

5 Non-admitted patient emergency department care

Introduction

This chapter presents information on public hospital emergency department care for non-admitted patients. The types of data used were:

- Detailed episode-level data for 4,529,412 non-admitted patient emergency department occasions of service. These records include information on waiting times, triage category and the proportions of patients admitted to hospital (Tables 5.3 and 5.4), as well as information on the sex and age of the patient, the type of visit, the triage category the patient was assigned at the time of presentation, their mode of arrival at the emergency department, their departure status, the waiting time until attended by a health care professional and the total duration of the non-admitted patient emergency department care (Tables 5.5 to 5.10).
- Summary information on the total number of accident and emergency occasions of service for all public hospitals (5,993,248 occasions of service) (Tables 5.2 and 5.3). These occasions of service include those for which the detailed episode-level data were available. Occasions of service for which the detailed data were not available mostly occurred in hospitals not required to report to the NMDS or in hospitals that did not have an emergency department.

Table 5.1 includes summary data from both these data sources. Due to differences in the collection, scope and coverage of the sources of data (as detailed below), the statistics in this chapter should be interpreted with reference to the notes on the data collections in this chapter, in Chapter 1 and in Appendix 4.

The detailed information presented for all episode-level records in Tables 5.4 to 5.10 should be interpreted with caution as the data may not be representative of emergency department occasions of service for hospitals which were not required to provide data for non-admitted patient emergency department care. The proportion of accident and emergency occasions of service for which detailed episode-level data was available was about 99% for *Principal referral and specialist women's and children's hospitals* and *Large hospitals* (peer group A and B hospitals), and about 76% for all hospitals (Table 5.1).

In *Australian hospital statistics* reports before 2003–04, data on accident and emergency occasions of service were presented in Chapter 2 and data on emergency department waiting times were presented in Chapter 4.

Data sources

Non-admitted Patient Emergency Department Care Database

The detailed episode-level data are sourced from the AIHW's National Non-admitted Patient Emergency Department Care Database (NAPEDCD), a compilation of episode-level data for emergency department occasions of service in public hospitals. The database is based on the National Minimum Data Set (NMDS) for Non-admitted patient emergency department care, as defined in the *National health data dictionary* version 12.0 (NHDC 2003).

The scope of the NMDS for Non-admitted patient emergency department care is non-admitted patients registered for care in emergency departments in selected public hospitals that were classified as either peer group A (*Principal referral and specialist women's and children's hospitals*) or B (*Large hospitals*) in *Australian hospital statistics 2003–04* (AIHW 2005a). The peer group classification was developed for the cost per casemix-adjusted separation analysis based on admitted patient activity. The use of this classification as an interim measure to define the scope of this collection is under review. Data was also provided by some states and territories for hospitals in peer groups other than A and B, as described below.

Limitations of the data

This is the second year that these episode-level data on emergency department care have been collected on a national basis and, as certain issues of definition have not been resolved, comparability across jurisdictions may be limited. For example:

- There is variation in the point at which the occasion of service is recorded as completed for those patients subsequently admitted within the emergency department and/or elsewhere in the hospital. For more detail see *Australian hospital statistics 2003–04* (AIHW 2005a). This variation is likely to have significantly impacted on the comparability of data on the duration of the occasions of service (Table 5.10).
- There is also some variation in the occasions of service reported as subsequently admitted over time.

National Public Hospital Establishments Database

Data on accident and emergency occasions of service were sourced from the National Public Hospital Establishments Database (NPHEd), which has essentially full coverage of public hospitals (see Appendix 4). For the purposes of this report, accident and emergency occasions of service refer to those occasions of service reported with a Type of non-admitted patient care of *Emergency services*. There were variations in the type of activity reported for accident and emergency occasions of service. South Australia's NPHEd occasions of service data included emergency presentations only. For all other states and territories, both emergency presentations and other types of occasions of service (see below) were included, at least for hospitals reporting episode-level data. For Tasmania, the NPHEd accident and emergency occasions of service data did not include patients who were dead on arrival, however, they were included in the episode-level data. The waiting times data for 2001–02 and 2002–03 presented in Table 5.3 were sourced from the aggregate waiting times data provided by the states and territories as part of NPHEd.

Variations in methods for collection and analysis

Due to differences over time in the coverage, method of collection and method of analysis for data on waiting times and proportion admitted data should be interpreted with caution.

For 2004–05 all states and territories reported waiting times data as part of the episode-level data.

For 2003–04, the waiting times data for South Australia presented in Tables 5.3 and 5.4 included aggregated unit-record level data for 5 hospitals that were not in peer group A or B. For 2002–03, the Emergency Department Waiting Times Data did not include one peer group A hospital in New South Wales, one peer group A and 11 peer group B hospitals in Victoria. For 2002–03, Western Australia also provided aggregate data for 74 *Medium* and *Small* hospitals, and South Australia provided data for six *Medium* hospitals. Estimated coverage overall was 71% in 2002–03 and 63% in 2001–02 (Table 5.3).

For 2003–04 and 2004–05, the number of patients seen on time was determined as the number of patients in each triage category whose waiting time was less than or equal to the maximum waiting time stated in the National Triage Scale definition. *Resuscitation* patients whose waiting time for treatment was less than or equal to 2 minutes were considered to have been seen on time. For 2003–04, *Resuscitation* patients for South Australia were considered to have been seen on time using a cut-off point of one minute.

For 2001–02 and 2002–03, the number of patients seen on time was supplied by the states and territories as part of the summary data provided to NPHED. For those years, the criteria for calculating the proportion of *Resuscitation* patients who were seen on time varied between jurisdictions, with a cut-off point of less than 1 minute for Tasmania and the Northern Territory, less than or equal to 1 minute for Victoria, Queensland and South Australia and less than or equal to 2 minutes for New South Wales and Western Australia.

Hence, data on the proportion of *Resuscitation* patients who were seen on time are not completely comparable between 2003–04 and 2004–05 and earlier years, and the data for 2003–04 and 2004–05 will differ from data calculated on state-based criteria for Victoria, Queensland, South Australia, Tasmania and the Northern Territory.

The median and 90th percentile waiting times to service delivery are presented for 2003–04 and 2004–05 data only as these data were not available in the aggregated data collections for 2001–02 and 2002–03.

For 2004–05, the estimated number of patients subsequently admitted included those occasions of service with episode-level data for which the departure status was reported as *Admitted to this hospital*. For 2003–04, the estimated number of patients subsequently admitted included those occasions of service with episode-level data for which the departure status was reported as *Admitted to this hospital*, except for South Australia, Western Australia and Victoria (for which aggregate data were used). For 2001–02 and 2002–03, the estimated proportion of patients subsequently admitted was supplied by the states and territories as part of the aggregate data provided for NPHED.

Overview

Table 5.1 presents information on the number of accident and emergency occasions of service reported to NPHED as well as the number of emergency department occasions of service reported to the NAPEDCD, by hospital peer group and state or territory. Episode-level data were provided for 73 *Principal referral and specialist women's and children's hospitals*, 43 *Large*

hospitals and 32 *Other hospitals* (not classified in peer groups A or B). The table includes estimates of the coverage of the NAPEDCD, calculated as the proportion of accident and emergency occasions of service reported to NPHED that were also reported as episode-level data in the NAPEDCD.

For 2004–05, all states and territories were able to provide episode-level data to the National Non-admitted Patient Emergency Department Care Database for all public hospitals in peer groups A and B that have emergency departments (that is 100% of hospitals that were required to report episode-level data). However, data were not available for all accident and emergency occasions of service and for hospitals in peer groups A and B, the overall coverage was estimated as approximately 99% (Table 5.1). For states or territories that reported a greater number of episode-level records than occasions of service by peer group of hospital, the coverage for that peer group has been reported as 100%.

Some states and territories also provided episode-level data for public hospitals which were classified to other peer groups (in addition to the required NAPED NMDS scope of peer group A and B hospitals), and these data have been included in this chapter. The Northern Territory supplied episode-level data for all public hospitals, New South Wales provided data for 14 *Medium hospitals* and two *Small acute hospitals*, Victoria provided data for eight *Medium hospitals*, South Australia provided data for one *Medium hospital* and Western Australia provided data for two *Medium hospitals* and two *Small remote hospitals*. The NAPEDCD provides detailed information on about 76% of all public hospitals accident and emergency occasions of service. This proportion was estimated as the number of episode-level occasions of service divided by the total number of accident and emergency occasions of service reported. This may underestimate the proportion because some accident and emergency occasions of service are for other than emergency presentations. The proportion for all public hospitals ranged from 100% for the Australian Capital Territory and the Northern Territory to 64% for Queensland (Table 5.1).

Remoteness Area of hospital

Table 5.2 presents data on accident and emergency non-admitted occasions of service in public hospitals by Remoteness Area of the hospital. These data are derived from the occasions of service data provided to the NPHED for 2004–05 (see Table 5.1).

There was a total of 5,993,248 accident and emergency occasions of service reported for 2004–05, including 3,220,282 (53.7%) in *Major cities* and 1,477,231 (24.7%) in *Inner regional* areas.

Table 5.2 also presents the ratio of the number of occasions of service provided in the area to the number of residents in the area. This represents an approximation of the utilisation of accident and emergency services by the resident population, as services provided in one area may be provided to persons residing in other Remoteness Area categories. The analysis by Remoteness Area is of less relevance to geographically smaller jurisdictions and those jurisdictions with smaller populations residing in remote areas (such as Victoria and the Australian Capital Territory). For Victoria, it was not possible to separately identify accident and emergency occasions of service in hospital campuses located in remote areas.

