

Healthcare Quarterly

Seclusion and Restraint Supplement

July to September 2021



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Please note there is the potential for minor revisions of data in this report.

Please check the online version at **bhi.nsw.gov.au** for any amendments or errata.

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The conclusions in this report are those of BHI and no official endorsement by the NSW Minister for Health, the NSW Ministry of Health or any other NSW public health organisation is intended or should be inferred.

Table of contents

Seclusion and physical restraint	4
Seclusion and restraint events and rate	8
Duration of seclusion and physical restraint events	14

Seclusion and physical restraint

Seclusion and restraint involves the use of interventions to restrict the freedom of movement of a patient. These restrictive practices are not therapeutic but may be needed to support care. They should only be used as a last resort when other options are unsuccessful in maintaining safety for the patient, staff or others.

In NSW, there are more than 40 public hospitals, plus the forensic hospital, with specialised acute mental health units that treat patients with varying severities of mental illness. There are Mental Health Intensive Care Units (MHICUs) in six of these hospitals, providing treatment for patients with a higher level of clinical severity and complexity who may be more likely to experience seclusion and restraint.

The Justice Health and Forensic Mental Health Network (JHFMHN) provides specialised mental health services for forensic patients. JHFMHN is reported separately and not included in NSW totals to acknowledge the differences in model of care and the patient cohort.

BHI does not report on seclusion and restraint events in non-acute specialised mental health inpatient units or in emergency departments (EDs).

Most episodes of care in acute mental health units did not have a seclusion or restraint event in July to September 2021 (Figure 1).

The NSW Health Performance Framework includes three key performance indicators (KPIs) related to the use of restrictive practices. The KPI target for the percentage of acute mental health episodes of care with at least one seclusion event in 2021–22 is less than 4.1% for each hospital.

The percentage of acute mental health episodes of care with at least one seclusion event was 3.6%, relatively stable (down 0.1 percentage points) compared with the same quarter the previous year (Figure 1, Table 1). The percentage was 4.1 or above in 14 hospitals: Morisset (15.4), Concord (9.8), Bankstown-Lidcombe (8.8), Maitland (7.4), Gosford (6.5), Liverpool (6.5), Lismore (6.4), Cumberland (5.9), Wyong (5.5), Wollongong (4.9), Tweed (4.6), Hunter New England Mater Mental Health Centre (4.6), Sutherland (4.4) and Port Macquarie (4.3) (Table 1).

The percentage of acute mental health episodes of care with at least one physical restraint event was 4.6%, (down 0.4 percentage points) compared with the same quarter the previous year (Figure 1, Table 1).

There is variation across public hospitals in the use of these interventions (Table 1).

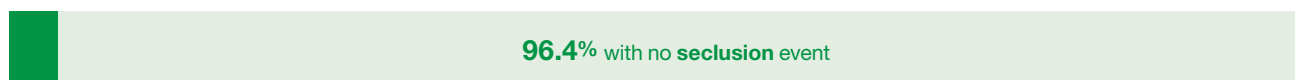
For more information on analyses of seclusion and restraint, see *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals* at bhi.nsw.gov.au/BHI_reports/measurement_matters

A **seclusion event** occurs when a patient is placed alone in a room or an area at any time of day or night, with no freedom of exit. The duration of the event, or the size and type of area in which a patient is confined is not relevant in determining what is or is not seclusion.

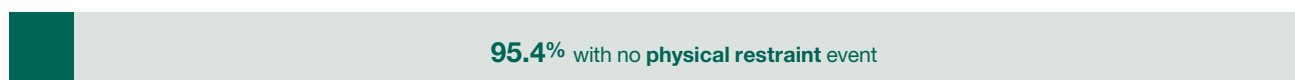
A **restraint event** occurs when a patient's freedom of movement is restricted by physical means (i.e. hands-on immobilisation by healthcare staff) or mechanical means (i.e. application of devices).

Figure 1 Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one seclusion or physical restraint event, July to September 2021*

3.6% with ≥1 **seclusion event**



4.6% with ≥1 **physical restraint event**



* BHI does not report on seclusion and restraint events in non-acute specialised mental health inpatient units or in EDs.

Note: Seclusion and restraint data were drawn from the HIE on 20 October 2021, and manually collected measures received from InforMH, System Information and Analytics, NSW Ministry of Health on 3 November 2021.

Table 1 Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one seclusion or physical restraint event, by public hospital, July to September 2021*

