

# ACT Public Health Services Quarterly Performance Report

December 2011



1 Minister's Foreword

2 Surgery in ACT Public Hospitals

3 Emergency Department Services

4 National Emergency Access Target (NEAT)

5 National Elective Surgery Target (NEST)

6 New South Wales patients accessing treatment in ACT Public Hospitals

7 Medical Services

8 Capital Region Cancer Services

9 Rehabilitation and Aged Care Services

10 Mental Health, Justice Health and Alcohol and Drug Services

11 Quality and Safety ACT Public Hospitals

12 Selected activity statistics

13 Glossary

14 Publication details



Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

This is the second Quarterly Report that the Health Directorate has issued in the revised format to ensure that it is informative and provides a visual demonstration of the performance against both existing performance targets as well as those implemented through the National Health Reform. The National Health Reform has introduced a number of performance targets relevant to both the performance of our Emergency Departments as well as ensuring that we provide timely access to elective surgery.

The Health Directorate has continued to work with the individual health services to develop reporting tools that support effective management of our available resources and ensure that clients within the ACT and surrounding region are able to gain access to services as well information on the performance of healthcare services.

The ACT Public Health Services report for the second quarter of 2011–12 shows that the increased investment in the Territory's public health services is working to provide improved access to care.

## Public Hospitals

- Results for 2010–11 show that our public hospitals had access to an average capacity of 926 beds during last financial year, an additional 256 beds on the 670 beds that were available in 2001–02 when we were first elected to Government – a 38% increase over eight years.
- Preliminary data for the second quarter of 2011–12 suggests a 4 percent increase in cost weighted separations for our ACT Public Hospitals, with particular growth in cancer services which saw an 8 percent growth in cost weighted activity compared with the same period last year.
- In the first six months of 2011–12, there were almost 2,461 births at our public hospitals.
- Outpatient occasions of service grew by 9 percent in the second quarter of 2011–12 compared with the same period in 2010–11.
- The average waiting time for public dental health services for the second quarter of 2011–12 was 11 months, below the target of less than 12 months.

- Childhood immunisation rates exceed the national target of 90 percent at 93 percent to December 2011.
- The Walk-in Centre (WiC) is now an established part of our health service infrastructure, providing the community with another option for the treatment of minor and one-off conditions.
- In the second quarter of 2011–12, 8,466 clients presented to the WiC for treatment with only 31 percent of those patients requiring referral to an alternative service, mostly to their GP. Only 4 percent being referred to an Emergency Department for treatment.
- The reduction in referrals to alternative treatment sources has shown that the community is becoming more aware of the services available through the Walk-in Centre.

## Surgery

- Our public hospitals provided record levels of access to elective surgery in 2010–11. This progress has continued into the second quarter of 2011–12 with 5,742 elective surgery procedures being completed in the second quarter, a 5 percent increase on the 5,482 reported for the same period in 2010–11.
- This increase in access to elective surgery has resulted in a 19 percent reduction in the number of people waiting for surgery in the ACT.
- The increasing activity has also led to a significant decline in the number of patients waiting beyond the clinically recommended timeframes to access their surgery, with the result of 1,290 long wait patients at the end of December 2011 almost half the 2,006 recorded for the same period in 2010. Whilst this is still too high, our commitment to improving access will result in this number reducing in future reports.





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

- The Health Directorate now reports the six month moving median wait time to access elective surgery. This ensures that any improvement or deterioration in the way we manage the elective surgery waiting list is evident so we can adjust management to improve access as required. The result of 59 days in the six months to December 2011 is a vast improvement on the 76 days reported for the six months to July 2011, which is evidence that our approach to management of the waiting list is paying off.
- The increased access to elective surgery is particularly pleasing given the continued demand for emergency surgery. In the second quarter of 2011–12, 3,490 people had emergency surgery, which equates to 38 percent of all surgical activity being performed as emergency procedures.

## Emergency Departments

- The Health Directorate is committed to improving waiting times in our emergency department services and is working towards meeting the newly implemented National Emergency Access Targets (NEAT).
- In the first six months of 2011–12, ACT Hospital Emergency Departments saw 58,435 presentations, a 4 percent increase in presentations compared with the same period last year.
- Admissions to hospital via the emergency department have also grown, with 14,910 (13 percent growth) admissions reported for the second quarter of 2011–12.
- Despite the increased demand for emergency care, the proportion of patients admitted to a hospital bed within eight hours of being seen in the emergency department in the year to December 2011 was 77 percent. This result is above the target of 75 percent, and an improvement on the 74 percent recorded for the same period last year.
- ACT Public Hospital Emergency Departments met or exceeded National targets for timely access to emergency care in two of the five triage categories. Triage Category one, our most urgent category of presentations, as well as triage category five, were seen within clinically recommended times.

- Targets were not reached for triage category two, three and four presentations.
- Our emergency department staff are currently reviewing their processes, and working with their colleagues throughout the hospitals, to work out ways of eliminating barriers that delay quick access to services and improve patient flow through the emergency departments.
- This process will result in the development of initiatives that will begin being implemented to improve the way patients access hospital services, as well as how they move through the hospital in a more patient-centred and efficient manner.

## National Health Reform

- The National Health Reform agenda was agreed to by all States and Territories in August this year.
- A set of performance targets were included in the agreement to ensure timely access to services were a priority for all health sectors across the Nation.
- The National Emergency Access Target requires that 90 percent of presentations have a length of stay in the emergency department of no more than four hours.
- The first target of 64 percent is to be achieved by December 2012. In the calendar year to December 2011, ACT public hospital emergency departments are achieving 57 percent with a length of stay less than four hours. However, the result for the month of December had risen to 62 percent. The Health Directorate and key stakeholders within the Emergency Department continue to work collaboratively to develop strategies to ensure we meet this target.
- With the introduction of the National Elective Surgery targets (NEST), ACT Hospitals have been able to demonstrate 95 per cent of Category 1 patients receiving treatment within 30 days, equal with the first target of 95 percent to be achieved by December 2012.





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

- 47 percent of category 2 patients received treatment within 90 days, below the target of 55 percent to be achieved by December 2012.
- And 80 percent of category 3 patients access their procedure within 365 days, just below the target of 82 percent set to be achieved by December 2012.

## New South Wales Activity

- The ACT is committed to servicing the health needs not only of the residents of the ACT, but of the surrounding region.
- Of the almost 58,441 presentations to ACT public hospital emergency departments, approximately 11 percent present from NSW.
- NSW residents also account for around 22 percent of all hospital separations from our public hospitals, and approximately 29 percent of all surgical activity in the ACT is delivered to NSW residents.
- NSW residents also account for approximately 26 percent of all cost weighted activity in our public hospitals.

## Medicine

- Improvements in monitoring and reporting on Medical Waiting lists was undertaken in 2010-11 with greater visibility now available on the performance of Endoscopy and Cardiology.
- Medical services at our public hospitals are a large portion of the total activity generated in the health services of the ACT.
- Endoscopy services provided over 2,195 procedures in the first six months of 2011-12. The Health Directorate is managing medical waiting lists in the same manner as it's surgical counterparts. Timeliness to endoscopy procedure is by urgency category and is currently below the desired targets, however there is a great deal of work underway to ensure timely access to care in the future for this service.
- The median waiting time for patients requiring access to interventional cardiology services was 9 days, with 646 patients being treated in the year to December 2011-12.

