

Version 3.1

Surgery Dashboard Indicators

2011/12

NSW Ministry of Health

March 2012

Further Information:

This document supercedes Version 2.1c (2009) and replaces all previous versions of the Surgical KPI Dictionary/Surgery Dashboard Indicator definitions released by the Health Services Performance Improvement Branch or Demand and Performance Evaluation Branch

If you have any queries/comments regarding the Performance Indicators, please contact:

Policy issues: Health Services Performance Improvement Branch

Data issues: Demand and Performance Evaluation Branch

Trim Reference; H12/12496-3

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WAITING LISTS

OVERDUE ELECTIVE SURGERY PATIENTS

INDICATOR: 9B5, 9B6 & 9B7

- Category 1 Ready-for-care patients (RFC) > 30 days (number) (9B5)
- Category 2 Ready-for-care patients (RFC) > 90 days (number) (9B6)
- Category 3 Ready-for-care patients (RFC) > 365 days (number) (9B7)

Previously known as Overdue planned surgical patients on list

Version number

6.1

Scope

All ready for care patients currently on the NSW Health Waiting Times Collection for elective surgery.

Goal

To reduce waiting time for elective surgery in public hospitals.

Desired outcome

Better management of waiting lists to minimise waiting time for elective surgery.

Primary point of collection

Waiting List/Booking Clerk

Data Collection Source/System

Patient Admission System (PAS)/Waiting List Collection On-Line System (WLCOS)

Primary data source for analysis

WLCOS

Indicator definition

Number of elective surgical patients on the NSW Health Waiting Times Collection whose waiting time (last urgency waiting time for categories 1 and 2, ready for care days for category 3) has exceeded the time recommended in the clinical priority category to which they have been assigned.

- **Number of Category 1 patients waiting >30 days**
Number of Category 1 surgical patients who have been waiting for elective admission longer than 30 days.
- **Number of Category 2 patients waiting >90 days**
Number of Category 2 surgical patients who have been waiting for elective admission longer than 90 days.
- **Number of Category 3 patients waiting >365 days**
Number of Category 3 surgical patients who have been waiting for elective admission longer than 365 days.

Inclusions

Ready for Care patients (clinical priority categories 1, 2 and 3) on the surgical waiting list.

Exclusions

Not Ready for Care (NRFC) patients are excluded (clinical priority category 4).

Targets

Target

0 (Zero) for Category 1 > 30 days
0 (Zero) for Category 2 > 90 days
0 (Zero) for Category 3 >365 days

Comments	<p>Patients should be admitted within the timeframe recommended for the assigned clinical priority category:</p> <p>Category 1 Admission within 30 days desired for a condition that has the potential to deteriorate quickly to the point that may become an emergency.</p> <p>Category 2 Admission within 90 days desirable for a condition, which is not likely to deteriorate quickly or become an emergency.</p> <p>Category 3 Admission within 365 days acceptable for a condition, which is unlikely to deteriorate quickly and which has little potential to become an emergency.</p>
Context	Elective surgery: The numbers of overdue patients represent a measure of the hospital's performance of elective surgical care.
Related Policies/ Programs	Clinical Services Redesign Program Waiting Time and Elective Surgery Policy 2012
Useable data available from	July 1994
Frequency of Reporting	Monthly
Time lag to available data	Reporting required by the 10 th working day of each month, data available for previous month
Business owners	System Purchasing and Performance Division
Contact - Policy	Director, Health Service Performance Improvement Branch
Contact - Data	Director, Demand and Performance Evaluation Branch
Representation	
Data type	Numeric
Form	Number
Layout	NN,NNN
Minimum size	1
Maximum size	6
Related National Indicator	

INDICATOR: S7

ELECTIVE SURGERY PATIENTS ADMITTED WITHIN CLINICALLY APPROPRIATE TIME

Percentage - %
Previously known as “planned surgery patients admitted on time”

Version number	1.2
Scope	All elective surgery patients who are admitted and included in the NSW Health Waiting Times Collection
Goal	To reduce waiting time for elective surgery in public hospitals.
Desired outcome	Better management of waiting lists to minimise waiting time for Elective surgery.
Primary point of collection	Waiting List/Booking List Clerk
Data Collection Source/System	Patient Administration System (PAS)/Waiting List Collection On-Line System (WLCOS)
Primary data source for analysis	Waiting List Collection System (WLCOS)
Indicator definition	The percentage (%) of elective surgery patients on the NSW Health Waiting Times Collection who were admitted within the timeframe recommended for their clinical priority category.

Numerator

Numerator definition	Total number of elective surgery patients in the NSW Health Waiting Times Collection who: <ul style="list-style-type: none"> • Have been admitted for treatment within the reporting period, and • were admitted within the timeframe recommended for their clinical priority category.
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Note: includes:

- Staged patients *Refer to Policy for management of staged patients
- Emergency admissions for their recorded waitlist procedure

Numerator source	WLCOS
Numerator availability	Available Monthly

Denominator

Denominator definition	Total number of surgical patients in the NSW Health Waiting Times Collection who have been admitted for treatment within the reporting period.
Denominator source	WLCOS
Denominator availability	Available,

Inclusions

Surgical patients in the NSW Health Waiting Times Collection who have been admitted for treatment, that is where the reason for removal is	<ul style="list-style-type: none"> • 1 Routine admission
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- 2. Emergency Admissions, where the patient has surgery for the waitlisted procedure OR
- 8 Admission contracted to a private hospital/day procedure centre

Exclusions

Patients whose Waiting List Category is not 'Elective Surgery

Targets

Target based on the requirements for the National Partnership Agreement are:

	Category 1	Category 2	Category 3
Baseline Jan 11 to 31 Dec 2011	92.3%	86.6%	89.4%
2012	96%	90.0%	92.0%
2013	100%	93.0%	95.0%
2014	100%	97.0%	97.0%
2015	100%	100.0%	100%

Source: Table A5, A6 & A7 National Elective Surgery Targets, National Health Reform Agreement

Context

To ensure timely access for Elective Surgery to achieve the National Elective Surgery targets (NEST) as outlined in the National Performance Agreement (NPA).

