

2017–18

Year in review



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The Bureau of Health Information is a board-governed statutory health corporation that produces independent reports on the performance of the healthcare system in NSW.

Using advanced data analytics, data visualisation and communications, we deliver reports and information products that describe key aspects of healthcare performance for a range of audiences in ways that align with the priorities of consumer, healthcare and policy audiences.

We provide this information to strengthen accountability and support system-wide and local improvements in patients' healthcare experiences and outcomes.

Public reporting of this information enhances transparency and understanding of healthcare performance for consumers and local communities.

The Bureau of Health Information (BHI) is led by Board Chair, Professor Carol Pollock, and Chief Executive, Dr Diane Watson.

Trusted information. Informed decisions. Improved healthcare.



FROM THE CHAIR

In 2017-18, BHI continued to deliver timely, accurate and comparable information on the performance of the NSW public healthcare system, while also planning for our future.

The cornerstones of BHI's work in 2017-18 were our regular *Healthcare Quarterly* reports, tracking activity and performance across public hospitals and ambulance services in NSW, and the NSW Patient Survey Program, which enabled thousands of patients to offer personal insights which support local efforts to improve care.

In late 2017-18, we commenced work to develop BHI's Strategic Plan for 2019 to 2022. It was heartening to hear, as part of our extensive stakeholder engagement process, that during the past decade BHI has established a strong reputation as an independent, trusted and fair provider of healthcare performance information. It is fitting that this strategy will come into effect in 2019, the same year BHI marks our 10th anniversary.

On behalf of the Board, I extend my sincere thanks to BHI's dedicated and talented staff members who continued to innovate and produce high quality information products.

We were very pleased to welcome back BHI's inaugural Chief Executive, Dr Diane Watson, in 2018. With such depth of knowledge and rich experience in the sector, Dr Watson will inspire and lead the team at BHI as the organisation enters the next phase of its development.

The Board would like to thank Dr Kim Sutherland for her leadership as Acting Chief Executive.

I also acknowledge the contribution of fellow Board members. Their considered advice and expertise has underpinned BHI's successes.

Professor Carol Pollock
Board Chair



FROM THE CHIEF EXECUTIVE

BHI published 19 reports, chartpacks and data releases on healthcare performance in NSW in 2017-18, informing actions to improve healthcare and strengthening accountability.

BHI reported this year, for the first time, on the experiences of patients with disability in NSW public hospitals and how their experiences compare to those of patients without disability.

Our *Healthcare in Focus* report took a comprehensive look at healthcare performance in NSW. We published our first online chartpacks, which are part of our continuous efforts to make complex healthcare information more accessible and engaging for our audiences.

BHI continued to publish our *Healthcare Quarterly* reports, tracking activity and performance across public hospitals and ambulance services in NSW. An additional 44 emergency departments from regional NSW were introduced this year, providing a more complete picture of activity and performance throughout the state.

Healthcare Quarterly also reported, for the first time, on the number of inpatient episodes at NSW public hospitals that involve mental health treatment. This was an important step towards BHI's reporting in this area and supports a growing public interest in mental health services.

We continued to manage and expand the NSW Patient Survey Program. BHI surveyed more than 270,000 people in 2017-18. We are very grateful to all those thousands of people who took the time to tell us about their experience of care and help inform healthcare improvement efforts in NSW.

It was my personal pleasure to return to the organisation as Chief Executive in February 2018, having served as BHI's inaugural Chief Executive from 2009 to 2012. My focus since appointment has been supporting the dedicated and talented BHI team in delivering high quality information on the performance of the NSW public healthcare system.

With the introduction of our new *Strategic Plan: 2019-22* next year, we will continue to build on our successes and seize new opportunities to maximise our impact. Through purposeful engagement and collaboration, we will ensure that BHI's work aligns with and responds to health system priorities, providing actionable insights in areas that matter to patients.

Dr Diane Watson
Chief Executive

OUR REPORTS

Healthcare Quarterly

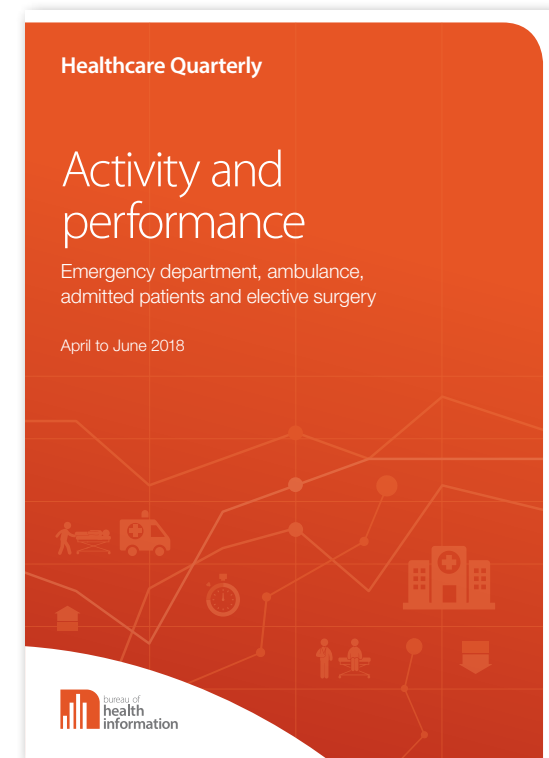
Every day around 17,000 people spend the night in the NSW public hospital system and there are around 3,000 ambulance responses.

