Bureau of Health Information

Emergency Departments

Hospital Quarterly:

Performance of NSW public hospitals

January to March 2012

More than half a million patients attended NSW public hospital emergency departments (EDs) during January to March 2012, 3% more than the same quarter in 2011. The greatest increase was seen in the imminently life threatening category (triage 2), with presentations 16% higher than the same quarter last year. These patients accounted for 9% of all emergency presentations.

The median times to start treatment are unchanged or slightly shorter compared to the same quarter one year ago and the 95th percentile times to start treatment have decreased by 4 minutes (triage 2), 13 minutes (triage 3), 18 minutes (triage 4) and 14 minutes (triage 5). This issue of *Hospital Quarterly* sees the introduction of the National Emergency Access Target (NEAT) to reporting of ED performance in NSW. This measure reports the percentage of patients who left the ED within four hours of presentation against progressively increasing targets until 2015. The NSW 2012 target is 69%. See page 2 for more detail on the NEAT.

In the January to March 2012 quarter, 59% of all patients left the ED within four hours, similar to the same quarter in 2011. This is below the 2012 target of 69%.

This is one of three *Hospital Quarterly* modules. For the Elective Surgery and Admitted Patients modules visit www.bhi.nsw.gov.au

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During the quarter	Jan-Mar 2012	Jan-Mar 2011	The difference
Visits to NSW emergency departments	540,301 visits	526,608 visits	+13,693 (+3%)
People travelling to NSW EDs by ambulance	131,942 people	125,246 people	+6,696 (+5%)
People travelling by ambulance that were transferred into the care of ED staff within 30 minutes	69% in 30 minutes	66% in 30 minutes	+3 percentage points
Emergency attendances that were categorised as triage 2	49,413 attendances	42,435 attendances	+6,978 (+16%)
95th percentile time to start treatment for triage 2 patients	32 minutes	36 minutes	-4 minutes
People leaving the ED within four hours of presentation (NEAT)	59% in four hours	59% in four hours	unchanged
Admissions to hospital from NSW emergency departments	146,823 admissions	139,285 admissions	+7,538 (+5%)

New developments in ED performance reporting

National Health Reform

In August 2011, the Commonwealth, state and territory (the states) governments finalised the National Health Reform Agreement. The intent of this agreement is that the Commonwealth and states will introduce clear and transparent performance reporting of health and hospital services to provide Australians with nationally consistent and locally relevant information.

One of the first measures to be introduced is the new national performance indicator, the National Emergency Access Target (NEAT).

The National Emergency Access Target

The NEAT states that, by 2015, 90% of all patients presenting to a public hospital ED will physically leave the ED within four hours, regardless of whether they are admitted to hospital, transferred to another hospital or discharged.

Commencing from 2012, this target will be phased in over four years with annual interim targets set with the aim of achieving the 90% target by 2015. The NSW baseline and targets for this measure, including all ED presentations across all triage categories, are shown in the table below:

Period	Target
Baseline	61.8%
1 Jan 2012 to 31 Dec 2012	69.0%
1 Jan 2013 to 31 Dec 2013	76.0%
1 Jan 2014 to 31 Dec 2014	83.0%
1 Jan 2015 to 31 Dec 2015	90.0%

What we have changed

In line with these national developments, the Bureau has changed how it reports the time from presentation until leaving the ED.

The NEAT measures the time from presentation until the patient is recorded as physically leaving the ED. The NEAT defines presentation as the earlier of arrival or triage time. As a result, the Bureau now reports the time patients spent in NSW EDs from the earlier of arrival or triage time rather than the earliest of arrival, triage or treatment time.

To provide a more comprehensive picture of the variation in times that patients spend in EDs, the Bureau also reports the median and 95th percentile times by which all patients left the ED in addition to the percentage of patients who left the ED within four hours of presentation (NEAT).

A graph showing the cumulative percentage of patients who left the ED by hours of presentation and mode of separation is also provided for the current quarter.

Further detail on the findings of this analysis can be found in the Bureau's *Hospital Quarterly Technical Supplement: Emergency department measures, January to March 2012* and *Hospital Quarterly Background Paper: Approaches to reporting time measures of emergency department performance, Addendum June 2012,* available on the Bureau's website at www.bhi.nsw.gov.au

See **pages 15** to **17** for more detail on how to interpret the Bureau's information.

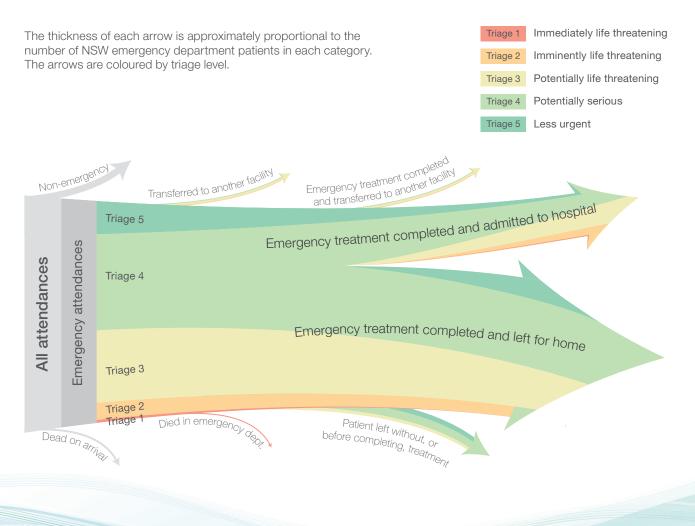
Emergency department journeys

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 January to March 2012 quarter are presented in this report and are summarised in Figure 1.

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



Arriving at the emergency department

Emergency attendances this quarter

There were more than half a million attendances at NSW EDs during January to March 2012 (Figure 2). While almost all (97%) of these visits were considered *'emergency attendances'*, 17,500 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 unchanged compared to the same quarter last year. A breakdown of emergency attendances figures shows that 45% were categorised as potentially serious (triage 4), 31% 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.

The greatest increase was seen in the imminently life threatening category (triage 2), with presentations 16% higher than the same quarter last year.

Figure 2: Attendances at NSW emergency departments, January to March 2012

			Same period last year	Change since one year ago
All attendances: ¹ 540,301 patients			526,608	3%
Emergency attendances ² by triage category: 522,978 patients			514,420	2%
1 Immediately life threatening 2,947 (1%)			2,935	0%
2 Imminently life threatening 49,413 (9%)			42,434	16%
3 Potentially life threatening	164,324 (31%)		151,329	9%
4 Potentially serious		233,247 (45%)	234,802	-1%
5 Less urgent 73,047 (14%)			82,920	-12%

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.

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

Note: Emergency department activity includes 89 facilities for which electronic data are reported. This covers approximately 85% of NSW emergency department activity.

Source: Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

Emergency attendances and admissions over time

There is a strong seasonal effect on ED attendances with the typical annual pattern seeing ED attendance numbers highest during the October to December quarter, and lowest during the April to June quarter (Figure 3).

In the January to March 2012 quarter, ED attendances were 540,301. This is 3% higher than the same quarter one year ago (526,608) and 6% higher than the same period two years ago (507,677) (Figure 3).

The number of admissions from the ED has also been increasing. This quarter there were 146,823 admissions. This is 5% higher than the same quarter one year ago (139,285) and 11% higher than the same quarter two years ago (132,368).

Due to 2012 being a leap year, part of the increase in attendances and admissions this quarter, compared to the same quarter last year, could be explained by the additional day in February.

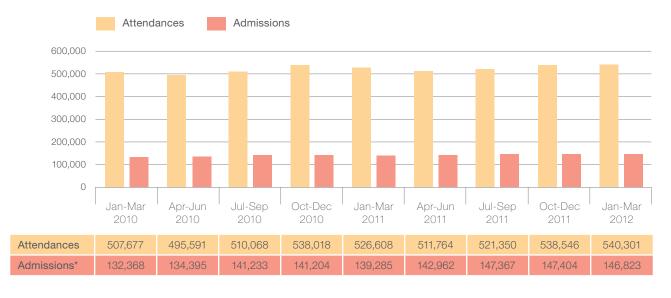


Figure 3: Attendances at, and admissions from, NSW emergency departments, January 2010 to March 2012

(*) Admissions refers to all admissions through the emergency department.

Note: Emergency department activity includes 89 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 20 April 2012.

Arrivals by ambulance and off-stretcher time this quarter

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 at hospital by ambulance to be transferred into the care of ED staff within 30 minutes.

In the January to March 2012 quarter, almost one-quarter (24%) of all people who attended NSW EDs arrived by ambulance, a total of 131,942 patients (Figure 4). This quarter, 69% of these patients were transferred into the care of ED staff within 30 minutes.

This quarter NSW did not achieve the state target for off-stretcher time (Figure 4).

Arrivals by ambulance and off-stretcher time over time

The number of ambulance arrivals has increased compared with the same quarter one year ago, up 5%, and up 8% compared with the same quarter two years ago. This was disproportionately larger than the increase in emergency attendances (up 3% and 6% respectively).

The percentage of patients transferred into the care of ED staff within 30 minutes was higher than the same quarter one year ago (66%) but lower than the same quarter two years ago (72%).

This off-stretcher ambulance target has not been met at a state-wide level in any quarter over the past two years (Figure 4).



Figure 4: Ambulance arrivals and percentage of patients accepted into the care of NSW emergency departments from an ambulance within 30 minutes of arrival, January 2010 to March 2012

Source: Data provided by NSW Ambulance Service on 20 April 2012.

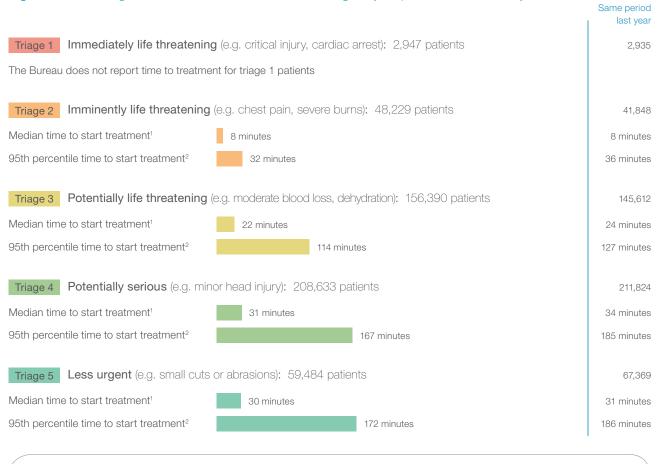
Time to treatment performance

Time to treatment this quarter

In January to March 2012, the median times to start treatment were unchanged or slightly shorter compared to the same quarter in 2011 (Figure 5). The median time to start treatment for the imminently life threatening category (triage 2) remains unchanged at 8 minutes, the potentially life threatening category (triage 3) two minutes less at 22 minutes, the potentially serious category (triage 4) three minutes less at 31 minutes and the less urgent category (triage 5) one minute less at 30 minutes. The 95th percentile times to start treatment were lower in each triage category. This quarter, 95% of patients began treatment within:

- 32 minutes, four minutes shorter than one year ago (triage 2)
- 114 minutes, 13 minutes shorter than one year ago (triage 3)
- 167 minutes, 18 minutes shorter than one year ago (triage 4)
- 172 minutes, 14 minutes shorter than one year ago (triage 5).

Figure 5: Waiting times for treatment in NSW emergency departments, January to March 2012



- 1. 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.
- 2. The 95th percentile is the time by which 95% of patients started treatment. The final 5% of patients took equal to or longer than this time.
- 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 20 April 2012.

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Time to treatment over time

The time from presentation until treatment fluctuates throughout the year. At a state level, the time appears to be reasonably steady, however, the trend is affected by progressive implementation of new information systems. **Figures 6a-d** show for triage categories 2 to 5, the median and 95th percentile times to start treatment. Data are reported according to triage category. The Bureau does not report time to treatment for patients with conditions triaged as immediately life threatening (triage 1).

Figure 6a: **Triage 2** - Median and 95th percentile times to start treatment (minutes) in NSW emergency departments, January 2007 to March 2012

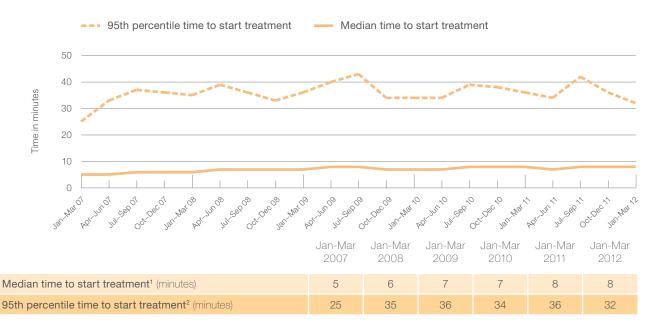


Figure 6b: **Triage 3 -** Median and 95th percentile times to start treatment (minutes) in NSW emergency departments, January 2007 to March 2012







Figure 6d: Triage 5 - Median and 95th percentile times to start treatment (minutes) in NSW emergency departments, January 2007 to March 2012



1. 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.

2. The 95th percentile is the time by which 95% of patients started treatment. The final 5% of patients took equal to or longer than this time.

Note: Hospitals transitioning to one of the major information systems are excluded from this data during the quarter(s) of implementation (For more information see Hospital Quarterly Background Paper: Approaches to reporting time measures of emergency department performance, Addendum June 2012).

Source: Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

Leaving the emergency department

Time from presentation until leaving the ED this quarter

In the January to March 2012 quarter, the median time to leaving the ED was three hours and 19 minutes after presentation. The 95th percentile time to leaving the ED was 11 hours and 55 minutes after presentation (Figure 7).

