



# ACT PUBLIC HEALTH SERVICES

## Quarterly Performance Report

September 2014

## Introduction Summary

This is the first Quarterly Report on ACT public health system performance for 2014–15. The format for the report provides readers with additional background information as well as a visual demonstration of the performance against existing targets. Recent targets implemented through the National Health Reform Agreement (NHRA) *Improving Public Hospitals* have been discontinued in the 2014–15 Quarterly Report as per the Federal Government's decision to abolish this component of the NHRA announced in the 2014–15 Federal Budget. The performance measures have been retained by Health and are contained in the respective Emergency Department and Elective Surgery sections of this report.

The quality and safety section of the report has expanded to encompass indicators such as the hospital acquired *Staphylococcus Aureus* Bacteraemia Infection rate (SAB rate) and hand hygiene audit results which are now reported nationally on the *My Hospitals* website.

ACT Health has continued 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 as information on the performance of healthcare services.

The report shows that the increased investment in the Territory's public health services is working to provide improved access to care.

Emergency Department (ED) timeliness improved significantly in 2013-14 when compared with 2012-13 across all categories. However, for the first three months to September 2014–15, ACT Public Hospital Emergency Departments (ED's) have seen a slight decrease in these performance results.

This is directly related to a 5% increase in presentations to ACT public hospital ED's over the first three months of 2014–15 compared to the same period last year. This additional demand restricts ED resources and can lead to extended waiting times for some patients.

In the first three months to September 2014–15, 60% of all emergency department presentations had a length of stay of 4 hours or less. This is a 1% improvement when compared to the 59% reported for the same period last year.

For the first three months of 2014–15, the ACT public hospitals' occupancy was 87%, 4% lower than the result reported for the same period last year. The improved results over 2013-14 and 2014–15 are directly related to investment in additional beds with 1,048 beds now available across Canberra Hospital and Calvary Hospital. This is an increase of 378 beds (or 56%) since 2001-02.

For 2014–15, radiotherapy performance measures and targets have been revised in line with the National Radiation Oncology Practice Standards. This means that radiotherapy waiting time results for 2014–15 are no longer comparable between previous years. For the first three months to September 2014–15, 93% of all radiotherapy patients were seen within standard timeframes.

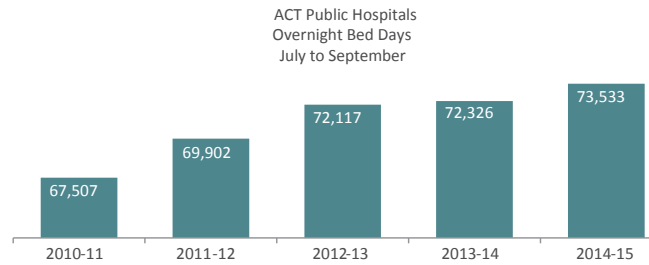
Based on preliminary data, there was a total of 1,326 births at ACT public hospitals in the first three months of 2014–15. This result is a 7% increase when compared to the result reported for the same period last year.

The average waiting time for public dental health services for the first three months to September 2014–15 was 3 months. This result is a very positive improvement on the 7 months figure reported for the same period last year.

## Our public hospitals

### Increasing the capacity of the ACT Public Health Services to manage growing demand for hospital services

In 2013–14, ACT’s public hospitals provided over 280,800 overnight hospital bed days of care, slightly up on the result of 277,993 reported for 2012–13. In first three months to September 2014–15, ACT public hospitals provided 73,533 overnight hospital bed days of care, a 2% increase when compared to the same period in 2013–14. The Australian Hospital Statistics Report for 2012–13 issued by the Australian Institute of Health and Welfare (AIHW) in April 2014 showed that the ACT reached 2.6 public hospital beds per 1000 people— which is on par with the Australian national average of 2.6 hospital beds per 1000 people.



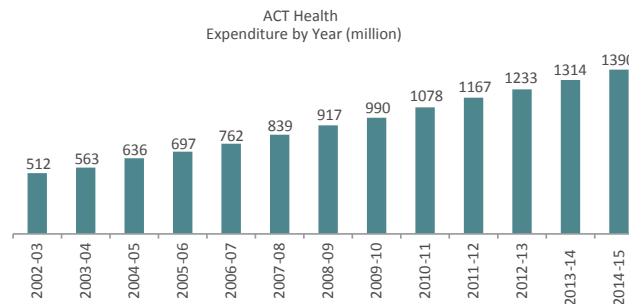
The AIHW reported that in 2012–13, ACT public hospitals provided an average of 986 beds.

In 2013–14, the Government funded an addition 44 beds across our health system, however, 16 general beds at Canberra Hospital were delayed until 2014–15 due to capacity constraints. The Government again invested in an additional 39 beds in 2014–15. Canberra Hospital has undergone an extensive bed realignment program in recent months, enabling the opening of both the funded 2013–14 and 2014–15 beds.

The final 15 general inpatient beds funded for Calvary in 2014–15 will open in January 2015. It is estimated, once all beds are on-line, the ACT public hospital bed stock will reach 1,068 beds.

In 2013–14, there was a considerable expansion to the Hospital in the Home service (HITH), with the addition of 15 bed equivalents. ACT Health has again built on this, with a further 6 bed equivalents to be provided through the expansion of the HITH program in 2014–15.

The ACT Government continues its commitment to adding bed capacity to the public hospital system to meet growing demand for care and to reduce bed occupancy to optimum levels.



The increase in bed capacity has been funded by the biggest increases in health funding by any ACT Government. The estimated budget for this financial year (2014–15) is almost \$1.4 billion which is 171% more than the \$512 million provided for health services in 2002–03.

This funding has met the cost of additional specialist clinical staff and supplies, and funded initiatives aimed at better systems and processes to improve access to services and the quality of those services.

The bed occupancy rate over 2013–14 was 90%. This is a 2% improvement when compared to the 92% reported for the same period in 2012–13. The Government’s long-term target is to maintain bed occupancy levels at around 85%, which is considered to be best for patient outcomes and to achieve maximum efficiency. However, with increasing pressure on ACT public hospitals over recent years, the ACT target for this indicator was revised for 2013–14 to 90% and will remain at the level for 2014–15 due to the increased level of demand. This recognises a more realistic target in the transition period while the necessary infrastructure and process improvements take effect which will allow ACT public hospitals to achieve the 85% in coming years.

Furthermore, the counting methodology for the bed occupancy rate has also changed in 2014–15. The revised method counts all minutes of care provided as they occur, whereas historic methods only counted activity of patients who had left the hospital. This change in counting methodology means reliable comparisons of bed occupancy data can no longer be made between previous years.

In the first three months to September 2014–15, ACT public hospitals reported an occupancy rate of 87%. Again, this improvement is directly related to the additional beds that have been injected into ACT public hospitals over recent months.

## Our public hospitals (continued)

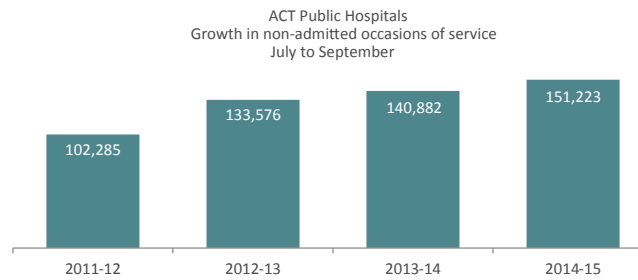
### Our public hospital activity

|                                                | July to September |         |         |         |
|------------------------------------------------|-------------------|---------|---------|---------|
|                                                | 2011–12           | 2012–13 | 2013–14 | 2014–15 |
| Overnight bed occupancy rate                   | 89%               | 92%     | 91%     | 87%     |
| Inpatient episodes of care                     | 25,035            | 23,992  | 24,327  | 25,719  |
| Non-same day bed days                          | 69,902            | 72,117  | 72,326  | 73,533  |
| Non-admitted (outpatient) occasions of service | 102,285           | 133,576 | 140,882 | 151,223 |

Over recent years, there have been significant increases in the demand for non-admitted outpatient services.

In 2012–13, Outpatient Services experienced 31% growth in outpatient occasions of service compared with 2011–12. In response to this growth, resources were committed to improve the function and processes of outpatient services at both public hospitals. For the first three months to September 2014–15, ACT outpatient services have been very busy with 151,223 non-admitted occasions of service reported. This is a 7% increase on the 140,882 occasions of service reported for the same period in 2013-14.

Outpatients services for 2012-13 and 2013-14 now encompass all non-admitted activity, including activity provided off campus in the community health spectrum. This change in counting methodology, which was driven by the implementation and adoption of activity based funding under the National Health Reform Agreement (NHRA) means reliable comparisons of outpatients/non-admitted data can no longer be made with previous years.



## Births at ACT public hospitals

### Births increasing in ACT public hospitals

ACT public hospitals accommodated record numbers of births in 2013–14, with 4,999 births at Canberra and Calvary Hospitals, a 4% increase on the 2012–13 result. The result of 5,067 births in 2013–14 also represents over 70% growth (almost 2,000 additional births) in the number of ACT public hospital births since 2001–02.

