

ACT Public Health Services Quarterly Performance Report

January to March 2022



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ACT Health

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About the Quarterly Performance Report

This report provides information about how our public health system is performing. The report includes information on the following services:

- Community-based care
 - Walk-in Centres
- Hospital-based care
 - Emergency Departments, surgery, admitted patients

Comparisons between years for the Quarterly Performance Reports should be undertaken with caution due to unprecedented health events that have occurred since 2019.

Of most significance has been the impact of COVID-19, which the ACT health system moved swiftly to address. The outbreaks in March 2020, August 2021 and since late December 2021, have had a significant impact on the way that our health system has had to operate and the demand for certain services. Walk-in Centre and Community Health Centre staff and sites have been redeployed to focus on COVID-19 testing. There was a suspension of all non-essential surgeries across the ACT in March/April 2020 and again at Calvary Public Hospital Bruce in January to February 2022. The ACT Government delivered a record number of surgeries in 2020-21 as part of the COVID-19 recovery project and has committed to delivering 60,000 elective surgeries over the four years from 2021-22. In Quarter 3, 2021-22, Calvary Public Hospital Bruce commenced a subcontracting arrangement with Calvary Bruce Private Hospital to increase surgery completions.

Improving timely, safe and sustainable care across the ACT is a key priority for the ACT Government. We aim to be the safest health care system in Australia, delivering high quality, patient-centred care for Canberrans.

Data management is integral to running an informed hospital and health care system that is accountable, transparent and responsive. It is also key to improving health service performance to ensure better access to timely, safe and sustainable care, a key focus for the community and the ACT Government.

Each quarterly report provides a snapshot of the latest available health activity and performance information as at the date of reporting.

The report covers activity at three public hospitals in the ACT: the Canberra Hospital, Calvary Public Hospital Bruce and the University of Canberra Hospital.

Due to the nature of health data and the reliance on coding, validation and quality assurance of clinical information, there may be slight variations in the numbers presented for the same quarter in the previous or a subsequent quarterly report.

It is standard practice in the sector for data to reflect the most up-to-date information, and for revised data to be submitted in reporting cycles; it is a practice that is acknowledged by the Australian Institute of Health and Welfare, the Independent Hospital Pricing Authority, and the National Health Funding Body.

For these reasons, there may also be slight differences between data reported in the annual report and the numbers presented across quarterly reports, respectively, for the same year.

The ACT Health Directorate is pleased to provide this report that gives the community a snapshot of our health system each quarter.

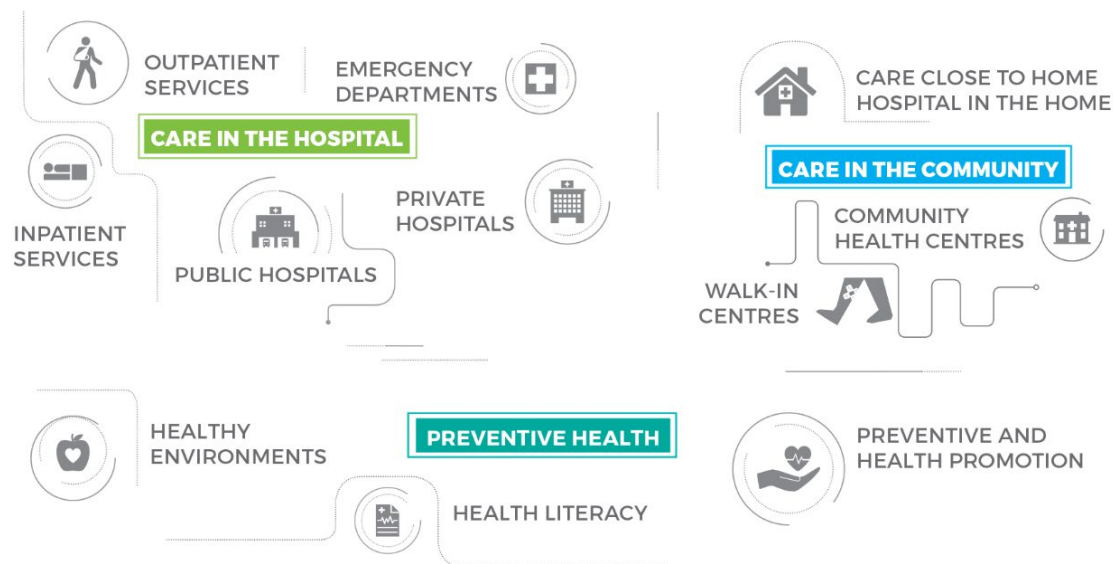
Due to difference in size, peer group and the nature of services provided at each hospital, direct comparison may not be valid.

Health care in Canberra

The ACT public health system responds in a balanced way to Canberrans' needs by improving the health status of individuals and families.

The ACT's public health system works across primary, tertiary and community care.

Clinical activities in the ACT are provided by ACT Government funded providers including Canberra Health Services, Calvary Public Hospital Bruce and non-government organisations.



