

# 5 Non-admitted patient care

## Introduction

This chapter presents information on non-admitted patient care services provided by selected public hospitals. It includes detailed patient-level information on emergency department care and summary data on public hospital outpatient clinic care.

## Emergency department care

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

- Detailed episode-level data for 4,914,896 non-admitted patient emergency department occasions of service. These records include information on waiting times, triage category and whether the patients were admitted to hospital (Tables 5.2 and 5.3), 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, the patient's mode of arrival at the emergency department, the patient's 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 5.4 to 5.9).
- Summary information on the total number of accident and emergency occasions of service for all public hospitals (6,327,784 occasions of service) are presented in Table 2.7 and are used in this chapter to estimate the proportion of emergency department occasions of service for which the detailed episode-level data were available (Table 5.1). Occasions of service for which the detailed data were not available occurred mainly in hospitals not required to report to the Non-admitted patient emergency department care (NAPEDC) NMDS (or in hospitals that did not have an emergency department).

Because of 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 2.

The detailed information presented for all episode-level records in Tables 5.3 to 5.9 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 almost 100% for *Principal referral and Specialist women's and children's hospitals* and *Large hospitals* (peer group A and B hospitals), and about 78% for all hospitals (Table 5.1).

## Data sources

### The National Non-admitted Patient Emergency Department Care Database

The National Non-admitted Patient Emergency Department Care Database (NNAPEDCD) is 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 for 2005–06 was 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 2004–05* (AIHW 2006a). 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 third 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 2005). This variation is likely to have significantly affected the comparability of data on the duration of the occasions of service (Table 5.9).
- There is also some variation over time in the occasions of service reported as subsequently admitted.

### National Public Hospital Establishments Database

Data on accident and emergency occasions of service presented in Chapter 2 were sourced from the National Public Hospital Establishments Database (NPHEd), which has essentially full coverage of public hospitals (see Appendix 2). 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 excluded patients who were dead on arrival and patients who did not wait for treatment. 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. The waiting times data for 2001–02 and 2002–03 presented in Table 5.2 were sourced from the aggregate waiting times data provided by the states and territories as part of the NPHEd.

## Variations in methods of collection and analysis

Because of 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 2005–06 and 2004–05 all states and territories reported waiting times data as part of the episode-level data.

For 2003–04, most states and territories reported waiting times data as part of the episode-level data. The waiting times data for South Australia presented in Tables 5.2 and 5.3 included aggregated unit-record level data for 5 hospitals that were not in peer group A or B.

The proportion of accident and emergency occasions of service for which detailed episode-level data was available was 78% in 2005–06, 76% in 2004–05 and 75% in 2003–04.

For 2002–03, the Emergency Department Waiting Times Data did not include 1 peer group A hospital in New South Wales and 1 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 6 *Medium hospitals*. Estimated coverage overall was 71% in 2002–03 and 63% in 2001–02 (Table 5.2).

For 2003–04, 2004–05 and 2005–06, 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. This analysis was restricted to records with a type of visit of *Emergency presentation* or *Not reported* and excluded records for which the waiting time was missing, or the patient's departure status was reported as either *Did not wait* or *Dead on arrival*. *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 1 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, South Australia and the Australian Capital Territory, 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, 2004–05 and 2005–06 and earlier years, and the data for 2003–04, 2004–05 and 2005–06 will differ from data calculated on state-based criteria for Victoria, Queensland, South Australia, Tasmania, the Australian Capital Territory and the Northern Territory.

The median and 90th percentile waiting times to service delivery are presented for 2003–04, 2004–05 and 2005–06 only as these data were not available in the aggregated data collections for 2001–02 and 2002–03.

For 2004–05 and 2005–06, 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 the NPHED.

## Overview

Table 5.1 presents information on the number of emergency department occasions of service reported to the NNAPEDCD, by hospital peer group and state or territory. Episode-level data were provided for 77 *Principal referral and Specialist women’s and children’s hospitals*, 41 *Large hospitals* and 35 *Other hospitals* (not classified in peer groups A or B). The table includes estimates of the coverage of the NNAPEDCD, calculated as the proportion of accident and emergency occasions of service reported to the NPHED that were also reported as episode-level data in the NNAPEDCD. This may underestimate the proportion because some accident and emergency occasions of service are for services other than emergency presentations.

For 2005–06, 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). For hospitals in peer groups A and B, the overall coverage was estimated as approximately 100% (Table 5.1). Some states and territories reported fewer episode-level records to the NNAPEDCD than the number of accident and emergency occasions of service reported to NPHED. 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 that were classified to other peer groups (in addition to the required NAPEDC 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 18 *Medium hospitals*, 2 *Small acute hospitals* and 1 *Unpeered/Other hospital*, Victoria provided data for 6 *Medium hospitals*, South Australia provided data for 1 *Medium hospital* and Western Australia provided data for 2 *Medium hospitals* and 2 *Small remote hospitals*. The NNAPEDCD provides detailed information on about 78% of all public hospital accident and emergency occasions of service. The proportion for all public hospitals ranged from 100% for the Australian Capital Territory and the Northern Territory to 65% for Queensland (Table 5.1).

## Triage category and other data elements reported for emergency department care

Figure 5.1 presents episode-level non-admitted patient emergency department care data on patients who were assigned a triage category of *Urgent* at the time of presentation at the emergency department.

There were 1,523,052 emergency department occasions of service that were assigned a triage category of *Urgent* in 2005–06. They were reported by 77 hospitals that were classified as *Principal referral and Specialist women’s and children’s hospitals*, 41 *Large hospitals* and 35 *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 these patients was 4 hours and 34 minutes, ranging from 3 hours and 3 minutes for patients who presented to an

emergency department in a hospital in a peer group other than A or B to 4 hours and 58 minutes for patients who presented to an emergency department in a *Principal referral and Specialist women's and children's hospital*. Overall, 64% of these patients were seen within a clinically appropriate time. The median waiting time was 21 minutes, and 90% were seen within 93 minutes. The proportion of these patients who were subsequently admitted ranged between 32% in *Other hospitals* to 46% in *Principal referral and Specialist women's and children's hospitals*.

Almost 51% of presentations were for males, and the most common age group was 0–4 years. Almost two thirds arrived at the emergency department by *Other* transport and a third arrived by *Ambulance*. About 43% of episodes had a departure status of *Admitted to this hospital* (which includes admission within the emergency department). Almost a quarter arrived at the emergency department between 10am and 2pm, and the number of arrivals 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 5.2 and 5.3 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 from 2001–02 to 2005–06

Table 5.2 presents national emergency department waiting times data by public hospital peer group and triage category for the years 2001–02 to 2005–06. Because of 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 and 2005–06 include only those episodes where the type of visit (see Table 5.4) was reported as *Emergency presentation* or was *Not reported*. For 2005–06, for episodes with an *Emergency presentation* type of visit, the waiting time was missing or invalid for 9,932 records, and there were 261,843 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 5.2 and 5.3.

For 2003–04, the data for South Australia and for some Western Australian hospitals 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 the 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 100% in 2005–06. Over the same period, the NNAPEDCD data as a proportion of all public hospital accident and emergency occasions of service increased from 63% to 78%.

In 2005–06 there were 6,327,784 accident and emergency occasions of service reported for public hospitals to the NPHEd (see Table 2.7), and there were 4,914,896 emergency presentations reported to the NNAPEDCD. Between 2001–02 and 2005–06 the number of emergency presentations reported for hospitals in peer groups A and B increased by almost 34% (7.6% per year). However, this may reflect the inclusion of non-emergency presentation occasions of service for some jurisdictions for the 2003–04, 2004–05 and 2005–06 data that may not have been previously provided. The total number of accident and emergency occasions of service reported to the NPHEd increased by about 10% (2.4% per year) from 5,754,666 (AIHW 2003).

The proportion of emergency visits by triage category remained fairly stable between 2001–02 and 2005–06. In 2005–06, approximately 1% of patients who presented at an emergency department were assigned a triage category of *Resuscitation*, 8% were *Emergency*, 32% were *Urgent*, 47% were *Semi-urgent* and 12% were *Non-urgent*.

For the period 2001–02 to 2005–06, 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 over the period 2003–04 to 2005–06 for which the same cut-off points were used for the majority of the data (as detailed previously). The median waiting time to service delivery was 24 minutes for 2005–06 compared to 25 minutes for both 2003–04 and 2004–05, and was fairly stable across all triage categories and for all hospitals. For 2005–06, 90% of all emergency department patients were attended by a health care professional within 123 minutes, compared with 121 minutes in 2004–05 and 124 minutes in 2003–04.

The proportion of patients subsequently admitted decreased between 2001–02 and 2005–06 for all triage categories and for both *Principal referral and Specialist women's and children's hospitals* and *Large hospitals*. The proportion of *Resuscitation* patients subsequently admitted for *Large hospitals* showed a large decrease between the 2002–03 and 2003–04 periods, which may reflect variation over time in the method of calculating this measure. For hospitals other than *Principal referral and Specialist women's and children's hospitals*, a relatively high proportion of patients are reported with a departure status of *Referred to another hospital for admission*, and these were not included in the proportion admitted for 2003–04 to 2005–06. Nationally, the proportion of patients subsequently admitted decreased from 30% in 2001–02 to 28% in 2005–06.

## States and territories, 2005–06

Table 5.3 presents the number of occasions of service for 2005–06 where the type of visit (see Table 5.4) was reported as *Emergency presentation* (or was *Not reported*) by triage category,

public hospital peer group and state or territory. Table 5.3 also shows 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 and Victoria had the lowest proportions of *Resuscitation* emergency visits (0.6%) and South Australia reported the highest proportion (1.2%). For the triage category *Non-urgent*, Victoria reported the highest proportion (15.2%) followed by the Northern Territory (15.1%), 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 the waiting time to service delivery was less than or equal to 2 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 52% in the Australian Capital Territory to 77% in Victoria. Nationally, approximately 99% of *Resuscitation* patients and 77% 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 19 minutes, whereas for the Australian Capital Territory 50% of patients were treated within 46 minutes. The length of time by which 90% of patients were treated also varied; from 106 minutes in Victoria to 167 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 presentations were subsequently admitted to the hospital. Victoria had higher proportions of patients subsequently admitted than the national figures in all triage categories except *Non-urgent*, and the Northern Territory had the lowest proportions of *Resuscitation* patients subsequently admitted.