Based on preliminary data, there has been a total of 1,326 births at ACT public hospitals in the first three months of September 2014–15. This is a 7% increase on the result reported for the same period in 2013–14. However, a final result will not be available until all medical records have been fully processed. As this can take some time, the reported result should be noted as preliminary only at this stage.

### ACT public hospital births and caesarean sections

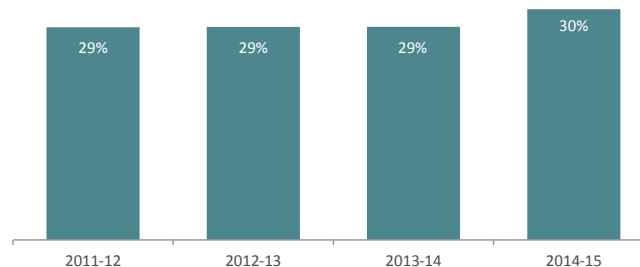
|                    | July to September |         |         |         |
|--------------------|-------------------|---------|---------|---------|
|                    | 2011–12           | 2012–13 | 2013–14 | 2014–15 |
| ACT Public births* | 1,077             | 1,220   | 1,237   | 1,326   |
| Caesarean sections | 315               | 348     | 357     | 399     |

\*ACT Public births includes number of Caesarean sections performed.

For the first three months of 2014–15, the number of births born by Caesarean section was 30% of all births, an increase of 1% compared to the result reported for the same period in 2013–14.

Caesarean rates have been steadily rising since 2001— both in the ACT and nationally. The ACT rate of 28% in 2013–14 was lower than most recent national figures published by the AIHW, for 2012–13. ACT public hospitals continue to have a low Caesarean rate compared to benchmarking hospitals. ACT public hospitals are moving towards further implementation of the ‘continuity of maternity model of care’ which has proven improved clinical outcomes for women – including a reduced rate of Caesareans.

ACT Public Hospitals  
 Proportion of births that required a caesarean procedure  
 July to September



Over recent years, the ACT Government has provided considerable funding to enhance obstetric and gynaecological services and neonatal services. The Continuity at the Canberra Hospital (CatCH) Program began in 2011 as a second continuity-of-care model at Canberra Hospital.

Since 2011-12, the ACT Government has invested in excess of \$10 million into Women Youth and Children’s services. In 2014–15, the Government invested \$2.135 million into expanding services for Women Youth and Children. This money provides for:

- An increase of one bed for the Neonatal Intensive Care Unit;
- An increase of one bed for the Paediatric Inpatient Unit;
- An extra paediatric day-surgery bed;
- Expansion of the delivery suite and birthing centre by an additional bed; and
- Expansion of the Maternity Assessment Unit by an additional bed.

In March 2014, a Community Midwifery Program (CMP) at Calvary Public Hospital was established to further enhance obstetric services at Calvary.

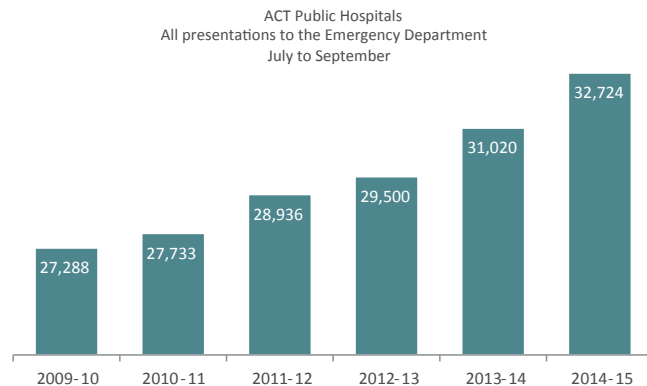
## Emergency Departments

### Demand for ACT ED services continues to grow in 2014-15

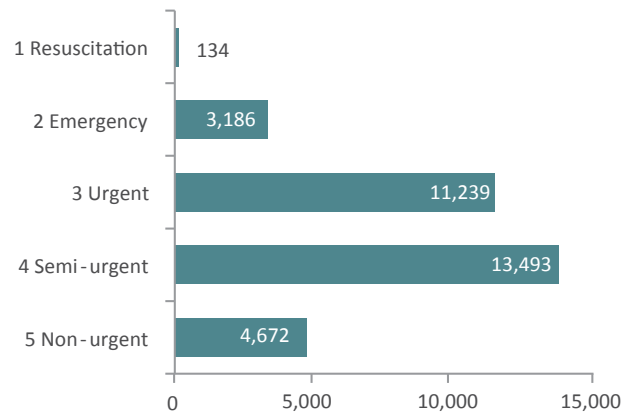
In this edition of the ACT Public Hospitals Quarterly report, ACT Health presents the results of a new analysis of the difference between hospitals across the ACT and Australia and relates their performance to important factors that can influence a patient's experience in the Emergency Department (ED).

ACT Health is committed to improving waiting times in our emergency department services.

In 2013-14, emergency department presentations grew at record levels compared to previous years, with a record 125,890 presentations recorded at ACT Public Hospital emergency departments. There has been a 31% increase in emergency department presentations from 2002-03 to 2013-14, which equates to an extra 29,741 presentations over eleven years.



Attendances at ACT emergency departments by triage category July to September 2014-15



ACT Public Hospital emergency departments in 2014-15 are again dealing with unprecedented levels of patients presenting, with 32,724 presentations recorded in the first three months to September 2014-15. This is a 5% increase when compared to the same period last year. In August 2014, there were 11,393 emergency department presentations, the highest number of ED presentations for a month on record.

A breakdown of emergency attendance figures shows that patients in the resuscitation category (triage 1) accounted for just less than 1% of all people triaged in ACT EDs; 10% were triaged in the emergency category (triage 2); 34% were categorised as urgent (triage 3); 41% were semi-urgent (triage 4); and 14% were non-urgent (triage 5).

The greatest increase in percentage terms was in the non-urgent (triage 5) category, with this cohort of patients recording a 43% increase in presentations.

However, in terms of actual attendances, the emergency category (triage 3) reported 1% decrease and semi-urgent (triage 4) a 4% increase compared to the number of attendances reported for the same period last year.

| ED Activity                           | July to September |         |         |         |
|---------------------------------------|-------------------|---------|---------|---------|
|                                       | 2011-12           | 2012-13 | 2013-14 | 2014-15 |
| Admissions via the ED                 | 7,218             | 7,829   | 8,583   | 9,018   |
| Patients treated and discharged       | 19,641            | 19,231  | 20,302  | 21,495  |
| Patients that did not wait to be seen | 2,077             | 2,440   | 2,135   | 2,211   |

There are different ways that a patient can leave the ED. The majority of patients leave the ED after their treatment is completed or when they are admitted to hospital. Some patients choose not to wait to begin or complete treatment or are transferred to other hospitals.

Admissions to hospital via the emergency department have also grown, with 9,018 recorded in the first three months to September 2014-15. This is a 5% increase when compared to the 8,583 reported for the same period last year.

Despite the significant increase in demand, the 'did not wait' rate remained unchanged over the first three months to September 2014-15, with a result of 7% reported. This result is consistent with the 7% reported for the same period last year and well below the target of 10%. This performance indicator is a great way of measuring an ED's efficiency and effectiveness. This result is particularly impressive for the ACT given the increase in demand over the first three months of 2014-15.



## Emergency Departments (continued)

Emergency Department (ED) timeliness improved significantly in 2013-14 when compared with 2012-13 across all categories. However, for the first three months to September 2014-15, ACT Public Hospital Emergency Departments (ED's) have seen a slight decrease in these performance results. This is directly related to the 5% increase in presentations to ACT public hospital ED's over the first three months of 2014-15. This increase in activity places additional pressure on ED resources and can lead to extended waiting times for some patients.

### ED timeliness

| Emergency department presentation seen on time Year to September | July to September |         |        |
|------------------------------------------------------------------|-------------------|---------|--------|
|                                                                  | 2013-14           | 2014-15 | Target |
| Category 1 (immediately)                                         | 99%               | 100%    | 100%   |
| Category 2 (<10 mins)                                            | 82%               | 77%     | 80%    |
| Category 3 (<30 mins)                                            | 43%               | 43%     | 75%    |
| Category 4 (<60 mins)                                            | 50%               | 44%     | 70%    |
| Category 5 (<120 mins)                                           | 81%               | 80%     | 70%    |
| Total All Categories                                             | 55%               | 52%     | 70%    |

Timeliness targets were met for triage category one and five patients. Category five continued to exceed national benchmarks, with 80% of this cohort seen on time. This is despite a 43% increase in category five patient presentations over the first three months of 2014-15 when compared to the same period last year. It is important to note that the ACT continues to treat 100% of the urgent category one patients within the recommended timeframes.

The following table shows the median waiting times for patients to be seen from when they first present to an ACT public hospital emergency department to when treatment first commences. The second table provides some examples of the Australian Triage Scale.