Useable data available from

July 2005

Frequency of Reporting

Monthly/Weekly

Time lag to available data

Reporting required by the 10th day of each month, data available for previous month

Business owners

System Purchasing and Performance Division

Contact - Policy

Health Service Performance Improvement Branch

Contact - Data

Demand and Performance Evaluation Branch

Representation

Data type

Numeric

Form

Number, presented as a percentage (%)

Representational layout

NNN.NN

Minimum size

3

Maximum size

6

Date effective

1 July 2008

Related National Indicator

PI 34-Waiting times for elective surgery, 2011

<http://meteor.aihw.gov.au/content/index.php/itemId/421623>

Meteor ID 421623

Indicator S11	ELECTIVE SURGERY PATIENTS ON THE WAITLIST NOT READY FOR CARE
Version number	1.0
Scope	All elective surgery patients currently on a waiting list collection for elective surgery.
Goal	To reduce waiting time for elective surgery in public hospitals.
Desired outcome	Better management of waiting lists to minimise waiting time for elective surgery.
Data Collection Source/s	Waiting List Clerk
Primary data source for analysis	Patient Admission System (PAS)/Waiting List Collection On-Line System (WLCOS)
Definition	<p>The percentage of elective patients booked on a waiting list collection for elective surgery who are recorded as “Not Ready for Care”</p> <p>A Not Ready for Care patient is defined as a patient who is not available to be admitted to hospital until some future date, and is either:</p> <ul style="list-style-type: none"> • staged - not ready for clinical reasons • deferred - not ready for personal reasons <p>Results should be reported separately for deferred and staged patients. Note: Target applies to deferred patients only.</p>
<i>Numerator</i>	
Numerator definition	Total number of booked elective surgery patients on the waiting list collection who are recorded as Not Ready for Care for elective surgery.
Numerator source	PAS/WLCOS
Numerator availability	Available
<i>Denominator</i>	
Denominator definition	The number of elective surgical patients on the waiting list collection for elective surgery.
Denominator source	PAS/WLCOS
Denominator availability	Available
<i>Inclusions</i>	All Not Ready for Care elective surgical patients on the waitlist collection
<i>Exclusion</i>	Non surgical patients on the Waitlist
Reporting	
Reporting required by	NSW Health
Indicators reported to	<ul style="list-style-type: none"> • Surgical Services Taskforce
Next report due	Ongoing, Monthly

Targets	<ul style="list-style-type: none"> • 5% applied to deferred category and • 10% for Total Not Ready for Care Patients
Context	
Related Policies/ Programs	<ul style="list-style-type: none"> • Clinical Services Redesign Program • Waiting Time and Elective Surgery Policy 2012
Useable data available from	July 2007
Frequency of Reporting	Monthly
Time lag to available data	Reporting required by the 10 th working day of each month, data available for previous month.
Business owners	System Purchasing and Performance Division
Contact - Policy	Director, Health Service Performance Improvement Branch
Contact - Data	Director, Demand and Performance Evaluation Branch
Representation	
Data type	Numeric
Form	Number, presented as a percentage (%)
Representational layout	NNN.N
Minimum size	3
Maximum size	5

OPERATING THEATRE

INDICATOR: 9C7

**ELECTIVE SURGERY THEATRE UTILISATION:
OPERATING ROOM OCCUPANCY**

Version number

Theatre Utilisation For Elective Sessions measured as operating room occupancy, Previously known as “planned surgery utilisation”
1.1

Scope

Patients treated in dedicated elective theatre sessions.

Goal

Maximise the productivity of operating theatres in hospitals, reduce cancellations and improve the flow of patients through the hospital.

Desired outcome

Efficient access and throughput for emergency and elective surgery patients and reduction in waiting lists.

Primary point of collection

Operating Theatres

Data Collection Source/System

Patient Administration System (PAS), Operating Theatre Systems eg SurgiNet, Manual Collection.

Primary data source

Provided directly by LHDs and Networks to Ministry of Health.

Indicator definition

The percentage of time allocated to elective theatre sessions where the operating theatre (operating room) was occupied by surgery patients receiving active treatment.

Numerator

Numerator definition

The sum of ([Patient out of operating theatre/operating room date/time] – [Patient in (operating theatre/operating room) date/time]) for all patients treated during an elective theatre session.

Note:

- When a patient enters the operating theatre/operating room (within the Theatre suite) before the session start time, the actual session start time should be treated as the [patient in room date/time] for this indicator.
- The time spent in the theatre suite **but not in the operating theatre/operating room** before the session start time is considered “out-of-session” time.
- Patient in room time commences when the patient physically enters the operating theatre/operating room assigned to the elective session. This applies even when an anaesthetic or other procedure is commenced prior to the patient entering in the operating theatre/operating room.
- Similarly, when a patient leaves the theatre operating room after the allocated session end time, the session end time should be treated as the [patient out of room date/time] for this indicator. (The time spent in the theatre after the session end time is considered “out-of-session” time.)

