



ACT
Government

ACT Health

FOI18-87



Dear 

Freedom of information request: FOI18/87

I refer to your application under section 30 of the *Freedom of Information Act 2016* (the Act), received by ACT Health on 13 September 2018, in which you sought access to a copy of all briefs sent to the Minister for Health and Wellbeing and the Minister for Mental Health in August 2018 on the operational performance of the hospital system.

Specifically, you are seeking:

- *Canberra Hospital emergency department waiting times and operational performance;*
- *Elective surgery waiting times and waiting lists;*
- *Disease outbreaks such as influenza, norovirus etc*
- *Cultural issues in the hospital system such as bullying etc;*
- *Training accreditation for specialist areas of the Canberra Hospital and the University of Canberra public hospital;*
- *Ward capacity and bed block issues;*
- *Shortage of specialists in the ACT;*
- *Ligature points in the adult mental health unit;*
- *Problems in staffing particular areas of ACT Health and Canberra Hospital and Healthcare system;*
- *Maintenance problems at the Canberra Hospital and other areas of ACT Health;*
- *Progress in capital works expenditure;*
- *Sentinel events in ACT Hospitals."*

I am an Information Officer appointed by the Director-General of ACT Health under section 18 of the Act to deal with access applications made under Part 5 of the Act.

ACT Health was required to provide a decision on your access application by 18 October 2018.

Decision on access

Searches were completed for relevant documents and six documents were identified that fall within the scope of your request.

I have included as Attachment A to this decision the schedule of relevant documents. This provides a description of each document that falls within the scope of your request and the access decision for each of those documents.

I have decided to grant full access to all relevant documents. The documents released to you are provided as Attachment B to this letter.

Charges

Processing charges are not applicable for this request.

Online publishing – disclosure log

Under section 28 of the Act, ACT Health maintains an online record of access applications called a disclosure log. Your original access application, my decision and documents released to you in response to your access application will be published in the ACT Health disclosure log not less than three days but not more than 10 days after the date of this decision. Your personal contact details will not be published.

You may view ACT Health's disclosure log at <https://www.health.act.gov.au/about-our-health-system/freedom-information/disclosure-log>.

Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published on ACT Health's disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman
GPO Box 442
CANBERRA ACT 2601

Via email: ACTFOI@ombudsman.gov.au

ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision.

Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal
Level 4, 1 Moore St
GPO Box 370
Canberra City ACT 2601
Telephone: (02) 6207 1740
<http://www.acat.act.gov.au/>

If you have any queries concerning the ACT Health's processing of your request, or would like further information, please contact the FOI Coordinator on 6205 1340 or e-mail HealthFOI@act.gov.au.

Yours sincerely



Karen Doran
A/g Deputy Director-General
Corporate Services

17 October 2018

FREEDOM OF INFORMATION REQUEST SCHEDULE

Please be aware that under the *Freedom of Information Act 2016*, some of the information provided to you will be released to the public through the ACT Government's Open Access Scheme. The Open Access release status column of the table below indicates what documents are intended for release online through open access.

Personal information or business affairs information will not be made available under this policy. If you think the content of your request would contain such information, please inform the contact officer immediately.

Information about what is published on open access is available online at: <http://www.health.act.gov.au/public-information/consumers/freedom-information>

NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	File No
<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div>	<p>“I would like a copy of all briefs sent to the Minister for Health and Wellbeing and the Minister for Mental Health in August 2018 on the operational performance of the hospital system. The topics of the briefs to include:</p> <ul style="list-style-type: none"> • Canberra Hospital emergency department waiting times and operational performance; • Elective surgery waiting times and waiting lists; • Disease outbreaks such as influenza, norovirus etc • Cultural issues in the hospital system such as bullying etc; • Training accreditation for specialist areas of the Canberra Hospital and the University of Canberra public hospital; • Ward capacity and bed block issues; • Shortage of specialists in the ACT; • Ligature points in the adult mental health unit; • Problems in staffing particular areas of ACT Health and Canberra Hospital and Healthcare system; • Maintenance problems at the Canberra Hospital and other areas of ACT Health; • Progress in capital works expenditure; • Sentinel events in ACT Hospitals.” 	<p style="text-align: center;">FOI18/87</p>

Ref No	No of Folios	Description	Date	Status	Reason for non-release or deferral	Open Access release status
1	1 - 5	Advisory Note – Canberra Hospital Emergency Department (ED) Weekly Report – week ending 29 July 2018	29/07/2018	Full		Yes
2	6	Advisory Note – Request for Advice (Minister for Health & Wellbeing) – Air Handling Unit in Theatre 14 Canberra Hospital – Response Plan	16/08/2018	Full		Yes
3	7-11	Advisory Note – Canberra Hospital Emergency Department (ED) Weekly Report – week ending 12 August 2018	21/08/2018	Full		Yes
4	12-16	Advisory Note – Canberra Hospital Emergency Department (ED) Weekly Report – week ending 5 August 2018	22/08/2018	Full		Yes
5	17-23	Ministerial Brief – Elective Surgery 201/-2019	22/08/2018	Full		Yes
6	24-28	Advisory Note – Canberra Hospital Emergency Department (ED) Weekly Report – week ending 19 August 2018	27/08/2018	Full		Yes
Total No of Docs						
6						



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ADVISORY NOTE

Minister for Health and Wellbeing

MIN18/1186	Canberra Hospital Emergency Department (ED) Weekly Report – week ending 29 July 2018
Critical Date	Not applicable
Acting Director-General	Karen Doran <i>K.D. 9/8/18</i>

Minister's question:

Ministerial request for a weekly report on the Canberra Hospital Emergency Department.

ACT Health's response:

- For the week ending 29 July 2018, there were 236 presentations per day to the Canberra Hospital Emergency Department.
- Occupancy across the week was 92 percent. The University of Canberra Hospital was at 68 percent occupancy based on 84 open beds. The total occupancy across both hospitals was 89 percent.
- The NEAT target was met on 52 percent of all presentations.
- The Canberra Hospital and Health Services was not at Capacity Alert Level 3 at any time during this reporting period.

