

Specifications of Your Hospital Report Data, January to June 2006.

Department of Human Services, Victoria.
Released September 2006.

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Figure 1: Public hospital admissions, Victoria and Australia.

- 1.1 Hospitals reporting: All Australian public hospitals.
- 1.2 Source: Australian Institute of Health and Welfare, Australian Bureau of Statistics.
- 1.3 Latest edition/update of the data: 2004-05.
- 1.4 Definition: Admissions per 1,000 persons - sum of total public hospital admissions divided by the population.

Figure 2: Proportion of emergency department patients seen within desirable treatment times, Victoria and Australia.

- 2.1 Hospitals reporting: As reported by jurisdictions to National Emergency Department Minimum Dataset (Refer Australian Hospital Statistics, AIHW).
- 2.2 Source: Australian Hospital Statistics, Australian Institute of Health and Welfare (Table 5.4).
- 2.3 Latest edition/update of the data: 2004-05.
- 2.4 Definition: Proportion of Emergency Department patients whose time to treatment was within the desirable time, i.e. triage category 1 patients (resuscitation) treated immediately, triage category 2 (emergency) treated within 10 minutes, triage category 3 (urgent) treated within 30 minutes, triage category 4 (semi-urgent) treated within 1 hour and triage category 5 (non-urgent) treated within 2 hours.

Time to treatment equals **a-b**, where:

a is Arrival Date and Time; and

b is the Date and Time the patient is first seen by a nurse or doctor (whichever was first).

Figure 3: Median waiting time to treatment for emergency patients, 2004-05 in Victoria and Australia.

- 3.1 Hospitals reporting: As reported by jurisdictions to National Emergency Department Minimum Dataset (Refer Australian Hospital Statistics, AIHW).
- 3.2 Source: Australian Hospital Statistics, Australian Institute of Health and Welfare (Table 5.4).
- 3.3 Latest edition/update of the data: 2004-05.
- 3.4 Definition: The median time to treatment for Emergency Department patients.

Time to treatment equals **a-b**, where:

a is Arrival Date and Time; and

b is the Date and Time the patient is first seen by a nurse or doctor (whichever was first).

Figure 4: Waiting times for patients admitted from the waiting list, Victoria and Australia.

- 4.1 Hospitals reporting: As reported by jurisdictions to National Elective Surgery Waiting Times Data Collection (Refer Australian Hospital Statistics, AIHW).
- 4.2 Source: Australian Hospital Statistics, Australian Institute of Health and Welfare (Table 5.2).
- 4.3 Latest edition/update of the data: 2004-05.
- 4.4 Definition: The median "total waiting time" for patients admitted for elective surgery during the reporting period. Total waiting time is the difference between the date that the patient was listed for the procedure and the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

Figure 5: Funding for health and aged care services.

- 5.1 Hospitals reporting: NA.
- 5.2 Source: Victorian State Government Budget Papers (Table 3.2).
- 5.3 Latest edition/update of the data: 2006-07.
- 5.4 Definition: Public hospital operating funds budget (not revised) and split by public hospitals (acute health) and other health and aged care services.

Table 1: Funding for public hospitals, ambulance, mental health and dental health services (\$ million).

- 1.1 Hospitals reporting: NA.
- 1.2 Source: Victorian State Government Budget Papers (Table 3.2).
- 1.3 Latest edition/update of the data: 2006-07.
- 1.4 Definition: Public hospital operating funds as allocated in the state budget (not revised) and split by public hospitals (acute health), mental health, ambulance, dental, aged care, primary health and public health.

Figure 6: Capital funding.

- 6.1 Hospitals reporting: NA.
- 6.2 Source: Victorian State Government Budget Papers (Table 3.2).
- 6.3 Latest edition/update of the data: 2006-07.
- 6.4 Definition: Public hospital capital funding budget (not revised) and split by public hospitals (acute health) and other health facilities.

Figure 7: Total hospital capacity.

- 7.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 7.2 Source: VAED - Victorian Admitted Episodes Dataset.
- 7.3 Latest edition/update of the data: September 2006 consolidated file.
- 7.4 Definition: The total number of bed days for all admissions.

Figure 8: Patients admitted to rural public hospital, Victoria.

- 8.1 Hospitals reporting: All Victorian rural public hospitals (refer to Attachment 1).
- 8.2 Source: Victorian Admitted Episodes Dataset.
- 8.3 Latest edition/update of the data: September 2006.
- 8.4 Definition: Total public rural hospital separations. A separation is defined as 'The process by which an episode of care for an admitted patient ceases.' (VAED Manual, July 2005).

Figure 9: Patients admitted to hospital.

- 9.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 9.2 Source: VAED – Victorian Admitted Episodes Dataset.
- 9.3. Latest edition/update of the data: September 2006 consolidated file.
- 9.4 Definition: Total public hospital separations. A separation is defined as 'The process by which an episode of care for an admitted patient ceases.' (VAED Manual, July 2005).

Figure 10: Patients treated in emergency departments.

- 10.1 Hospitals reporting: Major metropolitan hospitals and major rural hospitals (refer to Attachment 1).
- 10.2 Source: VHIRS – Emergency Presentations Universe.
- 10.3. Latest edition/update of the data: September 2006 consolidated file.
- 10.4 Definition: Total number of Emergency Department presentations - an ED presentation is reported for every patient who is triaged, including those patients who subsequently leave the ED before treatment commences.

Figure 11: Patients treated in specialist outpatient clinics.

- 11.1 Hospitals reporting: Victorian Ambulatory Classification System (VACS) reporting hospitals (refer to Attachment 1).
- 11.2 Source: VACS Reporting System.
- 11.3 Latest edition/update of the data: September 2006.
- 11.4 Definition: Total encounters.

Figure 12: Patients treated by community mental health outpatient services.

