



National Health Performance Authority

National Health Performance Authority

Hospital Performance:

Cancer surgery waiting times in public hospitals in 2011–12



National Health Performance Authority

GPO Box 9848

Sydney, NSW 2001 Australia

Telephone: +61 2 9186 9210

www.nhpa.gov.au

Paper-based publications

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Table of contents

Summary	iii
Key findings	iii
Introduction	1
About this report	1
The importance of waiting times for cancer surgery	2
Urgency categories for cancer surgery in Australia	2
About the data	3
Fair comparisons: hospital peer groups	3
Waiting times for surgery for malignant bowel cancer, 2011–12	5
Median waiting times	6
Surgeries within 30 and 45 days	6
Waiting times for surgery for malignant breast cancer, 2011–12	11
Median waiting times	12
Surgeries within 30 and 45 days	12
Waiting times for surgery for malignant lung cancer, 2011–12	17
Median waiting times	18
Surgeries within 30 and 45 days	18
References	23
Acknowledgements	24
About the Authority	25

Summary

Cancer is a major cause of death and illness in Australia, being responsible for one-third of all deaths and one-fifth of the total burden of death and disability.¹

This report examines waiting times for surgery for three of the most common cancers in Australia for which surgery is a key component of treatment: malignant bowel, breast and lung cancer. Waiting times for surgery for malignant cancers are a measure of access to potentially life-saving treatment. Without timely surgery, these cancers may progress and those with early-stage disease may face a reduced opportunity for cure.

In Australia there are no maximum acceptable waiting time benchmarks for planned cancer surgery. Surgeries are prioritised using the same waiting list system as other planned surgeries. The patients covered by this report were assigned to planned surgery waiting lists by surgeons as urgent or semi-urgent cases. Urgent cases are expected to be completed within 30 days, while semi-urgent cases are meant to be completed within 90 days.

In 2011–12 there were 31,988 surgeries for malignant bowel, breast, and lung cancer in Australia. Of these surgeries, 40% (12,699) were planned surgeries performed in public hospitals or in private hospitals on behalf of public hospitals. The remainder were performed in private hospitals or as emergency surgeries in public hospitals. This report shows waiting times across 155 of Australia's public hospitals. Not all of these hospitals performed surgery for all three cancers (see **Figures 2f, 3f and 4d on pages 10, 16 and 21**).

The National Health Performance Authority reports the percentage of surgeries completed within the urgency category timeframe at each hospital. Because of the marked variation between hospitals in the proportions of patients assigned to urgent and semi-urgent categories in 2011–12, the Authority focuses this report instead on the percentage of patients receiving their surgery within 30 and 45 days and the median waiting time at each hospital.

There is no agreed definition of poor performance in relation to waiting times for cancer surgery. Therefore, the Authority makes no determination that any hospital is performing either well or poorly. Instead, the information in this report is intended to help health care professionals to see what is possible at similar hospitals and to support sharing of successful strategies to manage surgical care waiting lists.

Key findings

The report's findings can be considered in the context of two themes:

- The variation between hospitals in waiting times for surgery
- The number of patients seen within 30 and 45 days for their surgery.

The variation between hospitals in waiting times for surgery

The report shows that most public hospitals provided timely surgery for malignant bowel, breast, and lung cancer in 2011–12. There were a small number of hospitals where some patients faced longer waits.

The median waiting time is the time within which half of patients received their surgery, meaning that the other half of patients at that particular hospital waited longer than this time.

Across **major metropolitan hospitals**, which account for 67% of all surgeries in this report, the median waiting times varied as follows:

- **Bowel cancer surgery:** the shortest median waiting time at any hospital was **5 days** and the longest was **37 days** (Figure 2a, page 7)
- **Breast cancer surgery:** the shortest median waiting time at any hospital was **6 days** and the longest was **22 days** (Figure 3a, page 13)
- **Lung cancer surgery (all major hospitals):** the shortest median waiting time at any hospital was **4 days** and the longest was **43 days** (Figure 4a, page 19).

The report shows there were no apparent differences in median waiting times between major metropolitan and major regional hospitals for bowel and breast cancer surgeries. Due to the smaller number of hospitals performing lung cancer surgery, hospitals are not differentiated into metropolitan and regional groups.

Malignant bowel cancer surgery

In 2011–12, among the 49 **major metropolitan hospitals** performing planned surgery for malignant bowel cancer:

- Thirty hospitals performed 90% or more surgeries within 30 days. Of these, five hospitals performed 100%
- By 45 days, 44 hospitals had performed 90% or more surgeries. Of these, 17 hospitals performed 100%.

Among the 24 **major regional hospitals**:

- Sixteen hospitals performed 90% or more surgeries within 30 days. Of these, four hospitals performed 100%
- By 45 days, 22 hospitals had performed 90% or more surgeries. Of these, 11 hospitals performed 100%.

Among the 12 **large hospitals**:

- Nine hospitals performed 90% or more surgeries within 30 days. Of these, five hospitals performed 100%
- By 45 days, 10 hospitals had performed 90% or more surgeries. Of these, eight hospitals performed 100%.

Across all peer groups, 55 of the 85 peered hospitals completed at least 90% of malignant bowel cancer surgeries within 30 days. Of the 30 remaining hospitals those with the lowest percentages of patients who had surgery within 30 days were **Princess Alexandra, Qld (39%)**, **Calvary Mater [Newcastle], NSW (47%)** and **Fremantle, WA (52%)** (Figures 2b to 2d, pages 8 to 10).

By 45 days, 76 of the 85 hospitals completed at least 90% of malignant bowel cancer surgeries. Of the nine remaining hospitals those with the lowest percentages of patients who had surgery within 45 days were **Princess Alexandra, Qld (61%)** and **Fremantle, WA (68%)** (Figures 2b to 2d, pages 8 to 10).

Malignant breast cancer surgery

In 2011–12, among the 44 **major metropolitan hospitals** performing planned surgery for malignant breast cancer:

- Thirty-nine hospitals performed 90% or more surgeries within 30 days. Of these, eight hospitals performed 100%
- By 45 days, all hospitals had performed 90% or more surgeries. Of these, 22 hospitals performed 100%.

Among the 25 **major regional hospitals**:

- Twenty hospitals performed 90% or more surgeries within 30 days. Of these, five hospitals performed 100%
- By 45 days, all hospitals had performed 90% or more surgeries. Of these, 17 hospitals performed 100%.

Among the 14 **large hospitals**:

- Twelve hospitals performed 90% or more surgeries within 30 days. Of these, six hospitals performed 100%
- By 45 days, all hospitals had performed 90% or more surgeries. Of these, nine hospitals performed 100%.

Across all peer groups, 71 of the 83 peered hospitals completed at least 90% of malignant breast cancer surgeries within 30 days. Of the 12 remaining hospitals those with the lowest percentages of patients who had surgery within 30 days were **Calvary Mater [Newcastle], NSW (78%)** and **Nambour, Qld (79%)** (**Figures 3b to 3d, pages 14 to 16**).

By 45 days, all 83 hospitals completed at least 90% of malignant breast cancer surgeries (**Figures 3b to 3d, pages 14 to 16**).

Malignant lung cancer surgery

In 2011–12, among the 28 **major metropolitan and regional hospitals** performing planned surgery for malignant lung cancer:

- Seventeen hospitals performed 90% or more surgeries within 30 days. Of these, nine hospitals performed 100%
- By 45 days, 25 hospitals had performed 90% or more surgeries. Of these, 16 hospitals performed 100%.

The hospitals with the lowest percentages of patients seen within 30 days were **Liverpool, NSW (36%)** and **Princess Alexandra, Qld (67%)** (**Figure 4b, page 20**).

The hospitals with the lowest percentages of patients who had surgery within 45 days were **Liverpool, NSW (55%)** and **St George, NSW (88%)** (**Figure 4b, page 20**).

The number of patients seen within 30 and 45 days for their surgery

In 2011–12, most (91%) of the 12,699 patients in this report received their surgery within 30 days. This means that nationally, 1,090 patients waited longer than 30 days for their surgery for malignant cancer.

Nearly all patients (97%) received their surgery within 45 days. This means that nationally, 382 patients waited longer than 45 days for their surgery for malignant cancer.

The number of patients who received bowel, breast and lung cancer surgery within 30 and 45 days is provided in **Figures 2f, 3f and 4d on pages 10, 16 and 21**.

How well does your hospital perform?

The National Health Performance Authority has released new 2011–12 data on the MyHospitals website for:

- Waiting times for malignant bowel cancer surgery
- Waiting times for malignant breast cancer surgery
- Waiting times for malignant lung cancer surgery

To find more information about your local hospital go to www.myhospitals.gov.au

Introduction

About this report

In this report, the Authority presents data on an indicator agreed by the Council of Australian Governments, *Cancer care pathway – waiting times for cancer care*.

Cancer affects the lives of millions of Australians. It is responsible for one-third of all deaths and nearly one-fifth of the total burden due to disease and disability in Australia. One in two men and one in three women will be diagnosed with cancer before the age of 85. The five most common cancers in Australia are bowel, breast, lung, melanoma and prostate cancer.¹

This report examines waiting times for surgery for three of these cancers: malignant bowel, breast and lung cancer.

