Bureau of Health Information

Emergency Departments

Hospital Quarterly:

Performance of NSW public hospitals

October to December 2011

More than half a million patients attended NSW public hospital emergency departments (EDs) during October to December 2011, 1% more than the same quarter in 2010. The greatest increases were seen in the more urgent triage categories. Imminently life threatening (triage 2) presentations were 13% higher than the same quarter in 2010.

The time within which half of patients begin treatment is largely unchanged compared to the same quarter in 2010 and the time within which most (95%) patients begin treatment has decreased by 1 minute (triage 2), 3 minutes (triage 3), 9 minutes (triage 4) and 22 minutes (triage 5). The number of patients who travelled to the ED by ambulance has increased by 4% since the same quarter in 2010. This quarter, 65% of these patients transferred into the care of ED staff within 30 minutes, compared with 66% in the same quarter in 2010.

Admissions to hospital from the ED also increased by 4% this quarter. Half of these patients left the ED within six hours and 35 minutes of presentation and most (95%) were admitted within 19 hours and 34 minutes.

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



During the quarter	Oct-Dec 2011	Oct-Dec 2010	The difference
Visits to NSW emergency departments	538,068 visits	534,765 visits	+3,303 (+1%)
People travelling to NSW EDs by ambulance	132,661 people	128,151 people	+4,510 (+4%)
People travelling by ambulance that were transferred into the care of ED staff within 30 minutes	65% in 30 minutes	66% in 30 minutes	-1 percentage point
Emergency attendances that were categorised as triage 2	49,430 attendances	43,596 attendances	+5,834 (+13%)
Time within which half (50%) of triage 2 patients began treatment	8 minutes	8 minutes	unchanged
Time within which most (95%) triage 2 patients began treatment	36 minutes	37 minutes	-1 minute
Admissions to hospital from NSW emergency departments	144,478 admissions	138,421 admissions	+6,057 (+4%)
Time within which half (50%) of admitted patients left the ED	6 hours 35 minutes	6 hours 36 minutes	-1 minute
Time within which most (95%) admitted patients left the ED	19 hours 34 minutes	19 hours 10 minutes	+24 minutes

Understanding ED performance reporting

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

The review found:

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

2

What we changed

As a result, in the July to September 2011 issue, the Bureau took a new approach to reporting to more closely reflect patients' journeys and permit fairer comparisons between hospitals and across time.

For patients with conditions triaged as immediately life threatening (triage 1), the Bureau continues to report the number of cases and the total time in ED, but does not report time to treatment.

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

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

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

See **pages 16 and 17** for more detail on how to interpret the Bureau's information.

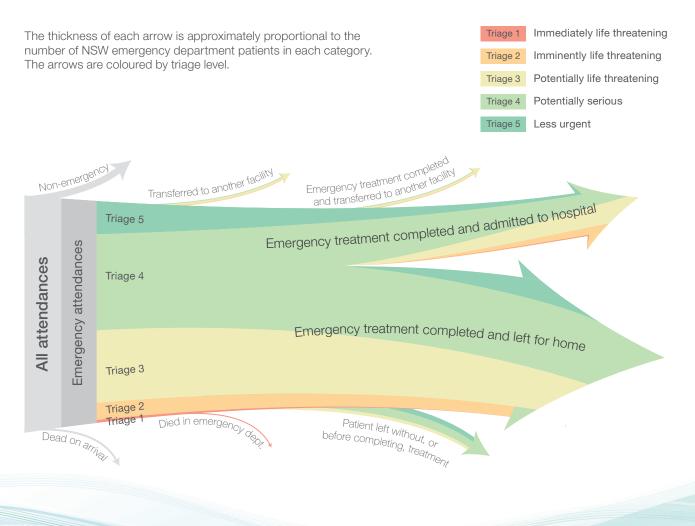
Emergency department journeys

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 October to December 2011 quarter are presented in this report and are summarised in Figure 1.

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



Emergency department attendances

There were more than half a million attendances at NSW EDs during October to December 2011 (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 five years ago.

Emergency attendances

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

Figure 2: Attendances at NSW emergency departments, October to December 2011

		Same period last year	Change since one year ago
All attendances:1 538,068 patients		534,765	1%
Emergency attendances ² by triage category: 520,568 patients	523,548	-1%	
1 Immediately life threatening 3,148 (1%)		3,038	4%
2 Imminently life threatening 49,430 (9%)		43,596	13%
3 Potentially life threatening	164,864 (32%)	157,962	4%
4 Potentially serious	230,720 (44%)	235,920	-2%
5 Less urgent 72,406 (14%)		83,032	-13%

Emergency attendances³ by triage category and mode of separation: 512,567 patients

		Treated and admitted to hospital (144,478)	Treated and discharged (318,800) or transferred (9,108)		Patient left without, or before completing, treatment (40,181)
1	Immediately life threatening	2,553 (2%)	543 (0%)		17 (0%)
2	Imminently life threatening	30,205 (21%)	17,981 (5%)		740 (2%)
3	Potentially life threatening	66,926 (469	6) 89,374 (27%)		7,259 (18%)
4	Potentially serious	40,601 (28%)		164,192 (50%)	22,234 (55%)
5	Less urgent	4,193 (3%)	55,818 (17%)		9,931 (25%)

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

- 2. All attendances that have a triage category and are coded as emergency presentations or unplanned return visits.
- 3. All emergency attendances with a recorded triage category, excluding attendances with a mode of separation of 'Departed for clinical services location' or 'Dead on arrival'.
- Note: All percentages rounded to whole numbers and therefore percentages may not add to 100%.
- Note: Emergency department activity includes 88 facilities for which electronic data are reported. This covers approximately 85% of NSW emergency department activity.
- **Note:** Due to changes in how admitted patients are counted, the number of treated and admitted, and treated and discharged or transferred are not directly comparable with previous *Hospital Quarterly* reports.

Source: Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

Δ

The three main ED journeys

Of the 520,568 emergency patients who attended a NSW ED during the October to December 2011 quarter, almost three in 10 (144,478 or 28%) were treated in the ED and admitted to the same hospital (Figure 2). Almost half (46%) of these patients were categorised as potentially life-threatening (triage 3).

Approximately six in 10 (327,908 or 63%) emergency patients completed treatment but were not admitted to that hospital. Half (50%) of these patients were categorised as potentially serious (triage 4).

Fewer than one in 10 (40,181 or 8%) emergency patients left the ED without, or before completing, treatment. More than half (55%) of these patients were categorised as potentially serious (triage 4). Some of the reasons patients leave before completing treatment include dissatisfaction with the care they received or their problem might have resolved without treatment from staff.

Arrivals by ambulance

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

In the October to December 2011 quarter, 132,661 patients (25% of all attendances) arrived at hospital by ambulance (Figure 3).

Of these, 65% transferred into the care of ED staff within 30 minutes, compared with 66% in the same quarter in 2010.

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

				Change since one year ago
Attendances arriving by ambular	nce: 132,661 patients		128,151	4%
Off-stretcher time ¹	Target: 90% transferred in 30 min.	65%	66%	

1. Off-stretcher time refers to the time between arrival of ambulance and transfer to the care of the emergency department. Source: NSW Ambulance Service on 18 January 2012.

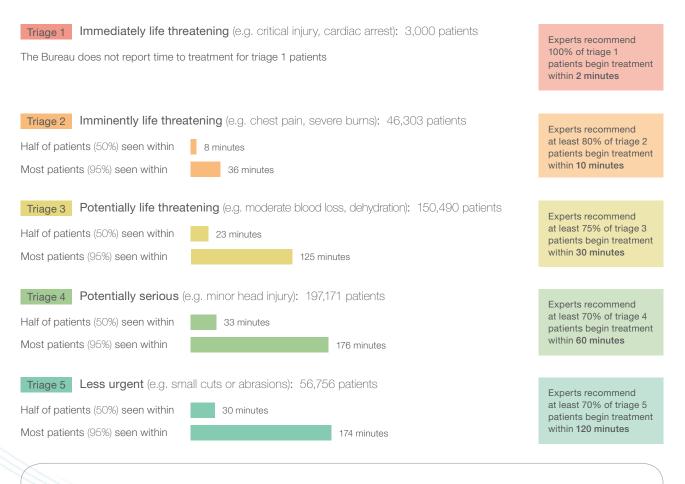
Time to treatment performance

Time to treatment

In October to December 2011 (Figure 4), the time within which half of patients began treatment was largely unchanged compared to the same quarter in 2010, with the imminently life threatening category (triage 2) the same at 8 minutes, the potentially life threatening category (triage 3) the same at 23 minutes, the potentially serious category (triage 4) one minute less at 33 minutes and the less urgent category (triage 5) two minutes less at 30 minutes. The time within which most (95%) patients began treatment was similar or lower. In the October to December 2011 quarter, 95% of patients began treatment within:

- 36 minutes, one minute shorter than one year ago (triage 2)
- 125 minutes, three minutes shorter than one year ago (triage 3)
- 176 minutes, nine minutes shorter than one year ago (triage 4)
- 174 minutes, 22 minutes shorter than one year ago (triage 5)

Figure 4: Waiting times for treatment in NSW emergency departments, October to December 2011



Note: Treatment time is the earliest time recorded when a healthcare professional gives medical care for the patient's presenting problems. **Source:** Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

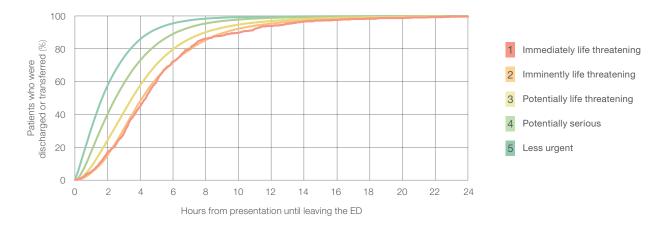
Leaving the emergency department

Treated and discharged home or transferred to another hospital

Most patients (63%) received treatment in the ED and were either discharged home or transferred to another hospital. Figure 5 shows the times in which patients from each triage category left the ED.

Overall, more than one-third of these patients (36%) left hospital within two hours of presentation and, by eight hours, 94% of all patients who were not admitted had left the ED. Patients from the less urgent triage categories left the ED soonest; more than half (56%) of discharged and transferred patients with conditions triaged as less urgent (triage 5) left the ED within two hours compared with 16% for patients with conditions triaged as immediately life threatening (triage 1).





Triage 1: Immediately life threatening	4%	16%	27%	44%	72%	86%	94%	100%
Triage 2: Imminently life threatening	4%	14%	30%	47%	71%	85%	95%	99%
Triage 3: Potentially life threatening	7%	23%	40%	57%	79%	90%	97%	100%
Triage 4: Potentially serious	15%	38%	58%	72%	89%	95%	99%	100%
Triage 5: Less urgent	29%	56%	74%	85%	95%	98%	100%	100%
All triage categories	15%	36%	54%	69%	86%	94%	98%	100%

3 hours

4 hours

6 hours

8 hours

12 hours 24 hours

2 hours

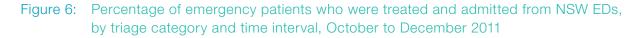
Note: Time from presentation to the ED until discharge or transfer from the emergency department. **Source:** Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

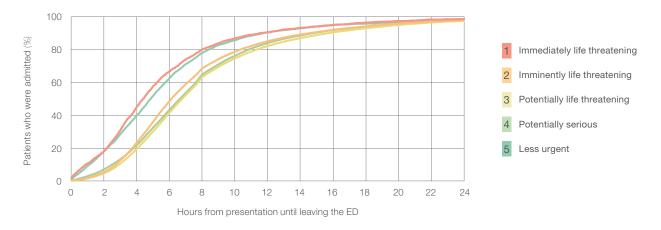
1 hour

Treated and admitted to hospital

Some patients (28%) received treatment in the ED and were subsequently admitted to a ward, a critical care unit or via an operating suite in the hospital. Figure 6 shows the time in which admitted patients from each triage category left the ED.