There are different ways that a patient can leave the ED. The majority of patients leave the ED after their treatment is complete or when they are admitted to hospital. Some patients choose not to wait to begin or complete treatment or are transferred to other hospitals. The way a patient leaves the ED is referred to as the mode of separation. The time that it takes for patients to leave the ED varies by the mode of separation.

Figure 8 shows attendances at NSW EDs by mode of separation for the January to March 2012 quarter. Figure 9 shows the times in which patients left the ED by mode of separation for the January to March 2012 quarter.

Figure 7: Time from presentation until leaving the emergency department, January to March 2012

	Same period last year
All attendances at the emergency department: ¹ 540,301 patients	526,608
Attendances used to calculate time to leaving the ED: ² 532,072 patients	526,538
Median time to leaving the ED ³ 3 hours and 19 minutes	3 hours and 18 minutes
95th percentile time to leaving the ED ⁴ 11 hours and 55 minutes	12 hours and 36 minutes

1. All emergency and non-emergency attendances at the emergency department (ED).

2. All attendances that have a departure time.

3. 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.

4. The 95th percentile is the time by which 95% of patients left the ED. The final 5% of patients took equal to or longer than this time.

Source: Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

Figure 8: Leaving the emergency department by mode of separation, January to March 2012

		Same period last year	Change since one year ago
All attendances at NSW EDs by mode of	of separation:1 532,072 patients	526,538	1%
Treated and discharged	329,606 (62%)	324,470	2%
Treated and admitted to hospital	145,099 (26%)	139,269	4%
Patient left without, or before completing, treatment	38,745 (8%)	43,438	-11%
Transferred to another hospital	9,039 (2%)	9,251	-2%
Other	9,583 (2%)	10,110	-5%

1. All attendances that have a departure time.

Source: Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

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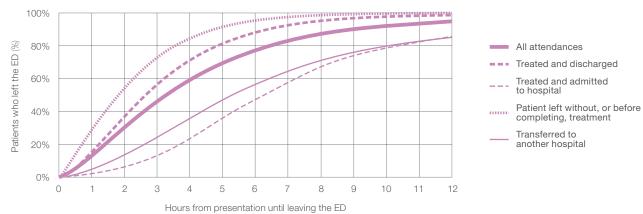
In the January to March 2012 quarter:

- Most patients (62%) received treatment in the ED and were discharged home (Figure 8). On average, these patients spent less time in the ED than other patients (Figure 9).
- About a quarter of patients (26%) 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 8). On average, these patients spent the most time in the ED (Figure 9).

separation, January to March 2012

Figure 9:

- A small group of patients (2%) • received treatment in the ED and were transferred to another hospital (Figure 8). On average, these patients also spent longer in the ED than patients who were discharged (Figure 9).
- Some patients (8%) left the ED without, or before completing, treatment (Figure 8). On average, these patients spent the shortest time in the ED (Figure 9).



Percentage of patients who left the emergency department, by time and mode of

Treated and discharged	15%	37%	56%	71%	88%	95%	98%	99%
Treated and admitted to hospital	2%	6%	13%	24%	47%	68%	79%	86%
Patient left without, or before completing treatment	29%	55%	73%	85%	96%	99%	99%	100%
Transferred to another hospital	5%	14%	25%	36%	57%	71%	80%	85%
All attendances	14%	30%	46%	59%	77%	88%	92%	95%

2 hours 3 hours

4 hours

6 hours

8 hours 10 hours 12 hours

Note: Time from presentation to the emergency department (ED) until recorded as leaving the ED. Source: Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

1 hour

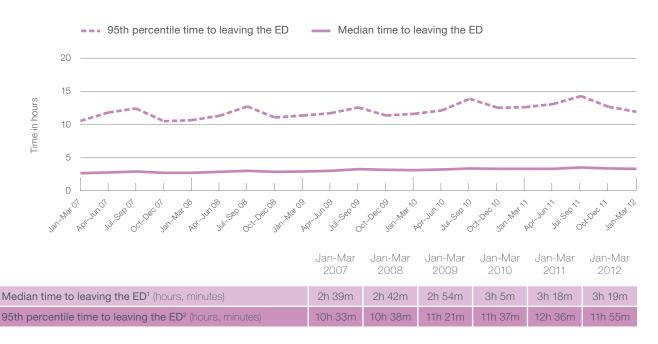
Time from presentation until leaving the ED over time

Figure 10 shows the median and 95th percentile time from presentation until leaving the ED by quarter over five years. During January to March 2012, the median time to leaving the ED was three hours and 19 minutes of presentation.

This is similar to the same quarter in 2011 when the median time to leaving the ED was three hours and 18 minutes, but longer than the same quarter in 2010 when the median time was three hours and five minutes (Figure 10). During the January to March 2012 quarter, the 95th percentile time to leaving the ED was 11 hours and 55 minutes after arriving in the ED.

This is shorter than in the same quarter in 2011 when the 95th percentile time to leaving the ED was 12 hours and 36 minutes, but longer than in the same quarter in 2010 when the 95th percentile time was 11 hours and 37 minutes.

Figure 10: Time from presentation until leaving the emergency department by quarter, January 2007 to March 2012



- 1. The median is the time by which half of patients left the emergency department (ED). The other half of patients took equal to or longer than this time.
- 2. The 95th percentile is the time by which 95% of patients left the ED. The final 5% of patients took equal to or longer than this time.
- Note: Time from presentation to the ED until recorded as leaving the ED.
- 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 20 April 2012.

The National Emergency Access Target (NEAT)

The NEAT aims to have as many patients as possible physically leaving the ED within four hours, whether for admission to hospital, referral to another hospital for treatment, or discharge.

Commencing from 2012, this target will be phased in over four years with annual interim targets.

Performance against the NEAT this quarter

The NSW 2012 target requires that 69% of all patients who present to an ED during January to December 2012 leave the ED within four hours.

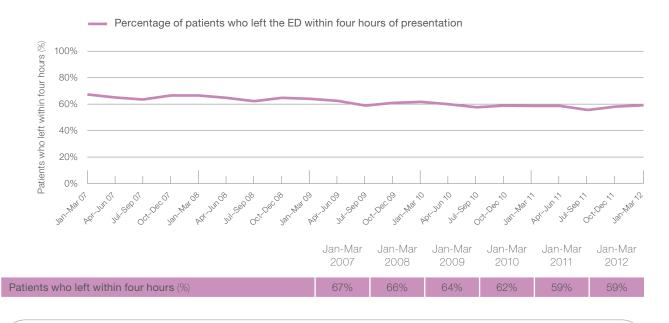
In the January to March 2012 quarter, 59% of patients left the ED within four hours of presentation and 77% of patients had left the ED by six hours (Figure 9).

For the January to March 2012 quarter, NSW did not achieve the state target for the NEAT.

Performance against the NEAT over time

The percentage of patients who left the ED within four hours of presentation appears to be gradually decreasing. During this quarter the state-wide figure was 59%. This is similar to the same quarter one year ago (59%) but lower than the same quarter two years ago (62%) (Figure 11).

Figure 11: Percentage of patients who left the emergency department within four hours of presentation, by quarter, January 2007 to March 2012



Note: Time from presentation to the emergency department (ED) until recorded as leaving the ED. 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 20 April 2012.

Differences in performance between hospitals

Time to treatment in NSW EDs

Appendix table 1 presents the median and 95th percentile times to start treatment for patients in each triage category (categories 2, 3, 4 and 5).

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 results for triage 2 and 4 in the January to March 2012 quarter are compared below:

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

Time to leaving the ED

Appendix table 2 presents number of attendances, off-stretcher time, the median and 95th percentile times to leaving the ED as well as the percentage of patients that left the ED within four hours.

There is variation between hospitals when comparing the time to leaving the ED. For example, among principal referral and major hospitals using one of the two predominant information systems, the highest and lowest times in the January to March 2012 quarter are compared below:

- 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
- The percentage of patients that left the ED within four hours from presentation ranged from 65% at Orange Hospital to 36% at Liverpool Hospital.

How to interpret our information

Last year, the Bureau introduced a new approach to measuring the times patients spend in the ED. In this issue of *Hospital Quarterly*, we have made changes to how we present this information to further improve understanding.

Different ways of measuring the times patients spend in EDs

The Bureau presents information on the times by which patients start their treatment, and the times by which patients leave the ED. We report this information using medians and 95th percentiles. This is a common international approach to measuring wait times. It gives insight into the range of times that different patients spend in the ED.

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

If you look at how long each patient in an ED waits for treatment and then list all of these patients in order of how long they waited, the median is the time the patient in the middle of the list waited.

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 these values 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.

The Bureau now also reports on the percentages of patients who leave the ED within four hours (performance against the National Emergency Access Target). We report on this benchmark as part of a national initiative to introduce consistent performance reporting of hospital services.

It is important to understand that the median and 95th percentile times are not the same as performance against a benchmark. The medians and 95th percentiles report *time* while a benchmark reports a *percentage of patients*. Time cannot be compared directly against a percentage of patients.

Assessing ED performance

There are a number of ways to assess a hospital's performance. One way is to compare results to a target or benchmark. Other ways are to compare:

- Own performance over time (especially the same quarter in previous years as there are strong seasonal trends in EDs)
- Performance against NSW as a whole
- Performance against other hospitals of similar size and patient mix (known as 'peer group').

Figure 12: Time from presentation to treatment

Triage 2 Imminently life threatening (e.g. chest pain, severe burns): 178 patients

8 minutes

35 minutes

Same period last year (this period) 170 6 minutes

8 minutes 38 minutes 32 minutes

NSW

The Bureau has introduced changes throughout Hospital Quarterly to support comparisons of ED performance. For example, the table (Figure 12) shows the median and 95th percentile time from presentation to treatment for triage 2 patients. It also shows comparable information for the same period last year and against NSW as a whole.

Other ways of presenting the times patients spend in EDs

Hospital Quarterly also presents information about the time patients spent in the ED by using cumulative graphs (Figure 13) and trend graphs (Figure 14).

Cumulative graphs

Median time to start treatment

95th percentile time to start treatment

The Bureau uses cumulative graphs for time to treatment and time to leaving the ED. Cumulative graphs show the range of times during a single guarter. These graphs show the variation in times patients experience.

Here are some examples of how you can interpret this graph.

Example 1. What proportion of patients were seen within one hour?

To understand the proportion of patients that were seen within a given timeframe, begin at the axis labelled 'time' on Figure 13. Find the 60 minute point (A) along this axis and follow the line up until it meets the curve, then straight to the left to see the percentage of patients. In this example, we can see that more than 80% of patients started treatment within one hour of arriving at the ED.

Example 2. How long did it take for 40% of patients to be seen?

To understand how long a percentage of patients waited to be seen, begin at the axis labelled *'patients'* on Figure 13. Find the 40% point (**B**) along this axis and follow the line across until it meets the curve, then straight down to see the time in minutes. We can see that 40% of patients started treatment between 0 and less than 20 minutes of arriving at the ED. This means 60% of patients waited longer than this time for treatment to start.

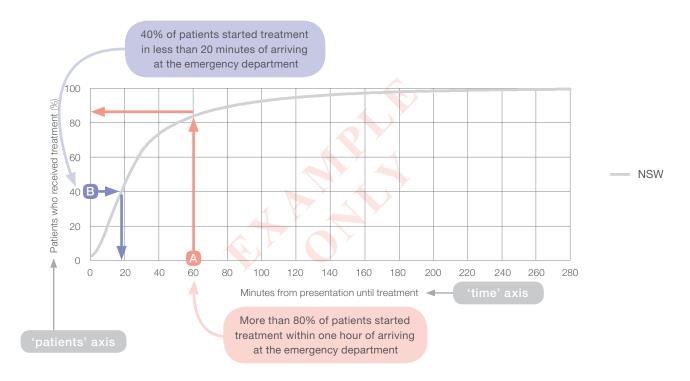
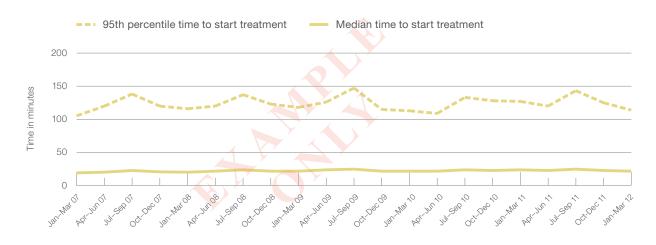


Figure 13: Percentage of patients who received treatment by time

Figure 14: Median and 95th percentile times to start treatment (minutes) in NSW emergency departments, over five years



Trend graphs

Trend graphs show the way times in EDs have varied over the last few years.

For example, the trend graph (Figure 14) presents the time to start treatment for patients in each quarter of the last five years. The solid line shows the median time to treatment for patients in NSW EDs and the dashed line shows the 95th percentile.

In this graph you can see the seasonal patterns, with the longest times to treatment (as shown by the 95th percentile line) occurring during the July to September quarter each year.

