



Government of **Western Australia**
Department of **Health**

Western Australia Emergency Access Target

Performance Quarterly Report

April to June 2017 Quarter



What is the WA Emergency Access Target (WEAT)?

In January 2016, WA health system established the WA Emergency Access Target (WEAT) to continue to drive local improvement in patient access to emergency services. This replaced the National Emergency Access Target (NEAT) following the expiry of the Commonwealth National Partnership Agreement on Improving Public Hospital Services in 2015.

The WEAT requires 90 per cent of all patients presenting to a hospital emergency department (ED) to be seen and admitted, transferred or discharged within four hours.

What hospitals does it cover?

Child and Adolescent Health Service (CAHS): Princess Margaret Hospital (PMH).

East Metropolitan Health Service (EMHS): Royal Perth Hospital (RPH), Armadale Hospital (AH) and St John of God Midland Public Hospital (SJOGMPH).

North Metropolitan Health Service (NMHS): Sir Charles Gairdner Hospital (SCGH), King Edward Memorial Hospital (KEMH) and Joondalup Health Campus (JHC).

South Metropolitan Health Service (SMHS): Fiona Stanley Hospital (FSH), Rockingham General Hospital (RGH) and Peel Health Campus (PHC).

WA Country Health Service (WACHS): Albany Hospital (AH), Broome Hospital (BH), Bunbury Hospital (BRH), Geraldton Hospital (GH), Kalgoorlie Hospital (KH), Hedland Health Campus (HHC) and Nickol Bay Hospital (NBH).

Providing the best care

The 2009 Four Hour Rule Program and the subsequent National Emergency Access Target have used clinical service redesign and improvement processes to significantly change the way our hospitals operate. This resulted in improved patient care for Western Australians.

All hospitals and Health Service Providers continue to examine and improve processes across the entire patient journey, from ED and the wards through to hospital discharge.

In 2015–16, Western Australia was the best performing jurisdiction for patients treated and admitted, transferred or discharged within four hours.

What does this report show?

This quarterly performance report shows how Health Service Providers (CAHS, EMHS, NMHS, SMHS and WACHS) are progressing towards the WEAT. For April to June 2017, overall WA, the percentage of emergency department attendances with length of episode (LOE) of four hours or less was 78.5%. The calendar year to date result to June 2017 was 77.1%. The current results are below the 2017 WA target of 90%. At Health Service Provider level, the percentage of emergency department attendances with LOE of four hours or less for CAHS (87.5%) and WACHS (86.0%) were close to achieving the target of 90%. For EMHS, NMHS and SMHS, the percentages of emergency department attendances with LOE of four hours or less were 77.5%, 72.2% and 75.7% respectively. Health Service Providers continue to drive improvement by implementing strategies that are based upon the foundations contained within the Western Australia Emergency Flow Report (May 2014) and more recently developed improvement strategies.

The report also includes total ED attendances, which show trends in demand, and in hospital mortality for admissions from ED which is monitored to ensure patient care remains of the highest priority.

Note: the *"unplanned reattendances to the emergency department within 48 hours"* indicator has been removed from reporting as the data is currently under review for quality improvement. This indicator will be reported again once the review is completed.

Refer to the Notes section (page 26) and the WEAT Reporting Data Definitions and Business Rules (pages 27 to 29) for information on how to interpret the figures in this report.

Western Australian Emergency Access Target Performance – April to June 2017 Quarter

Health Service Provider	Number of Emergency Department Attendances			Percentage of Emergency Department Attendances with Length of Episode of Four Hours or Less			
	Apr to Jun 2016	Apr to Jun 2017	Variance	Apr to Jun 2016	Apr to Jun 2017	Variance#	
Child and Adolescent Health Service (CAHS)							
Princess Margaret Hospital	15,831	15,354	↓	3.0%	88.7%	87.5%	↓ 1.1%
Total CAHS	15,831	15,354	↓	3.0%	88.7%	87.5%	↓ 1.1%
East Metropolitan Health Service (EMHS)							
Royal Perth Hospital	17,209	17,528	↑	1.9%	67.1%	75.8%	↑ 8.7%
Armadale Hospital	14,566	14,177	↓	2.7%	72.3%	77.9%	↑ 5.6%
St John of God Midland Public Hospital	17,053	17,469	↑	16.0%	61.4%	78.7%	↑ 17.3%
Total EMHS	49,828	49,174	↑	5.0%	66.9%	77.5%	↑ 10.6%
North Metropolitan Health Service (NMHS)							
Sir Charles Gairdner Hospital	17,155	16,918	↓	1.4%	69.9%	77.1%	↑ 7.2%
King Edward Memorial Hospital	3,185	2,883	↓	9.5%	95.9%	93.9%	↓ 2.0%
Joondalup Health Campus	24,394	24,418	↑	0.1%	66.6%	66.2%	↓ 0.5%
Total NMHS	44,734	44,219	↓	1.2%	69.9%	72.2%	↑ 2.2%
South Metropolitan Health Service (SMHS)							
Fiona Stanley Hospital	25,942	26,546	↑	2.3%	66.0%	77.7%	↑ 11.8%
Rockingham General Hospital	13,360	13,582	↑	1.7%	79.0%	79.8%	↑ 0.8%
Peel Health Campus	10,734	10,848	↑	1.1%	74.3%	65.6%	↓ 8.7%
Total SMHS	50,036	50,976	↑	1.9%	71.2%	75.7%	↑ 4.5%
WA Country Health Service (WACHS)							
Albany Hospital	6,144	6,102	↓	0.7%	85.4%	88.0%	↑ 2.5%
Broome Hospital	6,168	5,531	↑	11.5%	91.8%	87.5%	↓ 4.2%
Bunbury Hospital	9,792	9,707	↓	0.9%	75.3%	80.6%	↑ 5.3%
Geraldton Hospital	7,146	7,112	↓	0.5%	77.3%	81.5%	↑ 4.2%
Hedland Health Campus	5,348	5,676	↑	6.1%	88.9%	94.2%	↑ 5.3%
Kalgoorlie Hospital	5,594	6,009	↑	7.4%	91.8%	89.1%	↓ 2.6%
Nickol Bay Hospital	4,536	4,554	↑	0.4%	88.7%	85.7%	↓ 3.0%
Total WACHS	44,091	45,328	↑	2.8%	84.2%	86.0%	↑ 1.8%
Statewide	201,520	205,051	↑	1.8%	74.2%	78.5%	↑ 4.4%
Statewide (excluding Contracted Health Entities*)	151,339	152,316	↑	0.6%	76.6%	81.4%	↑ 4.8%
Contracted Health Entities	50,181	52,735	↑	5.1%	66.7%	70.2%	↑ 3.5%



