

Hospital Services Report

June 1999 Quarter

Notes

This document contains the most up-to-date information available at the time of preparation.

This *Hospital Services Report* is available on the Department of Human Services Internet site located at:

<http://www.dhs.vic.gov.au/ahs/pub.htm>

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June 1999

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Introduction

Consumers, health care providers and government all need information on the quality of health services. Public access to information assists consumers to understand the health care system, it assists providers of health services in planning and increases the accountability of the Department of Human Services to the people in the state of Victoria, Australia.

The *Hospital Services Report* was introduced in 1995. This edition includes data for the June Quarter 1999, which covers the months of April, May and June.

The information included in this report is often requested from the Department. Since technical information of this nature is very difficult to interpret, each graph and table needs to be carefully considered in the context of the complexity of the health care system. Department staff, hospital staff, general practitioners and other health care professionals may be able to assist you to interpret this report.

Accredited Victorian Acute Public Hospitals

A hospital is awarded accreditation by an independent third party when they determine that nationally recognised standards for the delivery of quality health care services have been achieved.

The accreditation process involves an extensive on-site survey and assessment of all aspects of a hospital's performance including the admission and discharge of patients, communication between patients and staff, infection control and safety. The functional design and layout of the hospital is also considered. A hospital can be awarded accreditation for a period of up to three years. Towards the end of this period, a full organisation-wide survey and reassessment is undertaken to determine whether accreditation will continue.

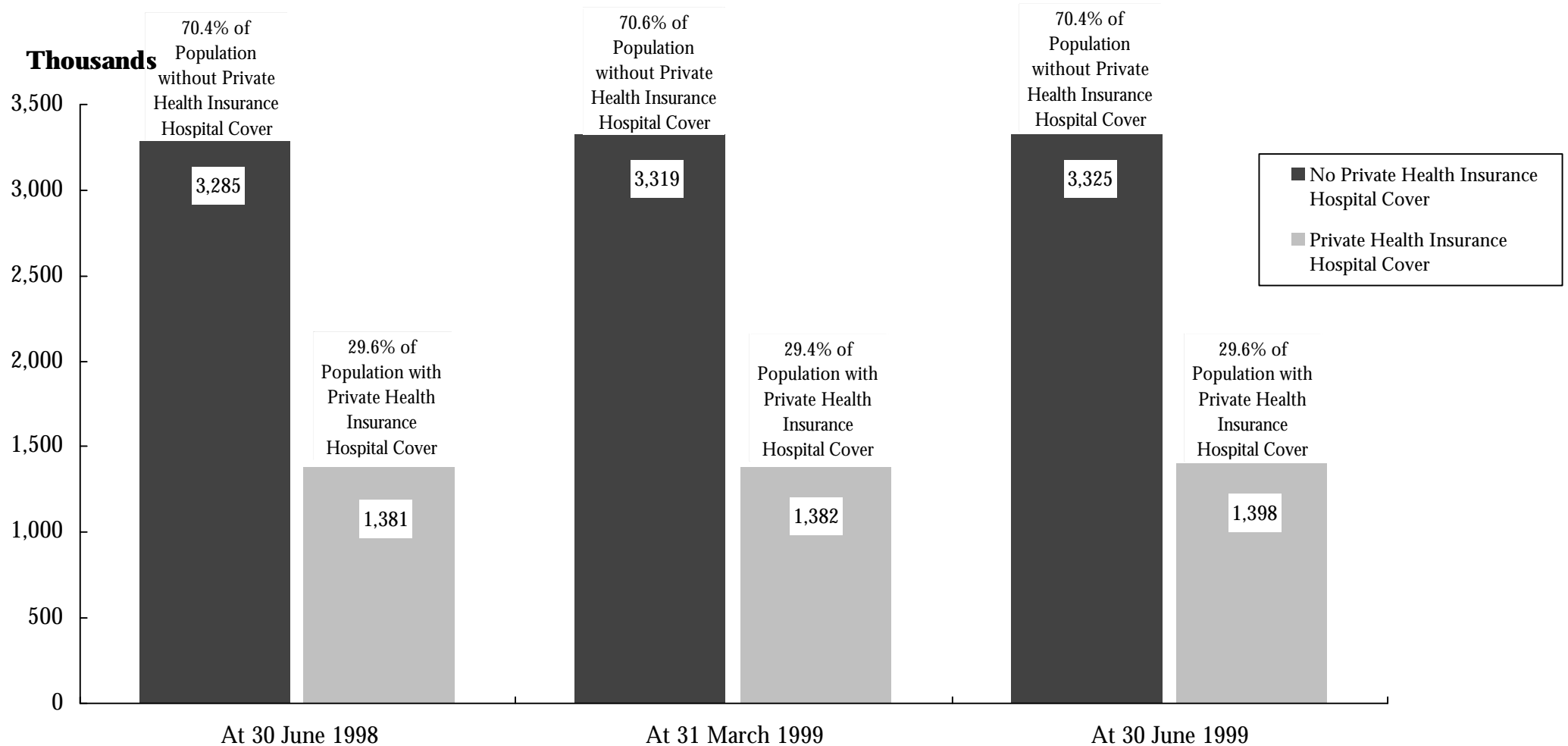
Accreditation is an important demonstration to the public of the hospital's commitment to quality. Accreditation is a mandatory requirement for all Victorian acute public hospitals by 2000. All hospitals are required to achieve accreditation through either the Australian Council on Healthcare Standards Evaluation and Quality Improvement Program (ACHS EQUiP), ISO 9000 or an equivalent program.

Table 7.1 presents a list of Victorian acute public hospitals that are accredited as of 30 June 1999.

1. Private Health Insurance

How many Victorians have private health insurance hospital cover?

Figure 1.1 Health Insurance Status of Victorians ^{1 2 3}



¹ Data are for all people covered by insurance, that is, contributors, partners and dependants.

² Data for current and previous quarters are provisional.

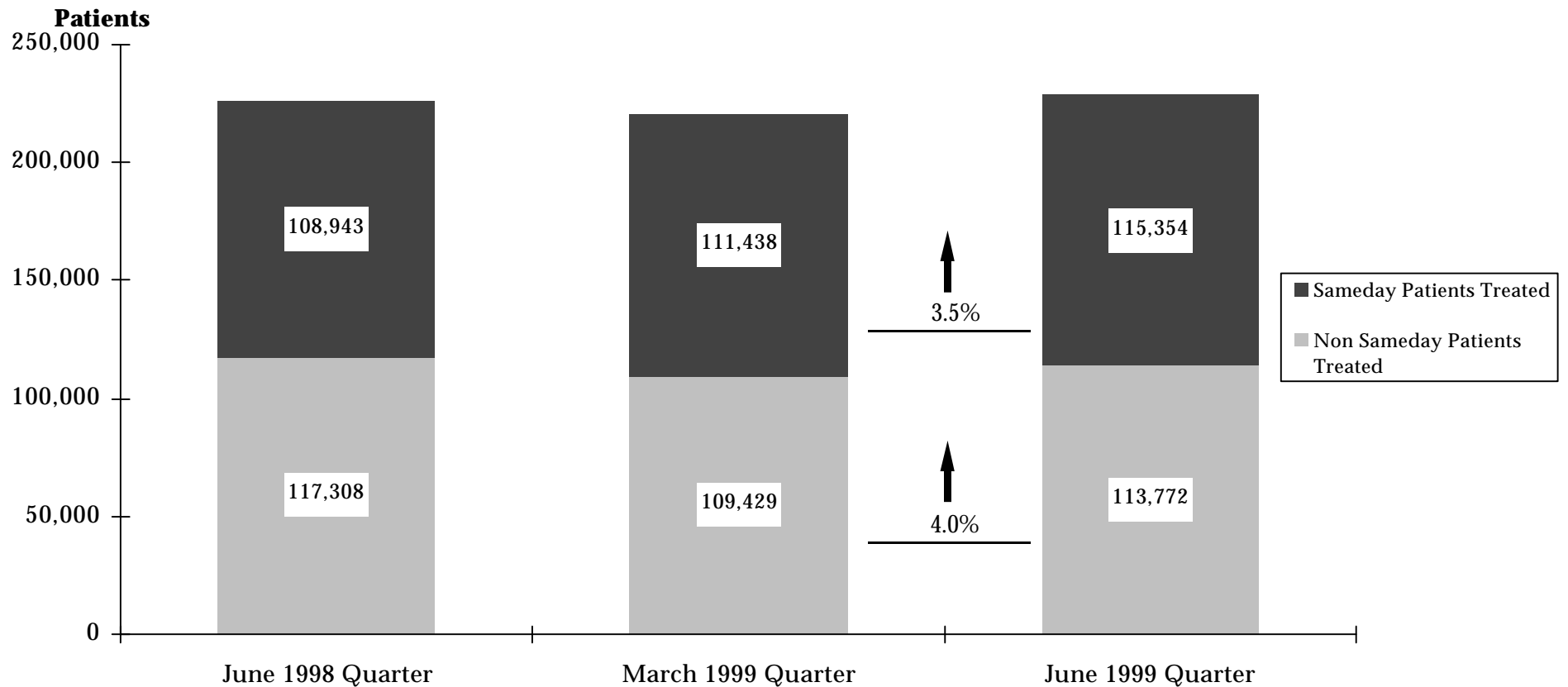
³ Statistics reflect total persons covered by any level of hospital private health insurance.

Source: Private Health Insurance Administration Council

2. Hospital Admitted Patient Activity

How many patients are admitted to hospital?

