

Queensland Ambulance Service

Public Performance Indicators financial year first quarter - July to September 2016



Care for patients

Local Ambulance Service Network	% Cardiac Patients Receiving 1,2 Lead ECG ¹	Clinically Meaningful Pain Reduction % Cardiac Patients ¹	Clinically Meaningful Pain Reduction % Trauma Patients	% Emergency & Urgent Patients Treated & Not Transported	Total Audits Completed	Clinical Audit & Review CART 3 & 4 Variations
Cairns & Hinterland	100.0	87.2	93.0	13.3	265	1
Cape York & Torres Strait	0.0	0.0	85.7	15.7	7	0
Central Queensland	100.0	95.9	89.7	13.1	204	0
Central West	0.0	0.0	75.0	12.7	4	0
Darling Downs	91.7	88.1	94.2	13.3	307	1
Gold Coast	98.5	98.5	95.5	11.9	626	0
Mackay	96.7	89.7	89.3	19.2	116	0
Metro North	99.1	87.0	90.1	14.6	838	2
Metro South	94.9	83.7	88.6	15.4	962	2
North West	83.3	83.3	96.7	17.3	42	0
South West	100.0	100.0	84.0	16.0	11	0
Sunshine Coast	98.8	94.9	92.7	13.2	514	0
Townsville	100.0	87.2	85.7	14.0	279	0
West Moreton	100.0	76.9	86.4	17.0	360	0
Wide Bay	90.7	85.2	94.7	14.9	241	0
Statewide	97.0	88.2	90.7	14.4	4,776	6

¹ In more remote areas small case volume may affect the values shown.



Care for staff

Local Ambulance Service Network	Clinical Attrition % (ROGS definition)	Crew Safety Index ¹	% Eligible Officers with Current Performance Development Plans	Injury Downtime Rate %
Cairns & Hinterland	1.9	7.6	86.9	0.5
Cape York & Torres Strait	0.0	27.6	64.5	0.0
Central Queensland	0.5	6.6	66.1	0.4
Central West	0.0	11.8	66.7	0.0
Darling Downs	1.2	4.6	88.0	0.2
Gold Coast	0.0	9.7	81.3	0.8
Mackay	2.0	1.5	77.9	0.0
Metro North	0.2	5.3	67.0	0.4
Metro South	0.2	4.4	68.9	0.4
North West	0.0	19.5	78.7	0.0
South West	0.0	11.6	53.5	0.0
Sunshine Coast	0.3	2.3	85.0	0.9
Townsville	0.9	11.8	78.2	0.4
West Moreton	0.6	4.0	65.8	0.2
Wide Bay	0.5	1.3	84.4	1.9
Statewide	0.5	5.9	75.4	0.5

¹ Statewide figures represent a percentage of all staff, with exception of 'Crew Safety Index' which presents physical and/or verbal abuse per 100,000 hrs worked in LASN Operations.



Daily activity

Local Ambulance Service Network	Emergency & Urgent Incidents ¹		Non-Emergency Medically Authorised Incidents ¹		Total Incidents ¹		Total Patients Transported by Road ¹	
	Jul-Sep 2015-16	Jul-Sep 2016-17	Jul-Sep 2015-16	Jul-Sep 2016-17	Jul-Sep 2015-16	Jul-Sep 2016-17	Jul-Sep 2015-16	Jul-Sep 2016-17
Cairns & Hinterland	128	137	49	48	177	185	152	157
Cape York & Torres Strait	5	4	3	3	8	7	5	5
Central Queensland	93	99	38	32	131	131	114	113
Central West	4	4	2	2	6	6	5	6
Darling Downs	115	121	46	46	162	167	139	144
Gold Coast	222	226	45	45	267	271	228	229
Mackay	63	67	19	21	82	88	66	71
Metro North	387	394	161	170	548	564	479	492
Metro South	422	429	156	178	577	607	497	524
North West	22	24	7	8	29	32	22	25
South West	7	8	5	4	12	12	11	10
Sunshine Coast	170	181	68	71	238	252	210	219
Townsville	131	137	48	45	179	182	151	153
West Moreton	115	124	27	34	142	158	120	132
Wide Bay	106	113	31	33	138	145	116	122
Statewide	1,990	2,067	705	741	2,696	2,808	2,315	2,401

¹ Figures are rounded to whole numbers.



