



Government of **Western Australia**
Department of **Health**

Western Australia Emergency Access Target

Performance Quarterly

July to September 2016 Quarter



What is the WA Emergency Access Target (WEAT)?

In January 2016, WA Health established the WA Emergency Access Target (WEAT) to continue driving local improvement in patient access to emergency services. This replaces the National Emergency Access Target (NEAT) following the expiry of the Commonwealth National Partnership Agreement on Improving Public Hospital Services in 2015.

The WEAT requires 90 per cent of all patients presenting to a public hospital emergency department (ED) to be seen and admitted, transferred or discharged within four hours.

What hospitals does it cover?

Tertiary Hospitals: Fiona Stanley Hospital (FSH), King Edward Memorial Hospital (KEMH), Princess Margaret Hospital (PMH), Royal Perth Hospital (RPH) and Sir Charles Gairdner Hospital (SCGH).

Metropolitan General Hospitals: Armadale-Kelmscott Memorial Hospital (AKMH), Joondalup Health Campus (JHC), Peel Health Campus (PHC), Rockingham General Hospital (RGH) and St John of God Midland Public Hospital (SJOGMPH).

Country Hospitals (formerly Rural Hospitals): Albany Hospital (AH), Broome Hospital (BH), Bunbury Regional Hospital (BRH), Geraldton Hospital (GH), Kalgoorlie Hospital (KH), Hedland Health Campus (HHC) and Nickol Bay Hospital (NBH).

Providing the best care

The 2009 Four Hour Rule Program and the subsequent National Emergency Access Target have used clinical service redesign and improvement processes to significantly change the way our hospitals operate. This resulted in improved patient care for Western Australians.

The WEAT will continue examining and improving processes across the entire patient journey, from the ED and the wards through to hospital discharge. WA Health will continue to build on this solid foundation in emergency access reform to provide the best possible care to our patients.

In 2015–16, Western Australia was the best performing Australian jurisdiction for patients seen and admitted, transferred or discharged within four hours (WEAT).

What does this report show?

This quarterly performance report shows how Tertiary, Metropolitan General and Country hospitals are progressing towards the WEAT. The percentage of emergency department attendances with length of episode (LOE) of four hours or less is 68.4% for the July to September 2016 quarter. The calendar year to date result to September 2016 is 72.8%. The current results are below the 90% target. Health Service Providers are endeavouring to improve performance as per the recommendations of the Western Australia Emergency Flow Report (May 2014).

This report also includes the number of ED attendances and the relevant safety and quality measures that are monitored to ensure patient care remains the highest priority.

Refer to the Notes section (page 23) and the WEAT Reporting Data Definitions and Business Rules (pages 24 to 27) for information on how to interpret the figures in this report.



Tertiary Hospitals

Fiona Stanley Hospital

King Edward Memorial Hospital

Princess Margaret Hospital

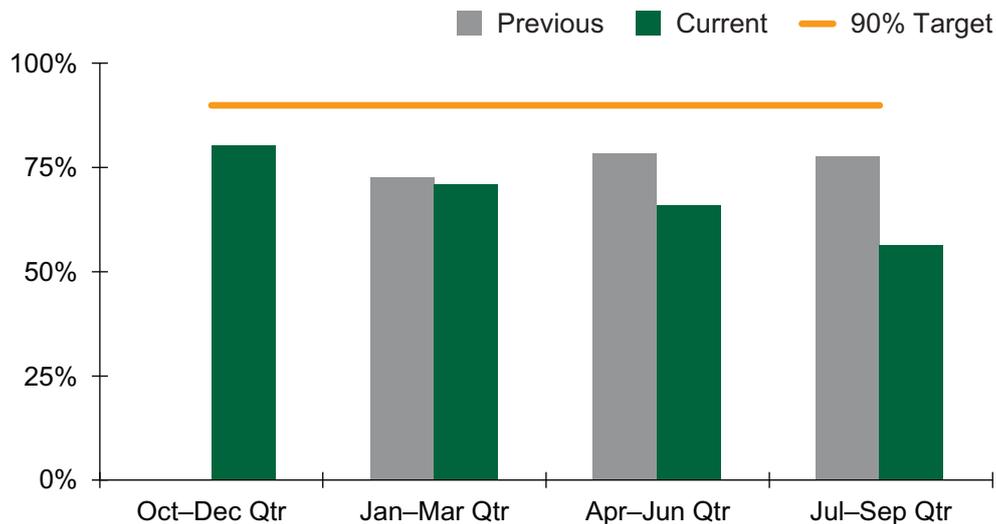
Royal Perth Hospital

Sir Charles Gairdner Hospital

Fiona Stanley Hospital

July to September 2016		Compared to July to September 2015		
25,421	emergency department attendances	↓	1.2%	decrease in emergency department attendances, or 315 fewer attendances
56.5%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	27.3%	decrease in emergency department attendances with length of episode (LOE) of four hours or less ¹
29.3%	emergency department admissions with LOE of four hours or less ¹	↓	49.6%	decrease in emergency department admissions with LOE of four hours or less ¹
40.8%	emergency department transfers with LOE of four hours or less ¹	↓	16.8%	decrease in emergency department transfers with LOE of four hours or less ¹
71.1%	emergency department departures with LOE of four hours or less ¹	↓	20.3%	decrease in emergency department departures with LOE of four hours or less ¹
0.3%	unplanned reattendances to the emergency department within 48-hours			
1.9%	hospital mortality for emergency department admissions			

Figure 1: Fiona Stanley Hospital – Percentage of ED attendances with length of episode of four hours or less

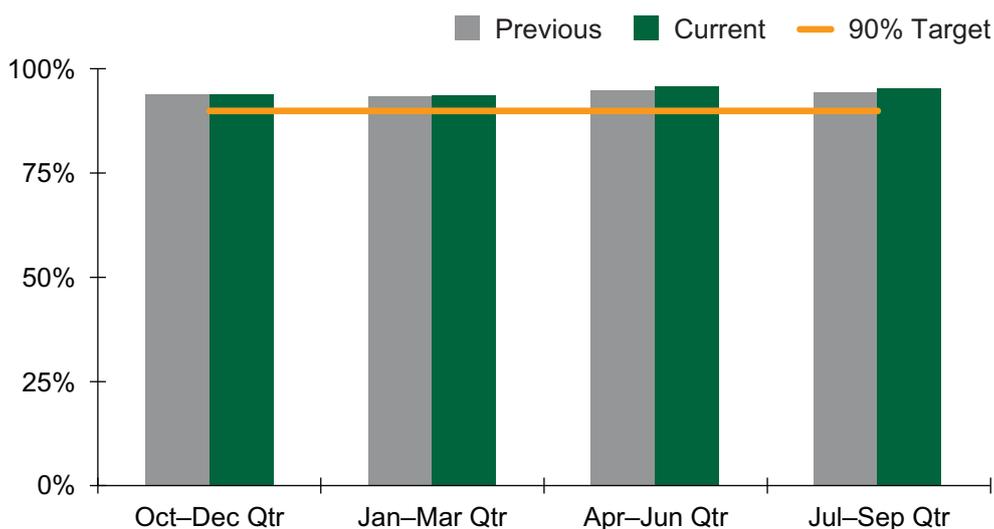


See Notes on page 23 for additional comments on the figures shown.

