### 2022-23

# KPI DATA SUPPLEMENT SUMMARY



Version 1.0 July 2022 Further information regarding this document can be obtained from the System Information and Analytics Branch. All queries to:  $\underline{MOH-SystemInformationAndAnalytics@health.nsw.gov.au}.$ 

#### **VERSION CONTROL**

Date	Indicator No.	Measure	Version Control Change
30/08/2021	SURG-002	Paediatric Admissions from Elective Surgery Waiting List – % variance from target (Number)	Removed from KPIs
01/10/2021	PD-001	Purchased Activity Volumes – Variance: Public Dental Clinical Service - DWAU	Replaced references to ISOH with Titanium as it is now the source system.
01/10/2021	MS2213	Telehealth Service Access: Non-admitted services provided through telehealth (%)	Replaced references to ISOH with Titanium as it is now the source system.
01/10/2021	PD-001	Purchased Activity Volumes – Variance: Public Dental Clinical Service - DWAU	Removed exclusion that related to ISOH which has now been replaced by Titanium in all LHDs.
01/10/2021	KS2128	Hospital Acquired Pressure Injuries (Rate per 10,000 episodes of care).	Related Policies/ Programs section - NSQHSS – Standard 8 Preventing and Managing Pressure Injuries updated to NSQHSS 5 Comprehensive Care.
01/10/2021	KS2128	Hospital Acquired Pressure Injuries (Rate per 10,000 episodes of care).	Subtitle amended to Stage 3, 4, unspecified hospital acquired pressure injuries, unstageable and suspected deep tissue injury to reflect full extent of item.
14/10/2021	KS2301	Overall Patient Experience Index – adult admitted patients (Number)	Outcome Indicator Overall Patient Experience Index (Number) updated in the Health Outcome 4 table and targets within the KPI.
14/10/2021	KS2303	Overall Patient Experience Index – ED patients (Number)	Outcome Indicator Overall Patient Experience Index (Number) updated in the Health Outcome 4 table and targets within the KPI.
22/10/2021	KMH202	Mental Health Peer Workforce Employment – Full time equivalents (FTEs) (Number)	Several small edits and additions to text. No changes to measures/targets etc.
22/10/2021	KQS204	Mental Health Acute Post-Discharge Community Care - Follow up within seven days (%)	Several small edits and additions to text. No changes to measures/targets etc.
22/10/2021	KQS203	Mental Health: Acute Readmission - within 28 days (%)	Several small edits and additions to text. No changes to measures/targets etc.
22/10/2021	KSA202	Emergency Department Extended Stays: Mental Health Presentations staying in ED > 24 hours (number)	Several small edits and additions to text. No changes to measures/targets etc.
22/10/2021	KQS206	Mental Health: Acute Seclusion Occurrence – (Episodes per 1,000 bed days)	Several small edits and additions to text. No changes to measures/targets etc.