- 12.1 Hospitals reporting: NA.
- 12.2 Source: Mental Health Reporting System (CMI/ODS).
- 12.3 Latest edition/update of the data: Jan to Jun 2006.
- 12.4 Definition: Total visits to community mental health clinics.

Figure 13: Critical care beds.

- 13.1 Hospitals reporting: - Hospitals with critical care beds - intensive care and high dependency units (refer to Attachment 1).
- 13.2 Source: Office of the Coordinator of Emergency and Critical Care Services.
- 13.3 Latest edition/update of the data: June 2006.
- 13.4 Definition: (a) Occupied - A physical bed space, which is occupied or is immediately available to receive admissions as required. It is a bed space that is staffed for 1:1 nursing care (ICU) or 1:2 nursing care (HDU) and is fully configured to ICU/HDU standards.
(b) Not occupied - A physical bed space, which is or will be available to receive admissions of either ICU or HDU patients within the next 8 hours. It is a bed space that is staffed for 1:1 nursing care (ICU) or 1:2 nursing care (HDU) and is fully configured to ICU/HDU standards.

Figure 14: Babies admitted to neonatal intensive care units and special care nurseries.

- 14.1 Hospitals reporting: Hospitals with neonatal intensive care units and special care nurseries (refer to Attachment 1).
- 14.2 Source: VAED – Victorian Admitted Episodes Dataset.
- 14.3 Latest edition/update of the data: September 2006 consolidated file.
- 14.4 Definition: The number of separations where the patient spends all or part of their stay in a Neonatal Intensive Care Unit or Special Care Nursery.

Figure 15: Percentage of time emergency departments went on hospital bypass.

- 15.1 Major metropolitan hospitals excluding Royal Children's Hospital (see Attachment 1).
15.4 Definition: Percentage of time a hospital defers the Metropolitan Ambulance Service when the A&E is full. Calculated as:

$$\% \text{ time on hospital bypass} = \frac{\text{Time on bypass (hours)}}{\text{Total number of hours in period}}$$

Time on bypass is calculated as end time less start time.

Figures 16-23 Emergency Department data.

- 1 Hospitals reporting: Major metropolitan hospitals and major rural hospitals (refer to Attachment 1).
- 2 Source: VHRS – Emergency Presentations Universe.
- 3 Latest edition/update of the data: September 2006 consolidated file.

Figure 16: Resuscitation (triage category 1) patients treated in emergency departments.

- 16.4 Definition:
- (a) Total number of Resuscitation (triage category 1) patients treated in Emergency Departments – excludes those who left at their own risk without treatment, those who left after clinical advice regarding treatment options and or those who were dead on arrival (which means that there was no attempt to resuscitate the patient in the ED).
 - (b) Number of Resuscitation (triage category 1) patients as defined above (a) who were seen immediately – that is, where their "Time to Treatment" was less than or equal to 1 minute.

Time to treatment equals **a-b**, where:

a is Arrival Date and Time; and

b is the Date and Time the patient is first seen by a nurse or doctor (whichever was first).

Figure 17: Emergency (triage category 2) patients treated in emergency departments.

- 17.4 Definition:
- (a) Total number of Emergency (triage category 2) patients treated in Emergency Departments – excludes those who left at their own risk without treatment, those who left after clinical advice regarding treatment options and or those who were dead on arrival (which means that there was no attempt to resuscitate the patient in the ED).
 - (b) Number of Emergency (triage category 2) patients as defined above (a) who were seen within 10 minutes – that is, where their "Time to Treatment" was less than or equal to 10 minutes.

Time to treatment equals **a-b**, where:

a is Arrival Date and Time; and

b is the Date and Time the patient is first seen by a nurse or doctor (whichever was first).

Figure 18: Urgent (triage category 3) patients treated in emergency departments.

18.4 Definition:

- (a) Total number of Urgent (triage category 3) patients treated in Emergency Departments – excludes those who left at their own risk without treatment, those who left after clinical advice regarding treatment options and or those who were dead on arrival (which means that there was no attempt to resuscitate the patient in the ED).
- (b) Number of Urgent (triage category 3) patients as defined above (a) who were seen within 30 minutes – that is, where their “Time to Treatment” was less than or equal to 30 minutes.

Time to treatment equals **a-b**, where:

a is Arrival Date and Time; and

b is the Date and Time the patient is first seen by a nurse or doctor (whichever was first).

Figure 19: Semi-Urgent (triage category 4) patients treated in emergency departments.

19.4 Definition:

- (a) Total number of Semi-Urgent (triage category 4) patients treated in Emergency Departments – excludes those who left at their own risk without treatment, those who left after clinical advice regarding treatment options and or those who were dead on arrival (which means that there was no attempt to resuscitate the patient in the ED).
- (b) Number of Semi-Urgent (triage category 4) patients as defined above (a) who were seen within 1 hour – that is, where their “Time to Treatment” was less than or equal to 60 minutes.

Time to treatment equals **a-b**, where:

a is Arrival Date and Time; and

b is the Date and Time the patient is first seen by a nurse or doctor (whichever was first).

Figure 20: Non-Urgent (triage category 5) patients treated in emergency departments.

20.4 Definition:

- (a) Total number of Non-Urgent (triage category 5) patients treated in Emergency Departments – excludes those who left at their own risk without treatment, those who left after clinical advice regarding treatment options and or those who were dead on arrival (which means that there was no attempt to resuscitate the patient in the ED).
- (b) Number of Non-Urgent (triage category 5) patients as defined above (a) who were seen within 2 hours – that is, where their “Time to Treatment” was less than or equal to 120 minutes.

Time to treatment equals **a-b**, where:

a is Arrival Date and Time; and

b is the Date and Time the patient is first seen by a nurse or doctor (whichever was first).

Figure 21: Number of patients admitted from emergency departments to hospital beds.