King Edward Memorial Hospital

July to September 2016		Compared to July to September 2015		
2,992	emergency department attendances	↓	9.4%	decrease in emergency department attendances, or 312 fewer attendances
95.5%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	1.0%	increase in emergency department attendances with LOE of four hours or less ¹
82.0%	emergency department admissions with LOE of four hours or less ¹	↑	6.3%	increase in emergency department admissions with LOE of four hours or less ¹
87.5%	emergency department transfers with LOE of four hours or less ¹	↑	3.1%	increase in emergency department transfers with LOE of four hours or less ¹
97.3%	emergency department departures with LOE of four hours or less ¹	↑	0.5%	increase in emergency department departures with LOE of four hours or less ¹
0.5%	unplanned reattendances to the emergency department within 48-hours			
0.7%	hospital mortality for emergency department admissions			

Figure 2: King Edward Memorial Hospital – Percentage of ED attendances with length of episode of four hours or less

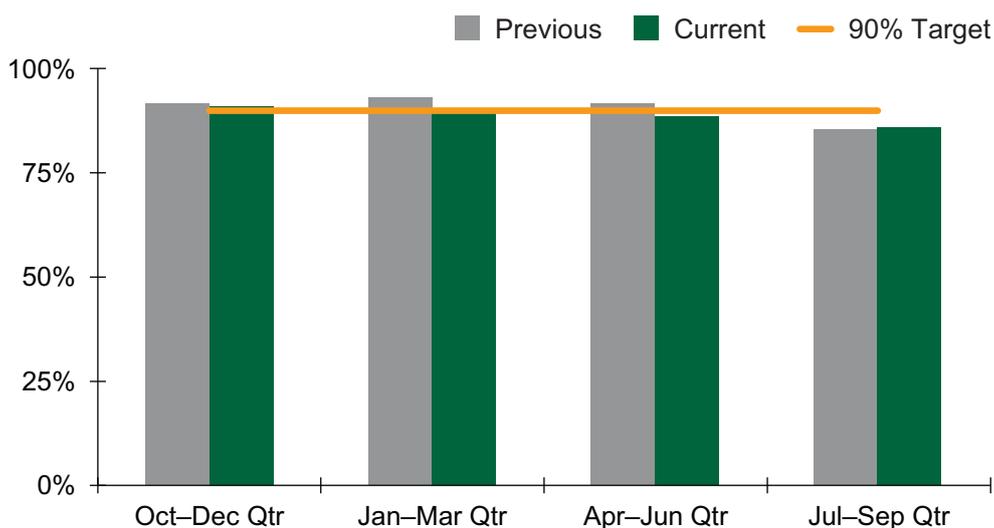


See Notes on page 23 for additional comments on the figures shown.

Princess Margaret Hospital

July to September 2016		Compared to July to September 2015		
16,667	emergency department attendances	↓	6.8%	decrease in emergency department attendances, or 1,225 fewer attendances
86.0%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	0.7%	increase in emergency department attendances with LOE of four hours or less ¹
60.0%	emergency department admissions with LOE of four hours or less ¹	↑	4.5%	increase in emergency department admissions with LOE of four hours or less ¹
60.9%	emergency department transfers with LOE of four hours or less ¹	↑	15.5%	increase in emergency department transfers with LOE of four hours or less ¹
92.5%	emergency department departures with LOE of four hours or less ¹	↓	0.1%	decrease in emergency department departures with LOE of four hours or less ¹
0.2%	unplanned reattendances to the emergency department within 48-hours			
0.1%	hospital mortality for emergency department admissions			

Figure 3: Princess Margaret Hospital – Percentage of ED attendances with length of episode of four hours or less

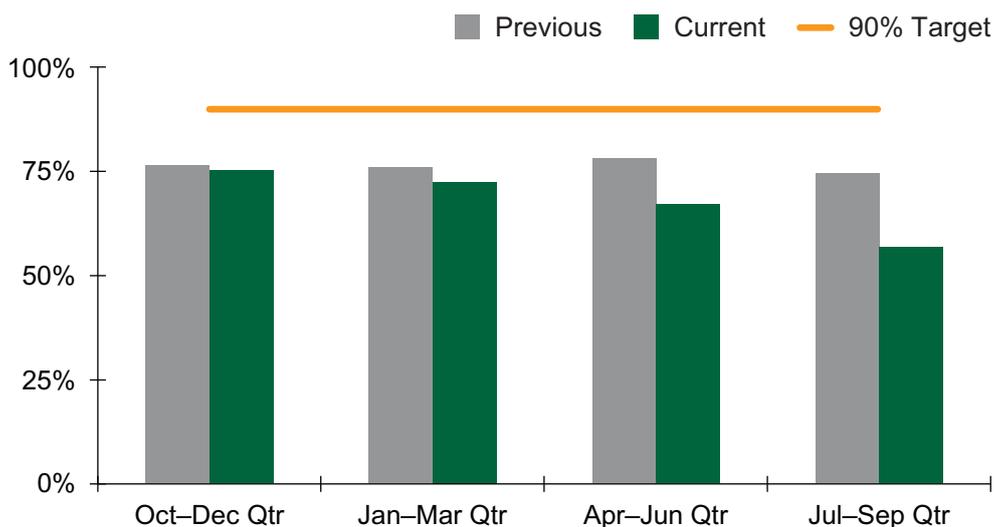


See Notes on page 23 for additional comments on the figures shown.