## Capital Region Cancer Service

- Despite the increase in demand for radiation therapy services, waiting times for radiotherapy services have maintained the excellent record of recent years with 100 percent of all patients receiving care within standard timeframes in the second quarter of 2011-12.
- Waiting times for breast screen appointments have improved as a result of improvement strategies. The engagement of two permanent radiographers in the second quarter of 2011 has resulted in the full establishment of radiography staff. Locum and casual radiographers have also been engaged.
- The BreastScreen ACT program no longer provides services to the South East New South Wales and this has freed up radiography staff to provide services to women of the ACT.
- For the year to December 2011, 56 percent of women waited less than 28 days for their screening appointment. This is a marked improvement on the 25 percent for the year to December 2010.
- Waiting times for the proportion of women who receive an assessment within 28 days has also improved to 84 percent to December 2011, compared to 77 percent for the year to December 2010.
- There were a total of 8,007 breast screens performed for ACT residents in year to December 2012, compared to 6,004 screening procedures in the same period last year.
- Improvements to the BreastScreen ACT program include the introduction of digital mammography machines and a Picture Archiving Communications System (PACS) which have replaced the previous analogue machines used by BreastScreen ACT. The new mammography equipment provides higher quality images while generating lower radiation exposure for clients.





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

## Mental Health, Justice Health and Alcohol and Drug Services

- Seven day post discharge contact refers to direct contact with the consumer by community services following an inpatient admission. Not all consumers will be contacted by community services as they are either referred out of area (ACT) or prefer follow-up by non-public mental health services. It is also estimated a small percentage (~<2%) are not able to be contacted because the consumer becomes un-contactable for a variety of reasons out of community mental services control.
- Outcome measures completed remains variable due to a number of technical issues related to data capture and reporting. Further work is being undertaken to address these issues with a continued refinement of more accurate reporting.
- The use of seclusion in the ACT mental health services continues to remain low; however from time to time there may be a 'spike'. The second quarter of 2011–12 indicates that seclusion is used as a last resort and kept to an absolute minimum resulting in a very low rate.
- Twenty-eight day unplanned re-admission rate is variable depending on the complexity of individual consumer's needs and the number of complex consumers presenting for inpatient service support at any given time. It is also known that community follow-up by mental health services, carer involvement and other community supports are key factors in the reduction of the chances of a re-admission within 28 days of an initial inpatient admission.

## Rehabilitation, Aged and Community Care Services

- The average waiting time for an in hospital Aged Care Assessment Team review remains below the target of 2 days, with the December 2011–12 result of 1.7 days.
- The number of separations from hospital for patients awaiting a nursing home placement has increased in the year to December 2011–12.

## Quality and Safety

- The rate of unplanned return to hospital remains below target at both our public hospitals. The target is set higher at the Canberra Hospital due to the more complex clinical needs of the patients that this hospital treat, meaning that there is a slightly higher chance that they will require re-admission to hospital for follow up treatment.
- The rate of unplanned return to the operating theatre counting methodology was reviewed at the Canberra Hospital. This review has been undertaken to ensure that all cases of patients returning to the operating theatre during the same stay in hospital were included.
- The end of year result previously recorded for this indicator at Canberra Hospital in 2009-10 was 0.76 percent. The revised result is now 1.09 percent which is slightly above the target of 1 percent. The 2010–11 revised result is 0.82 percent which is below the target. This result was previously reported at 0.48 percent for the same period in 2010–11.
- Canberra Hospital's role as the major teaching and referral centre for the region means that it provides services to the more complex patients and as such, is likely to experience higher rates of adverse events. However, it is vital that we ensure measures are in place to capture the data accurately, as it assists in informing us of performance issues and helps us to provide optimum care to our patients.





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

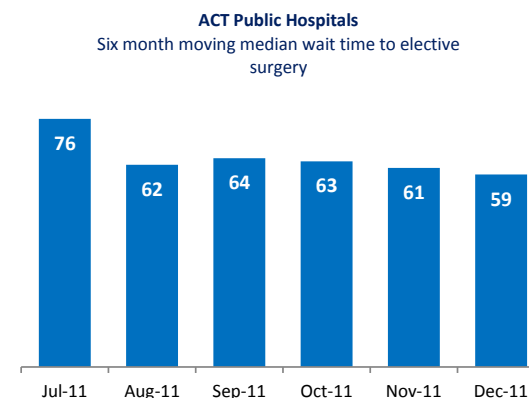
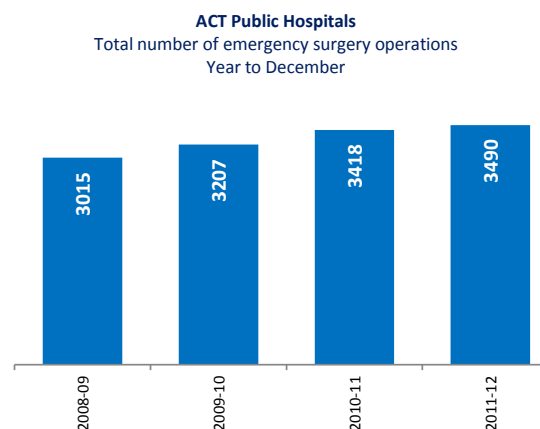
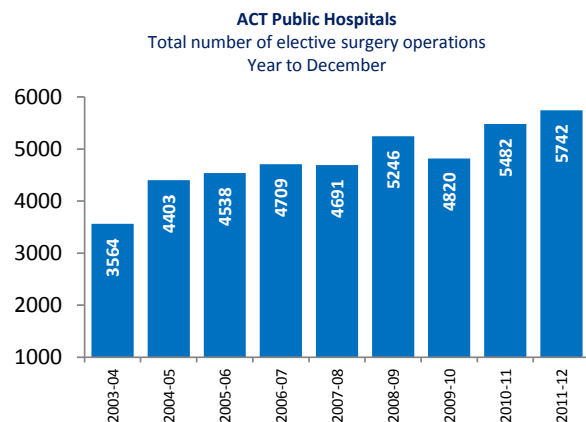
11 Quality and Safety

12 Statistics

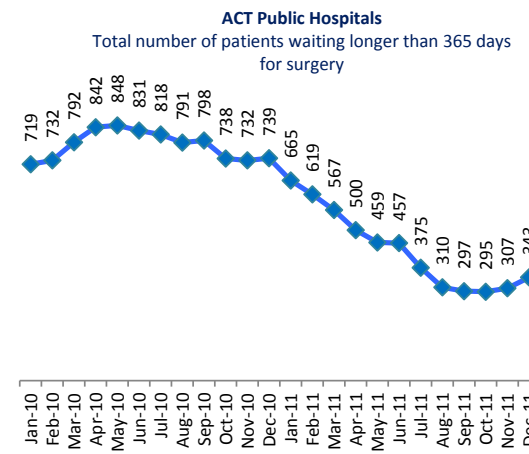
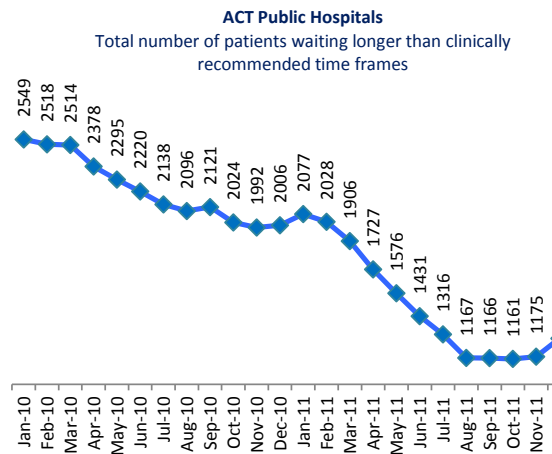
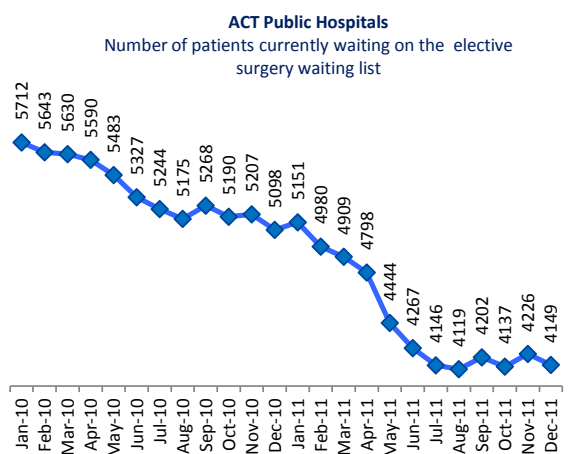
13 Glossary

