



Ambulatory Surgery Initiative Report: June 2009

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Table of Contents

Abbreviations	ii
Glossary	ii
Symbols	ii
1. Introduction	1
2. State Overview	
2.1 This month	1
2.2 ASI & waiting list admissions	2
3. Metro Hospitals	2
4. WACHS Hospitals	2
Appendices	A-1
Notes	A-3

List of Tables

Table 1:	Number of ASI cases undertaken by public hospital & region, June 2009	1
Table 2:	Summary of annual admissions from public hospital wait lists & completed ASI cases, July 2006 - June 2009	2
Table A-1:	Monthly ASI cases undertaken at metropolitan hospitals, July 2006 - June 2009	A-1
Table A-2:	Monthly ASI cases undertaken at all public hospitals by region, July 2006 - June 2009	A-2

List of Figures

Figure 1:	Monthly ASI cases undertaken & elective surgery admissions from wait lists at WA public hospitals, January 2007 - June 2009	3
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Abbreviations

AHS	Area Health Service
AIHW	Australian Institute of Health and Welfare
CAHS	Child and Adolescent Health Service
DNA	Did not attend
FH	Fremantle Hospital
JHC	Joondalup Health Campus
KEMH	King Edward Memorial Hospital
NA	Not available
NMAHS	North Metropolitan Area Health Service Includes: <i>Kalamunda Hospital, King Edward Memorial Hospital, Osborne Park Hospital, Sir Charles Gairdner Hospital and Swan District Hospital.</i>
PHC	Peel Health Campus
PMH	Princess Margaret Hospital for Children
qtr	Quarter
RPH	Royal Perth Hospital
RPH SPC	Royal Perth Hospital Shenton Park Campus (also known as RPH Rehabilitation Hospital)
SCGH	Sir Charles Gairdner Hospital
SMAHS	South Metropolitan Area Health Service Includes: <i>Armadale-Kelmscott Memorial Hospital, Bentley Hospital, Fremantle Hospital, Kaleeya Hospital, Rockingham General Hospital, Royal Perth Hospital and Royal Perth Rehabilitation Hospital.</i>
TOPAS	The Open Patient Administration System
WA	Western Australia
WACHS	Western Australian Country Health Service

Glossary

Mean: This refers to the arithmetic mean, being the sum of all values in the list divided by the number of items in the list. The mean is the most commonly-used type of average and can also be referred to simply as the average.

Median: This refers to the value separating the higher half of a sample, a population, or a probability distribution, from the lower half. This statistic is used, in preference to the mean, when the distribution of the values is skewed by a small number of very high values.

90th percentile: This refers to the value in the list below which there are 90 percent of numbers and which enables waiting times to be expressed as a percentile rank.

However, as percentile ranks are not on equal interval scales, the difference between any two scores is not the same between any other two scores. For instance, the difference of 25 between percentile ranks of 90 and 65 is not the same as the difference of 25 between 50 and 25 as the position rank of a percentile is based on an assumed normal distribution of all values.

Symbols

- nil

1. Introduction

The Ambulatory Surgery Initiative (ASI) is an innovative program that allows doctors to do additional work in hospitals with public services and improve patient access to minor procedures.

Procedures performed under ASI are bulk billed and incur no out-of-pocket expenses for the patient. Eligible procedures are those that have a Commonwealth Medicare Benefit Scheme non-admitted patient code. As a guide, the following procedures are currently being performed under ASI:

- colonoscopies and gastroscopies;
- cataract extractions;
- cystoscopies;
- minor gynaecological procedures (eg large loop excision of transformation zone);
- minor paediatric ear nose and throat (ENT) procedures such as myringotomy; and
- minor general surgery such as removal of lesions.

Table 1: Number of ASI cases undertaken by public hospital, June 2009

Metropolitan	
Armadale-Kelmscott	76
Bentley	64
Joondalup Health Campus	-
Kalamunda	-
Kaleeya	267
Osborne Park	291
Peel Health Campus	-
Rockingham	31
Swan District	68
<i>Sub total</i>	<i>797</i>
WA Country Health Service	
Albany	64
Broome	2
<i>Sub total</i>	<i>66</i>
Total	863

The aims of the ASI are to:

- reduce wait lists;
- reduce patient waiting time; and
- increase clinical throughput.

ASI is intended to deliver faster treatment for patients in Western Australia (WA) who have been, or could be, waiting for surgery for more than clinically desirable periods of time.