Royal Perth Hospital

July to September 2016		Compared to July to September 2015		
17,594	emergency department attendances	↓	2.2%	decrease in emergency department attendances, or 403 fewer attendances
56.8%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	23.7%	decrease in emergency department attendances with LOE of four hours or less ¹
34.2%	emergency department admissions with LOE of four hours or less ¹	↓	37.8%	decrease in emergency department admissions with LOE of four hours or less ¹
38.7%	emergency department transfers with LOE of four hours or less ¹	↓	20.8%	decrease in emergency department transfers with LOE of four hours or less ¹
72.5%	emergency department departures with LOE of four hours or less ¹	↓	19.3%	decrease in emergency department departures with LOE of four hours or less ¹
0.1%	unplanned reattendances to the emergency department within 48-hours			
1.5%	hospital mortality for emergency department admissions			

Figure 4: Royal Perth Hospital – Percentage of ED attendances with length of episode of four hours or less

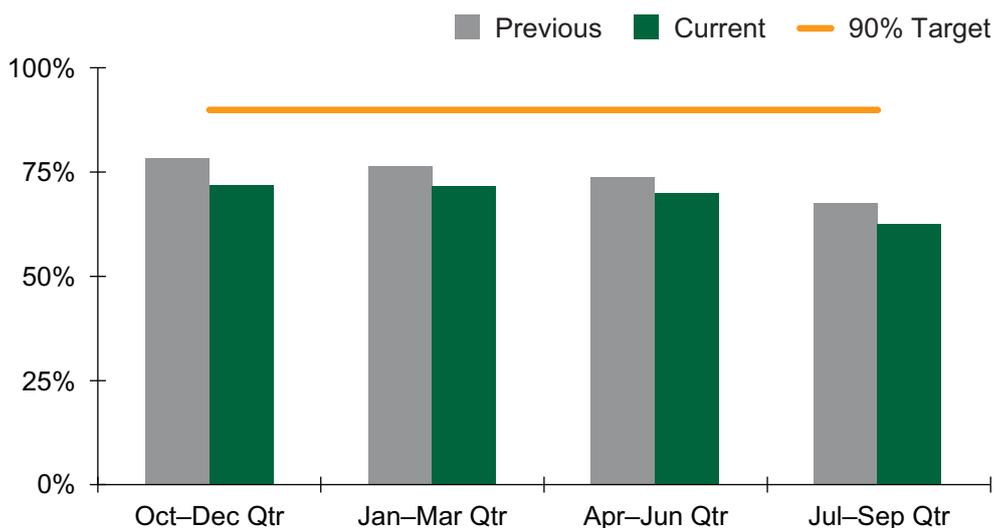


See Notes on page 23 for additional comments on the figures shown.

Sir Charles Gairdner Hospital

July to September 2016		Compared to July to September 2015		
17,114	emergency department attendances	↓	3.9%	decrease in emergency department attendances, or 696 fewer attendances
62.4%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	7.5%	decrease in emergency department attendances with LOE of four hours or less ¹
48.0%	emergency department admissions with LOE of four hours or less ¹	↓	12.4%	decrease in emergency department admissions with LOE of four hours or less ¹
36.5%	emergency department transfers with LOE of four hours or less ¹	↑	11.1%	increase in emergency department transfers with LOE of four hours or less ¹
78.9%	emergency department departures with LOE of four hours or less ¹	↓	5.8%	decrease in emergency department departures with LOE of four hours or less ¹
0.1%	unplanned reattendances to the emergency department within 48-hours			
2.9%	hospital mortality for emergency department admissions			

Figure 5: Sir Charles Gairdner Hospital – Percentage of ED attendances with length of episode of four hours or less



See Notes on page 23 for additional comments on the figures shown.



Metropolitan General Hospitals

Armadale-Kelmscott Memorial Hospital

Joondalup Health Campus

Peel Health Campus

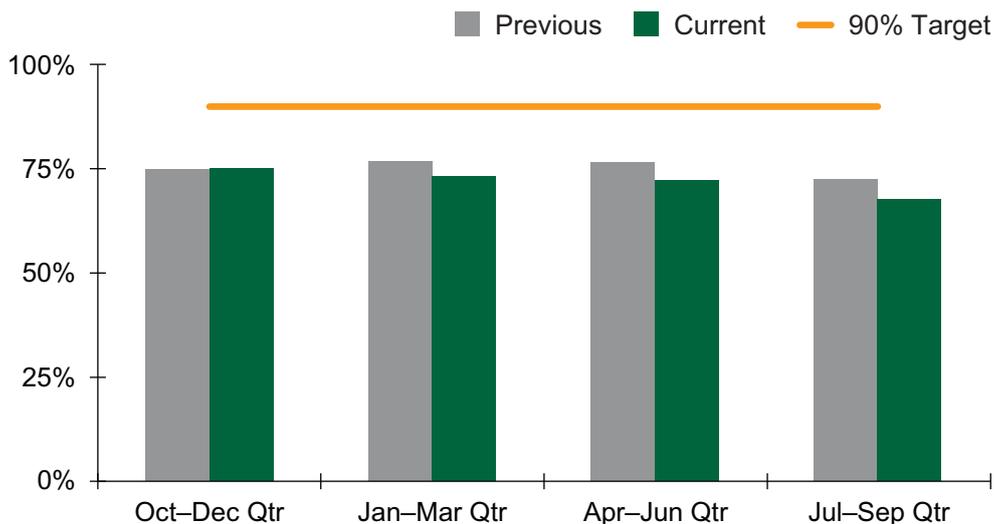
Rockingham General Hospital

SJOG Midland Public Hospital

Armadale-Kelmscott Memorial Hospital

July to September 2016		Compared to July to September 2015		
15,128	emergency department attendances	↓	1.2%	decrease in emergency department attendances, or 177 fewer attendances
67.6%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	6.8%	decrease in emergency department attendances with LOE of four hours or less ¹
17.6%	emergency department admissions with LOE of four hours or less ¹	↓	26.5%	decrease in emergency department admissions with LOE of four hours or less ¹
37.8%	emergency department transfers with LOE of four hours or less ¹	↓	5.6%	decrease in emergency department transfers with LOE of four hours or less ¹
77.6%	emergency department departures with LOE of four hours or less ¹	↓	6.0%	decrease in emergency department departures with LOE of four hours or less ¹
0.4%	unplanned reattendances to the emergency department within 48-hours			
1.7%	hospital mortality for emergency department admissions			

Figure 6: Armadale-Kelmscott Memorial Hospital – Percentage of ED attendances with length of episode of four hours or less

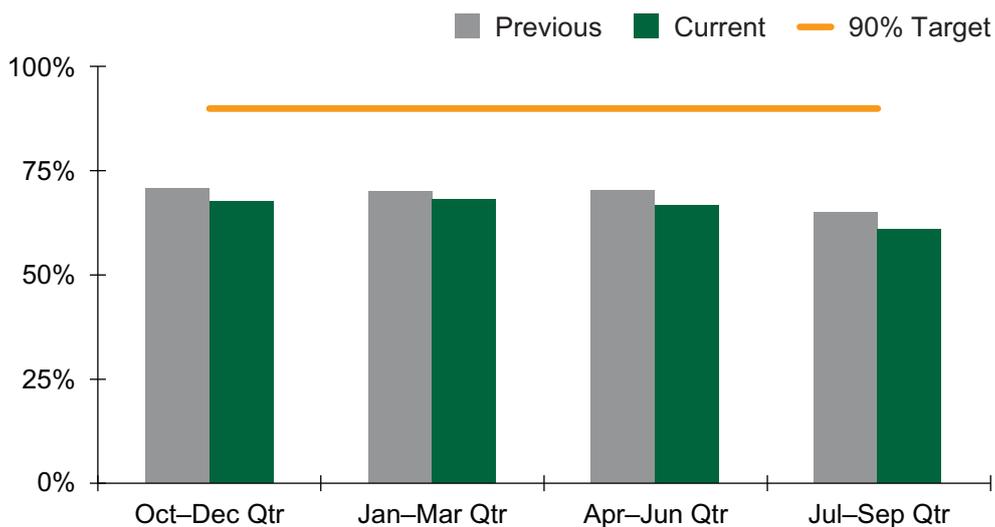


See Notes on page 23 for additional comments on the figures shown.

