NSW

Same period Change since

Same period

### 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.

## Dubbo Base Hospital: Emergency department (ED) overview

October to December 2016

	last year	one year ago
All presentations: 8,659 patients	7,789	11.2%
Emergency presentations: <sup>2</sup> 8,232 patients	7,545	9.1%

### Dubbo Base Hospital: Time patients waited to start treatment<sup>3</sup>

October to December 2016

October to December 2016

	last year	(this period)
Triage 2 Emergency (e.g. chest pain, severe burns): 1,008 patients	811	
Median time to start treatment <sup>4</sup> 9 minutes	9 minutes	8 minutes
90th percentile time to start treatment <sup>5</sup>	19 minutes	26 minutes
Triage 3 Urgent (e.g. moderate blood loss, dehydration): 3,131 patients	2,779	
Median time to start treatment <sup>4</sup> 22 minutes	24 minutes	20 minutes
90th percentile time to start treatment <sup>5</sup> 65 minutes	70 minutes	67 minutes
Triage 4 Semi-urgent (e.g. sprained ankle, earache): 3,222 patients	3,438	
Median time to start treatment <sup>4</sup> 31 minutes	31 minutes	25 minutes
90th percentile time to start treatment <sup>5</sup>	107 minutes	97 minutes
Triage 5 Non-urgent (e.g. small cuts or abrasions): 824 patients	485	
Median time to start treatment <sup>4</sup> 30 minutes	31 minutes	24 minutes
90th percentile time to start treatment <sup>5</sup>	120 minutes	103 minutes

### Dubbo Base Hospital: Time from presentation until leaving the ED

Attendances used to calculate time to leaving the ED:6 8,656 patients

Percentage of patients who spent	
1 creentage of patients who spent	70.40/
four hours or less in the ED	73.1%

	one year ago
7,787	11.2%
73.7%	

- 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
- 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.

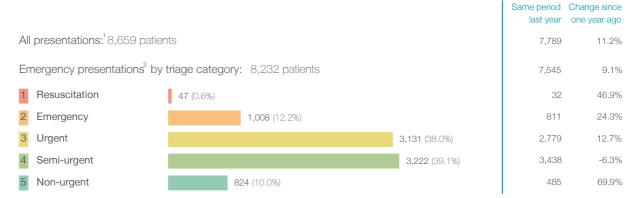
Note: Presentation time is the earlier time recorded for clerical registration or the triage process. Treatment time is the earliest time recorded when a healthcare professional provides medical care relevant to the patient's presenting problems.

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

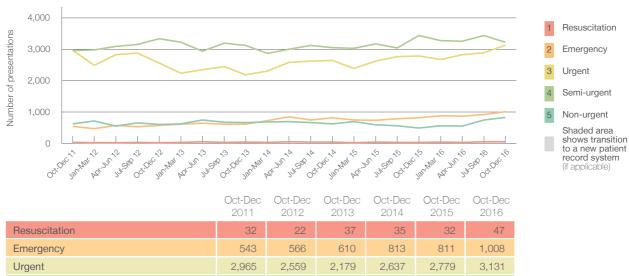
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

### **Dubbo Base Hospital:** Patients presenting to the emergency department

October to December 2016



Emergency presentations<sup>2</sup> by quarter, October 2011 to December 2016 <sup>‡</sup>



3,124

6,616

3,048

7,157

3,438

485

7,545

3,222

8,232

824

Same period Change since

### **Dubbo Base Hospital:** Patients arriving by ambulance

2,957

7,114

October to December 2016

All emergency presentations

Semi-urgent

Non-urgent

		last year	one year ago
Arrivals used to calculate tran	sfer of care time: 7 1,706 patients	914	
ED Transfer of care time			
Median time	12 minutes	13 minutes	-1 minute
90th percentile time	28 minutes	31 minutes	-3 minutes

596 7,076

<sup>(†)</sup> Data points are not shown in graphs for quarters when patient numbers are too small.

<sup>(±)</sup> 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.