In the October to December 2011 quarter, two in 10 (21%) patients admitted to hospital left the ED within four hours of presentation and, by 12 hours, 83% of all admitted patients had left the ED. Half of all patients admitted from the ED left the department within six hours and 35 minutes of presentation. Most (95%) had left the ED within 19 hours and 34 minutes of presentation (Figure 7).





3 hours

4 hours

6 hours

8 hours

12 hours 24 hours

Triage 1: Immediately life threatening	10%	17%	30%	44%	66%	80%	90%	98%
Triage 2: Imminently life threatening	1%	5%	12%	22%	48%	68%	85%	98%
Triage 3: Potentially life threatening	1%	4%	10%	19%	41%	63%	82%	97%
Triage 4: Potentially serious	3%	7%	13%	21%	43%	64%	84%	98%
Triage 5: Less urgent	8%	17%	27%	39%	62%	78%	90%	98%
All triage categories	2%	6%	12%	21%	44%	65%	83%	98%

Note: Time from presentation to the ED until recorded as leaving the emergency department for admitted patients. Source: Health Information Exchange, NSW Health. Data extracted on 30 January 2012

2 hours

1 hour

Figure 7: Time from presentation until leaving the ED for emergency admissions, October to December 2011

All admissions from NSW emergency departments:1 146,515 patients

Admitted patients used to calculate time to departure:² 137,162 patients

Half of admitted patients (50%) leave the ED within

6 hours and 35 minutes

Most admitted patients (95%) leave the ED within

19 hours and 34 minutes

1. All emergency and non-emergency admissions from the ED.

- 2. All admissions that have a departure time and are coded as emergency presentations or unplanned return visits.
- Source: Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

Trends over time

Seasonal variation

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

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

Emergency attendances and admissions

In the October to December 2011 quarter, ED attendances were 538,068. This is 1% higher than the same quarter one year ago (534,765) and 5% higher than the same period two years ago (514,530) (Figure 8).

The number of emergency admissions has also been increasing. This quarter there were 144,478 emergency admissions. This is 4% higher than the same quarter one year ago (138,421) and 6% higher than the same quarter two years ago (135,924).

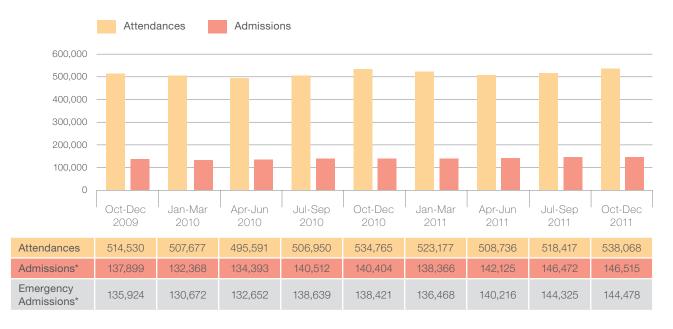


Figure 8: Attendances at, and admissions from, NSW emergency departments, October 2009 to December 2011

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

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

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

Source: Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

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

Arrivals by ambulance

The number of ambulance arrivals has increased compared with the same quarter one year ago, up 4%, and was disproportionately larger than the increase in emergency attendances (up 1%).

In the October to December 2011 quarter, one-quarter (25%) of all people who attended NSW EDs arrived by ambulance (Figure 9), a total of 132,661 patients.

This was more than the same quarter in 2010 when 128,151 patients arrived by ambulance, and in 2009, when 125,821 patients arrived by ambulance.

Ambulance off-stretcher time

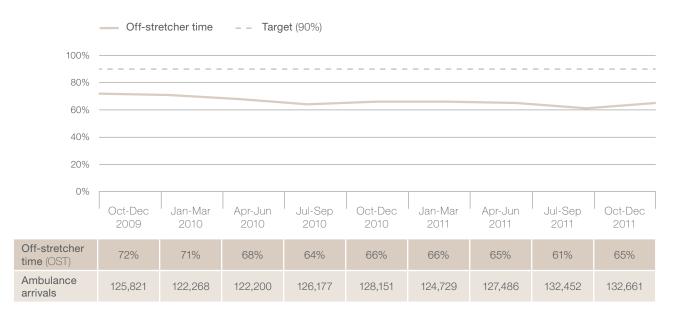
During October to December 2011, NSW did not achieve the state target for the ambulance off-stretcher time (Figure 9).

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

During the quarter the state-wide figure was 65%. This is similar to 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 9).

Figure 9: Ambulance arrivals and percentage of patients accepted into the care of NSW emergency departments from an ambulance within 30 minutes of arrival, October 2009 to December 2011



Source: Data provided by NSW Ambulance Service on 18 January 2012.

Time to treatment in emergency departments

The time from presentation until treatment fluctuates throughout the year. At a state level, the time appears to be gradually increasing, however, the trend is affected by progressive implementation of new information systems. For more information see the *Background Paper: Approaches to reporting time measures of emergency department performance.* **Figures 10a-d** show for triage categories 2 to 5, the time within which half (50%) and most (95%) patients began 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 10a:Triage 2 - Time from presentation to treatment (minutes) in NSW emergency
departments for half (50%) and most (95%) patients, October 2006 to December 2011

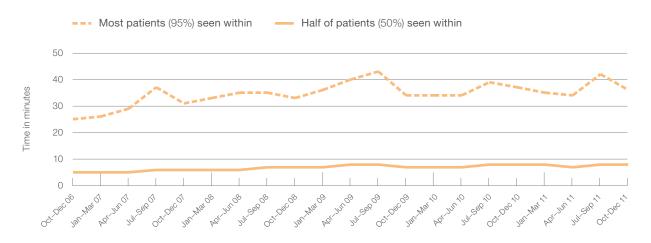


Figure 10b: Triage 3 - Time from presentation to treatment (minutes) in NSW emergency departments for half (50%) and most (95%) patients, October 2006 to December 2011

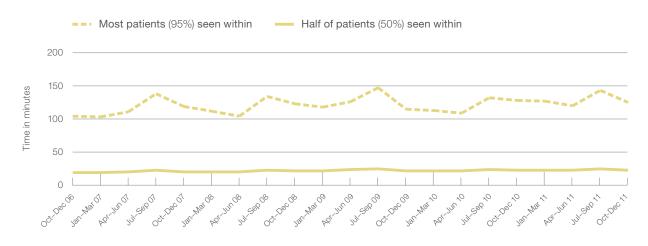
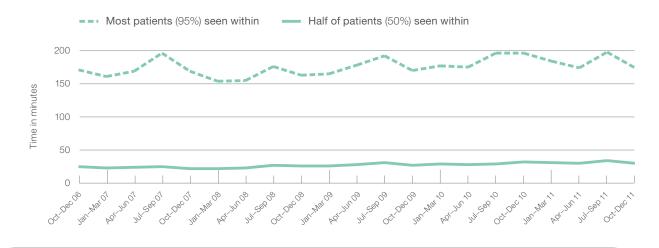


Figure 10c: Triage 4 - Time from presentation to treatment (minutes) in NSW emergency departments for half (50%) and most (95%) patients, October 2006 to December 2011



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



Note: Hospitals transitioning to one of the major information systems are excluded from this data during the quarter(s) of implementation. Source: Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

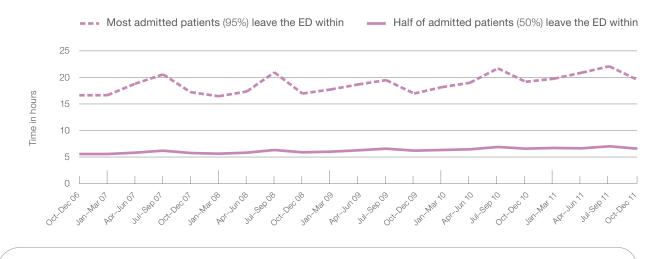
Time to admission to hospital

During October to December 2011, half of admitted emergency patients left the ED within six hours and 35 minutes of presentation.

This is shorter than in the last quarter when half of all admitted emergency patients left the ED within seven hours and four minutes, but similar to the same quarter in 2010 when half of all admitted emergency patients left the ED within six hours and 36 minutes (Figure 11). During the October to December 2011 quarter, most (95%) admitted emergency patients left the ED within 19 hours and 34 minutes of arriving in the ED.

This is shorter than in the preceding quarter when most (95%) admitted emergency patients left the ED within 22 hours and five minutes, but longer than in the same quarter in 2010 when most (95%) admitted emergency patients left the ED within 19 hours and 10 minutes (Figure 11).

Figure 11: Time from presentation until leaving the ED for emergency admissions by quarter, October 2006 to December 2011



Note: Time from presentation to the ED until recorded as leaving the emergency department for admitted patients.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 30 January 2012.

Differences in performance between hospitals

Time to treatment in NSW EDs

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

- Half (50%) of all patients with conditions triaged as imminently life threatening (triage 2) start treatment within five minutes at Orange Hospital, compared with within 12 minutes at Fairfield Hospital
- Most (95%) patients with conditions triaged as imminently life threatening (triage 2) start treatment within 17 minutes at Concord Hospital, compared with within 62 minutes at Nepean Hospital
- Half (50%) of all patients with conditions triaged as potentially serious (triage 4) start treatment within 23 minutes at Wagga Wagga Hospital, compared with within 49 minutes at Tamworth Hospital
- Most (95%) patients with conditions triaged as potentially serious (triage 4) start treatment within 115 minutes at Sutherland Hospital, compared with within 248 minutes at Westmead Hospital.

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

Time to admission to hospital

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

- For principal referral hospitals, the time by which most (95%) admitted patients left the ED ranged from 13 hours and 49 minutes at Concord Hospital to 22 hours and 10 minutes at Liverpool Hospital
- For major metropolitan hospitals, the time by which most (95%) admitted patients left the ED ranged from 13 hours and two minutes at Auburn Hospital to 33 hours and 58 minutes at Blacktown Hospital
- For major non-metropolitan hospitals, the time by which most (95%) admitted patients left the ED ranged from 17 hours and 47 minutes at Shoalhaven and District Memorial Hospital to 25 hours and 39 minutes at Dubbo Base Hospital.

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

How to interpret our information

In the July to September 2011 issue of *Hospital Quarterly*, the Bureau introduced a new approach to measuring time to start treatment and time to admission in emergency departments (EDs). The changes provide a more detailed picture of patients' journeys in EDs throughout NSW and allow fairer comparisons between hospitals. The following pages provide examples of the main statistical concepts used in this report.

Measuring the times patients spend in emergency departments

The Bureau now reports on the times that 50% and 95% of patients are treated within or until they left the ED to be admitted. 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.

Half (50% or the median): the time by which half of patients started treatment, or left the ED to be admitted to another part of the hospital.

For example, if half of patients were seen within 23 minutes, this means 50% of patients started treatment between 0 and 23 minutes after arriving at the ED. The other 50% of patients waited 23 minutes or longer for treatment.

Most (or 95%): the time by which 95% of patients started treatment, or left the ED to be admitted to another part of the hospital.

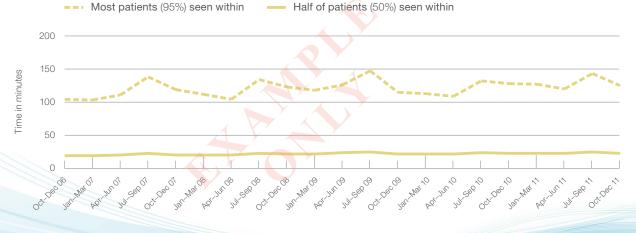
For example, if 95% of patients were seen within 125 minutes, most patients started treatment between 0 and 125 minutes after arriving at the ED. The final 5% of patients (or 1 in 20) waited 125 minutes or longer for treatment.