Cancer treatment is likely to involve one or more of the following: surgery, chemotherapy, radiation therapy or palliative care. Surgery for the treatment of cancer can be provided on an elective (planned) or emergency basis.

The waiting time for planned cancer surgery is the time (in days) between being placed on a waiting list for surgery and the date of admission for that surgery. The waiting time does not include any days during which the patient was not ready for their surgery due to personal or medical reasons (**Figure 1, page 2**).

There is no agreed definition of poor performance in relation to waiting times for cancer surgery. As such, the Authority makes no determination that any hospital is performing well or poorly in relation to cancer surgery waiting times.

What is elective (planned) surgery?

Planned surgery (sometimes referred to as elective) is surgery that can be scheduled by placing a patient on a waiting list.

Patients that require emergency surgeries are not placed on public hospital surgery waiting lists. These emergency surgeries are not included in this report.

Waiting times are reported across 155 of Australia's public hospitals. Not all of these hospitals performed surgeries for all three cancers. This explains why the total number of hospitals reported is different for each cancer.

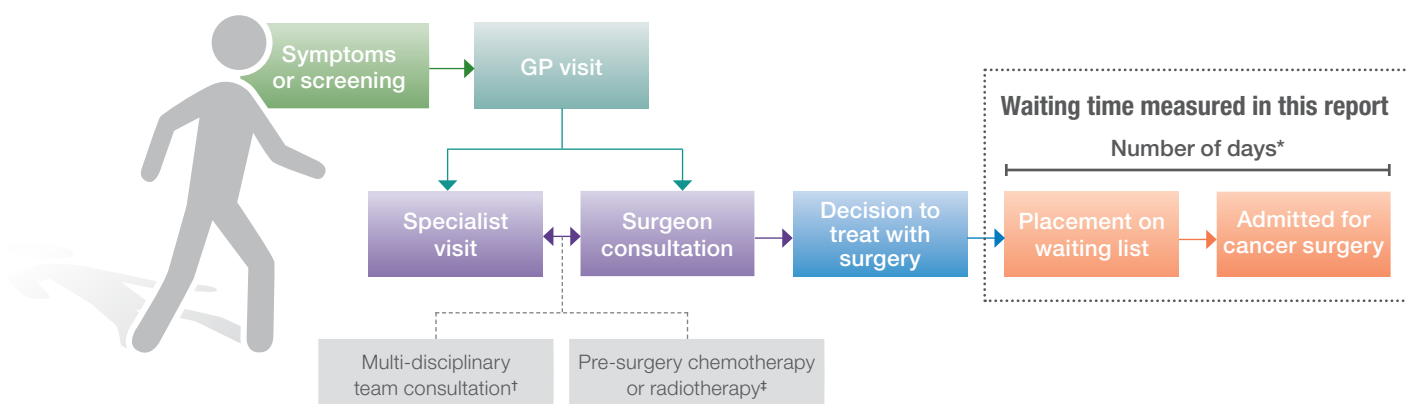
Waiting times are reported across:

- 127 hospitals for malignant bowel cancer
- 137 hospitals for malignant breast cancer
- 45 hospitals for malignant lung cancer.

For more information on the hospitals covered in this report, see *Hospital Performance: Cancer surgery waiting times in public hospitals in 2011–12, Technical Supplement*.

The information in this report is intended to provide the public, clinicians and hospital managers with a greater insight into how hospitals are performing relative to similar hospitals, and to highlight where there may be opportunities for improvement.

Figure 1: The cancer surgery treatment pathway



The importance of waiting times for cancer surgery

Surgery is a major component of evidence-based treatment for bowel, breast, and lung cancer.^{2–4} This report focuses on surgery used to treat malignant cancers that may progress to more advanced disease and spread to other organs if left untreated.

Without timely surgery the cancer may progress, and for those with early stage disease there may be less opportunity for cure.^{5–7} Delays in cancer surgery can also result in distress for patients and their carers.^{5–7} Surgery for benign or precancerous lesions of the bowel, breast, or lung are not included in this report.

Urgency categories for cancer surgery in Australia

Australia does not have a national recommended maximum waiting time for cancer surgery. However, Australia has nationally defined categories that describe the urgency of **all**

planned surgeries in Australian public hospitals. Surgeons classify patients waiting for planned surgery as urgent, semi-urgent or non-urgent.

Most patients waiting for bowel, breast or lung cancer surgery are listed as urgent (surgery within 30 days is clinically recommended) and a lesser number are listed as semi-urgent (surgery within 90 days is clinically recommended).[§]

The bowel, breast, and lung procedures included in this report were selected with advice from clinical experts. The group advised that in most instances, the procedures included in this report would be categorised as urgent (requiring surgery within 30 days).

The 2011–12 cancer surgery waiting times data showed marked variation in the allocation of urgency categories across hospitals. The proportion of semi-urgent cancer surgeries (i.e. requiring surgery within 90 days) ranged from 0% to 93% across all hospitals.

* Excluding any days the patient was not ready for surgery or any days the patient was waiting with a less urgent clinical urgency category than at admission.
† Some patients may be seen by multi-disciplinary teams to decide on their treatment. Teams can include the surgeon, oncologist (cancer specialist doctor), and other health care professionals.
‡ In some cases, treatment for cancer may involve chemotherapy or radiotherapy prior to surgery.
§ In 2011–12 there were a small number of patients that had planned cancer surgery that was classified as non-urgent. These patients are not covered in this report.

Variation in urgency category allocation is a recognised issue for collating consistent data for planned surgery in Australia.[§] Similarly, there is variation in the application of the *ready for care* status of patients waiting for elective surgery. In 2012 work commenced at the request of health ministers from all states and territories (through the Standing Council on Health) to further standardise elective surgery urgency categories and approaches to recording patients not ready for surgery.[§]

For more information on urgency categories see *Hospital Performance: Cancer surgery waiting times in public hospitals in 2011–12, Technical Supplement*.

About the data

Data sources

Waiting times are calculated using data from the National Elective Surgery Waiting Times Data Collection and National Hospital Morbidity Database.

Measuring surgery waiting times

Waiting times are reported for people who:

- Had a principal diagnosis of malignant bowel, breast or lung cancer

What is malignant cancer?

In this report, the term ‘malignant’ refers to those cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

- Were on an elective surgery waiting list for surgery for the treatment of malignant bowel, breast or lung cancer
- Were categorised with a clinical urgency of urgent or semi-urgent.[§]

For each hospital the report shows:

1. The **number of admissions for surgery** (number of surgeries)
2. **Median waiting times** for surgery (in days) which is the time within which half of patients received their surgery (meaning that the remaining half waited longer than this time)
3. The percentage of patients that received their surgery:
 - **within 30 days**
 - **within 45 days**
 - **within the clinical urgency category time.**

The report also identifies hospitals that took up to 60 or 75 days to complete at least 90% of cancer surgeries.

Fair comparisons: hospital peer groups

A hospital peer classification has been applied to report cancer surgery waiting times in a comparable manner.

Our analyses show that performance for median waiting times does not vary significantly between peer groups (**see peer performance, Figures 2a and 3a**).

§ In 2011–12 there were a small number of patients that had planned cancer surgery that was classified as non-urgent. These patients are not covered in this report.

Results are reported for some hospitals that are not peered. These hospitals are not compared as they are not similar to other hospitals, or to one another.

In 2011–12, there were 78 hospitals that provided surgery for fewer than 10 patients for one or more of the three cancers in this report. These hospitals are reported together as one entity for each cancer to provide insights into waiting times where there are small volumes of surgery.

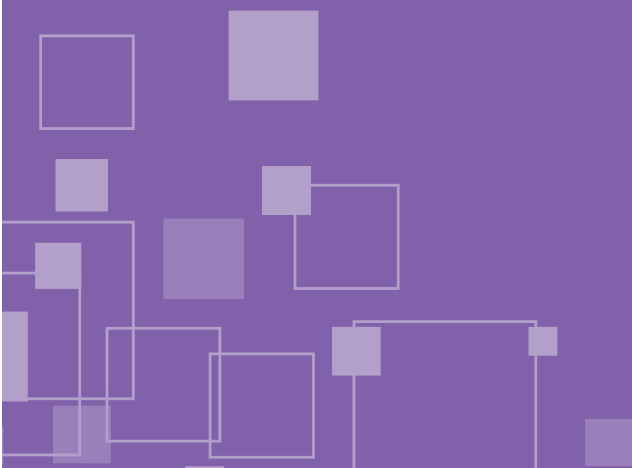
For more information see *Hospital Performance: Cancer surgery waiting times in public hospitals in 2011–12, Technical Supplement*.

Table 1: Numbers and percentages of surgeries for the treatment of malignant bowel, breast and lung cancer, 2011–12

	Bowel cancer	Breast cancer	Lung cancer	TOTAL
Number of surgeries (admissions) for the treatment of malignant bowel, breast and lung cancer in public and private hospitals in Australia	11,729	18,256	2,003	31,988
Number of planned surgeries (admissions) for the treatment of malignant bowel, breast and lung cancer in public hospitals in this report	4,345	7,436	918	12,699
Surgeries (admissions) for malignant bowel, breast and lung cancer in this report as a percentage of all such surgeries in Australia	37%	41%	46%	40%

Waiting times for surgery

Malignant bowel cancer, 2011–12



Waiting times for surgery for malignant bowel cancer, 2011–12

In 2011–12, there were 11,729 patients admitted to hospital for surgery for malignant bowel cancer in Australia. Nearly four in 10 (37%) of these patients (4,345) received planned surgery at one of the 127 public hospitals covered in this section of the report; most of these 4,345 patients (69%) received their care in major metropolitan hospitals (**Table 1, page 4 and Figure 2f, page 10**).