Numerator source

Operating Theatre System

Numerator availability

Variable across sites

Denominator

Denominator definition	The time allocated to elective theatre sessions.
Denominator source	Operating theatre data collection
Denominator availability	Variable across sites

Inclusions

Surgical patients treated in operating theatres during elective sessions.

Exclusions

- Surgery performed outside elective surgery sessions.
- Periods of anaesthesia that occurred outside the operating room allocated to the session.

Targets

80%

Comments

- This indicator is intended as a measure of operating theatre/operating room use during sessions routinely allocated for elective surgery only. Activity performed outside of the operating theatre/operating room and these sessions is not included in the indicator.
- The indicator specifically relates to the time the patient is physically in the operating theatre/operating room, if the patient is anaesthetised outside the actual operating theatre/operating room, (e.g. in the anaesthetic bay/room) before the patient enters the theatre, the time is NOT counted towards utilisation of the session.

Context

In order to estimate operating theatre productivity and efficiency, a number of performance indicators are required. Surgery cannot be performed without a number of support activities, which need to be viewed in combination for a true picture of utilisation to be obtained. Operating theatre/operating room, occupancy during elective session hours is just one of a number of indicators of theatre utilisation.

Related Policies/ Programs

- Clinical Services Redesign Program
- Waiting Time and Elective Surgery Policy 2012

Useable data available from

Variable across site. State-wide collection commenced June 2006

Frequency of Reporting

Monthly

Time lag to available data

Reporting required by the 10th working day of each month, data available for previous month

Business owners

System Purchasing and Performance Division

Contact - Policy

Director, Health Service Performance Improvement Branch

Contact - Data

Director, Demand and Performance Evaluation Branch

Representation

Data type

Numeric

Form

Number, presented as a percentage (%)

Representational layout

NNN.N

Minimum size

3

Maximum size

5

Indicator S8

FIRST CASE ON TIME THEATRE PERFORMANCE

1.1

Version number

Scope

Theatre sessions

Goal

Better monitoring and continuous improvement of theatre resources.

Desired outcome

Shorter waiting times for elective non-emergency care. Better forecasting utilisation and management of surgical activity in operating theatres.

Data Collection Source/s

Operating theatres

Primary data source for analysis

Operating Theatre Information System e.g. SurgiNet, Manual.

Definition

The percentage of theatre sessions where the first case done in the session is commenced at (or before) the session start time.

Numerator

Numerator definition

Number of theatre sessions where the “patient in room (operating theatre/operating room,) time” for the first case is equal to or before the scheduled start time for the session

- Patient in room time commences when the patient physically enters the operating theatre/operating room, assigned to the session. This applies even when an anaesthetic or other procedure is commenced prior to the patient entering in the operating/theatre room.

Numerator source

Operating Theatre Information Systems, Manual

Numerator availability

Variable across sites

Denominator

Denominator definition

Total number of theatre sessions for the period

Denominator source

Operating Theatre Information Systems, Manual

Denominator availability

Variable across sites

Inclusions

Theatre sessions occurring in the reporting period

Exclusions

Planned emergency sessions

Reporting

Reporting required by

- Clinical Services Redesign Program
- Waiting Time and Elective Surgery Policy 2012

Indicators reported to

- Surgical Services Taskforce

Targets

Target

95%

Comments	<ul style="list-style-type: none"> • If the “in room time” occurs earlier than the scheduled session time it is also considered “on time”. • Except in an emergency, the patient should not enter the operating theatre/operating room, until such time as the nursing staff are ready for the patient to enter the room, active patient care will commence immediately after entry into the room (including moving the patient onto the operating table and anaesthetic preparation), and that the surgical team are available to start the planned procedure without delay.
Context	
Useable data available from	2008
Frequency of Reporting	Monthly
Time lag to available data	Reporting required by the 12th calendar day of each month, data available for previous month
Business owners	System Purchasing and Performance Division
Contact - Policy	Director, Health System Performance Improvement Branch
Contact - Data	Director, Demand and Performance Evaluation Branch
Representation	
Data type	Numeric
Form	Number, presented as a percentage (%)
Representational layout	NNN.N
Minimum size	3
Maximum size	5
Date effective	1 July 2008

Indicator S6	NUMBER OF THEATRE ATTENDANCES
Version number	4.8
Scope	Patients treated in an Operating Theatre
Goal	Shorter waiting times for elective non-emergency care, Better monitoring and continuous improvement of theatre resources.
Desired outcome	Better forecasting utilisation and management of surgical activity in operating theatres.
Primary point of collection	Operating theatres
Data Collection Source/s	Operating Theatre Information System, Manual, Patient Administration System (PAS)
Primary data source for analysis	HIE
Definition	<p>Number of theatre attendances where the commencement time was within the reporting period.</p> <p>Where:</p> <ul style="list-style-type: none"> • Each discrete theatre attendance by a patient is counted as one attendance, irrespective of the number of procedures performed during that attendance. • Where a theatre attendance continues past midnight, the attendance is counted in the day it commenced.
Data Source	Operating Theatre Information System
Data Availability	Variable at sites
Inclusions	All emergency and elective theatre attendances for surgery, other therapeutic procedures or other medical intervention e.g. dental extraction in children.
Exclusions	Nil
Reporting	
Indicators reported to	<ul style="list-style-type: none"> • Surgical Services Taskforce
Targets	
Context	
Related Policies/Programs	<ul style="list-style-type: none"> • Clinical Services Redesign Program • Waiting Time and Elective Surgery Policy 2012