Figure 2.1 Admitted Patients in Public Hospitals^{1 2 3 4}



¹ Data are for casemix-funded acute public hospital patients. The data refer to the number of “separations” (ie. the number of patients that have been discharged from hospital).

² 1998/99 data are provisional.

³ “Sameday” patients are admitted and discharged on the same day.

⁴ June 1999 data for The Alfred are unavailable and therefore totals are subject to amendment.

Source: Victorian Inpatient Minimum Database (21 September update).

How many patients are admitted to hospital?

Table 2.1 Admitted Patients by Individual Hospital ^{1 2 3}

Hospital	June Quarter 1998		March Quarter 1999		June Quarter 1999		Change (%) March 1999 to June 1999	
	on Sameday Only	All	Non Sameday Only	All	Non Sameday Only	All	Non Sameday Only	All
North Western Health Care Network								
Royal Melbourne Hospital	6,318	15,359	5,435	13,755	5,646	13,869	3.9%	0.8%
Western Hospital ⁴	6,614	13,377	4,401	7,900	4,612	8,444	4.8%	6.9%
The Northern Hospital	3,308	5,336	3,145	5,246	3,374	5,440	7.3%	3.7%
Other North Western Health Care Network Hospitals ⁴	916	1,505	2,995	6,993	3,086	7,651	3.0%	9.4%
Inner and Eastern Health Care Network								
The Alfred ⁵	4,646	9,480	4,420	10,940	4,400	10,981	-0.5%	0.4%
The Angliss Health Services	2,928	4,355	2,319	4,276	2,403	4,724	3.6%	10.5%
Box Hill Hospital	4,221	7,668	4,253	7,754	4,304	8,005	1.2%	3.2%
Caulfield General Medical Centre	932	2,128	583	1,791	512	1,581	-12.2%	-11.7%
Maroondah Hospital	1,984	3,745	1,731	3,328	1,970	3,419	13.8%	2.7%
Peter MacCallum Cancer Institute	1,283	3,007	1,219	2,912	1,264	2,982	3.7%	2.4%
The Royal Victorian Eye and Ear Hospital	1,630	3,077	1,371	2,691	1,376	3,132	0.4%	16.4%
Other Inner and Eastern Health Care Network Hospitals ⁵	533	1,148	156	333	183	398	17.3%	19.5%
Southern Health Care Network								
Dandenong Hospital	4,258	6,496	4,320	6,475	4,426	6,651	2.5%	2.7%
Monash Medical Centre, Clayton ⁶	7,642	17,513	5,803	10,677	6,085	11,311	4.9%	5.9%
Sandringham & District Memorial Hospital	1,191	1,759	1,238	2,592	1,388	2,970	12.1%	14.6%
Other Southern Health Care Network Hospitals ⁶	16	32	1,369	5,637	1,344	5,809	-1.8%	3.1%
Peninsula Health Care Network								
Frankston Hospital	4,395	8,934	4,119	8,586	4,249	8,833	3.2%	2.9%
Other Peninsula Health Care Network Hospitals	731	1,157	711	1,100	713	1,032	0.3%	-6.2%

¹ Data relate to acute patients at casemix-funded public hospitals and refer to the number of 'separations' (ie. the number of patients that have been discharged from hospital).

² 1998/99 data are provisional.

³ Non Sameday patients remain in hospital overnight or longer.

⁴ Western Hospital disaggregated and Sunshine Hospital commenced reporting separately from 1 July 1998.

⁵ St George's Health Service, included under this category, ceased to treat acute patients from 1 January 1999.

⁶ Monash Medical Centre commenced reporting by separate campuses, Clayton and Moorabbin, from 1 July 1998.

Table 2.1 Admitted Patients by Individual Hospital (continued)

Hospital	June Quarter 1998		March Quarter 1999		June Quarter 1999		Change (%) March 1999 to June 1999	
	on Sameday Only	All	Non Sameday Only	All	Non Sameday Only	All	Non Sameday Only	All
Women's and Children's Health Care Network								
Royal Children's Hospital	4,437	7,536	3,804	6,547	4,353	7,379	14.4%	12.7%
Royal Women's Hospital	3,040	7,057	2,823	7,014	2,932	7,053	3.9%	0.6%
Other Metropolitan Hospitals								
Austin & Repatriation Medical Centre	6,308	16,078	5,691	15,723	5,639	15,634	-0.9%	-0.6%
Mercy Hospital for Women	2,219	3,680	2,058	3,498	2,224	3,364	8.1%	-3.8%
Royal Talbot Rehabilitation Centre	176	177	198	199	173	175	-12.6%	-12.1%
St Vincent's Hospital	4,125	9,353	3,647	9,053	4,012	9,593	10.0%	6.0%
Other Metropolitan Non-network Hospitals	1,656	3,803	1,725	3,871	1,869	4,204	8.3%	8.6%
Non Metropolitan Hospitals								
Ballarat Health Services	2,965	5,440	2,767	5,279	2,915	5,578	5.3%	5.7%
Barwon Health	5,132	9,241	4,863	9,262	5,157	9,811	6.0%	5.9%
Bendigo Health Care Group	2,697	4,702	2,565	4,577	2,746	4,833	7.1%	5.6%
Central Wellington Health Services	1,111	2,007	1,094	1,961	992	1,721	-9.3%	-12.2%
Goulburn Valley Health	2,402	3,497	2,339	3,915	2,265	3,823	-3.2%	-2.3%
Latrobe Regional Hospital ⁷	2,319	4,881	-	-			N/A	N/A
New Latrobe Regional Hospital ⁸	-	-	2,172	4,917	2,276	5,333	4.8%	8.5%
Wangaratta District Base Hospital	1,459	2,428	1,498	2,434	1,512	2,509	0.9%	3.1%
Warrnambool & District Base Hospital	1,891	3,221	1,719	3,029	1,780	3,117	3.5%	2.9%
Wimmera Health Care Group	980	1,703	985	1,653	983	1,672	-0.2%	1.1%
Wodonga Regional Health Service	1,316	2,933	1,404	3,125	1,575	3,402	12.2%	8.9%
Other Non Metropolitan Hospitals	19,529	32,438	18,489	31,824	19,034	32,693	2.9%	2.7%
Total All Public Hospitals	117,308	226,251	109,429	220,867	113,772	229,126	4.0%	3.7%

⁷ The Latrobe Regional Hospital closed on 1 September 1998.

⁸ The New Latrobe Regional Hospital opened on 1 September 1998.

Source: Victorian Inpatient Minimum Database (21 August update).

3. Access to Emergency Services

How many patients are treated in emergency departments?

Table 3.1: Patients Treated in Selected Public Hospital Emergency Departments ¹

	June Quarter 1998	March Quarter 1999	June Quarter 1999	% Change March 1999 to June 1999
Patients Treated	155,718	154,600	152,984	-1.0%

¹ Data only for hospitals participating in the Emergency Services Enhancement Program / Hospital Access Program. A complete list of these hospitals is given in Table 3.2.

Source: Victorian Emergency Minimum Dataset

How many patients are treated in each hospital emergency department?

Table 3.2 Patients Treated in Hospital Emergency Departments, by Individual Hospitals ^{1 2}

Hospital	June Quarter 1998	March Quarter 1999	June Quarter 1999	% Change March 1999 to June 1999
North Western Health Care Network				
Northern Hospital	8,591	9,177	9,186	0.1%
Royal Melbourne Hospital	10,154	10,512	10,416	-0.9%
Western Hospital ³	9,049	9,413	9,022	-4.2%
Inner and Eastern Health Care Network				
The Alfred	9,932	9,769	9,000	-7.9%
The Angliss Health Services	7,886	7,024	6,814	-3.0%
Box Hill Hospital	8,153	8,260	8,091	-2.0%
Maroondah Hospital	6,781	7,206	7,004	-2.8%
Southern Health Care Network				
Dandenong Hospital	10,146	9,977	9,849	-1.3%
Monash Medical Centre	12,123	11,817	12,214	3.4%
Peninsula Health Care Network				
Frankston Hospital	7,808	7,947	8,047	1.3%

¹ Data only for hospitals participating in the Emergency Services Enhancement Program / Hospital Access Program.

² Data include all emergency department patients, that is, they include patients who are subsequently admitted to hospital and patients who are treated in the emergency department without being admitted to hospital.

³ Western Hospital, Footscray disaggregated in July 1998. Sunshine Hospital figures have been excluded from data prior to July 1998 to enable comparative interpretation of the data.