Hospital	Number of acute mental health episodes of care	Seclusion		Physical restraint	
		% of episodes with at least one event	Percentage point change since one year ago	% of episodes with at least one event	Percentage point change since one year ago
NSW†	11,645	3.6	-0.1	4.6	-0.4
No mental health intensive care unit	Armidale	78	0.0	0.0	0.0
	Bankstown-Lidcombe	216	8.8	6.6	1.8
	Blacktown	368	3.3	1.4	2.4
	Blue Mountains	84	0.0	-1.1	-0.7
	Braeside	37	0.0	0.0	-5.6
	Broken Hill	56	1.8	-4.5	-4.7
	Campbelltown	546	2.4	1.2	1.9
	Children's at Westmead	74	0.0	0.0	-4.0
	Coffs Harbour	214	2.8	0.8	-0.8
	Dubbo	80	2.5	2.5	3.0
	Gosford	170	6.5	3.1	2.4
	Goulburn	226	1.3	-0.2	1.1
	Greenwich	63	0.0	0.0	-2.9
	John Hunter	74	0.0	0.0	-10.2
	Kempsey	66	0.0	0.0	0.0
	Lismore	249	6.4	2.1	-0.3
	Liverpool	475	6.5	-3.9	-2.5
	Macquarie	52	3.8	2.5	-1.2
	Maitland	188	7.4	-1.6	1.1
	Manning	98	0.0	-3.6	1.5
	Morisset	13	15.4	15.4	7.7
	Nepean	529	3.0	-0.7	-4.2
	Port Macquarie	92	4.3	1.0	2.1
	Royal North Shore	338	0.6	-1.1	-0.3
	Royal Prince Alfred	768	3.1	1.3	-0.1
	Shellharbour	370	3.0	-3.8	-0.6
	South East Regional	130	0.0	0.0	-0.8
	St George	255	0.8	-1.4	1.2
	St Joseph's	27	0.0	0.0	3.7
	St Vincent's	348	0.9	-0.8	-0.3
	Sutherland	158	4.4	0.5	0.1
	Sydney Children's	242	0.0	-4.7	-6.2
	Tamworth	197	2.5	-0.4	2.3
	Tweed	174	4.6	2.2	4.8
	Wagga Wagga	338	0.6	0.3	1.6
	Westmead	160	0.0	0.0	-4.2
	Wollongong	307	4.9	0.8	0.5
	Wyong	292	5.5	-0.5	-0.5
MHICU	Concord	782	9.8	0.4	-1.8
	Cumberland	746	5.9	-0.5	-3.7
	Hornsby	382	3.1	-1.5	-2.7
	Hunter New England Mater MH	732	4.6	0.4	0.8
	Orange	408	1.5	-0.3	-0.9
	Prince of Wales	443	0.9	-0.5	2.6
JH	The Forensic Hospital†	57	28.1	2.2	14.1

* Episodes of care include same-day, overnight, completed and non-completed episodes excluding episodes at the Forensic Hospital. Episodes of care for the Forensic Hospital include same-day, overnight, completed and non-completed episodes.

† Justice Health (JH) is not included in NSW totals because of the differences in model of care and the patient cohort. For more information, see *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals*.

Notes: MHICU = Mental Health Intensive Care Unit. JHFMHN = Justice Health and Forensic Mental Health Network.

Results for Northern Beaches Hospital are not included.

Seclusion and physical restraint

Across July to September quarters, the percentage of acute mental health episodes of care in NSW with at least one seclusion event decreased from 5.0% in 2016 to 3.6% in 2021. However, there has been variation during that time.

A notable increase in the first half of 2020 was followed by a decrease until April to June 2021. In July to September 2021, this percentage increased again, most notably in hospitals with a MHICU (Figure 2).

The percentage of acute mental health episodes of care in NSW with at least one physical restraint event remained relatively stable over the past five years (Figure 3).

The percentage of acute mental health episodes of care with at least one physical restraint event in hospitals with a MHICU was typically higher, and showed more variation, than in hospitals without a MHICU (Figure 3).

Figure 2 Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one seclusion event, July 2016 to September 2021

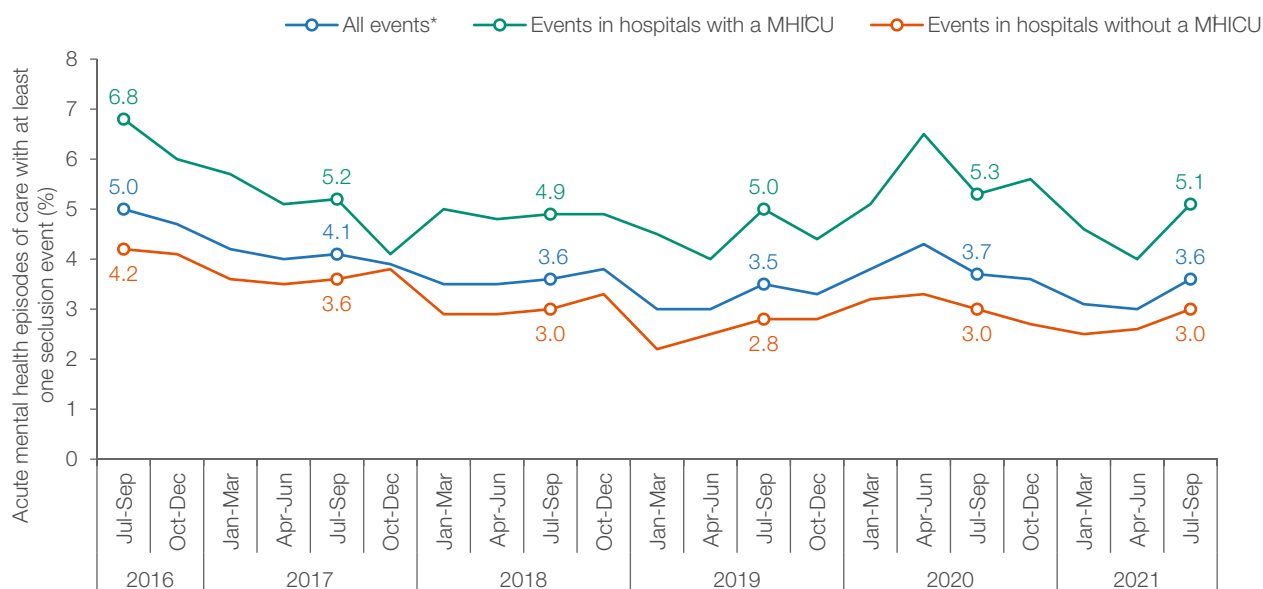
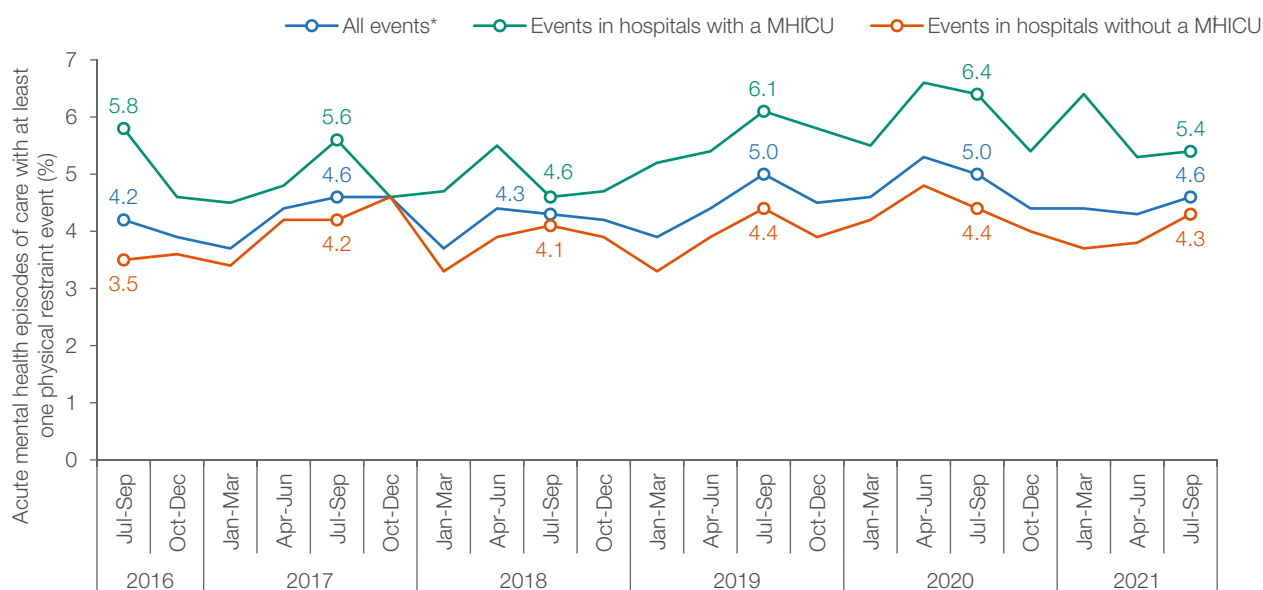