Appendix: ED time performance measures

Appendix table 1: Waiting times to treatment (minutes) for NSW emergency departments, by local health district, January to March 2012

	Tria	ge 2	Tria	ge 3	Tria	ge 4	Triage 5	
	Median time to start treatment	95th percentile time to start treatment						
New South Wales								
Total New South Wales	8	32	22	114	31	167	30	172
Central Coast Local Health D	istrict (C	CLHD)						
Gosford Hospital	7	32	20	104	42	194	53	211
Wyong Hospital	9	52	20	119	33	151	37	154
Total CCLHD	8	43	20	111	37	178	39	175
Far West Local Health Distric	t (FWLHI	D)						
Broken Hill Base Hospital	6	27	14	59	20	95	25	132
Total FWLHD	6	27	14	59	20	95	25	132
Hunter New England Local He	ealth Dis	trict (HN	ELHD)					
Armidale and New England Hospital	8	35	19	79	27	118	25	173
Belmont Hospital	6	21	19	86	31	147	37	167
Calvary Mater Newcastle	7	33	19	94	31	158	35	190
Cessnock District Hospital	5	30	23	80	32	119	35	130
Gunnedah District Hospital	8	*	15	95	36	134	30	130
Inverell District Hospital	5	60	20	106	30	119	25	125
John Hunter Hospital	7	29	23	138	34	210	43	239
Kurri Kurri District Hospital	2	*	9	92	16	96	10	80
Maitland Hospital	9	37	26	147	47	198	49	190
Manning Base Hospital	7	38	26	148	47	253	46	262
Moree District Hospital	3	25	9	95	12	103	7	
Muswellbrook District Hospital	3	*	11	88	27	120	20	112
Narrabri District Hospital	1	*	2	35	0	55	4	63
Singleton District Hospital	9	42	21	82	38	128	35	116
Tamworth Base Hospital	7	36	25	150	53	231	61	228
Other HNELHD	5	50	12	67	18	101	10	90
Total HNELHD	7	35	20	116	32	180	31	183
Illawarra Shoalhaven Local H	ealth Dis	trict (ISL	_HD)					
Bulli District Hospital	t	t	t	t	†	t	t	
Milton and Ulladulla Hospital	5	19	18	62	27	126	29	123
Shellharbour Hospital	11	39	26	118	31	197	26	129
Shoalhaven and District Memorial Hospital	10	43	29	128	40	230	34	208
Wollongong Hospital	10	35	29	148	43	215	43	196
Total ISLHD	9	36	27	129	37	207	36	191

	Tria	ge 2	Tria	ge 3	Tria	ge 4	Tria	Triage 5	
	Median time to start treatment	95th percentile time to start treatment							
Mid North Coast Local Health	District	(MNCLH	D)						
Coffs Harbour Base Hospital	8	25	20	90	22	132	20	142	
Kempsey Hospital	9	30	21	72	22	105	18	110	
Port Macquarie Base Hospital	10	35	24	103	32	149	36	139	
Total MNCLHD	9	30	22	90	26	133	24	135	
Murrumbidgee Local Health D) istrict (N	/LHD)							
Griffith Base Hospital	5	21	16	73	28	127	37	194	
Wagga Wagga Base Hospital	6	17	18	46	25	101	17	135	
Total MLHD	6	17	17	55	26	110	19	146	
Nepean Blue Mountains Loca	l Health	District (NBMLHC))					
Blue Mountains District Anzac Memorial Hospital	7	34	19	104	35	157	28	148	
Hawkesbury District Health Service	18	56	27	108	29	154	30	147	
Lithgow Health Service	5	28	13	56	12	85	11	94	
Nepean Hospital	6	27	16	84	15	82	14	116	
Total NBMLHD	7	34	18	90	19	122	16	124	
Northern NSW Local Health D	istrict (N	INSWI HI))		_		_		
Grafton Base Hospital	8	36	19	105	33	177	29	167	
Lismore Base Hospital	7	24	24	112	45	184	65	195	
Murwillumbah District Hospital	5	12	14	48	21	88	23	114	
The Tweed Hospital	9	38	25	90	30	151	23	150	
Total NNSWLHD	8	32	22	96	32	160	32	169	
Northern Sydney Local Health	n District	(NSLHD)						
Hornsby and Ku-Ring-Gai Hospital ‡	8	33	34	166	51	217	46	232	
Manly District Hospital ‡	7	29	14	64	16	105	16	117	
Mona Vale and District Hospital [‡]	7	25	16	63	24	116	24	124	
Royal North Shore Hospital	7	26	20	96	28	130	34	154	
Ryde Hospital	t	t	†	†	†	†	†	†	
Total NSLHD	7	28	19	99	28	155	31	161	
South Eastern Sydney Local H	lealth Di	i strict (SE	ESLHD)						
Prince of Wales Hospital	7	37	26	130	26	194	23	204	
St George Hospital	10	44	27	124	38	158	36	176	
Sutherland Hospital	11	35	24	82	31	98	29	106	
Sydney Eye Hospital	4	*	13	33	21	53	29	96	
Sydney Hospital	7	*	17	49	20	94	24	117	
Total SESLHD	10	40	25	112	29	143	29	132	
South Western Sydney Local	Health D	istrict (S	WSLHD)						
Bankstown / Lidcombe Hospital	7	23	22	117	28	126	28	121	
Bowral and District Hospital	8	25	22	76	33	129	30	144	
Camden Hospital	5	21	13	89	19	133	18	109	

	Tria	ge 2	Tria	ge 3	Tria	ge 4	Tria	ge 5
	Median time to start treatment	95th percentile time to start treatment						
			10	10.4	24	170		
Campbelltown Hospital	8	28	18	124	31	170	29	147
Fairfield Hospital	13	43	24	109	36	185	41	194
Liverpool Hospital	9	41	22	187	25	174	20	159
Total SWSLHD	8	33	21	143	29	158	27	153
Southern NSW Local Health D	istrict (S	SNSWLHE	D)					
Bega Hospital	11	67	21	87	35	141	43	172
Goulburn Base Hospital	11	45	29	121	38	181	34	168
Total SNSWLHD	11	58	26	110	37	168	38	168
St Vincent's Health Network (SVHN)							
St Vincent's Hospital, Darlinghurst	5	26	16	112	16	180	6	186
Total SVHN	5	26	16	112	16	180	6	186
Sydney Local Health District	ם וחעי							
		1	00		05	104	07	150
Canterbury Hospital	7	22	26	114	35	184	27	158
Concord Hospital	7	16	17	72	27	134	27	123
Royal Prince Alfred Hospital	9	32	26	133	38	180	37	208
Total SYDLHD	8	27	24	118	33	166	31	182
Sydney Children's Hospitals	letwork	(SCHN)						
Sydney Children's Hospital	9	28	21	76	37	166	27	102
The Children's Hospital at Westmead	8	10	23	86	34	192	40	215
Total SCHN	9	21	22	83	36	175	38	212
Western NSW Local Health Di	strict (W	'NSWLHE))					
Bathurst Base Hospital	9	38	20	80	22	122	14	97
Dubbo Base Hospital	8	34	26	122	28	154	20	120
Orange Base Hospital	5	22	22	70	38	145	35	170
Total WNSWLHD	7	34	23	99	29	138	30	161
Western Sydney Local Health	District	(WSLHD)						
Auburn Hospital	7	23	20	96	42	192	18	148
Blacktown Hospital	7	21	29	147	42	183	34	172
Mount Druitt Hospital	7	22	23	123	51	201	48	197
Westmead Hospital (all units)	7	26	26	126	42	223	43	223
Total WSLHD	7	24	25	148	44	202	36	195
	1	27	20	140		202		100

(*) 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 January to March 2012 quarter, the data for this hospital are not considered reliable enough to display (For more information see *Hospital Quarterly Background Paper: Approaches to reporting time measures of emergency department performance, Addendum June 2012*).

(‡) Due to the implementation of a new electronic information system in this emergency department in the previous quarter (October to December 2011), caution is advised when considering this hospital's results (For more information see *Hospital Quarterly Background Paper: Approaches to reporting time measures of emergency department performance, Addendum June 2012).* Source: Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

Appendix table 2: Activity, off-stretcher performance and presentation to leaving the ED performance for NSW emergency departments, January to March 2012

	Attendances		Ambulance				
		Attendances used for calculation	Median time to leaving the ED	95th percentile time to leaving the ED	% leaving ED within 4 hours Target 69%	Ambulance arrivals	Off stretcher 90% in 30 min
New South Wales							
Total New South Wales	540,301	532,072	3h 19m	11h 55m	59%	131,942	69%
Central Coast Local Heal	th District (_	
Gosford Hospital	14,269	14,269	4h 28m	11h 53m	44%	4,689	53%
Wyong Hospital	14,394	14,393	3h 23m	12h 17m	58%	3,919	62%
Total CCLHD	28,663	28,662	3h 56m	12h 3m	51%	8,608	57%
Far West Local Health Di	strict (E\// F	- - -				_	
Broken Hill Base Hospital	5,672	5,672	1h 46m	6h 55m	83%	709	87%
Total FWLHD	5,672	5.672	1h 46m	6h 55m	83%	709	87%
	,	- / -					
Hunter New England Loc Armidale and New England Hospital	3,939	3,939	1h 25m	5h 15m	90%	718	95%
Belmont Hospital	6,253	6,253	2h 52m	9h 43m	66%	1,475	70%
Calvary Mater Newcastle	8,212	8,212	2h 55m	12h 17m	65%	2,505	56%
Cessnock District Hospital	4,484	4,484	1h 8m	6h 7m	91%	498	91%
Gunnedah District Hospital	2,497	2,497	1h 13m	3h 58m	95%	246	98%
Inverell District Hospital	2,735	2,735	1h Om	4h 30m	93%	415	87%
John Hunter Hospital	17,317	17,317	4h 16m	10h 48m	46%	5,333	53%
Kurri Kurri District Hospital	1,977	1,977	0h 49m	4h 42m	94%	88	89%
Maitland Hospital	10,969	10,968	3h 6m	11h 29m	62%	2,103	50%
Manning Base Hospital	6,335	6,335	3h 41m	13h 28m	55%	2,012	64%
Moree District Hospital	2,351	2,351	0h 55m	4h 47m	93%	272	94%
Muswellbrook District Hospital	2,045	2,045	1h 17m	6h 50m	87%	332	93%
Narrabri District Hospital	1,512	1,512	1h 9m	3h 55m	95%	165	90%
Singleton District Hospital	3,083	3,083	1h 11m	3h 36m	96%	344	95%
Tamworth Base Hospital	9,785	9,783	3h 24m	11h 15m	60%	1,815	74%
Other HNELHD	13,920	13,915	0h 50m	5h 4m	93%	1,427	91%
Total HNELHD	97,414	97,406	2h 13m	9h 36m	71%	19,748	66%
Illawarra Shoalhaven Loc	al Health D	istrict (ISL)	HD)				
Bulli District Hospital	1,911	t	t	t	t	*	*
Milton and Ulladulla Hospital	3,883	3,883	1h 34m	6h 28m	86%	508	78%
Shellharbour Hospital	6,668	6,667	3h 42m	13h 51m	54%	1,533	63%
Shoalhaven and District Memorial Hospital	9,255	9,255	3h 31m	11h 57m	57%	2,394	68%
Wollongong Hospital	13,550	13,550	4h 19m	14h 32m	46%	4,976	76%
Total ISLHD	35,267	33,355	3h 37m	13h 0m	55%	9,411	72%
Mid North Coast Local H	ealth <u>Distri</u>	ct (MNCLHI	D)				
Coffs Harbour Base Hospital	8,465	8,465	3h 9m	13h 43m	61%	2,238	83%

	Attendances		Leaving t	he ED		Ambu	Ilance
		Attendances used for calculation	Median time to leaving the ED	95th percentile time to leaving the ED	% leaving ED within 4 hours Target 69%	Ambulance arrivals	Off stretcher 90% in 30 mir
Kempsey Hospital	5,533	5,533	2h 3m	8h 9m	80%	854	83%
Port Macquarie Base Hospital	8,330	8,330	3h 3m	12h 49m	62%		58%
Total MNCLHD	22,328	22,328	2h 47m	12h 49m	66%	2,147 5,239	58% 73%
	,		20 4700		0070	0,200	1070
Murrumbidgee Local Heal							
Griffith Base Hospital	4,645	4,645	2h 6m	5h 46m	85%	687	88%
Wagga Wagga Base Hospital	8,496	8,495	3h 37m	13h 58m	55%	2,215	51%
Total MLHD	13,141	13,140	2h 53m	11h 46m	66%	2,902	59%
Nepean Blue Mountains L	ocal Healt	h District (Ì	NBMLHD)				
Blue Mountains District Anzac Memorial Hospital	4,457	4,457	2h 12m	7h 33m	77%	791	93%
Hawkesbury District Health Service	5,135	5,135	3h 54m	13h 3m	51%	1,068	52%
Lithgow Health Service	3,265	3,264	1h 33m	5h 47m	87%	540	91%
Nepean Hospital	13,767	13,764	4h 9m	15h 3m	48%	4,264	87%
Total NBMLHD	26,624	26,620	3h 24m	12h 26m	58%	6,663	83%
Northern NSW Local Heal	th District	(NNSWLHD))				
Grafton Base Hospital	5,442	5,442	3h 12m	9h 39m	61%	693	93%
Lismore Base Hospital	7,428	7,428	4h 7m	16h 42m	49%	2,068	69%
Murwillumbah District Hospital	3,764	3,762	1h 20m	5h 5m	91%	390	93%
The Tweed Hospital	10,077	10,077	3h 11m	16h 14m	59%	2,009	77%
Total NNSWLHD	26,711	26,709	3h 3m	14h 11m	61%	5,160	77%
Northern Sydney Local He	alth Distri	ct (NSLHD)					
Hornsby and Ku-Ring-Gai Hospital		7,975	4h 3m	11h 47m	50%	1,968	82%
Manly District Hospital [‡]	6,075	6,074	2h 50m	7h 43m	76%	1,326	93%
Mona Vale and District Hospital [‡]	7,386	7,386	2h 42m	10h 46m	68%	1,688	90%
Royal North Shore Hospital	15,719	15,719	3h 48m	10h 20m	53%	4,294	68%
Ryde Hospital	6,295	†	t	t	t	1,800	90%
Total NSLHD	43,450	37,154	3h 28m	10h 23m	59%	11,076	81%
South Eastern Sydney Loo	cal Health	District (SE	SLHD)				
Prince of Wales Hospital	11,848	11,848	4h 6m	11h 29m	49%	3,523	62%
St George Hospital	16,459	16,459	3h 47m	10h 30m	54%	4,939	68%
Sutherland Hospital	11,615	11,615	4h 0m	11h 40m	50%	3,297	76%
Sydney Eye Hospital	5,482	5,481	2h 13m	5h 1m	88%	28	93%
Sydney Hospital	4,778	4,777	1h 53m	5h 24m	87%	932	91%
Total SESLHD	50,182	50,180	3h 27m	10h 19m	59%	12,719	70%
South Western Sydney Lo	cal <u>Health</u>	District (S)	NSLHD)				
Bankstown / Lidcombe Hospital	11,711	11,711	4h 14m	10h 52m	46%	4,080	71%
Bowral and District Hospital	4,405	4,405	2h 29m	7h 24m	73%	908	86%
Camden Hospital	3,124	3,124	1h 37m	6h 6m	85%	*	*
Campbelltown Hospital	14,102	14,102	4h 31m	17h 46m	44%	3,890	63%
Fairfield Hospital	8,272	8,272	3h 36m	10h 36m	57%	1,849	67%

