



AUSTRALASIAN COLLEGE
FOR EMERGENCY MEDICINE

2016 ACCESS BLOCK POINT PREVALENCE SURVEY

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CARRIED OUT BY:

THE ROAD TRAUMA AND EMERGENCY MEDICINE UNIT

AUSTRALIAN NATIONAL UNIVERSITY

ON BEHALF OF:

THE AUSTRALASIAN COLLEGE FOR EMERGENCY MEDICINE

Report prepared by Professor Drew Richardson

Date of Report: September 2016

RESULTS SUMMARY

1. Caring for patients waiting for beds still represents around 1/3 of ED workload in Australian hospitals
2. There were 42 patients identified in 16 hospitals with a dangerously long ED time of more than 24 hours
3. On average there was little change in overcrowding nationwide, but this disguises a significant improvement in some States and a marked worsening in others
4. Western Australia in particular is experiencing worsening conditions, despite having made the most progress in combating overcrowding in the past

A single survey of all 123 Australian EDs accredited by ACEM was undertaken by telephone, fax and email, and 104 (85%) supplied useable data. At 10:00 local time on 29 Aug 2016, the average Australian Emergency Department had 20.1 patients under treatment, and a further 5.9 waiting to be seen. Of those under treatment, on average 7.7 were waiting for beds, representing 38% of the patient workload. Of these, 62% were experiencing access block, that is, they had already been in the ED more than 8 hours. The situation was worst in adult/mixed tertiary hospitals with 8.6 out of 32.7 (26%) experiencing access block, but was surprisingly poor in all role delineations, even 4.0 out of 15.5 (26%) in paediatric hospitals. Overall amongst the 104 respondents, there were 810 patients waiting for inpatient beds after their emergency care was finished and only 609 waiting to see a doctor. 3 hospitals reported at least one patient in ED for more than 48 hours.

Nationally, 41% of all patients being treated had already exceeded 4 hours in ED. The best performing State was Queensland at 34% and the worst performing State was Western Australia at 47%. 42 patients in 16 hospitals were classified as having a dangerously long ED time, having been in the ED more than 24 hours, with two hospitals each having 7 such cases. Western Australia, which had previously been the State closest to achieving the 4-hour National Emergency Department Access Target (NEAT), reported 12 such dangerously long times, the most in any State.

