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CABINET DECISION

Brisbane, 13 October 2003

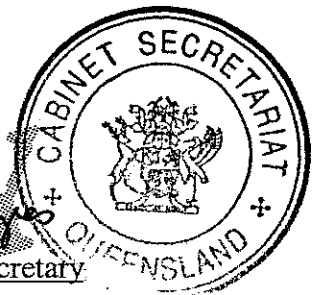
Decision No.: 4499, (Submission No.: 3633)

TITLE: Progress Report on the Waiting List Reduction Strategy; Medical Workforce Issues; and Queensland Health Budget Status

CABINET decided:

That following consideration, the contents of the submission be noted.

CIRCULATION: Implementation Responsibility
Nil.
Departmental Records
Department of the Premier and Cabinet.
Department of Health and copy to the Minister.
Perusal and Return
All other Ministers.



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COVER SHEET

TITLE

Progress Report on the Waiting List Reduction Strategy; Medical Workforce Issues; and Queensland Health Budget Status

MINISTER

Minister for Health and Minister Assisting the Premier on Women's Policy

OBJECTIVE

To inform Cabinet on the progress of the Waiting List Reduction Strategy; Medical Workforce Issues; and Queensland Health Budget Status.

SUMMARY

The Waiting List Reduction Strategy (the Strategy) is a major commitment of the Government. The Surgical Access Service (SAS) within Queensland Health is responsible for the implementation and reporting of the nine elements of the Strategy.

The target for Category 1 long waits has been maintained as at 1 July 2003 with 2.3% of Category 1 patients waiting longer than the recommended time (30 days) for surgery. This is below the State target of 5% and compares with 2.1% at 1 April 2003 and 3.4% at 1 July 2002.

At 1 July 2003, 5.3% of Category 2 patients (semi-urgent) waited longer than the recommended time (90 days) for surgery. This is slightly above the State target of 5% and compares with 7.3% at 1 April 2003 and 10.6% at 1 July 2002. It is also the best result since the collection of waiting times data began in 1996.

At 1 July 2003, 38.2% of Category 3 patients on the waiting lists of the 31 reporting hospitals waited longer than one year for surgery. This compares with 39.6% at 1 April 2003 and 37.6% at 1 July 2002.

Pre-election commitments have provided an additional \$20 million for extra elective surgery throughput over two years beginning 1 July 2001 and ending 30 June 2003. An additional \$10 million has been provided in the 2003-04 budget to continue this commitment.

Compared with 2000-01, the extra \$10 million treated an additional 4,400 patients in 2001-02 and an additional 4,348 patients in 2002-03.



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As part of the 2003-04 State Budget process, the Cabinet Budget Review Committee (CBRC) approved a new funding model for Queensland Health to apply from 2003-04, based on the principles of population growth, non-labour cost escalation and a service enhancement factor. In regards to the elective surgery enhancement initiative, CBRC endorsed that in future years (beyond 2003-04 financial year) this initiative will be funded within the new funding model.

Although, the \$10 million commitment for the elective surgery enhancement strategy has been continued for the 2003-04 financial year, Cabinet should note that the \$10 million provided will not purchase the same quantum of surgery as was initially purchased in July 2001. Medical costs have increased significantly since 2001 and the funding for the initiative has not been indexed to match the increased costs. In addition, when this strategy was initially commenced, elective surgery was funded at a marginal rate. Using the marginal rate for elective surgery is not sustainable in the long term.

Issues relating to the relative purchasing power of funds allocated for the elective surgery enhancement strategy and other possible options for improving access to elective surgery will be further examined by Queensland Health in conjunction with officers from the Department of the Premier and Cabinet and Queensland Treasury.

RESULTS OF CONSULTATION

- Is there agreement? YES. See paragraphs 52 to 57 of body of submission.

RECOMMENDATION

It is recommended that following consideration Cabinet note the submission.


WENDY EDMOND MP
MINISTER FOR HEALTH
MINISTER ASSISTING THE PREMIER ON WOMEN'S POLICY

7/10/2003


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BODY OF SUBMISSION

OBJECTIVE

1. To inform Cabinet on the progress of the Waiting List Reduction Strategy.

BACKGROUND

• Context

2. In July 1998, the Government gave a commitment to significantly expand previous strategies to reduce waiting times in public hospitals in Queensland. The Waiting List Reduction Strategy involves an eight-point plan to cut waiting lists and includes a commitment to:
 - i) publish the waiting list for each hospital every three months so that money can be channelled to where the real need is;
 - ii) supply general practitioners with quarterly briefings on waiting lists to help them when referring people for surgery;
 - iii) even out waiting lists by moving people in appropriate cases to a hospital where their procedure can be performed more speedily;
 - iv) provide additional funding of \$6.0 million per year to finance extra surgery for complex procedures;
 - v) work with the specialist colleges to expand training places for new specialists to meet the demand of the next century;
 - vi) use holiday times to keep operating theatres working for the benefit of those waiting for surgery;
 - vii) benchmark waiting times for accident and emergency departments to reduce excessive waits; and
 - viii) increase levels of day surgery across the State to reduce the length of waiting times for elective surgery.
3. A further element was added to the eight-point plan, being the collection of waiting times for specialist outpatient appointments to assist in clinical prioritisation for surgery and appointments.
4. In January 2001, the Government's election commitments provided for the enhancement of surgical services in public hospitals, including:
 - i) injecting an additional \$20 million over two years, into funding for elective surgery so that more people can have their operations faster;
 - ii) continuing to work towards a target of 50% of elective surgery performed as day surgery and setting a target of 80% for day of surgery admissions within two years;
 - iii) establishing a central elective surgery booking bureau that will be more patient-focused and more responsive to providing services to people where they live; and


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iv) strengthening clinical protocols to ensure appropriate and timely treatment of patients based on clinical need.

- **Previous consideration by Cabinet**

5. Cabinet (Decision Nos. 681, 12 July 1999; 1152, 20 September 1999; 1553, 13 March 2000; 2106, 2 October 2000; 2555, 12 June 2001; 2856, 1 October 2001; 3094, 18 February 2002; 3158, 12 August 2002; and 3853, 9 December 2002) has periodically noted reports on progress of the Waiting List Reduction Strategy.

ISSUES

Waiting List Reduction Strategy

Project Update

Publication of the Quarterly Elective Surgery Waiting List Report

6. Thirty-one public hospitals contribute information to the *Elective Surgery Waiting List Report* representing approximately 95% of the elective surgery activity performed in Queensland public hospitals.

7. The open publication of the waiting list data allows referring practitioners and patients access to the elective surgery waiting lists at Queensland Hospitals. This, in turn, allows patients to be referred to those hospitals with shorter waiting lists in particular specialties.

Updating of General Practitioners

8. The Queensland Health Internet site has been enhanced to provide information for Patients and for General Practitioners as well as common questions that patients may ask their General Practitioner or Specialist.

Transfer of Patients to Even Out Waiting Lists

9. Elective Surgery Coordinators and Elective Surgery Liaison Officers at reporting hospitals negotiate transfers of patients between hospitals on a case by case basis.

Better Use of Operating Theatres During Holidays

10. Surgical sessions during holiday periods continue to be monitored by the General Manager (Health Services).


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Emergency Services Strategy

11. Twenty-one hospitals with an emergency department role delineation of four or greater are participating in the benchmarking program and supply performance data on a monthly basis.
12. Allocations for the Emergency Services Strategy during 2002-03 are included in Attachment 1. This includes an additional \$2 million for extra emergency department doctors which has been provided in the 2002-03 budget. Allocation of the \$2.2 million included in the 2003-04 budget will be included in subsequent submissions.
13. Waiting times performance for Queensland emergency departments has improved for most patients during 2002-03 (see Attachment 2, Table 1):
 - For Australasian Triage Scale (ATS) Categories 1, 2, 3 and 5, Queensland waiting times performance has improved during the June Quarter 2002-03, compared to the June Quarter 2001-02.
 - Waiting times performance in ATS Category 4 is steady compared to the same quarter of last year.
14. Evaluating emergency department waiting times performance against other States, Queensland performs comparably despite measuring performance by a more stringent method (see Attachment 2, Table 1):
 - For ATS Category 1 patients, Queensland matches performance reported in NSW and Victoria's most recently published data;
 - For ATS Category 2 patients, Queensland's performance is comparable to NSW and Victoria's most recently published data;
 - For ATS Category 3 patients, Queensland's performance is comparable to NSW, but is exceeded by Victoria's most recently published data; and
 - Queensland trails NSW in ATS Categories 4 and 5 (Victoria does not publish these data).
15. Access block data (waiting time from presentation to admission to an inpatient bed) indicates that Queensland continues to perform significantly better than other States (Attachment 2, Table 2).

Day Surgery and Day of Surgery Admission Performance

16. The day surgery target for elective surgery in Queensland public hospitals has been set at 50%. A day of surgery admission target of 80% within two years has also been established.
17. The day surgery target has been achieved, with 54.5% of cases being undertaken as same-day procedures in 2002-03 year to May (11 months). The day of surgery admission rate for the same period was 73.9%.