Major existing uses	<ul style="list-style-type: none"> • State Plan • LHD and Network Performance Agreements/ Reviews • Annual Report • Finance Risk and Performance Management Committee (monthly)
Useable data available from	2008
Frequency of Reporting	Monthly
Time lag to available data	Reporting required by the 12th calendar day of each month, data available for previous month.
Business owners	System Purchasing and Performance Division
Contact - Policy	Director, Health System Performance Improvement Branch
Contact - Data	Director, Demand and Performance Evaluation Branch
Representation	
Data type	Numeric
Form	Number
Representational layout	N,NNN,NNN
Minimum size	1
Maximum size	7
Date effective	1 July 2007

INDICATOR: S

SURGICAL SEPARATIONS

1. Number Year to Date
2. Variance Year to date previous year

Version number	1
Scope	Acute admitted patients, all public hospitals
Goal	High quality patient outcomes and effective surgery service management
Desired outcome	To monitor and manage Health Services
Primary point of collection	Patient Medical Record
Data Collection Source/System	Hospital PAS system, Admitted Patient Data Collection
Primary data source for analysis	HIE/IQ server.
Indicator definition	<p>The total number of surgical separations occurring during the reference period. Where:</p> <ul style="list-style-type: none"> • The separation is counted at the episode level and includes both formal and statistical separations. • Records are defined as a surgical separation based on the partitioning defined in the Australian Refined Diagnosis Related Groups V6. I.e. the assigned ANDRG second and third characters are in the range 01 to 39. • Excludes Caesarian procedures <p>And is reported as:</p> <ol style="list-style-type: none"> 1. Number Year to Date 2. Variance Year to date to previous year presented as a percentage: where <ul style="list-style-type: none"> • The YTD figure is the updated count, not the previous year published YTD. i.e. includes records uncoded or not submitted at the time the previous year data was originally reported.
Data source	HIE
Data availability	Data is extracted to the HIE weekly but data entry into source systems may not be up-to-date.
Inclusions	<p>All Acute Separations: Both formal and statistical separations All Service Categories Patients who separated from hospital more than once in the period will be counted more than once in the data set</p>
Useable data available from	2000/2001
Frequency of Reporting	Monthly
Time lag to available data	Weekly extraction to HIE weekly, but data entry and coding may be several months late.

Business owners	System Purchasing and Performance Division
Contact - Policy	Director, Health Service Performance Improvement Branch
Contact - Data	Director, Demand and Performance Evaluation Branch

Representation

YTD

a) Representational layout	NN,NNN,NNN(no decimals)
Data type	Numeric
Form	Number
Minimum size	1
Maximum size	8
Date effective	01/07/2011
b) Representational layout	NNN.N
Data type	Numeric
Form	Number, presented as a percentage (%)
Minimum size	3
Maximum size	5

Indicator S2	CANCELLATIONS ON DAY OF SURGERY
Version number	5.0
Scope	All elective surgical patients in NSW Health Waiting Times Collection with a Planned Procedure Date within the reporting period.
Goal	Shorter waiting times for elective non-emergency care. To minimise the rate of cancellations on the day of planned surgery for surgical patients on the Waiting List.
Desired outcome	To effectively reduce surgery cancellations on the planned day of elective surgery for patients on the Waiting List and provide greater certainty for patient care.
Primary point of Collection	Requires appropriate data collected at time of booking and /or at time of procedure cancellation.
Data Collection Source/System	Waiting Times Collection On-Line System (WLCOS), Patient Administration System (PAS), Operating Theatre Information System eg SurgiNet, Manual
Primary data source for analysis	Currently no single data source for all base calculation requirements. Health Services will provide aggregate data to the Ministry for Health for reporting.
Definition	<p>Percentage of elective surgical patients in the NSW Health Waiting Times Collection whose surgery was cancelled* on the planned day of elective surgery.</p> <p>*Cancellation refers to the non-performance of planned surgery for any reason; The reason for cancellation should be recorded using the standard set of cancellation reason provided at the end of this definition.</p> <p style="margin-left: 40px;">Data will be reported by</p> <ul style="list-style-type: none"> • Patient related and • System related (OT related, Surgeon related, Anaesthesia related and Bed availability)
Numerator	
Numerator definition	<p>Number of elective surgical patients in the NSW Health Waiting Times Collection with a Planned Procedure Date within the reporting period, whose surgery was cancelled on the Planned Procedure Date.</p> <p>This includes all patients who had their surgery cancelled, whether or not the patient was formally admitted at the time of cancellation.</p>
Numerator source	Manual, PAS, Operating Theatre Information System

Numerator availability Date of cancellation is not universally reported and is not accommodated in the HIE extract. Will require manual reconciliation between theatre scheduling information and the Ministry reportable Waiting Times information.

Denominator

Denominator definition Number of elective surgery patients in the NSW Health Waiting Times Collection with a Planned Procedure Date within the reporting period including those who were cancelled on the day of their planned procedure.

Denominator source Waiting Times Collection On-Line System (WLCOS)/Patient Administration System (PAS)

Denominator availability Planned Procedure Date is not a mandatory field in the Waiting Times Collection however it is recorded for more than 90% of Waiting List patients who have been allocated a planned Admission Date.

