

# At a glance

## Hospital Quarterly: Performance of NSW Public Hospitals

April to June 2010

Welcome to the Bureau of Health Information's inaugural issue of *Hospital Quarterly* which has been designed to provide information on the performance of NSW public hospitals. *Hospital Quarterly* will be published every three months.

This issue sets the tone for future issues with information on patients who were admitted to hospital, underwent elective surgery or attended

emergency departments. It charts how hospitals are performing, how use of hospitals has changed over time and how area health services and public hospitals compare with each other.

This issue of *Hospital Quarterly* includes information about 400,000 admitted patient episodes of care and half a million emergency department attendances, as well as emergency department and elective surgery waiting times from April to June 2010.

With a special focus on emergency department care, this issue includes feedback from almost 21,000 patients treated in NSW emergency departments to gain insights on how patients rated their care and how emergency departments compared on issues that mattered most to patients. Staff courtesy, completeness of care and waiting times mattered most to the people who responded to the survey.

## Fast facts

From April to June 2010...	For the same period last year...	The difference...
There were 400,592 admitted patient episodes	388,391 episodes	12,201 episodes (+3.1%)
acute admitted patients stayed an average length of 3.4 days	3.5 days	0.1 days (-2.9%)
18,118 babies were born	17,460 babies	658 babies (+3.8%)
The proportion of elective surgery patients treated 'on time' was 87 per cent	88%	1% drop
There were 495,863 visits to NSW emergency departments	501,489 visits	5,626 visits (-1.1%)
122,200 people travelled to the emergency department by ambulance	121,306 people	894 people (+0.7%)
68 per cent of people arriving by ambulance were transferred into the care of emergency department staff within the 30 minute target	71%	3% drop
There were 113,526 admissions from emergency departments	111,119 admissions	2,407 admissions (+2.2%)
72 per cent of people admitted from the emergency department arrived on the ward within the target of 8 hours of starting treatment	73%	1% drop

### In NSW public hospitals during April, May and June 2010, on average for each day...

5,449 people attended an emergency department
1,247 people were admitted from an emergency department
4,402 people were discharged from hospital
199 babies were born

# Elective surgery

Because elective operations and procedures need to be planned in advance, people requiring these procedures wait for care. People on the booking system should be admitted to hospital for surgery within the maximum time (in days) recommended by their surgeon. For April to June 2010, the percentage of patients admitted for elective surgery in the time frame recommended by the referring surgeon differed across urgency categories (Figure 1).

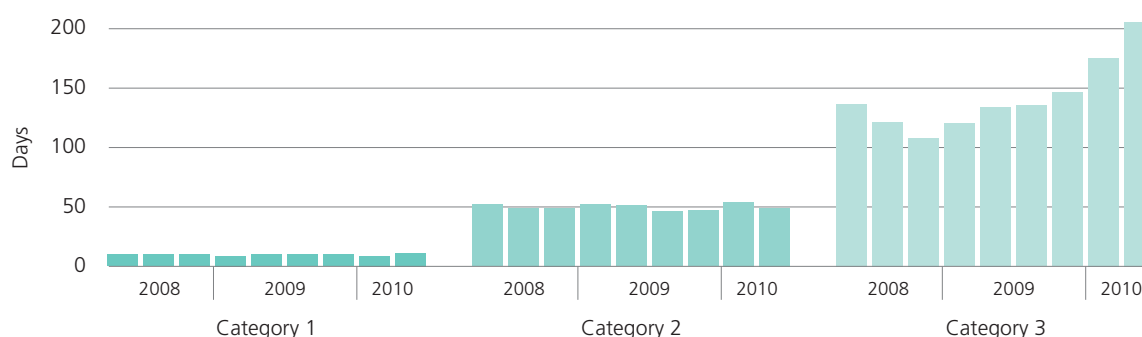
- Patients from the highest priority category (category 1) were most likely to be admitted within the recommended timeframe with 91 per cent admitted within 30 days

- Most patients from the intermediate priority category (category 2) were admitted within the recommended timeframe with 85 per cent admitted within 90 days
- Most patients from the lowest priority category (category 3) were admitted within the recommended timeframe with 86 per cent admitted within 365 days.