## **Type of emergency department visit**

Table 5.4 presents occasion of service statistics by type of visit, hospital peer group and state or territory reported to the NNAPEDCD for 2005–06.

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*, *Patient in transit* or *Dead on arrival*, the Northern Territory did not report any occasions of service with a type of visit of *Pre-arranged admission*, and South Australia did not report any occasions of service with a type of visit of *Patient in transit* or *Dead on arrival*. The type of visit was *Not reported* for 11.0% of records from South Australia.

Nationally, 96.0% of occasions of service were *Emergency presentations*, and 2.9% were reported as *Return visit, planned*. The proportion of occasions of service varied by state or

territory and by hospital peer group. Almost 98% of emergency department occasions of service were *Emergency presentations* for hospitals in peer group A, compared with about 93% for hospitals in peer group B. The Australian Capital Territory had the highest proportion of occasions of service that were reported as *Emergency presentations* (99.1%). For the Northern Territory 7.0% of occasions of service were reported as *Return visit, planned*.

## Sex and age group

Table 5.5 presents data on the sex and age group of patients who presented to an emergency department reported to the NNAPEDCD.

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 age of the patient at the date of presentation was calculated. The 411 records for which the sex of the patient was *Not stated/Indeterminate* and the 238 records for which date of birth was not provided are included in the totals of Table 5.5.

Males accounted for 52.1% of emergency department occasions of service, and there were more occasions of service for males than females in most groups from 0 to 75 years. Females accounted for more occasions of service than males for the 15–34 years and the 75 years and over age groups. The most common age groups reported for non-admitted patient emergency department care were 15–24 years (15.6%), followed by 25–34 years (14.5%) and 0–4 years (12.4%).

## Aboriginal and Torres Strait Islander people

Table 5.6 presents Indigenous status data by state and territory reported to the NNAPEDCD.

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 2004–05* (AIHW 2006a), 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 use 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 (40.7%), and Victoria recorded the lowest proportion (1.1%).

## Quality of Indigenous status data

The quality of the data provided for Indigenous status in 2005–06 varied by jurisdiction and was reported as acceptable by only Western Australia and the Northern Territory. Most states and territories advised that the Indigenous status data collected in an emergency department setting could be less accurate than the data collected for admitted patients; the data should, therefore, be used with caution.

For 2005–06, 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 are 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 2005–06 Indigenous status was not reported in 2.1% of non-admitted patient emergency department records, and this represented a slight increase in the proportion of non-reporting compared to 2004–05. Efforts will be made to ensure that reporting of Indigenous status is as complete and accurate as possible.

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* (Table 5.6). This is an area that the Department intends to address in consultation with hospitals that provide data to its central data collection.

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 (ACT Health) 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. In 2006 ACT Health worked with the Winnunga Nimmityjah Aboriginal Health Service (WNAHS), to undertake a project to estimate Aboriginal and Torres Strait Islander under-identification in ACT public hospital data sets. The project engaged the services of the AIHW in a data matching process involving health records from the WNAHS and health records from The Canberra Hospital and Calvary Public Hospital. The data has been processed by AIHW but the results have not been finalised at this stage.

The Northern Territory Department of Health and Community Services reported that the quality of its 2005–06 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 5.7 and 5.8 present data on the arrival mode and the departure status of the patient, by triage category, and by state and territory for the NNAPEDCD. 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 2005–06, arrival mode was not reported for almost 10% of Northern Territory records (Table 5.8).

The majority of patients who presented at an emergency department reported an arrival mode of *Other* (76.7%) (Table 5.7). Of 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*. 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* (64.8%). However, the proportion of patients who reported this departure status varied markedly by triage category, accounting for only 9.9% of *Resuscitation* patients. The category *Did not wait to be attended by a health care professional* was reported for 5.2% 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* (26.5%), and the Australian Capital Territory had the highest proportion of occasions of service with an arrival mode of *Other* (82.6%) (Table 5.8). Western Australia 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* (70.9%) and Victoria had the highest proportion of occasions of service for which the patient was either admitted to the same hospital or referred to another hospital for admission (31.8%).

## **Length of non-admitted patient emergency department occasion of service**

Table 5.9 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 NNAPEDCD. 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 non-admitted occasion of service is completed and in the recording of the time of admission for patients who were subsequently admitted to hospital (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 22 minutes, and the median duration of the service event was 3 hours and 11 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 the NNAPEDCD.

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. Almost three-quarters of emergency department presentations occur between the hours of 8am and 8pm. For the triage categories *Semi-urgent* and *Urgent*, the pattern of use 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 illustrates the daily pattern of use within each triage category. It shows that for the triage category *Resuscitation*, the number of emergency presentations is more evenly distributed throughout the day than for other triage categories, ranging from 2.3% between 5am and 6am to 5.5% between 6pm and 7pm, with almost 41% of these patients arriving overnight between 8pm and 8am. In contrast, for the *Non-urgent* triage category, the pattern of use varies from 0.7% between 4am and 5am to 9.1% between 9am and 10am, with about 22% of these patients arriving overnight between 8pm and 8am.

## Outpatient clinic care

This section presents information on public hospital outpatient clinic care for non-admitted patients. The types of data used were:

- Clinic-level data for 11,399,098 occasions of service for individuals and 129,346 group sessions for non-admitted patient outpatient clinic care. These data were reported for 23 outpatient clinic types for selected public hospitals for compilation in the National Outpatient Care Database (NOCD) (Tables 5.10 to 5.12).
- Summary information on the total number of outpatient-related occasions of service for all public hospitals (14,925,536 occasions of service). These data were presented in Table 2.5 and are used in this chapter to estimate the proportion of outpatient-related occasions of service which are covered by the Outpatient care NMDS (Table 5.10).

Because of 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 2.

The information presented in Tables 5.10 to 5.12 should be interpreted with caution as the data may not be representative of outpatient clinic activity for hospitals which were not required to provide data for the NOCD. The estimated proportion of outpatient-related occasions of service for all hospitals that were also reported to the NOCD was about 76% for individual occasions of service, and about 74% for group occasions of service (Table 5.10).

## Data sources

### The National Outpatient Care Database

The National Outpatient Care Database (NOCD) is a compilation of summary data for outpatient clinic occasions of service in public hospitals. The database is based on the Outpatient care NMDS as defined in the *National health data dictionary* version 13 (HDSC 2006). The scope for the Outpatient care NMDS for 2005–06 was for services provided to non-admitted, non-emergency patients registered for care in outpatient clinics of 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 2004–05* (AIHW 2006a). Data were also provided by some states and territories for hospitals in peer groups other than A and B, as described below.

These data were provided to the AIHW for 2005–06 as counts of individual occasions of service and group occasions of service by 23 outpatient clinic types: *Allied health, Dental, Gynaecology, Obstetrics, Cardiology, Endocrinology, Oncology, Respiratory, Gastroenterology, Medical, General practice/primary care, Paediatric, Endoscopy, Plastic surgery, Urology, Orthopaedic, Ophthalmology, Ear, nose and throat, Pre-admission and pre-anaesthesia, Chemotherapy, Dialysis, Surgery and Paediatric surgery.*

### **Limitations of the data**

This is the first year that data have been collected for outpatient care 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 among the states and territories in the provision of specialised services by hospitals. For example *Dental* services or *General practice/primary care* services may be delivered in non-hospital settings by some jurisdictions.
- Differences in admission practices between the jurisdictions can result in zero values for some outpatient clinic types. For example *Dialysis* may be delivered as an admitted patient service in some jurisdictions and as a non-admitted service in others.
- There may be some variation in the use of the categories of clinic types as some clinics may provide a variety of specialised services.

### **National Public Hospital Establishments Database**

Data on non-admitted patient occasions of service are also presented in Chapter 2. These data were sourced from the National Public Hospital Establishments Database (NPHEd), which has essentially full coverage of public hospitals (see Appendix 2).

The number of individual session occasions of service for non-admitted patients, and the number of group sessions, are provided for specified types of non-admitted patient care including: *Accident and emergency, Allied health, Dental, Dialysis, Endoscopy and related procedures, Other medical/surgical/obstetric, Mental health, Alcohol and drug, Pharmacy, Community health, District nursing, Pathology, Radiology and organ imaging, and Other outreach.*

### **Coverage estimates**

Data for the Outpatient care NMDS are collected for 23 clinic types (as above). For the purposes of aligning the two data sources, outpatient-related occasions of service sourced from the NPHEd refer to those occasions of service reported with a Type of non-admitted patient care of *Allied health, Dental, Dialysis, Endoscopy and related procedures* and *Other medical/surgical/Obstetric*. The NPHEd data for the non-admitted patient care types *Accident and emergency, Alcohol and other drugs, Community Health Services, District nursing, Mental health, Other outreach services, Pathology, Pharmacy* and *Radiology and organ imaging* are not considered to be comparable to the outpatient individual and group occasions of service reported for the NOCD. Therefore, these types of non-admitted patient care are excluded from the estimates of coverage presented in Table 5.10.

### **Overview**

Table 5.10 presents information on the number of outpatient clinic occasions of service reported to the NOCD, by hospital peer group and state or territory. Summary data were provided for 80 *Principal referral and Specialist women's and children's hospitals*, 40 *Large*

*hospitals* and 2 *Other hospitals* (not classified in peer groups A or B). The table includes estimates of the coverage of the NOCD, calculated as the proportion of outpatient-related occasions of service reported to the NPHEd that were also reported in the NOCD.

For 2005–06, all states and territories were able to provide summary data to the NOCD for all public hospitals in peer groups A and B. Some states and territories also provided outpatient care data for public hospitals which were classified to other peer groups (in addition to the required Outpatient care NMDs scope of peer group A and B hospitals), and these data have been included in this chapter. New South Wales and South Australia each provided data for one *Medium hospital*. The NOCD provides clinic-level information on about 76% of all individual outpatient-related occasions of service and 74% of all group session outpatient-related occasions of service provided by public hospitals in Australia.