Inclusions

Surgical patients in the NSW Health Waiting Times Collection who have been allocated a Planned Procedure Date

Exclusions

Patients whose Waiting List Category is not 'Elective Surgery'

Reporting

Reporting required by Surgical Services Taskforce

Indicators reported to

- Finance Risk and Performance Management Committee (Monthly)
- LHD and Networks Performance Agreements/Reviews
- Annual Report

Next report due Ongoing, Monthly

Targets

Target <2%

Comments

- This indicator is a comparative rate based indicator, which addresses the process of patient care.
- Waiting Times Collection patients are those public and private patients who are in the Waiting Times Collection and treated in a public hospital or under contract to a private hospital.

Context

The efficient management of surgical waiting list minimises cancellations on the day of planned surgery and ensures patient flow and predictable access. Cancellations should only occur occasionally, e.g. in response to an acute change in patients' medical condition.

Related Policies/Programs	<ul style="list-style-type: none"> • Clinical Services Redesign Program • Waiting Time and Elective Surgery Policy 2012
Useable data available from	2006
Frequency of Reporting	Monthly
Time lag to available data	Reporting required by the 12th calendar day of each month, data available for previous month
Business owners	System Purchasing and Performance Division
Contact – Policy	Director, Health System Performance Improvement Branch
Contact – Data	Director, Demand and Performance Evaluation Branch

Representation

Data type	Numeric
Form	Number, presented as a percentage (%)
Representational layout	NNN.NN
Minimum size	1
Maximum size	6
Date effective	1 July 2007

DAY OF SURGERY CANCELLATION REASONS

PATIENT RELATED

SN Patient No Show
 SN PT Unfit (pre-exist medical condition)
 SN PT Unfit (acute medical condition post arrival)
 SN PT Not fasted
 SN PT Not adequately prepared for surgery - other
 SN PT Refused surgery
 SN PT No longer required surgery
 SN PT Related - other
 WL PT Treated elsewhere
 WL PT Not contactable
 WL PT Deceased

OPERATING THEATRE RELATED

SN OR List overbooked
 SN OR Preceding case/s overrun
 SN OR Preceding case/s delayed
 SN OR Emergency case/s displace routine
 SN OR Surgical nursing staff shortage
 SN OR PACU nursing shortage/closure
 SN OR Patient delayed in ward
 SN OR Theatre orderly shortage/delay
 SN OR Radiographer unavailable
 SN OR Equipment/Instrument problem/unavailability
 SN OR Blood product shortage/unavailable
 SN OR Related - other

SURGEON RELATED

SN SU Surgeon unavailable
 SN SU Surgical assistants unavailable
 SN SU Surgeon late
 SN SU Consent form not completed
 SN SU Wrong operation booked
 SN SU Surgeon related other

ANAESTHESIA-RELATED

SN AN Anaesthetist unavailable
 SN AN Anaesthetic assistant not avail
 SN AN Anaesthetist late
 SN AN Perfusionist not available
 SN AN Anaesthetic nurse/tech unavailable
 SN AN Anaesthetic equipment not available
 SN AN Anaesthesia-related

BED AVAILABILITY

SN Bed No DO/EDO bed available
 SN Bed No ward bed available
 SN Bed No HDU bed available
 SN Bed No ICU bed available
 SN Bed No CCU bed available
 SN Bed No isolation bed available
 SN Bed Other

EMERGENCY THEATRE ACCESS

Indicator S9

EMERGENCY SURGERY ACCESS

Version number	1.1
Scope	Emergency Theatre Attendances
Goal	Better monitoring and continuous improvement of theatre resources.
Desired outcome	Better forecasting utilisation and management of surgical activity in operating theatres.
Data Collection Source/s	Operating theatres
Primary data source for analysis	Operating Theatre Information System, Manual, Patient Administration System (PAS)
Definition	<p>The percentage of patients within each of the Emergency Surgery priority categories (provided below), where the time between the theatre booking request and patients arrival in the theatre suite is equal to or less than the recommended time for that category.</p> <p>The Emergency Surgery priority categories are:</p> <ul style="list-style-type: none"> ● Immediate Life threatening - The patient is in immediate risk of loss of life , shocked or moribund, resuscitation not providing positive physiological response (Recommended time to theatre – within 15 minutes) ● Life threatening - The patient has a life threatening condition but is responding to resuscitative measures. (Recommended time to theatre – within 1 hour) ● Organ/limb threatening - The patient is physiologically stable but there is immediate risk of organ survival or systemic decomposition. (Recommended time to theatre – within 4 hours) ● Non critical, emergent - The patient is physiologically stable but the surgical problem may undergo significant deterioration if left untreated. (Recommended time to theatre – within 8 hours) ● Non critical, non emergent, urgent - The patient's condition is stable. No deterioration is expected. (Recommended time to theatre – 24 hours) ● Semi urgent, not stable for discharge - The patient's condition is stable. No deterioration is expected but the patient is not suitable to be discharged. (Recommended time to theatre – within 72 hours)

Numerator

Numerator definition Number of Emergency Surgery patients where time between the theatre “booking time” and the patients arrival in the theatre suite is less than or equal to the time recommended for the allocated Emergency Surgery priority category.

Numerator source Operating theatre system

Numerator availability

Denominator

Denominator definition Total number of Emergency Surgery patients

Denominator source Operating theatre system

Denominator availability

Inclusions

Patients who have been allocated an Emergency Surgery priority category and whose surgery commenced in the reporting period.