### Waiting time to be seen in ACT public hospital EDs

| Waiting time between earliest event in episode and seen time | Triage category                          |                      |                   |                        |                        | Total   |
|--------------------------------------------------------------|------------------------------------------|----------------------|-------------------|------------------------|------------------------|---------|
|                                                              | Resuscitation – Immediate within seconds | Emergency <= 10 mins | Urgent <= 30 mins | Semi-urgent <= 60 mins | Non-Urgent <= 120 mins |         |
|                                                              | Median                                   | Median               | Median            | Median                 | Median                 |         |
| July to September 2014-15                                    | 0:00:00                                  | 0:05:00              | 0:41:00           | 1:12:00                | 0:56:00                | 0:47:00 |
| July to September 2013-14                                    | 0:00:00                                  | 0:05:00              | 0:40:00           | 1:00:00                | 0:44:00                | 0:39:00 |

### ED triage examples

| Triage Category   | Australian Triage Scale | Common examples                  |
|-------------------|-------------------------|----------------------------------|
| Triage category 1 | Resuscitation           | Critical injury, cardiac arrest  |
| Triage category 2 | Emergency               | Chest pain, severe burns         |
| Triage category 3 | Urgent                  | Moderate blood loss, dehydration |
| Triage category 4 | Semi-Urgent             | Sprained ankle, earache          |
| Triage category 5 | Non-Urgent              | Small cuts or abrasions          |

In 2013-14, the highest volume category of patients that presented to ACT emergency departments were classed as triage category 4. Additionally the majority of these patients (83%) were treated and discharged (not requiring admission to an inpatient bed). This large cohort of patients and the increase in triage category 5 patients suggests that more people are presenting to the emergency department for treatment that could have been treated by alternative options such as their general practitioner.

According to the Australian Institute of Health & Welfare (AIHW) report titled *Australian hospital statistics Emergency department care 2013-14*<sup>1</sup>, the ACT had the highest rate of GP type presentations in Australia.

A GP type presentation is categorised as a non urgent triage category that does not require admission to hospital. Low bulk billing rates and the perceived availability of General Practitioner services in the ACT maybe a contributing factor to the increase in low acuity presentations to ACT public hospital EDs.

ACT's emergency departments 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 required services and improve patient flow through the emergency departments.

<sup>1</sup> <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129549036>

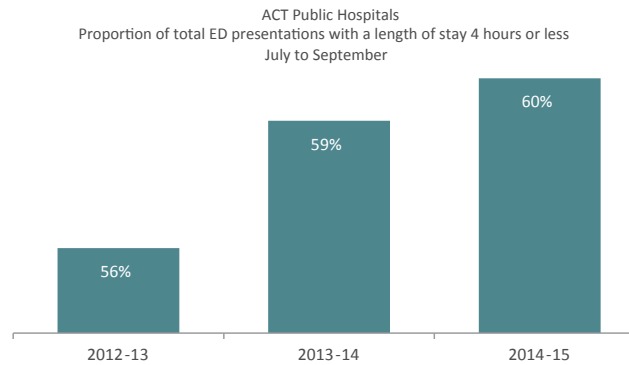
## Emergency Departments (continued)

### Length of stay in ACT public Emergency Departments

This component of the report looks at the proportion of patients who present to ED's who stay less than 4 hours from their arrival to either admission or their departure home. This performance measure had formally been known as the National Emergency Access Target (NEAT) under the auspice of the National Health Reform Agreement (NHRA) – National Partnership Agreement (NPA) – on improving public hospitals.

The 2014–15 Federal Budget announced the cessation of components under the NHRA, specifically the discontinuation of the National Partnership Agreement (NPA) where the NEAT performance targets were governed. Due to these performance targets being discontinued nationally, ACT Health will no longer be reporting against the previous targets associated with NEAT but will continue to monitor and report on these performance measures both publicly and internally.

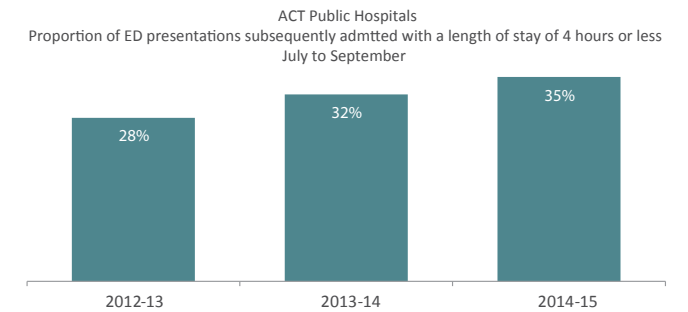
The Australian Institute of Health & Welfare (AIHW) have recently reported ED length of stay measures by jurisdiction in their latest report titled *Emergency Department care 2013-14*. However, these measures have not been reported against any targets associated with the previous NPA agreement. In addition, these measures have now been reported over the financial year which differs to the previous calendar year reporting of NEAT. ACT Health is also now reporting these measures over a financial year.



The AIHW report found that the ACT reported an increase in the proportion of emergency department presentations that waited 4 hours or less, from 58% in 2012–13 to 62% in 2013-14. For the first three months to September 2014–15, 60% of all emergency department presentations had a length of stay of 4 hours or less. This result is slightly below the end of year result for 2013-14 but is however a 1% improvement when compared to the 59% reported in September 2013-14.

A contributing factor in achieving a reduced ED length of stay is determined by the types of patients who present to ACT Public Hospital EDs. When ACT Public Hospitals have an increase in urgent cases (triage 1 & 2) achieving a reduced ED length of stay becomes more challenging.

As Canberra Hospital is the main tertiary referral centre for the ACT and surrounding region, it is expected to deal with more complex and critically injured patients. Both of ACT's public hospitals are defined as major metropolitan hospitals. The latest data released by National Health Performance Authority (NHPA) for December 2013 shows that the average for this measure across major metropolitan hospitals in Australia in 2013 was 60%, on par with the ACT's result for the first three months to September 2014–15.



For the first three months to September 2014–15, 35% of all emergency department presentations who were subsequently admitted waited four hours or less, a 3% improvement when compared to the same period last year.

For people to be seen in the ED in a timely fashion there needs to be a bed space available to take them from the waiting room into the ED. To make bed spaces available in the ED, you need to move those already in the ED out (either home or up to the inpatient wards). With an increasing level of demand for inpatient beds, this means either creating additional beds or getting more efficient with their use. ACT Health is aiming to do both.



## Mental Health Services

It is widely recognised that there is significant variation in calculating mental health indicators across the nation, and it is therefore difficult to draw conclusion on comparative mental health performance indicators. However, in recent months, ACT Health has evaluated the methodology for deriving these figures through the process of submitting national data for 2012-13 to the AIHW. In fully adopting national definitions and ensuring the use of the most robust data source available, ACT performance against this indicator will reduce.

That said ACT Health is planning to adjust its methodology for calculation in 2014-15. The target for the percentage of inpatients contacted within 7 days post-discharge indicator was increased from 75% in 2013-14 to 85% in 2014-15 based of a former methodology. ACT Health will monitor achievement against this indicator in 2014-15 and reset the target for 2015-16 to reflect the change in performance against the methodology used for national purposes.

The most recent national publication released by the Australian Institute of Health and Welfare (AIHW) is the Mental Health Services in Brief Report 2014, which examines jurisdiction's performance for 2011-12, and shows the national rate is 54.6%. The ACT, in fully adopting the national methodology, will well exceed the national rate.

| % Inpatients contacted within 7 days post-discharge | July to September |         |                 |
|-----------------------------------------------------|-------------------|---------|-----------------|
|                                                     | 2013-14           | 2014-15 | Targets 2014-15 |
| ACT Public Hospitals                                | 89%               | 74%     | 85%             |

ACT Health is committed to its mental health clients. All relevant Mental Health ACT committees include consumer and carer member involvement. This consultation process supports the best possible integrated mental health services for our community.

Mental Health ACT has implemented a number of initiatives to reduce the level of clients secluded during an inpatient episode. For the first three months to September 2014-15, the ACT reported a seclusion result of 2.6%, which is better than our local target of 3%.

| ACT public hospitals Seclusion Rates |         |         |
|--------------------------------------|---------|---------|
| July to September                    |         |         |
| 2012-13                              | 2013-14 | 2014-15 |
| 1.3%                                 | 1.7%    | 2.6%    |

Twenty-eight day unplanned readmission rate is variable depending on the complexity of either individual consumers' needs or the number of complex consumers presenting for inpatient service support at any given time. The unplanned re-admission rate for the year to September 2013-14 was 7.9%, and has significantly improved in the first three months to September 2014-15 to 6.7%. It is also known that community follow-up by mental health services, carer involvement and other community supports are key factors in reducing readmissions within 28 days of an initial inpatient admission.

| ACT public hospitals 28 Day Readmits |         |         |
|--------------------------------------|---------|---------|
| July to September                    |         |         |
| 2012-13                              | 2013-14 | 2014-15 |
| 7.2%                                 | 7.9%    | 6.7%    |

The readmission rate is a broad indicator of responsiveness to inpatient care and community follow up. A lower rate is preferable to promote recovery, reduce the chances of a relapse, and minimise the possible need for a further acute inpatient episode. For the first three months to September 2014-15, 6.7% of mental health clients returned to hospital within 28 days of discharge from an ACT Mental Health inpatient unit. The latest national mental health report available AIHW Mental Health Services in Brief Report 2014 which looks at 2011-12 data, indicates that the national rate for jurisdictional performance was 14.4% for readmissions to hospital within 28 days of discharge. The ACT is currently well below that figure.