There are principal referral and major acute hospitals where almost all elective surgery patients across all urgency categories are seen in the recommended time. These hospitals include: Concord Hospital, Dubbo Base Hospital, Manly District Hospital, Royal Hospital for Women and Royal Prince Alfred Hospital.

Figure 1: Per cent of elective surgery patients seen in recommended waiting time and median waiting time (days), by urgency category, April 2008 to June 2010

	Apr-Jun 2008	Jul-Sept 2008	Oct-Dec 2008	Jan-Mar 2009	Apr-Jun 2009	Jul-Sept 2009	Oct-Dec 2009	Jan-Mar 2010	Apr-Jun 2010
All categories	87%	91%	90%	90%	88%	90%	89%	87%	87%
Category 1	92%	93%	92%	91%	90%	91%	93%	93%	91%
Category 2	75%	81%	81%	83%	83%	86%	85%	80%	85%
Category 3	95%	96%	95%	94%	91%	92%	89%	88%	86%



**Note:** Patients treated on time refers to the per cent of patients that are admitted for elective surgery in the time frame recommended by the referring surgeon.

**Note:** Median waiting time is the number of days which the patient, who is in the middle of the wait list of patients, waited to be admitted.

**Source:** Waiting List Collection On-line System, NSW Health. Data extracted on the 14 July 2010.

# Emergency departments

From April to June 2010, there were almost half a million visits to public hospital emergency departments across NSW. Demand on emergency departments is down slightly from the two year high during the 2009 swine flu pandemic.

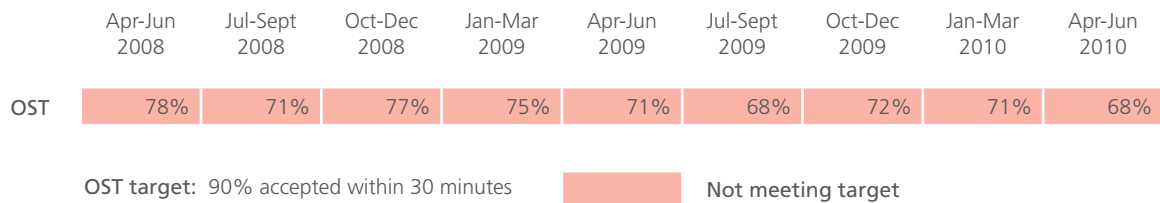
Most patients received treatment and then left the emergency department (68%) but about a quarter (23%) were treated then admitted to hospital. The remaining patients left without or before completing treatment, died in the

emergency department or were transferred before receiving treatment.

## Ambulance arrivals

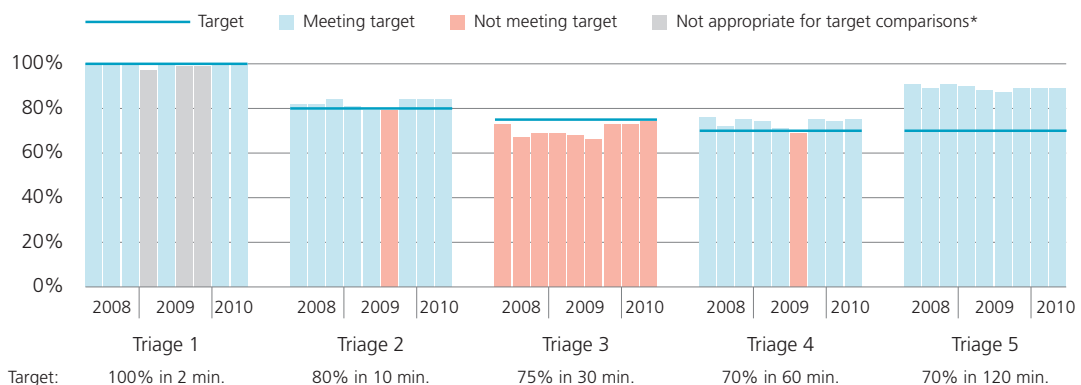
From April to June 2010, 122,200 patients arrived in emergency department by ambulance. During this period, 68 per cent of patients were accepted into the care of the emergency department within 30 minutes of the ambulance arriving (Figure 2). The NSW target is 90 per cent.