Those patients who are ready for surgery can be offered the option of having their procedure carried out at an earlier date at one of the participating hospitals by being directly referred by their GP to a participating clinician. Patients must be willing to elect to be a private outpatient.

The information in this report should be read in conjunction with the monthly elective surgery wait list (ESWL) reports for both the metropolitan area and the WA Country Health Service (WACHS), which are available from the elective surgery web page noted at the front of this report.

2. State Overview

2.1 This month

Table 1 shows that a total of 863 cases were undertaken at public hospitals which had participated in the ASI, ie six metropolitan hospitals and two WACHS hospitals.

The majority of these cases were at metropolitan hospitals, which accounted for 797 (92.4%) of all cases, with the remaining 66 (7.6%) cases being carried out at WACHS hospitals.

Separate breakdowns of cases undertaken at each of the metropolitan and WACHS hospitals are contained in Sections 3 and 4 respectively.

2.2 ASI & waiting list admissions

Table 2 provides annual summaries of both elective surgery and the ASI admissions by financial year.

In 2006/2007, there were 69,347 admissions from ESWLs. With the addition of 8,629 ASI cases, a total of 77,976 cases of elective surgery (including completed ASI cases) were undertaken in WA.

In 2007/2008, there were 69,982 admissions from ESWLs. With the addition of 10,543 ASI cases, a total of 80,525 cases of elective surgery (including completed ASI cases) were undertaken in WA.

In 2008/2009, there were 74,671 admissions from ESWLs. With the addition of 9,849 ASI cases, a total of 84,520 cases of elective surgery (including completed ASI cases) were undertaken in WA.

Therefore, compared to the 77,976 elective cases in 2006/2007, there were an additional 6,544 cases in 2008/2009 and 2,549 cases in 2007/2008, respectively.

Trends in monthly admissions for both ASI and elective surgery admissions are presented in Figure 1 (page 3).

3. Metro Hospitals

In the period from July 2006 to June 2009, ASI was operational at the Armadale-Kelmscott, Bentley, Kalamunda, Kaleeya, Osborne Park, Rockingham and Swan District Hospitals and at the Peel Health Campus.

See Table A-1 (page A-1) for a monthly breakdown of cases for each of the participating metropolitan hospitals. In the current month, a total of 797 procedures were undertaken at metropolitan hospitals, of which:

- 291 (36.5%) were at Osborne Park Hospital;
- 267 (33.5%) were at Kaleeya Hospital;
- 76 (9.5%) were at Armadale-Kelmscott Hospital; and
- 163 (20.5%) were at other metropolitan hospitals.

