



Queensland Government

Queensland Health

Waiting List Reduction Strategy

Report from the
SURGICAL ACCESS TEAM
for the month of

February 2001

Distribution: Director-General
Minister for Health
General Manager (Health Services)
Deputy Director-General (Policy and Outcomes)

MANAGEMENT ISSUES

Communications

- Briefings were prepared during February for the Minister, the Director-General and the General Manager, Health Services:
 - 7 Briefings on Elective Surgery Waiting Lists for the following Districts: Gympie, Mackay, and Logan.

Consultation

- The **Medical Superintendent's Advisory Committee** convened on February 16.
- The **Clinical Advisory Committee** convened on February 13.
- The **Elective Surgery Coordinators** convened on February 23.
- Consultation with officers of the Health Departments of New South Wales and Western Australia continued during the month. Information regarding the management of waiting lists, performance reporting and measurement, and the strategies in place in each of these States to manage elective surgery patients has been received.
- The Surgical Access Team has provided assistance to the Gold Coast and Robina Hospitals in relation to streamlining elective surgery booking and admission processes between the two sites. Two members of the Surgical Access Team undertook site visits to review systems in place and to provide assistance with implementing improved processes.

FUNDING & INCENTIVES

- The General Manager Health Services approved recurrent funding of \$28,000 for additional Elective Surgery Activity at Innisfail Hospital. A total of 20 laproscopic cholecystectomies will be performed per annum at the facility, for residents of the area rather than at Cairns Hospital. The procedures will be performed using the current satellite service offered by Cairns Hospital.
- The General Manager Health Services approved non-recurrent funding of \$75,000 for an emergency department enhancement project at the Mt. Isa Hospital. The facility is conducting a Protocol and Competency development project.
- The Surgical Access Team prepared a submission regarding the distribution and adjustments of the third quarter Elective Surgery payments. A total a 15 facilities will receive payments for meeting or exceeding their respective Elective Surgery target. Four Facilities will receive a reduced payment, indicating difficulty in attaining their full year Elective Surgery target. It is anticipated the post budget adjustments and notifications will be processed during the second week of March.
- The Surgical Access Team has commenced a review of funding models for Elective Surgery for the 2001/02 financial year. The Pricing Strategy Team will provide information on the estimated marginal cost of providing Elective Surgery using Transition II data for selected facilities. It is envisaged that a proposal will be developed by the end of March.
- The Surgical Access Team has conducted an audit of elective surgery activity reported through

Monthly Financial Snapshot Reports. Several districts have been contacted and advice provided on the rectification of the reporting anomalies found. The Surgical Access Team has also worked collaboratively with Zonal Management representatives in resolving these issues.

INFORMATION MANAGEMENT

Information and Systems

- Simon Wenck from the Surgical Access Team attended a training course covering database administration for Oracle Discoverer. This course is part of the strategy to develop necessary skills within the Surgical Access Team to maximize benefits from the Surgical Access Team's data warehouse.
- The elective surgery coordinators have been advised that access to the Surgical Access Team's data warehouse via the Queensland Health intranet will soon be available. In consultation with coordinators, a suite of reports is under development to meet their information requirements.

PERFORMANCE REPORTING

WAITING LIST

- The **total number** of patients on the waiting lists of the reporting hospitals decreased from 39,761 at 1 February 2001 to 39,528 at 1 March 2001 (233 patients).

Reporting Date	Category 1		Category 2		Category 3		Total
	Total	% 'long waits'	Total	% 'long waits'	Total	% 'long waits'	
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
1 Jan 2000	1,165	4.0%	9,967	9.9%	28,591	29.6%	39,723
1 Feb 2000	1,496	3.0%	10,141	11.1%	28,667	30.0%	40,304
1 Mar 2000	1,658	1.8%	9,904	11.7%	28,939	30.2%	40,501
1 Jan 2001	1,522	4.6%	10,675	11.9%	27,291	35.4%	39,488
1 Feb 2001	1,803	3.9%	10,669	12.7%	27,289	35.7%	39,761
1 Mar 2001	1,810	3.4%	10,804	11.9%	26,914	36.3%	39,528

Note: Noosa Hospital reported separately from 1 March 2000 and Robina Hospital reported separately from 1 May 2000.

The full list of monthly census data since 1 July 1998 is included at Attachment 1.

Category 1

- As at 1 March 2001, the number of 'long wait' Category 1 patients on elective surgery waiting lists was 62 (3.4%). This figure was decreased from the 70 'long wait' cases (3.9%) reported at 1 February 2001. A total of four (4) hospitals reported in excess of 5% 'long waits'.