Table 3.2 Patients Treated in Hospital Emergency Departments, by Individual Hospitals (cont'd)

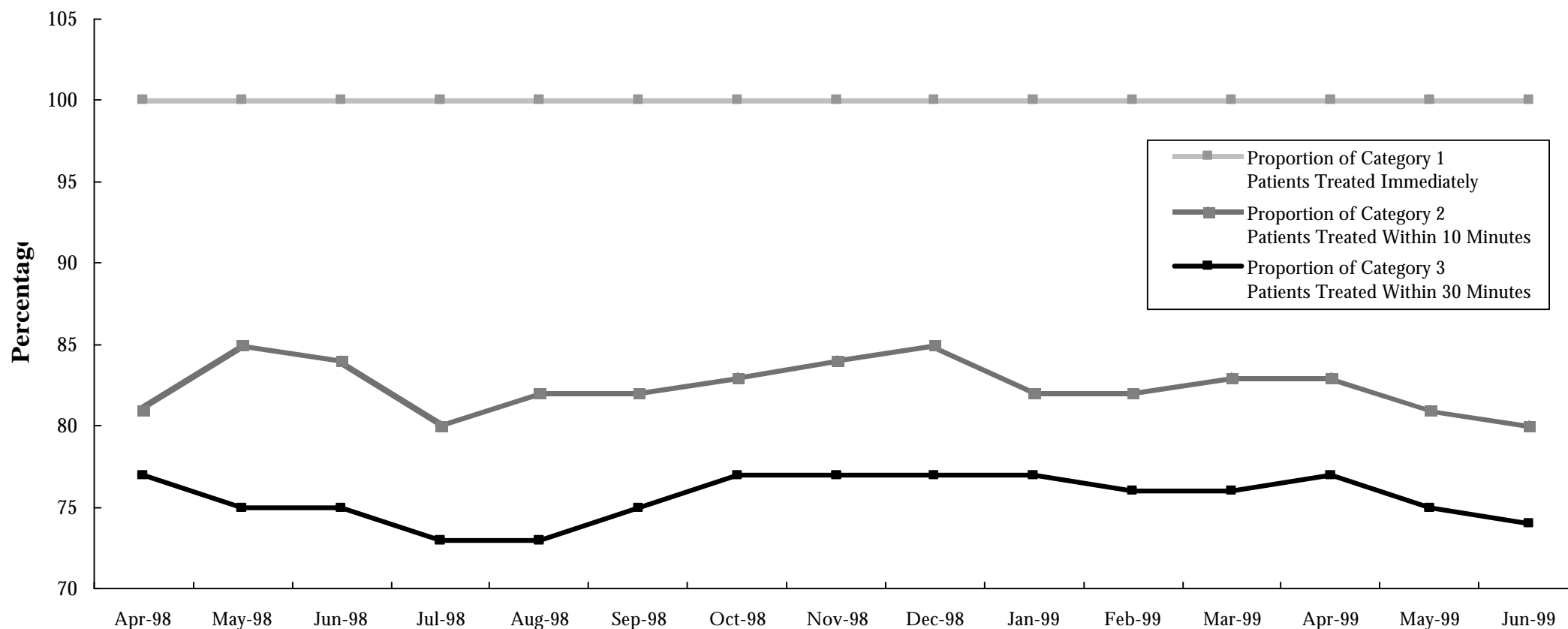
Hospital	June 1998 Quarter	March 1999 Quarter	June 1999 Quarter	% Change March 1999 to June 1999
Women's and Children's Health Care Network				
Royal Children's Hospital	13,749	11,778	12,637	7.3%
Metropolitan Non-Network Hospitals				
Austin and Repatriation Medical Centre	8,813	8,576	8,527	-0.6%
St Vincent's Hospital	6,225	6,540	6,469	-1.1%
Non Metropolitan Hospitals				
Ballarat Health Services	7,198	7,273	6,951	-4.4%
Barwon Health	8,616	9,041	8,969	-0.8%
Bendigo Health Care Group	7,336	7,566	7,860	3.9%
Goulburn Valley Health	5,291	5,927	5,450	-8.0%
New Latrobe Regional Hospital ⁴	7,867	6,797	6,478	-4.7%
Total	155,718	154,600	152,984	-1.0%

⁴ The Latrobe Regional Hospital closed and the New Latrobe Regional Hospital opened on 1 September 1998.

Source: Victorian Emergency Minimum Dataset

How many emergency department patients are treated within ideal time?

Figure 3.1 Emergency Department Achievement of ACEM Waiting Times by Triage Category^{1 2}



¹ Waiting times are calculated as the time between presentation at the emergency department and commencement of treatment. The following Australasian College for Emergency Medicine (ACEM) patient categories and recommended treatment times are used:

Category 1: Resuscitation case requiring immediate treatment, for example, major trauma, cardiac arrest, unconsciousness, shock.

Category 2: Emergency case requiring treatment within 10 minutes, for example, severe trauma, chest pain, severe pain, severe breathing difficulty.

Category 3: Urgent case requiring treatment within 30 minutes, for example, moderate trauma, infection, breathing difficulty.

² Data only for hospitals participating in the Emergency Services Enhancement Program / Hospital Access Program.

How many emergency department patients are treated within ideal time?

Table 3.3 Patients treated in selected public hospital emergency departments in triage category 1, 2 or 3 by whether treated in ACEM recommended waiting time: June 1999 Quarter^{1 2}

Hospital	Triage Category 1		Triage Category 2		Triage Category 3	
	Total patients	Treated immediately	Total patients	Treated in 10 minutes	Total patients	Treated in 30 minutes
North Western Health Care Network						
Northern Hospital	68	100%	223	86%	2,033	77%
Royal Melbourne Hospital	183	100%	1,151	85%	3,470	86%
Western Hospital	122	100%	709	87%	2,577	85%
Inner and Eastern Health Care Network						
The Alfred	259	100%	1,054	69%	2,345	71%
The Angliss Health Services	16	100%	422	81%	1,370	82%
Box Hill Hospital	79	100%	363	88%	2,819	73%
Maroondah Hospital	35	100%	279	84%	1,507	75%
Southern Health Care Network						
Dandenong Hospital	189	100%	1,087	77%	4,204	68%
Monash Medical Centre	231	100%	1,421	78%	4,348	69%
Peninsula Health Care Network						
Frankston Hospital	46	100%	426	93%	3,479	64%

¹ Data only for hospitals participating in the Hospital Access Program.

² Australasian College for Emergency Medicine (ACEM).

Table 3.3 Patients treated in selected public hospital emergency departments in triage category 1, 2 or 3 by whether treated in ACEM recommended waiting time: June 1999 Quarter (continued)

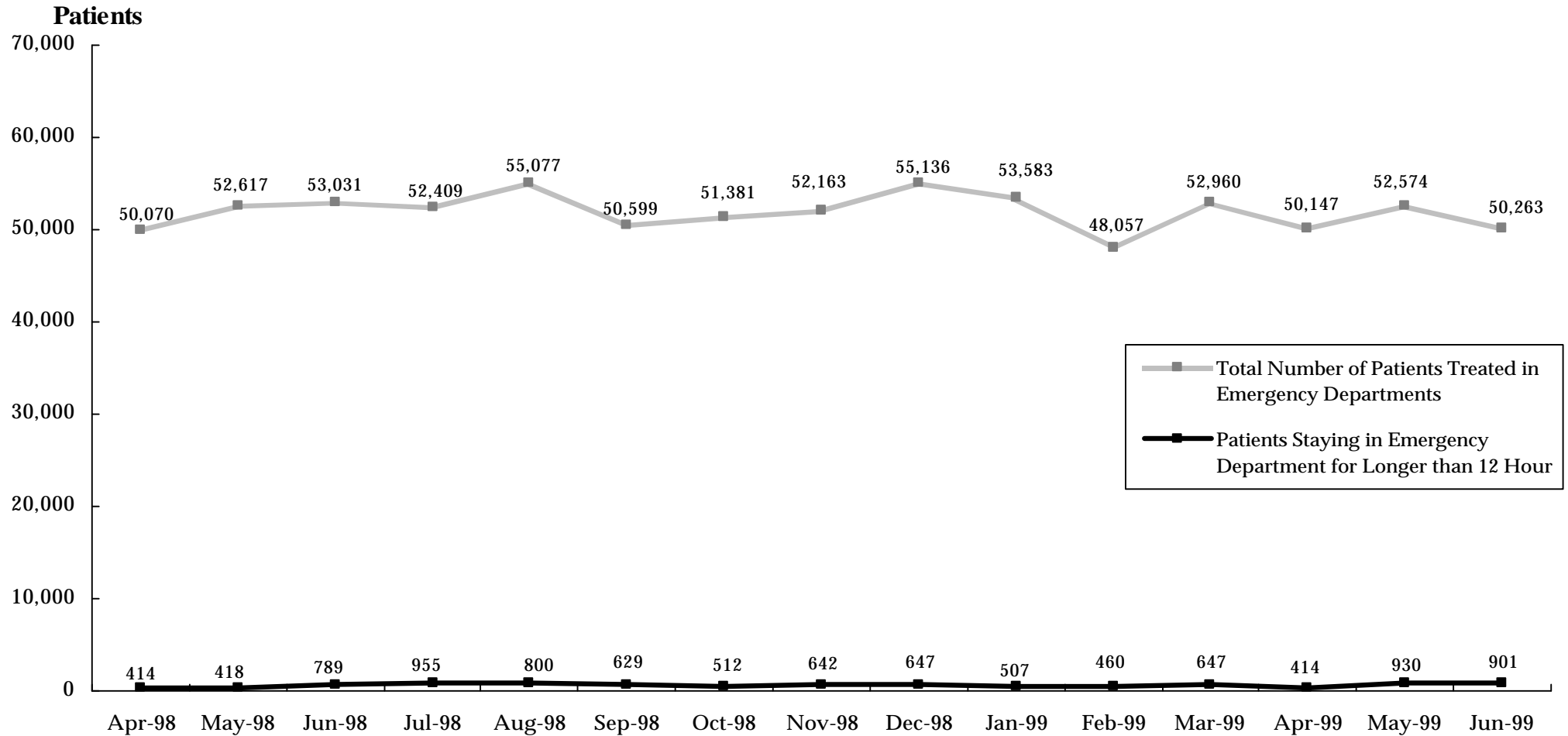
Hospital	Triage Category 1		Triage Category 2		Triage Category 3	
	Total patients	Treated immediately	Total patients	Treated in 10 minutes	Total patients	Treated in 30 minutes
Women's and Children's Health Care Network						
Royal Children's Hospital	31	100%	178	93%	2,586	82%
Metropolitan Non-Network Hospitals						
Austin and Repatriation Medical Centre	102	100%	768	77%	2,933	66%
St Vincent's Hospital	96	100%	506	75%	2,160	79%
Non Metropolitan Hospitals						
Ballarat Health Services	30	100%	160	86%	1,497	80%
Barwon Health ³	75	100%	598	85%	2,966	76%
Bendigo Health Care Group	19	100%	199	83%	1,349	78%
Goulburn Valley Health	26	100%	269	94%	1,655	83%
New Latrobe Regional Hospital	29	100%	366	95%	1,146	89%
Total	1,636	100%	10,179	81%	44,444	75%

³ Barwon Health is formerly known as The Geelong Hospital.

