

Emergency Departments

Hospital Quarterly: Performance of NSW public hospitals

April to June 2012

More than half a million patients attended NSW public hospital emergency departments (EDs) during April to June 2012, 7% more than the same quarter in 2011. The typical annual pattern sees ED attendances lowest during the April to June quarter, however, this year there has also been an unexpected increase in ED attendances since the January to March quarter.

The median times to start treatment are unchanged across all triage categories compared to the same quarter one year ago, except for triage 2 where the time to start treatment was one minute longer this quarter. The 95th percentile times to start treatment

have increased by two minutes (triage 2), six minutes (triage 3), six minutes (triage 4), but decreased by eight minutes for triage 5.

The January to March 2012 issue of *Hospital Quarterly* saw the introduction of the National Emergency Access Target (NEAT) which measures the percentage of patients who left the ED within four hours of presentation. In this quarter, 58% of all patients left the ED within four hours, similar to the same quarter one year ago. The NSW 2012 target is 69%. [See page 2](#) for more detail on the NEAT.

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

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During the quarter	Apr-Jun 2012	Apr-Jun 2011	The difference
Visits to NSW emergency departments	546,032 visits	511,780 visits	+34,252 (+7%)
People travelling to NSW EDs by ambulance	137,090 people	128,011 people	+9,079 (+7%)
People travelling by ambulance that were transferred into the care of ED staff within 30 minutes	63% in 30 minutes	65% in 30 minutes	-2 percentage points
Emergency attendances that were categorised as triage 2	54,876 attendances	43,950 attendances	+10,926 (+25%)
Median time to start treatment for triage 2 patients	8 minutes	7 minutes	+1 minute
People leaving the ED within four hours of presentation (NEAT)	58% in four hours	58% in four hours	unchanged
Admissions to hospital from NSW EDs	151,896 admissions	142,963 admissions	+8,933 (+6%)

New developments in ED performance reporting

National Health Reform

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

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

The National Emergency Access Target

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

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

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

What we changed

In line with these national developments, in the January to March 2012 issue of *Hospital Quarterly*, the Bureau changed how it reports the time from presentation until leaving the ED.

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

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

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

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

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

Emergency department journeys

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

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

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

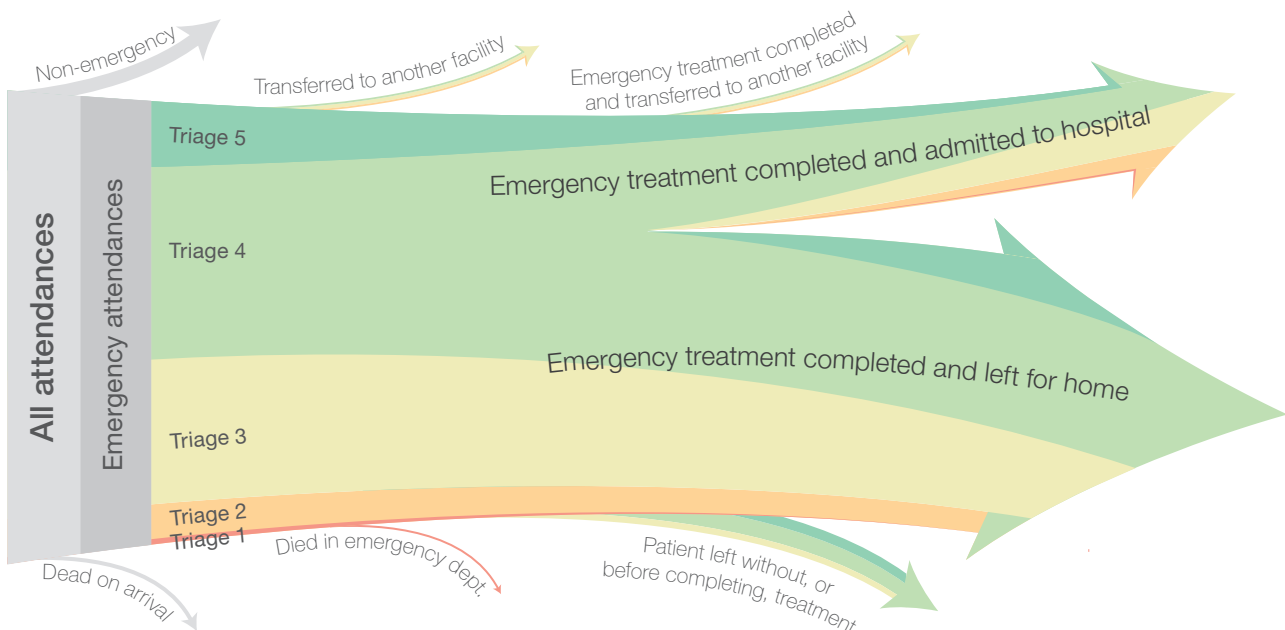
What happens next depends on the clinical needs of the patients. Patients from the most urgent triage categories (triage categories 1 and 2) are given priority and care typically begins immediately upon arrival. Patients from the less urgent triage categories (3 to 5) typically complete triage and administrative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

The majority of patients leave the ED after their treatment is complete or when they are admitted to hospital. Some patients are transferred to other hospitals or choose not to wait to begin or complete treatment. The journeys of all these patients during the April to June 2012 quarter are presented in this report and are summarised in [Figure 1](#).

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

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

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



Arriving at the emergency department

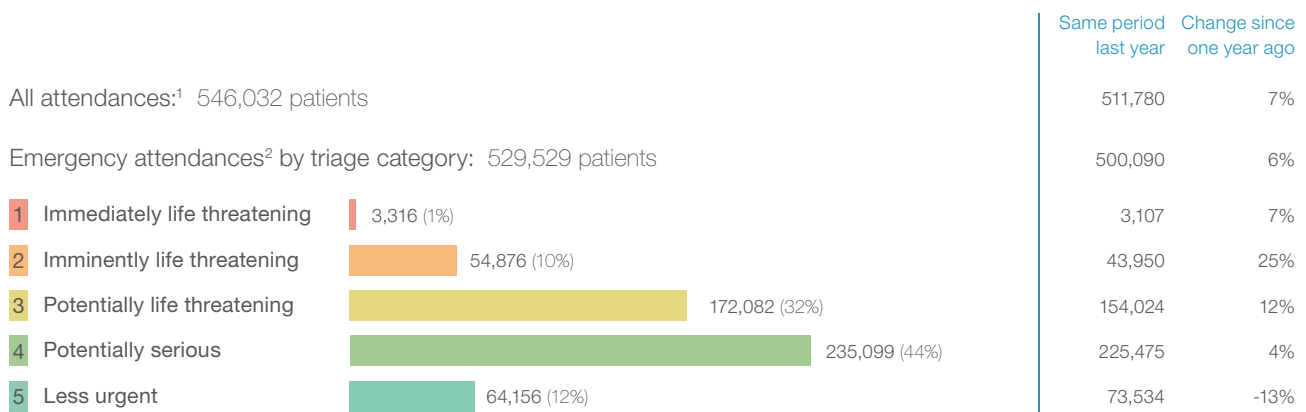
Emergency attendances this quarter

There were more than half a million attendances at NSW EDs during April to June 2012 (Figure 2). While almost all (97%) of these visits were considered ‘*emergency attendances*’, 16,503 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 similar to the same quarter last year.

A breakdown of emergency attendances figures shows that 44% were categorised as potentially serious (triage 4), 32% were categorised as potentially life threatening (triage 3), 12% were in the lowest urgency category (triage 5) and 10% were imminently life threatening (triage 2). Patients whose condition was judged to be immediately life threatening (triage 1) accounted for less than 1% of all people triaged in NSW EDs.

The greatest increase was seen in the imminently life threatening category (triage 2), with presentations 25% higher than the same quarter last year.

Figure 2: Attendances at NSW emergency departments, April to June 2012



1. All emergency and non-emergency attendances at the emergency department (ED).
 2. All attendances that have a triage category and are coded as emergency presentations or unplanned return visits.
 Note: All percentages rounded to whole numbers and therefore percentages may not add to 100%.
 Note: Emergency department activity includes 89 facilities for which electronic data are reported. This covers approximately 85% of NSW emergency department activity.
 Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

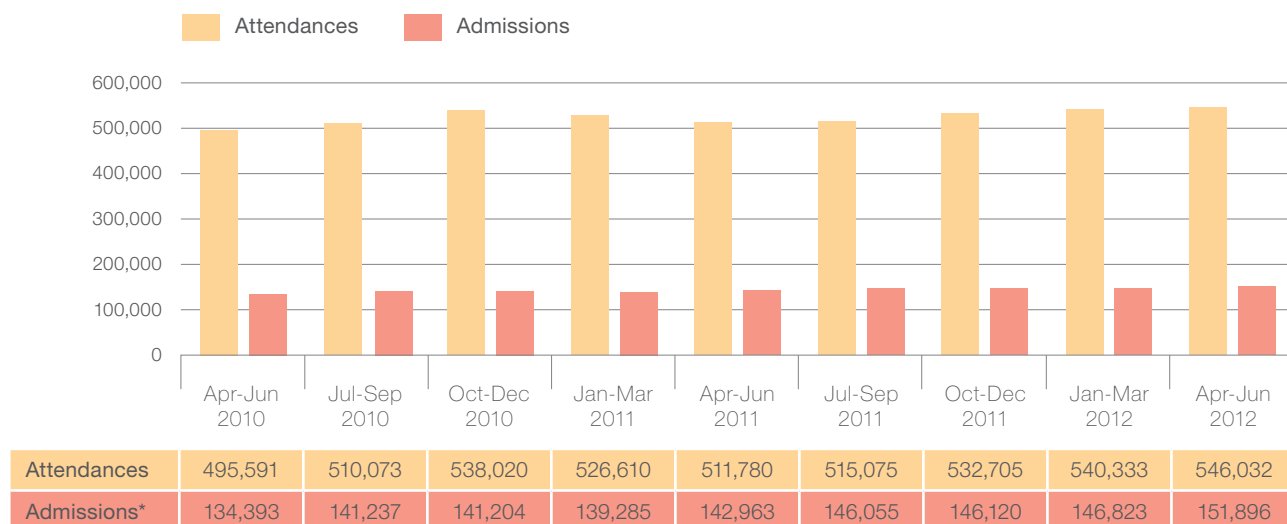
Emergency attendances and admissions over time

There is a strong seasonal effect on ED attendances with the typical annual pattern seeing ED attendance numbers highest during the October to December quarter, and lowest during the April to June quarter (Figure 3). This year there has been an unexpected increase in ED attendances since the January to March quarter.

This quarter there were 546,032 ED attendances. This is 7% higher than the same quarter one year ago (511,780) and 10% higher than the same period two years ago (495,591) (Figure 3).

The number of admissions from the ED has also been increasing. This quarter there were 151,896 admissions. This is 6% higher than the same quarter one year ago (142,963) and 13% higher than the same quarter two years ago (134,393).

Figure 3: Attendances at, and admissions from, NSW emergency departments, April 2010 to June 2012



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

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

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

Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

Arrivals by ambulance and off-stretcher time this quarter

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

In the April to June 2012 quarter, almost one-quarter (25%) of all people who attended NSW EDs arrived by ambulance, a total of 137,090 patients (Figure 4). This quarter, 63% of these patients were transferred into the care of ED staff within 30 minutes.

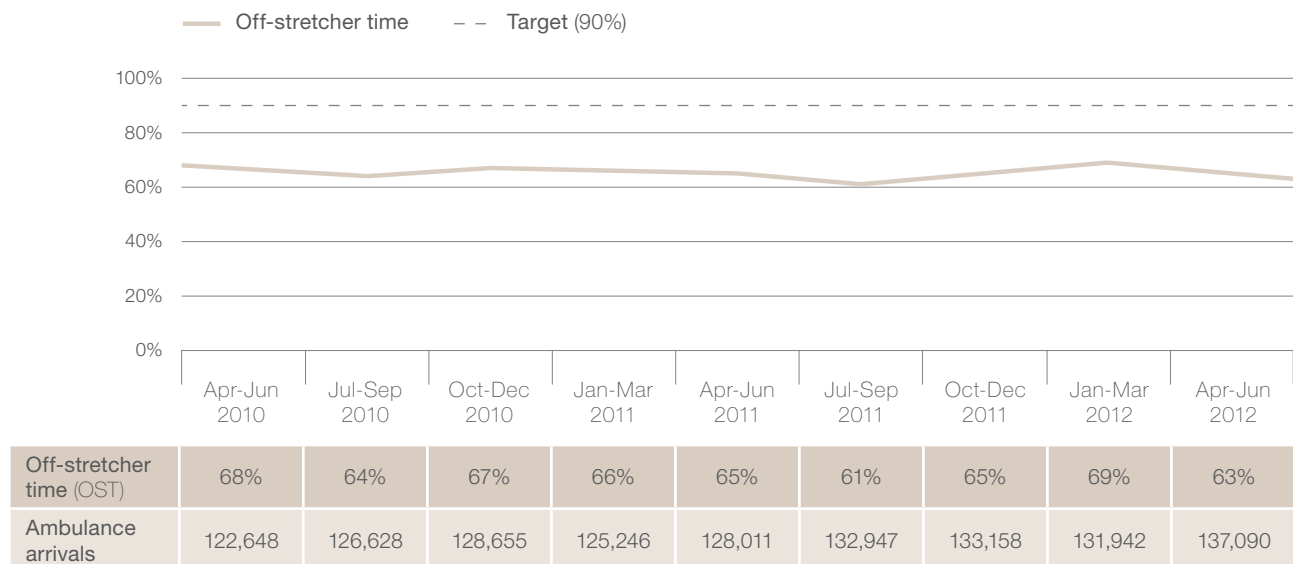
Arrivals by ambulance and off-stretcher time over time

The number of ambulance arrivals has increased compared with the same quarter one year ago, up 7%, and up 12% compared with the same quarter two years ago. This is comparable to the increase in emergency attendances (up 7% and 10% respectively).

The percentage of patients transferred into the care of ED staff within 30 minutes was lower than the same quarter one year ago (65%) and the same quarter two years ago (68%).

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

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



Source: Data provided by NSW Ambulance Service on 27 July 2012.