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18. Strategies being implemented to achieve further increases in the rate of day surgery and day of surgery admissions, include:

- implementation of a benchmarking process that compares day case rates, day of surgery admission rates and pre-operative length of stay across hospitals; and
- further development of theatre utilisation reporting within Queensland Health to provide comparative information that will identify inefficiencies in utilising operating theatres.

Specialist Outpatient Services

19. A monthly collection of specialist outpatient waiting times at the thirty-one reporting hospitals is continuing. This includes data on the total number of patients awaiting their initial appointment as well as waiting time until the next available appointment.

20. The available data indicates that the number of patients awaiting an initial specialist outpatient appointment increased slightly over the last twelve months (Attachment 2 Table 3).

Progress of Pre-Election Commitments

21. The additional \$10m per annum provided in 2001-02 and 2002-03 has been directed at addressing unmet demand at particular hospitals and in the following surgical specialties: General Surgery, Ophthalmology, Orthopaedics, Urology, Vascular, Ear Nose and Throat, Neurosurgery, Gynaecology and Plastic and Reconstructive Surgery.

22. Total elective surgery throughput for 2002-03 was down marginally compared with 2001-02 (-33 admissions), although up by 4.0% (4,348 admissions) compared with 2000-01.

Centralised Elective Surgery Waiting List Management

23. This has been progressed through:

- development of a centralised elective surgery waiting list database;
- development of audit criteria and audit processes for key indicators of elective surgery waiting list management;
- strengthening the coordination role of the Elective Surgery Coordinators and Elective Surgery Liaison Officers; and
- enhanced communication and consultation mechanisms.

Strengthened Clinical Protocols

24. The Government's commitment to strengthen clinical protocols is being progressed through the development of Policy and Procedure Guidelines for Elective Surgery Services, Specialist Outpatients Services and Emergency Department Services.



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Day Surgery and Day of Surgery Admission Performance

25. See paragraphs 16 to 18 above.

Performance Report*Waiting Times*

26. The target for Category 1 long-waits have been maintained as at 1 July 2003 with 2.3% of Category 1 patients waiting longer than the recommended time (30 days) for surgery. This is below the State target of 5% and compares with 2.1% at 1 April 2003 and 3.4% at 1 July 2002.

27. At 1 July 2003, 5.3% of Category 2 patients (semi-urgent) waited longer than the recommended time (90 days) for surgery. This is above the State target of 5% and compares with 7.3% at 1 April 2003 and 10.6% at 1 July 2002.

28. At 1 July 2003, 38.2% of Category 3 patients on the waiting lists of the 31 reporting hospitals waited longer than one year for surgery. This compares with 39.6% at 1 April 2003 and 37.6% at 1 July 2002.

29. Waiting times by Category from 1 July 1998 is presented in Attachment 2, Table 4.

30. The following hospitals reported greater than 5% 'long wait' Category 1 patients at 1 July 2003:

- Gladstone Hospital – 28.6% (8 patients)
- Gympie General Hospital – 14.3% (2 patients)
- Mount Isa Hospital – 5.3% (1 patient)
- Rockhampton Hospital – 8.3% (4 patients)

31. A high proportion of 'long wait' Category 2 patients on the waiting list was reported at 1 July 2003 at:

- Kingaroy Hospital – 28.6% (8 patients)
- Rockhampton Hospital – 12.0% (20 patients)

32. Significant issues impacting on waiting times and strategies adopted by Queensland Health to address these issues are provided in Attachment 3.

Elective Surgery Throughput


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33. Elective surgery throughput for the June Quarter 2002-03 has increased by 1.9% compared with the June Quarter of 2001-02.

34. There were 29,581 admissions recorded in the June Quarter of 2002-03, an increase of 557 admissions on the throughput recorded for the same quarter of 2001-02 (29,024 admissions).

Elective Surgery Specialties

35. The specialties with the largest number of patients waiting at 1 July 2003 were:

- General Surgery - 8,016 (compared with 8,933 at 1 July 2002);
- Orthopaedic Surgery - 7,082 (compared with 7,927 at 1 July 2002);
- ENT Surgery - 4,506 (compared with 4,465 at 1 July 2002); and
- Ophthalmology - 3,657 (compared with 4,435 at 1 July 2002).

36. Analysis of the number of 'long wait' patients and throughput by surgical specialty is contained in Attachment 4.

Medical Workforce Issues

37. Medical workforce problems are currently being experienced nationwide. The Australian Medical Workforce Advisory Committee (AMWAC) established by the Australian Health Minister's Advisory Council (AHMAC) advises on medical workforce issues, including workforce supply, distribution and future requirements. It recommends increases in training positions in Queensland in a number of specialist disciplines.

There is a limited supply of Australian graduates with vocational training places to be filled (1489 in 2003) exceeding Medical School output (1250 per annum).

38. The ACCC have reviewed an application by the Royal Australasian College of Surgeons (the College) for Authorisation under the Trade Practices Act 1974. In granting limited authorisation, the ACCC has imposed a range of reforms aimed at finding an appropriate balance between the need for the College to remain substantially involved in the setting of surgical training and assessment standards and the need for concerns about the College's processes to be addressed.

A number of the conditions give jurisdictions a role, and shared responsibility, in College decisions relating to training numbers; accreditation of hospitals and training posts; and assessment of overseas trained surgeons through nominating members of decision-making bodies.

Jurisdictions, through the Australian Health Workforce Officials Committee, are currently working with The College to implement the conditions of the determination.

Supply of Medical Specialists in Queensland

39. Full-time specialist vacancies in Queensland public hospitals remain steady as follows:

Full-time Specialist Vacancies

December 2002	24
February 2003	67.3
April 2003	25


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June 2003	13
August 2003	19

Visiting Medical Officer Vacancies

December 2002	5
April 2003	2
June 2003	0
August 2003	3

40. All figures since April 2003 are based on actual advertised vacancies.

Queensland Health Recruitment Initiatives

41. The strategies detailed below have been successful in reducing the overall numbers of vacancies and in placing specialists in rural areas where long term vacancies have occurred:

- incentives to attract full-time specialists to rural Queensland. Rural specialists receive 45% of base salary compared to 35% for metropolitan specialists as Option A under the limited right of private practice arrangements; free accommodation which is currently being upgraded through the capital works program; a communication package and private use of vehicles;
- changes in the way specialist positions are advertised (eg. total remuneration packages of \$200,000 per annum rather than stating basic salary);
- higher commencement pay rates for visiting specialists in rural areas;
- consultation with the various Colleges and the Commonwealth to extend the number of specialist training places in line with the Australian Medical Workforce Advisory Committee (AMWAC) reports;
- improvements to enhance the retention of doctors in rural areas (eg. provision of access to appropriate computer services, provision of increased levels of support staff such as secretaries, increased participation by specialist staff in resource allocation and administrative decision-making, increased professional development opportunities for specialists) are being addressed at the Health Service District level;
- The Centre for Overseas Trained Doctors (COTD) provides assessment, bridging and preparation for employment courses for Australian and New Zealand resident doctors trained overseas;
- Queensland Health supports the COTD through funding, providing medical observer positions in public hospitals and access to Queensland Health staff to assist with assessment and education programs; and
- In 2002, Queensland Health recruited more than 80 resident medical staff from doctors participating in the COTD programs.

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Training Posts

42. Queensland Health continues to work with the specialist colleges to increase specialist training places in line with AMWAC report recommendations.
43. Many of the additional training posts are achieved within existing resources by accreditation of previously unaccredited posts. Additional funding was provided in 2002/2003 for 10 new registrar posts in medical haematology at Princess Alexandra Hospital and Royal Brisbane Hospital, ENT at Royal Brisbane Hospital, anaesthetics at The Prince Charles Hospital and Royal Children's Hospital and radiology at Redcliffe, Ipswich, Gold Coast, The Prince Charles and Mater Children's hospitals.

Other

44. The establishment of the Queensland Health Skills Development Centre will provide a statewide resource to improve patient outcomes in Queensland through a multidisciplinary educational facility that specialises in the development, application and assessment of clinical procedural skills and communication, and is complemented by health care enhancement initiatives. The Centre will provide a range of facilities to support the education and training needs of health care professionals.

Budget Status

45. The (audited) operating result for Queensland Health at 30 June 2003 is \$11.049M surplus compared to the 2002-03 MPS estimate of \$4.545M surplus.
46. The final position for Capital Works Program is \$253.759M (which includes additional new initiative funding contributions) compared to the 2002-03 MPS estimate of \$248.097M.
47. The final position (total State) for Health Service Districts including Public Health is \$80.01M deficit which is offset by surpluses in State-wide Services and underspends due to timing of specific State-wide programs (State and Commonwealth).
48. Funding contributions from Treasury and Queensland Health have been distributed to all health service areas within the Department for the new award / enterprise bargaining agreement wage outcomes for nurses, non nurses and visiting medical officers. Funding negotiations are continuing with Treasury and it is likely that Treasury will increase Government's contribution in 2003-04 and forward years.
49. Attachment 5 demonstrates the variation in budgets for each health service district since the 1995/96 financial year. Whilst this table generally demonstrates an increase each year in district expenditure, it is not a reliable indication of actual expenditure in any particular health service district. Queensland Health does not publish health service district budget comparisons in any format as this data can be misinterpreted and misleading.



