



Waiting List Reduction Strategy

Report from the
SURGICAL ACCESS TEAM
for the month of

February 1999

Distribution: Director-General

PROJECT MANAGEMENT

Consultation

Visits to District Health Services commenced in February.

- A meeting was held with representatives of the Mater Children's Hospital and members of the Surgical Access Team on 17 February 1999. Performance against target as measured by the Queensland Hospital Admitted Patients Data Collection (QHAPDC) was reviewed. There has been an error in the collection of information at Mater Children's, projected figures from Dr Steer indicate that Mater Children's has slightly exceeded elective surgery targets to date.
- A site visit was held between members of the Surgical Access Team, A/Manager, Southern Zonal Unit, and the executive and senior medical staff at Toowoomba Hospital on 18 February 1999. A follow-up meeting is planned for March.
- On direction from the Director-General, a High-level Action Team has been established to visit other sites in March. The Team consists of Judith Robson, Director, Performance Management Branch, Dr Michael Cleary and Dr David Robinson, Medical Advisors and Gary Walker, Manager, Surgical Access Team.

FUNDING & INCENTIVES

Performance against Funded Targets

- Review of the *Queensland Hospital Admitted Patient Data Collection* has provided information on activity achieved against targets. Subsequently, funding has been approved for additional activity at Townsville Hospital (\$500,000), Redcliffe Hospital (\$500,000), Logan Hospital (\$200,000) and Mater Adults Hospital (\$400,000). This funding will be transferred in early March.
- Additional funding has been approved for the Queen Elizabeth II Hospital. Negotiations are in progress regarding the activity associated with this funding.
- Submissions have been received regarding ophthalmology services at Rockhampton Hospital and orthopaedic services at Nambour Hospital. These are currently being reviewed.

Transfer of Patients

- The *Transfer of Patients* element of the *Waiting List Reduction Strategy* will be progressed through discussions between the Director-General and the General Manager, Health Services. The Surgical Access Team is waiting further instruction.

Funding for Emergency Departments

- Post Budget Adjustments have been finalised for the funding allocation for capital equipment for Mt Isa Hospital and for the bed management project at Royal Brisbane Hospital.

WORKFORCE STRATEGIES

The project officer for the Medical Workforce Project commenced in mid-January and has provided the following information to the Surgical Access Team.

- The Australian Medical Workforce Advisory Committee (AMWAC) is currently making recommendations on the specialist medical workforce in Australia. As these reports become available, the Health Advisory Unit (HAU) is reviewing the Queensland workforce in that specialty and working with the various Colleges to implement the AMWAC recommendations.
- Currently the HAU is reviewing both the specialist and non-specialist Emergency Medicine Workforce in Queensland. Planning for this area is of immediate importance in view of the forecast trebling of FACEM specialist numbers in Australia in the next ten years, and the proposal by AMWAC to subsequently drastically curtail the number of accredited registrar positions. The HAU expect to report in July.

INFORMATION MANAGEMENT

- Preliminary analysis has been undertaken on interim QHAPDC data supplied by the Data Services Unit for July to December 1998. This analysis provides elective surgery activity in reporting hospitals and a comparison against elective surgery activity targets for 1998-99.
- A series of graphs and tables have been produced as an 'information package' to accompany representatives of the Surgical Access Team in their meetings with District Health Services to discuss elective surgery activity. The 'information package' includes financial information, elective admissions and hospital morbidity data.
- The Surgical Access Team in conjunction with the Corporate Information Systems Unit (CISU) have contributed to the updated Queensland Hospital Admitted Patient Data Collection (QHAPDC) manual that will be distributed to all public and private hospitals in Queensland.
- The Surgical Access Team and the Data Services Unit have nominated a Queensland Health representative to participate in a national workshop facilitated by the Australian Institute of Health and Welfare concerning the national elective surgery data item definitions.
- The information area within the Surgical Access Team has responded to a wide range of adhoc requests from within Corporate Office as well as from hospital staff.

PERFORMANCE REPORTING

The **total number** of patients on the waiting lists of the 33 hospitals remained stable at 38,209 at 1 March 1999.