Time to treatment performance

Time to treatment this quarter

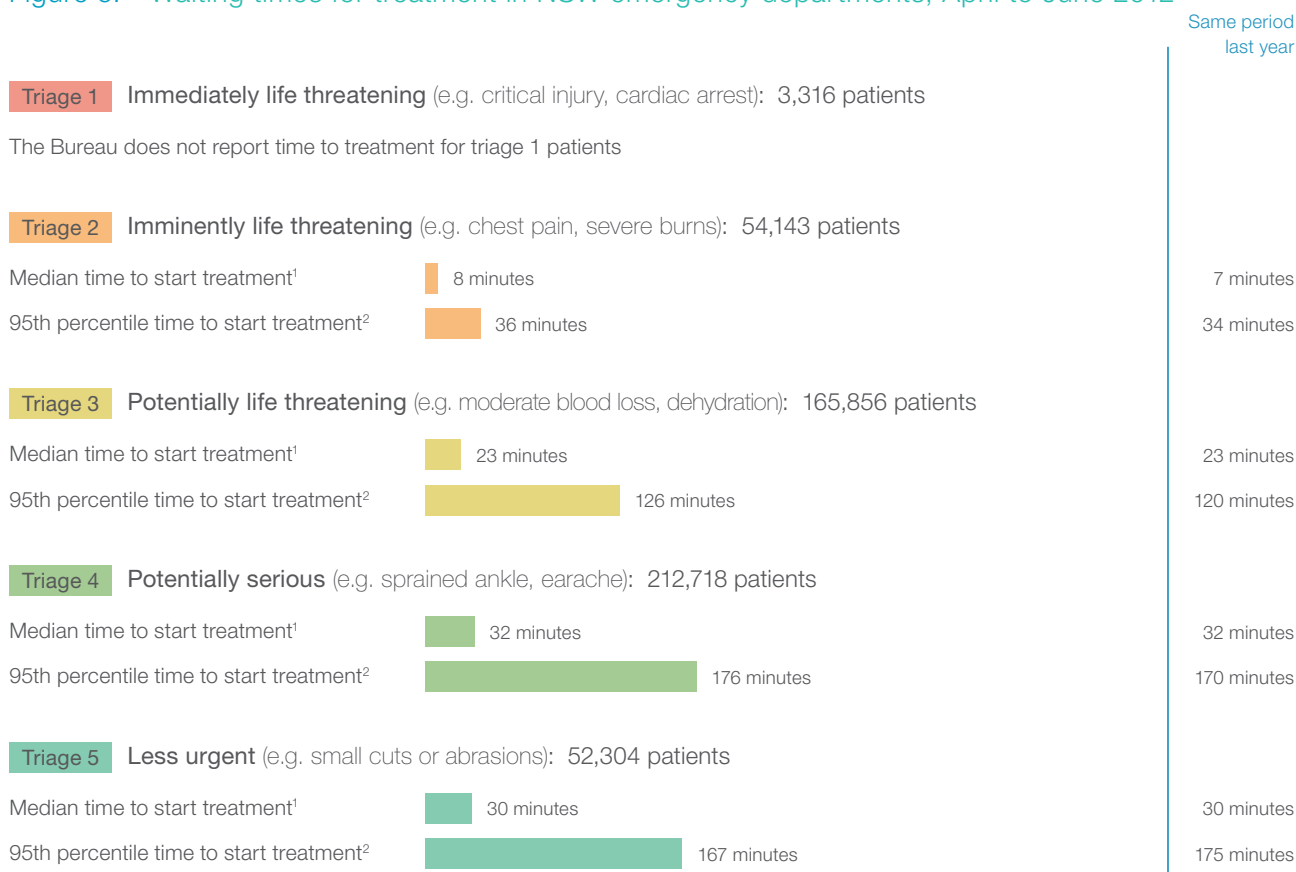
In April to June 2012, the median times to start treatment were largely unchanged compared to the same quarter in 2011 (Figure 5).

The median time to start treatment for the imminently life threatening category (triage 2) is one minute more at 8 minutes, the potentially life threatening category (triage 3) unchanged at 23 minutes, the potentially serious category (triage 4) unchanged at 32 minutes and the less urgent category (triage 5) unchanged at 30 minutes.

The 95th percentile times to start treatment were slightly longer in each triage category, except for triage 5. This quarter, 95% of patients began treatment within:

- 36 minutes, two minutes longer than one year ago (triage 2)
- 126 minutes, six minutes longer than one year ago (triage 3)
- 176 minutes, six minutes longer than one year ago (triage 4)
- 167 minutes, eight minutes shorter than one year ago (triage 5).

Figure 5: Waiting times for treatment in NSW emergency departments, April to June 2012



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

Note: Treatment time is the earliest time recorded when a healthcare professional gives medical care for the patient's presenting problems.

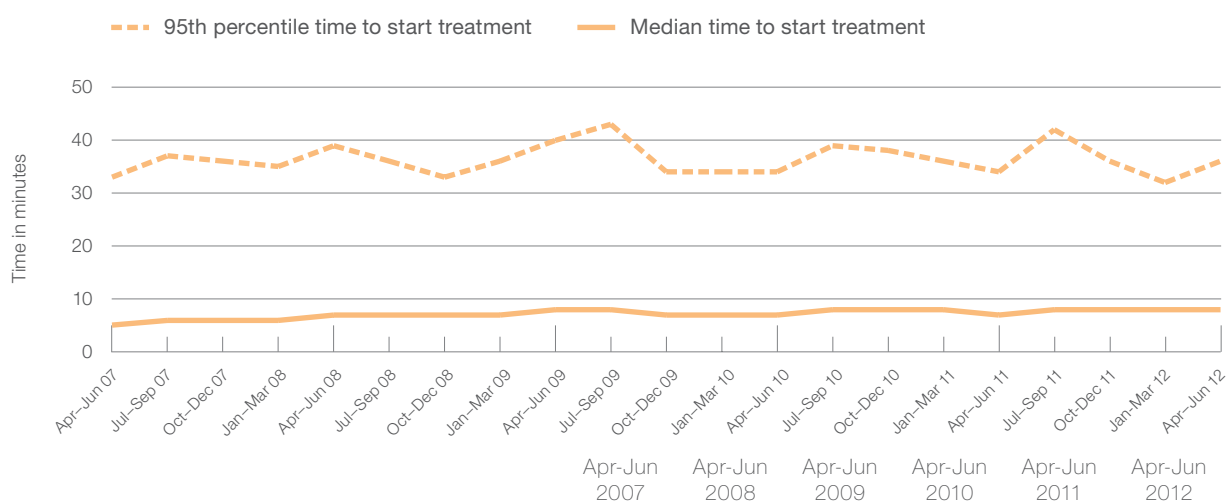
Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

Time to treatment over time

The time from presentation until treatment fluctuates throughout the year. At a state level, the time appears to be reasonably steady, however, the trend is affected by progressive implementation of new information systems.

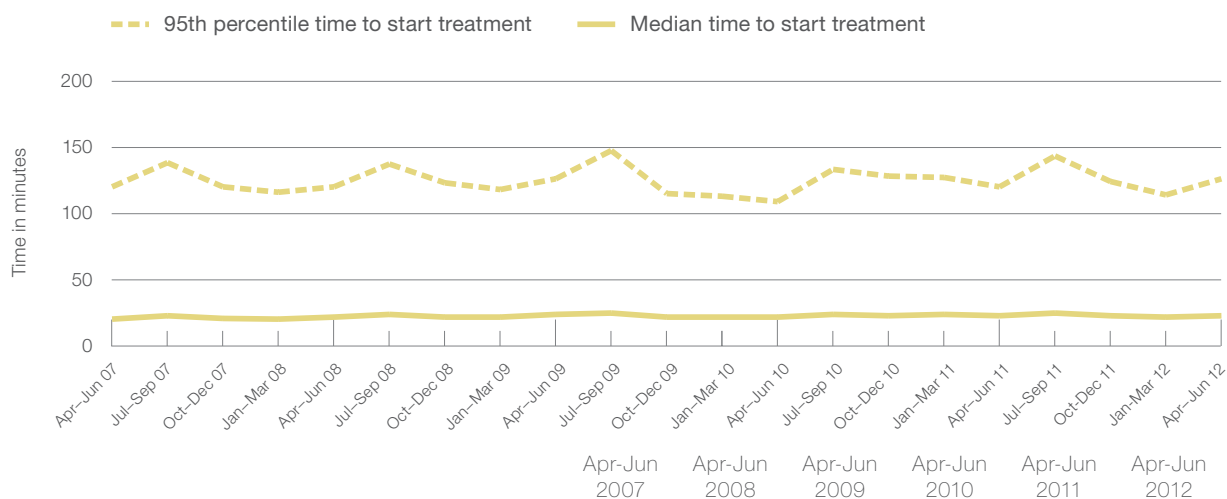
Figures 6a-d show for triage categories 2 to 5, the median and 95th percentile times to start treatment. Data are reported according to triage category. The Bureau does not report time to treatment for patients with conditions triaged as immediately life threatening (triage 1).

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



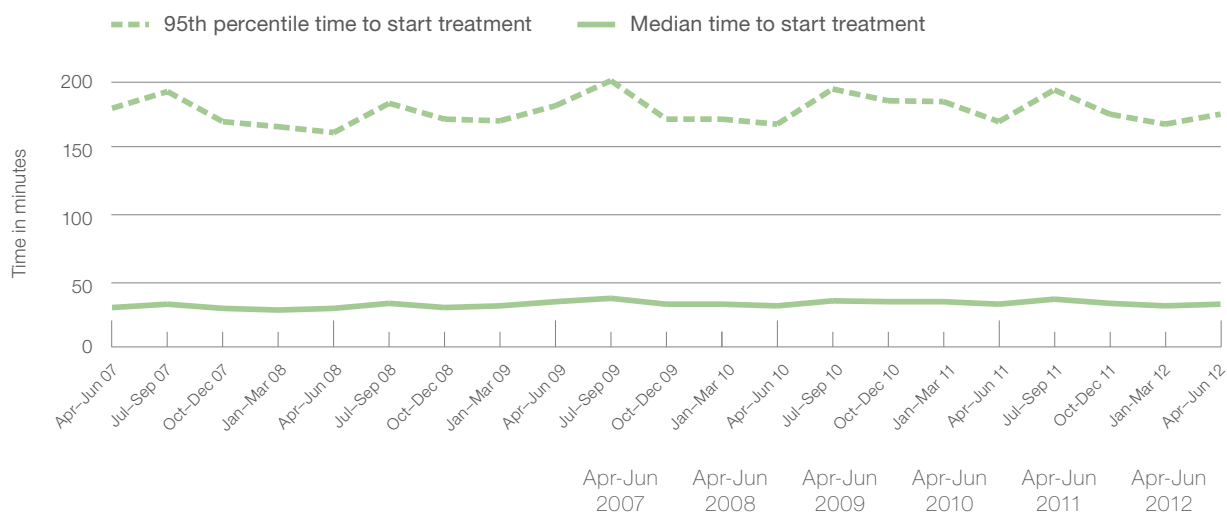
Median time to start treatment ¹ (minutes)	5	7	8	7	7	8
95th percentile time to start treatment ² (minutes)	33	39	40	34	34	36

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



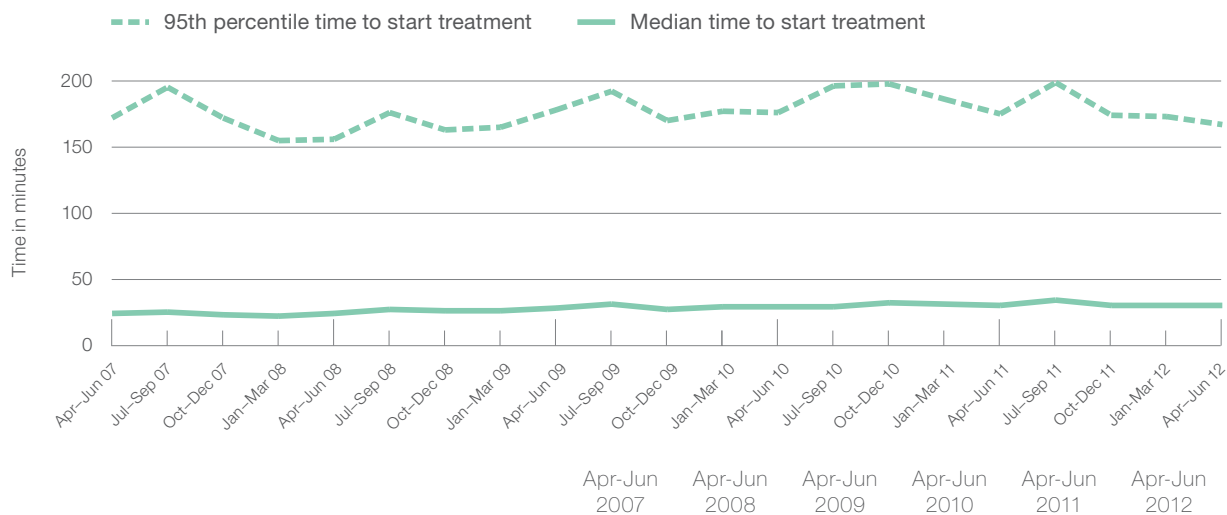
Median time to start treatment ¹ (minutes)	20	22	24	22	23	23
95th percentile time to start treatment ² (minutes)	120	120	126	109	120	126

Figure 6c: **Triage 4** - Median and 95th percentile times to start treatment (minutes) in NSW emergency departments, April 2007 to June 2012



	Apr-Jun 2007	Apr-Jun 2008	Apr-Jun 2009	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012
Median time to start treatment ¹ (minutes)	30	29	34	31	32	32
95th percentile time to start treatment ² (minutes)	180	162	182	168	170	176

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



	Apr-Jun 2007	Apr-Jun 2008	Apr-Jun 2009	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012
Median time to start treatment ¹ (minutes)	24	24	28	29	30	30
95th percentile time to start treatment ² (minutes)	172	156	178	176	175	167

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

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

Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

Leaving the emergency department

Time from presentation until leaving the ED this quarter

In the April to June 2012 quarter, the median time to leaving the ED was three hours and 24 minutes after presentation. The 95th percentile time to leaving the ED was 12 hours and 59 minutes after presentation (Figure 7).

There are different ways that a patient can leave the ED. The majority of patients leave the ED after their treatment is complete or when they

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

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

Figure 7: Time from presentation until leaving the emergency department, April to June 2012

All attendances at the emergency department:¹ 546,032 patients
 Attendances used to calculate time to leaving the ED:² 544,321 patients

	April to June 2012	Same period last year
Median time to leaving the ED ³	3 hours and 24 minutes	3 hours and 18 minutes
95th percentile time to leaving the ED ⁴	12 hours and 59 minutes	13 hours and 4 minutes

1. All emergency and non-emergency attendances at the emergency department (ED).
 2. All attendances that have a departure time.
 3. The median is the time by which half of patients left the ED. The other half of patients took equal to or longer than this time.
 4. The 95th percentile is the time by which 95% of patients left the ED. The final 5% of patients took equal to or longer than this time.
- Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

Figure 8: Leaving the emergency department by mode of separation, April to June 2012

Attendances used to calculate time to leaving the ED:¹ 544,321 patients

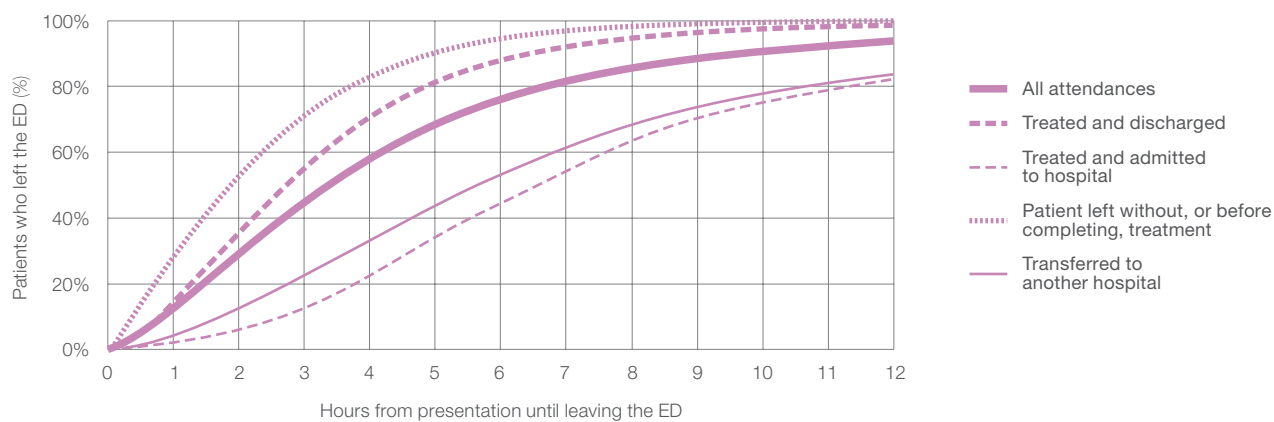
Treated and discharged	333,042 (61%)
Treated and admitted to hospital	151,829 (28%)
Patient left without, or before completing, treatment	39,168 (7%)
Transferred to another hospital	9,863 (2%)
Other	10,419 (2%)

1. All attendances that have a departure time.
- Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

In the April to June 2012 quarter:

- Most patients (61%) received treatment in the ED and were discharged home (Figure 8). On average, these patients spent less time in the ED than other patients (Figure 9).
- About a quarter of patients (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 8). On average, these patients spent the most time in the ED (Figure 9).
- A small group of patients (2%) received treatment in the ED and were transferred to another hospital (Figure 8). On average, these patients also spent longer in the ED than patients who were discharged (Figure 9).
- Some patients (7%) left the ED without, or before completing, treatment (Figure 8). On average, these patients spent the shortest time in the ED (Figure 9).

