

# Emergency Departments

## Hospital Quarterly: Performance of NSW public hospitals

### July to September 2011

More than half a million patients attended NSW public hospital emergency departments (EDs) during July to September 2011, 2% more than the same quarter last year. The greatest increases were seen in the more urgent triage categories.

The number of patients who travelled to the ED by ambulance was a two-year high while the percentage of these patients who were transferred into the care of ED staff within 30 minutes was the lowest level across the past two years.

Admissions to hospital from the ED increased 4% this quarter; half of these patients left the ED within seven hours and three minutes of presentation and most (95%) were admitted within 22 hours and five minutes of presentation.

This issue of *Hospital Quarterly* presents changes to how the Bureau reports ED information to promote fairer comparisons between hospitals and better reflect patients' journeys.

*Hospital Quarterly* now includes the times 50% and 95% of patients began treatment within and the times 50% and 95% of admitted patients left the ED within.

The Bureau now reports the time patients spent in NSW EDs from the earliest recorded time rather than when they were triaged. It reports the length of time in NSW EDs for each quarter of the past five years, so people can identify areas to improve and whether any improvements have been sustained.

This is one of three *Hospital Quarterly* modules. For the Elective Surgery and Admitted Patients modules visit [www.bhi.nsw.gov.au](http://www.bhi.nsw.gov.au)

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From July to September 2011 ...	Same period last year...	The difference...
There were 518,409 visits to NSW emergency departments	506,942 visits	11,467 (+2%)
132,452 people travelled to the emergency department by ambulance	126,177 people	6,275 (+5%)
There were 144,327 admissions to hospital from emergency departments	138,636 admissions	5,691 (+4%)
Half of all admitted patients left the ED within 7 hours and 3 minutes of presentation	6 hours and 54 minutes	9 minutes longer

# A new approach to ED performance reporting

In 2011, the Bureau reviewed its approach to reporting time measures of emergency department (ED) performance, including a detailed analysis of the data and consultation with a wide range of stakeholders with expertise in ED care and electronic information systems. The review was undertaken because, as part of ongoing monitoring, we observed differences in ED data between hospitals and over time that could affect performance measures.

The review found:

- Over the past few years there has been a progressive rollout of new information systems for EDs and this is now complete in the majority of hospitals
- This provides an opportunity to reconsider methods of reporting that best support fair comparisons and inform performance improvement
- It is now possible to measure the time patients spend in EDs in ways that more closely align with patients' understanding of their journey, and avoid some of the data limitations in the Bureau's previous use of triage time as the starting point for measuring time in ED
- It is useful to have measures that increase understanding of the range of times patients spend in the ED, rather than focus on a single time point.

## What we have changed

As a result, the Bureau has taken a new approach to reporting to more closely reflect patients' journeys and permit fairer comparisons between hospitals and across time.

For triage 1 patients, the Bureau continues to report the number of cases and the total time in ED, but will not report time to treatment.

For all other patients, when reporting how long they spent in the ED, the Bureau measures from the earliest recorded time for the patient being in the ED (arrival, triage or treatment time) rather than from the recorded triage time.

The Bureau now presents the times 50% and 95% of patients began treatment within. We also show the times 50% and 95% of admitted patients left the ED within. This information is presented for each quarter of the past five years so people can identify areas to improve and whether any improvements have been sustained.

Further detail on the findings of this analysis can be found in the Bureau's *Background Paper: Approaches to reporting time measures of emergency department performance, December 2011*, available on the Bureau's website at [www.bhi.nsw.gov.au](http://www.bhi.nsw.gov.au)

# Emergency department journeys

When a person is injured or requires medical care, they begin what we refer to as the patient's journey. The pathway each journey follows through the ED depends on the clinical needs of the patient and the decisions made about their treatment and management.

Most patients attend a NSW ED to receive treatment for an injury or acute illness.

Emergency patients are **'triaged'** by specialist clinical staff after they arrive in ED and are allocated to one of five categories, depending on how urgently they require care. Each triage category has a recommended maximum time that the patient should wait to be seen by a healthcare professional.

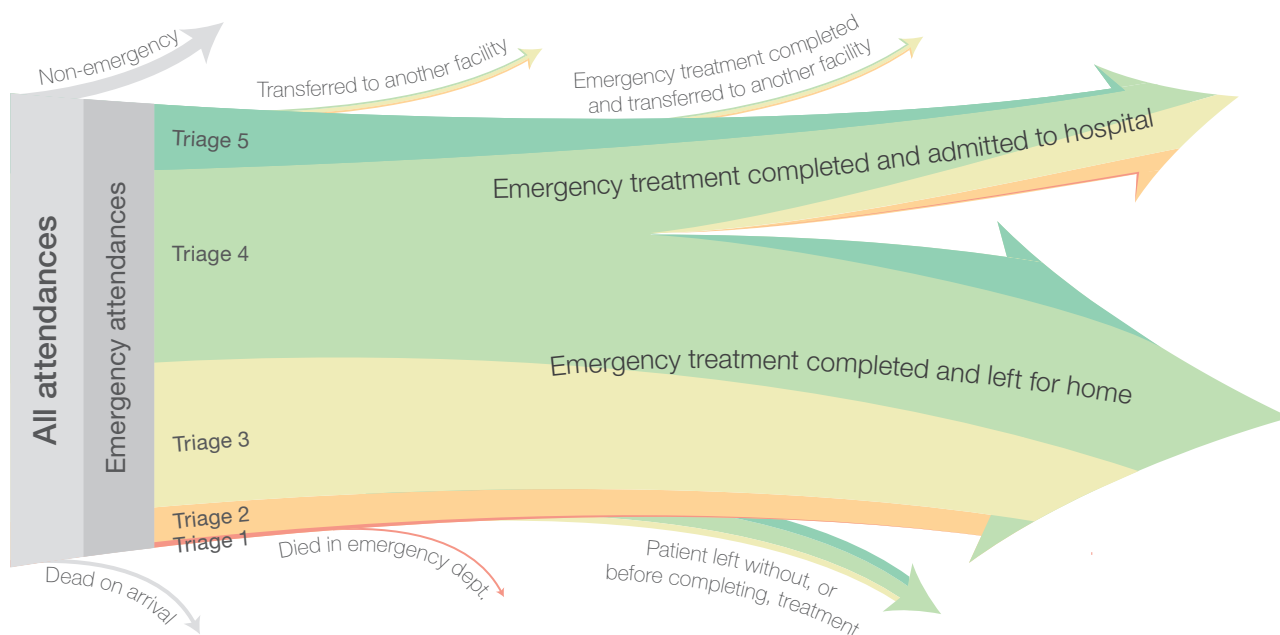
What happens next depends on the clinical needs of the patients. Patients from the most urgent triage categories (triage categories 1 and 2) are given priority and care typically begins immediately upon arrival. Patients from the less urgent triage categories (3 to 5) typically complete triage and administrative processes before treatment begins.

The majority of patients leave the ED after their treatment is complete or when they are admitted to hospital. Some patients are transferred to other hospitals or choose not to wait to begin or complete treatment. The journeys of all these patients during the July to September 2011 quarter are presented in this report and are summarised in **Figure 1**.

**Figure 1: Summary of patients' journeys through NSW emergency departments**

The thickness of each arrow is approximately proportional to the number of NSW emergency department patients in each category. The arrows are coloured by triage level.

