6. Performance against strategies and objectives

6.1 Key performance indicators

The performance of the Organisation is assessed in terms of whether it is meeting key performance indicator targets for NSW Health strategic priorities.

Detailed specifications for the key performance indicators are provided in the Service Agreement Data Supplement. See:

http://internal4.health.nsw.gov.au/hird/view_data_resource_description.cfm?ItemID=48373 For NSW Health staff only

1 Patients and carers have positive experiences and outcomes that matter						
		Performance Thresholds				
Measure	Target	Not Performing	Under Performing	Performing		
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	8.7	<8.5	≥8.5 and <8.7	≥8.7		
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		

2 Safe care is delivered across all settings						
	Performance Thresholds			olds		
Measure	Target	Not Performing	Under Performing	Performing		
Harm-free admitted care: (Rate per 10,000 episodes of care)						
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		Individual – See				
Hospital acquired incontinence						
Hospital acquired endocrine complications						
Hospital acquired cardiac complications						
3rd or 4th degree perineal lacerations during delivery						
Hospital acquired neonatal birth trauma						
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		
Emergency department presentations treated wi	thin benchmark	times (%)				
Triage 1: seen within 2 minutes	100	<100	N/A	100		
Triage 2: seen within 10 minutes	80	<70	≥70 and <80	≥80		
Triage 3: seen within 30 minutes	75	<65	≥65 and <75	≥75		
Inpatient discharges from ED accessible and rehabilitation beds by midday (%) (not SCHN)	35	<30	≥30 to <35	≥35		

2 Safe care is delivered across all settings				
Measure	Target	Per Not Performing	formance Thresh Under Performing	Performing
Transfer of care — Patients transferred from ambulance to ED ≤ 30 minutes (%)	90	<80	≥80 to <90	≥90
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
Elective Surgery Access Performance - Patients to	reated on time (%	6):		
Category 1	100	<100	N/A	100
Category 2	97	<93	≥93 and <97	≥97
Category 3	97	<95	≥95 and <97	≥97
Dental Access Performance – Non-admitted dental patients treated on time (%)	100	<90	≥90 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	≥4.0 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
Virtual Care: Non-admitted services provided through virtual care (%)	30	No change or decrease on baseline	>0 and < 5 % points increase on baseline	≥5 % points increase on baseline
Mental Health Acute Post-Discharge Community	Care - Follow up	within seven day	rs (%)	
All persons	75	<60	≥60 and <75	≥75 >75
Aboriginal persons Unplanned Hospital Readmissions: all unplanned	75 Ladmissions with	<60	≥60 and <75	≥75
All persons	Reduction on previous year	Increase on previous year	No change on previous year	Reduction on previous year
Aboriginal persons	Reduction on previous year	Increase on previous year	No change on previous year	Reduction on previous year

2 Safe care is delivered across all settings **Performance Thresholds** Not Under Measure **Target Performing Performing Performing** × Mental Health: Acute readmission - Within 28 days (%) >13 and ≤20 All persons ≤13 >20 ≤13 Aboriginal persons ≤13 >20 >13 and ≤20 ≤13 0 and <1 % ≥1 % point ≥1 % point Discharge against medical advice for Aboriginal Increase on point decrease on decrease on in-patients (%) previous year decrease on previous year previous year previous year 0 and <1 % ≥1 % point ≥1 % point Incomplete emergency department Increase on point decrease on decrease on attendances for Aboriginal patients (%) previous year decrease on previous year previous year previous year ≥2 % points ≥2 % points Within 2 % ≥2 % points Potentially preventable hospital services (%) lower than higher than points of lower than benchmark benchmark benchmark benchmark Hospital in the Home admitted activity (%) 5 <3.5 ≥3.5 and <5 ≥5 Renal Supportive Care enrolment: End-stage Individual -Decrease Increase kidney disease patient (% variation to target) Target met or See Data compared to Compared to If LHD currently at <20% enrolment - CC, HNE, exceeded Supplement previous year previous year IS, Murrum, NNSW, NS, SWS, SVHN, Syd, WS Renal Supportive Care enrolment: End-stage Individual -Decrease kidney disease patient (% variation to target) Target met or See Data N/A compared to If LHD currently >20% enrolment – MNC, NBM, exceeded Supplement previous year

3 People are healthy and well				(+)		
			Performance Thresholds			
Measure	Target	Not Performing	Under Performing	Performing		
Childhood Obesity – Children with height/length and weight recorded in inpatient settings (%)	70	<65	≥65 and <70	≥70		
Smoking during pregnancy - At any time (number):						
Aboriginal women	≥2% decrease on previous year	Increase on previous year	0 to <2% decrease on previous year	≥2% decrease 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 on previous year		