Median waiting times

In 2011–12, the time within which half of patients received their surgery (median waiting time) varied from hospital to hospital. The ranges in median waiting times across peer groups were:

- **Major metropolitan hospitals:** 5 to 37 days
- **Major regional hospitals:** 6 to 22 days
- **Large hospitals:** 5 to 32 days

(**Figure 2a, page 7**).

Surgeries within 30 and 45 days

Across Australia, a total of 55 of the 85 peered hospitals provided surgery for at least 90% of patients within 30 days. Of these, 14 peered hospitals provided surgery for 100% of patients within 30 days.

The hospitals with the lowest percentages of patients that received their surgery within 30 days were:

- **Major metropolitan hospitals**
 - Princess Alexandra, Qld – 39%
 - Fremantle, WA – 52%
- **Major regional hospitals**
 - Royal Hobart, Tas – 61%
 - Coffs Harbour, NSW – 65%

- **Large hospitals**

- Calvary Mater [Newcastle], NSW – 47%
- Repatriation General, SA – 83%.

By 45 days, a total of 76 peered hospitals had provided surgery for at least 90% of patients. Of these, 36 hospitals provided surgery for 100% of patients.

The hospitals with the lowest percentages of patients that received their surgery within 45 days were:

- **Major metropolitan hospitals**
 - Princess Alexandra, Qld – 61%
 - Fremantle, WA – 68%
- **Major regional hospitals**
 - Royal Hobart, Tas – 80%
 - South West [Bunbury], WA – 88%
- **Large hospitals**
 - Calvary Mater [Newcastle], NSW – 88%

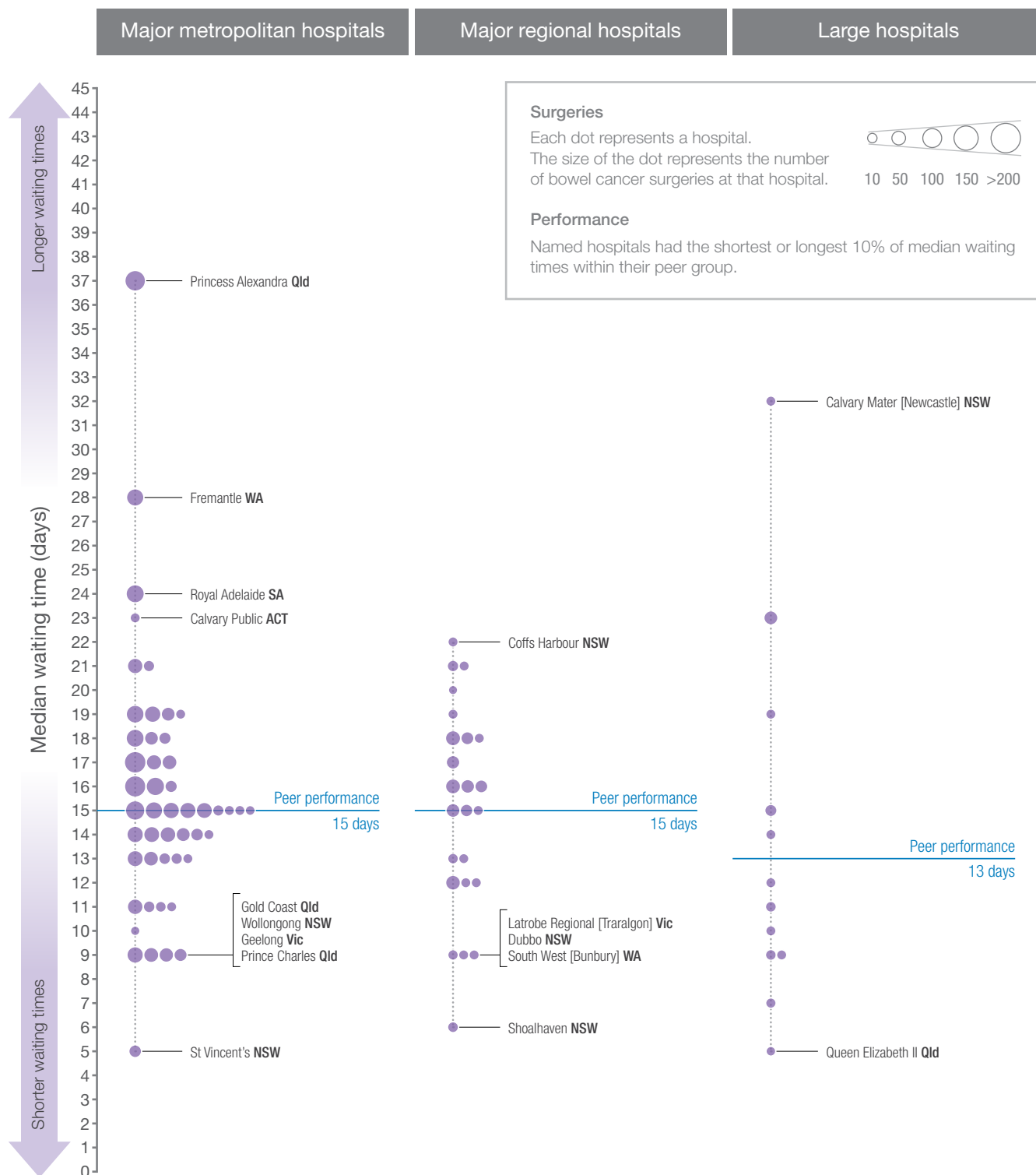
(**Figures 2b to 2d, pages 8 to 10**).

The number of patients seen within 30 and 45 days for their surgery

In 2011–12, of the 4,345 patients who had surgery for bowel cancer at the 127 hospitals in this section of the report, 87% received their surgery within 30 days. This means that 576 patients waited longer.

Nearly all patients (94%) had received their surgery by 45 days. This means that 243 patients waited longer (**Figure 2f, page 10**).

Figure 2a: Median waiting times for malignant* *bowel cancer* surgery at the largest public hospitals in Australia, by peer group, 2011–12

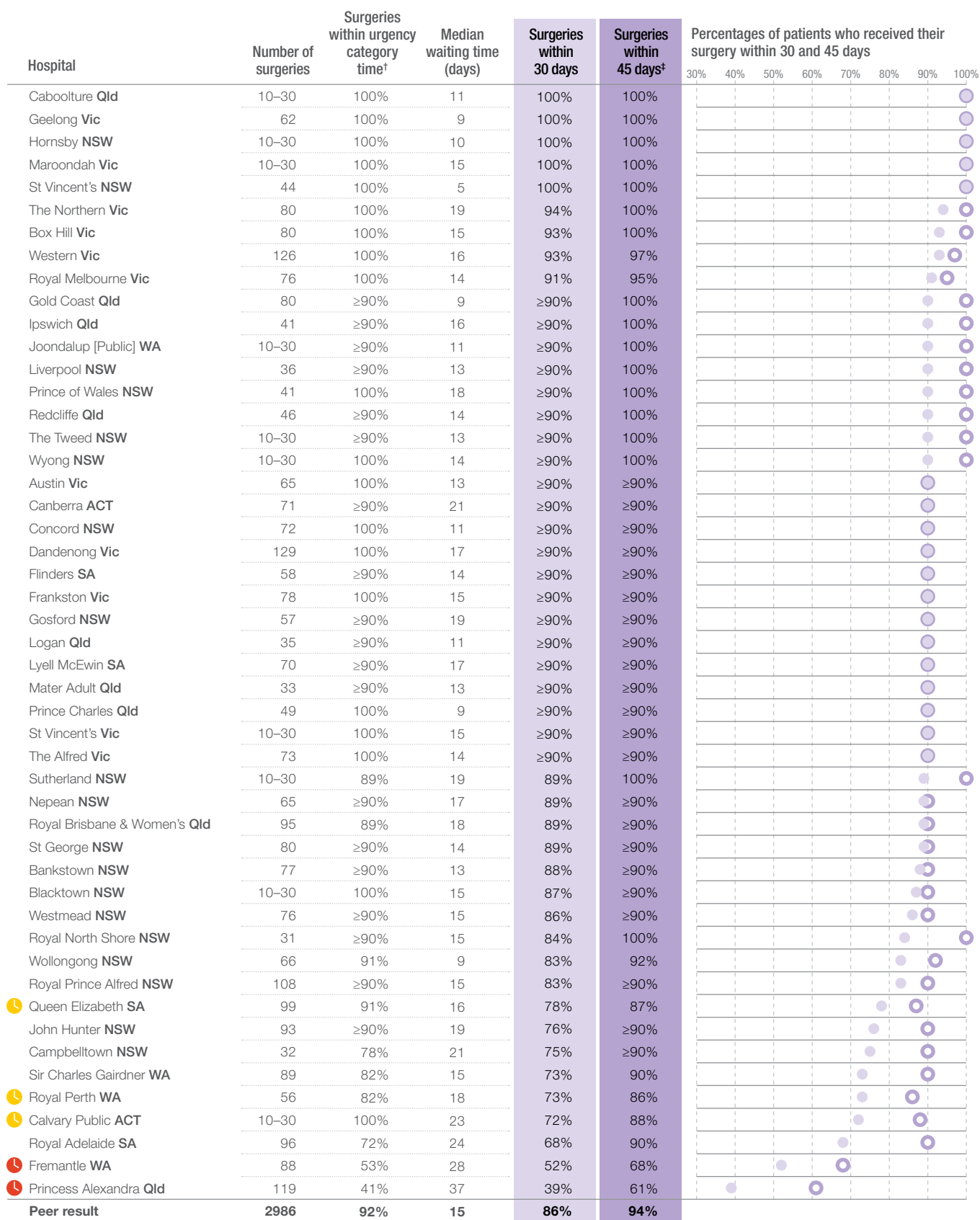


* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

Figure 2b: Waiting times for malignant* *bowel cancer* surgery at *major metropolitan* public hospitals, 2011–12



* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

‡ Includes patients who received their surgery within 30 days.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

● Percentage within 30 days

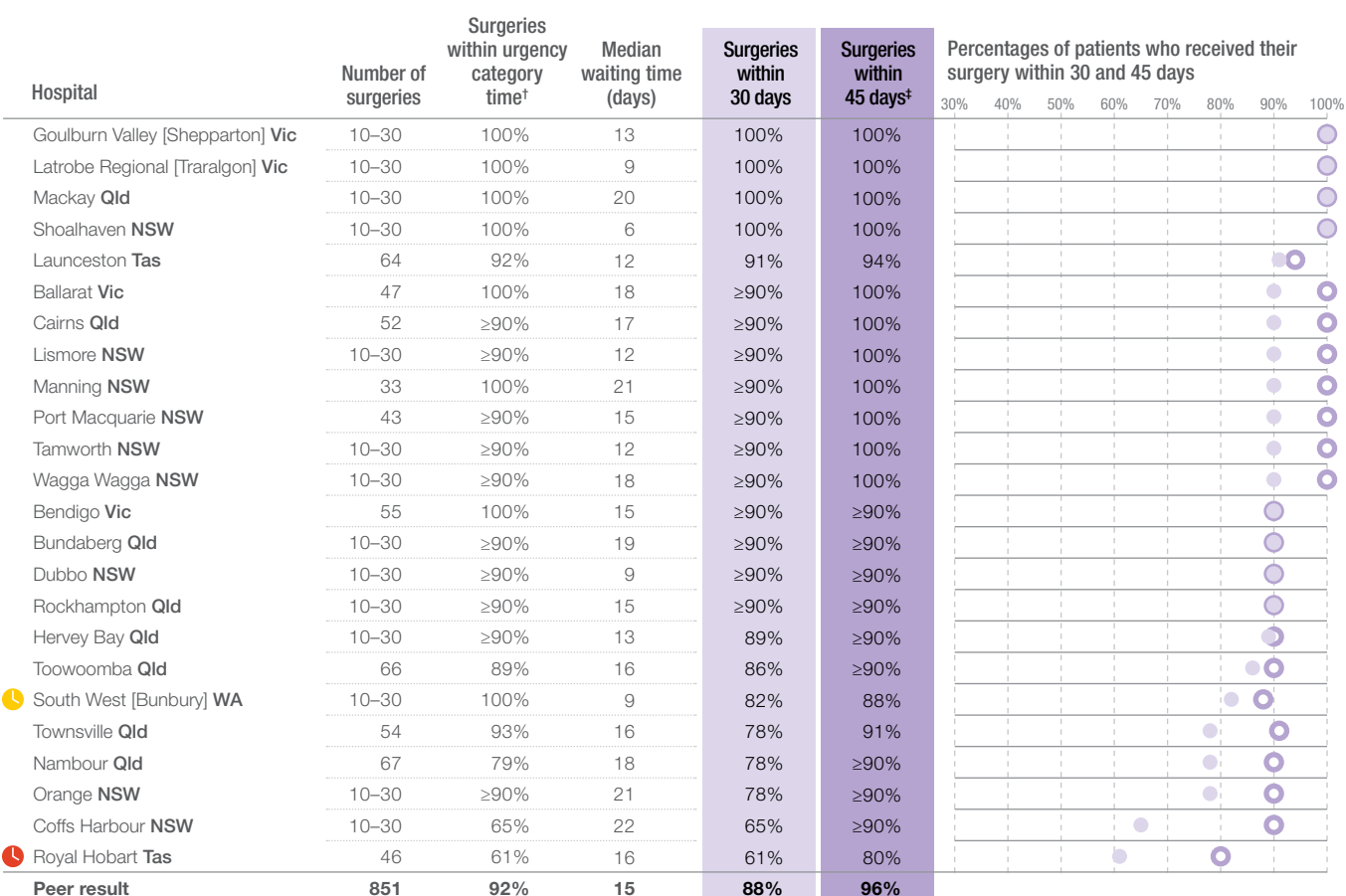
Percentage within 45 days

Time to complete $\geq 90\%$ of surgeries:

 up to 60 days

 up to 75 days

Figure 2c: Waiting times for malignant* *bowel cancer* surgery at *major regional* public hospitals, 2011–12



* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

‡ Includes patients who received their surgery within 30 days.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

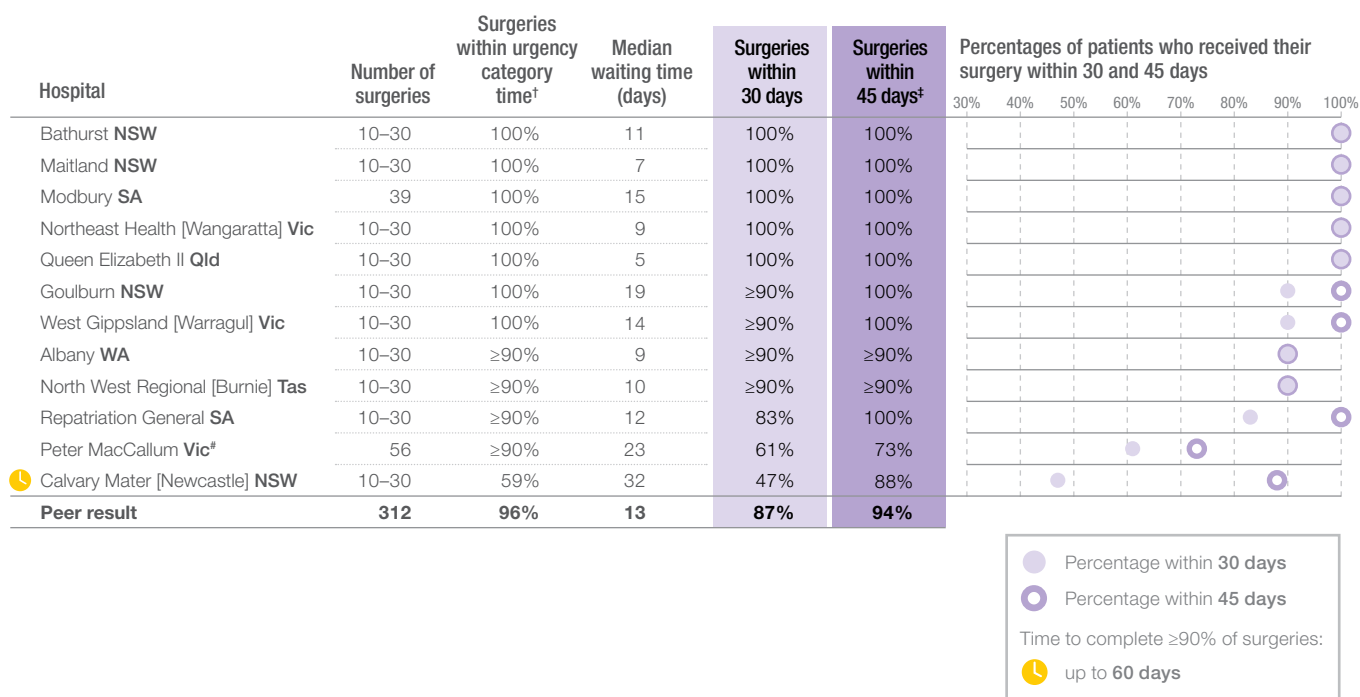
● Percentage within 30 days

Percentage within 45 days

Time to complete $\geq 90\%$ of surgeries:

 up to 60 days

 up to 75 days

Figure 2d: Waiting times for malignant* *bowel cancer* surgery at *large* public hospitals, 2011–12Figure 2e: Waiting times for malignant* *bowel cancer* surgery at *unpeered*[§] public hospitals, 2011–12

Hospital	Number of surgeries	Surgeries within urgency category time [†]	Median waiting time (days)	Surgeries within 30 days	Surgeries within 45 days [‡]
Bega NSW	10–30	80%	27	75%	100%
Belmont NSW	10–30	100%	21	81%	≥90%
Moruya NSW	10–30	≥90%	21	67%	≥90%
Mount Gambier SA	10–30	100%	11	100%	100%

Figure 2f: Percentages of patients who received surgery for malignant* *bowel cancer* within 30 and 45 days, by peer group, 2011–12

Peer group	Number of hospitals	Number of surgeries	Percentage of patients who received surgery within 30 days	Patients who waited longer than 30 days	Percentage of patients who received surgery within 45 days	Patients who waited longer than 45 days
Major metropolitan hospitals	49	2,986	86%	417	94%	183
Major regional hospitals	24	851	88%	99	96%	33
Large hospitals	12	312	87%	41	94%	20
Unpeered hospitals	4	59	80%	12	≥90%	≤5
Other hospitals	38	137	95%	7	≥90%	≤5
TOTAL	127	4,345	87%	576	94%	243

* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

‡ Includes patients who received their surgery within 30 days.