14 Publication details

## Record levels of access to elective surgery in the second quarter of 2011-12



## Reducing the number of patients waiting too long for care in the second quarter of 2011-12





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

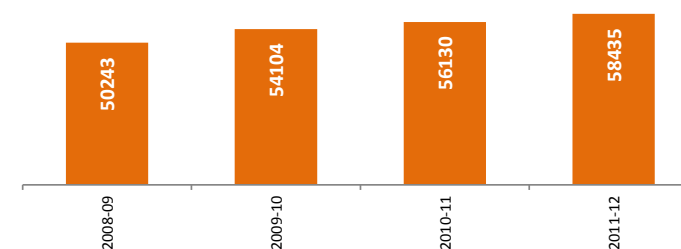
13 Glossary

14 Publication details

## Improvements in waiting times for emergency department care

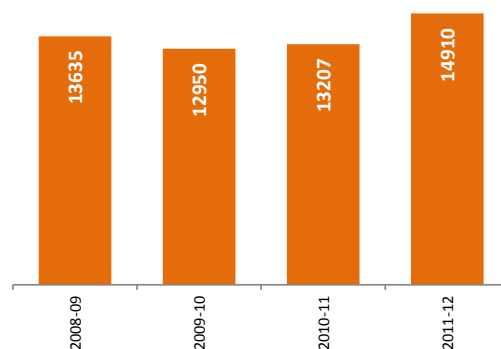
Emergency department presentation seen on time			
Year to December	2010-11	2011-12	Target
Category 1 (immediately)	100%	100%	<b>100%</b>
Category 2 (<10 mins)	79%	75%	<b>80%</b>
Category 3 (<30 mins)	54%	51%	<b>75%</b>
Category 4 (<60 mins)	53%	49%	<b>70%</b>
Category 5 (<120 mins)	77%	82%	<b>70%</b>
Total All Categories	59%	57%	<b>70%</b>

**ACT Public Hospitals**  
Presentations to the emergency departments  
Year to December

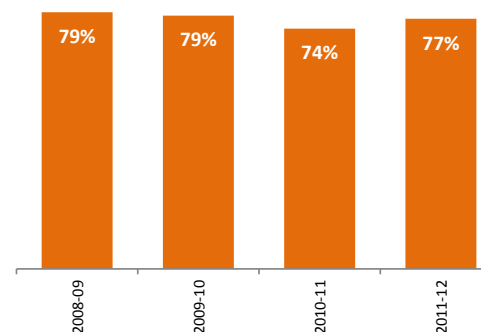


## Access to ward beds from the emergency department

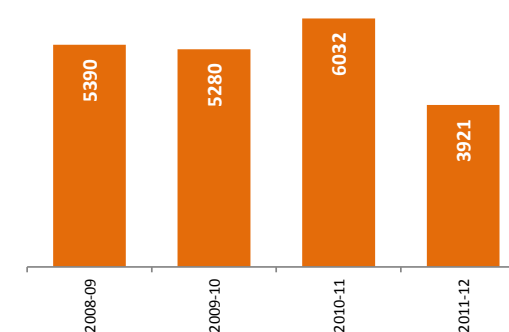
**ACT Public Hospitals**  
Admissions via the emergency department  
Year to December



**ACT Public Hospitals**  
Access Block  
(% of patients admitted to a bed within 8hrs)  
Year to December



**ACT Public Hospitals**  
Did not wait for treatment  
Year to December



# National Emergency Access Target (NEAT)



Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

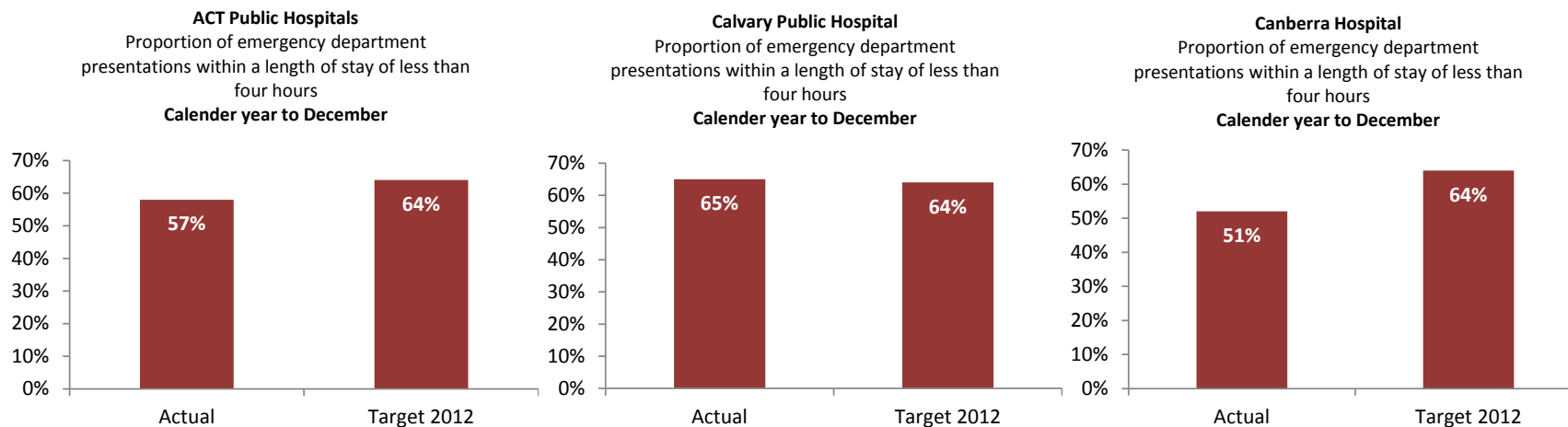
11 Quality and Safety

12 Statistics

13 Glossary

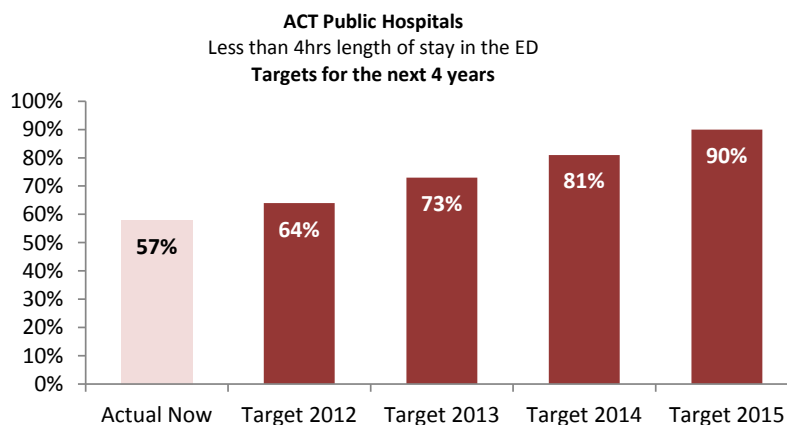
14 Publication details

90 percent of all Emergency Department presentations to have a length of stay less than four hours by 2015