	Category 1		Category 2		Category 3		Total
	Total	% 'long waits	Total	% 'long waits	Total	% 'long waits	
1 Mar 1998	1,270	1.8%	11,481	36.0%	24,988	30.2%	37,739
1 Apr 1998	1,265	0.9%	10,653	28.7%	25,323	30.4%	37,247
1 May 1998	1,200	1.3%	10,157	21.4%	25,702	29.8%	37,059
1 Jun 1998	1,273	1.5%	9,499	16.1%	25,997	29.5%	36,769
1 Jul 1998	1,285	0.9%	9,243	10.7%	25,732	28.9%	36,260
1 Aug 1998	1,316	1.4%	9,511	11.3%	25,379	28.8%	36,206
1 Sept 1998	1,368	3.1%	9,621	14.2%	25,356	28.1%	36,345
1 Oct 1998	1,441	2.0%	9,960	14.7%	25,538	28.1%	36,939
1 Nov 1998	1,621	2.7%	10,109	15.8%	25,557	28.2%	37,287
1 Dec 1998	1,502	2.8%	10,119	16.6%	25,797	28.5%	37,418
1 Jan 1999	964	2.3%	10,244	18.4%	26,012	28.1%	37,220
1 Feb 1999	1,432	2.0%	10,462	19.4%	26,315	27.7%	38,209
1 Mar 1999	1,432	2.0%	10,337	18.4%	26,440	27.9%	38,209

The number of 'long wait' Category 2s decreased by 128 from 1 February to 1 March 1999. The number of 'long wait' Category 3s decreased by 35 from 1 February to 1 March 1999.

Category 1

At 1 March 1999, the proportion of Category 1 patients waiting longer than 30 days for surgery was **2.0%** (cf. 2.0% at 1 February 1998). Five hospitals reported more than 5% - Gold Coast Hospital (5.6% - 8 patients), Kingaroy Hospital (50.0% - 1 patient), Kirwan Hospital for Women (14.3% - 3 patients), Mater Children's (7.1% - 1 patient) and Redland Hospital (5.6% - 1 patient).

Category 2

At 1 March 1999, the proportion of Category 2 patients waiting longer than 90 days for surgery was **18.4%** (cf. 19.4% at 1 February 1999). A number of hospitals reported significant increases in the number of 'long wait' Category 2 patients and consequent increases in the proportion of 'long wait' patients - Bundaberg (increase of 29 'long waits', 39.6%) Caboolture (increase of 15 'long waits', 16.3%) and the Princess Alexandra (increase of 31 'long waits', 25.8%). The Gold Coast Hospital reported a decrease of 175 'long wait' Category 2 patients. The majority of these patients were waiting for general surgery.

Category 3

At 1 March 1999, the proportion of Category 3 patients waiting longer than 1 year for surgery was **27.9%** (cf. 27.7% at 1 February 1999).

Throughput

Total number of elective admissions in February 1999 was 9,868, an increase (2,714) from the 7,154 admissions reported for January 1999. There were 274 more admissions in February 1999 compared to February 1998 (9,594).

Note: Admissions reported through the Elective Admissions System should be considered preliminary. Final activity levels will be determined by the Queensland Hospital Admitted Patient Data Collection.

CLINICAL BEST PRACTICE

Specialist Outpatient Services

- The Clinical Best Practice Outpatient Working Party met in February to finalise the *Guidelines for the Management of Specialty Outpatient Clinic Waiting Lists* prior to publication. The revised *Guidelines* have been distributed to the Clinical Advisory Committee for confirmation at their next meeting on 9 March 1999.
- The Surgical Access Team is liaising with the Brisbane Southside Central Division of General Practice who is developing an accurate statewide register of GP contact details. The development of the register will assist hospitals to provide timely details to GPs of services provided to their patients. The timely provision of feedback and information to GPs is an important concept promoted in the *Guidelines*.
- The Working Party will meet again on 15 March 1999 to initiate and identify focus areas for service enhancement projects.

National Demonstration Hospitals Program

- The Commonwealth Department of Health and Aged has notified the Surgical Access Team Care of the successful applicants for the National Demonstration Hospitals Program (NDHP) Phase 3.
- The lead hospitals are Flinders Medical Centre (SA), Liverpool Health Service (NSW), Mater Misericordiae Adult Hospital (Qld) and Prince of Wales Hospital (NSW). The primary aim of NDHP Phase 3 is the integration of all services delivered by the acute care sector.
- The Surgical Access Team has been invited to send a representative to a two-day conference of all Phase 3 lead and collaborating hospitals. The conference was originally scheduled to take place in March but has been deferred to 27 and 28 April 1999.

Clinical Advisory Committee

- The meeting on 9 February 1999 discussed the emergency department benchmarking process. Issues influencing the achievement of targets were identified such as overdose presentations and pediatric attendances at general hospitals.
- The Committee supported the outpatient categorisation system proposed by the Clinical Best Practice Outpatient Working Party. In response to recommendation by the CAC, the layout of the *Guidelines for the Management of Specialist Outpatient Waiting Lists* was modified to enhance readability.