Figure 9: Percentage of patients who left the emergency department, by time and mode of separation, April to June 2012



1 hour 2 hours 3 hours 4 hours 6 hours 8 hours 10 hours 12 hours

	1 hour	2 hours	3 hours	4 hours	6 hours	8 hours	10 hours	12 hours
Treated and discharged	15%	36%	55%	71%	88%	95%	98%	99%
Treated and admitted to hospital	2%	6%	13%	23%	45%	64%	76%	83%
Patient left without, or before completing treatment	29%	53%	71%	83%	95%	98%	99%	100%
Transferred to another hospital	4%	13%	23%	34%	53%	69%	78%	84%
All attendances	13%	29%	45%	58%	76%	86%	91%	94%

Note: Time from presentation to the emergency department (ED) until recorded as leaving the ED.
 Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

Time from presentation until leaving the ED over time

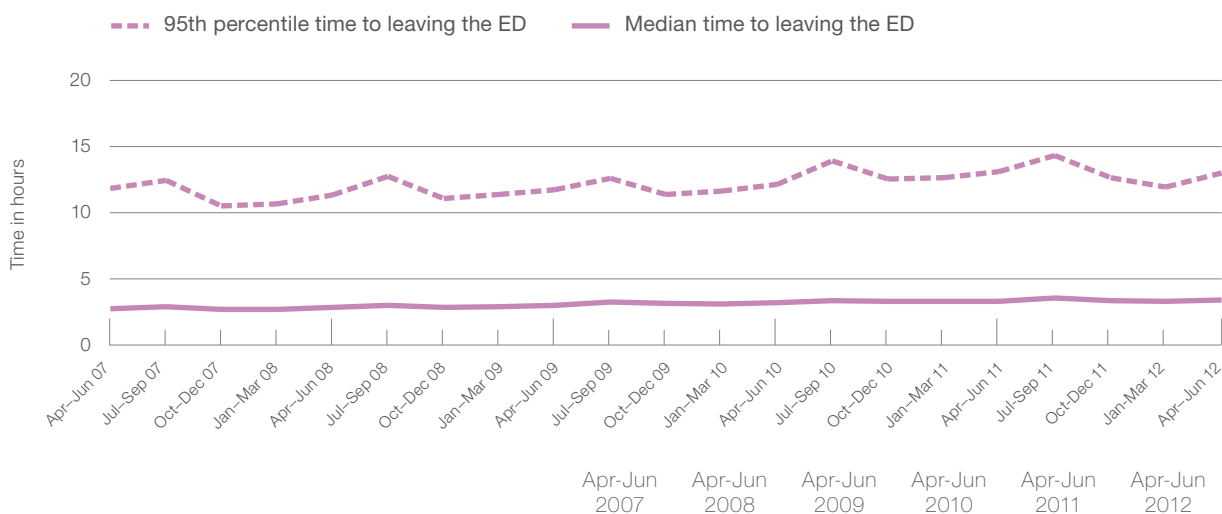
Figure 10 shows the median and 95th percentile time from presentation until leaving the ED by quarter over five years. During April to June 2012, the median time to leaving the ED was three hours and 24 minutes of presentation.

This is longer than the same quarter in 2011 when the median time to leaving the ED was three hours and 18 minutes, and the same quarter in 2010 when the median time was three hours and 13 minutes (Figure 10).

During the April to June 2012 quarter, the 95th percentile time to leaving the ED was 12 hours and 59 minutes after arriving in the ED.

This is shorter than in the same quarter in 2011 when the 95th percentile time to leaving the ED was 13 hours and four minutes, but longer than in the same quarter in 2010 when the 95th percentile time was 12 hours and six minutes.

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



	Apr-Jun 2007	Apr-Jun 2008	Apr-Jun 2009	Apr-Jun 2010	Apr-Jun 2011	Apr-Jun 2012
Median time to leaving the ED ¹ (hours, minutes)	2h 46m	2h 50m	3h 0m	3h 13m	3h 18m	3h 24m
95th percentile time to leaving the ED ² (hours, minutes)	11h 47m	11h 17m	11h 41m	12h 6m	13h 4m	12h 59m

1. The median is the time by which half of patients left the emergency department (ED). The other half of patients took equal to or longer than this time.
2. The 95th percentile is the time by which 95% of patients left the ED. The final 5% of patients took equal to or longer than this time.

Note: Time from presentation to the ED until recorded as leaving the ED.

Note: Hospitals transitioning to one of the major information systems are excluded from this data during the quarter(s) of implementation.

Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

The National Emergency Access Target (NEAT)

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

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

Performance against the NEAT this quarter

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

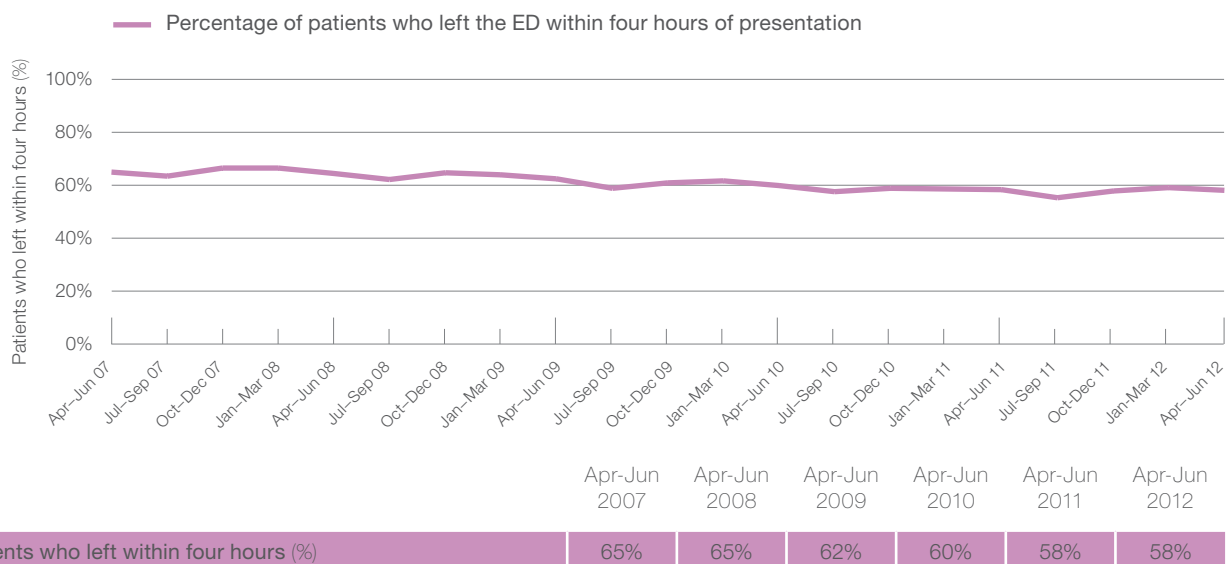
In the April to June 2012 quarter, 58% of patients left the ED within four hours of presentation and 76% of patients had left the ED by six hours (Figure 9).

For the April to June 2012 quarter, NSW did not achieve the state target for the NEAT.

Performance against the NEAT over time

During this quarter the percentage of patients who left the ED within four hours of presentation was 58%. This is similar to the same quarter one year ago (58%) but lower than the same quarter two years ago (60%) (Figure 11).

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



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

Note: Hospitals transitioning to one of the major information systems are excluded from this data during the quarter(s) of implementation.

Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

Differences in performance between hospitals

Time to treatment in NSW EDs

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

There is variation between hospitals when comparing time to treatment by triage category. For example, among principal referral and major hospitals using one of the two predominant information systems, the highest and lowest results for triage 2 and 4 in the April to June 2012 quarter are compared below:

- The median time to start treatment for all patients with conditions triaged as imminently life threatening (triage 2) was six minutes at Blacktown, Hornsby and Ku-Ring-Gai, and Orange Hospitals, compared with 12 minutes at Sutherland Hospital
- The 95th percentile time to start treatment for patients with conditions triaged as imminently life threatening (triage 2) was 16 minutes at Concord Hospital, compared with 59 minutes at Liverpool Hospital
- The median time to start treatment for all patients with conditions triaged as potentially serious (triage 4) was 20 minutes at Nepean Hospital, compared with 57 minutes at Canterbury Hospital
- The 95th percentile time to start treatment for patients with conditions triaged as potentially serious (triage 4) was 117 minutes at Sutherland Hospital, compared with 265 minutes at Wollongong Hospital.

Time to leaving the ED

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

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

- The median time to leaving the ED ranged from two hours and 54 minutes at Mona Vale and District Hospital to five hours and 32 minutes at Blacktown and Liverpool Hospitals
- The 95th percentile time to leaving the ED ranged from eight hours and 54 minutes at Concord Hospital to 23 hours and 19 minutes at Blacktown Hospital
- The percentage of patients who left the ED within four hours from presentation ranged from 69% at Manly District Hospital to 32% at Liverpool Hospital.

How to interpret our information

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

Different ways of measuring the times patients spend in EDs

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

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

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

For example, if the median time to start treatment is 23 minutes, this means half of patients started treatment between 0 and 23 minutes after arriving at the ED. The other half waited 23 minutes or longer for treatment.

The 95th percentile times are the times by which 95% of patients started treatment or left the ED. We use these values to indicate the longest times that patients waited for treatment or to leave the ED.

For example, if the 95th percentile time to treatment is 125 minutes, this means 95% of patients were seen between 0 and 125 minutes after arriving at the ED. The last 5% of patients (or 1 in 20) waited 125 minutes or longer for treatment.

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

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

Assessing ED performance

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

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

Figure 12: Time from presentation to treatment

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

Median time to start treatment 8 minutes
 95th percentile time to start treatment 35 minutes

Same period last year	NSW (this period)
170	
6 minutes	8 minutes
38 minutes	32 minutes

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

Other ways of presenting the times patients spend in EDs

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

Cumulative graphs

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

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

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

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

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

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

Figure 13: Percentage of patients who received treatment by time

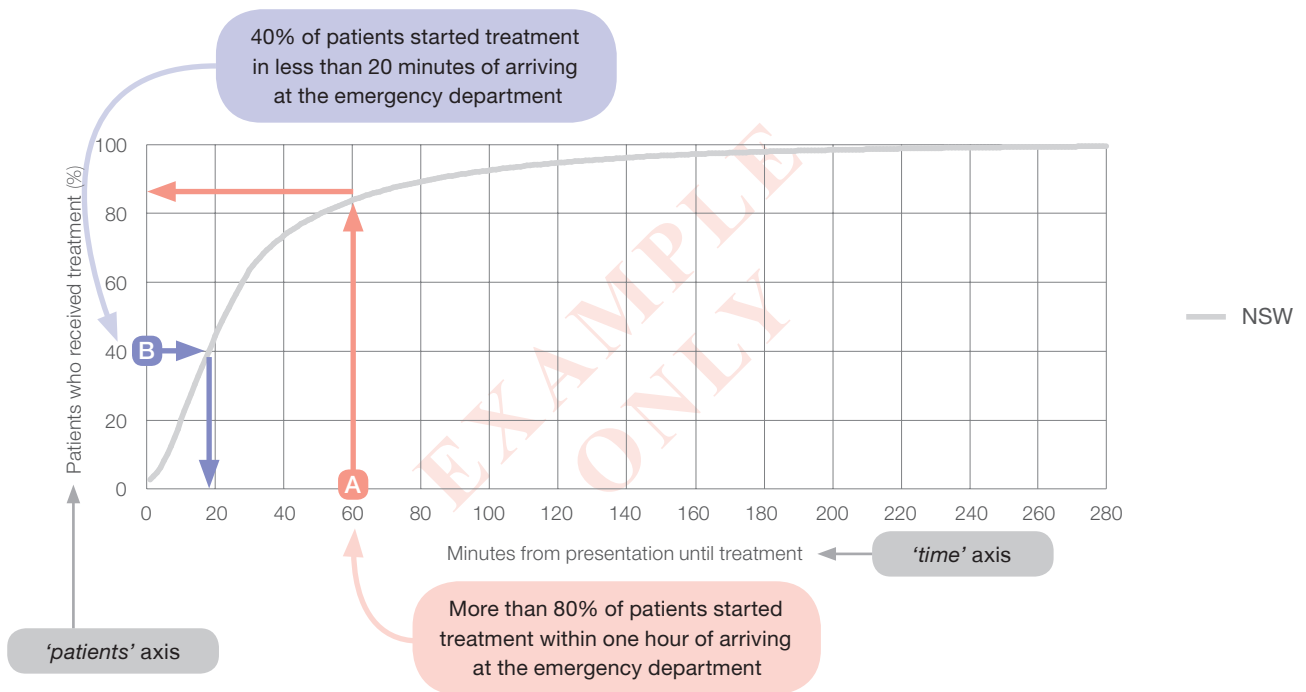
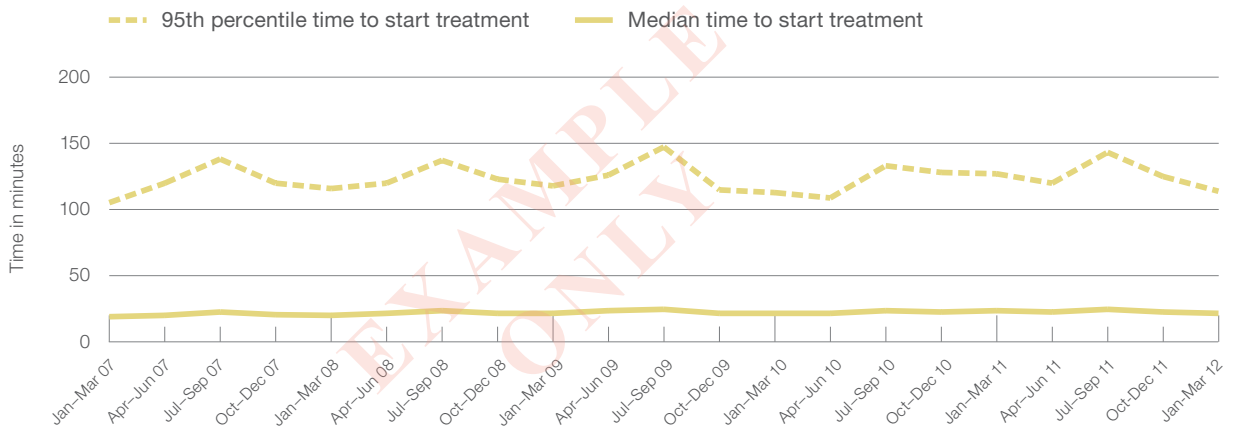


Figure 14: Median and 95th percentile times to start treatment (minutes) in NSW emergency departments, over five years



Trend graphs

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

For example, the trend graph (Figure 14) presents the time to start treatment for patients in each quarter of the last five years.