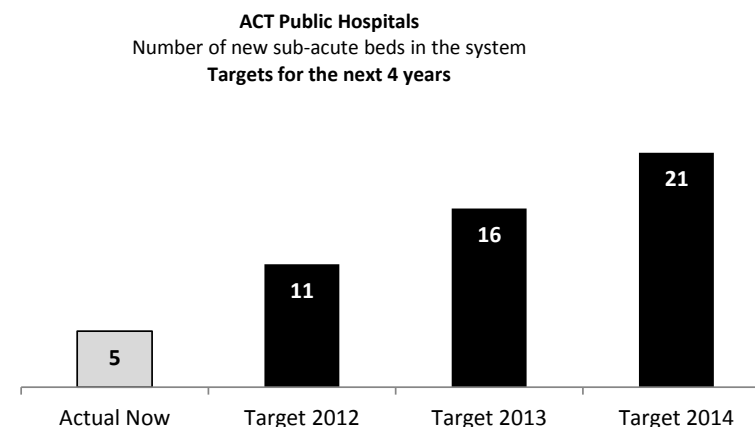
## Emergency department waiting time

Target – 90% of all presentations have an ED LOS less than 4 hours



## New sub-acute bed capacity

Target – at least 21 new sub-acute beds in the system by 2014







Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

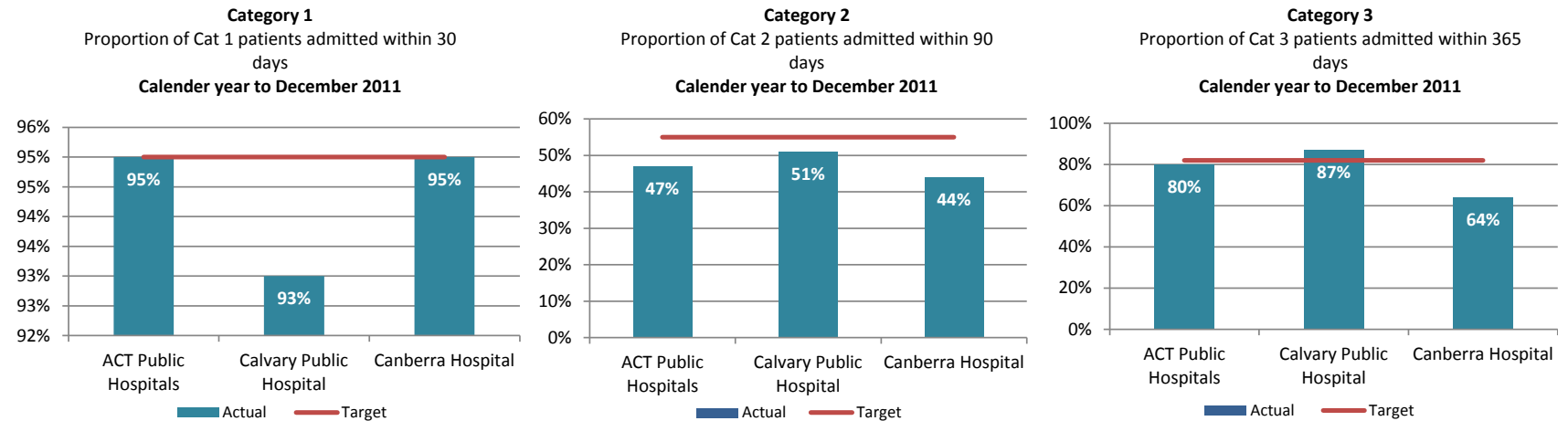
12 Statistics

13 Glossary

14 Publication details

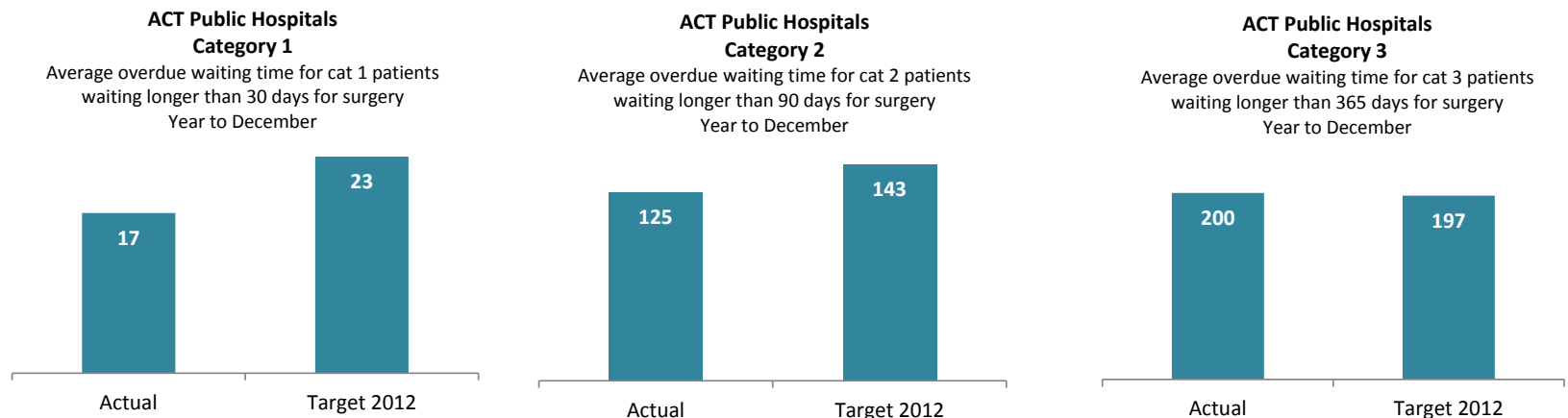
## Part 1 – National Elective Surgery Target

Improvement in patients treated within clinically recommended time



## Part 2 – National Elective Surgery Target

Reduction in patients waiting longer than standard timeframes target



# New South Wales patients accessing treatment in ACT Public Hospitals



Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

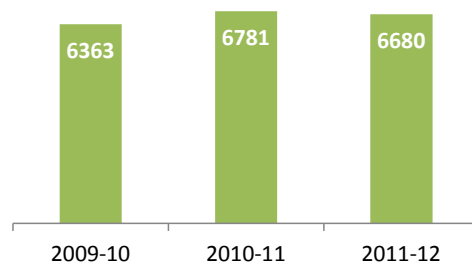
12 Statistics

13 Glossary

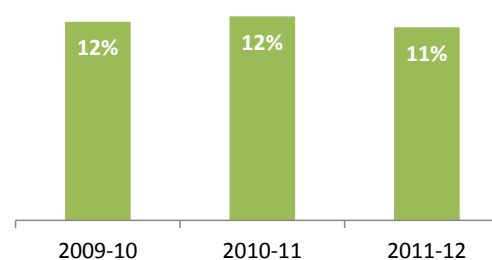
14 Publication details

## Emergency department activity for our region

**ACT Public Hospitals**  
NSW patients  
Presentations to the emergency department  
Year to December



**ACT Public Hospitals**  
NSW patients  
Proportion of all patients  
Year to December



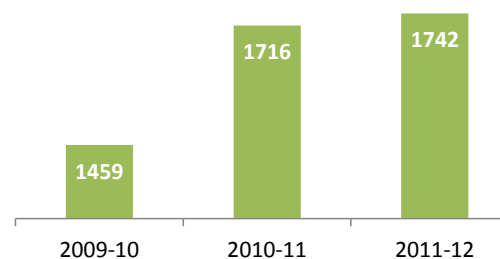
**ACT Public Hospitals**  
NSW patients  
Proportion of NSW patients admitted to hospital via the emergency department  
Year to December



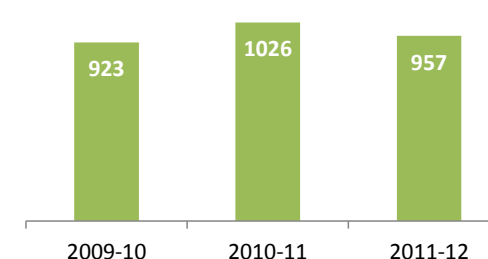
## Meeting the surgical needs of our region