Noted / Please Discuss

Meegan Fitzharris MLA
Minister for Health and Wellbeing

14/8/18

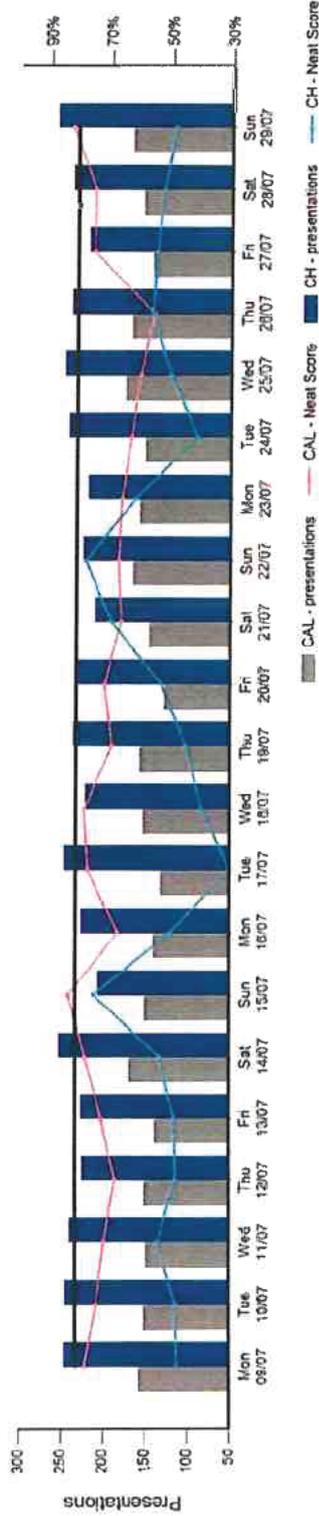
Signatory Name: Mark Dykgraaf, Acting Chief of Clinical Operations Phone: 43125
Action Officer: Tracy Hutchins Phone: 45221



Emergency Department and Hospital Occupancy Key Statistics

No Comment

Presentations VS NEAT (14 Days)



Previous Week

NEAT

58%

CH 52%

CAL 68%

Presentations

2769

CH 1655

CAL 1114

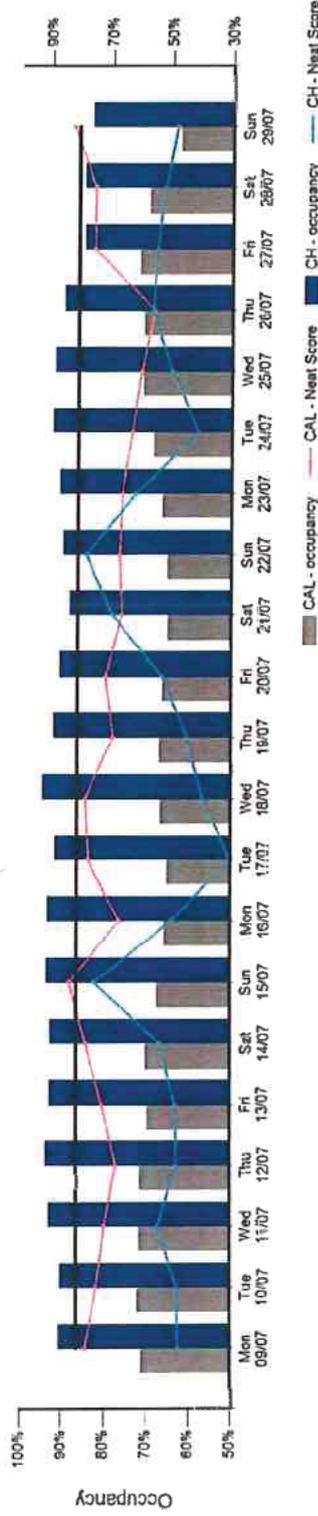
Occupancy

83%

CH 89%

CAL 69%

Occupancy VS NEAT (14 Days)



Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

"The data reported for 1 July 2017 to 31 March 2018 is preliminary data only and is not final. There are no known issues with the data contained in this report however ACT Health will continue working to ensure that the data contained within this report is fit for purpose. Prior to the publication of any data contained within this report, written approval must be sought from ACT Health"

Emergency Department and Hospital Occupancy Key Statistics

Data displayed for Week Ending 29 Jul 2018

	ACT							CH							CAL						
	Mon 23/07	Tue 24/07	Wed 25/07	Thu 26/07	Fri 27/07	Sat 28/07	Sun 29/07	Mon 23/07	Tue 24/07	Wed 25/07	Thu 26/07	Fri 27/07	Sat 28/07	Sun 29/07	Mon 23/07	Tue 24/07	Wed 25/07	Thu 26/07	Fri 27/07	Sat 28/07	Sun 29/07
NEAT	64%	49%	54%	56%	63%	61%	62%	62%	41%	50%	56%	55%	52%	48%	66%	63%	60%	56%	76%	75%	83%
Presentations	376	392	420	405	362	391	423	219	241	245	238	219	237	256	157	151	175	167	143	154	167
Occupancy	83%	85%	85%	84%	81%	80%	82%	90%	92%	92%	90%	85%	85%	89%	66%	68%	71%	71%	72%	70%	68%

Comparative Historical Statistics - Month to Date

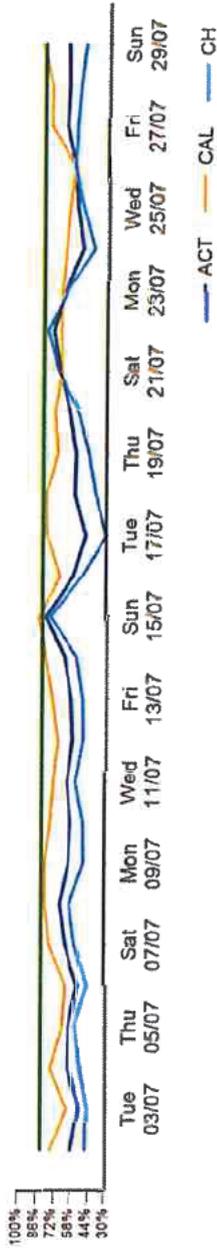
	ACT				CH				CAL			
	23 Jul 2018 - 29 Jul 2018	23 Jul 2017 - 29 Jul 2017	23 Jun 2018 - 29 Jun 2018	23 Jul 2018 - 29 Jul 2018	23 Jun 2018 - 29 Jun 2018	23 Jul 2017 - 29 Jul 2017	23 Jun 2018 - 29 Jun 2018	23 Jul 2018 - 29 Jul 2018	23 Jun 2018 - 29 Jun 2018	23 Jun 2018 - 29 Jun 2018	23 Jul 2017 - 29 Jul 2017	23 Jul 2017 - 29 Jul 2017
NEAT	58%	64%	50%	52%	50%	60%	68%	68%	69%	71%	71%	
Presentations	2769	3043	1683	1655	1683	1818	1114	1063	1225	1225	1225	
Occupancy	83%	92%	95%	89%	95%	98%	69%	63%	78%	78%	78%	

Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

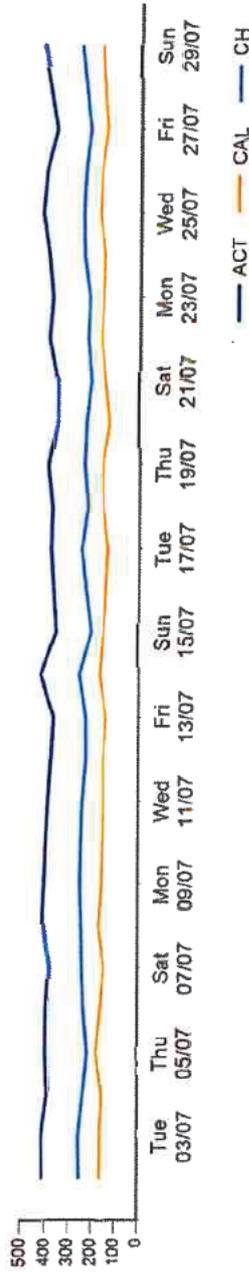
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Emergency Department and Hospital Occupancy Key Statistics