## States and territories, 2005–06

### Individual occasions of service

Table 5.11 presents the number of individual occasions of service by clinic type and state or territory for 2005–06. These data should be interpreted with caution as the comparability of the data may be influenced by variation in admission practices, the type of facility providing these services and in the allocation of outpatient services to the 23 clinic types among the states and territories.

There was some variation among the states and territories in the numbers of occasions of service reported for each clinic type. The Australian Capital Territory and the Northern Territory did not report any *Dental* occasions of service, and there was notable variation in the reporting of *Dental* occasions of service among the other states and territories. *General practice/primary care* was reported for New South Wales, Queensland and Western Australia only. In addition, Victoria and South Australia did not report any occasions of service for *Endoscopy*, *Chemotherapy* and *Dialysis*, Western Australia and the Northern Territory did not report occasions of service for *Chemotherapy* and Queensland, Tasmania, and the Australian Capital Territory did not report occasions of service for *Dialysis*. There was also a marked variation among states and territories in the reporting of *Medical* occasions of service.

New South Wales reported the highest number of individual occasions of service for 13 of the 23 clinic types. Victoria reported the highest numbers for *Allied health*, *Plastic surgery*, *Urology*, *Ear, nose and throat*, *Surgery* and *Paediatric surgery*, and Queensland reported the highest numbers for *Gynaecology*, *Cardiology*, *Gastroenterology* and *Endoscopy*.

### Group sessions

Table 5.12 presents the number of group sessions of outpatient care by clinic type and state or territory in 2005–06.

There were variations among the states and territories in the number of group sessions reported, and in the clinic types for which group sessions were reported. Tasmania and the Northern Territory did not report any group sessions, and both Victoria and Western Australia reported group sessions for the clinic type *Allied health* only. Western Australia reported that their figures represent the number of individuals who attended group sessions rather than the number of group sessions. New South Wales reported group sessions for almost every outpatient clinic type with the exception of *Endoscopy*, *Plastic surgery*, *Ophthalmology* and *Paediatric surgery*. *Allied health* was the most commonly reported clinic type with 82,658 group sessions reported.

Table 5.1: Emergency department occasions of service, by public hospital peer group<sup>(a)</sup>, states and territories, 2005–06

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Principal referral and Specialist women's and children's hospitals</b>									
Hospitals reporting emergency department episode-level data <sup>(b)</sup>	27	19	15	5	5	3	1	2	77
Occasions of service reported with episode-level data <sup>(c)</sup>	1,033,163	830,942	643,999	195,078	248,255	114,820	52,955	82,885	3,202,097
Estimated proportion of occasions of service with episode-level data (%) <sup>(d)</sup>	100	100	98	100	100	99	100	100	100
<b>Large hospitals</b>									
Hospitals reporting emergency department episode-level data <sup>(b)</sup>	14	13	6	5	2	..	1	..	41
Occasions of service reported with episode-level data <sup>(c)</sup>	356,675	327,178	199,849	138,338	41,310	..	46,661	..	1,110,011
Estimated proportion of occasions of service with episode-level data (%) <sup>(d)</sup>	100	100	100	100	100	..	100	..	100
<b>Coverage of episode-level data for hospitals in peer groups A and B</b>	<b>100</b>	<b>100</b>	<b>99</b>	<b>100</b>	<b>100</b>	<b>99</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>Other hospitals</b>									
Hospitals reporting emergency department episode-level data <sup>(b)</sup>	21	6	0	4	1	0	0	3	35
Occasions of service reported with episode-level data <sup>(c)</sup>	335,671	90,958	..	93,393	45,974	..	..	36,792	602,788
Estimated proportion of occasions of service with episode-level data (%) <sup>(d)</sup>	45	36	..	32	22	..	..	100	30
<b>Total</b>									
Hospitals reporting emergency department episode-level data <sup>(b)</sup>	62	38	21	14	8	3	2	5	153
Occasions of service reported with episode-level data <sup>(c)</sup>	1,725,509	1,249,078	843,848	426,809	335,539	114,820	99,616	119,677	4,914,896
Estimated proportion of occasions of service with episode-level data (%) <sup>(d)</sup>	81	89	65	68	68	86	100	100	78

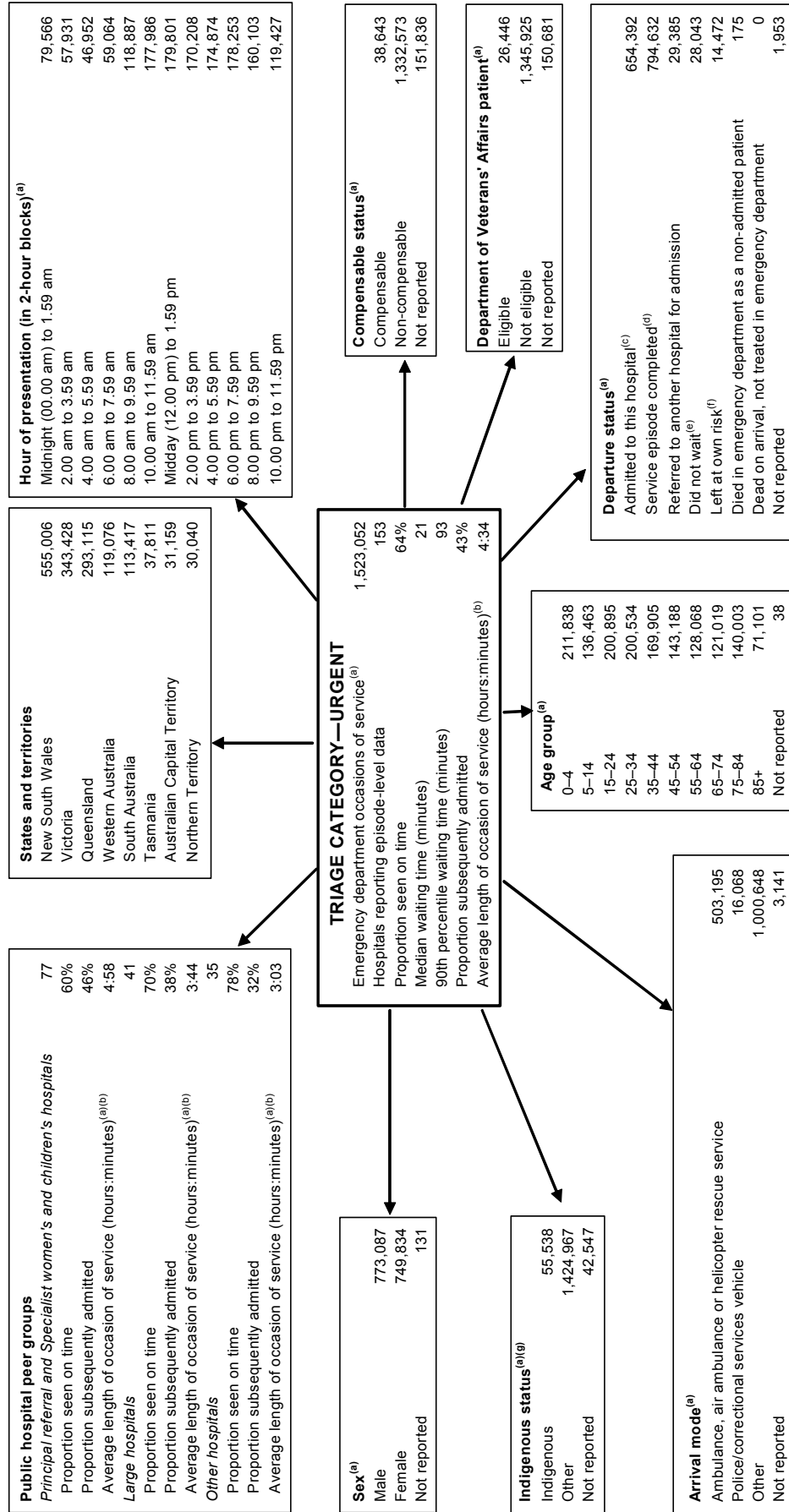
(a) For more information on the public hospital peer group classification see Appendix 2.

(b) 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*.

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

(d) The number of occasions of service reported to NNAPEDCCD divided by the number of accident and emergency (A+E) occasions of service reported to the National Public Hospital Establishments Database (NPHED) as a percentage. This may underestimate the NNAPEDCCD coverage because some A+E occasions of service are for other than emergency presentations. As A+E occasions of service may have been under-enumerated for some jurisdictions and peer groups, coverage may also be overestimated. The coverage has been adjusted to 100% for jurisdictions where the number of occasions of service reported to NNAPEDCCD exceeded the number of A+E occasions of service reported to the NPHED.

.. Not applicable.



(a) For the episode-level data provided to the National Non-admitted Patient Emergency Department Care Database which covers approximately 78% 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 but before the non-admitted patient emergency department service episode was completed.  
 (g) The quality of Indigenous status data is not acceptable for most jurisdictions; therefore these data should be treated with caution. Please see the text and Appendix 1 for more information.