Hospital	Category 1	
	Percent 'long waits'	Number of 'long waits'
Gold Coast Hospital	12.0%	24
Gympie Hospital	25.0%	1
Kirwan Hospital for Women	14.3%	2
Redland Hospital	7.4%	2

The 24 'long wait' patients at Gold Coast Hospital are of particular concern. 15 of the patients are vascular patients and 3 have waited longer than 90 days. The VMO Vascular Surgeon employed by the hospital reduced theatre sessions (by one) in early 2000. The Hospital has reported 'long wait' Category 1 Vascular patients since June/July 2000 and has only recently advertised for additional Vascular sessions, the indication being that the recruitment process has been delayed as a budget management strategy.

Category 2

- As at 1 March 2001, the number of 'long wait' Category 2 patients on elective surgery waiting lists was 1,289 (11.9%). This is a decrease of 63 patients from that reported at 1 February 2001 - 1,352 (12.7%). This compares with 1,157 (11.7%) 'long wait' Category 2 patients at 1 March 2000.
- A total of 16 facilities reported 'long wait' patients in excess of the 5% benchmark.

Hospital	Category 2 - 1 March 2001		Category 2 - 1 March 2000	
	Percent 'long waits'	Number of 'long waits'	Percent 'long waits'	Number of 'long waits'
Beaudesert Hospital	9.1%	1	0.0%	0
Gold Coast Hospital	17.5%	162	11.3%	114
Hervey Bay Hospital	5.3%	4	0.0%	0
Kirwan Hospital for Women	42.7%	56	1.2%	1
Mackay Base Hospital	18.2%	40	12.9%	24
Mater Adults Hospital	6.0%	23	4.4%	14
Mater Children's Hospital	10.5%	9	0.0%	0
Nambour Hospital	15.1%	130	11.9%	102
Noosa Hospital	17.0%	76	3.7%	6
Princess Alexandra Hospital	15.1%	206	12.2%	137
Redland Hospital	6.7%	11	3.7%	4
Rockhampton Hospital	5.8%	11	3.7%	6
Royal Brisbane Hospital	21.9%	285	25.9%	223
The Prince Charles Hospital	6.7%	26	19.5%	97
Toowoomba Hospital	20.4%	82	18.9%	71
Townsville General	12.2%	89	14.5%	72

- The largest increases in the number of 'long wait' Category 2 patients from 1 February 2001 to 1 March 2001 were reported by Gold Coast Hospital (+30) and Princess Alexandra Hospital (+11).

Category 3

- As at 1 March 2001, the proportion of Category 3 patients waiting longer than one year for surgery was **36.3%** (9,768 patients). This compares with 9,755 patients (35.7%) waiting longer than one year at 1 February 2001 and 8,726 patients (30.2%) waiting longer than one year at 1 March 2000.

THROUGHPUT

Overall **elective surgery throughput** (Category One, Two and Three) has increased from 7,097 elective surgery admissions in January 2001 to 9,420 in February 2001 (cf. 10,629 in February 2000).

Overall elective surgery throughput for the first seven months of 2000/2001 compared with the first seven months of 1999/2000 and 1998/1999 is included in the following table. Throughput for July-February 2000/01 is down by **3.8%** (2,922 cases) on the throughput recorded for July-February 1999/2000 and down by **6.0%** (4,620 cases) on the throughput recorded for July-February 1998/99.

July-February 1998/1999	July-February 1999/2000	July-February 2000/01
77,609	75,911	72,989

Note: Elective admissions data reported via the Elective Admissions Module (EAM) should be considered preliminary data. EAM can not provide weighted separations. The Queensland Hospital Admitted Patient Data Collection (QHAPDC) provides final weighted separation data.

CLINICAL BEST PRACTICE

Clinical Advisory Committee

- The Clinical Advisory Committee met on February 16, 2001.
- Copies of the health policy statements from the Government and opposition were distributed.
- Ms Ellen Hawes delivered a presentation the Hospital Clinical Indicators Project (Quality Improvement and Enhancement Program 1999/2004). The Committee suggested that Specialist Colleges make the initial decision on indicators. Prioritisation of indicators could then be undertaken by the CAC, followed by final ratification by the colleges.
- Dr Christine McAuliffe informed the CAC of ongoing discussions regarding the 'Orthopaedic Continuum of Care' program.