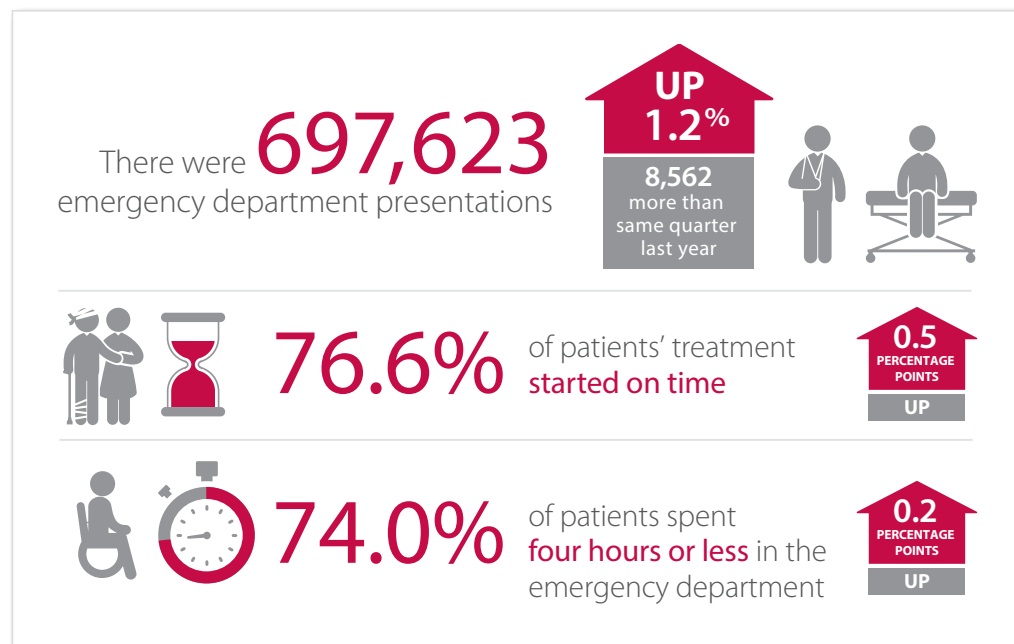
Healthcare Quarterly tracks activity and performance across public hospitals and ambulance services in NSW. There were a number of notable developments and findings in 2017-18:

- An additional 44 emergency departments from regional NSW, which recently switched to electronic record systems, were introduced to the report, bringing the total number of included emergency departments to 178.
- For the first time, *Healthcare Quarterly* reported on a new mental health stay type introduced in NSW in 2016-17. More than 11,000 admitted patient episodes that would previously have been included as either acute or non-acute were reported as mental health stay types for the first quarter it was included.

- July to September 2017 was the busiest quarter on record for NSW emergency departments – presentations were almost 10% higher than the same quarter in 2016, as the state experienced one of its worst flu seasons.

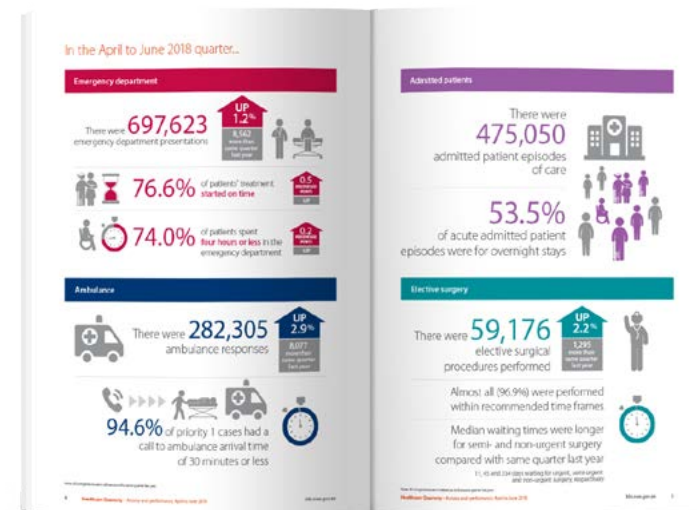
BHI tailors reporting to different audiences, presenting *Healthcare Quarterly* results through a core report and more detailed supporting information, including BHI's interactive data portal Healthcare Observer, and additional hospital profiles and appendix tables for further analysis of local performance.