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50. Variations in actual expenditure within districts can arise due to programs being delivered centrally by state-wide services such as public health, pathology services, capital works and funds provided centrally to non-government organisations to deliver health services. Other variations occur due to technical adjustments, budget rollovers and service transfers.
51. Several requests have recently been received for the data contained in Attachment 5 and Queensland Health has resisted providing this information due to the possible misinterpretation and subsequent misuse of this information.

CONSULTATION

52. Formal consultation on the Waiting List Reduction Strategy has been through existing mechanisms within Queensland Health. These mechanisms include the Medical Superintendents Advisory Committee, the Elective Surgery Coordinators Group, the Emergency Services Specialist Advisory Panel, the Specialist Outpatient Advisory Committee, and the Operating Room Management Information System (ORMIS) Strategic Management Group.
53. Internally, consultation has occurred with Zonal staff, district managers and key medical and nursing personnel from the participating hospitals on the approach to enhancing emergency, outpatient and surgical services including theatre utilisation. In addition, visits to the participating hospitals have been conducted.
54. The Operating Theatre Review recently undertaken by the General Manager (Health Services) has initiated a process to ensure effective use of existing operating theatre capacity. A Senior Project Officer has been seconded to coordinate the implementation of recommendations outlined in the Review.
55. A Co-ordinated Care Trial is being undertaken through a tripartite arrangement between Queensland Health, the Brisbane North Division of General Practice, and the Commonwealth Department of Health and Ageing. The Surgical Access Service is contributing to this Trial through the provision of emergency department service utilisation and costing data.
56. External reviews have been conducted within two Southern Zone emergency departments to monitor processes and suggest improvements (refer Attachment 1).

RESULTS OF CONSULTATION

57. Consultation remains a major part of the Waiting List Reduction Strategy and mechanisms as outlined above continue to provide a major support role to the project.

PUBLIC PRESENTATION

58. Not proposed.



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CONSULTATION DETAILS

Agency

Department of the Premier
and Cabinet

Date

July 2003

Officer

Ros Walker

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Funding Allocations from Emergency Services Strategy Funds during 2002-03

Improving Emergency Department waiting times and access block are central elements of the Government's Health Policy and Queensland Health Executive directives.

\$5.0 million in recurrent funding was provided from 1999-00 to improve waiting times and access block as part of the Emergency Services Strategy. Of the \$5.0 million, \$3,383,100 is allocated on a recurrent basis, consisting of:

- \$3,156,000 for emergency medicine specialist and nursing staff positions;
- \$227,100 to support the Principal Zonal Clinical Coordinator positions.

Activities and funding allocations as part of the Emergency Services Strategy during 2002-03 included:

- i) Departmental Reviews – \$30,000 was utilised for the purpose of conducting a number of external departmental reviews. External reviews were conducted of Logan and Gold Coast Hospital emergency departments. These reviews have proven to be extremely useful in identifying best practice in emergency departments and areas for process improvements.
- ii) Neonatal and Perinatal Training Project - \$95,000 (part of \$200,000 approved over the period 2001 to 2003) was allocated to continuation of the project to develop and pilot a training program to improve emergency care of ill neonates and mothers at risk of preterm delivery.
- iii) Royal Flying Doctor Service (RFDS) – Funding of \$340,000 was allocated to support 2 Senior Medical Officer (SMO) positions within the Rockhampton RFDS. This is an ongoing arrangement by which these 2 positions are shared between the Rockhampton emergency department and the Rockhampton RFDS.
- iv) Emergency Department Best Practice Workshop – \$30,000 was used to conduct a statewide Emergency Department Best Practice Workshop in Brisbane. This workshop assisted in developing statewide strategies to improve emergency department performance. Participants included emergency department directors and nurse practice coordinators, district managers and medical superintendents.
- v) Emergency Department Information System - \$1,109,156 was allocated to commencing the establishment of a statewide emergency department information system in preparation for the phasing out of HBCIS. The emergency department information system was successfully implemented in the Gold Coast Hospital pilot site. A staged rollout of the system will continue during 2003-04.

The additional \$2.0m approved by Cabinet for 2002-03 has been allocated to provide an extra 16 medical officers and 2 nurses in a total of five districts across the State. The following allocations have been actioned:

- \$380,000 to the Redcliffe/Caboolture Hospitals to employ a total of four additional Principal House Officers (PHO's);
- \$180,000 to the Royal Children's Hospital to employ an additional paediatric emergency specialist (FACEM);
- \$550,000 to the Logan Hospital to employ an additional emergency specialist (FACEM), two registrars and two PHO's;
- \$400,000 to the Gold Coast Hospital to employ two additional registrars and an additional PHO, plus two additional nurses.
- \$490,000 to the Townsville Hospital to employ an additional two emergency specialists (FACEM's) and an additional registrar.



Summary Data for Emergency Departments, Outpatient Departments, and Elective Surgery

Table 1 – Emergency Department Waiting Times by Triage Category

ATS	Treatment Acuity	Target	QLD (a)		NSW (b)	VIC (c)
			Jun Qtr 2001/2002	Jun Qtr 2002/2003*	Year 2001/2002**	Year 2001/2002**
1: Resuscitation	Immediate	100%	99%	100%	100%	100%
2: Emergency	Within 10 Minutes	80%	72%	77%	78%	78%
3: Urgent	Within 30 Minutes	75%	57%	58%	57%	71%
4: Semi-urgent	Within 60 Minutes	70%	57%	57%	60%	-
5: Non-urgent	Within 120 Minutes	70%	80%	82%	86%	-

* June Quarter 2002-03 data includes Redland Hospital

** Latest published data available (NSW Department of Health Annual Report 2001-2002; Victorian Department of Human Services Annual Report 2001-2002)

(a) Waiting time is measured from presentation to time seen by a doctor.

(b) Waiting time is measured from triage to time seen by a doctor.

(c) Waiting time is measured from triage to time seen by a doctor or nurse.

Table 2 – Emergency Department Access Block Comparative Data

	% admitted/transferred within 8 hours of attendance by doctor	% admitted/transferred within 12 hours of presentation
Queensland Jun Qtr 2002-03	89%	94%
NSW 2001-02*	73%	-
Victoria 2001-02*	-	86.5%

** Latest published data available (NSW Department of Health Annual Report 2001-2002; Victorian Department of Human Services Annual Report 2001-2002)

Table 3 – Outpatients Departments - Numbers Waiting

	1 July 2002			1 July 2003		
	With Appointment	Without Appointment	Total	With Appointment	Without Appointment	Total
Surgical	19,050	14,082	33,132	19,083	14,744	33,827
Medical	8,143	2,157	10,300	8,275	2,454	10,729
Obstetrics/Gynae	5,800	858	6,658	6,068	870	6,938
Paediatric	2,917	1,683	4,600	2,702	1,451	4,153
Psychiatric	35	0	35	37	0	37
Total	35,945	18,780	54,725	36,165	19,519	55,684

Table 4 – Elective Surgery Census Data by Category

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 Oct 1998	1,441	2.0%	9,960	14.7%	25,538	28.1%	36,939
1 Jan 1999	964	2.3%	10,244	18.4%	26,012	28.1%	37,220
1 Apr 1999	1,392	1.9%	9,953	15.9%	26,895	27.5%	38,240
1 Jul 1999	1,498	1.9%	9,780	8.6%	27,363	27.5%	38,641
1 Oct 1999	1,468	2.9%	9,604	9.9%	27,520	28.6%	38,592
1 Jan 2000	1,165	4.0%	9,967	9.9%	28,591	29.6%	39,723
1 Apr 2000	1,721	2.0%	9,927	9.6%	28,719	30.7%	40,367
1 Jul 2000	1,838	2.7%	10,179	8.3%	28,593	32.4%	40,610
1 Oct 2000	1,749	4.7%	10,615	11.8%	27,650	33.7%	40,014
1 Jan 2001	1,522	4.6%	10,675	11.9%	27,291	35.4%	39,488
1 Apr 2001	1,833	4.5%	11,003	11.3%	26,847	36.9%	39,683
1 Jul 2001	2,023	4.5%	11,022	14.1%	26,258	38.3%	39,303
1 Oct 2001	1,979	4.5%	10,783	12.6%	25,593	37.2%	38,355
1 Jan 2002	1,557	4.4%	10,961	13.2%	25,106	37.9%	37,624
1 Apr 2002	2,151	3.3%	11,343	13.5%	24,179	38.8%	37,673
1 Jul 2002	2,496	3.4%	11,993	10.6%	23,494	37.6%	37,983
1 Oct 2002	2,275	4.7%	11,760	17.0%	23,737	37.2%	37,772
1 Jan 2003	1,888	3.6%	10,992	14.8%	24,727	38.2%	37,607
1 Apr 2003	2,182	2.1%	10,169	7.3%	24,196	39.6%	36,547
1 Jul 2003	2,260	2.3%	10,495	5.3%	22,309	38.2%	35,064

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Significant Issues Impacting on Waiting Times for the June Quarter 2002-03Gold Coast Hospital

- Significant reductions have been achieved in the number of 'long wait' patients in Categories 1 and 2, with Category 1 numbers remaining under the 5% benchmark for the December, March, and June quarters.
- The appointment of surgeons in the specialties of Orthopaedics, Vascular and General Surgery is helping to reduce the number of 'long wait' patients.
- Patients are also being case-managed by the Elective Surgery Coordinator to ensure continuity of care and accurate status recording on the waiting list.
- Specialties of Ophthalmology, Gynaecology, Dental, Orthopaedics, Endoscopy, Vascular and General Surgery can now be accessed at the Robina campus.
- Due to the resignation of the Plastic Surgeon (VMO), Category 1 patients are being referred to the Mater Adults Hospital for treatment. It is envisioned that the Plastic services will be unavailable until January 2004.