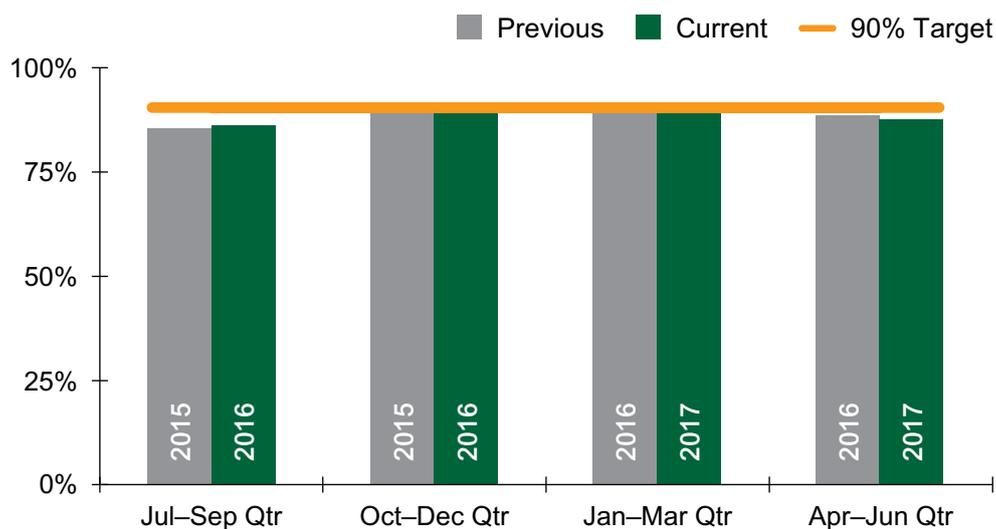
Child and Adolescent Health Service

Princess Margaret Hospital

Princess Margaret Hospital

April to June 2017		Compared to April to June 2016		
15,354	emergency department attendances	↓	3.0%	decrease or 477 less emergency department attendances
87.5%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	1.1%	decrease in emergency department attendances with LOE of four hours or less ¹
66.2%	emergency department admissions with LOE of four hours or less ¹	↑	1.1%	increase in emergency department admissions with LOE of four hours or less ¹
57.4%	emergency department transfers with LOE of four hours or less ¹	↓	14.8%	decrease in emergency department transfers with LOE of four hours or less ¹
93.4%	emergency department departures with LOE of four hours or less ¹	↓	1.2%	decrease in emergency department departures with LOE of four hours or less ¹
0.1%	in-hospital mortality for admissions from emergency department	↑	0.1%	increase in in-hospital mortality for admissions from emergency department

Figure 1: Princess Margaret Hospital – Percentage of ED attendances with length of episode of four hours or less



See Notes on page 26 for additional comments on the figures shown.



East Metropolitan Health Service

Royal Perth Hospital

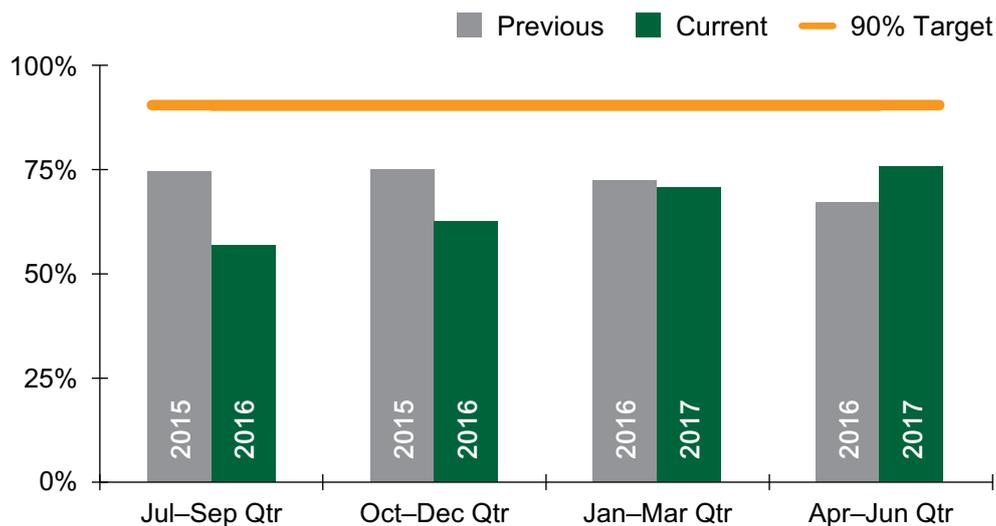
Armadale Hospital

St John of God Midland
Public Hospital

Royal Perth Hospital

April to June 2017		Compared to April to June 2016		
17,528	total emergency department attendances	↑	1.9%	increase of 319 more emergency department attendances
75.8%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	8.7%	increase in emergency department attendances with LOE of four hours or less ¹
63.4%	emergency department admissions with LOE of four hours or less ¹	↑	17.8%	increase in emergency department admissions with LOE of four hours or less ¹
48.2%	emergency department transfers with LOE of four hours or less ¹	↑	2.6%	increase in emergency department transfers with LOE of four hours or less ¹
84.9%	emergency department departures with LOE of four hours or less ¹	↑	3.4%	increase in emergency department departures with LOE of four hours or less ¹
1.5%	in-hospital mortality for admissions from emergency department	↑	0.3%	increase in in-hospital mortality for admissions from emergency department

Figure 2: Royal Perth Hospital – Percentage of ED attendances with length of episode of four hours or less

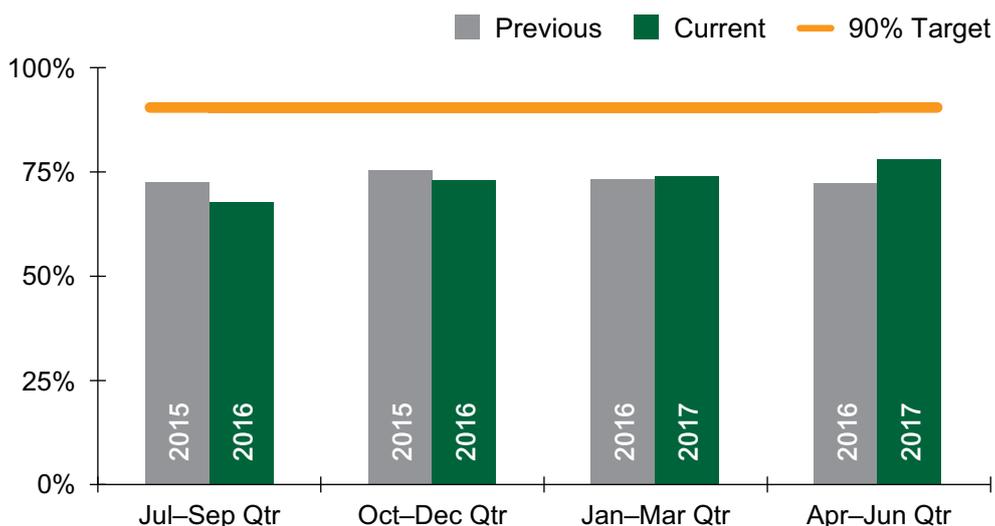


See Notes on page 26 for additional comments on the figures shown.

Armadale Hospital

April to June 2017		Compared to April to June 2016		
14,177	total emergency department attendances	↓	2.7%	decrease or 389 less emergency department attendances
77.9%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	5.6%	increase in emergency department attendances with LOE of four hours or less ¹
41.1%	emergency department admissions with LOE of four hours or less ¹	↑	17.2%	increase in emergency department admissions with LOE of four hours or less ¹
46.9%	emergency department transfers with LOE of four hours or less ¹	↑	4.8%	increase in emergency department transfers with LOE of four hours or less ¹
85.8%	emergency department departures with LOE of four hours or less ¹	↑	4.5%	increase in emergency department departures with LOE of four hours or less ¹
1.2%	in-hospital mortality for admissions from emergency department	↑	0.03%	increase in in-hospital mortality for admissions from emergency department

Figure 3: Armadale Hospital – Percentage of ED attendances with length of episode of four hours or less