	Attendances		Leaving t	he ED		Ambu	Ilance
		Attendances used for calculation	Median time to leaving the ED	95th percentile time to leaving the ED	% leaving ED within 4 hours Target 69%	Ambulance arrivals	Off stretcher 90% in 30 min.
Liverpool Hospital	16,673	16,673	5h 8m	16h 53m	36%	5,978	57%
Total SWSLHD	58,287	58,287	4h 7m	14h 13m	48%	16,705	64%
Southern NSW Local Healt	h District	(SNSWI HD))			_	
Bega Hospital	2,837	2,837	2h 11m	6h 23m	80%	576	85%
Goulburn Base Hospital	4,711	4,711	2h 26m	8h 44m	72%	836	55%
Total SNSWLHD	7,548	7,548	2h 20m	7h 54m	75%	1,412	67%
St Vincent's Health Networ	r k (SVHN)						
St Vincent's Hospital, Darlinghurst	11,118	11,118	3h 48m	16h 1m	53%	4,079	60%
Total SVHN	11,118	11,118	3h 48m	16h 1m	53%	4,079	60%
Sydney Local Health Distri	ct (SYDLH	D)					
Canterbury Hospital	9,052	9,052	3h 45m	10h 19m	54%	2,134	72%
Concord Hospital	8,757	8,757	3h 37m	9h 18m	56%	2,362	74%
Royal Prince Alfred Hospital	17,361	17,361	4h 11m	10h 39m	47%	5,433	63%
Total SYDLHD	35,170	35,170	3h 56m	10h 17m	51%	9,929	67%
Sydney Children's Hospita	ls Networl	(SCHN)					
Sydney Children's Hospital	8,755	8,755	2h 25m	7h 27m	76%	614	94%
The Children's Hospital at Westmead	12,407	12,407	3h 14m	9h 26m	62%	1,187	92%
Total SCHN	21,162	21,162	2h 52m	8h 46m	68%	1,801	93%
Western NSW Local Health	District (WNSWLHD)				
Bathurst Base Hospital	5,648	5,648	2h 37m	11h 48m	68%	865	80%
Dubbo Base Hospital	6,787	6,787	3h 17m	15h 34m	59%	1,594	80%
Orange Base Hospital	6,854	6,854	2h 47m	16h 50m	65%	1,315	75%
Total WNSWLHD	19,289	19,289	2h 54m	14h 46m	64%	3,774	78%
Western Sydney Local Hea	alth Distric	t (WSLHD)					
Auburn Hospital	6,305	6,304	3h 32m	9h 55m	63%	1,520	71%
Blacktown Hospital	9,056	9,055	5h 11m	22h 36m	39%	2,999	49%
Mount Druitt Hospital	8,012	8,011	4h 23m	13h 20m	44%	2,165	74%
Westmead Hospital (all units)	14,902	14,902	4h 52m	16h 37m	40%	5,315	57%
Total WSLHD	38,275	38,272	4h 27m	16h 29m	45%	11,999	60%

(*) Values suppressed due to small numbers and to protect privacy. Suppressed data have been excluded from LHD totals.

(†) Due to the implementation of a new electronic information system in this emergency department during the January to March 2012 quarter, the data for this hospital are not considered reliable enough to display (see *Hospital Quarterly Background Paper*:

Approaches to reporting time measures of emergency department performance, Addendum June 2012 for more information). (‡) Due to the implementation of a new electronic information system in this emergency department in the previous quarter

(October to December 2011), caution is advised when considering this hospital's results (see *Background Paper* for more information). 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 20 April 2012. Ambulance off-stretcher time data provided by the NSW Ambulance Service on 20 April 2012.

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About the Bureau

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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State Health Publication Number: (BHI) 120127 ISSN 1838-3238

Suggested citation: Bureau of Health Information. Hospital Quarterly: Performance of NSW public hospitals, January to March 2012. Emergency Departments. 3(1). Sydney (NSW); 2012.

Published June 2012

Please note that there is the potential for minor revisions of data in this report. Please check the online version at www.bhi.nsw.gov.au for any amendments.

Bureau of Health Information

Admitted Patients

Hospital Quarterly:

Performance of NSW public hospitals

January to March 2012

People are admitted to hospital for a variety of reasons, such as surgery, illness or childbirth. When a person is admitted to hospital, they begin what is termed an *'episode of care'*. This covers a single type of care such as acute care, rehabilitation or palliative care. Sometimes, a change in the medical needs of a person can require that they start a second or third episode during the same period of stay in hospital.

Healthcare professionals monitor episodes to better understand local clinical needs and to allow planning for hospital beds, waiting lists and staffing.

The report shows there were 412,526 admitted patient episodes during January to March 2012, 15,720 (+4%) more than the same quarter in 2011 and 29,557 (+8%) more than the same quarter two years ago. There has been an expected decrease

in admitted episodes since the previous quarter due to the seasonal dip in the number of admissions during January to March.

Patients admitted for acute care or maternity and birth comprised 97% of all admitted episodes. Most of these patients (55%) were admitted for one night or more (overnight admissions) and this percentage is largely unchanged over the past nine quarters. Patients stayed a total of 1,336,912 bed days during the quarter and, on average, each patient stayed 3.4 days in hospital. There were 18,209 babies born, up 2% from the same quarter one year ago.

This is one of three *Hospital Quarterly* modules. For the Emergency Departments and Elective Surgery modules visit www.bhi.nsw.gov.au

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During the quarter	Jan-Mar 2012	Jan-Mar 2011	The difference
Admitted patient episodes	412,526 episodes	396,806 episodes	+15,720 (+4%)
Admitted patient episodes considered to be planned	41% planned	41% planned	unchanged
Babies born	18,209 babies	17,893 babies	+316 (+2%)
Admitted patient episodes considered to be acute	97% acute	97% acute	unchanged
Acute episodes that were overnight admissions	55% overnight	56% overnight	-1 percentage point
Total bed days for acute admitted patients	1,336,912 days	1,295,717 days	+41,195 (+3%)
Average length of stay for acute admitted patients	3.4 days	3.4 days	unchanged

Number of admitted patient episodes

In the January to March 2012 quarter, there were 412,526 admitted patient episodes of care in NSW public hospitals, down from 421,219 in the last quarter. Each year there is a seasonal peak in the number of admitted patient episodes during the July to September quarter. The lowest number of admitted patient episodes occurs during the January to March quarter. These seasonal patterns are illustrated in Figure 1.

The number of admitted patient episodes in NSW public hospitals has increased over time, up from 396,806 episodes in the same quarter one year ago (4%) and from 382,969 episodes two years ago (8%). Admitted patient episodes can be either '*planned*' (arranged in advance so the hospital can organise what care is needed) or '*unplanned / other*' (which include emergency admissions or unplanned surgical patients).

During the quarter there were 167,262 planned admitted patient episodes and 245,264 were unplanned (Figure 1). Planned episodes accounted for 41% of all admitted patient episodes.

An admission for childbirth is considered *'unplanned'* and approximately one in every 14 unplanned episodes was for childbirth. During the quarter, there were 18,209 babies born in NSW public hospitals, up from 17,893 the same time one year ago.



Figure 1: Planned and unplanned admitted patient episodes in NSW public hospitals, January 2010 to March 2012

Note: Only babies born in NSW public hospitals and multi-purpose services are included in this count.

Note: Numbers might differ slightly from those reported in previous Hospital Quarterly reports and in the NSW Ministry

of Health's Quarterly Hospital Performance Report due to differences in when data were extracted.

2

Number of acute patients

Admitted patient episodes may be for acute care or subacute care (such as rehabilitation or palliative care). This section focuses on acute care, which is typically a short-term admission for immediate care. For this report, maternal and newborn admissions are also included under the category of acute episodes. Examples of acute care include hip replacement surgery and medical care following a heart attack. Acute episode activity is presented in Figure 2.

In the January to March 2012 quarter, there were 398,647 acute admitted patient episodes, down from 406,534 in the last quarter. The number

of acute episodes in NSW public hospitals has been increasing for comparable quarters, up from 383,647 episodes (4%) in the same quarter one year ago and from 371,412 episodes (7%) two years ago.

Acute admitted patient episodes can be either same day (admitted for a single day or part of a day to have a test, to receive surgery or another procedure) or overnight (admitted for one or more nights in hospital).

During January to March, there were 177,887 same day episodes (45% of acute admitted episodes) and 220,760 overnight episodes (representing 55%) as shown in Figure 2.



Figure 2: Same day and overnight acute admitted patient episodes in NSW public hospitals, January 2010 to March 2012

Note: Numbers might differ slightly from those reported in previous *Hospital Quarterly* reports and in the NSW Ministry of Health's *Quarterly Hospital Performance Report* due to differences in when data were extracted.
 Source: Admitted Patient Data Collection. Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

Hospital bed use for acute patients

Total acute bed days is the sum of all the lengths of time acute patients stayed in NSW hospitals during January to March 2012. Patients admitted for acute episodes stayed a total of 1,336,912 days in hospital beds during January to March 2012.

The number of acute bed days in NSW public hospitals has been increasing for comparable quarters, up from a total of 1,295,717 bed days (3%) in the same quarter one year ago and from 1,279,171 bed days (5%) two years ago. The average length of stay in hospital among acute patients (including same day patients) has remained largely unchanged over the past two years at about 3.4 days (Figure 2).

Table 1 presents the admitted patientepisode activity for public hospitals in NSW.Data are presented by local health districtfor all principal referral, paediatric specialist,ungrouped acute – tertiary referral, majormetropolitan, major non-metropolitan anddistrict groups 1 and 2 hospitals. Informationfrom smaller hospitals is presented for eachlocal health district under the 'other' category.

		All episodes			Acute episodes			
		Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days)
No	w South Wales							
	New South Wales	412,526	167,262	245,264	177,887	220,760	1.336.912	3.4
		,	,	2.0,20.	,	220,000	.,,.	0.1.
	ntral Coast Local Health Dis	```	,		_		1	
G	osford Hospital	12,292	5,108	7,184	5,077	7,026	41,522	3.4
V	/yong Hospital	6,630	3,006	3,624	3,207	3,232	23,484	3.6
0	ther CCLHD [‡]	247	10	237	*	12	134	9.6
Tota	CCLHD	19,169	8,124	11,045	8,284	10,270	65,140	3.5
Far	·West Local Health District (FWLHD)						
B	roken Hill Base Hospital	1,882	992	890	995	854	4,877	2.6
0	ther FWLHD	147	10	137	51	90	491	3.5
Tota	FWLHD	2,029	1,002	1,027	1,046	944	5,368	2.7
Hu	nter New England Local Hea	Ith Distric	t (HNELH	ID)				
A	rmidale and New England Hospital	2,174	1,066	1,108	1,017	1,138	6,002	2.8
В	elmont Hospital	1,679	820	859	481	1,140	5,847	3.6
С	alvary Mater Newcastle	3,865	1,024	2,841	1,292	2,471	13,394	3.6
С	essnock District Hospital	907	363	544	347	551	3,005	3.3
	orster Private Hospital Jublic Contracted Beds)	59	22	37	13	45	221	3.8
G	unnedah District Hospital	554	196	358	186	348	1,320	2.5
In	verell District Hospital	1,036	362	674	451	535	1,830	1.9
Jc	ohn Hunter Hospital	19,120	9,278	9,842	9,246	9,561	59,902	3.2
K	urri Kurri District Hospital	507	398	109	325	143	1,462	3.1

Table 1: NSW admitted patient activity by hospital and local health district, January to March 2012