Public Health Services

- Admitted and non-admitted
- Breast screening
- Cancer counselling
- Children's health
- Community health care
- Dental
- Emergency services
- Mental health
- Nutrition
- Pathology
- Pregnancy, newborn and early childhood
- Rehabilitation and related services
- Social work
- Subacute and non-acute
- Walk-in Centres

ACT public health services receive very positive feedback on the care they provide.

During Quarter 3, 2021-22, the Inpatient experience survey of patients at Canberra Health Services found:

 **87.1%**

of patients would recommend the Canberra Health Services to family and friends.

 **81.8%**

of patients rated their care as good or very good.

During Quarter 3, 2021-22, the inpatient experience survey of patients at Calvary Public Hospital Bruce found:

 **94.0%**

of patients who responded reported a positive experience and were satisfied with the care provided.

These results demonstrate the quality of care in the ACT's public health system and are testament to staff working to provide care 24 hours a day, 7 days a week. However, we can always find areas to improve, and meaningful consumer data and feedback are key to this.

New central service to help people with eating disorders

The ACT Eating Disorders Clinical Hub opened in January 2022 as a central referral point for ACT public eating disorder services and as a way to refocus eating disorder management away from acute inpatient treatment towards a more flexible, appropriate, and efficient treatment approach.

The new clinical hub provides a central intake point so people can be referred to services that best support their needs and to help manage their condition.

The hub supports a range of coordinated eating disorder services for children, adolescents, and adults and works closely with service providers in the territory, with the aim of supporting consistent information about referral pathways, care escalation and treatment options, including hospital-based services and outreach programs.

Coordination of resources, services and expertise in eating disorders across the ACT means people experiencing or impacted by eating disorders will have better access to support, including assessment, treatments options, advice, education, training, services and referrals.

The hub provides assessment, coordination, and service support rather than directly providing treatment or an ongoing therapy service. It also offers advice, consultation, networking, and support for clinicians working with people who have eating disorders.

The service is made up of multi-disciplinary mental health professionals who work within a recovery and person-centred framework. During the intake and assessment process for the Hub, clients will have access to a trained clinician who will help determine the best services for their individual circumstances. Staff will assist the clients in accessing the appropriate services to best help them with their recovery.

For more details, visit the website: www.health.act.gov.au/services-and-programs/mental-health/eating-disorders-clinical-hub

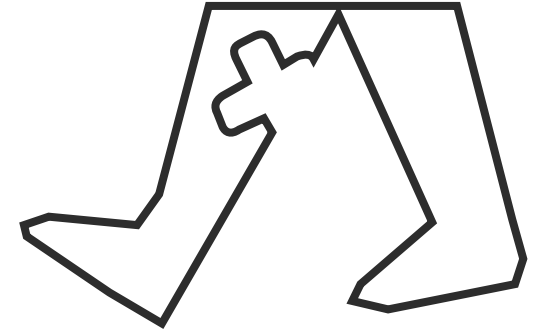
People can contact the hub via phone on 02 5124 4326 or by emailing chs.eatingdisordersclinicalhub@act.gov.au

ACT Health and Canberra Health Services staff from the ACT Eating Disorders Clinical Hub



From left to right: Jessica Miko (Assistant Director), Kelly Sheard (Dietician), Alex Cobb (Service Coordinator) and Kathryn Bell (Service Coordinator)

Walk-in Centres and COVID-19 Testing Centres



Nurse-led Walk-in Centres provide free efficient access to treatment and health advice for one-off, non-urgent injuries and illness. Patients requiring urgent attention for serious injury or illness are directed to Emergency Departments.

- ✦ Walk-in Centre presentations increased by 13.6% in Quarter 3, 2021-22 compared to Quarter 2, 2021-22.
- ✦ Presentations at ACT Government COVID-19 Testing Centres decreased by 37.2% from Quarter 2, 2021-22 to 99,590 in Quarter 3, 2021-22.
- ✦ 83.3% of presentations received treatment at the Walk-in Centres, while 7.1% of presentations were redirected to an Emergency Department.

Walk-in Centres and ACT Government COVID-19 Testing Centres

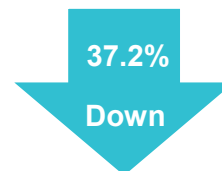


All Walk-in Centres (WiC) are led by a team of highly skilled advanced practice nurses and nurse practitioners with extensive experience in treating people with minor injuries and illnesses. During Quarter 3, 2021-22, there were six Walk-in Centres operated across the ACT, including a dedicated COVID-19 clinic at Garran Surge Centre that opened in January 2022. The Inner North Walk-in Centre was temporarily closed on 9 January to focus resources on the COVID-19 clinic.