The ratio varied from 242 per 1,000 population in *Major cities* to 376 per 1,000 population in *Regional* areas and 828 per 1,000 population in *Remote* areas. The pattern of utilisation may reflect a number of factors including the availability of other health care services (such as primary care practitioners), patterns of occurrence of accidents causing injury, and the

relatively poor health of Indigenous people who have higher population concentrations in remote areas.

Triage category and other data elements reported for emergency department care

Figure 5.1 presents data on patients who were assigned a triage category of *Emergency* at the time of presentation at the emergency department. The information presented for the total occasions of service and for counts by state and territory and by hospital peer group were based on the episode-level non-admitted patient emergency department care data.

There were 356,543 emergency department occasions of service that were assigned a triage category of *Emergency* in 2004–05. They were reported by 73 hospitals that were classified as *Principal referral and specialist women's and children's hospitals*, 43 *Large hospitals* and 32 *Other hospitals*. The average length of the service episode (from triage to the end of the non-admitted patient emergency department occasion of service) for *Emergency* patients was 5 hours and 21 minutes, ranging from 3 hours and 58 minutes for patients who presented to an emergency department in a hospital in a peer group other than A or B to 5 hours and 40 minutes for patients who presented to an emergency department in a *Principal referral and specialist women's and children's hospital*. Overall, 76% of *Emergency* patients were seen within a clinically appropriate time. The median waiting time for an *Emergency* patient was 5 minutes, and 90% of *Emergency* patients were seen within 22 minutes. The proportion of *Emergency* patients who were subsequently admitted ranged between 44% in *Other hospitals* to 67% in *Principal referral and specialist women's and children's hospitals*.

Almost 57% of *Emergency* patients were male, and the most common age group was 45–64 years. Almost half of *Emergency* patients arrived at the emergency department by *Other transport* while just over 48% arrived by *Ambulance* and about 63% of *Emergency* patients had a departure status of *Admitted to this hospital* (which includes admission within the emergency department). Almost a quarter of all *Emergency* patients arrived at the emergency department between 10am and 2pm, and the number of arrivals for these patients was lowest between 4am and 6am.

Waiting times

The *National health data dictionary* definition for Emergency department waiting time to service delivery is 'The time elapsed for each patient from presentation in the emergency department to commencement of service by a treating medical officer or nurse'. Waiting times statistics are presented in Tables 5.3 and 5.4 by triage category and hospital peer group. Emergency department waiting times are regarded as indicators of responsiveness of the acute care sector (see Chapter 4).

The triage category indicates the urgency of the patient's need for medical and nursing care (NHDC 2003). It is usually assigned by triage nurses to patients at, or shortly after, the time of presentation to the emergency department, in response to the question 'This patient should wait for medical care no longer than...?'. The National Triage Scale has five categories that incorporate the time by which the patient should receive care:

- Resuscitation: immediate (within seconds)
- Emergency: within 10 minutes

- Urgent: within 30 minutes
- Semi-urgent: within 60 minutes
- Non-urgent: within 120 minutes.

Changes 2001–02 to 2004–05

Table 5.3 presents national emergency department waiting times data by public hospital peer group and triage category for the years 2001–02 to 2004–05. Due to differences over time in the scope, method of collection and method of analysis these data should be interpreted with caution.

The data for 2004–05 include only those episodes where the type of visit was reported as *Emergency presentation* or was *Not reported*. For 2004–05, for episodes with an *Emergency presentation* type of visit, the waiting time was missing or invalid for 11,439 records, and there were 224,889 records with a departure status of *Did not wait* or *Dead on arrival*. These records are presented in the counts of occasions of service but were excluded from the calculations of the proportions seen on time and the median and 90th percentile waiting times presented in Tables 5.3 and 5.4.

For 2003–04, the data for South Australia and for some Western Australian data were provided without information on the type of visit. The data for 2001–02 and 2002–03 were sourced from the aggregate waiting times data provided by the states and territories as part of NPHED. The estimated proportion of emergency presentations for 2001–02 and 2002–03 was calculated using the assumption that all occasions of service reported were emergency presentations (for which waiting times are applicable). This assumption was also used for the South Australian and Western Australian waiting times data for 2003–04. Based on these estimates the coverage for hospitals in peer groups A and B increased from 88% in 2001–02 to 99% in 2004–05. Over the same period, the NAPEDCD data as a proportion of all public hospital accident and emergency occasions of service increased from 63% to 76%.

In 2004–05 there were 5,993,248 accident and emergency occasions of service reported for public hospitals to NPHED, and there were 4,529,412 emergency presentations reported to NAPEDCD. Between 2001–02 and 2004–05 the number of accident and emergency occasions of service increased by 4.1% from 5,754,666 (Table 5.3). However, this may reflect the inclusion of non-emergency presentation occasions of service for some jurisdictions for the 2003–04 and 2004–05 data that may not have been previously provided.

The proportion of emergency visits by triage category remained fairly stable between 2001–02 and 2004–05. For 2004–05 approximately 1% of patients who presented at an emergency department in 2004–05 were assigned a triage category of *Resuscitation*, while 8% were *Emergency*, 32% were *Urgent*, 47% were *Semi-urgent* and 12% were *Non-urgent*.

For the period 2001–02 to 2004–05, for all triage categories combined, the number of patients seen on time for all hospitals increased from 64% to 69%. The proportion of patients seen on time remained relatively stable for most triage categories and increased each year for the *Urgent* and *Semi-urgent* categories. The median waiting time to service delivery was 25 minutes for both 2003–04 and 2004–05, and was fairly stable across all triage categories and for all hospitals. For 2004–05, 90% of all emergency department patients were attended by a health care professional within 121 minutes, compared to 124 minutes in 2003–04.

The proportion of patients subsequently admitted decreased between 2000–01 and 2004–05 for all triage categories and for both *Principal referral and specialist women's and children's*

hospitals and *Large hospitals*. Nationally, the proportion of patients subsequently admitted decreased from 30% in 2001–02 to 28% in 2004–05.

States and territories, 2004–05

Table 5.4 presents the number of occasions of service where the type of visit was reported as *Emergency presentation* or was *Not reported* by triage category, public hospital peer group and state or territory in 2004–05, the proportions of these visits that were seen on time and subsequently admitted, and the median and 90th percentile waiting time to service delivery.

There was some variation among the states and territories in the proportions of patients in each triage category. Overall, Queensland had the lowest proportion of *Resuscitation* emergency visits (0.6%) while the Australian Capital Territory reported the highest proportion (1.1%). For the triage category *Non-urgent*, the Australian Capital Territory reported the highest proportion (15.6%), and South Australia reported the lowest (5.1%).

For the purpose of this report, a patient with a triage category of *Resuscitation*, was considered to be seen on time if their waiting time to service delivery was less than or equal to two minutes. There is some variation between jurisdictions in the criteria used to determine the proportion of *Resuscitation* patients seen on time, therefore these data may differ from those reported by individual jurisdictions.

Overall, for all triage categories, the proportion of patients receiving emergency department care within the required time was 69%, ranging from 58% in the Australian Capital Territory to 79% in Victoria. Nationally, approximately 100% of *Resuscitation* patients, and 76% of *Emergency* patients were seen on time. There was marked variation between states and territories in the median and 90th percentile waiting times to service delivery. For Victoria, 50% of patients were treated by a medical officer or nurse within 16 minutes, while for the Australian Capital Territory 50% of patients were treated within 40 minutes. The length of time by which 90% of patients were treated also varied; from 103 minutes in Victoria to 152 minutes in the Australian Capital Territory.

The comparability of the data may be influenced by the comparability of the triage categories among the states and territories. Although the triage category is not a measure of the need for admission to hospital, the proportions of patients in each category that were admitted can be used as an indication of the comparability of the triage categorisation.

Nationally, 28% of all *Emergency presentations* were subsequently admitted to the hospital. New South Wales, Victoria and Tasmania had higher proportions of patients subsequently admitted than the national figures in the triage categories *Resuscitation* and *Emergency*, while Western Australia had the lowest proportion of *Urgent* patients subsequently admitted.

Type of emergency department visit

Table 5.5 presents occasion of service statistics by type of visit, hospital peer group and state or territory for 2004–05 for the Non-admitted patient emergency department care data.

The data element type of visit to emergency department describes the reason the patient presented to the emergency department. The type of visit can be reported as *Emergency presentation*, *Return visit-planned*, *Pre-arranged admission*, *Patient in transit* (to another facility) or *Dead on arrival*. Not all states and territories reported occasions of service for all categories of type of visit. Tasmania did not report any occasions of service with a type of visit of *Pre-*

arranged admission or *Patient in transit*, while the Northern Territory did not report any occasions of service with a type of visit of *Pre-arranged admission*.

Nationally, 95.7% of occasions of service were *Emergency presentations*, while 3.3% were reported as *Return visit-planned*. The proportion of occasions of service varied by state or territory and by hospital peer group. Over 97% of emergency department occasions of service were *Emergency presentations* for hospitals in peer group A, compared to about 91% for hospitals in peer groups other than A and B. New South Wales had the highest proportion of occasions of service that were reported as *Emergency presentations* (96.8%), and for Western Australia 4.6% of occasions of service were reported as *Pre-arranged admission*.

Sex and age group

Table 5.6 presents data on the sex and age group of patients who presented to an emergency department for the non-admitted patient emergency department care data.

