

National Healthcare Agreement: PI 20a–Waiting times for elective surgery: waiting times in days, 2019

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National Healthcare Agreement: PI 20a–Waiting times for elective surgery: waiting times in days, 2019

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Progress measure
Short name:	PI 20a–Waiting times for elective surgery: waiting times in days, 2019
METEOR identifier:	698999
Registration status:	Health! , Superseded 13/03/2020
Description:	Median and 90th percentile waiting times for elective surgery in public hospitals, including by intended procedure.
Indicator set:	National Healthcare Agreement (2019) Health! , Superseded 13/03/2020
Outcome area:	Hospital and Related Care National Health Performance Authority (retired) , Retired 01/07/2016 Health! , Standard 07/07/2010

Collection and usage attributes

Computation description: [Elective surgery](#) as defined in the National Elective Surgery Waiting Times Data Collection.

For 2016–17, intended procedures are as defined in permissible values 001 to 017 in [Elective surgery waiting list episode—intended procedure, code NNN](#).

For 2017–18, intended procedures are as defined in permissible values 001 to 017 in [Elective surgery waiting list episode—intended procedure, code NNN](#).

Waiting time as defined in [Elective surgery waiting list episode—waiting time \(at removal\), total days N\[NNN\]](#). Calculated by jurisdictions by subtracting the listing date for care from the removal date, minus any days the patient was waiting with a less urgent clinical urgency category than their clinical urgency category at removal, and excluding days where the patient was not ready for care.

Waiting times are calculated for patients whose reason for removal was:

1. *Admitted as an elective patient for awaited procedure by or on behalf of this hospital or the state/territory.*
2. *Admitted as an emergency patient for awaited procedure by or on behalf of this hospital or the state/territory.*

Analysis by state and territory based on location of service.

Analysis by remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of the person.

Presented as number of days.

Computation:

Number of days waited at 50th and 90th percentile.

Calculated overall and for each intended procedure.

The 50th and 90th percentiles have been rounded to the nearest whole number of days.

The calculation is where:

n is the number of observations and

p is the percentile value divided by 100,

then $n \times p = i + f$ (where i is an integer and f is the fractional part of $n \times p$).

If $n \times p$ is an integer, the percentile value will correspond to the average of the values for the i^{th} and $(i+1)^{\text{th}}$ observations.

If $n \times p$ is not an integer, the percentile value will correspond to the value for the $(i+1)^{\text{th}}$ observation.

Numerator data elements:**Data Element / Data Set**

[Elective surgery waiting list episode—reason for removal from a waiting list, code N](#)

Data Source

[National Hospital Morbidity Database \(NHMD\)](#)

NMDS / DSS

[Admitted patient care NMDS 2016-17](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Elective surgery waiting list episode—reason for removal from a waiting list, code N](#)

Data Source

[National elective surgery waiting times data collection](#)

NMDS / DSS

[Elective surgery waiting times NMDS 2017-18](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Elective surgery waiting list episode—waiting time \(at removal\), total days N\[NNN\]](#)

Data Source

[National Hospital Morbidity Database \(NHMD\)](#)

NMDS / DSS

[Admitted patient care NMDS 2016-17](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Elective surgery waiting list episode—waiting time \(at removal\), total days N\[NNN\]](#)

Data Source

[National elective surgery waiting times data collection](#)

NMDS / DSS

[Elective surgery waiting times NMDS 2017-18](#)

Guide for use

Data source type: Administrative by-product data

Disaggregation:

2016–17 (revised following jurisdiction provision of elective surgery waiting times cluster data to the National Hospital Morbidity Database (NHMD)), 2017–18—State and territory, by intended procedure (and total), by:

- peer group
- Indigenous status

2016–17 (revised following jurisdiction provision of elective surgery waiting times cluster data to the NHMD)—State and territory, by:

- remoteness (Australian Statistical Geography Standard (ASGS) 2011 Remoteness Structure)
- 2011 SEIFA IRSD quintiles

2016–17 (revised following jurisdiction provision of elective surgery waiting times cluster data to the NHMD)—Nationally, by (all not reported):

- 2011 SEIFA IRSD deciles
- selected intended procedures (cataract extraction, cholecystectomy, coronary artery bypass graft, cystoscopy) by 2011 SEIFA IRSD quintiles
- intended procedure, by peer group, by Indigenous status, by remoteness (ASGS 2011 Remoteness Structure).

Some disaggregations may result in numbers too small for publication.