21.4 Definition:

- (a) Total number of Emergency Department presentations - an ED presentation is reported for every patient who is triaged, including those patients who subsequently leave the ED before treatment commences.
- (b) ED patients admitted an inpatient ward – ED patients whose Departure Status indicates they were admitted to a ward (including a medical assessment and planning unit), a short stay unit or an emergency medical unit.

Figure 22: Number of patients admitted from emergency departments to hospital beds within 8 hours.

22.4 Definition:

- (a) ED patients admitted to an inpatient bed – this means ED patients whose Departure Status indicates they were admitted to a ward (including a medical assessment and planning unit), a short stay unit or an emergency medical unit (departure status codes 02, 03 & 13).
- (b) ED patients admitted to an inpatient bed within 8 hours - where the interval between the patient's arrival (date and time) and their departure (date and time) from the ED to the inpatient bed is less than or equal to 8 hours.

Figure 23: Number of non-admitted emergency department patients whose stay is less than 4 hours.

23.4 Definition:

- (a) ED patients not admitted to an inpatient bed – this means ED patients whose Departure Status indicates they departed to the following; Aged Care Residency, Home, Mental Health Residential Facility, Left after advice re treatment options, Correctional/custodial facility (departure status codes 00, 01, 09, 10 & 12).
- (b) ED patients not admitted to an inpatient bed whose length of stay was less than 4 hours - where the interval between the patient's arrival (date and time) and their departure (date and time) from the ED to the inpatient bed is less than or equal to 4 hours.

Figures 24-36: Elective surgery performance data.

- 1. Hospitals reporting: ESIS reporting hospitals (see Attachment 1).
- 2. Source: ESIS - Elective Surgery Information System.
- 3. Latest edition/update of the data: September 2006 consolidated file.

Figure 24: Access to elective surgery – urgent patients.

27.4. Definition:

- (a) Number of Urgent (category 1) patients listed for elective surgery as at end of the reporting period. NB Patients who are "not ready for care" and those waiting for a non-surgical procedure (Principal Prescribed Procedure code greater than or equal to 500) are excluded.
- (b) Number of Urgent (category 1) patients admitted for elective surgery during the reporting period. NB Patients who are "not ready for care" and those waiting for a non-surgical procedure (Principal Prescribed Procedure code greater than or equal to 500) are excluded.

Figure 25: Percentage of urgent patients treated within 30 days.

25.4 Definition:

- (a) Number of Urgent (category 1) patients admitted for elective surgery during the reporting period whose "Total waiting time" is less than or equal to 30 days. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

as a percentage of:

- (b) Total number of Urgent (category 1) patients admitted for elective surgery during the reporting period.

Figure 26: Median time to treat - urgent patients admitted from the elective surgery list.

26.4 Definition:

The median “total waiting time” for Urgent (category 1) patients admitted for elective surgery during the reporting period. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

Figure 27: Access to elective surgery – semi-urgent patients.

27.4. Definition:

- (a) Number of Semi-Urgent (category 2) patients listed for elective surgery as at end of the reporting period. NB Patients who are “not ready for care” and those waiting for a non-surgical procedure (Principal Prescribed Procedure code greater than or equal to 500) are excluded.
- (b) Number of Semi-Urgent (category 2) patients admitted for elective surgery during the reporting period. NB Patients who are “not ready for care” and those waiting for a non-surgical procedure (Principal Prescribed Procedure code greater than or equal to 500) are excluded.

Figure 28: Percentage of semi-urgent patients treated within 90 days.

28.4. Definition:

- (a) Number of Semi-Urgent (category 2) patients admitted for elective surgery during the reporting period whose “Total waiting time” is less than or equal to 90 days. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

as a percentage of:

- (b) Total number of Semi-Urgent (category 2) patients admitted for elective surgery during the reporting period.

Figure 29: Median time to treat - semi-urgent patients admitted from the elective surgery list.

29.4. Definition:

The median “total waiting time” for Semi-Urgent (category 2) patients admitted for elective surgery during the reporting period. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

Figure 30: Access to elective surgery - non-urgent patients.

30.4. Definition:

- (a) Number of Non-Urgent (category 3) patients listed for elective surgery as at end of the reporting period. NB Patients who are “not ready for care” and those waiting for a non-surgical procedure (Principal Prescribed Procedure code greater than or equal to 500) are excluded.
- (b) Number of Non-Urgent (category 3) patients admitted for elective surgery during the reporting period. NB Patients who are “not ready for care” and those waiting for a non-surgical procedure (Principal Prescribed Procedure code greater than or equal to 500) are excluded.

Figure 31: Percentage of non-urgent patients treated within 365 days.

31.4 Definition:

(a) Number of Non-Urgent (category 3) patients admitted for elective surgery during the reporting period whose "Total waiting time" is less than or equal to 365 days. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

as a percentage of:

(b) Total number of Non-Urgent (category 3) patients admitted for elective surgery during the reporting period.

Figure 32: Median waiting time - non-urgent patients admitted from the elective surgery list.

32.4 Definition:

The median "Total waiting time" for Non-Urgent (category 3) patients admitted for elective surgery during the reporting period. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

Figure 33: Median time to treat urgent patients by clinical specialty, 2004-05.

33.4. Definition:

The median "Total waiting time" by clinical specialty for Urgent (category 1) patients admitted for elective surgery during the reporting period. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

Figure 34: Median time to treat semi-urgent patients by clinical specialty.

34.4. Definition:

The median "Total waiting time" by clinical specialty for Semi-Urgent (category 2) patients admitted for elective surgery during the reporting period. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

Figure 35: Median time to treat non-urgent patients by clinical specialty.

35.4. Definition:

The median "total waiting time" by clinical specialty for Non-Urgent (category 3) patients admitted for elective surgery during the reporting period. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure (excluding *Not Ready for Care Days*).

Figures 36: Median waiting time for semi-urgent and non-urgent joint replacement patients.