Outcome measures are a suite of clinical tools used to measure a consumer's clinical status at a point in time. The tools are rating scales of clinical symptoms and assessment of needs. Outcome measures are used as a more objective assessment to monitor progress and fine tune recovery planning and response to treatment options.

For the first three months to September 2013-14, outcome measures completed in ACT public hospitals were on target with a result of 65% reported against the target of 65%. In the first three months to September 2014-15 the outcome measures completed rate has significantly increased with a result of 70% - a 5% increase compared to the result reported for the same period last year.

| Percentage of clients with outcome measures completed |         |         |                 |
|-------------------------------------------------------|---------|---------|-----------------|
| July to September                                     |         |         |                 |
|                                                       | 2013-14 | 2014-15 | Targets 2014-15 |
| ACT Public Hospitals                                  | 65%     | 70%     | 65%             |

## Patient Safety and Quality

ACT Health continually strives to provide a safe and high quality health care system, and is continually implementing service improvement to increase safety for all patients.

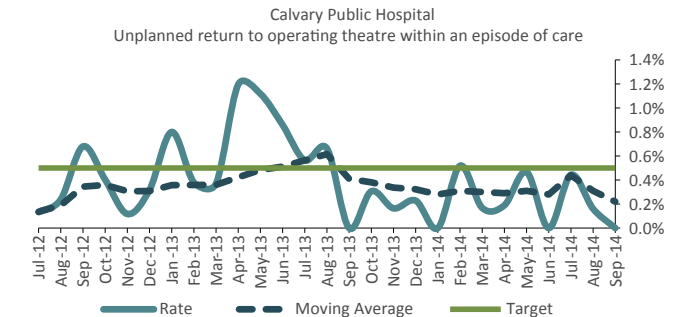
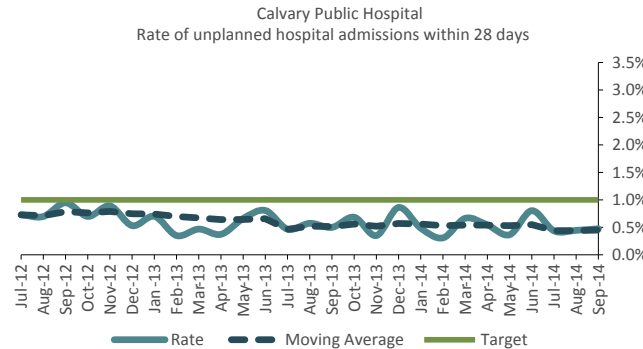
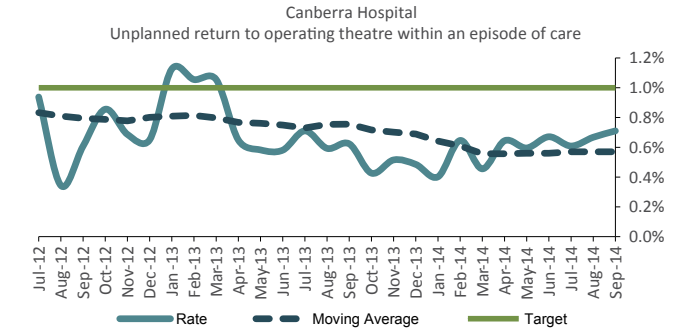
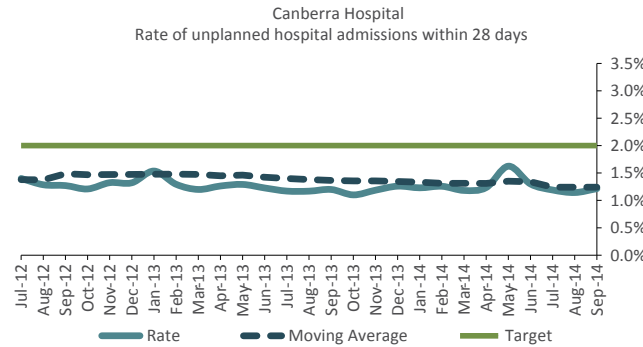
Due to the differing type and nature of services provided at each hospital campus the targets for each indicator are different. Canberra Hospital – our major teaching and referral hospital – manages more complex patients and higher levels of complications can be expected.

Moving averages are provided as well as month-by-month results. As there are relatively small numbers of patients who have unplanned returns to hospital or the operating theatre, or who acquire an infection during their hospital stay, there may be relatively large movements in results between months. The inclusion of the moving average smoothes out these monthly fluctuations and provide a better understanding of trends in these important indicators.

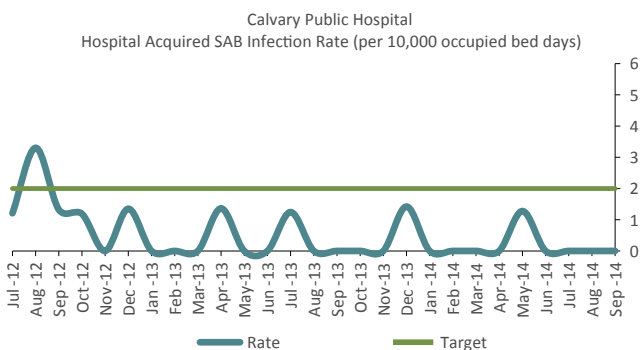
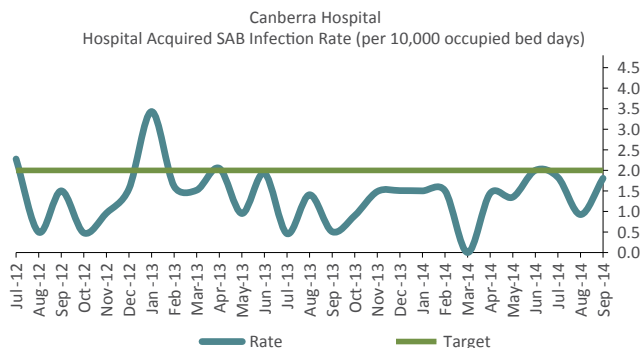
Our hospitals continue to meet safety and quality standards.

Both hospitals continue to report good results for the proportion of people who return to hospital within 28 days of discharge, with the results at the Canberra Hospital and Calvary Public Hospital remaining well below target during the first three months to September 2014–15.

For the first three months of 2014–15, both public hospitals reported positive results in the proportion of people who require an unplanned return to the operating theatre during their hospital stay when compared to the same period last year. Canberra Hospital results are still well below the target of 1% whilst Calvary's results have generally remained below the target of 0.50%.



## Patient Safety and Quality (continued)



Both our public hospitals maintain processes to minimise hospital acquired infections during hospital stays. As noted above, the target for each hospital is set based on the types of services they provide. As the major trauma hospital for the region, the Canberra Hospital will have higher SAB infection rates than Calvary Public Hospital. On the 13 March 2014 the National Health Performance Authority (NHPA) released its latest report titled Healthcare-associated *Staphylococcus aureus* bloodstream infection in 2012–13.

The report highlighted that in 2012–13 major peer group hospitals with more vulnerable patients had an average result of 1.35 cases per 10,000 patient bed days. For 2012–13, Canberra Hospital reported a result of 1.72 cases per 10,000 patient bed days. While this result is above the national peer group average it is still well below the national target of 2.0 per 10,000 patient bed days.

For 2013-14, Canberra Hospital reported a SAB result of 1.17 cases per 10,000 patient bed days, a significant reduction when compared to the 2012–13 result of 1.72 cases per 10,000 patient bed days. For the first three months to September 2014–15, Canberra Hospital results are still below the targets of 2.0 per 10,000 bed days (1.8).

Calvary Public Hospital also reported very low results for SAB rates in 2012-13 compared to their peer hospitals in the major hospitals with fewer vulnerable patients category. Calvary Public Hospital reported a result of 0.33 cases per 10,000 patient bed days against the national peer group average of 0.92 cases per 10,000 patient bed days.

For 2013–14, Calvary Public Hospital continued to report well under the national average for their peer group with a SAB rate result of 0.33 cases per 10,000 patient bed days. In the first three months to September 2014-15, Calvary had no reported cases of SAB infections.

When combining both ACT public hospitals results for 2013–14, the ACT reported a SAB rate result of 0.94 cases per 10,000 patient bed days. This result is slightly above the 2012–13 national average of 0.90 cases per 10,000 patient bed days for all hospitals but still well below the national target of 2 cases per 10,000 bed days.

Hand Hygiene Rate will also now be reported as it is a national measure and an ACT strategic indicator. The estimated hand hygiene rate for a hospital is a measure of how often (as a percentage) hand hygiene is correctly performed.

It is calculated by dividing the number of observed hand hygiene 'moments' where proper hand hygiene was practiced in a specified audit period, by the total number of observed hand hygiene 'moments' in the same audit period.