§ The hospitals in this figure are not similar to peer-grouped hospitals or each other so they are not compared.

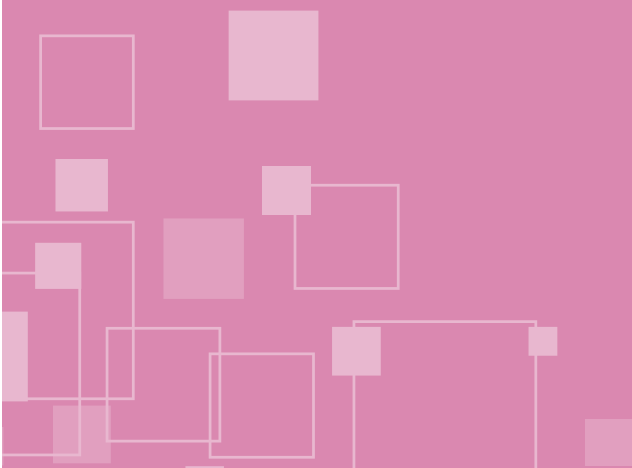
Interpretation of 2011–12 information about waiting times for cancer surgery at this hospital may have been affected by the assignment of a high proportion of semi-urgent patients (>80%).

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

Waiting times for surgery

Malignant breast cancer, 2011–12



Waiting times for surgery for malignant breast cancer, 2011–12

In 2011–12, there were 18,256 patients admitted to hospital for surgery for malignant breast cancer in Australia. Four in 10 (41%) of these patients (7,436) received planned surgery at one of the 137 public hospitals covered in this section of the report; most of these 7,436 patients (63%) received their care in major metropolitan hospitals (**Table 1, page 4 and Figure 3f, page 16**).

Median waiting times

In 2011–12, the time within which half of patients received their surgery (median waiting time) varied from hospital to hospital. The ranges in median waiting times across peer groups were:

- **Major metropolitan hospitals:** 6 to 22 days
- **Major regional hospitals:** 7 to 20 days
- **Large hospitals:** 5 to 17 days

(**Figure 3a, page 13**).

Surgeries within 30 and 45 days

Across Australia, a total of 71 of the 83 peered hospitals provided surgery for at least 90% of patients within 30 days. Of these, 19 peered hospitals provided surgery for 100% of patients within 30 days.

The hospitals with the lowest percentages of patients that received their surgery within 30 days were:

- **Major metropolitan hospitals**
 - The Tweed, NSW – 80%
 - Joondalup [Public], WA – 82%
- **Major regional hospitals**
 - Nambour, Qld – 79%
 - Royal Darwin, NT and Hervey Bay, Qld – 84%

- **Large hospitals**

- Calvary Mater [Newcastle], NSW – 78%
- Auburn, NSW – 89%.

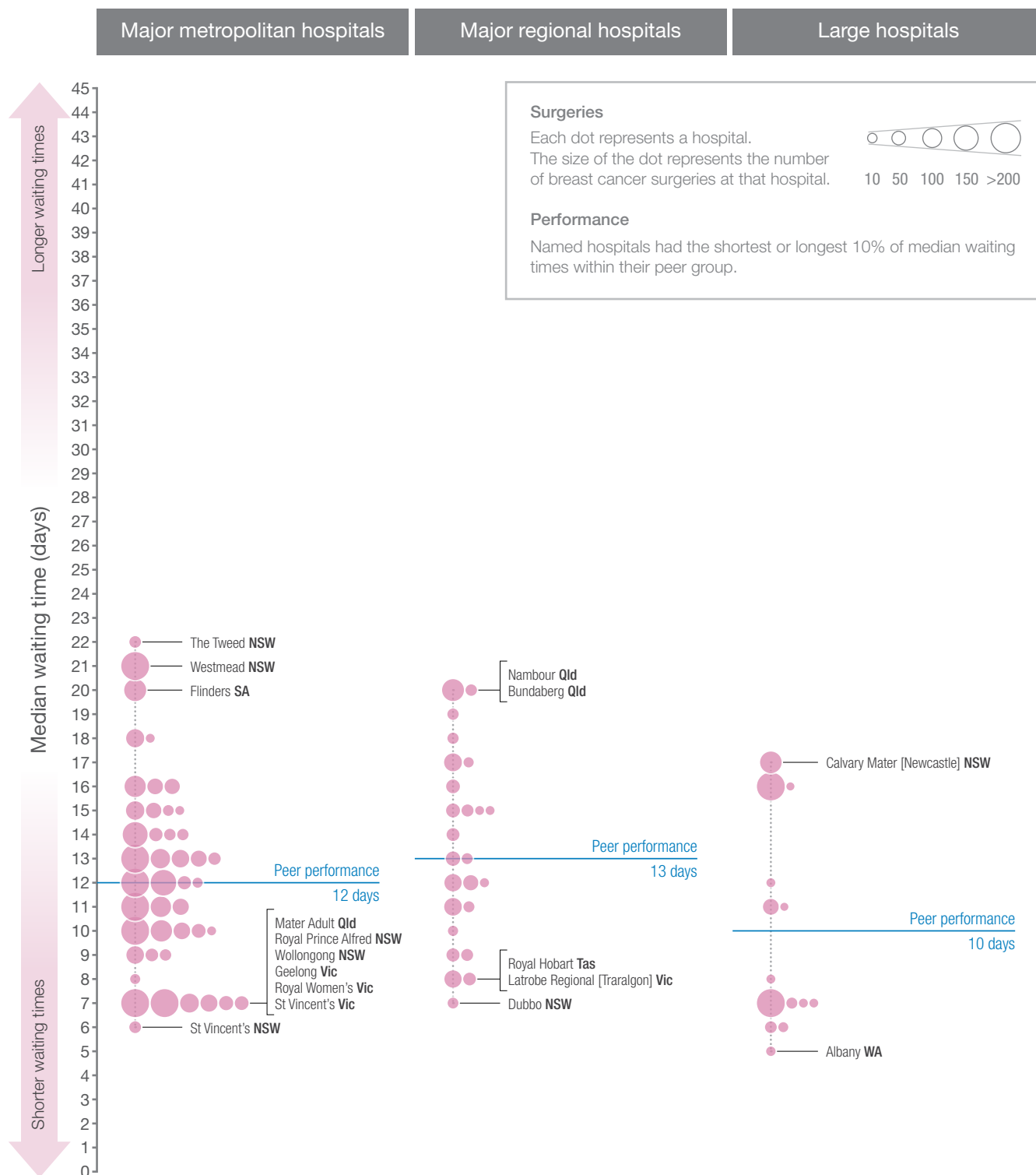
By 45 days, all peered hospitals had provided surgery for at least 90% of patients. Of these, 48 hospitals provided surgery for 100% of patients (**Figures 3b to 3d, pages 14 to 16**).

The number of patients seen within 30 and 45 days for their surgery

In 2011–12, of the 7,436 patients who had surgery for breast cancer at the 137 hospitals in this section of the report, 94% received their surgery within 30 days. This means that 417 patients waited longer.

Nearly all patients (99%) had received their surgery by 45 days. This means that 101 patients waited longer (**Figure 3f, page 16**).

Figure 3a: Median waiting times for malignant* breast cancer surgery at the largest public hospitals in Australia, by peer group, 2011–12