**Figure 5.1: Interrelationships of an Urgent triage category presentation with other data elements, public hospitals, Australia, 2005–06**

**Table 5.2: Non-admitted patient emergency department occasions of service statistics, by triage category and public hospital peer group<sup>(a)</sup>, Australia, 2001–02 to 2005–06**

<b>Triage category and peer group</b>	<b>2001–02</b>	<b>2002–03</b>	<b>2003–04</b>	<b>2004–05</b>	<b>2005–06</b>
<b>Principal referral and Specialist women's and children's hospitals</b>					
Hospitals reporting emergency department episode-level data					
Occasions of service reported with waiting times data <sup>(b)</sup>	58	65	66	73	77
Estimated proportion of occasions of service with waiting times data (%) <sup>(c)(d)</sup>	2,291,226	2,524,598	2,579,203	2,924,659	3,202,097
Proportion by triage category (%)	96	97	97	99	100
Resuscitation	1	1	1	1	1
Emergency	9	9	9	10	10
Urgent	34	34	34	35	35
Semi-urgent	45	44	45	45	45
Non-urgent	11	10	10	10	10
<i>Total</i>	100	100	100	100	100
Proportion seen on time (%) <sup>(e)</sup>					
Resuscitation	99	99	100	100	100
Emergency	75	75	79	75	75
Urgent	58	58	63	61	60
Semi-urgent	55	55	62	61	61
Non-urgent	78	76	85	86	86
<i>Total</i>	60	59	67	65	65
Median waiting time to service delivery (minutes)					
Resuscitation	n.a.	n.a.	0	0	0
Emergency	n.a.	n.a.	5	6	6
Urgent	n.a.	n.a.	24	23	23
Semi-urgent	n.a.	n.a.	46	44	43
Non-urgent	n.a.	n.a.	34	33	33
<i>Total</i>	n.a.	n.a.	28	26	27
90th percentile waiting time to service delivery (minutes)					
Resuscitation	n.a.	n.a.	0	0	0
Emergency	n.a.	n.a.	24	23	24
Urgent	n.a.	n.a.	99	95	101
Semi-urgent	n.a.	n.a.	166	161	163
Non-urgent	n.a.	n.a.	156	144	144
<i>Total</i>	n.a.	n.a.	134	129	132
Proportion ending in admission (%) <sup>(f)</sup>					
Resuscitation	84	87	82	83	83
Emergency	69	70	67	67	67
Urgent	49	49	46	46	46
Semi-urgent	23	23	20	20	19
Non-urgent	8	8	7	6	6
<i>Total</i>	35	34	33	29	32

(continued)

**Table 5.2 (continued): Non-admitted patient emergency department occasions of service statistics, by triage category and public hospital peer group<sup>(a)</sup>, Australia, 2001–02 to 2005–06**

<b>Triage category and peer group</b>		<b>2001–02</b>	<b>2002–03</b>	<b>2003–04</b>	<b>2004–05</b>	<b>2005–06</b>
<b>Large hospitals</b>						
Hospitals reporting emergency department episode-level data						
Occasions of service reported with waiting times data <sup>(b)</sup>		35	37	44	43	41
Estimated proportion of occasions of service with waiting times data (%) <sup>(c)(d)</sup>		928,836	1,007,316	1,177,573	1,115,158	1,110,011
Proportion by triage category (%)		74	83	93	100	100
Resuscitation		1	<1	<1	<1	<1
Emergency		6	5	6	6	6
Urgent		29	28	29	28	28
Semi-urgent		50	48	50	50	50
Non-urgent		15	14	15	16	16
<i>Total</i>		100	100	100	100	100
Proportion seen on time (%) <sup>(e)</sup>						
Resuscitation		99	97	100	99	99
Emergency		77	73	80	78	80
Urgent		65	63	70	69	70
Semi-urgent		66	65	72	70	69
Non-urgent		88	87	89	87	87
<i>Total</i>		70	68	74	73	73
Median waiting time to service delivery (minutes)						
Resuscitation		n.a.	n.a.	0	0	0
Emergency		n.a.	n.a.	5	6	5
Urgent		n.a.	n.a.	19	19	18
Semi-urgent		n.a.	n.a.	31	33	34
Non-urgent		n.a.	n.a.	30	33	33
<i>Total</i>		n.a.	n.a.	23	24	24
90th percentile waiting time to service delivery (minutes)						
Resuscitation		n.a.	n.a.	0	0	0
Emergency		n.a.	n.a.	21	20	19
Urgent		n.a.	n.a.	75	70	72
Semi-urgent		n.a.	n.a.	127	129	134
Non-urgent		n.a.	n.a.	128	137	140
<i>Total</i>		n.a.	n.a.	109	111	115
Proportion ending in admission (%) <sup>(f)</sup>						
Resuscitation		86	87	69	66	67
Emergency		67	67	58	54	57
Urgent		42	40	38	36	38
Semi-urgent		17	15	14	14	14
Non-urgent		4	4	3	3	3
<i>Total</i>		26	23	22	21	22

(continued)

Table 5.2 (continued): Non-admitted patient emergency department occasions of service statistics, by triage category and public hospital peer group<sup>(a)</sup>, Australia, 2001-02 to 2005-06

Triage category and peer group	2001-02	2002-03	2003-04	2004-05	2005-06
<b>Coverage of episode-level data for hospitals in peer groups A and B</b>					
Occasions of service reported with waiting times data <sup>(b)</sup>	3,220,062	3,531,914	3,756,776	4,026,666	4,312,108
Estimated proportion of occasions with waiting times data (%) <sup>(c)(d)</sup>	88	92	96	99	100
<b>All hospitals<sup>(e)</sup></b>					
Hospitals reporting emergency department episode-level data	120	195	213	148	153
Occasions of service reported with waiting times data <sup>(b)</sup>	3,627,912	4,156,790	4,390,591	4,529,412	4,914,896
Estimated proportion of occasions of service with waiting times data (%) <sup>(c)(d)</sup>	63	71	75	76	78
<b>Proportion by triage category (%)</b>					
Resuscitation	1	1	1	1	1
Emergency	7	7	8	8	8
Urgent	31	30	30	32	32
Semi-urgent	47	45	46	47	47
Non-urgent	13	14	15	12	12
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>Proportion seen on time (%)<sup>(e)</sup></b>					
Resuscitation	99	99	99	100	99
Emergency	76	75	76	76	77
Urgent	60	61	63	64	64
Semi-urgent	59	61	65	65	65
Non-urgent	84	85	87	88	87
<b>Total</b>	<b>64</b>	<b>66</b>	<b>68</b>	<b>69</b>	<b>69</b>
<b>Median waiting time to service delivery (minutes)</b>					
Resuscitation	n.a.	n.a.	0	0	0
Emergency	n.a.	n.a.	5	5	5
Urgent	n.a.	n.a.	22	21	21
Semi-urgent	n.a.	n.a.	38	38	37
Non-urgent	n.a.	n.a.	28	30	29
<b>Total</b>	<b>n.a.</b>	<b>n.a.</b>	<b>25</b>	<b>25</b>	<b>24</b>

(continued)

**Table 5.2 (continued): Non-admitted patient emergency department occasions of service statistics, by triage category and public hospital peer group<sup>(a)</sup>, Australia, 2001–02 to 2005–06**

Triage category and peer group	2001–02	2002–03	2003–04	2004–05	2005–06
90th percentile waiting time to service delivery (minutes)					
Resuscitation	n.a.	n.a.	0	0	0
Emergency	n.a.	n.a.	23	22	23
Urgent	n.a.	n.a.	90	88	93
Semi-urgent	n.a.	n.a.	150	148	149
Non-urgent	n.a.	n.a.	139	136	136
<b>Total</b>	<b>n.a.</b>	<b>n.a.</b>	<b>124</b>	<b>121</b>	<b>123</b>
Proportion ending in admission (%) <sup>(b)</sup>					
Resuscitation	82	86	78	79	80
Emergency	67	69	63	63	64
Urgent	45	46	43	43	43
Semi-urgent	19	19	16	17	17
Non-urgent	6	6	4	5	5
<b>Total</b>	<b>30</b>	<b>29</b>	<b>27</b>	<b>28</b>	<b>28</b>

(a) For more information on the public hospital peer group classification see Appendix 2. Not all hospitals include an emergency department and the definition of an emergency department is currently under review.

(b) For 2001–02 and 2002–03, these are the number of occasions of service reported with waiting times data. For 2003–04, 2004–05 and 2005–06, these are the number of occasions of service reported with episode-level data and some additional aggregate data for South Australia for 2003–04.

(c) 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.

(d) 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%.

(e) 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.

(f) 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 and 2005–06 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*.

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

n.a. Not available.

**Table 5.3: Non-admitted patient emergency department presentation statistics<sup>(a)</sup>, by triage category and public hospital peer group<sup>(b)</sup>, states and territories, 2005–06**

Triage category and peer group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Principal referral and Specialist women's and children's hospitals</b>									
Occasions of service with waiting times data									
Resuscitation	8,977	6,868	4,516	2,470	3,772	956	687	946	29,192
Emergency	95,153	74,877	53,910	24,410	31,887	8,567	4,869	5,690	299,363
Urgent	366,274	261,707	239,814	59,106	92,277	37,811	18,224	26,237	1,101,450
Semi-urgent	412,310	380,829	285,658	91,359	105,291	54,117	25,266	45,034	1,399,864
Non-urgent	127,866	84,996	44,232	13,374	12,816	8,032	3,907	2,817	298,040
<i>Total<sup>(c)</sup></i>	1,010,886	809,277	628,130	190,723	246,043	109,881	52,953	80,724	3,128,617
Proportion seen on time (%) <sup>(d)</sup>									
Resuscitation	100	100	100	98	99	95	n.p.	100	100
Emergency	79	84	64	70	69	68	n.p.	58	75
Urgent	56	78	52	61	57	57	n.p.	57	60
Semi-urgent	60	70	55	54	61	59	n.p.	47	61
Non-urgent	83	91	85	79	84	89	n.p.	84	86
<i>Total</i>	64	76	57	60	62	62	n.p.	53	65
Median waiting time to service delivery (minutes)									
Resuscitation	0	0	0	0	0	0	n.p.	0	0
Emergency	5	4	8	7	4	7	n.p.	9	6
Urgent	27	13	29	23	26	25	n.p.	25	23
Semi-urgent	45	28	52	56	43	45	n.p.	65	43
Non-urgent	40	20	37	56	37	24	n.p.	48	33
<i>Total</i>	29	16	33	33	26	28	n.p.	38	27
90th percentile waiting time to service delivery (minutes)									
Resuscitation	0	0	1	0	0	1	n.p.	0	0
Emergency	22	16	34	21	29	26	n.p.	27	24
Urgent	107	63	117	82	110	114	n.p.	83	101
Semi-urgent	162	140	180	156	165	179	n.p.	186	163
Non-urgent	153	117	155	168	152	124	n.p.	149	144
<i>Total</i>	133	106	145	127	132	146	n.p.	147	132
Proportion ending in admission (%) <sup>(e)</sup>									
Resuscitation	86	93	74	78	76	84	n.p.	52	83
Emergency	69	76	58	57	63	61	n.p.	67	67
Urgent	47	56	34	46	43	40	n.p.	44	46
Semi-urgent	21	25	11	20	16	13	n.p.	15	19
Non-urgent	7	7	3	10	6	3	n.p.	3	6
<i>Total</i>	34	38	24	33	33	26	n.p.	28	32