Rolling 28 day NEAT %



Rolling 28 Day Emergency Department Presentations

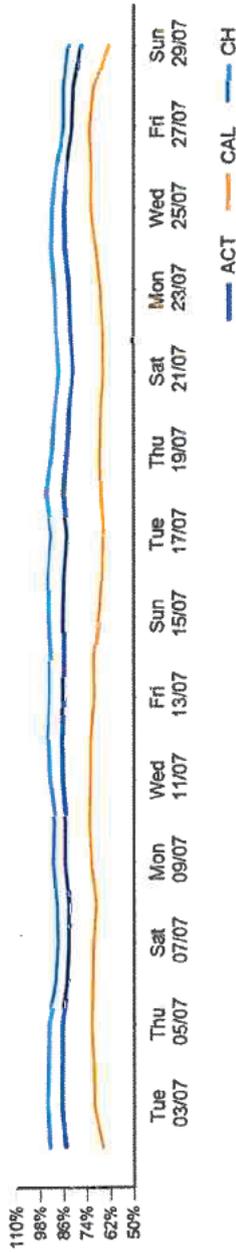


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Emergency Department and Hospital Occupancy Key Statistics

Rolling 28 Day Occupancy



Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

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UNCLASSIFIED - FOR OFFICIAL PURPOSES ONLY

ADVISORY NOTE

Minister for Health and Wellbeing

TRIM Ref: MIN18/1144	Request for Advice (Minister for Health and Wellbeing) - Air Handling Unit in Theatre 14 Canberra Hospital - Response Plan
Critical Date	As soon as possible
Interim Director-General	Michael De'Ath <i>[Signature]</i> 16./8./19.

Minister's question/s:

Please advise when Theatre 14 is fully operational following late August.

ACT Health's response:

Further infection control testing was conducted on 4 September 2018. The preliminary results from this test indicate that there is little to no growth in the areas that were tested. Infection Prevention and Control have advised that Theatre 14 can be used for surgery. The Division of Surgery and Oral Health have opened Theatre 14 as fully operational until such time as further works are required for the planning and installation of the new air handling unit.

*Thank you***Noted / Please Discuss**

.....
Meegan Fitzharris MLA
 Minister for Health and Wellbeing

19.9.18

Signatory Name: Daniel Wood
 Action Officer: Sally Cuff

Phone: 43515
 Phone: 47061



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ADVISORY NOTE

Minister for Health and Wellbeing

TRIM: MIN18/1289	Canberra Hospital Emergency Department (ED) Weekly Report – week ending 12 August 2018
Critical Date	Not applicable
Interim Director-General	Michael De'Ath  21/8/18

Minister's question:

Ministerial request for a weekly report on the Canberra Hospital Emergency Department (ED).

ACT Health's response:

- For the week ending 12 August 2018, there were 239 presentations per day to the Canberra Hospital ED.
- For the reporting period, the occupancy across the week at The Canberra Hospital was 89% based on 659 open beds. The University of Canberra Hospital (UCH) was at 83% occupancy based on 84 open beds. The total occupancy across both hospitals was 88%.
- The NEAT target was met on 62% of all presentations.
- The Canberra Hospital and Health Services was not at Capacity Alert Level 3 at any time during this reporting period.

Noted / Please Discuss



Meegan Fitzharris MLA
Minister for Health and Wellbeing

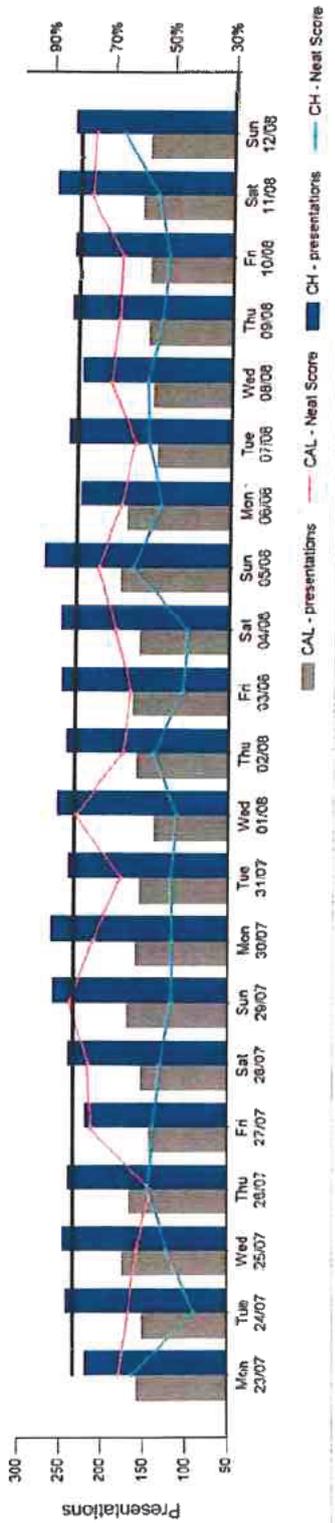
22/8/18

Signatory Name:	Mark Dykgraaf, Acting Chief of Clinical Operations	Phone:	43125
Action Officer:	Tracy Hutchins	Phone:	45221

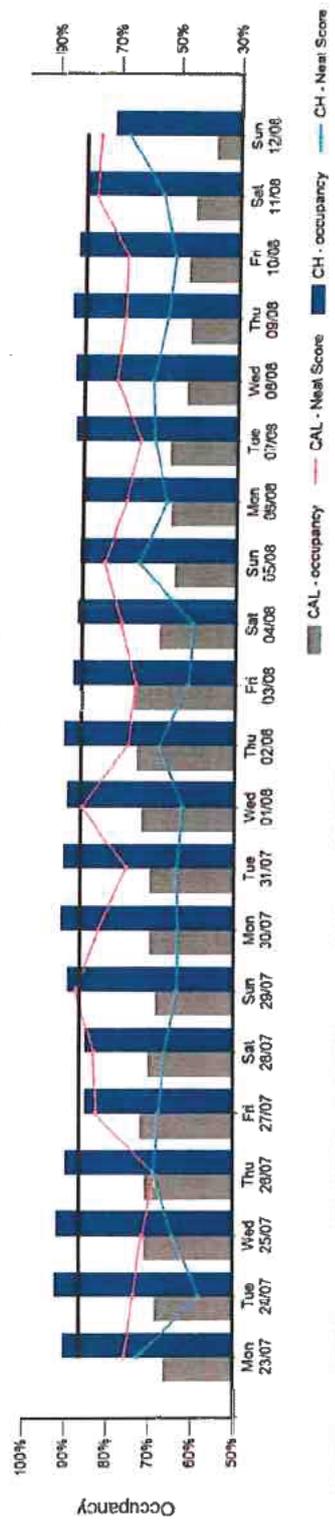
Emergency Department and Hospital Occupancy Key Statistics

No Comment

Presentations VS NEAT (14 Days)



Occupancy VS NEAT (14 Days)