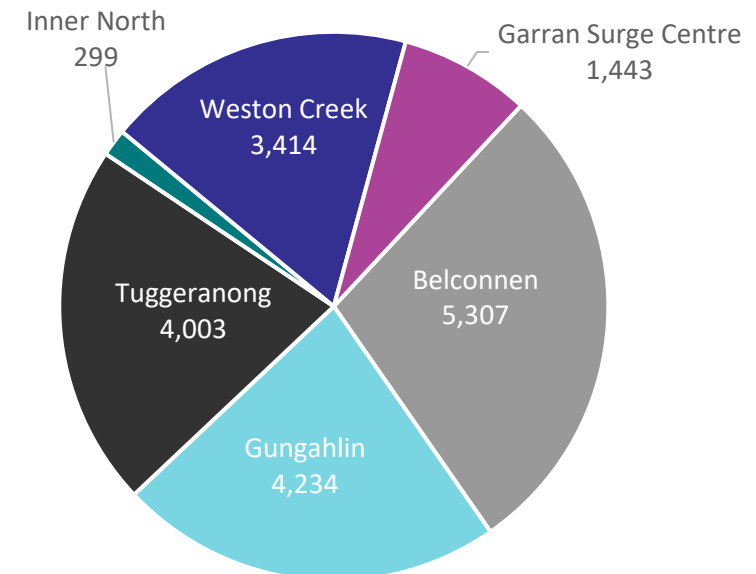
During Quarter 3 2021-22, PCR COVID-19 testing decreased significantly at ACT Government-operated testing clinics. This was due to a national shortage of the testing reagent from 14-25 January, the increasing availability of Rapid Antigen Tests to the public throughout the quarter, and decreases in demand due to changes in other jurisdictions' border restrictions. The ACT Government also distributed over 53,000 RATs through its COVID-19 testing clinics during the quarter, most of these during the reagent shortage.



Walk-in-Centre presentations
(2,232 more than Quarter 2, 2021-22)
















ACT Government COVID-19 Testing
Centre presentations



Walk-in Centre presentations by
location

Walk-in Centre and ACT Government COVID-19 Testing Centres

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Walk-in Centre				
Presentations				
Belconnen	5,307	4,174	27.1%	
Gungahlin	4,234	3,395	24.7%	
Tuggeranong	4,003	3,524	13.6%	
Weston Creek	3,414	2,678	27.5%	
Inner North	299	2,697	-88.9%	
Garran Surge Centre	1,443	-	100%	
ACT Total	18,700	16,468	13.6%	
COVID-19 Testing Centres				
Presentations				
Weston Creek	-	-	-	
EPIC Respiratory Centre	-	72,302	- 100%	
Surge Centre – Garran	51,304	68,606	-25.2%	
Mitchell Testing Centre	48,286	17,684	173.0%	
Airport	-	1	-	
ACT Total	99,590	158,594	-37.2%	

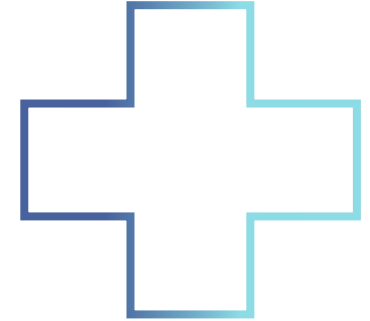
Note: The Inner North WiC temporarily closed on 9 January 2022. A COVID testing site at Exhibition Park was established in August 2021 to meet the increased demand and closed on 17 December 2021. A new testing site opened in Mitchell on 18 December 2021 to allow EPIC to resume normal operations. A dedicated COVID-19 Clinic at the Garran Surge Centre temporarily opened on 10 Jan 2022 for people who have tested positive for COVID-19 and need non-urgent care. West Belconnen Centre, Kambah Drive through Clinic and Roaming COVID-19 Clinics have been removed from the above data table due to no data being reported in the preceding three reporting periods. Kambah Drive through Clinic is being operated by a private pathology provider on behalf of ACT Government.

Walk-in Centre Performance

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Walk-in Centre Performance				
Median wait time to treatment (minutes)				
Belconnen	21	7	200.0%	
Gungahlin	15	12	25.0%	
Tuggeranong	20	14	42.9%	
Inner North	17	7	142.9%	
Weston Creek	8	4	100.0%	
ACT Total	15	8	87.5%	
Treatment provided at the Walk-in Centre				
Belconnen	84.0%	85.0%	-1.0	
Gungahlin	83.9%	83.3%	0.6	
Tuggeranong	78.2%	79.5%	-1.3	
Inner North	84.9%	83.1%	1.8	
Weston Creek	86.0%	84.6%	1.4	
ACT Total	83.3%	83.1%	0.2	
Redirected to Emergency Department				
Belconnen	6.2%	5.8%	0.4	
Gungahlin	5.7%	7.1%	-1.4	
Tuggeranong	10.3%	11.3%	-1.0	
Inner North	4.3%	6.8%	-2.5	
Weston Creek	6.0%	8.7%	-2.7	
ACT Total	7.1%	7.9%	-0.8	

Note: All dedicated COVID-19 Testing Centres have been excluded from the above Performance metrics. Garran Surge Centre has not been listed as a separate facility under WIC Performance, but its activity is included in the ACT Totals.