Joondalup Health Campus

July to September 2016		Compared to July to September 2015		
24,778	emergency department attendances	↓	0.8%	decrease in emergency department attendances, or 201 fewer attendances
61.0%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	6.0%	decrease in emergency department attendances with LOE of four hours or less ¹
27.5%	emergency department admissions with LOE of four hours or less ¹	↓	25.9%	decrease in emergency department admissions with LOE of four hours or less ¹
49.2%	emergency department transfers with LOE of four hours or less ¹	↓	5.1%	decrease in emergency department transfers with LOE of four hours or less ¹
75.4%	emergency department departures with LOE of four hours or less ¹	↓	3.1%	decrease in emergency department departures with LOE of four hours or less ¹
0.4%	unplanned reattendances to the emergency department within 48-hours			
1.5%	hospital mortality for emergency department admissions			

Figure 7: Joondalup Health Campus – Percentage of ED attendances with length of episode of four hours or less



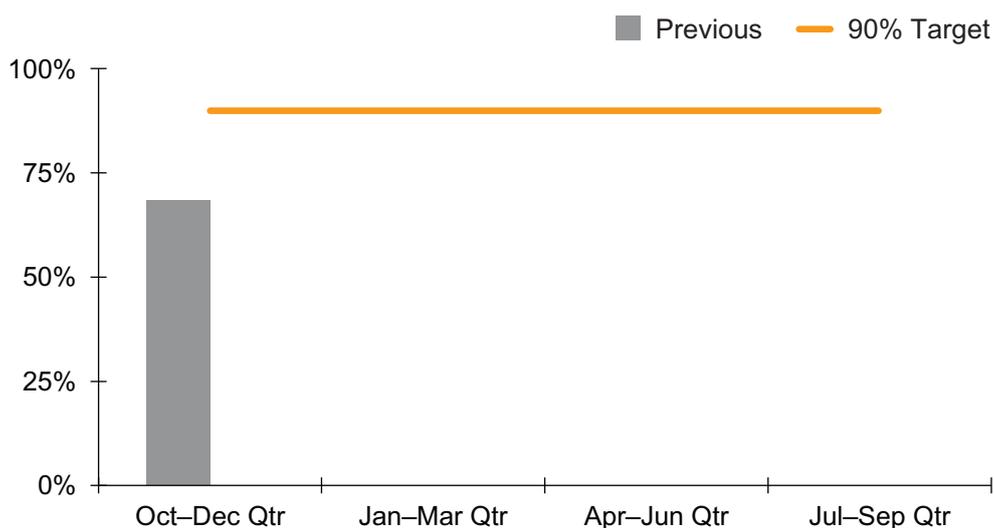
See Notes on page 23 for additional comments on the figures shown.

Peel Health Campus

July to September 2016		Compared to July to September 2015		
10,981	emergency department attendances	↓	2.6%	decrease in emergency department attendances, or 292 fewer attendances
N/A*	emergency department attendances with length of episode (LOE) of four hours or less ¹		N/A*	emergency department attendances with LOE of four hours or less ¹
N/A*	emergency department admissions with LOE of four hours or less ¹		N/A*	emergency department admissions with LOE of four hours or less ¹
N/A*	emergency department transfers with LOE of four hours or less ¹		N/A*	emergency department transfers with LOE of four hours or less ¹
N/A*	emergency department departures with LOE of four hours or less ¹		N/A*	emergency department departures with LOE of four hours or less ¹
N/A	unplanned reattendances to the emergency department within 48-hours			
1.7%	hospital mortality for emergency department admissions			

N/A*: Data is not available due to the quality of the data within the new Meditech information system.

Figure 8: Peel Health Campus – Percentage of ED attendances with length of episode of four hours or less

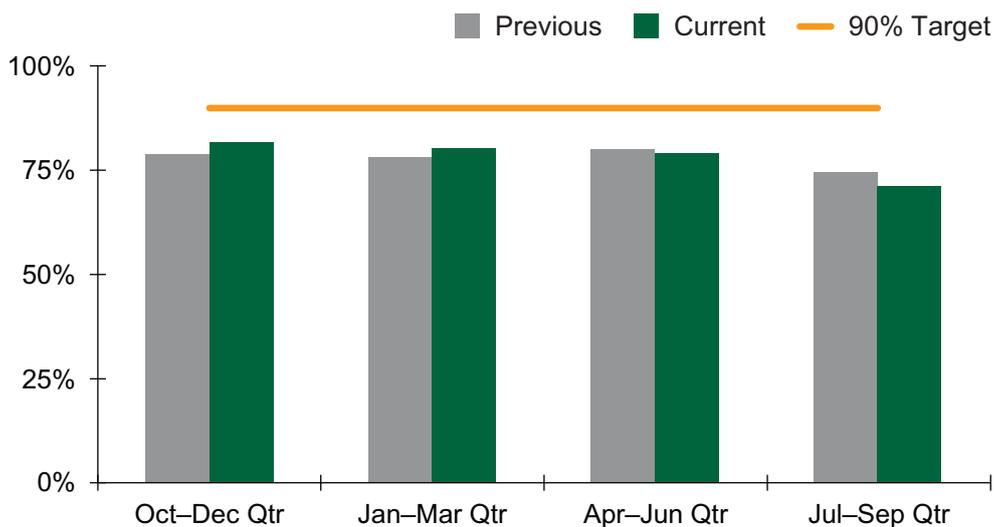


See Notes on page 23 for additional comments on the figures shown.