Triage 1	Immediately life threatening
Triage 2	Imminently life threatening
Triage 3	Potentially life threatening
Triage 4	Potentially serious
Triage 5	Less urgent



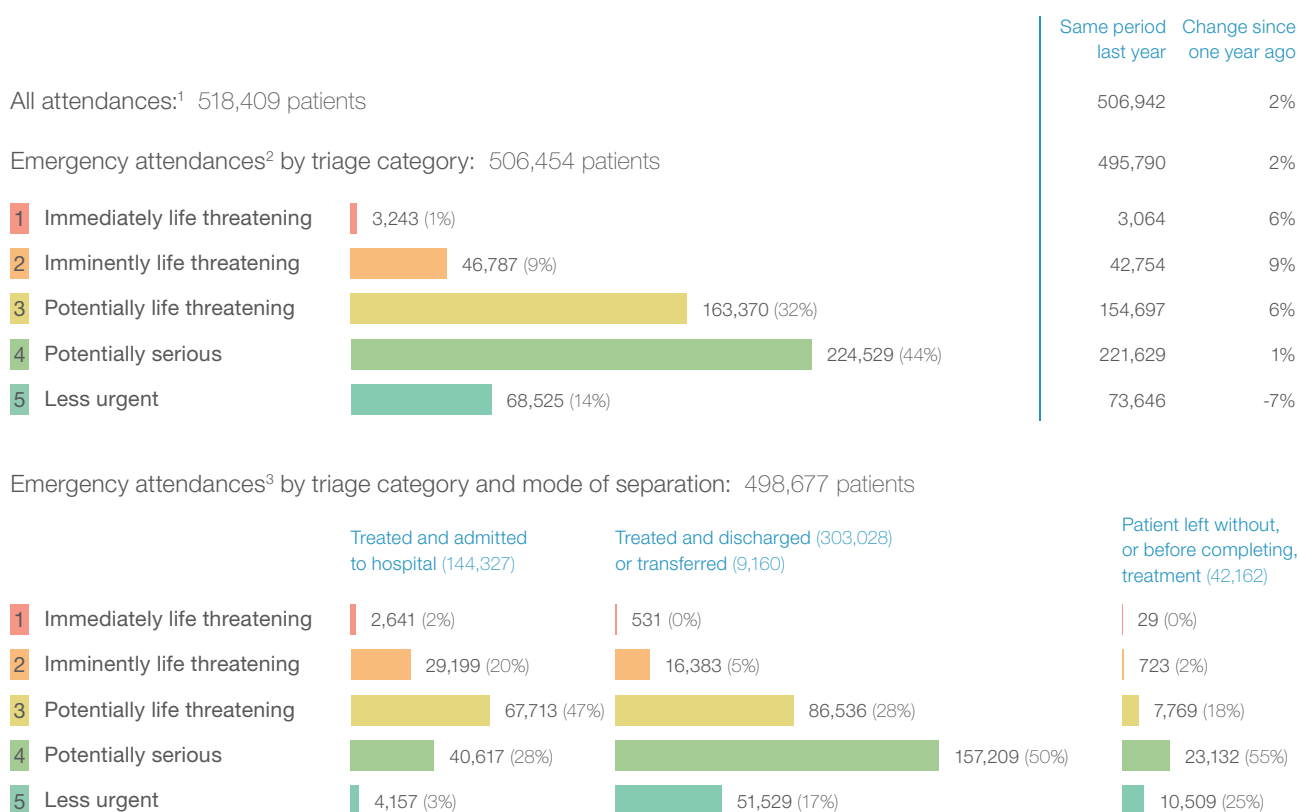
# Emergency department attendances

There were more than half a million attendances at NSW EDs during July to September 2011 (Figure 2). While almost all (98%) of these visits were considered '*emergency attendances*', 11,955 patients attended for non-emergency reasons, such as planned return visits, attending some types of outpatient clinics or prearranged admissions to hospital. The percentage of patients attending NSW EDs for non-emergency reasons is largely unchanged compared to the same quarter five years ago.

## Emergency attendances

Almost half of all emergency attendances (44%) were categorised as potentially serious (triage 4), 32% were categorised as potentially life threatening (triage 3), 14% were in the lowest urgency category (triage 5) and 9% were imminently life threatening (triage 2). Patients whose condition was judged to be immediately life threatening (triage 1) accounted for less than 1% of all people triaged in NSW EDs.

Figure 2: Attendances at NSW emergency departments, July to September 2011



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. All emergency attendances with a recorded triage category, excluding attendances with a mode of separation of 'Departed for clinical services location' or 'Dead on arrival'.

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

Note: Emergency department activity includes 88 facilities for which electronic data are reported. This covers approximately 85% of NSW emergency department activity.

Note: Due to changes in how admitted patients are counted, the number of treated and admitted, and treated and discharged or transferred are not directly comparable with previous *Hospital Quarterly* reports.

Source: Health Information Exchange, NSW Health. Data extracted on 21 October 2011.

## The three main ED journeys

Of the emergency patients who attended a NSW ED during the July to September 2011 quarter, approximately six in 10 (62%) left the ED having completed treatment (Figure 2). These patients were most likely to come from the potentially serious (50%) or the potentially life threatening group (28%).

Almost three in 10 (29%) were treated in the ED and admitted to the same hospital, and were most likely to have a potentially life-threatening condition (47%).

Fewer than one in 10 (8%) left the ED without, or before completing, treatment. These people were most likely to come from the least urgent categories (55% from the potentially serious group and 25% from the less urgent group). Some of the reasons patients leave before completing treatment include dissatisfaction with the care they received or their problem might have been resolved without treatment from staff.

## Arrivals by ambulance

When a patient arrives at the ED by ambulance, the ambulance crew waits with them until ED staff can accept that patient into their care. In NSW, the time taken for this to occur is called off-stretcher time. The NSW target requires 90% of patients arriving by ambulance to be accepted by the ED within 30 minutes of arrival.

In the July to September 2011 quarter, 132,452 patients (26% of all attendances) arrived at hospital by ambulance (Figure 3).

Of these, 61% transferred into the care of ED staff within 30 minutes, compared with 64% in the same quarter in 2010.

Figure 3: Ambulance attendances and off-stretcher time performance at NSW emergency departments, July to September 2011

	Same period last year	Change since one year ago
Attendances arriving by ambulance: 132,452 patients	126,177	5%
Off-stretcher time <sup>1</sup> <span>Target: 90% transferred in 30 min.</span> 61%	64%	-3%

1. Off-stretcher time refers to the time between arrival of ambulance and transfer to the care of the emergency department.  
Source: NSW Ambulance Service on 21 October 2011.

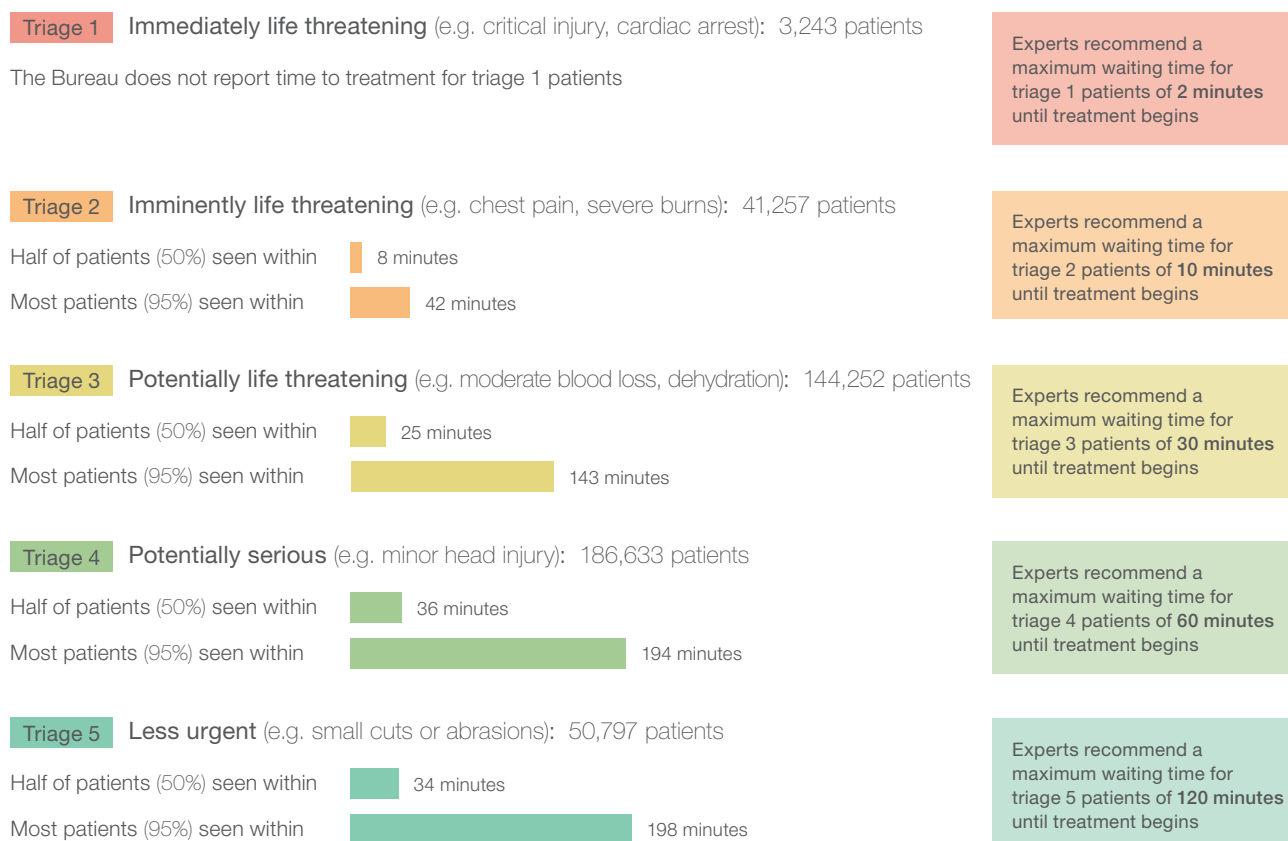
# Time to treatment performance

## Time to treatment

In the July to September 2011 quarter (Figure 4):