The solid line shows the median time to treatment for patients in NSW EDs and the dashed line shows the 95th percentile.

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

Appendix: ED time performance measures

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

	Triage 2		Triage 3		Triage 4		Triage 5	
	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment
New South Wales								
Total New South Wales	8	36	23	126	32	176	30	167
Central Coast Local Health District (CCLHD)								
Gosford Hospital	7	32	21	108	43	193	46	198
Wyong Hospital	8	41	17	101	28	149	32	143
Total CCLHD	7	37	19	105	35	176	35	157
Far West Local Health District (FWLHD)								
Broken Hill Base Hospital	6	25	16	70	23	116	35	158
Total FWLHD	6	25	16	70	23	116	35	158
Hunter New England Local Health District (HNELHD)								
Armidale and New England Hospital	8	48	19	100	34	166	34	212
Belmont Hospital	8	25	22	114	36	177	43	194
Calvary Mater Newcastle	6	27	17	61	25	133	27	154
Cessnock District Hospital	5	40	20	86	31	121	35	131
Gunnedah District Hospital	5	*	13	106	39	153	18	120
Inverell District Hospital	3	65	15	87	40	137	25	116
John Hunter Hospital	7	38	24	145	35	226	39	230
Kurri Kurri District Hospital	5	*	14	91	19	98	14	89
Maitland Hospital	9	41	26	139	46	197	48	186
Manning Base Hospital	7	38	23	156	42	230	33	200
Moree District Hospital	3	82	9	90	10	101	10	65
Muswellbrook District Hospital	5	61	12	94	23	119	15	110
Narrabri District Hospital	2	*	2	48	6	65	5	62
Singleton District Hospital	10	35	23	93	42	128	39	132
Tamworth Base Hospital	8	40	23	144	40	222	55	223
Other HNELHD	5	33	13	69	17	100	10	91
Total HNELHD	7	39	20	118	32	176	30	172
Illawarra Shoalhaven Local Health District (ISLHD)								
Bulli District Hospital	†	†	†	†	†	†	†	†
Milton and Ulladulla Hospital	6	35	20	69	30	127	25	102
Shellharbour Hospital	10	50	28	147	32	229	30	178
Shoalhaven and District Memorial Hospital	10	34	27	131	38	218	27	198
Wollongong Hospital	11	46	35	189	55	265	48	251
Total ISLHD	10	43	29	165	41	240	32	211

	Triage 2		Triage 3		Triage 4		Triage 5	
	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment

Mid North Coast Local Health District (MNCLHD)								
Coffs Harbour Base Hospital	8	30	21	107	28	158	26	151
Kempsey Hospital	9	30	18	61	20	97	16	85
Port Macquarie Base Hospital	9	33	22	89	30	135	35	136
Total MNCLHD	8	32	20	89	26	136	23	134

Murrumbidgee Local Health District (MLHD)								
Griffith Base Hospital	5	26	15	86	28	155	38	191
Wagga Wagga Base Hospital	7	24	17	76	21	131	14	119
Total MLHD	6	26	16	81	23	142	16	130

Nepean Blue Mountains Local Health District (NBMLHD)								
Blue Mountains District Anzac Memorial Hospital	7	26	19	116	42	191	39	177
Hawkesbury District Health Service	20	65	29	102	28	155	30	115
Lithgow Health Service	4	23	13	63	14	103	12	109
Nepean Hospital	7	43	20	131	20	128	22	162
Total NBMLHD	8	44	21	115	23	152	22	154

Northern NSW Local Health District (NNSWLHD)								
Grafton Base Hospital	7	40	21	126	33	207	30	196
Lismore Base Hospital	7	27	23	114	42	192	56	202
Murwillumbah District Hospital	5	17	14	49	21	90	19	105
The Tweed Hospital	8	32	24	97	24	123	18	121
Total NNSWLHD	7	32	22	105	28	161	25	160

Northern Sydney Local Health District (NSLHD)								
Hornsby and Ku-Ring-Gai Hospital	6	26	28	160	49	238	47	215
Manly District Hospital	8	29	17	76	21	124	24	145
Mona Vale and District Hospital	7	24	20	79	33	148	32	153
Royal North Shore Hospital	7	24	19	96	30	136	36	149
Ryde Hospital [†]	6	16	15	69	18	137	22	158
Total NSLHD	7	24	19	96	30	162	35	162

South Eastern Sydney Local Health District (SESLHD)								
Prince of Wales Hospital	8	42	23	113	23	158	23	181
St George Hospital	11	47	32	134	46	177	38	190
Sutherland Hospital	12	40	27	96	33	117	32	127
Sydney Eye Hospital	*	*	12	27	19	54	24	90
Sydney Hospital	7	*	16	51	20	78	24	97
Total SESLHD	11	44	27	116	31	148	27	133

South Western Sydney Local Health District (SWSLHD)								
Bankstown / Lidcombe Hospital	9	29	27	186	34	178	30	150
Bowral and District Hospital	8	25	22	88	30	141	28	160
Camden Hospital	6	22	15	109	21	152	18	131

	Triage 2		Triage 3		Triage 4		Triage 5	
	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment	Median time to start treatment	95th percentile time to start treatment
Campbelltown Hospital	8	33	18	147	31	185	25	134
Fairfield Hospital	10	38	23	106	31	151	32	163
Liverpool Hospital	10	59	26	213	31	213	26	165
Total SWSLHD	9	42	23	171	31	175	26	148
Southern NSW Local Health District (SNSWLHD)								
Bega Hospital	8	42	21	96	35	132	38	170
Goulburn Base Hospital	10	57	36	145	53	202	43	210
Total SNSWLHD	10	54	30	134	44	179	39	181
St Vincent's Health Network (SVHN)								
St Vincent's Hospital, Darlinghurst	5	23	15	105	12	153	5	171
Total SVHN	5	23	15	105	12	153	5	171
Sydney Local Health District (SYDLHD)								
Canterbury Hospital	9	43	39	178	57	244	44	201
Concord Hospital	7	16	16	73	23	129	24	127
Royal Prince Alfred Hospital	10	40	31	151	42	177	39	187
Total SYDLHD	10	37	29	151	37	189	34	182
Sydney Children's Hospitals Network (SCHN)								
Sydney Children's Hospital	9	27	23	70	48	183	42	147
The Children's Hospital at Westmead	6	10	25	102	42	255	47	218
Total SCHN	7	24	24	90	46	212	46	214
Western NSW Local Health District (WNSWLHD)								
Bathurst Base Hospital	7	25	21	75	27	129	19	114
Dubbo Base Hospital	9	44	27	119	30	184	21	157
Orange Base Hospital	6	29	21	72	34	143	37	168
Total WNSWLHD	7	35	23	98	31	153	31	164
Western Sydney Local Health District (WSLHD)								
Auburn Hospital	7	23	16	82	29	161	16	103
Blacktown Hospital	6	23	31	182	39	178	27	152
Mount Druitt Hospital	7	29	26	138	45	177	44	169
Westmead Hospital (all units)	7	33	27	193	44	215	46	191
Total WSLHD	7	29	25	159	40	186	35	171

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

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

Source: Health Information Exchange, NSW Health. Data extracted on 25 July 2012.

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

	Attendances		Leaving the ED			Ambulance	
	Attendances used for calculation		Median time to leaving the ED	95th percentile time to leaving the ED	% leaving ED within 4 hours Target 69%	Ambulance arrivals	Off stretcher 90% in 30 min.
New South Wales							
Total New South Wales	546,032	544,321	3h 24m	12h 59m	58%	137,090	63%
Central Coast Local Health District (CCLHD)							
Gosford Hospital	14,404	14,404	4h 22m	12h 13m	45%	4,737	52%
Wyong Hospital	14,455	14,455	3h 20m	12h 31m	58%	4,010	58%
Total CCLHD	28,859	28,859	3h 53m	12h 21m	52%	8,747	55%
Far West Local Health District (FWLHD)							
Broken Hill Base Hospital	5,810	5,810	2h 0m	7h 29m	80%	712	84%
Total FWLHD	5,810	5,810	2h 0m	7h 29m	80%	712	84%
Hunter New England Local Health District (HNELHD)							
Armidale and New England Hospital	3,976	3,976	1h 41m	6h 3m	85%	798	94%
Belmont Hospital	6,141	6,141	3h 9m	11h 43m	61%	1,604	62%
Calvary Mater Newcastle	8,145	8,145	2h 38m	12h 35m	67%	2,536	56%
Cessnock District Hospital	4,591	4,591	1h 14m	5h 6m	92%	493	83%
Gunnedah District Hospital	2,546	2,546	1h 15m	4h 7m	95%	235	93%
Inverell District Hospital	2,636	2,636	1h 15m	4h 45m	92%	483	88%
John Hunter Hospital	17,583	17,582	4h 17m	12h 2m	46%	5,343	50%
Kurri Kurri District Hospital	1,856	1,856	0h 53m	5h 0m	93%	89	94%
Maitland Hospital	11,484	11,484	3h 2m	12h 37m	63%	2,302	46%
Manning Base Hospital	6,171	6,171	3h 27m	13h 22m	57%	1,996	69%
Moree District Hospital	2,274	2,274	0h 56m	5h 2m	92%	305	96%
Muswellbrook District Hospital	1,966	1,966	1h 20m	7h 12m	86%	380	66%
Narrabri District Hospital	1,598	1,598	1h 10m	4h 16m	94%	194	91%
Singleton District Hospital	3,117	3,117	1h 11m	3h 31m	97%	348	84%
Tamworth Base Hospital	9,794	9,792	3h 25m	11h 18m	59%	1,772	71%
Other HNELHD	13,120	13,118	0h 50m	5h 15m	93%	1,520	88%
Total HNELHD	96,998	96,993	2h 15m	10h 4m	71%	20,398	64%
Illawarra Shoalhaven Local Health District (ISLHD)							
Bulli District Hospital	1,695	†	†	†	†	*	*
Milton and Ulladulla Hospital	3,410	3,410	1h 29m	6h 30m	86%	431	74%
Shellharbour Hospital	6,693	6,693	3h 57m	15h 41m	51%	1,654	50%
Shoalhaven and District Memorial Hospital	8,661	8,661	3h 39m	12h 53m	55%	2,332	66%
Wollongong Hospital	14,120	14,120	4h 47m	18h 16m	41%	5,202	60%
Total ISLHD	34,579	32,884	3h 54m	15h 22m	51%	9,623	60%
Mid North Coast Local Health District (MNCLHD)							
Coffs Harbour Base Hospital	8,604	8,604	3h 31m	15h 13m	56%	2,305	75%

	Attendances		Leaving the ED			Ambulance	
		Attendances used for calculation	Median time to leaving the ED	95th percentile time to leaving the ED	% leaving ED within 4 hours Target 69%	Ambulance arrivals	Off stretcher 90% in 30 min.
Kempsey Hospital	5,245	5,245	1h 53m	7h 44m	81%	871	76%
Port Macquarie Base Hospital	7,893	7,893	3h 1m	14h 38m	62%	2,147	61%
Total MNCLHD	21,742	21,742	2h 52m	13h 40m	64%	5,323	70%
Murrumbidgee Local Health District (MLHD)							
Griffith Base Hospital	4,725	4,725	2h 16m	5h 57m	81%	709	83%
Wagga Wagga Base Hospital	8,769	8,769	3h 17m	13h 35m	58%	2,207	55%
Total MLHD	13,494	13,494	2h 50m	11h 14m	66%	2,916	62%
Nepean Blue Mountains Local Health District (NBMLHD)							
Blue Mountains District Anzac Memorial Hospital	4,524	4,524	2h 28m	7h 58m	76%	791	92%
Hawkesbury District Health Service	5,393	5,392	3h 59m	13h 11m	50%	1,087	46%
Lithgow Health Service	3,278	3,278	1h 40m	6h 14m	84%	540	90%
Nepean Hospital	14,461	14,460	4h 33m	18h 23m	43%	4,528	79%
Total NBMLHD	27,656	27,654	3h 40m	14h 41m	55%	6,946	76%
Northern NSW Local Health District (NNSWLHD)							
Grafton Base Hospital	5,534	5,533	3h 27m	11h 6m	59%	821	86%
Lismore Base Hospital	7,306	7,306	3h 54m	17h 3m	51%	2,124	60%
Murwillumbah District Hospital	3,821	3,821	1h 20m	4h 46m	92%	379	85%
The Tweed Hospital	10,122	10,121	2h 55m	14h 28m	63%	2,057	77%
Total NNSWLHD	26,783	26,781	2h 56m	13h 56m	63%	5,381	72%
Northern Sydney Local Health District (NSLHD)							
Hornsby and Ku-Ring-Gai Hospital	8,300	8,299	4h 19m	12h 25m	46%	2,098	75%
Manly District Hospital	6,186	6,185	3h 10m	10h 21m	69%	1,417	90%
Mona Vale and District Hospital	7,871	7,871	2h 54m	11h 11m	67%	1,849	84%
Royal North Shore Hospital	15,850	15,850	3h 55m	11h 40m	51%	4,588	62%
Ryde Hospital [†]	6,502	6,502	3h 3m	9h 12m	65%	1,985	85%
Total NSLHD	44,709	44,707	3h 34m	11h 16m	57%	11,937	75%
South Eastern Sydney Local Health District (SESLHD)							
Prince of Wales Hospital	11,488	11,488	3h 55m	12h 51m	52%	3,615	59%
St George Hospital	16,875	16,875	4h 3m	13h 27m	49%	5,322	53%
Sutherland Hospital	12,171	12,171	4h 2m	14h 56m	50%	3,525	59%
Sydney Eye Hospital	4,812	4,812	2h 21m	5h 0m	86%	26	85%
Sydney Hospital	4,245	4,245	1h 48m	5h 33m	87%	781	91%
Total SESLHD	49,591	49,591	3h 35m	12h 21m	57%	13,269	59%
South Western Sydney Local Health District (SWSLHD)							
Bankstown / Lidcombe Hospital	11,765	11,765	4h 54m	14h 46m	40%	4,460	55%
Bowral and District Hospital	4,543	4,543	2h 27m	8h 16m	73%	993	86%
Camden Hospital	3,270	3,270	1h 38m	6h 1m	85%	15	93%
Campbelltown Hospital	14,358	14,358	4h 35m	20h 32m	44%	3,978	57%
Fairfield Hospital	8,511	8,511	3h 19m	12h 15m	60%	1,970	57%