	All episodes			Acute episodes			
	Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days
Methodal Incettel	0.004	000	0.100	700	0.10.4	14.000	0.7
Maitland Hospital	3,964	838	3,126	700	3,184	14,320	3.7
Manning Base Hospital	4,903	2,406	2,497	2,431	2,388	13,721	2.8
Moree District Hospital	861	468	393	419	440	2,085	2.4
Muswellbrook District Hospital	894	387	507	420	472	2,508	2.8
Narrabri District Hospital	521	89	432	139	375	1,348	2.6
Singleton District Hospital	1,174	538	636	604	567	2,266	1.9
Tamworth Base Hospital	5,654	2,754	2,900	2,578	2,982	16,966	3.1
Other HNELHD	3,035	678	2,357	597	2,332	21,320	7.3
Total HNELHD	50,907	21,687	29,220	21,246	28,672	167,517	3.4
Illawarra Shoalhaven Local Hea	Ith Distric	t (ISLHD)					
Bulli District Hospital	523	122	401	198	62	314	1.2
Milton and Ulladulla Hospital	791	53	738	269	522	2,660	3.4
Shellharbour Hospital	5,016	2,119	2,897	3,106	1,816	13,893	2.8
Shoalhaven and District Memorial Hospital	5,938	2,230	3,708	3,171	2,700	13,666	2.3
Wollongong Hospital	12,279	3,836	8,443	5,229	7,020	45,010	3.7
Other ISLHD [‡]	527	41	486	0	*	95	13.6
Total ISLHD	25,074	8,401	16,673	11,973	12,120	75,638	3.1
Justice Health (including admiss	ion data fo	or the Fore	ensic Ment	al Health I	Vetwork)		
					/		
Total Justice Health	750	527	223	107	617	18,141	25.1
			223	107	617	18,141	25.1
Mid North Coast Local Health D	District (M	NCLHD)					
Mid North Coast Local Health D Bellinger River District Hospital	District (M 420	NCLHD) 71	349	131	178	959	3.1
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital	District (M 420 7,225	NCLHD) 71 3,424	349 3,801	131 3,431	178 3,501	959 19,168	3.1 2.8
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital	District (M 420 7,225 2,907	NCLHD) 71 3,424 944	349 3,801 1,963	131 3,431 1,828	178 3,501 1,024	959 19,168 5,998	3.1 2.8 2.1
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital	District (M 420 7,225 2,907 727	NCLHD) 71 3,424 944 296	349 3,801 1,963 431	131 3,431 1,828 258	178 3,501 1,024 349	959 19,168 5,998 1,470	3.1 2.8 2.1 2.4
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital	District (M 420 7,225 2,907 727 4,977	NCLHD) 71 3,424 944 296 2,108	349 3,801 1,963 431 2,869	131 3,431 1,828 258 1,848	178 3,501 1,024 349 3,068	959 19,168 5,998 1,470 15,549	3.1 2.8 2.1 2.4 3.2
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD	District (M 420 7,225 2,907 727 4,977 645	NCLHD) 71 3,424 944 296 2,108 355	349 3,801 1,963 431 2,869 290	131 3,431 1,828 258 1,848 482	178 3,501 1,024 349 3,068 106	959 19,168 5,998 1,470 15,549 1,477	3.1 2.8 2.1 2.4 3.2 2.5
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD	District (M 420 7,225 2,907 727 4,977 645 16,901	NCLHD) 71 3,424 944 296 2,108 355 7,198	349 3,801 1,963 431 2,869	131 3,431 1,828 258 1,848	178 3,501 1,024 349 3,068	959 19,168 5,998 1,470 15,549	3.1 2.8 2.1 2.4 3.2 2.5
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH	NCLHD) 71 3,424 944 296 2,108 355 7,198	349 3,801 1,963 431 2,869 290 9,703	131 3,431 1,828 258 1,848 482 7,978	178 3,501 1,024 349 3,068 106 8,226	959 19,168 5,998 1,470 15,549 1,477 44,621	3.1 2.8 2.1 2.4 3.2 2.5 2.8
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693	NCLHD) 71 3,424 944 296 2,108 355 7,198 HD) 107	349 3,801 1,963 431 2,869 290 9,703	131 3,431 1,828 258 1,848 482 7,978	178 3,501 1,024 349 3,068 106 8,226 378	959 19,168 5,998 1,470 15,549 1,477 44,621	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.8
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639	NCLHD) 71 3,424 944 296 2,108 355 7,198 HD) 107 1,114	349 3,801 1,963 431 2,869 290 9,703 586 1,525	131 3,431 1,828 258 1,848 482 7,978 228 1,349	178 3,501 1,024 349 3,068 106 8,226 378 1,220	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.8 2.8 2.2
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693	NCLHD) 71 3,424 944 296 2,108 355 7,198 HD) 107 1,114 51	349 3,801 1,963 431 2,869 290 9,703 586 1,525 493	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192	178 3,501 1,024 349 3,068 106 8,226 378 1,220 335	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555 1,307	3.1 2.8 2.1 2.2 3.2 2.8 2.8 2.2 2.2 2.2 2.2
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544 7,414	NCLHD) 71 3,424 944 296 2,108 355 7,198 HD) 107 1,114 51 3,123	349 3,801 1,963 431 2,869 290 9,703 586 1,525 493 4,291	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711	178 3,501 1,024 349 3,068 106 8,226 378 1,220 335 3,599	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555 1,307 18,276	3.1 2.8 2.1 2.2 3.2 2.8 2.8 2.2 2.2 2.2 2.2
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544	NCLHD) 71 3,424 944 296 2,108 355 7,198 HD) 107 1,114 51	349 3,801 1,963 431 2,869 290 9,703 586 1,525 493	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192	178 3,501 1,024 349 3,068 106 8,226 378 1,220 335	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555 1,307	3.1 2.8 2.1 2.4 3.2 2.8 2.8 2.8 2.8 2.2 2.2 2.5 2.5
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544 7,414	NCLHD) 71 3,424 944 296 2,108 355 7,198 HD) 107 1,114 51 3,123	349 3,801 1,963 431 2,869 290 9,703 586 1,525 493 4,291	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711	178 3,501 1,024 349 3,068 106 8,226 378 1,220 335 3,599	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555 1,307 18,276	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.4 2.4 2.2 2.5 2.5 1.8
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital Young Health Service	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544 7,414 7,27	NCLHD) 71 3,424 944 296 2,108 355 7,198 4D) 107 1,114 51 3,123 219	349 3,801 1,963 431 2,869 290 9,703 586 1,525 493 4,291 508	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711 392	178 3,501 1,024 349 3,068 106 8,226 378 1,220 335 3,599 331	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555 1,307 18,276 1,294	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.4 2.4 2.2 2.5 2.5 1.8 2.7
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital Young Health Service Other MLHD	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544 7,414 727 4,123 16,140	NCLHD) 71 3,424 944 296 2,108 355 7,198 4D) 107 1,114 51 3,123 219 555 5,169	349 3,801 1,963 431 2,869 290 9,703 9,703 586 1,525 493 4,291 508 3,568 10,971	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711 392 1,321	178 3,501 1,024 349 3,068 106 8,226 3378 1,220 335 3,599 331 2,277	959 19,168 5,998 1,470 15,549 1,477 44,621 44,621 1,447 5,555 1,307 18,276 1,294 9,734	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.4 2.4 2.2 2.5 2.5 1.8 2.7
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital Young Health Service Other MLHD	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544 7,414 727 4,123 16,140	NCLHD) 71 3,424 944 296 2,108 355 7,198 4D) 107 1,114 51 3,123 219 555 5,169	349 3,801 1,963 431 2,869 290 9,703 9,703 586 1,525 493 4,291 508 3,568 10,971	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711 392 1,321	178 3,501 1,024 349 3,068 106 8,226 3378 1,220 335 3,599 331 2,277	959 19,168 5,998 1,470 15,549 1,477 44,621 44,621 1,447 5,555 1,307 18,276 1,294 9,734	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.4 2.2 2.5 2.5 1.8 2.7 2.5
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital Young Health Service Other MLHD Total MLHD Nepean Blue Mountains Local H Blue Mountains District Anzac	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544 7,414 727 4,123 16,140 Health Dis	NCLHD) 71 3,424 944 296 2,108 355 7,198 4D) 107 1,114 51 3,123 219 555 5,169	349 3,801 1,963 431 2,869 290 9,703 586 1,525 493 4,291 508 3,568 10,971	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711 392 1,321 7,193	178 3,501 1,024 349 3,068 106 8,226 378 1,220 335 3,599 331 2,277 8,140	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555 1,307 18,276 1,294 9,734 37,613	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.4 2.4 2.2 2.5 1.8 2.7 2.5 1.8 2.7 2.5 4.7
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital Young Health Service Other MLHD Total MLHD Nepean Blue Mountains Local H Blue Mountains District Anzac Memorial Hospital	District (M 420 7,225 2,907 727 4,977 645 16,901 strict (MLH 693 2,639 544 7,414 7,414 727 4,123 16,140 Health Dis 935	NCLHD) 71 3,424 944 296 2,108 355 7,198 4D) 107 1,114 51 3,123 219 555 5,169	349 3,801 1,963 431 2,869 290 9,703 586 1,525 493 4,291 508 3,568 10,971 MLHD)	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711 392 1,321 7,193	178 3,501 1,024 349 3,068 106 8,226 3378 1,220 335 3,599 331 2,277 8,140	959 19,168 5,998 1,470 15,549 1,477 44,621 44,621 1,447 5,555 1,307 18,276 1,294 9,734 37,613	3.1
Mid North Coast Local Health D Bellinger River District Hospital Coffs Harbour Base Hospital Kempsey Hospital Macksville District Hospital Port Macquarie Base Hospital Other MNCLHD Total MNCLHD Murrumbidgee Local Health Dis Deniliquin Health Service Griffith Base Hospital Tumut Health Service Wagga Wagga Base Hospital Young Health Service Other MLHD Total MLHD Nepean Blue Mountains Local H Blue Mountains District Anzac Memorial Hospital Lithgow Health Service	District (M 420 7,225 2,907 727 4,977 645 16,901 645 16,901 645 16,901 645 16,901 645 16,901 645 16,901 645 16,901 645 16,901 645 727 4,123 16,140 Health Dis 935 1,068	NCLHD) 71 3,424 944 296 2,108 355 7,198 1D) 107 1,114 51 3,123 219 555 5,169 strict (NB 206 339	349 3,801 1,963 431 2,869 290 9,703 508 1,525 493 4,291 508 3,568 3,568 10,971 MLHD)	131 3,431 1,828 258 1,848 482 7,978 228 1,349 192 3,711 392 1,321 7,193	178 3,501 1,024 349 3,068 106 8,226 3 3 3,599 331 2,277 8,140	959 19,168 5,998 1,470 15,549 1,477 44,621 1,447 5,555 1,307 18,276 1,294 9,734 37,613	3.1 2.8 2.1 2.4 3.2 2.5 2.8 2.4 2.4 2.2 2.5 2.5 1.8 2.7 2.5 1.8 2.7 2.5 4.7 2.3

	All episodes			Acute episodes			
	Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days
Northern NSW Local Health Dis	strict (NNS	SWI HD)					
Ballina District Hospital	2,253	1,314	939	1,767	391	3,947	1.8
Casino and District Memorial Hospital	720	288	432	368	345	2,310	3.2
Grafton Base Hospital	3,264	1,820	1,444	1,894	1.276	6,432	2.0
Lismore Base Hospital	6,247	2,806	3,441	2,579	3,635	19,713	3.2
Maclean District Hospital	936	243	693	442	448	3,218	3.6
Murwillumbah District Hospital	1,479	660	819	624	724	3,163	2.3
The Tweed Hospital	7,780	2,930	4,850	3,347	4,380	20,392	2.6
Other NNSWLHD	1,200	302	898	467	623	2,828	2.6
Total NNSWLHD	23,879	10,363	13,516	11,488	11,822	62,003	2.7
Northern Sydney Local Health	District (N	(SLHD)					
Hornsby and Ku-Ring-Gai Hospital	3,922	861	3,061	808	3,013	15,289	4.0
Manly District Hospital	3,310	631	2,679	995	2,292	12,256	3.7
Mona Vale and District Hospital	3,810	1,714	2,096	1,831	1.808	9,922	2.7
Royal North Shore Hospital	13,870	5,298	8,572	5,437	8,180	51,052	3.7
Ryde Hospital	2,466	612	1,854	917	1,482	8,364	3.5
Other NSLHD	2,697	1,225	1,472	530	1,408	37,677	19.4
Total NSLHD	30,075	10,341	19,734	10,518	18,183	134,560	4.7
South Eastern Sydney Local H	alth Distr	rict (SESL	וחח				
Prince of Wales Hospital	10,302	5,616	4,686	4,915	5,192	41,799	4.1
Royal Hospital for Women	3,658	486	3,172	1,103	2,553	12,791	3.5
St George Hospital	13,682	5,494	8,188	5,419	7,795	47,172	3.6
Sutherland Hospital	6,327	2,193	4,134	2,008	3,865	20.986	3.6
Sydney Hospital / Sydney Eye Hospital	2,497	1,286	1,211	1,266	1,229	5,343	2.1
Other SESLHD [‡]	1,719	1,187	532	10	*	36	2.4
Total SESLHD	38,185	16,262	21,923	14,721	20,634	128,127	3.6
		,		,	,	,	
South Western Sydney Local H				4 000		00.077	0.4
Bankstown / Lidcombe Hospital	10,693	2,795	7,898	4,899	5,545	32,077	3.1
Bowral and District Hospital	2,170	613	1,557	1,003	1,154	4,784	2.2
Camden Hospital	583	249	334	277	102	920	2.4
Campbelltown Hospital	10,047	2,925	7,122	3,790	6,245	37,392	3.7
Fairfield Hospital	6,978	3,431	3,547	3,433	3,426	15,719	2.3
Liverpool Hospital	16,863	6,391	10,472	7,470	9,159	62,386	3.8
Other SWSLHD [‡]	982	518	464	00.970	357	1,213	3.3
Total SWSLHD	48,316	16,922	31,394	20,872	25,988	154,491	3.3
Southern NSW Local Health Di							
Bateman's Bay District Hospital	1,370	502	868	738	559	2,703	2.1
Bega District Hospital	2,167	959	1,208	1,006	1,074	5,081	2.4
Cooma Health Service	718	191	527	251	442	1,844	2.7
Goulburn Base Hospital	2,622	1,238	1,384	1,276	1,314	7,871	3.0
Moruya District Hospital	1,995	921	1,074	1,041	907	4,014	2.1