- Half of all patients with conditions triaged as imminently life threatening (triage 2) started treatment within eight minutes of presentation and most (95%) began treatment within 42 minutes
- Half of all patients with conditions triaged as potentially life threatening (triage 3) started treatment within 25 minutes of presentation and most (95%) began treatment within 143 minutes
- Half of all patients with conditions triaged as potentially serious (triage 4) started treatment within 36 minutes of presentation and most (95%) began treatment within 194 minutes
- Half of all patients with conditions triaged as less urgent (triage 5) started treatment within 34 minutes of presentation and most (95%) began treatment within 198 minutes.

Figure 4: Waiting times for treatment in NSW emergency departments, July to September 2011



**Note:** Treatment time is the earliest time recorded when a healthcare professional gives medical care for the patient's presenting problems.  
**Source:** Health Information Exchange, NSW Health. Data extracted on 21 October 2011.



# Leaving the emergency department

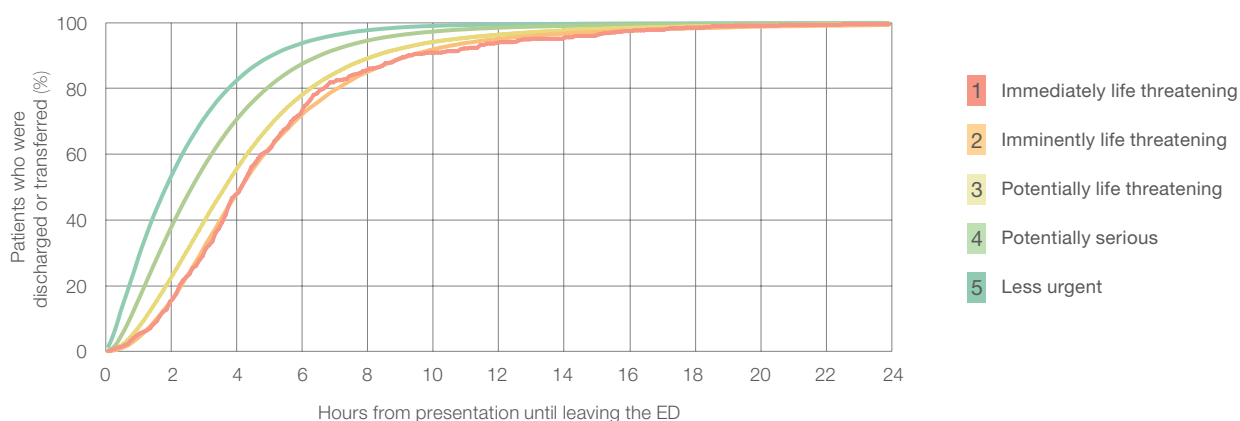
## Treated and discharged home or transferred to another hospital

Most patients (62%) received treatment in the ED and were either discharged home or transferred to another hospital. **Figure 5** shows the times in which patients from each triage category left the ED.

Overall, more than one-third of these patients (34%) left hospital within two hours of presentation and, by eight hours, 93% of all patients who were not admitted had left the ED.

Patients from the less urgent triage categories left the ED soonest; more than half (52%) of discharged and transferred patients from triage category 5 left the ED within two hours compared with 15% from triage category 1.

**Figure 5:** Percentage of emergency patients who were treated and discharged or transferred from NSW EDs, by triage category and time interval, July to September 2011



	1 hour	2 hours	3 hours	4 hours	6 hours	8 hours	12 hours	24 hours
Triage 1: Immediately life threatening	5%	15%	29%	47%	72%	85%	94%	100%
Triage 2: Imminently life threatening	4%	15%	31%	47%	72%	85%	95%	99%
Triage 3: Potentially life threatening	7%	22%	39%	55%	78%	89%	96%	100%
Triage 4: Potentially serious	15%	37%	56%	70%	87%	94%	98%	100%
Triage 5: Less urgent	27%	52%	70%	82%	94%	98%	99%	100%
All triage categories	14%	34%	52%	67%	85%	93%	98%	100%

**Note:** Time from presentation to the ED until discharge or transfer from the emergency department.  
**Source:** Health Information Exchange, NSW Health. Data extracted on 21 October 2011.

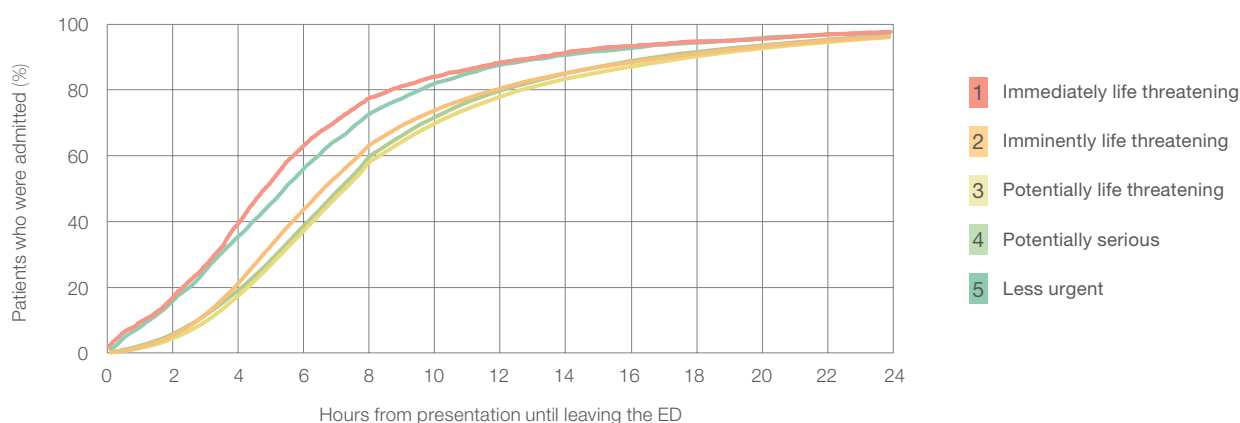
## Treated and admitted to hospital

Some patients (29%) received treatment in the ED and were subsequently admitted to a ward, a critical care unit or via an operating suite in the hospital. **Figure 6** shows the time in which admitted patients from each triage category left the ED.

In the July to September 2011 quarter, two in 10 (19%) patients admitted to hospital left the ED within four hours of presentation and, by 12 hours, 79% of all admitted patients had left the ED.

Half of all patients admitted from the ED left the department within seven hours and three minutes of presentation. Most (95%) had left the ED within 22 hours and five minutes of presentation (**Figure 7**).

**Figure 6:** Percentage of emergency patients who were treated and admitted from NSW EDs, by triage category and time interval, July to September 2011



**Note:** Time from presentation to the ED until recorded as leaving the emergency department for admitted patients.

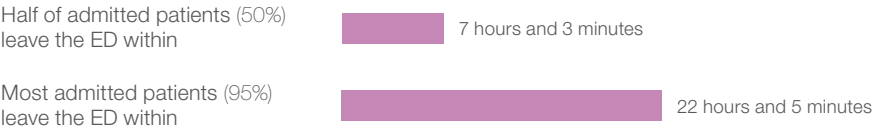
**Source:** Health Information Exchange, NSW Health. Data extracted on 21 October 2011.