36.4. Definition:

The median "total waiting time" for Semi-Urgent (category 2) and Non-Urgent (category 3) patients admitted for elective surgery during the reporting period and waiting for elective joint replacement surgery at the end of the period. Total waiting time is the difference between the date that the patient was listed for the procedure to the date they were admitted to hospital for the awaited procedure or to the date at the end of period (excluding *Not Ready for Care Days*).

Figure 37: Funding for dental health services.

37.1 Hospitals reporting: NA.

37.2 Source: Dental Health Services Victoria; Community Dental program.

37.3 Latest edition/update of the data: 2005-06.

37.4 Definition: Total funds allocated to dental health services.

Figure 38: People treated in community dental clinics.

38.1 Hospitals reporting: NA.

38.2 Source: Dental Health Services Victoria; Community Dental program.

38.3 Latest edition/update of the data: 2005-06.

38.4 Definition: The total number of visits to community dental clinics.

Figure 39: Average time to treatment for dentures and restorative dental care.

39.1 Hospitals reporting: NA.

39.2 Source: Dental Health Services Victoria; Community Dental program.

39.3 Latest edition/update of the data: 30 June 2006.

39.4 Definition: The average number of months waited for dentures and restorative dental care.

Figures 40-42: Patient satisfaction.

1 Hospitals reporting: All Victorian public hospitals

2 Source: Victorian Patient Satisfaction Monitor questionnaire.

3 Latest edition/update of the data: August 2006.

Figures 40: Overall Care Index.

40.4 Definition: Calculated from the scores for the six individual measures. The maximum possible score is 100.

Figures 41: Score for six measures.

41.4 Definition: The scores for the six individual measures - access and admission, general patient information, treatment and related information, complaints management processes, physical environment, and discharge and follow-up.

Figures 42: Maternity score for six measures.

42.4 Definition: The scores for the six individual measures - access and admission, general patient information, treatment and related information, complaints management processes, physical environment, and discharge and follow-up.

Figure 43: Hospital cleanliness: selected metropolitan health services.

- 43.1 Hospitals reporting: Bayside, Mercy Public, Southern, St Vincent's, Women's and Children's.
- 43.2 Source: Health Services Environment Service Departments.
- 43.3 Latest edition/update of the data: 2005-06.
- 43.4 Definition: Summary of health service results from external cleaning audits providing an independent evaluation of the cleanliness.

Figure 44: Hospital cleanliness: selected rural health services.

- 44.1 Hospitals reporting: Bairnsdale, Bendigo, East Grampians, Goulburn Valley, Western District.
- 44.2 Source: Health Services Environment Service Departments.
- 44.3 Latest edition/update of the data: 2005-06.
- 44.4 Definition: Summary of health service results from external cleaning audits providing an independent evaluation of the cleanliness.

Figure 45: Patients admitted for same day treatment.

- 45.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 45.2 Source: VAED – Victorian Admitted Episodes Dataset.
- 45.3 Latest edition/update of the data: September 2006 consolidated file.
- 45.4 Definition: The total separations where admission date equals separation date.

Figure 46: Proportion of patients admitted for same day treatment.

- 46.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 46.2 Source: VAED – Victorian Admitted Episodes Dataset.
- 46.3 Latest edition/update of the data: September 2006 consolidated file.
- 46.4 Definition:
 - (a) The total separations where admission date equals separation date.
 - (b) The total separations where admission date does not equal separation date.

Figure 47: Patients treated for repair of subarachnoid haemorrhage.

- 47.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 47.2 Source: VAED – Victorian Admitted Episodes Dataset.
- 47.3 Latest edition/update of the data: September 2006 consolidated file.
- 47.4 Definition: The total separations where procedure code is subarachnoid haemorrhage (endovascular and open repair).

Figure 48: Average length of stay for subarachnoid haemorrhage patients.

- 48.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 48.2 Source: VAED – Victorian Admitted Episodes Dataset.
- 48.3 Latest edition/update of the data: September 2006 consolidated file.
- 48.4 Definition: Total length of stay divided by the number of patients admitted for endovascular and open repair for subarachnoid haemorrhage procedures.

Figure 49: Patients waiting in hospital for residential aged care.

- 49.1 Hospitals reporting: Major Metropolitan Hospitals and Major Rural Hospitals (refer Attachment 1).
- 49.2 Source: Department of Human Services Bed Census.
- 49.3 Latest edition/update of the data: June 2006.
- 49.4 Definition: Bed days used by older patients waiting to access residential aged care facilities.

Figure 50: Immunisation rates for children at two years of age, Victoria.

- 50.1 Hospitals reporting: NA.
- 50.2 Source: Australian Childhood Immunisation Register.
- 50.3 Latest edition/update of the data: 30 June 2006.
- 50.4 Definition: The percentage of two year old Victorians immunised.

Figure 51: Influenza vaccination rates for people aged 65 years or over, Victoria and Australia.

- 51.1 Hospitals reporting: NA.
- 51.2 Source: Source: Australian Report on Australian Government Services, State and Territory Govts.
- 51.3 Latest edition/update of the data: 2003-04.
- 51.4 Definition: The percentage of 65 year old Victorians who have received an influenza vaccination.

Figure 52: Participation rates of eligible women aged 50–69 years in breast screening programs, Victoria.

- 52.1 Hospitals reporting: NA.
- 52.2 Source: BreastScreen Victoria Register.
- 52.3 Latest edition/update of the data: 2003-04.
- 52.4 Definition: The percentage of eligible Victorian women aged 50-69 years who have been through the breast screening program.

Figure 53: Participation rates of eligible women aged 20-69 in cervical screening programs, Victoria.

- 53.1 Hospitals reporting: NA.
- 53.2 Source: Victorian Cervical Cytology Register.
- 53.3 Latest edition/update of the data: 2004-05.
- 53.4 Definition: The percentage of eligible Victorian women aged 20-69 years who have been through the cervical screening program. Each reporting period is over two calendar years beginning 1 January and ending 31 December the year after.