SES, SNSW, WNSW

3 People are healthy and well **Performance Thresholds** Not Under Measure **Target Performing Performing Performing** × ≥1 and <4 % 4 % points <1 % point ≥4 % points Pregnant Women Quitting Smoking - by points increase on increase on increase on second half of pregnancy (%) increase on previous year previous year previous year previous year Get Healthy Information and Coaching Individual - See ≥90% and ≥100% of <90% of Service - Get Healthy in Pregnancy Referrals <100% of Data target target Supplement (% variance) target Children fully immunised at one year of age (%) <90 ≥90 and <95 Aboriginal children 95 ≥95 95 <90 ≥90 and <95 ≥95 Non-Aboriginal children Children fully immunised at five years of age (%) Aboriginal children 95 <90 ≥90 and <95 ≥95 Non-Aboriginal children 95 <90 ≥90 and <95 ≥95 Human Papillomavirus Vaccination: 15 year 80 <75 ≥75 and <80 ≥80 olds receiving a dose of HPV vaccine (%) Hospital Drug and Alcohol Consultation Maintain or Up to 10% Maintain or ≥10% Liaison - number of consultations (% increase from decrease on decrease on increase from increase) previous year previous year previous year previous year Hepatitis C Antiviral Treatment Initiation -Individual -≥98% and <98% of ≥100% of Direct acting by District residents: Variance See Data <100% of target target Supplement (%) target Equal to or Individual – See Aboriginal paediatric patients undergoing Less than greater than Data N/A Otitis Media procedures (number) target specified Supplement target Domestic Violence Routine Screening -70 ≥70 <60 ≥60 and <70 Routine screens conducted (%) NSW Health First 2000 Days Implementation Strategy - Delivery of the 1-4 week health ≥85 85 <75 ≥75 and <85 check (%) Sustaining NSW Families Programs - Applicable organisations only - see Data Supplement Families completing the program when child reached 2 years of age (%) CCLHD, HNELHD, ISLD, NNSWLHD, 50 <45 ≥45 and <50 ≥50 SESLHD, SWSLHD (Site 1 and Site 2), SLHD, WSLHD only Families enrolled and continuing in the ≥55 and <65 ≥65 65 <55 program (%)

3 People are healthy and well **Performance Thresholds** Not Under Measure Target Performing Performing Performing × 7 Individual – See Equal to or Mental health peer workforce employment Less than N/A greater than Data – Full time equivalents (FTEs) (number) target Supplement target BreastScreen participation rates - Women 50 ≥45 and <50 ≥50 <45 aged 50-74 years (%)

4 Our staff are engaged and well supported				ÁÖÁ ÁÁ
		Performance Thresholds		
Measure	Target	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
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 % points decrease on previous survey	No change or increase from previous survey.	>0 and <5 % points decrease on previous survey	≥5 % points 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 (%)	3.43	<2.0	≥2.0 and <3.43	≥3.43
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

5 Research and innovation, and digital advances inform service delivery



≥2.15

<2.15

	Target	Performance Thresholds			
Measure		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	
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	

6 The health system is managed sustainably					
		Performance Thresholds			
Measure	Target	Not Performing	Under Performing	Performing	
Purchased Activity Volumes - Variance (%):					
Acute admitted (NWAU)		< -1.5% or > +4%	≥ -1.5% and <0	≥ 0% and ≤+4%	
Emergency department (NWAU)	Individual - See Purchased Volumes				
Non-admitted patients (NWAU)					
Sub and non-acute services - Admitted (NWAU)					
Mental health – Admitted (NWAU)					
Mental health – Non-admitted (NWAU)					
Alcohol and other drug related Acute Admitted (NWAU)					
Alcohol and other drug related Non-admitted (NWAU)					
Public dental clinical service (DWAU)					
Expenditure Matched to Budget - General Fund - Variance (%)		>0.5% unfavourable	>0 and ≤0.5% unfavourable		
Own Sourced Revenue Matched to Budget - General Fund - Variance (%)	On budget or favourable			On budget or favourable	
Net Cost of Service (NCOS) Matched to Budget - General Fund - Variance (%)					
Asset maintenance Expenditure as a proportion	2.15	<1.5	≥1.5 and	≥2.15	

2.15

<1.5

of asset replacement value (%)

6 The health system is managed sustainably



		Performance Thresholds		
Measure	Target	Not Performing	Under Performing	Performing
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% of target	≥90% and <95% of target	≥95% of target
Reducing free text orders catalogue compliance (%)	25	>60	≤60 and >25	≤25
Reducing off-contract spend (%)	25	>60	≤60 and >25	≤25
Use of Whole of Health contracts (%)	75	<40	≥40 and <75	≥75
Sustainability Towards 2030:	Г	Г		Г
Desflurane reduction: number of vials of Desflurane purchased as a % of all volatile anaesthetic vials purchased All LHDS SCHN & SVHN	4	>8	>4 and ≤8	≤4
Nitrous oxide reduction: emissions per admitted patient service event: % decrease on previous year All LHDS SCHN & SVHN	5	<1	≥1 and <5	≥5
Energy Use Avoided Through Energy Efficiency and Renewable Energy Project Implementation (%) All LHD, NSWA	1.5	<1	≥1 and <1.5	≥1.5
Passenger Vehicle Fleet Optimisation (% Cost Reduction) All LHD, SCHN, JHFMHN	3	<1	≥1 and <3	≥3
Waste Streams - Resource Recovery and Diversion from Landfill (%) All LHD except FW, SCHN, NSWA	5	<3	≥3 and <5	≥5