HEALTH SYSTEM DEVELOPMENT

Specialist Outpatient Services

- The monthly benchmarking and data collection of outpatient waiting list information is continuing. This process has been enhanced by the development of a standard data collection form. An impact of the change in data collection has precipitated individual institutions to review the quality of the data submitted to the Surgical Access Team.
- Currently the Surgical Access Team is conducting a review of information systems utilised in the reporting outpatient departments. This review will assess the requirements of reporting hospital with current and future data requirements. The review will address the feasibility of enhancing current systems or implementing new systems in the reporting hospitals. The improvement of outpatient information systems is expected to have a positive impact on data quality.

Emergency Services

- Site evaluations for the implementation of HAS EDIS system into Cairns, Toowoomba and Redcliffe hospitals have been undertaken. Draft project management plans have been provided and project management has been established. As requested by CISU the project manager and Surgical Access Team staff are developing a GITC Agreement.
- The monthly collection of attendances and waiting times per triage category is continuing and data is currently being analysed. This data is also being compared with the emergency admissions/transfers by triage category from MAS. Issues identified with the data relating to triage procedures and data quality and integrity are being addressed.
- A working party consisting of Clinical Nurse Consultants from twenty reporting hospitals with a role delineation of 4 or greater met in the last week of February. From this meeting a number of issues were raised in regards to the data quality of the current data collection. To help address data issues in regards to triage and information systems a workshop is to be organised in April/May.
- The Clinical Nurse Consultants also questioned the nursing staff levels and requirements in emergency departments. The Surgical Access Team will progress this issue with the Ministerial Taskforce on Nursing Recruitment and Retention.
- The working party discussed the implementation of a quality improvement program to address data quality issues within emergency departments. Also explored were specific systems issues in regards to the provision of clinical indicator data for emergency departments.
- A meeting of Directors and CNC/NPCs of emergency departments is being organised for April/May 1999. The focus of this meeting will be data quality and triage issues, in response to the initial benchmarking of emergency.

HOSPITAL SUPPORT AND LIAISON

Medical Superintendents Advisory Committee

Outcomes of the committee meeting held on 12 February include:

- The committee discussed possible upcoming visits by a *High-Level Action Team* that would visit facilities that were not achieving elective surgery targets.
- The committee was presented with the first round collection of emergency department waiting times. The information illustrates how reporting emergency departments are performing compared to the benchmark levels recommended by the Australasian College for Emergency Medicine and to New South Wales. Members have requested that this information be tabled at future meetings.
- The committee was advised on the latest developments regarding the development of the *Guidelines for the Management of Specialist Outpatients*. Members requested that SAT liaise with the Brisbane North and South Divisions of General Practice in relation to the development of a standard referral letter.

Elective Surgery Coordinators

- The coordinators have undertaken to review the *Guidelines for the Management of Waiting Lists*. In particular, attention will be focussed on effective categorisation and audit protocols.
- Coordinators discussed the implementation of processes to ensure that increased attention is focussed on 'long wait' patients. For example implementing hospital policy for clinical review for Category 2 patients waiting longer than 12 months. Implementing policy that all patients in Category 2 must be given a surgical booking date. The outcome of this initiative is targeted towards ensuring 'long wait' patient numbers are reduced.
- Coordinators are developing expanded communication networks within their organisations to focus increased attention on the *Waiting list Reduction Strategy*.

ORMIS SUPPORT and THEATRE UTILISATION

Software Issues

- Acceptance testing of ORMIS V.5 scheduled to start 11 March 1999 is progressing according to plan. CSC Australia and HAS Solutions have developed and satisfactorily tested the changes requested by the Surgical Access Team. Installation of ORMIS V.5 and associated products at Mater Adults Hospital began on 1 March 1999 and is scheduled to be completed by 5 March 1999.
- The delay has necessitated the planned dual deployment of EAM and ORMIS V.5 to be extended from March 1999 to April 1999. Discussion concerning deployment have begun with the CISU.

Corporate Reporting

- A draft report comprising State information on theatre utilisation performance indicators for the period 1 January 1998 to 31 December 1998 has been forwarded to District Managers on Monday 1 March 1999. Feedback on the report is required by 19 March 1999. At this time a Corporate Queensland Health report will be developed incorporating necessary changes.

System Management and Y2K

- **Project Plan** - Tasks are being achieved according to plan.
- **Product Compliance** - Compliance statement has been received from CSC Australia, which suggest ORMIS V.5 is Y2K compliant.
- **National Consultation** - At the National User Group meeting, South Australia reported that they have completed their testing and found the product to be Y2K compliant.
- **Contingency Planning** - A draft contingency framework is being prepared and will be forwarded to ORMIS System Managers by the end of the month.