Date	Indicator No.	Measure	Version Control Change	
22/10/2021	SSQ123	Mental Health: Acute Seclusion Duration – Average (Hours)	Several small edits and additions to text. No changes to measures/targets etc.	
22/10/2021	SSQ127	Mental health: Involuntary Patients Absconded from an Inpatient Mental Health Unit – Incident Types 1 and 2 (rate per 1,000 bed days)	Several small edits and additions to text. No changes to measures/targets etc.	
22/10/2021	KS3202	Mental Health Consumer Experience: Mental Health consumers with a score of Very Good or Excellent (%)	Several small edits and additions to text. No changes to measures/targets etc.	
22/10/2021	SSQ124	Mental Health: Frequency of Seclusion (%)	Several small edits and additions to text. No changes to measures/targets etc.	
22/10/2021	MS1103	Childhood Obesity: Children with height/length and weight recorded (%)	Correction to absence of length in at several points within text and change to effective date to July 2022.	
22/10/2021	PH013A, SPH007	Smoking during pregnancy - At any time: (%)	Update to related policies, etc. and effective date	
22/10/2021	DPH 1201	Pregnant Women Quitting Smoking - By the second half of pregnancy (%)	Update to effective date	
22/10/2021	PH-014C	Hepatitis C Antiviral Treatment Initiation – Direct acting - by District residents (% Variance from Target)	Update to related policies, etc	
22/10/2021	PH-011C	Get Healthy Information and Coaching Service – Get Healthy in Pregnancy Referrals (% variance from target)	Edits to targets, date effective and denominator	
22/10/2021	AI-001	Purchased Activity Volumes – Variance: Acute Admitted – NWAU (%)	Update to exclusions	
22/10/2021	KPI21-03	Ethics Application Approvals - By the Human Research Ethics Committee within 90 calendar days - Involving greater than low risk to participants (%)	Several small edits and additions to text. No changes to measures/targets etc.	
22/10/2021	KPI21-04	Research Governance Application Authorisations – Site specific Within 60 calendar days - Involving greater than low risk to participants (%)	Several small edits and additions to text. No changes to measures/targets etc but change to frequency of reporting.	
26/10/2021	SA-001	Purchased Activity Volumes – Variance: Sub and non-acute admitted - NWAU (%)	Update to exclusions	
26/10/2021	PH-018A	Purchased Activity Volumes – Variance: Alcohol and other Drugs (Acute Admitted) - NWAU (%)	Update to exclusions	
3/11/2021	SPC111	Workplace Culture: People Matter Survey Culture Index-Variation from previous year (%)	Update to contacts	
3/11/2021	KPC201	Staff Performance Reviews - Within the last 12 months (%)	Updates to data sources and to contacts.	
3/11/2021	SPC115	Take Action: People Matter Survey take action as a result of the survey -Variation from previous year (%)	Update to contacts	
3/11/2021	SPC107	Recruitment: Average time taken from request to recruit to decision to approve/decline/defer recruitment (business days)	Updates to data sources and to contacts.	

Date	Indicator No.	Measure	Version Control Change
3/11/2021	SPC108	Aboriginal Workforce Participation: Aboriginal Workforce as a proportion of total workforce at all salary levels (bands) and occupations: (%)	Updates to data sources, salary bands and to contacts.
3/11/2021	KPI21-05	Employment of Aboriginal Health Practitioners (Number)	Updates to data sources; updated targets.
3/11/2021	KPI21-01	Staff Engagement and Experience – People Matter Survey - Racism experienced by staff - Variation from previous survey (%)	Update to contacts
3/11/2021	SPC110	Staff Engagement: People Matter Survey Engagement Index - Variation from previous year (%)	Update to contacts
25/11/2021	PI-03	Hospital in the Home: Admitted Activity (%)	New KPI (Upgraded from an Improvement Measure)
14/12/2021	MS2213	Telehealth Service Access: Non-admitted services provided through telehealth (%)	KPI owner updated
25/01/2022	KPI22-02	Annual Procurement Savings: % achieved against target	New KPI
27/01/2022	AI-001	Purchased Activity Volumes – Variance: Acute Admitted – NWAU (%)	Update to NWAU22 details
27/01/2022	ED-001	Purchased Activity Volumes – Variance: Emergency Department - NWAU (%)	Update to NWAU22 details
27/01/2022	NA-001	Purchased Activity Volumes – Variance: Non-admitted Patient - NWAU (%)	Update to NWAU22 details
27/01/2022	SA-001	Purchased Activity Volumes – Variance: Sub and non-acute admitted - NWAU (%)	Update to NWAU22 details
27/01/2022	KS8101	Purchased Activity Volumes – Variance: Mental Health Admitted - NWAU (%)	Update to NWAU22 details
27/01/2022	MHDA-005	Purchased Activity Volumes – Variance: Mental Health Non-Admitted - NWAU (%)	Update to NWAU22 details
27/01/2022	PH-018A	Purchased Activity Volumes – Variance: Alcohol and other Drugs (Acute Admitted) - NWAU (%)	Update to NWAU22 details
27/01/2022	PH-018B	Purchased Activity Volumes – Variance: Alcohol and other Drugs (Non-Admitted) - NWAU (%)	Update to NWAU22 details
28/01/2022	KS2410	Aboriginal Paediatric Patients Undergoing Otitis Media Procedures (number)	Revised ACHI codes 41632-00 and 41632-01 to reflect V11 changes (now 41632-02 and 41632-03)
10/02/2022	NA-001	Purchased Activity Volumes – Variance: Non-admitted Patient - NWAU (%)	Updates to exclusions.
28/03/2022	KMH202	Mental Health Peer Workforce Employment – Full time equivalents (FTEs) (Number)	Change to indicator definition and numerator definition.
28/03/2022	KS4401	Compensable Workplace Injury - Claims (% of change over rolling 12 month period)	Change to indicator definition and denominator definition.
14/04/2022	MS2213	Telehealth Services NOW Virtual Care: Non- admitted services provided through Virtual Care (%)	Major revision including name change, changes to targets, inclusions, exclusions, goal and indicator definition.
21/04/2022	KS2128	Hospital Acquired Pressure Injuries (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)
21/04/2022	KS2129	Fall-Related Injuries in Hospital (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)