		Attendances		Leaving the ED			Ambulance	
		Attendances used for calculation	Median time to leaving the ED	95th percentile time to leaving the ED	% leaving ED within 4 hours Target 69%	Ambulance arrivals	Off stretcher 90% in 30 min.	
Liverpool Hospital	16,876	16,876	5h 32m	18h 30m	32%	6,144	44%	
Total SWSLHD	59,323	59,323	4h 18m	16h 16m	47%	17,560	53%	
Southern NSW Local Health District (SNSWLHD)								
Bega Hospital	2,738	2,738	2h 5m	6h 27m	81%	516	85%	
Goulburn Base Hospital	4,486	4,486	2h 54m	8h 58m	66%	857	60%	
Total SNSWLHD	7,224	7,224	2h 34m	8h 0m	72%	1,373	69%	
St Vincent's Health Network (SVHN)								
St Vincent's Hospital, Darlinghurst	10,651	10,651	3h 41m	16h 12m	55%	4,105	61%	
Total SVHN	10,651	10,651	3h 41m	16h 12m	55%	4,105	61%	
Sydney Local Health District (SYDLHD)								
Canterbury Hospital	9,290	9,290	4h 4m	11h 55m	49%	2,351	61%	
Concord Hospital	8,966	8,966	3h 30m	8h 54m	60%	2,525	69%	
Royal Prince Alfred Hospital	17,090	17,090	3h 58m	10h 37m	51%	5,363	60%	
Total SYDLHD	35,346	35,346	3h 52m	10h 31m	53%	10,239	62%	
Sydney Children's Hospitals Network (SCHN)								
Sydney Children's Hospital	9,934	9,934	2h 39m	7h 51m	73%	656	92%	
The Children's Hospital at Westmead	13,897	13,897	3h 34m	10h 49m	57%	1,330	89%	
Total SCHN	23,831	23,831	3h 7m	9h 47m	64%	1,986	90%	
Western NSW Local Health District (WNSWLHD)								
Bathurst Base Hospital	6,253	6,253	2h 45m	10h 44m	67%	987	79%	
Dubbo Base Hospital	7,194	7,194	3h 21m	16h 51m	59%	1,739	76%	
Orange Base Hospital	6,966	6,966	3h 1m	17h 13m	63%	1,395	65%	
Total WNSWLHD	20,413	20,413	3h 3m	14h 54m	63%	4,121	73%	
Western Sydney Local Health District (WSLHD)								
Auburn Hospital	6,377	6,375	3h 20m	10h 20m	69%	1,507	64%	
Blacktown Hospital	9,337	9,334	5h 32m	23h 19m	36%	3,067	44%	
Mount Druitt Hospital	8,300	8,300	4h 37m	15h 10m	42%	2,347	63%	
Westmead Hospital (all units)	15,009	15,009	4h 49m	17h 50m	41%	5,533	52%	
Total WSLHD	39,023	39,018	4h 30m	18h 18m	44%	12,454	54%	

- (*) Values suppressed due to small numbers and to protect privacy. Suppressed data have been excluded from LHD totals.
- (†) Due to the implementation of a new electronic information system in this emergency department during the April to June 2012 quarter, the data for this hospital are not considered reliable enough to display (see *Hospital Quarterly Background Paper: Approaches to reporting time measures of emergency department performance, Addendum June 2012* for more information).
- (‡) Due to the implementation of a new electronic information system in this emergency department in the previous quarter (October to December 2011), caution is advised when considering this hospital's results (see *Background Paper* for more information).
- Note:** Emergency department activity includes 88 facilities for which electronic data are reported. These facilities account for approximately 85% of NSW emergency department activity.
- Source:** Health Information Exchange, NSW Health. Data extracted on 25 July 2012. Ambulance off-stretcher time data provided by the NSW Ambulance Service on 27 July 2012.

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- *At a Glance* summarising the three core modules
- Three core modules titled *Admitted Patients, Elective Surgery and Emergency Departments*
- Activity and performance reports about emergency department care and elective surgery for more than 60 hospitals and NSW as a whole
- *Background Paper*
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The Bureau of Health Information provides the community, healthcare professionals and the NSW Parliament with timely, accurate and comparable information on the performance of the NSW public health system in ways that enhance the system's accountability and inform efforts to increase its beneficial impact on the health and wellbeing of the people of NSW.

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

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

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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.

Admitted Patients

Hospital Quarterly: Performance of NSW public hospitals

April to June 2012

People are admitted to hospital for a variety of reasons, such as surgery, illness or childbirth. When a person is admitted to hospital, they begin what is termed an *'episode of care'*.

This covers a single type of care such as acute care, rehabilitation or palliative care. Sometimes, a change in the medical needs of a person can require that they start a second or third episode during the same period of stay in hospital.

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

The report shows there were 426,358 admitted patient episodes during April to June 2012, 12,343 (+3%) more than the same quarter in 2011 and 25,553 (+6%) more than the same quarter two years ago. There has been an expected increase

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

Patients admitted for acute care or maternity and birth comprised 97% of all admitted episodes. More than half of these patients (56%) 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 1,393,433 bed days during the quarter and, on average, each episode of care was 3.4 days. There were 18,281 babies born, similar to the same quarter one year ago.

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

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During the quarter	Apr-Jun 2012	Apr-Jun 2011	The difference
Admitted patient episodes	426,358 episodes	414,015 episodes	+12,343 (+3%)
Admitted patient episodes considered to be planned	41% planned	42% planned	-1 percentage point
Babies born	18,281 babies	18,264 babies	unchanged
Admitted patient episodes considered to be acute	97% acute	97% acute	unchanged
Acute episodes that were overnight admissions	56% overnight	56% overnight	unchanged
Total bed days for acute admitted patient episodes	1,393,433 days	1,370,545 days	+22,888 (+2%)
Average length of stay for acute admitted patient episodes	3.4 days	3.4 days	unchanged

Number of admitted patient episodes

In the April to June 2012 quarter, there were 426,358 admitted patient episodes of care in NSW public hospitals, up from 412,905 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](#).

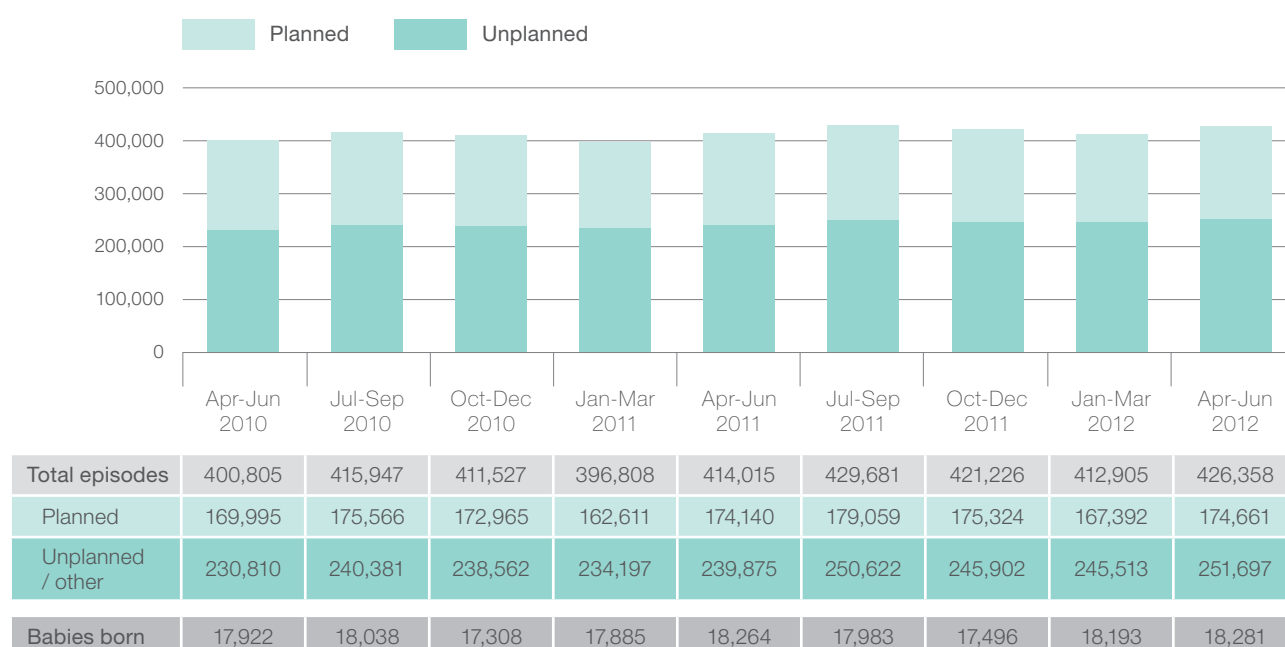
The number of admitted patient episodes in NSW public hospitals has increased over time, up from 414,015 episodes in the same quarter one year ago (3%) and from 400,805 episodes two years ago (6%).

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 174,661 planned admitted patient episodes and 251,697 were unplanned ([Figure 1](#)). Planned episodes accounted for 41% of all admitted patient episodes.

An admission for childbirth is considered *'unplanned'* and approximately one in every 14 unplanned episodes was for childbirth. During the quarter, there were 18,281 babies born in NSW public hospitals, similar to the same time one year ago.

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



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

Note: Numbers might differ slightly from those reported in previous *Hospital Quarterly* reports and in the NSW Ministry of Health's *Quarterly Hospital Performance Report* due to differences in when data were extracted.

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

Number of acute patient episodes

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](#).

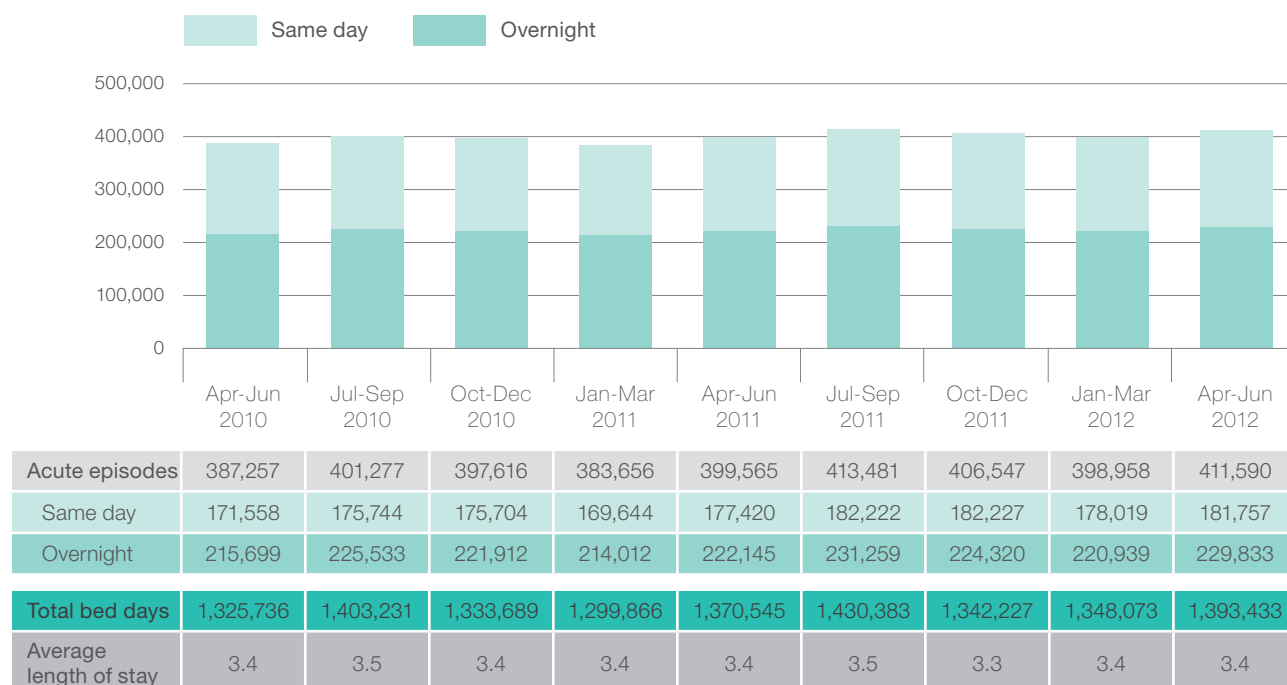
In the April to June 2012 quarter, there were 411,590 acute admitted patient episodes, up from 398,958 in the last quarter. The number

of acute episodes in NSW public hospitals has been increasing for comparable quarters, up from 399,565 episodes (3%) in the same quarter one year ago and from 387,257 episodes (6%) 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 April to June, there were 181,757 same day episodes (44% of acute admitted episodes) and 229,833 overnight episodes (representing 56%) as shown in [Figure 2](#).

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



Note: Numbers might differ slightly from those reported in previous *Hospital Quarterly* reports and in the NSW Ministry of Health's *Quarterly Hospital Performance Report* due to differences in when data were extracted.

Source: Admitted Patient Data Collection. Health Information Exchange, NSW Health. Data extracted on 20 July 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. The number of acute bed days in NSW public hospitals has been increasing. This quarter there were 1,393,433 total acute bed days. This is 2% higher than the same quarter one year ago (1,370, 545) and 5% higher than the same quarter two years ago (1,325,736).

Average length of stay is influenced by the different types of patients that a hospital provides care for.

The average length of stay for acute admitted patient episodes (including same day patients) has remained largely unchanged over the past two years at about 3.4 days (Figure 2).

Table 1 presents the admitted patient episode activity for public hospitals in NSW. Data are presented by local health district for all principal referral, paediatric specialist, ungrouped acute – tertiary referral, major and district groups 1 and 2 hospitals. Information from smaller hospitals is presented for each local health district under the 'other' category.

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

	All episodes			Acute episodes			
	Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days)
New South Wales							
Total New South Wales	426,358	174,661	251,697	181,757	229,833	1,393,433	3.4
Central Coast Local Health District (CCLHD)							
Gosford Hospital	12,166	5,049	7,117	4,854	7,107	42,844	3.6
Wyong Hospital	6,680	2,994	3,686	3,258	3,159	22,655	3.5
Other CCLHD*	165	*	*	*	*	278	25.3
Total CCLHD	19,011	8,043	10,803	8,112	10,266	65,777	3.6
Far West Local Health District (FWLHD)							
Broken Hill Base Hospital	1,951	985	966	951	964	5,201	2.7
Other FWLHD	124	*	*	37	82	490	4.1
Total FWLHD	2,075	985	966	988	1,046	5,691	2.8
Hunter New England Local Health District (HNELHD)							
Armidale and New England Hospital	2,255	1,060	1,195	988	1,221	6,331	2.9
Belmont Hospital	1,750	786	964	445	1,226	6,535	3.9
Calvary Mater Newcastle	3,926	1,049	2,877	1,254	2,549	13,637	3.6
Cessnock District Hospital	1,060	478	582	472	583	3,608	3.4
Forster Private Hospital (Public Contracted Beds)	92	24	68	31	54	310	3.6
Gunnedah District Hospital	552	243	309	248	288	1,155	2.2
Inverell District Hospital	1,116	422	694	525	546	2,082	1.9
John Hunter Hospital	19,334	9,487	9,847	9,210	9,790	61,272	3.2
Kurri Kurri District Hospital	673	512	161	425	197	1,543	2.5