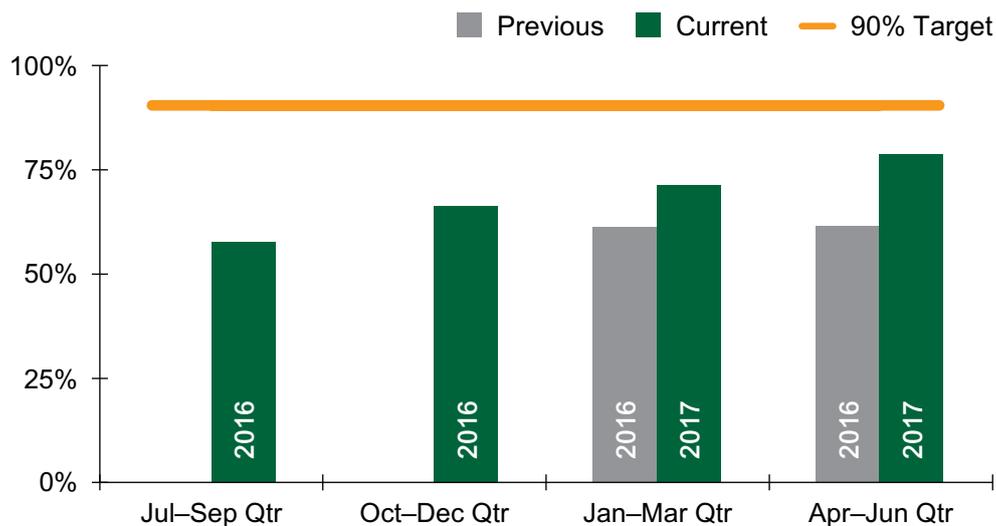


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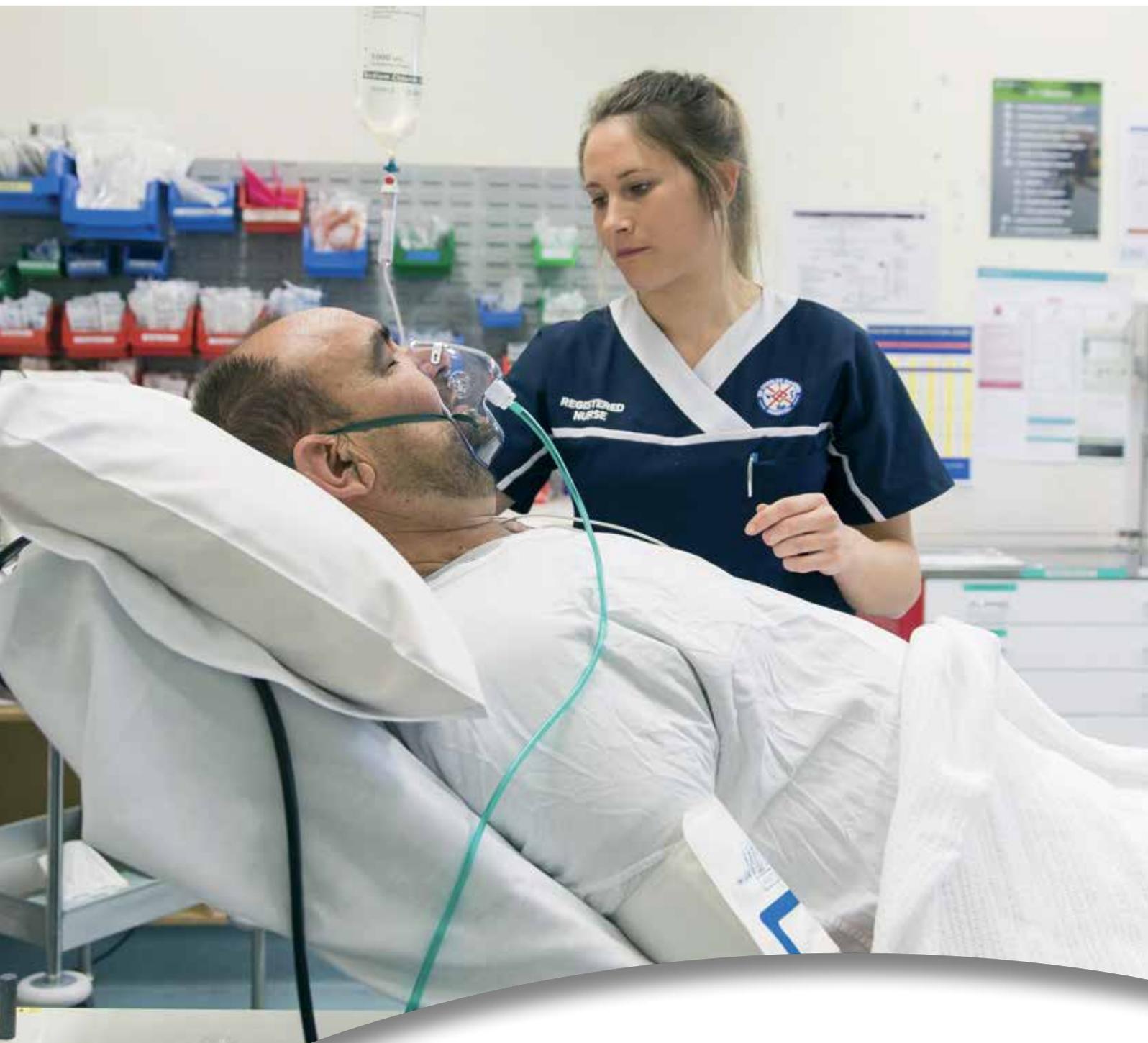
St John of God Midland Public Hospital

April to June 2017		Compared to April to June 2016		
17,469	total emergency department attendances	↑	16.0%	increase of 2,416 more emergency department attendances
78.7%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	17.3%	increase in emergency department attendances with LOE of four hours or less ¹
62.3%	emergency department admissions with LOE of four hours or less ¹	↑	22.0%	increase in emergency department admissions with LOE of four hours or less ¹
52.5%	emergency department transfers with LOE of four hours or less ¹	↑	10.9%	increase in emergency department transfers with LOE of four hours or less ¹
86.5%	emergency department departures with LOE of four hours or less ¹	↑	14.0%	increase in emergency department departures with LOE of four hours or less ¹
0.9%	in-hospital mortality for admissions from emergency department	↓	0.3%	decrease in in-hospital mortality for admissions from emergency department

Figure 4: St John of God Midland Public Hospital – Percentage of ED attendances with length of episode of four hours or less



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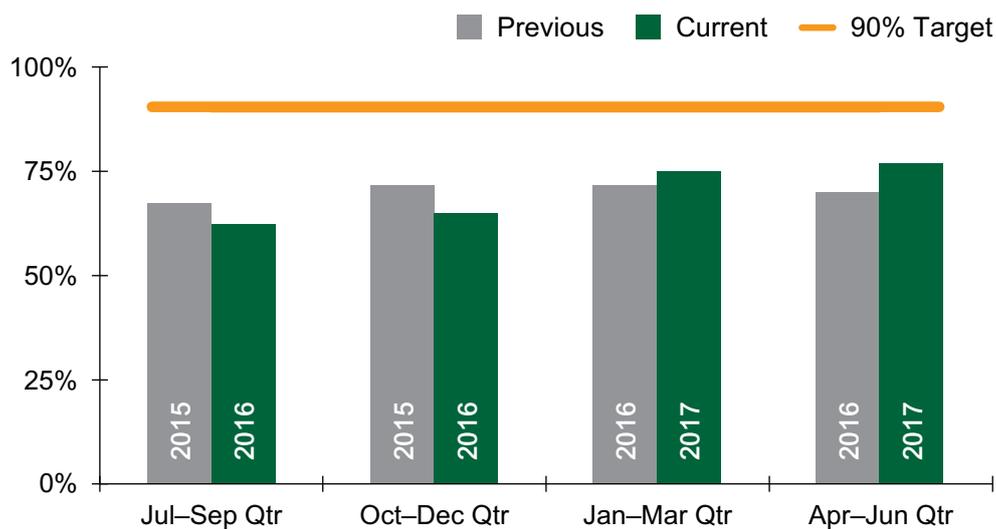
North Metropolitan Health Service

Sir Charles Gairdner Hospital
King Edward Memorial Hospital
Joondalup Health Campus

Sir Charles Gairdner Hospital

April to June 2017		Compared to April to June 2016		
16,918	total emergency department attendances	↓	1.4%	decrease or 237 less emergency department attendances
77.1%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	7.2%	increase in emergency department attendances with LOE of four hours or less ¹
68.2%	emergency department admissions with LOE of four hours or less ¹	↑	10.5%	increase in emergency department admissions with LOE of four hours or less ¹
42.0%	emergency department transfers with LOE of four hours or less ¹	↑	4.7%	increase in emergency department transfers with LOE of four hours or less ¹
88.7%	emergency department departures with LOE of four hours or less ¹	↑	4.2%	increase in emergency department departures with LOE of four hours or less ¹
2.5%	in-hospital mortality for admissions from emergency department	↑	0.6%	increase in in-hospital mortality for admissions from emergency department

Figure 5: Sir Charles Gairdner Hospital – Percentage of ED attendances with length of episode of four hours or less