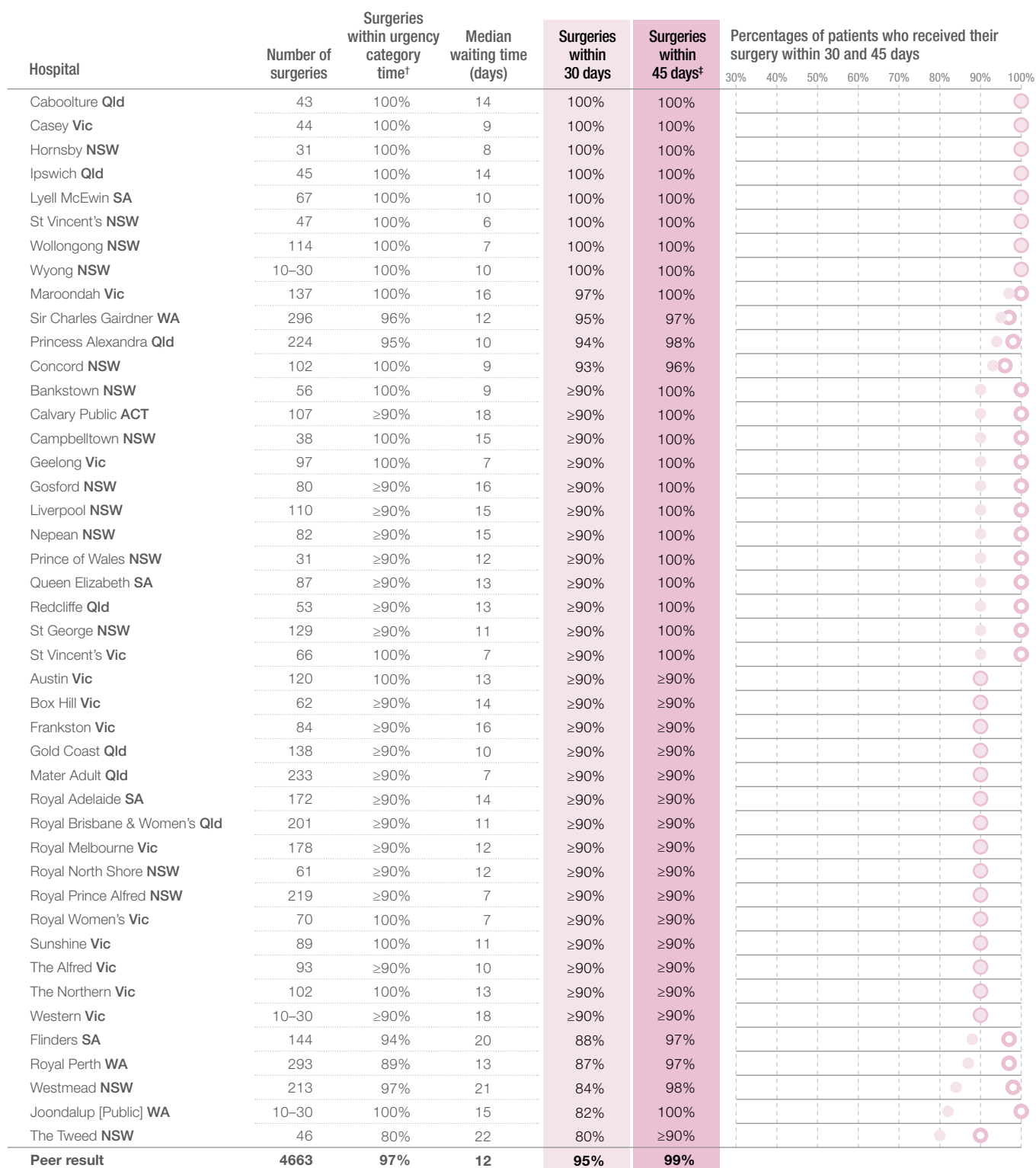


* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

Figure 3b: Waiting times for malignant* breast cancer surgery at major metropolitan public hospitals, 2011–12



* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

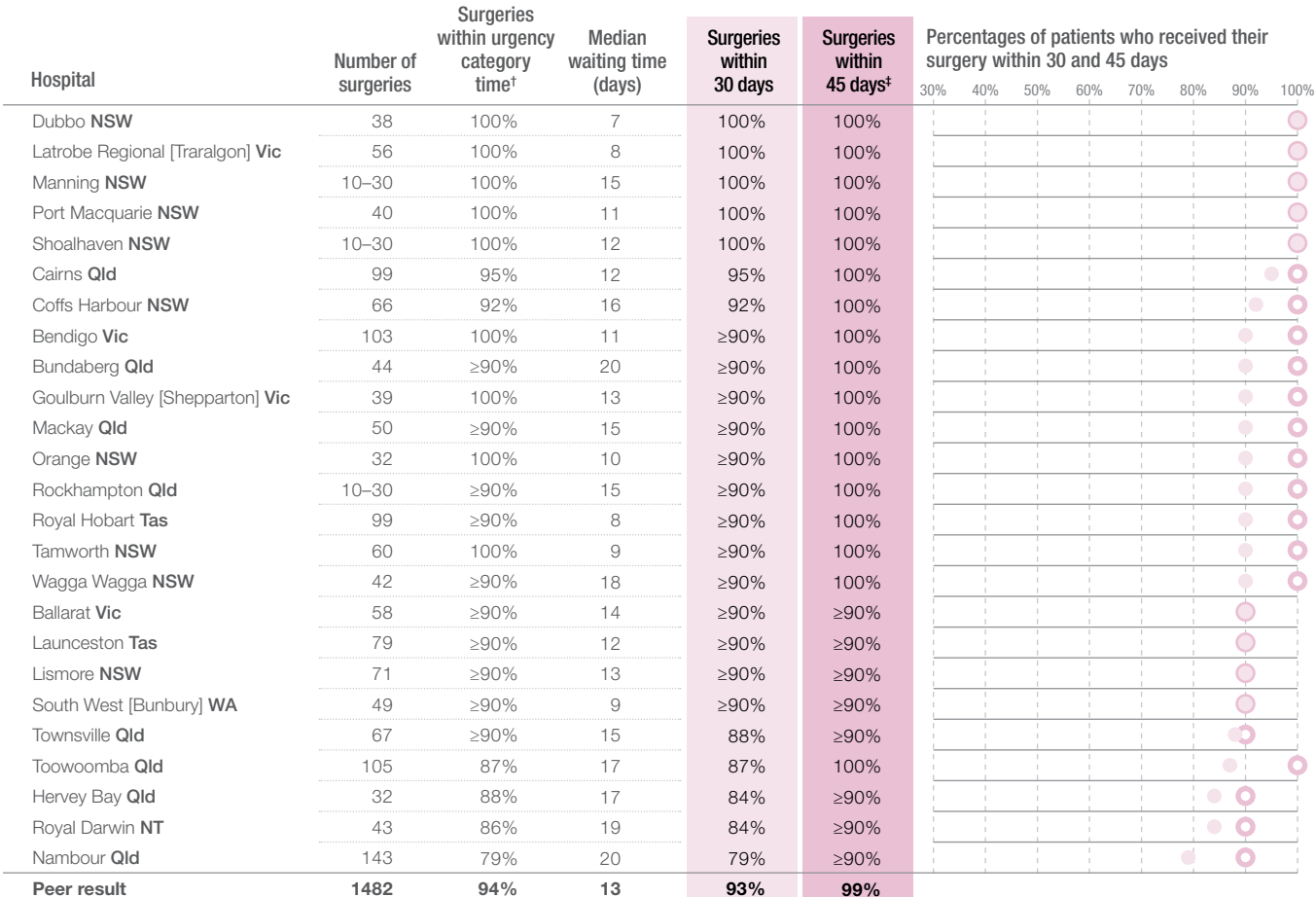
‡ Includes patients who received their surgery within 30 days.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

- Percentage within 30 days
- Percentage within 45 days

Figure 3c: Waiting times for malignant* *breast cancer* surgery at *major regional* public hospitals, 2011–12



* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

‡ Includes patients who received their surgery within 30 days.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

- Percentage within 30 days
- Percentage within 45 days

Figure 3d: Waiting times for malignant* *breast cancer* surgery at *large* public hospitals, 2011–12

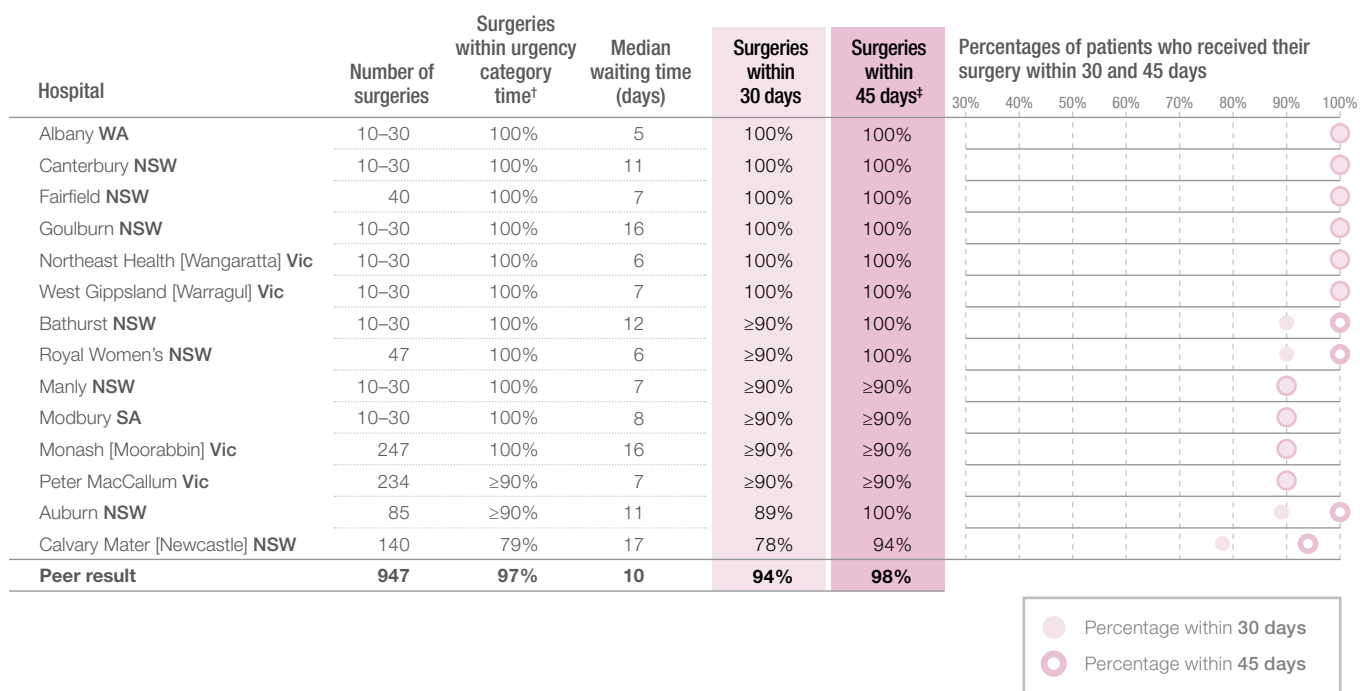


Figure 3e: Waiting times for malignant* *breast cancer* surgery at *unpeered*^s public hospitals, 2011–12