Emergency Department



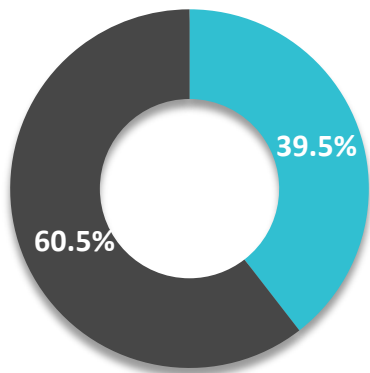
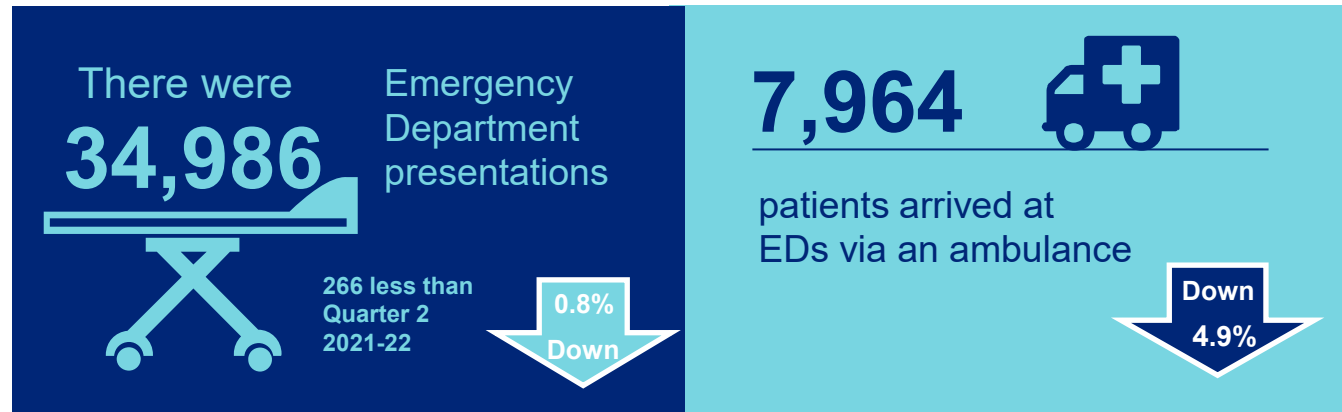
ACT public hospital Emergency Departments (EDs) are open to everyone, providing triage, assessment and treatment for patients suffering from a range of medical conditions as well as providing life-saving care for acutely unwell patients.

-
- ✦ There were 34,986 presentations to EDs in Quarter 3, 2021-22.
 - ✦ 52.1% of patients received treatment within the clinically recommended time for their urgency (triage) category.
 - ✦ 53.3% of patients spent four hours or less in EDs.
-



Emergency Departments (EDs)

EDs often act as an entry point to admitted patient services. All results in this page are presented as ACT public hospital EDs and are a combination of activity from Canberra Hospital ED and Calvary Public Hospital Bruce ED.



■ Calvary Public Hospital Bruce ■ Canberra Hospital












Emergency Department presentations by public hospitals	
Canberra Hospital:	21,162
Calvary Public Hospital Bruce:	13,824

Emergency Department Activity – ACT Total










	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total ED presentations	34,986	35,253	-0.8%	
Resuscitation, Triage Category 1	172	198	-13.1%	
Emergency, Triage Category 2	4,189	4,259	-1.6%	
Urgent, Triage Category 3	13,742	13,737	0.0%	
Semi-urgent, Triage Category 4	13,368	13,447	-0.6%	
Non-urgent, Triage Category 5	3,515	3,611	-2.7%	
Admissions to hospitals from EDs	10,302	11,528	-10.6%	
Patients treated and discharged home	21,461	21,051	1.9%	
Arrivals at ED by ambulance	7,964	8,370	-4.9%	

Note: Total ED presentations for Quarter 2, 2021-22 includes 1 presentation with no triage category. Reduction in admissions to hospitals from EDs is partially attributable to changes in ward utilisation at CPHB in response to the COVID-19 pandemic.

Emergency Department Activity – Canberra Hospital













	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total ED presentations	21,162	21,255	-0.4%	
Resuscitation, Triage Category 1	120	138	-13.0%	
Emergency, Triage Category 2	2,562	2,661	-3.7%	
Urgent, Triage Category 3	6,987	6,688	4.5%	
Semi-urgent, Triage Category 4	8,717	8,803	-1.0%	
Non-urgent, Triage Category 5	2,776	2,965	-6.4%	
Admissions to hospitals from EDs	8,399	8,354	0.5%	
Patients treated and discharged home	11,325	11,910	-4.9%	
Arrivals at ED by ambulance	5,315	5,562	-4.4%	

Emergency Department Activity – Calvary Public Hospital Bruce

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total ED presentations	13,824	13,998	-1.2%	
Resuscitation, Triage Category 1	52	60	-13.3%	
Emergency, Triage Category 2	1,627	1,598	1.8%	
Urgent, Triage Category 3	6,755	7,049	-4.2%	
Semi-urgent, Triage Category 4	4,651	4,644	0.2%	
Non-urgent, Triage Category 5	739	646	14.4%	
Admissions to hospitals from EDs	1,903	3,174	-40.0%	
Patients treated and discharged home	10,136	9,141	10.9%	
Arrivals at ED by ambulance	2,649	2,808	-5.7%	

Note: Total ED presentations for Quarter 2, 2021-22 includes 1 presentation with no triage category. The short stay unit (SSU) at CPHB has periodically been used as a COVID-19 ED Red Zone area, resulting in fewer admissions being possible to the SSU. Additionally in this period, non-essential surgery was suspended at CPHB due to COVID-19 during January and February.