Source: Victorian Emergency Minimum Dataset

How many patients stay for an extended period in the emergency department?

Figure 3.2 Patients Staying in Emergency Departments for Over 12 Hours While Waiting for a Hospital Bed ^{1 2 3}



¹ The period of 'stay' is calculated from the time the patient arrives in the emergency department to the time when the patient leaves the emergency department.

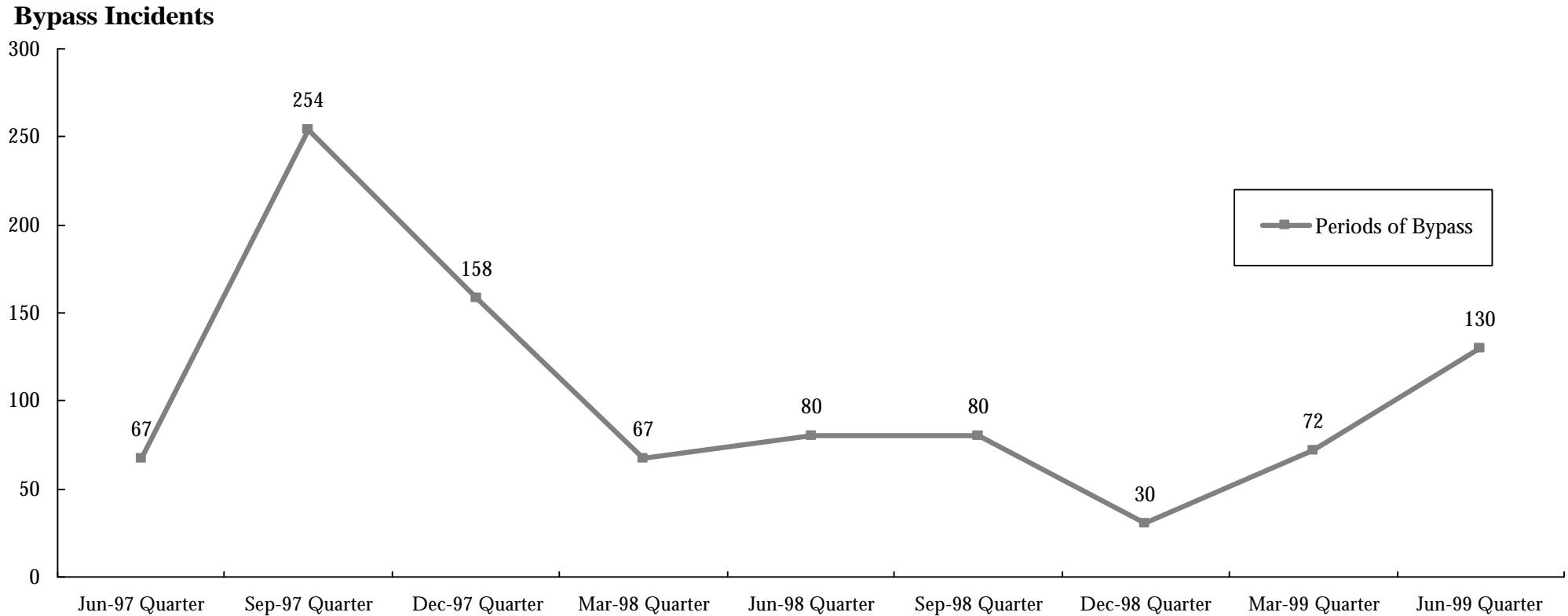
² Data only for hospitals participating in the Emergency Services Enhancement Program / Hospital Access Program.

³ Patients spending over 12 hours in the emergency department, due to being treated in DHS sponsored Chest Pain Evaluation Area Pilots, are excluded from these figures.

Source: Victorian Emergency Minimum Dataset.

How often are hospital emergency departments too busy, and consequently go on 'bypass'?

Figure 3.3 Periods of Ambulance Bypass of Public Hospitals^{1 2 3}



¹ Hospital emergency departments are bypassed by ambulances when the emergency department has reached maximum capacity and the treatment of patients already in the emergency department could be significantly compromised by the ambulance arrival of an additional patient requiring emergency treatment. Each individual period of ambulance bypass is for two hours or less.

² Data only for hospitals participating in the Emergency Services Enhancement Program / Hospital Access Program.

³ Metropolitan Ambulance Service (MAS) response times are now being reported in MAS Response Report: A Quarterly Statistical Review of MAS, Melbourne. The 1st Issue (Feb 1998) of the Response Report reported on MAS response times for the December 1997 quarter. Copies of the Response Report can be obtained from MAS, Corporate Planning and Corporate Communications Unit, phone (03) 9840 3648.

4. Access to Critical Care Services

How many hospital beds are available for patients who need intensive care?

Table 4.2 Average number of public hospital intensive care beds (excluding step-down beds) available and open at 9.00a.m., by month ¹

	Apr-98	May-98	Jun-98	Jul-98	Aug-98	Sep-98	Oct-98	Nov-98	Dec-98	Jan-99	Feb-99	Mar-99	Apr-99	May-99	Jun-99
Available ²	5.9	5.5	3.0	2.4	5.3	9.2	7.3	2.6	6.2	11.8	9.8	6.0	4.2	4.0	4.2
Total Open ³	88.6	89.2	89.6	91.7	91.8	90.4	90.6	93.9	93.5	88.9	92.0	94.0	92.4	92.0	94.0

¹ Based upon hospital census taken at 9.00a.m. daily.

² Available beds are unoccupied beds which are staffed, functional and available to receive new patients.

³ Total open beds are all functioning and staffed beds, regardless of whether they are occupied.

Source: Office of the Coordinator of Emergency and Critical Care Services.

How many hospital beds are available for patients who need coronary care?

Table 4.2 Average number of public hospital coronary care beds (excluding step-down beds) available and open at 9.00a.m., by month ¹

	Apr-98	May-98	Jun-98	Jul-98	Aug-98	Sep-98	Oct-98	Nov-98	Dec-98	Jan-99	Feb-99	Mar-99	Apr-99	May-99	Jun-99
Available	7.9	8.7	8.1	9.9	10.4	8.6	9.8	8.4	8.2	10.4	9.5	7.5	7.3	5.8	6.0
Total Open	75.8	76.5	74.8	75.3	75.4	73.4	74.0	73.3	72.3	73.5	74.0	73.0	72.0	74.0	72.0

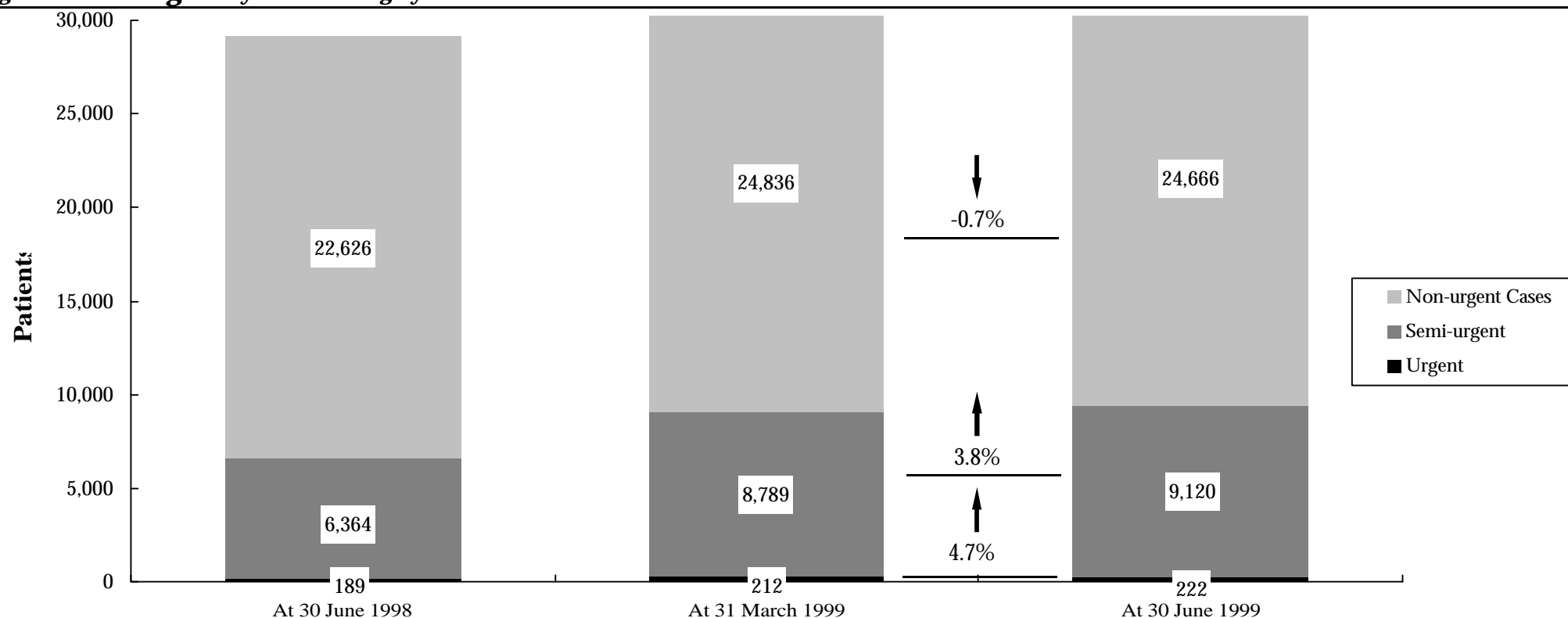
¹ Notes under Table 5.1 apply.