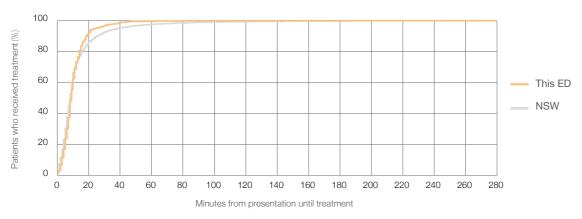
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

# Dubbo Base Hospital: Time patients waited to start treatment, triage 2

October to December 2016

Triage 2 Emergency (e.g. chest pain, severe burns)	Same period last year	NSW (this period)
Number of triage 2 patients: 1,008	811	
Number of triage 2 patients used to calculate waiting time: 3 1,004		
Median time to start treatment <sup>4</sup> 9 minutes	9 minutes	8 minutes
90th percentile time to start treatment <sup>5</sup> 19 minutes	19 minutes	26 minutes

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



Time patients waited to start treatment (minutes) for triage 2 patients, October 2011 to December 2016



<sup>(†)</sup> Data points are not shown in graphs for quarters when patient numbers are too small.

<sup>(‡)</sup> 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.

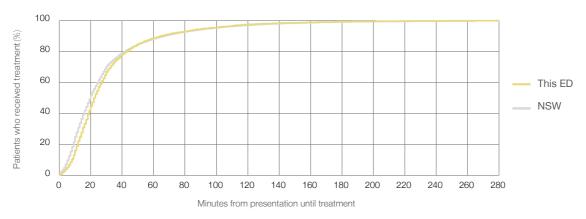
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

# **Dubbo Base Hospital:** Time patients waited to start treatment, triage 3 October to December 2016

Triage 3 Urgent (e.g. moderate blood	loss, dehydration)			
Number of triage 3 patients: 3,131				
Number of triage 3 patients used to calculate waiting time: 3,072				
Median time to start treatment <sup>4</sup>	22 minutes			
90th percentile time to start treatment <sup>5</sup>	65 minutes			

NSW (this period)	Same period last year
	2,779
	2,723
20 minutes	24 minutes
67 minutes	70 minutes

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



Time patients waited to start treatment(minutes) for triage 3 patients, October 2011 to December 2016



	Oct-Dec 2011	Oct-Dec 2012	Oct-Dec 2013	Oct-Dec 2014	Oct-Dec 2015	Oct-Dec 2016
Median time to start treatment <sup>4</sup> (minutes)	30	21	18	21	24	22
90th percentile time to start treatment <sup>5</sup> (minutes)	101	69	56	60	70	65

 $<sup>(\</sup>dagger) \quad \text{Data points are not shown in graphs for quarters when patient numbers are too small}.$ 

<sup>(±)</sup> 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:

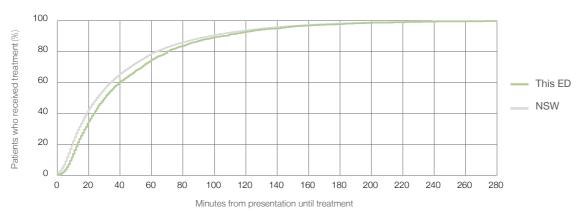
Approaches to reporting time measures of emergency department performance, December 2011.

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

# **Dubbo Base Hospital:** Time patients waited to start treatment, triage 4 October to December 2016

Triage 4 Semi-urgent (e.g. sprained ankle, earache)	Same period last year	(this period)
Number of triage 4 patients: 3,222	3,438	
Number of triage 4 patients used to calculate waiting time: 3 2,999	3,143	
Median time to start treatment <sup>4</sup> 31 minutes	31 minutes	25 minutes
90th percentile time to start treatment <sup>5</sup> 105 minutes	107 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



 $<sup>(\</sup>dagger)$  Data points are not shown in graphs for quarters when patient numbers are too small.

<sup>(‡)</sup> 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:

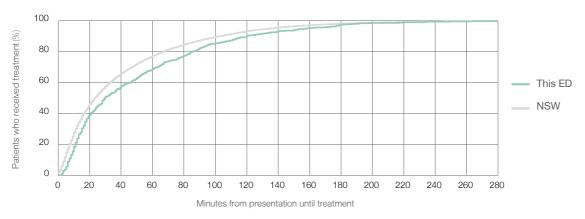
Approaches to reporting time measures of emergency department performance, December 2011.

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

# **Dubbo Base Hospital:** Time patients waited to start treatment, triage 5 October to December 2016

Triage 5 Non-urgent (e.g. small cuts or abrasions)	Same period last year	NSW (this period)
Number of triage 5 patients: 824	485	
Number of triage 5 patients used to calculate waiting time: 3 670	359	
Median time to start treatment <sup>4</sup> 30 minutes	31 minutes	24 minutes
90th percentile time to start treatment <sup>5</sup> 120 minutes	120 minutes	103 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



 $<sup>(\</sup>dagger)$  Data points are not shown in graphs for quarters when patient numbers are too small.