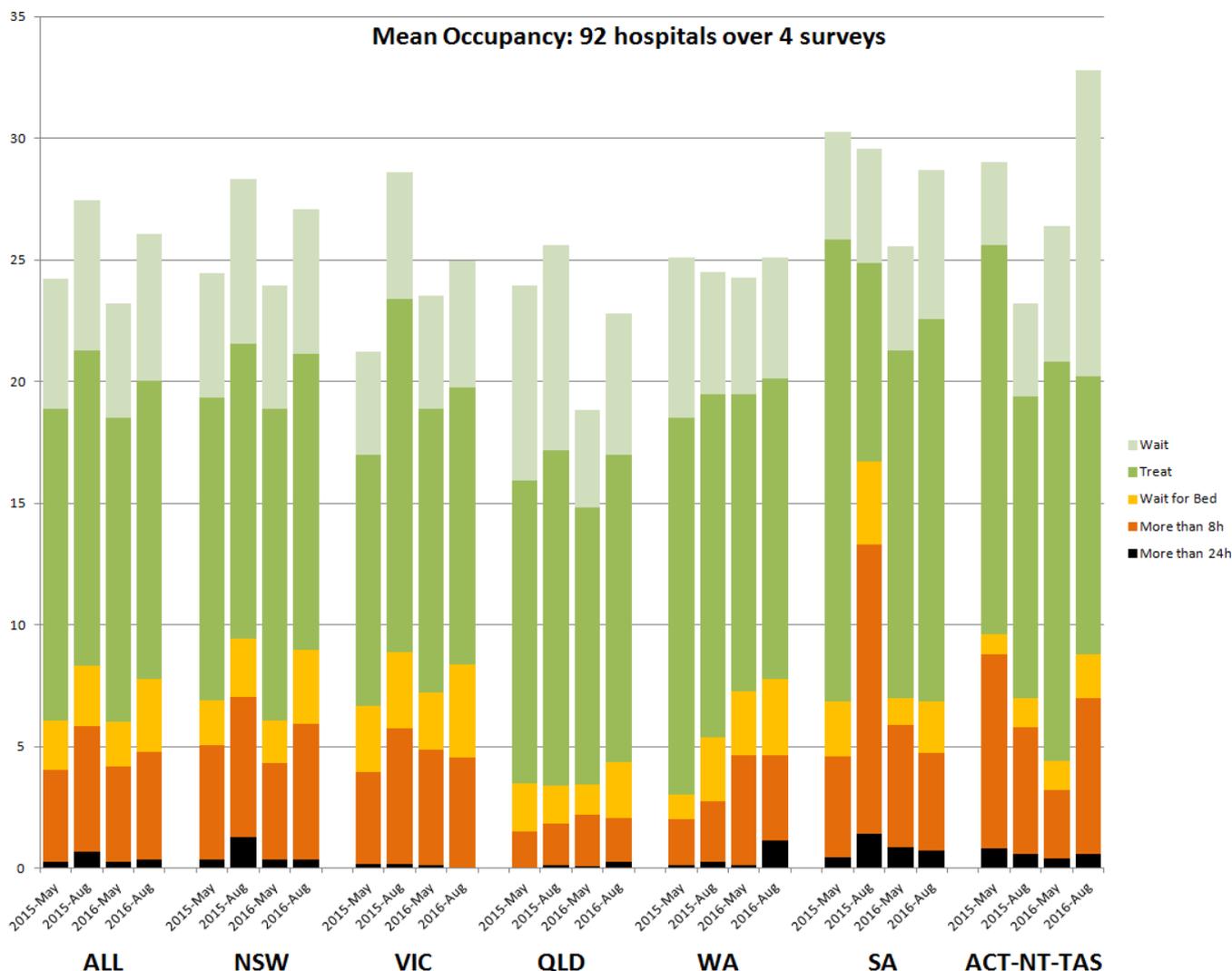
These surveys are carried out at the start (May/June) and the end (Aug/Sep) of winter each year, and it is normal for access block to be worse in the second survey and for the smaller jurisdictions to show noise and variability.. Two major new hospitals opened and three closed in early 2015 so it is difficult to make strict comparisons with earlier figures. However, these results confirm the pattern noted in the May 2016 survey that Western Australia is experiencing increasing crowding in its Emergency Departments.

Comparing the 94 hospitals which answered the last 4 surveys shows that nationwide the situation is similar to this time in 2015. However, this national average disguises some improvement in NSW and a marked worsening in Western Australia. WA was the only jurisdiction where the proportion waiting for beds, proportion of access block, and did-not-wait to be seen rate on the previous day all worsened between May 2015 and Aug 2015 and then worsened again between Aug 2015 and May 2016. WA was previously the leader in managing patients waiting for beds at 16% of patients in May 2015, but has now dropped to 37%.

Table 1: Average number of ED patients waiting to be seen - per Emergency Department (total 104)

	Waiting	All treated	>4hours	Await Bed	Access Block	>24hours
ALL	5.9	20.1	8.3	7.7	4.8	0.4
NSW	5.7	20.6	8.6	8.4	5.7	0.3
VIC	5.1	19.0	8.2	8.0	4.4	0.0
QLD	5.8	18.3	6.2	5.2	2.6	0.6
WA	5.4	23.1	10.8	9.6	6.1	1.1
SA	5.6	21.6	8.4	6.1	4.1	0.6
ACT-TAS-NT	12.6	20.2	9.4	8.8	7.0	0.6
Major referral	7.0	32.7	14.8	14.4	8.6	0.5
Major Childrens	7.2	15.5	6.0	5.5	4.0	0.0
Urban District	5.1	16.3	6.6	5.8	3.7	0.4
Regional/Rural	6.0	16.6	6.0	5.6	3.5	0.4

Figure 1: Number of patients waiting or being treated in the ED, from 92 hospitals, over 4 surveys



SUGGESTED CITATION

Australasian College for Emergency Medicine (2016), 2016 Access Block Point Prevalence Survey, Melbourne.

1. CONTACT FOR FURTHER INFORMATION

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