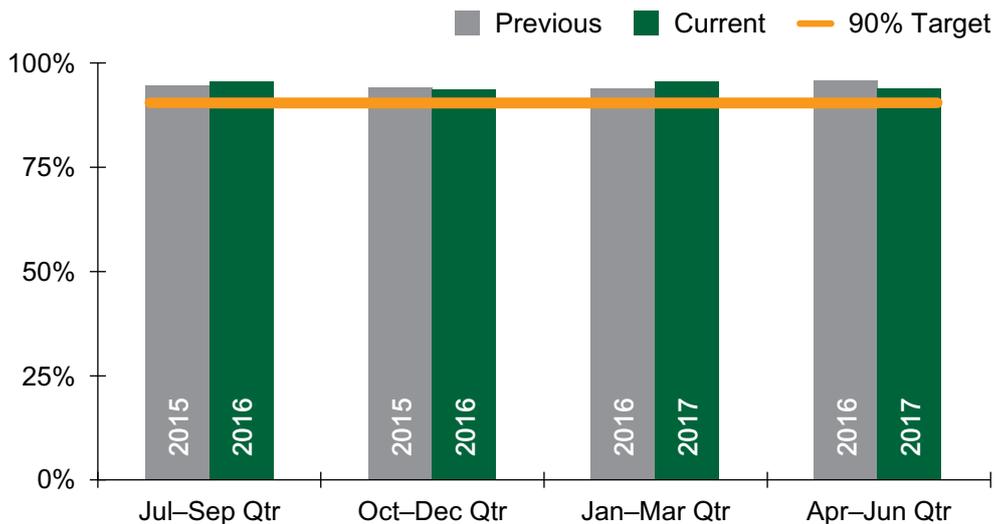


See Notes on page 26 for additional comments on the figures shown.

King Edward Memorial Hospital

April to June 2017		Compared to April to June 2016		
2,883	total emergency department attendances	↓	9.5%	decrease or 302 less emergency department attendances
93.9%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	2.0%	decrease in emergency department attendances with LOE of four hours or less ¹
77.7%	emergency department admissions with LOE of four hours or less ¹	↓	4.9%	decrease in emergency department admissions with LOE of four hours or less ¹
75.0%	emergency department transfers with LOE of four hours or less ¹	↓	13.9%	decrease in emergency department transfers with LOE of four hours or less ¹
96.0%	emergency department departures with LOE of four hours or less ¹	↓	1.5%	decrease in emergency department departures with LOE of four hours or less ¹
0.4%	in-hospital mortality for admissions from emergency department	↑	0.04%	increase in in-hospital mortality for admissions from emergency department

Figure 6: King Edward Memorial Hospital – Percentage of ED attendances with length of episode of four hours or less

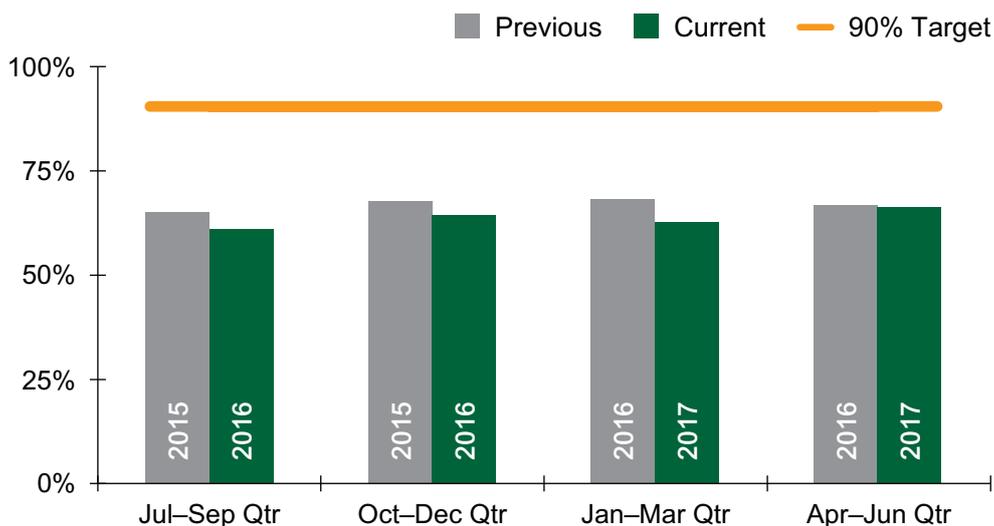


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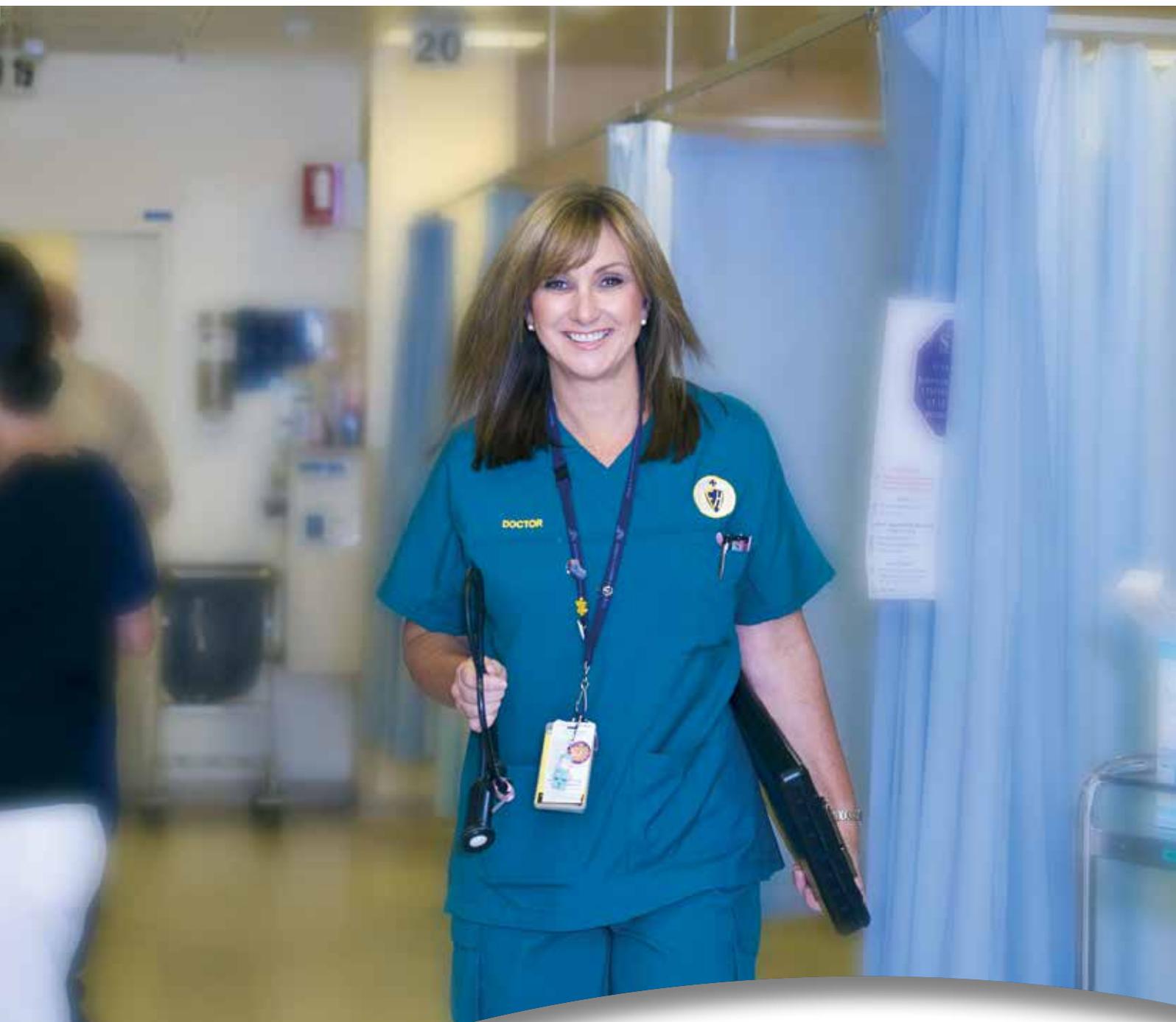
Joondalup Health Campus