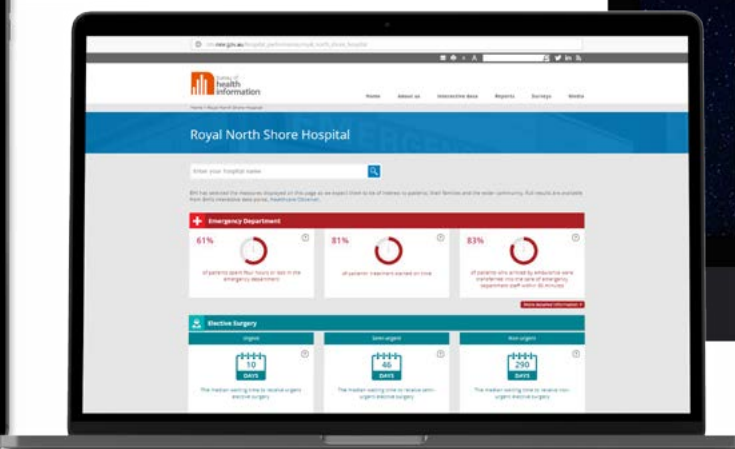


Emergency department results from Healthcare Quarterly – April to June 2018

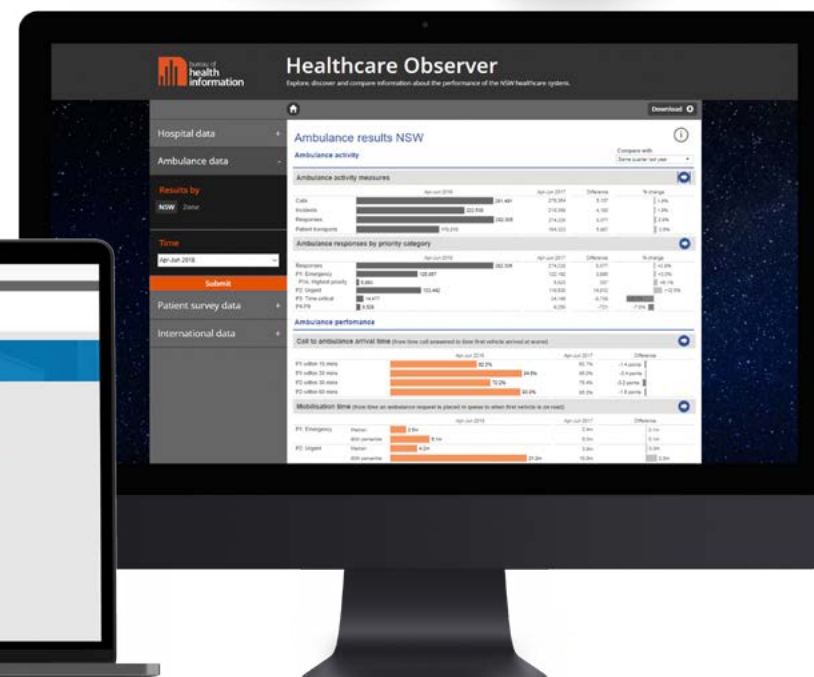
Spread from Healthcare Quarterly – April to June 2018



Ambulance performance dashboard



Hospital performance dashboard



Healthcare Observer

OUR REPORTS

Healthcare in Focus

Each year, BHI's *Healthcare in Focus: How does NSW Compare?* report takes a comprehensive look at healthcare performance in NSW.

Healthcare in Focus 2016 examined healthcare in terms of six key dimensions: accessibility; appropriateness; effectiveness; efficiency; equity and sustainability.

Healthcare in Focus 2016 showed, overall, NSW continued to perform well, with significant progress in recent years in the timeliness of care delivered across the state.

For example, the report showed that despite growing patient numbers, the proportion of people treated in emergency departments within clinically recommended times increased over the previous five years and almost all elective surgery was performed within recommended times.

Healthcare in Focus draws on different data sources and featured 140 indicators of performance, placing NSW results, where possible, in an international or national context.

The report showed the state matched or outperformed comparable systems around the world on 80% of measures.





Healthcare in Focus 2016 chartpack

OUR REPORTS

Patient Perspectives

BHI published its first report on the experiences of patients with disability in NSW public hospitals.

Patient Perspectives: Exploring experiences of hospital care for people with disability revealed, for the first time, insights into the experiences of people with a disability in NSW public hospitals.

The report was compiled from the responses of almost 9,000 adults with a disability who participated in the *Adult Admitted Patient Survey 2015*. It showed small but consistent gaps in the experiences of patients with, and patients without, disability.

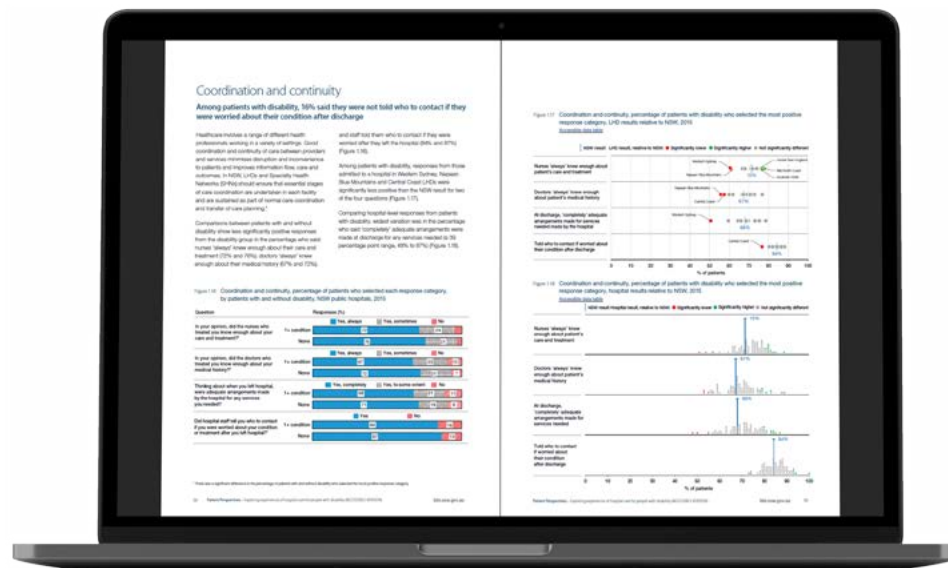
This report represents an important starting point for further investigation, and an opportunity for healthcare professionals to consider where improvements can be made.

BHI produced an online accessible version of the disability report containing modifications to text size, formatting and colour, as well as alternative text accompanying complex graphs and figures that enabled visually impaired people to navigate through the file.

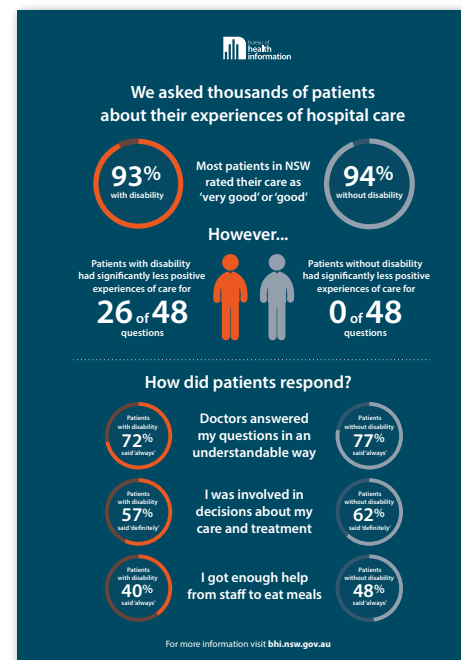




Animated GIFs



Accessible version of the report



The 10 key findings fact sheet



10 key findings

Patient Perspectives: Exploring experiences of hospital care for people with disability
Adult Admitted Patient Survey 2015