Figure 3 Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one physical restraint event, July 2016 to September 2021



* 'All events' includes all seclusion or physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the Justice Health and Forensic Mental Health Network (JHFMHN).

* MHICU = Mental Health Intensive Care Unit

Note: For more information, including which hospitals are included each quarter, please refer to the technical supplement to this *Healthcare Quarterly* and *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals*, available at bhi.nsw.gov.au

Seclusion and restraint events and rate

Use of seclusion and restraint in hospitals can be affected by a range of factors including the acuity and mix of patients, local models of care, staffing levels and training, and the physical environment of the unit.

Across NSW, there were 710 seclusion events in July to September 2021, down 151 events compared with the same quarter the previous year. There were 950 physical restraint events, down 184 (Table 2).

The number of seclusion and restraint events varied across public hospitals. The highest numbers of seclusion and restraint events mostly occurred in hospitals with a MHICU and at the Forensic Hospital (Table 2).

There were 42 mechanical restraint events in NSW public hospitals with specialised acute mental health units (excluding the Forensic Hospital). This was down by 9 events compared with the same quarter the previous year (data not shown by hospital due to small numbers). At the Forensic Hospital, there were 88 mechanical restraint events, up by 19 events compared with the same quarter the previous year (data not shown).

The NSW Health KPI target for rate of seclusion in 2021–22 is less than 5.1 per 1,000 bed days for each hospital. In July to September 2021, the NSW rate of seclusion was 5.9, down 0.8 compared with the same quarter the previous year (Table 2).

The rate of seclusion was below 5.1 per 1,000 bed days in 29 hospitals. The rate was 5.1 or above in 15 hospitals: Maitland (17.0), Liverpool (13.0), Bankstown-Lidcombe (11.8), Hunter New England Mater Mental Health Centre (11.6), Concord (11.4), Lismore (10.9), Wollongong (9.2), Morisset (8.8), Port Macquarie (8.8), Wyong (8.2), Cumberland (7.7), Blacktown (7.3), Sutherland (7.2), Gosford (6.6) and Royal Prince Alfred (5.9) (Table 2).

The rate of physical restraint was 7.9 per 1,000 bed days, down 0.9 compared with the same quarter the previous year (Table 2).

For more information on analyses of seclusion and restraint, see *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals* at bhi.nsw.gov.au/BHI_reports/measurement_matters

Table 2 Number and rate of seclusion and physical restraint events occurring in specialised acute mental health inpatient units, by public hospital, July to September 2021