Date	Indicator No.	Measure	Version Control Change	
21/04/2022	KS2130	Healthcare Associated Infections (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2131	Hospital Acquired Respiratory Complications (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2132	Hospital Acquired Venous Thromboembolism (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2133	Hospital Acquired Renal Failure (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2134	Hospital Acquired Gastrointestinal Bleeding (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2135	Hospital Acquired Medication Complications (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2136	Hospital Acquired Delirium (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2137	Hospital Acquired Incontinence (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2138	Hospital Acquired Endocrine Complications (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2139	Hospital Acquired Cardiac Complications (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2140	Third or Fourth Degree Perineal Lacerations (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
21/04/2022	KS2141	Hospital Acquired Neonatal Birth Trauma (Rate per 10,000 episodes of care)	Revised to reflect April 2022 HAC 3.1 update (ICD10AM 12th Edition Codes)	
27/04/2022	KSA202	Emergency Department Extended Stays: Mental Health Presentations staying in ED > 24 hours (number)	Updated link to new SNOMED Mapping table	
27/04/2022	KS8101	Purchased Activity Volumes – Variance: Mental Health Admitted - NWAU (%)	Updated to replace DRG 10 with AMHCC 1.0	
03/05/2022	KF-0061 and KF-0062	Sustaining NSW Families Programs	Updated reporting year and cohort for indicator, numerator and denominator. Updated affected LHDs. Updated frequency of reporting.	
09/05/2022	MS1102	Childhood Obesity: Children with height/length and weight recorded (%)	Minor update to Exclusions	
20/05/2022	SSQ106 and SSQ107	Unplanned Hospital Readmissions: all unplanned admissions within 28 days of separation (%)	Amendment to scope to correctly include facilities in Peer Group D1b	
24/05/2022	KPI22-01	Capital Renewal Ratio: Capital Renewal as a proportion of asset replacement (%)	New KPI for 2022-23	
26/05/2022	KS2410	Aboriginal Paediatric Patients Undergoing Otitis Media Procedures (number)	Minor update to indicator and numerator definitions	
02/06/2022	KMH202	Mental Health Peer Workforce Employment – Full time equivalents (FTEs) (Number)	Updated targets	
03/06/2022	KPI22-03	Renal Supportive Care Enrolment: End-Stage Kidney Disease Patient (% variation to target)	New KPI for 2022-23	

Date	Indicator No.	Measure	Version Control Change
06/06/2022	IM21-006	Inpatient Discharge Performance: Inpatient Discharges from ED Accessible and Rehabilitation Beds by Midday (%)	New KPI (Reclassified from an Improvement Measure); minor updates to the indicator definition, numerator and denominator.
15/06/2022	KPI22-04	Net Cost of Service Matched to Budget: Year to date variance – General Fund (%)	New KPI for 2022-23

Health Outcome 6: The health system is managed sustainably

#### INTRODUCTION TO KEY PERFORMANCE INDICATOR TARGETS AND IMPROVEMENT MEASURES

The NSW Performance Framework (PF) applies to the 15 geographical NSW Local Health Districts, the Ambulance Service NSW, Sydney Children's Hospitals Network, the St Vincent's Health Network, the Justice Health and Forensic Mental Health Network. In this document, these organisations are referred to collectively as Health Services, except where particular reference to Local Health Districts is required.