Emergency Department Performance – ACT Total













	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Patients starting treatment on time by triage category				
All Categories	52.1%	52.9%	-0.8	
Resuscitation, Triage Category 1	100.0%	100.0%	0.0	
Emergency, Triage Category 2	74.1%	73.2%	0.9	
Urgent, Triage Category 3	39.8%	40.0%	-0.2	
Semi-urgent, Triage Category 4	51.1%	51.5%	-0.4	
Non-urgent, Triage Category 5	75.6%	81.1%	-5.5	
Patients leaving the ED within four hours of presentation				
	53.3%	56.9%	-3.6	
Patients who did not wait to be seen				
	5.7%	4.3%	1.4	
Median wait time to treatment (minutes) in ED by triage category				
Resuscitation, Triage Category 1	0	0	-	
Emergency, Triage Category 2	6	7	-14.3%	
Urgent, Triage Category 3	46	45	2.2%	
Semi-urgent, Triage Category 4	58	58	0.0%	
Non-urgent, Triage Category 5	56	51	9.8%	

Note: Total ED presentations for Quarter 2, 2021-22 includes 1 presentation with no triage category.

Emergency Department Performance – Canberra Hospital

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Patients starting treatment on time by triage category				
All Categories	50.7%	53.6%	-2.9	
Resuscitation, Triage Category 1	100.0%	100.0%	0.0	
Emergency, Triage Category 2	79.0%	76.7%	2.3	
Urgent, Triage Category 3	36.1%	37.0%	-0.9	
Semi-urgent, Triage Category 4	46.3%	49.5%	-3.2	
Non-urgent, Triage Category 5	72.7%	80.5%	-7.8	
Patients leaving the ED within four hours of presentation	55.1%	58.7%	-3.6	
Patients who did not wait to be seen	5.9%	3.8%	2.1	
Median wait time to treatment (minutes) in ED by triage category				
Resuscitation, Triage Category 1	0	0	-	
Emergency, Triage Category 2	6	7	-14.3%	
Urgent, Triage Category 3	51	49	4.1%	
Semi-urgent, Triage Category 4	68	61	11.5%	
Non-urgent, Triage Category 5	65	54	20.4%	

Emergency Department Performance – Calvary Public Hospital Bruce

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Patients starting treatment on time by triage category				
All Categories	54.3%	51.9%	2.4	
Resuscitation, Triage Category 1	100.0%	100.0%	0.0	
Emergency, Triage Category 2	66.3%	67.4%	-1.1	
Urgent, Triage Category 3	43.7%	42.9%	0.8	
Semi-urgent, Triage Category 4	60.3%	55.4%	4.9	
Non-urgent, Triage Category 5	86.3%	84.1%	2.2	
Patients leaving the ED within four hours of presentation	50.5%	54.0%	-3.5	
Patients who did not wait to be seen	5.4%	5.1%	0.3	
Median wait time to treatment (minutes) in ED by triage category				
Resuscitation, Triage Category 1	0	0	-	
Emergency, Triage Category 2	7	7	0.0%	
Urgent, Triage Category 3	40	42	-4.8%	
Semi-urgent, Triage Category 4	44	52	-15.4%	
Non-urgent, Triage Category 5	34	37	-8.1%	

Note: Total ED presentations for Quarter 2, 2021-22 includes 1 presentation with no triage category



Admitted Patient Care

The ACT has some of the nation's highest quality health care services and facilities, including three public hospitals.

