

**Submission
No 4**

**EXAMINATION OF AUDITOR-GENERAL'S
PERFORMANCE AUDIT REPORTS MAY 2013 –
JULY 2013**

Organisation: NSW Ministry of Health
Name: Dr Mary Foley
Position: Director General
Date Received: 20/08/2014

Mr Jonathan O'Dea MP
Chair, Legislative Assembly Public Accounts Committee
Parliament House
Macquarie Street
SYDNEY NSW 2000

Dear Mr O'Dea

Thank you for your correspondence to the Hon Jillian Skinner MP, Minister for Health and Minister for Medical Research and to me regarding a submission from the Ministry on the implementation of recommendations of the Auditor-General's Report on '*Operating Theatre Efficiency for Elective Surgery.*'

Please find enclosed a submission for your consideration outlining responses and actions to date on the recommendations of the Audit that relate to NSW Health.

Of the seven recommendations made to NSW Health, I am pleased to advise that all recommendations have been actioned with recommendations completed, ongoing or partially completed. Most recommendations relate to the development of guidelines to promote best practice for operating theatre management. These guidelines are expected to be launched in September 2014.

I am pleased to provide the Public Accounts Committee progress on this extensive body of work undertaken during the last 12 months with particular reference to:

- Planning and consultation on the guidelines involving three key working groups. The first working group undertook a costing exercise involving the Agency for Clinical Innovation, ABF Taskforce and St George Hospital. The second working group title The Whole of Surgery Group examined role, responsibilities and structure of Operating Theatre committees. The third working group on Efficiency involves the development of key performance indicators for three different levels of management.
- Extensive requirements gathering was undertaken to develop Operating Theatre Dashboards and Operating Theatre Activity Summaries currently in testing.
- Education programs continue with the Surgery Redesign Training Program, a one week dedicated training program that provides District staff with practical skills to implement changes in their workplace. Additionally, 33 hospitals statewide were visited and reviewed against the Surgical Self Assessment Checklist.

Should you require any further information please contact [REDACTED]

Yours sincerely

[REDACTED]
Dr Mary Foley
Secretary NSW Health

29. 7. 14



IMPLEMENTATION OF RECOMMENDATIONS

NSW Health: 2013 Performance Audit: Operating Theatre Efficiency for Elective Surgery

RECOMMENDATION	ACCEPTED OR REJECTED	ACTIONS TO BE TAKEN	DUE DATE	STATUS (completed, on track, delayed) and COMMENT	RESPONSIBILITY (Section of agency responsible for implementation)
<p>1 LHDs supported by the Ministry and the Agency for Clinical Innovation should, by 30 June 2014, develop operating theatre better practice management guides which cover:</p>	<p>Accepted</p>	<p>Development of Guidelines/Toolkits to promote best practice The Agency for Clinical Innovation (ACI) and Ministry of Health (MoH) are in the planning phase for the development of best practice guidelines for operating theatre management and governance – one of the key recommendations of this Audit Report.</p>		<p>The Ministry of Health and Agency for Clinical Innovation continue to progress the development of guidelines /toolkit to promote best practice.</p> <p>Progress to date includes:</p> <ul style="list-style-type: none"> • Three 3 Working Groups - Cost, Whole of Surgery and Theatre Efficiency continue to meet as follows: • Cost Group: The Agency for Clinical Innovation (ACI) has partnered with the Activity Based Taskforce (ABF) and St George Hospital to undertake a pilot site for a bottom up costing exercise of the operating theatres. Wollongong University has completed work on a literature scan on current costing models for operating theatres. • The Whole of Surgery Group has completed their work on roles, responsibilities and structure of Operating Theatre committees and has finalised elements that make up an efficient operating system (theatre scheduling, patient flow, related stakeholder processes). • The efficiency group are continuing to develop Key Performance Indicators (KPIs) and measures for 3 different levels of management (Ministry of Health, Local Health Districts and Hospitals). • The external consultant group have commenced work on guideline development from the outputs from the 3 working groups. • The Surgery Efficiency Steering Committee continue to meet and will meet August 2014 to finalise the Guideline. The Guideline will then be sent to the NSW Surgical Services Taskforce for endorsement. <p>Launch of the guideline is scheduled for September 2014.</p>	<p>Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation</p>



LEGISLATIVE ASSEMBLY
PUBLIC ACCOUNTS COMMITTEE

RECOMMENDATION	ACCEPTED OR REJECTED	ACTIONS TO BE TAKEN	DUE DATE	STATUS (completed, on track, delayed) and COMMENT	RESPONSIBILITY (Section of agency responsible for implementation)
1.1	Accepted	The Agency for Clinical Innovation and Ministry of Health are in the planning phase for the development of best practice guidelines for operating theatre management and governance – one of the key recommendations of this Audit report	30 June 2014	As above in 1. Status: Partially completed and Ongoing	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation
1.2	Accepted	The ACI and Ministry of Health are in the planning phase for the development of best practice guidelines for operating theatre management and governance – one of the key recommendations of this Audit report	30 June 2014	As above in 1. Status: Partially completed and Ongoing	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation
1.3	Accepted	The ACI and Ministry of Health are in the planning phase for the development of best practice guidelines for operating theatre management and governance – one of the key recommendations of this Audit report	30 June 2014	Following the Operating Theatre Workshop in September 2013, Expression of Interests were called for clinicians to join working groups which will collaborate to develop a set of operating theatre indicators which can be used to measure efficiency and to develop operating theatre practice guidelines. The Surgery Efficiency Workshop Outcomes: <ul style="list-style-type: none"> The formation of working parties specific to the issues of Operating Theatre Efficiency – Leadership & Governance Efficiency measures & Data Inventory Costing, including ABF Issues Model of Care – Perioperative Services 	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation



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1.4	Accepted	The ACI and Ministry of Health are in the planning phase for the development of best practice guidelines for operating theatre management and governance – one of the key recommendations of this Audit report	30 June 2014	The working group membership was established and the first two workshops occurred in February and March of 2014. Status: Partially completed and Ongoing	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation
2.	Accepted	The ACI and Ministry of Health are in the planning phase for the development of best practice guidelines for operating theatre management and governance – one of the key recommendations of this Audit report	30 June 2014	As above in 1.3 Status: Partially completed and Ongoing	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation
2.1	Accepted	NSW Health has made significant advances in its information management capacity and capability in recent years. This includes state-wide implementation of a range of clinical information systems, electronic medical records and operating theatre management systems. These operational, clinical systems offer a wealth of data that can be analysed and reported to clinicians and managers to guide their quality and efficiency improvement efforts. Recent developments of the state-wide Enterprise Data Warehouse, which includes daily feeds from hospitals operating theatre management systems,	30 June 2014	As above in 1. Requirements gathering for Operating Theatre Management Reports at the State, LHD and Facility level commenced on 26 September 2013. Completed in May 2014 Operating Theatre Dashboards and Operating Theatre Activity Summaries have been built by MoH and are undergoing testing. Once testing is completed they will be reviewed by ACI. (see attached - powerpoint presentation on Operating Theatre Dashboards) The Operating Theatre Dashboards and Operating Theatre Activity Summaries have been built and are currently undergoing testing. Key action undertaken included: • The build of the reports commenced in October 2013.	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting



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RECOMMENDATION	ACCEPTED OR REJECTED	ACTIONS TO BE TAKEN	DUE DATE	STATUS (completed, on track, delayed) and COMMENT	RESPONSIBILITY (Section of agency responsible for implementation)
		will enable a range of performance reports to be developed and delivered to local decision-makers. This will include an extended set of indicators as recommended in this audit report.		<p>Data fields available in the NSW Health state-wide Enterprise Data Warehouse 'EDWARD' were reviewed against Appendix 6 of the Audit office report to determine which of the recommended measures are potentially reportable in EDWARD (Enterprise Data Warehouse for Analysis, Reporting & Decision Support)</p> <ul style="list-style-type: none"> • Surginet is designed to capture information at the Local Health Districts. The Agency for Clinical Innovation together with the Ministry of Health reviewed the Key Performance Measures and Targets for Operating Theatre sourced from Surginet in accordance with the recommendations proposed by the Audit Office. • As at 31 March 2014 Operating Theatre Key Performance Indicators and Operating Theatre Efficiency Dashboards for all LHD's and facilities have been built by the Ministry using EDWARD and are currently being evaluated by the Agency for Clinical Innovation. The build of detailed Operating Theatre Efficiency Reports commenced in April of 2014 and is currently being tested. <p>Status: Completed and ongoing</p>	
2.2	Accepted	Refer to above.	30 June 2014	<p>Completed in May 2014 Operating Theatre Dashboards and operating Theatre Activity Summaries have been built by MoH and are undergoing testing. Once testing is completed they will be reviewed by ACI.</p> <p>Key activity to progress these dashboards and summaries has included:</p> <ul style="list-style-type: none"> • Development of a range of reports by the Surginet team which addressed some of the local reporting requirements. • Within the EDWARD implementation program, requirements gathering for Operating Theatre Management Reports at the State, LHD and Facility level commenced on 26 September 2013. 	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting



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<p>2.3 education programs to build awareness of how efficiency indicators can be assessed and used to allow more meaningful efficiency monitoring and reporting</p>	<p>Accepted</p>	<p>Hospital Visit Program In early 2013, the Ministry's Surgery Team embarked on a program of planned visits to NSW hospitals that provide surgical services. The aim of this program is to provide practical advice and coaching for LHD staff to deliver best practice in processes that impact on surgical services, including utilisation of operating theatres.</p> <p>Clinical Redesign Program The ACI continues to conduct a Surgery Redesign Training Program (a one week dedicated training program) that provides LHD staff with the practical skills to implement changes in their workplace. The attendees come with a specific surgery project that is worked through during the week. Projects cover any aspect of the surgical patient journey including Operating Theatre efficiency.</p>	<p>30 June 2014</p>	<p>As at 31 March 2014 Operating Theatre Key Performance Indicators and Operating Theatre Efficiency Dashboards for all LHDs and facilities have been built (see 2.1 above).</p> <p>Status – Completed and Ongoing</p> <p>Both the Ministry of Health and Agency for Clinical Innovation are working together on education programs as follows:</p> <ul style="list-style-type: none"> Hospital Visit Program As at June 2014, approximately 33 hospitals visited and reviewed against Surgical Self Assessment Checklist. Verbal and Written feedback provided to LHD Chief Executives and local management. These hospital visits will be ongoing and well received by staff of hospitals. <p>A survey of the MoH visits will be undertaken in September 2014.</p> <ul style="list-style-type: none"> Clinical Redesign Program Surgery Redesign Program conducted in May 2013 and June 2014. Support provided to project leads by local Redesign Leader and Agency for Clinical Innovation. <p>Fifteen (15) participants attended the June 2014 Surgery Redesign Training Program. The training program has been running since 2011, previous program evaluation was undertaken in December 2013. The evaluation report is available at : http://www.aci.health.nsw.gov.au/data/assets/pdf_file/0013/20711/Surgery_Redesign_Training_Program_-_Evaluation_Report.pdf</p> <p>A web page is to be developed on the Surgery Redesign Training Program by December 2014.</p> <ul style="list-style-type: none"> Communication and Sharing of Best Practice and Innovation <ul style="list-style-type: none"> Surgery News continues to be published bi monthly Surgery Managers teleconference conducted monthly NEST workshop conducted in February 2013 (MoH) 	<p>Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical innovation</p>