The definitions provided in this document will assist Health Services and other data users with the calculation and interpretation of the Key Performance Indicators referenced in the Service Agreements for 2022-23. It should be noted that some KPIs may be calculated differently when applied to different purposes outside the management of the Service Agreements. The KPIs contained in this document have been defined specifically with the intent to meet the reporting requirements under 2022-23 agreements and to align to the Ministry of Health's monthly performance monitoring reports. Should you require further assistance with the definitions or have comments regarding them please contact either the System Information & Analytics Branch or the Data/Policy contacts listed in the KPI documentation.

The Service Agreement is a key component of the Performance Framework for Health Services – providing a clear and transparent mechanism for assessment and improvement of performance. The Service Agreement document only covers KPIs.

**Key Performance Indicators (KPIs),** if not met, may contribute to escalation under the Performance Framework processes. Performance against these KPIs will be reported regularly to Health Services in the Health System Performance Report prepared by System Information & Analytics Branch at the Ministry of Health.

Improvement Measures (IMs): A range of Improvement Measures are included in a separate data supplement to assist the organisation to improve provision of safe and efficient patient care and to provide the contextual information against which to assess performance. These are NOT part of the agreed Service Agreements, and therefore are NOT for the purposes of performance management. They are included as an addendum in that document. Improvement Measures are reported regularly to Health Services by a range of stakeholders including Ministry Branches, Pillars and Shared Service providers. System Information & Analytics Branch will provide information to Health Services around where information on Improvements Measures can be accessed.

Note that the KPIs and Improvement Measures listed above are not the only measures collected and monitored by the NSW Health System. A range of other measures are used for a variety of reasons, including monitoring the implementation of new service models, reporting requirements to NSW Government central agencies and the Commonwealth, and participation in nationally agreed data collections. Relevant measures specified by the National Health Performance Authority, and in the *Premier's Priorities* and *State Priorities*, have been assigned as NSW Health KPIs or Improvement Measures, as appropriate.

The KPIs and Improvement Measures are aligned with the six Strategic Health Outcomes identified in the NSW Health Strategic Outcome and Business Plan:

- 1. Patients and carers have positive experiences and outcomes that matter
- 2. Safe care is delivered across all settings
- 3. People are healthy and well
- 4. Our staff are engaged and well supported
- 5. Research and innovation, and digital advances inform service delivery
- 6. The health system is managed sustainably

The performance of Districts, Networks, other Health Services and Support Organisations is assessed in terms of whether it is meeting performance targets for individual key performance indicators for each NSW Health Strategic Priority.

✓	Performing	Performance at, or better than, target
7	Underperforming	Performance within a tolerance range

X Not performing Performance outside the tolerance threshold

#### **Health Outcome 6: The health system is managed sustainably**

Detailed specifications for the key performance indicators are provided in this Service Agreement Data Supplement along with Improvement Measures (in Part 2) that will continue to be tracked by the Ministry's Business Owners. Performance concerns will be raised with the Organisation for focused discussion at performance review meetings in line with the NSW Health Performance Framework.

This Data Supplement includes indicators and measures that align to key strategic programs, including:

- Safety and Quality Framework
- Better Value Care
- Mental Health Reform

Key deliverables under the Ministry's Business Plan will also be monitored, noting that process key performance indicators and milestones are held in the detailed Operational Plans developed by each Health Service and Support Service.

As in previous years, the 2022-23 KPI and Improvement Measures data supplement is also located on the NSW Health Information Resource Directory and accessible via the following link:

http://hird.health.nsw.gov.au/hird/view\_data\_resource\_description.cfm?ltemID=47648

The table below provides a summary of the performance measures and targets against the KPIs as well as listing the Improvement Measures for each of the domains.