Hospital	Number of surgeries	Surgeries within urgency category time†	Median waiting time (days)	Surgeries within 30 days	Surgeries within 45 days†
Bega NSW	10–30	≥90%	12	≥90%	100%
Belmont NSW	69	100%	10	≥90%	100%
Bowral NSW	10–30	100%	19	100%	100%
Gladstone Qld	10–30	100%	8	100%	100%
Millicent SA	10–30	100%	24	≥90%	100%
Moruya NSW	10–30	100%	10	100%	100%
Mount Druitt NSW	10–30	85%	18	81%	≥90%

Figure 3f: Percentages of patients who received surgery for malignant* *breast cancer* within 30 and 45 days, by peer group, 2011–12

Peer group	Number of hospitals	Number of surgeries	Percentage of patients who received surgery within 30 days	Patients who waited longer than 30 days	Percentage of patients who received surgery within 45 days	Patients who waited longer than 45 days
Major metropolitan hospitals	44	4,663	95%	234	99%	61
Major regional hospitals	25	1,482	93%	108	99%	17
Large hospitals	14	947	94%	53	98%	17
Unpeered hospitals	7	198	95%	10	≥90%	≤5
Other hospitals	47	146	92%	12	≥90%	≤5
TOTAL	137	7,436	94%	417	99%	101

* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

‡ Includes patients who received their surgery within 30 days.

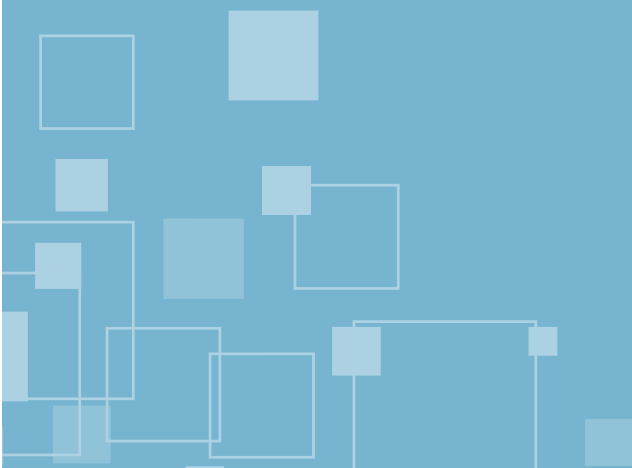
§ The hospitals in this figure are not similar to peer-grouped hospitals or each other so they are not compared.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

Waiting times for surgery

Malignant lung cancer, 2011–12



Waiting times for surgery for malignant lung cancer, 2011–12

In 2011–12, there were 2,003 patients admitted to hospital for surgery for malignant lung cancer in Australia. More than four in 10 (46%) of these patients (918) received planned surgery at one of the 45 public hospitals covered in this section of the report; most of these 918 patients (92%) received their care in major hospitals (**Table 1, page 4 and Figure 4d, page 21**).

Median waiting times

In 2011–12, the time within which half of patients received their surgery (median waiting time) varied from hospital to hospital. The range in median waiting times across major hospitals was 4 to 43 days (**Figure 4a, page 19**).

Surgeries within 30 and 45 days

Across Australia, a total of 17 peered hospitals provided surgery for at least 90% of patients within 30 days. Of these, nine peered hospitals provided surgery for 100% of patients within 30 days.

The hospitals with the lowest percentages of patients that received their surgery within 30 days were:

- Liverpool, NSW – 36%
- Princess Alexandra, Qld – 67%
- St George, NSW and Nepean, NSW – 75%

(**Figure 4b, page 20**).

By 45 days, a total of 25 peered hospitals had provided surgery for at least 90% of patients within 45 days. Of these, 16 peered hospitals provided surgery for 100% of patients.

The hospitals with the lowest percentages of patients that received their surgery within 45 days were:

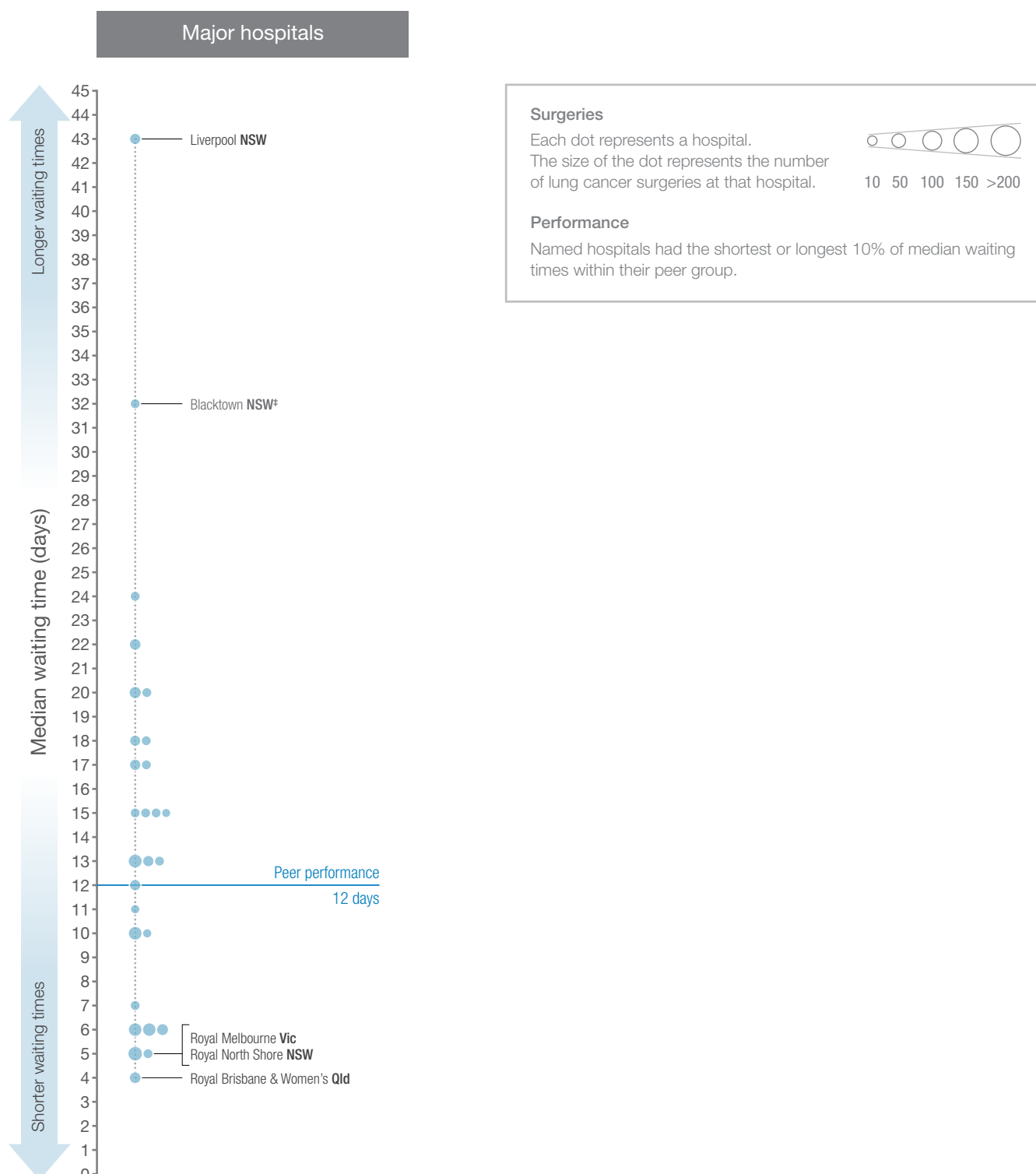
- Liverpool, NSW – 55%
- St George, NSW – 88%.

The number of patients seen within 30 and 45 days for their surgery

In 2011–12, of the 918 patients who had surgery for lung cancer at the 45 hospitals in this section of the report, 89% received their surgery within 30 days. This means that 97 patients waited longer.

Nearly all patients (96%) had received their surgery by 45 days. This means that 38 patients waited longer (**Figure 4d, page 21**).