Source: Office of the Coordinator of Emergency and Critical Care Services

5. Access To Elective Surgery

How many people are on hospital waiting lists for elective surgery?

Figure 5.1 *Waiting List by Patient Category*^{1 2 3}



¹ The waiting list patient categories are:

- Urgent cases (waiting list category 1): Admission within 30 days desirable for a condition that has the potential to deteriorate quickly to the point that it may become an emergency.
- Semi-urgent cases (waiting list category 2): Admission within 90 days desirable for a condition causing some pain, dysfunction or disability but which is not likely to deteriorate quickly or become an emergency.
- Non-urgent cases (waiting list category 3): Admission at some time in the future acceptable for a condition causing minimal or no pain, dysfunction or disability which is very unlikely to deteriorate quickly and which does not have the potential to become an emergency.

² Note that for this and subsequent tables, the numbers involved may be small and therefore small absolute changes may result in large percentage changes.

³ Discrepancies between the total number of urgent, semi-urgent and non-urgent cases in Figure 5.1 & Table 5.1 and total waiting in Figure 5.2 & Table 5.2 are due to some hospitals not providing urgency categories for all patients.

How many people are on hospital waiting lists for elective surgery?

Table 5.1 Waiting List by Patient Category, by Individual Hospital ^{1 2 3}

Hospital	Urgent cases			Semi-urgent cases				Non-urgent cases			
	30 Jun 1998	31 Mar 1999	30 Jun 1999	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999
North Western Health Care Network											
Northern Hospital	10	4	0	312	462	562	22%	1599	2,192	1,920	-12.4%
Royal Melbourne Hospital	68	49	21	408	742	738	-1%	1,481	2,004	2,162	7.9%
Western Hospital ⁴	20	30	16	255	462	434	-6%	2,280	1,611	1,487	-7.7%
Sunshine Hospital ⁴	-	1	3	-	57	12	-79%	-	309	173	-44.0%
Inner and Eastern Health Care Network											
The Alfred	28	7	41	270	802	907	13%	939	1,341	1,464	9.2%
The Angliss Health Services	0	1	0	9	62	51	-18%	243	271	252	-7.0%
Box Hill Hospital	2	16	3	203	312	302	-3%	533	557	507	-9.0%
Maroondah Hospital	14	13	11	163	142	139	-2%	1,441	1,271	1,222	-3.9%
Royal Victorian Eye and Ear Hospital	0	0	0	1,372	1,638	1,824	11%	13	3	28	833.3%
Southern Health Care Network											
Dandenong Hospital	4	7	15	78	122	159	30%	1,212	1,189	1,238	4.1%
Monash Medical Centre	2	8	29	431	394	353	-10%	2,569	2,612	2,533	-3.0%
Sandringham & District Memorial Hospital	1	2	3	7	60	37	-38%	556	736	671	-8.8%
Peninsula Health Care Network											
Frankston Hospital	11	2	2	465	496	505	2%	1,770	2,037	1,938	-4.9%

¹ In Victoria, the waiting list is used to coordinate patients who have been recommended for elective surgery but who cannot be booked in for admission to hospital because the demand for elective surgery at that hospital exceeds the resources available at that time. Patients are considered to be booked when they have been given a planned date within six weeks to be admitted for their elective surgery. Booked patients are separate to waiting list patients.

² Note that for this and subsequent tables, the numbers involved may be small and therefore small absolute changes may result in large percentage changes.

³ Note that ESIS data collection dates are the final day of the month. The previous system measured waiting lists as at the first day of the following month.

⁴ Western Hospital disaggregated and Sunshine Hospital commenced reporting separately from 1 July 1998.

Table 5.1 Waiting List by Patient Category, by Individual Hospital (continued)

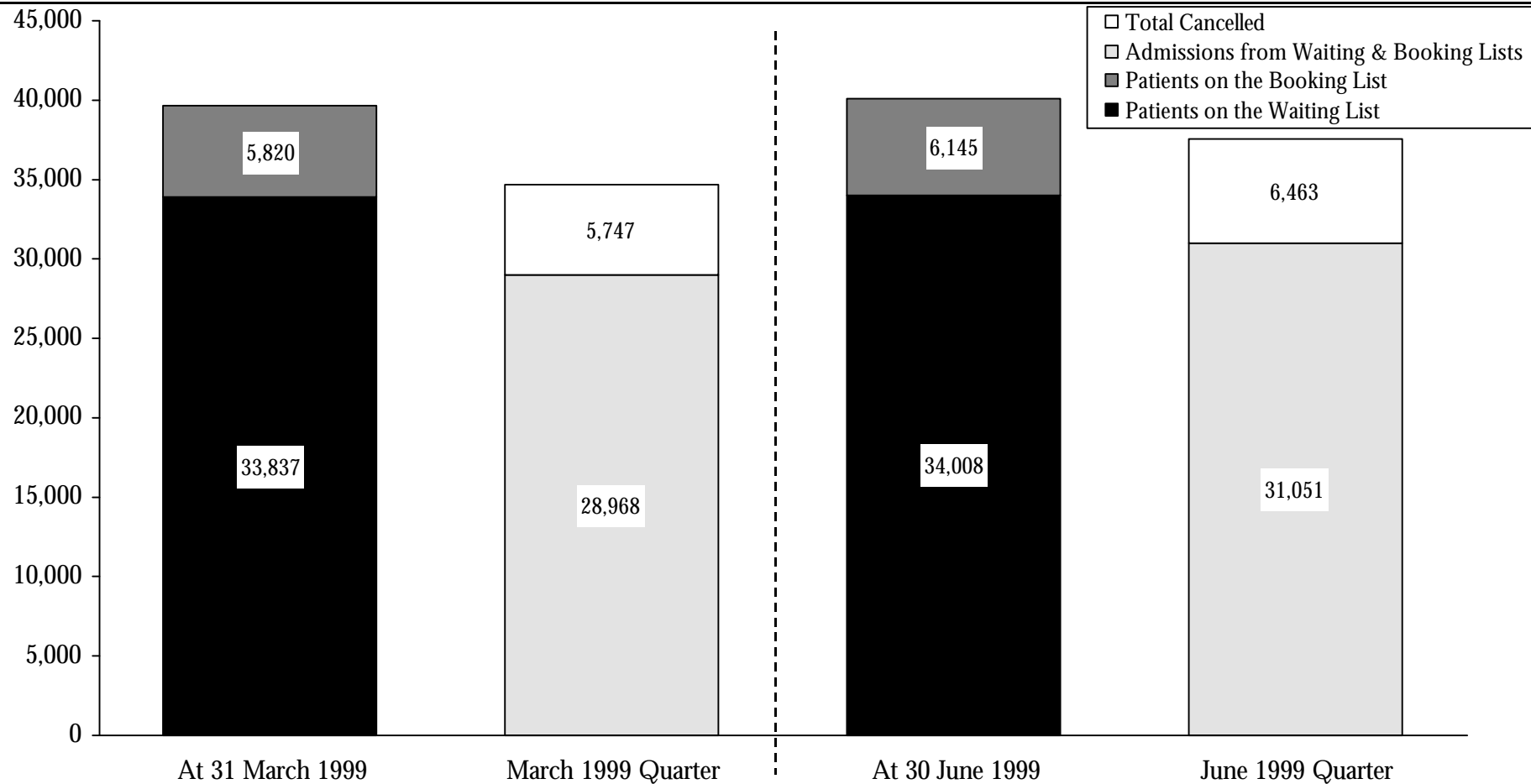
Hospital	Urgent cases			Semi-urgent cases				Non-urgent cases			
	30 Jun 1998	31 Mar 1999	30 Jun 1999	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999 to	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999
Women's and Children's Health Care Network											
Royal Children's Hospital	0	2	0	59	74	26	-65%	676	847	866	2.2%
Royal Women's Hospital	3	19	14	187	257	155	-40%	352	500	537	7.4%
Metropolitan Non-Network Hospitals											
Austin and Repatriation Medical Centre	16	38	40	590	684	817	19%	1,326	1,092	1,261	15.5%
St Vincent's Hospital	1	5	3	442	754	866	15%	828	1,049	1,072	2.2%
Non Metropolitan Hospitals											
Ballarat Health Services	0	4	3	303	452	404	-11%	1,318	1,567	1,676	7.0%
Barwon Health	1	0	2	385	350	299	-15%	1,470	1,808	1,653	-8.6%
Bendigo Health Care Group	1	0	7	105	103	142	38%	730	782	889	13.7%
Goulburn Valley Health	3	0	0	171	96	130	35%	564	303	415	37.0%
New Latrobe Regional Hospital ⁵	0	1	4	47	46	42	-9%	263	395	359	-9.1%
Wangaratta District Base Hospital	2	3	0	27	192	176	-8%	182	134	82	-38.8%
West Gippsland Hospital	2	0	5	75	30	40	33%	281	226	261	15.5%
Total	189	212	222	6,364	8,789	9,120	4%	22,626	24,836	24,666	-0.7%

⁵ The Latrobe Regional Hospital closed and the New Latrobe Regional Hospital opened on 1 September 1998.