- Overall, a majority of admitted patients rated hospital care highly. Over three quarters (76%) of patients with disability said they would 'speak highly' about their hospital experience, and 79% of patients without disability did so.
- For 26 of the 48 survey questions included in this report, patients in the disability group were significantly less positive than other patients. There were no survey questions which were answered significantly more positively by patients in the disability group.
- Almost three-quarters of patients in the disability group said that the hospital care they received 'definitely' helped them. However, there was a six percentage point gap in responses between patients with and without disability (74% and 80%).
- Most patients in the disability group said that they did not experience unfair treatment (93%), their family was given the right amount of information (77%), they had confidence and trust in doctors (79%), and they were treated with respect (85%). However, their responses were significantly less positive than other patients for all four of these questions.
- A sizable proportion of patients in the disability group highlighted specific aspects of care that could be improved. For example, 56% were not given contact information for support after discharge, 37% were not given enough information about their condition, 23% did not get enough help from staff to eat their meals, and 25% said nurses, and 28% said doctors, did not always explain things in an understandable way.
- Within local health districts, the number of questions with significant gaps between the responses from the disability group and other patients ranged from zero to 12. In Far West, Mid North Coast and St Vincent's Health Network, there were no questions with significant gaps, while in Southern NSW, responses from patients with disability were significantly less positive than patients without disability for 12 of the 48 survey questions.
- When focusing on the experiences of patients within the disability group only, local health district results varied. Responses from patients with disability in Mid North Coast and Southern NSW were significantly more positive than the NSW result for 17 of the 48 survey questions. Patients with disability in Western Sydney and Nepean Blue Mountains were significantly less positive for 14 and 13 questions, respectively.
- Among patients with a single disability, those with hearing impairment were most positive about their care. Those with a neurological condition were least positive.
- Patients with multiple disabilities responded less positively than those with a single disability. Disability conditions appear to have a cumulative and negative effect on patient experiences.
- Supplementary analyses showed patients with a mental health condition and those with longstanding illnesses such as cancer also had less positive experiences than other patients. These groups had less positive experiences for 40 and 13 of the 48 survey questions respectively when compared with patients with no mental health conditions and no longstanding illnesses.

For more information visit bhi.nsw.gov.au

OUR REPORTS

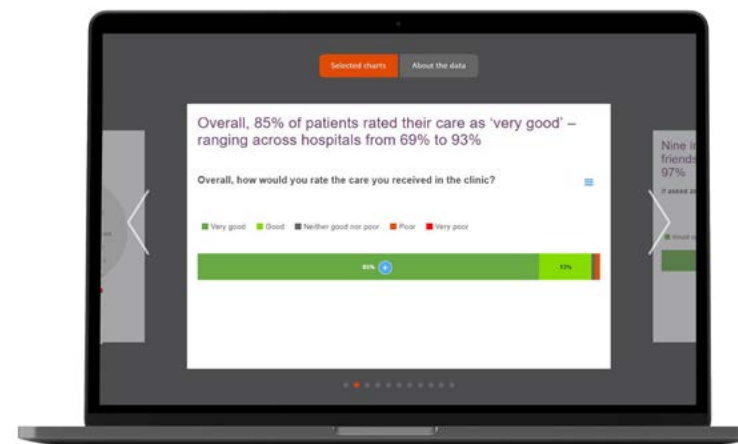
Chartpacks

BHI published its first online chartpacks in 2017-18, which summarised healthcare performance information through key graphs that can be downloaded in different formats.

Data visualisation can be a simple yet powerful presentation tool, as it enables large amounts of information to be quickly and easily digested, while also helping the viewer to make fair comparisons and identify patterns and trends.

Three new chartpacks were produced by BHI in 2017–18:

- *The NSW viewpoint, 2017 Commonwealth Fund International Health Policy Survey, Adults aged 65+ years* – BHI partnered with the Commonwealth Fund to collect data on the healthcare experiences of older adults (65+) in NSW. BHI's chartpack presented data comparing the NSW population with 10 countries' health systems on a range of measures.
- *How do outpatient cancer clinics perform? Patient-reported experiences and outcomes of care, November 2016* – BHI partnered with Cancer Institute NSW to collect data so that BHI could report on the experiences of care and self-reported outcomes of more than 12,000 patients.
- *Reporting hand hygiene compliance* – working with the Clinical Excellence Commission, the chartpack assessed reporting of hand hygiene compliance, bringing together data from different sources, including patients' observations of hand washing.



OUR REPORTS

Technical Report

BHI released its first technical report in March 2018 to support the use of predictive modelling in the health sector.

Using predictive risk modelling for performance measurement is part of our *Measurement Matters* series, which provides in-depth analyses of methods and technical issues relevant to performance measurement.

In health, predictive modelling has been used to identify patients most likely to need extensive support and healthcare services in the future, and to evaluate relevant programs and performance.

This report examines development of a predictive risk model (PRM) to support improved integration of these approaches. It explains important concepts about PRMs, applying them to cohorts of patients at risk of hospitalisation in NSW.

The report demonstrates how predicting the risk of admission is influenced by the choice of dataset, study cohort and modelling strategy.

The need to understand patient risk has increased as efforts to reduce unplanned readmissions to hospital has emerged as a national policy objective and common performance metric.

Quantifying and managing risk is at the heart of efforts nationwide to improve patient experiences, particularly for those more likely to need hospitalisation, and to achieve value for money in healthcare delivery.



LISTENING AND LEARNING

Patient Surveys

BHI asked 270,000 patients about their experiences and outcomes of care in the NSW health system during 2017-18.

We continued to manage and expand the NSW Patient Survey Program to support the integration of patient feedback into health system improvements.

The survey program is a rich source of data which BHI makes publicly available on our website through our interactive data portal Healthcare Observer, and in many of the reports and other information products we publish.

This year we brought the survey design process in-house to produce questionnaires which are easier for patients to understand and complete.

In addition, BHI conducted targeted oversampling of 30,000 patients across nine disease groups to provide patient experience and outcome data to the Leading Better Value Care program. This data will become part of the Register of Outcomes, Value and Experience (ROVE) that represents one of the most detailed datasets in Australia.

