

## Reporting and Audit Requirements for all Local Health Districts and Networks

Policy Ref.	Requirement	Frequency	Report	Extra Information
5.1.2	After clerical audits, an approved report must be sent to a senior manager and presented at a surgery/procedural committee.	<b>As per each report's timeframe requirement</b>	Clerical audit report (local template)	This must outline the audit type, issues identified, and recommendations.
5.1.3	Wait list managers must review the audit process quarterly	<b>Quarterly</b>	Quarterly evaluation (local template)	It must include compliance with audits, committee reporting, and availability of records.
5.1.4	<b>NRFC/Suspension</b> Category 1	<b>Weekly:</b> Initial audit at <b>15 NRFC days, follow up audit every 7 days</b>	<b>CERNER:</b> <ul style="list-style-type: none"> <li>WL-Status Review Date 952_PM_WL_STS RV_SSW:DBA</li> <li>855_WR052_SUS PEND_REVIEW</li> <li>PM Office Worklist: WL - 5 days to Suspend Review PM Office Worklist: WL - Exceeded NRFC KPI</li> </ul> <b>iPM:</b> <ul style="list-style-type: none"> <li>WL15</li> <li>WS_WL15</li> <li>WL31</li> <li>RSE_WLIST12</li> <li>GS_WLIST12</li> <li>RSE_AUDIT04</li> <li>GS_AUDIT04</li> <li>RSE_AUDIT11</li> <li>GS_AUDIT11</li> <li>RSE_AUDIT12</li> <li>GS_AUDIT12</li> <li>WS_WL15</li> </ul>	Patients exceeding NRFC threshold: <ul style="list-style-type: none"> <li>Physical clinical review</li> <li>Written recommendation by treating doctor to clinical director (equivalent)</li> <li>Approval or outcome review documentation</li> <li>Removal from waitlist in consultation with treating doctor and referral to alternative service</li> </ul>
	Category 2	<b>Monthly:</b> Initial audit at <b>45 NRFC days, follow up audit every 30 days</b>		
	Category 3	<b>Monthly:</b> Initial audit at <b>180 NRFC days, follow up audit every 90 days</b>		

<b>5.2</b>	Audit of all patients on the waitlist who have a listing date prior to 18 months from the audit date.	<b>Every 6 months</b>	Centrally requested audit from MOH.  Template provided.	<ul style="list-style-type: none"> <li>• Includes patients who are RFC and NRFC</li> <li>• Clinical review at no cost to the patient</li> <li>• Two contact attempts (Letter/ email, follow up phone call)</li> <li>• Correspondence as per section 5.2 of the Policy</li> <li>• Result shared with CE and discussed at appropriate committee.</li> </ul>
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## CERNER monthly reports- (SCHN, SWSLHD, SLHD)

Policy Ref	Requirement	Frequency	Available Report CERNER	Extra Information
4	Patients who have incurred a delay in the last month	Monthly	<b>SCHN, SWSLHD + SLHD</b> Waiting Pts-Delayed Report 952_PM_WL_DELAY_PAT_S SW:DBA	Provide to the Hospital General Manager (equivalent) and table at appropriate committee.
4	Patients who have had 2 or more delays	Monthly	<b>SCHN, SWSLHD + SLHD</b> WL DELAY > ONCE 952_PM_WL_DELY_PAT_MU LT_SSW:DBA	
4	Patients who have been delayed who have not had a rescheduled PAD allocated within 5 days	Monthly	<b>SCHN, SWSLHD + SLHD</b> Waiting Pts-Delayed Report 952_PM_WL_DELAY_PAT_S SW:DBA	
5.3	Provide treating doctor with comprehensive list of patients on waitlist	Monthly or more frequently as needed	<b>SWSLHD + SLHD</b> WL by AMO 945_WL_BY_AMO:DBA  <b>SCHN:</b> Manual report	Send to each treating doctor. Treating doctor to confirm list with waitlist coordinator.