Data on the sex of each non-admitted patient were reported as male, female, indeterminate or not stated/inadequately described. All states and territories supplied the date of birth of the patient, from which the Institute calculated the age of the patient at the date of presentation. The 289 records for which the sex of the patient was not provided and the 122 records for which date of birth was not provided are included in the totals of Table 5.6.

Males accounted for 52.5% of emergency department occasions of service, and there were more occasions of service for males than females in all age groups from 0 to 75 years. The most common age groups reported for non-admitted patient emergency department care were 15–24 years (15.4%), followed by 25–34 years (14.7%) and 0–4 years (12.2%).

Aboriginal and Torres Strait Islander status

Table 5.7 presents Indigenous status data by state and territory. This table is based on the Non-admitted patient emergency department care data.

The data on Indigenous status were supplied by all states and territories according to the *National health data dictionary* definition. As the coverage of this data collection is largely public hospitals which were classified in peer groups A and B in *Australian hospital statistics 2003–04* (AIHW 2005a), most of the data relates to hospitals within major cities.

Consequently, the coverage may not include areas where the proportion of Indigenous people (compared with other Australians) may be higher than average. Therefore these data may not be indicative of the rate of usage of emergency department services by Indigenous people nationally.

Nationally, 4.3% of all patients presenting to an emergency department had an Indigenous status of Aboriginal and/or Torres Strait Islander. The Northern Territory had the highest proportion of occasions of service involving Indigenous persons (40.6%), while Victoria recorded the lowest proportion (1.0%).

Quality of Indigenous status data

Overall, the quality of the data provided for Indigenous status in 2004–05 is considered to be in need of improvement, being reported as acceptable by only Western Australia and the Northern Territory. Most states and territories cautioned that the Indigenous status data

collected in an emergency department setting could be less accurate than the data collected for admitted patients. The quality of data on Indigenous status varies by jurisdiction, and so the data should be used with caution.

For 2004-05, the New South Wales Health Department reported that its data were in need of improvement, and assumes that the data collected in the emergency department is less accurate than the admitted patient data due to difficulties sometimes experienced with data collection at the time of presentation at the emergency department.

For Victoria, the quality of Indigenous status data is considered to be similar to that of admitted patients in public hospitals.

Queensland Health noted that for 2004-05 Indigenous status was not reported in 1.5% of cases, and this was significantly less than the percentage not reported for 2003-04. The improvement was mainly attributed to the rollout of new software and its associated business practices.

Western Australia reported that the quality of the emergency department Indigenous status data is considered to be acceptable, and to be more reliable in rural and remote areas.

The South Australian Department of Health reported that the quality of Indigenous status data is higher for admitted patients than non-admitted emergency department patients, as evidenced by the high proportion of episodes for which Indigenous status was *Not Reported* in Table 5.7. The department intends to investigate the reasons for the high levels of non responses, and plans to take appropriate follow-up action.

For Tasmania, the quality of Indigenous status data is considered to be similar to that of admitted patients in public hospitals. Tasmania is in the process of investigating the reasons for a high proportion of occasions of service for which the Indigenous status was not reported.

The Australian Capital Territory Health Department has been closely monitoring Indigenous status data in its public hospitals, and has noted a significant reduction in the number of records with an unknown Indigenous status. The Australian Capital Territory is preparing to conduct an investigation into why some Indigenous patients are not identified in both the admitted and non-admitted data collections, in order to introduce processes to improve the rate of Indigenous identification.

The Northern Territory Department of Health and Community Services reported that the quality of its 2004-05 Indigenous status data is considered to be acceptable. The department retains historical reporting of Indigenous status and individual client systems receive a report of individuals who have reported their Indigenous status as Aboriginal on one occasion and as Torres Strait Islander on another. System owners follow up on these clients. All management and statistical reporting, however, is based on a person's most recently reported Indigenous status.

Arrival mode—transport and departure status

Tables 5.8 and 5.9 present data on the arrival mode and the departure status of the patient, by triage category, and by state and territory for the Non-admitted patient emergency department care data. The data element emergency department arrival mode--transport could be reported as *Ambulance, air ambulance or helicopter rescue service, Police/correctional services vehicle* or *Other*. The category *Other* includes patients who walked to the emergency department, or who came by private transport, public transport, community transport or

taxi. For 2004–05, arrival mode was not reported for about 11% of South Australian and almost 10% of Northern Territory records (Table 5.9).

The emergency department departure status could be reported as *Admitted to this hospital* (including to units or beds within the emergency department), *Non-admitted patient emergency department service episode completed-departed without being admitted or referred to another hospital*, *Referred to another hospital for admission*, *Did not wait to be attended by a health care professional*, *Left at own risk after being attended by a health care professional but before the non-admitted patient emergency department service episode was completed*, *Died in emergency department as a non-admitted patient* or *Dead on arrival, not treated in emergency department*. For 2004–05, departure status was not reported for almost 20% of Western Australian and about 18% of South Australian records (Table 5.9).

The majority of patients who presented at an emergency department reported an arrival mode of *Other* (76.2%), although for patients who were assigned a triage category of *Resuscitation*, 84.2% reported an emergency department arrival mode of *Ambulance, air ambulance or helicopter rescue service* (Table 5.8). The majority of patients reported a departure status of *Non-admitted patient emergency department service episode completed-departed without being admitted or referred to another hospital* (61.9%). However, the proportion of patients who reported this departure status varied markedly by triage category, accounting for only 9.6% of *Resuscitation* patients. The category *Did not wait to be attended by a health care professional* was reported for about 5% of emergency department occasions of service.

Queensland reported the highest proportion of occasions of service with an arrival mode of *Ambulance, air ambulance or helicopter rescue service* (25.3%), while the Australian Capital Territory had the highest proportion of occasions of service with an arrival mode of *Other* (82.9%) (Table 5.9). The Australian Capital Territory had the highest proportion of occasions of service with a departure status of *Non-admitted patient emergency department service episode completed-departed without being admitted or referred to another hospital* (71.1%) and the lowest proportion of occasions of service for which the patient was either admitted to the same hospital or referred to another hospital for admission (21.6%).

Length of non-admitted patient emergency department occasion of service

Table 5.10 presents summary length of occasion of service statistics by triage category and state and territory, including the average and median duration of occasion of service and the average and median duration of the service event, for the Non-admitted patient emergency department care data. The duration of the occasion of service is from the time of presentation or triage to the end of the provision of service as a non-admitted patient. The duration of the service event is measured as the time from the commencement of service by a treating medical officer or nurse (when a health care professional first takes responsibility for the patient's care) to when the non-admitted component of the emergency department service episode has concluded.

Extreme caution should be used in interpreting these data as there is some variation between jurisdictions in the recording of the time at which the occasion of service is completed and in the recording of the time of admission, which indicates the completion of the non-admitted emergency department occasion of service, for patients who were admitted subsequent to a non-admitted emergency department occasion of service (see limitations of the data, above).

The average duration of occasion of service for patients who were assigned a triage category of *Resuscitation* was 4 hours and 35 minutes, while the median duration of the service event was 3 hours and 16 minutes. Generally, the average durations for occasions of service and service events were greater for the triage categories *Resuscitation*, *Emergency* and *Urgent* than for all triage categories combined, indicating that these patients generally required more lengthy treatment than patients in the *Semi-urgent* and *Non-urgent* triage categories.

Time of presentation

The time of presentation at the emergency department is defined as the earliest occasion of being registered clerically or triaged. Time of presentation was reported for all non-admitted patient emergency department occasions of service reported to NAPEDCD.

Figure 5.2 presents the number of occasions of service by triage category and hour of presentation. This figure highlights the uneven use of emergency department resources throughout the average day. Over 70% of emergency department presentations occur between the hours of 8am and 8pm. For the triage categories *Semi-urgent* and *Urgent*, the pattern of usage is consistently relatively high during this period. For the triage category *Non-urgent*, the peak time of presentation is between 8am and noon.

Figure 5.3 presents the proportion of emergency department occasions of service by triage category and hour of presentation. This figure illustrates the pattern of usage within each triage category. Figure 5.3 indicates that for the most urgent triage category *Resuscitation*, the number of emergency presentations is more evenly distributed throughout the day than for other triage categories, ranging from 2.2% between 5am and 6am to 5.5% between 6pm and 7pm, with almost 45% of these patients arriving overnight between 8pm and 8am. In contrast, for the *Non-urgent* triage category, the pattern of usage varies from 0.7% between 4am and 5am to 9.1% between 9am and 10am, with 29% of these patients arriving overnight between 8pm and 8am.