Figure 7: Time from presentation until admission from NSW emergency departments, July to September 2011

All admissions from the emergency department:<sup>1</sup> 146,473 patients

Admitted patients used to calculate time to departure:<sup>2,3</sup> 132,184 patients



1. All emergency and non-emergency admissions from the ED.
  2. All admissions that have a departure time and are coded as emergency presentations or unplanned return visits.
- Source: Health Information Exchange, NSW Health. Data extracted on 21 October 2011.

# Trends over time

## Seasonal variation

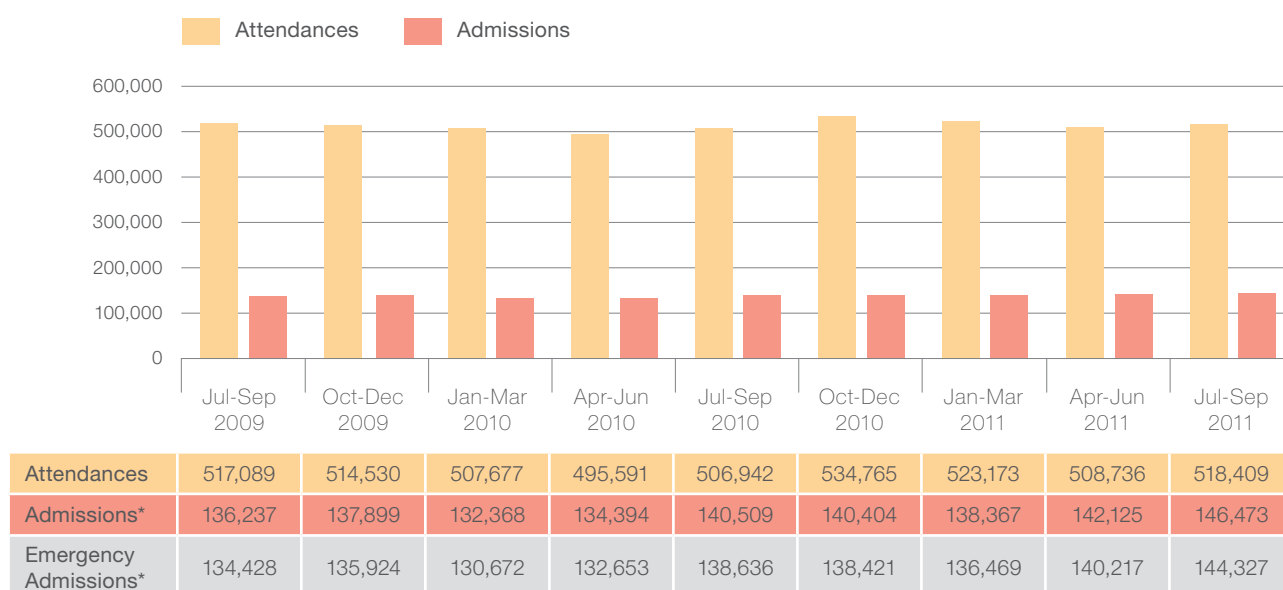
There is a strong seasonal effect on ED attendances and the time it takes for patients to start treatment. The typical annual pattern sees ED attendance numbers highest during the October to December quarter<sup>#</sup>, and lowest during the April to June quarter (Figure 8).

There are also seasonal patterns in the time to treatment and the time to admission, with the longest times to treatment or to admission during the July to September quarters (Figure 10, Figure 11).

## Emergency attendances

In the July to September 2011 quarter, ED attendances were 518,409. This is 2% higher than the same quarter one year ago (506,942) but similar to the same period two years ago (517,089) (Figure 8).

Figure 8: Attendances at, and admissions from, NSW emergency departments, July 2009 to September 2011



(\*) Admissions refers to all admissions through the emergency department. Emergency admissions refers only to those admitted patients attending for an emergency or unplanned presentation, and who have a recorded triage category.

Note: Emergency department activity includes 88 facilities for which electronic data are reported. This covers approximately 85% of NSW emergency department activity.

Note: Numbers may differ from those previously reported due to differences in when data were extracted from the emergency department information system and in definitions of patient cohorts.

Source: Health Information Exchange, NSW Health. Data extracted on 21 October 2011.

# With the exception of July to September 2009 which saw a peak in ED activity due to the swine flu pandemic.

## Arrivals by ambulance

The number of ambulance arrivals has increased compared with the same quarter one year ago, up 5%, and was disproportionately larger than the increase in emergency attendances (up 2%).

In the July to September 2011 quarter, one-quarter (26%) of all people who attended NSW EDs arrived by ambulance (Figure 9), a total of 132,452 patients.

This was more than the same quarter in 2010 when 126,177 patients arrived by ambulance, and in 2009, when 127,623 patients arrived by ambulance.

## Ambulance off-stretcher time

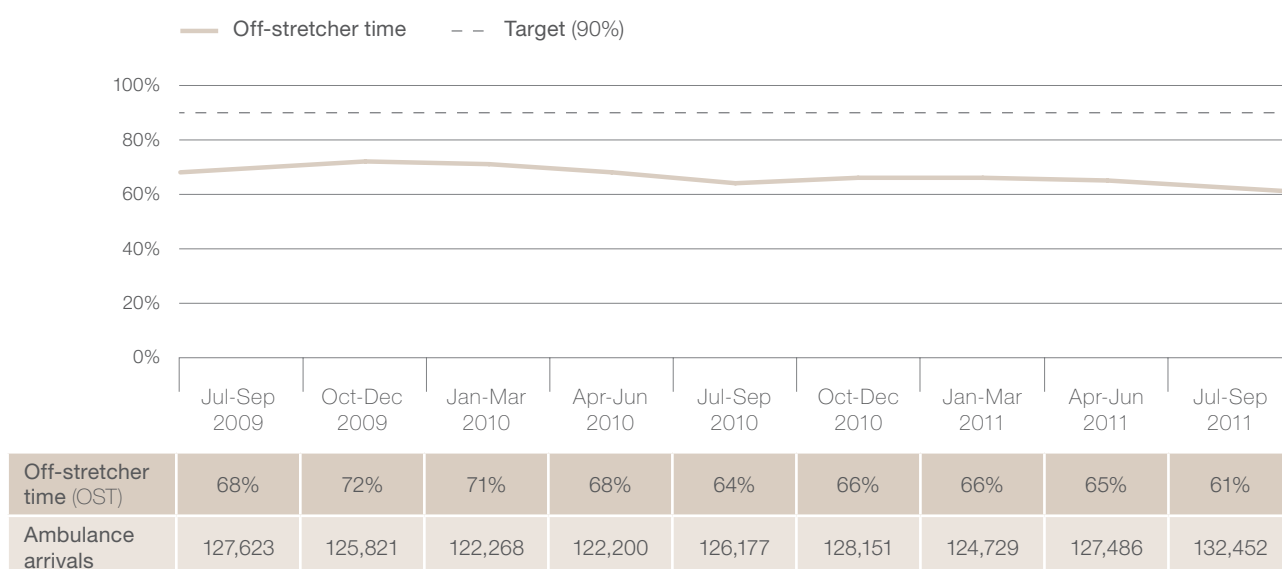
During July to September 2011, NSW did not achieve the state target for the ambulance off-stretcher time (Figure 9).

The NSW target requires 90% of patients arriving at hospital by ambulance to be transferred into the care of ED staff within 30 minutes.

During the quarter the state-wide figure was 61%. By comparison, 64% of patients met the transfer time target during July to September 2010, and 68% of patients met the target during the same quarter in 2009.

This off-stretcher ambulance target has not been met at a state-wide level in any quarter over the past two years (Figure 9).