Figure 54: Blood pressure checks in the past two years, by sex and age group, Victoria 2004.

- 54.1 Hospitals reporting: NA.
- 54.2 Source: Your Health: A report on the health of Victorians.
- 54.3 Latest edition/update of the data: August 2006.
- 54.4 Definition: The percentage of Victorian males and females who had a blood pressure check in the past two years.

Figure 55 : Cholesterol checks in the past two years, by sex and age group, Victoria 2004.

- 55.1 Hospitals reporting: NA.
- 55.2 Source: Your Health: A report on the health of Victorians.
- 55.3 Latest edition/update of the data: August 2006.
- 55.4 Definition: The percentage of Victorian males and females who had a cholesterol check in the past two years..

Figure 56: Number of salaried doctors working wholly in Victorian public hospitals.

- 56.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 56.2 Source: Minimum Employment Dataset.
- 56.3 Latest edition/update of the data: 30 June 2006.
- 56.4 Definition: The total number of full-time equivalent doctors employed in Victorian public hospitals.

Figure 57: Number of full-time equivalent nursing staff, Victorian public hospitals.

- 57.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 57.2 Source: Minimum Employment Dataset.
- 57.3 Latest edition/update of the data: 30 June 2006.
- 57.4 Definition: The total number of full-time equivalent nurses employed in Victorian public hospitals.

Figure 58: Number of dental clinicians in the community dental program, Victoria.

- 58.1 Hospitals reporting: All Victorian public hospitals (refer to Attachment 1).
- 58.2 Source: Minimum Employment Dataset.
- 58.3 Latest edition/update of the data: 30 June 2006.
- 58.4 Definition: The total number of dental clinicians employed in the community dental program as June 2006.

Specifications for Appendix 1.

A. Patients treated.

1. Total admissions.

1.1 Hospitals reporting: 27 hospitals (Major Metropolitan and Major Rural Hospitals (see Attachment 1) plus Royal Woman's Hospital, Mercy, Mercy Werribee, Royal Victorian Eye and Ear Hospital, Williamstown, Sandringham, Casey and Rosebud).

Specific groupings:

- Austin Hospital data covers both Austin (1031) campus and Repatriation (1032) campus.
- Monash Medical Centre data covers both Clayton (1170) and Moorabbin (1220) campuses.
- Frankston (1250) and Rosebud (2220) campuses reported separately.
- Dandenong Hospital data covers only Dandenong (2111) campus, i.e. excludes Cranbourne (2112) campus.

1.2 Source: VAED – Victorian Admitted Episodes Dataset.

1.3 Latest edition/update of the data: September 2006 consolidated file.

1.4 Definition: Total separations for the period 1 January 2006 to 30 June 2006.

2. Emergency department presentations.

2.1 Hospitals reporting: 27 Hospitals (Major Metropolitan and Major Rural Hospitals (see Attachment 1) plus Royal Woman's Hospital, Mercy, Mercy Werribee, Royal Victorian Eye and Ear Hospital, Williamstown, Sandringham, Casey and Rosebud).

Specific groupings:

- Only Austin (1031) campus of Austin Hospitals has an Emergency Department.
- Only Clayton (1170) campus of Monash Medical Centre has an Emergency Department.
- Frankston (1250) and Rosebud (2220) campuses reported separately.
- Only Dandenong (2111) campus of the Dandenong Hospital has an Emergency Department.

2.2 Source: VHRS – Emergency Presentations Universe.

2.3 Latest edition/update of the data: September 2006 consolidated file.

2.4 Definition: Total ED presentations, including 'did not waits' and 'dead on arrivals', for the period 1 January 2006 to 30 June 2006.

3. Outpatients

3.1. Definition: Non-admitted public encounters in specialist clinics (non-weighted encounters).

3.2. Source: AIMS S9, Victorian Ambulatory Classification System (VACS) System.

3.3. Data Specifications:

Field	Value	Comments
Site		VACS submitting campuses
EncounterType	1	Public encounters only. Does not include DVA encounters.
EncounterClass	<550	Specialist clinics only. Does not include emergency and allied health encounters.
Period (F/Y)	7-12 1-6	January to June July to December
FY	2005-06	Financial year reported

B. Emergency department patients.

1. Hospital bypass (%).

1.1. Definition: Percentage of time a hospital defers the Metropolitan Ambulance Service (MAS) when the A&E is full.

1.2. Source: Ambulance Bypass data collection (from MAS).

1.3. Data Specifications:

Field	Value	Comments
Site		Major Metros except Royal Children's Hospital

2. Triage category 1 patients seen immediately (%).

2.1. Definition: % Triage category 1 Emergency Patients seen immediately or within 1 minute by a nurse or doctor (whichever was first) of arrival in an emergency department, EXCLUDES 'Left after advice re treatment options', Left at own risk without treatment' and 'Dead on arrival' (departure status codes 08, 10 & 11).

2.2. Source: VEMD (VHIRS).

2.3. Data Specifications:

Field	Value	Comments
Site		VEMD submitting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, Casey, Rosebud)
Period (F/Y)	7-12 1-6	January to June July to December
Fin Yr	2005/06	Financial year reported

3. Triage category 2 patients seen within 10 minutes (%).

3.1. Definition: % Triage category 2 Emergency Patients seen within 10 minutes (≤ 10 mins) by a nurse or doctor (whichever was first) of arrival in an emergency department, EXCLUDES 'Left after advice re treatment options', Left at own risk without treatment' and 'Dead on arrival' (departure status codes 08, 10 & 11).

3.2. Source: VEMD (VHIRS).

3.3. Data Specifications: see above Triage category 1 patients seen immediately (%).

4. Triage category 3 patients seen within 30 minutes (%).

4.1. Definition: % Triage category 3 Emergency Patients seen within 30 minutes (≤ 30 mins) by a nurse or doctor (whichever was first) of arrival in an emergency department, EXCLUDES 'Left after advice re treatment options', Left at own risk without treatment' and 'Dead on arrival' (departure status codes 08, 10 & 11).