(continued)

**Table 5.3 (continued): Non-admitted patient emergency department presentation statistics<sup>(a)</sup>, by triage category and public hospital peer group<sup>(b)</sup>, states and territories, 2005–06**

Triage category and peer group	NSW	Vic <sup>(b)</sup>	Qld	WA	SA <sup>(b)</sup>	Tas	ACT	NT	Total
<b>Large hospitals</b>									
Occasions of service with waiting times data									
Resuscitation	2,077	518	553	671	190	..	140	..	4,149
Emergency	25,535	12,347	12,144	10,046	3,247	..	1,514	..	64,833
Urgent	112,519	65,795	53,301	39,152	13,866	..	12,935	..	297,568
Semi-urgent	163,216	153,482	93,796	73,370	21,774	..	22,808	..	528,446
Non-urgent	42,599	74,224	27,604	13,521	2,204	..	8,343	..	168,495
<b>Total<sup>(c)</sup></b>	<b>346,034</b>	<b>306,366</b>	<b>187,398</b>	<b>136,791</b>	<b>41,281</b>	..	<b>45,740</b>	..	<b>1,063,610</b>
Proportion seen on time (%) <sup>(d)</sup>									
Resuscitation	100	100	99	99	90	..	n.p.	..	99
Emergency	82	81	76	90	49	..	n.p.	..	80
Urgent	68	81	66	81	33	..	n.p.	..	70
Semi-urgent	67	71	67	79	42	..	n.p.	..	69
Non-urgent	90	84	89	92	81	..	n.p.	..	87
<b>Total</b>	<b>72</b>	<b>77</b>	<b>70</b>	<b>81</b>	<b>41</b>	..	<b>n.p.</b>	..	<b>73</b>
Median waiting time to service delivery (minutes)									
Resuscitation	0	0	0	0	0	..	n.p.	..	0
Emergency	5	4	6	3	11	..	n.p.	..	5
Urgent	20	12	20	9	52	..	n.p.	..	18
Semi-urgent	35	32	36	15	79	..	n.p.	..	34
Non-urgent	23	43	29	14	52	..	n.p.	..	33
<b>Total</b>	<b>23</b>	<b>25</b>	<b>25</b>	<b>10</b>	<b>58</b>	..	<b>n.p.</b>	..	<b>24</b>
90th percentile waiting time to service delivery (minutes)									
Resuscitation	0	0	0	0	1	..	n.p.	..	0
Emergency	18	18	21	11	39	..	n.p.	..	19
Urgent	75	49	81	46	194	..	n.p.	..	72
Semi-urgent	138	117	149	103	245	..	n.p.	..	134
Non-urgent	124	155	129	110	168	..	n.p.	..	140
<b>Total</b>	<b>110</b>	<b>114</b>	<b>121</b>	<b>82</b>	<b>217</b>	..	<b>n.p.</b>	..	<b>115</b>
Proportion ending in admission (%) <sup>(e)(f)</sup>									
Resuscitation	72	82	63	44	n.p.	..	n.p.	..	67
Emergency	63	62	50	43	n.p.	..	n.p.	..	57
Urgent	43	42	25	30	n.p.	..	n.p.	..	37
Semi-urgent	17	16	8	9	n.p.	..	n.p.	..	14
Non-urgent	4	3	2	2	n.p.	..	n.p.	..	3
<b>Total</b>	<b>28</b>	<b>20</b>	<b>15</b>	<b>17</b>	<b>n.p.</b>	..	<b>n.p.</b>	..	<b>21</b>

(continued)

**Table 5.3 (continued): Non-admitted patient emergency department presentation statistics<sup>(a)</sup>, by triage category and public hospital peer group<sup>(b)</sup>, states and territories, 2005–06**

Triage category and peer group	NSW	Vic <sup>(b)</sup>	Qld	WA	SA <sup>(b)</sup>	Tas	ACT	NT	Total
<b>All hospitals reporting waiting times data<sup>(g)</sup></b>									
Occurrences of service with waiting times data									
Resuscitation	12,001	7,519	5,069	3,463	4,019	956	827	987	34,841
Emergency	135,651	90,139	66,054	40,223	37,037	8,567	6,383	6,176	390,230
Urgent	555,006	343,428	293,115	119,076	113,417	37,811	31,159	30,040	1,523,052
Semi-urgent	728,194	576,593	379,454	212,212	158,076	54,117	48,074	57,235	2,213,955
Non-urgent	240,774	182,375	71,836	45,296	16,662	8,032	12,250	16,844	594,069
<b>Total emergency visits<sup>(c)</sup></b>	<b>1,672,141</b>	<b>1,200,054</b>	<b>815,528</b>	<b>420,308</b>	<b>329,211</b>	<b>109,881</b>	<b>98,693</b>	<b>111,282</b>	<b>4,757,098</b>
Proportion seen on time (%) <sup>(d)</sup>									
Resuscitation	100	100	100	98	99	95	100	100	99
Emergency	81	83	66	77	69	68	71	59	77
Urgent	61	79	55	69	56	57	44	59	64
Semi-urgent	66	71	58	67	62	59	47	53	65
Non-urgent	87	89	86	90	85	89	84	87	87
<b>Total emergency visits seen on time</b>	<b>69</b>	<b>77</b>	<b>60</b>	<b>71</b>	<b>62</b>	<b>62</b>	<b>52</b>	<b>60</b>	<b>69</b>
<b>Median waiting time to service delivery (minutes)</b>									
Resuscitation	0	0	0	0	0	0	0	0	0
Emergency	5	4	7	5	5	7	8	9	5
Urgent	23	13	27	17	26	25	36	24	21
Semi-urgent	36	29	48	33	42	45	66	56	37
Non-urgent	30	26	33	16	34	24	51	36	29
<b>Total</b>	<b>25</b>	<b>19</b>	<b>31</b>	<b>20</b>	<b>27</b>	<b>28</b>	<b>46</b>	<b>35</b>	<b>24</b>
<b>90th percentile waiting time to service delivery (minutes)</b>									
Resuscitation	0	0	0	0	0	1	0	0	0
Emergency	21	16	32	18	29	26	34	27	23
Urgent	95	59	111	69	117	114	138	82	93
Semi-urgent	146	129	173	134	164	179	197	175	149
Non-urgent	140	128	144	123	148	124	148	135	136
<b>Total</b>	<b>122</b>	<b>106</b>	<b>140</b>	<b>108</b>	<b>137</b>	<b>146</b>	<b>167</b>	<b>141</b>	<b>123</b>
Proportion ending in admission (%) <sup>(e)(f)</sup>									
Resuscitation	82	91	73	68	75	84	81	52	80
Emergency	66	74	57	51	59	61	57	67	64
Urgent	44	53	33	37	40	40	43	44	43
Semi-urgent	18	22	10	13	13	13	13	16	17
Non-urgent	5	5	3	5	6	3	3	6	5
<b>Total proportion ending in admission (%)</b>	<b>30</b>	<b>32</b>	<b>22</b>	<b>23</b>	<b>28</b>	<b>26</b>	<b>25</b>	<b>25</b>	<b>28</b>

(a) Includes records for which the Type of visit was reported as *Emergency presentation* or was *Not reported*. Excludes *Return visit/planned*, *Pre-arranged admission*, *Patient in transit* and *Dead on arrival*. See Table 5.4.

(b) For more information on the public hospital peer group classification see Appendix 2. Information on the coverage of the waiting times data is presented in Table 5.1.

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

(d) The proportion of occurrences of service for which the waiting time to service delivery was within the time specified in the definition of the triage category.

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

(f) The proportion admitted for all hospitals in South Australia excludes data for *Large hospitals* as one of the reporting hospitals was not able to correctly identify patients who were subsequently admitted to hospital.

(g) *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*.

.. Not applicable.

n.p. Not published.

**Table 5.4: Non-admitted patient emergency department occasion of service statistics<sup>(a)</sup>, by type of visit and public hospital peer group<sup>(b)</sup>, states and territories, 2005–06**