## Summary of Indicators and Targets for 2022-23 Service Agreements

**NOTE:** Some measures listed are marked as "Outcome X Indicators" which refer to the NSW Health Outcome and Business Plan as reported to NSW Treasury.

NSW Health Strategic Outcome 1 Patients and carers have positive experiences and outcomes that matter						
		Pe	rformance Thresh	olds		
Measure	Target	Not Performing	Under Performing	Performing		
Outcome 4 Indicator Overall Patient Experience Index (Number)						
Adult admitted patients	8.7	<8.5	≥8.5 and <8.7	≥8.7		
Emergency department	8.6	<8.4	≥8.4 and <8.6	≥8.6		
Patient Engagement Index (Number)						
Adult admitted patients	8.5	<8.2	≥8.2 and <8.5	≥8.5		
Emergency department	8.5	<8.2	≥8.2 and <8.5	≥8.5		
Mental Health Consumer Experience: Mental Health consumers with a score of Very Good or Excellent (%)	80	<70	≥70 and <80	≥80		

Safe care is delivered across all settings		1			
		Per	Performance Thresholds		
Measure	Target	Not Performing	Under Performing	Performing	
Harm-free admitted care: (Rate per 10,000 episodes of c	are)				
Hospital acquired pressure injuries					
Healthcare associated infections					
Hospital acquired respiratory complications					
Hospital acquired venous thromboembolism					
Hospital acquired renal failure					
Hospital acquired gastrointestinal bleeding					
Hospital acquired medication complications					
Hospital acquired delirium	In	dividual – See D	ata Supplement		
Hospital acquired incontinence					
Hospital acquired endocrine complications					
Hospital acquired cardiac complications					
3rd or 4th degree perineal lacerations during delivery					
Hospital acquired neonatal birth trauma					
Outcome 4 Indicator					
Fall-related injuries in hospital – Resulting in fracture or intracranial injury					
Emergency Treatment Performance – Admitted (% of patients treated in ≤ 4 hours)	50	<43	≥43 to <50	≥50	
Emergency department extended stays: Mental Health presentations staying in ED > 24 hours (Number)	0	>5	≥1 and ≤5	0	
Outcome 3 Indicator	a abas and <b>T</b>				
Emergency Department Presentations Treated within Be					
Friage 1: seen within 2 minutes	100	<100	N/A	100	
riage 2: seen within 10 minutes	95	<85	≥85 and <95	≥95	
riage 3: seen within 30 minutes	85	<75	≥75 and <85	≥85	
npatient Discharges from ED Accessible and Rehabilitation Beds by Midday (%)	≥35	<30	≥30 and <35	≥35	
Outcome 3 Indicator  Transfer of care – Patients transferred from ambulance to ED ≤ 30 minutes (%)	90	<80	≥80 and <90	≥90	

Safe care is delivered across all settings				
		Perf	formance Thresho	olds
Measure	Target	Not Performing	Under Performing	Performing  ✓
Elective Surgery Overdue - Patients (Number):				
Category 1	0	≥1	N/A	0
Category 2	0	≥1	N/A	0
Category 3	0	≥1	N/A	0
Outcome 4 Indicator Elective Surgery Access Performance - Patients treated	on time (%):			
Category 1	100	<100	N/A	100
Category 2	97	<93	≥93 and <97	≥97
Category 3	97	<95	≥95 and <97	≥97
Mental Health: Acute Seclusion				
Occurrence – (Episodes per 1,000 bed days)	<5.1	≥5.1	N/A	<5.1
Duration – (Average Hours)	<4.0	>5.5	≥4 and ≤5.5	<4.0
Frequency (%)	<4.1	>5.3	≥4.1 and ≤5.3	<4.1
Mental health: Involuntary patients absconded from an inpatient mental health unit – Incident Types 1 and 2 (rate per 1,000 bed days)	<0.8	≥1.4	≥0.8 and <1.4	<0.8
Outcome 2 Indicator  Electronic discharge summaries sent electronically and accepted by General Practitioners (%)	51	<49	≥49 and <51	≥51
Virtual Care: Non-admitted services provided through virtual care (%)	30	No change or decrease on baseline	>0 and < 5 percentage points increase on baseline	≥5 percentage points increase or baseline
Outcome 2 Indicator  Mental Health Acute Post-Discharge Community Care - Follow up within seven days (%)	75	<60	≥60 and <75	≥75
Outcome 4 Indicator Unplanned Hospital Readmissions: all unplanned admiss	sions within 28 days	of separation (%	):	
All persons	Reduction on previous year	Increase on previous year	No change on previous year	Reduction on previous year