Table 5.1: Emergency department occasions of service, by public hospital peer group^(a), states and territories, 2004–05

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Principal referral and specialist women's and children's hospitals									
Hospitals reporting accident and emergency occasions of service ^(b)	25	19	16	4	5	2	1	2	74
Accident and emergency occasions of service	889,035	787,518	636,608	190,115	230,781	69,048	48,851	72,703	2,924,659
Hospitals reporting emergency department episode-level data ^(c)	25	19	15	4	5	2	1	2	73
Occasions of service reported with episode-level data ^(d)	890,169	787,518	621,799	179,285	236,319	68,861	48,854	78,703	2,911,508
Estimated proportion of occasions of service with episode-level data (%) ^(e)	100	100	98	94	100	100	100	100	99
Large hospitals									
Hospitals reporting accident and emergency occasions of service ^(b)	16	11	6	5	2	1	1	0	42
Accident and emergency occasions of service	396,531	266,097	196,133	135,371	41,499	34,492	44,865	..	1,114,988
Hospitals reporting emergency department episode-level data ^{(c)(f)}	16	11	6	5	2	2	1	0	43
Occasions of service reported with episode-level data ^(d)	396,601	266,097	197,327	135,370	41,499	33,420	44,844	..	1,115,158
Estimated proportion of occasions of service with episode-level data (%) ^(e)	100	100	100	100	100	97	100	..	100
Coverage of episode-level data for hospitals in peer groups A and B	100	100	98	97	100	99	100	100	99
Other hospitals									
Hospitals reporting accident and emergency occasions of service ^(b)	145	60	136	70	63	16	0	3	494
Accident and emergency occasions of service	721,790	264,438	449,296	267,582	201,401	18,173	..	30,921	1,953,601
Hospitals reporting emergency department episode-level data ^(c)	16	8	0	4	1	0	0	3	32
Occasions of service reported with episode-level data ^(d)	233,851	104,859	..	86,880	43,975	0	..	33,181	502,746
Estimated proportion of occasions of service with episode-level data (%) ^(e)	32	40	0	32	22	0	..	100	26
Total									
Hospitals reporting accident and emergency occasions of service ^(b)	187	90	158	79	70	19	2	5	610
Accident and emergency occasions of service	2,007,356	1,318,053	1,282,037	593,068	473,681	121,713	93,716	103,624	5,993,248
Hospitals reporting emergency department episode-level data ^(c)	57	38	21	13	8	4	2	5	148
Occasions of service reported with episode-level data ^(d)	1,520,621	1,158,474	819,126	401,535	321,793	102,281	93,698	111,884	4,529,412
Estimated proportion of occasions of service with episode-level data (%) ^(e)	76	88	64	68	68	84	100	100	76

(a) For more information on the public hospital peer group classification see Appendix 4.

(b) Number of hospitals that reported Accident and emergency (A+E) occasions of service to the National Public Hospital Establishments Database (NPHED). Not all hospitals include an emergency department and the definition of an emergency department is currently under review.

(c) Episode-level data are required for public hospitals which are classified as *Principal referral and specialist women's and children's hospitals* and *Large hospitals*.

(d) The number of occasions of service reported to the National Non-admitted Patient Emergency Department Care Database.

(e) The number of emergency department occasions of service with episode-level data divided by the number of A+E occasions of service reported to the NPHED, as a percentage. This may underestimate the proportion because some A+E occasions of service are for other than emergency presentations. The proportion has been adjusted to 100% for jurisdictions where the occasions of service with episode-level data exceeded the A+E occasions of service.

(f) Episode-level emergency department data for Tasmanian *Large hospitals* were reported for two separate campuses, while accident and emergency occasions of service data were reported to NPHED for only one establishment. .. Not applicable.

Table 5.2: Accident and emergency non-admitted patient occasions of service, by Remoteness Area of hospital, public acute hospitals, states and territories, 2004–05

	NSW	Vic ^(a)	Qld	WA	SA	Tas	ACT	NT	Total
Accident and emergency occasions of service									
Major cities	1,149,842	864,984	498,763	292,721	320,256	..	93,716	..	3,220,282
Inner regional	610,356	334,840	356,119	57,012	49,783	69,121	0	..	1,477,231
Outer regional	209,416	118,229	286,827	105,206	68,393	46,889	..	45,206	880,166
<i>Total regional</i>	<i>819,772</i>	<i>453,069</i>	<i>642,946</i>	<i>162,218</i>	<i>118,176</i>	<i>116,010</i>	<i>0</i>	<i>45,206</i>	<i>2,357,397</i>
Remote	27,636	n.a.	79,267	82,442	23,581	4,576	..	40,331	257,833
Very remote	10,106	..	61,061	55,687	11,668	1,127	..	18,087	157,736
<i>Total remote</i>	<i>37,742</i>	<i>n.a.</i>	<i>140,328</i>	<i>138,129</i>	<i>35,249</i>	<i>5,703</i>	<i>..</i>	<i>58,418</i>	<i>415,569</i>
Total	2,007,356	1,318,053	1,282,037	593,068	473,681	121,713	93,716	103,624	5,993,248
Ratio of accident and emergency occasions of service provided in area to 1,000 population resident in area^(b)									
Major cities	239	238	243	210	291	..	290	..	242
Inner regional	441	316	351	222	255	224	0	..	350
Outer regional	434	463	424	569	385	288	..	413	429
<i>Total regional</i>	<i>439</i>	<i>344</i>	<i>380</i>	<i>367</i>	<i>317</i>	<i>246</i>	<i>0</i>	<i>413</i>	<i>376</i>
Remote	721	n.a.	849	921	510	541	..	979	799
Very remote	1,283	..	1,148	1,104	859	449	..	367	881
<i>Total remote</i>	<i>817</i>	<i>n.a.</i>	<i>958</i>	<i>987</i>	<i>589</i>	<i>520</i>	<i>..</i>	<i>646</i>	<i>828</i>
Total	299	266	330	300	309	252	289	519	298

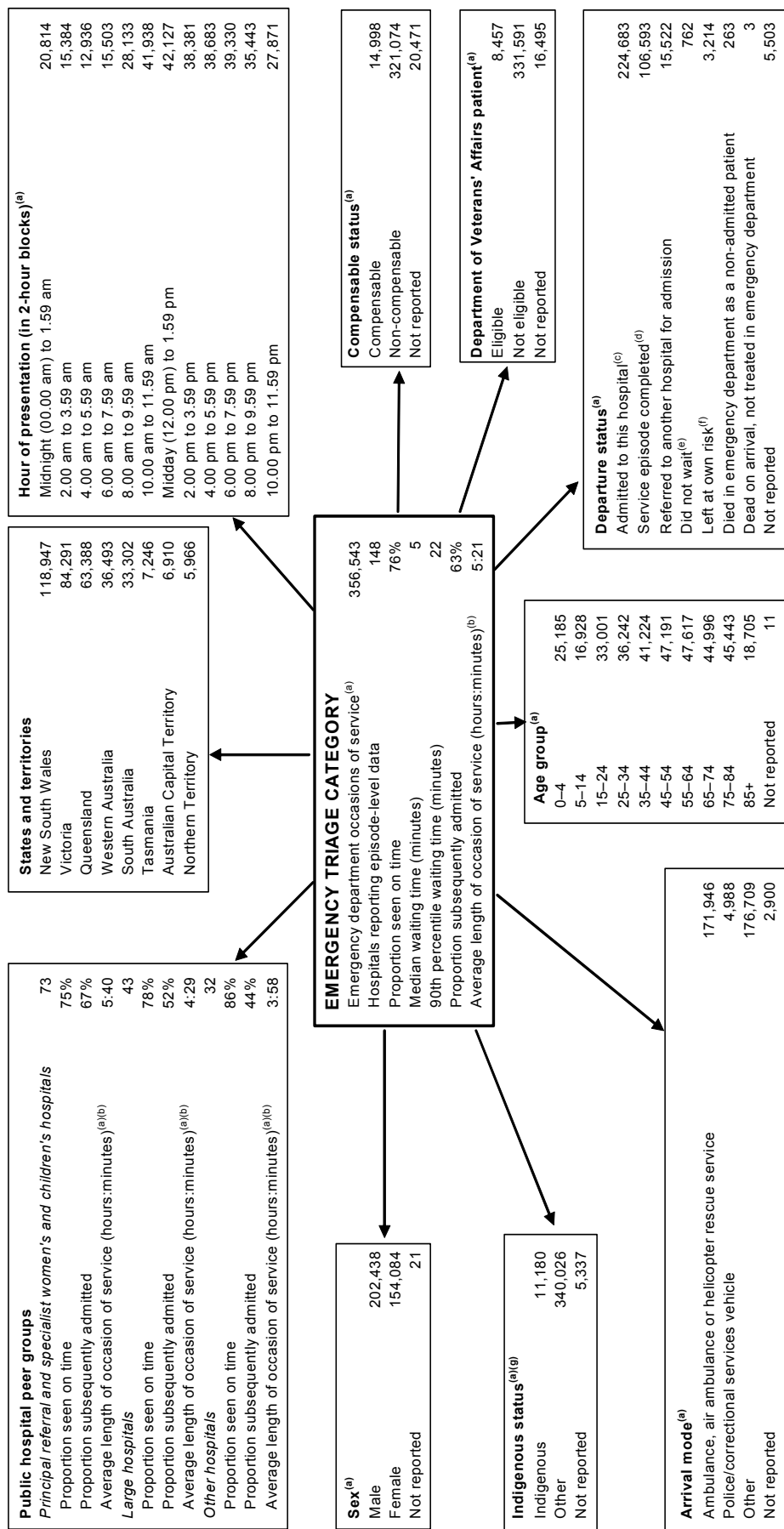
(a) In Victoria, it is not possible to separately identify emergency occasions of service in hospital campuses located in remote areas.

(b) The ratio of services provided in the area to the number of residents in the area only approximates population utilisation as services provided in the area may be provided to persons residing in other

Remoteness Area categories.

.. Not applicable.

n.a. Not available.



(a) For the episode-level data provided to the National Non-admitted Patient Emergency Department Care Database which covers approximately 76% of accident and emergency occasions of service for all public hospitals.
 (b) The length of service episode is measured between the time of commencement of service and the completion of service. This measure was calculated for occasions of service where the waiting time to service delivery was not missing or invalid.
 (c) Includes admitted to units or beds within the emergency department.
 (d) Non-admitted patient emergency department service episode completed—departed without being admitted or referred to another hospital.
 (e) Did not wait to be attended by a health care professional.
 (f) Left at own risk after being attended by a health care professional.
 (g) The quality of Indigenous status data is not acceptable for most jurisdictions, therefore these data should be treated with caution. Please see Appendix 3 for more information.