Type of visit and peer group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Principal referral and Specialist women's and children's hospitals</b>									
Emergency presentation	1,010,768	809,277	628,130	190,721	245,179	109,881	52,953	80,720	3,127,629
Return visit, planned	18,125	18,686	12,856	4,305	1,971	4,939	0	2,132	63,014
Pre-arranged admission	2,366	742	2,318	43	241	0	2	0	5,712
Patient in transit	97	254	194	5	0	0	0	5	555
Dead on arrival	1,689	1,983	501	2	0	0	0	24	4,199
Not reported	118	0	0	2	864	0	0	4	988
<b>Total</b>	<b>1,033,163</b>	<b>830,942</b>	<b>643,999</b>	<b>195,078</b>	<b>248,255</b>	<b>114,820</b>	<b>52,955</b>	<b>82,885</b>	<b>3,202,097</b>
<b>Large hospitals</b>									
Emergency presentation	346,027	306,366	187,398	136,791	5,319	..	45,740	..	1,027,641
Return visit, planned	10,065	19,783	12,099	1,531	13	..	887	..	44,378
Pre-arranged admission	277	788	173	16	16	..	20	..	1,290
Patient in transit	31	37	34	0	0	..	8	..	110
Dead on arrival	268	204	145	0	0	..	6	..	623
Not reported	7	0	0	0	35,962	..	0	..	35,969
<b>Total</b>	<b>356,675</b>	<b>327,178</b>	<b>199,849</b>	<b>138,338</b>	<b>41,310</b>	<b>..</b>	<b>46,661</b>	<b>..</b>	<b>1,110,011</b>
<b>Other hospitals</b>									
Emergency presentation	315,145	84,411	..	92,792	41,674	..	..	30,449	564,471
Return visit, planned	19,307	5,660	..	592	4,083	..	..	6,214	35,856
Pre-arranged admission	826	805	..	7	4	..	..	0	1,642
Patient in transit	40	17	..	0	0	..	..	20	77
Dead on arrival	277	65	..	0	0	..	..	0	342
Not reported	76	0	..	2	213	..	..	109	400
<b>Total</b>	<b>335,671</b>	<b>90,958</b>	<b>..</b>	<b>93,393</b>	<b>45,974</b>	<b>..</b>	<b>..</b>	<b>36,792</b>	<b>602,788</b>
<b>Total</b>									
Emergency presentation	1,671,940	1,200,054	815,528	420,304	292,172	109,881	98,693	111,169	4,719,741
Return visit, planned	47,497	44,129	24,955	6,428	6,067	4,939	887	8,346	143,248
Pre-arranged admission	3,469	2,335	2,491	66	261	0	22	0	8,644
Patient in transit	168	308	228	5	0	0	8	25	742
Dead on arrival	2,234	2,252	646	2	0	0	6	24	5,164
Not reported	201	0	0	4	37,039	0	0	113	37,357
<b>Total occasions of service reported at episode-level</b>	<b>1,725,509</b>	<b>1,249,078</b>	<b>843,848</b>	<b>426,809</b>	<b>335,539</b>	<b>114,820</b>	<b>99,616</b>	<b>119,677</b>	<b>4,914,896</b>

(a) For the 78% of occasions of service for which episode-level data were available. For more information see the text of Chapter 5 and Appendix 2.

(b) For more information on the public hospital peer group classification see Appendix 2. Information on the coverage of the waiting times data is presented in Table 5.1.

.. 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.

**Table 5.5: Non-admitted patient emergency department occasions of service<sup>(a)</sup>, by age group and sex, public hospitals, states and territories, 2005-06**

Sex	Age group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Males</b>										
	0-4	122,393	83,372	58,254	31,507	23,806	5,827	6,153	7,993	339,305
	5-14	105,997	73,184	51,317	27,310	19,805	6,391	6,122	6,195	296,321
	15-24	135,988	91,306	76,405	35,629	24,066	10,677	9,152	9,391	392,614
	25-34	121,758	84,970	67,350	30,634	21,427	8,606	7,877	11,045	353,667
	35-44	106,416	75,645	55,588	26,884	19,546	7,591	6,044	10,969	308,683
	45-54	88,073	61,639	42,847	21,051	15,969	6,542	4,960	8,318	249,399
	55-64	76,461	53,252	35,811	17,461	13,579	5,325	4,259	5,316	211,464
	65-74	66,206	47,575	28,334	14,295	11,504	4,510	3,179	3,210	178,813
	75-84	65,183	45,899	22,964	12,925	13,442	3,835	2,713	1,191	168,152
	85 and over	24,609	16,004	9,091	4,788	5,437	1,310	1,008	208	62,455
	<b>Total<sup>(b)</sup></b>	<b>913,226</b>	<b>632,847</b>	<b>447,961</b>	<b>222,484</b>	<b>168,582</b>	<b>60,614</b>	<b>51,467</b>	<b>63,846</b>	<b>2,561,027</b>
<b>Females</b>										
	0-4	95,785	65,771	46,539	25,469	19,122	4,502	5,108	6,646	268,942
	5-14	78,893	57,457	39,125	21,329	15,773	5,309	4,676	5,223	227,785
	15-24	121,730	91,692	72,474	33,710	26,781	9,526	8,986	9,640	374,539
	25-34	113,705	102,254	61,876	30,664	25,866	7,877	7,564	11,067	360,873
	35-44	88,488	74,273	47,759	24,298	18,932	6,566	5,777	9,344	275,437
	45-54	75,691	56,082	37,665	19,118	14,528	5,451	4,806	6,699	220,040
	55-64	64,073	46,847	29,012	14,332	11,720	4,514	3,857	3,919	178,274
	65-74	57,432	42,333	22,541	11,771	10,557	3,757	2,630	1,764	152,785
	75-84	72,928	50,165	24,082	14,157	14,760	4,233	3,007	1,006	184,338
	85 and over	43,446	29,352	14,727	9,449	8,865	2,462	1,738	326	110,365
	<b>Total<sup>(b)</sup></b>	<b>812,246</b>	<b>616,228</b>	<b>395,800</b>	<b>204,297</b>	<b>166,904</b>	<b>54,197</b>	<b>48,149</b>	<b>55,637</b>	<b>2,353,458</b>
<b>Persons<sup>(c)</sup></b>										
	0-4	218,180	149,143	104,795	56,976	42,931	10,330	11,261	14,639	608,255
	5-14	184,892	130,641	90,448	48,639	35,578	11,700	10,798	11,422	524,118
	15-24	257,727	182,999	148,895	69,339	50,848	20,204	18,138	19,072	767,222
	25-34	235,469	187,226	129,247	61,300	47,293	16,483	15,441	22,158	714,617
	35-44	194,906	149,918	103,362	51,185	38,480	14,158	11,821	20,389	584,219
	45-54	163,770	117,721	80,522	40,173	30,498	11,995	9,766	15,037	469,482
	55-64	140,538	100,099	64,826	31,810	25,340	9,839	8,116	9,239	389,807
	65-74	123,640	89,908	50,875	26,068	22,064	8,268	5,809	4,976	331,608
	75-84	138,111	96,064	47,051	27,082	28,203	8,070	5,720	2,198	352,499
	85 and over	68,055	45,356	23,827	14,237	14,303	3,773	2,746	534	172,831
	<b>Total<sup>(d)</sup></b>	<b>1,725,509</b>	<b>1,249,078</b>	<b>843,848</b>	<b>426,809</b>	<b>335,539</b>	<b>114,820</b>	<b>99,616</b>	<b>119,677</b>	<b>4,914,896</b>

(a) For the 78% 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 2.

(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 5.6: Non-admitted patient emergency department occasions of service<sup>(a)</sup>, by Indigenous status, public hospitals, states and territories, 2005–06**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Aboriginal but not Torres Strait Islander origin	46,182	12,553	42,761	39,293	4,394	2,821	1,611	47,713	197,328
Torres Strait Islander but not Aboriginal origin	809	245	4,346	131	55	122	31	321	6,060
Aboriginal and Torres Strait Islander origin	1,450	922	2,895	368	103	112	215	732	6,797
<i>Indigenous</i>	48,441	13,720	50,002	39,792	4,552	3,055	1,857	48,766	210,185
Not Aboriginal or Torres Strait Islander origin	1,641,514	1,233,081	775,818	383,700	271,752	105,131	96,079	70,638	4,577,713
Not reported	35,554	2,277	18,028	3,317	59,235	6,634	1,680	273	126,998
<b>Total</b>	<b>1,725,509</b>	<b>1,249,078</b>	<b>843,848</b>	<b>426,809</b>	<b>335,539</b>	<b>114,820</b>	<b>99,616</b>	<b>119,677</b>	<b>4,914,896</b>

(a) For the 78% 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 2.

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 5.7: Non-admitted patient emergency department occasions of service<sup>(a)</sup>, by triage category and emergency department arrival mode—transport and departure status, public hospitals, Australia, 2005–06**

	Triage category				Total <sup>(b)</sup>
	Resuscitation	Emergency	Urgent	Semi-urgent	
<b>Arrival mode—transport</b>					
Ambulance, air ambulance or helicopter rescue service	29,544	188,574	506,831	338,231	1,088,672
Police/correctional services vehicle	297	5,570	16,206	10,999	36,701
Other <sup>(c)</sup>	5,202	197,234	1,008,759	1,902,038	3,771,711
Not reported	49	569	3,180	8,449	17,812
<b>Total</b>	<b>35,092</b>	<b>391,947</b>	<b>1,534,976</b>	<b>2,259,717</b>	<b>4,914,896</b>
<b>Departure status</b>					
Admitted to this hospital <sup>(d)</sup>	27,871	251,120	661,321	379,583	1,352,697
Non-admitted patient emergency department service episode completed <sup>(e)</sup>	3,478	120,497	798,853	1,680,588	3,186,372
Referred to another hospital for admission	2,352	15,263	29,671	15,952	64,644
Did not wait to be attended by a health care professional	10	778	28,123	162,323	256,267
Left at own risk <sup>(f)</sup>	189	3,570	14,524	17,824	40,579
Died in emergency department as a non-admitted patient	1,072	289	175	62	1,620
Dead on arrival, not treated in emergency department	87	9	318	43	5,576
Not reported	33	421	1,991	3,342	7,141
<b>Total</b>	<b>35,092</b>	<b>391,947</b>	<b>1,534,976</b>	<b>2,259,717</b>	<b>4,914,896</b>

(a) For the 78% 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 2.