Exclusions

Reporting

Reporting required by Surgical Services Taskforce

- Indicators reported to
- Finance Risk and Performance Management Committee (Monthly)
 - LHD and Networks Performance Agreements/Reviews
 - Annual Report

Targets

- Target
- Immediate Life threatening (within 15 minutes) 100%
 - Life threatening (within 1 hour) 100%
 - Organ/limb threatening (within 4 hours) 85%
 - Non critical, emergent (within 8 hours) 85%
 - Non critical, non emergent, urgent (within 24 hours) 85%
 - Semi urgent, not stable for discharge (within 72 hours)95%

Time frame for target

Lower /upper age limit N/A

Sex N/A

Geographical area of interest Hospital/Area/State

Related Policies/Programs

- Clinical Services Redesign Program
- Waiting Time and Elective Surgery Policy 2012

Major existing uses	<ul style="list-style-type: none"> • State Plan • Performance Agreements/ Reviews • Annual Report • Finance Risk and Performance Management Committee (monthly)
Useable data available from	
Frequency of Reporting	Monthly
Time lag to available data	Reporting required by the 12th calendar day of each month, data available for previous month
Business owners	System Purchasing and Performance Division
Contact - Policy	Director, Health System Performance Improvement Branch
Contact - Data	Director, Demand and Performance Evaluation Branch
Representation	
Data type	Numeric
Form	Number, presented as a percentage (%)
Representational layout	NNN.NN
Minimum size	3
Maximum size	6
Date effective	1 July 2008

ADMISSION

Indicator S1

DAY OF SURGERY ADMISSIONS

Version number

5.0

Scope

All elective surgical patients in the NSW Health Waiting Times Collection whose intended length of stay is overnight.

Goal

Better management of waiting lists.

Desired outcome

To improve management of waiting lists and clinical outcomes for patients waiting for elective procedures.

Primary point of collection

Waiting List / Booking List Clerk

Data Collection Source/System

Waiting List Collection On-Line System (WLCOS)
Patient Administration System (PAS)

Primary data source for analysis

Health Information Exchange (HIE), WLCOS

Definition

The percentage of surgical patients in the NSW Health Waiting Times Collection whose discharge intention is 'overnight', and who are intended to be admitted on the day of their elective surgery.

Numerator

Numerator definition

Number of surgical patients in the NSW Health Waiting Times Collection whose discharge intention is 'overnight', and who are intended to be admitted on the day of their planned surgery (Planned Admission Date (PAD)/To Come In (TCI) = Planned Procedure Date).

Numerator source

WLCOS / PAS

Numerator availability

Monthly

Denominator

Denominator definition

Number of surgical patients in the NSW Health Waiting Times Collection whose discharge intention is 'overnight'.

Denominator source

WLCOS / PAS

Denominator availability

Monthly

Inclusions

Surgical patients in the NSW Health Waiting Times Collection whose discharge intention is 'overnight'.

Exclusions

Patients whose Waiting List Category is not 'Elective Surgery'
Patients whose intended length of stay is 'Same Day'.

Reporting

Reporting required by

NSW Health

Indicators reported to

- Surgical Service Taskforce

Next report due	Ongoing, Monthly
Targets	
Target	90%
Time frame for target	N/A
Lower/upper age limit	N/A
Sex	N/A
Geographical area	Whole State/AHS
Comments	
Context	Admitting patients on the day of their procedure means that they don't have to spend unnecessary time in hospital before surgery.
Related Policies/Programs	<ul style="list-style-type: none"> • Clinical Services Redesign Program • Waiting Time and Elective surgery policy 2012
Major existing uses	<ul style="list-style-type: none"> • State Plan • Performance Agreements/ Reviews • Annual Report • Finance Risk and Performance Management Committee (monthly)
Useable data available from	July 2000
Frequency of Reporting	Monthly
Time lag to available data	Reporting required by the 12th calendar day of each month, data available for previous month.
Business owners	System Purchasing and Performance Division
Contact – Policy	Director, Health System Performance Improvement Branch
Contact – Data	Director, Demand and Performance Evaluation Branch
Representation	
Data type	Numeric
Form	Number, presented as a percentage (%)
Representational layout	NNN.NN
Minimum size	1
Maximum size	6
Date effective	1 July 2007

Indicator S4	EXTENDED DAY ONLY PERFORMANCE FOR TARGETED PROCEDURES
Version number	5.0
Scope	All patients who were admitted to hospital for elective surgery.
Goal	To maximise the utilization of bed occupancy, efficiency of operating theatres and provide patients with flexible admission times.
Desired outcome	To provide certainty in the availability of resources to carry out elective surgery and reduction of waiting lists.
Primary point of collection	Completion of front sheet/discharge summary at the end of an inpatient episode.
Data Collection Source/s	Patient Administration System (PAS), Inpatient Data Collection
Primary data source for analysis	HIE
Definition	<p>The percentage of all elective admitted patient episodes with a DRGs in the target group* who were treated as Day Only or Extended Day Only (EDO).</p> <p>* The target group of DRGs are those identified in Policy PD2011_045 and are provided at the end of this definition. This group of DRGs has been identified as being suitable for EDO admission and is not exclusive. Other DRGs may appropriately be admitted as EDO.</p>
<i>Numerator</i>	
Numerator definition	The number of elective admitted patient episodes with a DRG in the target group who were admitted and separated within 28 hours i.e. [discharge_date_time] – [admission_date_time] <= 27 hours 59 minutes
Numerator source	Admitted Patient Data Collection
Numerator availability	Monthly
<i>Denominator</i>	
Denominator definition	The number of elective admitted patient episodes with a DRG in the target group
Denominator source	Admitted Patient Data Collection
Denominator availability	Available, Monthly
<i>Inclusions</i>	Admitted patient episodes with a DRG in the target group
<i>Exclusions</i>	Emergency Admissions
Reporting	
Reporting required by	NSW Health