Previous Week

NEAT
62%
 CH 56%
 CAL 70%

Presentations

2733
 CH 1672
 CAL 1061

Occupancy

80%
 CH 87%
 CAL 62%

Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

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Emergency Department and Hospital Occupancy Key Statistics

Data displayed for Week Ending 12 Aug 2018

	ACT							CH							CAL						
	Mon 06/08	Tue 07/08	Wed 08/08	Thu 09/08	Fri 10/08	Sat 11/08	Sun 12/08	Mon 06/08	Tue 07/08	Wed 08/08	Thu 09/08	Fri 10/08	Sat 11/08	Sun 12/08	Mon 06/08	Tue 07/08	Wed 08/08	Thu 09/08	Fri 10/08	Sat 11/08	Sun 12/08
NEAT	59%	59%	63%	59%	57%	63%	70%	53%	57%	58%	53%	51%	55%	67%	62%	70%	58%	67%	67%	77%	76%
Presentations	402	381	371	389	385	418	387	228	242	227	240	237	260	238	139	144	149	148	158	149	
Occupancy	80%	81%	80%	80%	80%	78%	78%	87%	88%	88%	89%	88%	86%	86%	66%	62%	61%	62%	60%	60%	

Comparative Historical Statistics - Month to Date

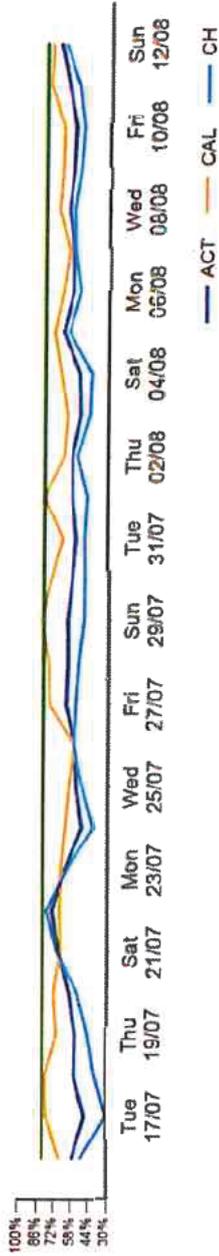
	ACT		CH		CAL	
	06 Jul 2018 - 12 Jul 2018	06 Aug 2018 - 12 Aug 2018	06 Jul 2018 - 12 Jul 2018	06 Aug 2018 - 12 Aug 2018	06 Jul 2018 - 12 Jul 2018	06 Aug 2018 - 12 Aug 2018
NEAT	59%	56%	51%	50%	72%	65%
Presentations	2735	3049	1656	1848	1079	1201
Occupancy	84%	93%	90%	100%	71%	78%

Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

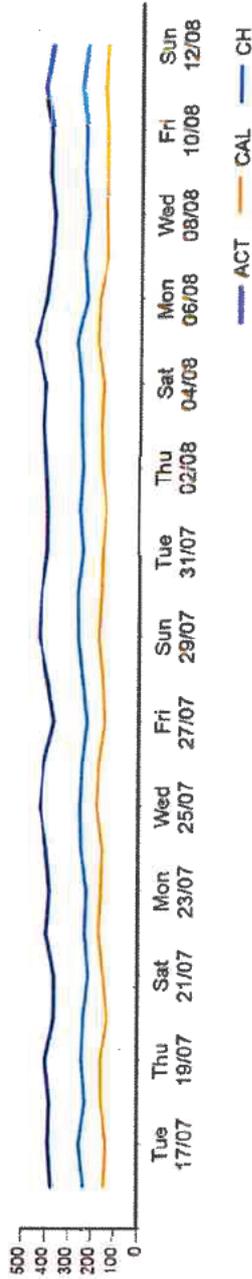
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Emergency Department and Hospital Occupancy Key Statistics

Rolling 28 day NEAT %



Rolling 28 Day Emergency Department Presentations



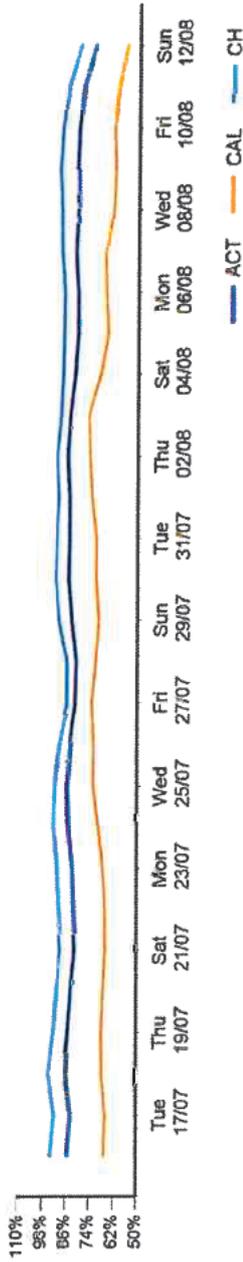
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Emergency Department and Hospital Occupancy Key Statistics

Rolling 28 Day Occupancy



Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

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ADVISORY NOTE

Minister for Health and Wellbeing

TRIM: MIN18/1250	Canberra Hospital Emergency Department (ED) Weekly Report – Week ending 5 August 2018
Critical Date	Not applicable
Interim Director-General	Michael De'Ath 22/8/18 [Signature]

Minister's question:

Ministerial request for a weekly report on the Canberra Hospital Emergency Department.

ACT Health's response:

- For the week ending 5 August 2018, there were 251 presentations per day to the Canberra Hospital Emergency Department.
- For the reporting period, the occupancy data is not reflective of actual activity. This relates to the relocation of patients to the University of Canberra Hospital (UCH) and transitional arrangements relating to data sourcing. The correct occupancy across the week at The Canberra Hospital was 90 per cent based on 659 open beds. The UCH was at 79 per cent occupancy based on 84 open beds. The total occupancy across both hospitals was 89 per cent.
- The NEAT target was met on 58 per cent of all presentations.
- The Canberra Hospital and Health Services was not at Capacity Alert Level 3 at any time during this reporting period.