Rockingham General Hospital

July to September 2016		Compared to July to September 2015		
13,511	emergency department attendances	↓	2.0%	decrease in emergency department attendances, or 271 fewer attendances
71.1%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	4.3%	decrease in emergency department attendances with LOE of four hours or less ¹
34.3%	emergency department admissions with LOE of four hours or less ¹	↓	0.7%	decrease in emergency department admissions with LOE of four hours or less ¹
44.6%	emergency department transfers with LOE of four hours or less ¹	↑	2.1%	increase in emergency department transfers with LOE of four hours or less ¹
80.9%	emergency department departures with LOE of four hours or less ¹	↓	4.2%	decrease in emergency department departures with LOE of four hours or less ¹
0.5%	unplanned reattendances to the emergency department within 48-hours			
1.1%	hospital mortality for emergency department admissions			

Figure 9: Rockingham General Hospital – Percentage of ED attendances with length of episode of four hours or less



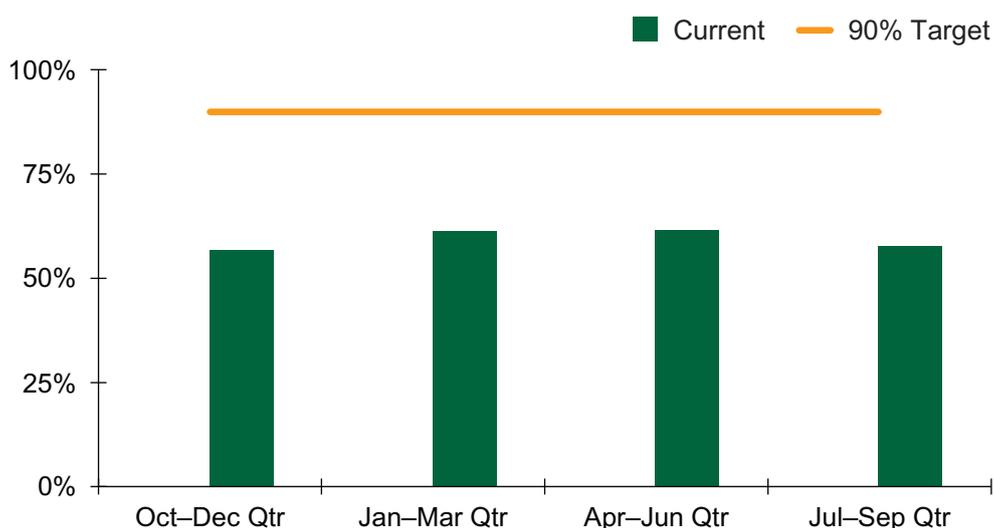
See Notes on page 23 for additional comments on the figures shown.

SJOG Midland Public Hospital

July to September 2016		Compared to July to September 2015	
15,989	emergency department attendances	N/A	emergency department attendances
57.7%	emergency department attendances with length of episode (LOE) of four hours or less ¹	N/A	emergency department attendances with LOE of four hours or less ¹
36.5%	emergency department admissions with LOE of four hours or less ¹	N/A	emergency department admissions with LOE of four hours or less ¹
45.5%	emergency department transfers with LOE of four hours or less ¹	N/A	emergency department transfers with LOE of four hours or less ¹
68.0%	emergency department departures with LOE of four hours or less ¹	N/A	emergency department departures with LOE of four hours or less ¹
0.01%	unplanned reattendances to the emergency department within 48-hours		
1.7%	hospital mortality for emergency department admissions		

SJOG Midland Public Hospital opened on 24 November 2015, therefore there is no data prior to November 2015.

Figure 10: SJOG Midland Public Hospital – Percentage of ED attendances with length of episode of four hours or less



See Notes on page 23 for additional comments on the figures shown.



Country Hospitals

Albany Hospital

Broome Hospital

Bunbury Regional Hospital

Geraldton Hospital

Hedland Health Campus

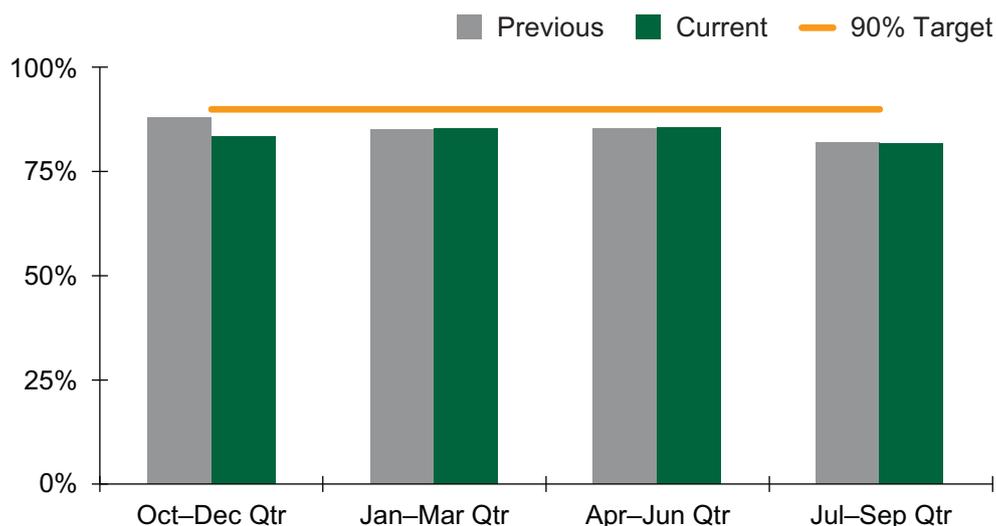
Kalgoorlie Hospital

Nickol Bay Hospital

Albany Hospital

July to September 2016		Compared to July to September 2015		
6,127	emergency department attendances	↑	2.5%	increase in emergency department attendances, or 148 more attendances
81.8%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	0.1%	decrease in emergency department attendances with LOE of four hours or less ¹
53.1%	emergency department admissions with LOE of four hours or less ¹	↑	11.0%	increase in emergency department admissions with LOE of four hours or less ¹
61.5%	emergency department transfers with LOE of four hours or less ¹	↓	3.8%	decrease in emergency department transfers with LOE of four hours or less ¹
89.8%	emergency department departures with LOE of four hours or less ¹	↓	0.7%	decrease in emergency department departures with LOE of four hours or less ¹
N/A	unplanned reattendances to the emergency department within 48-hours			
1.4%	hospital mortality for emergency department admissions			

Figure 11: Albany Hospital – Percentage of ED attendances with length of episode of four hours or less