Emergency Services Strategy

Nurse Initiated X-Ray Program

- Further requests for information were made by Munduberra and Goondoowindi hospitals during February. Information was supplied to these hospitals.

Professional development of emergency department nursing staff

- The Emergency Nursing Education Project was formally commenced on 5 February 2001. Project Officers were seconded from the Royal Brisbane and Princess Alexandra Hospitals. An Expert Reference Committee Meeting was convened on 8 February 2001. The process of consultation, identification and collation of existing resources and formal needs analysis was commenced.

Research into Current Trends - Elective Surgery Strategies

- Further contact was made with the Central Wait List Bureau of Western Australian Health in order to exchange information on management of elective surgery waiting lists.

Statewide Purchasing and Standardisation of Surgical Prostheses

In January 2000, the General Manager, Health Services requested information on cost and utilisation of surgically implanted prosthetic devices in Queensland public hospitals. Individual Hospitals were contacted and requested to supply details of high cost surgically implanted devices used in the previous 12 months. Most hospitals were unable to supply any useful data without manual examination of theatre registers and supply invoices, a very labour intensive process.

The GMHS agreed that:

1. The Purchasing and Logistics Unit proceed with establishing Statewide purchasing arrangements for surgically implanted prostheses, with advice from clinical experts. An Orthopaedic Advisory Panel was to be established by the Procurement Strategy Unit to inform this process.
2. The Health Systems Strategy Branch consult with the Commonwealth regarding changes to the operation of *Schedule 5 – Surgically Implanted Prostheses and Human Tissue Items*.
3. The Surgical Access Team develop an information system to supply utilisation rates, purchase costs, Schedule 5 benefit amount, and the future agreed benefit amount for prostheses.

Because of a lack of progress at the statewide purchasing level, the General Manager, Health Services has recently requested that the process of standardisation of high cost prosthetics in Queensland Health facilities be fast-tracked by contacting the Australian Orthopaedic Association, in the first instance, and requesting input to the standardisation of major joint replacement prosthetics.

The Surgical Access Team will coordinate this exercise and work closely with the Purchasing and Logistics Unit in achieving the desired outcome.

Benchmarking

Emergency Medicine Waiting Times

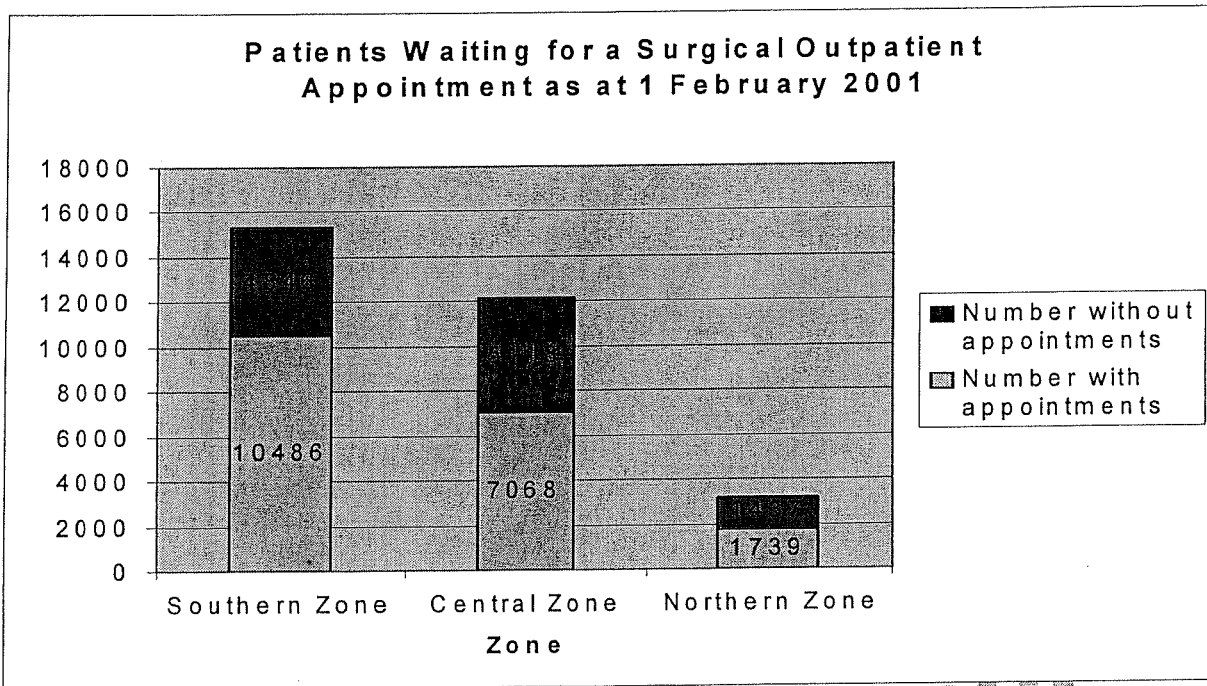
- Preliminary waiting time performance data indicates an improved performance in NTS Category 1 and a decline in performance in all other categories in February 2001 compared to February 2000. Performance is generally reduced from the previous month.