Figure 9: Percentage of patients accepted into the care of NSW emergency departments from an ambulance within 30 minutes of arrival, July 2009 to September 2011



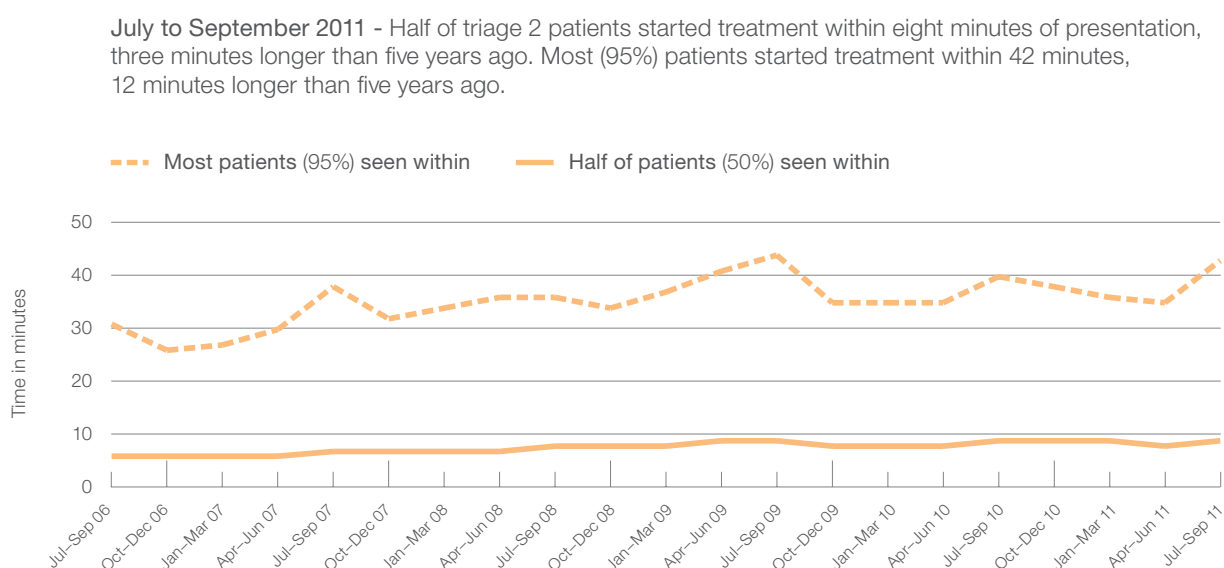
Source: Data provided by NSW Ambulance Service on 20 October 2011.

# Time to treatment in emergency departments

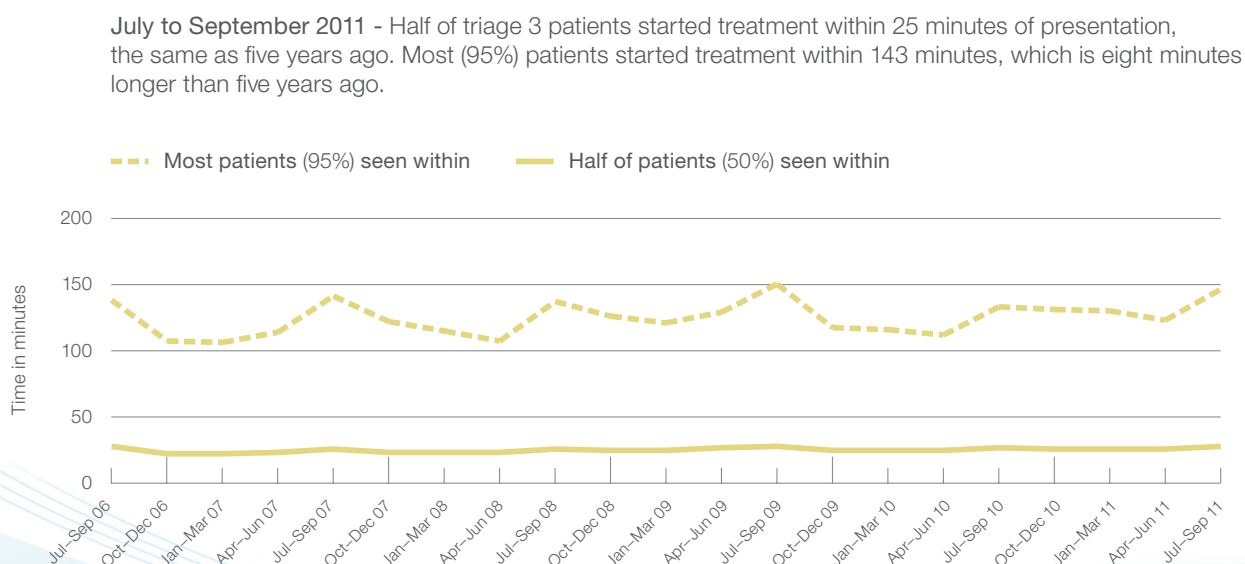
At a state level, the time from presentation until treatment fluctuates and appears to be gradually increasing. Some of this apparent increase relates to progressive implementation of new information systems. For more information see the *Background Paper: Approaches to reporting time measures of emergency department performance*.

Figures 10a-d show for triage categories 2 to 5, the time within which half (50%) and most (95%) patients begin treatment. Data are reported according to triage category. The Bureau does not report time to treatment for triage 1 patients.

**Figure 10a: Triage 2 - Time from presentation to treatment (minutes) in NSW emergency departments for half (50%) and most (95%) patients, July 2006 to September 2011**

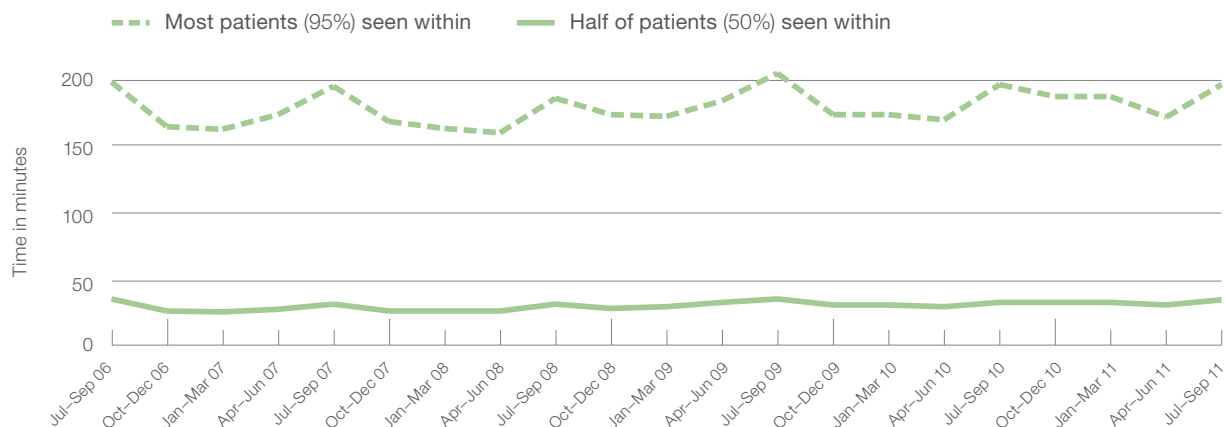


**Figure 10b: Triage 3 - Time from presentation to treatment (minutes) in NSW emergency departments for half (50%) and most (95%) patients, July 2006 to September 2011**



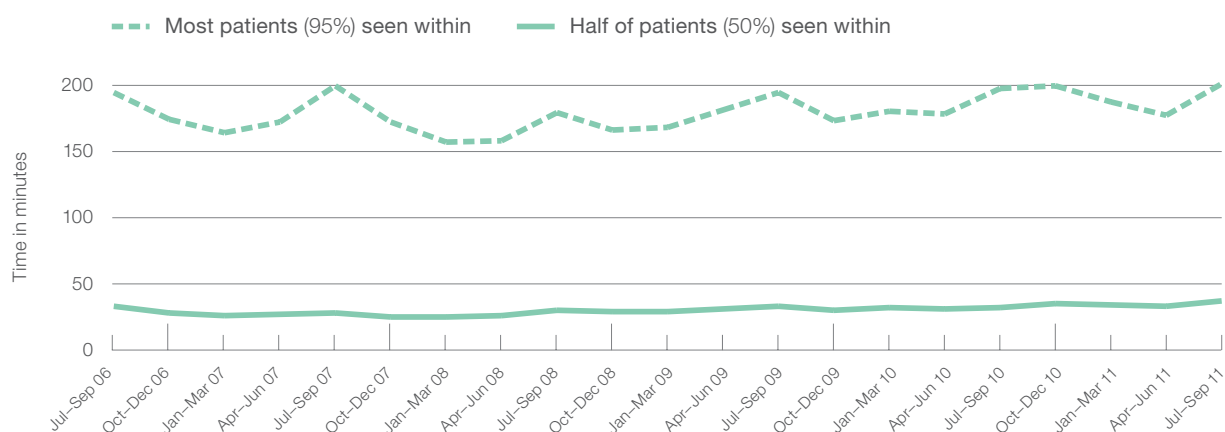
**Figure 10c: Triage 4 - Time from presentation to treatment (minutes) in NSW emergency departments for half (50%) and most (95%) patients, July 2006 to September 2011**

July to September 2011 - Half of triage 4 patients started treatment within 36 minutes of presentation, one minute shorter than five years ago. Most (95%) patients started treatment within 194 minutes, two minutes shorter than five years ago.