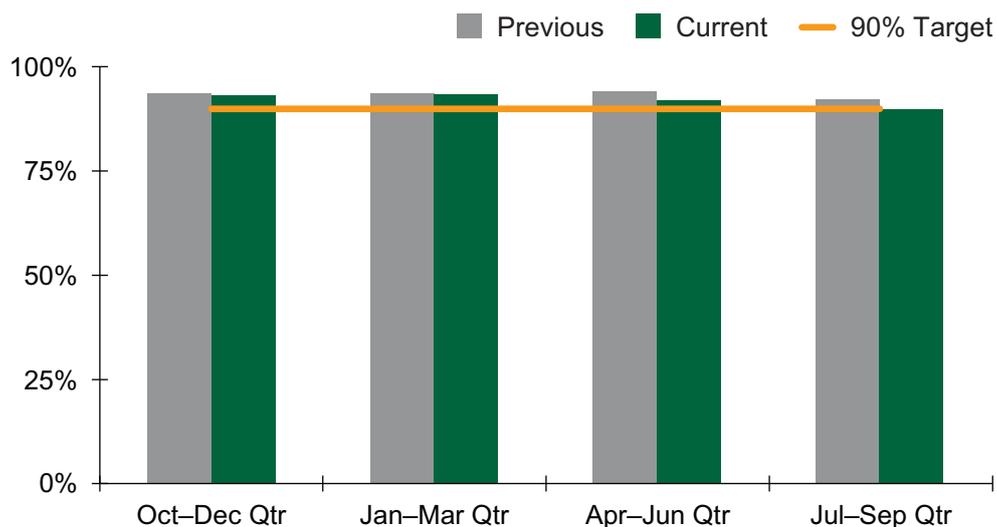


See Notes on page 23 for additional comments on the figures shown.

Broome Hospital

July to September 2016		Compared to July to September 2015		
5,734	emergency department attendances	↓	0.4%	decrease in emergency department attendances, or 21 fewer attendances
89.7%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	2.5%	decrease in emergency department attendances with LOE of four hours or less ¹
60.9%	emergency department admissions with LOE of four hours or less ¹	↓	11.6%	decrease in emergency department admissions with LOE of four hours or less ¹
63.6%	emergency department transfers with LOE of four hours or less ¹	↑	20.2%	increase in emergency department transfers with LOE of four hours or less ¹
96.0%	emergency department departures with LOE of four hours or less ¹	↓	1.2%	decrease in emergency department departures with LOE of four hours or less ¹
N/A	unplanned reattendances to the emergency department within 48-hours			
0.5%	hospital mortality for emergency department admissions			

Figure 12: Broome Hospital – Percentage of ED attendances with length of episode of four hours or less

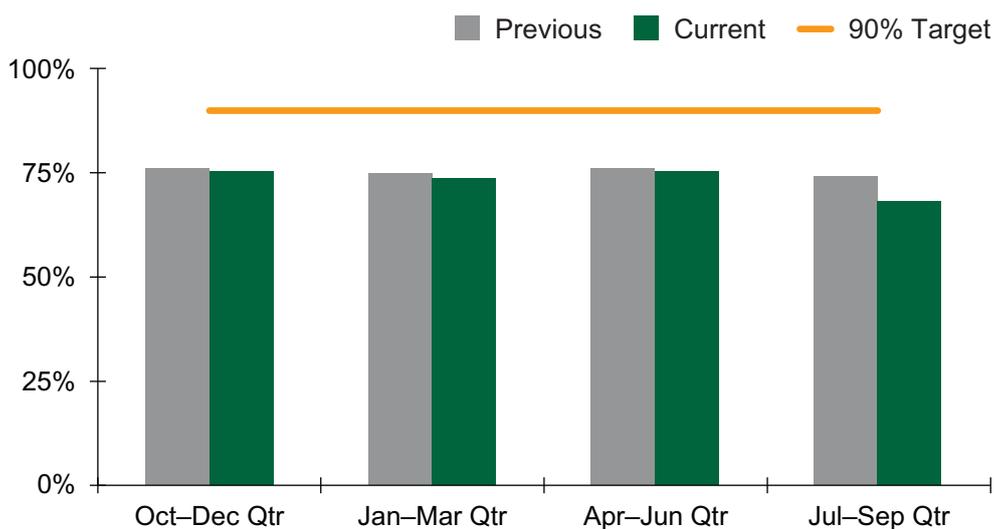


See Notes on page 23 for additional comments on the figures shown.

Bunbury Regional Hospital

July to September 2016		Compared to July to September 2015		
9,896	emergency department attendances	↓	3.6%	decrease in emergency department attendances, or 373 fewer attendances
68.1%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	8.4%	decrease in emergency department attendances with LOE of four hours or less ¹
47.1%	emergency department admissions with LOE of four hours or less ¹	↑	0.3%	increase in emergency department admissions with LOE of four hours or less ¹
27.4%	emergency department transfers with LOE of four hours or less ¹	↓	3.5%	decrease in emergency department transfers with LOE of four hours or less ¹
76.8%	emergency department departures with LOE of four hours or less ¹	↓	8.3%	decrease in emergency department departures with LOE of four hours or less ¹
0.4%	unplanned reattendances to the emergency department within 48-hours			
0.8%	hospital mortality for emergency department admissions			

Figure 13: Bunbury Regional Hospital – Percentage of ED attendances with length of episode of four hours or less

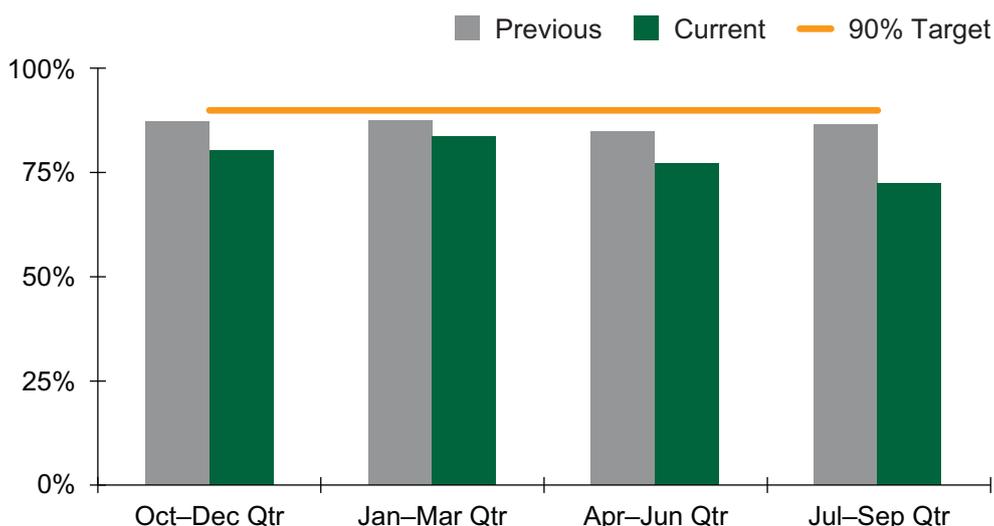


See Notes on page 23 for additional comments on the figures shown.