	February 2001 (preliminary)	January 2001	February 2000	Target
NTS 1	98%	98%	97%	100%
NTS 2	69%	70%	70%	80%
NTS 3	58%	59%	66%	75%
NTS 4	66%	64%	71%	70%
NTS 5	83%	86%	89%	70%

Note: Red indicates below target

Specialist Outpatient Services

Patients awaiting an initial surgical outpatient appointment, including those patients with an appointment and those without, are presented on a zonal basis.



HEALTH SYSTEM DEVELOPMENT

Database Development

- ISoft have advised that the 'fix' for the automatic transfer of data to the Elective Admissions Module (EAM) and Emergency Module (EMG) data warehouse, is currently being tested and will be available for roll out in early April. In the interim a "work around" has been implemented with data being received successfully on a daily basis from 28 sites from 16 February 2001. Business Application Services has managed to improve the level of service provided by iSoft on this issue through contract renegotiation. It is now anticipated that the 'fix' will be provided under the existing contractual arrangements without further expenditure being required.

Clinical Co-ordination

- The Surgical Access Team conducted an information session on 14 February 2001 with key staff from selected emergency departments to provide an overview of the corporate minimum data set requirements and reporting process to be implemented for the collection of data on retrievals and inter-hospital transfers. A number of issues were identified from the information session which will be forwarded to the Queensland Health Aero-Services Advisory Committee for advice.
- As part of the consultation process, Members of the Surgical Access Team and Mrs Linda Dawson (Chair of the Queensland Health Aero-Services Advisory Committee) met with Dr Jeff King from the Royal Flying Doctors Service (RFDS) to provide advice on the proposed Queensland Health data collection. Dr King has agreed to participate in the data collection process by providing retrieval information from the RFDS and working towards standardization of data collection forms.

HBCIS Appointment Scheduling Module

- Business Application Services has advised that the proposed changes to the HBCIS Appointment Scheduling Module will be included in the April release.
- SAT in conjunction with Business Application Services are providing advice to sites regarding issues relating to data take up. Some hospitals have reported that they will encounter difficulties with the volume of data entry required to have existing patient referrals entered onto the system.

Prosthetic Reporting Database

- After the successful piloting of the Prosthetics Database at Townsville Hospital, the Surgical Access Team has arranged for representatives from the RBH and PAH to visit Townsville Hospital to view the operational aspects associated with implementing the system into their respective sites. It is expected that a decision to proceed with the roll-out of the database will be made following the site visit.

HOSPITAL SUPPORT AND LIAISON

Consultation

- Members of the Surgical Access Team met with Mr Phil Sheedy, Chief Executive Officer, Robina Hospital and other hospital representatives as well as the Gold Coast Liaison Officer for Robina. Discussions centred on the current processes established at Robina in relation to the management of elective surgery activity for public patients.
- Following a request from the Clinical Advisory Committee to the present funding arrangements for Outpatient Services at Queensland Public Hospitals, meetings were held with Health Funding & Systems Development Unit, Data Services Unit, Southern Zone Health Unit and Pricing Strategy Unit to generate the information. This information was noted at the February meeting.

Medical Superintendents Advisory Committee

The Medical Superintendents Advisory Committee met on 16th February 2001.

- Copies of the health policy statements from the Government and opposition were distributed.
- The Committee suggested a central waiting list management program across Brisbane would result in better utilisation of available capacity within surgical services. Problems may arise when attempts are made to transfer patients across districts outside the metropolitan area. A funding model would need to reflect the change in patient access to surgery across hospital sites.
- The Committee discussed the planned standardisation of prostheses and establishment of a state-wide purchasing contract for high cost orthopaedic prosthetics. The Committee suggested that information be sought from hospitals to establish a profile of the range of implants currently used, followed by consultation with the Australian Orthopaedic Association.
- Emergency Service Performance Report - Investigations are taking place through Business Application Services with key stakeholders to identify what enhancements to HBCIS emergency module would assist sites to ensure data integrity.
- A presentation on *Queensland Trauma Registry* was provided by Dr Desley Kassulke, Manager of

Queensland Trauma Registry and information was shared by both Prof Rod McClure, Director of Queensland Trauma Registry and Dr Kassulke to the Committee on the future direction of the Registry and the involvement of Queensland Public Hospitals.