Looking at performance over time

Hospital Quarterly also presents information about patients' journeys in the ED using different graphs.

For example, the trend graph (Figure 12) presents the time to start treatment for patients in each quarter over the five years to the end of 2011. The solid line on the graph shows the time by which half (50% or the median) of all patients started treatment, and the dashed line shows the time by which most patients (95%) started treatment. In this graph you can see the seasonal patterns, with the longest times to treatment (as shown by the 95% line) peaking during the July to September quarter each year.





Looking at performance during a quarter

We show performance during a single quarter by using a cumulative graph (Figure 13). This graph shows the percentage of patients by the time from presentation to treatment. You can find information about how long patients waited to start treatment by reading from the 'time' axis of the graph, and also the proportion of patients that started treatment by reading from the 'patients' axis.

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

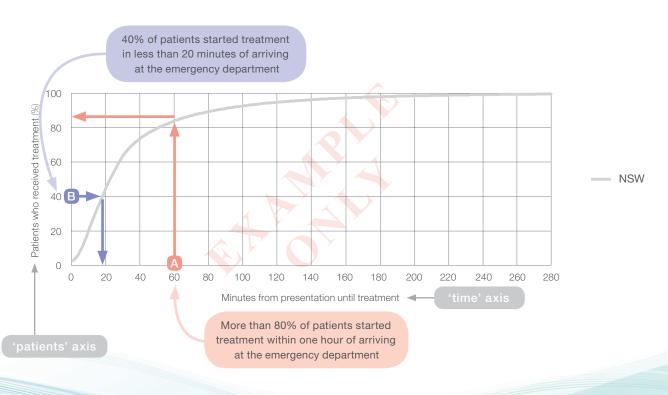
Example 1. What proportion of patients were seen within one hour?

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. Following the line upwards on the graph, 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



Appendix: ED time performance measures

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

	Tria	ge 2	Tria	ge 3	Tria	ge 4	Tria	ge 5
	Half of patients start treatment within	Most patients (95%) start treatment within						
New South Wales								
Total New South Wales	8	36	23	125	33	176	30	174
Central Coast Local Health D	istrict (C	CLHD)						
Gosford Hospital	7	31	22	110	48	215	54	217
Wyong Hospital [‡]	8	51	20	123	32	151	33	154
Total CCLHD	7	39	21	116	39	189	36	169
Far West Local Health Distric	• • (F\\/I H[ור					_	
Broken Hill Base Hospital	6	26	15	64	22	119	28	144
Total FWLHD	6	26	15	64	22	119	28	144
		1 .* . 1 /1 18 1						
Hunter New England Local He						100		100
Armidale and New England Hospital	8	53	20	86	31	139	27	162
Belmont Hospital	6	27	19	109	30	161	37	185
Calvary Mater Newcastle	7	32	22	103	33	163	39	186
Cessnock District Hospital	5	33	22	78	33	120	39	125
Gunnedah District Hospital	10		16	94	33	130	29	160
Inverell District Hospital	2	45	16	110	30	120	25	135
John Hunter Hospital	6	33	24	156	38	248	48	241
Kurri Kurri District Hospital	2	*	8	78	15	92	13	77
Maitland Hospital	9	35	26	115	44	181	53	199
Manning Base Hospital	7	43	26	143	41	208	39	209
Moree District Hospital	3	35	9	92	14	113	6	91
Muswellbrook District Hospital	4	113	15	110	33	140	18	125
Narrabri District Hospital	2	*	2	40	5	53	5	52
Singleton District Hospital	7	*	23	89	37	117	29	108
Tamworth Base Hospital	8	38	25	122	49	209	55	204
	5	32	14	75	16	98	8	90
Total HNELHD	7	36	21	115	32	178	30	179
Illawarra Shoalhaven Local He	ealth Dis	trict (ISL	.HD)					
Bulli District Hospital	1	*	2	27	2	46	7	85
Milton and Ulladulla Hospital	4	27	16	57	27	117	30	127
Shellharbour Hospital	9	45	26	137	35	216	26	222
Shoalhaven and District Memorial Hospital	10	35	26	110	37	182	28	158
Wollongong Hospital	10	36	29	171	48	242	53	231
Total ISLHD	9	35	26	141	36	207	29	174

	Tria	ge 2	Tria	ge 3	Tria	ge 4	Tria	ge 5
	Half of patients start treatment within	Most patients (95%) start treatment within						
Mid North Coast Local Health	District	(MNCLH	D)					
Coffs Harbour Base Hospital	9	36	25	124	29	174	29	161
Kempsey Hospital	8	31	20	83	20	115	14	92
Port Macquarie Base Hospital	9	36	23	93	32	138	36	131
Total MNCLHD	9	34	23	106	27	145	24	147
Murrumbidgee Local Health D	istrict (N	ЛLHD)						
Griffith Base Hospital	5	21	17	82	27	136	29	160
Wagga Wagga Base Hospital	8	45	18	79	23	146	18	149
Total MLHD	7	42	18	81	25	141	20	152
Nepean Blue Mountains Local	Health	District (NBMLHC))				
Blue Mountains District Anzac Memorial Hospital	7	44	19	100	36	159	25	146
Hawkesbury District Health Service	17	58	29	115	29	167	28	172
Lithgow Health Service	5	25	15	78	15	93	12	111
Nepean Hospital	9	62	26	223	29	211	25	169
Total NBMLHD	9	56	25	167	28	175	22	149
Northern NSW Local Health Di	strict (N	INSWLHE))					
Grafton Base Hospital	7	37	21	118	46	201	32	186
Lismore Base Hospital	7	31	26	114	47	191	50	182
Murwillumbah District Hospital	6	17	15	62	24	104	27	113
The Tweed Hospital	9	32	25	105	33	145	27	133
Total NNSWLHD	8	32	23	107	35	169	32	154
Northern Sydney Local Health	District	(NSLHD))					
Hornsby and Ku-Ring-Gai Hospital	†	†	+	†	+	†	†	†
Manly District Hospital	+	†	+	+	+	+	+	+
Mona Vale and District Hospital	+	†	+	+	+	+	+	+
Royal North Shore Hospital [‡]	7	29	22	126	31	153	39	176
Ryde Hospital	+	+	+	+	+	+	+	+
Total NSLHD	7	29	22	126	31	153	39	176
Sydney Children's Hospitals N	etwork	(SCHN)						
Sydney Children's Hospital	9	30	22	59	36	163	38	138
The Children's Hospital at Westmead	7	10	24	82	34	190	39	212
Total SCHN	8	22	23	73	36	173	39	209
South Eastern Sydney Local H	lealth Di	istrict (SE	ESLHD)					
Prince of Wales Hospital	7	47	28	135	31	215	30	206
St George Hospital	10	46	29	127	41	170	33	187
Sutherland Hospital	11	37	25	87	31	115	28	121
Sydney Eye Hospital	2	*	13	30	20	54	26	88
Cudaquillocatital	7	*	15	47	22	98	23	112
Sydney Hospital								

	Tria	ge 2	Tria	ge 3	Tria	ge 4	Tria	ge 5
	Half of patients start treatment within	Most patients (95%) start treatment within						
South Western Sydney Local	Health D	listrict (S	WSI HD)					
Bankstown / Lidcombe Hospital	7	23	20	105	25	116	21	129
Bowral and District Hospital	9	29	24	88	34	149	33	170
Camden Hospital	6	24	15	90	20	121	18	136
Campbelltown Hospital	8	31	19	128	36	199	25	144
Fairfield Hospital	12	41	23	105	33	181	32	177
Liverpool Hospital	9	43	23	201	25	184	24	163
	8	36	21	149	29	168	25	153
							_	
Southern NSW Local Health		SNSWLHL		_				1
Goulburn Base Hospital	18	61	32	116	43	180	37	185
Total SNSWLHD	18	61	32	116	43	180	37	185
St Vincent's Health Network (SVHN)							
St Vincent's Hospital, Darlinghurst	4	19	19	134	19	198	10	205
Total SVHN	4	19	19	134	19	198	10	205
Sydney Local Health District	(SYDI HD)						
Canterbury Hospital	8	29	27	127	36	180	31	145
Concord Hospital	8	17	20	75	29	149	31	142
Royal Prince Alfred Hospital	9	29	26	129	37	143	38	173
Total SYDLHD	8	27	25	120	34	171	35	167
Western NSW Local Health D		'NSWLHE	-					1
Bathurst Base Hospital	10	42	22	84	26	136	18	121
Dubbo Base Hospital	8	38	31	146	33	196	28	154
Orange Base Hospital	5	22	19	68	32	120	36	161
Total WNSWLHD	8	36	24	112	30	154	32	159
Western Sydney Local Health	District	(WSLHD)						
Auburn Hospital	7	22	21	98	41	188	26	198
Blacktown Hospital	7	19	27	145	42	173	39	175
Mount Druitt Hospital	8	32	25	137	56	205	57	218
Westmead Hospital (all units)	7	26	27	226	48	248	50	223
Total WSLHD	7	25	26	166	47	207	44	205

(*) 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 October to December 2011 quarter, the data for this hospital are not considered reliable enough to display (see *Background Paper: Approaches to reporting time measures of emergency department performance, December 2011* for more information).

(‡) Due to the implementation of a new electronic information system in this emergency department in the previous quarter (July to September 2011), caution is advised when considering this hospital's results (see *Background Paper: Approaches to reporting time measures of emergency department performance, December 2011* for more information).
 Source: Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

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

	Attendances		A	dmissions		Ambu	llance
		All admissions	Admissions used for calculation	Half of admitted patients (50%) leave ED within	Most admitted patients (95%) leave ED within	Ambulance arrivals	Off stretcher 90% in 30 min.
New South Wales							
Total New South Wales	538,068	146,515	137,162	6h 35m	19h 34m	132,661	65%
Central Coast Local Hea	th District (CCLHD)					
Gosford Hospital	14,449	4,344	4,320	7h 16m	16h 4m	4,861	54%
Wyong Hospital [‡]	14,140	2,607	2,594	7h 42m	19h 31m	3,915	65%
Total CCLHD	28,589	6,951	6,914	7h 23m	17h 31m	8,776	59%
Far West Local Health Di	strict (FWLH	HD)					
Broken Hill Base Hospital	5,388	666	634	5h 8m	11h 59m	662	87%
Total FWLHD	5,388	666	634	5h 8m	11h 59m	662	87%
Hunter New England Loc	al Health Di	istrict (HN	IELHD)				
Armidale and New England Hospital	3,890	734	709	3h Om	7h 58m	740	91%
Belmont Hospital	6,427	863	862	6h 41m	13h 19m	1,590	68%
Calvary Mater Newcastle	8,113	2,626	2,623	6h 0m	19h 56m	2,504	57%
Cessnock District Hospital	4,606	424	413	3h 1m	21h 17m	453	90%
Gunnedah District Hospital	2,604	183	181	1h 52m	5h 33m	187	98%
Inverell District Hospital	2,676	328	328	2h 16m	6h 5m	409	88%
John Hunter Hospital	17,348	5,668	5,648	6h 36m	14h 41m	5,383	50%
Kurri Kurri District Hospital	2,118	83	83	2h 59m	7h 12m	90	86%
Maitland Hospital	10,739	2,068	2,036	6h 1m	18h 25m	2,164	50%
Manning Base Hospital	6,381	1,783	1,778	6h 10m	18h 58m	1,976	63%
Moree District Hospital	2,294	237	231	2h 17m	6h 27m	283	94%
Muswellbrook District Hospital	2,178	290	287	2h 6m	9h 0m	351	90%
Narrabri District Hospital	1,418	203	197	2h 11m	4h 30m	190	95%
Singleton District Hospital	3,152	324	323	1h 55m	5h 27m	379	96%
Tamworth Base Hospital	10,242	2,074	2,039	6h 28m	17h 53m	1,741	73%
Other HNELHD	14,306	1,285	1,267	1h 29m	8h 11m	1,535	92%
Total HNELHD	98,492	19,173	19,005	5h 30m	16h 7m	19,975	65%
Illawarra Shoalhaven Loc	al Health D	istrict (ISI	LHD)				
Bulli District Hospital	1,561	Ω	Ω	n/a	n/a	2	50%
Milton and Ulladulla Hospital	3,812	420	414	4h 40m	12h 20m	445	75%
Shellharbour Hospital	6,670	2,018	2,013	7h 49m	20h 29m	1,624	55%
Shoalhaven and District Memorial Hospital	9,266	2,531	2,449	6h 56m	17h 47m	2,388	64%
Wollongong Hospital	13,674	5,872	5,526	7h 24m	21h 55m	4,671	64%
Total ISLHD	34,983	10,841	10,402	7h 19m	20h 27m	9,130	63%