April to June 2017		Compared to April to June 2016		
24,418	total emergency department attendances	↑	0.1%	increase or 24 more emergency department attendances
66.2%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	0.5%	decrease in emergency department attendances with LOE of four hours or less ¹
41.7%	emergency department admissions with LOE of four hours or less ¹	↑	4.6%	increase in emergency department admissions with LOE of four hours or less ¹
53.2%	emergency department transfers with LOE of four hours or less ¹	↓	3.7%	decrease in emergency department transfers with LOE of four hours or less ¹
77.8%	emergency department departures with LOE of four hours or less ¹	↓	2.4%	decrease in emergency department departures with LOE of four hours or less ¹
1.1%	in-hospital mortality for admissions from emergency department	↑	0.2%	increase in in-hospital mortality for admissions from emergency department

Figure 7: Joondalup Health Campus – Percentage of ED attendances with length of episode of four hours or less



See Notes on page 26 for additional comments on the figures shown.



South Metropolitan Health Service

Fiona Stanley Hospital

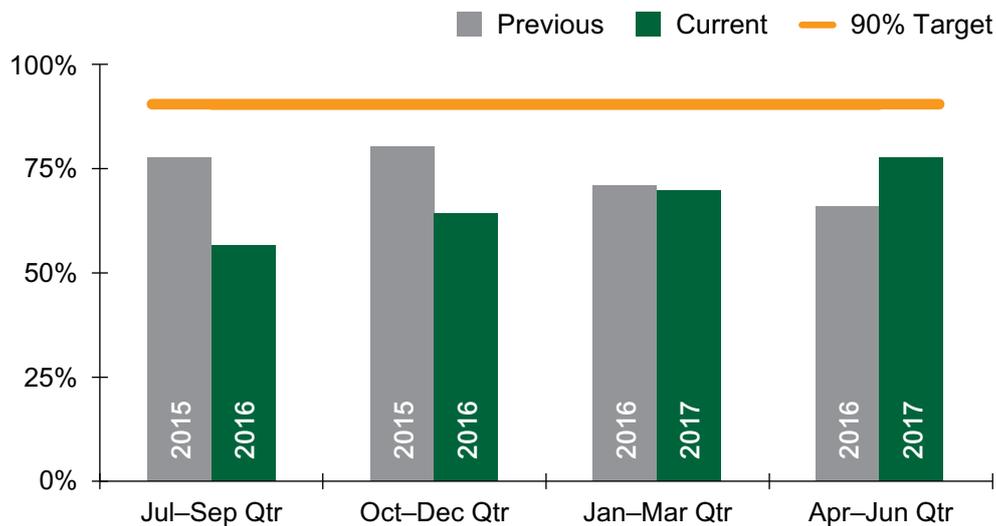
Rockingham General Hospital

Peel Health Campus

Fiona Stanley Hospital

April to June 2017		Compared to April to June 2016		
26,546	total emergency department attendances	↑	2.3%	increase of 604 more emergency department attendances
77.7%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	11.8%	increase in emergency department attendances with LOE of four hours or less ¹
62.8%	emergency department admissions with LOE of four hours or less ¹	↑	20.7%	increase in emergency department admissions with LOE of four hours or less ¹
54.6%	emergency department transfers with LOE of four hours or less ¹	↓	0.5%	decrease in emergency department transfers with LOE of four hours or less ¹
87.0%	emergency department departures with LOE of four hours or less ¹	↑	8.3%	increase in emergency department departures with LOE of four hours or less ¹
1.4%	in-hospital mortality for admissions from emergency department	↓	0.4%	decrease in in-hospital mortality for admissions from emergency department

Figure 8: Fiona Stanley Hospital – Percentage of ED attendances with length of episode of four hours or less

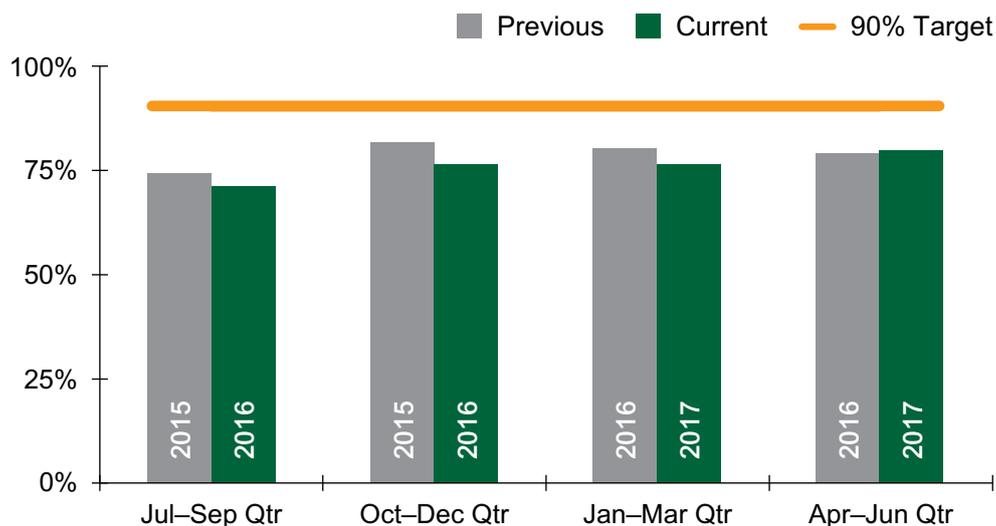


See Notes on page 26 for additional comments on the figures shown.

Rockingham General Hospital

April to June 2017		Compared to April to June 2016		
13,582	total emergency department attendances	↑	1.7%	increase of 222 more emergency department attendances
79.8%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	0.8%	increase in emergency department attendances with LOE of four hours or less ¹
51.5%	emergency department admissions with LOE of four hours or less ¹	↑	1.2%	increase in emergency department admissions with LOE of four hours or less ¹
56.4%	emergency department transfers with LOE of four hours or less ¹	↑	4.2%	increase in emergency department transfers with LOE of four hours or less ¹
88.1%	emergency department departures with LOE of four hours or less ¹	↑	1.2%	increase in emergency department departures with LOE of four hours or less ¹
1.1%	in-hospital mortality for admissions from emergency department	↑	0.1%	increase in in-hospital mortality for admissions from emergency department

Figure 9: Rockingham General Hospital – Percentage of ED attendances with length of episode of four hours or less

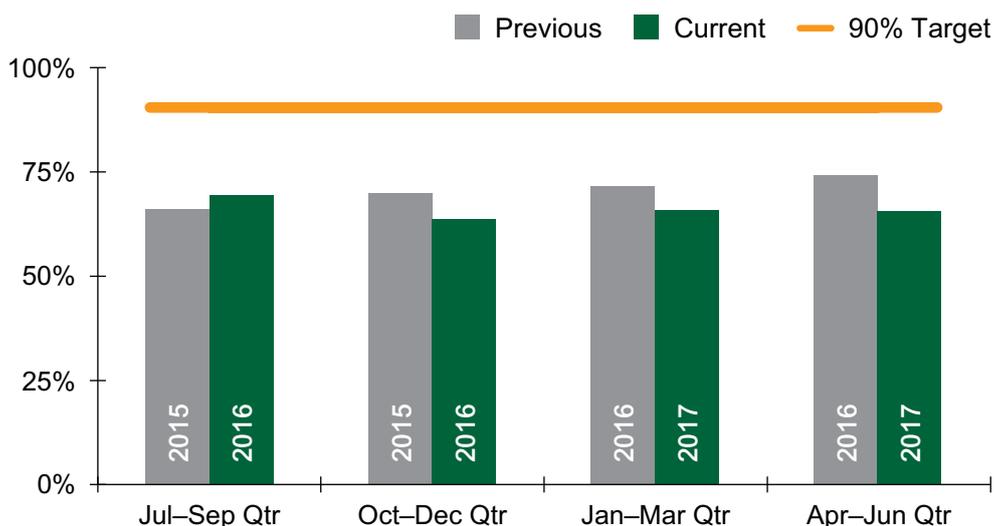


See Notes on page 26 for additional comments on the figures shown.

