

2019–20

# **KPI DATA SUPPLEMENT**

SUMMARY

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%	<a href="#">MS1102</a>
1.2/1.6		Smoking During Pregnancy – At any time (%):					
	Equity	<ul style="list-style-type: none"> <li>Aboriginal women</li> </ul>	Decrease from previous year	Increase on previous year	No change	Decrease from previous year	<a href="#">PH-013A</a>
	Equity	<ul style="list-style-type: none"> <li>Non-aboriginal women</li> </ul>	Decrease from previous year	Increase on previous year	No change	Decrease from previous year	<a href="#">SPH007</a>
	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	<a href="#">DPH_12_01</a>
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	<a href="#">PH-015A</a>
1.4	Effectiveness	Hepatitis C Antiviral Treatment Initiation – Direct acting - by LHD residents: Variance (%)	Individual - See Data Supplement	<98% Target	>=98% and <100%	>=100%	<a href="#">PH-014C</a>
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	<a href="#">PH-011C</a>
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				<a href="#">KS2114</a>
	Safety	Fall-related Injuries in Hospital – Resulting in fracture or intracranial injury – Rate (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2115</a>
	Safety	Healthcare Associated Infections – Rate (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2116</a>
	Safety	Hospital Acquired Respiratory Complications (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2117</a>
	Safety	Hospital Acquired Venous Thromboembolism – Rate (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2118</a>
	Safety	Hospital Acquired Renal failure (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2119</a>
	Safety	Hospital Acquired Gastrointestinal Bleeding (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2120</a>

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	Safety	Hospital Acquired Medication Complications – (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2121</a>	
	Safety	Hospital Acquired Delirium (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2122</a>	
	Safety	Hospital Acquired Persistent Incontinence (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2123</a>	
	Safety	Hospital Acquired Malnutrition (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2124</a>	
	Safety	Hospital Acquired Cardiac complications (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2125</a>	
	Safety	3rd or 4th Degree Perineal Lacerations During Delivery – (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2126</a>	
	Safety	Hospital Acquired Neonatal Birth Trauma – (Rate per 10,000 episodes of care)	Individual - See Data Supplement				<a href="#">KS2127</a>	
	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	<a href="#">SSQ114</a> <a href="#">SSQ118</a>	
		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	<a href="#">SSQ106</a>	
Effectiveness	• Aboriginal persons	Decrease from previous Year	Increase from previous year.	No change	Decrease from previous Year	<a href="#">SSQ107</a>		
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	<a href="#">KS2301</a>	
	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	<a href="#">KS2302</a>	
	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	<a href="#">KSA103a</a>	
	Timeliness and Accessibility	• Category 2	>=97	<93	>=93 and <97	>=97	<a href="#">KSA103b</a>	

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	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 3</li> </ul>	>=97	<95	>=95 and <97	>=97	<a href="#"><u>KSA103c</u></a>
		• Overdue - Patients (Number):					
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 1</li> </ul>	0	>=1	N/A	0	<a href="#"><u>SSA108</u></a>
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 2</li> </ul>	0	>=1	N/A	0	<a href="#"><u>SSA109</u></a>
	Timeliness and Accessibility	<ul style="list-style-type: none"> <li>Category 3</li> </ul>	0	>=1	N/A	0	<a href="#"><u>SSA110</u></a>
		Emergency Department:					
	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="#"><u>KSA102</u></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="#"><u>KSA101</u></a>

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<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="#">KS3101</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>Emergency Department Extended Stays:</b> Mental Health Presentations staying in ED > 24 hours (Number)	0	>5	>= 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) <i>(Applicable LHDs only - see Data Supplement)</i>	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	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	<a href="#">KF-0061</a>
	Effectiveness	• Families enrolled and continuing in the program (%)	65	<55	>=55 and <65	=>65	<a href="#">KF-0062</a>
3.6	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>

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<b>Strategy 4: Develop and Support our People and Culture</b>							
4.1	Patient Centered Culture	<b>Staff Engagement</b> - People Matter Survey Engagement Index - Variation from previous year (%)	>=-1 (Increase)	<= -5	>-5 and -2%	>=-1	<a href="#"><u>SPC110</u></a>
		<b>Workplace Culture – People Matters Survey Culture Index</b> – Variation from previous year (%)	≥-1% (Increase)	≤-5	>-5and-2%	≥-1%	<a href="#"><u>SPC111</u></a>
		<b>Take Action – People Matters Survey: Take action as a result of the survey – Variation from previous year (%)</b>	≥-1% (Increase)	≤-5	>-5and-2%	≥-1%	<a href="#"><u>SPC112</u></a>
	Efficiency	<b>Staff Performance Reviews</b> - Within the last 12 months (%)	100	<85	>=85 and <90	>=90	<a href="#"><u>KPC201</u></a>
							<a href="#"><u>SPC112</u></a>
4.4	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="#"><u>SPC108</u></a>
4.6	Safety	<b>Compensable Workplace Injury</b> - Claims (Number)	10 Decrease	Increase	>=0 and <10 Decrease	>= 10 Decrease	<a href="#"><u>KS4401</u></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="#"><u>KS5303</u></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="#"><u>KS5304</u></a>
<b>Strategy 6: Enable eHealth, Health Information and Data Analytics</b>							
6.2	Efficiency	See under 3.6 - Electronic Discharge Summaries	NA	NA	NA	NA	
<b>Strategy 7: Deliver Infrastructure For Impact and Transformation</b>							
7.2	Finance	<b>Capital Variation</b> - Against Approved Budget (%)	On budget	> +/- 10 of budget	NA	< +/- 10 of budget	<a href="#"><u>KS7301</u></a>

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