Nambour Hospital

- The number of 'long wait' Category 1 patients has remained under the 5% benchmark for the quarter, and the Category 2 'long waits' has gradually reduced over the quarter.
- Restrictions caused by medical indemnity issues over the past 12 months continue to affect elective surgery throughput at Nambour Hospital.
- Currently, there is no Vascular Surgery service available in the District.
- Patients within the General Surgery speciality have been transferred to Noosa or Caloundra Hospitals to expedite surgery.
- Currently, there is no Vascular Surgery service available in the District.

Princess Alexandra Hospital

- The number of 'long wait' Category 1 patients has remained under the 5% benchmark for the quarter, and there was a significant reduction in the number of Category 2 'long wait' patients.
- The specialties of General, ENT, Vascular, and Cardiac Surgery have been affected by surgery cancellations as a result of unavailable Intensive Care beds.
- Continuous recruitment efforts are being made nationally and internationally to attract specific specialists to fill current vacancies.
- Bed occupancy at the Princess Alexandra Hospital has been between 95-110% for the period.

Rockhampton Hospital

- Medical Officer leave and vacant positions during the June quarter have impacted on the waiting list, with the number of Category 1 and 2 'long wait' patients exceeding the 5% benchmark for the months of May and June 2003.

Royal Brisbane Hospital

- Reductions in 'long wait' patients continue to occur in both Categories, with the dedicated audit of 'long wait' Category 2 patients achieving positive results.
- Under the supervision of the Elective Surgery Coordinator, the function of the Booking Office has

been broadened to include daily booking audits to ensure 'long wait' patients are given priority.

Recommendations from the recently completed 'Specialist Outpatient and Elective Surgery Waiting List Project' have been submitted for approval and implementation. The Elective Surgery Coordinator will be coordinating the implementation of recommended strategies.

Townsville Hospital

- The number of Category 1 and 2 'long wait' patients has remained below the 5% benchmark for the entire quarter.
- Recruitment is ongoing within Anaesthetics (medical officers) and Perioperative services (nursing staff). The Specialist Outpatient clinic reviews continue to target 'long wait' Category 2 patients.
- Six beds have been opened in the Short Stay Unit to reduce the overflow of medical patients into committed elective surgery beds.
- General Surgery procedures have commenced in Ingham, with patients being screened for surgical and anaesthetic suitability prior to surgery offer.

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Analysis of Patients Waiting and Throughput by Surgical Specialty

Cardio-Thoracic Surgery

- At 1 July 2003, there were 35 'long wait' Category 2 patients (10.2%) compared with 5 patients (2.0%) at 1 July 2002 (47 patients or 14.7% at 1 April 2003).
- Elective surgery throughput in Cardio-Thoracic Surgery for the June Quarter 2002-03 was 784 admissions compared with 853 admissions in the June Quarter 2001-02 (755 admissions in the March Quarter 2002-03).

ENT Surgery

- At 1 July 2003, there were 26 'long wait' Category 2 patients (3.7%) compared with 75 patients (10.6%) at 1 July 2002 (43 patients or 6.2% at 1 April 2003).
- Elective surgery throughput in ENT Surgery for the June Quarter 2002-03 was 2,347 admissions compared with 2,223 admissions in the June Quarter 2001-02 (2,275 admissions in the March Quarter 2002-03).

General Surgery

- At 1 July 2003, there were 158 'long wait' Category 2 patients (5.4%) compared with 333 patients (10.3%) at 1 July 2002 (148 patients or 5.3% at 1 April 2003).
- Elective surgery throughput in General Surgery for the June Quarter 2002-03 was 7,705 admissions compared with 7,469 admissions in the June Quarter 2001-02 (7,810 admissions in the March Quarter 2002-03).

Gynaecology

- At 1 July 2003, there were 9 'long wait' Category 2 patients (0.6%) compared with 55 patients (3.5%) at 1 July 2002 (44 patients or 3.2% at 1 April 2003).
- Elective surgery throughput in Gynaecology for the June Quarter 2002-03 was 4,537 admissions compared with 4,390 admissions in the June Quarter 2001-02 (4,257 admissions in the March Quarter 2002-03).

Neurosurgery

- At 1 July 2003, there were 13 'long wait' Category 2 patients (8.5%) compared with 53 patients (25.2%) at 1 July 2002 (26 patients or 16.4% at 1 April 2003).
- Elective surgery throughput in Neurosurgery for the June Quarter 2002-03 was 399 admissions compared with 394 admissions in the June Quarter 2001-02 (418 admissions in the March Quarter 2002-03).

Ophthalmology

- At 1 July 2003, there were 5 'long wait' Category 2 patients (1.2%) compared with 22 patients (4.6%) at 1 July 2002 (8 patients or 2.2% at 1 April 2003).

- Elective surgery throughput in Ophthalmology for the June Quarter 2002-03 was 2,104 admissions compared with 1,930 admissions in the June Quarter 2001-02 (1,793 admissions in the March Quarter 2002-03).

Orthopaedic Surgery

- At 1 July 2003, there were 175 'long wait' Category 2 patients (7.5%) compared with 430 patients (15.3%) at 1 July 2002 (205 patients or 9.0% at 1 April 2003).
- In Orthopaedic Surgery, total throughput for the June Quarter 2002-03 was 5,312 admissions, compared with 4,996 admissions in the June Quarter 2001-02 (4,882 admissions in the March Quarter 2002-03).

Plastic & Reconstructive Surgery

- At 1 July 2003, there were 31 'long wait' Category 2 patients (3.8%) compared with 49 patients (5.5%) at 1 July 2002 (39 patients or 5.1% at 1 April 2003).

Elective surgery throughput in Plastic & Reconstructive Surgery for the June Quarter 2002-03 was 2,030 admissions compared with 2,040 admissions in the June Quarter 2001-02 (1,867 admissions in the March Quarter 2002-03).

Urology

- At 1 July 2003, there were 92 'long wait' Category 2 patients (9.7%) compared with 214 patients (19.7%) at 1 July 2002 (155 patients or 16.0% at 1 April 2003).
- Elective surgery throughput in Urology for the June Quarter 2002-03 was 2,146 admissions compared with 1,988 admissions in the June Quarter 2001-02 (1,946 admissions in the March Quarter 2002-03).

Vascular Surgery

- At 1 July 2003, there were 12 'long wait' Category 2 patients (8.8%) compared with 29 patients (15.1%) at 1 July 2002 (25 patients or 16.6% at 1 April 2003).

Elective surgery throughput in Vascular Surgery for the June Quarter 2002-03 was 559 admissions compared with 610 admissions in the June Quarter 2001-02 (590 admissions in the March Quarter 2002-03).