Figure 5.1: Interrelationships of an Emergency triage category presentation with other data elements, public hospitals, Australia, 2004-05

Table 5.3: Non-admitted patient emergency department emergency presentation statistics^(a), by triage category and public hospital peer group, Australia, 2001–02 to 2004–05

Triage category and peer group	2001–02	2002–03	2003–04	2004–05
Principal referral and specialist women's and children's hospitals				
Hospitals reporting accident and emergency occasions of service ^(b)	66	70	67	74
Accident and emergency occasions of service	2,397,278	2,614,739	2,649,366	2,924,659
Hospitals reporting emergency department episode-level data	58	65	66	73
Occasions of service reported with waiting times data ^(c)	2,291,226	2,524,598	2,579,203	2,911,508
Estimated proportion of occasions of service with waiting times data (%) ^{(d)(e)}	96	97	97	99
Proportion by triage category (%)				
Resuscitation	1	1	1	1
Emergency	9	9	9	10
Urgent	34	34	34	35
Semi-urgent	45	44	45	45
Non-urgent	11	10	10	10
<i>Total</i>	<i>100</i>	<i>100</i>	<i>100</i>	<i>100</i>
Proportion seen on time (%) ^(f)				
Resuscitation	99	99	100	100
Emergency	75	75	79	75
Urgent	58	58	63	61
Semi-urgent	55	55	62	61
Non-urgent	78	76	85	86
<i>Total</i>	<i>60</i>	<i>59</i>	<i>67</i>	<i>65</i>
Median waiting time to service delivery (minutes)				
Resuscitation	n.a.	n.a.	0	0
Emergency	n.a.	n.a.	5	6
Urgent	n.a.	n.a.	24	23
Semi-urgent	n.a.	n.a.	46	44
Non-urgent	n.a.	n.a.	34	33
<i>Total</i>	<i>n.a.</i>	<i>n.a.</i>	<i>28</i>	<i>26</i>
90th percentile waiting time to service delivery (minutes)				
Resuscitation	n.a.	n.a.	0	0
Emergency	n.a.	n.a.	24	23
Urgent	n.a.	n.a.	99	95
Semi-urgent	n.a.	n.a.	166	161
Non-urgent	n.a.	n.a.	156	144
<i>Total</i>	<i>n.a.</i>	<i>n.a.</i>	<i>134</i>	<i>129</i>
Proportion ending in admission (%) ^(g)				
Resuscitation	84	87	82	83
Emergency	69	70	67	67
Urgent	49	49	46	46
Semi-urgent	23	23	20	20
Non-urgent	8	8	7	6
<i>Total</i>	<i>35</i>	<i>34</i>	<i>33</i>	<i>29</i>
Large hospitals				
Hospitals reporting accident and emergency occasions of service ^(b)	47	48	48	44
Accident and emergency occasions of service	1,250,165	1,215,550	1,260,622	1,114,988
Hospitals reporting emergency department episode-level data	35	37	44	43
Occasions of service reported with waiting times data ^(c)	928,836	1,007,316	1,177,573	1,115,158
Estimated proportion of occasions of service with waiting times data (%) ^{(d)(e)}	74	83	93	100
Proportion by triage category (%)				
Resuscitation	1	<1	<1	<1
Emergency	6	5	6	6
Urgent	29	28	29	28
Semi-urgent	50	48	50	50
Non-urgent	15	14	15	16
<i>Total</i>	<i>100</i>	<i>100</i>	<i>100</i>	<i>100</i>
Proportion seen on time (%) ^(f)				
Resuscitation	99	97	100	99
Emergency	77	73	80	78
Urgent	65	63	70	69
Semi-urgent	66	65	72	70
Non-urgent	88	87	89	87
<i>Total</i>	<i>70</i>	<i>68</i>	<i>74</i>	<i>73</i>
Median waiting time to service delivery (minutes)				
Resuscitation	n.a.	n.a.	0	0
Emergency	n.a.	n.a.	5	6
Urgent	n.a.	n.a.	19	19
Semi-urgent	n.a.	n.a.	31	33
Non-urgent	n.a.	n.a.	30	33
<i>Total</i>	<i>n.a.</i>	<i>n.a.</i>	<i>23</i>	<i>24</i>

(continued)

Table 5.3 (continued): Non-admitted patient emergency department emergency presentation statistics^(a), by triage category and public hospital peer group, Australia, 2001–02 to 2004–05

Triage category and peer group	2001–02	2002–03	2003–04	2004–05
90th percentile waiting time to service delivery (minutes)				
Resuscitation	n.a.	n.a.	0	0
Emergency	n.a.	n.a.	21	20
Urgent	n.a.	n.a.	75	70
Semi-urgent	n.a.	n.a.	127	129
Non-urgent	n.a.	n.a.	128	137
Total	n.a.	n.a.	109	111
Proportion ending in admission (%)^(g)				
Resuscitation	86	87	69	66
Emergency	67	67	58	54
Urgent	42	40	38	36
Semi-urgent	17	15	14	14
Non-urgent	4	4	3	3
Total	26	23	22	21
Coverage of episode-level data for hospitals in peer groups A and B				
Accident and emergency occasions of service	3,647,443	3,830,289	3,909,988	4,039,647
Occasions of service reported with waiting times data^(c)	3,220,062	3,531,914	3,756,776	4,026,666
Estimated proportion of occasions with waiting times data (%)^{(d)(e)}	88	92	96	99
All hospitals^(h)				
Hospitals reporting accident and emergency occasions of service^(b)				
Accident and emergency occasions of service	574	588	635	610
Accident and emergency occasions of service	5,754,666	5,837,549	5,864,232	5,993,248
Hospitals reporting emergency department episode-level data				
Occasions of service reported with waiting times data ^(c)	120	195	213	148
Estimated proportion occasions of service with waiting times data (%) ^{(d)(e)}	3,627,912	4,156,790	4,390,591	4,529,412
Estimated proportion occasions of service with waiting times data (%) ^{(d)(e)}	63	71	75	76
Proportion by triage category (%)				
Resuscitation	1	1	1	1
Emergency	7	7	8	8
Urgent	31	30	30	32
Semi-urgent	47	45	46	47
Non-urgent	13	14	15	12
Total	100	100	100	100
Proportion seen on time (%)^(f)				
Resuscitation	99	99	99	100
Emergency	76	75	76	76
Urgent	60	61	62	64
Semi-urgent	59	61	61	65
Non-urgent	84	85	82	88
Total	64	66	72	69
Median waiting time to service delivery (minutes)				
Resuscitation	n.a.	n.a.	0	0
Emergency	n.a.	n.a.	5	5
Urgent	n.a.	n.a.	22	21
Semi-urgent	n.a.	n.a.	38	38
Non-urgent	n.a.	n.a.	28	30
Total	n.a.	n.a.	25	25
90th percentile waiting time to service delivery (minutes)				
Resuscitation	n.a.	n.a.	0	0
Emergency	n.a.	n.a.	23	22
Urgent	n.a.	n.a.	90	88
Semi-urgent	n.a.	n.a.	150	148
Non-urgent	n.a.	n.a.	139	136
Total	n.a.	n.a.	124	121
Proportion ending in admission (%)^(g)				
Resuscitation	82	86	78	79
Emergency	67	69	63	63
Urgent	45	46	43	43
Semi-urgent	19	19	16	17
Non-urgent	6	6	4	5
Total	30	29	27	28

(a) For more information on the public hospital peer group classification see Appendix 4.

(b) Not all hospitals include an emergency department and the definition of an emergency department is currently under review.

(c) For 2001–02 and 2002–03, these are the number of occasions of service reported with waiting times data. For 2003–04 and 2004–05, these are the number of occasions of service reported with episode-level data and some additional aggregate data for South Australia for 2003–04.

(d) The number of occasions of service with waiting times data divided by the number of emergency department occasions of service. This may underestimate coverage because some occasions of service are for other than emergency presentations, for which waiting times data are applicable.

(e) For 2003–04 and 2004–05, for some jurisdictions, the number of emergency department occasions of service reported to the Non-admitted Patient Emergency Department Care Database exceeded the number of accident and emergency occasions of service reported to the National Public Hospital Establishments Database. For these jurisdictions the coverage has been estimated as 100%.

(f) The proportion of occasions of service for which the waiting time to service delivery was within the time specified in the definition of the triage category. For the triage category *Resuscitation*, the cut-off point for determining the proportion seen on time has varied both over time and among jurisdictions. See Chapter 5 for more information.

(g) For 2001–02, 2002–03 and for some 2003–04 data (for South Australia, Victoria and some Western Australian hospitals), these are estimates of emergency department patients 'subsequently admitted'. For other 2003–04 data and for 2004–05 data, this proportion is based on occasions of service reported with episode-level data, for which the departure status was reported as *Admitted to this hospital*.

(h) The total includes hospitals in peer groups other than *Principal referral and specialist women's and children's hospitals* and *Large hospitals*.