	All episodes			Acute episodes			
	Total episodes	Planned	Unplanned / other	Same day	Overnight	Total acute bed days	Average length of stay (days)
Maitland Hospital	4,154	887	3,267	749	3,331	15,955	3.9
Manning Base Hospital	5,078	2,553	2,525	2,526	2,470	13,782	2.8
Moree District Hospital	1,063	624	439	562	464	2,150	2.1
Muswellbrook District Hospital	961	450	511	480	480	2,416	2.5
Narrabri District Hospital	539	106	433	150	374	1,373	2.6
Singleton District Hospital	1,178	551	627	614	552	2,181	1.9
Tamworth Base Hospital	5,782	2,794	2,988	2,615	3,043	16,952	3.0
Other HNELHD	3,279	854	2,425	742	2,385	20,476	6.5
Total HNELHD	52,792	22,880	29,912	22,036	29,553	171,758	3.3
Illawarra Shoalhaven Local Health District (ISLHD)							
Bulli District Hospital	493	117	376	193	55	262	1.1
Milton and Ulladulla Hospital	746	49	697	238	508	2,733	3.7
Shellharbour Hospital	5,028	2,103	2,925	3,038	1,862	14,738	3.0
Shoalhaven and District Memorial Hospital	5,850	2,123	3,727	2,945	2,809	13,928	2.4
Wollongong Hospital	12,464	3,852	8,612	5,218	7,172	46,266	3.7
Other ISLHD*	609	26	583	0	50	363	7.3
Total ISLHD	25,190	8,270	16,920	11,632	12,456	78,290	3.3
Justice Health (including admission data for the Forensic Mental Health Network)							
Total Justice Health	661	507	154	118	526	14,266	22.2
Mid North Coast Local Health District (MNCLHD)							
Bellinger River District Hospital	404	88	316	175	161	1,068	3.2
Coffs Harbour Base Hospital	7,448	3,348	4,100	3,309	3,799	21,185	3.0
Kempsey Hospital	2,821	1,012	1,809	1,821	932	5,562	2.0
Macksville District Hospital	754	265	489	223	409	1,558	2.5
Port Macquarie Base Hospital	4,971	2,142	2,829	1,840	3,072	15,261	3.1
Other MNCLHD	716	374	342	526	138	1,759	2.6
Total MNCLHD	17,114	7,229	9,885	7,894	8,511	46,393	2.8
Murrumbidgee Local Health District (MLHD)							
Deniliquin Health Service	664	150	514	231	361	1,486	2.5
Griffith Base Hospital	2,827	1,216	1,611	1,507	1,250	5,838	2.1
Tumut Health Service	597	77	520	245	340	1,260	2.2
Wagga Wagga Base Hospital	7,504	3,293	4,211	3,711	3,682	18,870	2.6
Young Health Service	789	199	590	394	383	1,402	1.8
Other MLHD	4,545	658	3,887	1,516	2,481	10,706	2.7
Total MLHD	16,926	5,593	11,333	7,604	8,497	39,562	2.5
Nepean Blue Mountains Local Health District (NBMLHD)							
Blue Mountains District Anzac Memorial Hospital	1,043	273	770	182	757	4,259	4.5
Lithgow Health Service	1,123	348	775	620	474	2,695	2.5
Nepean Hospital	14,190	4,686	9,504	5,390	8,490	44,153	3.2
Other NBMLHD	909	899	10	209	625	3,059	3.7
Total NBMLHD	17,265	6,206	11,059	6,401	10,346	54,166	3.2

All episodes

Acute episodes

	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 District (NNSWLHD)							
Ballina District Hospital	2,226	1,326	900	1,723	400	3,918	1.8
Casino and District Memorial Hospital	883	332	551	454	406	2,391	2.8
Grafton Base Hospital	3,448	1,911	1,537	1,887	1,424	6,772	2.0
Lismore Base Hospital	6,383	2,765	3,618	2,502	3,802	20,919	3.3
Macleay District Hospital	924	251	673	429	456	2,993	3.4
Murwillumbah District Hospital	1,556	691	865	683	767	3,398	2.3
The Tweed Hospital	7,913	3,199	4,714	3,463	4,382	20,997	2.7
Other NNSWLHD	1,311	357	954	499	644	3,233	2.8
Total NNSWLHD	24,644	10,832	13,812	11,640	12,281	64,621	2.7
Northern Sydney Local Health District (NSLHD)							
Hornsby and Ku-Ring-Gai Hospital	4,256	1,049	3,207	844	3,265	17,895	4.4
Manly District Hospital	3,602	694	2,908	1,021	2,555	13,505	3.8
Mona Vale and District Hospital	4,113	1,818	2,295	1,918	2,025	10,462	2.7
Royal North Shore Hospital	14,654	5,559	9,095	5,656	8,695	54,083	3.8
Ryde Hospital	2,778	716	2,062	1,009	1,700	9,745	3.6
Other NSLHD	2,760	1,189	1,571	464	1,426	51,671	27.3
Total NSLHD	32,163	11,025	21,138	10,912	19,666	157,361	5.1
South Eastern Sydney Local Health District (SESLHD)							
Prince of Wales Hospital	10,062	5,783	4,279	4,772	5,098	40,622	4.1
Royal Hospital for Women	3,769	479	3,290	1,137	2,632	12,603	3.3
St George Hospital	13,992	5,475	8,517	5,329	8,147	49,804	3.7
Sutherland Hospital	6,639	2,104	4,535	1,950	4,181	22,697	3.7
Sydney Hospital / Sydney Eye Hospital	2,484	1,332	1,152	1,262	1,220	5,951	2.4
Other SESLHD [†]	1,613	999	614	16	*	48	2.0
Total SESLHD	38,559	16,172	22,387	14,466	21,278	131,725	3.7
South Western Sydney Local Health District (SWSLHD)							
Bankstown / Lidcombe Hospital	11,089	3,385	7,704	4,896	5,963	33,580	3.1
Bowral and District Hospital	2,134	590	1,544	948	1,177	5,417	2.5
Camden Hospital	543	254	289	272	87	809	2.3
Campbelltown Hospital	10,118	3,202	6,916	3,897	6,198	33,618	3.3
Fairfield Hospital	7,297	3,486	3,811	3,478	3,689	17,791	2.5
Liverpool Hospital	17,212	6,824	10,388	7,716	9,296	62,582	3.7
Other SWSLHD [†]	952	432	520	10	404	1,368	3.3
Total SWSLHD	49,345	18,173	31,172	21,217	26,814	155,165	3.2
Southern NSW Local Health District (SNSWLHD)							
Bateman's Bay District Hospital	1,484	616	868	866	552	2,748	1.9
Bega District Hospital	2,012	937	1,075	954	974	4,853	2.5
Cooma Health Service	875	286	589	358	492	2,117	2.5
Goulburn Base Hospital	2,563	1,172	1,391	1,210	1,307	7,674	3.0
Moruya District Hospital	1,946	980	966	1,057	851	4,021	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	2,099	1,095	1,004	1,390	697	4,145	2.0
Other SNSWLHD	1,268	130	1,138	430	602	3,161	3.1
Total SNSWLHD	12,247	5,216	7,031	6,265	5,475	28,719	2.4
St Vincent's Health Network (SVHN)							
St Vincent's Hospital, Darlinghurst	9,649	4,914	4,735	5,125	4,517	32,140	3.3
Other SVHN‡	515	215	300				
Total SVHN	10,164	5,129	5,035	5,125	4,517	32,140	3.3
Sydney Children's Hospitals Network (SCHN)							
Sydney Children's Hospital	4,741	2,378	2,363	2,379	2,362	12,151	2.6
The Children's Hospital at Westmead	7,514	3,694	3,820	3,040	4,474	23,504	3.1
Total SCHN	12,255	6,072	6,183	5,419	6,836	35,655	2.9
Sydney Local Health District (SYDLHD)							
Canterbury Hospital	4,288	1,166	3,122	972	3,186	14,867	3.6
Concord Hospital	12,825	8,433	4,392	7,678	4,856	46,925	3.7
RPAH Institute of Rheumatology and Orthopaedics	417	*	*	63	354	1,538	3.7
Royal Prince Alfred Hospital	18,101	8,459	9,642	7,876	10,212	65,322	3.6
Other SYDLHD	1,347	0	1,347	51	997	5,185	4.9
Total SYDLHD	36,978	18,058	18,503	16,640	19,605	133,837	3.7
Western NSW Local Health District (WNSWLHD)							
Bathurst Base Hospital	2,945	1,403	1,542	1,301	1,554	7,973	2.8
Cowra District Hospital	854	267	587	369	469	2,013	2.4
Dubbo Base Hospital	5,257	2,274	2,983	2,187	3,058	13,970	2.7
Forbes District Hospital	1,127	652	475	693	419	2,177	2.0
Mudgee District Hospital	931	352	579	439	488	2,348	2.5
Orange Base Hospital	5,779	2,489	3,290	2,459	3,123	17,224	3.1
Parkes District Hospital	607	177	430	206	386	1,623	2.7
Other WNSWLHD	3,144	439	2,705	868	2,069	10,986	3.7
Total WNSWLHD	20,644	8,053	12,591	8,522	11,566	58,314	2.9
Western Sydney Local Health District (WSLHD)							
Auburn Hospital	4,949	1,239	3,710	2,322	2,549	9,588	2.0
Blacktown Hospital	7,039	1,467	5,572	1,506	5,457	29,995	4.3
Mount Druitt Hospital	3,607	1,117	2,490	1,280	2,096	5,643	1.7
Westmead Hospital (all units)	22,262	11,947	10,315	11,638	10,036	67,141	3.1
Other WSLHD	468	22	446	15	442	7,626	16.7
Total WSLHD	38,325	15,792	22,533	16,761	20,580	119,993	3.2

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

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

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

Download our reports

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

The suite of products includes:

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



About the Bureau

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

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

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

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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.

Elective Surgery

Hospital Quarterly:

Performance of
NSW public hospitals

April to June 2012

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

Compared with the same quarter one year ago, a similar amount of elective surgery was conducted. Less surgery was performed in the urgent category (down 2%), and semi-urgent increased by 5%. The same amount of surgery was performed in the non-urgent category. Staged surgery decreased by 12% compared with last year.

Most patients (92%) continued to receive their surgery on time in NSW. Compared to the same quarter one year ago, the percentage of urgent,

semi-urgent and non-urgent patients receiving surgery on time remained largely unchanged at 94%, 91% and 91% respectively.

The median* waiting times for patients admitted for elective surgery have changed little since the same quarter in 2011 for urgent and semi-urgent surgical procedures (11 and 49 days respectively). The median waiting time for patients admitted for non-urgent procedures was 240 days, up by 17 days when compared with the same quarter one year ago.

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

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During the quarter	Apr-Jun 2012	Apr-Jun 2011	The difference
Elective surgical procedures performed	50,538 procedures	50,434 procedures	unchanged
' <i>Staged procedures</i> ' (including non-urgent cystoscopies)	3,289 staged	3,734 staged	-445 (-12%)
Elective surgery patients treated on time	92% on time	92% on time	unchanged
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	91% on time	unchanged
Non-urgent elective surgery patients treated on time	91% on time	92% on time	-1 percentage point
Median* waiting time for non-urgent surgery	240 days	223 days	+17 (+8%)

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

Our approach to elective surgery reporting

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

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

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

Explaining staged procedures

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

Surgeons use clinical judgement to decide whether a procedure should be categorised as staged or not.

Examples of staged procedures include: waiting for a broken bone to heal before removing pins or plates; the time needed for hormone therapy to work before egg harvesting takes place during in-vitro fertilisation (IVF); and certain invasive diagnostic procedures (such as cystoscopy) that sometimes need to be conducted at set intervals.

Differences across hospitals

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

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

The Bureau is committed to providing clarity on surgical waiting times in NSW. Further detail on our methods can be found in the Bureau's *Hospital Quarterly Technical Supplement: Elective surgery measures, April to June 2012* 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.

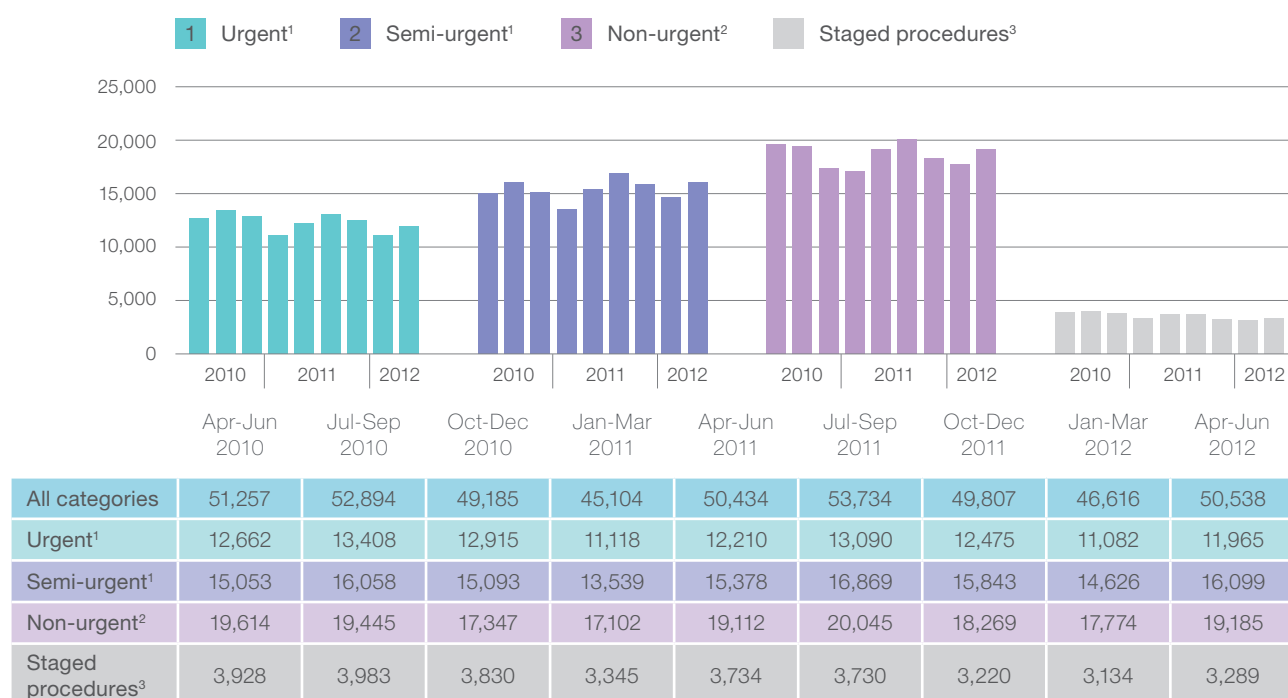
Number of elective surgery procedures performed

Note: Due to a major upgrade to the information system at The Children’s Hospital at Westmead (CHW) during the April to June 2012 quarter, the data are not considered reliable enough to report. Results from CHW have also been excluded from NSW current and previous quarters to enable comparisons over time. This hospital accounts for approximately 3% of elective surgery activity but its removal does not have a large effect on waiting times for NSW. Further detail about this analysis can be found in the Bureau’s *Hospital Quarterly Technical Supplement: Elective surgery measures, April to June 2012*, available at www.bhi.nsw.gov.au

During April to June 2012, the Waiting List Collection On-line System (WLCOS) recorded that 50,538 patients were admitted from the waiting list to receive an elective surgery procedure in NSW public hospitals or facilities contracted by NSW hospitals. This is 8% higher than the 46,616 conducted in the previous quarter (in line with the usual seasonal pattern) but similar to the 50,434 surgical procedures completed in the same quarter last year (Figure 1).

In this report, results and figures exclude staged patients and non-urgent cystoscopy, unless otherwise stated.

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



1. Excluding staged procedures.
2. Excluding staged procedures and non-urgent cystoscopy.
3. Including non-urgent cystoscopy.

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

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, January to March 2012 and April to June 2012 on 20 July 2012. Data extracted for all previous quarters on 15 July 2011.

Only one procedure is recorded in the waiting list and counted in this report for each admission, although some patients have more than one procedure during a single admission. A patient can be admitted more than once in a quarter for elective procedures and each admission is counted.