TOTAL BUDGET INCREASES

	1993/1994	1996/1997	1997/1998	1998/1999	1999/2000	2000/2001	2001/2002	2002/2003	2003/2004	Totals 95/96 to 03/04
BAVANA	8,494,964	7,014,962	7,288,964	7,492,102	8,071,134	8,372,156	9,284,250	9,362,760	9,589,880	3,044,876
Dollar Increase										46.9%
Percentage Increase		8.0%	3.9%	2.6%	7.7%	3.1%	10.8%	0.9%	1.9%	
BUNDABERG	54,321,500	36,630,666	39,057,960	42,466,905	46,447,131	49,412,189	54,431,260	50,857,717	51,242,143	17,620,642
Dollar Increase										51.0%
Percentage Increase		2.0%	6.4%	8.7%	6.4%	6.4%	9.4%	-0.8%	0.8%	
CENTRAL HIGHLANDS	8,872,528	7,355,162	8,014,919	8,501,797	9,733,321	9,559,769	9,455,503	10,752,430	10,663,880	3,761,152
Dollar Increase										55.2%
Percentage Increase		7.0%	9.0%	6.1%	14.5%	-1.4%	1.3%	9.9%	-0.8%	
CENTRAL WEST	16,382,000	16,564,806	17,302,913	18,603,974	19,432,977	21,171,147	23,368,682	21,153,482	20,874,059	3,492,050
Dollar Increase										27.4%
Percentage Increase		1.1%	4.5%	7.5%	4.5%	8.9%	4.2%	-1.3%	-1.3%	
FRASER COAST	41,460,300	45,101,732	52,445,934	60,901,732	68,467,901	65,604,099	64,291,941	75,268,494	75,180,503	33,822,203
Dollar Increase										58.3%
Percentage Increase		8.5%	16.3%	15.8%	5.6%	2.4%	2.7%	11.9%	-0.2%	
GLADSTONE	14,255,921	16,337,674	17,665,952	17,428,936	18,564,558	18,781,891	20,566,654	21,631,622	21,678,192	422,371
Dollar Increase										5.7%
Percentage Increase		14.6%	8.3%	-1.5%	6.8%	1.2%	9.8%	4.9%	0.2%	
GYMPIE	11,919,019	13,697,761	15,233,570	16,101,885	16,872,418	16,532,259	17,342,277	17,981,982	18,369,582	6,450,569
Dollar Increase										54.1%
Percentage Increase		14.9%	11.2%	-0.9%	10.4%	-0.8%	4.9%	0.2%	5.7%	
NORTH BURNETT	7,140,300	7,068,339	6,261,705	6,612,704	9,433,927	9,810,584	10,421,360	10,148,670	10,304,168	3,163,888
Dollar Increase										44.3%
Percentage Increase		8.4%	6.7%	11.2%	11.8%	5.4%	8.7%	3.8%	1.5%	
PRINCE CHARLES	149,762,893	171,671,252	182,029,955	182,036,813	187,208,551	193,233,955	211,417,655	227,089,354	221,175,407	71,412,534
Dollar Increase										56.3%
Percentage Increase		14.8%	6.5%	-0.4%	2.6%	3.2%	9.4%	7.4%	-2.6%	
REDCLIFFE/ABOOLCURE	77,493,645	84,036,354	89,647,534	99,716,331	113,444,769	117,485,401	128,819,628	132,696,547	133,624,168	56,349,569
Dollar Increase										73.0%
Percentage Increase		8.4%	7.7%	11.2%	11.8%	5.4%	9.7%	3.6%	0.6%	
ROCKHAMPTON	81,623,697	88,633,393	94,038,966	95,872,867	97,543,341	103,384,169	104,329,808	108,739,322	108,727,684	27,103,897
Dollar Increase										33.2%
Percentage Increase		8.8%	6.1%	1.7%	2.4%	4.0%	2.4%	4.2%	0.0%	
ROYAL BRISBANE	260,911,952	278,209,899	305,858,543	316,843,757	310,246,490	348,391,252	356,869,818	349,823,380	398,818,148	137,906,166
Dollar Increase										52.9%
Percentage Increase		6.6%	6.0%	-4.8%	-1.9%	1.9%	6.2%	1.5%	17.0%	
ROYAL CHILDREN'S	59,288,928	65,901,298	73,000,679	72,829,173	79,390,737	82,848,766	92,850,895	98,094,034	94,211,661	34,912,733
Dollar Increase										58.0%
Percentage Increase		12.8%	6.2%	3.6%	8.9%	4.0%	12.2%	6.1%	-4.1%	
ROYAL WOMEN'S	43,568,227	46,292,941	48,974,345	49,231,966	57,016,937	61,394,985	64,284,930	69,541,535	65,546,586	6,936,277
Dollar Increase										38.0%
Percentage Increase		6.3%	5.6%	1.8%	6.3%	-0.6%	4.4%	2.3%	-6.3%	
SOUTH BURNETT	19,568,900	17,847,558	19,849,955	20,184,359	21,032,188	21,655,559	22,810,104	22,492,100	22,405,177	6,936,277
Dollar Increase										36.0%
Percentage Increase		7.1%	5.8%	6.9%	4.2%	3.0%	5.3%	-1.4%	-0.4%	
SUNSHINE COAST	85,477,386	92,579,128	103,681,451	107,207,623	123,921,022	131,285,184	143,865,472	155,191,878	156,711,378	70,233,842
Dollar Increase										82.2%
Percentage Increase		8.3%	12.0%	3.4%	15.6%	5.9%	9.6%	8.9%	1.0%	
CENTRAL ZONE TOTALS	913,752,000	996,841,967	1,075,384,879	1,122,632,361	1,175,388,370	1,215,720,174	1,300,707,056	1,358,838,019	1,353,316,331	439,863,490
Dollar Increase										48.1%
Percentage Increase		9.1%	7.9%	4.4%	4.7%	3.4%	7.0%	4.3%	-0.2%	

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TOTAL BUDGET INCREASES

	1995/1996	1996/1997	1997/1998	1998/1999	1999/2000	2000/2001	2001/2002	2002/2003	2003/2004	Totals 95/96 to 03/04
BOWEN	12,339,624	13,212,494	14,128,529	14,402,850	15,666,192	16,206,981	16,839,334	17,660,783	18,386,644	6,060,920
Dollar Increase	873,870	71%	914,035	276,321	1,483,342	319,439	633,713	821,429	728,781	49.0%
Percentage Increase			6.9%	2.0%	10.3%	2.8%	3.8%	4.9%	4.1%	
CAIRNS	9,527,487	10,466,530	11,233,708	11,952,043	12,770,284	12,733,719	13,509,589	14,308,406	14,450,279	46,922,792
Dollar Increase	6,928,043	8,379,176	7,016,337	2,918,241	4,963,435	7,387,560	8,213,107	8,213,107	1,141,873	48.1%
Percentage Increase		7.1%	8.0%	6.2%	2.4%	4.0%	5.8%	6.1%	0.8%	
CAPE YORK	9,177,264	10,179,496	11,087,464	12,013,268	12,461,208	13,846,736	15,364,403	16,127,468	16,311,177	1,133,913
Dollar Increase	896,232	913,968	925,825	467,919	1,365,530	1,567,565	973,055	183,700	183,700	77.7%
Percentage Increase		10.9%	9.0%	8.4%	3.9%	10.9%	9.4%	6.4%	1.3%	
CHARTERS TOWERS	19,162,422	20,986,384	21,839,697	24,023,798	24,169,279	25,392,114	26,337,345	27,387,157	25,365,482	6,203,062
Dollar Increase	1,826,942	850,333	2,184,102	65,480	1,282,835	1,282,835	3,076,291	1,235,752	-2,021,671	32.4%
Percentage Increase		9.5%	4.1%	10.0%	0.1%	5.3%	3.0%	4.7%	-7.4%	
INNISFAIR	12,886,398	13,888,296	15,542,440	16,223,021	16,138,195	18,480,145	19,586,627	19,884,006	20,025,929	7,130,533
Dollar Increase	891,900	1,654,144	680,541	680,541	1,915,174	351,950	966,482	297,379	142,923	55.3%
Percentage Increase		7.7%	11.9%	4.4%	11.8%	1.9%	5.9%	1.5%	0.7%	
MACKAY	50,351,186	52,938,047	56,994,706	60,080,326	62,266,373	64,913,150	71,347,373	73,050,481	72,311,483	21,960,297
Dollar Increase	2,586,861	379,897	4,056,659	3,085,820	2,205,747	2,616,787	6,434,312	1,663,019	-738,008	43.6%
Percentage Increase		5.1%	7.7%	5.4%	3.7%	4.2%	10.0%	2.3%	-1.0%	
MORANBAH	6,075,814	6,455,711	6,890,055	7,556,577	8,246,208	8,582,428	9,024,763	9,584,353	9,786,561	3,207,687
Dollar Increase	379,897	379,897	434,344	666,522	581,639	364,222	442,362	559,563	199,148	81.6%
Percentage Increase		6.3%	6.7%	9.7%	8.8%	4.4%	5.2%	6.2%	2.1%	
MT ISA	29,901,976	32,110,228	36,297,605	43,051,777	44,130,234	46,818,437	47,354,180	45,946,367	45,385,823	16,153,847
Dollar Increase	2,208,252	2,208,252	6,187,377	4,764,172	968,444	2,808,216	536,225	1,355,295	-610,544	59.8%
Percentage Increase		7.4%	19.3%	12.4%	2.1%	6.4%	1.1%	2.9%	-1.3%	
TABLELANDS	17,518,109	18,678,394	20,978,464	22,323,680	24,369,178	26,337,462	27,555,464	28,677,950	29,160,771	11,532,533
Dollar Increase	1,239,280	1,239,280	2,092,085	1,353,426	2,406,286	1,547,286	1,217,998	1,115,380	478,951	55.3%
Percentage Increase		7.2%	11.1%	6.5%	16.0%	6.2%	4.6%	4.1%	1.7%	
TORRES	14,195,744	16,056,086	16,343,721	18,117,643	19,211,559	20,969,475	22,938,379	25,143,758	21,982,754	7,767,010
Dollar Increase	1,839,342	1,839,342	308,635	1,773,922	1,694,016	1,757,819	1,978,901	-804,526	-161,005	54.9%
Percentage Increase		13.0%	1.9%	10.9%	6.0%	9.1%	9.4%	-3.5%	-0.7%	
TOWNSVILLE	122,264,978	138,862,526	153,762,236	160,250,556	171,933,549	176,123,341	181,872,279	204,527,153	208,559,174	86,288,196
Dollar Increase	16,597,548	16,597,548	14,898,710	6,486,319	11,693,969	4,189,708	15,748,938	12,235,284	4,405,637	78.6%
Percentage Increase		13.5%	10.7%	4.2%	7.3%	2.4%	8.9%	6.2%	2.2%	
NORTHERN ZONE TOTALS	391,510,000	428,000,167	462,530,823	497,908,070	523,845,428	545,412,643	582,970,110	607,552,087	611,710,859	220,200,858
Dollar Increase	36,490,167	36,490,167	40,690,476	29,215,447	25,939,358	24,757,215	37,557,487	24,991,957	3,748,792	56.2%
Percentage Increase		9.3%	9.4%	6.2%	5.3%	4.1%	6.8%	4.3%	0.6%	