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2.4	Accepted	<p>Sharing of lessons and practice innovations between LHDs NSW Health has a number of different resources to assist in the sharing of best practice. These include a regular surgery managers' teleconference, a bi monthly newsletter Surgery News, resources on the 'Australian Research Centre for Healthcare Innovations' (ARCHI) website and specific workshops that promote efficiency.</p>	30 June 2014	<ul style="list-style-type: none"> ▪ Theatre Efficiency Workshop September 2013. ▪ Redesign Newsletter published bi monthly ▪ ACI Clinician Connect published bi monthly ▪ ACI has presented at the 2014 Australian Confederation of Operating Room Nurses Conference and Ministry presented at the 2014 NSW Operating Theatre Association Conference <p>Status – Completed and Ongoing</p>	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation
3.	Accepted	<p>Access to Performance Information NSW Health has made significant advances in its information management capacity and capability in recent years. This includes state-wide implementation of a range of clinical information systems, electronic medical records and operating theatre management systems. These operational, clinical systems offer a wealth of data that can be analysed and reported to clinicians and managers to guide their quality and efficiency improvement efforts. Recent developments of the state-wide Enterprise Data Warehouse, which includes daily</p>	30 June 2014	<p>As at 31 March 2014 Operating Theatre Key Performance Indicators and Operating Theatre Efficiency Dashboards for all LHDs and Facilities have been built (see response in 2.1).</p> <p>Requirements gathering for Operating Theatre Management Reports at the State, LHD and Facility level commenced on 26 September 2013.</p> <p>The ACI is currently reviewing the extended set of indicators through workshops. Wherever possible, MoH shall include the agreed output of these workshops in the EDWARD Operating Theatre Reporting platform.</p> <p>Status – Partially complete and Ongoing</p>	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting



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		feeds from hospitals' operating theatre management system, will enable a range of performance reports to be developed and delivered to local decision-makers. This will include an extended set of indicators as recommended in this Audit Report.			
4	Accepted	As part of the implementation of activity based funding, the Ministry and the LHDs, should by 30 June 2014, ensure that performance frameworks used include mechanisms to:	June 2014		
4.1	Accepted	<ul style="list-style-type: none"> monitor the relationship between additional funding and additional activity to deliver targets at LHD and hospital levels, for example, increased elective surgery activity levels 	30 June 2014	<p>To monitor the relationship between additional funding and activity to delivery targets at LHD, regular performance meetings are conducted with System Relationship Directors of the Ministry. This Branch of the Ministry develops and maintains the NSW Health Purchasing Framework, NSW Health Performance Framework, Local Health District Service Agreements and Service Compacts with the Pillars and other health agencies. It supports and monitors the performance of Health Services by working in close partnership with health service executives, senior managers and clinicians as well as other parts of the Ministry and the Pillars.</p> <p>Status: Completed and Ongoing</p>	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting
4.2	Accepted	<ul style="list-style-type: none"> regularly evaluate the impact of theatre efficiency initiatives on the levels of elective surgery and other efficiency measures (page 26). 	30 June 2014	<p>NSW Health has a number of resources and processes for regularly evaluating the impact of theatre efficiency initiatives. These include</p> <ul style="list-style-type: none"> Surgical Services Taskforce (SST) Dashboard Regular performance meetings with System Relationship Directors (MoH) The MoH and the ACI continue provide Ad Hoc investigation into specific system issues that affect Surgery efficiency. <p>Status: Completed and Ongoing</p>	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting
5.	Accepted	The definition and measurement of	30 June	The Ministry of Health has developed a State Wide Reporting	Ministry of