- Dr Bill Rodgers, Medical Superintendent, Nambour discussed Draft Proposals formulated by the committee to address Option A and Option B 'Right to Private Practice' and requested comments and/or recommendations be forwarded to him by end of February.

Elective Surgery Coordinators

The Elective Surgery Coordinators met on 23 February 2001.

- Copies of the health policy statements from the Government and opposition were distributed. The Elective Surgery Coordinators will play a key role in achieving the strategic outcomes outlined.
- Mr Noel Russell requested nominations from the group to be actively involved in the planned review of the current guidelines produced by the Surgical Access Team and development of guidelines for Emergency Services and Day Surgery Services.
- Details on *Weighting the Wait – Managing Access to Elective Surgery* conference were presented and discussed. The attendance of the Coordinators at this conference would be an invaluable opportunity to explore effective management strategies for patient access to elective surgery and to establish networks with colleagues interstate and overseas. District Managers have been urged to support individual Elective Surgery Coordinator's attendance at this conference.
- Mr Simon Wenck informed the group that work was being progressed to develop exception reports using the Surgical Access Team's Data Warehouse that will assist the Coordinators to enhance the current waiting list management strategies.

ATTACHMENT 1 - Census Data by Category and Month

Reporting Date	Category 1		Category 2		Category 3		Total
	Total	% 'long waits'	Total	% 'long waits'	Total	% 'long waits'	
1 Jul 1998	1,285	0.9%	9,243	10.6%	25,732	28.8%	36,260
1 Aug 1998	1,316	1.4%	9,511	11.2%	25,379	28.6%	36,206
1 Sept 1998	1,368	3.1%	9,621	14.1%	25,356	28.0%	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
1 Apr 1999	1,392	1.9%	9,953	15.9%	26,895	27.5%	38,240
1 May 1999	1,336	1.6%	10,275	14.7%	26,953	27.9%	38,564
1 Jun 1999	1,502	2.1%	9,931	12.3%	27,392	27.3%	38,830
1 Jul 1999	1,498	1.9%	9,780	8.6%	27,363	27.5%	38,641
1 Aug 1999	1,419	2.0%	9,929	10.6%	27,418	27.7%	38,766
1 Sep 1999	1,408	3.1%	9,870	11.4%	27,534	27.9%	38,812
1 Oct 1999	1,468	2.9%	9,604	9.9%	27,520	28.6%	38,592
1 Nov 1999	1,445	3.5%	9,614	8.8%	27,621	28.7%	38,680
1 Dec 1999	1,439	2.4%	9,856	8.7%	27,905	29.6%	39,200
1 Jan 2000	1,165	4.0%	9,967	9.9%	28,591	29.6%	39,723
1 Feb 2000	1,496	3.0%	10,141	11.1%	28,667	30.0%	40,304
1 Mar 2000	1,658	1.8%	9,904	11.7%	28,939	30.2%	40,501
1 Apr 2000	1,721	2.0%	9,927	9.6%	28,719	30.7%	40,367
1 May 2000	1,680	2.9%	10,141	9.9%	28,740	31.5%	40,561
1 Jun 2000	1,857	2.4%	10,019	8.5%	28,680	32.0%	40,556
1 Jul 2000	1,838	2.7%	10,179	8.3%	28,593	32.4%	40,610
1 Aug 2000	1,971	4.6%	10,313	10.9%	28,479	32.7%	40,763
1 Sep 2000	1,838	4.5%	10,458	10.7%	27,822	33.0%	40,118
1 Oct 2000	1,749	4.7%	10,615	11.8%	27,650	33.7%	40,014
1 Nov 2000	2,037	3.4%	10,706	12.8%	27,296	34.5%	40,039
1 Dec 2000	1,858	3.9%	10,310	11.1%	27,206	34.7%	39,374
1 Jan 2001	1,522	4.6%	10,675	11.9%	27,291	35.4%	39,488
1 Feb 2001	1,803	3.9%	10,669	12.7%	27,289	35.7%	39,761
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Note: Noosa Hospital reported separately from 1 March 2000 and Robina Hospital reported separately from 1 May 2000.