	Attendances		А	dmissions		Ambulance	
		All admissions	used for	Half of admitted patients (50%) leave ED within	patients (95%)	Ambulance arrivals	Off stretcher 90% in 30 min
Mid North Coast Local He	alth Distri	ct (MNCL	HD)				
Coffs Harbour Base Hospital	8,419	2,747	2,686	8h 13m	23h 20m	2,263	73%
Kempsey Hospital	5,536	1,384	1,331	4h 25m	12h 58m	861	82%
Port Macquarie Base Hospital	8,247	2,177	2,110	7h 23m	21h 6m	2,292	52%
Total MNCLHD	22,202	6,308	6,127	6h 55m	21h 12m	5,416	66%
Murrumbidgee Local Heal	th District	(MLHD)					
Griffith Base Hospital	4,751	1,029	1,017	4h 11m	8h 52m	811	84%
Wagga Wagga Base Hospital	8,388	3,109	3,085	6h 56m	20h 59m	2,122	45%
Total MLHD	13,139	4,138	4,102	5h 56m	19h 16m	2,933	56%
Nepean Blue Mountains L	ocal Healt	h District	(NBMLHE	D)			
Blue Mountains District Anzac Memorial Hospital	4,345	475	472	4h 38m	8h 23m	781	87%
Hawkesbury District Health Service	5,335	1,181	1,144	6h 47m	25h 20m	1,120	41%
Lithgow Health Service	3,259	421	418	3h 56m	9h 6m	573	92%
Nepean Hospital	13,781	6,390	6,379	7h 1m	21h 34m	4,277	74%
Total NBMLHD	26,720	8,467	8,413	6h 39m	21h 16m	6,751	72%
Northern NSW Local Heal	th District	(NNSWLH	ID)				
Grafton Base Hospital	5,832	1,088	1,003	5h 41m	15h 48m	759	89%
Lismore Base Hospital	7,465	2,490	2,401	8h 44m	22h 35m	1,995	67%
Murwillumbah District Hospital	3,843	487	468	3h 28m	7h 48m	355	91%
The Tweed Hospital	10,229	3,870	3,811	6h 22m	19h 45m	2,037	78%
Total NNSWLHD	27,369	7,935	7,683	6h 35m	20h 40m	5,146	77%
Northern Sydney Local He	ealth Distri	ct (NSLHI	D)				
Hornsby and Ku-Ring-Gai Hospital	7,984	+	+	+	+	2,091	76%
Manly District Hospital	5,968	+	†	+	†	1,252	91%
Mona Vale and District Hospital	7,479	+	†	+	+	1,831	90%
Royal North Shore Hospital ‡	15,437	6,149	6,134	6h 5m	14h 58m	4,391	62%
Ryde Hospital	6,306	+	†	+	+	1,743	92%
Total NSLHD	43,174	13,622	6,134	6h 5m	14h 58m	11,308	77%
Sydney Children's Hospita	als Networ	k (SCHN)					
Sydney Children's Hospital	9,036	1,895	1,871	5h 11m	14h 34m	583	94%
The Children's Hospital at Westmead	12,164	2,887	2,782	5h 41m	15h 38m	1,139	91%
Total SCHN	21,200	4,782	4,653	5h 28m	15h 6m	1,722	92%
South Eastern Sydney Loo	cal Health	District (S	SESLHD)				
Prince of Wales Hospital	11,895	4,008	3,999	6h 21m	17h Om	3,438	53%
St George Hospital	16,935	5,664	5,629	6h 22m	15h 25m	4,995	62%
Sutherland Hospital	11,944	2,807	2,783	7h 10m	19h 51m	3,330	73%
Sydney Eye Hospital	5,079	135	119	2h 54m	6h 7m	24	92%
Sydney Hospital	5,056	392	345	3h 56m	7h 53m	1,073	91%
Total SESLHD	50,909	13,006	12,875	6h 26m	17h 1m	12,860	65%

22

	Attendances		А	dmissions		Ambulance	
		All admissions	used for	Half of admitted patients (50%) leave ED within	Most admitted patients (95%) leave ED within	Ambulance arrivals	Off stretcher 90% in 30 min.
South Western Sydney Lo	cal Health	District (SWSLHD)				
Bankstown / Lidcombe Hospital	11,316	4,034	4,030	6h 18m	16h 38m	4,036	74%
Bowral and District Hospital	4,639	1,064	1,040	5h 0m	13h 6m	927	84%
Camden Hospital	3,072	15	13	4h 8m	8h 13m	10	100%
Campbelltown Hospital	14,082	4,058	4,024	7h 55m	26h 51m	3,888	59%
Fairfield Hospital	8,100	2,074	2,073	6h 58m	16h 17m	1,826	64%
Liverpool Hospital	16,490	6,690	6,630	7h 44m	22h 10m	5,952	54%
Total SWSLHD	57,699	17,935	17,810	7h 6m	22h 4m	16,639	63%
Southern NSW Local Heal	th District	(SNSWLF	ID)				
Goulburn Base Hospital	4,816	910	897	5h 4m	13h 36m	855	65%
Total SNSWLHD	4,816	910	897	5h 4m	13h 36m	855	65%
St Vincent's Health Netwo	rk (SVHN)						
St Vincent's Hospital, Darlinghurst	11,146	3,945	3,920	6h 34m	21h 30m	4,112	53%
Total SVHN	11,146	3,945	3,920	6h 34m	21h 30m	4,112	53%
Sydney Local Health Distr	ict (SYDLH	D)					
Canterbury Hospital	9,031	1,716	1,710	7h 0m	18h 5m	2,232	69%
Concord Hospital	8,403	2,797	2,794	5h 56m	13h 49m	2,499	71%
Royal Prince Alfred Hospital	17,018	5,175	5,167	6h 48m	15h 23m	5,494	58%
Total SYDLHD	34,452	9,688	9,671	6h 33m	15h 35m	10,225	64%
Western NSW Local Healt	h District (WNSWLH	D)				
Bathurst Base Hospital	6,060	910	897	6h 46m	22h 31m	965	79%
Dubbo Base Hospital	7,224	1,797	1,774	6h 42m	25h 39m	1,671	74%
Orange Base Hospital	6,970	2,189	2,169	6h 59m	25h 6m	1,437	74%
Total WNSWLHD	20,254	4,896	4,840	6h 50m	24h 57m	4,073	75%
Western Sydney Local He	alth Distric	t (WSLHE	D)				
Auburn Hospital	6,141	2,571	2,566	5h 49m	13h 2m	1,593	72%
Blacktown Hospital	8,908	2,634	2,618	10h 3m	33h 58m	3,015	45%
Mount Druitt Hospital	7,653	1,024	1,023	6h 52m	19h 6m	2,118	68%
Westmead Hospital (all units)	14,834	7,023	6,875	7h 41m	20h 56m	5,352	52%
Total WSLHD	37,536	13,252	13,082	7h 22m	22h 51m	12,078	56%

(*) 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 October to December 2011 quarter, the data for this hospital are not considered reliable enough to display (see *Background Paper: Approaches to reporting time measures of emergency department performance, December 2011* for more information).

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

(Ω) This hospital had no patients admitted to hospital from the emergency department during October to December 2011.
 Note: Emergency department activity includes 88 facilities for which electronic data are reported. These facilities account for approximately 85% of NSW emergency department activity.

Source: Health Information Exchange, NSW Health. Data extracted on 30 January 2012. Ambulance off-stretcher time data provided by the NSW Ambulance Service on 18 January 2012.

Download our reports

The report, *Hospital Quarterly: Performance of NSW public hospitals, October to December 2011* and related reports are available at www.bhi.nsw.gov.au

The suite of products includes:

- Three core modules on Admitted Patients, Elective Surgery and Emergency Departments
- *Performance Profiles: Elective surgery* (activity and performance reports for more than 80 hospitals and NSW as a whole)
- *Performance Profiles: Emergency department care* (activity and performance reports for EDs in more than 60 hospitals and NSW as a whole)
- Background Paper: Approaches to reporting time measures of emergency department performance, December 2011
- 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.

To contact the Bureau

Telephone: +61 2 8644 2100 Fax: +61 2 8644 2119 Email: enquiries@bhi.nsw.gov.au Postal address: PO Box 1770 Chatswood New South Wales 2057 Australia Web: www.bhi.nsw.gov.au

Copyright Bureau of Health Information 2012

State Health Publication Number: (BHI) 120024 ISSN 1838-3238

Suggested citation: Bureau of Health Information. Hospital Quarterly: Performance of NSW public hospitals, October to December 2011. Emergency Departments. 2(4). Sydney (NSW); 2012.

Published March 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

October to December 2011

People are admitted to hospital for a variety of reasons, such as surgery 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 medical needs and to allow planning for hospital beds, waiting lists and staffing.

The report finds there were 421,033 admitted patient episodes during October to December 2011, 9,591 (+2%) more than the same quarter in 2010 and 19,327 (+5%) 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 peak in the number of admissions during July to September.

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 1,340,950 bed days during the quarter and, on average, each patient stayed 3.3 days in hospital. There were 17,496 babies born, up 1% 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

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

During the quarter	Oct-Dec 2011	Oct-Dec 2010	The difference
Admitted patient episodes	421,033 episodes	411,442 episodes	+9,591 (+2%)
Admitted patient episodes considered to be planned	42% planned	42% planned	unchanged
Babies born	17,496 babies	17,314 babies	+182 (+1%)
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	1,340,950 days	1,328,251 days	+12,699 (+1%)
Average length of stay for acute admitted patients	3.3 days	3.3 days	unchanged

Number of admitted patient episodes

In the October to December 2011 quarter, there were 421,033 admitted patient episodes of care in NSW public hospitals, down from 429,481 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 411,442 episodes in the same quarter one year ago (2%) and from 401,706 episodes two years ago (5%).

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 175,309 planned admitted patient episodes and 245,724 were unplanned (Figure 1). Planned episodes accounted for 42% 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 17,496 babies born in NSW public hospitals, up from 17,314 the same time one year ago.



Figure 1: Planned and unplanned admitted patient episodes in NSW public hospitals, October 2009 to December 2011

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.

Source: Admitted Patient Data Collection. Health Information Exchange, NSW Health. Data extracted on 30 January 2012.

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 October to December 2011 quarter, there were 406,425 acute admitted patient episodes, down from 413,323 last quarter. The number

of acute episodes in NSW public hospitals has been increasing for comparable quarters, up from 397,535 episodes (2%) in the same quarter one year ago and from 389,111 episodes (4%) 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 October to December, there were 182,208 same day episodes (45% of acute admitted episodes) and 224,217 overnight episodes (representing 55%) as shown in Figure 2.