Urgent surgery: There were 11,965 procedures completed, down 2% compared with one year ago. Urgent procedures made up 24% of all completed elective surgery.

Semi-urgent surgery: There were 16,099 procedures completed, up 5% compared with one year ago. Semi-urgent procedures made up 32% of all completed elective surgery.

Non-urgent surgery: There were 19,185 procedures completed, up less than 1% compared with one year ago. Non-urgent procedures made up 38% of all completed elective surgery.

Staged surgery: There were 3,289 procedures, down 12% compared with one year ago. Staged procedures made up 7% of all completed elective surgery.

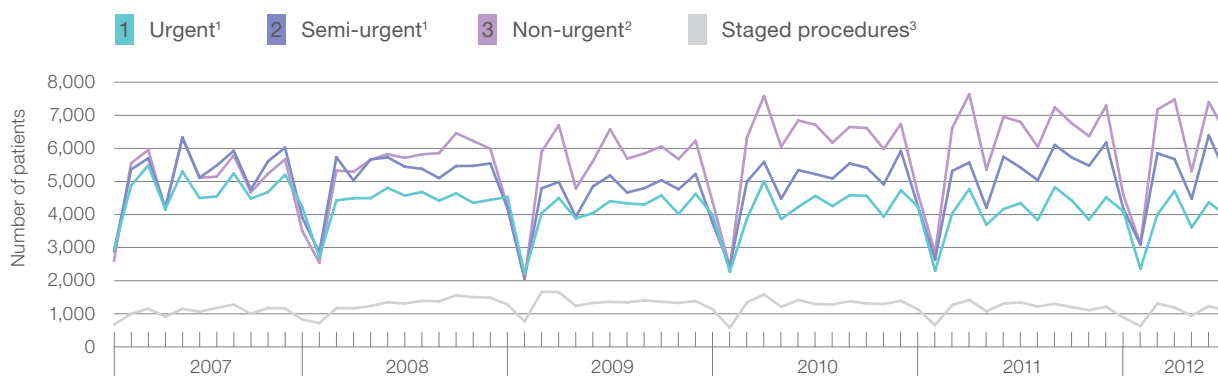
Change over five years

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

Comparing the proportions that the surgical categories make up of all completed procedures, urgent surgery has decreased from 28% of all surgical procedures in May 2007 to 23% in May 2012.

Over the same period, non-urgent procedures have increased from 33% of all surgical procedures to 38%.

Figure 2: Patients who received elective surgery, by urgency category, by month, January 2007 to June 2012



1. Excluding staged procedures.
2. Excluding staged procedures and non-urgent cystoscopy.
3. Including non-urgent cystoscopy.

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

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, January to March 2012 and April to June 2012 on 20 July 2012. Data extracted for all previous quarters on 15 July 2011.

Patients admitted on time for elective surgery

In the April to June 2012 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), similar to the preceding quarter (90%) and the same quarter in 2011 (92%).

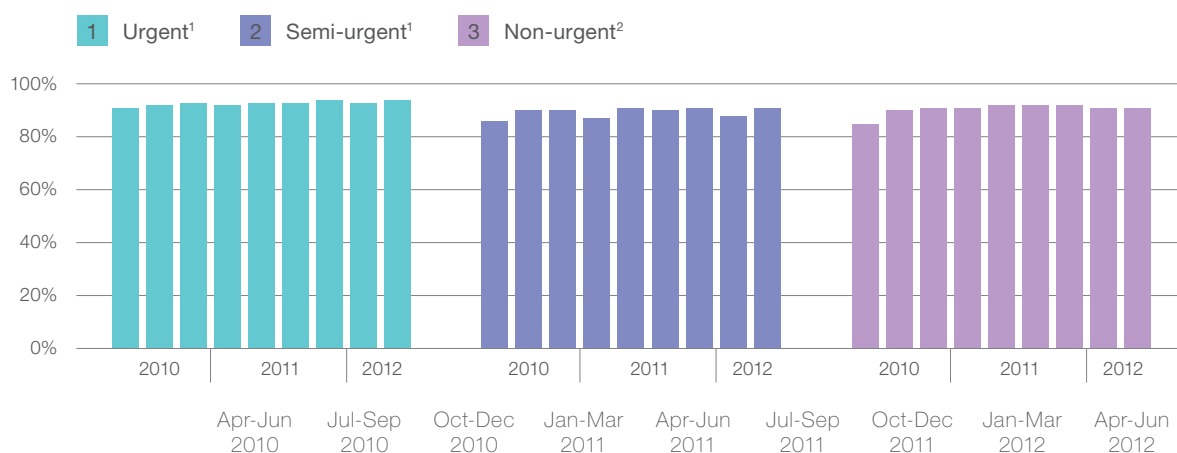
Figure 3 presents the percentage of patients in each surgical category who received their surgery on time for the most recent nine quarters. These results exclude staged patients and non-urgent cystoscopy procedures.

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 2011.

Semi-urgent surgery: 91% of patients were admitted within 90 days, up three percentage points compared with the last quarter but similar to the same quarter in 2011.

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

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



	2010	2011	2012
All categories	87%	91%	92%
Urgent ¹	91%	92%	94%
Semi-urgent ¹	86%	90%	91%
Non-urgent ²	85%	90%	91%

1. Excluding staged procedures.
2. Excluding staged procedures and non-urgent cystoscopy.

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

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, January to March 2012 and April to June 2012 on 20 July 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.

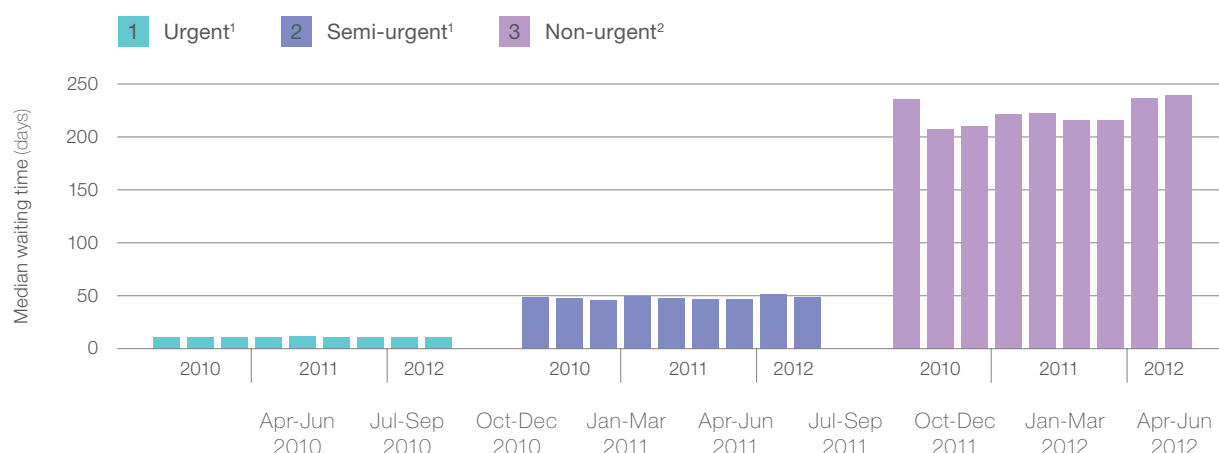
Urgent surgery: The median wait was 11 days – largely unchanged over the past two years, when the median wait time ranged from 11 to 12 days.

Semi-urgent surgery: The median wait time for this category was 49 days, one day more than the same quarter in 2011 but similar to the same quarter in 2010 (49 days).

Non-urgent surgery: The median wait time for this category was 240 days, 17 days more than the same quarter in 2011 (223 days).

In part due to the longer wait times, non-urgent median waiting times appear as the most volatile of the three urgency categories. Over the past nine quarters, non-urgent procedure wait times have ranged from 208 days in July to September 2010 to 240 this quarter.

Figure 4: NSW elective surgery median waiting time (days), by urgency category, April 2010 to June 2012



Urgency Category	2010 (Apr-Jun)	2010 (Jul-Sep)	2010 (Oct-Dec)	2011 (Jan-Mar)	2011 (Apr-Jun)	2011 (Jul-Sep)	2011 (Oct-Dec)	2011 (Jan-Mar)	2012 (Apr-Jun)
Urgent ¹	11	11	11	11	12	11	11	11	11
Semi-urgent ¹	49	48	46	50	48	47	47	51	49
Non-urgent ²	236	208	210	222	223	216	216	237	240

1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

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

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

Source: Waiting List Collection On-line System, NSW Health. Data extracted for July to September 2011, October to December 2011, January to March 2012 and April to June 2012 on 20 July 2012. Data extracted for all previous quarters on 15 July 2011.

Cumulative wait time

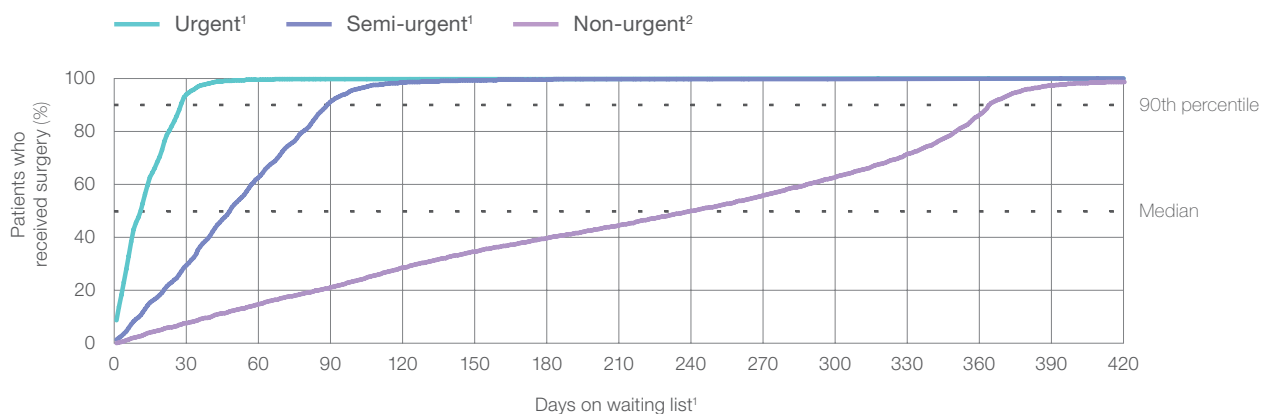
Greater detail on how long people waited to be admitted for their elective surgery during April to June 2012 is presented in [Figure 5](#).

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

surgery over the period shown. A flat slope shows a lower rate of completion of patients' surgery over the period.

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

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



1. Excluding staged procedures.

2. Excluding staged procedures and non-urgent cystoscopy.

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

Source: Waiting List Collection On-line System, NSW Health. Data extracted on 20 July 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, April to June 2012

Number of elective surgical procedures					
All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³	
New South Wales					
Total New South Wales	50,538	11,965	16,099	19,185	3,289
Central Coast Local Health District (CCLHD)					
Gosford Hospital	1,491	321	492	531	147
Wyong Hospital	830	116	341	333	40
Total CCLHD	2,321	437	833	864	187
Far West Local Health District (FWLHD)					
Broken Hill Base Hospital	276	59	94	100	23
Total FWLHD	276	59	94	100	23
Hunter New England Local Health District (HNELHD)					
Armidale and New England Hospital	288	54	106	124	4
Belmont Hospital	583	90	235	222	36
Calvary Mater Newcastle	297	157	108	21	11
Cessnock District Hospital	389	96	195	88	10
Gunnedah District Hospital	99	37	34	28	0
Inverell District Hospital	58	13	18	24	3
John Hunter Hospital	2,128	651	689	679	109
Kurri Kurri District Hospital	452	43	91	313	5
Maitland Hospital	709	171	270	246	22
Manning Base Hospital	695	90	235	332	38
Moree District Hospital	106	29	16	59	2
Muswellbrook District Hospital	106	11	32	62	1
Narrabri District Hospital	57	22	31	*	*
Singleton District Hospital	102	12	29	60	1
Tamworth Base Hospital	908	146	338	327	97
Other HNELHD	234	29	75	128	2
Total HNELHD	7,211	1,651	2,502	2,713	341

Number of elective surgical procedures

	All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³
Illawarra Shoalhaven Local Health District (ISLHD)					
Bulli District Hospital	115	30	30	55	0
Milton and Ulladulla Hospital	35	14	*	18	*
Shellharbour Hospital	736	53	201	479	3
Shoalhaven and District Memorial Hospital	706	159	177	320	50
Wollongong Hospital	1,431	523	289	285	334
Total ISLHD	3,023	779	697	1,157	387
Mid North Coast Local Health District (MNCLHD)					
Bellingen River District Hospital	56	*	23	29	*
Coffs Harbour Base Hospital	916	177	222	428	89
Kempsey Hospital	204	*	34	161	*
Macksville District Hospital	73	*	18	50	*
Port Macquarie Base Hospital	755	192	250	233	80
Other MNCLHD	179	13	34	72	60
Total MNCLHD	2,183	382	581	973	229
Murrumbidgee Local Health District (MLHD)					
Deniliquin Health Service	60	17	32	11	0
Griffith Base Hospital	278	50	89	122	17
Tumut Health Service	70	*	25	37	*
Wagga Wagga Base Hospital	1,188	244	367	555	22
Young Health Service	77	*	34	*	20
Other MLHD	85	25	39	20	1
Total MLHD	1,758	336	586	745	60
Nepean Blue Mountains Local Health District (NBMLHD)					
Blue Mountains District Anzac Memorial Hospital	97	10	55	32	0
Hawkesbury District Health Service	374	61	120	182	11
Lithgow Health Service	158	*	55	86	*
Nepean Hospital	1,460	431	443	550	36
Other NBMLHD	204	*	56	130	*
Total NBMLHD	2,293	502	729	980	47
Northern NSW Local Health District (NNSWLHD)					
Ballina District Hospital	186	35	90	51	10
Casino and District Memorial Hospital	227	28	68	115	16
Grafton Base Hospital	432	159	146	101	26
Lismore Base Hospital	1,204	344	362	410	88
Macleay District Hospital	56	31	*	17	*
Murwillumbah District Hospital	434	60	129	193	52
The Tweed Hospital	764	180	256	182	146
Total NNSWLHD	3,303	837	1,051	1,069	338

Number of elective surgical procedures

All categories	Urgent ¹	Semi-urgent ¹	Non-urgent ²	Staged procedures ³	
Northern Sydney Local Health District (NSLHD)					
Hornsby and Ku-Ring-Gai Hospital	541	94	177	247	23
Manly District Hospital	326	73	118	110	25
Mona Vale and District Hospital	392	68	85	213	26
Royal North Shore Hospital	1,455	492	457	486	20
Ryde Hospital	399	54	160	182	3
Total NSLHD	3,113	781	997	1,238	97
South Eastern Sydney Local Health District (SESLHD)					
Prince of Wales Hospital	1,293	356	583	322	32
Royal Hospital for Women	425	148	187	90	0
St George Hospital	945	453	269	196	27
Sutherland Hospital	620	140	202	255	23
Sydney Hospital / Sydney Eye Hospital	1,220	214	305	701	0
Total SESLHD	4,503	1,311	1,546	1,564	82
South Western Sydney Local Health District (SWSLHD)					
Bankstown / Lidcombe Hospital	1,338	192	379	614	153
Bowral and District Hospital	300	65	61	166	8
Campbelltown Hospital	1,196	132	378	529	157
Fairfield Hospital	610	52	109	425	24
Liverpool Hospital	1,872	661	627	537	47
Total SWSLHD	5,316	1,102	1,554	2,271	389
Southern NSW Local Health District (SNSWLHD)					
Bateman's Bay District Hospital	277	*	38	231	*
Bega District Hospital	291	70	62	155	4
Cooma Health Service	94	17	26	51	0
Goulburn Base Hospital	293	68	84	140	1
Moruya District Hospital	159	35	55	68	1
Queanbeyan Health Service	230	24	128	74	4
Other SNSWLHD	39	14	*	18	*
Total SNSWLHD	1,383	228	393	737	10
St Vincent's Health Network (SVHN)					
St Vincent's Hospital, Darlinghurst	864	383	232	215	34
Total SVHN	864	383	232	215	34
Sydney Children's Hospitals Network (SCHN)					
Sydney Children's Hospital	748	175	247	319	7
The Children's Hospital at Westmead	†	†	†	†	†
Total SCHN	748	175	247	319	7

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	665	95	261	254	55
Concord Hospital	2,129	405	504	828	392
RPAH Institute of Rheumatology and Orthopaedics	419	30	49	340	0
Royal Prince Alfred Hospital	3,017	1,046	1,053	640	278
Total SYDLHD	6,230	1,576	1,867	2,062	725
Western NSW Local Health District (WNSWLHD)					
Bathurst Base Hospital	376	86	125	133	32
Cowra District Hospital	131	17	44	70	0
Dubbo Base Hospital	820	140	239	367	74
Forbes District Hospital	132	10	31	91	0
Mudgee District Hospital	137	19	46	68	4
Orange Base Hospital	753	127	222	351	53
Parkes District Hospital	78	20	50	*	*
Other WNSWLHD	47	*	*	36	0
Total WNSWLHD	2,474	419	757	1,116	163
Western Sydney Local Health District (WSLHD)					
Auburn Hospital	754	128	277	345	4
Blacktown Hospital	708	118	333	232	25
Mount Druitt Hospital	487	50	240	189	8
Westmead Hospital (all units)	1,590	662	560	268	100
Total WSLHD	3,539	958	1,410	1,034	137

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.