(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 5.8: Non-admitted patient emergency department occasions of service<sup>(a)</sup>, by emergency department arrival mode—transport and departure status, public hospitals, states and territories, 2005–06**

	NSW	Vic <sup>(b)</sup>	Qld	WA	SA	Tas	ACT	NT	Total
<b>Arrival mode—transport</b>									
Ambulance, air ambulance or helicopter rescue service	393,218	250,503	223,987	77,775	80,244	27,445	16,523	18,977	1,088,672
Police/correctional services vehicle	11,385	5,771	8,201	3,861	2,026	1,390	793	3,274	36,701
Other <sup>(c)</sup>	1,318,815	992,804	608,282	344,674	253,082	85,985	82,288	85,781	3,771,711
Not reported	2,091	0	3,378	499	187	0	12	11,645	17,812
<b>Total</b>	<b>1,725,509</b>	<b>1,249,078</b>	<b>843,848</b>	<b>426,809</b>	<b>335,539</b>	<b>114,820</b>	<b>99,616</b>	<b>119,677</b>	<b>4,914,896</b>
<b>Departure status</b>									
Admitted to this hospital <sup>(d)</sup>	502,874	393,028	181,572	98,273	95,292	28,751	24,354	28,553	1,352,697
Non-admitted patient emergency department service episode completed <sup>(e)</sup>	1,080,170	787,990	577,943	302,605	214,722	76,618	65,960	80,364	3,186,372
Referred to another hospital for admission	24,903	3,601	12,697	11,951	9,352	878	1,078	184	64,644
Did not wait to be attended by a health care professional	94,266	53,169	63,144	11,325	9,725	7,723	7,729	9,186	256,267
Left at own risk <sup>(f)</sup>	17,526	8,870	6,869	2,057	3,253	290	428	1,286	40,579
Died in emergency department as a non-admitted patient	0	177	615	414	204	100	61	49	1,620
Dead on arrival, not treated in emergency department	2,249	2,243	614	6	0	404	6	54	5,576
Not reported	3,521	0	394	178	2,991	56	0	1	7,141
<b>Total</b>	<b>1,725,509</b>	<b>1,249,078</b>	<b>843,848</b>	<b>426,809</b>	<b>335,539</b>	<b>114,820</b>	<b>99,616</b>	<b>119,677</b>	<b>4,914,896</b>

(a) For the 78% 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 2.

(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.

**Table 5.9: Non-admitted patient emergency department occasions of service<sup>(a)(b)</sup> duration (hours:minutes)<sup>(c)</sup>, by triage category, public hospitals, states and territories, 2005–06**

Triage category	NSW	Vic <sup>(c)</sup>	Qld	WA	SA	Tas	ACT	NT	Total
<b>Resuscitation</b>									
Average duration of occasion of service <sup>(d)</sup>	3:39	6:05	4:46	2:40	4:58	4:20	2:49	3:00	4:22
Median duration of occasion of service <sup>(d)</sup>	2:39	4:35	3:43	2:05	3:41	3:46	2:15	2:12	3:11
Average duration of service event <sup>(e)</sup>	3:39	6:05	4:45	2:40	4:57	4:19	2:49	3:00	4:22
Median duration of service event <sup>(e)</sup>	2:38	4:35	3:42	2:04	3:40	3:45	2:15	2:12	3:11
<b>Emergency</b>									
Average duration of occasion of service <sup>(d)</sup>	4:29	5:60	5:29	3:10	6:29	5:19	4:15	3:17	5:03
Median duration of occasion of service <sup>(d)</sup>	3:30	4:28	4:10	2:35	4:44	4:20	3:25	2:38	3:46
Average duration of service event <sup>(e)</sup>	4:20	5:53	5:15	3:02	6:18	5:07	4:01	3:04	4:53
Median duration of service event <sup>(e)</sup>	3:21	4:21	3:56	2:27	4:33	4:09	3:10	2:24	3:37
<b>Urgent</b>									
Average duration of occasion of service <sup>(d)</sup>	4:19	5:05	4:47	2:59	6:00	4:47	4:28	3:21	4:35
Median duration of occasion of service <sup>(d)</sup>	3:25	3:48	3:34	2:25	4:05	3:52	3:39	2:45	3:28
Average duration of service event <sup>(e)</sup>	3:39	4:41	4:01	2:31	5:18	4:01	3:28	2:44	3:58
Median duration of service event <sup>(e)</sup>	2:45	3:24	2:46	1:59	3:22	3:05	2:36	2:06	2:50
<b>Semi-urgent</b>									
Average duration of occasion of service <sup>(d)</sup>	3:08	3:27	3:18	2:28	3:45	3:21	3:17	2:54	3:13
Median duration of occasion of service <sup>(d)</sup>	2:18	2:28	2:22	1:57	2:29	2:31	2:33	2:18	2:20
Average duration of service event <sup>(e)</sup>	2:09	2:36	2:05	1:36	2:44	2:06	1:45	1:36	2:13
Median duration of service event <sup>(e)</sup>	1:11	1:31	1:02	1:05	1:28	1:15	0:59	1:01	1:14
<b>Non-urgent</b>									
Average duration of occasion of service <sup>(d)</sup>	1:58	2:03	1:53	1:48	2:14	1:42	2:04	1:50	1:58
Median duration of occasion of service <sup>(d)</sup>	1:22	1:30	1:13	1:22	1:33	1:12	1:41	1:21	1:25
Average duration of service event <sup>(e)</sup>	1:04	1:12	0:54	1:06	1:16	0:53	0:56	0:52	1:05
Median duration of service event <sup>(e)</sup>	0:30	0:37	0:24	0:43	0:37	0:29	0:33	0:24	0:31
<b>Total</b>									
Average duration of occasion of service <sup>(d)</sup>	3:30	3:57	3:56	2:37	4:49	3:56	3:36	2:54	3:42
Median duration of occasion of service <sup>(d)</sup>	2:37	2:47	2:50	2:05	3:09	3:02	2:47	2:17	2:40
Average duration of service event <sup>(e)</sup>	2:44	3:18	3:00	1:58	4:01	2:59	2:24	1:55	2:55
Median duration of service event <sup>(e)</sup>	1:42	2:00	1:44	1:24	2:18	2:00	1:25	1:13	1:45

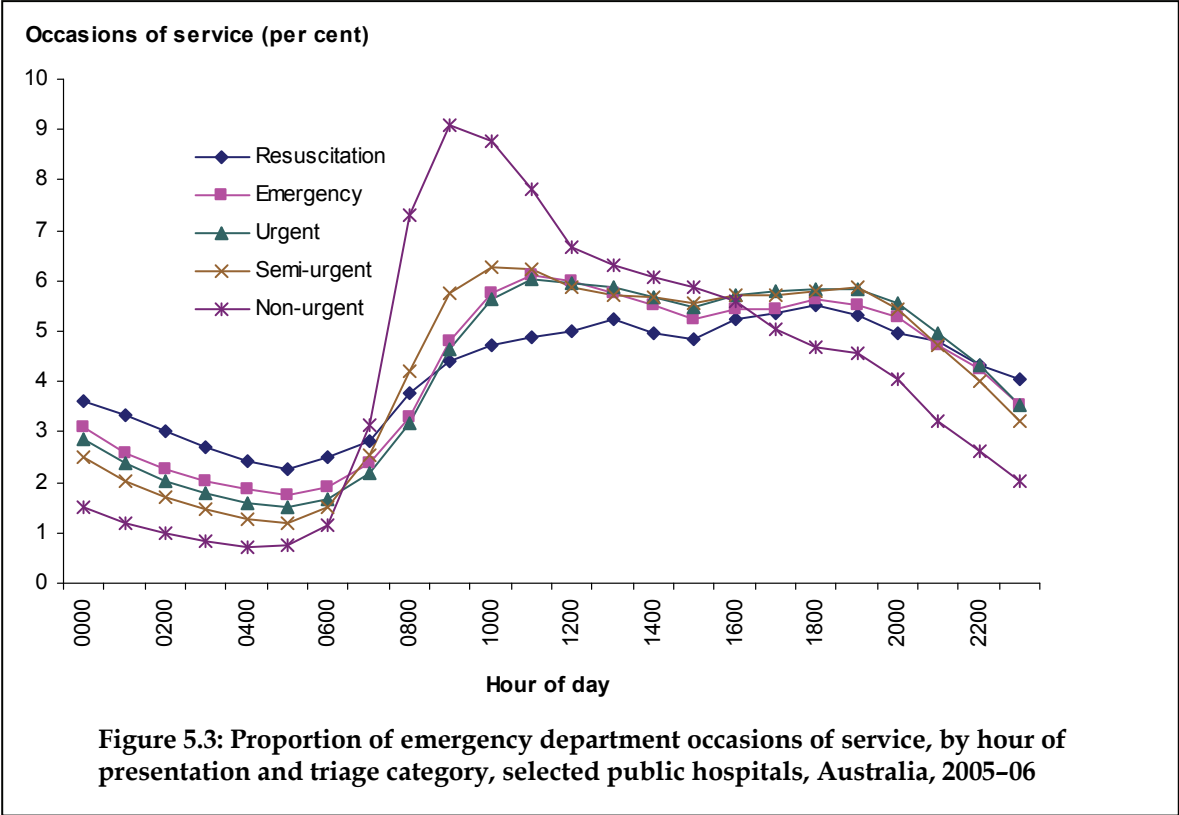
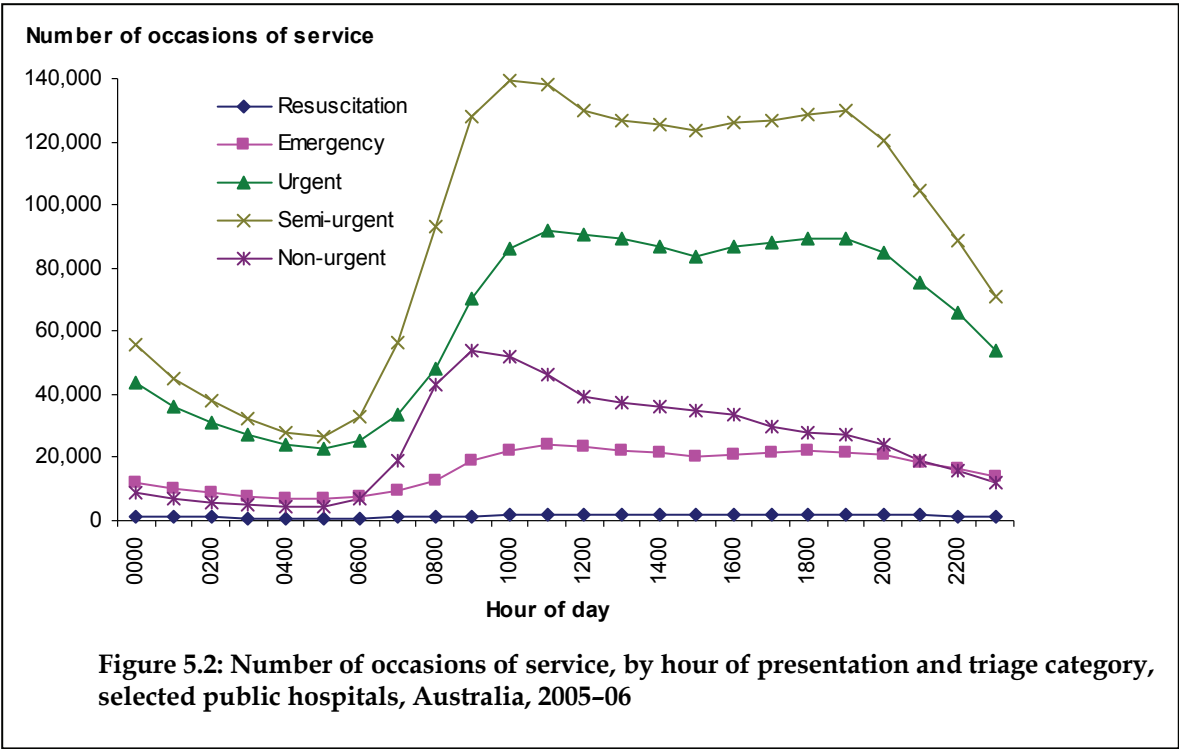
(a) Includes records for which the Type of visit was reported as *Emergency presentation* or was *Not reported*. Excludes occasions of service for patients whose departure status was *Did not wait to be attended by a health care professional*, *Left at own risk* or *Dead on arrival*, and records with invalid or missing waiting times data.