Indicators reported to	Surgical Services Taskforce
Next report due	
Targets	
Target	80%
Time frame for target	N/A
Lower /upper age limit	N/A
Sex	N/A
Geographical area of interest	Whole State/LHDS and Networks
Context	To ensure that people have predictable and timely access to appropriate surgical services.
Related Policies/Programs	<ul style="list-style-type: none"> • Clinical Services Redesign Program • Extended Day Only Admission Policy PD2011_045 • Waiting Time and Elective Surgery Policy 2012
Major existing uses	<ul style="list-style-type: none"> • State Plan • Performance Agreements/ Reviews • Annual Report • Finance Risk and Performance Management Committee (monthly)
Time lag to available data	Reporting required by the 12th calendar day of each month, EDO coded data may be 3 (three) months behind, depending on clinical coding completeness at individual facilities
Business owners	System Purchasing and Performance Division
Contact - Policy	Director, Health System Performance Improvement Branch
Contact – Data	Director, Demand and Performance Evaluation Branch
Representation	
Data type	Numeric
Form	Number, presented as a percentage (%).
Representational layout	NNN.NN
Minimum size	3
Maximum size	6
Date effective	1 July 2007

: EXTENDED DAY ONLY (EDO) ADMISSION POLICY PROCEDURES

Source: PD2011_045 Issue date: July 2011

AN_DRG Version 6 Descriptions of Diagnosis Related Groups identified as suitable for Extended Day Only Admission

A12Z Insertion of Neurostimulator Device
B05Z Carpal Tunnel Release
B06A Procs for Cerebral Palsy, Muscular Dystrophy, Neuropathy W CC
B06B Procs for Cerebral Palsy, Muscular Dystrophy, Neuropathy W/O CC
B07B Peripheral and Cranial Nerve and Other Nervous System Procedures W/O CC
C01Z Procedures for Penetrating Eye Injury
C02Z Enucleations and Orbital Procedures
C03Z Retinal Procedures
C04Z Major Corneal, Scleral and Conjunctival Procedures
C05Z Dacryocystorhinostomy
C10Z Strabismus Procedures
C11Z Eyelid Procedures
C12Z Other Corneal, Scleral and Conjunctival Procedures
C13Z Lacrimal Procedures
C14Z Other Eye Procedures
C15A Glaucoma and Complex Cataract Procedures
C15B Glaucoma and Complex Cataract Procedures, Sameday
C16Z Lens Procedures
D01Z Cochlear Implant
D02C Head and Neck Procedures W/O Malignancy W/O CC
D04A Maxillo Surgery W CC
D04B Maxillo Surgery W/O CC
D06Z Sinus and Complex Middle Ear Procedures
D10Z Nasal Procedures
D11Z Tonsillectomy and/or Adenoidectomy
D12Z Other Ear, Nose, Mouth and Throat Procedures
D13Z Myringotomy W Tube Insertion
D14Z Mouth and Salivary Gland Procedures
D15Z Mastoid Procedures
E02B Other Respiratory System OR Procedures W Severe or Moderate CC
E02C Other Respiratory System OR Procedures W/O CC
F01B Implantation or Replacement of AICD, Total System W/O Catastrophic CC
F02Z Other AICD Procedures
F09C Other Cardiothoracic Procedures W/O CPB Pump W/O CC
F10B Interventional Coronary Procedures W AMI W/O Catastrophic CC
F12B Implantation or Replacement of Pacemaker, Total System W/O Catastrophic CC
F14B Vascular Procs Except Major Reconstruction W/O CPB Pump W Sev or Mod CC
F14C Vascular Procs Except Major Reconstruction W/O CPB Pump W/O CC
F15A Interventional Coronary Procs W/O AMI W Stent Implantation W Cat or Sev CC
F15B Interventional Coronary Procs W/O AMI W Stent Implantation W/O Cat or Sev CC
F16A Interventional Coronary Procedures W/O AMI W/O Stent Implantation W CC
F16B Interventional Coronary Procedures W/O AMI W/O Stent Implantation W/O CC
F17A Insertion or Replacement of Pacemaker Generator W Catastrophic or Severe CC
F17B Insertion or Replacement of Pacemaker Generator W/O Catastrophic or Severe CC

