percentage of patients who spent four hours or less in the ED, by quarter, 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
Patients who left within four hours (%)	89.0%	89.3%	85.0%	88.8%	89.3%	86.4%	83.6%	78.4%
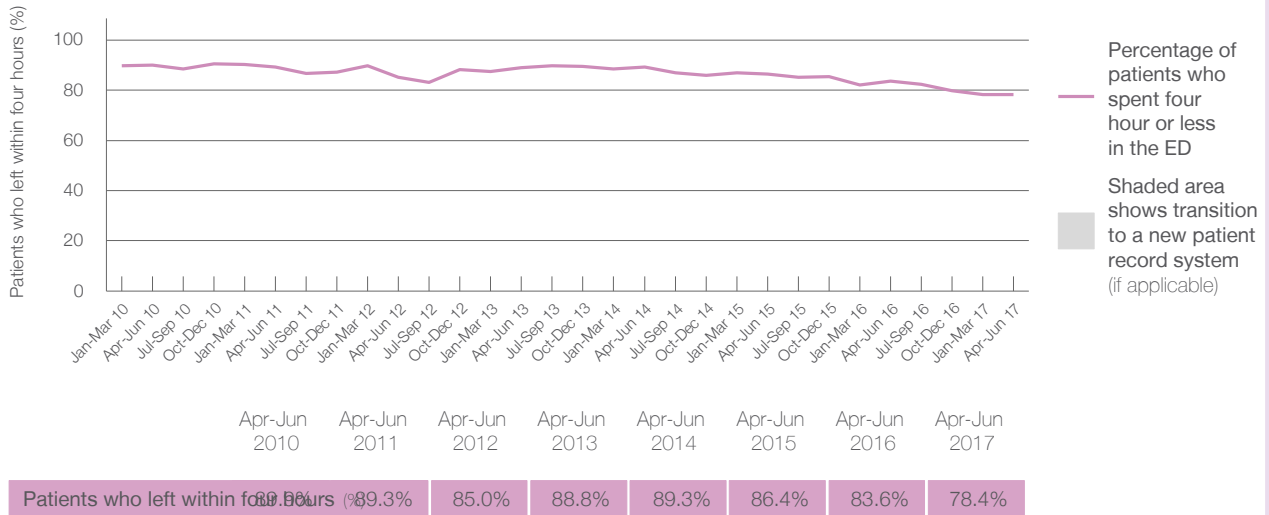
* Suppressed due to small numbers and to protect privacy. Relevant graphs are also suppressed.
† Data points are not shown in graphs for quarters when patient numbers were too small.
‡ Caution is advised when interpreting abrupt changes over time at the hospital level. For example, performance before 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, 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).

Armidale and New England Hospital

District group 1 hospitals (C1)
Hunter New England Local Health District