Figure 2: Off stretcher performance (OST) in NSW public hospital emergency departments, April to June 2010



Source: Ambulance off stretcher time data from Ambulance Service, NSW. Data provided 23 July 2010.

Figure 3: Triage to treatment targets in NSW emergency departments, April 2008 to June 2010



(\*) Emergency department records recorded this hospital as having below 100 per cent triage 1 performance (i.e. started to receive treatment within two minutes of being triaged). An investigation by the NSW Department of Health concluded that these electronic patient records contained data entry errors and all patients received treatment within two minutes of being triaged. The Bureau has reported the performance using electronic data in the NSW Health Information Exchange.

Source: Health Information Exchange, NSW Health. Data extracted on 16 July 2010.

*"Hospital Quarterly has been designed to provide timely, accurate and comparable information on the performance of public hospitals in NSW. Future issues to follow every three months, present a core set of statistics so that efforts to improve care can be monitored over time."*

Patients in emergency departments are assessed and assigned a triage category according to how sick they are. There are national targets that specify how long patients in an emergency department should wait from the time they are first assessed (or triaged) to

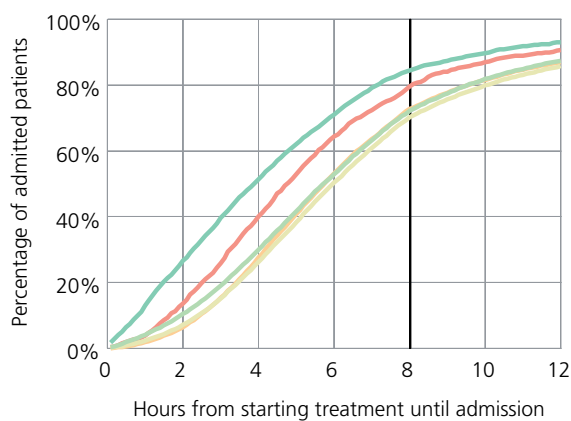
the time they receive treatment, depending on their triage category.\*

From April to June 2010, NSW patients were seen in the recommended timeframe for all categories except triage category 3 where 74 per cent of patients were seen in the recommended time frame (Figure 3). The target for triage category 3 is 75 per cent of patients beginning treatment within 30 minutes from the time they are first assessed (or triaged).

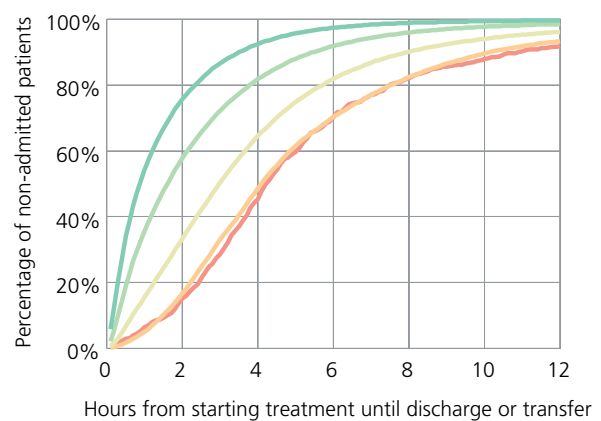
There are emergency departments in principal referral and major acute hospitals such as Bankstown/Lidcombe Hospital, Blacktown

Figure 4: Waiting times from treatment to admission, discharge or transfer by triage, April to June 2010

Percentage of patients who were treated and admitted by time and triage category<sup>1</sup>



Percentage of patients who were treated and discharged or transferred by time and triage category<sup>1</sup>



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

**Emergency Admission Performance (EAP)** Target: 80% admitted in 8 hours

72% of admitted patients were transferred from the emergency department to a ward or operating suite within 8 hours of starting treatment.

1. All unplanned and pre-arranged medical attendances excluding those without a recorded triage category, treatment time, or departure time; Source: Health Information Exchange, NSW Health. Data extracted on 16 July 2010.