### Hand Hygiene audit results

| Hand Hygiene            | 2013–14 Target | 2013 June Audit Result | 2013 October Audit Result | 2014 March Audit Result |
|-------------------------|----------------|------------------------|---------------------------|-------------------------|
| Canberra Hospital       | 70%            | 68%                    | 73%                       | 73%                     |
| Calvary Public Hospital | 70%            | 75%                    | 76%                       | 82%                     |

Canberra Hospital improved its result in the latest audit undertaken in March 2014 to 73.0% from the previous audit in October 2013. Canberra Hospital is now above the national benchmark of 70%, whilst Calvary continued to improve and record results well above the national benchmark with 81.8% recorded during the same audit period.

Our infection control officers continue to develop and implement programs and processes to further limit the transfer of infections within hospitals. This includes communication and education for clinicians, patients, general staff and visitors.

This indicator has changed based on national quality and safety standards and now only measures the number of people admitted to hospitals per 10,000 occupied bed days who acquire a Staphylococcus Aureus Bacteraemia Infection (SAB infection) during their stay.

## Regional Cancer Services

### Increasing demand, improving waiting times

ACT Health Cancer Services provided care for 336 new radiotherapy patients in the first three months to September 2014–15.

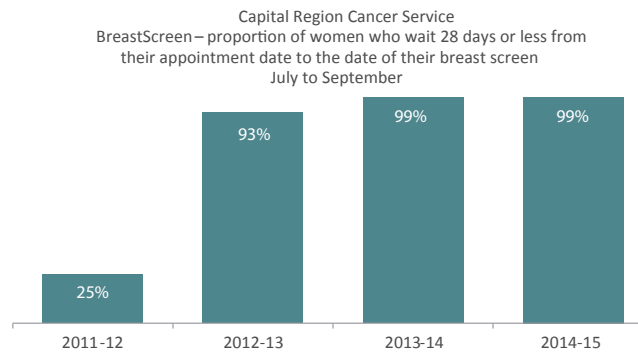
For 2014–15, radiotherapy performance measures and targets have been revised in line with the National Radiation Oncology Practice Standards. This means that radiotherapy waiting time results for 2014–15 are no longer comparable between previous years. For the first three months to September 2014–15, 93% of all radiotherapy patients were seen within standard timeframes.

#### Percentage of radiotherapy patients who commence treatment within standard time frames

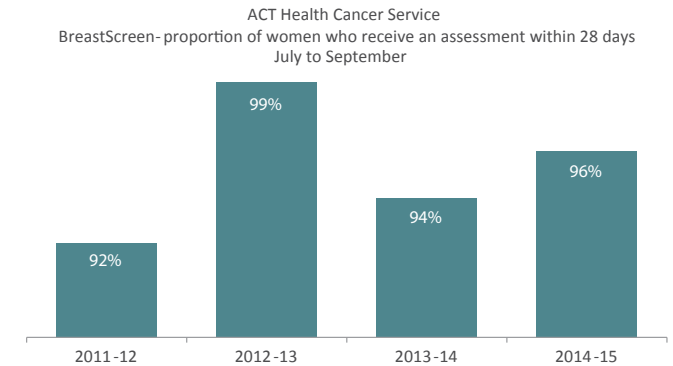
|                                   | July to September |         |         |         |         |
|-----------------------------------|-------------------|---------|---------|---------|---------|
|                                   | 2010–11           | 2011–12 | 2012–13 | 2013–14 | 2014–15 |
| Emergency: within 48 hours        | 100%              | 100%    | 100%    | 100%    | 100%    |
| Palliative: with 2 weeks          | 100%              | 100%    | 100%    | 100%    | 84%     |
| Radical: within 4 weeks           | 99%               | 99%     | 100%    | 100%    | 97%     |
| Total – All Radiotherapy Patients | 99%               | 100%    | 100%    | 100%    | 93%     |

### Breast Screening

Waiting times for Breast Screen appointments have improved as a result of the engagement of additional permanent radiographers (in 2011) as well as locum and casual radiographers. The BreastScreen ACT program no longer provides services to South East New South Wales. This has freed up radiography staff to provide services to women of the ACT. However, women who reside in NSW and who currently work in the ACT are still able to access BreastScreen services in the ACT. This is a result of negotiations between the NSW and ACT Governments.



For the first three months to September 2014–15, 99% of women waited less than 28 days for their screening appointment. This is a marked improvement on the 25% reported in 2011–12. Waiting times for the proportion of women who receive an assessment within 28 days continues to maintain an excellent record in 2014–15 with a result of 96%, compared to 94% reported for the same period in 2013-14.



Despite ready availability of appointments, getting women in to the Program to attend for screening is proving difficult. To improve the numbers, BreastScreen ACT has commenced an active recruitment campaign using multiple strategies, such as contacting lapsed attendees and sending letters to General Practitioners to encourage women to have a breast screen. There were a total of 4,046 breast screens performed for ACT residents in the first three months to September 2014–15, compared with the 4,254 screening procedures reported for the same period last year.

## Rehabilitation, Aged and Community Care

### Strong results continue for aged care and rehabilitation services

For the first three months to September 2014–15, the Aged Care Assessment Team (ACAT) provided in-hospital assessments within an average of 2 days. This level of service minimises delays in accessing out of the hospital for patients who no longer need hospital care. This result is demand driven.

#### Aged Care and Rehabilitation activity in ACT public hospitals

|                                                                                                 | July to September |         |         |
|-------------------------------------------------------------------------------------------------|-------------------|---------|---------|
|                                                                                                 | 2012–13           | 2013–14 | 2014–15 |
| Aged Care Assessment Team (ACAT) mean waiting time                                              | 2.0               | 2.0     | 2.0     |
| Average length of stay (ALOS) for Aged Care and Rehabilitation patients at ACT public hospitals | 12                | 14      | 13      |
| Aged Care and Rehabilitation non same day bed days at ACT public hospitals                      | 8,431             | 8,518   | 8,523   |
| Nursing home type patients (only Canberra Hospital data reported)                               | 31                | 35      | 59      |

The Aged Care and Rehabilitation Service across ACT Public Hospitals recorded a slight increase in overnight beds days in the first three months to September 2014–15 when compared with the same period last year. When compared to the same period in 2012–13 there has been 1% growth in the number of overnight bed days. The average length of stay for these patients has decreased by 1 day in 2014–15 when compared to the same period in 2013–14.

The number of nursing home type patient separations from hospital for patients at the Canberra Hospital almost doubled over first three months of 2014–15 when compared to the same period last year. This is partly due to a lack of nursing home beds while the refurbishment of Bill McKenzie Gardens (formally Ginninderra Gardens) occurs. The refurbishment is currently underway and is expected to be fully finalised by late 2015, with an expected 75 nursing beds becoming available for the Territory. Additionally the increase in nursing home type patients at Canberra Hospital over the last couple of years and the increase in the average length of stay for these patients suggest that there is currently a shortfall of nursing home type places in the ACT.

## 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.

As Canberra Hospital is the major teaching and referral centre for the southern NSW region, patients who are critically unwell are transferred there for a higher level of care. These patients are often very complex and require multiple services. NSW patients accounted for 15% of all public hospital admitted separations in the first three months of 2014–15.

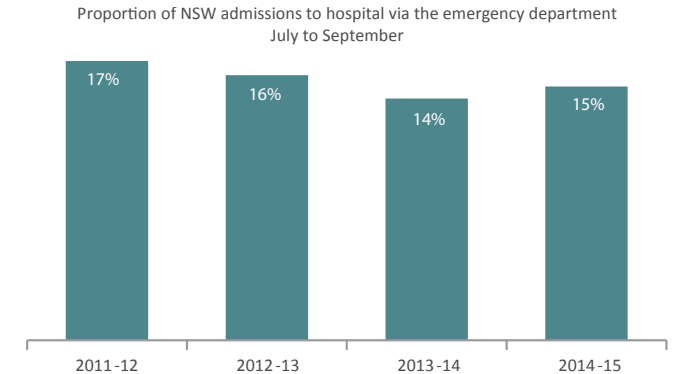
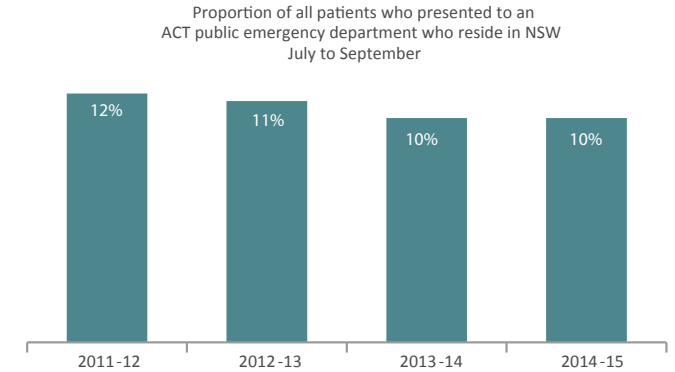
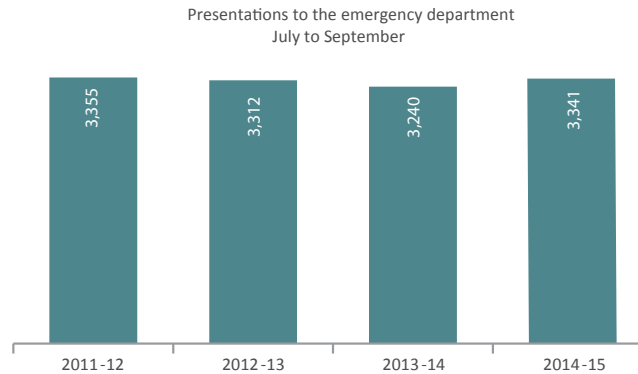
Over a third of all surgical procedures performed in ACT Public Hospitals are performed on patients who reside in NSW.

