

**2018-19**

**KPI**

**DATA**

**SUPPLEMENT**

**SUMMARY**

Version 1.0

July 2018

Contact:

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## Summary of Indicators and Targets for 2018-19 Service Agreements

Strategic Priority	Safety & Quality Framework Domain	Measure	Target	Not Performing X	Under Performing ↘	Performing ✓	ID
<b>Strategy 1: Keep People Healthy</b>							
1.1	Population Health	<b>Get Healthy Information and Coaching Service</b> - Health professional referrals: Variance (%)	Individual - See Data Supplement	>10.0 variation below Target	<=10.0 variation below Target	Met or exceeded Target	<a href="#">PH-011B</a>
		<b>Healthy Children Initiative</b> - Children's Healthy Eating and Physical Activity Program (%):					
	Population Health	• Primary schools - Trained primary schools achieving agreed proportion of Live Life Well @ School program practices (%)	>=60	<55	55-59	>=60	<a href="#">PH-008B</a>
	Population Health	• Early childhood services – Sites achieving agreed proportion of Munch and Move program practices (%)	>=60	<55	55-59	>=60	<a href="#">PH-008A</a>
1.2		<b>Smoking During Pregnancy</b> - At any time (%):					
	Equity	• Aboriginal women	Decrease from previous year	Increase on previous year	No change	Decrease from previous year	<a href="#">PH-013A</a>
	Equity	• Non-aboriginal women	Decrease from previous year	Increase on previous year	No change	Decrease from previous year	<a href="#">SPH007</a>
	Effectiveness	<b>Pregnant Women Quitting Smoking</b> - 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	<a href="#">DPH_12_01</a>
1.4	Population Health	<b>Human Immunodeficiency Virus (HIV) Testing</b> - Within publicly-funded HIV and sexual health services: Variance (%)	Individual - See Data Supplement	<98 Target	>=98 and <100	>=100	<a href="#">KS1410</a>
	Effectiveness	<b>Hepatitis C Antiviral Treatment Initiation</b> – Direct acting - by LHD residents: Variance (%)	Individual - See Data Supplement	<98 Target	>=98 and <100	>=100	<a href="#">PH-014C</a>
<b>Strategy 2: Provide World-Class Clinical Care Where Patient Safety is First</b>							
2.1	Safety	<b>Fall-related Injuries in Hospital</b> – Resulting in fracture or intracranial injury – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=23% of Target	>=0% and <23% of Target	< Target	<a href="#">KS2101</a>
	Safety	<b>3rd or 4th Degree Perineal Lacerations During Delivery</b> – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=37% of Target	>=0% and <37% of Target	< Target	<a href="#">MS2103</a>
	Safety	<b>Hospital Acquired Venous Thromboembolism</b> – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=46% of Target	>=0% and <46% of Target	< Target	<a href="#">SSQ120</a>
	Safety	<b>Hospital Acquired Pressure Injuries</b> – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=65% of Target	>=0% and <65% of Target	< Target	<a href="#">KQS205</a>
	Safety	<b>Healthcare Associated Infections</b> – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=13% of Target	>=0% and <13% of Target	< Target	<a href="#">KS2110</a>

