

2019–20

KPI DATA SUPPLEMENT

SUMMARY



Health

Version 1.1

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Contact:

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Summary of Indicators and Targets for 2019-20 Service Agreements

Strategic Priority	Safety & Quality Framework Domain	Measure	Target	Not Performing X	Under Performing ↘	Performing ✓	ID
Strategy 1: Keep People Healthy							
1.1	Effectiveness	Childhood Obesity – Children with height and weight recorded (%)	70%	<65%	>=65% - <70%	≥70%	MS1102
1.2/1.6	Smoking During Pregnancy – At any time (%):						
	Equity	<ul style="list-style-type: none"> Aboriginal women 	Decrease from previous year	Increase on previous year	No change	Decrease from previous year	PH-013A
	Equity	<ul style="list-style-type: none"> Non-aboriginal women 	Decrease from previous year	Increase on previous year	No change	Decrease from previous year	SPH007
	Effectiveness	Pregnant Women Quitting Smoking - By second half of pregnancy (%)	4% increase on previous year	<1% increase on previous year	≥1% and <4% increase on previous year	4% increase on previous year	DPH_12_01
1.3	Efficiency	Hospital Drug and Alcohol Consultation Liaison - number of consultations (% increase)	Per cent increase on 2018-19 baseline	>=10% decrease from 2018-19 baseline	<10% decrease from 2018-19 baseline	Maintain or increase from 2018-19 baseline	PH-015A
1.4	Effectiveness	Hepatitis C Antiviral Treatment Initiation – Direct acting - by LHD residents: Variance (%)	Individual - See Data Supplement	<98% Target	>=98% and <100%	>=100%	PH-014C
1.6	Effectiveness	Get Healthy Information and Coaching Service - Get Healthy in Pregnancy Referrals (Number of referrals)	Individual - See Supplement	<90%	>=90% - <100%	≥100% target	PH-011C
Strategy 2: Provide World-Class Clinical Care Where Patient Safety is First							
2.1	Safety	Hospital Acquired Pressure Injuries – Rate (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2114
	Safety	Fall-related Injuries in Hospital – Resulting in fracture or intracranial injury – Rate (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2115
	Safety	Healthcare Associated Infections – Rate (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2116
	Safety	Hospital Acquired Respiratory Complications (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2117
	Safety	Hospital Acquired Venous Thromboembolism – Rate (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2118
	Safety	Hospital Acquired Renal failure (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2119
	Safety	Hospital Acquired Gastrointestinal Bleeding (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2120

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	Safety	Hospital Acquired Medication Complications – (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2121
	Safety	Hospital Acquired Delirium (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2122
	Safety	Hospital Acquired Persistent Incontinence (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2123
	Safety	Hospital Acquired Malnutrition (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2124
	Safety	Hospital Acquired Cardiac complications (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2125
	Safety	3rd or 4th Degree Perineal Lacerations During Delivery – (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2126
	Safety	Hospital Acquired Neonatal Birth Trauma – (Rate per 10,000 episodes of care)	Individual - See Data Supplement				KS2127
	Safety	Discharged Against Medical Advice for Aboriginal Inpatients (%)	Individual - See Data Supplement	Increase on previous year	0 and <1 decrease on previous year	>=1 decrease on previous year	SSQ114 SSQ118
		Unplanned Hospital Readmissions – All admissions within 28 days of separation (%):					
	Effectiveness	• All persons	Decrease from previous Year	Increase from previous year.	No change	Decrease from previous Year	SSQ106
	Effectiveness	• Aboriginal persons	Decrease from previous Year	Increase from previous year.	No change	Decrease from previous Year	SSQ107
2.3		Overall Patient Experience Index (Number)					
	Patient Centred Culture	• Adult admitted patients (Number)	>=8.5	<8.2	>=8.2 and <=8.5	>=8.5	KS2301
	Patient Centred Culture	• Emergency department (Number)	>=8.5	<8.2	>=8.2 and <=8.5	>=8.5	
		Patient Engagement Index (Number)					
	Patient Centred Culture	• Adult admitted patients (Number)	>=8.5	<8.2	>=8.2 and <=8.5	>=8.5	KS2302
	Patient Centred Culture	• Emergency department (Number)	>=8.5	<8.2	>=8.2 and <=8.5	>=8.5	
2.4		Elective Surgery:					
		Access Performance - Patients treated on time (%):					
	Timeliness and Accessibility	• Category 1	100	<100	N/A	100	KSA103a
	Timeliness and Accessibility	• Category 2	>=97	<93	>=93 and <97	>=97	KSA103b