Noted / Please Discuss

Meegan Fitzharris MLA
Minister for Health and Wellbeing

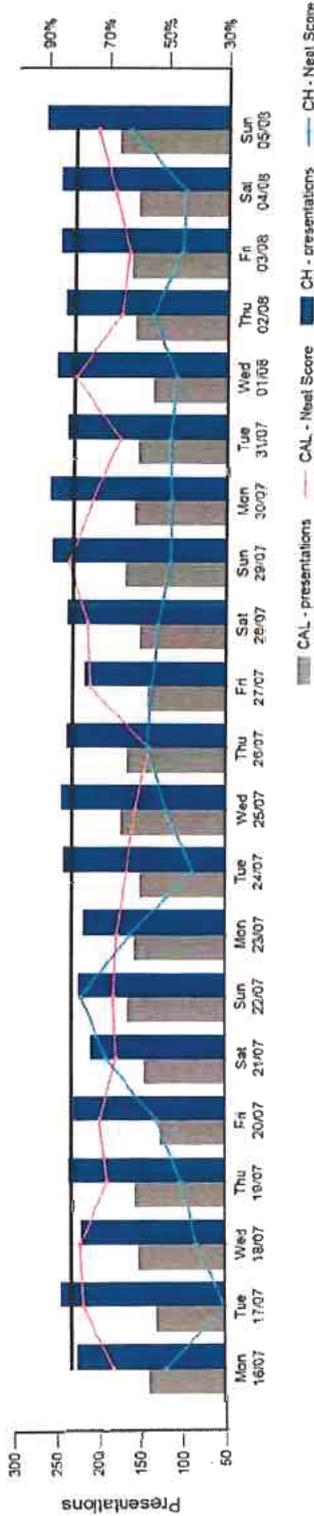
29/8/18

Signatory Name:	Mark Dykgraaf, Acting Chief of Clinical Operations	Phone:	43125
Action Officer:	Tracy Hutchins	Phone:	45221

Emergency Department and Hospital Occupancy Key Statistics

No Comment

Presentations VS NEAT (14 Days)



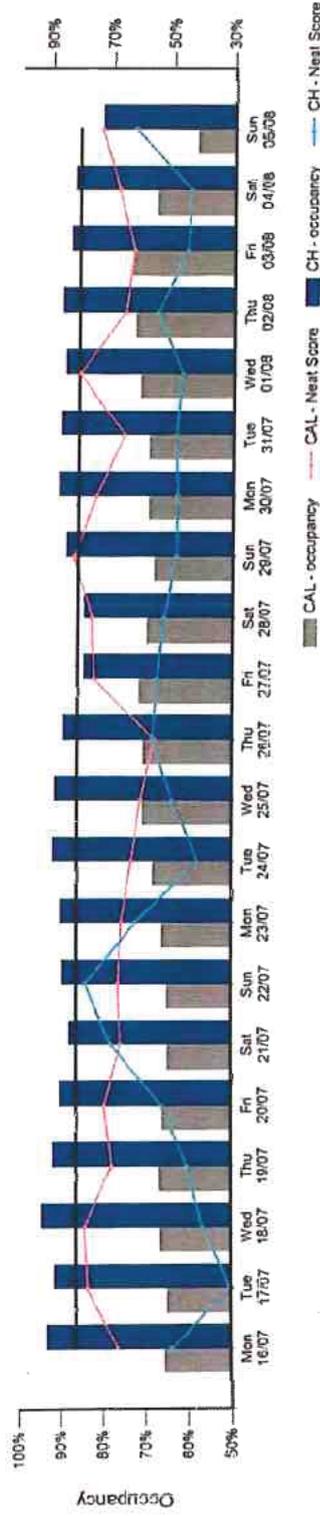
Previous Week

NEAT
58%
 CH 50%
 CAL 70%

Presentations

2871
 CH 1757
 CAL 1114

Occupancy VS NEAT (14 Days)



Occupancy

83%
 CH 89%
 CAL 70%

Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

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Emergency Department and Hospital Occupancy Key Statistics

Data displayed for Week Ending 05 Aug 2018

	ACT							CH							CAL						
	Mon 30/07	Tue 31/07	Wed 01/08	Thu 02/08	Fri 03/08	Sat 04/08	Sun 05/08	Mon 30/07	Tue 31/07	Wed 01/08	Thu 02/08	Fri 03/08	Sat 04/08	Sun 05/08	Mon 30/07	Tue 31/07	Wed 01/08	Thu 02/08	Fri 03/08	Sat 04/08	Sun 05/08
NEAT	58%	58%	59%	59%	52%	53%	67%	48%	49%	47%	55%	46%	44%	63%	75%	66%	81%	66%	63%	66%	73%
Presentations	419	394	392	402	412	404	448	260	239	253	242	248	248	267	159	155	139	160	164	156	181
Occupancy	84%	84%	84%	85%	84%	81%	80%	91%	90%	89%	90%	88%	87%	87%	70%	70%	72%	73%	74%	68%	64%

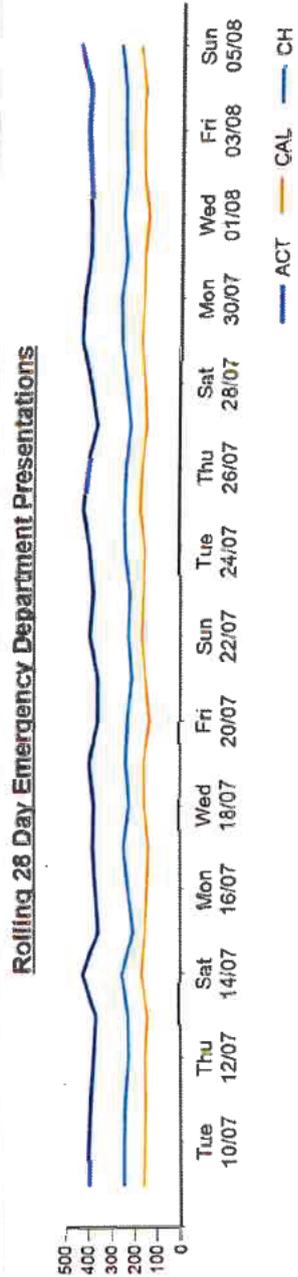
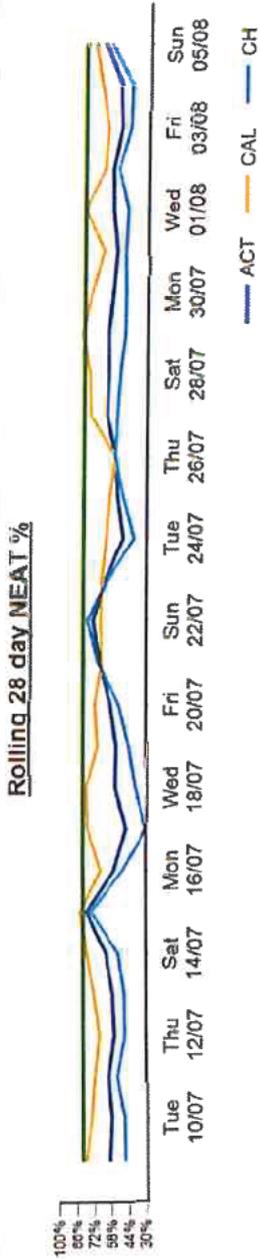
Comparative Historical Statistics - Month to Date

	ACT				CH				CAL				
	30 Jul 2018 - 05 Aug 2018	30 Jul 2017 - 05 Aug 2017	30 Jun 2018 - 05 Jul 2018	30 Jul 2018 - 05 Aug 2018	30 Jul 2018 - 05 Aug 2018	30 Jul 2017 - 05 Aug 2017	30 Jun 2018 - 05 Jul 2018	30 Jul 2018 - 05 Aug 2018	30 Jun 2018 - 05 Jul 2018	30 Jul 2018 - 05 Aug 2018	30 Jul 2017 - 05 Aug 2017	30 Jun 2018 - 05 Jul 2018	30 Jul 2018 - 05 Aug 2018
NEAT	58%	61%	59%	50%	51%	58%	51%	70%	70%	70%	58%	70%	68%
Presentations	2871	2868	2368	1757	1399	1757	1399	1114	969	1111	1757	969	1111
Occupancy	83%	93%	86%	89%	93%	100%	93%	70%	67%	77%	100%	67%	77%

Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

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Emergency Department and Hospital Occupancy Key Statistics

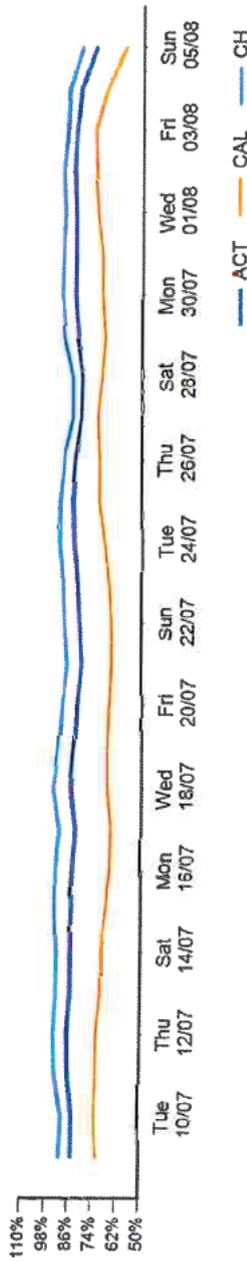


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Emergency Department and Hospital Occupancy Key Statistics

Rolling 28 Day Occupancy



Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

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MINISTERIAL BRIEF

Health Directorate

UNCLASSIFIED

To: Minister for Health and Wellbeing

Tracking No.: MIN18/833

22 AUG 2018

From: Michael De'Ath, Director-General, ACT Health

Subject: Elective Surgery 2018 - 2019

Critical Date: 31 August 2018

Critical Reason: To enable resourcing and planning to achieve Elective Surgery targets for 2018-2019

• DG

Purpose

To provide you with information about the expected outcome of the Elective Surgery Waiting Lists at the end of the 2018-19 financial year, based on allocated funding.

Recommendation

That you note the information contained in this brief.

Noted / Please Discuss

Meegan Fitzharris MLA

31.8.18

Minister's Office Feedback

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Background

1. Additional funds of \$10.2M have been allocated to Elective Surgery above the base funding for 12,663 procedures to achieve a total of 14,000 elective surgery procedures during the 2018-19 financial year.
2. 2017-18 performance against Strategic Indicator 1, no more than 144 long waits is as follows:
 - a. There were 406 long wait patients at the end of 2017-18 compared to 464 at the end of 2016-17.
 - b. 79 per cent of patients had their surgery on time in 2017-18, compared to 87 per cent in 2016-17, and against a target of 90 per cent.

IssuesPerformance plan

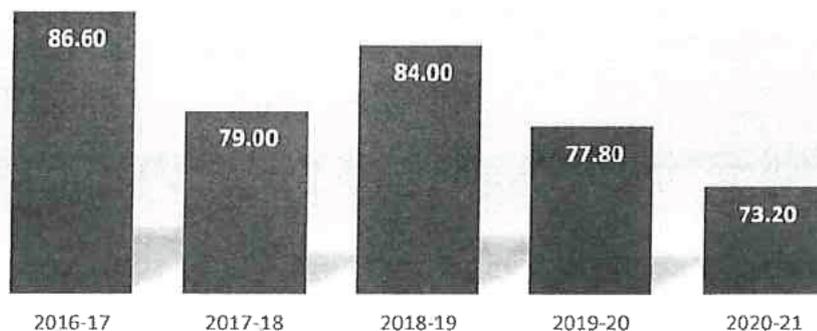
3. Strategic Indicator Targets for Elective Surgery in 2018-19 have been set as follows:
 - a. Total procedures to be performed: 14,000
 - b. Expected long waits at the end of 2018-19: 430
4. Optimum settings for Elective Surgery Wait List (ESWL) management require a base of net removals from the list to equal net additions to the list. Modelling suggests that 14,000 elective surgery procedures will allow ACT Health to meet this requirement.
5. There is 'in principle' agreement from both Canberra Hospital and Health Services (CHHS) and Calvary Public Hospital Bruce (CPHB) to the total number of elective surgery procedures required and both hospitals are committed to achieving their respective targets. The proposed elective surgery allocation is demonstrated at Attachment A.
6. Although 14,000 will be the highest number of elective surgery cases ever completed in the ACT in one financial year, modeling suggests this will meet the projected demand in 2018-19.
7. The net result predicted from completing 14,000 cases in 2018-19 will be minimal change to the current number of long-wait patients across the Territory in 2018-19, or patients on the waitlist.
8. *because of* The number of long-wait patients, as a proportion of all patients on the wait list, decreases the percentage of patients who have their surgery on time. As a result, the Australian Institute of Health and Welfare's (AIHW) Elective Surgery Wait Times National Annual Reports for 2017-18 and 2018-19, are predicted to show declines in *timeliness* in the ACT, compared with 2016-17.
9. AIHW timeliness indicators based on 14,000 procedures for the year of 2018-19, and based on 430 long waits by the end of 2018-19, and assuming a 2.95 per cent growth rate, are simulated in Figure 1 below.

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Figure 1: AIHW Timeliness Projections based on 14,000 procedures completed in 2018-19.

AIHW timeliness projections based 14000



Assumptions: Takes into account patients removed from waitlist for other reasons, and growth in elective surgery continuing at current rate (point 12 below).

Emergency Capacity Creation

10. The target of 14,000 elective surgery procedures is a significant increase in activity on the back of increased emergency surgery activity, and will require a significant amount of planning and additional resources.
11. Primarily this increased level of activity will be achieved by a planned relocation of a large number of elective surgery procedures from CHHS to CPHB and to private providers.
12. At CHHS, emergency surgery is growing at a rate of 6 percent and elective surgery is growing at a rate 2.95 per cent per annum, which means that CHHS operating theatres have reached allocated session capacity. Increasingly, CHHS is having to use out of hours services to meet demand for surgery.
13. The significant growth of emergency surgery has the potential to impact on bed capacity at CHHS, as emergency cases stay longer in hospital on average than elective cases.
14. The movement of work from CHHS to CPHB is in addition to natural growth which would otherwise occur at CPHB, therefore significantly increasing the elective surgery throughput at CPHB, by 20 per cent over a historical trend of 2.95 per cent.
15. In turn elective surgery throughput will decrease slightly at CHHS in 2018-19, creating capacity for the increasing emergency surgery workload.

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Meeting the Target of 14,000 Cases

16. Various strategies are being implemented to assist with achieving 14,000 cases, but there remains a risk that the target will not be reached, given current staffing shortfalls.
17. The staffing shortfalls are largely due to the additional staff required to support the increase in the elective surgery activity. ACT Health is currently operating under the budgeted FTE for anaesthetic services. Recruitment has been undertaken however this can be a prolonged process dependent on where successful applicants are coming from.
18. CPHB will receive additional funding to support the additional activity and further work.
19. The Territory Wide Management Committee is currently developing a more detailed elective surgery plan, to support the planning and coordination of the delivery of 14,000 elective surgery cases for 2018-19.
20. The division of elective surgery across the public and private sector are listed in Attachment A.