4.2. Source: VEMD (VHIRS).

4.3. Data Specifications: see above Triage category 1 patients seen immediately (%).

5. Admitted to a bed within 8 hours (%).

5.1. Definition: % Emergency Patients Admitted within 8 hours. The interval is measured from the time of arrival in an emergency department (ED) to the departure time from the ED to the ward, for all ED patients who were admitted to a ward, Short Stay Unit or Emergency Medical Unit (departure status codes 02, 03 & 13).

5.2. Source: VEMD (VHIRS).

5.3. Data Specifications:

Field	Value	Comments
Site		VEMD submitting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, Casey, Rosebud)
Period (F/Y)	7-12 1-6	January to June July to December
Fin Yr	2005/06	Financial year reported

6. Non-admitted with length of stay less than 4 hours (%).

6.1. Definition: % Emergency Patients non-admitted (that is, they were not admitted to a ward or Short Stay Unit) with length of stay less than 4 hours. The interval is measured from the time of arrival in an emergency department (ED) to the departure time from the ED. Non admitted includes Aged Care Residency, Home, Mental Health Residential Facility, Left after advice re treatment options, Correctional/custodial facility (departure status codes 00, 01, 09, 10 & 12).

6.2. Source: VEMD (VHIRS).

6.3. Data Specifications:

Field	Value	Comments
Site		VEMD submitting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, Casey, Rosebud)
Period (F/Y)	7-12 1-6	January to June July to December
Fin Yr	2005/06	Financial year reported

C. Elective surgery.

1. Category 1 patients listed.

1.1. Definition: Number of category 1 patients on the waiting list as at (end of period).

1.2. Source: ESIS (SAS dataset – year0506).

1.3. Data Specifications:

Field	Value	Comments
C_date	DDMMYYYY	Patients waiting as at 30 Jun 2006
Ppproc	0 < ppproc < 500	Waiting episodes with excluded principal prescribed procedures not counted
W_stat	W	Ready for care waiting patients counted only
Urgency	1	Category 1 patients only
Campus	All campus codes	26 of the ESIS reporting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, and Casey). Specific groupings: <ul style="list-style-type: none"> • Austin Hospital data covers both Austin (1031) & Repatriation (1032) campuses. • Monash Medical Centre data covers both Clayton (1170) and Moorabbin (1220) campuses. • Frankston Hospital data covers both Frankston (1250) and Rosebud (2220) campuses. • Dandenong Hospital data covers both Dandenong (2111) and Cranbourne (2112) campuses.

2. Category 2 patients listed.

2.1. Definition: Number of category 2 patients on the waiting list as at 30 Jun 2006

2.2. Source: ESIS (SAS dataset – year0506).

2.3. Data Specifications:

Field	Value	Comments
C_date	DDMMYYYY	Patients waiting as at 30 Jun 2006
Ppproc	0 < ppproc < 500	Waiting episodes with excluded principal prescribed procedures not counted
W_stat	W	Ready for care waiting patients counted only
Urgency	2	Category 2 patients only
Campus	All campus codes	26 of the ESIS reporting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, and Casey). Specific groupings: <ul style="list-style-type: none"> • Austin Hospital data covers both Austin (1031) & Repatriation (1032) campuses. • Monash Medical Centre data covers both Clayton (1170) and Moorabbin (1220) campuses. • Frankston Hospital data covers both Frankston (1250) and Rosebud (2220) campuses. • Dandenong Hospital data covers both Dandenong (2111) and Cranbourne (2112) campuses.

3. Category 3 patients listed.

3.1. Definition: Number of category 3 patients on the waiting list as at June 2006.

3.2. Source: ESIS (SAS dataset – year0506).

3.3. Data Specifications:

Field	Value	Comments
C_date	DDMMYYYY	Patients waiting as at 30 Jun 2006
Ppproc	0 < ppproc < 500	Waiting episodes with excluded principal prescribed procedures not counted
W_stat	W	Ready for care waiting patients counted only
Urgency	3	Category 3 patients only
Campus	All campus codes	26 of the ESIS reporting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, and Casey). Specific groupings: <ul style="list-style-type: none"> • Austin Hospital data covers both Austin (1031) & Repatriation (1032) campuses. • Monash Medical Centre data covers both Clayton (1170) and Moorabbin (1220) campuses. • Frankston Hospital data covers both Frankston (1250) and Rosebud (2220) campuses. • Dandenong Hospital data covers both Dandenong (2111) and Cranbourne (2112) campuses.

Urgent patients admitted within 30 days (%).

3.4. Definition: The percentage of patients from the elective surgery waiting list that have been classified as requiring admission within 30 days that have been admitted within this timeframe.

3.5. Source: ESIS (SAS dataset – year0506).

3.6. Data Specifications:

Field	Value	Comments
C_date	31 Jan –30 Jun 2006	All patients admitted between January and June 2006
Ppproc	0 < ppproc < 500	Admitted episodes with excluded principal prescribed procedures not counted
W_stat	A	Admitted patients only
Urgency	1	Category 1 patients only
Campus	All campus codes	26 of the ESIS reporting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, and Casey). Specific groupings: <ul style="list-style-type: none"> • Austin Hospital data covers both Austin (1031) & Repatriation (1032) campuses. • Monash Medical Centre data covers both Clayton (1170) and Moorabbin (1220) campuses. • Frankston Hospital data covers both Frankston (1250) and Rosebud (2220) campuses. • Dandenong Hospital data covers both Dandenong (2111) and Cranbourne (2112) campuses.
Overadmt	All	Used to calculate % patients admitted in time.
Intime		Calculated field derived from Overadmt. $N \backslash (N + Y) * 100$.