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30 June 2014, improve their monitoring of the extent that the physical capacity of operating theatres is used and the constraints on greater use. Measures should allow comparison by theatre of actual hours used, booked hours and funded hours, and allow monitoring of the number of surgical procedures planned and undertaken (page 24)		operating theatre efficiency is complex and involves the analysis of many elements in the surgical patient journey. The approach by the Ministry of Health, ACI and LHDs/SHNs is to improve processes not only within operating theatres but across all other related areas that impact on the operating theatre efficiency. These include the surgical booking office, preadmission services and the models of care that a hospital has adopted to admit and discharge patients for their episode of care.	2014	Platform that includes Operating Theatre Efficiency Measures. These measures are currently being reviewed by the ACI together with MoH and include: <ul style="list-style-type: none"> • Elective Surgery Cancellations on Day of Surgery • Elective Surgery Day of Surgery Admissions • Elective Theatre Sessions Theatre Utilisation • Emergency Immediate Life Threatening (within 15 minutes) • Emergency Life Threatening (within 1 hour) • Emergency Non Critical, non-emergent, urgent (within 24 hours) • Emergency Organ/Limb Threatening (within 4 hours) • Emergency Semi Urgent, Not Stable for Discharge (within 72 hours) • First Case on Time Theatre Performance (Elective) • Number of Theatre Attendances Status: Completed and Ongoing	Health: System Purchasing and Performance – Health System Information and Reporting
6. LHDs supported by the Ministry and the Agency for Clinical Innovation should, by 30 June 2014:	Accepted		30 June 2014		
6.1 regularly monitor the extent to which theatres are used for non-surgical procedures	Accepted		30 June 2014	The Operating Theatre Dashboards and Operating Theatre Activity Summaries have been built by Ministry. Within the functionality of this system the Ministry and LHDs (including facilities) will be able to actively monitor non-surgical procedures performed in operating theatre units. Status: Partially complete and Ongoing	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting
6.2 establish plans for minimising the use of operating theatres for non-surgical procedures, based on considerations such as patient safety, availability of staff and equipment, the co-location of services and	Accepted		30 June 2014	To establish plans for minimising the use of operating theatres for non-surgical procedures, the following processes have been actioned: <ul style="list-style-type: none"> • Is a consideration for all new build and redevelopments • Principles for assessment of non surgical load will be included in the Guidelines 	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting

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benefit cost analysis (page 25).				<ul style="list-style-type: none"> A review of all sites re procedure room availability and use of theatres for non-surgical procedures Determine options for change at each site Discuss options with the facility planning branch. <p>Status: Completed and Ongoing</p>	
7. LHDs supported by the Ministry should, by 30 June 2014:	Accepted		30 June 2014		
7.1	Accepted	<p>Improvements in Costing Information</p> <p>NSW Health is entering the second year of its implementation of the new Activity Based Funding (ABF) model, the aim of which is to transparently link the volume of health services provided to patients with the funding that health providers (LHDs and SHNs) receive for these services. This includes surgical services and, within that, operating theatres as one of the key inputs into the surgical activity. Progressive implementation of ABF has already resulted in improved quality of activity and costing data collected by hospitals and LHDs/SHNs. It is expected that these improvements will continue in future years, enabling a more in-depth understanding of service outputs and outcomes as well as specific cost components of each service stream. The report's recommendations are very much aligned with the general direction of NSW Health's funding reform and ABF as its key tool.</p>	30 June 2014	<p>The Agency for Clinical Innovation has partnered with the Activity Based Funding (ABF) Taskforce and St George Hospital to undertake a pilot site for a bottom up costing exercise of the operating theatres. The Wollongong University has completed work on a literature scan on current costing models for operating theatres.</p> <p>A number of specific patient journeys have been process mapped including elective and emergency journey and cancellations of surgery. Operating Theatre costs have been identified and a cost template has been completed so that Theatre managers can identify costs by equipment and staff.</p> <p>Status: Partially complete and Ongoing</p>	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation
7.2	Accepted	<ul style="list-style-type: none"> complete an initial analysis of variations in the costs of 	30 June 2014	As above in 7.1	Ministry of Health: System



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	RECOMMENDATION	ACCEPTED OR REJECTED	ACTIONS TO BE TAKEN	DUE DATE	STATUS (completed, on track, delayed) and COMMENT	RESPONSIBILITY (Section of agency responsible for implementation)
	procedures, both within and between hospitals and LHDs, to identify and address drivers of inefficiencies				<u>Status:</u> Partially complete and Ongoing	Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation
7.3	<ul style="list-style-type: none"> Incorporate cost benchmarks and measures into the revised suite of efficiency indicators recommended above (page 29) 	Accepted		30 June 2014	As above in 7.1 <u>Status:</u> Partially complete and Ongoing	Ministry of Health: System Purchasing and Performance – Health System Information and Reporting and Agency for Clinical Innovation



OPERATIONAL PERFORMANCE ENTERPRISE REPORTING APPLICATION

EBI Program

EDWARD Business Implementation Program

OPERA

(Operational Performance Enterprise Reporting Application)

Operating Theatre Dashboards

May 2014





EDWARD – Statewide Reporting Framework



Health

INTEGRATED REPORTING DELIVERY PLATFORM

SCORECARDS
KPI
Trend Graphs, Listing Reports, Sparklines

OPERATIONAL FOCUS

CONTROL PANEL
Data Visualisation via
KPI, Contextual & Point of Interest Dashboards & Activities Summaries