NSW Health Strategic Outcome 2 Safe care is delivered across all settings				
		Peri	formance Thresho	olds
Measure	Target	Not Performing	Under Performing	Performing
Aboriginal persons	Reduction on previous year	Increase on previous year	No change on previous year	Reduction on previous year
Mental Health: Acute readmission - Within 28 days (%)	≤13	>20	>13 and ≤20	≤13
Discharge against medical advice for Aboriginal inpatients (%)	≥1% decrease on previous year	Increase on previous year	0 and <1% decrease on previous year	≥1% decrease on previous year
Outcome 2 Indicator Potentially preventable hospital services (%)	2% or greater decrease compared to previous year	Greater than 2% increase	Between 2% increase and 2% decrease	2% or greater decrease
Hospital in the Home Admitted Activity (%)	5	<3.5	≥3.5 and <5	≥5
		Currently at <20% enrolment		
Renal Supportive Care Enrolment: End-Stage Kidney	Individual - See	Decrease Compared to previous year	Increase Compared to previous year	Target met
Disease Patient (% variation to target)	Data Supplement	Currently >2	0% enrolment	or exceeded
		Decrease Compared to previous year	N/A	

		Per	formance Thresho	olds
Measure	Target	Not Performing	Under Performing	Performing
Childhood Obesity – Children with height/length and weight recorded (%)	70	<65	≥65 and <70	≥70
Smoking During Pregnancy - At any time (%):				
Aboriginal women	≥2% decrease on previous year	Increase on previous year	0 to <2% decrease on previous year	≥2% decreas on previous year
Non-Aboriginal women	≥0.5% decrease on previous year	Increase on previous year	0 to <0.5% decrease on previous year	≥0.5% decrease or previous yea
Outcome 1 Indicator 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% increas on previous year
Outcome 1 Indicator  Get Healthy Information and Coaching Service - Get Healthy In Pregnancy Referrals (% variance)	Individual - See Data Supplement	<90% of target	≥90% and <100% of target	≥100% of target
Outcome 1 Indicator Children fully immunised at one year of age (%)	95	<90	≥90 and <95	≥95
Hospital Drug and Alcohol Consultation Liaison - number of consultations (% increase)	No change or increase from previous year	≥10% decrease on previous year	<10% decrease on previous year	No change of increase from previous year
Hepatitis C Antiviral Treatment Initiation – Direct acting by District residents: Variance (%)	Individual - See Data Supplement	<98% of target	≥98% and <100% of target	≥100% of target
Aboriginal paediatric patients undergoing Otitis Media procedures (number)	Individual – See Data Supplement	Less than target	N/A	Equal to or greater than specified target
Domestic Violence Routine Screening – Routine Screens conducted (%)	70	<60	≥60 and <70	≥70
NSW Health First 2000 Days Implementation Strategy Delivery of the 1-4 week health check (%)	85	<75	≥75 and <85	≥85 and <10

Sustaining NSW Families Programs - Applicable LHDs only - see Data Supplement:	70	<60	≥60 and <70	≥70
Families completing the program when child reached 2 years of age (%)	50	<45	≥45 and <50	≥50
Families enrolled and continuing in the program (%)	65	<55	≥55 and <65	≥65
Mental Health Peer Workforce Employment – Full time equivalents (FTEs) (Number)	Individual – See Data Supplement	Less than target	N/A	Equal to or greater than specified target
Outcome 1 Indicator				
BreastScreen participation rates (%)				
Women aged 50-69 years	55	<45	≥45 and <55	≥55
Women aged 70-74 years	55	<45	≥45 and <55	≥55

