# National Partnership Agreement on Improving Public



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## National Partnership Agreement on Improving Public Hospital Services: National Emergency Access Target

## Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: National Emergency Access Target (NEAT)

METEOR identifier: 489630

Registration status: Health, Standard 21/11/2013

**Description:** For all patients presenting to a public hospital emergency department (including

publicly funded privately operated hospitals), the percentage of presentations where the time from presentation to physical departure, i.e. the length of the

<u>emergency department stay</u>, is  $\leq 4$  hours, i.e.  $\leq 240$  minutes.

Indicator set: Performance Indicators for the National Partnership Agreement on Improving

**Public Hospital Services** 

Health, Standard 21/11/2013

## Collection and usage attributes

#### Computation description:

Data are provided as per the Non-admitted patient emergency department care (NAPEDC) NMDS 2012-13.

The scope for calculation of the National Emergency Access Target (NEAT) is all hospitals reporting to the NAPEDC NMDS (Peer Groups A, B and other) as at August 2011 (when the National Health Reform Agreement—National Partnership Agreement on Improving Public Hospital Services was signed). For the duration of the agreement, hospitals that have not previously reported to the NAPEDC NMDS can come into scope, subject to agreement between the jurisdiction and the Commonwealth.

Calculation includes all presentations with a physical departure date/time in the reporting period, including records where the presentation date/time is prior to the reporting period. Invalid records are excluded from the numerator and denominator. Invalid records are records for which:

- Length of stay is less than zero
- · Presentation date or time are missing
- Physical departure date or time are missing

Calculation includes presentations with any Type of visit to emergency department.

Emergency department (ED) stay length is calculated by subtracting <u>Time patient presents</u> and <u>Date patient presents</u> from <u>Emergency department physical departure time</u> and <u>Emergency department physical departure date</u> respectively, as per the business rules included in the NAPEDC NMDS 2012-13:

- If the patient is subsequently admitted to this hospital (either short stay unit, hospital-in-the-home or non-emergency department hospital ward), then record the time the patient leaves the emergency department to go to the admitted patient facility.
  - Patients admitted to any other ward or bed within the emergency department have not physically departed the emergency department until they leave the emergency department.
  - If the patient is admitted and subsequently dies before leaving the emergency department, then record the time the body was removed from the emergency department.
- If the service episode is completed without the patient being admitted, then
  record the time the patient's emergency department non-admitted clinical
  care ended.
- If the service episode is completed and the patient is referred to another hospital for admission, then record the time the patient leaves the emergency department.
- If the patient did not wait, then record the time the patient leaves the emergency department or was first noticed as having left.
- If the patient leaves at their own risk, then record the time the patient leaves the emergency department or was first noticed as having left.
- If the patient died in the emergency department, then record the time the body was removed from the emergency department.
- If the patient was dead on arrival, then record the time the body was removed from the emergency department. If an emergency department physician certified the death of the patient outside the emergency department, then record the time the patient was certified dead.

Presentation time and date are the time and date of the first recorded contact with an emergency department staff member. The first recorded contact can be the commencement of the clerical registration or triage process, whichever happens first.

Computation:

100 × (Numerator ÷ Denominator)

Numerator:

Number of emergency department presentations where ED stay length is  $\leq$  4 hours (i.e.  $\leq$  240 minutes).

#### Numerator data elements:

Data Element / Data Set

Emergency department stay—presentation date, DDMMYYYY

**Data Source** 

National Emergency Access Target data

Guide for use

Data source type: Administrative by-product data

#### Data Element / Data Set-

Emergency department stay—presentation time, hhmm

**Data Source** 

National Emergency Access Target data

Guide for use

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#### Data Element / Data Set-

Emergency department stay—physical departure date, DDMMYYYY

**Data Source** 

National Emergency Access Target data

Guide for use

Data source type: Administrative by-product data

#### Data Element / Data Set-

Emergency department stay—physical departure time, hhmm

**Data Source** 

National Emergency Access Target data

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Data source type: Administrative by-product data

**Denominator:** 

Number of emergency department presentations

Denominator data elements:

-Data Element / Data Set-

Person—person identifier, XXXXXX[X(14)]

**Data Source** 

National Emergency Access Target data

Guide for use

Data source type: Administrative by-product data

Disaggregation:

By state/territory and hospital

Disaggregation data elements:

Data Element / Data Set-

Establishment—organisation identifier (Australian), NNX[X]NNNNN

**Data Source** 

National Emergency Access Target data

Guide for use

Data source type: Administrative by-product data

**Comments:** Performance by states and territories will be measured against the schedule of

improvement agreed in the National Health Reform Agreement—National Partnership Agreement on Improving Public Hospital Services Schedule C (National Emergency Access Target—Facilitation and Reward Funding), Table C5.

Information about the volume of invalid records will be included in data quality

statements.

## Representational attributes

Representation class: Percentage

Data type: Real

Unit of measure: Service event

Format: N[NN]

#### **Data source attributes**

Data sources: —Data Source

National Emergency Access Target data

Frequency

Quarterly

Data custodian

Department of Health and Ageing; Australian Institute of Health and Welfare

## **Accountability attributes**

Reporting requirements: National Partnership Agreement on Improving Public Hospital Services

Organisation responsible for providing data:

Australian Institute of Health and Welfare; Department of Health and Ageing

Source and reference attributes

**Submitting organisation:** Australian Institute of Health and Welfare

Reference documents: Standing Council on Federal Financial Relations. National Partnership Agreement

on Improving Public Hospital Services, Schedule C. Standing Council on Federal

Financial Relations, Canberra. Viewed 15 February 2013,

http://www.federalfinancialrelations.gov.au/content/npa/

health reform/national-workforce-reform/national partnership.pdf

### Relational attributes

Related metadata references:

See also <u>National Partnership Agreement on Improving Public Hospital Services:</u>
<u>Admission to hospital from emergency departments</u>

Health, Standard 15/06/2012

See also Non-admitted patient emergency department care NMDS 2012-13 Health, Superseded 07/02/2013