Peel Health Campus

April to June 2017		Compared to April to June 2016		
10,848	total emergency department attendances	↑	1.1%	increase of 114 more emergency department attendances
65.6%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	8.7%	decrease in emergency department attendances with LOE of four hours or less ¹
42.1%	emergency department admissions with LOE of four hours or less ¹	↓	24.9%	decrease in emergency department admissions with LOE of four hours or less ¹
32.0%	emergency department transfers with LOE of four hours or less ¹	↓	11.0%	decrease in emergency department transfers with LOE of four hours or less ¹
75.5%	emergency department departures with LOE of four hours or less ¹	↓	3.0%	decrease in emergency department departures with LOE of four hours or less ¹
1.1%	in-hospital mortality for admissions from emergency department	↓	0.8%	decrease in in-hospital mortality for admissions from emergency department

Figure 10: Peel Health Campus – Percentage of ED attendances with length of episode of four hours or less



See Notes on page 26 for additional comments on the figures shown.



WA Country Health Service

Albany Hospital

Broome Hospital

Bunbury Hospital

Geraldton Hospital

Hedland Health Campus

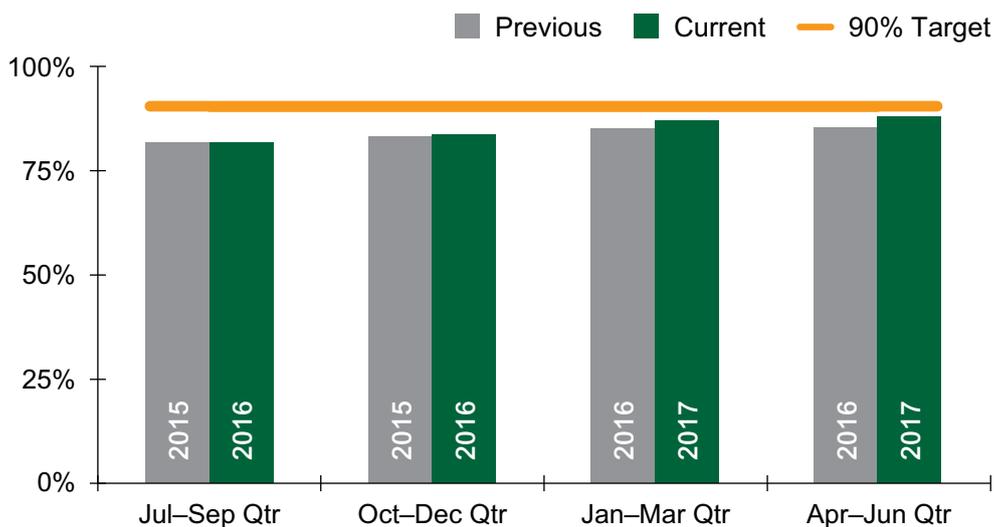
Kalgoorlie Hospital

Nickol Bay Hospital

Albany Hospital

April to June 2017		Compared to April to June 2016		
6,102	total emergency department attendances	↓	0.7%	decrease or 42 less emergency department attendances
88.0%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	2.5%	increase in emergency department attendances with LOE of four hours or less ¹
65.2%	emergency department admissions with LOE of four hours or less ¹	↑	4.9%	increase in emergency department admissions with LOE of four hours or less ¹
68.3%	emergency department transfers with LOE of four hours or less ¹	↓	9.0%	decrease in emergency department transfers with LOE of four hours or less ¹
94.3%	emergency department departures with LOE of four hours or less ¹	↑	2.6%	increase in emergency department departures with LOE of four hours or less ¹
0.5%	in-hospital mortality for admissions from emergency department	↓	0.4%	decrease in in-hospital mortality for admissions from emergency department

Figure 11: Albany Hospital – Percentage of ED attendances with length of episode of four hours or less

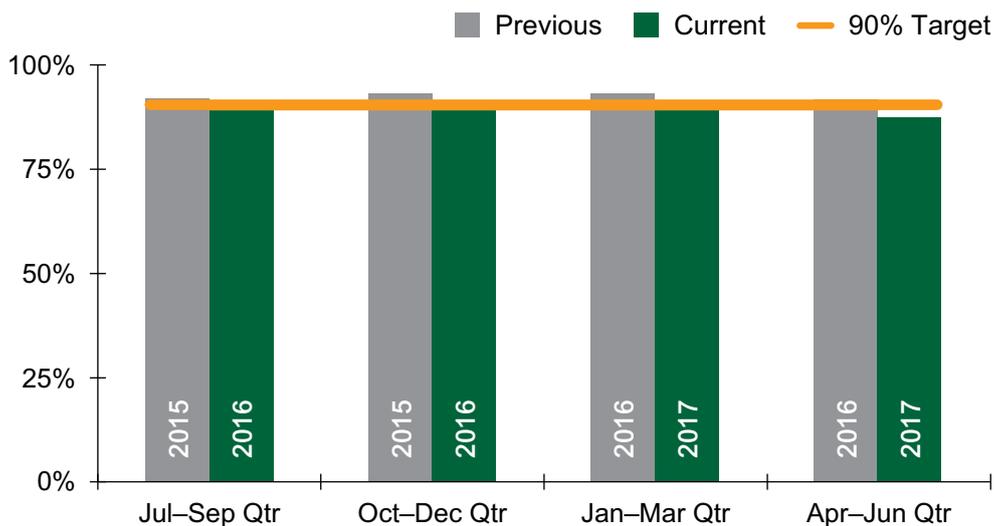


See Notes on page 26 for additional comments on the figures shown.

Broome Hospital

April to June 2017		Compared to April to June 2016		
6,168	total emergency department attendances	↑	11.5%	increase of 637 more emergency department attendances
87.5%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	4.2%	decrease in emergency department attendances with LOE of four hours or less ¹
54.1%	emergency department admissions with LOE of four hours or less ¹	↓	13.8%	decrease in emergency department admissions with LOE of four hours or less ¹
66.7%	emergency department transfers with LOE of four hours or less ¹	↑	19.0%	increase in emergency department transfers with LOE of four hours or less ¹
93.4%	emergency department departures with LOE of four hours or less ¹	↓	3.5%	decrease in emergency department departures with LOE of four hours or less ¹
0.4%	in-hospital mortality for admissions from emergency department	↓	0.1%	decrease in in-hospital mortality for admissions from emergency department

Figure 12: Broome Hospital – Percentage of ED attendances with length of episode of four hours or less

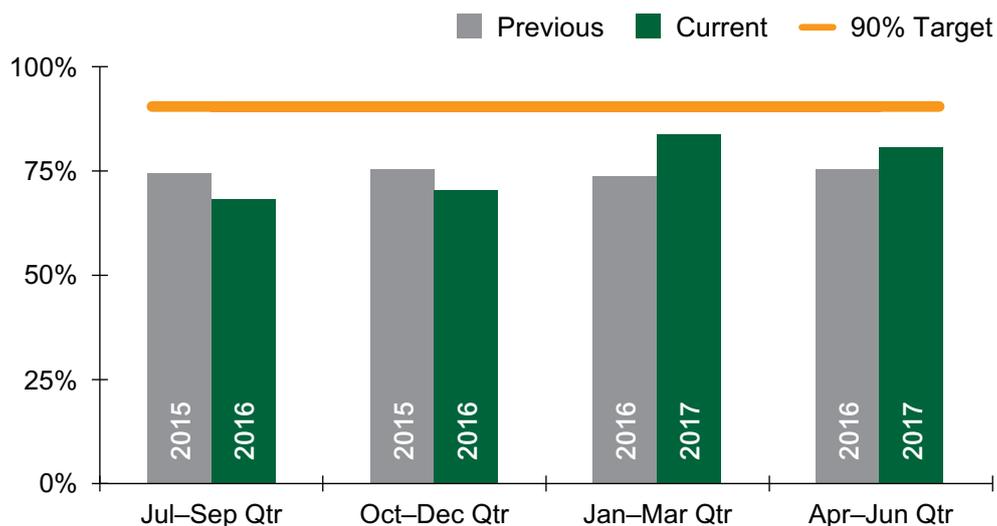


See Notes on page 26 for additional comments on the figures shown.