		Seclusion			Physical restraint		
Hospital		Total number of seclusion events	Change in events since one year ago	Rate per 1,000 bed days	Total number of physical restraint events	Change in events since one year ago	Rate per 1,000 bed days
NSW		710	-151	5.9	950	-184	7.9
No mental health intensive care unit	Armidale	0	0	0	0	0	0
	Bankstown-Lidcombe	31	0	11.8	32	1	12.2
	Blacktown	19	8	7.3	20	7	7.7
	Blue Mountains	0	-2	0	<5	-3	3.1
	Braeside	0	0	0	<5	-15	0.7
	Broken Hill	<5	-5	2.3	<5	-2	9.1
	Campbelltown	22	13	4.4	24	5	4.8
	Children's at Westmead	0	0	0	<5	-32	6.8
	Coffs Harbour	8	-14	2.9	12	-7	4.4
	Dubbo	<5	2	2.7	<5	2	4.1
	Gosford	15	8	6.6	17	-3	7.5
	Goulburn	8	-3	5	23	-16	14.5
	Greenwich	0	0	0	0	-7	0
	John Hunter	0	0	0	0	-14	0
	Kempsey	0	0	0	0	0	0
	Lismore	40	28	10.9	30	1	8.2
	Liverpool	52	-64	13	29	-17	7.3
	Macquarie	<5	2	2.8	<5	-3	1.8
	Maitland	28	3	17	15	4	9.1
	Manning	0	-5	0	5	-1	6.6
	Morisset	6	6	8.8	5	5	7.3
	Nepean	22	-8	4.3	11	-31	2.1
	Port Macquarie	10	6	8.8	9	4	7.9
	Royal North Shore	<5	-4	0.7	13	-3	4.4
	Royal Prince Alfred	37	19	5.9	29	-6	4.7
	Shellharbour	12	-40	3.6	25	-10	7.6
	South East Regional	0	0	0	8	-4	7.8
	St George	<5	-10	0.9	25	-15	10.9
	St Joseph's	0	0	0	<5	1	2.2
	St Vincent's	<5	-3	1.4	37	13	12.9
	Sutherland	13	3	7.2	14	-6	7.7
	Sydney Children's	0	-4	0	44	38	52.8
	Tamworth	6	-9	3.5	14	-3	8.2
	Tweed	10	5	4.6	20	5	9.1
	Wagga Wagga	<5	1	0.7	32	23	11.9
	Westmead	0	0	0	5	-10	2
	Wollongong	23	6	9.2	26	10	10.4
	Wyong	32	5	8.2	27	-5	6.9
MHICU	Concord	125	-71	11.4	87	-49	7.9
	Cumberland	60	-8	7.7	39	-32	5
	Hornsby	18	-11	4.1	72	-12	16.3
	Hunter New England Mater MH	86	2	11.6	110	-15	14.8
	Orange	6	-2	1.3	22	5	4.8
JH	Prince of Wales	5	-5	1	50	13	10.1
	The Forensic Hospital	33	-190	8.3	134	-112	33.8

* Justice Health (JH) is not included in NSW totals because of the differences in model of care and the patient cohort. For more information, see *Measurement Matters: Reporting on seclusion and restraint in NSW public hospitals*.

Notes: MHICU = Mental Health Intensive Care Unit. JHFMHN = Justice Health and Forensic Mental Health Network.

Results for Northern Beaches Hospital are not included.

Seclusion events and rate

Across July to September quarters, the number of seclusion events decreased from 1,109 in 2016 to 710 in 2021, down 36.0% (399). The number of seclusion events in hospitals with a MHICU decreased from 512 in July to September 2016 to 300 in July to September 2021, down 41.4% (212). However, there has been variation during that time.

A notable increase in mid 2020 was followed by a decrease until April to June 2021. In July to September 2021, the number of events increased again in hospitals without a MHICU, while there was no change in this quarter for hospitals with a MHICU (Figure 4).

The rate of seclusion is the number of seclusion events per 1,000 bed days. Since 2018–19, the NSW Ministry of Health's KPI target for the rate of seclusion has been less than 5.1 per 1,000 bed days.

Across July to September quarters, the rate decreased from 8.3 per 1,000 bed days in 2016 to 5.9 per 1,000 in 2021. While the rate had decreased steadily in the year to April to June 2021, it increased sharply in July to September 2021 (Figure 5).

Figure 4 Number of seclusion events occurring in specialised acute mental health inpatient units, July 2016 to September 2021

