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.

The current report presents Quarter 4, 2022-23 data for select ED metrics. In interpreting the results, please note the following:
- ED patients requiring resuscitation are attended to immediately by the clinical teams at the time of presentation in the ED. Data available reflects the time the clinical care is recorded in the Digital Health Record (DHR). This is important to note, specifically in relation to the proportion of patients treated for resuscitation within clinically recommended timeframes.
- This data reflects submissions to Commonwealth agencies and statutory authorities and will not change in the future.

ACT Total

Data Highlights

In Quarter 4, 2022-23:
- there were 37,058 ED presentations in ACT public hospitals
- 59.8% of patients started ED treatment on time, and
- 53.8% of patients departed EDs within four hours of presentation.

The tables below present territory-wide monthly data on ED presentation, seen on time and four hour rule for Quarter 4, 2022-23.

ED Presentations, by month and triage category

Triage category	April 2023	May 2023	June 2023
All	12,047	12,766	12,245
Resuscitation	82	88	93
Emergency	1,618	1,767	1,603
Urgent	5,114	5,531	5,290
Semi-urgent	4,256	4,457	4,355
Non-urgent	977	923	904

Patients starting treatment on time (%), by month and triage category

Triage category	April 2023	May 2023	June 2023
All	61.8	58.0	59.7
Resuscitation	96.3	98.9	94.6
Emergency	72.3	69.7	70.1
Urgent	50.8	47.6	48.9
Semi-urgent	65.6	60.2	63.0
Non-urgent	84.4	84.6	85.5

Patients leaving the ED within four hours of presentation (%), by month

Triage category	April 2023	May 2023	June 2023
All	54.5	52.8	54.2

Quarterly Report Technical Supplementary Information

Data Source

This quarterly report draws data from the ACT Non-admitted Patient Emergency Department Care National Minimum Data Set (NMDS) 2022-23. This report reflects clinical information recorded in the DHR at the time the NMDS used for this analysis was created.

Due to data quality issues related to contemporaneous capture of clinical care in the DHR, data in this report may not reflect the timeline of actual clinical care provided. This is important to note, specifically in relation to the proportion of patients treated for resuscitation within clinically recommended timeframes.

Work to resolve known data reporting issues related to capture of clinical activity in the DHR is ongoing. Canberra Health Services are in the process of establishing business rules to allow for the review of resuscitation data, to more accurately reflect actual clinical care provided.

The ACT Health Directorate's Data Analytics Branch of the Policy, Partnerships and Programs Division extracts the data and calculates activity and performance data presented in this report. Measures are defined (definitions included below) in accordance with accepted standards. Results for each measure are compiled by analysts and peer-reviewed for quality assurance.

Analysis

Activity is conducted at a whole-of-ACT level and at an individual hospital level.

The DHR system was implemented in the ACT in November 2022. As such, comparison of data from this report against those from previously released quarterly performance reports is not valid as data would have been drawn from different source systems.

Stratification of results by urgency is used to indicate performance against recommended standards. For example, triage categories resuscitation (category 1) to non-urgent (category 5) and the respective service time standards for each category are used to show emergency department performance. More details on the calculation of patients starting treatment on time can be found in the 'Definitions and Methodologies' section.

Definitions and Methodologies

ED presentations

Definition: Number of patient attendances at public hospital EDs that were completed during the time period. As a person may visit an ED in a hospital more than once in a year, the number of presentations is not the same as the number of patients seen by the department.

Methodology:
Number of presentations with a unique state record identifier to an ACT public hospital ED with a valid initial triage category recorded.

Reporting period is determined by the Physical Departure Date.

The triage category represents the urgency of a patient's need for medical and/or nursing care in an ED. The triage category is allocated by an experienced registered nurse or medical practitioner at triage as follows:
- Triage category 1 (resuscitation): seen within seconds, calculated as less than or equal to 2 minutes
- Triage category 2 (emergency): seen within 10 minutes
- Triage category 3 (urgent): seen within 30 minutes
- Triage category 4 (semi-urgent): seen within 60 minutes
- Triage category 5 (non-urgent): seen within 120 minutes.

Quarterly Report Technical Supplementary Information

Definitions and Methodologies (cont.)

Patients starting treatment on time

Definition: The percentage of patients who are treated within national benchmarks for waiting times, for each triage category, in public hospital emergency departments.

Methodology:
Reporting period is determined by the Physical Departure Date.

Wait time is calculated as the time (in minutes) between when a patient presents at an emergency department for an emergency department service episode, and when clinical care commences.

Records are excluded from both the numerator and denominator if the episode end status is 'Did not wait to be attended by a health care professional' or 'Dead on arrival'.

Numerator: Number of presentations to public hospital emergency departments that were treated within benchmarks for each initial triage category:
  • Triage category 1 (resuscitation): seen within seconds, calculated as less than or equal to 2 minutes
  • Triage category 2 (emergency): seen within 10 minutes
  • Triage category 3 (urgent): seen within 30 minutes
  • Triage category 4 (semi-urgent): seen within 60 minutes
  • Triage category 5 (non-urgent): seen within 120 minutes.

Denominator: Total presentations of the initial triage category to public hospital emergency departments.

Patients leaving the ED within four hours of presentation

Definition: For all patients presenting to a public hospital emergency department, the percentage of presentations where the length of the emergency department stay is 4 hours or less.

Methodology:
Reporting period is determined by the Physical Departure Date.

Emergency department stay length is the amount of time, measured in minutes, between when a patient presents at an emergency department, and when the patient physically departs the emergency department.

Records are excluded from both the numerator and denominator if the initial triage category is missing.

Numerator: Number of emergency department presentations where emergency department stay length is less than or equal to four hours.

Denominator: Number of emergency department presentations.