Year to date December 2011		
ACT Public Hospitals	Elective	Emergency
Total all Patients	5742	3490
Total NSW	1742	957
% NSW patients	30%	27%

**ACT Public Hospitals**  
NSW patients  
Elective surgery operations  
Year to December



**ACT Public Hospitals**  
NSW patients  
Emergency surgery operations  
Year to December





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Division of Medicine

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

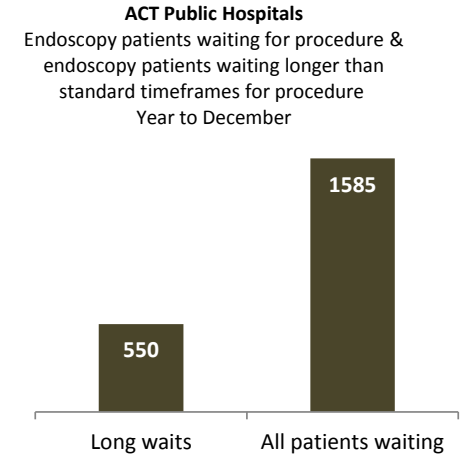
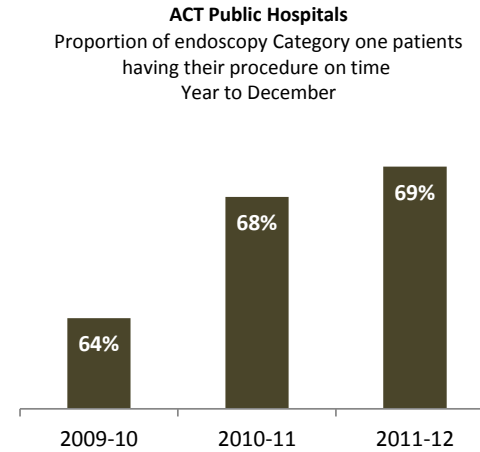
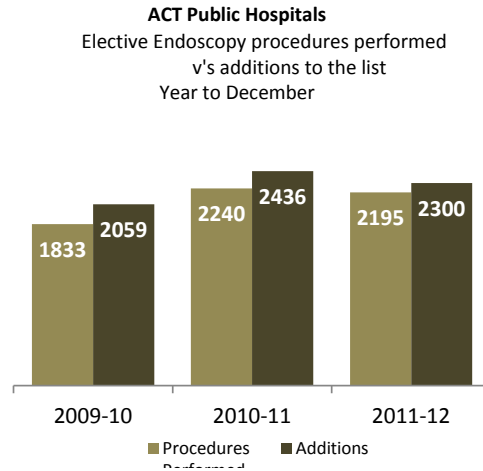
11 Quality and Safety

12 Statistics

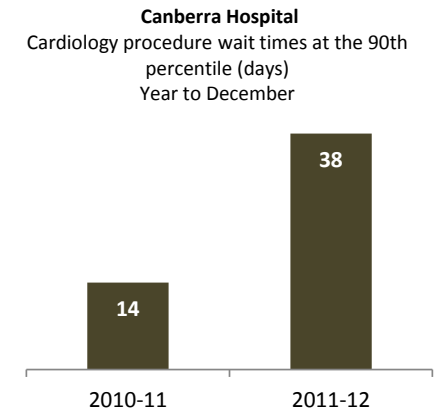
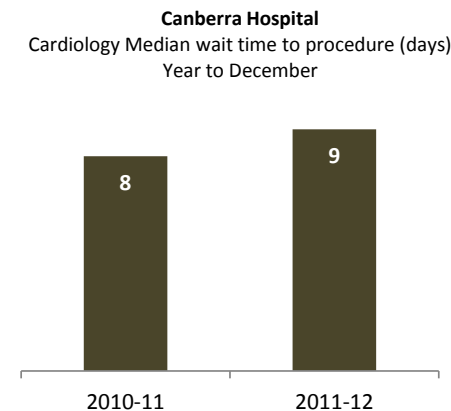
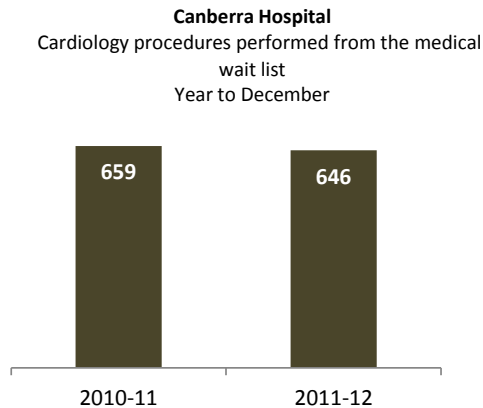
13 Glossary

14 Publication details

## Endoscopy procedures completed at ACT Public Hospitals



## Cardiology procedures completed at ACT Public Hospitals





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

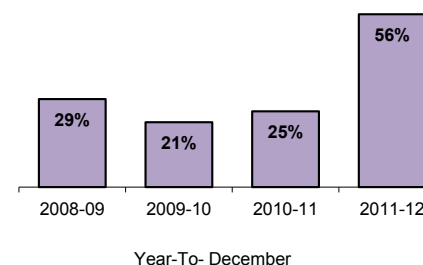
14 Publication details

## Percentage of radiotherapy patients who commence treatment within standard timeframes and Breast Screening

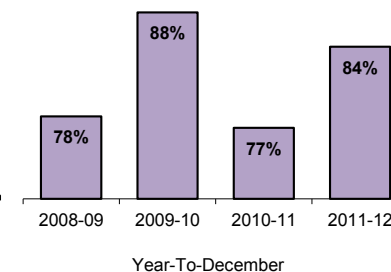
### Radiation Therapy Access

Year to December	2009-10	2010-11	2011-12
Urgent : within 48 hours	100%	100%	100%
Semi-urgent: with 4 weeks	100%	100%	100%
Non-urgent : within 6 weeks	93%	99%	100%
Total - All Radiotherapy Patients	97%	99%	100%

**Capital Region Cancer Service BreastScreen** - proportion of women who wait 28 days or less from their appointment date to the date of their breast screen



**Capital Region Cancer Service BreastScreen** - proportion of women who receive an assessment within 28 days



# Rehabilitation and Aged Care Services



Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

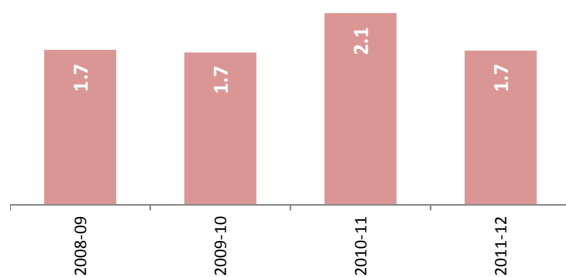
11 Quality and Safety

12 Statistics

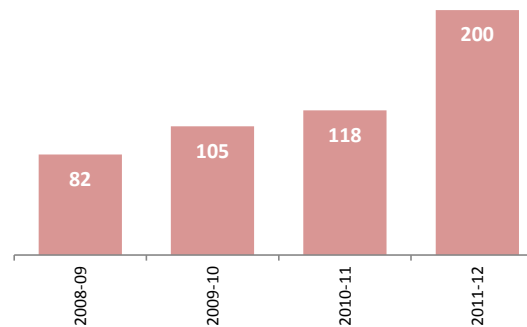
13 Glossary

14 Publication details

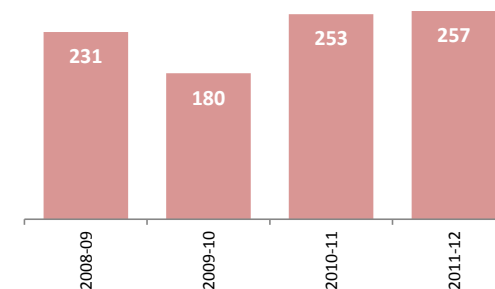
**Rehabilitation, Aged and Community Care Services**  
Average Inpatient Waiting Time (in days) for ACAT  
Assessment  
Year to December