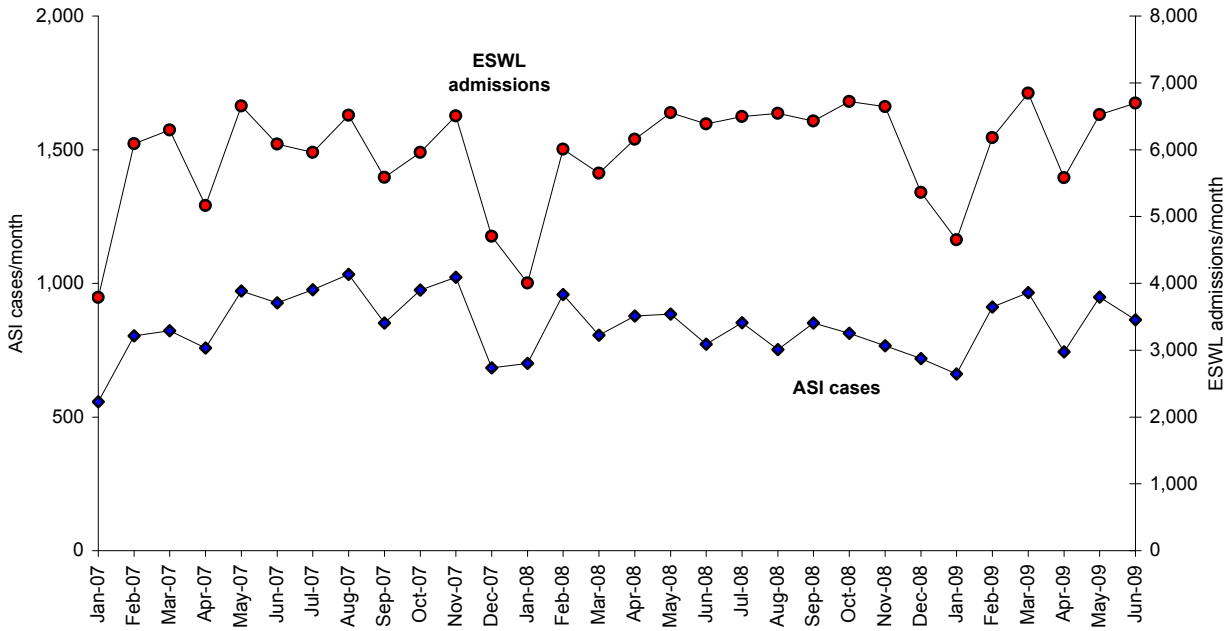
4. WACHS Hospitals

In June 2009, a total of 66 cases were undertaken at Broome and Albany hospitals (Table A-2, page A-2). This represented 7.6% of all ASI cases completed in the State in the current month.

Table 2: Summary of annual admissions from public hospital wait lists & completed ASI cases, July 2006 - June 2009

	Metropolitan	WACHS	Total
Waiting list admissions			
2006/2007	55,498	13,849	69,347
2007/2008	55,678	14,304	69,982
2008/2009	59,248	15,423	74,671
2009/2010 (progressive)			
ASI completed cases			
2006/2007	8,384	245	8,629
2007/2008	9,301	1,242	10,543
2008/2009	9,071	778	9,849
2009/2010 (progressive)			
Total (admissions & ASI completed cases)			
2006/2007	63,882	14,094	77,976
2007/2008	64,979	15,546	80,525
2008/2009	68,319	16,201	84,520
2009/2010 (progressive)			

Figure 1: Monthly ASI cases undertaken & elective surgery admissions from wait lists at WA public hospitals, January 2007 - June 2009



Appendices

Table A-1: Monthly ASI cases undertaken at metropolitan hospitals, July 2006 - June 2009

	Metropolitan hospital									Total
	Armadale-Kelmscott	Bentley	Joondalup HC	Kalamunda	Kaleeya	Osborne Park	Peel HC	Rockingham	Swan	
2006										
July	39	16	-	6	141	287	-	-	29	518
August	29	26	-	-	206	319	36	-	29	645
September	23	22	-	9	157	343	50	-	38	642
October	30	28	-	8	155	313	64	-	42	640
November	21	22	-	9	215	340	92	-	37	736
December	18	27	-	7	138	227	74	-	38	529
2007										
January	30	25	-	-	165	240	75	-	22	557
February	33	34	-	-	215	358	92	-	50	782
March	40	28	-	-	220	332	120	-	61	801
April	33	33	-	-	187	305	132	-	56	746
May	58	27	-	-	304	373	147	-	62	971
June	45	19	-	-	249	360	81	-	63	817
July	44	35	-	-	215	365	164	-	48	871
August	68	23	-	-	242	416	142	-	55	946
September	50	21	-	-	236	280	119	-	55	761
October	45	42	-	-	248	335	139	-	57	866
November	56	35	-	-	259	353	126	-	63	892
December	50	27	-	-	167	235	92	-	33	604
2008										
January	5	28	-	-	193	228	80	-	56	590
February	46	38	-	-	228	334	129	-	67	842
March	42	28	-	-	209	274	84	-	55	692
April	66	35	-	-	237	284	102	-	69	793
May	67	25	-	-	208	322	80	-	49	751
June	66	33	-	-	226	267	45	-	56	693
July	41	52	-	-	246	298	88	-	61	786
August	65	39	-	-	255	283	47	-	53	742
September	73	52	-	-	266	271	53	-	71	786
October	64	28	-	-	271	282	47	7	45	744
November	54	43	-	-	213	268	48	10	58	694
December	46	22	-	-	216	258	49	14	44	649
2009										
January	40	30	-	-	221	179	35	25	57	587
February	71	51	-	-	309	286	23	15	81	836
March	99	56	-	-	297	301	-	39	77	869
April	71	16	-	-	249	270	-	25	56	687
May	77	57	-	-	333	333	-	25	69	894
June	76	64	-	-	267	291	-	31	68	797

Ambulatory Surgery Initiative Report, June 2009

Table A-2: Monthly ASI cases undertaken at all public hospitals by region, July 2006 - June 2009