Bunbury Hospital

April to June 2017		Compared to April to June 2016		
9,707	total emergency department attendances	↓	0.9%	decrease or 85 less emergency department attendances
80.6%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	5.3%	increase in emergency department attendances with LOE of four hours or less ¹
65.7%	emergency department admissions with LOE of four hours or less ¹	↑	10.7%	increase in emergency department admissions with LOE of four hours or less ¹
36.7%	emergency department transfers with LOE of four hours or less ¹	↑	5.4%	increase in emergency department transfers with LOE of four hours or less ¹
88.1%	emergency department departures with LOE of four hours or less ¹	↑	4.8%	increase in emergency department departures with LOE of four hours or less ¹
0.7%	in-hospital mortality for admissions from emergency department	↑	0.2%	increase in in-hospital mortality for admissions from emergency department

Figure 13: Bunbury Hospital – Percentage of ED attendances with length of episode of four hours or less

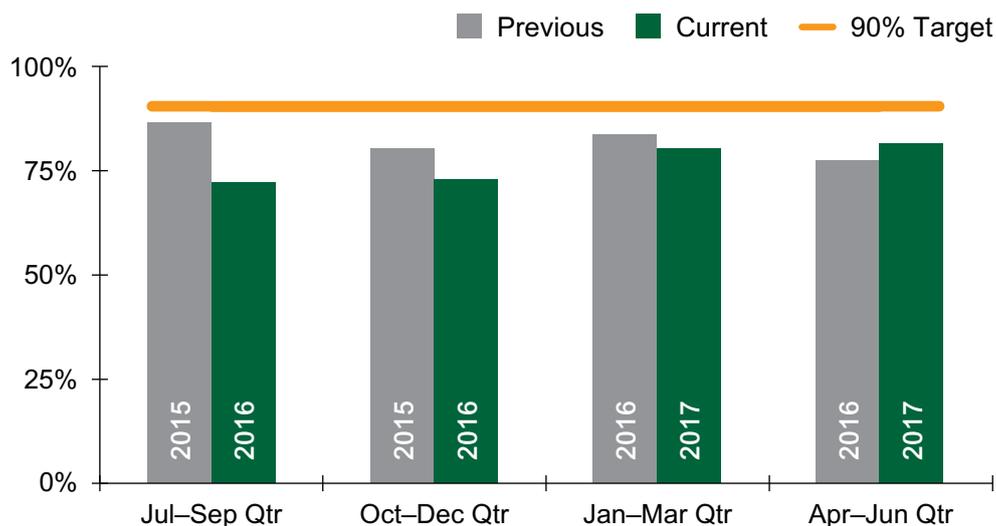


See Notes on page 26 for additional comments on the figures shown.

Geraldton Hospital

April to June 2017		Compared to April to June 2016		
7,112	total emergency department attendances	↓	0.5%	decrease or 34 less emergency department attendances
81.5%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	4.2%	increase in emergency department attendances with LOE of four hours or less ¹
57.6%	emergency department admissions with LOE of four hours or less ¹	↑	6.9%	increase in emergency department admissions with LOE of four hours or less ¹
29.2%	emergency department transfers with LOE of four hours or less ¹	↑	5.5%	increase in emergency department transfers with LOE of four hours or less ¹
88.9%	emergency department departures with LOE of four hours or less ¹	↑	4.1%	increase in emergency department departures with LOE of four hours or less ¹
0.8%	in-hospital mortality for admissions from emergency department	↑	0.1%	increase in in-hospital mortality for admissions from emergency department

Figure 14: Geraldton Hospital – Percentage of ED attendances with length of episode of four hours or less

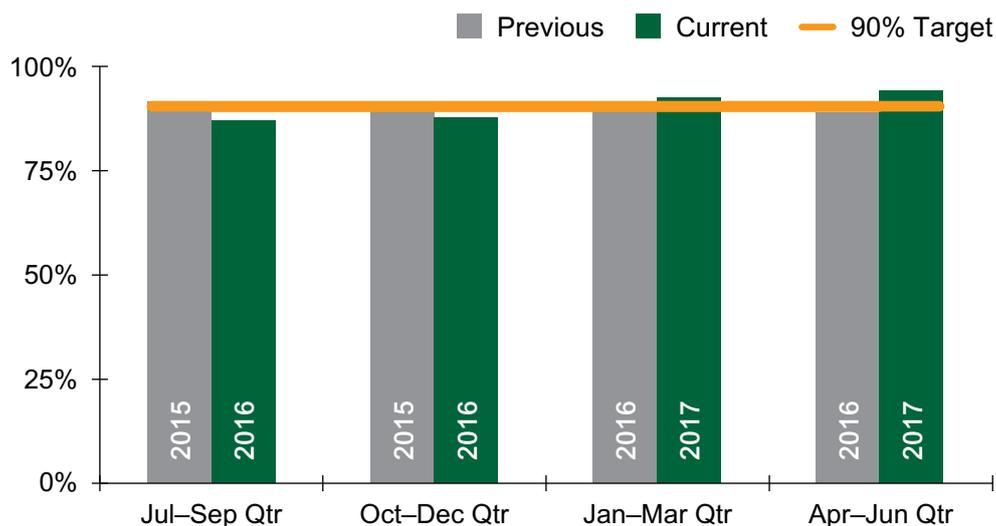


See Notes on page 26 for additional comments on the figures shown.

Hedland Health Campus

April to June 2017		Compared to April to June 2016		
5,676	total emergency department attendances	↑	6.1%	increase of 328 more emergency department attendances
94.2%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	5.3%	increase in emergency department attendances with LOE of four hours or less ¹
77.1%	emergency department admissions with LOE of four hours or less ¹	↑	19.4%	increase in emergency department admissions with LOE of four hours or less ¹
60.5%	emergency department transfers with LOE of four hours or less ¹	↑	21.1%	increase in emergency department transfers with LOE of four hours or less ¹
97.0%	emergency department departures with LOE of four hours or less ¹	↑	2.9%	increase in emergency department departures with LOE of four hours or less ¹
0.3%	in-hospital mortality for admissions from emergency department	↓	0.2%	decrease in in-hospital mortality for admissions from emergency department

Figure 15: Hedland Health Campus – Percentage of ED attendances with length of episode of four hours or less

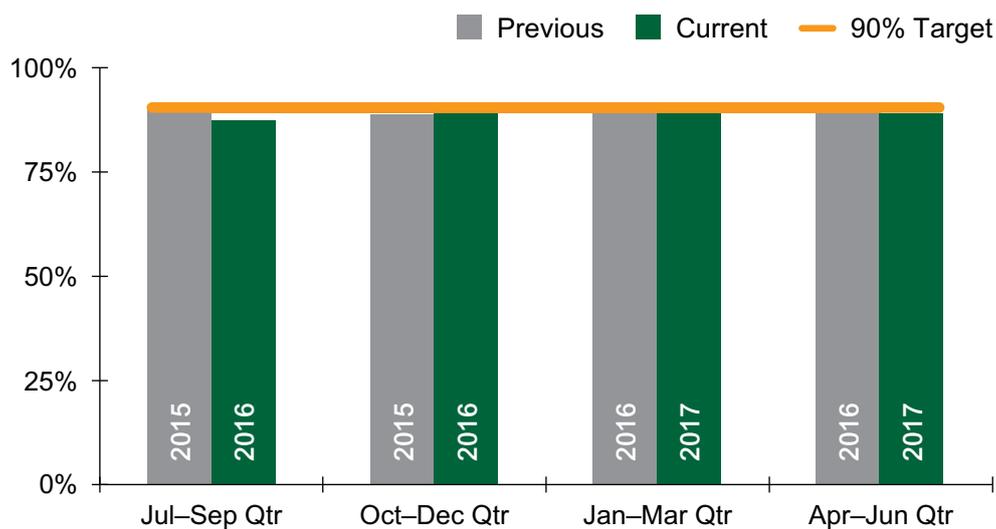


See Notes on page 26 for additional comments on the figures shown.