**ACT Public Hospitals**  
Nursing Home Type Patients  
Number of separations  
Year to December



**Rehabilitation, Aged and Community Care Services**  
Number of people assessed in falls clinic  
Year to December





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

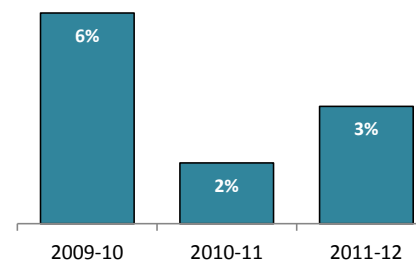
13 Glossary

14 Publication details

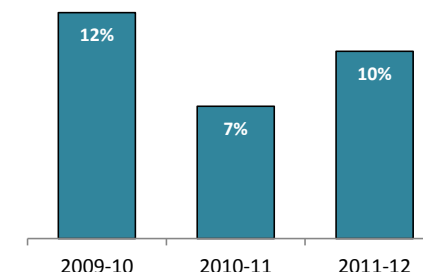
## Mental Health

Year to December	2009-10	2010-11	2011-12
% Inpatients contacted within 7 days post-discharge	74%	74%	74%
Proportion of clients discharged with a completed outcome assessment	71%	73%	62%

**Use of Seclusion in Mental Health ACT**  
(Seclusion Episodes as % of Admission Episodes)

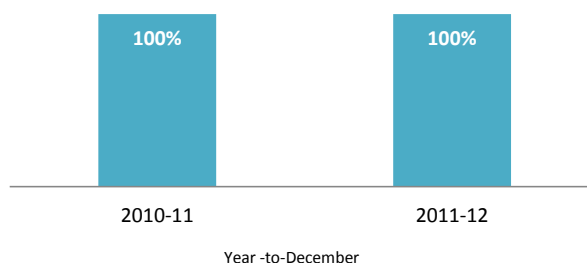


**28 Day Unplanned Readmission Rate**  
Mental Health ACT

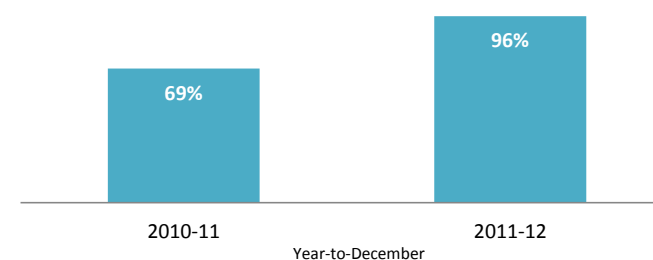


## Justice Health

**Proportion of offenders and detainees at the Alexander Maconochie Centre with a completed health care assessment within 24 hrs of detention**



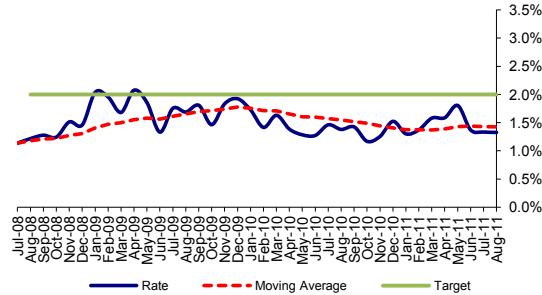
**Proportion of offenders and detainees at Bimberi Youth Detention Centre with a completed health care assessment within 24hrs of detention**



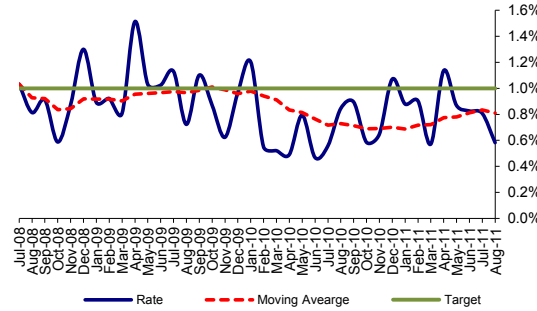


## Canberra Hospital

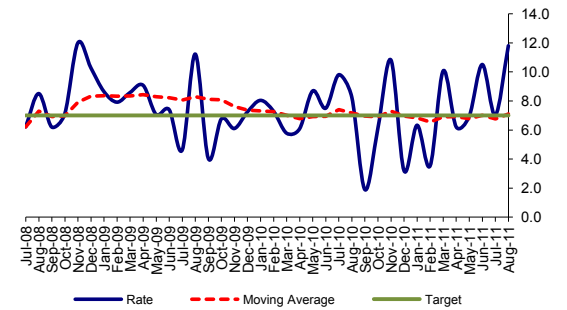
**Canberra Hospital**  
Rate of unplanned hospital admissions within 28 days



**Canberra Hospital**  
Unplanned return to operating theatre within an episode of care

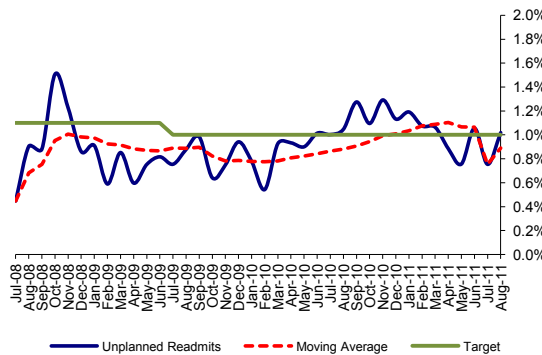


**Canberra Hospital**  
Hospital Acquired Infection Rate (per 10,000 occupied bed days)

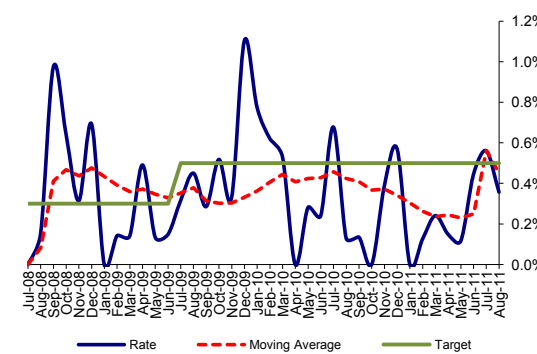


## Calvary Public Hospital

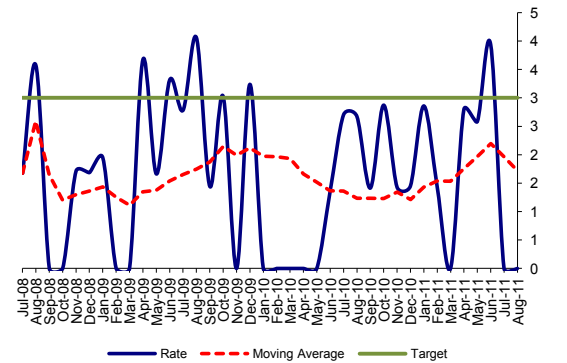
**Calvary Public Hospital**  
Rate of unplanned hospital admissions within 28 days



