



7.10 Emergency department care

Emergency departments are a critical part of Australia's health care system, providing care for patients who require urgent medical attention.

Most larger public hospitals have purpose-built emergency departments. Some smaller public hospitals can also provide emergency services through informal arrangements.

Accident and emergency services can also be provided by private hospitals. In 2015–16, there were 36 private hospitals in Australia providing these services.

The information presented in this snapshot relates to the 287 Australian public hospitals with purpose-built formal emergency departments that are staffed 24 hours a day. These hospitals report to the AIHW's National Non-Admitted Patient Emergency Department Care Database (NNAPEDCD). The latest available estimate (2014–15) indicated that around 88% of all public hospital emergency services were provided in formal emergency departments covered by the NNAPEDCD.

Emergency department presentations

In 2016–17, there were about 7.8 million presentations to public hospital emergency departments. This was an average of more than 21,000 each day across Australia. Between 2012–13 and 2016–17, after adjusting for hospital coverage changes, the number of emergency department presentations increased by an average of 2.6% each year.

In 2016–17:

- emergency department presentations were evenly split for males (50%) and females (50%)
- the most common 10-year age groups presenting at emergency departments were people aged 25–34 (14%) and 15–24 (13%).

Some population groups were over-represented in emergency department presentations compared with their representation in the population as a whole:



21% were aged 65 and over (15% of the population)



11% were aged under 5 (7% of the population)



6.5% were Aboriginal and Torres Strait Islander people (3.3% of the population)



Patients who present to the emergency department are 'triaged' on arrival according to the urgency of their need for care. Fewer than 1% of emergency department presentations were assigned a triage category (see Glossary) of *Resuscitation* (those who need immediate treatment); 13% were assigned to *Emergency* (requiring attention within 10 minutes); 37% were *Urgent* (attention within 30 minutes); 41% were *Semi-urgent* (attention within 60 minutes); and 9.3% were *Non-urgent* (attention within 120 minutes).

The majority (75%) of people who presented to emergency departments either walked in, or came by private transport, public transport, community transport, or taxi. About 25% of presentations arrived by ambulance, air ambulance or helicopter rescue service, with 83% of *Resuscitation* patients arriving by this mode.

One-quarter (25%) of emergency department presentations had a diagnosis related to injury (including fractures and burns) or poisoning (see Chapter 3.15 'Injury').

Overall, around 31% of emergency department patients were admitted to hospital for further care and around 1.9% of patients were referred to another hospital for admission. Another 61% departed without being admitted or referred, and around 3.6% did not wait to be attended by a health care professional.

Waiting time in emergency departments

Emergency department waiting time is the time that elapses from presentation in the emergency department to start of clinical care. In 2016–17, nationally, 50% of patients were seen within 19 minutes; 90% were seen within 95 minutes.

A patient is said to be 'seen on time' if the time between presentation at the emergency department and the start of their clinical care is within the time specified by the triage category to which they are assigned.

About 73% of emergency department presentations were seen on time, including almost 100% of *Resuscitation* patients and 77% of *Emergency* patients. For *Non-urgent* patients, the proportion seen on time was 92%—higher than that for patients assessed as *Urgent* and *Semi-urgent* (Figure 7.10.1).

The proportion of emergency department presentations seen on time was fairly stable between 2012–13 and 2016–17, ranging from 73% (in 2012–13 and 2016–17) to 75% (in 2013–14).

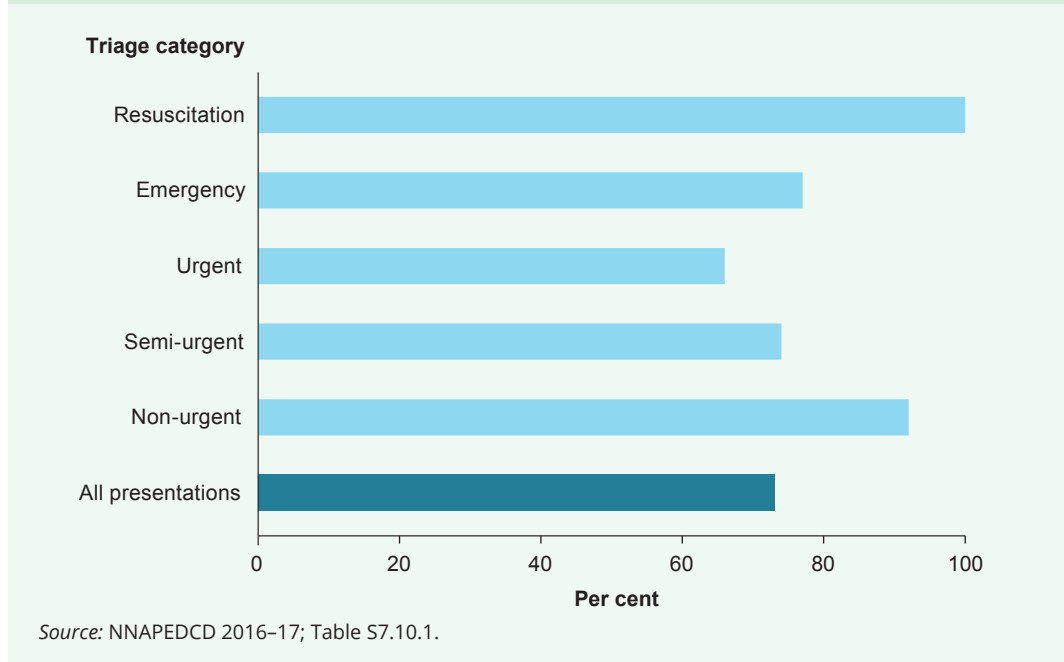
In 2016–17, about 72% of emergency department presentations were completed in 4 hours or less. This was slightly less than the equivalent figure for 2015–16 of 73%, but higher than the figure for 2012–13 of 67%.

For patients who were subsequently admitted, the proportion of presentations completed within 4 hours increased from 36% in 2012–13 to 49% in 2016–17.





Figure 7.10.1: Proportion of patients seen within the clinically recommended time, by triage category, 2016–17



What is missing from the picture?

The scope of the NNAPEDCD is limited to formal emergency departments in public hospitals. It may not be representative of emergency services provided in hospitals that do not have formal emergency departments.

It is not possible to determine whether the patient had been referred to the emergency department by another doctor or health service. It is also not possible to identify the admitted patient episode for those patients who are later admitted. Data linkage can improve the understanding of patient outcomes and pathways through the health system.

In 2016–17, principal diagnosis information was reported using a variety of classifications, and was only reported for about 96% of presentations. There was no information on the procedures or on other treatments provided in the emergency department.

Where do I go for more information?

More detailed information can be found in the report *Emergency department care 2016–17: Australian hospital statistics*.

Information about emergency occasions of service provided by private hospitals is reported to the Australian Bureau of Statistics Private Health Establishments Collection and is presented in the *Private hospitals, Australia* reports.