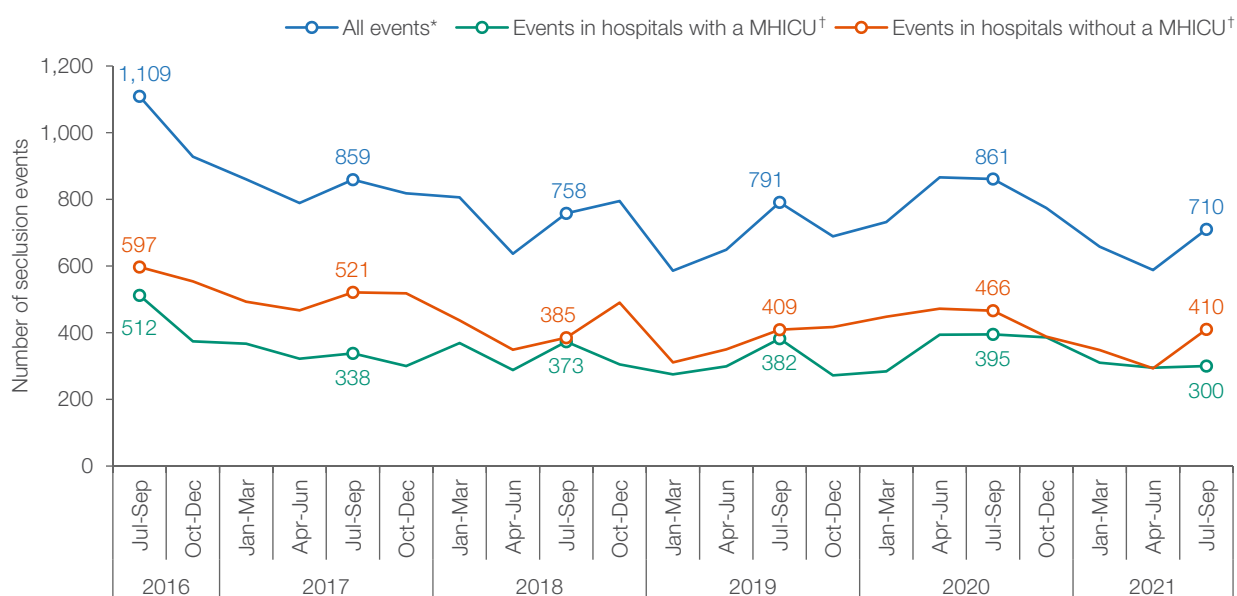
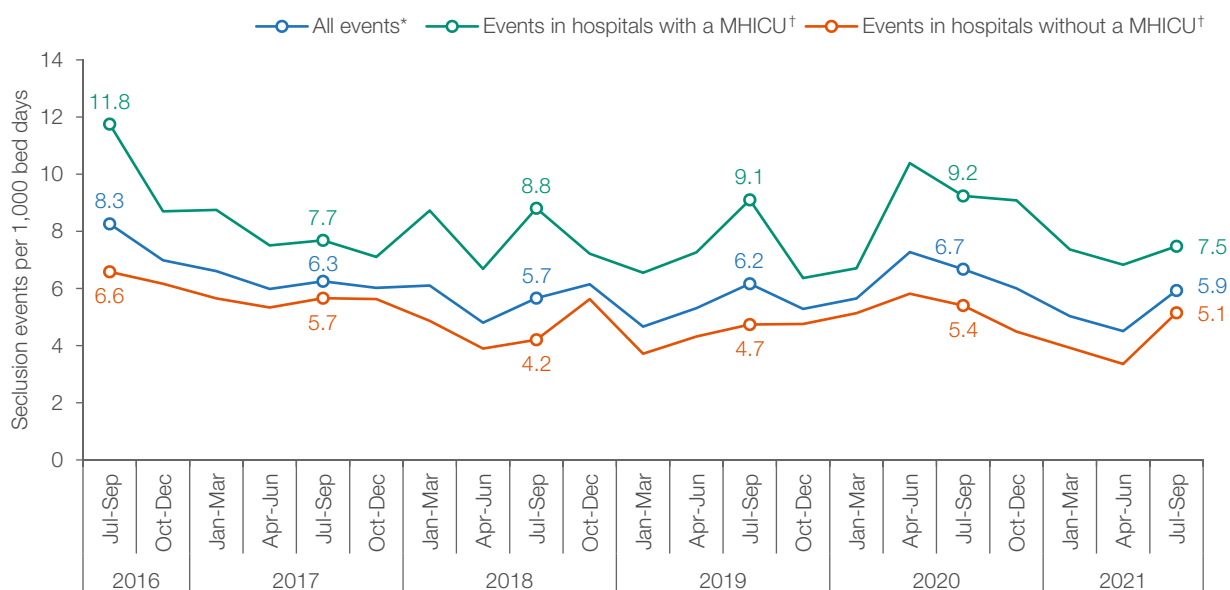


Figure 5 Number of seclusion events per 1,000 bed days in specialised acute mental health inpatient units, July 2016 to September 2021



* 'All events' includes all seclusion events occurring in specialised acute mental health inpatient units, excluding episodes in the Justice Health and Forensic Mental Health Network (JHFMHN).

† MHICU = Mental Health Intensive Care Unit

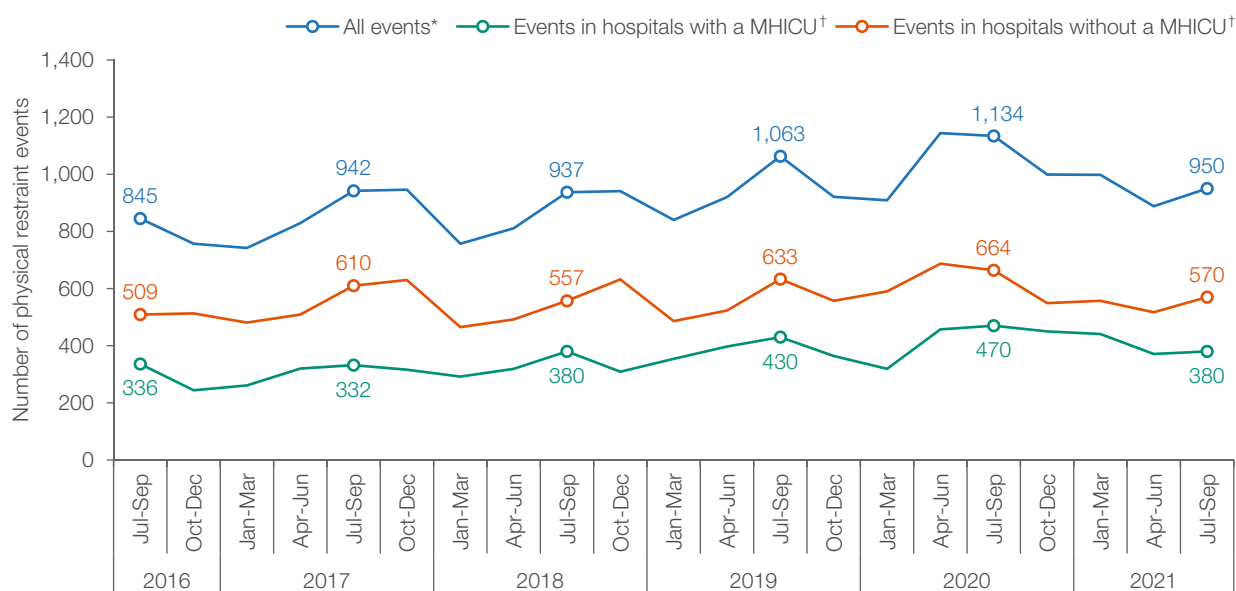
Note: For more information, including which hospitals are included each quarter, please refer to the technical supplement to this *Healthcare Quarterly* and *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals*, available at bhi.nsw.gov.au

Physical restraint events and rate

The number of physical restraint events showed some seasonal variation over five years. Across July to September quarters, it peaked at 1,134 in July to September 2020, followed by a decrease to 950 in July to September 2021 (Figure 6).