**Calvary Hospital**  
Unplanned return to operating theatre within an episode of care



**Calvary Hospital**  
Hospital Acquired Infection Rate (per 10,000 occupied bed days)



Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

# Selected activity statistics

## Selected ACT Public Hospitals and Community Activity Indicators



Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

	Year to Dec*		% VAR
	2010-11	2011-12	
<b>Health Directorate cost-weighted separations ( Round 13-DRG version 5.2)</b>			
Output 1.1 – Acute services	42 656	44 485	4%
Output 1.2 – Mental Health, Justice Health and Alcohol and Drug Services	1 982	2 066	4%
Output 1.5 – Cancer services	2 251	2 431	8%
Output 1.6 – Rehabilitation, Aged and Community Care	2 423	2 351	-3%
Total cost weighted separations	49 311	51 333	4%
<b>Inpatient Activity</b>			
Day only patient days (total across all outputs)	24 655	26 916	9%
Overnight patient days (total across all outputs)	136 988	141 995	4%
Nursing Home Type Patient (NHTP) Bed-Days (on separation)**	2 510	2 429	-3%
Day of Surgery Admission rate	89%	88%	-1%
NSW residents as a proportion of total hospital separations	23%	25%	2%
Emergency surgery as a proportion of total surgery	38%	38%	0%
Allied health services – Provided in ACT public hospitals	47 165	43 261	-8%
Bed Occupancy Rate (overnight adult medical and surgical beds)	89%	89%	0%
Total number of births in ACT public hospitals	2 071	2 185	6%
Proportion of births by caesarian in ACT public hospitals	26%	25%	-1%
<b>Admissions via Emergency department</b>			
Admissions to Emergency Department observational wards	5 214	6 039	16%
Admissions from the Emergency Department to ICU, Surgery, and general wards	7 993	8 855	11%
<b>Emergency Department Activity</b>			
Category 1 Seen (immediate – 2 mins)	222	229	3%
Category 2 Seen (within 10 mins)	5 339	6 078	14%
Category 3 Seen (within 30 mins)	16 676	18 636	12%
Category 4 Seen (within 60 mins)	21 961	23 602	7%
Category 5 Seen (within 120 mins)	5 900	5 967	1%
Emergency Department Presentations seen	50 098	54 512	9%
Did Not Waits	6 032	3 929	-35%
Total Emergency Department Presentations	56 130	58 441	4%
<b>Walk-in-Centre</b>			
Total presentations	7 178	8 466	18%
Patients treated	4 761	5 819	22%
WIC – % presentations who did not wait	1%	1.2%	50%
% Treated within the WIC	66%	69%	4%
<b>Elective Surgery</b>			
Additions to the public hospital elective surgery waiting list	6 491	6 650	2.4%
Numbers of people on the elective surgery waiting list	5 098	4 155	-18.50%
Removals from the list for surgery	5 482	5 742	5%
Removals from the list for other reasons	1 377	1 242	-10%

	Year to Dec*		% VAR
	2010-11	2011-12	
<b>Elective Surgery (continued)</b>			
Patients on the list recorded as “not ready for care”	692	833	20%
Hospital Initiated Postponements	550	533	-3%
<b>Median waiting time to care by patient urgency category</b>			
Category one patients (admission required within 30 days)	14	14	
Category two patients (admission desirable within 90 days)	99	89	
Category three patients (admission desirable within 365 days)	221	208	
<b>Elective endoscopies</b>			
<b>Median waiting time to care by patient urgency category</b>			
Category one patients (admission required within 30 days)	12	18	
Category two patients (admission desirable within 90 days)	97	136	
Category three patients (admission desirable within 365 days)	301	208	
<b>Breast screens</b>			
Number of breast screens for women aged 50-69	6 004	8 007	33%
Participation rate of breast screens for ACT women aged 50-69	54%	56%	-4%
<b>Additions to the Cervical Cytology Register</b>			
Rehabilitation, Aged and Community Care	17448	16813	-4%
<b>Allied health services – Number of regional services</b>			
Community Nursing – Number of Nursing (Domicilliary and clinic based occasions of service)	11 869	11 223	-5%
Proportion of aged care and rehabilitation clients discharged with a comprehensive discharge plan	42 784	42 143	-1%
	100%	100%	0%
<b>Mental Health</b>			
<b>Community Services by Group</b>			
Adult	85 821	91 325	6%
Child & Adolescent	27 618	28 094	2%
Older persons	8 696	8 993	3%
Proportion of mental health committees with consumer and care representation	100%	100%	0%
<b>Dental Services</b>			
Mean Waiting (time in months) for persons on the Centralised Waiting and Recall List	11	11	0%
Proportion of urgent patients seen with standard waiting times	100%	100%	0%
<b>Immunisation Coverage – Primary Immunisation schedule measured at 1 year of age (in accordance with the Australian childhood Immunisation Register)</b>			
	94%	93%	1%
<b>Outpatient Care – Non Admitted Services</b>			
ACT public hospitals	149 654	164 127	10%
Cancer services	27 331	29 589	8%
Aged care and rehabilitation services	1 038	951	-8%
<b>Total outpatient occasions of service</b>	<b>178 023</b>	<b>194 667</b>	<b>9%</b>

\* Note: Cost-weighted separations for YTD December 11 are preliminary estimates only.





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

## Emergency department

Triage category	<p>Patients presenting to an emergency department are seen on the basis of clinical urgency as determined by trained medical professionals. Patients are classified into one of five categories, and their access to treatment is based on this clinical categorisation:</p> <ol style="list-style-type: none"> <li>1. Resuscitation—treatment to commence immediately</li> <li>2. Emergency—treatment to commence within 10 minutes</li> <li>3. Urgent—within 30 minutes</li> <li>4. Semi-Urgent—within 60 minutes</li> <li>5. Non-urgent—within 120 minutes</li> </ol>
Target waiting times	<p>The proportion of patients seen at emergency departments within standard waiting times (as set by the Australasian College of Emergency Medicine)</p> <ol style="list-style-type: none"> <li>1. Resuscitation—100% seen on time</li> <li>2. Emergency—80% seen within 10 mins</li> <li>3. Urgent—75% seen within 30 mins</li> <li>4. Semi-urgent—70% seen within 60 mins</li> <li>5. Non-urgent—70% seen within 120 mins</li> </ol>
Access block	<p>The proportion of patients admitted to hospital via the emergency department who wait less than eight hours from the time that treatment commences to the time that the patient is transferred to a hospital ward.</p>

## Elective surgery

Urgency category	<p>Patients listed for elective surgery at ACT public hospitals are assigned one of three priority categories based on their surgeon's opinion about the urgency of the need for surgery in accordance with the definitions in the National Health Data Dictionary:</p> <ol style="list-style-type: none"> <li>1. Urgent—admission within 30 days is desirable for a condition that has the potential to deteriorate quickly to the point that it may become an emergency</li> <li>2. Semi-urgent—admission within 90 days is desirable for a condition causing some pain, dysfunction or disability but which is not likely to deteriorate quickly or become an emergency</li> <li>3. Non-urgent—admission at some time in the future acceptable for a condition causing minimal or no pain, dysfunction or disability, which is not likely to deteriorate quickly and which does not have the potential to become an emergency (Health Directorate establishes a 365 day maximum desirable waiting time for category three patients).</li> </ol>
Median waiting time	<p>The waiting time at the fiftieth (50th) percentile for all patients admitted for elective surgery at an ACT public hospital in a given period (and for a given patient urgency category).</p>
Waiting times	<p>The proportion of patients admitted for surgery within a given period who are admitted within standard waiting times for their condition.</p>
Removals for surgery	<p>The number of people, in a given period, who are removed from the ACT public hospitals elective surgery waiting list for surgery.</p>
Patients waiting longer than one year for surgery	<p>The number of patients still on the elective surgery waiting list (and who are listed as "ready for surgery") who have been waiting longer than 365 days (at a given census date).</p>





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

---

Long wait patients accessing elective surgery	The number of patients on the ACT public hospitals' waiting lists who have had surgery within a given period whose waiting time was longer than the standard waiting time for their condition when admitted for surgery.
-----------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