DETAIL REPORTS
Detail including unit record (patient) data

ORGANISATION PERSPECTIVE

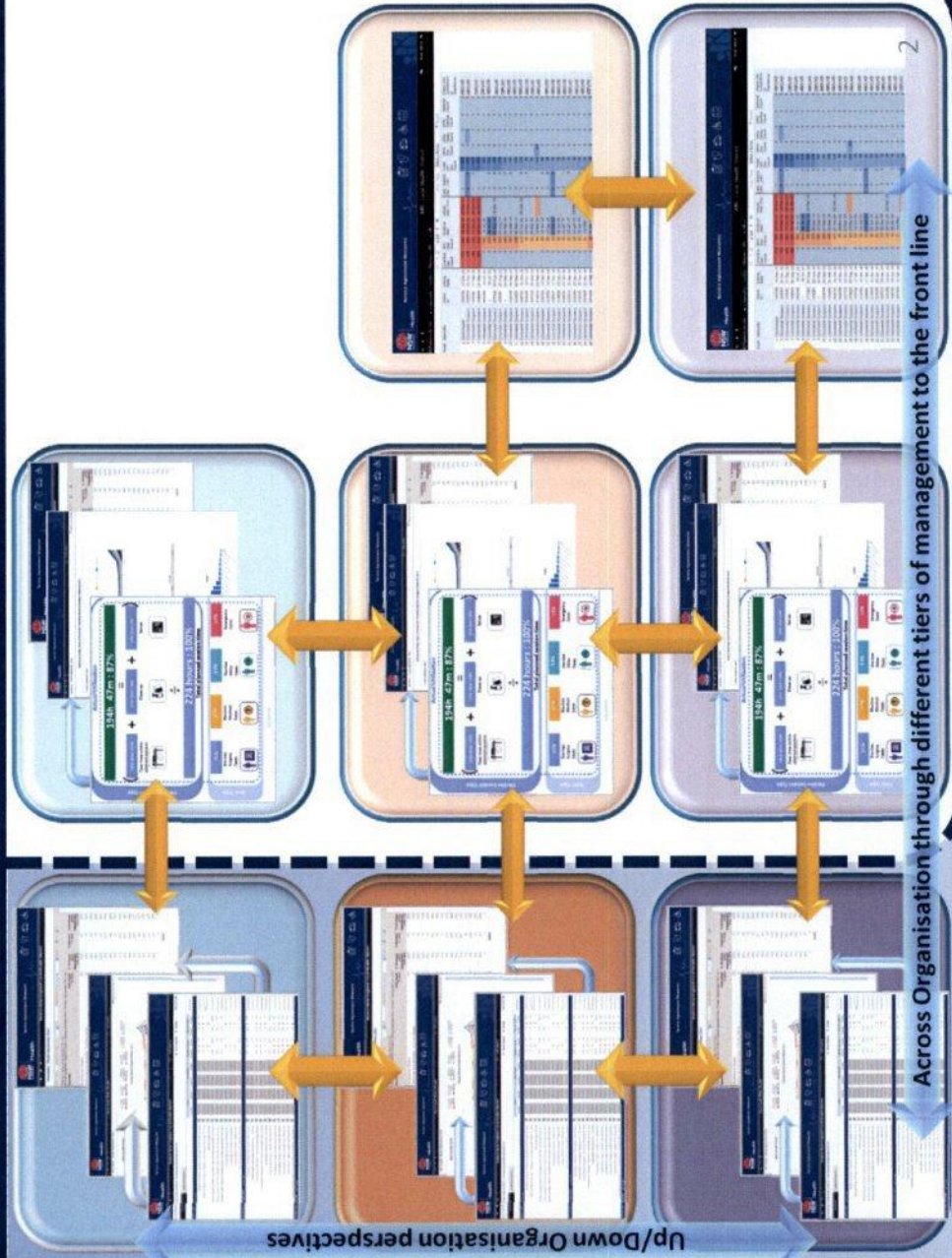
State



LHD



Facility & Service Unit



Up/Down Organisation Perspectives

Across Organisation through different tiers of management to the front line



OPERA Launch Page

NSW GOVERNMENT | Health

OPERA
Powered by EDWARD

Emergency

Wait List

Operating Theatre

Emergency Department

KPI - Key Performance Indicators

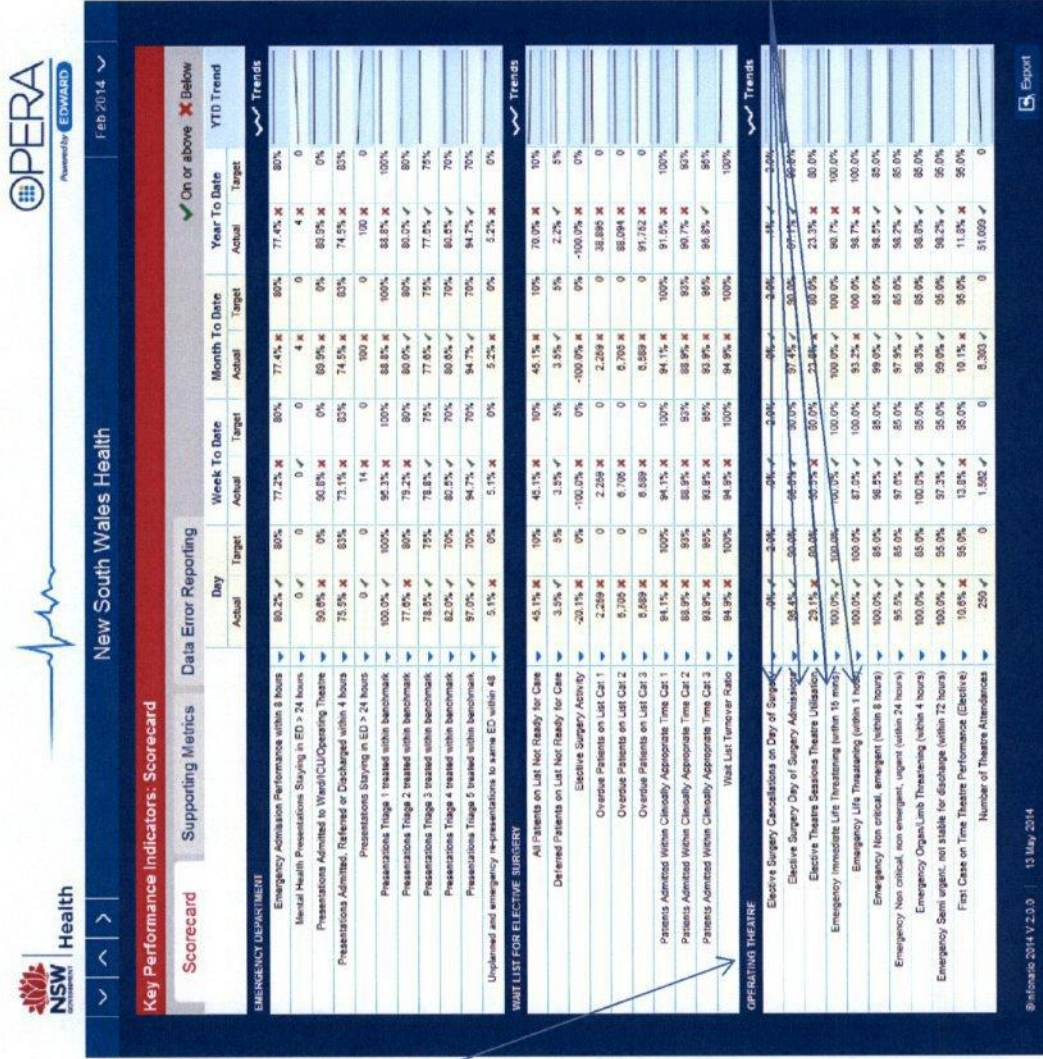
Other Links

- > Australian Resource Centre for Healthcare Innovations (ARCHI)
- > Clinical Information Access Portal (CIAP)
- > Department of Health & Ageing
- > Health Infrastructure
- > HealthShare NSW
- > EEO Report (PDF)
- > NSW Government Procurement
- > NSW Health
- > NSW Health Annual Report 2011/12
- > Stafflink
- > Support for carers in NSW
- > Total Apparel Management System (TAMS)

OPERA KPI Scorecard



NSW Health Service Agreement Measures/KPIs including Operating Theatre



FBI Program

KPIs are all links to Dashboards/Control Panels



OPERA KPI Scorecard

Ability to Navigate KPIs by LHD, Facility and Month



NSW Health

New South Wales Health

Feb 2014

On or above ✓ Below ✗

KPI	Month To Date		Year To Date		YTD Trend
	Actual	Target	Actual	Target	
Central Coast Local Health District	80.2%	80%	77.6%	80%	80%