Geraldton Hospital

July to September 2016		Compared to July to September 2015		
7,857	emergency department attendances	↑	8.4%	increase in emergency department attendances, or 611 more attendances
72.3%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	16.4%	decrease in emergency department attendances with LOE of four hours or less ¹
35.4%	emergency department admissions with LOE of four hours or less ¹	↓	50.2%	decrease in emergency department admissions with LOE of four hours or less ¹
32.5%	emergency department transfers with LOE of four hours or less ¹	↓	9.8%	decrease in emergency department transfers with LOE of four hours or less ¹
81.5%	emergency department departures with LOE of four hours or less ¹	↓	10.4%	decrease in emergency department departures with LOE of four hours or less ¹
N/A	unplanned reattendances to the emergency department within 48-hours			
1.2%	hospital mortality for emergency department admissions			

Figure 14: Geraldton Hospital – Percentage of ED attendances with length of episode of four hours or less

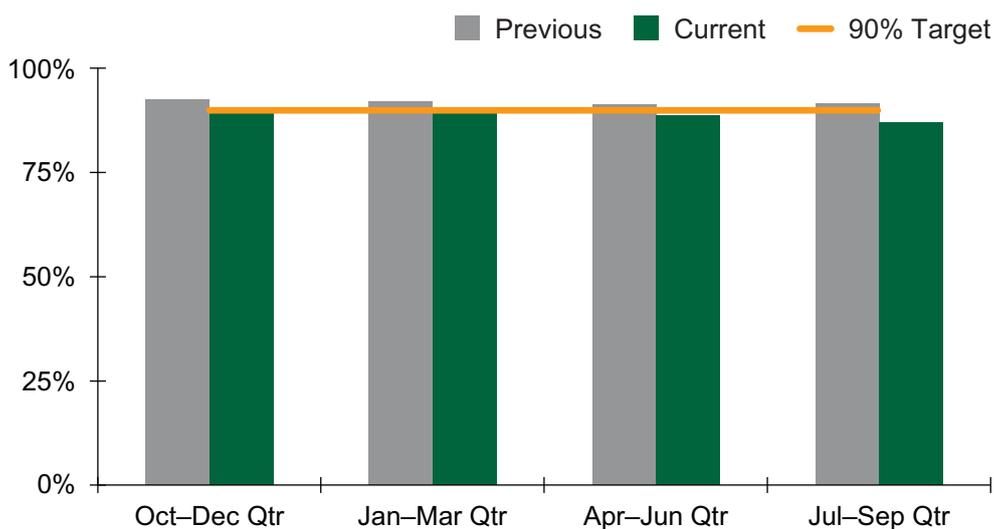


See Notes on page 23 for additional comments on the figures shown.

Hedland Health Campus

July to September 2016		Compared to July to September 2015		
5,836	emergency department attendances	↑	16.9%	increase in emergency department attendances, or 845 more attendances
87.1%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	4.9%	decrease in emergency department attendances with LOE of four hours or less ¹
49.0%	emergency department admissions with LOE of four hours or less ¹	↓	33.3%	decrease in emergency department admissions with LOE of four hours or less ¹
44.2%	emergency department transfers with LOE of four hours or less ¹	↑	135.7%	increase in emergency department transfers with LOE of four hours or less ¹
93.0%	emergency department departures with LOE of four hours or less ¹	↓	1.7%	decrease in emergency department departures with LOE of four hours or less ¹
N/A	unplanned reattendances to the emergency department within 48-hours			
0.3%	hospital mortality for emergency department admissions			

Figure 15: Hedland Health Campus – Percentage of ED attendances with length of episode of four hours or less

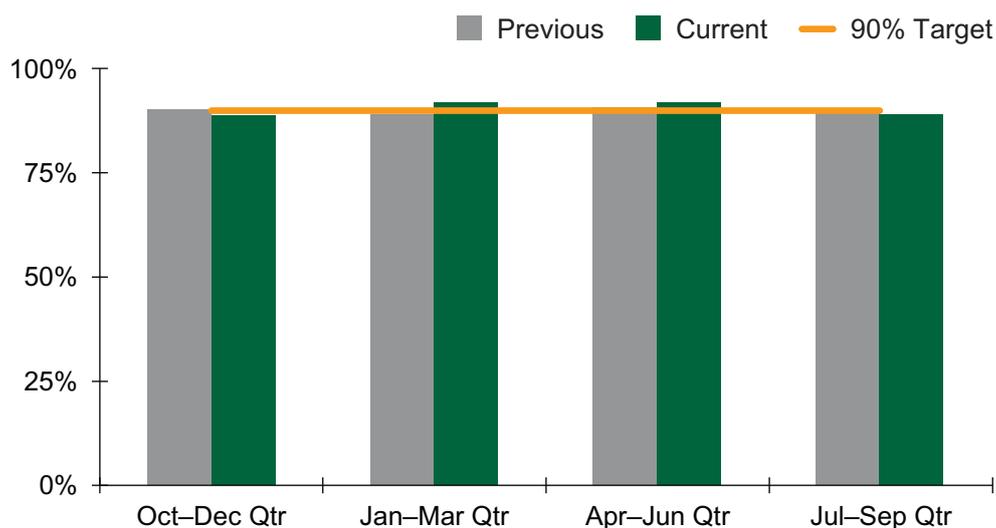


See Notes on page 23 for additional comments on the figures shown.

Kalgoorlie Hospital

July to September 2016		Compared to July to September 2015		
6,072	emergency department attendances	↓	1.1%	decrease in emergency department attendances, or 65 fewer attendances
89.0%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↓	1.6%	decrease in emergency department attendances with LOE of four hours or less ¹
61.7%	emergency department admissions with LOE of four hours or less ¹	↓	3.7%	decrease in emergency department admissions with LOE of four hours or less ¹
50.0%	emergency department transfers with LOE of four hours or less ¹	↑	23.1%	increase in emergency department transfers with LOE of four hours or less ¹
95.5%	emergency department departures with LOE of four hours or less ¹	↓	0.9%	decrease in emergency department departures with LOE of four hours or less ¹
N/A	unplanned reattendances to the emergency department within 48-hours			
1.3%	hospital mortality for emergency department admissions			

Figure 16: Kalgoorlie Hospital – Percentage of ED attendances with length of episode of four hours or less