Source: Elective Surgery Information System.

What is the throughput of people waiting for elective surgery?

Figure 5.2 Admissions and Cancellations^{1 2}



¹ In Victoria, the waiting list is used to coordinate patients who have been recommended for elective surgery but who cannot be booked in for admission to hospital because the demand for elective surgery at that hospital exceeds the resources available at that time. Patients are considered to be booked when they have been given a planned date within six weeks to be admitted for their elective surgery. Booked patients are separate to waiting list patients.

² March 1999 quarter data for Ballarat Health Services include estimates.

Source: Elective Surgery Information System.

What is the throughput of people waiting for elective surgery?

Table 5.2: Admissions and Cancellations, by Individual Hospital: June 1999 Quarter

Hospital	Patients on the Waiting List at 30 June 1999	Patients on the Booking List at 30 June 1999	Admissions from Waiting List & Booking List During the	Patients Cancelled from Waiting & Booking Lists During the	Total Permanent Removals from Waiting & Booking During the Quarter
North Western Health Care Network					
Northern Hospital	2,482	263	991	651	1,642
Royal Melbourne Hospital	2,921	249	1,606	509	2,115
Western Hospital	1,937	236	1,188	469	1,657
Sunshine Hospital ¹	188	209	739	126	865
Inner and Eastern Health Care Network					
The Alfred ²	2,412	316	1,262	410	1,672
The Angliss Health Services	303	334	753	122	875
Box Hill Hospital	812	312	1,452	176	1,628
Maroondah Hospital	1,372	232	892	330	1,222
Royal Victorian Eye and Ear Hospital, The	1,852	561	2,642	255	2,897
Southern Health Care Network					
Dandenong Hospital	1,412	98	920	187	1,107
Monash Medical Centre	2,915	440	2,572	664	3,236
Sandringham & District Memorial Hospital	711	136	651	186	837
Peninsula Health Care Network					
Frankston Hospital	2,445	454	1,633	446	2,079

¹Western Hospital disaggregated and Sunshine Hospital commenced reporting separately from 1 July 1998.

²June 1999 data for The Alfred are preliminary only.

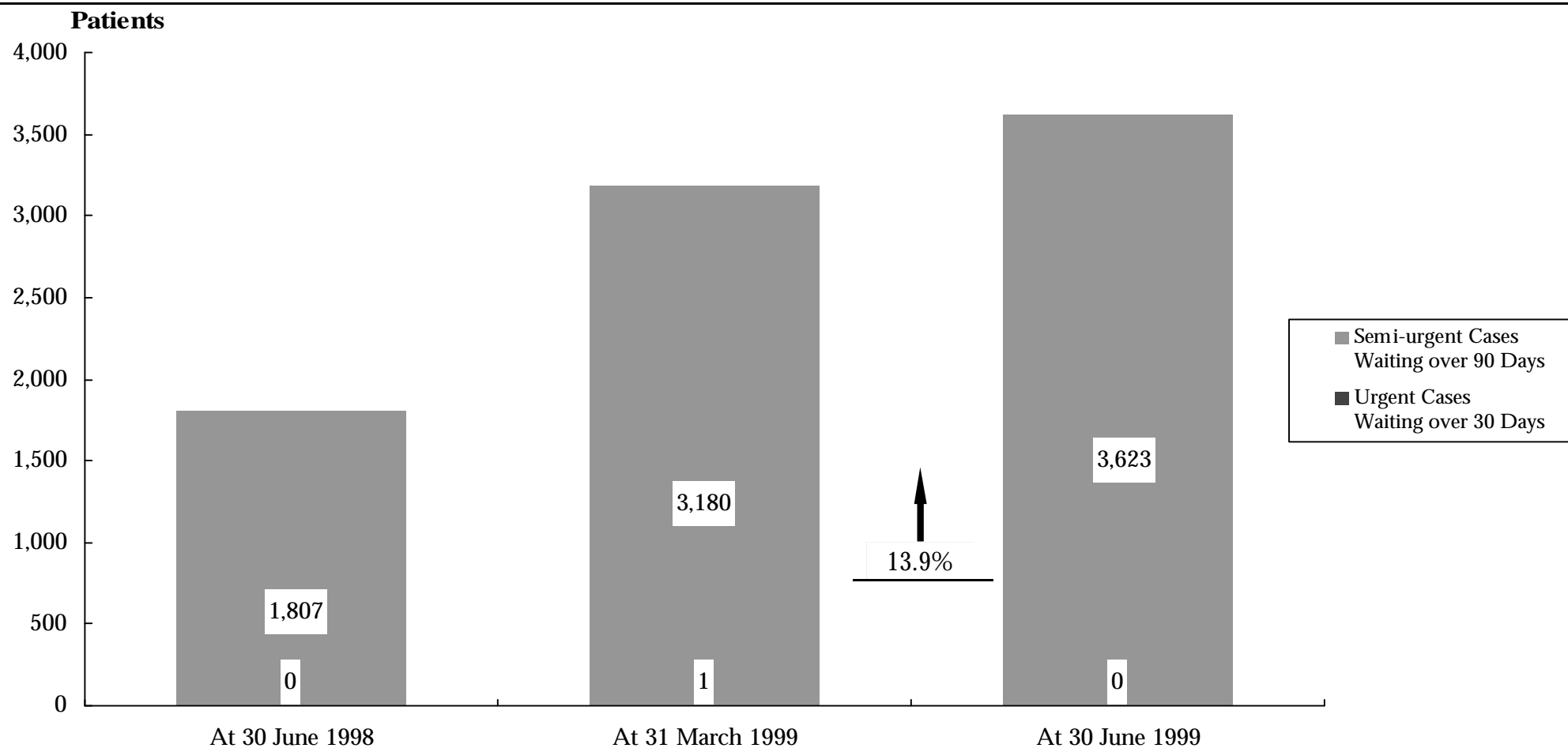
Table 5.2: Admissions and Cancellations, by Individual Hospital: June 1999 Quarter (continued)

Hospital	Patients on the Waiting List at 30 June 1999	Patients on the Booking List at 30 June 1999	Admissions from Waiting List & Booking List During the	Patients Cancelled from Waiting & Booking Lists During the	Total Permanent Removals from Waiting & Booking During the Quarter
Women's and Children's Health Care Network					
Royal Children's Hospital	892	421	2,718	260	2,978
Royal Women's Hospital	706	298	2,318	315	2,633
Metropolitan Non-Network Hospitals					
Austin and Repatriation Medical Centre	2,118	203	1,775	297	2,072
St Vincent's Hospital	1,941	272	1,320	281	1,601
Non Metropolitan Hospitals					
Ballarat Health Services	2,083	68	530	143	673
Barwon Health	1,954	239	1,393	142	1,535
Bendigo Health Care Group	1,038	183	718	189	907
Goulburn Valley Health	545	58	644	64	708
New Latrobe Regional Hospital	405	309	1,209	87	1,296
Wangaratta District Base Hospital	258	187	512	87	599
West Gippsland Hospital	306	67	613	67	680
Total	34,008	6,145	31,051	6,463	37,514

Source: Elective Surgery Information System.

How many people are on hospital waiting lists and booking lists for longer than the ideal time?

Figure 5.3 People on elective surgery waiting lists and booking lists for longer than ideal time in selected public hospitals by urgency^{1 2 3}



¹ Waiting longer than ideal includes semi-urgent patients waiting over 90 days and urgent patients waiting over 30 days.

² Note that for this and subsequent tables, the numbers involved may be small and therefore small absolute changes may result in large percentage changes.

³ March 1999 quarter data are based on an estimate.

Source: Elective Surgery Information System.

How many people are on hospital waiting lists and booking lists for longer than the ideal time?

Table 5.3 People on elective surgery waiting lists and booking lists for longer than ideal time in selected public hospitals by urgency ¹

Hospital	Urgent cases waiting over 30 days				Semi-urgent cases waiting over 90 days			
	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999
North Western Health Care Network								
Northern Hospital	0	0	0	-	54	114	184	61.4%
Royal Melbourne Hospital	0	1	0	-100.0%	140	359	358	-0.3%
Western Hospital ¹	0	0	0	-	59	121	133	9.9%
Sunshine Hospital ¹	-	0	0	-	0	1	0	-100.0%
Inner and Eastern Health Care Network								
The Alfred	0	0	0	-	87	370	519	40.3%
The Angliss Health Services	0	0	0	-	0	1	3	200.0%
Box Hill Hospital	0	0	0	-	9	23	12	-47.8%
Maroondah Hospital	0	0	0	-	0	0	0	-
The Royal Victorian Eye and Ear Hospital	0	0	0	-	518	819	830	1.3%
Southern Health Care Network								
Dandenong Hospital	0	0	0	-	2	9	27	200.0%
Monash Medical Centre	0	0	0	-	196	200	143	-28.5%
Sandringham & District Memorial Hospital	0	0	0	-	2	5	5	0.0%
Peninsula Health Care Network								
Frankston Hospital	0	0	0	-	94	125	121	-3.2%

¹Western Hospital disaggregated and Sunshine Hospital commenced reporting separately from 1 July 1998.