Far West Local Health District	0	0	4	0	4
Hunter New England Local Health District	90.6%	0%	89.9%	0%	89.9%
Illawarra Shoalhaven Local Health District	75.5%	83%	74.5%	83%	83%
Mid North Coast Local Health District	0	0	100	0	100
Murrumbidgee Local Health District	100.0%	100%	88.8%	100%	100%
Nepean Blue Mountains Local Health District	77.6%	80%	80.0%	80%	80%
Northern New South Wales Local Health District	78.5%	75%	77.8%	75%	75%
Northern Sydney Local Health District	82.0%	70%	80.5%	70%	70%
South Eastern Sydney Local Health District	87.0%	70%	84.7%	70%	70%
South Western Sydney Local Health District	5.1%	0%	5.1%	0%	0%
Southern New South Wales Local Health District	45.1%	10%	45.1%	10%	10%
Sydney Local Health District	3.5%	5%	3.5%	5%	5%
The Sydney Children's Hospitals Network (Randwick and Westmead)	-20.1%	0%	-100.0%	0%	0%
Western New South Wales Local Health District	2.259	0	2.259	0	0
Western Sydney Local Health District	6.705	0	6.705	0	0
Presentations Triage 3 treated within benchmark	6.589	0	6.589	0	0
Presentations Triage 4 treated within benchmark	84.1%	100%	84.1%	100%	100%
Presentations Triage 5 treated within benchmark	88.9%	93%	88.9%	93%	93%
Presentations Triage 6 treated within benchmark	93.9%	95%	93.9%	95%	95%
Presentations Triage 7 treated within benchmark	84.9%	100%	84.9%	100%	100%