### NSW patients accessing surgery in ACT public hospitals

| July to September    |               |                  |                   |
|----------------------|---------------|------------------|-------------------|
| ACT public hospitals | Total Surgery | Elective Surgery | Emergency Surgery |
| All patients         | 4,992         | 3,156            | 1,836             |
| NSW patients         | 1,656         | 972              | 684               |
| % NSW patients       | 33%           | 31%              | 37%               |

Many patients who reside in NSW also attend our public hospital emergency departments for a range of reasons. For the first three months to September 2014–15, 3,341 NSW patients presented to ACT Public Hospital ED's for treatment, 10% of all emergency department presentations and 15% of the total admissions through the ED. These results remain consistent compared to the same period for previous years, however it still places additional pressure on ACT Public Hospital resources to treat patients in a timely manner.

### NSW patient activity





## Addressing Gaps in Aboriginal and Torres Strait Islander Health Status

In this chapter ACT Health has produced a snap shot of ACT Health services provided to Aboriginal and Torres Strait Islander people who reside in the ACT and surrounding region.

Indigenous Aboriginal and Torres Strait Islander people account for less than 1% (5,184) of the ACT's total population according to the 2011 census. This small cohort also makes up around 2% of ACT Public Hospital episodes of care. These include surgical and medical procedures, as well as emergency and outpatient services.

### Aboriginal and Torres Strait Islander people accessing ACT Health Services

|                                       | July to September |         |         |
|---------------------------------------|-------------------|---------|---------|
|                                       | 2012-13           | 2013-14 | 2014-15 |
| Emergency Department presentations    | 766               | 894     | 867     |
| Admitted inpatient episodes of care   | 618               | 521     | 297     |
| Elective Surgery operations performed | 78                | 47      | 41      |

The AIHW report titled Elective surgery waiting times 2013-14<sup>2</sup> noted that the median waiting times for Indigenous Australians having elective surgery in the ACT improved from a 74 day wait in 2011-12 to a 61 day wait time in 2013-14 with the national figure being 41 days.

### Immunisation rates for the ACT indigenous population

This provides an indication of the public health services to minimise the incidence of vaccine preventable diseases, as recorded by the Australian Childhood Immunisation Register, in the ACT's indigenous population. The ACT aims to maintain the immunisation coverage rates for the vulnerable groups and, in particular Indigenous and non-Indigenous Australians.

| Immunisation rates for vaccines in the national schedule for the ACT Indigenous population: | 2013-14 target | 2013-14 Result |
|---------------------------------------------------------------------------------------------|----------------|----------------|
| 12 to 15 months                                                                             | >90%           | 89.7%          |
| 24 to 27 months                                                                             | >90%           | 94.8%          |
| 60 to 63 months                                                                             | >90%           | 93.7%          |
| All                                                                                         | >90%           | 92.6%          |

| Other health services provided to Indigenous Australians in ACT – July to September                        | 2013-14 | 2014-15 |
|------------------------------------------------------------------------------------------------------------|---------|---------|
| Proportion of breast screens performed for women 50-69 years                                               | 0.47%   | 0.42%   |
| Proportion of mental health community occasions of service for Aboriginal/Torres Strait Islander consumers | 4%      | 4%      |
| Number of Aboriginal/Torres Strait Islander Births                                                         | 39      | 39      |
| Total non-admitted occasions of service provided to Aboriginal/Torres Strait Islander clients              | 1,819   | 2,054   |

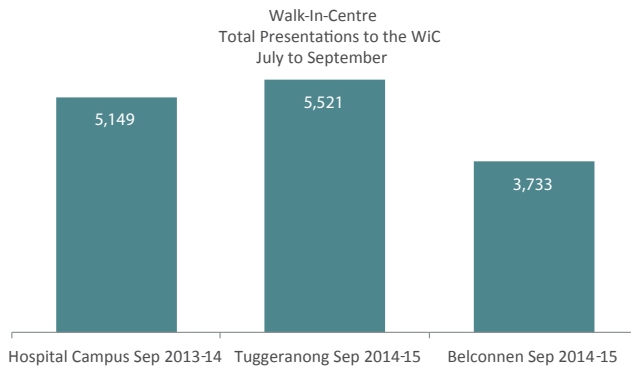
<sup>2</sup> <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129549058>

## Walk-In-Centres

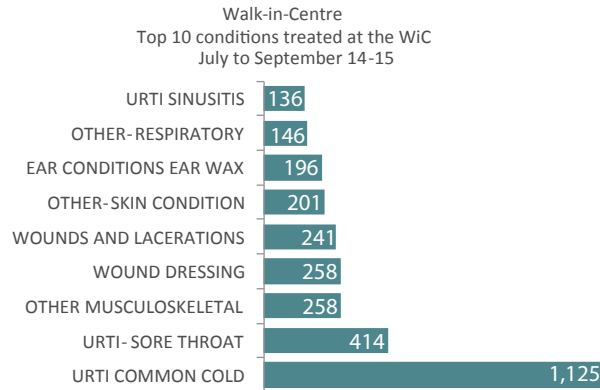
Australia's first public, nurse-led Walk-in Centre (WiC) was opened at Canberra Hospital in May 2010. From its opening in May 2010, until it closed on 25 June 2014, 73,392 clients presented to the WiC. The Tuggeranong WiC opened to the public on 26 June 2014, and the Belconnen WiC opened on 1 July 2014.

In the first three months of opening, Tuggeranong WiC reported 5,521 and Belconnen WiC 3,733 presentations.

The WiC is designed to help people get fast, free, one-off treatment for minor illnesses and injuries. The people of Canberra are able to see a specialist nurse for advice, assessment and treatment for conditions such as cuts and bruises, minor infections, strains, sprains, skin complaints, and coughs and colds.



The WiC nurses treat a wide range of conditions, with no significant changes in the top 10 conditions treated since last year. The common cold remains the main reason for presentation to the WiC.



The WiC does not provide ongoing care for patients and will not treat people with chronic conditions or children less than two years of age. These patients should seek treatment and advice from their GP or the ED.

The WiC is *not* designed to provide the range of services that a GP can provide, including comprehensive medical management, referral to specialist services or general health checks. The nurses who work in the WiC have all completed additional training and the care they provide is guided by established protocols that have been endorsed by the appropriate clinical approvals processes. A visit report is sent to the patient's general practitioner with consent.

People in the ACT community now have access to a wide range of primary health services including their GPs, EDs, community health services, pharmacists and the WiC.

## Surgery in ACT public hospitals

Over the past four years the amount of surgical operations performed has risen by 11%, from 4,514 reported for 2010-11 to 4,992 reported for the first three months to September 2014-15. The most significant increase has occurred in elective surgery which has grown by 14%.

### Total surgery performed in ACT public hospitals

|                         | July to September |         |         |         |         |
|-------------------------|-------------------|---------|---------|---------|---------|
|                         | 2010-11           | 2011-12 | 2012-13 | 2013-14 | 2014-15 |
| Emergency Surgery       | 1,746             | 1,609   | 1,676   | 1,807   | 1,836   |
| Elective Surgery        | 2,768             | 3,075   | 3,143   | 2,965   | 3,156   |
| Total Surgery Performed | 4,514             | 4,684   | 4,819   | 4,772   | 4,992   |

### Increasing access to elective surgery

Since 2002-03, when ACT Health provided a total of 7,661 elective surgery operations, there has been a 51% increase in elective surgery activity. Our public hospitals performed 11,780 elective surgery procedures in 2013-14 and this is the fourth consecutive year that we have provided over 11,000 elective surgery procedures. This result is also the highest number of elective surgery procedures performed ever in a single year for the ACT.