Kalgoorlie Hospital

April to June 2017		Compared to April to June 2016		
6,009	total emergency department attendances	↑	7.4%	increase of 415 more emergency department attendances
89.1%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	2.6%	decrease in emergency department attendances with LOE of four hours or less ¹
62.2%	emergency department admissions with LOE of four hours or less ¹	↓	8.1%	decrease in emergency department admissions with LOE of four hours or less ¹
65.8%	emergency department transfers with LOE of four hours or less ¹	↑	15.8%	increase in emergency department transfers with LOE of four hours or less ¹
94.7%	emergency department departures with LOE of four hours or less ¹	↓	2.2%	decrease in emergency department departures with LOE of four hours or less ¹
1.4%	in-hospital mortality for admissions from emergency department	↑	0.2%	increase in in-hospital mortality for admissions from emergency department

Figure 16: Kalgoorlie Hospital – Percentage of ED attendances with length of episode of four hours or less

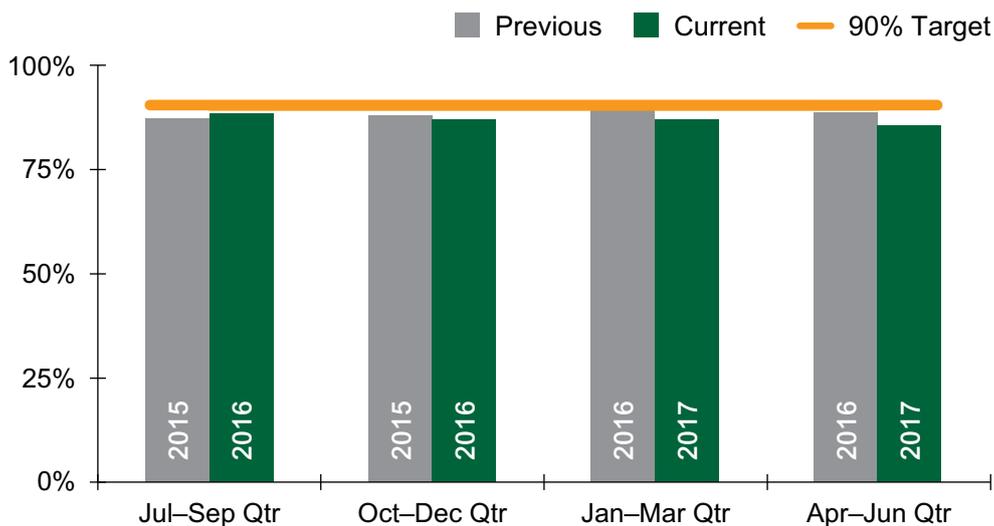


See Notes on page 26 for additional comments on the figures shown.

Nickol Bay Hospital

April to June 2017		Compared to April to June 2016		
4,554	total emergency department attendances	↑	0.4%	increase or 18 more emergency department attendances
85.7%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	3.0%	decrease in emergency department attendances with LOE of four hours or less ¹
42.0%	emergency department admissions with LOE of four hours or less ¹	↓	5.5%	decrease in emergency department admissions with LOE of four hours or less ¹
33.3%	emergency department transfers with LOE of four hours or less ¹	↓	7.6%	decrease in emergency department transfers with LOE of four hours or less ¹
92.4%	emergency department departures with LOE of four hours or less ¹	↓	2.3%	decrease in emergency department departures with LOE of four hours or less ¹
0.4%	in-hospital mortality for admissions from emergency department	↓	0.01%	decrease in in-hospital mortality for admissions from emergency department

Figure 17: Nickol Bay Hospital – Percentage of ED attendances with length of episode of four hours or less



See Notes on page 26 for additional comments on the figures shown.

Notes:

Figures shown in the tables are preliminary and subject to change due to record review.

The WEAT target for all sites is 90% for 2017.

WA health system refers to the public health system in WA as defined in Section 19(1) of the *Health Services Act 2016*. The WA health system comprises the Department of Health, Health Service Providers and contracted health entities 'CHE' (to the extent that CHE provide health services to the State).

- * Contracted Health Entities are Joondalup Health Campus, Peel Health Campus and SJOG Midland Public Hospital.
- # Figures are rounded to one decimal place. The variance is calculated using actual numbers that contain more than one decimal place, therefore the variance presented may be slightly different to those calculated using the rounded figures.
- ¹ Length of Episode refers to the duration in the emergency department which is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient leaves the emergency department.

Western Australia Emergency Access Target (WEAT) – Reporting Data Definitions and Business Rules

1: Emergency department attendances

Definition:	The total number of all emergency department (ED) attendances.
Guide for use:	Includes all episodes where a patient presented at the emergency department and was registered in any manner in one of the electronic data collection systems.
Purpose:	To provide a fundamental measure of activity levels within emergency departments.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	Emergency Department Data Collection (EDDC) (11/07/2017).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

2: Emergency department attendances with length of episode (LOE) of four hours or less

Definition:	The percentage of all emergency department attendances where the time to admit, transfer or discharge the patient from the emergency department was within four hours of their presentation.
Guide for use:	Includes all valid attendances. Excludes patients that had an invalid presentation or departure time. Data is expressed as a percentage. Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient leaves the emergency department.
Purpose:	To monitor and improve timely access to emergency care for all emergency department attendances.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/07/2017).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

3: Emergency department admissions with length of episode (LOE) of four hours or less

Definition:	The percentage of all admissions from the emergency department where the time to admit the patient to a ward was within four hours of their presentation.
Guide for use:	<p>An admission process is the process whereby the hospital accepts responsibility for the patient's care and/or treatment.</p> <p>Includes all attendances that were admitted.</p> <p>Excludes patients that had an invalid presentation or departure time.</p> <p>Data is expressed as a percentage.</p> <p>Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient leaves the emergency department by being admitted to a ward (including Short Stay Unit).</p>
Purpose:	To monitor and improve timely access to emergency care for emergency department patients who are admitted to a hospital inpatient ward.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/07/2017).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

4: Emergency department transfers with length of episode (LOE) of four hours or less

Definition:	The percentage of all emergency department transfers where the time to transfer the patient to another hospital was within four hours of their presentation.
Guide for use:	<p>Includes all attendances that were transferred to another hospital on ED departure.</p> <p>Excludes records with an invalid presentation or departure time.</p> <p>Data is expressed as a percentage.</p> <p>Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient leaves the emergency department to be transferred to another hospital.</p>
Purpose:	To monitor and improve timely access to emergency care for emergency department patients who are transferred to another hospital.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/07/2017).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

5: Emergency department departures with length of episode (LOE) of four hours or less

Definition:	The percentage of emergency attendances who were discharged to home within four hours of their presentation.
Guide for use:	Includes all attendances that were not admitted or transferred. Excludes records with an invalid presentation or departure time. Data is expressed as a percentage. Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient is discharged from the emergency department.
Purpose:	To monitor and improve timely access to emergency care for emergency department patients who are discharged to home.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/07/2017).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

6: Percentage of in hospital mortality for admissions from emergency department

Definition:	The percentage of hospital inpatients who were admitted from emergency department and subsequently deceased during the hospital stay.
Guide for use:	Excludes patients that are deceased in the emergency department who are not admitted and patients directly admitted to a hospital ward.
Purpose:	To monitor and improve quality of care for patients who are admitted to a hospital inpatient ward from emergency department.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	Inpatient Activity (10/07/2017).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

This document can be made available in alternative formats on request for a person with disability.

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