TOTAL BUDGET INCREASES

	1995/1996	1996/1997	1997/1998	1998/1999	1999/2000	2000/2001	2001/2002	2002/2003	2003/2004
BAYSIDE	29,743,500	32,230,852	34,649,511	41,830,652	56,666,668	56,604,436	63,746,134	72,006,199	71,647,675
Dollar Increase		2,507,352	2,392,659	7,181,141	14,866,048	-92,892	7,119,768	8,286,065	-88,224
Percentage Increase		8.4%	7.4%	20.7%	35.5%	-0.3%	12.6%	13.0%	-0.1%
CHARLEVILLE	11,225,556	12,203,287	13,074,816	14,062,083	16,427,504	16,287,928	17,190,904	17,912,445	17,517,524
Dollar Increase		977,325	871,535	977,237	1,375,451	860,124	885,488	791,351	-454,721
Percentage Increase		8.7%	7.7%	7.5%	9.8%	5.6%	6.5%	4.6%	-2.6%
GOLD COAST	122,190,283	130,658,169	139,507,247	142,466,934	161,083,434	164,431,427	197,352,343	205,530,810	207,742,665
Dollar Increase		8,557,876	2,849,078	8,959,687	18,596,550	23,367,943	13,330,928	7,778,457	2,211,785
Percentage Increase		7.0%	2.2%	6.7%	13.1%	14.5%	7.2%	3.9%	1.3%
LOGAN BEAUFORT	53,469,697	59,367,769	62,812,280	67,938,513	80,492,553	87,915,408	104,467,733	110,401,637	129,747,718
Dollar Increase		5,877,962	3,444,511	5,176,233	12,504,040	17,422,855	23,693,350	6,219,879	2,573,081
Percentage Increase		11.0%	5.8%	8.2%	18.4%	21.6%	28.4%	6.0%	2.3%
MATER	125,093,000	137,343,204	146,834,387	154,883,654	165,485,631	166,537,112	182,638,154	167,412,206	157,115,597
Dollar Increase		11,250,204	9,491,183	8,049,357	9,998,003	5,051,421	4,001,082	4,774,012	-10,286,009
Percentage Increase		8.9%	6.9%	5.5%	6.5%	3.3%	2.6%	2.9%	-6.2%
NORTHERN DOWNS	22,548,572	23,486,914	22,894,425	23,055,982	24,727,454	25,407,519	25,937,131	30,306,233	28,926,444
Dollar Increase		948,342	-612,489	172,467	1,669,572	691,055	426,603	475,471	620,165
Percentage Increase		4.2%	-2.6%	0.8%	7.2%	2.8%	1.7%	1.8%	2.4%
PRINCESALEXANDRA	207,468,200	230,019,301	248,350,155	282,637,532	272,827,233	281,095,954	311,114,775	272,847,229	318,132,254
Dollar Increase		22,550,101	19,333,855	13,237,376	10,354,331	8,124,661	30,052,216	9,030,517	-2,097,393
Percentage Increase		10.9%	8.4%	5.3%	4.0%	3.0%	10.7%	2.9%	-0.7%
QUEENSLAND	51,085,200	55,831,361	55,232,286	53,130,574	59,357,724	59,850,595	67,873,177	93,971,309	92,474,351
Dollar Increase		4,746,161	9,370,937	7,876,216	3,574,656	3,245,327	7,923,473	8,104,332	-1,502,858
Percentage Increase		9.4%	16.8%	12.1%	6.1%	4.2%	9.9%	8.9%	-1.6%
ROMA	22,221,044	22,533,734	23,348,324	24,782,555	25,977,655	26,012,844	27,484,911	27,878,312	27,352,794
Dollar Increase		312,690	814,590	1,434,231	368,904	840,765	1,482,275	383,743	-525,848
Percentage Increase		1.4%	3.7%	6.1%	1.4%	3.3%	5.7%	1.4%	-1.9%
SOUTHERN DOWNS	23,691,525	24,420,431	24,071,732	25,877,347	29,451,830	30,906,143	33,241,229	34,936,527	33,626,527
Dollar Increase		790,902	1,595,301	799,615	2,584,683	1,442,103	2,335,086	517,817	-1,325,518
Percentage Increase		3.3%	6.5%	3.1%	8.6%	4.9%	7.6%	1.6%	-4.0%
TOOWOOMBA	109,911,893	117,356,913	122,463,091	134,533,570	131,712,235	135,693,570	149,514,560	148,349,793	149,215,228
Dollar Increase		10,456,935	10,108,256	7,105,479	-2,847,336	3,147,336	7,825,290	5,039,032	661,344
Percentage Increase		9.5%	8.6%	5.6%	-2.1%	3.1%	5.6%	3.6%	0.4%
WEST MORETON	12,235,000	133,235,435	145,535,018	146,511,532	153,877,958	149,515,283	149,159,438	135,351,068	148,218,088
Dollar Increase		5,980,430	13,300,018	1,975,516	7,268,407	-4,372,876	-345,795	-246,422	-2,294,980
Percentage Increase		4.7%	10.8%	1.3%	5.0%	-2.8%	-0.2%	-0.2%	-1.5%
SOUTHERN ZONE TOTALS	903,868,000	979,215,422	1,051,828,233	1,112,862,203	1,181,815,339	1,242,344,000	1,323,737,750	1,372,510,982	1,381,244,065
Dollar Increase		75,347,422	72,592,853	61,043,923	68,963,187	60,728,802	81,193,758	48,803,224	51,296,917
Percentage Increase		8.3%	7.4%	5.8%	6.2%	5.1%	6.5%	3.7%	-0.8%
CORPORATE OFFICE (CO)									
Strategic Planning									
Dollar Increase		137,174,337	158,534,433	268,788,824	450,120,549	463,279,114	500,282,074	508,408,111	514,922,530
Percentage Increase									
Information Services									
Dollar Increase		137,174,337	21,356,683	110,254,824	181,331,724	39,668,565	16,272,960	8,147,187	86,513,449
Percentage Increase			15.6%	69.5%	67.5%	5.5%	3.4%	1.5%	47.0%
HR/ISS									
Dollar Increase		0	0	0	29,868,982	12,179,347	-820,305	10,549,914	-1,091,470
Percentage Increase					40.8%	-2.0%	25.6%	-2.1%	-2.1%
Information Services									
Dollar Increase		0	0	0	0	0	0	52,470,401	-5,131,872
Percentage Increase								-11.7%	
METROPOLITAN FINANCE SERVICE									
Dollar Increase		0	0	0	0	0	0	2,049,199	2,733,854
Percentage Increase								33.4%	

TOTAL BUDGET INCREASES

1995/1996	1996/1997	1997/1998	1998/1999	1999/2000	2000/2001	2001/2002	2002/2003	2003/2004	Totals 95/96 to 03/04
0	0	0	0	0	0	0	658,002	753,273	1,411,273
WIDE BAY LINEN SERVICE									14.5%
Dollar Increase									95,273
Percentage Increase									14.5%

Notes:
For districts the above includes all funds (State & Commonwealth) and general trust from 2002/2003.
For Corporate Office the above only includes State funds.
Corporate Office figure for 2002/2003 has been updated.
2003/2004 figures are district budgets as at September 2003. As the year progresses figures will change

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CABINET DECISION

Innisfail, 02 August 2004

Decision No.: 4996, (Submission No.: 4004)

TITLE: Progress Report on the Waiting List Reduction Strategy

CABINET decided:

1. That following consideration, the contents of the submission be noted.
2. That the Minister for Health explore the option of scholarships to facilitate the transitioning of nurses into medicine.

CIRCULATION:

Implementation Responsibility

Nil.

Departmental Records

Department of the Premier and Cabinet.

Department of Health and copy to the Minister.

Perusal and Return

All other Ministers.

Walter Schirmer
Cabinet Secretary

SECURITY CLASSIFICATION "A"

INFORMATION SUBMISSION

COVER SHEET

TITLE

Progress Report on the Waiting List Reduction Strategy

MINISTER

Minister for Health

OBJECTIVE

To inform Cabinet on the progress of the Waiting List Reduction Strategy.

SUMMARY

The Waiting List Reduction Strategy (the Strategy) commenced in July 1998, and is a major ongoing commitment of the Government. The Surgical Access Service (SAS) within Queensland Health is responsible for the implementation and reporting of the nine elements of the Strategy.