Disaggregation by peer group uses the peer group classification as described in the AIHW publication [Australian hospital peer groups](#).

Disaggregation data elements:

Data Element / Data Set

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

Data Source

[National elective surgery waiting times data collection](#)

NMDS / DSS

[Elective surgery waiting times NMDS 2017-18](#)

Guide for use

Data source type: Administrative by-product data

Used for disaggregation by state/territory and to derive hospital peer group

Data Element / Data Set

[Establishment—organisation identifier \(state/territory\), NNNNN](#)

Data Source

[National Hospital Morbidity Database \(NHMD\)](#)

NMDS / DSS

[Admitted patient care NMDS 2016-17](#)

Guide for use

Data source type: Administrative by-product data

Used to derive hospital peer group

Data Element / Data Set

[Person—area of usual residence, statistical area level 2 \(SA2\) code \(ASGS 2011\) N\(9\)](#)

Data Source

[National Hospital Morbidity Database \(NHMD\)](#)

NMDS / DSS

[Admitted patient care NMDS 2016-17](#)

Guide for use

Data source type: Administrative by-product data

Used for disaggregation by state/territory, remoteness and SEIFA IRSD

Data Element / Data Set

[Person—Indigenous status, code N](#)

Data Source

[National Hospital Morbidity Database \(NHMD\)](#)

NMDS / DSS

[Admitted patient care NMDS 2016-17](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Person—Indigenous status, code N](#)

Data Source

[National elective surgery waiting times data collection](#)

NMDS / DSS

[Elective surgery waiting times NMDS 2017-18](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Elective surgery waiting list episode—intended procedure, code NNN](#)

Data Source

[National Hospital Morbidity Database \(NHMD\)](#)

NMDS / DSS

[Admitted patient care NMDS 2016-17](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

[Elective surgery waiting list episode—intended procedure, code NNN](#)

Data Source

[National elective surgery waiting times data collection](#)

NMDS / DSS

[Elective surgery waiting times NMDS 2017-18](#)

Guide for use

Data source type: Administrative by-product data

Comments:

Most recent data available for 2019 National Healthcare Agreement performance reporting: 2017–18.

Intended procedures are a subset of all procedures, e.g. in 2016–17, approximately 64% of removals did not fall into one of the selected intended procedures.

For 2016–17 data, the 2011 SEIFA IRSD quintile and decile data will be produced using the Australian Statistical Geography Standard 2011 geographical unit of Statistical Area Level 2.

The scope of the National Elective Surgery Waiting Times Data Collection is patients on, or removed from, waiting lists for elective surgery which are managed by public acute hospitals.

Note that for the 2016 and previous reports, disaggregations by public hospital peer group for this indicator were calculated using the peer group classification method as reported in [Australian hospital statistics 2010–11](#).

Representational attributes

Representation class: Percentile

Data type: Real
Unit of measure: Time (e.g. days, hours)
Format: N[NNN]

Indicator conceptual framework

Framework and dimensions: [Accessibility](#)

Data source attributes

Data sources:

Data Source

[National elective surgery waiting times data collection](#)

Data custodian

Australian Institute of Health and Welfare

Data Source

[National Hospital Morbidity Database \(NHMD\)](#)

Frequency

Annual

Data custodian

Australian Institute of Health and Welfare

Accountability attributes

Reporting requirements: National Healthcare Agreement

Organisation responsible for providing data: Australian Institute of Health and Welfare

Further data development / collection required: Specification: Final, the measure meets the intention of the indicator.

Source and reference attributes

Reference documents: AIHW (Australian Institute of Health and Welfare) 2012. Australian hospital statistics 2010–11. Health services series no. 43. Cat. no. HSE 117. Canberra: AIHW.

AIHW 2015. Australian hospital peer groups. Health services series no. 66. Cat. no. HSE 170. Canberra: AIHW.

Relational attributes

Related metadata references: Supersedes [National Healthcare Agreement: PI 20a–Waiting times for elective surgery: waiting times in days, 2018](#)
[Health!](#), Superseded 19/06/2019

Has been superseded by [National Healthcare Agreement: PI 20a–Waiting times for elective surgery: waiting times in days, 2020](#)
[Health!](#), Standard 13/03/2020

See also [National Healthcare Agreement: PI 20b–Waiting times for elective surgery: proportion seen on time, 2019](#)
[Health!](#), Superseded 13/03/2020

See also [National Healthcare Agreement: PI 32–Patient satisfaction/experience, 2019](#)
[Health!](#), Superseded 13/03/2020