\* A registered nurse assigns people to a 'triage category' when they arrive in the emergency department depending on the urgency that they require care. Triage category is a five-point scale where '1' is most urgent and '5' is least urgent.

Hospital, Campbelltown Hospital, Concord Hospital, Hornsby and Ku-Ring-Gai Hospital, John Hunter Hospital, Liverpool Hospital, Manly District Hospital, Mona Vale and District Hospital, Royal North Shore Hospital, Shoalhaven and District Memorial Hospital, Sutherland Hospital, Sydney Eye Hospital, Sydney Eye Hospital and Wagga Wagga Base Hospital meeting the triage targets for all categories; some area health services perform closer to the targets than others.

### Time to discharge or admission

From April to June 2010, 72 per cent of patients were treated in an emergency department and admitted to a hospital ward, intensive care unit or operating theatre within eight hours of the commencement of treatment (Figure 4, Figure 5). The target for this performance measure is 80 per cent within 8 hours.

This issue of *Hospital Quarterly* includes new information on the time taken to leave the emergency department (starting from when treatment begins) for those emergency patients who completed treatment but who were not admitted. There is no target for this performance measure.

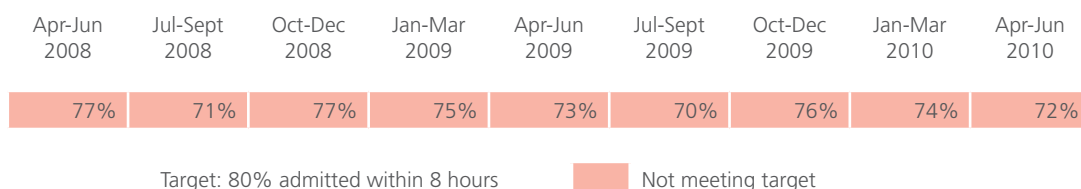
### Want to learn about care in emergency departments in your area?

Information on volume, waiting times and care experiences in 66 emergency departments across NSW is available from the Bureau of Health Information at [www.bhi.nsw.gov.au](http://www.bhi.nsw.gov.au)

The information profiled for each of 66 emergency departments includes:

- Number and types of patients who receive treatment
- Waiting times for treatment
- Waiting times from treatment to admission or discharge
- Patient ratings of overall care, staff courtesy, completeness of care and waiting times
- Performance comparisons relative to one year ago.

Figure 5: Emergency admission performance (EAP) in NSW emergency departments, April 2008 to June 2010



**Note:** Numbers and percentages might differ slightly from those previously reported by the NSW Department of Health's Quarterly Hospital Performance Report due to differences in when data was extracted from the emergency department information systems. The Bureau also used a different approach to calculating performance information from hospitals transitioning to the new emergency department information system (see page 19 for more information).

**Source:** Health Information Exchange, NSW Health. Data extracted on 16 July 2010.

# Patient experiences with care

By analysing data from the NSW Health Patient Survey 2009, the Bureau determined patients who completed the survey rated their care as excellent (26%), very good (32%), good (25%), fair (12%) or poor (5%), see [Figure 6](#).

Care experiences that underlie excellent and fair or poor ratings by patients are remarkably similar. When healthcare professionals do well in providing courteous, complete and timely care, then patients offer high ratings. When healthcare professionals do poorly in those areas, patients offer negative ratings of overall quality of care.

The key areas influencing these patient ratings of excellent or fair and poor overall care in emergency departments are:

- courtesy of staff
- completeness of care
- waiting times

## Patient experiences in NSW emergency departments, 2009

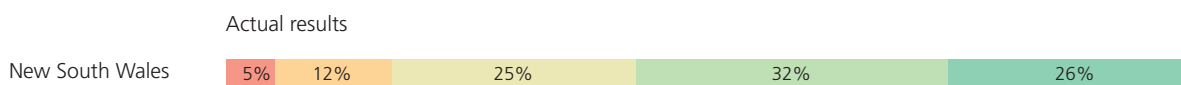
Emergency departments with higher or lower patient ratings of overall care are spread across NSW and across the different hospital types ([Figure 7](#)).