Service delivery

Local Ambulance Service Network	Response Time (mins)				Response Time (%)		% of Non-Emergency Incidents Attended to by the Appointment Time ¹
	50th Percentile	90th Percentile	50th Percentile	90th Percentile	% < 30 mins	% < 60 mins	
Cairns & Hinterland	8.4	16.8	12.5	27.7	87.2	98.5	89.6
Cape York & Torres Strait	9.1	20.7	11.1	23.5	91.9	96.7	0.0
Central Queensland	7.4	14.6	9.9	20.4	95.2	99.1	81.0
Central West	7.0	14.8	7.7	20.1	87.0	98.2	0.0
Darling Downs	8.2	19.2	11.0	25.7	87.4	97.3	79.7
Gold Coast	9.5	16.9	18.5	44.9	52.2	84.5	81.3
Mackay	8.2	18.0	10.8	25.5	92.5	98.3	80.2
Metro North	8.7	16.0	17.2	41.6	51.9	89.9	83.0
Metro South	9.3	17.1	17.2	41.8	52.5	87.5	83.0
North West	7.0	12.0	9.2	17.4	92.7	99.4	25.0
South West	6.3	17.7	7.0	16.1	87.1	100.0	81.5
Sunshine Coast	9.0	17.9	13.6	30.0	71.2	93.5	77.3
Townsville	7.9	13.7	12.1	24.0	85.5	97.1	87.3
West Moreton	9.3	18.1	15.5	37.4	57.7	88.2	79.0
Wide Bay	8.6	18.1	11.7	27.9	79.2	93.7	69.8
Statewide	8.7	16.8	14.5	36.1	70.1	92.7	82.4

¹ In more remote areas small case volume may affect the values shown.

No. of Triple Zero (000) Calls Received by Operations Centres Statewide	194,560
Triple Zero (000) Calls Answered <= 10 secs	91.58%



Value for money

Local Ambulance Service Network	Population	Cost per Incident (Emergency, Urgent & Non-Emergency Medically Authorised) ¹	Average Cost Per Capita ¹
Cairns & Hinterland	245K	\$655	\$159
Cape York & Torres Strait	26K	\$2,016	\$231
Central Queensland	227K	\$805	\$162
Central West	12K	\$2,138	\$348
Darling Downs	277K	\$773	\$159
Gold Coast	560K	\$533	\$89
Mackay	182K	\$956	\$146
Metro North	942K	\$482	\$100
Metro South	1,088M	\$495	\$93
North West	33K	\$1,043	\$323
South West	27K	\$1,613	\$287
Sunshine Coast	384K	\$598	\$130
Townsville	241K	\$577	\$153
West Moreton	264K	\$616	\$117
Wide Bay	212K	\$631	\$140
Statewide	4.719M	\$599	\$120

¹ Preliminary costing model only. Financial data allocations subject to further review. The 2014-2015 Road Ambulance Budget and 2014-2015 Road Ambulance Activity are used in the calculations.



National comparison 2014-2015

Council of Australian Governments Report on Government Services (ROGS) 2016 ¹	QAS	National
Patient Satisfaction - Overall	98%	98%
Satisfaction with Treatment	98%	98%
Satisfaction with Paramedic Attitude	98%	98%
Cost per Incident	\$651.74	\$837.48
Cost per Capita	\$129.84	\$119.45
Total Incidents	946K	3.370M
Incidents per 1,000 People	199	144
Response to Incident Ratio	1.16	1.24
Total Patients Attended	903K	3.200M
Patients Transported	812K	2.761M
Patients Not Transported	91K	440
Patients Not Transported	10%	14%
ED Patients Arriving by Ambulance	435.0K	1.794M
Triage Category 1 - Resuscitation	85.4%	84.1%
Triage Category 2 - Emergency	52.5%	45.5%
Triage Category 3 - Urgent	39.4%	33.8%
Triage Category 4 - Semi Urgent	17.8%	14.9%
Triage Category 5 - Non Urgent	5.6%	3.8%
Cardiac Arrest Survival Rate	25.0%	28.4% ²
Total Salaried Staff	4,029	15,976
Ambulance Operatives	87.9%	81.0%
Operational Workforce Attrition	2.6%	3.6%
Paramedics per 100,000 Population	61.5	46.7

¹ ROGS 2016 relates to 2014-2015 data and activity.

² The National range of Cardiac Arrest Survival Rates is shown; rates can vary due to differences in calculation methodology.



Public Performance Indicators Explanatory notes



Care for patients

% Cardiac Patients Receiving 12 lead ECG

This measure evaluates the identification and management of cardiac related conditions. All patients aged 16 years and above with a cardiac related final assessment and an initial pain score equal to or greater than seven points (on a ten point scale) are included. The figure presented provides the percentage of these patients that receive a 12 lead ECG to aid diagnosis and management.

Clinical Audit & Review

Clinical audit is a quality improvement activity that seeks to improve patient care and outcomes through systematic review of patient care records to measure compliance to clinical practice standards. Of the total audits undertaken, a small number of cases are identified as demonstrating either a significant (Level 3) or major (Level 4) variation to expected levels of clinical practice, skills performance and/or clinical judgement.

Clinically Meaningful Pain Reduction % Cardiac Patients

This measure provides an indication of the effective management of severe cardiac pain by the ambulance service. The outcome measure, 'clinically meaningful pain reduction', is defined as a minimum two point reduction (on a ten point scale) in pain score from pre- to post-treatment. The denominator for this indicator includes a count of all patients aged 16 years and above with a cardiac related final assessment and an initial pain score equal to or greater than seven points (on a ten point scale) who are administered an analgaesic agent (GTN, Fentanyl or Morphine). The numerator contains a count of the number of these patients who report a clinically meaningful reduction in pain.