**Figure 10d: Triage 5 - Time from presentation to treatment (minutes) in NSW emergency departments for half (50%) and most (95%) patients, July 2006 to September 2011**

July to September 2011 - Half of triage 5 patients started treatment within 34 minutes of presentation, four minutes longer than five years ago. Most (95%) patients started treatment within 198 minutes, seven minutes longer than five years ago.



**Note:** Hospitals transitioning to one of the major information systems are excluded from this data during the quarter(s) of implementation.  
**Source:** Health Information Exchange, NSW Health. Data extracted on 21 October 2011.

## Time to admission to hospital

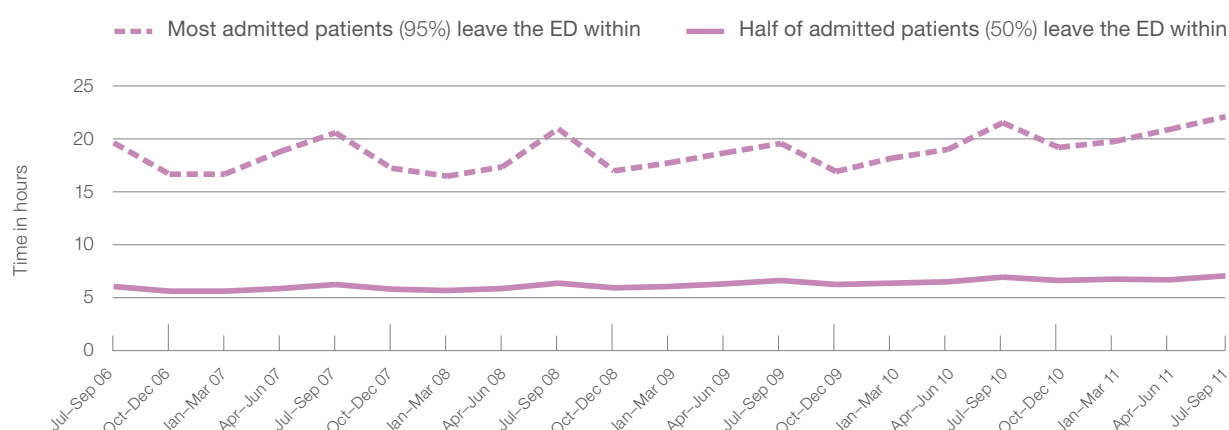
During July to September 2011, half of admitted emergency patients left the ED within seven hours and three minutes of presentation.

This is longer than in the last quarter when half of all admitted emergency patients left the ED within six hours and 41 minutes, and longer than in the same quarter last year when half of all admitted emergency patients left the ED within six hours and 54 minutes (Figure 11).

During the July to September 2011 quarter, most (95%) admitted emergency patients left the ED within 22 hours and five minutes of arriving in the ED.

This is longer than last quarter when most (95%) admitted emergency patients left the ED within 20 hours and 52 minutes, and longer than in the same quarter last year when most (95%) admitted emergency patients left the ED within 21 hours and 33 minutes (Figure 11).

Figure 11: Times from presentation until leaving the ED by quarter, July 2006 to September 2011



**Note:** Hospitals transitioning to one of the major information systems are excluded from this data during the quarter(s) of implementation.  
**Source:** Health Information Exchange, NSW Health. Data extracted on 21 October 2011.



# Differences in performance between hospitals

## Time to treatment in NSW EDs

There is variation between hospitals when comparing time to treatment by triage category. For example, among principal referral and major hospitals using one of the two predominant information systems, the highest and lowest times for triage 2 and 4 in the July to September 2011 quarter were:

- Half (50%) of all triage 2 patients start treatment within six minutes at John Hunter Hospital, compared with within 13 minutes at Fairfield Hospital
- Most (95%) triage 2 patients start treatment within 18 minutes at Concord Hospital, compared with within 93 minutes at Nepean Hospital
- Half (50%) of all triage 4 patients start treatment within 30 minutes at Sutherland Hospital, compared with within 55 minutes at Tamworth Hospital
- Most (95%) triage 4 patients start treatment within 106 minutes at Sutherland Hospital, compared with within 272 minutes at Nepean Hospital.

**Appendix table 1** presents the time taken from presentation until treatment begins for half, and for most (95%), patients in each triage group (categories 2, 3, 4 and 5).

## Time to admission to hospital

There is variation between hospitals when comparing the time to admission. During the July to September 2011 quarter:

- For principal referral hospitals, most (95%) admitted patients left the ED within 16 hours and 25 minutes at the Royal Prince Alfred Hospital while most (95%) left within 25 hours and 47 minutes at Nepean Hospital
- For major metropolitan hospitals, most (95%) patients were admitted within 12 hours and 43 minutes at Auburn Hospital while most (95%) left within 40 hours and 57 minutes at Blacktown Hospital
- For major non-metropolitan hospitals, most (95%) patients were admitted within 16 hours and 28 minutes at Shoalhaven and District Memorial Hospital while most (95%) left within 32 hours and 42 minutes at Coffs Harbour Base Hospital.

**Appendix table 2** presents number of attendances, number of admissions, off-stretcher time and the time taken for half, and for most (95%), of admitted patients to leave the ED.



# Appendix: ED time performance measures

Appendix table 1: Waiting times to treatment (in minutes) for NSW emergency departments by local health district, July to September 2011

	Triage 2		Triage 3		Triage 4		Triage 5	
	Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within
<b>New South Wales</b>								
Total New South Wales	8	42	25	143	36	194	34	198
<b>Central Coast Local Health District (CCLHD)</b>								
Gosford Hospital	9	53	26	152	55	275	52	267
Wyong Hospital	†	†	†	†	†	†	†	†
Total CCLHD	9	53	26	152	55	275	52	267
<b>Far West Local Health District (FWLHD)</b>								
Broken Hill Base Hospital	6	18	14	56	25	126	39	146
Total FWLHD	6	18	14	56	25	126	39	146
<b>Hunter New England Local Health District (HNELHD)</b>								
Armidale and New England Hospital	9	50	24	113	34	150	31	150
Belmont Hospital	6	28	18	97	31	172	33	174
Calvary Mater Newcastle	7	32	20	97	30	174	34	191
Cessnock District Hospital	6	39	23	79	36	124	37	126
Gunnedah District Hospital	7	*	20	98	38	152	35	152
Inverell District Hospital	5	60	20	107	35	125	25	92
John Hunter Hospital	6	34	24	180	40	244	43	229
Kurri Kurri District Hospital	3	*	10	102	16	110	14	104
Maitland Hospital	9	39	26	143	45	193	46	191
Manning Base Hospital	6	37	22	121	39	193	40	197
Moree District Hospital	5	65	12	75	14	103	5	64
Muswellbrook District Hospital	4	*	18	155	29	127	20	156
Narrabri District Hospital	1	*	2	50	3	60	2	55
Singleton District Hospital	8	*	23	90	41	137	33	129
Tamworth Base Hospital	8	43	27	142	55	238	65	248
Other HNELHD	5	40	15	80	17	100	10	110
Total HNELHD	7	38	22	127	34	183	33	188
<b>Illawarra Shoalhaven Local Health District (ISLHD)</b>								
Bulli District Hospital	1	*	2	15	2	28	5	29
Milton and Ulladulla Hospital	6	27	18	59	30	109	36	151
Shellharbour Hospital	10	36	27	145	36	233	27	111
Shoalhaven and District Memorial Hospital	10	28	27	117	38	196	27	171
Wollongong Hospital	12	42	32	182	51	248	45	259
Total ISLHD	10	37	28	153	37	217	27	182

Triage 2		Triage 3		Triage 4		Triage 5	
Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within