F18A Other Pacemaker Procedures W CC
F18B Other Pacemaker Procedures W/O CC
F19Z Trans-Vascular Percutaneous Cardiac Intervention
F20Z Vein Ligation and Stripping
F21B Other Circulatory System OR Procedures W/O Catastrophic CC
G07B Appendectomy W/O Malignancy or Peritonitis W/O Cat or Sev CC
G10B Hernia Procedures W/O CC
G11Z Anal and Stomal Procedures
G12B Other Digestive System OR Procedures W Severe or Moderate CC
G12C Other Digestive System OR Procedures W/O CC
H02C Major Biliary Tract Procedures W/O Catastrophic or Severe CC
H05B Hepatobiliary Diagnostic Procedures W/O Catastrophic CC
H06B Other Hepatobiliary and Pancreas OR Procedures W/O Catastrophic CC
H08B Laparoscopic Cholecystectomy W/O Closed CDE W/O Cat or Sev CC
I02B Skin Graft W/O Catastrophic or Severe CC, Excluding Hand
I11Z Limb Lengthening Procedures
I12C Infect/Inflam of Bone and Joint W Misc Musculoskeletal Procs W/O CC
I13B Humerus, Tibia, Fibula and Ankle Procedures W/O CC
I16Z Other Shoulder Procedures
I17A Maxillo-Facial Surgery W CC
I17B Maxillo-Facial Surgery W/O CC
I18Z Other Knee Procedures
I19B Other Elbow or Forearm Procedures W/O CC
I20Z Other Foot Procedures
I21Z Local Excision and Removal of Internal Fixation Devices of Hip and Femur
I23Z Local Excision and Removal of Internal Fixation Devices Excl Hip and Femur
I24Z Arthroscopy
I25A Bone and Joint Diagnostic Procedures Including Biopsy W CC
I25B Bone and Joint Diagnostic Procedures Including Biopsy W/O CC
I27B Soft Tissue Procedures W/O CC
I28B Other Musculoskeletal Procedures W/O CC
I29Z Knee Reconstruction or Revision
I30Z Hand Procedures
J06Z Major Procedures for Breast Conditions
J07Z Minor Procedures for Breast Conditions
J08A Other Skin Graft and/or Debridement Procedures W CC
J08B Other Skin Graft and/or Debridement Procedures W/O CC
J09Z Perianal and Pilonidal Procedures
J10Z Skin, Subcutaneous Tissue and Breast Plastic OR Procedures
J11Z Other Skin, Subcutaneous Tissue and Breast Procedures
J12C Lower Limb Procs W Ulcer/Cellulitis W/O Cat CC W/O Skin Graft/Flap Repair
J13B Lower Limb Procs W/O Ulcer/Cellulitis W/O Cat CC W/O (Skin Graft and Sev CC)
K04B Major Procedures for Obesity W/O CC
K05B Parathyroid Procedures W/O Catastrophic or Severe CC
K06B Thyroid Procedures W/O Catastrophic or Severe CC
K08Z Thyroglossal Procedures
K09C Other Endocrine, Nutritional and Metabolic OR Procedures W/O CC
L02B Operative Insertion of Peritoneal Catheter for Dialysis W/O Cat or Sev CC
L04C Kidney, Ureter & Major Bladder Procedures for Non-Neoplasm W/O Cat or Sev CC
L06B Minor Bladder Procedures W/O Catastrophic or Severe CC

L07A Transurethral Procedures Except Prostatectomy W CC
L07B Transurethral Procedures Except Prostatectomy W/O CC
L08A Urethral Procedures W CC
L08B Urethral Procedures W/O CC
L09B Other Procedures for Kidney and Urinary Tract Disorders W Sev CC
L09C Other Procedures for Kidney and Urinary Tract Disorders W/O Cat or Sev CC
M03Z Penis Procedures
M04Z Testes Procedures
M05Z Circumcision
M06A Other Male Reproductive System OR Procedures W CC
M06B Other Male Reproductive System OR Procedures W/O CC
N05B Oophorectomies & Complex Fallopian Tube Procs for Non-Malig W/O Cat or Sev CC
N06B Female Reproductive System Reconstructive Procs W/O Catastrophic or Severe CC
N07Z Other Uterine and Adnexa Procedures for Non-Malignancy
N08Z Endoscopic and Laparoscopic Procedures for Female Reproductive System
N09Z Conisation, Vagina, Cervix and Vulva Procedures
N10Z Diagnostic Curettage or Diagnostic Hysteroscopy
N11Z Other Female Reproductive System OR Procedures
O03B Ectopic Pregnancy W/O CC
O04A Postpartum and Post Abortion W OR Procedure W Catastrophic or Severe CC
O04B Postpartum and Post Abortion W OR Procedure W/O Catastrophic or Severe CC
O05Z Abortion W OR Procedure
Q02A Other OR Procedure of Blood and Blood Forming Organs W Cat or Sev CC
Q02B Other OR Procedure of Blood and Blood Forming Organs W/O Cat or Sev CC
R01B Lymphoma and Leukaemia W Major OR Procedures W/O Catastrophic or Severe CC
R03B Lymphoma and Leukaemia W Other OR Procedures W/O Catastrophic or Severe CC
R04A Other Neoplastic Disorders W Other OR Procedures W CC
R04B Other Neoplastic Disorders W Other OR Procedures W/O CC
T01C OR Procedures for Infectious and Parasitic Diseases W/O CC
X02A Microvascular Tiss Transfer or (Skin Graft W Cat/Sev CC) for Injuries to Hand
X02B Skin Graft for Injuries to Hand W/O Catastrophic or Severe CC
X04B Other Procedures for Injuries to Lower Limb W/O Catastrophic or Severe CC
X05A Other Procedures for Injuries to Hand W CC
X05B Other Procedures for Injuries to Hand W/O CC
X06B Other Procedures for Other Injuries W/O Catastrophic or Severe CC
X07B Skin Graft for Injuries Ex Hand W/O Microvascular Tiss Tfr W/O Cat or Sev CC
Y02B Other Burns W Skin Graft W/O CC
Y03Z Other OR Procedures for Other Burns