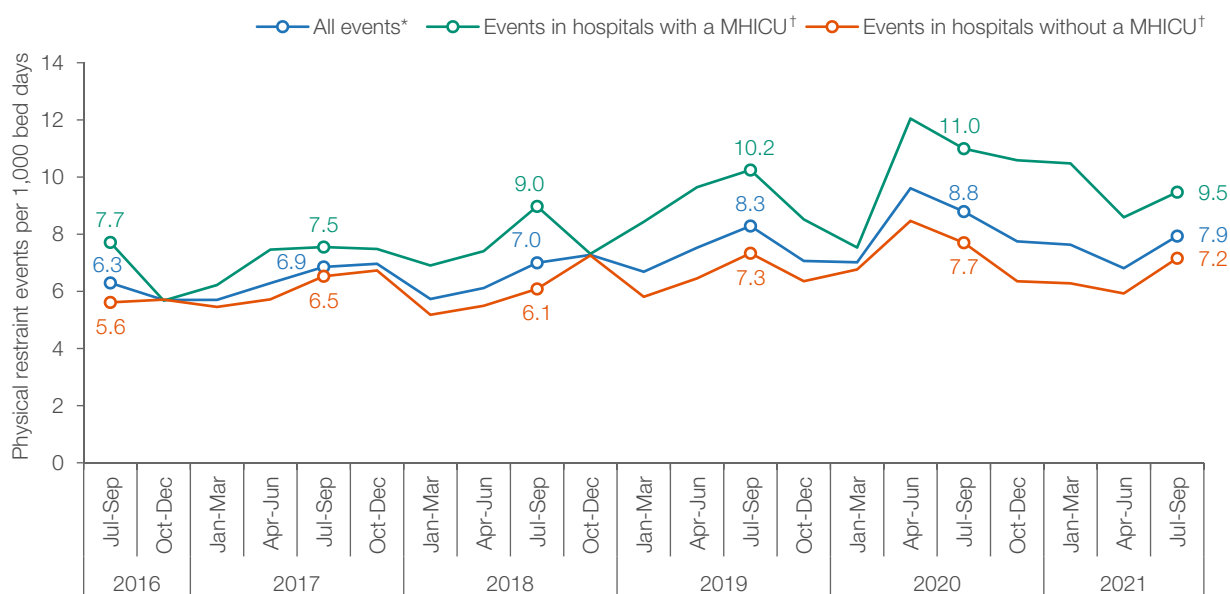
The rate of restraint refers to the number of restraint events per 1,000 bed days. The rate has risen over five years from 6.3 in July to September 2016 to 7.9 in July to September 2021. The rate peaked in April to June 2020 and steadily decreased to April to June 2021. However, it rose in July to September 2021. (Figure 7).

Figure 6 Number of physical restraint events occurring in specialised acute mental health inpatient units, July 2016 to September 2021



Note: Data collection for physical restraint commenced in 2015–16. The variation in the number of physical restraint events over time may be due to differences in the processes for manual collection of data and/or a maturing understanding of the definition of physical restraint rather than actual differences in the use of physical restraint.

Figure 7 Number of physical restraint events per 1,000 bed days in specialised acute mental health inpatient units, July 2016 to September 2021



* 'All events' includes all physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the JHFMHN.

† MHICU = Mental Health Intensive Care Unit

Note: For more information, including which hospitals are included each quarter, please refer to the technical supplement to this *Healthcare Quarterly* and *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals*, available at bhi.nsw.gov.au

Duration of seclusion and physical restraint events

While seclusion and restraint are used to maintain safety for a patient, staff or others, the length of time that an individual is exposed to these restrictive interventions should be as short as possible.

When examining average duration of seclusion and restraint events, it should be noted that variation can be affected by a single event lasting considerably longer than others.

The NSW Health KPI target for the average duration of seclusion events in 2021–22 is less than four hours.

Statewide, the average duration of a seclusion event was 10 hours and 54 minutes in July to September 2021, up 3 hours and 35 minutes compared with the same quarter the previous year (Table 3). The average duration of seclusion events was less than four hours in 26 of the hospitals reported. The average duration was longer than four hours in 11 hospitals: Concord (24h 21m), Cumberland (22h 44m), Hornsby (18h 54m), Nepean (18h 38m), Liverpool (17h 27m), Coffs Harbour (9h 35m), Prince of Wales (8h 6m), Royal Prince Alfred (7h 41m), Lismore (6h 55m), Blacktown (5h 5m) and Bankstown-Lidcombe (5h 3m) (Table 3).

In July to September 2021, the average duration of a physical restraint event was five minutes, unchanged compared with the same quarter the previous year (Table 3).

The average duration of a mechanical restraint event in NSW public hospitals (excluding the Forensic Hospital) was 1 hour 46 minutes. This was up 51 minutes compared with the same quarter the previous year (data not shown by hospital due to small numbers). At the Forensic Hospital, the average duration of a mechanical restraint event was 43 minutes, down 5 minutes compared with the same quarter the previous year (data not shown).