Table 5.4: Non-admitted patient emergency department presentation statistics^(a), by triage category and public hospital peer group, states and territories, 2004-05

Triage category and peer group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Principal referral and specialist women's and children's hospitals									
Non-admitted patient emergency department occasions of service									
Resuscitation	8,611	7,170	4,317	2,456	3,091	n.p.	n.p.	974	28,219
Emergency	80,056	70,388	51,300	23,849	28,335	n.p.	n.p.	5,558	270,654
Urgent	311,203	244,303	222,091	58,233	85,195	n.p.	n.p.	24,530	985,402
Semi-urgent	360,373	360,687	279,448	85,786	97,047	n.p.	n.p.	42,032	1,279,941
Non-urgent	110,828	85,372	44,594	7,650	11,387	n.p.	n.p.	3,381	270,200
<i>Total^(b)</i>	<i>871,207</i>	<i>767,920</i>	<i>601,750</i>	<i>177,994</i>	<i>225,055</i>	<i>n.p.</i>	<i>n.p.</i>	<i>76,475</i>	<i>2,834,572</i>
Proportion seen on time (%) ^(c)									
Resuscitation	100	100	100	98	99	n.p.	n.p.	100	100
Emergency	73	86	69	70	72	n.p.	n.p.	61	75
Urgent	55	80	51	59	59	n.p.	n.p.	60	61
Semi-urgent	60	70	53	53	65	n.p.	n.p.	50	61
Non-urgent	85	90	83	70	89	n.p.	n.p.	80	86
<i>Total</i>	<i>63</i>	<i>77</i>	<i>56</i>	<i>58</i>	<i>65</i>	<i>n.p.</i>	<i>n.p.</i>	<i>56</i>	<i>65</i>
Median waiting time to service delivery (minutes)									
Resuscitation	0	0	0	0	0	n.p.	n.p.	0	0
Emergency	6	4	8	7	4	n.p.	n.p.	8	6
Urgent	28	13	30	24	24	n.p.	n.p.	23	23
Semi-urgent	46	28	56	57	37	n.p.	n.p.	61	44
Non-urgent	40	20	38	73	32	n.p.	n.p.	51	33
<i>Total</i>	<i>30</i>	<i>15</i>	<i>35</i>	<i>32</i>	<i>24</i>	<i>n.p.</i>	<i>n.p.</i>	<i>35</i>	<i>26</i>
90th percentile waiting time to service delivery (minutes)									
Resuscitation	0	1	1	0	0	n.p.	n.p.	0	0
Emergency	26	14	28	21	26	n.p.	n.p.	27	23
Urgent	108	56	110	80	95	n.p.	n.p.	83	95
Semi-urgent	159	144	177	163	140	n.p.	n.p.	188	161
Non-urgent	145	124	165	203	124	n.p.	n.p.	172	144
<i>Total</i>	<i>131</i>	<i>107</i>	<i>144</i>	<i>129</i>	<i>113</i>	<i>n.p.</i>	<i>n.p.</i>	<i>148</i>	<i>129</i>
Proportion ending in admission (%) ^(d)									
Resuscitation	87	91	73	80	78	n.p.	n.p.	57	83
Emergency	71	76	60	58	61	n.p.	n.p.	62	67
Urgent	48	57	36	47	43	n.p.	n.p.	42	46
Semi-urgent	22	26	12	20	16	n.p.	n.p.	13	20
Non-urgent	7	7	3	8	6	n.p.	n.p.	3	6
<i>Total</i>	<i>34</i>	<i>39</i>	<i>25</i>	<i>34</i>	<i>32</i>	<i>n.p.</i>	<i>n.p.</i>	<i>26</i>	<i>33</i>

(continued)

Table 5.4 (continued): Non-admitted patient emergency department presentation statistics^(a), by triage category and public hospital peer group^(a), states and territories, 2004–05

Triage category and peer group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Large hospitals									
Non-admitted patient emergency department occasions of service									
Resuscitation	2,504	436	579	551	210	n.p.	n.p.	..	4,521
Emergency	29,061	9,456	12,088	8,514	2,916	n.p.	n.p.	..	65,023
Urgent	120,951	51,883	48,922	34,027	12,249	n.p.	n.p.	..	286,960
Semi-urgent	183,364	124,153	94,249	61,038	23,427	n.p.	n.p.	..	523,509
Non-urgent	49,543	61,065	24,379	10,522	2,632	n.p.	n.p.	..	162,361
<i>Total^(b)</i>	<i>385,517</i>	<i>246,993</i>	<i>180,217</i>	<i>114,828</i>	<i>41,434</i>	<i>n.p.</i>	<i>n.p.</i>	<i>..</i>	<i>1,042,646</i>
Proportion seen on time ^(c)									
Resuscitation	100	100	100	99	99	n.p.	n.p.	..	99
Emergency	77	83	79	88	54	n.p.	n.p.	..	78
Urgent	66	84	66	78	39	n.p.	n.p.	..	69
Semi-urgent	69	76	66	75	42	n.p.	n.p.	..	70
Non-urgent	90	85	88	91	82	n.p.	n.p.	..	87
<i>Total</i>	<i>71</i>	<i>80</i>	<i>70</i>	<i>78</i>	<i>45</i>	<i>n.p.</i>	<i>n.p.</i>	<i>..</i>	<i>73</i>
Median waiting time to service delivery (minutes)									
Resuscitation	0	0	0	0	0	n.p.	n.p.	..	0
Emergency	6	5	6	4	10	n.p.	n.p.	..	6
Urgent	21	10	22	10	42	n.p.	n.p.	..	19
Semi-urgent	34	27	39	18	78	n.p.	n.p.	..	33
Non-urgent	25	43	31	14	47	n.p.	n.p.	..	33
<i>Total</i>	<i>24</i>	<i>22</i>	<i>27</i>	<i>11</i>	<i>53</i>	<i>n.p.</i>	<i>n.p.</i>	<i>..</i>	<i>24</i>
90th percentile waiting time to service delivery (minutes)									
Resuscitation	0	0	0	0	0	n.p.	n.p.	..	0
Emergency	23	16	19	12	35	n.p.	n.p.	..	20
Urgent	77	41	75	50	146	n.p.	n.p.	..	70
Semi-urgent	132	104	140	112	234	n.p.	n.p.	..	129
Non-urgent	122	151	132	116	156	n.p.	n.p.	..	137
<i>Total</i>	<i>108</i>	<i>105</i>	<i>117</i>	<i>89</i>	<i>198</i>	<i>n.p.</i>	<i>n.p.</i>	<i>..</i>	<i>111</i>
Proportion ending in admission ^{(d)(e)}									
Resuscitation	72	82	62	30	n.p.	n.p.	n.p.	..	66
Emergency	62	62	49	30	n.p.	n.p.	n.p.	..	54
Urgent	43	40	24	20	n.p.	n.p.	n.p.	..	36
Semi-urgent	18	16	7	7	n.p.	n.p.	n.p.	..	14
Non-urgent	5	3	2	1	n.p.	n.p.	n.p.	..	3
<i>Total</i>	<i>28</i>	<i>20</i>	<i>14</i>	<i>12</i>	<i>n.p.</i>	<i>n.p.</i>	<i>n.p.</i>	<i>..</i>	<i>21</i>

(continued)

Table 5.4 (continued): Non-admitted patient emergency department presentation statistics^(a), by triage category and public hospital peer group^(a), states and territories, 2004-05

Triage category and peer group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
All hospitals^(f)									
Non-admitted patient emergency department occasions of service									
Resuscitation	11,777	7,778	4,896	3,283	3,356	811	1,030	1,008	33,939
Emergency	118,947	84,291	63,388	36,493	33,302	7,246	6,910	5,966	356,543
Urgent	483,696	315,728	271,013	108,064	105,460	32,583	26,192	28,378	1,371,114
Semi-urgent	649,446	530,945	373,697	185,389	147,445	49,741	42,105	54,756	2,033,524
Non-urgent	207,342	171,203	68,973	42,514	15,503	7,120	14,088	14,607	541,350
Total emergency visits^(b)	1,471,504	1,109,945	781,967	375,960	305,066	97,501	90,327	104,715	4,336,985
Proportion seen on time ^{(%)^(c)}									
Resuscitation	100	100	100	98	99	96	100	100	100
Emergency	75	86	71	75	72	76	70	61	76
Urgent	60	81	54	67	58	67	50	61	64
Semi-urgent	66	73	57	65	62	64	52	55	65
Non-urgent	87	89	85	91	89	91	83	86	88
Total emergency visits seen on time	68	79	59	70	63	68	58	62	69
Median waiting time to service delivery (minutes)^(g)									
Resuscitation	0	0	0	0	0	0	0	0	0
Emergency	6	4	7	6	4	6	8	8	5
Urgent	24	12	28	19	24	19	31	23	21
Semi-urgent	37	26	51	42	42	39	58	52	38
Non-urgent	31	25	35	34	32	24	51	35	30
Total	26	16	33	24	27	24	40	33	25
90th percentile waiting time to service delivery (minutes)^(g)									
Resuscitation	0	1	1	0	0	0	0	0	0
Emergency	25	15	26	19	26	20	32	29	22
Urgent	96	52	104	70	98	75	109	85	88
Semi-urgent	144	129	168	145	155	145	185	176	148
Non-urgent	135	129	153	160	128	110	159	147	136
Total	121	103	139	115	124	116	152	143	121
Proportion ending in admission ^{(%)^{(d)(e)}}									
Resuscitation	82	90	72	66	77	85	70	57	79
Emergency	67	73	58	47	57	64	43	62	63
Urgent	46	53	34	33	39	41	37	42	43
Semi-urgent	19	22	11	12	11	14	12	14	17
Non-urgent	6	5	3	2	6	3	2	6	5
Total proportion ending in admission (%)	30	33	22	21	28	26	21	24	28

(a) For more information on the public hospital peer group classification see Appendix 4. Information on the coverage of the waiting times data is presented in Table 5.1.