Figure 4a: Median waiting times for malignant* lung cancer surgery at major† public hospitals in Australia, by peer group, 2011–12



* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

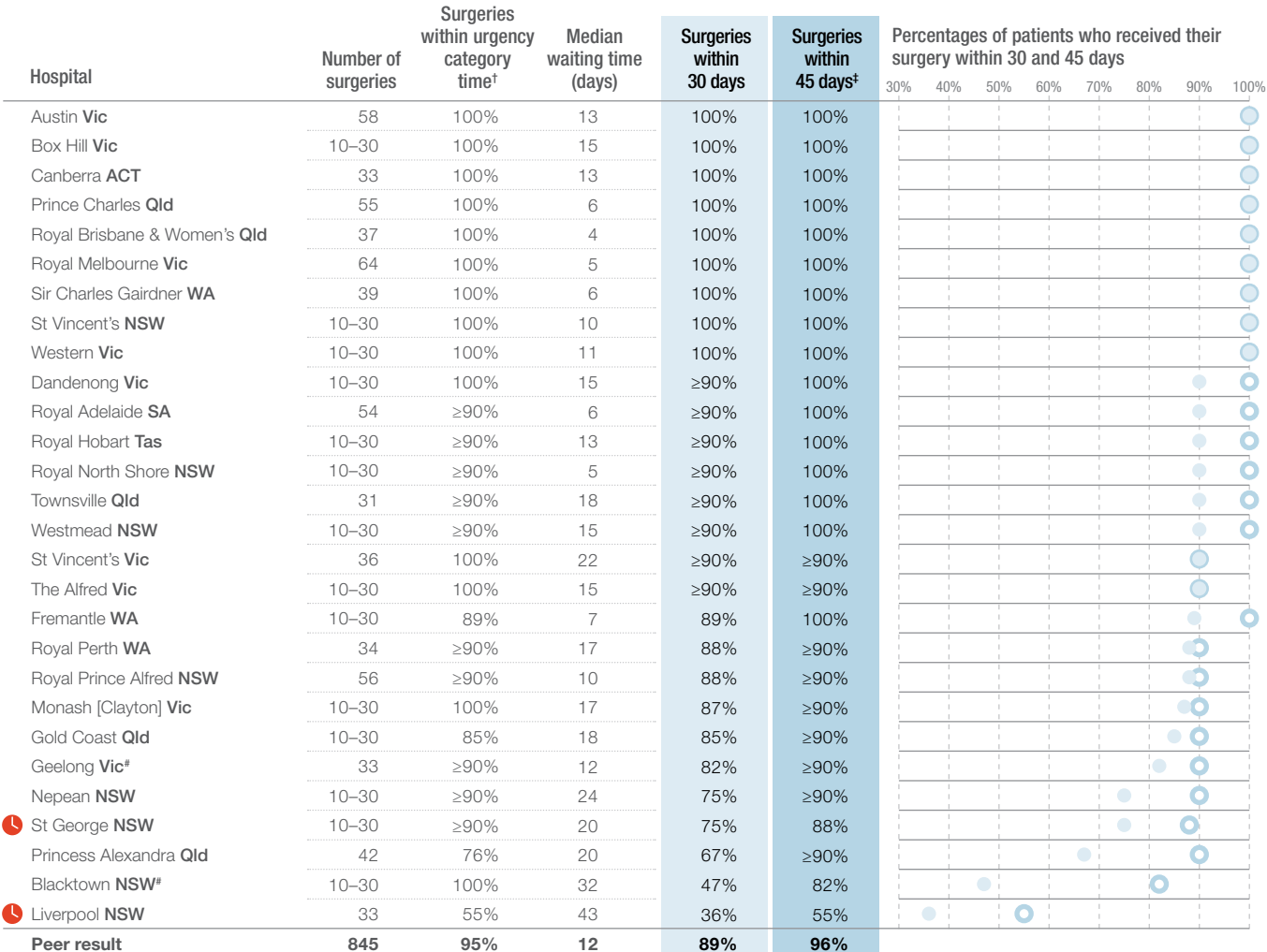
† Includes major metropolitan and major regional hospitals.

‡ Interpretation of 2011–12 information about waiting times for cancer surgery at this hospital may have been affected by the assignment of a high proportion of semi-urgent patients (>80%).

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

Figure 4b: Waiting times for malignant* *lung cancer* surgery at *major*^s public hospitals, 2011–12



* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

‡ Includes patients who received their surgery within 30 days.

§ Includes major metropolitan and major regional hospitals.

Interpretation of 2011-12 information about waiting times for cancer surgery at this hospital may have been affected by the assignment of a high proportion of semi-urgent patients (>80%).

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

- Percentage within **30 days**
- Percentage within **45 days**

Time to complete $\geq 90\%$ of surgeries:

- up to **75 days**

Figure 4c: Waiting times for malignant* lung cancer surgery at unpeered[§] public hospitals, 2011–12

Hospital	Number of surgeries	Surgeries within urgency category time [†]	Median waiting time (days)	Surgeries within 30 days	Surgeries within 45 days [‡]
Peter MacCallum Vic	10–30	100%	14	100%	100%

Figure 4d: Percentages of patients who received surgery for malignant* lung cancer within 30 and 45 days, by peer group, 2011–12

Peer group	Number of hospitals	Number of surgeries	Percentage of patients who received surgery within 30 days	Patients who waited longer than 30 days	Percentage of patients who received surgery within 45 days	Patients who waited longer than 45 days
Major hospitals	28	845	89%	90	96%	34
Unpeered hospitals	1	13	100%	0	100%	0
Other hospitals	16	60	88%	7	93%	4
TOTAL	45	918	89%	97	96%	38

* Cancers that have the ability to progress to more serious disease and spread to surrounding tissue or other organs, if left untreated.

† The percentage of patients who received their urgent (category 1) surgery within 30 days and semi-urgent (category 2) surgery within 90 days.

‡ Includes patients who received their surgery within 30 days.

§ The hospitals in this figure are not similar to peer-grouped hospitals or each other so they are not compared.

Note: For information on measures, suppression and peer groups, see www.myhospitals.gov.au

Sources: National Hospital Morbidity Database 2011–12 and National Elective Surgery Waiting Times Data Collection 2011–12, data extracted 22 August 2013.

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Acknowledgements

This report has benefited from advice from a number of individuals and organisations with interest and expertise in cancer surgery waiting times.

The National Health Performance Authority established a time-limited expert advisory group to provide advice around clinical and technical aspects of this work. The group provided the Authority with advice on the cancers and surgeries to be reported, measures of waiting times and appropriate waiting times for surgery for malignant cancer. The group did not have a direct role in writing the report.

The group was comprised of:

- Mrs Sally Crossing AM, Cancer Voices Australia nominee
- Professor Marc Gladman, Consultant Colorectal Surgeon
- Professor Bruce Mann, Consultant Breast Surgeon
- Mr Don Matters, Cancer Voices Australia nominee
- Associate Professor Brian McCaughan AM, Consultant Cardiothoracic Surgeon
- Professor David Watters, Consultant General Surgeon, Royal Australasian College of Surgeons nominee

The group also consisted of three representatives from the National Cancer Expert Reference Group (NCERG):

- Ms Rhonda Coleman
- Professor David Currow
- Associate Professor Rosemary Knight

The Authority received advice from its Jurisdictional Advisory Committee with regards to methods and content.

The report relies on data provided by state and territory governments. These data were used to calculate the results for the performance measure in this report. The Authority conducts checks to ensure data quality and also relies on the data quality work of the Australian Institute of Health and Welfare, under contract to the Authority. The Authority provides jurisdictions with the opportunity to verify their data.

Thanks are extended to all those who contributed.

About the Authority

The National Health Performance Authority has been set up as an independent agency under the *National Health Reform Act 2011*. It commenced full operations in 2012.

Under the terms of the Act, the Authority monitors and reports on the performance of Local Hospital Networks, public and private hospitals, primary health care organisations and other bodies that provide health care services.

The Authority's reports give all Australians access to timely and impartial information that allows them to compare fairly their local health care organisations against other similar organisations and against national standards.

The reports let people see, often for the first time, how their local health care organisations measure up against comparable organisations across Australia.

The Authority's activities are also guided by a document known as the Performance and Accountability Framework agreed by the Council of Australian Governments. The framework contains 48 indicators that form the basis for the Authority's performance reports.

The Authority's role will include reporting on the performance of health care organisations against the 48 indicators in order to identify both high performing Local Hospital Networks, Medicare Locals and hospitals (so effective practices can be shared), and Local Hospital Networks and Medicare Locals that perform poorly (so that steps can be taken to address problems).

The Authority releases reports on a quarterly basis, and also publishes performance data on the MyHospitals website (**www.myhospitals.gov.au**), the MyHealthyCommunities website (**www.myhealthycommunities.gov.au**) and on **www.nhpa.gov.au**

The Authority consists of a Chairman, a Deputy Chairman and five other members, appointed for up to five years. Members of the Authority are:

- Ms Patricia Faulkner AO (Chairman)
- Mr John Walsh AM (Deputy Chairman)
- Dr David Filby PSM
- Professor Michael Reid
- Professor Bryant Stokes AM RFD (on leave)
- Professor Paul Torzillo AM
- Professor Claire Jackson.

The conclusions in this report are those of the Authority. No official endorsement from any Minister, department of health or health care organisation is intended or should be inferred.

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Explore

View local health care information for various types of local areas including Medicare Local catchments, statistical areas and even postcodes.



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National Health Performance Authority

MDP 158, GPO Box 9848
Sydney, NSW 2001, Australia
Telephone: +61 2 9186 9210

www.nhpa.gov.au