4. Semi-urgent patients admitted within 90 days (%).

4.1. Definition: The percentage of patients from the elective surgery waiting list that have been classified as requiring admission within 90 days that have been admitted within this timeframe.

4.2. Source: ESIS (SAS dataset – year0506).

4.3. Data Specifications:

Field	Value	Comments
C_date	31 Jan –30 Jun 2006	All patients admitted between January and June 2006
Ppproc	0 < ppproc < 500	Admitted episodes with excluded principal prescribed procedures not counted
W_stat	A	Admitted patients only
Urgency	2	Category 2 patients only
Campus	All campus codes	26 of the ESIS reporting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, and Casey). Specific groupings: <ul style="list-style-type: none"> • Austin Hospital data covers both Austin (1031) & Repatriation (1032) campuses. • Monash Medical Centre data covers both Clayton (1170) and Moorabbin (1220) campuses. • Frankston Hospital data covers both Frankston (1250) and Rosebud (2220) campuses. • Dandenong Hospital data covers both Dandenong (2111) and Cranbourne (2112) campuses.
Overadmt	All	Used to calculate % patients admitted in time.
Intime		Calculated field derived from Overadmt. $N \backslash (N + Y) * 100$.

5. Non-urgent patients admitted within a year (%).

5.1. Definition: The percentage of patients from the elective surgery waiting list that have been classified as requiring admission sometime in the future that have been admitted within 365 days.

5.2. Source: ESIS (SAS dataset – year0506).

5.3. Data Specifications:

Field	Value	Comments
C_date	31 Jan –30 Jun 2006	All patients admitted between January and June 2006
Ppproc	0 < ppproc < 500	Admitted episodes with excluded principal prescribed procedures not counted
W_stat	A	Admitted patients only
Urgency	3	Category 3 patients only
Campus		26 of the ESIS reporting campuses (Major Metros, Major Rurals, RWH, Mercy x2, RVEEH, Williamstown, Sandringham, and Casey). Specific groupings: <ul style="list-style-type: none"> • Austin Hospital data covers both Austin (1031) & Repatriation (1032) campuses. • Monash Medical Centre data covers both Clayton (1170) and Moorabbin (1220) campuses. • Frankston Hospital data covers both Frankston (1250) and Rosebud (2220) campuses. • Dandenong Hospital data covers both Dandenong (2111) and Cranbourne (2112) campuses.
Overadmt	All	Used to calculate % patients admitted in time.
Intime		Calculated field derived from Overadmt. $N \backslash (N + Y) * 100$.

C. Victorian patient satisfaction monitor survey.

1. Overall Care Index (%).

1.1. Definition: Survey of the results of the Victorian Patient Satisfaction Monitor, which reports Victorian public hospital patients' assessment of their hospital stay. The Overall Care Index is calculated using the six measures of; Access and admission, General patient information, Treatment information, Complaints management, Physical environment, and Discharge and follow up.

1.2. Source: Victorian Patient Satisfaction Monitor (<http://www.health.vic.gov.au/patsat>).

1.3. Data Specifications: NA.

2. Score for six measures (%).

2.1 Definition: Survey of the results of the Victorian Patient Satisfaction Monitor, which reports Victorian public hospital patients' assessment of their hospital stay. The following six measures reported make up the Overall Care Index; Access and admission, General patient information, Treatment information, Complaints management, Physical environment, and Discharge and follow up.

2.2 Source: Victorian Patient Satisfaction Monitor (<http://www.health.vic.gov.au/patsat>).

2.3 Data Specifications: NA.

3. Score for six measures for maternity patients (%).

3.1 Definition: Survey of the results of the Victorian Patient Satisfaction Monitor, which reports Victorian public hospital patients' assessment of their hospital stay. The following six measures are reported for maternity patients; Access and admission, General patient information, Treatment information, Complaints management, Physical environment, and Discharge and follow up.

3.2 Victorian Patient Satisfaction Monitor (<http://www.health.vic.gov.au/patsat>).

3.3 Data Specifications: NA.

Hospital Lists

Attachment 1

Major Metropolitan Hospitals (14)

Alfred Hospital
Angliss Hospital
Austin Hospital
Box Hill Hospital
Dandenong Hospital
Frankston Hospital
Maroondah Hospital
Monash Medical Centre
Northern Hospital
Royal Children's Hospital
Royal Melbourne Hospital
St Vincent's Hospital
Sunshine Hospital
Western Hospital

Major Rural Hospitals (5)

Ballarat Health Services
Barwon Health (Geelong Hospital)
Bendigo Health Care Group
Goulburn Valley Health
Latrobe Regional Hospital

Victorian Ambulatory Classification System (VACS) reporting hospitals (19)

Alfred Hospital
Austin Hospital
Ballarat Health Services
Barwon Health (Geelong Hospital)
Bendigo Health Care Group
Box Hill Hospital
Dandenong Hospital
Frankston Hospital
Mercy Hospital for Women
Monash Medical Centre
Northern Hospital
Peter MacCallum Cancer Institute
Royal Children's Hospital
Royal Melbourne Hospital
Royal Victorian Eye and Ear Hospital
Royal Women's Hospital
St Vincent's Hospital
Sunshine Hospital
Western Hospital

Hospitals with Critical Care Beds - intensive care and high dependency units (12)

Alfred Hospital
Austin Hospital
Barwon Health (Geelong Hospital)
Box Hill Hospital
Dandenong Hospital
Frankston Hospital
Maroondah Hospital
Monash Medical Centre
Northern Hospital
Royal Melbourne Hospital
St Vincent's Hospital
Western Hospital

Hospital Bypass Reporting Hospitals (13)

Alfred Hospital
Angliss Hospital
Austin Hospital
Box Hill Hospital
Dandenong Hospital
Frankston Hospital
Maroondah Hospital
Monash Medical Centre
Northern Hospital
Royal Melbourne Hospital
St Vincent's Hospital
Sunshine Hospital
Western Hospital

ESIS Reporting Hospitals (29)