During 2017-18, BHI published the following survey results:

- Adult Admitted Patients 2015 and 2016
- Admitted Children and Young Patients 2015 and 2016
- Emergency Department Patient 2015–16 and 2016-17
- Small Hospital Emergency Care 2015–16
- Small and Rural Hospitals 2016
- Outpatients 2016



Admitted Children and Young Patients Survey



Adult Admitted Patient Survey



Emergency Department Patient Survey



Outpatient Survey



Maternity Care Survey



Small and Rural Hospitals Survey



Outpatients Cancer Clinics Survey



Small Hospital Emergency Care Survey



Emergency Department Patient Survey 2016-17

Almost **18,000** patients told us about their experiences of care in a NSW public hospital emergency department

Overall, most patients rated their care in the emergency department as

'very good'



'good'



Small Hospital Emergency Care Survey

More than **7,000** patients told us about their experiences of emergency care at small health facilities in NSW

Overall, the experience of emergency care was rated as

'very good'



'good'

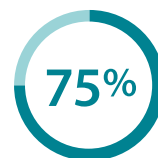


Outpatient Survey 2016

More than **13,000** patients told us about their experiences of care in a NSW public hospital outpatient clinic

Overall, most patients rated their care in the emergency department as

'very good'



'good'

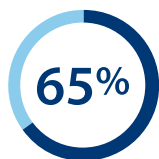


Adult Admitted Patient Survey 2016

More than **28,000** patients told us about their experiences of care in NSW public hospitals

Overall, the experience of care was rated as

'very good'



'good'



Admitted Children and Young Patients Survey 2016

More than **11,000** respondents told us about children's experiences of care in public hospitals

Overall, the care was rated as 'very good' or 'good' by

patients aged 8-17



parents and carers

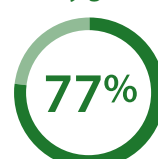


Small and Rural Hospitals Survey 2016

More than **6,500** patients told us about their experiences of care in smaller NSW public hospitals

Overall, the experience of care was rated as

'very good'



'good'



DIGITAL COMMUNICATION

Updates to our website

BHI's website provides a broad range of accessible information and analysis on the performance of the NSW public health system.

In 2017-18, we continued to improve the experience of users by making it easier to examine performance results for individual hospitals.

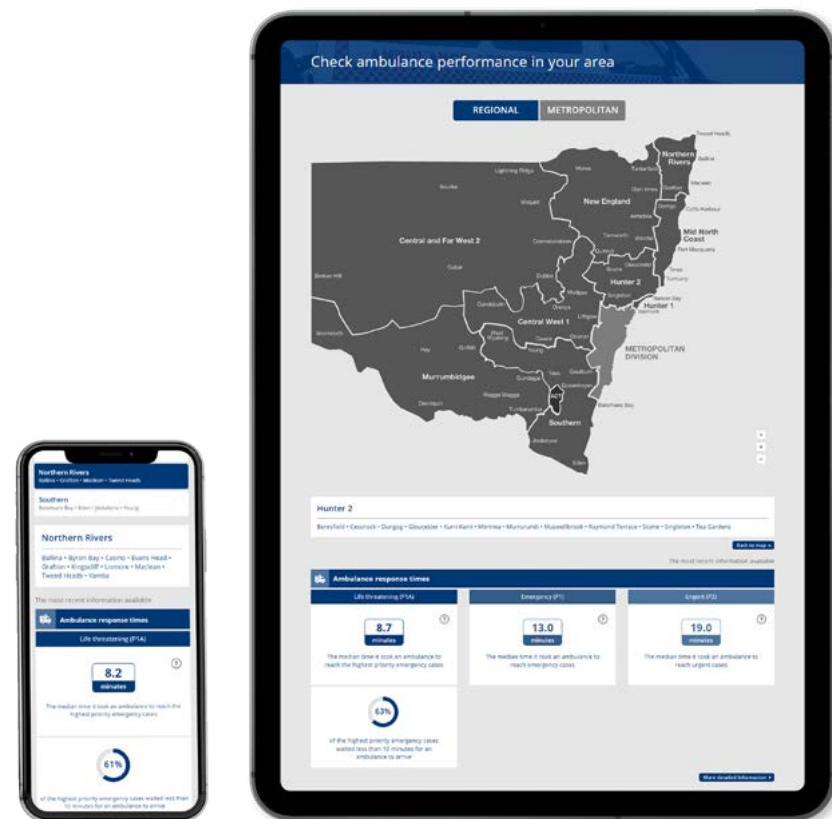
Each hospital's page in the hospital performance dashboard has been updated with new performance measures, displaying a summary of key findings from emergency departments, elective surgery and patient surveys in a visual snapshot.

The ambulance performance dashboard was also updated to include new performance measures on response times for each ambulance zone in NSW.

