NSW Health

2026-27 Funding and Performance Supplement

A Supplementary Agreement between the Secretary, NSW Health and the Bureau of Health Information

for the period 1 July 2026 to 30 June 2027

www.health.nsw.gov.au

2026-27 Funding and Performance Supplement

Principal purpose

The principal purpose of the Funding and Performance Supplement is to set out the performance expectations for funding and other support provided to the Bureau of Health Information **(the Organisation)**, and to ensure the delivery of high quality, effective healthcare services that promote, protect and maintain the health of the community, in keeping with NSW Government and NSW Health priorities.

The Funding and Performance Supplement specifies the service delivery and performance requirements expected of the Organisation that will be monitored in line with the *NSW Health Performance Framework*.

The *Health Services Act 1997* (NSW) allows the Health Secretary to enter into performance agreements with public health organisations in relation to the provision of health services and health support services (s.126). Through execution of the Funding and Performance Supplement, the Secretary agrees to provide the funding and other support to the Organisation as outlined in this Funding and Performance Supplement.

This Funding and Performance Supplement forms part of the NSW Health 2026-29 Performance Agreement which has been executed by the Secretary, NSW Health and the Organisation.

Parties to the agreement

The Organisation

Professor Carol Pollock AO
Chair
On behalf of the
Bureau of Health Information Board

Date ...17 July 2026..... Signed .....

Adjunct Professor Heiko Spallek
Chief Executive
Bureau of Health Information

Date ....16 July 2026..... Signed .....

NSW Health

Ms Susan Pearce AM
Secretary
NSW Health

Date 31 July 2026 Signed .....

Contents

1 Budget

1.1 Budget Schedule

	Bureau of Health Information	2026-2027 Allocation in BTS ($'000)
A	**Expenditure Budget by Account Group (General Fund)**	
	Employee Related	$7,087
	Goods & Services	$2,643
	Repairs, Maintenance & Renewals	$94
	Sub-total	**$9,825**
B	**Other items not included above**	
	Additional Escalation to be allocated	$362
	Annualised Initiatives	
	Budget for Co-Locating Agencies to 1RR	$287
	Savings Initiatives	
	Savings Allocation	-$216
	IntraHealth and TMF Adjustments	
	IntraHealth - eHealth Adjustment	$22
	Treasury Managed Fund	
	TMF Adjustment - Workers Compensation	-$8
	Sub-total	**$447**
C	**RFA Expenses**	**$0**
D	**Total Expenses (D=A+B+C)**	**$10,271**
E	**Other - Gain/Loss on disposal of assets etc**	**$0**
F	**Revenue**	**-$10,249**
G	**Net Result (G=D+E+F)**	**$23**

1.2 Funding Allocation Schedule

	Bureau of Health Information	2026-2027 Allocation in BTS ($'000)
	Government Grants	
A	Recurrent Subsidy	-$10,152
B	Capital Subsidy	$0
C	Crown Acceptance (Super, LSL)	-$97
D	***Total Government Contribution (D=A+B+C)***	**-$10,249**
	Own Source revenue	
E	Revenue Budget - General Funds	$0
F	Revenue Budget - Restricted Financial Asset	$0
G	***Total Own Source Revenue (G=E+F)***	**$0**
H	**Total Revenue Budget (H=D+G)**	**-$10,249**
	Expenses	
I	Expense Budget - General Funds	$10,271
J	Expense Budget - Restricted Financial Asset	$0
K	Other Expense Budget	$0
L	**Total Expense Budget (L=I+J+K)**	**$10,271**
M	**Net Result (M=H+L)**	**$23**
	Net Result Represented by:	
N	Asset Movements	$0
O	Liability Movements	-$23
P	Entity Transfers	$0
Q	**Total (Q=N+O+P)**	**-$23**

Note:

As all banking has moved to being centrally managed, any local bank accounts remaining will be swept regularly and no funds should be held locally anymore.