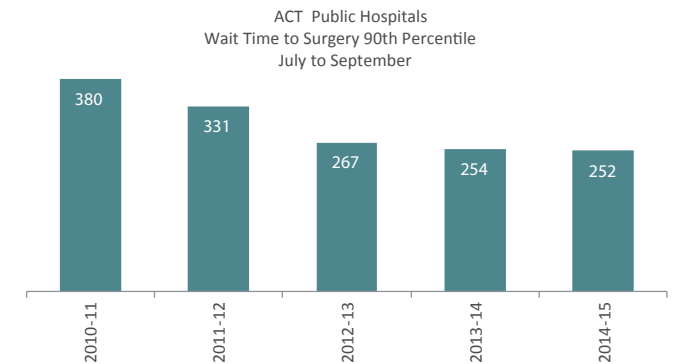
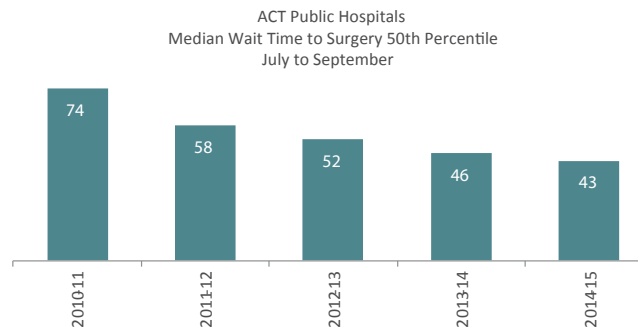
ACT Public Hospitals are planning to perform 12,000 elective surgery procedures in 2014-15. For the first three months to September 2014-15, ACT Public Hospitals performed 3,154 elective surgery procedures.

The latest Australian Hospitals Statistics (AIHW) report titled *Elective Surgery Waiting Times 2013-14*<sup>3</sup> showed that for the first time in the history of this report the ACT has not reported the highest median wait time to surgery in the country. While the ACT's result of 48 days for 2013-14 is still above the national average of 36 days, it demonstrates the significant improvement the ACT has made over recent years - in 2010-11, the ACT reported a median wait time to surgery of 74 days. As ACT Health has significantly reduced its long wait patients over the last few years, the median wait time is now also the lowest it's been on record since 2002-03.

The median waiting time continued to decrease in the first quarter of 2014-15 with a result of 43 days.

The AIHW report also showed that the ACT performed better than some other jurisdictions for patients admitted for surgery at the 90th percentile. The ACT Government investment in elective surgery has resulted in decreases for the longest waiting times at the 90th percentile, with an improvement from 392 days in 2010-11 down to 270 days in 2013-14. When comparing the 2013-14 result of 271 days to 2008-09, there has been a 28% reduction in the 90th percentile.

In the first three months of 2014-15 the waiting time at the 90th percentile has further decreased to 252 days. This result is 2 days lower than result reported for the same period last year.

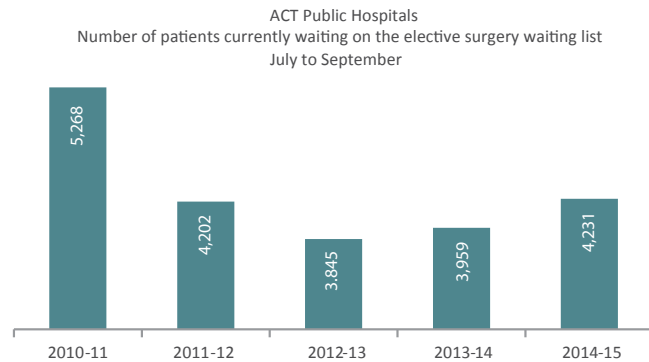


<sup>3</sup> <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129549058>

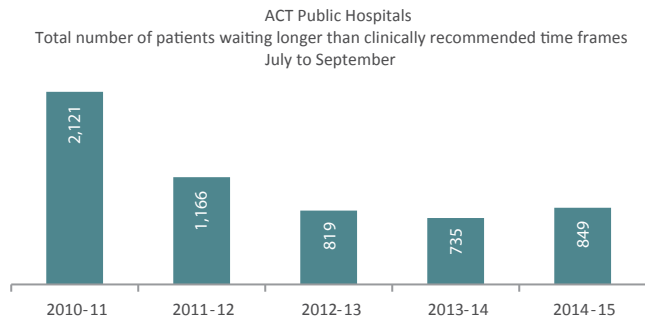
## Surgery in ACT public hospitals (continued)

### Reducing the number of patients waiting too long for elective surgery

The increase in access to elective surgery over last 4 years had a very significant impact on the numbers of patients waiting for elective surgery and the numbers of patients waiting too long for care. At the end of September 2014, there were 4,231 patients on the elective surgery waiting list. This is a 7% increase when compared to 3,959 patients waiting at 30 September 2013, but a 20% reduction when compared to the same period in 2010-11.



ACT Public Hospitals have recorded a slight increase in the number of patients waiting longer than the recommended timeframe for their elective surgery procedure, with a result of 849 patients at 30 September 2014. However, when comparing the 849 patients with the same period in 2010-11 there has been a 60% reduction in long wait patients.



This table shows the significant work undertaken by ACT Health to reduce the amount of long wait patients in a number of surgical specialties. While there is still more to be done there has been a significant improvement over the past few years and plans are in place to ensure all these patients access their surgery as quickly as possible.

### Reducing overdue patients by surgical specialty

| Surgical Specialties                                                         | September |       |      |      |
|------------------------------------------------------------------------------|-----------|-------|------|------|
|                                                                              | 2011      | 2012  | 2013 | 2014 |
| Cardiothoracic surgery                                                       | 6         | 0     | 3    | 1    |
| Ear, Nose & Throat surgery                                                   | 227       | 117   | 185  | 189  |
| General Surgery                                                              | 79        | 86    | 79   | 84   |
| Gynaecology surgery                                                          | 13        | 196   | 24   | 44   |
| Neurosurgery                                                                 | 8         | 32    | 13   | 8    |
| Ophthalmology surgery                                                        | 9         | 705   | 11   | 8    |
| Orthopaedic surgery                                                          | 468       | 1,004 | 358  | 381  |
| Plastic surgery                                                              | 50        | 79    | 11   | 8    |
| Urology surgery                                                              | 138       | 378   | 41   | 49   |
| Vascular surgery                                                             | 51        | 106   | 9    | 39   |
| Other surgery (includes Paediatric surgery, Oral surgery & Thoracic surgery) | 117       | 202   | 1    | 38   |

## Surgery in ACT public hospitals (continued)

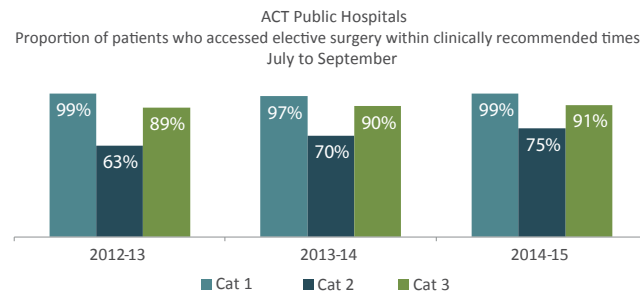
### Timeliness to Elective Surgery

This component of the report looks at the proportion of patients who access their elective surgery within the clinically recommended timeframes. This performance measure had formally been known as the National Elective Surgery Target (NEST) under the auspice of the National Health Reform Agreement (NHRA) – National Partnership Agreement (NPA) – on improving public hospitals.

Announced in the 2014–15 Federal Budget was a cessation of components under the NHRA, more specifically the discontinuation of the NPA where the NEST performance targets were governed. Due to these performance targets being discontinued nationally, ACT Health will no longer be reporting against the previous targets associated with NEST for any future reporting. ACT Health will however continue to monitor and report on these performance measures both publicly and internally. In addition, ACT Health is currently working with both public hospitals to determine local targets to continue to drive further improvements and efficiencies for patients that access public elective surgery in ACT public hospitals.

This component of the report had previously been incorporated under the section of the National Health Reform. Information on previous year’s performance can still be found under that section of the report.

Overall elective surgery timeliness performance continues to improve over the first three months to September 2014–15 when compared to the same period for previous years across all urgency categories.



## Selected Statistics

| ACT Health                                                                         |         |         |       |
|------------------------------------------------------------------------------------|---------|---------|-------|
| Selected ACT Public hospitals and Community Activity Indicators                    |         |         |       |
| July to September                                                                  |         |         |       |
|                                                                                    | 2013-14 | 2014-15 | % VAR |
| <b>Inpatient Activity</b>                                                          |         |         |       |
| Day only patient days                                                              | 13,198  | 13,732  | 4%    |
| Overnight patient days                                                             | 72,326  | 73,533  | 2%    |
| Total episodes of care (separations)                                               | 24,327  | 25,719  | 6%    |
| Nursing Home Type Patient (NHTP) Bed-Days (on separation – Canberra Hospital only) | 2,474   | 2,858   | 16%   |
| Bed Occupancy Rate (total overnight hospital beds)                                 | 91%     | 87%     | -4%   |
| Total number of births in ACT public hospitals                                     | 1,237   | 1,326   | 7%    |
| Proportion of births by caesarean in ACT public hospitals                          | 29%     | 30%     | 1%    |
| <b>Emergency Department Activity</b>                                               |         |         |       |
| <b>Timeliness by triage category</b>                                               |         |         |       |
| Category 1 Seen (immediate – 2 mins)                                               | 99%     | 100%    | 1%    |
| Category 2 Seen (within 10 mins)                                                   | 82%     | 77%     | -5%   |
| Category 3 Seen (within 30 mins)                                                   | 43%     | 43%     | 0%    |
| Category 4 Seen (within 60 mins)                                                   | 50%     | 44%     | -6%   |
| Category 5 Seen (within 120 mins)                                                  | 81%     | 80%     | -1%   |
| Total Emergency Department Presentations                                           | 31,020  | 32,724  | 5%    |
| Did Not Waits                                                                      | 7%      | 7%      | 0%    |
| Admissions via Emergency department                                                | 8,583   | 9,018   | 5%    |
| Admissions to Emergency Department observational wards                             | 3,493   | 3,318   | -5%   |
| Admissions from the Emergency Department to ICU, Surgery, and general wards        | 5,090   | 5,700   | 12%   |
| <b>Walk-in-Centre</b>                                                              |         |         |       |
| Total presentations (Tuggeranong)                                                  |         | 5,521   |       |
| Total presentations (Belconnen)                                                    |         | 3,733   |       |