The 2001 election commitments provided an additional \$20 million for extra elective surgery throughput over two years beginning 1 July 2001 and ending 30 June 2003. An additional \$10 million was provided in the 2003-04 budget to continue this commitment. As part of the 2004 election commitments, \$20 million has been committed to reducing backlogs prior to 30 June 2004. These funds are part of a \$110 million program aimed at reducing waiting lists over three and a half years.

As part of the 2003-04 State Budget process, the Cabinet Budget Review Committee (CBRC) approved a new funding model for Queensland Health to apply from 2003-04, based on the principles of population growth, non-labour cost escalation and a service enhancement factor. In regards to the elective surgery enhancement initiative, CBRC endorsed that in future years (beyond 2003-04 financial year) this initiative will be funded within the new funding model.

Although, the \$10 million commitment for the elective surgery enhancement strategy has been continued for the 2003-04 financial year, Cabinet should note that the \$10 million provided will not purchase the same quantum of surgery as was initially purchased in July 2001. Medical costs have increased significantly since 2001 and the funding for the initiative has not been indexed to match the increased costs. In addition, when this strategy was initially commenced, elective surgery was funded at a marginal rate. Using the marginal rate for elective surgery is not sustainable in the long term.

Issues relating to the relative purchasing power of funds allocated for the elective surgery enhancement strategy and other possible options for improving access to elective surgery will be further examined by Queensland Health.

In 2004, the Government's election commitments included a \$110 million program aimed at reducing waiting lists throughout the State, with funding for areas with the highest need and longest waiting lists over the next three and a half years. In 2004-05 it is expected that \$40 million will be spent to reduce waiting lists.

RESULTS OF CONSULTATION

- Is there agreement? YES. See paragraph 32 of body of submission.

RECOMMENDATION

It is recommended that following consideration Cabinet note the submission.


GORDON NUTTALL MP
MINISTER FOR HEALTH

26/7 /2004

BODY OF SUBMISSION

OBJECTIVE

1. To inform Cabinet on the progress of the Waiting List Reduction Strategy.

BACKGROUND

• Context

2. In 1998, the Government gave a commitment to significantly expand previous strategies to reduce waiting times in public hospitals in Queensland. The Waiting List Reduction Strategy involves an eight-point plan to cut waiting lists and includes a commitment to:
 - i) publish the waiting list for each hospital every three months so that money can be channelled to where the real need is;
 - ii) supply general practitioners with quarterly briefings on waiting lists to help them when referring people for surgery;
 - iii) even out waiting lists by moving people in appropriate cases to a hospital where their procedure can be performed more speedily;
 - iv) provide additional funding of \$6.0 million per year to finance extra surgery for complex procedures;
 - v) work with the specialist colleges to expand training places for new specialists to meet the demand of the next century;
 - vi) use holiday times to keep operating theatres working for the benefit of those waiting for surgery;
 - vii) benchmark waiting times for accident and emergency departments to reduce excessive waits; and
 - viii) increase levels of day surgery across the State to reduce the length of waiting times for elective surgery.
3. A further element was added to the eight-point plan, being the collection of waiting times for specialist outpatient appointments to assist in clinical prioritisation for surgery and appointments.
4. In 2001, the Government's election commitments provided for the enhancement of surgical services in public hospitals, including:
 - i) injecting an additional \$20 million over two years, into funding for elective surgery so that more people can have their operations faster;
 - ii) continuing to work towards a target of 50% of elective surgery performed as day surgery and setting a target of 80% for day of surgery admissions within two years;

- iii) establishing a central elective surgery booking bureau that will be more patient-focused and more responsive to providing services to people where they live; and
- iv) strengthening clinical protocols to ensure appropriate and timely treatment of patients based on clinical need.

5. In 2004, the Government's election commitments included a \$110 million program aimed at reducing waiting lists throughout the State, with funding for areas with the highest need and longest waiting lists over the next three and a half years. In 2004-05 it is expected that \$40 million will be spent to reduce waiting lists by the following initiatives:

- i) \$25 million for more elective surgery for public patients, targeting areas with the longest waiting lists and highest demand;
- ii) A further 300 patients statewide will receive joint replacement procedures, including hip and knee replacements (\$5 million);
- iii) A further 1,000 Queenslanders will receive cataract operations and two new eye specialist training positions will be created (\$2.5 million);
- iv) \$2 million for a new operating theatre and ten additional beds at Caloundra Hospital;
- v) \$1.5 million for a full specialist vascular service to be established at Nambour Hospital;
- vi) \$1 million for additional orthopaedic surgery at Noosa Hospital;
- vii) \$1.5 million to help address those Cairns patients waiting longer than normal for ear nose and throat (ENT) surgery, and employ a specialist ENT surgeon at the Cairns Base Hospital;
- viii) \$500,000 to employ six new nurses at Cairns Base Hospital to expand the hospital's capacity and treat patients in a critical condition;
- ix) A further \$1 million for a "Fit for Surgery" initiative to avoid costly postponements and help patients prepare for elective surgery through programs aimed at weight loss, cardiovascular fitness and quitting smoking; and
- x) The Queensland Government will introduce an independent audit of waiting lists to better target waiting lists around the State.

6. In 2004, the Government has also committed significant funding to support initiatives to ease the pressure on public hospital emergency departments. In 2004-05, the Queensland Government will spend \$15.2 million to address waiting times in our emergency departments including:

- \$2.2 million to employ additional emergency department doctors and 20 additional nurses at some of the State's busiest emergency departments;
- \$1 million to support four pilot bulk billing general practice clinics near public hospital emergency departments, including two in regional Queensland;
- \$5 million to set up a 24-hour health hotline for easy access to information and advice about health services; and

- Emergency department upgrades for:

- Gympie Hospital (\$1 million)
- Logan Hospital (\$3.3 million)
- Redcliffe Hospital (\$800,000)
- Redland Hospital (\$1.3 million)
- Robina Hospital (\$600,000)

- **Previous consideration by Cabinet**

7. Cabinet (Decision Nos. 681, 12 July 1999; 1152, 20 September 1999; 1553, 13 March 2000; 2106, 2 October 2000; 2555, 12 June 2001; 2856, 1 October 2001; 3094, 18 February 2002; 3158, 12 August 2002; 3853, 9 December 2002; and 4243, 10 June 2003) has periodically noted reports on progress of the Waiting List Reduction Strategy.

ISSUES

Waiting List Reduction Strategy

8. Commitment to enhancing the nine elements of the Waiting List Reduction Strategy is continuing, with notable performance being experienced in:

- elective surgery;
- emergency departments; and
- day surgery.

Elective Surgery

Waiting Times

9. The second lowest ever proportion of Category 1 long waits was recorded at 1 July 2004 with only 1.1% of Category 1 patients waiting longer than the recommended time (30 days) for surgery. This is below the State target of 5% and compares with 4.4% at 1 April 2004 and 2.3% at 1 July 2003.
10. The lowest ever proportion of Category 2 long waits was recorded at 1 July 2004, with only 2.3% of Category 2 patients (semi-urgent) waiting longer than the recommended time (90 days) for surgery. This is below the State target of 5% and compares with 7.2% at 1 April 2004 and 5.3% at 1 July 2003.
11. At 1 July 2004, 34.1% of Category 3 patients on the waiting lists of the 31 reporting hospitals waited longer than one year for surgery. This compares with 36.0% at 1 April 2004 and 38.2% at 1 July 2003.

12. Waiting times by Category from 1 July 1998 is presented in Attachment 1, Table 1.
13. The following hospital reported greater than 5% 'long wait' Category 1 patients at 1 July 2004:
 - QEII Hospital - 11.1% (6 patients)
14. Only two hospitals recorded greater than 5% 'long wait' Category 2 patients at 1 July 2004:
 - Gladstone Hospital - 15.4% (4 patients)
 - QEII Hospital - 12.6% (48 patients)
15. Significant issues impacting on waiting times for these two hospitals and strategies adopted by Queensland Health to address these issues are provided in Attachment 1.

Throughput

16. Total elective surgery throughput for 2003-04 increased by 1,858 admissions or 1.6% in 2003-04 (115,993 admissions) compared with 2002-03 (114,135 admissions).

Specialties

17. The specialties with the largest number of patients waiting at 1 July 2004 were:
 - General Surgery - 7,511 (compared with 8,016 at 1 July 2003);
 - Orthopaedic Surgery - 7,083 (compared with 7,082 at 1 July 2003);
 - ENT Surgery - 3,532 (compared with 4,506 at 1 July 2003); and
 - Ophthalmology - 2,609 (compared with 3,657 at 1 July 2003).

Emergency Departments

Performance

18. Waiting times performance for Queensland emergency departments has improved for most patients during the 2003/2004 year to date compared with the same period of last year, (see Attachment 1, Table 2):
 - For ATS Categories 1 and 2 (the most urgent patients) Queensland waiting times performance has improved during 2003/2004 to March compared to the same nine months of 2002/2003.
 - Waiting times performance in ATS Categories 3, 4 and 5 is steady compared to last year.