2 Performance

The performance of the Organisation is assessed in terms of whether it is meeting key performance indicator targets for NSW Health strategic priorities. Some key performance indicators have been categorised as those that relate to the delivery of Future Health. Detailed specifications for the key performance indicators are provided in the *KPI and Monitoring Measures Data Supplement Part 1 of 2 - KPIs.*

2.1 Key Performance Indicators

2.1.1 Key performance indicators – Future Health Priority Projects

Key performance indicator	Target	Performance Thresholds		
		Not performing ✖	Underperforming ↘	Performing ✓
Improve workforce culture				
Compensable Workplace Injury Claims (% of change over rolling 12 month period)	5% decrease	Increase	≥ 0 and < 5% decrease	≥ 5% decrease or maintain at 0 claims
People Matter Employee Survey (PMES): Increase in Overall Engagement Index Score (Number)	Improvement on previous year	Decrease from previous year	No change from previous year	Improvement on previous year
Agreed Composite Diversity Targets (Aboriginal participation, Women in leadership, Disability, CALD) - Increase in Overall Score for Diversity Index (Number)	Improvement on previous year	Decrease from previous year	No change from previous year	Improvement on previous year
Implement modern employment arrangements				
Average Sick Leave Taken per FTE (hours)	60	> 68	≥ 60 and ≤ 68	< 60
Deliver a new funding model				
Expenditure Matched to Budget – General Fund – Year to date variance (%)	On budget or favourable	< -0.25	< 0 and ≥ -0.25	≥ 0
Own Source Revenue Matched to Budget – General Fund – Year to date variance (%)	On budget or favourable	< -0.25	< 0 and ≥ -0.25	≥ 0
Net Cost of Service (NCOS) Matched to Budget – General Fund – Year to date variance (%)	On budget or favourable	< -0.25	< 0 and ≥ -0.25	≥ 0

Note:

People Matter Employee Survey and Diversity targets: Given the size of the organisation's workforce and the volatility of results, the standard performance thresholds will not apply. Performance will be assessed on previous performance as well as current.

2.1.2 Organisation key performance indicators

Key performance indicator	Target	Performance Thresholds		
		Not performing ✖	Underperforming ↘	Performing ✓
BHI is a trusted provider of health performance information (% strongly agree/ somewhat agree)	> 85%	< 75%	≥ 75 and ≤ 85%	> 85%
BHI reports and information products are objective (impartial and grounded in evidence) (% strongly agree/ somewhat agree)	> 80%	< 70%	≥ 70 and ≤ 80%	> 80%
Satisfaction with BHI engagement over the past 12 months (% very satisfied/ somewhat satisfied)	> 75%	< 65%	≥ 65 and ≤ 75%	> 75%
Effectiveness in BHI's delivery on its purpose: "To provide the community, healthcare professionals and policy makers with information that enhances transparency of the performance of the healthcare system in NSW, in order to inform actions to improve healthcare and strengthen accountability." (% strongly agree/ somewhat agree)	> 80%	< 70%	≥ 70 and ≤ 80%	> 80%

2.2 Performance Deliverables

Key deliverables will be monitored, noting that indicators and milestones are held in detailed program operational plans. The Organisation is expected to support the delivery of Future Health through deliverables agreed from time to time between the Secretary, NSW Health and the Chief Executive of the Organisation.

2.2.1 Organisation performance deliverables

Deliverable Name	Description	Timeframe
Healthcare in Focus	*Healthcare in Focus fulfils BHI's function to provide an annual report to the Minister and Parliament on the performance of the NSW public health system.*	**Q4**
Healthcare Quarterly	*Healthcare Quarterly features key indicators of activity and performance across public hospital and ambulance services in NSW.* In 2026-27, BHI will release four issues of Healthcare Quarterly. These will include: • New indicators that align with key system priorities • Supplementary reporting that provides additional analysis on context and drivers for key aspects of health system activity and performance	**Q1-Q4**
Insights: Children and young people in Emergency Departments	Report providing insights into ED utilisation and experiences of care in EDs, including trends over time.	**Q1**
Insights: Urgent and emergency care in NSW	Report providing insights into access and patterns of use for urgent and emergency care across NSW including, where possible, Healthdirect, Single Front Door, Virtual Care, VCCC.	**Q2**