Impact of Long Waits and Growth in Future Years

21. It is predicted that if 14,000 elective surgery procedures are completed for 2018-19, there will be an approximate total of 430 long wait patients remaining on the ESWL at the end of June 2019.
22. Growth in demand for the next 3 years (based on a 430 long wait indicator and 14,000 procedures) is demonstrated in Table 1.

Table 1: Projected growth in elective surgery and requirements to meet long wait targets

Year	Funded Target	Long Wait (LW) target	Number of procedures required to reach LW target	Funding required to maintain LW target
17-18	13360	144	13,344	
18-19	14000	430	14,038	
19-20	14000	430	14,465	\$3,140,766
20-21	14000	430	14,846	\$3,205,517
21-22	14000	430	15,296	\$3,309,495

23. Table 1 demonstrates that 14,000 elective surgery procedures represents a good base for forward years, with additional funding of approximately \$3.2M per annum in forward years, to keep the long waits at the 2018-19 level of 430.

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24. There are a range of non-fiscal measures that could reduce the level of additional funding required in future years (Attachment B), which require further investigation regarding viability.

ConsultationInternal

25. Not applicable.

Cross Directorate

26. Not applicable.

External

27. Calvary Health Care Bruce

Benefits/Sensitivities

28. Not applicable.

Media Implications

29. Elective Surgery timeliness is a matter of public, media and political interest. Enquiries are responded to as needed.

Signatory Name: Mark Dykgraaf Phone: 43125
 Chief of Clinical Operations

Action Officer: Kellie Lang Phone: 76433
 Manager Territory Wide Surgical Services

Attachments

Attachment	Title
Attachment A	Proposed elective surgery allocations
Attachment B	Non fiscal measures aimed at reducing financial requirements

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Attachment A: Proposed Elective Surgery Allocation for 2018-19

Hospital	Target
CHHS	6,603
CPHB	6,000
Calvary John James Hospital (CJH) Elective Joint Replacement Program(EJRP)	410
Private Provider Hospitals	987
TOTAL	14,000

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Attachment B: Non-fiscal measures aimed at reducing financial requirements.

Proposal	Measure	Estimated Saving
Capping of cost of primary joint replacement prosthetics	\$9,500 cap	410 cases \$750,000 pa
Change to elective surgery policy <i>what is policy now?</i>	Cat 1 must be given a date for surgery within 30 days by doctor to be accepted	Decrease in Cat 1 patients and increase in Cat 1 timeliness reporting
	Long wait patient surgery date refusal 'one strike' and off the waitlist 'Not ready for care' not more than 365 days	Decrease in long wait cohort. As at 10 Aug 18, there are 10 patients at CHHS and 1 patient at CPHB that are NRFC with chronic health issues waiting longer than 365 days.
Limit scope of practice of high cost craft groups	Breast reduction surgery absolute no indication other than infection	Decrease in surgery requests. Current average 25 per annum.
	Non clinical aesthetic repair for breast reconstruction recipients	Decrease in surgery requests of this cohort by 6%. Current average 50 per annum.
<i>any limits now?</i>	Removal of patients from the waitlist not geographically associated with the ACT	Decrease in net additions to the waitlist and need for surgery. ACT Wide = 235 NSW 1 QLD 1 VIC

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ADVISORY NOTE

Minister for Health and Wellbeing

TRIM Ref: MIN18/1317	Minister for Health and Wellbeing
Critical Date	Not applicable
Interim Director-General	Michael De'Ath  27/8/18

Minister's question:

Ministerial request for a weekly report on the Canberra Hospital Emergency Department.

ACT Health's response:

- For the week ending 19 August 2018, there were on average 243 presentations per day to the Canberra Hospital Emergency Department.
- For the reporting period, the occupancy across the week at The Canberra Hospital was approximately 87 per cent based on 659 open beds. The University of Canberra Hospital (UCH) bed occupancy for the past week was approximately 83 per cent based on 84 open beds. The total occupancy across both hospitals combined was approximately 85 per cent.
- The NEAT target was met for approximately 46 per cent of all presentations. *- table says 52%?*
- The Canberra Hospital and Health Services was not at Capacity Alert Level 3 at any time during this reporting period.

Noted / Please Discuss


Meegan Fitzharris MLA
Minister for Health and Wellbeing

8/8/18

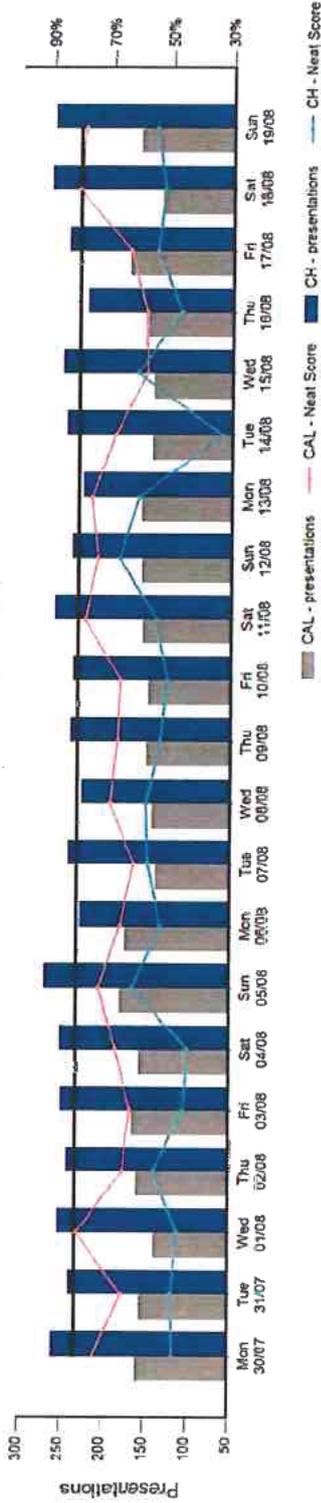
Signatory Name: Mark Dykgraaf, Acting Chief of Clinical Operations Phone: 43125