Figure 6: Patient experiences in NSW emergency departments, 2009

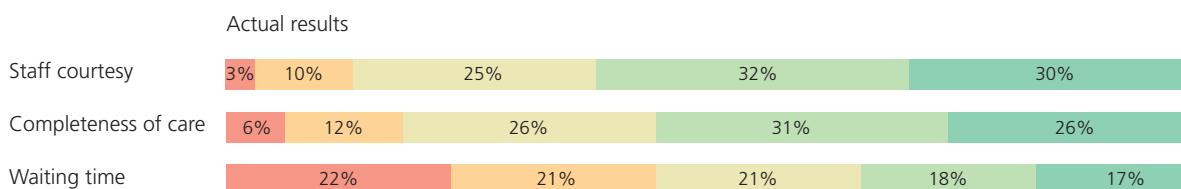
Key to patient ratings:



### Overall patient ratings of emergency department care



### Patient ratings of care experiences that matter most<sup>1</sup>

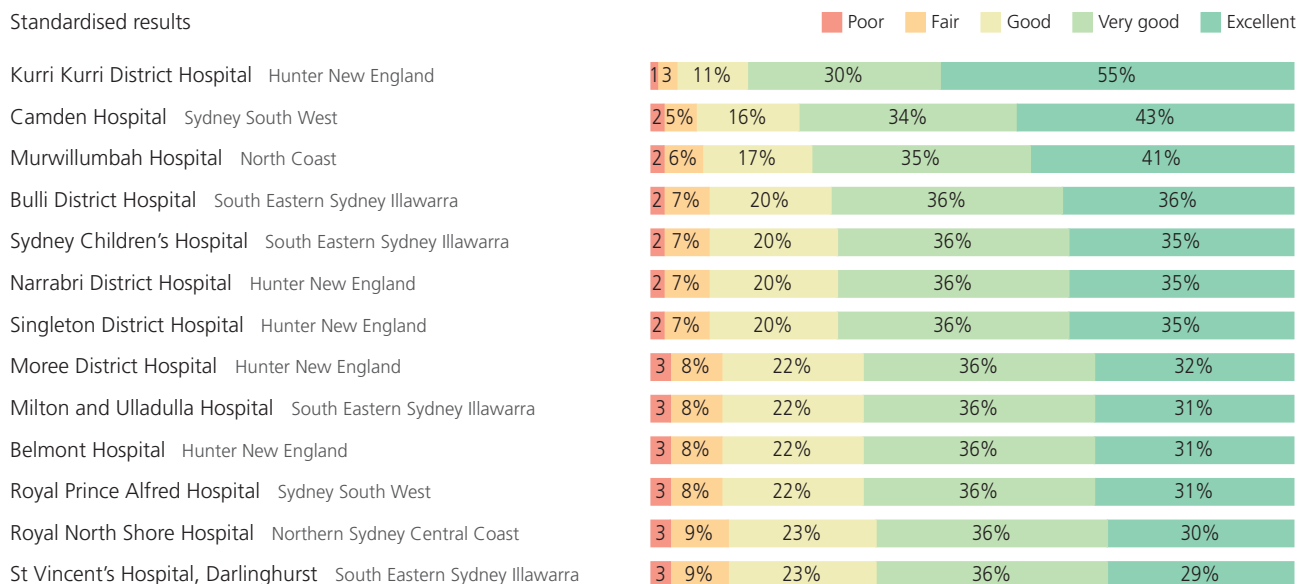


1. Care experiences that matter most are based on analysis of all emergency department respondents to the NSW Health Patient Survey 2009.

Source: Emergency department module of the NSW Health Patient Survey 2009.