Table 3 Average duration of seclusion and physical restraint events occurring in specialised acute mental health inpatient units, by public hospital, July to September 2021

		Seclusion		Physical restraint	
Hospital		Average duration	Change since one year ago	Average duration	Change since one year ago
NSW		10h 54m	3h 35m	5m	0m
No mental health intensive care unit	Armidale	0m	0m	0m	0m
	Bankstown-Lidcombe	5h 3m	1h 11m	1m	0m
	Blacktown	5h 5m	-6h 17m	1m	0m
	Blue Mountains	0m	†	†	†
	Braeside	0m	0m	†	†
	Broken Hill	†	†	†	†
	Campbelltown	3h 2m	2h 12m	3m	2m
	Children's at Westmead	0m	0m	†	†
	Coffs Harbour	9h 35m	27m	3m	1m
	Dubbo	†	†	†	†
	Gosford	51m	-56m	2m	0m
	Goulburn	50m	-27m	4m	2m
	Greenwich	0m	0m	0m	-1m
	John Hunter	0m	0m	0m	-3m
	Kempsey	0m	0m	0m	0m
	Lismore	6h 55m	5h 1m	4m	0m
	Liverpool	17h 27m	8h 15m	1m	0m
	Macquarie	†	†	†	†
	Maitland	2h 31m	-46m	4m	-4m
	Manning	0m	-1h 3m	10m	7m
	Morisset	1h 53m	1h 53m	2m	2m
	Nepean	18h 38m	7h 55m	2m	-1m
	Port Macquarie	1h 19m	†	4m	0m
	Royal North Shore	†	†	2m	-5m
	Royal Prince Alfred	7h 41m	5h 9m	6m	0m
	Shellharbour	1h 18m	-3h 45m	2m	-1m
	South East Regional	0m	0m	2m	0m
	St George	†	†	1m	-1m
	St Joseph's	0m	0m	†	†
	St Vincent's	†	†	2m	0m
	Sutherland	2h 7m	-3h 20m	4m	2m
	Sydney Children's	0m	†	20m	17m
	Tamworth	1h 14m	-1h 18m	2m	-8m
	Tweed	3h 40m	1h 22m	1m	0m
	Wagga Wagga	†	†	2m	-2m
	Westmead	0m	0m	1m	-2m
	Wollongong	2h 26m	-2h 9m	9m	6m
	Wyong	2h 38m	-2h 51m	4m	0m
MHICU	Concord	24h 21m	14h 23m	7m	1m
	Cumberland	22h 44m	13h 43m	2m	0m
	Hornsby	18h 54m	16h 45m	8m	-3m
	Hunter New England Mater MH	3h 36m	-5h 55m	5m	-3m
	Orange	44m	-12m	1m	-1m
JH	Prince of Wales	8h 6m	3h 42m	2m	-1m
	The Forensic Hospital	10h 18m	-2h 39m	5m	-3m

* Justice Health (JH) is not included in NSW totals because of the differences in model of care and the patient cohort. For more information, see *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals*.

† Suppressed due to small number of seclusion/physical restraint events in the reporting period, to protect patient privacy.

‡ Suppressed due to small number of seclusion/physical restraint events in the reporting period or in the same quarter the previous year, to protect patient privacy.

Notes: MHICU = Mental Health Intensive Care Unit. JHFMHN = Justice Health and Forensic Mental Health Network.

Results for Northern Beaches Hospital are not included.

Duration of seclusion and physical restraint events

The NSW Health KPI for average seclusion duration of less than four hours has been in place since 2017–18.

The average duration of a seclusion event at NSW level has been longer than the NSW Health KPI target of four hours since April to June 2016 (Figure 8).

The average duration of a seclusion event increased from 5 hours 46 minutes in July to September 2016 to 10 hours 54 minutes in July to September 2021, the longest of any quarter over the past five years. This included a very sharp increase in average duration during 2021. The average duration of a seclusion event in hospitals with a MHICU rose sharply in the past year to 17 hours in July to September 2021. The average duration in hospitals without a MHICU increased from 4 hours 38 minutes to 6 hours 26 minutes over five years (Figure 8).

The average duration of physical restraint events varied between 4 minutes 4 seconds, and 4 minutes 58 seconds across July to September quarters over five years. The average duration of a physical restraint event in hospitals with a MHICU was typically longer than in hospitals without a MHICU (Figure 9).

Figure 8 Average duration of seclusion events occurring in specialised acute mental health inpatient units, July 2016 to September 2021