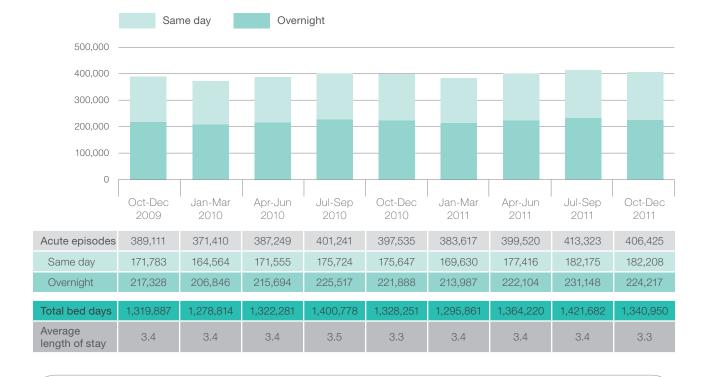


Figure 2: Same day and overnight acute admitted patient episodes in NSW public hospitals, October 2009 to December 2011

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 30 January 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 October to December 2011. Patients admitted for acute episodes stayed a total of 1,340,950 days in hospital beds during October to December 2011.

The number of acute bed days in NSW public hospitals has been increasing for comparable quarters, up from a total of 1,328,251 bed days (1%) in the same quarter one year ago and from 1,319,887 bed days (2%) 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 3.3 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.

Table 1:NSW admitted patient activity by hospital and local health district,
October to December 2011

	All episodes			Acute episodes				
	Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days)	
New South Wales	101 000	475.000	0.45 70.4	100.000	004.047	4 0 40 0 50	0.0	
Total New South Wales	421,033	175,309	245,724	182,208	224,217	1,340,950	3.3	
Central Coast Local Health Dis	trict (CCLI	HD)						
Gosford Hospital	12,362	5,183	7,179	5,015	7,141	41,210	3.4	
Wyong Hospital	6,694	2,978	3,716	3,217	3,275	22,441	3.5	
Other CCLHD [‡]	240	13	227	0	23	372	16.2	
Total CCLHD	19,296	8,174	11,122	8,232	10,439	64,023	3.4	
Far West Local Health District	Far West Local Health District (FWLHD)							
Broken Hill Base Hospital	1,991	1,056	935	1,052	925	5,468	2.8	
Other FWLHD	141	12	129	41	97	408	3.0	
Total FWLHD	2,132	1,068	1,064	1,093	1,022	5,876	2.8	
Hunter New England Local Hea	Ith Distric	t (HNELH	ID)					
Armidale and New England Hospital	2,239	1,088	1,151	989	1,220	6,748	3.1	
Belmont Hospital	1,710	801	909	459	1,236	6,457	3.8	
Calvary Mater Newcastle	3,915	1,027	2,888	1,245	2,542	13,672	3.6	
Cessnock District Hospital	983	443	540	412	541	3,092	3.2	
Gunnedah District Hospital	600	272	328	245	327	1,531	2.7	
Inverell District Hospital	1,022	358	664	452	536	2,060	2.1	
John Hunter Hospital	18,944	9,252	9,692	8,976	9,657	61,442	3.3	
Kurri Kurri District Hospital	622	467	155	400	183	1,513	2.6	
Maitland Hospital	4,002	829	3,173	644	3,272	14,754	3.8	

4

	All episodes			Acute episodes			
	Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days)
Manning Base Hospital	4,840	2,473	2,367	2,418	2,335	13,004	2.7
Moree District Hospital	945	519	426	480	464	2,203	2.3
Muswellbrook District Hospital	1,038	476	562	537	497	2,229	2.2
Narrabri District Hospital	530	122	408	166	352	1,290	2.5
Singleton District Hospital	1,180	625	555	666	509	2,527	2.2
Tamworth Base Hospital	5,612	2,757	2,855	2,567	2,943	17,521	3.2
Other HNELHD	3,341	875	2,466	822	2,384	22,134	6.9
Total HNELHD	51,595	22,422	29,173	21,489	29,056	172,419	3.4
Illawarra Shoalhaven Local Hea	Ith Distric	t (ISLHD))				
Bulli District Hospital	538	117	421	225	56	306	1.1
Milton and Ulladulla Hospital	719	53	666	243	476	2,556	3.6
Shellharbour Hospital	4,836	1,981	2,855	2,858	1,879	14,133	3.0
Shoalhaven and District Memorial Hospital	5,767	2,277	3,490	3,082	2,623	13,730	2.4
Wollongong Hospital	12,486	3,915	8,571	5,420	7,021	44,515	3.6
Other ISLHD [‡]	543	32	511	*	*	28	5.6
Total ISLHD	24,889	8,375	16,514	11,828	12,055	75,268	3.2
Justice Health (including admiss	ion data fo	or the Fore	ensic Ment	al Health N	Network)		
Total Justice Health	646	484	162	93	533	14,426	23.0
Mid North Coast Local Health	District (M	NCLHD)					
Bellinger River District Hospital	413	87	326	146	189	1,233	3.7
Coffs Harbour Base Hospital	7,115	3,397	3,718	3,549	3,383	19,475	2.8
Kempsey Hospital	2,946	991	1,955	1,877	1,008	5,964	2.1
Macksville District Hospital	764	349	415	308	354	1,590	2.4
Port Macquarie Base Hospital	4,899	1,944	2,955	1,725	3,115	15,494	3.2
Other MNCLHD	770	520	250	540	165	1,911	2.7
Total MNCLHD	16,907	7,288	9,619	8,145	8,214	45,667	2.8
Murrumbidgee Local Health Dis	strict (MLH	HD)					
Deniliquin Health Service	664	181	483	248	356	1,538	2.5
Griffith Base Hospital	2,636	1,133	1,503	1,378	1,207	5,412	2.1
Tumut Health Service	552	55	497	207	334	1,392	2.6
Wagga Wagga Base Hospital	7,135	3,163	3,972	3,556	3,485	18,316	2.6
Young Health Service	789	235	554	446	332	1,431	1.8
Other MLHD	4,220	565	3,655	1,352	2,341	10,916	3.0
Total MLHD	15,996	5,332	10,664	7,187	8,055	39,005	2.6
Nepean Blue Mountains Local I	lealth Dis	strict (NB	MLHD)				
Blue Mountains District Anzac Memorial Hospital	981	196	785	175	686	4,036	4.7
Lithgow Health Service	1,093	338	755	574	489	2,128	2.0
Nepean Hospital	14,283	4,627	9,656	5,520	8,501	42,767	3.1
Other NBMLHD	965	936	29	238	640	3,086	3.5
Total NBMLHD	17,322	6,097	11,225	6,507	10,316	52,017	3.1

	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	SWLHD)					
Ballina District Hospital	2,233	1,410	823	1,720	404	4,011	1.9
Casino and District Memorial Hospital	795	345	450	404	366	2,106	2.7
Grafton Base Hospital	3,475	1,996	1,479	2,020	1,345	7,133	2.1
Lismore Base Hospital	6,416	2,994	3,422	2,700	3,625	20,332	3.2
Maclean District Hospital	953	205	748	413	495	3,333	3.7
Murwillumbah District Hospital	1,660	831	829	768	786	3,527	2.3
The Tweed Hospital	8,204	3,313	4,891	3,794	4,324	20,313	2.5
Other NNSWLHD	1,077	324	753	243	684	3,030	3.3
Total NNSWLHD	24,813	11,418	13,395	12,062	12,029	63,785	2.6
Northern Sydney Local Health	District (N	ISLHD)					
Hornsby and Ku-Ring-Gai Hospital	4,108	1,127	2,981	983	2,992	15,808	4.0
Manly District Hospital	3,149	677	2,472	904	2,227	12,103	3.9
Mona Vale and District Hospital	4,019	1,800	2,219	1,963	1,894	10,274	2.7
Royal North Shore Hospital	14,039	5,598	8,441	5,320	8,389	52,120	3.8
Ryde Hospital	2,526	678	1,848	937	1,501	9,053	3.7
Other NSLHD	2,727	1,266	1,461	473	1,436	16,472	8.6
Total NSLHD	30,568	11,146	19,422	10,580	18,439	115,830	4.0
South Eastern Sydney Local He	ealth Distr	ict (SESL	.HD)				
Prince of Wales Hospital	10,674	5,968	4,706	5,165	5,346	40,312	3.8
Royal Hospital for Women	3,863	576	3,287	1,178	2,685	12,771	3.3
St George Hospital	13,975	5,740	8,235	5,442	8,013	47,651	3.5
Sutherland Hospital	6,501	2,166	4,335	1,996	3,974	22,102	3.7
Sydney Hospital / Sydney Eye Hospital	2,583	1,293	1,290	1,323	1,260	5,984	2.3
Other SESLHD [‡]	1,884	1,317	567	*	*	21	1.9
Total SESLHD	39,480	17,060	22,420	15,104	21,278	128,841	3.5
South Western Sydney Local H	ealth Dist	rict (SWS	SLHD)				
Bankstown / Lidcombe Hospital	10,864	2,963	7,901	5,086	5,475	33,224	3.1
Bowral and District Hospital	2,222	638	1,584	991	1,215	5,364	2.4
Camden Hospital	506	213	293	239	91	910	2.8
Campbelltown Hospital	9,892	3,290	6,602	3,798	6,085	33,969	3.4
Fairfield Hospital	7,176	3,624	3,552	3,576	3,459	16,644	2.4
Liverpool Hospital	16,736	6,442	10,294	7,432	9,052	62,568	3.8
Other SWSLHD [‡]	1,061	559	502	*	*	1,246	3.2
Total SWSLHD	48,457	17,729	30,728	21,122	25,377	153,925	3.3
Southern NSW Local Health Di	strict (SNS	WLHD)					
Bateman's Bay District Hospital	1,441	527	914	789	564	2,581	1.9
Bega District Hospital	2,097	977	1,120	986	995	4,926	2.5
Cooma Health Service	825	266	559	329	481	2,045	2.5
Goulburn Base Hospital	2,613	1,281	1,332	1,217	1,366	7,750	3.0
Moruya District Hospital	1,891	936	955	986	854	3,894	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	1,298	355	943	665	601	3,201	2.5
Other SNSWLHD	1,170	105	1,065	359	593	3,055	3.2
Total SNSWLHD	11,335	4,447	6,888	5,331	5,454	27,452	2.5
St Vincent's Health Network (S	, /HN)						
St Vincent's Hospital, Darlinghurst	9,899	5,202	4,697	5,294	4,595	33,464	3.4
Other SVHN [‡]	529	238	291	0	11	310	28.2
Total SVHN	10,428	5,440	4,988	5,294	4,606	33,774	3.4
Sydney Children's Hospitals Ne	etwork (SC	(HN)					
Sydney Children's Hospital	4,469	2,239	2,230	2,282	2,187	12,204	2.7
The Children's Hospital at Westmead	7,343	4,098	3,245	3,278	4,065	23,444	3.2
Total SCHN	11,812	6,337	5,475	5,560	6,252	35,648	3.0
Sydney Local Health District (S	YDLHD)						
Canterbury Hospital	3,947	1,179	2,768	943	2,884	13,579	3.5
Concord Hospital	12,106	7,940	4,166	7,053	4,760	49,615	4.2
RPAH Institute of Rheumatology and Orthopaedics	408	394	14	68	340	1,435	3.5
Royal Prince Alfred Hospital	18,413	8,321	10,092	7,892	10,485	68,997	3.8
Other SYDLHD	1,248	0	1,248	45	937	4,642	4.7
Total SYDLHD	36,122	17,834	18,288	16,001	19,406	138,268	3.9
Western NSW Local Health Dis	trict (WNS	WLHD)					
Bathurst Base Hospital	2,894	1,368	1,526	1,287	1,536	7,809	2.8
Cowra District Hospital	829	238	591	324	489	2,177	2.7
Dubbo Base Hospital	5,023	2,325	2,698	2,262	2,746	13,197	2.6
Forbes District Hospital	1,088	636	452	691	368	1,956	1.8
Mudgee District Hospital	915	355	560	437	466	2,333	2.6
Orange Base Hospital	5,806	2,529	3,277	2,721	2,941	15,735	2.8
Parkes District Hospital	641	148	493	208	404	1,523	2.5
Other WNSWLHD	3,775	1,039	2,736	1,440	2,123	10,085	2.8
Total WNSWLHD	20,971	8,638	12,333	9,370	11,073	54,815	2.7
Western Sydney Local Health D	District (W	SLHD)					
Auburn Hospital	5,052	1,240	3,812	2,407	2,593	9,589	1.9
Blacktown Hospital	6,769	1,570	5,199	1,514	5,192	28,051	4.2
Mount Druitt Hospital	3,133	1,053	2,080	1,187	1,717	5,253	1.8
Westmead Hospital (all units)	22,840	12,154	10,686	12,076	10,271	67,525	3.0
Other WSLHD	470	*	*	14	445	9,493	20.7
Total WSLHD	38,264	16,017	21,777	17,198	20,218	119,911	3.2

(*) Suppressed due to small numbers and to protect privacy.