	All episodes			Acute episodes			
	Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days)
Queanbeyan Health Service	1,534	651	883	874	635	3,232	2.1
Other SNSWLHD	1,231	115	1,116	387	623	2,767	2.7
Total SNSWLHD	11,637	4,577	7,060	5,573	5,554	27,512	2.5
St Vincent's Health Network (S	√HN)						
St Vincent's Hospital, Darlinghurst	9,562	4,776	4,786	5,020	4,537	31,813	3.3
Other SVHN [‡]	460	196	264	0	*	36	12.0
Total SVHN	10,022	4,972	5,050	5,020	4,537	31,849	3.3
Sydney Children's Hospitals Ne	etwork (SC	CHNI)					
Sydney Children's Hospital	4,171	2,114	2,057	2,120	2,043	10,853	2.6
The Children's Hospital at Westmead	6,754	3,532	3,222	2,927	3,827	20.382	3.0
Total SCHN	10,925	5,646	5,279	5,047	5,870	31,235	2.9
Sydney Local Health District (S	(חו וחע						
Canterbury Hospital	3,987	1,125	2,862	941	2,900	12,977	3.4
Concord Hospital	12,084	8,001	4,083	7,315	4,552	45,195	3.8
RPAH Institute of Rheumatology		*	1,000		,	,	
and Orthopaedics	352	*	*	61	291	1,097	3.1
Royal Prince Alfred Hospital	17,642	7,911	9,731	7,650	9,951	66,515	3.8
Other SYDLHD	1,104	*	*	50	838	4,608	5.2
Total SYDLHD	35,169	17,037	16,676	16,017	18,532	130,392	3.8
Western NSW Local Health Dis	trict (WNS	SWLHD)					
Bathurst Base Hospital	2,728	1,290	1,438	1,245	1,401	7,840	3.0
Cowra District Hospital	786	210	576	308	469	1,785	2.3
Dubbo Base Hospital	5,044	2,224	2,820	2,192	2,835	13,353	2.7
Forbes District Hospital	996	558	438	626	353	1,965	2.0
Mudgee District Hospital	774	265	509	329	443	2,016	2.6
Orange Base Hospital	5,840	2,448	3,392	2,671	3,008	16,726	2.9
Parkes District Hospital	533	118	415	156	359	1,504	2.9
Other WNSWLHD	3,097	557	2,540	927	1,955	9,787	3.4
Total WNSWLHD	19,798	7,670	12,128	8,454	10,823	54,976	2.9
Western Sydney Local Health	District (W	SLHD)					
Auburn Hospital	4,769	1,058	3,711	2,163	2,548	9,953	2.1
Blacktown Hospital	6,432	1,405	5,027	1,335	5,063	27,387	4.3
Mount Druitt Hospital	3,282	1,083	2,199	1,204	1,846	5,041	1.7
Westmead Hospital (all units)	21,685	11,729	9,956	11,287	9,912	65,374	3.1
Other WSLHD	455	*	*	11	431	8,492	19.2
Total WSLHD	36,623	15,275	20,893	16,000	19,800	116,247	3.2

(*) Suppressed due to small numbers and to protect privacy. Suppressed data have ben excluded from LHD totals.

(‡) The majority of admissions for smaller hospitals in this LHD are for non-acute admissions resulting in low numbers of patients classified as either *'overnight'* or *'same day'*.

Source: Admitted Patient Data Collection. Health Information Exchange, NSW Health. Data extracted on 20 April 2012.

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The report, *Hospital Quarterly: Performance of NSW public hospitals, January to March 2012* and related reports are available at www.bhi.nsw.gov.au

The suite of products includes:

- At a Glance summarising the three core modules
- Three core modules titled Admitted Patients, Elective Surgery and Emergency Departments
- Activity and performance reports about emergency department care and elective surgery for more than 60 hospitals and NSW as a whole
- Data Quality Assessments
- Technical Supplements



About the Bureau

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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State Health Publication Number: (BHI) 120127 ISSN 1838-3238

Suggested citation: Bureau of Health Information. Hospital Quarterly: Performance of NSW public hospitals, January to March 2012. Admitted Patients. 3(1). Sydney (NSW); 2012.

Published June 2012

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Bureau of Health Information

Elective Surgery

Hospital Quarterly:

Performance of NSW public hospitals

January to March 2012

Elective, or planned, surgery is surgery that a patient's doctor considers necessary but that can be delayed by at least 24 hours. Hip replacement, cataract extraction and ligament repairs are examples of elective surgery.

Compared with the same quarter one year ago, more elective surgery was conducted in NSW (up 4%). The same amount of surgery was performed in the urgent category, although semi-urgent and non-urgent surgery increased by 8% and 4% respectively. Staged surgery decreased by 8% compared with the same quarter in 2011.

Most patients (91%) continued to receive their surgery on time. Compared to the same quarter one year ago, the percentage of urgent patients receiving surgery on time improved, up two percentage points. The percentage of semi-urgent and non-urgent patients receiving surgery on time remained largely unchanged.

The median* waiting times have changed little since the same quarter in 2011 for patients needing urgent and semi-urgent surgical procedures (11 and 51 days respectively). The median waiting time for non-urgent procedures was 233 days, up by 16 days when compared with the same quarter in 2011.

This is one of three *Hospital Quarterly* modules. For the Emergency Departments and Admitted Patients modules visit www.bhi.nsw.gov.au

Find out how your local hospital **DERFORMS** Results for more than **80 NSW hospitals** available at **www.bhi.nsw.gov.au**

During the quarter	Jan-Mar 2012	Jan-Mar 2011	The difference
Elective surgical procedures performed	48,131 procedures	46,488 procedures	+1,643 (+4%)
'Staged procedures' (including non-urgent cystoscopies)	3,246 staged	3,543 staged	-297 (-8%)
Elective surgery patients treated on time	91% on time	90% on time	+1 percentage point
Urgent elective surgery patients treated on time	94% on time	92% on time	+2 percentage point
Semi-urgent elective surgery patients treated on time	88% on time	87% on time	+1 percentage point
Non-urgent elective surgery patients treated on time	91% on time	92% on time	-1 percentage point
Median* waiting time for non-urgent surgery	233 days	217 days	+16 (+7%)

* Median waiting time: time by which half of patients received surgery. The other half of patients took equal to or longer than this time.

Our approach to elective surgery reporting

If a person and their surgeon believe surgery is required but can be delayed by at least 24 hours, the patient is *'referred'* for their procedure and placed on a waiting list.

At the time of referral, a patient's surgeon assigns them to one of three urgency categories. Each category has its own target, which specifies the desired maximum time (in days) the patient should wait for their procedure. These are outlined in the box below:

Urgency categories: Elective surgery guidelines

Category 1 Urgent	Admission within 30 days desirable for a condition that has the potential to deteriorate quickly and become an emergency
Category 2 Semi-urgent	Admission within 90 days desirable for a condition not likely to deteriorate quickly
Category 3 Non-urgent	Admission within 365 days acceptable for a condition unlikely to deteriorate quickly

Explaining staged procedures

There are times when surgery is deemed necessary but should not, or cannot, take place until a clinically appropriate time interval has passed. This is called staged surgery and is an essential concept in managing elective surgery. It allows surgeons to place patients on the surgery booking system but prevents them from being admitted to hospital before it is clinically appropriate.

Surgeons use clinical judgement to decide whether a procedure should be categorised as staged or not. Examples of staged procedures include: waiting for a broken bone to heal before removing pins or plates; the time needed for hormone therapy to work before egg harvesting takes place during in-vitro fertilisation (IVF); and certain invasive diagnostic procedures (such as cystoscopy) that sometimes need to be conducted at set intervals.

Differences across hospitals

Because patients cannot, or should not, have their staged procedure before the prescribed date, they are not considered to be *'waiting for care'* unless they wait beyond that date. For this reason, the Bureau has excluded staged procedures from on-time surgery performance and median waiting time in this report.

In addition, there are differences in how hospitals manage cystoscopy procedures in the booking systems. Because including these patients may result in unfair or inequitable comparisons, the Bureau also excludes all non-urgent cystoscopy procedures from performance measures.

The Bureau is committed to providing clarity on surgical waiting times in NSW. Further detail on our methods can be found in the addendum *Technical Supplement: Elective surgery measures, January to March 2011* available on the Bureau's website at www.bhi.nsw.gov.au

See the Appendices section of this report (pages 8 to 19) for more detailed performance information about each public hospital providing elective surgery in NSW. This includes Hawkesbury Private Hospital, which is contracted to supply surgery for public patients.

Number of elective surgery procedures performed

During January to March 2012, the Waiting List Collection On-line System (WLCOS) recorded that 48,131 patients were admitted from the waiting list to receive an elective surgery procedure in NSW public hospitals or facilities contracted by NSW hospitals. This is 6% lower than the 51,429 conducted in the previous quarter (in line with the usual seasonal pattern) but up 4% from the 46,488 surgical procedures completed in the same quarter last year (Figure 1). In this report, results and figures exclude staged patients and non-urgent cystoscopy, unless otherwise stated. Only one elective surgery procedure is recorded in the waiting list and counted in this report for each admission, although some patients have more than one procedure during a single admission. A patient can be admitted more than once in a quarter for elective procedures and each admission is counted.

Figure 1: Total number of elective surgery procedures conducted, by urgency category, January 2010 to March 2012



1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

3. Including non-urgent cystoscopy.

Note: Because of changes in methods and reporting, numbers of surgical procedures by urgency category will differ from those reported in previous NSW Ministry of Health's *Quarterly Hospital Performance Reports* and Bureau *Hospital Quarterly* reports published prior to May 2011.

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, and January to March 2012 on 16 April 2012. Data extracted for all previous quarters on 15 July 2011.

Urgent surgery (category 1): There were 11,421 procedures completed, compared with 11,432 at the same time in 2011 (less than 1% decrease). Urgent procedures made up 24% of all completed elective surgery.

Semi-urgent surgery (category 2): There were 15,088 semi-urgent procedures completed, compared with 13,912 in the same quarter of 2011 (an increase of 8%). Semi-urgent procedures made up 31% of all completed elective surgery.

Non-urgent surgery (category 3): There were 18,376 procedures completed, compared with 17,601 in the same quarter in 2011 (an increase of 4%). Non-urgent procedures made up 38% of all completed elective surgery.

Staged surgery: There were 3,246 procedures, compared with 3,543 in the same quarter in 2011 (a decrease of 8%). Staged procedures made up 7% of all completed elective surgery.

Due to 2012 being a leap year, part of the increase in procedures this quarter, compared to the same quarter last year, could be explained by the additional day in February.

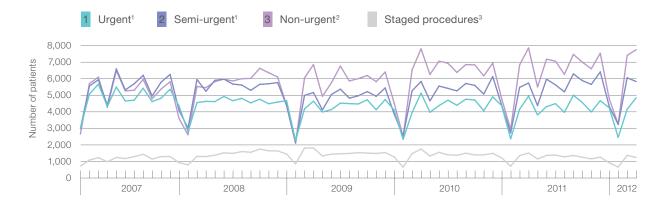
Change over five years

The composition of surgical procedures completed by urgency category has changed over the past five years (Figure 2). Most of this shift in surgical composition occurred during 2008 and early 2009.

Comparing the proportions that the surgical categories make up of all completed procedures, urgent surgery has decreased from 29% of all surgical procedures in February 2007 to 22% in February 2012.

Over the same period, non-urgent procedures have increased from 33% of all surgical procedures to 39%.





1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

3. Including non-urgent cystoscopy.

Note: Because of changes in methods and reporting, numbers of surgical procedures by urgency category will differ from those reported in previous NSW Ministry of Health's *Quarterly Hospital Performance Reports* and Bureau *Hospital Quarterly* reports published prior to May 2011.

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, and January to March 2012 on 16 April 2012. Data extracted for all previous quarters on 15 July 2011.

Patients admitted on time for elective surgery

In the January to March 2012 quarter, 91% of all patients who were admitted to a public hospital for elective surgery were admitted within the time frame recommended by their surgeon (Figure 3), similar to the preceding quarter (92%) and the same quarter in 2011 (90%).

Figure 3 presents the percentage of patients in each surgical category who received their surgery on time for the most recent nine quarters. These results exclude staged patients and non-urgent cystoscopy procedures. **Urgent surgery:** 94% of patients were admitted within the recommended 30 days, similar to the last quarter and up two percentage points compared with the same quarter in 2011.

Semi-urgent surgery: 88% of patients were admitted within 90 days, down three percentage points compared with the last quarter but up one percentage point compared with the same quarter in 2011.

Non-urgent surgery: 91% of patients were admitted within 365 days, similar to the last quarter and down one percentage point compared with the same quarter in 2011.



Figure 3: Percentage of elective surgery patients treated within recommended waiting time, by urgency category, January 2010 to March 2012

1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

Note: Because of changes in methods and reporting, numbers of surgical procedures by urgency category will differ from those reported in previous NSW Ministry of Health's *Quarterly Hospital Performance Reports* and Bureau *Hospital Quarterly* reports published prior to May 2011.