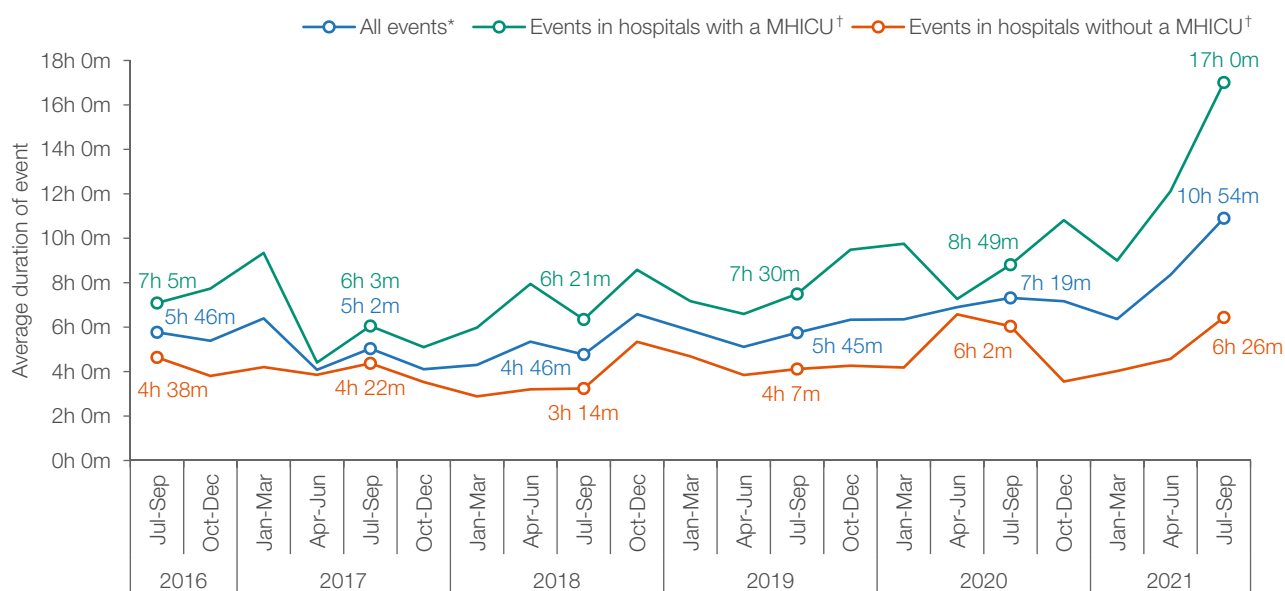
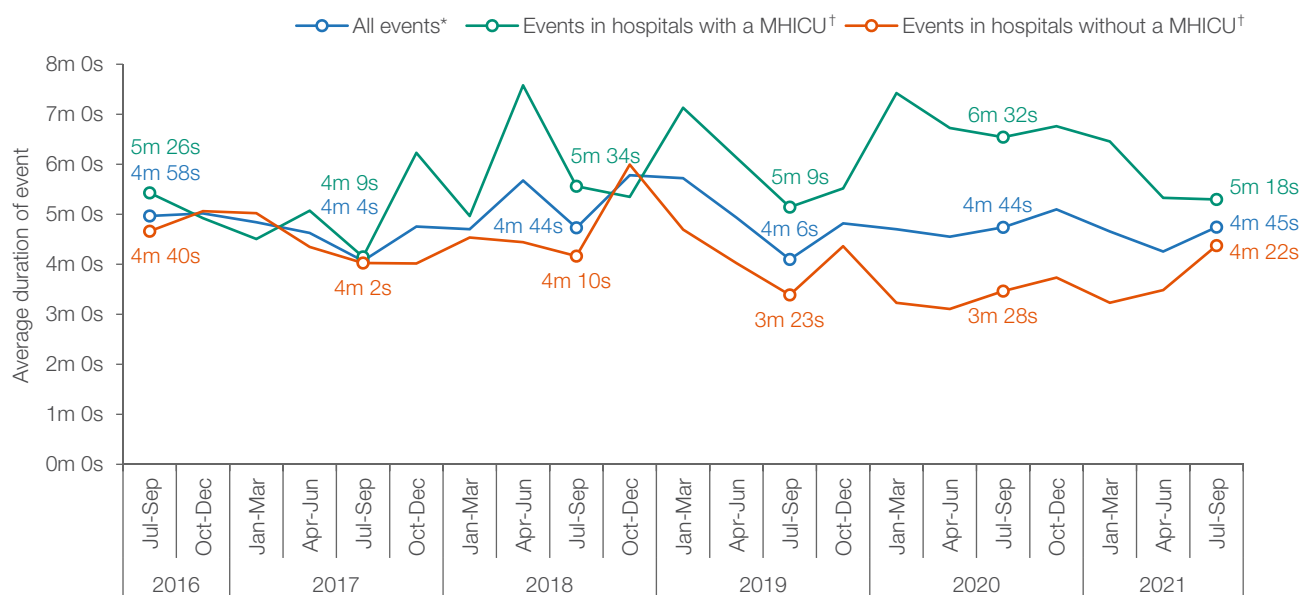


Figure 9 Average duration of physical restraint events occurring in specialised acute mental health inpatient units, July 2016 to September 2021



* 'All events' includes all seclusion or physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the JHFMHN.
† MHICU = Mental Health Intensive Care Unit
Note: For more information, including which hospitals are included each quarter, please refer to the technical supplement to this *Healthcare Quarterly* and *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals*, available at bhi.nsw.gov.au

About the Bureau of Health Information

The Bureau of Health Information (BHI) is a board-governed organisation that provides independent information about the performance of the NSW healthcare system.

BHI was established in 2009 and supports the accountability of the healthcare system by providing regular and detailed information to the community, government and healthcare professionals. This in turn supports quality improvement by highlighting how well the healthcare system is functioning and where there are opportunities to improve.

BHI manages the NSW Patient Survey Program, gathering information from patients about their experiences and outcomes of care in public hospitals and other healthcare facilities.

BHI publishes a range of reports and information products, including interactive tools, that provide objective, accurate and meaningful information about how the health system is performing.

BHI's work relies on the efforts of a wide range of healthcare, data and policy experts. All of our assessment efforts leverage the work of hospital coders, analysts, technicians and healthcare providers who gather, codify and supply data. Our public reporting of performance information is enabled and enhanced by the infrastructure, expertise and stewardship provided by colleagues from NSW Health and its pillar organisations.

bhi.nsw.gov.au