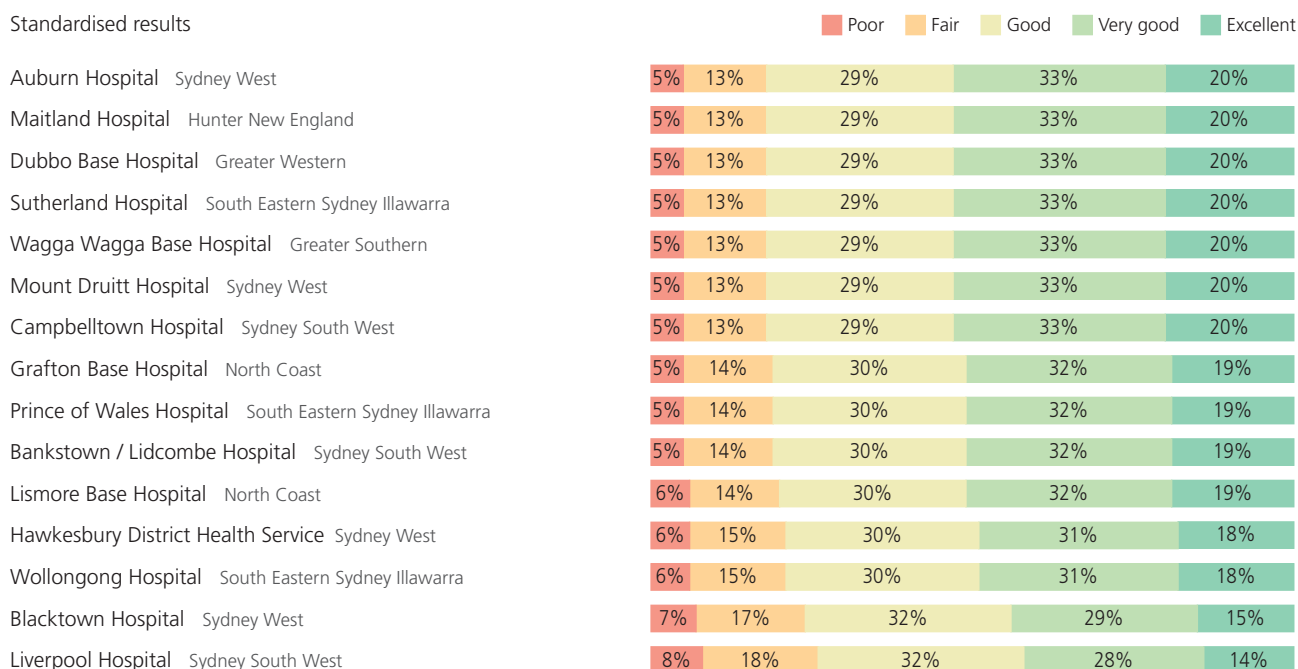
Figure 7: Comparisons of standardised ratings of patients' care experiences in emergency departments, February 2009

### Public hospitals with higher patient ratings



All other large public hospitals\* in NSW (not shown) were rated lower than the hospitals in the graph above and higher than the hospitals in the graph below.

### Public hospitals with lower patient ratings



**Note:** Standardised results: To account for differences between hospitals in the types of patients served, values are standardised for age, gender, health status, education, language, socio-economic status, days in bed for illness or injury in February 2009, times in hospital overnight in past six months and severity of pain (if any).

**Note:** Seven hospitals were similarly rated by patients and therefore all have been included in the list of hospitals with lower patient ratings

(\* Large public hospitals includes all NSW hospitals comprising the peer groups of principal referral, paediatric specialist, ungrouped acute/tertiary referral, major metropolitan, major non-metropolitan and district groups 1 and 2.

**Source:** Emergency department module of the 2009 NSW Health Patient Survey.

## Download the report

The report, *Hospital Quarterly: Performance of NSW Public Hospitals, April to June 2010* and related reports are available at [www.bhi.nsw.gov.au](http://www.bhi.nsw.gov.au)

The suite of products includes:

- *Hospital Quarterly: Performance of NSW Public Hospitals, April to June 2010*
- *Special feature on emergency department care* (Performance and activity reports for NSW and emergency departments in 66 hospitals)
- *At a Glance*
- *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 informs efforts to increase its beneficial impact on the health and wellbeing of the people of NSW.

The Bureau is an independent, board-governed organisation established by the NSW Government to be the leading source of information on the performance of the public health system in NSW.

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