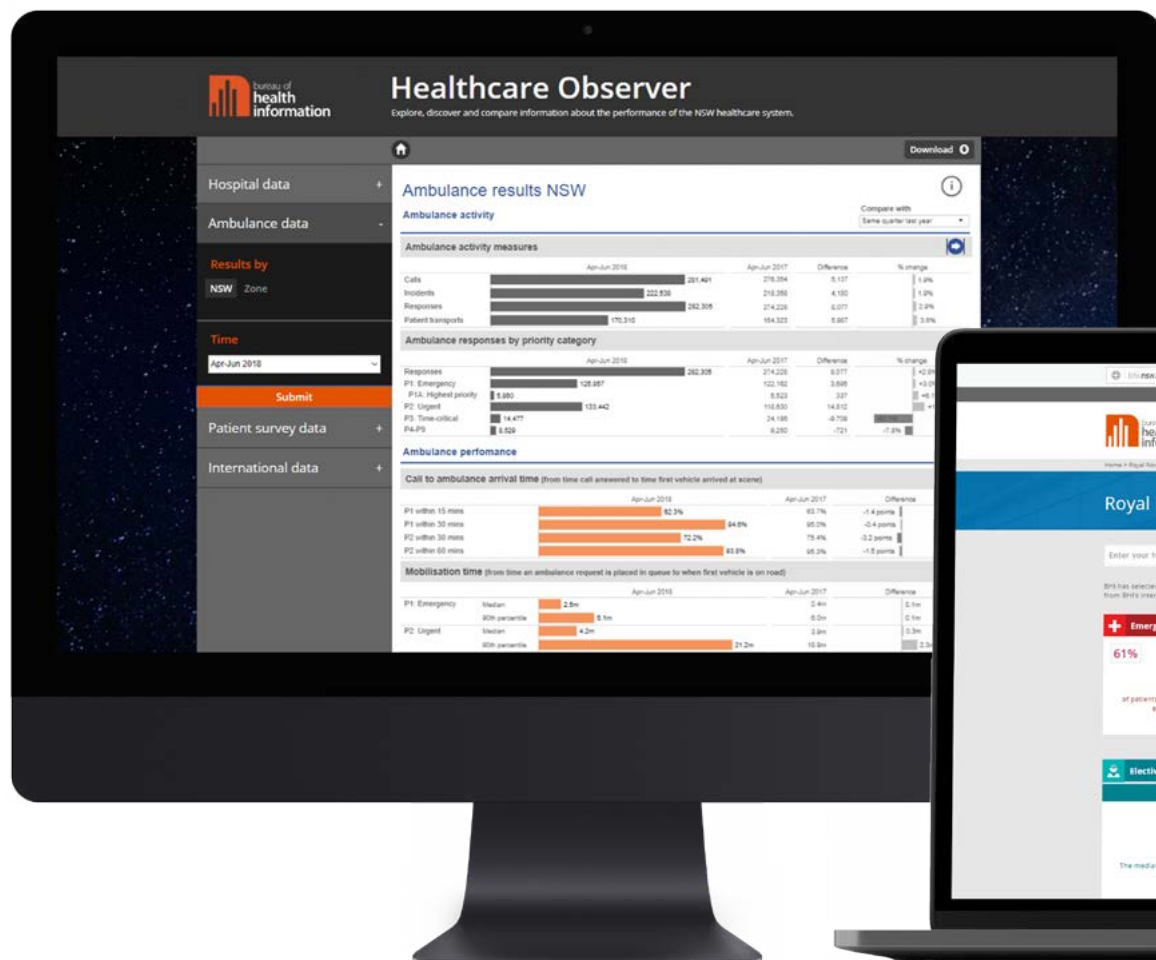
These dashboards can be used in conjunction with the more in-depth information available via BHI's interactive data portal, Healthcare Observer, which contains all BHI survey results and *Healthcare Quarterly* data since 2010.

All BHI reports are available on the website and the BHI Reports Plan outlines the projects that are in development and target release dates for publication.

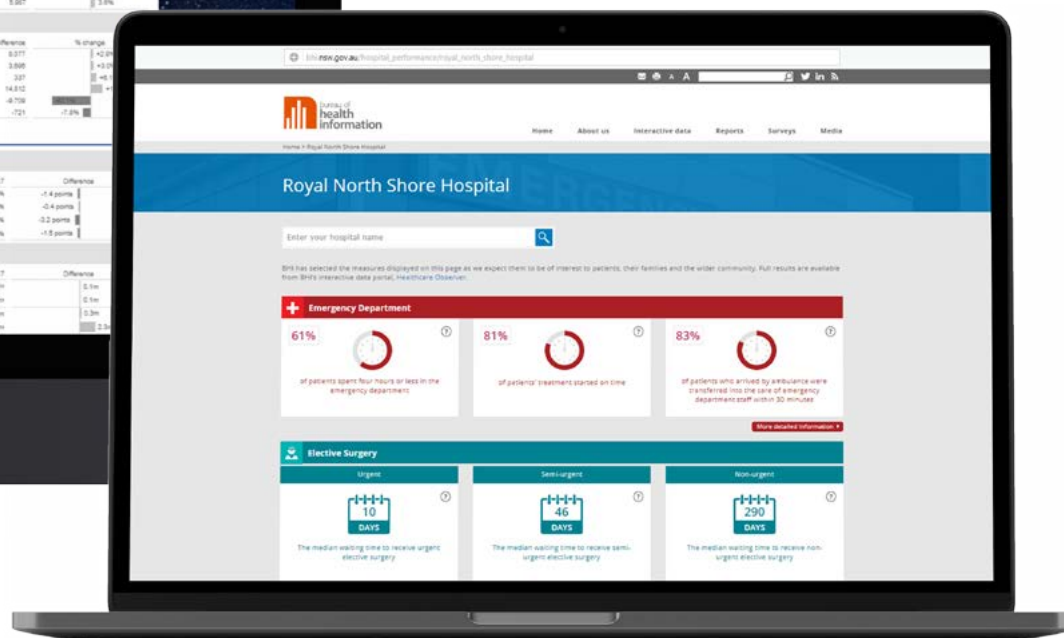
Visit the website at bhi.nsw.gov.au



Ambulance performance dashboard



Healthcare Observer



Hospital performance dashboard

Planning for the future

The *Strategic Plan: 2019–2022* will demonstrate our continued commitment to provide high quality information that is meaningful both within and outside the health system, supporting improvement and strengthening accountability.

Outcomes for patients and

We will maintain excellence in analytics for performance measurement and we will seek to enhance the usefulness of our products to those responsible for shaping and implementing improvements to the healthcare system.



HOW WE WORK

Working with others

BHI collaborates with a wide range of groups and organisations to ensure our work supports quality improvement in NSW, and to contribute to healthcare performance reporting internationally.

This year, we developed new key performance measures for patient experience, to be used in the service level agreements between the Ministry of Health and local health districts (LHDs). This resulted in the replacement of historic measures with two new indices comprising four and six scored questions, as well as a new improvement measure on treating patients with respect and dignity.

