






6 Performance against strategic 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 [KPI Data Supplement](#) – access for NSW Health staff only

1 Patients and carers have positive experiences and outcomes that matter 				
4 Keep communities informed, build engagement, seek feedback 				
Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	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
Communication and engagement experience index - Aboriginal adult admitted patients (Number)	8.0	< 7.8	≥ 7.8 and < 8.0	≥ 8.0
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 				
2 Enable better access to safe, high quality and timely health services 				
5 Expand integration of primary, community and hospital care 				
Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	Performing ✔
Harm-free admitted care: (Rate per 10,000 episodes of care):				
Hospital acquired pressure injuries	Individual – See Data Supplement			
Fall-related injuries in hospital – Resulting in fracture or intracranial injury	Individual – See Data Supplement			
Healthcare associated infections	Individual – See Data Supplement			
Hospital acquired respiratory complications	Individual – See Data Supplement			

2 Safe care is delivered across all settings



2 Enable better access to safe, high quality and timely health services



5 Expand integration of primary, community and hospital care



Measure	Target	Performance Thresholds		
		Not performing x	Underperforming ↓	Performing ✓
Hospital acquired venous thromboembolism	Individual – See Data Supplement			
Hospital acquired renal failure	Individual – See Data Supplement			
Hospital acquired gastrointestinal bleeding	Individual – See Data Supplement			
Hospital acquired medication complications	Individual – See Data Supplement			
Hospital acquired delirium	Individual – See Data Supplement			
Hospital acquired incontinence	Individual – See Data Supplement			
Hospital acquired endocrine complications	Individual – See Data Supplement			
Hospital acquired cardiac complications	Individual – See Data Supplement			
3rd or 4th degree perineal lacerations during delivery	Individual – See Data Supplement			
Hospital acquired neonatal birth trauma	Individual – See Data Supplement			
Hospital Access Targets (HAT):				
Discharged from ED within 4 hours (%)	80	< 70	≥ 70 and < 80	≥ 80
Admitted / transferred from ED within 6 hours (%)	80	< 70	≥ 70 and < 80	≥ 80
Admitted to ED Short Stay Unit (EDSSU) within 4 hours (%)	60	< 55	≥ 55 and < 60	≥ 60
Admitted to a Psychiatric Emergency Care Centre (PECC) within 4 hours (%)	60	< 55	≥ 55 and < 60	≥ 60
ED extended stay of no greater than 12 hours (%)	95	< 85	≥ 85 and < 95	≥ 95
ED extended stay of no greater than 12 hours – Mental health or self-harm related presentations (%)	95	< 85	≥ 85 and < 95	≥ 95
Emergency department presentations treated within benchmark times (%):				
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 (%)	35	< 30	≥ 30 to < 35	≥ 35
Discharges from Mental Health inpatient beds by midday (%)	35	< 30	≥ 30 to < 35	≥ 35

2 Safe care is delivered across all settings






2 Enable better access to safe, high quality and timely health services







5 Expand integration of primary, community and hospital care





Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	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
Dental Access Performance – Non-admitted dental patients treated on time (%)	97	< 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 Acute Post-Discharge Community Care - Follow up within seven days (%):				
All persons	75	< 60	≥ 60 and < 75	≥ 75
Aboriginal persons	75	< 60	≥ 60 and < 75	≥ 75
Unplanned Hospital Readmissions: all unplanned admissions within 28 days of separation (%):				
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
Mental Health: Acute readmission - Within 28 days (%):				
All persons	≤ 13	> 20	> 13 and ≤ 20	≤ 13
Aboriginal persons	≤ 13	> 20	> 13 and ≤ 20	≤ 13
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
Discharge against medical advice for Aboriginal inpatients (%)	≥ 1 % point decrease on previous year	Increase on previous year	≥ 0 and < 1 % point decrease on previous year	≥ 1 % point decrease on previous year
Incomplete emergency department attendances for Aboriginal patients (%)				
Patients who departed from an ED with a “Did not wait” status	≥ 1 % point decrease on previous year	Increase on previous year	≥ 0 and < 1 % point decrease on previous year	≥ 1 % point decrease on previous year
Patients who departed from an ED with a “Left at own risk” status	≥ 1 % point decrease on previous year	Increase on previous year	≥ 0 and < 1 % point decrease on previous year	≥ 1 % point decrease on previous year

2 Safe care is delivered across all settings 				
2 Enable better access to safe, high quality and timely health services 				
5 Expand integration of primary, community and hospital care 				
Measure	Target	Performance Thresholds		
		Not performing x	Underperforming ↘	Performing ✓
Potentially preventable hospital services (%)	≥ 2 % points lower than previous year	≥ 2 % points higher than previous year	Within 2 % points of previous year	≥ 2 % points lower than previous year
Non-admitted services provided through virtual care (%)	30	No change or decrease on previous year	> 0 and < 5 % points increase on previous year	≥ 5 % points increase on previous year
Hospital in the Home admitted activity (%)	5	< 3.5	≥ 3.5 and < 5	≥ 5