Action Officer: Debby Carriage Phone: 43125

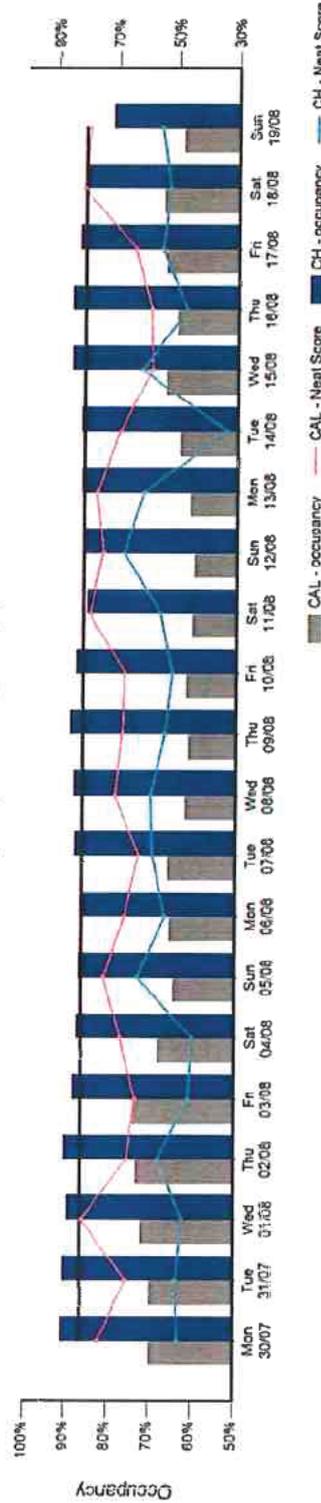
Emergency Department and Hospital Occupancy Key Statistics

No Comment

Presentations VS NEAT (14 Days)



Occupancy VS NEAT (14 Days)



Previous Week

NEAT

59%

CH 52%

CAL 69%

Presentations

2780

CH 1718

CAL 1062

Occupancy

81%

CH 88%

CAL 65%

Bed occupancy is calculated based on funded beds at Canberra Hospital and Calvary Public Hospital Bruce that are available to receive admissions from the Emergency Departments. Occupancy figures do not include down-time (such as for cleaning following a patient discharge) and do not capture whether a bed is suitable for all admissions (such as vacant beds in paediatrics when the demand may be for adult beds).

"The data reported for 1 July 2017 to 31 March 2018 is preliminary data only and is not final. There are no known issues with the data contained in this report however ACT Health will continue working to ensure that the data contained within this report is fit for purpose. Prior to the publication of any data contained within this report, written approval must be sought from ACT Health"

Emergency Department and Hospital Occupancy Key Statistics

Data displayed for Week Ending 19 Aug 2018

	ACT							CH							CAL						
	Mon 13/08	Tue 14/08	Wed 15/08	Thu 16/08	Fri 17/08	Sat 18/08	Sun 19/08	Mon 13/08	Tue 14/08	Wed 15/08	Thu 16/08	Fri 17/08	Sat 18/08	Sun 19/08	Mon 13/08	Tue 14/08	Wed 15/08	Thu 16/08	Fri 17/08	Sat 18/08	Sun 19/08
NEAT	67%	47%	60%	52%	59%	62%	64%	61%	33%	62%	47%	55%	53%	55%	76%	69%	58%	59%	64%	81%	79%
Presentations	384	391	394	373	416	400	422	227	246	250	223	244	266	262	157	145	144	150	172	134	160
Occupancy	79%	80%	82%	81%	81%	80%	81%	87%	87%	89%	89%	87%	86%	87%	61%	64%	67%	64%	67%	67%	67%

Comparative Historical Statistics - Month to Date

	ACT		CH		CAL	
	13 Jul 2018 - 19 Aug 2018	13 Aug 2017 - 19 Aug 2017	13 Jul 2018 - 19 Jul 2018	13 Aug 2018 - 19 Aug 2018	13 Jul 2018 - 19 Jul 2018	13 Aug 2018 - 19 Aug 2018
NEAT	59%	60%	48%	52%	54%	69%
Presentations	2646	3070	1610	1718	1801	1269
Occupancy	85%	92%	93%	88%	98%	78%

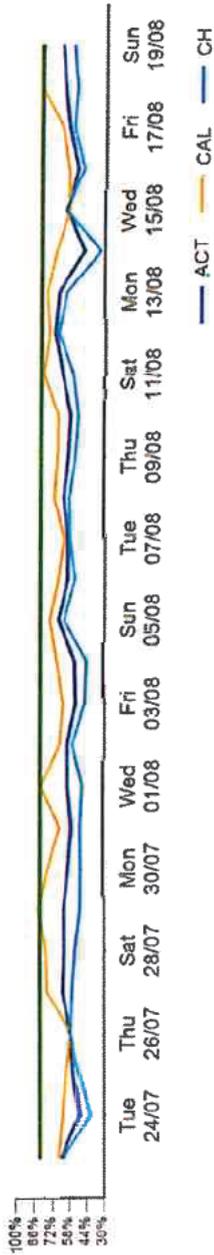
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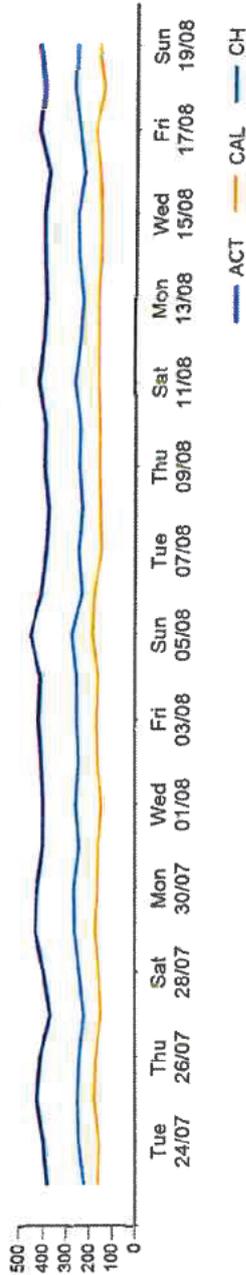


Emergency Department and Hospital Occupancy Key Statistics

Rolling 28 day NEAT %



Rolling 28 Day Emergency Department Presentations

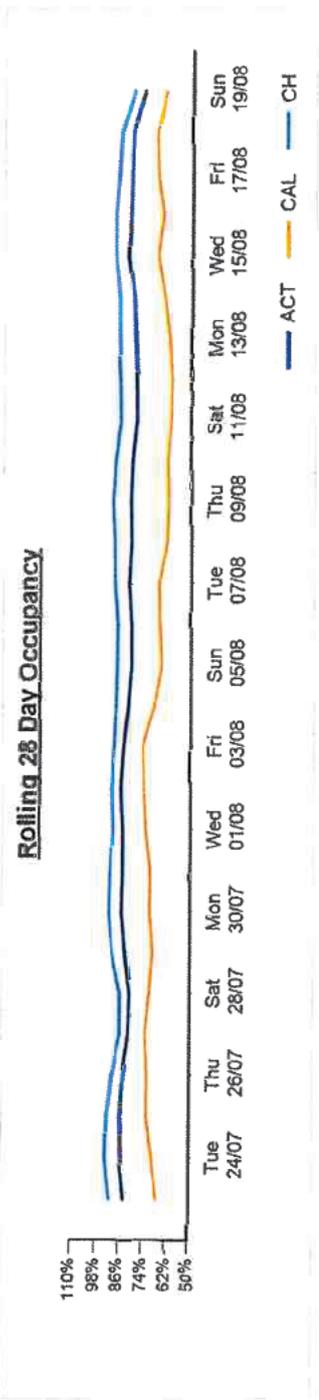


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Emergency Department and Hospital Occupancy Key Statistics



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