## CERNER monthly reports- (SCHN, SWSLHD, SLHD)

Policy Ref	Requirement	Frequency	Available Report Corner	Extra Information
5.1.1	Check for duplicate bookings	Weekly	<b>SWSLHD + SLHD</b> WL-Multiple Entries (Detail) 952_PM_WL_MULTI_ENTRY_D TL_SSW:DBA	Report signed by the person responsible for conducting the audit. It must be sent to the relevant manager and tabled at appropriate committees.
5.1.1	Ensure correct Clinical Urgency Category has been assigned	Weekly	<b>SWSLHD + SLHD</b> WL-Booking Entry by AMO/User 952_PM_WL_REP_SSW:DBA	
5.1.1	Review listing status of patients whose status review date will become due in the next week	Weekly	<b>SCHN, SWSLHD + SLHD</b> WL-Status Review Date 952_PM_WL_STSRV_SSW:DBA	
5.1.1	Review exceeded planned admission and procedure dates	Weekly	<b>SWSLHD + SLHD</b> BK-In Dt Range Unactioned 952_PM_BOOK_PASTDATE_SSW:DBA <b>SCHN:</b> Manual Report	
5.1.1	Identify patients on list admitted through the emergency department for the same procedure	Weekly	<b>SCHN, SWSLHD + SLHD</b> Waiting Pts - Admissions via Emergency 952_PM_WL_ADM_VEGM_SSW:DBA	
5.1.1	Number of patients removed and reasons for removal from the waiting list	Weekly	<b>SCHN, SWSLHD + SLHD</b> BK-Removals During a Period 952_PM_BOOK_REMOV_LIST_SSW:DBA	
5.1.1	Identify patients on list who are overdue	Weekly	<b>SWSLHD + SLHD</b> WL-Inappropriate Waits 952_PM_WL_INAPP_WAITS_SSW:DBA <b>SCHN:</b> Manual Report	

## CERNER Waitlist Optimised sites (NNSWLHD, MNCLHD, NSLHD and CCLHD), - Monthly Executive Reporting

Policy Ref.	Requirement	Available Reports
4	Patients who have incurred a delay in the last month	855_WR031_DELAY_IN_LAST_MONTH Modified the report to include patients that have been delayed and admitted within same month  <b>NSLHD/CCLHD</b> 855_WR050_HOSP_DELAY_BY 855_WR032_WL_DELAY_GREATER Internal Hospital Initiated Postponements Report (NS Only)
4	Patients who have had 2 or more delays	855_WR032_WL_DELAY_GREATER & PM Office Worklist – WL Pt Enct Deferred Twice PM Office Worklist – WL Hosp Enct Deferred Twice & 855_DELAYED_TWICE_SUMMARY  <b>NSLHD/CCLHD</b> 855_WR032_WL_DELAY_GREATER PM Office Worklist – WL Pt Enct Deferred Twice PM Office Worklist – WL Hosp Enct Deferred Twice Internal Hospital Initiated Postponements Report (NS Only)
4	Patients who have been delayed who have not had a rescheduled PAD allocated within 5 days	855_WR008_DELAY_NOT_RESCH & PM Office Work Item – Waitlist Deferred Pts  <b>NSLHD/CCLHD</b> 855_WR008_DELAY_NOT_RESCH
5.3	Comprehensive list of patients for each treating doctor	855_WR022_WL_BY_AMO & PM Office Work Items – List of Pts by AMO (Waiting, Scheduled, Deferred, Suspended)  <b>NSLHD/CCLHD</b> 855_WR022_WL_BY_AMO Internal Report: Waiting List Management System (NS Only)

## CERNER Waitlist Optimised sites (NNSWLHD, MNCLHD, NSLHD and CCLHD), Weekly Reporting

Policy Ref.	Requirement	Available Reports
5.1.1	Check for duplicate bookings	855_WR049_WL_DUP_BOOKING & PM Office Worklist: WL - Dup Bookings <b>NSLHD/CCLHD</b> 855_WR049_WL_DUP_BOOKING PM Office Worklist: WL - Dup Bookings
5.1.1	Ensure correct Clinical Urgency Category has been assigned	855_WR005_BOOOKED_PATS_AMO & PM Office Work Item – List of patients Waiting & Scheduled by AMO  <b>NSLHD/CCLHD</b> 855_WR022_WL_BY_AMO 855_WR024_WL_BY_CPC
5.1.1	Review listing status of patients whose status review date will become due in the next week	855_WR052_SUSPEND_REVIEW PM Office Worklist: WL - 5 days to Suspend Review PM Office Worklist: WL - Exceeded NRFC KPI  <b>NSLHD/CCLHD</b> 855_WR052_SUSPEND_REVIEW PM Office Worklist: WL - 5 days to Suspend Review PM Office Worklist: WL - Exceeded NRFC KPI
5.1.1	Review exceeded planned admission and procedure dates	855_WR10_TCI_DATE_PASSED & PM Office Worklist: WL - Pt Pass Due Date Spec  <b>NSLHD/CCLHD</b> 855_WR10_TCI_ADM_PASSED PM Office Worklist: WL - Pt Pass Due Date Spec
5.1.1	Identify patients on list admitted through the emergency department for the same procedure	<b>NSLHD/CCLHD</b> 855_WR011_WL_ED_RECLASS
5.1.1	Number of patients removed and reasons for removal from the waiting list	855_WR040_WL_PT_REMOVALS  <b>NSLHD/CCLHD</b> 855_WR040_WL_PT_REMOVALS PM Office Worklist: WL – Bookings Removed By
5.1.1	Number of patients on list who are overdue	<b>NSLHD/CCLHD</b> 855_WR024_WL_BY_CPC NSLHD Internal Report: Waiting List Management