(b) For the 78% of occasions of service for which episode-level data were available. For more information see the text of Chapter 5 and Appendix 2.

(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) 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.

(e) 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.



**Table 5.10: Outpatient occasions of service, by public hospital peer group<sup>(a)</sup>, states and territories, 2005-06**

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
<b>Principal referral and Specialist women's and children's hospitals</b>									
Hospitals reporting outpatient occasions of service									
Individual occasions of service	28	19	17	5	5	3	1	2	80
Group occasions of service	28	12	11	5	5	n.a.	1	0	62
Occasions of service reported									
Individual occasions of service	3,763,340	1,754,039	2,003,625	723,500	754,343	412,832	161,990	93,072	9,666,741
Group occasions of service	42,976	4,667	6,346	43,043	9,950	n.a.	3,474	0	110,456
<b>Large hospitals</b>									
Hospitals reporting outpatient occasions of service									
Individual occasions of service	13	13	6	5	2	..	1	..	40
Group occasions of service	13	8	6	2	2	..	0	..	31
Occasions of service reported									
Individual occasions of service	656,418	512,135	266,167	86,319	147,395	..	39,940	..	1,708,374
Group occasions of service	8,359	2,745	1,601	3,545	1,778	..	0	..	18,028
<b>Total<sup>(b)</sup></b>									
Hospitals reporting outpatient occasions of service									
Individual occasions of service	42	32	23	10	8	3	2	2	122
Group occasions of service	42	20	17	7	8	n.a.	1	0	95
Occasions of service reported									
Individual occasions of service	4,432,697	2,266,174	2,269,792	809,819	912,782	412,832	201,930	93,072	11,399,098
Group occasions of service	51,980	7,412	7,947	46,588	11,945	n.a.	3,474	0	129,346
Estimated proportion of occasions of service in NOCD <sup>(c)</sup>									
Individual occasions of service	78	82	75	53	80	100	76	76	76
Group occasions of service	71	47	81	100	90	n.a.	78	..	74

(a) For more information on the public hospital peer group classification see Appendix 2.

(b) The total includes data for hospitals that were not classified as *Principal referral and Specialist women's and children's hospitals* or *Large hospitals* in *Australian hospital statistics 2004-05*.

(c) The number of outpatient occasions of service reported to the National Outpatient Care Database (NOCD) divided by the number of outpatient-related occasions of service from the National Public Hospital Establishments Database (NPHEd), as a percentage. Where the number of occasions of service reported to the NOCD is greater than the outpatient-related occasions of service reported to the NPHEd, the proportion is presented as 100%.

.. Not applicable.

n.a. Not available.

**Table 5.11: Outpatient care individual occasions of service<sup>(a)(b)</sup>, by outpatient clinic type, selected public hospitals, states and territories, 2005-06**

Clinic type	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
Allied health	645,463	771,509	390,187	288,158	193,151	89,754	24,956	10,631	2,413,809
Dental	336,145	65,244	138,246	2,867	10,851	1,309	0	0	554,662
Gynaecology	52,941	48,564	67,911	8,394	29,121	13,009	4,384	3,603	227,927
Obstetrics	680,174	275,141	278,857	39,012	101,606	46,829	45,048	14,771	1,481,438
Cardiology	72,475	36,536	85,770	24,298	24,354	12,988	12,539	1,630	270,590
Endocrinology	146,320	44,346	63,494	23,904	27,970	27,860	6,807	204	340,905
Oncology	208,665	157,398	152,960	46,334	23,918	54,211	28,683	1,044	673,213
Respiratory	103,620	18,371	49,476	11,586	30,862	4,234	8,459	593	227,201
Gastroenterology	16,630	19,863	25,596	8,341	15,267	769	5,088	0	91,554
Medical	1,180,008	194,078	331,972	160,165	170,240	47,410	17,067	14,564	2,115,504
General practice/primary care	140,696	0	17,973	827	0	..	0	0	159,496
Paediatric	76,911	13,991	26,412	4,251	19,758	15,069	7,852	3,620	167,864
Endoscopy	10,828	0	10,900	1,145	..	1,344	2,154	1,117	27,488
Plastic surgery	27,759	74,519	26,475	27,901	20,976	3,045	2,720	740	184,135
Urology	21,142	39,055	33,212	7,793	14,241	1,551	1,326	456	118,776
Orthopaedic	272,257	142,946	219,809	55,988	55,761	15,970	8,853	10,504	782,088
Ophthalmology	129,855	95,078	60,561	43,453	52,367	8,495	40	8,077	397,926
Ear, nose and throat	26,744	40,683	35,201	15,160	18,233	1,739	992	4,347	143,099
Pre-admission and pre-anaesthesia	142,088	87,704	110,591	11,977	34,913	16,227	13,167	6,106	422,773
Chemotherapy	61,180	0	15,090	0	..	9,677	6,739	0	92,686
Dialysis	9,277	0	..	2,430	..	..	0	2,666	14,373
Surgery	62,662	128,758	120,135	25,650	65,513	41,342	3,626	8,296	455,982
Paediatric surgery	8,857	12,390	8,964	185	3,680	n.a.	1,430	103	35,609
<b>Total</b>	<b>4,432,697</b>	<b>2,266,174</b>	<b>2,269,792</b>	<b>809,819</b>	<b>912,782</b>	<b>412,832</b>	<b>201,930</b>	<b>93,072</b>	<b>11,399,098</b>

(a) Outpatient care individual occasions of service were required to be reported for public hospitals that were classified as either as *Principal referral and Specialist women's and children's hospitals* or *Large hospitals* in *Australian hospital statistics 2004-05*.

(b) There were variations among jurisdictions in the reporting of occasions of service because of differences in admission practices and in the types of facilities offering these services.

n.a. Not available.

.. Not applicable.

**Table 5.12: Outpatient care group occasions of service<sup>(a)(b)</sup>, by clinic type, selected public hospitals, states and territories, 2005-06**

Clinic type	NSW	Vic	Qld	WA <sup>(c)</sup>	SA	Tas	ACT	NT	Total
Allied health	15,657	7,412	5,257	46,588	5,252	n.a.	2,492	n.a.	82,658
Dental	34	0	0	0	0	n.a.	0	n.a.	34
Gynaecology	265	0	0	0	0	n.a.	0	n.a.	265
Obstetrics	3,669	0	1,540	0	1,516	n.a.	619	n.a.	7,344
Cardiology	2,285	0	46	0	310	n.a.	0	n.a.	2,641
Endocrinology	1,915	0	513	0	130	n.a.	36	n.a.	2,594
Oncology	556	0	164	0	0	n.a.	0	n.a.	720
Respiratory	2,274	0	3	0	23	n.a.	5	n.a.	2,305
Gastroenterology	74	0	0	0	40	n.a.	0	n.a.	114
Medical	23,530	0	421	0	1,884	n.a.	306	n.a.	26,141
General practice/primary care	295	0	0	0	0	n.a.	0	n.a.	295
Paediatric	388	0	0	0	334	n.a.	16	n.a.	738
Endoscopy	0	0	0	0	..	n.a.	0	n.a.	0
Plastic surgery	0	0	0	0	1,514	n.a.	0	n.a.	1,514
Urology	27	0	0	0	0	n.a.	0	n.a.	27
Orthopaedic	111	0	0	0	796	n.a.	0	n.a.	907
Ophthalmology	0	0	0	0	0	n.a.	0	n.a.	0
Ear, nose and throat	55	0	0	0	0	n.a.	0	n.a.	55
Pre-admission and pre-anaesthesia	317	0	0	0	0	n.a.	0	n.a.	317
Chemotherapy	392	0	0	0	..	n.a.	0	n.a.	392
Dialysis	27	0	..	0	..	n.a.	0	n.a.	27
Surgery	109	0	3	0	146	n.a.	0	n.a.	258
Paediatric surgery	0	0	0	0	0	n.a.	0	n.a.	0
<b>Total</b>	<b>51,980</b>	<b>7,412</b>	<b>7,947</b>	<b>46,588</b>	<b>11,945</b>	<b>n.a.</b>	<b>3,474</b>	<b>n.a.</b>	<b>129,346</b>

(a) Outpatient care group sessions were required to be reported for public hospitals that were classified as either as *Principal referral and Specialist women's and children's hospitals* or *Large hospitals* in *Australian hospital statistics 2004-05*.

(b) There were variations among jurisdictions in the reporting of group occasions of service because of differences in the admission practices and the types of facilities offering these services.

(c) Western Australia data represent the number of individuals who attended group sessions rather than the number of group sessions.

n.a. Not available.

.. Not applicable.