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Strategy 2: Provide World-Class Clinical Care Where Patient Safety is First								
Strategic Priority	Safety & Quality Framework Domain	Measure	Target	Not Performing X	Under Performing ↘	Performing ✓	ID	
2.1	Safety	<b>Surgical Complications Requiring Unplanned Return to Theatre</b> – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=26% of Target	>=0% and <26% of Target	< Target	<a href="#">KS2112</a>	
	Safety	<b>Hospital Acquired Medication Complications</b> – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=32% of Target	>=0% and <32% of Target	< Target	<a href="#">KS2111</a>	
	Safety	<b>Hospital Acquired Neonatal Birth Trauma</b> – Rate (per 1,000 bed days)	Individual - See Data Supplement	>=43% of Target	>=0% and <43% of Target	< Target	<a href="#">KS2113</a>	
	<b>Unplanned Hospital Readmissions</b> – All admissions within 28 days of separation (%):							
	Effectiveness	<ul style="list-style-type: none"> <li>All persons</li> </ul>	Decrease from previous Year	Increase from previous year.	No change	Decrease from previous Year	<a href="#">SSQ106</a>	
	Effectiveness	<ul style="list-style-type: none"> <li>Aboriginal persons</li> </ul>	Decrease from previous Year	Increase from previous year.	No change	Decrease from previous Year	<a href="#">SSQ107</a>	
2.3	Patient Centred Culture	<b>Overall Patient Experience Index</b> (Number)	>=8.5	<=8.2	>8.2 and <8.5	>=8.5	<a href="#">KS2301</a>	
	Patient Centred Culture	<b>Patient Engagement Index</b> (Number)	>=8.5	<=8.2	>8.2 and <8.5	>=8.5	<a href="#">KS2302</a>	
2.4	<b>Elective Surgery:</b>							
	<b>Access Performance</b> - Patients treated on time (%):							
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 1</li> </ul>	100	<100	N/A	100	<a href="#">KSA103a</a>	
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 2</li> </ul>	>=97	<93	>=93 and <97	>=97	<a href="#">KSA103b</a>	
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 3</li> </ul>	>=97	<95	>=95 and <97	>=97	<a href="#">KSA103c</a>	
	<ul style="list-style-type: none"> <li><b>Overdue</b> - Patients (Number):</li> </ul>							
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 1</li> </ul>	0	>=1	N/A	0	<a href="#">SSA108</a>	
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 2</li> </ul>	0	>=1	N/A	0	<a href="#">SSA109</a>	
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 3</li> </ul>	0	>=1	N/A	0	<a href="#">SSA110</a>	
	<b>Emergency Department:</b>							
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Emergency treatment performance - Patients with total time in ED &lt;= 4 hrs (%)</li> </ul>	>=81	<71	>=71 and <81	>=81	<a href="#">KSA102</a>	
Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Transfer of care – Patients transferred from ambulance to ED &lt;= 30 minutes (%)</li> </ul>	>=90	<80	>=80 and <90	>=90	<a href="#">KSA101</a>		

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Strategic Priority	Safety & Quality Framework Domain	Measure	Target	Not Performing X	Under Performing ↘	Performing ✓	ID
<b>Strategy 3: Integrate Systems to Deliver Truly Connected Care</b>							
3.1	Timeliness and Access	<b>Aged Care Assessment Timeliness</b> - Average time from ACAT referral to delegation - Admitted patients (Days).	<=5	>6	>5 and <=6	<=5	<a href="#">KSA3101</a>
3.2		<b>Mental Health:</b>					
	Effectiveness	• <b>Acute Post-Discharge Community Care</b> - Follow up within seven days (%)	>=70	<50	>=50 and <70	>=70	<a href="#">KQS204</a>
	Effectiveness	• <b>Acute readmission</b> - Within 28 days (%)	<=13	>=20	>13 and <20	<=13	<a href="#">KQS203</a>
	Appropriateness	• <b>Acute Seclusion Occurrence</b> - Episodes (per 1,000 bed days)	<5.1	>=5.1	N/A	<5.1	<a href="#">KQS206</a>
	Appropriateness	• <b>Acute Seclusion Duration</b> – Average (Hours)	< 4	>5.5	<= 4 and <= 5.5	< 4	<a href="#">SSQ123</a>
	Safety	• <b>Involuntary Patients Absconded</b> – From an inpatient mental health unit – Incident Types 1 and 2 (Number)	0	>0	N/A	0	<a href="#">SSQ127</a>
	Patient Centred Culture	• <b>Mental Health Consumer Experience:</b> Mental Health consumers with a score of Very Good or Excellent (%)	>= 80	<70	>=70 and <80	>= 80	<a href="#">KS3202</a>
	Timeliness and Accessibility	• <b>Access Block</b> - Emergency department to inpatient unit - Presentations staying in ED > 24 hours (Number)	0	>5	Between 1 and 5	0	<a href="#">KSA202</a>
		<b>Mental Health Reform:</b>					
	Patient Centred Culture	• <b>Pathways to Community Living</b> - People transitioned to the community (Number) (Applicable LHDs only - see Data Supplement)	Increase on previous quarter	Decrease from previous quarter	No change	Increase on previous quarter	<a href="#">KS3201</a>
Patient Centred Culture	• <b>Peer Workforce Employment</b> – Full time equivalents (FTEs) (Number)	Increase on previous quarter	Decrease from previous quarter	No change	Increase on previous quarter	<a href="#">KMH202</a>	
3.5	Patient Centred Culture	<b>Electronic Discharge Summaries Completed</b> - Sent electronically to State Clinical Repository (%)	Increase on previous month	Decrease from previous month	No change	Increase on previous month	<a href="#">KSA205</a>
3.6	Effectiveness	<b>Domestic Violence Routine Screening</b> – Routine Screens conducted (%)	70	<60	>=60 and <70	=>70	<a href="#">KF-005</a>
	Effectiveness	<b>Out of Home Care Health Pathway Program</b> - Children and young people completing a primary health assessment (%)	100	<90	>=90 and <100	100	<a href="#">KF-007</a>
	Effectiveness	<b>Sexual Assault Services Initial Assessments</b> – Referrals for victims of sexual assault receiving an initial psychosocial assessment (%)	80	<70	>=70 and <80	=>80	<a href="#">KF-009</a>
		<b>Sustaining NSW Families Programs</b> - Applicable LHDs only - see Data Supplement:					
	Effectiveness	• Families completing the program when child reached 2 years of age (%)	50	<45	>=45 and <50	=>50	Effectiveness
	Effectiveness	• Families enrolled and continuing in the program (%)	65	<55	>=55 and <65	=>65	Effectiveness