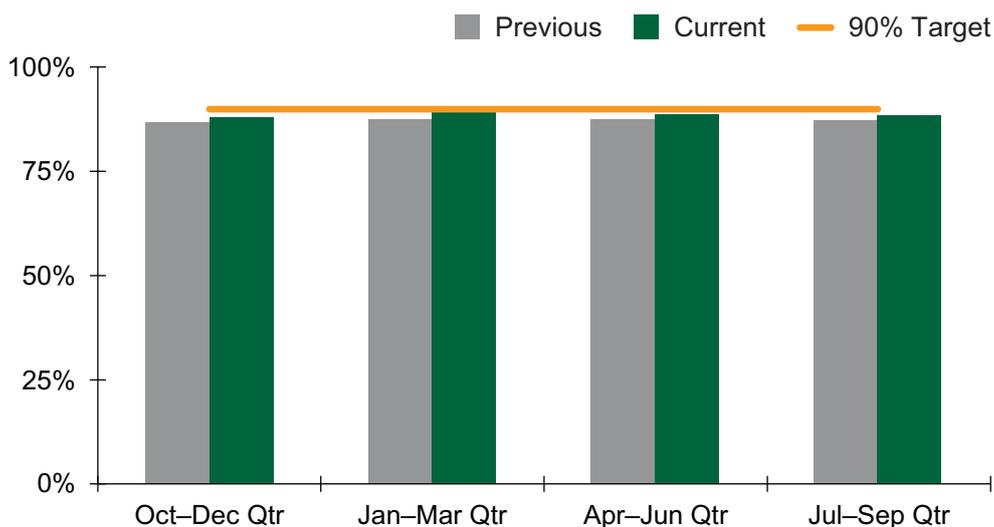


See Notes on page 23 for additional comments on the figures shown.

Nickol Bay Hospital

July to September 2016		Compared to July to September 2015		
4,975	emergency department attendances	↑	5.1%	increase in emergency department attendances, or 241 more attendances
88.6%	emergency department attendances with length of episode (LOE) of four hours or less ¹	↑	1.5%	increase in emergency department attendances with LOE of four hours or less ¹
44.5%	emergency department admissions with LOE of four hours or less ¹	↑	16.3%	increase in emergency department admissions with LOE of four hours or less ¹
47.2%	emergency department transfers with LOE of four hours or less ¹	↑	85.5%	increase in emergency department transfers with LOE of four hours or less ¹
94.3%	emergency department departures with LOE of four hours or less ¹	↓	0.9%	decrease in emergency department departures with LOE of four hours or less ¹
N/A	unplanned reattendances to the emergency department within 48-hours			
0.2%	hospital mortality for emergency department admissions			

Figure 17: Nickol Bay Hospital – Percentage of ED attendances with length of episode of four hours or less



See Notes on page 23 for additional comments on the figures shown.

Notes:

Figures shown in the tables are preliminary. Figures may change within the 2015–16 and 2016–17 reporting period due to timing of coding and editing.

The target for all sites is 90% for the 2016 calendar year and has been implemented as a part of the Western Australia Emergency Access Target (WEAT).

N/A: Data not available or applicable.

N/C: Data not calculable.

¹ Duration in the emergency department (ED) is based on ED length of episode.

Western Australia Emergency Access Target (WEAT) – Reporting Data Definitions and Business Rules

1: Emergency department attendances

Definition:	The total number of all public emergency department (ED) attendances.
Guide for use:	Includes all episodes where a patient presented at the emergency department and was registered in any manner in one of the electronic data collection systems.
Purpose:	To provide a fundamental measure of activity levels within emergency departments.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	Emergency Department Data Collection (EDDC) (11/10/2016).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

2: Emergency department attendances with length of episode (LOE) of four hours or less

Definition:	The proportion of all emergency department attendances where the time to admit, transfer or discharge the patient from the emergency department was within four hours of their presentation.
Guide for use:	Includes all valid attendances. Excludes patients that had an invalid presentation or departure time. Data is expressed as a percentage. Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient leaves the emergency department.
Purpose:	To monitor the proportion of emergency department attendances that meet the WEAT objective.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/10/2016).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

3: Emergency department admissions with length of episode (LOE) of four hours or less

Definition:	The proportion of all admissions from the emergency department where the time to admit the patient to a ward was within four hours of their presentation.
Guide for use:	<p>An admission process is the process whereby the hospital accepts responsibility for the patient's care and/or treatment.</p> <p>Includes all attendances that were admitted.</p> <p>Excludes patients that had an invalid presentation or departure time.</p> <p>Data is expressed as a percentage.</p> <p>Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient leaves the emergency department by being admitted to a ward (including Short Stay Unit).</p>
Purpose:	To monitor the proportion of admissions from emergency department that meet the WEAT objective.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/10/2016).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

4: Emergency department transfers with length of episode (LOE) of four hours or less

Definition:	The proportion of all emergency department transfers where the time to transfer the patient to another hospital was within four hours of their presentation.
Guide for use:	<p>Includes all attendances that were transferred to another hospital on ED departure.</p> <p>Excludes records with an invalid presentation or departure time.</p> <p>Data is expressed as a percentage.</p> <p>Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient leaves the emergency department to be transferred to another hospital.</p>
Purpose:	To monitor the proportion of emergency department transfers that meet the WEAT objective.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/10/2016).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

5: Emergency department departures with length of episode (LOE) of four hours or less

Definition:	The proportion of non admitted emergency department attendances where the time to discharge the patient was within four hours of their presentation.
Guide for use:	Includes all attendances that were not admitted or transferred. Excludes records with an invalid presentation or departure time. Data is expressed as a percentage. Length of episode is counted from the time the patient presents to a staff member (nurse, clerk, etc.) to the time the patient is discharged from the emergency department.
Purpose:	To monitor the proportion of emergency department departures that meet the WEAT objective.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/10/2016).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

6: Proportion of emergency department attendances which are unplanned re-attendances (≤ 48 hours of previous attendance)

Definition:	The proportion of emergency department attendances where the patient re-attended an emergency department in less than or equal to 48 hours.
Guide for use:	Includes all attendances that are coded as an unplanned return to ED. Excludes records with an invalid presentation or departure time. Data is expressed as a percentage. The 48 hours is calculated from the end of the previous attendance to the start of the current attendance. The record will be assigned to the hospital where the previous attendance occurred.
Purpose:	To monitor emergency department attendances who made an unplanned return visit in less than or equal to 48 hours.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	EDDC (11/10/2016).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.

7: Percentage of hospital mortality for emergency department admissions

Definition:	The proportion of all hospital inpatients who decrease subsequent to admission from the emergency department.
Guide for use:	Excludes patients that are deceased in the emergency department who are not admitted and patients directly admitted to a hospital ward.
Purpose:	To monitor the mortality of patients admitted to hospital from the emergency department.
Includes:	All participating WEAT hospitals. Refer to page 2.
Excludes:	All other public and private hospitals.
Data source:	Purchasing and System Performance Division, Department of Health, WA.
Data extraction:	Inpatient Activity (11/10/2016).
Report prepared by:	Purchasing and System Performance Division, Department of Health, WA.



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