(‡) 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 30 January 2012.

Download our reports

The report, *Hospital Quarterly: Performance of NSW public hospitals, October to December 2011* and related reports are available at www.bhi.nsw.gov.au

The suite of products includes:

- Three core modules on Admitted Patients, Elective Surgery and Emergency Departments
- *Performance Profiles: Elective surgery* (activity and performance reports for more than 80 hospitals and NSW as a whole)
- *Performance Profiles: Emergency department care* (activity and performance reports for EDs in 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.

To contact the Bureau

Telephone: +61 2 8644 2100 Fax: +61 2 8644 2119 Email: enquiries@bhi.nsw.gov.au Postal address: PO Box 1770 Chatswood New South Wales 2057 Australia Web: www.bhi.nsw.gov.au

Copyright Bureau of Health Information 2012

State Health Publication Number: (BHI) 120024 ISSN 1838-3238

Suggested citation: Bureau of Health Information. Hospital Quarterly: Performance of NSW public hospitals, October to December 2011. Admitted Patients. 2(4). Sydney (NSW); 2012.

Published March 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

Elective Surgery

Hospital Quarterly:

Performance of NSW public hospitals

October to December 2011

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 1%). Less surgery was performed in the urgent category (down 3%), although semi-urgent and non-urgent surgery increased by 5% and 6% respectively. Staged surgery decreased by 19% compared with the same quarter in 2010.

Most patients (92%) continued to receive their surgery on time. Compared to the same quarter one year ago, the percentage of urgent and semi-urgent patients receiving surgery on time improved, both up one percentage point. The percentage of non-urgent patients receiving surgery on time remained unchanged.

The median* waiting times have changed little since the same quarter in 2010 for patients needing urgent and semi-urgent surgical procedures (11 and 47 days respectively). The median waiting time for non-urgent procedures was 211 days, up by 6 days when compared with the same quarter in 2010.

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	Oct-Dec 2011	Oct-Dec 2010	The difference
Elective surgical procedures performed	51,432 procedures	50,810 procedures	+622 (+1%)
'Staged procedures' (including non-urgent cystoscopies)	3,311 staged	4,081 staged	-770 (-19%)
Elective surgery patients treated on time	92% on time	91% on time	+1 percentage point
Urgent elective surgery patients treated on time	94% on time	93% on time	+1 percentage point
Semi-urgent elective surgery patients treated on time	91% on time	90% on time	+1 percentage point
Non-urgent elective surgery patients treated on time	91% on time	91% on time	unchanged
Median* waiting time for non-urgent surgery	211 days	205 days	+6 (+3%)

* Median waiting time: time within which half of patients received surgery. Excludes staged procedures and non-urgent cystoscopy.

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 October to December 2011, the Waiting List Collection On-line System (WLCOS) recorded that 51,432 elective surgery procedures were completed in NSW public hospitals or facilities contracted by NSW hospitals. This is 7% lower than the 55,398 conducted in the previous quarter (in line with the usual seasonal pattern) but up 1% from the 50,810 surgical procedures completed in the same quarter last year (Figure 1).

Each year, there is a strong seasonal effect on the number of elective surgery procedures performed in NSW. The number of procedures falls sharply across all urgency categories in December and, to a greater extent, January, and peaks during the July to September quarter.

The results presented in this section and in Figure 1 exclude staged patients and non-urgent cystoscopy, unless otherwise stated.

Urgent surgery (category 1): There were 12,870 procedures completed, compared with 13,304 at the same time in 2010 (down 3%). Urgent procedures made up 25% of all completed elective surgery.

Figure 1: Total number of elective surgery procedures conducted, by urgency category, October 2009 to December 2011



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 and October to December 2011 on 16 January 2012. Data extracted for all previous quarters on 15 July 2011.

3

Semi-urgent surgery (category 2): There were 16,363 semi-urgent procedures completed, compared with 15,564 in the same quarter of 2010 (an increase of 5%). Semi-urgent procedures made up 32% of all completed elective surgery.

Non-urgent surgery (category 3): There were 18,888 procedures completed, compared with 17,861 in the same quarter in 2010 (an increase of 6%). Non-urgent procedures made up 37% of all completed elective surgery.

Staged surgery: There were 3,311 procedures, compared with 4,081 in the same quarter in 2010 (a decrease of 19%). Staged procedures made up 6% of all completed elective surgery.

Change over five years

The composition of surgical procedures completed by urgency category has changed greatly 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 November 2007 to 23% in November 2011.

Over the same period, non-urgent procedures have increased from 31% of all surgical procedures to 38%.

Figure 2: Patients who received elective surgery, by urgency category, by month, January 2007 to December 2011



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 and October to December 2011 on 16 January 2012. Data extracted for all previous quarters on 15 July 2011.

Patients admitted on time for elective surgery

In the October to December 2011 quarter, 92% 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), unchanged from the preceding quarter. A slight increase is evident when comparing this quarter with the same quarter in 2010, up one percentage point from 91%.

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, up one percentage point compared with the last quarter and the same quarter in 2010.

Semi-urgent surgery: 91% of patients were admitted within 90 days, up one percentage point compared with the last quarter and the same quarter in 2010.

Non-urgent surgery: 91% of patients were admitted within 365 days, similar to the same quarter in 2010.



Figure 3: Percentage of elective surgery patients treated within recommended waiting time, by urgency category, October 2009 to December 2011

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 and October to December 2011 on 16 January 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.

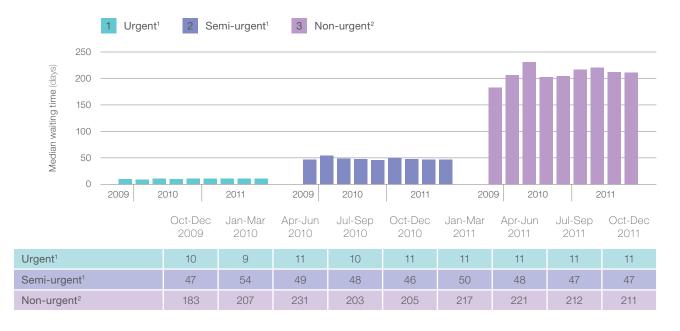
Urgent surgery: The median wait was 11 days – largely unchanged over the past two years, when the median wait time ranged from nine to 11 days.

Semi-urgent surgery: The median wait time for this category was 47 days – similar to the preceding two years.

Non-urgent surgery: The median wait time for this category was 211 days, six days more than the same quarter in 2010 (205 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 increased from 183 days in October to December 2009, peaking at 231 days in April to June 2010 before falling to 211 days 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 and October to December 2011 on 16 January 2012. Data extracted for all previous quarters on 15 July 2011.

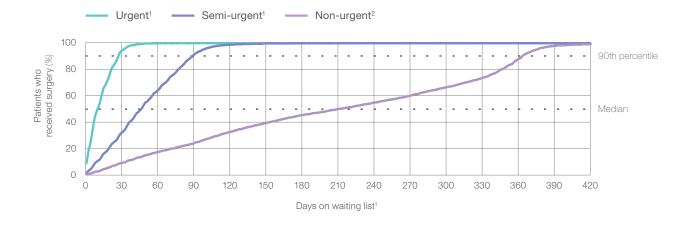
Cumulative wait time

Greater detail on how long people waited to be admitted for their elective surgery during October to December 2011 is presented in Figure 5.

The graph's slope indicates 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), October to December 2011



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 January 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, October to December 2011

	N	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	51,432	12,870	16,363	18,888	3,311		
Central Coast Local Health District (CCLHD)						
Gosford Hospital	1,506	308	512	533	153		
Wyong Hospital	865	113	356	350	46		
Total CCLHD	2,371	421	868	883	199		
Far West Local Health District (FWLH	HD)						
Broken Hill Base Hospital	301	65	139	79	18		
Total FWLHD	301	65	139	79	18		
Hunter New England Local Health D	istrict (HNELHE	D)					
Armidale and New England Hospital	257	43	129	77	8		
Belmont Hospital	570	93	244	203	30		
Calvary Mater Newcastle	268	153	95	15	5		
Cessnock District Hospital	330	61	180	81	8		
Gunnedah District Hospital	102	26	29	46	1		
Inverell District Hospital	63	15	20	28	0		
John Hunter Hospital	1,968	757	577	508	126		
Kurri Kurri District Hospital	423	52	105	266	0		
Maitland Hospital	616	146	234	220	16		
Manning Base Hospital	666	114	199	289	64		
Moree District Hospital	109	15	34	59	1		
Muswellbrook District Hospital	126	12	46	68	0		
Narrabri District Hospital	67	38	22	*	*		
Singleton District Hospital	127	21	40	65	1		
Tamworth Base Hospital	900	198	322	321	59		
Other HNELHD	195	24	65	104	2		
Total HNELHD	6,787	1,768	2,341	2,350	321		

HOSPITAL QUARTERLY: Elective Surgery October to December 2011 www.bhi.nsw.gov.au

	All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³
Illawarra Shoalhaven Local Health Dis	triat (ISI UD)				
Bulli District Hospital	120	26	30	63	0
Milton and Ulladulla Hospital	*	20	*	*	*
Shellharbour Hospital	795	72	199	524	0
Shoalhaven and District Memorial Hospital	684	110	199	404	44
	1,259	432	255	289	283
Wollongong Hospital Total ISLHD	2,857	432 640	200 610	1,280	327
		040	010	1,200	321
Mid North Coast Local Health District	(MNCLHD)				
Bellinger River District Hospital	57	*	21	27	*
Coffs Harbour Base Hospital	896	174	214	419	89
Kempsey Hospital	235	*	28	200	*
Macksville District Hospital	74	11	*	53	*
Port Macquarie Base Hospital	687	191	255	190	51
Other MNCLHD	243	28	79	93	43
Total MNCLHD	2,192	418	604	982	188
Murrumbidgee Local Health District (N	MLHD)				
Deniliquin Health Service	84	16	47	20	0
Griffith Base Hospital	241	71	83	71	16
Tumut Health Service	50	*	29	14	*
Wagga Wagga Base Hospital	1,134	297	342	467	28
Young Health Service	82	*	36	19	ŕ
Other MLHD	105	22	43	39	1
Total MLHD	1,695	406	580	630	45
Nepean Blue Mountains Local Health	District (NBM	ILHD)			
Blue Mountains District Anzac Memorial Hospital	102	15	35	52	C
Hawkesbury District Health Service	248	59	97	65	27
Lithgow Health Service	151	16	41	88	6
Nepean Hospital	1,323	405	440	451	27
Other NBMLHD	238	*	82	136	*
Total NBMLHD	2,062	495	695	792	60
Northern NSW Local Health District (N	INSWLHD)				
Ballina District Hospital	171	29	81	51	10
Casino and District Memorial Hospital	218	30	73	105	10
Grafton Base Hospital	447	134	111	180	22
Lismore Base Hospital	1,100	330	319	356	95
Maclean District Hospital	49	19	*	22	*
Murwillumbah District Hospital	543	66	143	280	54
The Tweed Hospital	819	247	268	200	104