Table 5.3 People on elective surgery waiting lists and booking lists for longer than ideal time in selected public hospitals by urgency (continued)

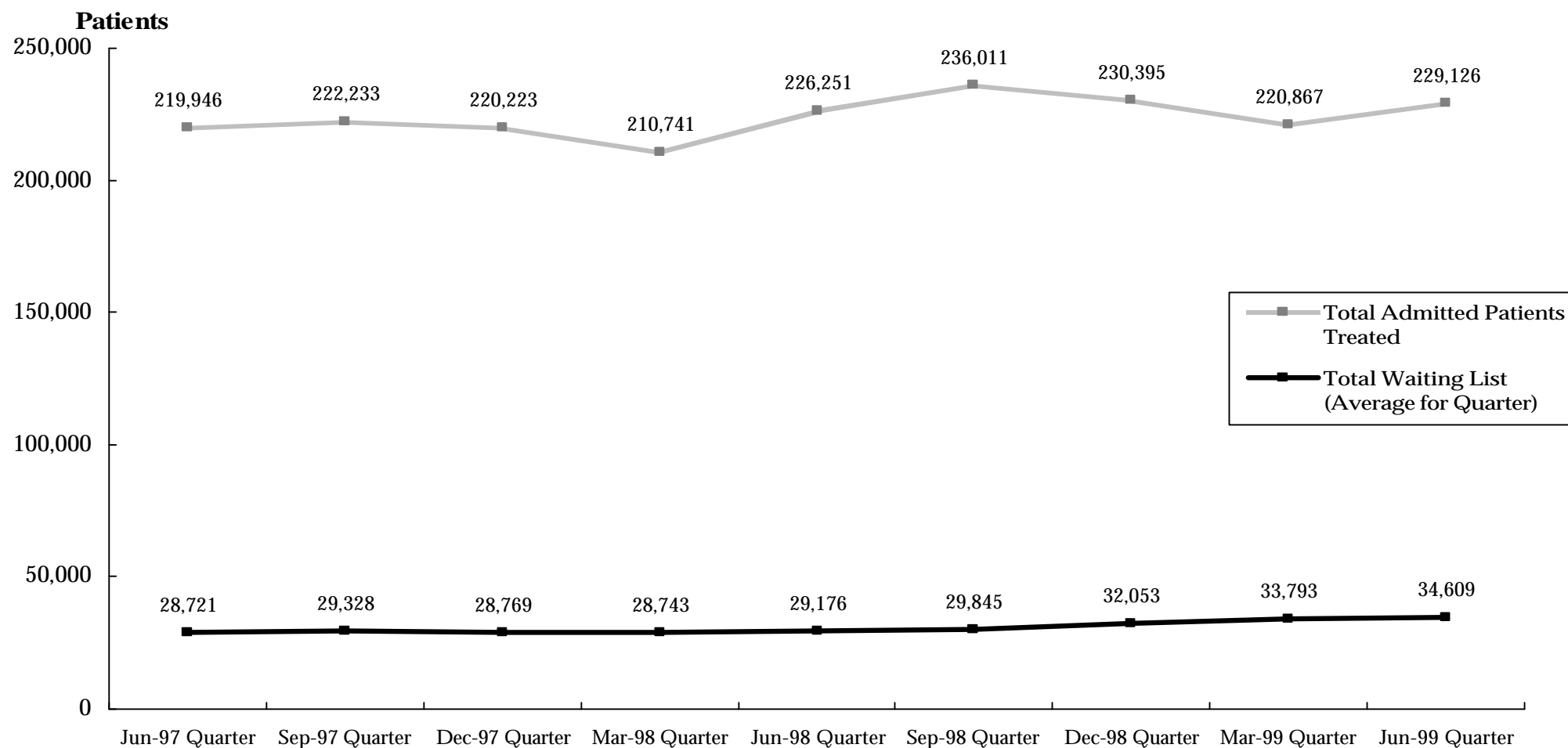
Hospital	Urgent cases waiting over 30 days				Semi-urgent cases waiting over 90 days			
	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999	30 Jun 1998	31 Mar 1999	30 Jun 1999	% Change Mar 1999 to Jun 1999
Women's and Children's Health Care Network								
Royal Children's Hospital	0	0	0	-	1	0	0	-
Royal Women's Hospital	0	0	0	-	16	14	1	-92.9%
Metropolitan Non-Network Hospitals								
Austin & Repatriation Medical Centre	0	0	0	-	162	228	357	56.6%
St Vincent's Hospital	0	0	0	-	114	346	462	33.5%
Non Metropolitan Hospitals								
Ballarat Health Services ²	0	0	0	-	137	253	243	-4.0%
Barwon Health	0	0	0	-	126	150	140	-6.7%
Bendigo Health Care Group	0	0	0	-	30	7	18	157.1%
Goulburn Valley Health	0	0	0	-	35	0	0	-
New Latrobe Regional Hospital	0	0	0	-	0	0	0	-
Wangaratta District Base Hospital	0	0	0	-	16	33	67	103.0%
West Gippsland Hospital	0	0	0	-	9	2	0	-100.0%
Total	0	1	0	-100.0%	1,807	3,180	3,623	13.9%

² March 1999 data for Ballarat Health Services are based on an estimate.

Source: Elective Surgery Information System.

How does the waiting list compare to the total number of patients treated?

Figure 5.4 Waiting List Compared with Overall Admitted Patient Activity^{1 2 3}



¹ Data in the current quarter for Admitted Patients Treated are provisional.

² March 1998 quarter waiting list data include estimates.

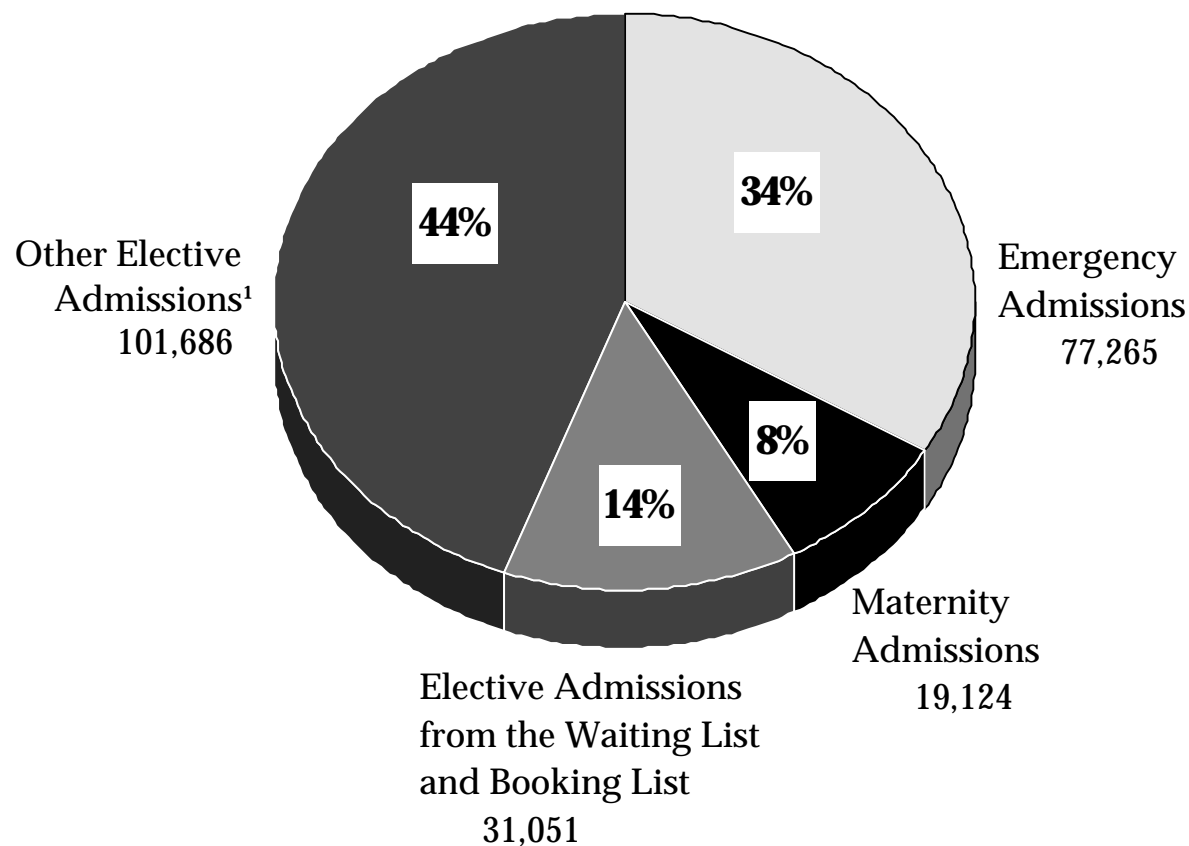
³ June 1999 data for TheAlfred are unavailable and therefore totals are subject to amendment.

Source: Victorian Inpatient Minimum Database (21 September update).

Source: Elective Surgery Information System.

How much of total hospital activity comes from the waiting list and booking list?

Figure 5.5 Separations by Admission Type: June Quarter 1999 ^{2 3 4 5}



¹ Includes statistical admissions, which refer to a change in patient care type.

² Patients on the waiting list who are treated during the quarter: see definition of treated patients given in Figure 3.1.

³ Includes maternity and newborns admissions.

⁴ Percentages may not add due to rounding.

⁵ June 1999 data for TheAlfred are unavailable and therefore totals are subject to amendment.

Source: Victorian Inpatient Minimum Database (21 September update).

Source: Elective Surgery Information System.

How many people are booked for elective surgery?

Table 5.4: Booked Patients at Waiting List Hospitals ¹

	At 30 June 1998	At 31 March 1999	At 30 June 1999	% Change At 31 March 1999 to At 30 June 1999
Waiting list				
Booking list	6,442	5,820	6,145	5.6%

¹ In Victoria, the waiting list is used to coordinate patients who have been recommended for elective surgery but who cannot be booked in for admission to hospital because the demand for elective surgery at that hospital exceeds the resources available at that time. Patients are considered to be booked when they have been given a planned date within six weeks to be admitted for their elective surgery. Booked patients are separate to waiting list patients.