Mid North Coast Local Health District (MNCLHD)								
Coffs Harbour Base Hospital	9	43	30	135	35	207	40	184
Kempsey Hospital	9	30	21	81	25	122	23	110
Port Macquarie Base Hospital	11	42	31	141	41	180	39	142
Total MNCLHD	10	41	28	129	34	180	34	157

Murrumbidgee Local Health District (MLHD)								
Griffith Base Hospital	5	20	17	82	31	160	30	190
Wagga Wagga Base Hospital	8	52	25	122	39	202	23	181
Total MLHD	8	45	22	108	36	190	25	184

Nepean Blue Mountains Local Health District (NBMLHD)								
Blue Mountains District Anzac Memorial Hospital	8	36	19	103	31	153	27	142
Hawkesbury District Health Service	21	62	32	119	32	151	28	167
Lithgow Health Service	5	30	16	81	17	108	16	113
Nepean Hospital	12	93	47	298	48	272	47	255
Total NBMLHD	12	73	32	228	35	218	31	197

Northern NSW Local Health District (NNSWLHD)								
Grafton Base Hospital	7	38	21	136	46	212	39	205
Lismore Base Hospital	8	35	31	149	53	219	61	221
Murwillumbah District Hospital	6	21	17	63	26	113	29	156
The Tweed Hospital	11	47	32	126	43	171	36	166
Total NNSWLHD	8	39	27	130	41	184	40	185

Northern Sydney Local Health District (NSLHD)								
Hornsby and Ku-Ring-Gai Hospital	6	33	25	110	38	188	46	240
Manly District Hospital	†	†	†	†	†	†	†	†
Mona Vale and District Hospital	†	†	†	†	†	†	†	†
Royal North Shore Hospital	†	†	†	†	†	†	†	†
Ryde Hospital	3	10	13	55	17	143	18	166
Total NSLHD	5	26	17	79	29	166	39	230

Sydney Children's Hospitals Network (SCHN)								
Sydney Children's Hospital	9	27	23	62	41	168	41	161
The Children's Hospital at Westmead	7	10	25	96	38	217	47	263
Total SCHN	8	21	24	85	40	181	46	259

South Eastern Sydney Local Health District (SESLHD)								
Prince of Wales Hospital	9	56	37	176	35	238	35	244
St George Hospital	10	48	29	134	45	187	41	204
Sutherland Hospital	11	35	25	85	30	106	28	113
Sydney Eye Hospital	*	*	14	*	20	54	26	81
Sydney Hospital	8	*	14	47	21	86	24	112
Total SESLHD	10	45	28	136	32	173	28	149

Triage 2		Triage 3		Triage 4		Triage 5	
Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within	Half of patients start treatment within	Most patients (95%) start treatment within

South Western Sydney Local Health District (SWSLHD)								
Bankstown / Lidcombe Hospital	8	33	26	169	34	170	31	147
Bowral and District Hospital	8	30	24	98	35	165	31	115
Camden Hospital	5	27	15	85	16	125	15	123
Campbelltown Hospital	8	31	19	138	35	189	25	135
Fairfield Hospital	13	44	27	155	37	221	39	204
Liverpool Hospital	9	59	25	209	34	212	28	185
Total SWSLHD	9	42	23	171	33	189	26	156

Southern NSW Local Health District (SNSWLHD)								
Goulburn Base Hospital	16	60	34	157	49	210	45	210
Total SNSWLHD	16	60	34	157	49	210	45	210

St Vincent's Health Network (SVHN)								
St Vincent's Hospital, Darlinghurst	4	10	17	120	18	190	7	266
Total SVHN	4	10	17	120	18	190	7	266

Sydney Local Health District (SYDLHD)								
Canterbury Hospital	8	32	29	147	38	189	31	150
Concord Hospital	8	18	24	96	37	154	43	143
Royal Prince Alfred Hospital	9	32	26	149	39	203	41	210
Total SYDLHD	9	29	26	137	38	180	40	199

Western NSW Local Health District (WNSWLHD)								
Bathurst Base Hospital	10	40	22	81	25	146	20	147
Dubbo Base Hospital	7	41	34	155	42	214	23	188
Orange Base Hospital	6	30	21	93	36	169	36	205
Total WNSWLHD	8	37	26	122	32	175	29	195

Western Sydney Local Health District (WSLHD)								
Auburn Hospital	7	22	19	86	38	183	31	170
Blacktown Hospital	7	32	33	174	51	211	43	213
Mount Druitt Hospital	9	37	29	167	70	257	75	256
Westmead Hospital (all units)	7	30	26	206	43	252	54	229
Total WSLHD	8	31	27	174	49	230	51	229

(\*) Values suppressed due to small numbers and to protect privacy.

(†) Due to the implementation of a new electronic information system in this emergency department during the July to September 2011 quarter, the data for this hospital are not considered reliable enough to display (see *Background Paper: Approaches to reporting time measures of emergency department performance, December 2011* for more information).

(‡) Due to the implementation of a new electronic information system in this emergency department in the previous quarter (April to June 2011), caution is advised when considering this hospital's results (see *Background Paper: Approaches to reporting time measures of emergency department performance, December 2011* for more information).

Source: Health Information Exchange, NSW Health. Data extracted on 21 October 2011.

Appendix table 2: Activity, off-stretcher performance and presentation to admission performance for NSW emergency departments, July to September 2011

Attendances	Admissions					Ambulance	
	All admissions	Admissions used for calculation	Half of admitted patients (50%) leave ED within	Most admitted patients (95%) leave ED within		Ambulance arrivals	Off stretcher 90% in 30 min.
<b>New South Wales</b>							
Total New South Wales	518,409	146,473	132,184	7h 3m	22h 5m	132,452	61%
<b>Central Coast Local Health District (CCLHD)</b>							
Gosford Hospital	13,689	4,274	4,260	8h 0m	17h 34m	4,674	48%
Wyong Hospital	13,803	†	†	†	†	4,048	54%
Total CCLHD	27,492	6,965	4,260	8h 0m	17h 34m	8,722	51%
<b>Far West Local Health District (FWLHD)</b>							
Broken Hill Base Hospital	5,936	700	676	4h 47m	11h 41m	748	88%
Total FWLHD	5,936	700	676	4h 47m	11h 41m	748	88%
<b>Hunter New England Local Health District (HNELHD)</b>							
Armidale and New England Hospital	3,841	765	722	3h 14m	8h 13m	790	90%
Belmont Hospital	5,936	963	963	7h 27m	21h 44m	1,676	64%
Calvary Mater Newcastle	7,625	2,474	2,468	6h 18m	20h 19m	2,462	55%
Cessnock District Hospital	4,722	470	463	2h 55m	18h 42m	462	88%
Gunnedah District Hospital	2,824	227	227	1h 47m	6h 27m	250	98%
Inverell District Hospital	2,342	330	330	2h 18m	6h 0m	396	85%
John Hunter Hospital	17,188	5,568	5,555	7h 2m	16h 50m	5,417	50%
Kurri Kurri District Hospital	1,904	82	82	3h 38m	*	110	85%
Maitland Hospital	10,959	2,133	2,105	6h 56m	24h 15m	2,151	53%
Manning Base Hospital	6,032	1,723	1,709	5h 59m	21h 11m	1,888	63%
Moree District Hospital	2,322	273	273	1h 58m	5h 34m	293	95%
Muswellbrook District Hospital	2,160	283	280	2h 26m	9h 6m	366	87%
Narrabri District Hospital	1,142	238	233	2h 30m	5h 30m	175	93%
Singleton District Hospital	2,972	310	309	2h 7m	5h 47m	358	97%
Tamworth Base Hospital	10,753	2,129	2,111	6h 39m	17h 15m	1,795	77%
Other HNELHD	11,236	1,253	1,250	1h 30m	7h 58m	1,533	89%
Total HNELHD	93,958	19,221	19,080	5h 45m	18h 24m	20,122	65%
<b>Illawarra Shoalhaven Local Health District (ISLHD)</b>							
Bulli District Hospital	1,811	Ω	Ω	n/a	n/a	*	*
Milton and Ulladulla Hospital	3,153	427	421	4h 33m	9h 30m	418	81%
Shellharbour Hospital	6,193	1,929	1,923	8h 17m	22h 41m	1,580	50%
Shoalhaven and District Memorial Hospital	8,393	2,548	2,490	6h 59m	16h 28m	2,296	65%
Wollongong Hospital	13,053	5,693	5,255	7h 53m	24h 5m	4,627	45%
Total ISLHD	32,603	10,597	10,089	7h 34m	22h 15m	8,925	53%



Attendances	Admissions				Ambulance	
	All admissions	Admissions used for calculation	Half of admitted patients (50%) leave ED within	Most admitted patients (95%) leave ED within	Ambulance arrivals	Off stretcher 90% in 30 min.