<sup>(‡)</sup> 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.

NSW

Same period

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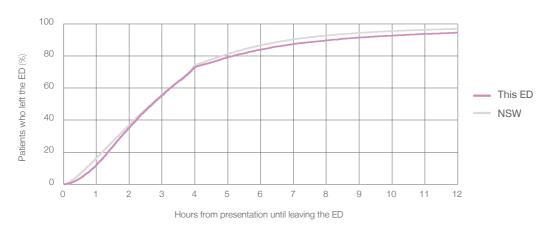
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

### Dubbo Base Hospital: Time patients spent in the ED

October to December 2016

(this period) last vear All presentations: 8,659 patients 7,789 Presentations used to calculate time to leaving the ED:<sup>6</sup> 8,656 patients 7,787 2 hours and 2 hours and Median time spent in the ED 8 2 hours and 43 minutes 41 minutes 41 minutes 7 hours and 6 hours and 90th percentile time spent in the ED 9 8 hours and 10 minutes 45 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



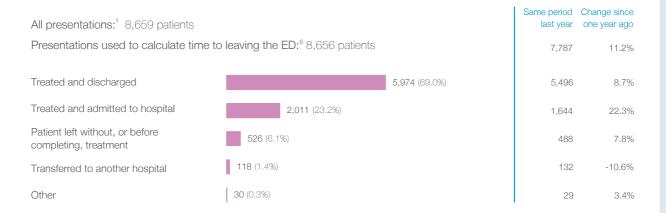
 $<sup>(\</sup>dagger)$  Data points are not shown in graphs for quarters when patient numbers are too small.

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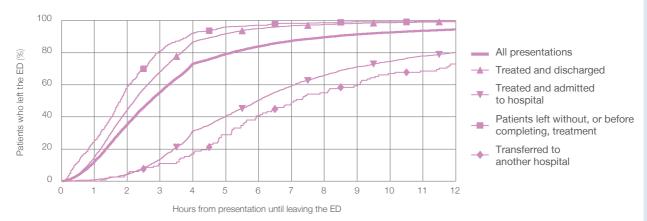
From March 2017, Hospital Quarterly reports the 90th percentile time, rather than the 95th percentile time, for related ED measures.

### Dubbo Base Hospital: Time patients spent in the ED

By mode of separation October to December 2016



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	14.9%	44.4%	68.2%	86.7%	95.0%	97.6%	98.7%	99.3%
Treated and admitted to hospital	0.7%	4.1%	13.7%	31.2%	50.4%	66.0%	74.5%	80.2%
Patient left without, or before completing, treatment	25.1%	58.9%	81.0%	92.0%	97.1%	98.7%	99.2%	99.8%
Transferred to another hospital	0%	4.2%	11.0%	16.9%	40.7%	55.1%	66.9%	72.9%
All presentations	12.1%	35.4%	55.4%	73.1%	83.9%	89.7%	92.6%	94.5%

 $<sup>(\</sup>dagger)$  Data points are not shown in graphs for quarters when patient numbers are too small.

<sup>(‡)</sup> 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.

### Dubbo Base Hospital: Time spent in the ED

Percentage of patients who spent four hours or less in the ED October to December 2016

All presentations at the emergency department: 18,659 patients

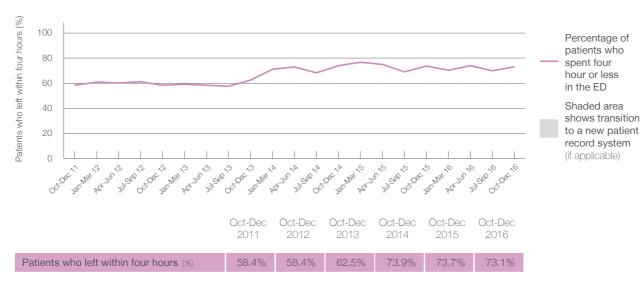
Presentations used to calculate time to leaving the ED:6 8,656 patients

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

73.1%

	Change since one year ago
7,789	11.2%
7,787	11.2%
73 7%	

Percentage of patients who spent four hours or less in the ED, by quarter, October 2011 to December 2016 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, 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 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 24 January 2017).

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