	Metro	WACHS				State
		Albany	Broome	Total	% State	
2006						
July	518	-	10	10	1.9	528
August	645	-	11	11	1.7	656
September	642	-	22	22	3.3	664
October	640	-	11	11	1.7	651
November	736	-	12	12	1.6	748
December	529	-	13	13	2.4	542
2007						
January	557	-	-	-	-	557
February	782	-	22	22	2.7	804
March	801	-	22	22	2.7	823
April	746	-	12	12	1.6	758
May	971	-	-	-	-	971
June	817	87	23	110	11.9	927
July	871	96	9	105	10.8	976
August	946	83	5	88	8.5	1,034
September	761	80	10	90	10.6	851
October	866	101	8	109	11.2	975
November	892	122	9	131	12.8	1,023
December	604	69	11	80	11.7	684
2008						
January	590	111	-	111	15.8	701
February	842	98	18	116	12.1	958
March	692	101	13	114	14.1	806
April	793	68	17	85	9.7	878
May	751	122	12	134	15.1	885
June	693	70	9	79	10.2	772
July	786	55	12	67	7.9	853
August	742	1	9	10	1.3	752
September	786	52	14	66	7.7	852
October	744	60	9	69	8.5	813
November	694	69	4	73	9.5	767
December	649	47	23	70	9.7	719
2009						
January	587	66	8	74	11.2	661
February	836	61	14	75	8.2	911
March	869	81	15	96	9.9	965
April	687	46	11	57	7.7	744
May	894	44	11	55	5.8	949
June	797	64	2	66	7.6	863

Notes

Data extraction date

All data in this report is as at the end of the last day of each reported month.

Data revision

The most recent edition of reports should be consulted in case previously published data has been revised. Revisions can be due to updates to procedure codes, lags in data processing or other types of errors detected after publication.

Data source

Wait list extract data in ESWL reports is from the HCARE (Health Care and Related Information System), TOPAS (The Open Patient Administration System) and Joondalup and Peel data systems.

Data definitions

Data in ESWL reports is based on Australian Institute of Health and Welfare (AIHW) reporting guidelines.

Metropolitan public hospitals

The term 'metropolitan public hospital' refers to the following public hospitals - Armadale-Kelmscott District Hospital, Bentley Hospital, Fremantle Hospital, Joondalup Health Campus, Kalamunda Hospital, Kaleeya Hospital, King Edward Memorial Hospital, Osborne Park Hospital, Peel Health Campus, Princess Margaret Hospital, Rockingham General Hospital, Royal Perth Hospital, Royal Perth Rehabilitation Hospital, Sir Charles Gairdner Hospital and Swan District Hospital.

Specialty

Specialty is "The area of clinical expertise held by the doctor who will perform the elective surgery". (Source: Australian Hospital Statistics, AIHW.)

Indicator procedure

"An indicator procedure is a procedure which is of high volume and is often associated with long waiting periods. Elective surgery waiting time statistics for indicator procedures give a specific indication of waiting time for these particular areas of elective care provision." (Source: Australian Hospital Statistics, AIHW.)

Cases on the waiting list

Cases on the ESWLs represent the number of people waiting. They are called cases (rather than people) because a person may be on the waiting list more than once. For example, if a person is

on the waiting list twice for two different procedures, then they will be counted as two cases.

Within boundary cases

A patient who has been waiting less than the recommended period in one of the three clinical urgency categories is defined as being within boundary. The clinical urgency categories prioritise patients from least urgent (Category 3) to most urgent (Category 1).

Category 1

Admission within 30 days is desirable for a condition that has the potential to deteriorate quickly to the point that it might become an emergency.

Category 2

Admission within 90 days is desirable for a condition causing pain, dysfunction or disability, which is not likely to deteriorate quickly or become an emergency.

Category 3

Admission at some time in the future is acceptable for a condition causing minimal or no pain, dysfunction or disability, which is unlikely to deteriorate quickly and does not have the potential to become an emergency.

For the purpose of identifying Category 3 patients who are waiting within or over boundary, WA has adopted the AIHW specified boundary used to define an 'extended wait,' ie patients waiting more than 365 days.

Cases admitted from the waiting list

Cases admitted from the waiting list are people admitted from the waiting list to hospital to have their surgery. They are called cases (rather than people) because a person may have been admitted for surgery on more than one occasion. For example, if a person was admitted twice during the reporting period, then they will be counted as two cases.

Other removals from the waiting list

Patients can be removed from the waiting list for a variety of reasons, other than admission to hospital for surgery. Removal reasons include that the procedure was no longer required (eg patient had their procedure in a private hospital), the patient was non-contactable (eg as part of audit procedures to check whether the patient still required their surgery), or that the database entry was incorrect (eg a duplicate case).