Mid North Coast Local Health District (MNCLHD)							
Coffs Harbour Base Hospital	8,219	2,850	2,786	10h 49m	32h 42m	2,204	59%
Kempsey Hospital	5,118	1,296	1,257	4h 25m	14h 25m	857	78%
Port Macquarie Base Hospital	8,063	2,287	2,224	8h 24m	23h 59m	2,280	50%
Total MNCLHD	21,400	6,433	6,267	8h 18m	27h 15m	5,341	58%

Murrumbidgee Local Health District (MLHD)							
Griffith Base Hospital	5,023	912	897	4h 17m	8h 22m	800	87%
Wagga Wagga Base Hospital	8,374	3,091	3,066	7h 15m	21h 34m	2,222	46%
Total MLHD	13,397	4,003	3,963	6h 14m	20h 0m	3,022	57%

Nepean Blue Mountains Local Health District (NBMLHD)							
Blue Mountains District Anzac Memorial Hospital	4,179	488	479	4h 46m	8h 54m	774	84%
Hawkesbury District Health Service	5,311	1,102	1,096	6h 52m	27h 10m	1,170	34%
Lithgow Health Service	3,192	450	441	4h 28m	9h 24m	553	91%
Nepean Hospital	13,554	6,052	6,045	7h 34m	25h 47m	4,259	52%
Total NBMLHD	26,236	8,092	8,061	7h 0m	25h 23m	6,756	56%

Northern NSW Local Health District (NNSWLHD)							
Grafton Base Hospital	5,686	1,113	1,049	6h 1m	17h 19m	727	84%
Lismore Base Hospital	7,178	2,535	2,434	10h 46m	29h 9m	2,064	57%
Murwillumbah District Hospital	3,809	502	483	3h 31m	8h 9m	350	95%
The Tweed Hospital	9,711	3,740	3,699	7h 19m	22h 46m	2,078	72%
Total NNSWLHD	26,384	7,890	7,665	7h 32m	24h 27m	5,219	70%

Northern Sydney Local Health District (NSLHD)							
Hornsby and Ku-Ring-Gai Hospital	7,834	2,166	2,150	6h 51m	17h 31m	2,143	76%
Manly District Hospital	5,556	†	†	†	†	1,415	90%
Mona Vale and District Hospital	6,740	†	†	†	†	1,712	93%
Royal North Shore Hospital	14,678	†	†	†	†	4,318	59%
Ryde Hospital	5,962	1,710	1,679	5h 13m	11h 45m	1,805	93%
Total NSLHD	40,770	13,453	3,829	6h 2m	15h 30m	11,393	77%

Sydney Children's Hospitals Network (SCHN)							
Sydney Children's Hospital	9,429	1,848	1,826	5h 29m	15h 32m	580	94%
The Children's Hospital at Westmead	13,154	3,120	3,007	6h 54m	20h 35m	1,223	91%
Total SCHN	22,583	4,968	4,833	6h 21m	18h 58m	1,803	92%

South Eastern Sydney Local Health District (SESLHD)							
Prince of Wales Hospital	10,731	4,164	4,144	6h 45m	19h 48m	3,493	49%
St George Hospital	15,446	5,621	5,574	7h 15m	20h 54m	4,956	52%
Sutherland Hospital	11,090	2,816	2,779	7h 26m	22h 5m	3,286	68%
Sydney Eye Hospital	4,959	150	140	3h 0m	6h 8m	32	94%
Sydney Hospital	4,534	540	494	3h 55m	8h 16m	1,016	90%
Total SESLHD	46,760	13,291	13,131	6h 57m	20h 43m	12,783	58%

Attendances	Admissions				Ambulance	
	All admissions	Admissions used for calculation	Half of admitted patients (50%) leave ED within	Most admitted patients (95%) leave ED within	Ambulance arrivals	Off stretcher 90% in 30 min.

South Western Sydney Local Health District (SWSLHD)							
Bankstown / Lidcombe Hospital	11,118	4,207	4,204	7h 41m	19h 16m	4,252	61%
Bowral and District Hospital	4,395	1,037	1,008	5h 43m	21h 57m	947	74%
Camden Hospital	2,961	18	14	3h 4m	*	*	*
Campbelltown Hospital	13,963	4,051	4,029	7h 59m	27h 53m	3,936	57%
Fairfield Hospital	7,980	1,961	1,960	7h 38m	23h 10m	1,890	58%
Liverpool Hospital	15,711	6,511	6,443	8h 43m	24h 11m	5,661	45%
Total SWSLHD	56,128	17,785	17,658	7h 54m	24h 5m	16,695	55%
Southern NSW Local Health District (SNSWLHD)							
Goulburn Base Hospital	4,649	908	896	5h 17m	14h 29m	834	74%
Total SNSWLHD	4,649	908	896	5h 17m	14h 29m	834	74%
St Vincent's Health Network (SVHN)							
St Vincent's Hospital, Darlinghurst	9,990	3,800	3,660	6h 58m	23h 7m	3,769	51%
Total SVHN	9,990	3,800	3,660	6h 58m	23h 7m	3,769	51%
Sydney Local Health District (SYDLHD)							
Canterbury Hospital	8,650	1,697	1,695	7h 16m	17h 33m	2,309	67%
Concord Hospital	8,575	3,052	3,050	6h 36m	16h 28m	2,608	67%
Royal Prince Alfred Hospital	16,377	5,198	5,196	7h 4m	16h 25m	5,276	56%
Total SYDLHD	33,602	9,947	9,941	6h 57m	16h 43m	10,193	61%
Western NSW Local Health District (WNSWLHD)							
Bathurst Base Hospital	5,994	947	932	6h 24m	21h 13m	942	83%
Dubbo Base Hospital	7,160	1,777	1,750	7h 19m	25h 41m	1,687	71%
Orange Base Hospital	6,638	1,990	1,975	7h 57m	30h 33m	1,337	65%
Total WNSWLHD	19,792	4,714	4,657	7h 20m	26h 24m	3,966	72%
Western Sydney Local Health District (WSLHD)							
Auburn Hospital	5,934	2,447	2,439	5h 48m	12h 43m	1,531	73%
Blacktown Hospital	8,546	2,615	2,604	12h 10m	40h 57m	3,010	41%
Mount Druitt Hospital	7,997	1,043	1,041	7h 28m	22h 7m	2,324	53%
Westmead Hospital (all units)	14,252	7,601	7,434	7h 32m	20h 0m	5,296	52%
Total WSLHD	36,729	13,706	13,518	7h 29m	25h 3m	12,161	52%

(\*) Values suppressed due to small numbers and to protect privacy.

(†) Due to the implementation of a new electronic information system in this emergency department during the July to September 2011 quarter, the data for this hospital are not considered reliable enough to display (see *Background Paper: Approaches to reporting time measures of emergency department performance, December 2011* for more information).

(‡) Due to the implementation of a new electronic information system in this emergency department in the previous quarter (April to June 2011), caution is advised when considering this hospital's results (see *Background Paper* for more information).

(Ω) This hospital had no patients admitted to hospital from the emergency department during July to September 2011.

**Note:** Emergency department activity includes 88 facilities for which electronic data are reported. These facilities account for approximately 85% of NSW emergency department activity.

**Source:** Health Information Exchange, NSW Health. Data extracted on 21 October 2011. Ambulance off-stretcher time data provided by the NSW Ambulance Service on 20 October 2011.

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The Bureau of Health Information provides the community, healthcare professionals and the NSW Parliament with timely, accurate and comparable information on the performance of the NSW public health system in ways that enhance the system's accountability and inform efforts to increase its beneficial impact on the health and wellbeing of the people of NSW.

The Bureau is an independent, board-governed statutory health corporation. The conclusions in this report are those of the Bureau and no official endorsement by the NSW Minister for Health, the NSW Ministry of Health or any other NSW public health organisation is intended or should be inferred.

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