Clinically Meaningful Pain Reduction % Trauma Patients

This measure provides an indication of the effective management of severe traumatic injury related pain by the ambulance service. The outcome measure, a 'clinically meaningful pain reduction', is defined as a minimum two point reduction (on a ten point scale) in pain score from pre- to post-treatment. The denominator for this indicator includes a count of all patients aged 16 years and above with a trauma related final assessment and an initial pain score equal to or greater than seven points who are administered an analgaesic agent (Morphine, Fentanyl, Methoxyflurane or Ketamine). The numerator contains a count of the number of these patients who report a clinically meaningful reduction in pain.

% Emergency & Urgent Patients Treated & Not Transported

This measure provides the percentage of emergency (Code 1) and urgent (Code 2) patients who request an ambulance service via the Triple Zero (000) system and receive treatment by a QAS paramedic but are not transported by the ambulance service to a healthcare facility for additional assessment and care. This is presented as a percentage of all emergency and urgent patients who are attended to by QAS.



Care for staff

Clinical Attrition % (ROGS Definition)

This measures the level of employee attrition in the operational workforce. It is calculated as the number of fulltime equivalent (FTE) employees who exit the organisation, as a proportion of the number of FTE employees. It is based on staff FTE defined as 'operational positions where paramedic qualifications are either essential or desirable to the role'.

Crew Safety Index

This measure provides an indication of the rate of exposure of operational paramedics to deliberate physical violence and verbal abuse by patients and/or bystanders. This is calculated as the number of reported cases of occupational violence (recorded within the Safety Health and Environment (SHE) reporting system) per 100,000 hours worked (calculated as the sum of total duty hours + overtime hours + hours of callout on emergency availability).

% Eligible Officers with Current Performance Development Plans

This measure provides the proportion of operational personnel with current performance development plans recorded within the Learning Management System (LMS), as a percentage of operational personnel (ROGS definition). Performance development plans support a culture where supervisors and employees are accountable for their performance. Outstanding performance is recognised and opportunities are provided for ongoing professional development.

Injury Downtime Rate %

Injury downtime rate measures lost time at work due to injury as a percentage of total hours worked. It is a way for QAS to assess the effect of its staff rehabilitation strategies.



Daily activity

Emergency & Urgent Incidents

This measure provides an average daily count of the number of emergency and urgent ambulance incidents attended by QAS.

- Emergency (Code 1) incidents are potentially life threatening events that necessitate the use of ambulance warning devices (lights and sirens).
- Urgent (Code 2) incidents may require an undelayed response but do not necessitate the use of ambulance warning devices (lights and sirens).

Non-Emergency Medically Authorised Incidents

This measure provides an average daily count of the number of non-emergency incidents (Code 3 and Code 4) attended by an ambulance or patient transport service unit without the use of ambulance warning devices (lights and sirens). A non-emergency case is a patient seen by a medical practitioner and deemed by the medical practitioner as non-emergency but requiring ambulance transport.

Total Incidents

This measure provides an average daily count of emergency, urgent and non-emergency events that resulted in one or more responses by the ambulance service.

Total Patients Transported by Road

This measure provides an average daily count of patients transported by the ambulance service in a road-based vehicle.



Service delivery

Response Time Performance for Emergency & Urgent Responses (mins) 50th Percentile / 90th Percentile

A response is the dispatch of an ambulance service vehicle. Response time is the period from the time when the call is received to when the first ambulance service vehicle arrives at the scene.

Code 1 & 2A Response times (in minutes) for the 50th and 90th percentiles are presented in this report:

- 50th percentile - Time within which 50 per cent of emergency incidents are responded to.
- 90th percentile - Time within which 90 per cent of emergency incidents are responded to.

Response Time Performance for Urgent Responses

Response time performance measurements for codes 2B and 2C are shown as the percentage of first arrivals on scene within 30 minutes (for Code 2B) and 60 minutes (for Code 2C) - these are benchmarks set by QAS to guide performance management.

Percentage of Non-Emergency Incidents Attended to by the Appointment Time

This measure reports the proportion of medically authorised road transports (code 3) (excluding Queensland Health and aero-medical transports) which arrive on time for a designated appointment, or are met for returned transport within two hours of notification of completion of appointment (code 4). Some LASNs are affected by small case numbers.



Value for money

Population

Population estimate calculations for QAS Local Ambulance Service Networks are based upon the June 2014 population estimates sourced from the Statistical Analysis Linkage Team, Health Statistics Unit, Queensland Department of Health.

Average Cost Per Capita

Calculated as total QAS Road Ambulance Budget divided by estimated population, this measure provides an indication of the relative cost of providing ambulance services to communities across the State.

Cost Per Incident (Emergency, Urgent & Non-Emergency Medically Authorised)

This measure of cost efficiency is calculated by dividing the total annual QAS Road Ambulance Budget by the total Road Ambulance Activity (sum of all emergency, urgent and non-emergency incidents) attended during that period.



National comparison 2014-2015

Government Services report

All reported elements are sourced from the Report on Government Services - <http://www.pc.gov.au/gsp/rogs>

ROGS cost per incident and cost per capita are based on the total ambulance service organisations' expenditure.