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, and January to March 2012 on 16 April 2012. Data extracted for all previous quarters on 15 July 2011.

Median waiting times for elective surgery

Median wait time is the number of days within which half of patients received surgery. The other half took equal to or longer than the median.

Figure 4 presents the median waiting time to be admitted for surgery for the current quarter and the eight quarters prior to this. These results exclude staged patients and non-urgent cystoscopy procedures.

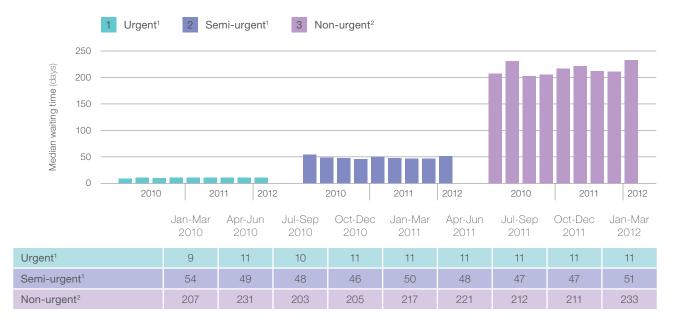
Urgent surgery: The median wait was 11 days – largely unchanged over the past two years, when the median wait time ranged from nine to 11 days.

Semi-urgent surgery: The median wait time for this category was 51 days, one day more than the same quarter in 2011 but three days less than the same quarter in 2010 (54 days).

Non-urgent surgery: The median wait time for this category was 233 days, 16 days more than the same quarter in 2011 (217 days).

In part due to the longer wait times, non-urgent median waiting times appear as the most volatile of the three urgency categories. Over the past nine quarters, non-urgent procedure wait times have ranged from 203 days in July to September 2010 to 233 this quarter.





1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

Note: Patients recorded as '*deferred*' when they received their surgery are allocated to '*ready for care*' urgency categories as appropriate.

Note: Because of changes in methods and reporting, numbers of surgical procedures by urgency category will differ from those reported in previous NSW Ministry of Health's *Quarterly Hospital Performance Reports* and Bureau *Hospital Quarterly* reports published prior to May 2011.

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, and January to March 2012 on 16 April 2012. Data extracted for all previous quarters on 15 July 2011.

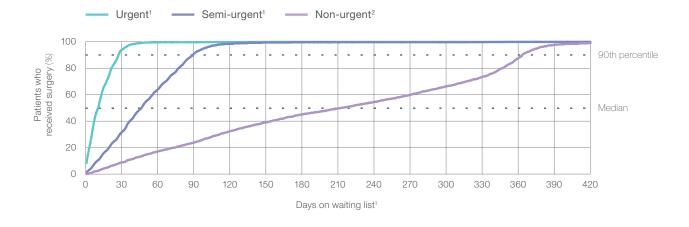
Cumulative wait time

Greater detail on how long people waited to be admitted for their elective surgery during January to March 2012 is presented in Figure 5.

The graph's slopes indicate the rate at which patients were admitted for surgery. A steep slope indicates a high rate of completion of patients' surgery over the period shown. A flat slope shows a lower rate of completion of patients' surgery over the period.

Urgent patients have the most rapid rate of admission and almost all patients are admitted for surgery within 45 days. Non-urgent patients are admitted at a slower rate with almost all patients admitted within 420 days.

Figure 5: Cumulative percentage of patients who received elective surgery, by waiting time (days), January to March 2012



1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

Note: Excludes the total number of days the patient was coded as 'not ready for care'.

Source: Waiting List Collection On-line System, NSW Health. Data extracted on 16 April 2012.

Small number suppression

Some hospitals conduct few surgical procedures. Small numbers in any urgency group need to be treated cautiously to protect patients' identities. The Bureau suppresses information based on very few patients. If there are fewer than 10 patients in any group, patient numbers or percentages are replaced by a symbol, which refers to footnotes about small number suppression. The Bureau may use its discretion to suppress the next smallest values, or results for an entire hospital with few patients, if there is a risk of disclosing patients' identities. Because the staged procedure category is excluded from performance measure calculations, low counts in this group are not automatically suppressed (Appendix table 1).

Appendix: Activity and performance data tables at hospital and local health district level

The following table presents the number of elective surgery admissions, by urgency category, for major hospitals in NSW. The table is ordered by local health district and includes all principal referral, paediatric specialist, ungrouped acute – tertiary referral, major metropolitan, major non-metropolitan, and district groups 1 and 2 hospitals that conduct elective surgery. These hospitals account for 98% of all elective surgery recorded as complete in the NSW booking system. Surgery information from smaller hospitals is presented for each local health district under the *'other'* category.

Appendix table 1: NSW elective surgery activity, by hospital and local health district, January to March 2012

	Number of elective surgical procedures					
	All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³	
New South Wales						
Total New South Wales	48,131	11,421	15,088	18,376	3,246	
Central Coast Local Health District (C	CLHD)					
Gosford Hospital	1,513	282	491	573	167	
Wyong Hospital	877	98	333	401	45	
Total CCLHD	2,390	380	824	974	212	
Far West Local Health District (FWLH	D)					
Broken Hill Base Hospital	284	37	107	127	13	
Total FWLHD	284	37	107	127	13	
Hunter New England Local Health Dis	strict (HNELHD))				
Armidale and New England Hospital	244	35	108	95	6	
Belmont Hospital	562	111	187	228	36	
Calvary Mater Newcastle	264	143	88	22	11	
Cessnock District Hospital	307	47	167	69	24	
Gunnedah District Hospital	85	14	39	28	4	
Inverell District Hospital	52	*	20	18	*	
John Hunter Hospital	2,104	673	598	672	161	
Kurri Kurri District Hospital	345	22	90	226	7	
Maitland Hospital	654	140	234	246	34	
Manning Base Hospital	675	114	174	346	41	
Moree District Hospital	58	12	11	34	1	
Muswellbrook District Hospital	76	12	15	48	1	
Narrabri District Hospital	49	20	24	*	*	
Singleton District Hospital	115	*	34	72	*	
Tamworth Base Hospital	880	190	331	284	75	
Other HNELHD	135	16	45	72	2	
Total HNELHD	6,605	1,549	2,165	2,460	403	

					5
	All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³
Illawarra Shoalhaven Local Health Dis	atriat (ISI UD)				
Bulli District Hospital	123	35	26	62	0
Milton and Ulladulla Hospital	34	21	*	11	*
Shellharbour Hospital	790	70	209	510	1
Shoalhaven and District Memorial Hospital	689	122	169	359	39
Wollongong Hospital	1,389	534	230	362	263
Total ISLHD	3,025	782	634	1,304	303
		102	004	1,004	000
Mid North Coast Local Health Distric	t (MNCLHD)				
Bellinger River District Hospital	55	*	24	28	÷
Coffs Harbour Base Hospital	973	187	214	461	111
Kempsey Hospital	163	*	30	124	,
Macksville District Hospital	54	*	*	38	2
Port Macquarie Base Hospital	705	192	226	208	79
Other MNCLHD	174	10	61	57	46
Total MNCLHD	2,124	389	555	916	236
Murrumbidgee Local Health District ((MLHD)				
Deniliquin Health Service	42	*	30	*	1
Griffith Base Hospital	235	33	102	81	19
Tumut Health Service	49	*	29	17	,
Wagga Wagga Base Hospital	1,089	215	396	444	34
Young Health Service	81	*	34	*	23
Other MLHD	78	29	19	30	(
Total MLHD	1,574	277	610	587	53
Nepean Blue Mountains Local Health	District (NBM	/LHD)			
Blue Mountains District Anzac Memorial Hospital	84	*	36	41	د
Hawkesbury District Health Service	259	65	53	130	11
Lithgow Health Service	194	13	52	120	ç
Nepean Hospital	1,165	343	341	460	21
Other NBMLHD	177	*	28	141	
Total NBMLHD	1,879	421	510	892	41
Northern NSW Local Health District (NNSWLHD)				
Ballina District Hospital	133	32	64	27	10
Casino and District Memorial Hospital	188	23	65	91	Q
Grafton Base Hospital	395	170	135	74	16
Lismore Base Hospital	1,106	340	345	324	97
Maclean District Hospital	48	19	10	19	(
,	410	36	101	241	32
IVIURWIIUMDAN DISLIICE HOSDILAI					
Murwillumbah District Hospital The Tweed Hospital	668	213	194	167	94

Number of elective surgical procedures

	All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³
Northorn Sudnov Local Licelth Di	atriat (NOLLD)				
Northern Sydney Local Health Di		60	100	160	00
Hornsby and Ku-Ring-Gai Hospital	284	62	138	168	22
Manly District Hospital		81	129	70	4
Mona Vale and District Hospital	321	54	64 408	179	24
Royal North Shore Hospital	1,239	384		405	4:
Ryde Hospital Total NSLHD	2,589	39	145 884	151 973	20
IOLAI NSEND	2,009	620	004	973	11:
South Eastern Sydney Local Heal	th District (SESL	HD)			
Prince of Wales Hospital	1,195	316	536	299	4
Royal Hospital for Women	450	172	194	78	(
St George Hospital	1,021	456	309	215	4
Sutherland Hospital	687	128	238	272	49
Sydney Hospital / Sydney Eye Hospital	1,185	198	359	628	1
Total SESLHD	4,538	1,270	1,636	1,492	14
South Western Sydney Local Hea	Ith District (SWSI	_HD)			
Bankstown / Lidcombe Hospital	1,200	163	320	555	16
Bowral and District Hospital	343	49	80	207	
Campbelltown Hospital	1,139	125	342	505	16
Fairfield Hospital	574	69	81	408	1
Liverpool Hospital	1,619	594	499	484	42
Total SWSLHD	4,875	1,000	1,322	2,159	39
Southern NSW Local Health Distri	ict (SNSWI HD)				
Bateman's Bay District Hospital	163	10	30	119	
Bega District Hospital	329	74	82	169	
Cooma Health Service	67	12	25	28	
Goulburn Base Hospital	358	82	112	163	
Moruya District Hospital	147	47	54	45	
Queanbeyan Health Service	205	34	86	84	
Other SNSWLHD	10	*	*	*	
Total SNSWLHD	1,279	259	389	608	1
St Vincent's Health Network (SVH		0.5-		10-	
St Vincent's Hospital, Darlinghurst	899	395	263	199	4
Total SVHN	899	395	263	199	4
Sydney Children's Hospitals Netw	ork (SCHN)				
Sydney Children's Hospital	647	148	193	293	1
The Children's Hospital at Westmead	1,517	341	462	602	11:
Total SCHN	2,164	489	655	895	125

Number of elective surgical procedures

	All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³	
Sydney Local Health District (SYDLHD)					
Canterbury Hospital	617	97	218	257	45	
Concord Hospital	1,796	380	449	680	287	
RPAH Institute of Rheumatology and Orthopaedics	353	20	36	296	1	
Royal Prince Alfred Hospital	2,604	932	897	511	264	
Total SYDLHD	5,370	1,429	1,600	1,744	597	
Western NSW Local Health District (WNSWLHD)						
Bathurst Base Hospital	355	76	132	131	16	
Cowra District Hospital	115	13	35	66	1	
Dubbo Base Hospital	733	119	232	325	57	
Forbes District Hospital	64	*	19	42	*	
Mudgee District Hospital	82	11	25	45	1	
Orange Base Hospital	706	100	240	317	49	
Parkes District Hospital	40	*	20	12	*	
Other WNSWLHD	*	*	*	*	0	
Total WNSWLHD	2,095	319	703	938	124	
Western Sydney Local Health District	(WSLHD)					
Auburn Hospital	682	97	238	338	9	
Blacktown Hospital	625	103	276	218	28	
Mount Druitt Hospital	497	50	198	244	5	
Westmead Hospital (all units)	1,687	651	594	352	90	
Total WSLHD	3,491	901	1,306	1,152	132	

Number of elective surgical procedures

1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

3. Including non-urgent cystoscopy.

(*) Values suppressed due to small numbers and to protect privacy. Suppressed data have been excluded from local health district totals.

Note: All urgency categories include deferred patients as appropriate.

Note: Because staged patients are now reported separately, numbers of surgical procedures by urgency category for this quarter are not comparable to data reported in previous NSW Ministry of Health's *Quarterly Hospital Performance Reports* and Bureau *Hospital Quarterly* reports prior to May 2011.

Source: Waiting List Collection On-line System, NSW Health. Data extracted on 16 April 2012.

The following table presents the percentages of elective surgery admissions within the clinically recommended time for each urgency category for January to March 2012. The table is ordered by local health district and includes all principal referral, paediatric specialist, ungrouped acute – tertiary referral, major metropolitan, major non-metropolitan and district groups 1 and 2 hospitals that conduct elective surgery. Surgery information from smaller hospitals is presented for each local health district under the *'other'* category.