WAIT LIST FOR ELECTIVE SURGERY

Category	Actual	Target	Trend
All Patients on List Not Ready for Care	45.1%	10%	35.1%
Elective Surgery Admit	-20.1%	0%	-100.0%
Overdue Patients on List Cat 1	2.259	0	2.259
Overdue Patients on List Cat 2	6.705	0	6.705
Overdue Patients on List Cat 3	6.589	0	6.589
Patients Admitted Within Clinically Appropriate Time Cat 1	84.1%	100%	84.1%
Patients Admitted Within Clinically Appropriate Time Cat 2	88.9%	93%	88.9%
Patients Admitted Within Clinically Appropriate Time Cat 3	93.9%	95%	93.9%
Wait List Turnover Ratio	84.9%	100%	84.9%

OPERATING THEATRE

Category	Actual	Target	Trend
Elective Surgery Cancellations on Day of Surgery	0%	2.0%	-2.0%
Elective Surgery Day of Surgery/Admissions	96.4%	90.0%	6.4%
Elective Theatre Sessions Theatre Utilization	28.1%	80.0%	-51.9%
Emergency Immediate Life Threatening (within 15 mins)	100.0%	100.0%	0%
Emergency Life Threatening (within 1 hour)	100.0%	100.0%	0%
Emergency Non critical, emergent (within 6 hours)	100.0%	85.0%	15.0%
Emergency Non critical, emergent (within 8 hours)	95.1%	85.0%	10.1%

FBI Program



Hunter New England Local Health District

Feb 2014

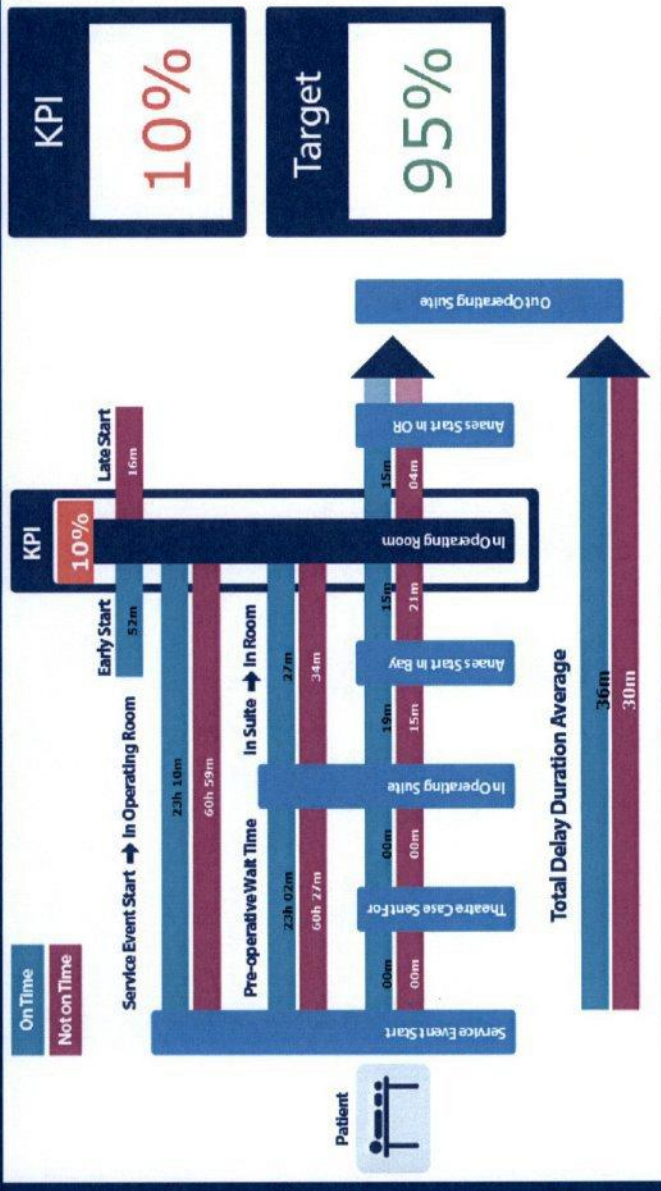
On or above ✓ Below ✗

KPI	Month To Date		Year To Date		YTD Trend
	Actual	Target	Actual	Target	
Armidale Hospital	84.1%	80%	75.9%	80%	75.9%
Barraba Multi Purpose Service	0	0	0	0	0
Bingara Multi Purpose Service	96.7%	0%	96.7%	0%	96.7%
Boggabri Multi Purpose Service	77.3%	83%	74.9%	83%	83%
Burwood Community Hospital	0	0	0	0	0
Cowamba Multi Purpose Service	100.0%	100%	100.0%	100%	100%
Dumaresq District Health Service	78.1%	80%	77.1%	80%	80%
Dungog District Health Service	77.5%	70%	74.8%	70%	70%
Erina District Health Service	97.4%	70%	84.9%	70%	70%
Erina Multi Purpose Service	5.9%	0%	5.9%	0%	0%
Erina Hospital	48.6%	10%	48.6%	10%	10%
Erina District Health Service	3.1%	5%	3.1%	5%	5%
Erina Community Hospital	100.0%	0%	100.0%	0%	0%
Erina District Health Service	173	0	173	0	0
Erina District Health Service	471	0	471	0	0
Erina District Health Service	433	0	433	0	0
Erina District Health Service	86.8%	100%	86.8%	100%	100%
Erina District Health Service	87.5%	83%	87.5%	83%	83%
Erina District Health Service	95.0%	80%	95.0%	80%	80%
Erina District Health Service	88.2%	100%	88.2%	100%	100%
Erina District Health Service	2.0%	2.0%	2.0%	2.0%	2.0%
Erina District Health Service	80.9%	80.0%	80.9%	80.0%	80.0%
Erina District Health Service	100.0%	100.0%	100.0%	100.0%	100.0%
Erina District Health Service	100.0%	100.0%	100.0%	100.0%	100.0%
Erina District Health Service	85.9%	85.0%	85.9%	85.0%	85.0%
Erina District Health Service	85.0%	85.0%	85.0%	85.0%	85.0%

