



Service Delivery Statements

Service standards

DDHHS actual results in comparison to its performance, standards and targets/estimated as published in the Service Delivery Statements 2013-14 are presented below.

Darling Downs Hospital and Health Service - Service Standards	Notes*	2013-14 Target/est.	2013-14 Est. Actual	2013-14 Actual
Percentage of patients attending emergency departments seen within recommended timeframes				
Category 1 (within 2 minutes)		100%	100%	100%
Category 2 (within 10 minutes)		80%	94%	94%
Category 3 (within 30 minutes)		75%	75%	75%
Category 4 (within 60 minutes)		70%	71%	70%
Category 5 (within 120 minutes)		70%	85%	84%
All categories	1		76%	75%
Percentage of emergency department attendances who depart within four hours of their arrival in the department	2	80%	80%	80%
Median wait time for treatment in emergency departments (minutes)	3	20	18	18
Median wait time for elective surgery (days)	3	25	30	29
Percentage of elective surgery patients treated within clinically recommended times:				
Category 1 (30 days)		100%	100%	100%
Category 2 (90 days)		91%	100%	98%
Category 3 (365 days)	2	96%	76%	86%
Percentage of specialist outpatients waiting within clinically recommended timeframes:				
Category 1 (within 30 days)		64%	66%	71%
Category 2 (within 90 days)		20%	32%	30%
Category 3 (within 365 days)	4	90%	40%	43%
Total weighted activity units:				
Acute Inpatients	5	40,170	42,649	42,072
Outpatients		8,474	9,763	10,127
Sub-acute		7,333	4,230	4,977
Emergency Department		14,251	16,226	16,027
Mental Health	6	15,636	15,636	24,334
Interventions and Procedures		3,066	3,753	3,670
Average cost per weighted activity unit for Activity Based Funding facilities	7	\$4,395	\$4,104	\$4,142
Rate of healthcare associated Staphylococcus aureus (including MRSA) bloodstream (SAB) infections/10,000 acute public hospital patient days	8	0.9	1.0	1.0
Number of in-home visits, families with newborns		3,742	4,235	4,370
Rate of community follow-up within 1-7 days following discharge from an acute mental health inpatient unit		>60%	74.3%	72%
Proportion of readmissions to an acute mental health inpatient unit within 28 days of discharge	9	<12%	14.4%	13%
Ambulatory mental health service contact duration	10	56,491 – 69,330	59,701	59,225

*See over for notes

Notes:

1. A target is not included as there is no national benchmark for all triage categories, however the service standard has been included (without a target) as it is a nationally recognised standard measure. The 2013-14 estimated actual figures are based on data from July to December 2013.
2. The 2013-14 targets were set as the midway point between the 2013 and 2014 calendar year National Elective Surgery Target (NEST) and National Emergency Access Target (NEAT), as per the National Partnership Agreement on Improving Public Hospital Services. The 2013-14 estimated actual figures are based on data from July 2013 to February 2014.
3. There is no nationally agreed target for median waiting time for treatment in emergency departments or in elective surgery. The 2013-14 estimated actual figures are based on data from July 2013 to February 2014. The large number of category 3 patients treated impacts on the 2013-14 estimated actual figure.
4. The 2013-14 targets for Category 1 and 2 were based on actual 2012-13 performance, and the target for Category 3 aligns with the *Blueprint for better healthcare in Queensland*.
5. The 2013-14 Target/Est. has been amended to reflect Phase 17 ABF model QWAUs to enable comparison with 2014-15 Service Delivery Statements.
6. Actual Mental Health QWAU data fluctuates at the Baillie Henderson Hospital mental health facility based on discharges. As such 2013-14 Estimated Actual has been set to equal the 2013-14 Budget.
7. Estimates of average cost per QWAU are affected by the parameters of the ABF model and are specific to the ABF model under which they are calculated. The 2013-14 Target/Est. that was published in the 2013-14 Service Delivery Statements and the 2013-14 Est. Actuals have been recalculated based on the Phase 17 ABF model to enable comparison with 2014-15 Target/Est. figures. The 2013-14 Target/Est. has been calculated as per Value for Money indicator methodology, excluding Site Specific Grants and Clinical Education and Training.
8. *Staphylococcus aureus* are bacteria commonly found on around 30% of people's skin and noses and often cause no adverse effects. Infections with this organism can be serious, particularly so when they infect the bloodstream. The data reported for this service standard are for bloodstream infections with *Staphylococcus aureus* (including MRSA) and are reported as a rate of infection per 10,000 patient days aggregated to HHS level. The target/estimate for 2014-15 has been revised to align with the national benchmark of 2.0 cases per 10,000 acute public hospital patient days. For further information on this benchmark, see www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129545750
9. The target for mental health readmissions is the nationally indicative target identified in the *Fourth National Mental Health Plan Measurement Strategy*. As such, it represents a stretch target of good practice for HHSs to attain rather than an incremental improvement from prior year performance. This HHS has made improvements on this measure over the past five years and a range of initiatives continue to be progressed to achieve targets on this measure.
10. For 2013-14, a standard methodology was adopted based on previous investment in mental health services, with adjustments for variation expected due to geographic locality.