---

Hospital initiated postponements	The proportion of elective surgery patients booked for surgery in a given period who have their surgery postponed by the hospital (for reasons such as substitution for a more urgent patient, no beds available, etc.).
----------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

---

## Endoscopy

Urgency category	See entry for elective surgery.
------------------	---------------------------------

---

Median waiting time	See entry for elective surgery.
---------------------	---------------------------------

---

## Dental services

Waiting times (urgent)	The proportion of dental health program clients assessed as in need of emergency services who receive care within 24 hours of a request.
------------------------	------------------------------------------------------------------------------------------------------------------------------------------

---

Waiting times (general)	The average waiting time (in months) that clients of the adult centralised waiting list wait for care from the time of the request of an appointment to the date of the appointment with the dental health program.
-------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

---

## Radiotherapy

Waiting times (urgent)	The proportion of new radiotherapy patients who are assessed as in need of urgent access to treatment who are provided with treatment within 48 hours of a request.
------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------

---

Waiting times (general)	The proportion of all new radiotherapy patients who are provided with treatment within 28 days of a request.
-------------------------	--------------------------------------------------------------------------------------------------------------

---

## Breast screening

Wait time to assessment	The proportion of women requiring assessment who wait 28 days or less from their breast screen appointment to their assessment appointment.
-------------------------	---------------------------------------------------------------------------------------------------------------------------------------------

---

Wait time to appointment	The proportion of women who wait 28 days or less from their appointment date to the date of their breast screen.
--------------------------	------------------------------------------------------------------------------------------------------------------

---

Number of screens	Number of ACT women who are provided with breast screens within a given period.
-------------------	---------------------------------------------------------------------------------

---

Participation rate	The proportion of women in the ACT in the targeted age group for breast screening (50 to 69 years) who have had a breast screen within the last two years at any given time.
--------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

---

## Bed usage

Occupancy rate	The proportion of available overnight adult medical and surgical beds that are used on average over a given period.
----------------	---------------------------------------------------------------------------------------------------------------------

---





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

## Patient safety

Unplanned return to Hospital within 28 days	<p>The proportion of patients who are readmitted within 28 days to the same hospital in which they were previously a patient, where the readmission was:</p> <ul style="list-style-type: none"> <li>• unexpected for further treatment of the same condition for which the patient was previously hospitalised</li> <li>• unexpected admission for treatment of a condition related to one for which the patient was previously hospitalised</li> <li>• unexpected admission for a complication of the condition for which the patient was previously hospitalised.</li> </ul>
Unplanned return to the operating theatre	The proportion of patients who are required to return to the operating room for a further procedure related to complication(s) of a previous operation/procedure within a single admission.
Hospital acquired infection rate	The incidence of blood stream infections such as staphylococcus aureus (golden staph) acquired within ACT public hospitals, reported as the number of infections per 10,000 non-same day occupied bed days.

## Mental health

Use of seclusion	The proportion of patients who are separated from a psychiatric inpatient unit who were subject to seclusion during their inpatient episode.
Clients seen within seven days post discharge from hospital	The proportion of clients seen at or contacted by an ACT Health community facility during the seven days post-discharge from the inpatient service.
Consumer and carer representation	The proportion of Mental Health ACT committees upon which consumers and carers are represented.

## Immunisation

Childhood immunisations	The proportion of children at one year of age fully immunised in accordance with the Australian Childhood Immunisation Register Schedule.
-------------------------	-------------------------------------------------------------------------------------------------------------------------------------------





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

## Inpatient separations (Admitted patients)

Cost weighted separations	The number of separations (completed episodes of care) expressed in cost weighted terms. "Cost weighting" allocates a weight for each hospital episode based on the average level of resources used for each type of episode (with the average episode receiving a weight of "1"). As examples, a standard dialysis episode has a weight of 0.17 of the average and a knee replacement has a weight of about "5" (or five times the average). ACT Health used national public hospital cost weights (Round 13) for counting of hospital episodes in 2011–12.
NSW separations	The proportion of patients separated from ACT public hospitals whose residential address is in NSW.
Patient days	In accordance with national definitions, the number of days that a patient spends in hospital. All day only (or same-day) patients are counted as spending one full day in hospital (regardless of the time actually spent in hospital). For non same-day patients, the number of days is calculated by subtracting the separation date from the admission date (in full days).
Nursing home type patient days	The number of patient days on separation for all patients who have been classified as nursing home type patients.
Emergency surgery as a proportion of all surgical services	The proportion of patients who have surgery as a result of an emergency against the total number of surgical procedures.
Day of surgery rate	The proportion of all elective surgery cases who are admitted to hospital on the same day that they have their surgery.
Births	The number of births reported at our public hospitals in a given period.
Caesarean births	The number of births at public hospitals that are reported as being undertaken as caesarean sections.

## Mental health

Community services	The number of community based services provided to each of the three client groups: <ul style="list-style-type: none"> <li>• Adults</li> <li>• Children and adolescents</li> <li>• Older people.</li> </ul>
--------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------





Home

1 Minister's Foreword

2 Surgery

3 Emergency Department

4 NEAT

5 NEST

6 NSW Patients in ACT

7 Medical Services

8 CRCS

9 Rehab & Aged Care

10 MH, JH & A & DS

11 Quality and Safety

12 Statistics

13 Glossary

14 Publication details

This report contains a range of data on Health Directorate services.

The data is correct as at the time of publication. However, some changes to published data may be apparent in subsequent reports due to the availability of more up to date data.

The results and trends noted in the report should be considered in terms of national trends, changes in the level of demand, targets (where appropriate) and recent initiatives aimed at improving performance.

Large amounts of health service information, particularly hospital data, is categorised in accordance with the relative resource usage of the particular service (this is referred to as cost weighted activity).

The allocation of particular codes (or cost weights) in relation to the type of services provided can take some time to complete, especially in relation to those patients who require a range of services during a single hospital stay.

Cost weights are updated regularly to reflect changes in costs and practice. Care needs to be taken in comparing data in this report with data presented in previous reports in previous years that may be presented using earlier versions of the National Public Hospital Cost Weights.

Cost weights in this report are provided using Round 13 National Public Cost Weights.

For further information about cost-weights, visit the Commonwealth Department of Health and Ageing website:

<http://health.gov.au/internet/wcms/publishing.nsf/Content/Casemix-1>

## Accessibility

The ACT Government is committed to making its information, services, events and venues, accessible to as many people as possible.

- If you have difficulty reading a standard printed document and would like to receive this publication in an alternative format—such as large print or audio—please telephone 13 2281 or email [HealthACT@act.gov.au](mailto:HealthACT@act.gov.au).
- If English is not your first language and you require the translating and interpreting service—please telephone 131 450.
- If you are deaf or hearing impaired and require the TTY typewriter service—please telephone (02) 13 3677, then ask for 13 2281.
- Speak and listen users—phone 1300 555 727 then ask for 13 2281.
- Internet Relay Users—connect to the NRS, then ask for 13 2281.

## © Australian Capital Territory, Canberra, February 2012

This work is copyright. Apart from any use as permitted under the *Copyright Act 1968*, no part may be reproduced by any process without written permission from the Territory Records Office, Community and Infrastructure Services, Territory and Municipal Services, ACT Government, GPO Box 158, Canberra City ACT 2601.

Enquiries about this publication should be directed to ACT Government Health Directorate, Communications and Marketing Unit, GPO Box 825 Canberra City ACT 2601 or email: [HealthACT@act.gov.au](mailto:HealthACT@act.gov.au)

[www.health.act.gov.au](http://www.health.act.gov.au) | [www.act.gov.au](http://www.act.gov.au) | Enquiries: Canberra 13ACT1 or 132281