#### **Health Outcome 6: The health system is managed sustainably**

#### NSW Health Strategic Outcome 4 Our staff are engaged and well supported

Measure	Target	Performance Thresholds		
		Not Performing	Under Performing	Performing
Workplace Culture - People Matter Survey Culture Index- Variation from previous survey (%)	≥-1	≤-5	>-5 and <-1	≥-1
Take action - People Matter Survey Take action as a result of the survey- Variation from previous survey (%)	≥-1	≤-5	>-5 and <-1	≥-1
Outcome 5 Indicator Staff Engagement - People Matter Survey Engagement Index - Variation from previous survey (%)	≥-1	≤-5	>-5 and <-1	≥-1
Staff Engagement and Experience – People Matter Survey - Racism experienced by staff - Variation from previous survey (%)	≥5% decrease on previous survey	No change or increase from previous survey.	>0 and <5% decrease on previous survey	≥5% decrease on previous survey
Staff Performance Reviews - Within the last 12 months (%)	100	<85	≥85 and <90	≥90
Recruitment: Average time taken from request to recruit to decision to approve/decline/defer recruitment (business days)	≤10	>10	No change from previous year and >10	≤10
Aboriginal Workforce Participation - Aboriginal Workforce as a proportion of total workforce at all salary levels (bands) and occupations (%)	3	<1.8	≥1.8 and <3	≥3
Employment of Aboriginal Health Practitioners (Number)	Individual – See Data Supplement	Below target	N/A	At or above target
Compensable Workplace Injury - Claims (% of change over rolling 12 month period)	0	Increase	≥0 and <5% decrease	≥5% Decrease or maintain at 0

#### **Health Outcome 6: The health system is managed sustainably**

#### NSW Health Strategic Outcome 5 Research and innovation, and digital advances inform service delivery

Measure	Target	Performance Thresholds		
		Not Performing	Under Performing	Performing
Research Governance Application Authorisations – Site specific within 60 calendar days - Involving greater than low risk to participants - (%)	75	<55	≥55 and <75	≥75
Outcome 5 Indicator				
Ethics Application Approvals - By the Human Research Ethics Committee within 90 calendar days - Involving greater than low risk to participants (%)	75	<55	≥55 and <75	≥75

Measure	Target	Performance Thresholds		
		Not Performing	Under Performing	Performing  ✓
Purchased Activity Volumes - Variance (%):				
Outcome 4 indicator Acute admitted (NWAU)	Individual - See Purchased Volumes	> +/-2.0%	> +/-1.0% and ≤ +/-2.0%	≤ +/-1.0%
Outcome 3 indicator Emergency department (NWAU)				
Outcome 2 indicator  Non-admitted patients (NWAU)				
Outcome 4 indicator Sub-acute services - Admitted (NWAU)				
Outcome 4 indicator  Mental health – Admitted (NWAU)				
Outcome 2 indicator  Mental health – Non-admitted (NWAU)				
Outcome 2 indicator  Alcohol and other drug related Admitted (NWAU)				
Outcome 2 indicator  Alcohol and other drug related Non-Admitted (NWAU)				
Outcome 1 indicator Public dental clinical service (DWAU)				
Expenditure Matched to Budget - General Fund - Variance (%)	On budget or favourable	>0.5% unfavourable	>0 and ≤0.5% unfavourable	On budget or favourable
Own Sourced Revenue Matched to Budget - General Fund - Variance (%)				
Net Cost of Service Matched to Budget - General Fund - Variance (%)				
Asset maintenance Expenditure as a proportion of asset replacement value (%)	2.15	<1.15	≥1.15 and <2.15	≥2.15
Capital renewal as a proportion of asset replacement value (%)	1.4	<0.8	≥0.8 and <1.4	≥1.4
Annual Procurement Savings Target Achieved – (% of target achieved)	Individual – See Data Supplement	<90%	≥90% and <95%	≥95%