<b>Additional report</b>	Ensure delayed patient is rescheduled for next available theatre	855_WR008_DELAY_NOT_RESCH & PM Office Work Item – Deferred Patients by AMO  <b>NSLHD/CCLHD</b> 855_WR008_DELAY_NOT_RESCH
<b>Additional report</b>	Ascertain whether a patient has already had their procedure	<b>NSLHD/CCLHD</b> 855_WR010_TCI_ADM_PASSED
<b>Additional report</b>	Patients cancelled or postponed after admission on their day of surgery (DOS)	<b>NSLHD/CCLHD</b> Theatres KPI Report SurgiNet
<b>Additional report</b>	Review of patients on list for > 6 months	<b>NSLHD/CCLHD</b> 855_WR019_LTR_AUDIT 855_WR037_WL_GT_6MONTHS

## iPM Monthly reports

Policy Ref	Requirement	Frequency	Available Report iPM	Extra Information
4	Patients who have incurred a delay in the last month	Monthly	RES_WLIST37 or GS_WLIST37 ADMISSION DELAYS	Provide to Hospital General Manager and Table at appropriate Committee
4	Patients who have had 2 or more delays	Monthly	WLI013_SBB PATIENTS WITH 2 OR MORE ADMISSION DELAYS	
4	Patients who have been delayed who have not had a rescheduled PAD allocated within 5 days	Monthly	WLI014_SBB PATIENT DELAYS WITH NO RESCHEDULED TCI GS_WLIST37 Admission Delays	
5.3	Comprehensive list of patients for each treating doctor	Monthly or more frequently as needed	GS or RSE_WLIST34 - WAITLIST SUMMARY BY AMO	Send to each treating doctor. Treating doctor to confirm list with waitlist coordinator
Additional Report	Review patients on list for > 6 months	When patient on list > 6 months	Batch Review	Letter and Phone call with alternate treatment options where available, advice for clinical reassessment, hospital/ district/network contact details

## iPM Weekly reports

Policy Ref	Requirement	Frequency	Available Report iPM	Extra Information
5.1.1	Check for duplicate bookings	Weekly	<b>RSE_WLIST 45</b> or <b>WLI007_SBB WSWL04, WL 21</b> <b>WL 04-</b> duplicate within the facility <b>WL 27-</b> duplicate within the District	Report signed by the responsible person conducting the audit must be sent to the relevant manager and
5.1.1	Ensure correct Clinical Urgency Category has been assigned	Weekly	<b>RSE_WLIST42</b> – CATEGORY 1,2,3 WAITLIST REPORT <b>WS_WL33</b> Total waitlist	tabled at appropriate committees
5.1.1	Review listing status of patients whose status review date will become due in the next week	Weekly	<b>RSE_WLIST12</b> or <b>GS_WLIST12-</b> STATUS REVIEW or <b>RSE_AUDIT04</b> or <b>GS_AUDIT04-</b> WL OPEN SUSPENSION W PRIORITY NOT = 9 <b>RSE_AUDIT11</b> or <b>GS_AUDIT11-</b> WL PRIORITY =9 AND NO CURRENT SUSPENSION <b>RSE_AUDIT12</b> or <b>GS_AUDIT12-</b> WL SUSPENSIONS W.OUT RESUME DATE <b>WS_WL15</b> Suspension review date	
5.1.1	Review exceeded planned admission and planned procedure dates	Weekly	<b>WLI008_SBB</b> PLANNED ADMISSION DATE PASSED or <b>GS_WLIST19</b> - Admission Date Passed <b>WS_WL 33</b> or <b>WL03-</b> Admission Date Passed	
5.1.1	Identify patients on list admitted through the emergency department for the same procedure	Weekly	<b>RSE_WLIST39</b> - EMERGENCY ADMISSION AND HAS ACTIVE WL BOOKING or <b>WLI004-</b> Waiting List Entries for Patients Admitted <b>WS_WL05</b> Emergency admit and possibly on WL	

<b>5.1.1</b>	Number of patients removed and reasons for removal from the waiting list	<b>Weekly</b>	<b>RSE_WLIST 40</b> - REMOVALS FROM THE WAITLIST or <b>WLI011_SBB</b> - removals from WL EXCL.DUE TO ADMISSION	
<b>5.1.1</b>	Number of patients on list who are overdue	<b>Weekly</b>	<b>WS_WLI06</b> – National Elective Surgery Target <b>RSE_WLI011</b> or <b>GS_WLI011</b> – Inappropriate Waits	
<b>Additional Report</b>	Ensure delayed patient is rescheduled for next available theatres session in consultation with treating doctor	<b>Weekly</b>	<b>WLI014_SBB</b> PATIENT DELAYS WITH NO RESCHEDULED TCI <b>GS_WLIST37</b> Admission Delays	

## SDPR Sites – Reports Overview

As Districts and Networks transition to SDPR, standardised reporting is still in development and will be rolled out as implementation progresses.