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	Timeliness and Accessibility	<ul style="list-style-type: none"> Category 3 	>=97	<95	>=95 and <97	>=97	<u>KSA103c</u>
		• Overdue - Patients (Number):					
	Timeliness and Accessibility	<ul style="list-style-type: none"> Category 1 	0	>=1	N/A	0	<u>SSA108</u>
	Timeliness and Accessibility	<ul style="list-style-type: none"> Category 2 	0	>=1	N/A	0	<u>SSA109</u>
	Timeliness and Accessibility	<ul style="list-style-type: none"> Category 3 	0	>=1	N/A	0	<u>SSA110</u>
		Emergency Department:					
	Timeliness and Accessibility	<ul style="list-style-type: none"> Emergency treatment performance - Patients with total time in ED <= 4 hrs (%) 	>=81	<71	>=71 and <81	>=81	<u>KSA102</u>
	Timeliness and Accessibility	<ul style="list-style-type: none"> Transfer of care – Patients transferred from ambulance to ED <= 30 minutes (%) 	>=90	<80	>=80 and <90	>=90	<u>KSA101</u>

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Strategy 3: Integrate Systems to Deliver Truly Connected Care							
3.1	Timeliness and Access	Aged Care Assessment Timeliness - Average time from ACAT referral to delegation - Admitted patients (Days).	<=5	>6	>5 and <=6	<=5	KQ3101
3.2		Mental Health:					
	Effectiveness	• Acute Post-Discharge Community Care - Follow up within seven days (%)	>=70	<50	>=50 and <70	>=70	KQS204
	Effectiveness	• Acute readmission - Within 28 days (%)	<=13	>20	>13 and <=20	<=13	KQS203
	Appropriateness	• Acute Seclusion Occurrence - Episodes (per 1,000 bed days)	<5.1	>=5.1	N/A	<5.1	KQS206
	Appropriateness	• Acute Seclusion Duration – Average (Hours)	< 4	>5.5	>= 4 and <= 5.5	< 4	SSQ123
	Safety	• Involuntary Patients Absconded – From an inpatient mental health unit – Incident Types 1 and 2 (Number)	0	>0	N/A	0	SSQ127
	Patient Centred Culture	• Mental Health Consumer Experience: Mental Health consumers with a score of Very Good or Excellent (%)	>= 80	<70	>=70 and <80	>= 80	KQ3202
	Timeliness and Accessibility	• Emergency Department Extended Stays: Mental Health Presentations staying in ED > 24 hours (Number)	0	>5	>= 1 and <=5	0	KSA202
		Mental Health Reform:					
	Patient Centred Culture	• Pathways to Community Living - People transitioned to the community (Number) (<i>Applicable LHDs only - see Data Supplement</i>)	Increase on previous quarter	Decrease from previous quarter	No change	Increase on previous quarter	KQ3201
Patient Centred Culture	• Peer Workforce Employment – Full time equivalents (FTEs) (Number)	Increase on previous quarter	Decrease from previous quarter	No change	Increase on previous quarter	KMH202	
3.5	Effectiveness	Domestic Violence Routine Screening – Routine Screens conducted (%)	70	<60	>=60 and <70	=>70	KF-005
	Effectiveness	Out of Home Care Health Pathway Program - Children and young people completing a primary health assessment (%)	100	<90	>=90 and <100	100	KF-007
	Effectiveness	Sexual Assault Services Initial Assessments – Referrals for victims of sexual assault receiving an initial psychosocial assessment (%)	80	<70	>=70 and <80	=>80	KF-009
		Sustaining NSW Families Programs - Applicable LHDs only - see Data Supplement:					
	Effectiveness	• Families completing the program when child reached 2 years of age (%)	50	<45	>=45 and <50	=>50	KF-0061
	Effectiveness	• Families enrolled and continuing in the program (%)	65	<55	>=55 and <65	=>65	KF-0062
3.6	Patient Centred Culture	• Electronic Discharge Summaries Completed - Sent electronically to State Clinical Repository (%)	Increase in YTD percentage	Decrease in YTD percentage	No change in YTD percentage	Increase in YTD percentage	KSA205