\*\*CH&HS WIC closed in June 2014 when the 2 new WIC's opened in Tuggeranong & Belconnen

| ACT Health                                                                       |         |         |         |
|----------------------------------------------------------------------------------|---------|---------|---------|
| Selected ACT Public hospitals and Community Activity Indicators                  |         |         |         |
| July to September                                                                |         |         |         |
|                                                                                  | 2013-14 | 2014-15 | % VAR   |
| <b>Elective Surgery</b>                                                          |         |         |         |
| Additions to the public hospital elective surgery waiting list                   | 3,613   | 3,729   | 3%      |
| Numbers of people on the elective surgery waiting list                           | 3,959   | 4,231   | 7%      |
| Removals from the list for surgery                                               | 2,965   | 3,156   | 6%      |
| Removals from the list for other reasons                                         | 550     | 501     | -9%     |
| Patients on the list recorded as "not ready for care"                            | 1,081   | 838     | -22%    |
| Hospital Initiated Postponements                                                 | 6.9%    | 6.5%    | -0.4%   |
| <b>Elective surgery median waiting time to care by urgency category</b>          |         |         |         |
| Category one patients (admission required within 30 days)                        | 15      | 14      | -1 days |
| Category two patients (admission desirable within 90 days)                       | 60      | 57      | -3 days |
| Category three patients (admission desirable within 365 days)                    | 156     | 153     | -3 days |
| <b>Medical Services</b>                                                          |         |         |         |
| <b>Elective endoscopies</b>                                                      |         |         |         |
| Number of elective endoscopies performed                                         | 863     | 827     | -4%     |
| Number of patients waiting for an endoscopy procedure                            | 1,552   | 2,110   | 36%     |
| <b>Medical Endoscopy median waiting time to care by patient urgency category</b> |         |         |         |
| Category one patients (admission required within 30 days)                        | 21      | 28      | 7 days  |
| Category two patients (admission desirable within 90 days)                       | 105     | 131     | 26 days |
| Category three patients (admission desirable within 365 days)                    | 282     | 348     | 66 days |

| ACT Health                                                                           |         |         |         |
|--------------------------------------------------------------------------------------|---------|---------|---------|
| Selected ACT Public hospitals and Community Activity Indicators                      |         |         |         |
| July to September                                                                    |         |         |         |
|                                                                                      | 2013-14 | 2014-15 | % VAR   |
| <b>Elective Cardiology</b>                                                           |         |         |         |
| Number of elective cardiology procedures performed                                   | 297     | 281     | -5%     |
| Median waiting time to an interventional cardiology procedure in days                | 23      | 20      | -3 days |
| <b>Breast screens</b>                                                                |         |         |         |
| Total breast screens performed for ACT residents                                     | 4,254   | 4,065   | -4%     |
| Number of breast screens for women aged 50-69                                        | 3,389   | 2,757   | -19%    |
| Participation rate of breast screens for ACT women aged 50-69                        | 55%     | 55%     | 0%      |
| <b>Cervical Cytology</b>                                                             |         |         |         |
| Additions to the Cervical Cytology Register                                          | 9,315   | 8,928   | -4%     |
| <b>Mental Health</b>                                                                 |         |         |         |
| <b>Community Services by Group</b>                                                   |         |         |         |
| ACT wide mental health program community service contacts                            | 25,501  | 26,520  | 4%      |
| Children and youth mental health program community service contacts                  | 15,144  | 16,867  | 11%     |
| Adult mental health program community service contacts                               | 28,712  | 30,804  | 7%      |
| Justice Health Services and community contacts                                       | 25,150  | 26,553  | 6%      |
| Alcohol and Drug Services community contacts                                         | 14,470  | 16,611  | 15%     |
| <b>Dental Services</b>                                                               |         |         |         |
| Mean waiting time (in months) for persons on the Centralised Waiting and Recall List | 7.4     | 3.1     | -4.3    |
| Proportion of urgent patients seen with standard waiting times                       | 100%    | 100%    | 0%      |



## Glossary

| Emergency department        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Triage category</b>      | <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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>Target waiting times</b> | <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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>Access block</b>         | <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            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Urgency category</b>     | <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> |
| <b>Median waiting time</b>  | <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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

| <b>Waiting times</b>                                     | <p>The proportion of patients admitted for surgery within a given period who are admitted within standard waiting times for their condition.</p>                                                                                |
|----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Removals for surgery</b>                              | <p>The number of people, in a given period, who are removed from the ACT public hospitals elective surgery waiting list for surgery.</p>                                                                                        |
| <b>Patients waiting longer than one year for surgery</b> | <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>                                       |
| <b>Long wait patients accessing elective surgery</b>     | <p>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.</p> |
| <b>Hospital initiated postponements</b>                  | <p>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.).</p> |
| Endoscopy                                                |                                                                                                                                                                                                                                 |
| <b>Urgency category</b>                                  | <p>See entry for elective surgery.</p>                                                                                                                                                                                          |
| <b>Median waiting time</b>                               | <p>See entry for elective surgery.</p>                                                                                                                                                                                          |

| Dental services                 |                                                                                                                                                                                                                            |
|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Waiting times (urgent)</b>   | <p>The proportion of dental health program clients assessed as in need of emergency services who receive care within 24 hours of a request.</p>                                                                            |
| <b>Waiting times (general)</b>  | <p>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.</p> |
| Radiotherapy                    |                                                                                                                                                                                                                            |
| <b>Waiting times (urgent)</b>   | <p>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.</p>                                                 |
| <b>Waiting times (general)</b>  | <p>The proportion of all new radiotherapy patients who are provided with treatment within 28 days of a request.</p>                                                                                                        |
| Breast screening                |                                                                                                                                                                                                                            |
| <b>Wait time to assessment</b>  | <p>The proportion of women requiring assessment who wait 28 days or less from their breast screen appointment to their assessment appointment.</p>                                                                         |
| <b>Wait time to appointment</b> | <p>The proportion of women who wait 28 days or less from their appointment date to the date of their breast screen.</p>                                                                                                    |
| <b>Number of screens</b>        | <p>Number of ACT women who are provided with breast screens within a given period.</p>                                                                                                                                     |
| <b>Participation rate</b>       | <p>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.</p>                                        |

## Glossary (continued)

|                                                  |  |                                                  |                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                     |                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------|--|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Bed usage</b>                                 |  | <b>Occupancy rate</b>                            | The actual bed days (measured as the sum of all inpatient bed minutes) attributed to the month the activity actually occurred divided by the number of funded beds available during the same period. | <b>Clients seen within seven days post discharge from hospital</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | The proportion of clients seen at or contacted by an ACT Health community facility during the seven days post-discharge from the inpatient service.                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Patient days</b> | 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). |
| <b>Patient safety</b>                            |  |                                                  | <b>Unplanned return to Hospital within 28 days</b>                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <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> |                     | <b>Consumer and carer representation</b>                                                                                                                                                                                                                                                                                                                                        |
| <b>Unplanned return to the operating theatre</b> |  | <b>Unplanned return to the operating theatre</b> |                                                                                                                                                                                                      | 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.                                                                                                                                                                                                                                                                                                                                                                  | <b>Immunisation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                     |                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Hospital acquired infection rate</b>          |  |                                                  | <b>Hospital acquired infection rate</b>                                                                                                                                                              | 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.                                                                                                                                                                                                                                                                                                                                                  | <b>Childhood immunisations</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                     | <b>Day of surgery rate</b>                                                                                                                                                                                                                                                                                                                                                      |
| <b>Mental health</b>                             |  | <b>Use of seclusion</b>                          |                                                                                                                                                                                                      | The proportion of patients who are separated from a psychiatric inpatient unit who were subject to seclusion during their inpatient episode.                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Inpatient separations (Admitted patients)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Use of seclusion</b>                          |  |                                                  | <b>Cost weighted separations</b>                                                                                                                                                                     | 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. | <b>NSW separations</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     | <b>Caesarean births</b>                                                                                                                                                                                                                                                                                                                                                         |
| <b>NSW separations</b>                           |  | <b>Community services</b>                        |                                                                                                                                                                                                      | The proportion of patients separated from ACT public hospitals whose residential address is in NSW.                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Mental health</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                     |                                                                                                                                                                                                                                                                                                                                                                                 |