BHI held its Challenging Ideas seminar, which examined why public reporting is a critical component of safety improvement.

Pillars

We collaborated with Cancer Institute NSW to produce a chartpack reflecting the experiences of care and self-reported outcomes of patients who visited an outpatient cancer clinic in NSW.

BHI also worked with the Clinical Excellence Commission (CEC) to produce a chartpack on the reporting of hand hygiene compliance.

Local Health Districts

BHI actively involves LHDs and specialty health networks (SHNs) in the pre-release process for our products. Briefings are provided prior to release and our staff regularly liaise with LHD and SHN researchers to provide access to existing information or to supply information in a different format.

In addition, BHI undertook extensive consultation, including with LHDs and SHNs, in developing the *BHI Strategic Plan: 2019–2022*.

NSW Ambulance

BHI continues to work closely with NSW Ambulance to deliver timely and accurate quarterly performance data on ambulance services across the state.

Advisory committees

BHI works with our Scientific Advisory Committee, which comprises 10 leading experts who help us ensure that our activities, strategies and plans are consistent with current best practice in performance reporting.

BHI also has several project-specific advisory committees that provided guidance on different aspects of ongoing projects. We also meet and consult with subject matter experts regularly throughout the course of our projects.

Talking about our work

BHI's Chief Executive and expert staff regularly present at Australian and international conferences, forums, workshops and meetings.

BHI delivered presentations in NSW and beyond during the year. Audiences included health agencies and organisations, medical conferences and government authorities.

Presentation opportunities included:

- Wennberg International Collaborative Spring Policy Meeting (Zurich) – presenting on bridging the gap between healthcare research and policy
- Health Services and Policy Research Conference – hospital variation in risk standardised 30-day mortality and emergency department visits
- Australian College of Health Services Managers – using patient surveys to guide healthcare improvement.

How do we reach people?

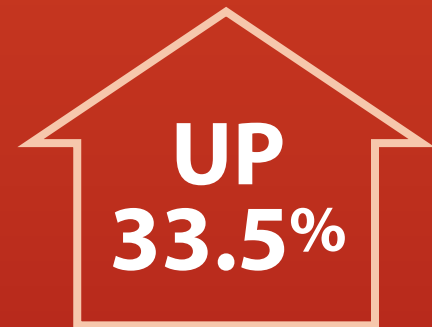
19 reports, chartpacks and data releases



270,000
people surveyed



80,795
visits to our website



1,275

Twitter
followers



8+



presentations given in NSW
and other jurisdictions

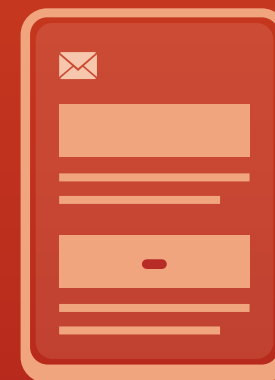
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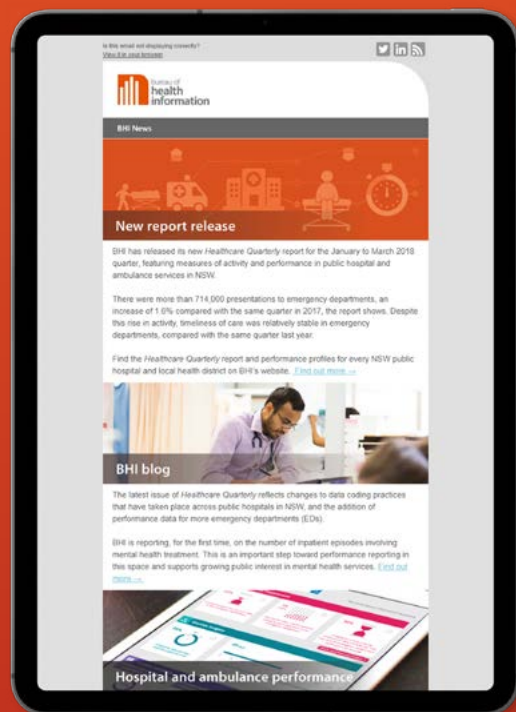
external committees
BHI was represented on

795

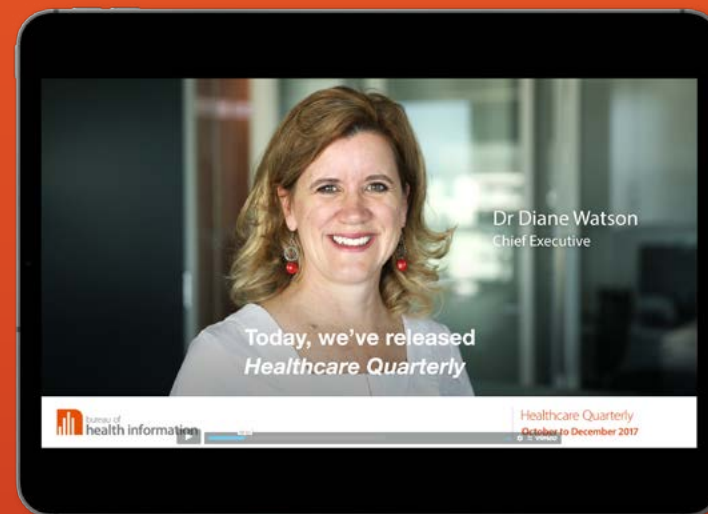
e-newsletter
subscribers



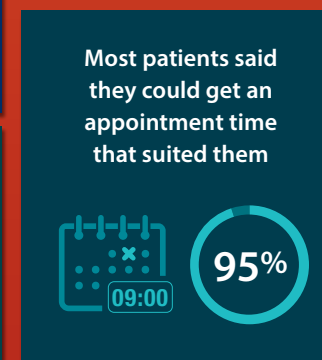
How do we reach people?