Operating Theatre Control Panel: First Case on Time



New South Wales Health First Case on Time Theatre Performance (Elective) Dashboard



Activity Summaries
 First Case in Session - On Time Performance - Activity Summary (FRS AS1)
 First Case in Session - Delay Reason Group - Activity Summary (FRS AS2)
 First Case in Session - Activity Summary (FRS AS3)

Related Dashboards
 First Case on Time Theatre Performance (Elective) - By Delay Reason Group (FRS KDB2)
[Details Report](#)

First Case on Time: Average Delay by Reason Group



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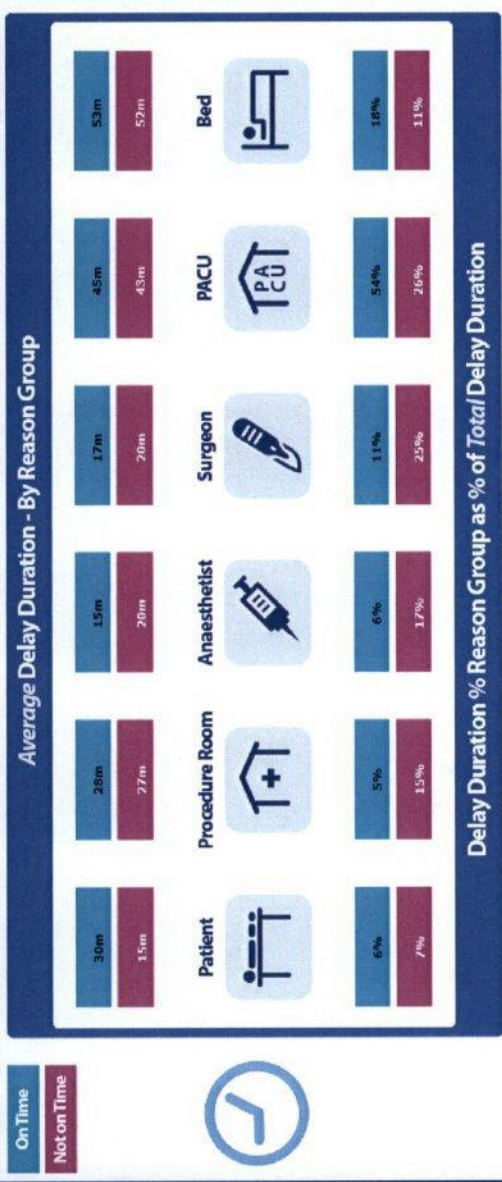


Feb 2014

OT-FTR-KDB2

New South Wales Health

First Case on Time Theatre Performance (Elective) Dashboard



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Elective Surgery: Day of Admission Dashboard



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Elective Surgery Day of Surgery Admissions Dashboard

Admissions

Elective Surgery Cases



Non DOSA: 24 : 3%

Day Only: 0 : 0%

KPI

DOSA: 905

Total Admissions: 929

= 97%

Theatre Case Treated: 2418 : 100%

Separation Mortality: 0 : 0%

Elective Medical Cases



17 : 3%

0 : 0%

465 : 97%

502

Elective Other Cases



39 : 31%

0 : 0%

88 : 69%

127

Elective Unknown

15 : 3%

0 : 0%

845 : 98%

860

KPI

97%

Target

90%

Details Report



Elective Theatre Sessions: Theatre Utilisation Dashboard



New South Wales Health

Feb 2014

OT-FR3-K06

Elective Theatre Sessions Theatre Utilisation Dashboard

KPI

24%

Target

80%

Elective Session Utilisation

3,573h 12m : 24%

1,051h 40m : 7%

Outside Session Case Time

4,624h 52m : 31%

Actual Case Time

15,028h 50m : 100%

Planned Session Time

Non-Patient Session Time

11,455h 38m : 76%

Clean up 00m : 0%

Set up 00m : 0%

Case Turnover 10,102h 28m : 67%

Other ?

Total Non-Patient Session Time 76%

Case Type

- 5% Elective Surgery Cases
- 2% Elective Medical Cases
- 0% Elective Other Cases
- 12% Emergency Cases

4% Elective Cases Unknown

Activity Summaries

Planned Session Activity by Type - Activity Summary (FR3 AS1)

Theatre Session Type by Case - Activity Summary (FR3 AS2)

Theatre Session Type by Case Duration and Count - Activity Summary (FR3 AS3)

[Details Report](#)

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Thank You