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<b>Strategy 4: Develop and Support our People and Culture</b>							
4.1	Safety	<b>Staff Engagement</b> - People Matter Survey Engagement Index - Variation from previous year (%)	>=0 (Increase)	<= -5	<0 & <5	>=0	<a href="#">SPC110</a>
	Efficiency	<b>Staff Performance Reviews</b> - Within the last 12 months (%)	100	<85	>=85 and <90	>=90	<a href="#">KPC201</a>
4.3	Equity	<b>Aboriginal Workforce Participation:</b> Aboriginal Workforce as a proportion of total workforce (%)	1.8	Decrease from previous Year	Nil increase from previous year	Increase from previous Year	<a href="#">SPC108</a>
4.5	Safety	<b>Compensable Workplace Injury</b> - Claims (Number)	10 Decrease	Increase	>=0 and <10 Decrease	>= 10 Decrease	<a href="#">KS4401</a>
<b>Strategy 5: Support and Harness Health and Medical Research and Innovation</b>							
5.4	Research	<b>Ethics Application Approvals</b> - By the Human Research Ethics Committee within 45 calendar days - Involving more than low risk to participants (%).	95	<75	>=75 and <95	>=95	<a href="#">KS5303</a>
	Research	<b>Research Governance Application Authorisations</b> – Site specific Within 15 calendar days - Involving more than low risk to participants - (%)	95	<75	>=75 and <95	>=95	<a href="#">KS5304</a>
<b>Strategy 6: Enable eHealth, Health Informatics and Data Analytics</b>							
6.2	Efficiency	See under 3.5 - Electronic Discharge Summaries	NA	NA	NA	NA	
<b>Strategy 7: Deliver Future Focused Infrastructure and Strategic Commissioning</b>							
7.1	Efficiency	<b>Capital Variation</b> - Against Approved Budget (%)	On budget	> +/- 10 of budget	NA	< +/- 10 of budget	<a href="#">KS7301</a>
7.3	Safety	<b>Asset Maintenance Expenditure</b> – as a proportion of asset replacement value (%)	>=10	< 5	>= 5 and < 10	>=10	<a href="#">DSR7401</a>
<b>Strategy 8: Build Financial Sustainability and Robust Governance</b>							
8.1		<b>Purchased Activity Volumes - Variance (%)</b> :					
	Efficiency	• Acute admitted– NWAU	Individual - See Budget	> +/-2.0	> +/-1.0 and <= +/-2.0	<= +/-1.0	<a href="#">AI-001</a>
	Efficiency	• Emergency department – NWAU					<a href="#">ED-001</a>
	Efficiency	• Non-admitted patients – NWAU					<a href="#">NA-001</a>
	Efficiency	• Sub acute services - Admitted – NWAU					<a href="#">SA-001</a>
	Efficiency	• Mental health – Admitted – NWAU					<a href="#">KS8101</a>
	Efficiency	• Mental health - Non admitted – NWAU					<a href="#">MHDA-005</a>
	Efficiency	• Public dental clinical service - DWAU	See Purchased Volumes	> +/-2.0	> +/-1.0 and <= +/-2.0	<= +/-1.0	<a href="#">PD-001</a>
Efficiency	<b>Expenditure Matched to Budget</b> - General Fund -Variance (%)	On budget or Favourable	>0.5 Unfavourable	>0 but <=0.5 Unfavourable	On budget or Favourable	<a href="#">KFA101</a> <a href="#">KFA102</a>	
Efficiency	<b>Own Sourced Revenue Matched to Budget</b> - General Fund - Variance (%)	On budget or Favourable	>0.5 Unfavourable	>0 but <=0.5 Unfavourable	On budget or Favourable	<a href="#">KFA103</a> <a href="#">KFA104</a>	