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Strategy 4: Develop and Support our People and Culture							
4.1	Patient Centered Culture	Staff Engagement - People Matter Survey Engagement Index - Variation from previous year (%)	>=-1 (Increase)	<= -5	>-5 and -2%	>=-1	SPC110
		Workplace Culture – People Matters Survey Culture Index – Variation from previous year (%)	≥-1% (Increase)	≤-5	>-5and-2%	≥-1%	SPC111
		Take Action – People Matters Survey: Take action as a result of the survey – Variation from previous year (%)	≥-1% (Increase)	≤-5	>-5and-2%	≥-1%	SPC112
	Efficiency	Staff Performance Reviews - Within the last 12 months (%)	100	<85	>=85 and <90	>=90	KPC201
							SPC112
4.4	Equity	Aboriginal Workforce Participation: Aboriginal Workforce as a proportion of total workforce (%)	1.8	Decrease from previous Year	Nil increase from previous year	Increase from previous Year	SPC108
4.6	Safety	Compensable Workplace Injury - Claims (Number)	10 Decrease	Increase	>=0 and <10 Decrease	>= 10 Decrease	KS4401
Strategy 5: Support and Harness Health and Medical Research and Innovation							
5.4	Research	Ethics Application Approvals - By the Human Research Ethics Committee within 45 calendar days - Involving more than low risk to participants (%).	95	<75	>=75 and <95	>=95	KS5303
	Research	Research Governance Application Authorisations – Site specific Within 15 calendar days - Involving more than low risk to participants - (%)	95	<75	>=75 and <95	>=95	KS5304
Strategy 6: Enable eHealth, Health Information and Data Analytics							
6.2	Efficiency	See under 3.6 - Electronic Discharge Summaries	NA	NA	NA	NA	
Strategy 7: Deliver Infrastructure For Impact and Transformation							
7.2	Finance	Capital Variation - Against Approved Budget (%)	On budget	> +/- 10 of budget	NA	< +/- 10 of budget	KS7301

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Strategy 8: Build Financial Sustainability and Robust Governance							
8.1		Purchased Activity Volumes - Variance (%):					
	Finance	• Acute admitted – NWAU	Individual - See Budget	> +/-2.0	> +/-1.0 and <= +/-2.0	<= +/-1.0	<u>AI-001</u>
	Finance	• Emergency department – NWAU					<u>ED-001</u>
	Finance	• Non-admitted patients – NWAU					<u>NA-001</u>
	Finance	• Sub-acute services - Admitted – NWAU					<u>SA-001</u>
	Finance	• Mental health – Admitted – NWAU					<u>KS8101</u>
	Finance	• Mental health - Non admitted – NWAU					<u>MHDA-005</u>
	Finance	• Alcohol and other drug related Admitted – NWAU	Individual - See Budget	> +/-2.0	> +/-1.0 and <= +/-2.0	<= +/-1.0	<u>PH-018</u>
	Finance	• Alcohol and other drug related Non Admitted - NWAU	Individual - See Budget	> +/-2.0	> +/-1.0 and <= +/-2.0	<= +/-1.0	<u>PH-018</u>
	Finance	• Public dental clinical service - DWAU	See Purchased Volumes	> 2.0	> 1.0 and <= 2.0	<= 1.0	<u>PD-001</u>
	Finance	Expenditure Matched to Budget - General Fund -Variance (%)	On budget or Favourable	>0.5 Unfavourable	>0 but <=0.5 Unfavourable	On budget or Favourable	<u>KFA101</u>
	Finance	Own Sourced Revenue Matched to Budget - General Fund - Variance (%)	On budget or Favourable	>0.5 Unfavourable	>0 but <=0.5 Unfavourable	On budget or Favourable	<u>KFA103</u>
	Finance	Expenditure Projection – Projected General Fund – Actual %	Favourable or equal to March Forecast	Variation >2.0 of March Forecast	Variation >1.5 and <=2.0	Variation <1.5 of March Forecast	<u>KFA107</u>
	Finance	Revenue Projection – Projected General Fund – Actual %	Favourable or equal to March Forecast	Variation >2.0 of March Forecast	Variation >1.5 and <=2.0	Variation <1.5 of March Forecast	<u>KFA108</u>
Efficiency	Cost Ratio Performance - Cost per NWAU compared to state average cost per NWAU - Current year against previous year (%)	>0% decrease from previous year	Increase on previous year	No Change	Reduction from previous year	<u>KS8102</u>	