Note: Patients may be booked immediately at the time that they are referred for elective surgery or they may be booked after having waited on the waiting list. The ability of a hospital to offer bookings depends on a number of factors including (i) the urgency of the patient as determined by the treating surgeon, (ii) the suitability (fitness) of the patient to undergo surgery, and (iii) availability of resources, including appropriately skilled surgical staff, operating theatre facilities, recovery room facilities, and general ward accommodation.

Source: *Elective Surgery Information System*.

6. Accredited Victorian Acute Public Hospitals

Which public hospitals are accredited?

Table 6.1 Accredited Victorian Acute Public Hospitals as at 30 June 1999

Hospital	Accreditation expiry date	Accrediting organisation
North Western Health Care Network		
Williamstown Hospital	9 September 1999	ACHS EQuIP
Inner and Eastern Health Care Network		
The Alfred	20 February 2001	ACHS EQuIP
The Angliss Health Services	23 March 2000	ACHS EQuIP
Box Hill Hospital	16 January 2001	ACHS EQuIP
Caulfield General Medical Centre	4 June 2002	ACHS EQuIP
Maroondah Hospital	5 August 2001	ACHS EQuIP
The Peter James Centre	30 May 2000	ACHS EQuIP
Peter MacCallum Cancer Institute	7 September 2001	ACHS EQuIP
The Royal Victorian Eye & Ear Hospital	26 February 2000	ACHS EQuIP
St Georges Health Service	29 August 1999	ACHS EQuIP
Yarra Ranges Health Services	28 July 2000	ACHS EQuIP
Southern Health Care Network		
Dandenong Hospital	25 January 2002	ACHS EQuIP
Hampton Rehabilitation Hospital	25 January 2002	ACHS EQuIP
Monash Medical Centre	25 January 2002	ACHS EQuIP
Sandringham & District Memorial Hospital	25 January 2002	ACHS EQuIP
Peninsula Health Care Network		
Frankston Hospital	17 January 2000	ACHS EQuIP
Rosebud Hospital	17 January 2000	ACHS EQuIP
Women's and Children's Health Care Network¹		
Royal Children's Hospital	12 July 1999	ACHS EQuIP
Royal Women's Hospital	21 January 2001	ACHS EQuIP
Metropolitan Non-Network Hospitals		
Austin and Repatriation Medical Centre	18 November 2000	ACHS EQuIP
Royal Talbot Rehabilitation Centre	18 November 2000	ACHS EQuIP
Mercy Public Hospital, East Melbourne	5 February 2001	ACHS EQuIP
Mercy Public Hospital, Werribee	19 April 2002	ACHS EQuIP
St Vincent's Hospital	29 November 2000	ACHS EQuIP

¹ The Women's and Children's Health Care Network will be surveyed for accreditation as a Network in August 1999 (Royal Children's Hospital and Royal Women's Hospital are currently accredited as separate organisations).

Table 6.1 Accredited Victorian Acute Public Hospitals as at 30 June 1999

Hospital	Accreditation expiry date	Accrediting organisation
Barwon South Western Region		
Barwon Health	14 August 2001	ACHS EQuIP
Casterton Memorial Hospital	3 April 2000	ACHS EQuIP
Colac Community Health Services	18 November 1999	ACHS EQuIP
Coleraine & District Hospital	18 September 1999	ACHS EQuIP
The Corangamite Regional Hospital Services	19 February 2002	ACHS EQuIP
Lorne Community Hospital	19 February 2000	ACHS EQuIP
Portland & District Hospital	16 June 2000	ACHS EQuIP
Terang & Mortlake Health Service	6 December 2000	ACHS EQuIP
Timboon & District Health Care Service	16 June 2000	ACHS EQuIP
Warrnambool & District Base Hospital ²	23 September 1999	ACHS EQuIP
Western District Health Service	24 June 2001	ACHS EQuIP
Grampians Region		
Ballarat Health Services, Queen Elizabeth Cer	3 February 2000	ACHS EQuIP
East Grampians Health Service	22 December 2000	ACHS EQuIP
East Wimmera Health Service, St Arnaud Car	28 August 2001	ACHS EQuIP
East Wimmera Health Service, Donald Camp	28 August 2001	ACHS EQuIP
Edenhope & District Hospital	19-May-2000	ACHS EQuIP
Hepburn Health Services	05-Jan-2001	ACHS EQuIP
Stawell District Hospital	24-May-2002	ACHS EQuIP
Wimmera Health Care Group	08-Oct-2001	ACHS EQuIP
Gippsland Region		
Bairnsdale Regional Health Service	12 August 2002	ACHS EQuIP
Central Wellington Health Service ³	29 May 2000	ACHS EQuIP
Far East Gippsland Health & Support Service	13 July 2002	ACHS EQuIP
Gippsland Southern Health Service	1 June 2000	ACHS EQuIP
Maffra District Hospital ³	22 August 1999	ACHS EQuIP
West Gippsland Healthcare Group	19 December 1999	ACHS EQuIP
Yarram & District Health Service ⁴	Awaiting notification	ACHS EQuIP

² Corangamite Regional Hospital Services and Warrnambool & District Base Hospital amalgamated on 1 July 1999 to become South West Healthcare.

³ Central Wellington Health Service and Maffra District Hospital amalgamated on 1 July 1999 to become Central Gippsland Health Service.

⁴ Yarram & District Health Service received notification from ACHS in August 1999 that accreditation has been awarded for a 3 year period.

Table 6.1 Accredited Victorian Acute Public Hospitals as at 30 June 1999

Hospital	Accreditation expiry date	Accrediting organisation
Hume Region		
Alexandra District Hospital	3 December 2000	ACHS EQuIP
Alpine Health, Myrtleford Hospital	30 July 1999	ACHS EQuIP
The Beechworth Hospital	20 February 2001	ACHS EQuIP
Benalla & District Memorial Hospital	14 August 1999	ACHS EQuIP
Cobram District Hospital	18 August 2001	ACHS EQuIP
Goulburn Valley Health	9 December 2001	ACHS EQuIP
Numurkah & District Health Service	5 January 2001	ACHS EQuIP
Tallangatta Hospital	ing results of accreditation survey	ACHS EQuIP
Wangaratta District Base Hospital	18 November 2001	ACHS EQuIP
Wodonga Regional Health Service	20 December 1999	ACHS EQuIP
Yarrawonga District Hospital	15 January 2002	ACHS EQuIP
Yea & District Memorial Hospital	17 October 1999	ACHS EQuIP
Loddon Mallee Region		
Bendigo Health Care Group	14 May 2002	ACHS EQuIP
Boort District Hospital	19 January 2001	ACHS EQuIP
Cohuna District Hospital	22 April 2000	ACHS EQuIP
Echuca Regional Hospital	31 May 2002	ACHS EQuIP
Inglewood & District Health Service	28 April 2000	ACHS EQuIP
Kerang & District Hospital	9 September 1999	ACHS EQuIP
Kyneton District Health Service	19 May 2001	ACHS EQuIP
Maldon Hospital	11 May 2000	ACHS EQuIP
Maryborough District Health Service	7 June 2002	ACHS EQuIP
McIvor Health & Community Services	28 October 2001	ACHS EQuIP
Mildura Base Hospital	4 February 2000	ACHS EQuIP
Mt Alexander Hospital	13 September 2000	ACHS EQuIP
Swan Hill District Hospital	24 February 2002	ACHS EQuIP

7. Glossary

What Do the Terms Used in this Report Mean?

Admitted Patient

Someone who is an inpatient in a hospital. Sameday patients who are admitted for less than 24 hours are also counted as inpatients but people who attend hospital for outpatient clinics are not.

Cancellation

The permanent removal of a waiting list patient from a booking list or waiting list without admission or booking for the awaited procedure

Casemix Funded

A system of funding hospitals according to the actual number and type of services that they provide. Casemix funding was introduced for most Victorian public hospitals in July 1993.

Coronary Care

A hospital unit with specialised staff and equipment to care for patients with heart disease.

Elective Admission

A planned admission to hospital. Emergency admissions and transfers from other hospitals are not counted as elective admissions.

Elective Surgery

Planned surgery that is not an emergency requiring hospital admission within 24 hours.

Emergency Admission

An unplanned admission to hospital due to unexpected illness or injury that requires urgent care.

Emergency Department

A hospital department that specialises in providing emergency care for people who are in need of urgent care (ambulance cases for example) and people who choose to seek treatment in an emergency department.

Health Care Network

A group of community acute hospitals, psychiatric services, tertiary acute hospitals and aged care services in the metropolitan area that is managed by a single board of directors.

Intensive Care

A hospital unit with specialised staff and equipment to provide continuous care for critically ill, injured or post-operative patients.

Non Sameday Patient

In the context of this report, a non sameday patient is an inpatient who leaves hospital on a later date than when they were admitted.

Separation

When an inpatient leaves a hospital. This is the technical way of counting the number of inpatients treated by a hospital.

Step Down Bed

Hospital beds with specialised staff and equipment to care for patients who no longer need coronary or intensive care but are not yet ready to move to a general hospital ward.

Transfer

When an inpatient is moved from one hospital to another. This might be in order to obtain a specialised treatment not available at the first hospital or because of the patient's preferences.

Waiting List Hospital

A major public hospital that performs elective surgery for public patients and uses a waiting list to properly keep track of people who require elective surgery