(b) The totals include records for which the triage category was not assigned or not reported.

(c) The proportion of occasions of service for which the waiting time to service delivery was within the time specified in the definition of the triage category. For the triage category *Resuscitation*, an occasion of service was classified as 'seen on time' if the waiting time to service was reported as less than or equal to 2 minutes.

(d) The proportion of occasions of service for which the emergency department departure status was reported as *Admitted to this hospital*.

(e) The proportion admitted for *Large hospitals* in South Australia has not been published as one of the reporting hospitals was not able to correctly identify emergency department patients who were subsequently admitted to the hospital. Consequently, the proportion admitted for all reporting hospitals in South Australia excludes the data for *Large hospitals*.

(f) *All hospitals* includes data that were provided by jurisdictions for hospitals in peer groups other than *Principal/referral and specialist women's and children's hospitals* and *Large hospitals*.

(g) The median and 90th percentile waiting times for all hospitals exclude waiting times data for *Other hospitals* in Western Australia.

n.p. Not published.

Table 5.5: Non-admitted patient emergency department occasion of service statistics^(a), by type of visit and public hospital peer group, states and territories, 2004–05

Type of visit and peer group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Principal referral and specialist women's and children's hospitals									
Emergency presentation	871,125	767,920	601,055	177,994	224,396	n.p.	n.p.	76,469	2,833,130
Return visit, planned	15,122	17,306	17,369	1,248	8,102	n.p.	n.p.	2,182	64,466
Pre-arranged admission	2,287	356	2,000	42	2,139	n.p.	n.p.	0	6,824
Patient in transit	109	109	241	0	765	n.p.	n.p.	9	1,233
Dead on arrival	1,444	1,827	439	n.a.	258	n.p.	n.p.	37	4,413
Not reported	82	0	695	1	659	n.p.	n.p.	6	1,442
<i>Total</i>	<i>890,169</i>	<i>787,518</i>	<i>621,799</i>	<i>179,285</i>	<i>236,319</i>	<i>n.p.</i>	<i>n.p.</i>	<i>78,703</i>	<i>2,911,508</i>
Large hospitals									
Emergency presentation	385,509	246,993	180,217	114,828	39,545	n.p.	n.p.	..	1,040,700
Return visit, planned	10,222	18,076	16,736	5,190	0	n.p.	n.p.	..	54,786
Pre-arranged admission	466	649	212	15,159	50	n.p.	n.p.	..	16,545
Patient in transit	19	35	32	193	3	n.p.	n.p.	..	296
Dead on arrival	377	344	130	n.a.	12	n.p.	n.p.	..	885
Not reported	8	0	0	0	1,889	n.p.	n.p.	..	1,946
<i>Total</i>	<i>396,601</i>	<i>266,097</i>	<i>197,327</i>	<i>135,370</i>	<i>41,499</i>	<i>n.p.</i>	<i>n.p.</i>	<i>..</i>	<i>1,115,158</i>
Other hospitals									
Emergency presentation	214,663	95,032	..	83,138	38,350	..	..	28,152	459,335
Return visit, planned	18,154	8,575	..	513	4	..	..	4,939	32,185
Pre-arranged admission	745	1,121	..	3,222	4,610	..	..	0	9,698
Patient in transit	24	16	..	7	767	..	..	1	815
Dead on arrival	148	115	..	n.a.	17	..	..	1	281
Not reported	117	0	..	0	227	..	..	88	432
<i>Total</i>	<i>233,851</i>	<i>104,859</i>	<i>..</i>	<i>86,880</i>	<i>43,975</i>	<i>..</i>	<i>..</i>	<i>33,181</i>	<i>502,746</i>
Total									
Emergency presentation	1,471,297	1,109,945	781,272	375,960	302,291	97,452	90,327	104,621	4,333,165
Return visit, planned	43,498	43,957	34,105	6,951	8,106	4,361	3,338	7,121	151,437
Pre-arranged admission	3,498	2,126	2,212	18,423	6,799	0	9	0	33,067
Patient in transit	152	160	273	200	1,535	0	14	10	2,344
Dead on arrival	1,969	2,286	569	n.a.	287	419	10	38	5,579
Not reported	207	0	695	1	2,775	49	0	94	3,820
Total occasions of service reported at episode-level	1,520,621	1,158,474	819,126	401,535	321,793	102,281	93,698	111,884	4,529,412

(a) For the 76% of occasions of service for which episode-level data were available. For more information see the text of Chapter 5 and Appendix 4.
n.a. Not available. Western Australia does not collect non-admitted patient emergency department care data for patients who were dead on arrival at the emergency department.
.. Not applicable. As the scope of the episode-level data is hospitals in peer groups A and B, data were not required for Other hospitals, but have been presented where they were provided.
n.p. Not published.

Table 5.6: Non-admitted patient emergency department occasions of service^(a), by age group and sex, public hospitals, states and territories, 2004–05

Sex	Age group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Males										
	0–4	105,229	77,243	56,001	30,933	22,383	5,074	5,546	7,541	309,950
	5–14	92,019	69,253	49,182	26,448	19,089	5,857	6,034	5,817	273,699
	15–24	118,921	83,849	73,455	33,716	23,763	9,618	8,773	8,874	360,969
	25–34	111,459	81,913	67,185	29,821	21,233	8,271	7,750	10,812	338,444
	35–44	94,788	69,951	54,477	25,278	19,345	6,607	5,540	10,200	286,186
	45–54	77,639	56,929	42,465	20,301	15,125	5,649	4,971	7,429	230,508
	55–64	68,151	49,042	36,433	16,151	13,040	4,772	3,947	4,862	196,398
	65–74	60,257	45,914	29,219	14,122	11,181	4,153	2,916	2,794	170,556
	75–84	58,746	42,066	22,867	11,864	13,111	3,397	2,600	1,069	155,720
	85 and over	21,236	14,441	8,230	4,555	5,036	1,152	843	190	55,683
	Total^(b)	808,504	590,601	439,514	213,189	163,306	54,550	48,920	59,592	2,378,176
Females										
	0–4	81,464	60,667	43,441	24,725	17,882	4,144	4,243	6,241	242,807
	5–14	67,549	53,224	37,472	20,280	14,942	4,746	4,686	4,925	207,824
	15–24	105,004	83,449	67,662	30,093	25,428	8,529	8,375	8,714	337,254
	25–34	100,414	94,089	59,472	25,738	24,978	6,770	7,058	10,574	329,093
	35–44	78,231	67,774	45,337	21,743	18,008	5,801	5,253	8,868	251,015
	45–54	67,213	52,413	36,452	18,135	13,666	4,785	4,613	6,347	203,624
	55–64	56,453	42,884	28,689	13,688	10,681	3,976	3,608	3,597	163,576
	65–74	52,337	40,037	22,793	11,551	10,315	3,256	2,618	1,711	144,618
	75–84	65,238	47,115	24,188	13,527	14,146	3,754	2,863	956	171,787
	85 and over	38,115	26,221	14,039	8,831	8,381	1,947	1,461	321	99,316
	Total^(b)	712,048	567,873	379,545	188,311	158,427	47,708	44,778	52,257	2,150,947
Persons^(c)										
	0–4	186,698	137,910	99,451	55,658	40,265	9,221	9,789	13,783	552,775
	5–14	159,569	122,477	86,658	46,728	34,031	10,603	10,720	10,747	481,533
	15–24	223,935	167,298	141,128	63,810	49,193	18,153	17,148	17,601	698,266
	25–34	211,878	176,002	126,667	55,568	46,211	15,046	14,808	21,394	667,574
	35–44	173,025	137,725	99,825	47,032	37,354	12,411	10,793	19,068	537,233
	45–54	144,858	109,342	78,921	38,444	28,793	10,435	9,584	13,780	434,157
	55–64	124,605	91,926	65,131	29,844	23,724	8,748	7,555	8,463	359,996
	65–74	112,597	85,951	52,015	25,673	21,496	7,412	5,534	4,505	315,183
	75–84	123,985	89,181	47,056	25,392	27,257	7,151	5,463	2,025	327,510
	85 and over	59,356	40,662	22,274	13,366	13,469	3,101	2,304	511	155,063
	Total^(d)	1,520,621	1,158,474	819,126	401,535	321,793	102,281	93,698	111,884	4,529,412

(a) For the 76% of occasions of service for which episode-level data were available. Includes occasions of service for which the type of visit was not reported as *Emergency presentation*. For more information see the text of Chapter 5 and Appendix 4.

(b) Includes occasions of service for which the age group of the patient was not reported.

(c) Includes occasions of service for which the sex of the patient was not reported.

(d) Includes occasions of service for which the sex and/or age group of the patient was not reported.

Table 5.7: Non-admitted patient emergency department occasions of service^(a), by Indigenous status, public hospitals, states and territories, 2004–05

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Aboriginal but not Torres Strait Islander origin	40,658	10,937	39,449	37,502	6,908	2,315	1,326	44,395	183,490
Torres Strait Islander but not Aboriginal origin	801	225	4,254	102	54	77	39	284	5,836
Aboriginal and Torres Strait Islander origin	1,320	995	2,748	218	92	85	195	692	6,345
<i>Indigenous</i>	42,779	12,157	46,451	37,822	7,054	2,477	1,560	45,371	195,671
Not Aboriginal or Torres Strait Islander origin	1,463,027	1,146,312	760,411	360,444	291,543	93,045	91,324	66,190	4,272,296
Not reported	14,815	5	12,264	3,269	23,196	6,759	814	323	61,445
Total	1,520,621	1,158,474	819,126	401,535	321,793	102,281	93,698	111,884	4,529,412

(a) For the 76% of occasions of service for which episode-level data were available. Includes occasions of service for which the type of visit was not reported as *Emergency presentation*. For more information see the text of Chapter 5 and Appendix 4.