Number of elective surgical procedures

	All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³
Northern Sydney Local Health Di					
Hornsby and Ku-Ring-Gai Hospital	540	81	164	267	28
Manly District Hospital	295	87	121	84	3
Mona Vale and District Hospital	352	62	74	189	27
Royal North Shore Hospital	1,546	468	492	513	73
Ryde Hospital	397	55	149	178	15
Total NSLHD	3,130	753	1,000	1,231	146
South Eastern Sydney Local Heal	th District (SESLI	HD)			
Prince of Wales Hospital	1,277	343	626	290	18
Royal Hospital for Women	549	235	225	88	-
St George Hospital	1,092	488	324	247	30
Sutherland Hospital	731	168	240	287	36
Sydney Hospital / Sydney Eye Hospital	1,198	217	336	645	(
Total SESLHD	4,847	1,451	1,751	1,557	88
South Western Sydney Local Hea	Ith District (SWSL	_HD)			
Bankstown / Lidcombe Hospital	1,287	206	365	531	18
Bowral and District Hospital	338	38	101	181	18
Campbelltown Hospital	1,057	118	307	448	184
Fairfield Hospital	615	63	113	412	2
Liverpool Hospital	1,833	648	589	530	66
Total SWSLHD	5,130	1,073	1,475	2,102	480
Southern NSW Local Health Distri	ict (SNSWI HD)				
Bateman's Bay District Hospital	178	*	20	147	
Bega District Hospital	330	85	80	158	-
Cooma Health Service	100	18	41	41	(
Goulburn Base Hospital	359	107	98	154	(
Moruya District Hospital	153	54	47	52	(
Queanbeyan Health Service	169	19	78	67	Į
Other SNSWLHD	23	14	*	*	(
Total SNSWLHD	1,312	297	364	619	12
St Vincent's Health Network (SVH					
	987	400	271	0.41	E
St Vincent's Hospital, Darlinghurst Total SVHN	987	420 420	271	241 241	55
		420	211	241	00
Sydney Children's Hospitals Netw					
Sydney Children's Hospital	760	201	229	325	Ę
The Children's Hospital at Westmead	1,622	396	519	618	89
Total SCHN	2,382	597	748	943	94

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	650	85	279	246	40	
Concord Hospital	2,051	428	534	737	352	
RPAH Institute of Rheumatology and Orthopaedics	377	33	52	286	6	
Royal Prince Alfred Hospital	2,795	1,054	981	504	256	
Total SYDLHD	5,873	1,600	1,846	1,773	654	
Western NSW Local Health District (WNSWLHD)						
Bathurst Base Hospital	393	112	123	140	18	
Cowra District Hospital	140	13	56	71	0	
Dubbo Base Hospital	781	133	223	362	63	
Forbes District Hospital	94	13	27	53	1	
Mudgee District Hospital	136	20	32	83	1	
Orange Base Hospital	749	152	273	266	58	
Parkes District Hospital	56	12	29	15	0	
Other WNSWLHD	*	*	*	*	*	
Total WNSWLHD	2,349	455	763	990	141	
Western Sydney Local Health District	(WSLHD)					
Auburn Hospital	766	137	225	400	4	
Blacktown Hospital	735	155	299	242	39	
Mount Druitt Hospital	474	69	219	183	3	
Westmead Hospital (all units)	1,803	758	557	385	103	
Total WSLHD	3,778	1,119	1,300	1,210	149	

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 January 2012.

The following table presents the percentages of elective surgery admissions within the clinically recommended time for each urgency category for October to December 2011. 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.

Percentage of patients treated on time

Appendix table 2: NSW on-time elective surgery performance, by hospital and local health district, October to December 2011

		r creentage of patients treated off time			
	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²	
New South Wales					
Total New South Wales	92	94	91	91	
		7	01	01	
Central Coast Local Health District (CC					
Gosford Hospital	88	99	84	86	
Wyong Hospital	96	97	95	97	
Total CCLHD	91	99	88	90	
Far West Local Health District (FWLHD)					
Broken Hill Base Hospital	95	98	91	100	
Total FWLHD	95	98	91	100	
Hunter New England Local Health Distr	ict (HNELHD)				
Armidale and New England Hospital	93	95	88	100	
Belmont Hospital	100	100	100	100	
Calvary Mater Newcastle	69	66	71	87	
Cessnock District Hospital	100	100	100	100	
Gunnedah District Hospital	96	88	97	100	
Inverell District Hospital	71	100	40	79	
John Hunter Hospital	88	92	86	85	
Kurri Kurri District Hospital	91	98	100	86	
Maitland Hospital	89	88	98	80	
Manning Base Hospital	95	99	99	91	
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	100	
Tamworth Base Hospital	80	90	75	80	
Other HNELHD	99	100	98	100	
Total HNELHD	90	91	90	89	

	/ III outegories	orgoni	oonn argont	nion argoni
Illawarra Shoalhaven Local Health District (15				
Bulli District Hospital	99	96	100	100
Milton and Ulladulla Hospital	*	*	*	*
Shellharbour Hospital	99	100	99	99
Shoalhaven and District Memorial Hospital	89	87	93	89
Wollongong Hospital	86	91	83	81
Total ISLHD	92	91	91	92
Mid North Coast Local Health District (MNCL	_HD)			
Bellinger River District Hospital	100	*	100	100
Coffs Harbour Base Hospital	75	89	79	68
Kempsey Hospital	95	*	93	96
Macksville District Hospital	96	100	*	94
Port Macquarie Base Hospital	85	92	87	75
Other MNCLHD	96	96	95	96
Total MNCLHD	84	91	86	80
Murrumbidgee Local Health District (MLHD)				
Deniliquin Health Service	99	100	98	100
Griffith Base Hospital	83	70	89	87
Tumut Health Service	76	*	69	100
Wagga Wagga Base Hospital	91	91	94	88
Young Health Service	100	*	100	100
Other MLHD	99	100	98	100
Total MLHD	90	88	93	90
Nepean Blue Mountains Local Health Distric				
Blue Mountains District Anzac Memorial Hospital		100	100	100
Hawkesbury District Health Service	53	90	37	45
Lithgow Health Service	100	100	100	100
•	89	99	88	
Nepean Hospital Other NBMLHD		*	94	80
Total NBMLHD	95	98	94 83	83
		50	00	00
Northern NSW Local Health District (NNSWL		100	05	100
Ballina District Hospital	98	100	95	100
Casino and District Memorial Hospital	99	97	99	99
Grafton Base Hospital	94	97	91	94
Lismore Base Hospital	90	88	89	93
Maclean District Hospital	100	100	*	100
Murwillumbah District Hospital	87	74	85	90
The Tweed Hospital	75	75	68	84
Total NNSWLHD	88	86	84	92

Percentage of patients treated on time

Semi-urgent¹ Non-urgent²

Urgent¹

All categories¹

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Northern Sydney Local Health District (NS	SLHD)			
Hornsby and Ku-Ring-Gai Hospital	97	98	95	99
Manly District Hospital	97	100	92	100
Mona Vale and District Hospital	100	100	100	99
Royal North Shore Hospital	95	95	95	96
Ryde Hospital	95	95	95	94
Total NSLHD	96	96	95	97
South Eastern Sydney Local Health Distric	t (SESLHD)			
Prince of Wales Hospital	92	91	94	90
Royal Hospital for Women	100	100	100	10
St George Hospital	86	88	88	8
Sutherland Hospital	93	90	93	9
Sydney Hospital / Sydney Eye Hospital	97	100	98	9
Total SESLHD	93	92	94	9
South Western Sydney Local Health Distric	ct (SWSLHD)			
Bankstown / Lidcombe Hospital	89	89	88	ę
Bowral and District Hospital	99	100	100	ç
Campbelltown Hospital	86	83	83	8
Fairfield Hospital	99	97	100	10
Liverpool Hospital	91	92	87	Ş
Total SWSLHD	91	91	88	9
Southern NSW Local Health District (SNSW	VLHD)			
Bateman's Bay District Hospital	98	*	95	9
Bega District Hospital	88	92	93	8
Cooma Health Service	97	94	95	1C
Goulburn Base Hospital	94	98	90	9
Moruya District Hospital	95	93	94	10
Queanbeyan Health Service	99	95	100	ç
Other SNSWLHD	100	100	*	
Total SNSWLHD	94	95	94	9
St Vincent's Health Network (SVHN)				
St Vincent's Hospital, Darlinghurst	91	94	89	8
Total SVHN	91	94	89	8
Sydney Children's Hospitals Network (SCH	N)			
Sydney Children's Hospital	95	97	93	9
The Children's Hospital at Westmead	86	98	82	8
The Children's Hospital at Westmead	00	00	02	C

Percentage of patients treated on time

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Sydney Local Health District (SYDLHD)				
Canterbury Hospital	89	99	84	93
Concord Hospital	98	99	97	98
RPAH Institute of Rheumatology and Orthopaedics	100	100	100	100
Royal Prince Alfred Hospital	100	100	100	98
Total SYDLHD	98	99	97	98
Western NSW Local Health District (WNSWLH	lD)			
Bathurst Base Hospital	95	96	98	93
Cowra District Hospital	99	100	98	100
Dubbo Base Hospital	96	95	92	98
Forbes District Hospital	100	100	100	100
Mudgee District Hospital	93	95	94	93
Orange Base Hospital	86	99	84	82
Parkes District Hospital	100	100	100	100
Other WNSWLHD	*	t	t	*
Total WNSWLHD	93	97	91	93
Western Sydney Local Health District (WSLHI	D)			
Auburn Hospital	91	91	83	95
Blacktown Hospital	95	97	92	98
Mount Druitt Hospital	87	99	85	85
Westmead Hospital (all units)	96	99	97	86
Total WSLHD	93	98	92	91

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 January 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.