Appendix table 2: NSW on-time elective surgery performance, by hospital and local health district, January to March 2012

	r ercentage of patients treated off time			
	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
New South Wales		0.4	00	04
Total New South Wales	91	94	88	91
Central Coast Local Health District (CCLH	HD)			
Gosford Hospital	85	99	81	82
Wyong Hospital	94	97	95	93
Total CCLHD	88	98	86	86
Far West Local Health District (FWLHD)				
Broken Hill Base Hospital	94	100	86	100
Total FWLHD	94	100	86	100
Hunter New England Local Health Distric	t (HNELHD)			
Armidale and New England Hospital	98	100	98	98
Belmont Hospital	100	100	100	100
Calvary Mater Newcastle	79	78	74	100
Cessnock District Hospital	100	100	100	100
Gunnedah District Hospital	99	93	100	100
Inverell District Hospital	84	*	100	61
John Hunter Hospital	89	93	88	86
Kurri Kurri District Hospital	96	95	94	97
Maitland Hospital	91	94	94	87
Manning Base Hospital	100	100	100	99
Moree District Hospital	100	100	100	100
Muswellbrook District Hospital	100	100	100	100
Narrabri District Hospital	100	100	100	*
Singleton District Hospital	100	*	100	100
Tamworth Base Hospital	82	85	75	89
Other HNELHD	95	100	96	93
Total HNELHD	92	93	91	93

Percentage of patients treated on time

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Illawarra Shoalhaven Local Health District (ISLH				
Bulli District Hospital	100	100	100	100
Milton and Ulladulla Hospital	100	100	*	100
Shellharbour Hospital	99	94	98	100
Shoalhaven and District Memorial Hospital	84	81	77	88
Wollongong Hospital	87	96	78	80
Total ISLHD	90	93	85	91
Mid North Coast Local Health District (MNCLHD)			
Bellinger River District Hospital	91	*	83	100
Coffs Harbour Base Hospital	79	87	81	76
Kempsey Hospital	93	*	80	95
Macksville District Hospital	88	*	*	87
Port Macquarie Base Hospital	77	82	79	70
Other MNCLHD	88	100	80	95
Total MNCLHD	81	85	80	80
Murrumbidgee Local Health District (MLHD)				
Deniliquin Health Service	100	*	100	*
Griffith Base Hospital	91	100	83	96
Tumut Health Service	96	*	97	94
Wagga Wagga Base Hospital	87	95	87	84
Young Health Service	100	*	100	100
Other MLHD	96	93	95	100
Total MLHD	89	96	88	87
Nepean Blue Mountains Local Health District (N	BMLHD)			
Blue Mountains District Anzac Memorial Hospital	100	*	100	100
Hawkesbury District Health Service	42	78	34	27
Lithgow Health Service	100	100	100	100
Nepean Hospital	85	98	80	79
Other NBMLHD	92	*	96	91
Total NBMLHD	82	95	80	77
Northern NSW Local Health District (NNSWLHD)				
Ballina District Hospital	99	100	100	96
Casino and District Memorial Hospital	94	91	89	98
Grafton Base Hospital	91	90	90	97
Lismore Base Hospital	84	91	75	87
Maclean District Hospital	98	95	100	100
Musical District Hospital	84	83	79	86
The Tweed Hospital	77	71	78	84
Total NNSWLHD	85	86	81	89

Percentage of patients treated on time

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Northern Sydney Local Health District (NSLHD)				
Hornsby and Ku-Ring-Gai Hospital	97	100	96	96
Manly District Hospital	95	98	92	99
Mona Vale and District Hospital	100	100	100	100
Royal North Shore Hospital	92	94	88	94
Ryde Hospital	94	97	89	99
Total NSLHD	95	96	91	97
South Eastern Sydney Local Health District (SE	SLHD)			
Prince of Wales Hospital	90	93	89	91
Royal Hospital for Women	100	99	100	100
St George Hospital	81	86	76	75
Sutherland Hospital	92	89	88	97
Sydney Hospital / Sydney Eye Hospital	97	99	96	97
Total SESLHD	91	92	89	93
South Western Sydney Local Health District (SV	NSLHD)			
Bankstown / Lidcombe Hospital	87	87	84	88
Bowral and District Hospital	99	100	100	99
Campbelltown Hospital	82	82	81	83
Fairfield Hospital	100	100	98	10
Liverpool Hospital	90	91	85	9
Total SWSLHD	89	91	85	9
Southern NSW Local Health District (SNSWLHD)			
Bateman's Bay District Hospital	84	100	90	82
Bega District Hospital	86	93	79	8
Cooma Health Service	94	92	96	93
Goulburn Base Hospital	93	98	95	9
Moruya District Hospital	94	85	96	10
Queanbeyan Health Service	96	94	97	9
Other SNSWLHD	100	*	*	
Total SNSWLHD	91	94	92	89
St Vincent's Health Network (SVHN)				
St Vincent's Hospital, Darlinghurst	88	96	81	8
Fotal SVHN	88	96	81	82
Sydney Children's Hospitals Network (SCHN)				
Sydney Children's Hospital	96	99	94	9
The Children's Hospital at Westmead	92	100	85	9
Total SCHN	93	99	88	9
Sydney Local Health District (SYDLHD)				
Canterbury Hospital	88	97	87	8
Concord Hospital	96	98	93	9
RPAH Institute of Rheumatology and Orthopaedics	100	95	100	10
Royal Prince Alfred Hospital	99	98	99	9
Fotal SYDLHD	97	98	96	9

Percentage of patients treated on time

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Western NSW Local Health District (WNSWLHD)				
Bathurst Base Hospital	93	97	84	99
Cowra District Hospital	98	100	94	100
Dubbo Base Hospital	93	97	90	94
Forbes District Hospital	100	*	100	100
Mudgee District Hospital	91	100	72	100
Orange Base Hospital	80	97	78	77
Parkes District Hospital	100	*	100	100
Other WNSWLHD	*	t	t	*
Total WNSWLHD	89	97	85	90
Western Sydney Local Health District (WSLHD)				
Auburn Hospital	88	90	78	94
Blacktown Hospital	94	95	93	96
Mount Druitt Hospital	94	98	91	95
Westmead Hospital (all units)	93	96	90	93
Total WSLHD	92	95	88	95

Percentage of patients treated on time

1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

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

(†) This hospital or group conducted no surgery for this urgency category in this quarter and therefore has no on-time performance value.

Note: All urgency categories include deferred patients as appropriate.

Note: Because staged patients are now reported separately, on-time performance by urgency category for this quarter are not comparable to data reported in previous NSW Ministry of Health's Quarterly Hospital Performance Reports and Bureau Hospital Quarterly reports prior to May 2011.

Source: Waiting List Collection On-line System, NSW Health. Data extracted on 16 April 2012.

The following table presents the median waiting times (in days) of elective surgery admissions for each urgency category for this quarter. The table is ordered by local health district and includes all principal referral, paediatric specialist, ungrouped acute – tertiary referral, major metropolitan, major non-metropolitan and district groups 1 and 2 hospitals that conduct elective surgery. Surgery information from smaller hospitals is presented for each local health district under the *'other'* category.

Appendix table 3: NSW median elective surgery waiting time performance, by hospital and local health district, January to March 2012

		Median waiting time (days)		
	-	Urgent ¹	Semi-urgent ¹	Non-urgent ²
New South Wales				
Total New South Wales		11	51	233
Central Coast Local Health District (CCLHD)				
Gosford Hospital		15	60	325
Wyong Hospital		18	48	295
Total CCLHD		15	54	307
Far West Local Health District (FWLHD)				
Broken Hill Base Hospital		11	56	162
Total FWLHD		11	56	162
Hunter New England Local Health District (HNE	_HD)			
Armidale and New England Hospital		23	61	272
Belmont Hospital		11	50	205
Calvary Mater Newcastle		21	67	302
Cessnock District Hospital		19	17	92
Gunnedah District Hospital		12	40	118
Inverell District Hospital		*	74	363
John Hunter Hospital		11	54	264
Kurri Kurri District Hospital		7	35	250
Maitland Hospital		7	31	197
Manning Base Hospital		15	63	318
Moree District Hospital		8	20	150
Muswellbrook District Hospital		4	34	7
Narrabri District Hospital		6	45	*
Singleton District Hospital		*	47	73
Tamworth Base Hospital		16	68	279
Other HNELHD		15	48	112
Total HNELHD		12	50	238

Median waiting time (days)

	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Illawarra Shoalhaven Local Health District (ISLHD)			
Bulli District Hospital	11	49	225
Milton and Ulladulla Hospital	5	*	82
Shellharbour Hospital	20	62	232
Shoalhaven and District Memorial Hospital	14	70	313
Wollongong Hospital	5	70	343
Total ISLHD	7	64	269
Mid North Coast Local Health District (MNCLHD)			
Bellinger River District Hospital	*	64	93
Coffs Harbour Base Hospital	16	67	344
Kempsey Hospital	*	70	237
Macksville District Hospital	*	*	332
Port Macquarie Base Hospital	20	71	348
Other MNCLHD	18	72	279
Total MNCLHD	19	69	329
Murrumbidgee Local Health District (MLHD)			
Deniliquin Health Service	*	49	*
Griffith Base Hospital	22	68	349
Tumut Health Service	*	62	68
Wagga Wagga Base Hospital	17	58	324
Young Health Service	*	68	76
Other MLHD	12	42	69
Total MLHD	17	61	315
Nepean Blue Mountains Local Health District (NBMLHD)			
Blue Mountains District Anzac Memorial Hospital	*	15	23
Hawkesbury District Health Service	20	113	435
Lithgow Health Service	18	46	209
Nepean Hospital	10	71	325
Other NBMLHD	*	32	251
Total NBMLHD	12	63	290
Northern NSW Local Health District (NNSWLHD)			
Ballina District Hospital	17	52	98
Casino and District Memorial Hospital	8	36	91
Grafton Base Hospital	15	47	248
Lismore Base Hospital	10	70	323
Maclean District Hospital	13	34	69
Murwillumbah District Hospital	19	70	343
The Tweed Hospital	22	69	242
Total NNSWLHD	15	60	293

Median waiting time (days)

Semi-urgent¹ Non-urgent²

Urgent¹

Northern Sydney Local Health District (NSLHD)			
Hornsby and Ku-Ring-Gai Hospital	8	27	124
Manly District Hospital	7	40	92
Mona Vale and District Hospital	4	19	47
Royal North Shore Hospital	9	46	148
Ryde Hospital	11	52	141
Total NSLHD	8	38	126
South Eastern Sydney Local Health District (SESLHD)			
Prince of Wales Hospital	11	44	268
Royal Hospital for Women	8	34	103
St George Hospital	12	59	293
Sutherland Hospital	19	69	313
Sydney Hospital / Sydney Eye Hospital	14	48	175
Total SESLHD	12	49	212
South Western Sydney Local Health District (SWSLHD)			
Bankstown / Lidcombe Hospital	14	53	194
Bowral and District Hospital	14	35	118
Campbelltown Hospital	22	71	301
Fairfield Hospital	8	49	246
Liverpool Hospital	11	52	266
Total SWSLHD	13	55	247
Southern NSW Local Health District (SNSWLHD)			
Bateman's Bay District Hospital	25	60	353
Bega District Hospital	19	69	345
Cooma Health Service	23	59	175
Goulburn Base Hospital	17	43	335
Moruya District Hospital	14	64	128
Queanbeyan Health Service	14	45	195
Other SNSWLHD	*	*	*
Total SNSWLHD	16	54	329
St Vincent's Health Network (SVHN)			
St Vincent's Hospital, Darlinghurst	4	45	169
Total SVHN	4	45	169
Sydney Children's Hospitals Network (SCHN)			
Sydney Children's Hospital	5	34	134
The Children's Hospital at Westmead	6	57	145
Total SCHN	5	49	141
	Ű	.0	

Median waiting time (days)

Urgent¹ Semi-urgent¹ Non-urgent²

Sydney Local Health District (SYDLHD)			
Canterbury Hospital	13	62	306
Concord Hospital	7	47	124
RPAH Institute of Rheumatology and Orthopaedics	5	23	49
Royal Prince Alfred Hospital	6	27	38
Total SYDLHD	7	37	94
Western NSW Local Health District (WNSWLHD)			
Bathurst Base Hospital	9	66	272
Cowra District Hospital	10	56	189
Dubbo Base Hospital	8	29	307
Forbes District Hospital	*	49	279
Mudgee District Hospital	9	77	212
Orange Base Hospital	14	77	347
Parkes District Hospital	*	25	55
Other WNSWLHD	t	t	*
Total WNSWLHD	9	56	303
Western Sydney Local Health District (WSLHD)			
Auburn Hospital	14	62	221
Blacktown Hospital	14	46	131
Mount Druitt Hospital	10	49	245
Westmead Hospital (all units)	12	41	105
Total WSLHD	12	44	168

1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

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

(†) This hospital or group conducted no surgery for this urgency category in this quarter and therefore has no on-time performance value.

Note: All urgency categories include deferred patients as appropriate.

Note: Because staged patients are now reported separately, on-time performance by urgency category for this quarter are not comparable to data reported in previous NSW Ministry of Health's *Quarterly Hospital Performance Reports* and Bureau *Hospital Quarterly* reports prior to May 2011.

Source: Waiting List Collection On-line System, NSW Health. Data extracted on 16 April 2012.

Download our reports

The report, *Hospital Quarterly: Performance of NSW public hospitals, January to March 2012* and related reports are available at www.bhi.nsw.gov.au

The suite of products includes:

- At a Glance summarising the three core modules
- Three core modules titled Admitted Patients, Elective Surgery and Emergency Departments
- Activity and performance reports about emergency department care and elective surgery for more than 60 hospitals and NSW as a whole
- Data Quality Assessments
- Technical Supplements



About the Bureau

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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State Health Publication Number: (BHI) 120127 ISSN 1838-3238

Suggested citation: Bureau of Health Information. Hospital Quarterly: Performance of NSW public hospitals, January to March 2012. Elective Surgery. 3(1). Sydney (NSW); 2012.

Published June 2012

Please note that there is the potential for minor revisions of data in this report. Please check the online version at www.bhi.nsw.gov.au for any amendments.