Comparison of actual financial results with budget

DDHHS actual results in comparison to its budget as published in the State Budget Papers 2013-14 are presented in the following tables with accompanying notes. These do not form part of the annual financial statements of the DDHHS which are presented in Appendix 1.

Income Statement for the year ended 30 June 2014

Darling Downs Hospital and Health Service	Notes	2013-14 Budget \$'000	2013-14 Act. \$'000
Income			
User charges and fees	1,2	536,885	569,261
Grants and other contributions	1,3	30,921	34,003
Other revenue	4	541	4,124
Total income		568,347	607,388
Expenses			
Employee expenses		2,142	1,938
Supplies and services	5	540,204	562,006
<i>including employees still employed by Department of Health</i>		420,682	418,197
Grants and subsidies		2,404	1,582
Depreciation and amortisation		21,083	21,516
Other expenses		959	1,569
Losses on sale/revaluation of assets/impairment		1,555	1,088
Total expenses		568,347	589,699
OPERATING SURPLUS/(DEFICIT)	6	..	17,689

Notes:

1. ABF and Block Funding received under service level agreements were classified as Grants and other contributions for the 2013-14 Service Delivery Statements. This has been reclassified as User charges and fees in line with change in accounting treatment for better comparison.
2. Increase in user charges largely reflects additional funding from amendments to the Service Agreement between Darling Downs Hospital and Health Service (DDHHS) and the Department of Health (DoH). In 2013-14 the largest amendments were the provision of funding for Backlog Maintenance Remediation Program (\$50.6m over 4 years) and National Partnership Agreement on improving Dental services funding. The amendments also reflect costs previously being held centrally being devolved to the HHS.
3. Increase reflects additional revenue from Nursing Homes following review of processes together with donations received during the year.
4. Increase reflects change in accounting for salary recoveries from other agencies. Offset in labour.
5. Additional expenditure reflects the amendments in the Service Agreement between DDHHS and the DoH partly offset by efficiency savings in DoH contract labour. Increases in other supplies and services mainly represent expenditure on backlog maintenance remediation program.
6. Expected surplus for 2013-14 delivered through efficiency savings and increased own source revenue together with some one-off benefits. Surplus will be reinvested in additional facility improvements and services for DDHHS.

Balance sheet

Darling Downs Hospital and Health Service	Notes	2013-14 Budget \$'000	2013-14 Act. \$'000
CURRENT ASSETS			
Cash assets	7	33,646	60,937
Receivables	8	4,226	9,385
Inventories		4,806	5,535
Other		209	234
Total current assets		42,887	79,091
NON-CURRENT ASSETS			
Property, plant and equipment	9	329,637	305,469
Other	
Total non-current assets		329,637	305,469
TOTAL ASSETS		372,524	381,560
CURRENT LIABILITIES			
Payables		40,467	41,551
Accrued employee benefits		..	25
Other		3	30
Total current liabilities		40,470	41,606
TOTAL LIABILITIES		40,470	41,606
NET ASSETS/(LIABILITIES)		332,054	339,954
EQUITY			
Capital/contributed equity	10	309,585	288,219
Accumulated surplus/(accumulated deficit)	11	..	31,938
Asset revaluation surplus	12	22,469	19,797
TOTAL EQUITY		332,054	339,954

Notes:

7. Increase in cash reflects surpluses achieved in 2012-13 and 2013-14.
8. Increase reflects year end accruals, mainly service agreement amendments not settled by end of year
9. Decrease reflects lower commissioning of building assets than incorporated in 2013-14 budget, together with lower than expected revaluation increment.
10. Decrease in Contributed Equity due to lower than budget commissioning of building assets.
11. Reflects accumulated surplus in 2012-13 and 2013-14. Surplus will be re-invested in additional facility improvements and services for DDHHS.
12. Lower than expected revaluation increment on buildings.