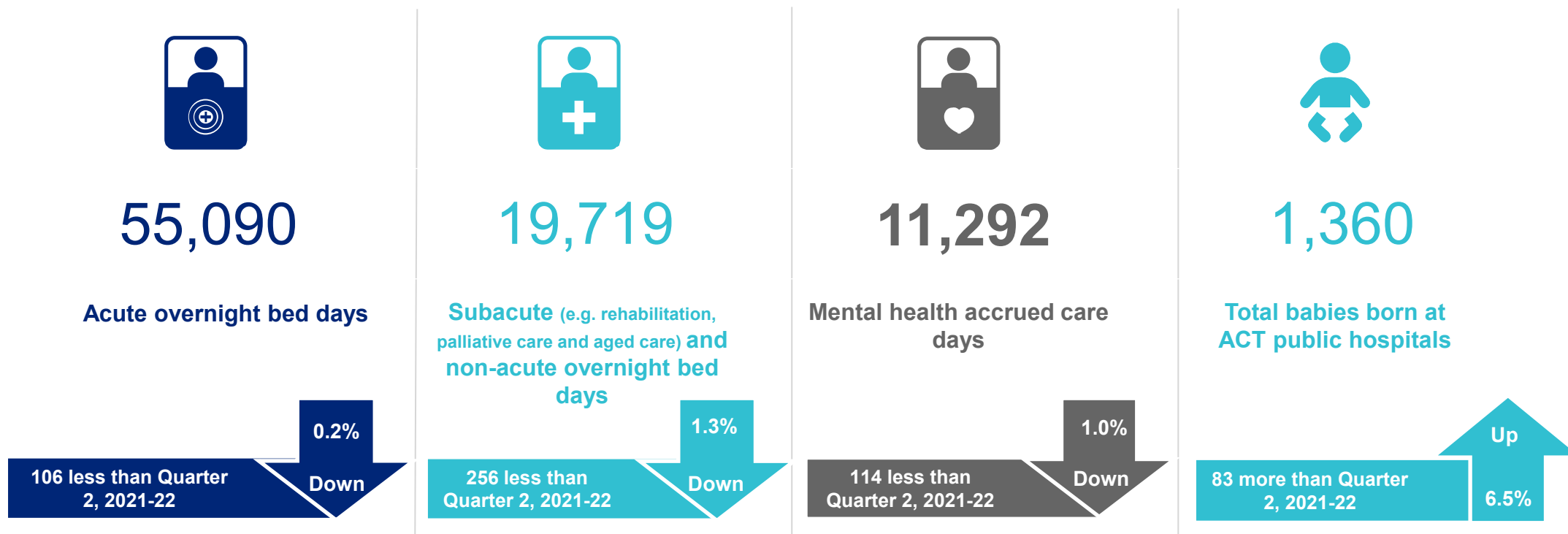
Admitted patients are patients who are admitted to a hospital for care. This does not include Emergency Department patients, outpatients or other non-admitted patients treated on the hospital site.

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- ✦ 1,360 babies were born at ACT public hospitals in Quarter 3, 2021-22 6.5% more than Quarter 2, 2021-22.
 - ✦ 99,371 bed days of patient care were provided.
 - ✦ Overnight patients stayed in hospital for an average of 6.7 days.
-

Admitted Patient Care Summary








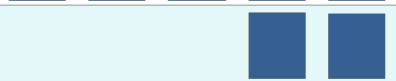




The ACT has three public hospitals, each providing a different mix of admitted patient services. Canberra Hospital is a tertiary referral hospital, Calvary Public Hospital Bruce is a public acute care hospital and the University of Canberra Hospital is a public rehabilitation and subacute hospital.










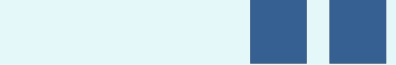


Note: Mental health accrued care days methodology was introduced from Q2 2021-22. Previously this measure was recorded as the total overnight bed days. Refer to the Technical supplementary information for further details.

Admitted Patient Care Activity – ACT Total

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total admitted patient episodes of care at ACT public hospitals	27,651	30,102	-8.1%	
Same-day episodes (including day surgeries)	15,071	16,261	-7.3%	
Overnight episodes	12,580	13,841	-9.1%	
Total bed days of care at ACT public hospitals	99,371	102,919	-3.4%	
Total overnight bed days of care	84,300	86,658	-2.7%	
Acute overnight bed days of care	55,090	55,196	-0.2%	
Subacute and non-acute overnight bed days of care	19,719	19,975	-1.3%	
Mental health accrued care days	11,292	11,406	-1.0%	
Total babies born at ACT public hospitals	1,360	1,277	6.5%	
Number of caesarean section procedures	512	476	7.6%	











Note: Mental health accrued care days methodology was introduced from Q2 2021-22. Previously this measure was recorded as the total mental health overnight bed days of care. Due to this change in reporting, the Total of overnight bed days does not equal the sum of its subcategories. Refer to the Technical supplementary information for further details.

Admitted Patient Care Activity – Canberra Hospital

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total admitted patient episodes of care	21,916	22,734	-3.6%	
Same-day episodes (including day surgeries)	12,740	12,875	-1.0%	
Overnight episodes	9,176	9,859	-6.9%	
Total bed days of care	67,761	70,242	-3.5%	
Total overnight bed days of care	55,021	57,367	-4.1%	
Acute overnight bed days of care	41,821	41,388	1.0%	
Subacute and non-acute overnight bed days of care	8,177	7,926	3.2%	
Mental health accrued care days	6,993	7,030	-0.5%	
Total babies born	883	878	0.6%	
Number of caesarean section procedures	345	334	3.3%	








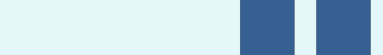
Note: Mental health accrued care days methodology was introduced from Q2 2021-22. Previously this measure was recorded as the total mental health overnight bed days of care. Due to this change in reporting, the Total of overnight bed days does not equal the sum of its subcategories. Refer to the Technical supplementary information for further details.