NSW Patient Survey Program – Survey Results (core funded)	*Public releases include short form survey results reports, as well as NSW, district/network and hospital results.* *Additional information products are released internally via the BHI Internal Reports Hub to support effective use of results and to inform action.* • Annual results for Adult Admitted Patient Survey 2025, including results from additional modules • Annual results for Emergency Department Patient Survey 2025-26, including results from additional modules	**Q1** **Q2**
NSW Patient Survey Program – Key Performance Indicators (KPIs)	*BHI supplies key performance indicators to support district/network Service Agreements, and reporting on the Aboriginal Health Plan, Regional Health Plan and Future Health.* *Additional Quarterly Patient Experience KPI Summaries are provided to districts/networks via the BHI Internal Reports Hub to assist them in interpreting the KPIs and determining priorities for improvement.* • Quarterly LHD patient experience KPIs (Overall Patient Experience Index for admitted/ED patients and Patient Engagement Index for admitted/ED patients) • Two new shadow quarterly patient experience KPIs based on the single question overall rating of care for admitted and for ED patients • Six-monthly LHD Aboriginal Patient Experience (Communication and Engagement) KPIs • Patient experience indicators in 2026-27 for Aboriginal Health Plan, • Regional Health Plan and Future Health Strategy monitoring as required.	**Q1-Q4**
NSW Patient Survey Program – Survey data collection (core funded)	*Survey development, sampling, mailing, data collection and analyses in relation to core funded surveys. Note that survey data collection will be paused to enable transition to a redesigned Program in line with Future Health SO1 and a new data collection contract.* • Data collection for the Adult Admitted Patient Survey 2026 (in the field until early 2027) - including an Aboriginal patient experience module as funded by the Centre for Aboriginal Health. • Data collection for the Emergency Department Patient Survey 2026-27 (in the field from late 2026) – including a module for patients who arrived at the ED by ambulance. • Development of additional surveys or survey modules to collect data relating to high priority topics and/or population groups and their journeys of care through different parts of the healthcare system.	**Q1-Q4**

Strengthen and Streamline the NSW Patient Survey Program	*This work aligns to Future Health Strategic Outcome 1 (SO1)*
	BHI will:
	• Redesign the NSW Patient Survey Program to enhance its unique value to the system, including through:
	  ○ Streamlining survey content in the context of standardised local data collections
	  ○ Innovation in data collection
	  ○ Automation and efficiencies
	  ○ Strengthening alignment with system priorities
	• Work in partnership with Ministry, providing subject matter expertise in patient experience measurement, analysis and reporting to support delivery of the SO1 priority, primarily through:
	  ○ Leading development of core question sets and minimum data collection, analysis and reporting standards
	  ○ Providing advice and insights to inform the refinement and implementation of the NSW Health Feedback policy
		Q1-Q4

	○ Contributing expertise to the consolidation of IT platforms, providing guidance on data requirements, reporting needs and system integration considerations	
Aboriginal Patient Experience Program	*This is a multi-year program of data collection and routine performance reporting funded by the Centre for Aboriginal Health. It aligns to Future Health action 1.2.* • Oversampling of adult Aboriginal patients in the Adult Admitted Patient Survey 2026, and inclusion of a module of co-designed questions of high relevance to Aboriginal patients, the Aboriginal community, and relevant stakeholders • Public release of results as part of Adult Admitted Patient Survey results reporting • Internal release of quantitative and qualitative results from oversampling of Aboriginal adult admitted patients to support monitoring and improvement efforts • Internal release of the six-monthly Aboriginal Patient Experience (Communication and Engagement) key performance indicator results at district/network level	**Q1-Q3** **Q1** **Q1, Q2, Q4** **Q2, Q4**
Insights into clinical outcomes: Mortality following admission, condition-specific	*BHI undertakes advanced analytics to provide unadjusted rates and risk-standardised mortality ratios within 30 days of admission to a NSW public hospital for selected clinical conditions and one surgical procedure.* • BHI will release annual unadjusted hospital-level mortality results internally via the BHI Internal Reports Hub and the CEC's Quality Improvement Data System (QIDS), to inform quality improvement.	**Q1, Q2**
Insights into clinical outcomes: Hospital acquired complications	*BHI will commence routine reporting of rates of hospital acquired complications in NSW public hospitals in line with its statutory function to report on aspects of performance including quality and safety.* • BHI will release risk-standardised hospital-level rates for selected hospital acquired complications (HACs). BHI will engage with key Ministry, Pillar and district/network stakeholders on measure selection and the approach to public reporting.	**Q4**
PMES	The results of the People Matter Employee Survey for BHI will be used to identify areas of best practice and improvement opportunities.	**Q1-Q4**
Data linkage and sharing program	BHI will continue to extend and expand its open data and will continue to develop data sharing offerings, including linked data assets, for the NSW Patient Survey Program results.	**Q1-Q4**
Data management	Transform and upgrade BHI's end-to-end data pipeline, transition to more contemporary and fit-for-purpose analytic tools and business intelligence software and introduce more digital reporting products.	**Q1-Q4**