

Guide to interpreting Elective Surgery Dashboards

1. Introduction

Elective surgery refers to non-emergency surgery which is medically necessary, but can be booked in advance following a specialist clinical assessment.

Patients requiring elective surgery are assigned an urgency category by their treating surgeon and placed on an elective surgery waiting list. Waiting lists are actively managed by hospitals to ensure all patients are treated within the maximum recommended timeframe for their urgency category:

- Category 1 procedures that should be undertaken within 30 days.
- Category 2 procedures that should be undertaken within 90 days.
- Category 3 procedures that should be undertaken within 365 days.

The Elective Surgery Wait List dashboards provide information on access and waiting times for elective surgery in the WA health system.

2. Reporting metrics

Cases on a waiting list

- Represents the patients that were awaiting elective surgery at a particular point in time (also known as "waitlisted" cases). Cases are counted rather than patients because a person may be on a waiting list more than once, for different procedures.
- Cases are included in the total count if:
 - the patient has been deemed "ready for surgery" (i.e. prepared to be admitted to hospital, or to begin the process leading directly to admission for surgery); and
 - the planned procedure meets the national definition of elective surgery.
- Waitlisted cases are reported by:

Within boundary cases

 Refers to patients who have been waiting less than the maximum recommended time for their urgency category (see Introduction).

Over boundary cases

 Refers to patients who have been waiting longer than the maximum recommended time for their urgency category (see Introduction).

Percentage of over boundary cases

- Refers to the percentage of cases on an elective surgery waiting list that have waited longer than the clinically recommended time for a procedure, according to their assigned urgency category.
- This is also known as the WA Elective Services Target (WEST), which is a key measure of access to public elective surgical services.

• In order to ensure timely access to public elective services, the WA Department of Health has set an ambitious target of 0% of cases waiting longer than recommended.

Admissions

- For the purpose of this report, number of admissions (or 'cases admitted') are the number of
 occasions whereby a patient on an elective surgery waiting list was admitted to a public
 hospital to have their elective surgery.
- Admissions are counted rather than patients because a person may have been admitted to hospital for elective surgery more than once in the period being reported.

Waiting time

- Waiting time is the length of time (in days) that a patient waits to be admitted for elective surgery after being placed on a public hospital elective surgery waiting list.
- Typically, a patient is placed on a waiting list only after an assessment by a specialist doctor.
 Reported waiting times do not include the time patients may have waited to attend an outpatient appointment with a specialist.
- Once a patient is placed on a waiting list, any days in which the patient was deemed "not ready for surgery" (e.g. due to other medical issues or personal commitments that meant the patient was not able to undergo surgery at that time) are deducted from their total waiting time.
- Waiting times are reported by:

Median waiting time

• The maximum length of time that 50% of cases on an elective surgery waiting list have waited to be admitted to hospital for their procedure.

90th Percentile waiting time

• The maximum length of time that 90% of cases an elective surgery waiting list have waited to be admitted to hospital for their procedure.

3. Data sources and data coverage

Data in the Elective Surgery dashboards is extracted from the Elective Services Wait List Data Collection (ESWLDC), which is managed by the Purchasing and System Performance Division at the WA Department of Health and contains data from a range of different patient information systems.

The Elective Surgery dashboards include data from all public hospitals and contracted health entities within the WA health system that provide public elective surgery services.

4. Data extraction and reporting

Data in the monthly and specialty Elective Surgery dashboards is extracted at the end of the last day of each reported month.

Both dashboards can be filtered:

- The Elective Surgery Monthly Report can be filtered by hospital and reporting month.
- The Elective Surgery Specialty Report can be filtered by hospital and specialty.

There is also the option to display all metropolitan, all country or all WA public hospitals.

Filtering the Monthly dashboard by month will not affect the graphs, which display all available dates.

Filtering by specialty or hospital will affect every section of the dashboards and only performance results for the selected specialty and/or hospital will be displayed.

Metrics may display as 'N/A' if there was no activity meeting the criteria of the selected filters.

Dashboard data is available in an accessible format via the link under Related Links at the bottom of the webpage.

5. Data interpretation

- Data in the elective surgery dashboards may be subject to change due to quality assurance processes, lags in data processing, data cleaning or other corrections.
- Median and 90th percentile waiting times for hospitals performing low volumes of elective surgery (e.g. small country hospitals) should be interpreted with caution.
- Due to operating theatre closures on Christmas, New Year and Easter public holidays, there
 are typically fewer elective admissions in the months of December, January and April each
 year.

6. Glossary

Elective surgery

Planned surgery that can be booked in advance as a result of a specialist clinical assessment resulting in placement on an elective surgery waiting list (Source: Australian Institute of Health and Welfare).

Procedures excluded from the Australian Institute of Health and Welfare's <u>classification of elective</u> <u>surgery</u> are not included in elective surgery reports.

Specialty

In the context of elective surgery, specialty refers to "the area of clinical expertise held by the doctor who will perform the elective surgery". (Source: Admitted Patient Care 2017-18, Australian Institute of Health and Welfare.)

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 public services provided by contracted health entities.

Health Service Providers are board-governed statutory authorities that are legally responsible and accountable for the delivery of health services for their local areas and communities. Health Service Providers currently providing elective surgical services are:

- Child and Adolescent Health Service (CAHS)
- North Metropolitan Health Service (NMHS)
- South Metropolitan Health Service (SMHS)
- East Metropolitan Health Service (EMHS)
- WA Country Health Service (WACHS)

Contracted health entities are privately-operated health facilities that are contracted by the State Government to provide public healthcare services. Contracted health entities currently providing public elective surgical services are Joondalup Health Campus, Peel Health Campus and St John of God Midland Public Hospital.

7. Citation of WA health system Elective Surgery data

Acknowledgement of the Western Australian Department of Health, Information and System Performance Directorate, should accompany any use of the data.

8. More information

Elective surgery waiting times reports, Australian Institute of Health and Welfare

WA Elective Surgery Access and Waiting List Management Policy, WA Department of Health

<u>National Elective Surgery Urgency Categorisation Guidelines</u>, Australian Health Ministers' Advisory Council

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