Admitted Patient Care Activity – Calvary Public Hospital Bruce

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total admitted patient episodes of care	5,436	6,965	-22.0%	
Same-day episodes (including day surgeries)	2,312	3,306	-30.1%	
Overnight episodes	3,124	3,659	-14.6%	
Total bed days of care	21,093	22,214	-5.0%	
Total overnight bed days of care	18,781	18,908	-0.7%	
Acute overnight bed days of care	13,141	13,716	-4.2%	
Subacute and non-acute overnight bed days of care	2,871	2,784	3.1%	
Mental health accrued care days	2,520	2,691	-6.4%	
Total babies born	477	399	19.5%	
Number of caesarean section procedures	167	142	17.6%	





Note: Mental health accrued care days methodology was introduced from Q2 2021-22. Previously this measure was recorded as the total mental health overnight bed days of care. Due to this change in reporting, the Total of overnight bed days does not equal the sum of its subcategories. Refer to the Technical supplementary information for further details. The short stay unit (SSU) at CPHB has periodically been used as a COVID-19 ED Red Zone area, resulting in fewer admissions being possible to the SSU. Additionally in this period, non-essential surgery (including category 2 and 3) was suspended at CPHB due to COVID-19 during January and February.

Admitted Patient Care Activity – University of Canberra Hospital





	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total admitted patient episodes of care	299	403	-25.8%	
Same-day episodes	19	80	-76.3%	
Overnight episodes	280	323	-13.3%	
Total bed days of care	10,517	10,463	0.5%	
Total overnight bed days of care	10,498	10,383	1.1%	
Acute overnight bed days of care	128	92	39.9%	
Subacute and non-acute overnight bed days of care	8,671	9,230	-6.4%	
Mental health accrued care days ^(a)	1,779	1,685	5.6%	

(a) Mental health accrued care days methodology was introduced from Q2 2021-22. Previously this measure was recorded as the total mental health overnight bed days of care. Due to this change in reporting, the Total of overnight bed days does not equal the sum of its subcategories. Refer to the Technical supplementary information for further details.





Admitted Patient Care Performance – ACT Total

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total average length of stay (ALOS) for overnight patients at ACT public hospitals by care type (in days)	6.7	6.3	6.3%	
Acute ALOS	5	4.6	8.7%	
Subacute and non-acute ALOS	20.1	17.4	15.5%	
Mental health ALOS	17.7	19.1	-7.3%	





Admitted Patient Care Performance – Canberra Hospital

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total average length of stay (ALOS) for overnight patients by care type (in days)	6.0	5.8	3.4%	
Acute ALOS	5.1	4.7	8.5%	
Subacute and non-acute ALOS	14.8	12.7	16.5%	
Mental health ALOS	12.5	17.6	-29.0%	

Admitted Patient Care Performance – Calvary Public Hospital Bruce

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total average length of stay (ALOS) for overnight patients by care type (in days)	6	5.2	15.4%	
Acute ALOS	4.7	4.2	11.9%	
Subacute and non-acute ALOS	15.9	11.8	34.7%	
Mental health ALOS	24.1	19.3	24.9%	

Admitted Patient Care Performance – University of Canberra Hospital

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total average length of stay (ALOS) for overnight patients by care type (in days)	37.5	32.1	16.8%	
Acute ALOS	9.8	7.1	38.0%	
Subacute and non-acute ALOS	35.1	31.6	11.1%	
Mental health ALOS	85.0	60.4	40.7%	



Elective Surgery

Public elective surgery is provided at Canberra Hospital, Calvary Public Hospital Bruce and a number of private provider facilities in the ACT under contract with Canberra Health Services.

- ✦ During Quarter 3, 2021-22, there were 3,063 elective surgeries performed during a period where category 2 and 3 elective surgeries were suspended at Calvary Public Hospital Bruce (CPHB) due to COVID-19 from 10 January 2022 to 21 February 2022.

Elective Surgery



There are three main urgency categories for elective surgery: urgent, semi-urgent and non-urgent. The urgency category is determined by the surgeon and is based on clinical criteria. While the Canberra Hospital is the major tertiary referral centre for the region, both the Canberra Hospital and Calvary Public Hospital Bruce provide care to people from the ACT, the surrounding NSW region as well as other patients from interstate. The results below provide information on all public elective surgery performed in the ACT.



Total number of elective surgery procedures performed

3,063

Down

519 less than
Quarter 2, 2021-22

14.5%



Additions to the elective surgery waiting list

4,033

Down

242 less than
Quarter 2, 2021-22

5.7%



The number of overdue patients waiting for their elective surgery






1,299

Up

189 more than
Quarter 2, 2021-22






17.0%

Elective Surgery Activity – ACT Total

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total number of elective surgery procedures	3,063	3,582	-14.5%	
Urgent, Category 1 (within 30 days)	1,144	1,224	-6.5%	
Semi-urgent, Category 2 (within 90 days)	1,189	1,344	-11.5%	
Non-urgent, Category 3 (within 365 days)	730	1,014	-28.0%	
Number of patients removed from the elective surgery waiting list for reasons other than surgery ^(a)	797	637	25.1%	

(a) Patients may be removed from a particular hospital's elective surgery waiting list for a range of reasons including Patient no longer requiring treatment, received treatment elsewhere, or transferred to another hospital's waitlist.