3 People are healthy and well 				
3 Keep people healthy and well through prevention, early intervention and education 				
Measure	Target	Performance Thresholds		
		Not performing x	Underperforming ↘	Performing ✓
Childhood Obesity – Children with height/length and weight recorded in inpatient settings (%)	70	< 65	≥ 65 and < 70	≥ 70
Pregnant Women Quitting Smoking - by the second half of pregnancy (%)				
Aboriginal women	4 % points increase on previous year	< 1 % point increase on previous year	≥ 1 and < 4 % point increase on previous year	≥ 4 % point increase on previous year
Non-Aboriginal women	4 % points increase on previous year	< 1 % point increase on previous year	≥ 1 and < 4 % point increase on previous year	≥ 4 % point increase on previous year
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
Children fully immunised at one year of age (%):				
Aboriginal children	95	< 90	≥ 90 and < 95	≥ 95
Non-Aboriginal children	95	< 90	≥ 90 and < 95	≥ 95
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
Human Papillomavirus Vaccination: 15 year olds receiving a dose of HPV vaccine (%)	80	< 75	≥ 75 and < 80	≥ 80
Domestic Violence Routine Screening – Routine screens conducted (%)	70	< 60	≥ 60 and < 70	≥ 70

3 People are healthy and well 				
3 Keep people healthy and well through prevention, early intervention and education 				
Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	Performing ✔
NSW Health First 2000 Days Implementation Strategy - Delivery of the 1-4 week health check (%)	85	< 75	≥ 75 and < 85	≥ 85
Sustaining NSW Families Programs: - <i>Applicable organisations only CCLHD, HNELHD, ISLHD, NNSWLHD, SESLHD, SWSLHD (Site 1 and Site 2), SLHD, WSLHD</i>				
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 target
BreastScreen participation rates - Women aged 50-74 years (%)	50	< 45	≥ 45 and < 50	≥ 50

4 Our staff are engaged and well supported 				
1 Strengthen the regional health workforce 				
Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	Performing ✔
Workplace Culture - People Matter Survey Culture Index (% variance from previous year)	≥ -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

4 Our staff are engaged and well supported



1 Strengthen the regional health workforce



Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	Performing ✓
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



6 Harness and evaluate innovation to support a sustainable health system



Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	Performing ✓
Research Governance Application Authorisations – Site specific within 60 calendar days - Involving greater than low risk to participants - (%)	75	< 55	≥ 55 and < 75	≥ 75
Concordance of trials in Clinical Trial Management System vs REGIS (%)	60	< 50	≥ 50 and < 60	≥ 60

6 The health system is managed sustainably



6 Harness and evaluate innovation to support a sustainable health system



Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ⚡	Performing ✓
Purchased Activity Volumes - Variance (%):				
Total activity (NWAU)	Individual - See Data Supplement	< -1.5% or > +2.5%	≥ -1.5% and < 0	≥ 0% and ≤ +2.5%
Total activity (NWAU) reportable under NHRA clause A95(b)	Individual - See Data Supplement	< -1.5% or > +2.5%	≥ -1.5% and < 0	≥ 0% and ≤ +2.5%
Purchased Activity Volumes - Variance (%): Public dental clinical service (DWAU)	Individual - See Data Supplement	< -1.5% or > +2.5%	≥ -1.5% and < 0	≥ 0% and ≤ +2.5%
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 (%)	On budget or favourable	> 0.5% unfavourable	> 0 and ≤ 0.5% unfavourable	On budget or favourable
Net Cost of Service (NCOS) Matched to Budget - General Fund - Variance (%)	On budget or favourable	> 0.5% unfavourable	> 0 and ≤ 0.5% unfavourable	On budget or favourable
Annual Procurement Savings Target Achieved – (% of target achieved)	Individual – See Data Supplement	< 90% of target	≥ 90% and < 95% of target	≥ 95% of target

6 The health system is managed sustainably



6 Harness and evaluate innovation to support a sustainable health system



Measure	Target	Performance Thresholds		
		Not performing ✘	Underperforming ↘	Performing ✔
Reducing free text orders catalogue compliance (%)	25	> 60	≤ 60 and > 25	≤ 25
Sustainability Towards 2030: Nitrous oxide reduction: emissions per admitted patient service event: % decrease on previous year	5	< 1	≥ 1 and < 5	≥ 5
Passenger Vehicle Fleet Optimisation (% Cost Reduction)	3	< 1	≥ 1 and < 3	≥ 3
Waste Streams - Resource Recovery and Diversion from Landfill (%)	5	< 3	≥ 3 and < 5	≥ 5