Alfred Hospital
Angliss Hospital
Austin Hospital (includes Repatriation Hospital)
Ballarat Health Services
Bendigo Health Care Group
Box Hill Hospital
Casey Hospital
Dandenong Hospital (includes Cranbourne Integrated Care Centre)
Frankston Hospital
Barwon Health (Geelong Hospital)
Goulburn Valley Health Shepparton
Latrobe Regional Hospital
Maroondah Hospital
Mercy Hospital for Women
Mercy Werribee Hospital
Monash Medical Centre
Northeast Health Wangaratta
Northern Hospital
Rosebud Hospital
Royal Children's Hospital
Royal Melbourne Hospital
Royal Victorian Eye and Ear Hospital
Royal Women's Hospital
Sandringham Hospital
St Vincent's Hospital
Sunshine Hospital

West Gippsland Healthcare Group
Western Hospital
Williamstown Hospital

Hospitals with Neonatal Intensive Care Units and/or Special Care Nurseries (22)

Angliss Hospital
Ballarat Health Services
Bendigo Health Care Group
Box Hill Hospital
Central Gippsland Health Service (Sale)
Dandenong Hospital (includes Cranbourne Integrated Care Centre)
Frankston Hospital
Barwon Health (Geelong Hospital)
Goulburn Valley Health Shepparton
Latrobe Regional Hospital
Mercy Hospital for Women
Mercy Werribee Hospital
Monash Medical Centre
New Mildura Base Hospital
Northeast Health Wangaratta
Northern Hospital
Royal Children's Hospital
Royal Women's Hospital
South West Healthcare (Warrnambool)
Sunshine Hospital
Wimmera Base Hospital (Horsham)
Wodonga Regional Health Service

All Victorian public hospitals (110)

Alexandra District Hospital (R)
Alfred Hospital (M)
Alpine Health (R)
Angliss Hospital (M)
Austin Hospital (including Repatriation Hospital) (M)
Bairnsdale Regional Health Service (R)
Ballarat Health Services (R)
Barwon Health (Geelong Hospital) (R)
Bass Coast Regional Health (R)
Beaufort & Skipton Health Service (R)
Beechworth Health Service (R)
Benalla & District Memorial Hospital (R)
Bendigo Hospital (R)
Boort District Hospital (R)
Box Hill Hospital (M)
Broadmeadows Health Service (M)
Bundoora Extended Care Centre (M)
Calvary Health Care Bethlehem (M)
Caritas Christi Hospice Ltd (M)
Casey Hospital (M)
Casterton Memorial Hospital (R)
Caulfield General Medical Centre (M)
Central Gippsland Health Service (R)
Cobram District Hospital (R)
Cohuna District Hospital (R)
Colac Area Health (R)
Coleraine District Health Services (R)
Cranbourne Integrated Care Centre (M)

Dandenong Campus (M)
Daylesford District Hospital (R)
Djerriwarrh Health Service (R)
Dunmunkle Health Services (R)
East Grampians Health Service (R)
East Wimmera Health Service (R)
Echuca Regional Health (R)
Edenhope & District Hospital (R)
Frankston Hospital (M)
Goulburn Valley Health Shepparton (R)
Hamilton Base Hospital (R)
Healesville and District Hospital (M)
Hesse Rural Health Service (R)
Heywood Rural Health (R)
Inglewood & District Health Service (R)
Kerang District Health (R)
Kilmore & District Hospital (R)
Kingston Centre (M)
Kooweerup Regional Health Service (M)
Korumburra Hospital (R)
Kyabram & District Health Service (R)
Kyneton District Health Service (R)
Latrobe Regional Hospital (R)
Lorne Community Hospital (R)
Maldon Hospital (R)
Mallee Track Health & Community Service (R)
Manangatang & District Hospital (R)
Mansfield District Hospital (R)
Maroondah Hospital (M)
Maryborough District Health Service (R)
McIvor Health & Community Services (R)
Mercy Hospital for Women (M)
Mercy Werribee Hospital (M)
Mildura Base Hospital (R)
Monash Medical Centre (M)
Mount Alexander (R)
Mount Eliza Aged Care and Rehabilitation Service (M)
Moyne Health Services (R)
Nathalia District Hospital (R)
Northeast Health Wangaratta (R)
Northern Hospital (M)
Numurkah & District Health Service (R)
O'Connell Family Centre Inc (M)
Omeo District Health (R)
Orbost Regional Health (R)
Otway Health & Community Services (R)
Peter James Centre (M)
Peter MacCallum Cancer Institute (M)
Portland District Health (R)
Queen Elizabeth Centre [Noble Park] (M)
Robinvale District Health Services (R)
Rochester & Elmore District Health Service (R)
Rosebud Hospital (M)
Royal Children's Hospital (M)
Royal Dental Hospital (M)
Royal Melbourne Hospital (M)
Royal Victorian Eye & Ear Hospital (M)
Royal Women's Hospital (M)
Rural Northwest Health (R)

Sandringham & District Memorial Hospital (M)
Seymour District Memorial Hospital (R)
South Gippsland Hospital (R)
South West Healthcare (R)
St George's Health - Normanby House (M)
St Vincent's Hospital (M)
Stawell Regional Health (R)
Sunshine Hospital (M)
Swan Hill District Hospital (R)
Tallangatta Health Service (R)
Terang & Mortlake Health Service (R)
Timboon & District Healthcare Service (R)
Tweddle Child & Family Health Centre (M)
Upper Murray Health & Community Services (R)
West Gippsland Healthcare Group (R)
West Wimmera Health Service (R)
Western Hospital (M)
Williamstown Hospital (M)
Wimmera Base Hospital (R)
Wodonga Regional Health Service (R)
Yarram & District Health Service (R)
Yarrawonga District Health Service (R)
Yea & District Memorial Hospital (R)

Note:

(R) – Rural

(M) - Metro