19. Although New South Wales and Victoria perform better than Queensland with regard to waiting times (Attachment 1, Table 2), access block data (waiting time in the Emergency Department until admission to an inpatient bed) indicates that Queensland continues to perform significantly better than other States (Attachment 1, Table 3).

Day Surgery

20. The day surgery target for elective surgery in Queensland public hospitals has been set at 50%. A day of surgery admission target of 80% has also been established.
21. The day surgery target has been achieved, with 54.8% of cases being undertaken as same-day procedures in 2003-04 year to May (11 months). The day of surgery admission rate for the same period was 76.8%.

2001 Election Commitments

22. The Government's commitment to strengthen clinical protocols has been progressed through the development of a Policy Framework for Elective Surgery and Specialist Outpatient Services, which will be published for distribution by September 2004. The Policy Framework provides integrated clinical and administrative directions for the delivery of these vital services in Queensland Health facilities. A similar Policy Framework to encompass Emergency Department Services is currently under development.

2004 Election Commitments

23. As part of the \$110 million assault on waiting lists over three and a half years, the Government committed \$20 million to reducing the elective surgery backlog in the five months to 30 June 2004. In the first instance, capacity in our public hospitals was assessed and funding committed to treat patients who had waited longer than recommended for surgery. Over \$17.5 million was taken up by public hospitals resulting in the treatment of an additional 3,900 Queenslanders.
24. Where additional capacity was not available in public hospitals, private providers were contracted to partner Queensland Health in this initiative. The partnership we have established with the private sector has already resulted in the treatment of over 700 cataract patients, including some who had waited more than a year for surgery. Access to these services has significantly improved the quality of life for this group of people.

Longer Term Funding Issues

25. The primary purpose of the Elective Surgery Program has been to purchase additional elective surgery activity – over and above what has been historically achieved within hospital base budgets. Total recurrent funding available under the program in 2002/03 was \$71.3 million. In addition to this, the Government has provided a non-recurrent allocation of \$10 million per annum for the period 1 July 2001 to 30 June 2004. Election commitments (February 2004) provided another \$20 million to target long wait patients in the 4 months to 30 June 2004. This takes the total additional funding that was available in 2003/04 to \$101.3 million.
26. Surgery funded under the Program is paid at a marginal rate, the objective being to take advantage of spare capacity in services where fixed costs are covered in base budgets. However, due to the significant expansion in investment in the program, over 40% of elective surgery activity is now funded at a marginal rate – a proportion that is clearly no longer marginal and not sustainable.
27. In order to meet the Government's elective surgery commitments within a fixed pool of funds, activity targets have been maintained each year despite significant cost increases. This means that the same amount of activity (or roughly the same number of patients treated) has been expected from the same pool of funds since 1996/1997. This practice has been based on directives from Government – to generate at least as much surgical activity from the same investment, year after year.
28. Medical costs have increased significantly over the duration of the program and the funding for the initiative has not been indexed to match the increased costs. Advice from some participating hospitals, is that the inadequate funding of the elective surgery program is having a detrimental impact on overall budget integrity.
29. Issues relating to the relative purchasing power of funds allocated for the elective surgery enhancement strategy and other possible options for improving access to elective surgery are being further examined. Queensland Health is considering a one-off payment in 2004/05 to ensure all hospitals are paid the same (enhanced) price for elective surgery activity performed over and above that generated from base budgets. In addition, a discussion paper is being developed for the Minister for Health that will broadly examine access issues to surgical services, including funding issues and make recommendations for future directions. This discussion paper is scheduled for completion by October 2004.

CONSULTATION

30. Formal consultation on the Waiting List Reduction Strategy has been through existing mechanisms within Queensland Health. These mechanisms include the Medical Superintendents Advisory Committee, the Elective Surgery Coordinators Group, the Emergency Department Reform Group, the Emergency Department

Collaborative for Healthcare Improvement, the Specialist Outpatient Advisory Committee, and the Operating Room Management Information System (ORMIS) User Group.

31. Internally, consultation has occurred with Zonal staff, District Managers and key medical and nursing personnel from the participating hospitals on the approach to enhancing emergency, outpatient and surgical services including theatre utilisation. In addition, visits to the participating hospitals have been conducted.

RESULTS OF CONSULTATION

32. Consultation remains a major part of the Waiting List Reduction Strategy and mechanisms as outlined above continue to provide a major support role to the project.

PUBLIC PRESENTATION

33. Not proposed.

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CONSULTATION DETAILS

Agency

Department of the Premier
and Cabinet

Date

June 2004

Officer

Ros Walker

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Summary Data for Elective Surgery and Emergency Departments

Table 1 – Elective Surgery Census Data by Category

	Elective Surgery	Emergency	Elective Surgery	Emergency	Elective Surgery	Emergency	Total
1 Jul 1998	1,285	0.9%	9,243	10.6%	25,732	28.8%	36,260
1 Oct 1998	1,441	2.0%	9,960	14.7%	25,538	28.1%	36,939
1 Jan 1999	964	2.3%	10,244	18.4%	26,012	28.1%	37,220
1 Apr 1999	1,392	1.9%	9,953	15.9%	26,895	27.5%	38,240
1 Jul 1999	1,498	1.9%	9,780	8.6%	27,363	27.5%	38,641
1 Oct 1999	1,468	2.9%	9,604	9.9%	27,520	28.6%	38,592
1 Jan 2000	1,165	4.0%	9,967	9.9%	28,591	29.6%	39,723
1 Apr 2000	1,721	2.0%	9,927	9.6%	28,719	30.7%	40,367
1 Jul 2000	1,838	2.7%	10,179	8.3%	28,593	32.4%	40,610
1 Oct 2000	1,749	4.7%	10,615	11.8%	27,650	33.7%	40,014
1 Jan 2001	1,522	4.6%	10,675	11.9%	27,291	35.4%	39,488
1 Apr 2001	1,833	4.5%	11,003	11.3%	26,847	36.9%	39,683
1 Jul 2001	2,023	4.5%	11,022	14.1%	26,258	38.3%	39,303
1 Oct 2001	1,979	4.5%	10,783	12.6%	25,593	37.2%	38,355
1 Jan 2002	1,557	4.4%	10,961	13.2%	25,106	37.9%	37,624
1 Apr 2002	2,151	3.3%	11,343	13.5%	24,179	38.8%	37,673
1 Jul 2002	2,496	3.4%	11,993	10.6%	23,494	37.6%	37,983
1 Oct 2002	2,275	4.7%	11,760	17.0%	23,737	37.2%	37,772
1 Jan 2003	1,888	3.6%	10,992	14.8%	24,727	38.2%	37,607
1 Apr 2003	2,182	2.1%	10,169	7.3%	24,196	39.6%	36,547
1 Jul 2003	2,260	2.3%	10,495	5.3%	22,309	38.2%	35,064
1 Oct 2003	2,194	2.7%	10,470	7.9%	21,364	37.3%	34,028
1 Jan 2004	1,882	4.8%	10,208	10.1%	21,150	37.3%	33,240
1 Apr 2004	2,343	4.4%	10,353	7.2%	20,587	36.0%	33,283
1 Jul 2004	2,327	1.1%	9,750	2.3%	19,401	34.1%	31,478

Table 2 – Emergency Department Waiting Times by Triage Category

	Emergency Activity	Queensland	Victoria	NSW	NT
		2002/2003	2003/2004	2002/2003	2002/2003
1: Resuscitation	Immediate	100%	99%	100%	100%
2: Emergency	Within 10 Minutes	80%	71%	76%	85%
3: Urgent	Within 30 Minutes	75%	54%	54%	78%
4: Semi-urgent	Within 60 Minutes	70%	55%	53%	-
5: Non-urgent	Within 120 Minutes	70%	79%	80%	-

¹ NSW Department of Health Annual Report 2002/2003.² Victorian Department of Human Services Annual Report 2002/2003

Table 3 – Emergency Department Access Block Comparative Data

Queensland Jul - Mar 2003/2004	83%	-	94%
NSW 2002/2003 ¹	-	72%	-
Victoria 2002/2003 ²	-	-	87%

¹ NSW Department of Health Annual Report 2002/2003.

² Victorian Department of Human Services Annual Report 2002/2003

Significant Issues Impacting on Waiting Times for the June Quarter 2003-04

OEH Hospital

- A significant reduction in 'long wait' patient numbers in all specialties was achieved during the June Quarter 2003-04.
- All specialties with the exception of Urology recorded no 'long wait' patients in Category 1 and 2 as at 1 July 2004.
- The throughput of 'long wait' Urology numbers during June 2004 was impacted upon by medical officer leave.
- Discussions to resolve the specialty difficulties are ongoing between Hospital Executive and the Urologists. A submission has been forwarded to the Southern Zone Management team addressing District Urology issues.

Gladstone Hospital

- Category 1 has recorded no 'long wait' patients for the June Quarter 2003-04, however Category 2 recorded four 'long wait' patients (or 15.4%).
- The Category 2 'long wait' patients were all contained within the General Surgery specialty, caused by specialist leave during the quarter that affected surgical scheduling and throughput.