Median waiting time (days)

Appendix table 3: NSW median elective surgery waiting time performance, by hospital and local health district, October to December 2011

	Me	Median waiting time (days)			
	Urgen	t1	Semi-urgent ¹	Non-urgent ²	
New South Wales					
Total New South Wales		11	47	211	
Central Coast Local Health District (CCLHD)					
Gosford Hospital		15	63	331	
Wyong Hospital		16	38	267	
Total CCLHD		15	50	303	
Far West Local Health District (FWLHD)					
Broken Hill Base Hospital		13	58	174	
Total FWLHD		13	58	174	
Hunter New England Local Health District (HNELH	D)				
Armidale and New England Hospital		21	78	250	
Belmont Hospital		13	49	163	
Calvary Mater Newcastle		21	72	232	
Cessnock District Hospital		11	20	80	
Gunnedah District Hospital		19	38	77	
Inverell District Hospital		27	93	362	
John Hunter Hospital		12	56	246	
Kurri Kurri District Hospital		8	5	201	
Maitland Hospital		13	39	239	
Manning Base Hospital		18	67	318	
Moree District Hospital		4	17	38	
Muswellbrook District Hospital		4	14	25	
Narrabri District Hospital		7	21	*	
Singleton District Hospital		8	21	33	
Tamworth Base Hospital		10	68	277	
Other HNELHD		15	34	84	
Total HNELHD		13	48	205	

Median waiting time (days)

	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Illawarra Shoalhaven Local Health District (ISLHD)			
Bulli District Hospital	11	36	190
Milton and Ulladulla Hospital	*	*	*
Shellharbour Hospital	19	50	221
Shoalhaven and District Memorial Hospital	15	53	321
Wollongong Hospital	8	70	341
Total ISLHD	10	56	273
Mid North Coast Local Health District (MNCLHD)			
Bellinger River District Hospital	*	36	58
Coffs Harbour Base Hospital	13	69	351
Kempsey Hospital	*	69	183
Macksville District Hospital	8	*	332
Port Macquarie Base Hospital	14	64	318
Other MNCLHD	22	54	288
Total MNCLHD	14	64	317
Murrumbidgee Local Health District (MLHD)			
Deniliquin Health Service	14	50	104
Griffith Base Hospital	25	64	343
Tumut Health Service	*	58	74
Wagga Wagga Base Hospital	16	53	313
Young Health Service	*	55	120
Other MLHD	9	30	49
Total MLHD	16	53	300
Nepean Blue Mountains Local Health District (NBMLHD)			
Blue Mountains District Anzac Memorial Hospital	7	20	18
Hawkesbury District Health Service	16	115	397
Lithgow Health Service	14	55	222
Nepean Hospital	11	62	328
Other NBMLHD	*	47	176
Total NBMLHD	11	62	272
Northern NSW Local Health District (NNSWLHD)			
Ballina District Hospital	8	50	66
Casino and District Memorial Hospital	14	36	70
Grafton Base Hospital	12	39	280
Lismore Base Hospital	13	56	310
Maclean District Hospital	7	*	43
Murwillumbah District Hospital	19	61	321
The Tweed Hospital	18	71	171
Total NNSWLHD	14	55	266

Median waiting time (days)

Semi-urgent¹ Non-urgent²

Urgent¹

	÷	-	÷
Northern Sydney Local Health District (NSLHD)			
Hornsby and Ku-Ring-Gai Hospital	8	33	104
Manly District Hospital	7	33	91
Mona Vale and District Hospital	4	10	46
Royal North Shore Hospital	7	43	125
Ryde Hospital	11	45	122
Total NSLHD	7	37	107
South Eastern Sydney Local Health District (SESLHD)			
Prince of Wales Hospital	12	40	240
Royal Hospital for Women	7	26	85
St George Hospital	13	52	281
Sutherland Hospital	17	62	306
Sydney Hospital / Sydney Eye Hospital	11	43	176
Total SESLHD	12	43	211
South Western Sydney Local Health District (SWSLHD)			
Bankstown / Lidcombe Hospital	16	52	153
Bowral and District Hospital	13	34	115
Campbelltown Hospital	21	65	261
Fairfield Hospital	8	36	251
Liverpool Hospital	12	50	233
Total SWSLHD	14	51	220
Southern NSW Local Health District (SNSWLHD)			
Bateman's Bay District Hospital	*	46	337
Bega District Hospital	11	63	344
Cooma Health Service	4	54	186
Goulburn Base Hospital	13	52	319
Moruya District Hospital	15	58	108
Queanbeyan Health Service	12	42	176
Other SNSWLHD	9	*	*
Total SNSWLHD	13	54	322
St Vincent's Health Network (SVHN)			
St Vincent's Hospital, Darlinghurst	5	37	105
Total SVHN	5	37	105
Sydney Children's Hospitals Network (SCHN)			
Sydney Children's Hospital	7	38	122
The Children's Hospital at Westmead	6	50	134
Total SCHN	7	46	130
			1

18

Median waiting time (days)

Urgent¹

Semi-urgent¹ Non-urgent²

Canterbury Hospital1362Concord Hospital846RPAH Institute of Rheumatology and Orthopaedics624Royal Prince Alfred Hospital620Total SYDLHD732Western NSW Local Health District (WNSWLHD)Bathurst Base Hospital1255Cowra District Hospital551Dubbo Base Hospital732Mudgee District Hospital732Mudgee District Hospital1255Parkes District Hospital1255Parkes District Hospital1255Other WNSWLHD11Total WNSWLHD948Blacktown Hospital1448Blacktown Hospital1144Mount Druitt Hospital1144Mount Druitt Hospital1254				
Concord Hospital846RPAH Institute of Rheumatology and Orthopaedics624Royal Prince Alfred Hospital620Total SYDLHD732Western NSW Local Health District (WNSWLHD)Bathurst Base Hospital1255Cowra District Hospital1255Dubbo Base Hospital1335Forbes District Hospital732Mudgee District Hospital1255Parkes District Hospital1255Parkes District Hospital1144Orange Base Hospital1522Other WNSWLHD1114Western Sydney Local Health District (WSLHD)Western Sydney Local Health District (WSLHD)11Auburn Hospital1144Blacktown Hospital1144Mount Druitt Hospital1254Westmead Hospital (all units)1036	Sydney Local Health District (SYDLHD)			
RPAH Institute of Rheumatology and Orthopaedics624Royal Prince Alfred Hospital620Total SYDLHD732Western NSW Local Health District (WNSWLHD)7Bathurst Base Hospital1255Cowra District Hospital1255Dubbo Base Hospital1335Forbes District Hospital732Mudgee District Hospital1144Orange Base Hospital1255Parkes District Hospital1111Other WNSWLHD1111Western Sydney Local Health District (WSLHD)11Auburn Hospital1144Mount Druitt Hospital1144Mount Druitt Hospital1144Westmead Hospital1136	Canterbury Hospital	13	62	273
Royal Prince Alfred Hospital620Total SYDLHD732Western NSW Local Health District (WNSWLHD)Bathurst Base Hospital1255Cowra District Hospital1255Cowra District Hospital3835Forbes District Hospital3835Forbes District Hospital3449Orange Base Hospital1255Parkes District Hospital3522Other WNSWLHD11Total WNSWLHD948Blacktown Hospital1448Muburn Hospital1144Mount Druitt Hospital1254	Concord Hospital	8	46	99
Total SYDLHD732Western NSW Local Health District (WNSWLHD)Bathurst Base Hospital1255Cowra District Hospital1255Dubbo Base Hospital835Forbes District Hospital732Mudgee District Hospital732Mudgee District Hospital1255Parkes District Hospital1255Parkes District Hospital1255Other WNSWLHD11Total WNSWLHD948Western Sydney Local Health District (WSLHD)1144Muburn Hospital1144Mount Druitt Hospital1144Mount Druitt Hospital1036	RPAH Institute of Rheumatology and Orthopaedics	6	24	27
Western NSW Local Health District (WNSWLHD)Bathurst Base Hospital1255Cowra District Hospital551Dubbo Base Hospital835Forbes District Hospital732Mudgee District Hospital449Orange Base Hospital1255Parkes District Hospital1255Parkes District Hospital1255Other WNSWLHD11Total WNSWLHD11Musetern Sydney Local Health District (WSLHD)1448Auburn Hospital1144Mount Druitt Hospital1254Westmead Hospital (all units)1036	Royal Prince Alfred Hospital	6	20	43
Bathurst Base Hospital1255Cowra District Hospital51Dubbo Base Hospital8Forbes District Hospital7Mudgee District Hospital4Orange Base Hospital12Orange Base Hospital12Orange Base Hospital12Other WNSWLHD11Total WNSWLHD9Western Sydney Local Health District (WSLHD)Auburn Hospital11Blacktown Hospital11Mutur Druitt Hospital11Mutur Druitt Hospital11Mount Druitt Hospital (all units)10Mount Hospital (all units)10	Total SYDLHD	7	32	77
Cowra District Hospital551Dubbo Base Hospital835Forbes District Hospital732Mudgee District Hospital4449Orange Base Hospital1255Parkes District Hospital522Other WNSWLHD11Total WNSWLHD948Western Sydney Local Health District (WSLHD)1144Auburn Hospital1148Blacktown Hospital (all units)1036	Western NSW Local Health District (WNSWLHD)			
Dubbo Base Hospital3835Forbes District Hospital732Mudgee District Hospital4449Orange Base Hospital1255Parkes District Hospital522Other WNSWLHD11Total WNSWLHD948Western Sydney Local Health District (WSLHD)1448Auburn Hospital1144Blacktown Hospital1144Mount Druitt Hospital (all units)1036	Bathurst Base Hospital	12	55	278
Forbes District Hospital32Mudgee District Hospital44Orange Base Hospital12Orange Base Hospital12Parkes District Hospital55Parkes District Hospital15Other WNSWLHD11Total WNSWLHD9Western Sydney Local Health District (WSLHD)Auburn Hospital11Blacktown Hospital11Mount Druitt Hospital (all units)10Mestmead Hospital (all units)10	Cowra District Hospital	5	51	166
Mudgee District Hospital449Orange Base Hospital1255Parkes District Hospital522Other WNSWLHD11Total WNSWLHD948Western Sydney Local Health District (WSLHD)Auburn Hospital1144Blacktown Hospital1144Mount Druitt Hospital (all units)1036	Dubbo Base Hospital	8	35	259
Orange Base Hospital1255Parkes District Hospital522Other WNSWLHD11Total WNSWLHD948Western Sydney Local Health District (WSLHD)1448Auburn Hospital1144Blacktown Hospital1144Mount Druitt Hospital (all units)1036	Forbes District Hospital	7	32	165
Parkes District Hospital522Other WNSWLHD11Total WNSWLHD948Western Sydney Local Health District (WSLHD)1448Auburn Hospital1144Blacktown Hospital1144Mount Druitt Hospital (all units)1036	Mudgee District Hospital	4	49	256
Other WNSWLHDttTotal WNSWLHD948Western Sydney Local Health District (WSLHD)1448Auburn Hospital1144Blacktown Hospital1144Mount Druitt Hospital (all units)1036	Orange Base Hospital	12	55	347
Total WNSWLHD948Western Sydney Local Health District (WSLHD)11448Auburn Hospital11448Blacktown Hospital11144Mount Druitt Hospital (all units)1036	Parkes District Hospital	5	22	31
Western Sydney Local Health District (WSLHD)Auburn Hospital1448Blacktown Hospital1144Mount Druitt Hospital1254Westmead Hospital (all units)1036	Other WNSWLHD	t	†	*
Auburn Hospital1448Blacktown Hospital1144Mount Druitt Hospital1254Westmead Hospital (all units)1036	Total WNSWLHD	9	48	272
Blacktown Hospital1144Mount Druitt Hospital1254Westmead Hospital (all units)1036	Western Sydney Local Health District (WSLHD)			
Mount Druitt Hospital1254Westmead Hospital (all units)1036	Auburn Hospital	14	48	253
Westmead Hospital (all units) 10 36	Blacktown Hospital	11	44	127
	Mount Druitt Hospital	12	54	256
Total WSLHD 11 42	Westmead Hospital (all units)	10	36	128
	Total WSLHD	11	42	182

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 January 2012.

Download our reports

The report, *Hospital Quarterly: Performance of NSW public hospitals, October to December 2011* and related reports are available at www.bhi.nsw.gov.au

The suite of products includes:

- Three core modules on Admitted Patients, Elective Surgery and Emergency Departments
- *Performance Profiles: Elective surgery* (activity and performance reports for more than 80 hospitals and NSW as a whole)
- *Performance Profiles: Emergency department care* (activity and performance reports for EDs in 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.

To contact the Bureau

Telephone: +61 2 8644 2100 Fax: +61 2 8644 2119 Email: enquiries@bhi.nsw.gov.au Postal address: PO Box 1770 Chatswood New South Wales 2057 Australia Web: www.bhi.nsw.gov.au

Copyright Bureau of Health Information 2012

State Health Publication Number: (BHI) 120024 ISSN 1838-3238

Suggested citation: Bureau of Health Information. Hospital Quarterly: Performance of NSW public hospitals, October to December 2011. Elective Surgery. 2(4). Sydney (NSW); 2011.

Published March 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.