Note: The identification of Indigenous patients is not considered to be complete and varies among jurisdictions. It is considered acceptable only for Western Australia and the Northern Territory. See the text for more information.

Table 5.8: Non-admitted patient emergency department occasions of service^(a), by triage category and emergency department arrival mode – transport and departure status, public hospitals, Australia, 2004–05

	Triage category				Total ^(b)
	Resuscitation	Emergency	Semi-urgent	Non-urgent	
Arrival mode—transport					
Ambulance, air ambulance or helicopter rescue service	28,878	173,043	454,528	314,261	23,281
Police/correctional services vehicle	212	5,012	15,119	10,989	3,251
Other ^(c)	5,001	178,724	908,932	1,745,891	608,118
Not reported	217	2,909	13,557	28,273	5,979
Total	34,308	359,688	1,392,136	2,099,414	640,629
Departure status					
Admitted to this hospital ^(d)	27,019	226,307	595,981	352,089	30,212
Non-admitted patient emergency department service episode completed ^(e)	3,302	107,077	694,266	1,487,758	513,307
Referred to another hospital for admission	2,310	16,216	34,677	21,651	2,315
Did not wait to be attended by a health care professional	2	771	23,351	146,611	58,588
Left at own risk ^(f)	222	3,226	12,638	16,801	4,032
Died in emergency department as a non-admitted patient	1,067	264	184	64	23
Dead on arrival, not treated in emergency department	116	14	247	56	2,388
Not reported	270	5,813	30,792	74,384	29,764
Total	34,308	359,688	1,392,136	2,099,414	640,629

(a) For the 76% of occasions of service for which episode-level data were available. Includes occasions of service for which the type of visit was not reported as *Emergency presentation*. For more information see the text of Chapter 5 and Appendix 4.

(b) The total includes occasions of service for which the triage category was not assigned.

(c) *Other* includes patients who walked in, came by private transport, public transport, community transport or taxi.

(d) Including to units or beds within the emergency department.

(e) Patient departed without being admitted or referred to another hospital.

(f) Patient left at own risk after being attended by a health care professional but before the non-admitted patient emergency department occasion of service was completed.

Table 5.9: Non-admitted patient emergency department occasions of service^(a), by emergency department arrival mode—transport and departure status, public hospitals, states and territories, 2004–05

	NSW	Vic ^(b)	Qld	WA	SA	Tas	ACT	NT	Total
Arrival mode—transport									
Ambulance, air ambulance or helicopter rescue service	355,865	229,350	207,487	75,194	69,179	23,562	15,394	18,092	994,123
Police/correctional services vehicle	10,486	5,154	8,333	3,537	2,224	1,329	583	2,956	34,602
Other ^(c)	1,153,983	923,970	599,846	322,722	214,263	77,361	77,715	79,887	3,449,747
Not reported	287	0	3,460	82	36,127	29	6	10,949	50,940
Total	1,520,621	1,158,474	819,126	401,535	321,793	102,281	93,698	111,884	4,529,412
Departure status									
Admitted to this hospital ^(d)	455,940	369,575	176,827	79,929	78,709	26,033	19,093	25,555	1,231,661
Non-admitted patient emergency department service episode completed ^(e)	942,233	719,718	563,744	202,501	165,208	69,488	66,602	76,249	2,805,743
Referred to another hospital for admission	23,722	4,049	11,537	25,421	10,254	882	1,174	152	77,191
Did not wait to be attended by a health care professional	78,885	54,404	57,524	11,744	6,866	4,926	6,385	8,849	229,583
Left at own risk ^(f)	14,967	8,245	7,684	1,790	2,626	284	345	981	36,922
Died in emergency department as a non-admitted patient	0	200	626	356	192	97	89	42	1,602
Dead on arrival, not treated in emergency department	2,148	2,283	569	n.a.	31	419	10	56	5,516
Not reported	2,726	0	615	79,794	57,907	152	0	0	141,194
Total	1,520,621	1,158,474	819,126	401,535	321,793	102,281	93,698	111,884	4,529,412

(a) For the 76% of occasions of service for which episode-level data were available. Includes occasions of service for which the type of visit was not reported as *Emergency presentation*. For more information see the text of Chapter 5 and Appendix 4.

(b) Admissions within the emergency department were not able to be identified within the episode-level data for Victoria. Hence, the number of occasions of service with a departure status of *Admitted to this hospital* are underestimated for Victoria and for the total. See the text of Chapter 5 for more detail.

(c) *Other* includes patients who walked in, came by private transport, public transport, community transport or taxi.

(d) Including to units or beds within the emergency department.

(e) Patient departed without being admitted or referred to another hospital.

(f) Patient left at own risk after being attended by a health care professional but before the non-admitted patient emergency department occasion of service was completed. n.a. Not available. Western Australia does not collect data for patients who were dead on arrival at the emergency department.

Table 5.10: Non-admitted patient emergency department occasions of service^{(a)(b)} duration (hours:minutes)^(c), by triage category, public hospitals, states and territories, 2004–05

Triage category	NSW	Vic ^(c)	Qld	WA ^(d)	SA	Tas	ACT	NT	Total ^{(e)(d)}
Resuscitation									
Average duration of occasion of service ^(e)	3:46	6:06	4:25	5:45	4:20	4:00	3:07	2:55	4:35
Median duration of occasion of service ^(e)	2:36	4:34	3:33	3:41	3:02	3:25	2:39	2:09	3:16
Average duration of service event ^(f)	3:46	6:06	4:25	5:44	4:20	3:60	3:07	2:55	4:35
Median duration of service event ^(f)	2:36	4:34	3:33	3:41	3:02	3:24	2:39	2:09	3:16
Emergency									
Average duration of occasion of service ^(e)	4:51	6:17	5:07	5:47	5:37	4:53	4:24	3:20	5:22
Median duration of occasion of service ^(e)	3:39	4:40	3:57	3:52	3:58	4:12	3:38	2:38	3:58
Average duration of service event ^(f)	4:40	6:11	4:55	5:38	5:28	4:44	4:10	3:06	5:12
Median duration of service event ^(f)	3:28	4:33	3:45	3:43	3:48	4:03	3:23	2:23	3:48
Urgent									
Average duration of occasion of service ^(e)	4:31	5:15	4:26	4:55	5:21	4:22	4:22	3:12	4:44
Median duration of occasion of service ^(e)	3:30	3:51	3:22	3:12	3:31	3:39	3:28	2:36	3:31
Average duration of service event ^(f)	3:51	4:53	3:41	4:26	4:40	3:49	3:33	2:35	4:08
Median duration of service event ^(f)	2:49	3:28	2:36	2:42	2:50	3:05	2:40	1:59	2:54
Semi-urgent									
Average duration of occasion of service ^(e)	3:15	3:33	3:07	3:27	3:36	3:04	3:19	2:48	3:20
Median duration of occasion of service ^(e)	2:21	2:30	2:18	2:16	2:32	2:21	2:28	2:11	2:23
Average duration of service event ^(f)	2:16	2:44	1:54	2:27	2:31	2:02	1:55	1:31	2:20
Median duration of service event ^(f)	1:14	1:35	0:59	1:15	1:23	1:16	1:00	0:57	1:15
Non-urgent									
Average duration of occasion of service ^(e)	1:59	2:03	1:50	2:16	2:00	2:19	2:21	1:51	2:01
Median duration of occasion of service ^(e)	1:24	1:31	1:14	1:29	1:25	1:11	1:40	1:20	1:25
Average duration of service event ^(f)	1:06	1:15	0:48	1:16	1:08	0:52	1:09	0:50	1:07
Median duration of service event ^(f)	0:30	0:39	0:22	0:35	0:32	0:30	0:31	0:22	0:31
Total									
Average duration of occasion of service ^(e)	3:40	4:04	3:40	4:09	4:23	3:37	3:35	2:49	3:50
Median duration of occasion of service ^(e)	2:40	2:49	2:42	2:39	2:54	2:50	2:40	2:12	2:43
Average duration of service event ^(f)	2:52	3:27	2:44	3:25	3:34	2:48	2:30	1:51	3:03
Median duration of service event ^(f)	1:45	2:05	1:36	1:51	1:59	1:58	1:24	1:10	1:49

(a) Excludes occasions of service for patients whose departure status was *Did not wait to be attended by a health care professional* or *Dead on arrival*, and records with invalid or missing waiting times data.

(b) For the 76% of occasions of service for which episode-level data were available. For more information see the text of Chapter 5 and Appendix 4.

(c) There is variation in the time recorded as the time of admission for patients admitted subsequent to a non-admitted emergency department occasion of service. For Victoria, periods of admission within the emergency department are included in the total duration of the emergency department occasions of service. Hence, the duration of occasions of service for Victoria and the total will be overestimated.

(d) Waiting times data provided for *Other hospitals* in Western Australia have been excluded from the calculation of the durations of the occasions of service and the service event.

(e) The duration of the occasion of service is the length of time between the time of triage/presentation to the emergency department and the completion of the occasion of service.

(f) The duration of the service event is the length of time between when a health care professional first takes responsibility for the patient's care and the time of completion of the occasion of service.