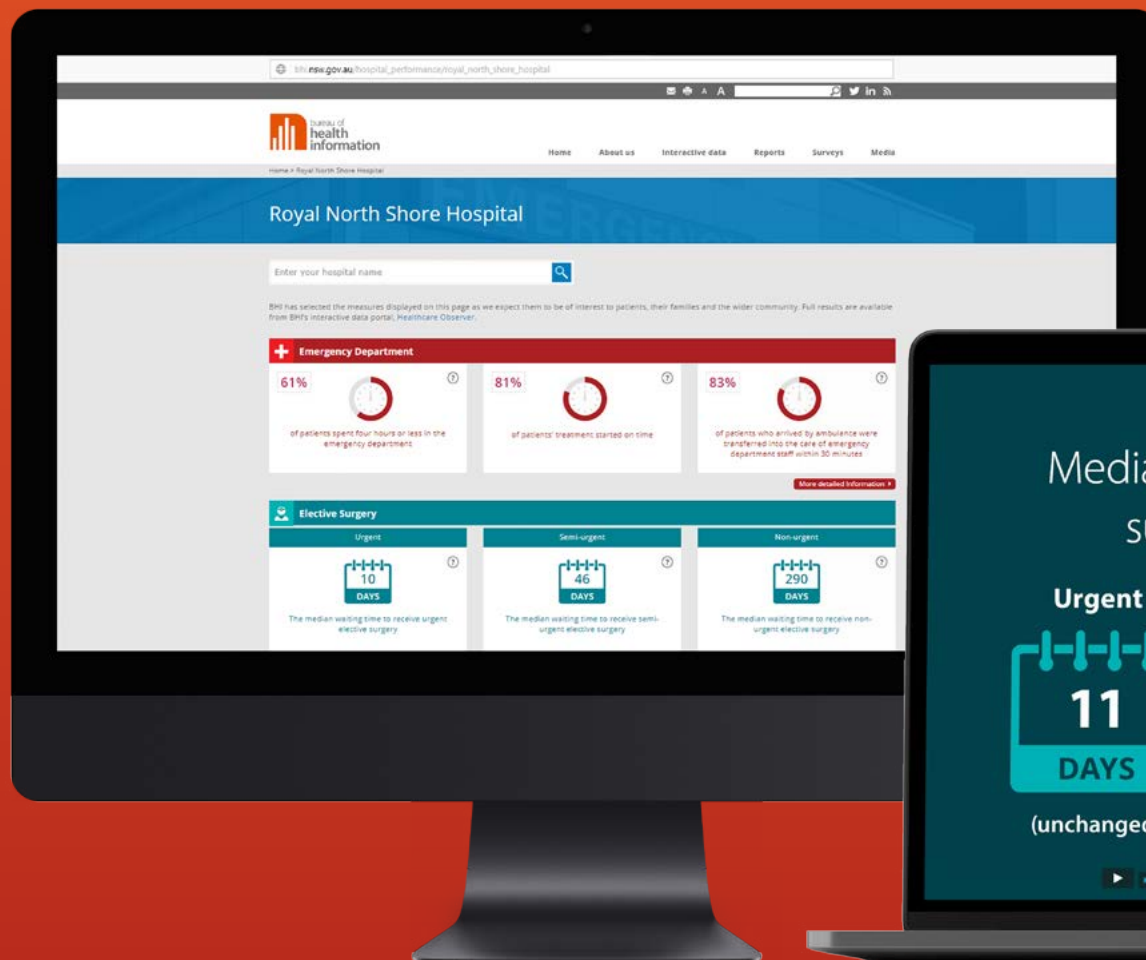
e-newsletters



Video messages



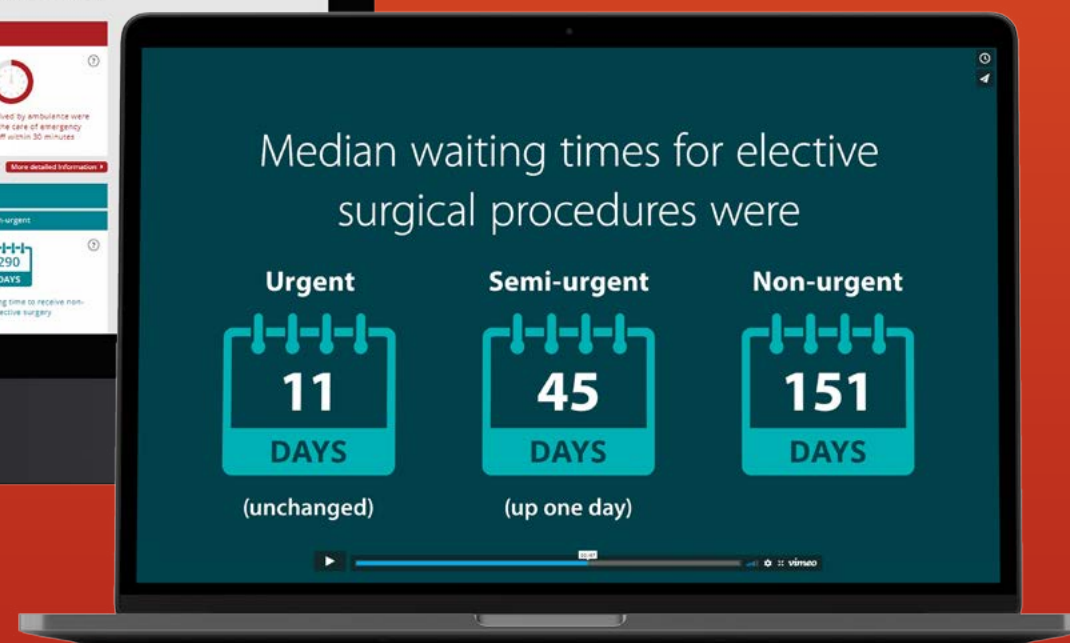
Infographics



Dynamic hospital performance data



Social media



Animations