(†) Due to a major upgrade to the hospital's information system during the April to June 2012 quarter, the data are not considered reliable enough to report.

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 20 July 2012.

The following table presents the percentages of elective surgery admissions within the clinically recommended time for each urgency category for April to June 2012. The table is ordered by local health district and includes all principal referral, paediatric specialist,

ungrouped acute – tertiary referral, major metropolitan, major non-metropolitan and district groups 1 and 2 hospitals that conduct elective surgery. Surgery information from smaller hospitals is presented for each local health district under the ‘*other*’ category.

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

Percentage of patients treated on time				
	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
New South Wales				
Total New South Wales	92	94	91	91
Central Coast Local Health District (CCLHD)				
Gosford Hospital	84	92	80	82
Wyong Hospital	91	91	91	91
Total CCLHD	86	92	85	86
Far West Local Health District (FWLHD)				
Broken Hill Base Hospital	96	97	90	100
Total FWLHD	96	97	90	100
Hunter New England Local Health District (HNELHD)				
Armidale and New England Hospital	100	100	99	100
Belmont Hospital	99	100	99	100
Calvary Mater Newcastle	79	76	79	100
Cessnock District Hospital	94	92	94	98
Gunnedah District Hospital	96	89	100	100
Inverell District Hospital	87	100	89	79
John Hunter Hospital	88	92	86	86
Kurri Kurri District Hospital	96	100	100	95
Maitland Hospital	96	97	95	96
Manning Base Hospital	96	100	97	94
Moree District Hospital	100	100	100	100
Muswellbrook District Hospital	99	100	97	100
Narrabri District Hospital	100	100	100	*
Singleton District Hospital	100	100	100	100
Tamworth Base Hospital	82	90	75	84
Other HNELHD	98	100	100	96
Total HNELHD	92	93	90	92

Percentage of patients treated on time

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Illawarra Shoalhaven Local Health District (ISLHD)				
Bulli District Hospital	100	100	100	100
Milton and Ulladulla Hospital	97	93	*	100
Shellharbour Hospital	99	100	98	100
Shoalhaven and District Memorial Hospital	89	88	81	93
Wollongong Hospital	91	97	89	84
Total ISLHD	93	96	90	94
Mid North Coast Local Health District (MNCLHD)				
Bellingen River District Hospital	98	*	96	100
Coffs Harbour Base Hospital	83	74	89	84
Kempsey Hospital	95	*	88	96
Macksville District Hospital	89	*	100	86
Port Macquarie Base Hospital	80	78	79	82
Other MNCLHD	90	92	68	100
Total MNCLHD	84	77	84	87
Murrumbidgee Local Health District (MLHD)				
Deniliquin Health Service	100	100	100	100
Griffith Base Hospital	83	98	96	68
Tumut Health Service	94	*	84	100
Wagga Wagga Base Hospital	93	96	95	91
Young Health Service	96	*	94	100
Other MLHD	99	100	97	100
Total MLHD	93	97	95	89
Nepean Blue Mountains Local Health District (NBMLHD)				
Blue Mountains District Anzac Memorial Hospital	98	100	96	100
Hawkesbury District Health Service	50	75	53	39
Lithgow Health Service	100	*	100	100
Nepean Hospital	81	99	80	68
Other NBMLHD	95	*	93	95
Total NBMLHD	79	96	79	70
Northern NSW Local Health District (NNSWLHD)				
Ballina District Hospital	99	100	99	100
Casino and District Memorial Hospital	100	100	100	100
Grafton Base Hospital	90	97	84	85
Lismore Base Hospital	92	97	90	90
Macleay District Hospital	100	100	*	100
Murwillumbah District Hospital	95	95	94	96
The Tweed Hospital	91	97	85	92
Total NNSWLHD	93	97	90	93

Percentage of patients treated on time

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Northern Sydney Local Health District (NSLHD)				
Hornsby and Ku-Ring-Gai Hospital	95	95	97	94
Manly District Hospital	100	100	100	100
Mona Vale and District Hospital	100	100	100	100
Royal North Shore Hospital	92	93	91	91
Ryde Hospital	96	93	93	99
Total NSLHD	95	94	94	95
South Eastern Sydney Local Health District (SESLHD)				
Prince of Wales Hospital	91	92	92	87
Royal Hospital for Women	99	99	99	99
St George Hospital	79	85	74	70
Sutherland Hospital	93	86	92	98
Sydney Hospital / Sydney Eye Hospital	97	100	97	96
Total SESLHD	91	91	91	92
South Western Sydney Local Health District (SWSLHD)				
Bankstown / Lidcombe Hospital	89	85	91	90
Bowral and District Hospital	100	100	100	100
Campbelltown Hospital	83	88	86	79
Fairfield Hospital	99	96	99	100
Liverpool Hospital	91	91	91	90
Total SWSLHD	90	90	91	90
Southern NSW Local Health District (SNSWLHD)				
Bateman's Bay District Hospital	85	*	100	82
Bega District Hospital	91	87	90	94
Cooma Health Service	99	100	96	100
Goulburn Base Hospital	92	96	98	86
Moruya District Hospital	96	89	96	100
Queanbeyan Health Service	99	100	98	100
Other SNSWLHD	95	100	*	89
Total SNSWLHD	93	93	97	90
St Vincent's Health Network (SVHN)				
St Vincent's Hospital, Darlinghurst	93	96	93	86
Total SVHN	93	96	93	86
Sydney Children's Hospitals Network (SCHN)				
Sydney Children's Hospital	97	99	96	97
The Children's Hospital at Westmead	†	†	†	†
Total SCHN	97	99	96	97

Percentage of patients treated on time

	All categories ¹	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Sydney Local Health District (SYDLHD)				
Canterbury Hospital	96	100	95	96
Concord Hospital	99	100	100	99
RPAH Institute of Rheumatology and Orthopaedics	100	93	100	100
Royal Prince Alfred Hospital	98	98	99	97
Total SYDLHD	98	98	99	98
Western NSW Local Health District (WNSWLHD)				
Bathurst Base Hospital	98	97	98	98
Cowra District Hospital	100	100	100	100
Dubbo Base Hospital	90	94	87	90
Forbes District Hospital	100	100	100	100
Mudgee District Hospital	98	100	98	99
Orange Base Hospital	82	100	88	72
Parkes District Hospital	100	100	100	*
Other WNSWLHD	98	*	*	100
Total WNSWLHD	91	97	92	88
Western Sydney Local Health District (WSLHD)				
Auburn Hospital	90	88	84	96
Blacktown Hospital	97	97	96	99
Mount Druitt Hospital	94	96	96	90
Westmead Hospital (all units)	94	98	89	92
Total WSLHD	94	97	91	95

1. Excluding staged procedures.
 2. Excluding staged procedures and non-urgent cystoscopy.
- (*) Values suppressed due to small numbers and to protect privacy.
- (†) Due to a major upgrade to the hospital's information system during the April to June 2012 quarter, the data are not considered reliable enough to report.

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 20 July 2012.

The following table presents the median waiting times (in days) of elective surgery admissions for each urgency category for this quarter. The table is ordered by local health district and includes all principal referral, paediatric specialist, ungrouped acute – tertiary referral,

major metropolitan, major non-metropolitan and district groups 1 and 2 hospitals that conduct elective surgery. Surgery information from smaller hospitals is presented for each local health district under the ‘*other*’ category.

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

	Median waiting time (days)		
	Urgent ¹	Semi-urgent ¹	Non-urgent ²
New South Wales			
Total New South Wales	11	49	240
Central Coast Local Health District (CCLHD)			
Gosford Hospital	19	69	333
Wyong Hospital	18	41	290
Total CCLHD	18	53	315
Far West Local Health District (FWLHD)			
Broken Hill Base Hospital	17	49	139
Total FWLHD	17	49	139
Hunter New England Local Health District (HNELHD)			
Armidale and New England Hospital	21	54	283
Belmont Hospital	14	43	205
Calvary Mater Newcastle	22	56	280
Cessnock District Hospital	15	22	67
Gunnedah District Hospital	18	51	117
Inverell District Hospital	14	77	361
John Hunter Hospital	10	53	285
Kurri Kurri District Hospital	9	4	276
Maitland Hospital	10	29	237
Manning Base Hospital	18	66	286
Moree District Hospital	9	14	270
Muswellbrook District Hospital	8	18	11
Narrabri District Hospital	6	20	*
Singleton District Hospital	7	23	40
Tamworth Base Hospital	14	79	335
Other HNELHD	14	34	109
Total HNELHD	13	48	253

Median waiting time (days)

Urgent ¹	Semi-urgent ¹	Non-urgent ²
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Illawarra Shoalhaven Local Health District (ISLHD)			
Bulli District Hospital	9	43	190
Milton and Ulladulla Hospital	6	*	94
Shellharbour Hospital	21	56	232
Shoalhaven and District Memorial Hospital	15	77	274
Wollongong Hospital	6	66	336
Total ISLHD	8	62	264

Mid North Coast Local Health District (MNCLHD)			
Bellingen River District Hospital	*	31	108
Coffs Harbour Base Hospital	22	57	329
Kempsey Hospital	*	72	264
Macksville District Hospital	*	52	342
Port Macquarie Base Hospital	19	73	343
Other MNCLHD	19	73	238
Total MNCLHD	20	64	314

Murrumbidgee Local Health District (MLHD)			
Deniliquin Health Service	14	42	161
Griffith Base Hospital	23	68	357
Tumut Health Service	*	62	55
Wagga Wagga Base Hospital	17	51	309
Young Health Service	*	63	96
Other MLHD	12	48	49
Total MLHD	16	54	304

Nepean Blue Mountains Local Health District (NBMLHD)			
Blue Mountains District Anzac Memorial Hospital	5	41	31
Hawkesbury District Health Service	23	89	394
Lithgow Health Service	*	50	226
Nepean Hospital	10	68	345
Other NBMLHD	*	42	245
Total NBMLHD	11	62	328

Northern NSW Local Health District (NNSWLHD)			
Ballina District Hospital	18	42	91
Casino and District Memorial Hospital	6	30	64
Grafton Base Hospital	15	38	243
Lismore Base Hospital	8	52	324
Macleay District Hospital	8	*	31
Murwillumbah District Hospital	14	56	336
The Tweed Hospital	16	63	239
Total NNSWLHD	12	51	290

Median waiting time (days)

Urgent ¹	Semi-urgent ¹	Non-urgent ²
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Northern Sydney Local Health District (NSLHD)			
Hornsby and Ku-Ring-Gai Hospital	8	34	130
Manly District Hospital	6	30	96
Mona Vale and District Hospital	5	16	72
Royal North Shore Hospital	10	49	152
Ryde Hospital	14	43	138
Total NSLHD	8	39	129

South Eastern Sydney Local Health District (SESLHD)			
Prince of Wales Hospital	13	41	300
Royal Hospital for Women	9	34	95
St George Hospital	13	63	322
Sutherland Hospital	20	63	286
Sydney Hospital / Sydney Eye Hospital	12	49	185
Total SESLHD	13	49	219

South Western Sydney Local Health District (SWSLHD)			
Bankstown / Lidcombe Hospital	16	51	220
Bowral and District Hospital	18	48	136
Campbelltown Hospital	20	70	328
Fairfield Hospital	11	43	243
Liverpool Hospital	12	50	278
Total SWSLHD	14	56	266

Southern NSW Local Health District (SNSWLHD)			
Bateman's Bay District Hospital	*	53	347
Bega District Hospital	18	73	295
Cooma Health Service	7	43	131
Goulburn Base Hospital	17	49	313
Moruya District Hospital	14	68	124
Queanbeyan Health Service	16	54	133
Other SNSWLHD	7	*	103
Total SNSWLHD	14	57	296

St Vincent's Health Network (SVHN)			
St Vincent's Hospital, Darlinghurst	5	47	144
Total SVHN	5	47	144

Sydney Children's Hospitals Network (SCHN)			
Sydney Children's Hospital	5	32	172
The Children's Hospital at Westmead	†	†	†
Total SCHN	5	32	172

Median waiting time (days)

	Urgent ¹	Semi-urgent ¹	Non-urgent ²
Sydney Local Health District (SYDLHD)			
Canterbury Hospital	13	57	286
Concord Hospital	8	44	122
RPAH Institute of Rheumatology and Orthopaedics	4	30	42
Royal Prince Alfred Hospital	7	18	34
Total SYDLHD	7	30	81
Western NSW Local Health District (WNSWLHD)			
Bathurst Base Hospital	12	60	255
Cowra District Hospital	8	39	193
Dubbo Base Hospital	8	37	280
Forbes District Hospital	8	25	279
Mudgee District Hospital	16	43	243
Orange Base Hospital	17	67	349
Parkes District Hospital	6	16	*
Other WNSWLHD	*	*	310
Total WNSWLHD	11	46	281
Western Sydney Local Health District (WSLHD)			
Auburn Hospital	12	56	218
Blacktown Hospital	13	48	118
Mount Druitt Hospital	12	49	239
Westmead Hospital (all units)	11	45	135
Total WSLHD	12	48	177

1. Excluding staged procedures.
 2. Excluding staged procedures and non-urgent cystoscopy.
- (*) Values suppressed due to small numbers and to protect privacy.
- (†) Due to a major upgrade to the hospital's information system during the April to June 2012 quarter, the data are not considered reliable enough to report.

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 20 July 2012.

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



About the Bureau

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

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

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

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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.