Elective Surgery Activity – Canberra Hospital

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total number of elective surgery procedures ^(a)	1,761	1,980	-11.1%	
Urgent, Category 1 (within 30 days)	800	867	-7.7%	
Semi-urgent, Category 2 (within 90 days)	661	713	-7.3%	
Non-urgent, Category 3 (within 365 days)	300	400	-25.0%	
Number of patients removed from the elective surgery waiting list for reasons other than surgery ^(b)	394	295	33.6%	

(a) The number of elective surgeries reported against Canberra Hospital include public elective surgeries contracted to private hospitals.










(b) Patients may be removed from a particular hospital's elective surgery waiting list for a range of reasons including Patient no longer requiring treatment, received treatment elsewhere, or transferred to another hospital's waitlist.

Elective Surgery Activity – Calvary Public Hospital Bruce

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Total number of elective surgery procedures	1,302	1,602	-18.7%	
Urgent, Category 1 (within 30 days)	344	357	-3.6%	
Semi-urgent, Category 2 (within 90 days)	528	631	-16.3%	
Non-urgent, Category 3 (within 365 days)	430	614	-30.0%	
Number of patients removed from the elective surgery waiting list for reasons other than surgery ^(a)	403	342	17.8%	

(a) Patients may be removed from a particular hospital's elective surgery waiting list for a range of reasons including Patient no longer requiring treatment, received treatment elsewhere, or transferred to another hospital's waitlist.

Elective Surgery Performance – ACT Total

	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22	Last 5 quarters
Additions to the elective surgery waiting list	4,033	4,275	-5.7%	
Patients waiting for their elective surgery	5,825	5,461	6.7%	
Number of overdue patients waiting for their elective surgery	1,299	1,110	17.0%	
Elective surgery procedures performed within clinically recommended timeframes				
Urgent, Category 1 (within 30 days)	98.4%	99.1%	-0.7%	
Semi-urgent, Category 2 (within 90 days)	50.8%	56.5%	-5.7%	
Non-urgent, Category 3 (within 365 days)	80.5%	78.9%	1.6%	
Median wait times to surgery (days)				
Urgent, Category 1 (within 30 days)	15	14	7.1%	
Semi-urgent, Category 2 (within 90 days)	89	79	12.7%	
Non-urgent, Category 3 (within 365 days)	190	170	11.8%	



Quality and Safety

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

-
- ✦ Exceeded our targets for hand hygiene rates at Canberra Hospital.
 - ✦ Both public hospitals undertake hand hygiene audits three times per year.
 - ✦ The number of unplanned returns to theatre dropped by 12% from Quarter 3, 2021-22 compared to Quarter 2, 2021-22

Quality and Safety

	2021-22 Target *	Quarter 3, 2021-22	Quarter 2, 2021-22	Change from Quarter 2, 2021-22
Number of avoidable readmissions for selected conditions per 10,000 hospital admissions				
ACT	≤50	93.7	119.3	-21.5%
Number of unplanned return to theatre for selected surgical complications per 10,000 hospital admissions				
ACT	≤20	7.4	8.4	-11.9%
Number of patients per 10,000 occupied bed days who acquired a <i>Staphylococcus aureus</i> bacteraemia infection (SAB infection)				
	(per 10,000 occupied bed days)	(per 10,000 occupied bed days)		
Canberra Health Services	<2	1.8	1.7	5.9%
Calvary Public Hospital Bruce	<2	1.6	1.7	-5.9%
	2021-22 Target *	Mar 2022 Audit	Oct 2021 Audit	June-July 2021 Audit
Estimated Hand Hygiene Rate				
Canberra Health Services ^(a)	80%	84.0%	84.0%	82.0%
Calvary Public Hospital Bruce ^(b)	>80%	78.6%	78%	n/a

N/A: Not available.

(a) Hand hygiene audits at Canberra Health Services are undertaken three times per year in October, March and June.

(b) Hand hygiene audits at Calvary Public Hospital Bruce are undertaken three times per year in July, October and March. Double auditing will occur in October to account for missed audit in July 2021.

* 2021-22 targets reflect the ACT Budget 2021-22 Budget Statements C for ACT Health Directorate

Future Direction

The ACT Health Directorate is undertaking work to refresh the publication of data for patients, practitioners and the ACT community to ensure we continue to improve the availability and usefulness of information about our health system. The new quarterly reporting framework will provide key information about the delivery of ACT public health services. This will mean the local community can access important and relevant data about how timely, safe and sustainable care is being delivered.

Although this work is still in progress, it is vital to ensure Canberrans have timely access to information about our health services.

This quarterly performance report presents up-to-date information about the activity and performance of our health services. As the ACT Health Directorate learns more about what information patients, consumers and the ACT community require, the quarterly reports will evolve to meet those expectations.

The ACT Health Directorate provides data for over 130 publicly reported performance indicators, which are published in a variety of different reports by multiple organisations. To ensure Canberrans always have access to information about our health services, a consolidated list of all publicly reported metrics can be found on the ACT Health Directorate website at <https://www.health.act.gov.au/about-our-health-system/data-and-publications/act-health-system-wide-data>.

Further information about this report, including definitions, can be found on the ACT Health Directorate website at: <https://www.health.act.gov.au/about-our-health-system/data-and-publications/reports/act-public-health-services-quarterly>.