

Healthcare Quarterly

Ambulance

Activity and performance

January to March 2018



BUREAU OF HEALTH INFORMATION

Level 11, 67 Albert Avenue
Chatswood NSW 2067
Australia
Telephone: +61 2 9464 4444
bhi.nsw.gov.au

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Healthcare Quarterly reports present data at the point in time when data become available to BHI. Changes in data coverage and analytic methods from quarter to quarter mean that figures published in this document are superseded by subsequent reports. At any time, the most up-to-date data are available on BHI's online interactive data portal, Healthcare Observer, at **bhi.nsw.gov.au/healthcare_observer**

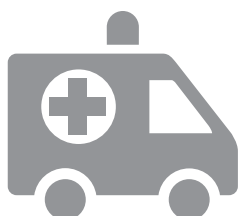
The conclusions in this report are those of BHI and no official endorsement by the NSW Minister for Health, the NSW Ministry of Health or any other NSW public health organisation is intended or should be inferred.

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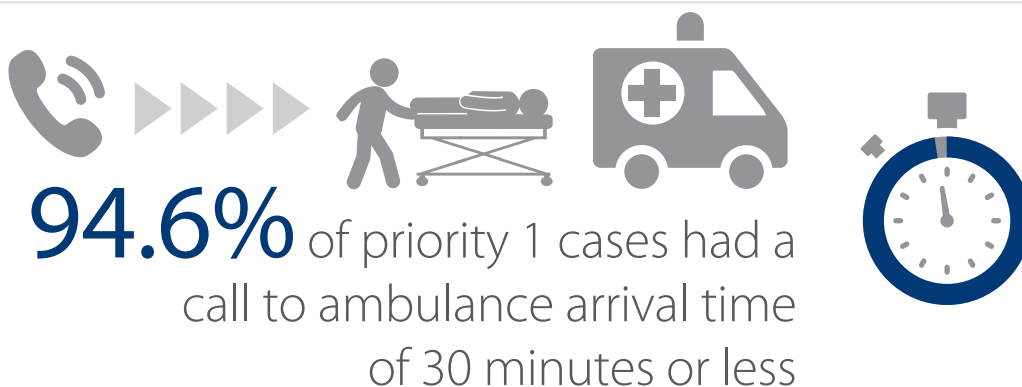
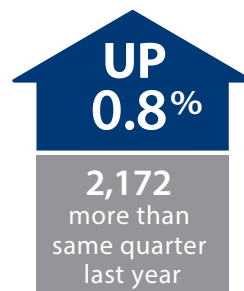
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In the January to March 2018 quarter...

Ambulance



There were **279,390**
ambulance responses



Ambulance activity		January to March 2018	January to March 2017	Difference	% change
Calls		284,412	281,668	2,744	1.0%
Responses		279,390	277,218	2,172	0.8%
Priority category	P1: Emergency	123,150	121,162	1,988	1.6%
	P1A: Highest priority	5,374	5,141	233	4.5%
	P2: Urgent	134,018	122,958	11,060	9.0%
	P3: Time-critical	14,010	23,769	-9,759	-41.1%*
	P4-9: Non-emergency	8,212	9,329	-1,117	-12.0%
Incidents		222,065	220,174	1,891	0.9%
Patient transports		167,896	163,265	4,631	2.8%

Ambulance performance		January to March 2018	January to March 2017	Difference
Call to ambulance arrival time				
Percentage of P1 call to arrival within 15 minutes		62.6%	63.2%	-0.6 percentage points
Percentage of P1 call to arrival within 30 minutes		94.6%	94.7%	-0.1 percentage points
Local response areas meeting 90% threshold (arrival within 30 minutes)		109 (of 150)	115 (of 150)	
Percentage of P2 call to arrival within 30 minutes		73.2%	75.6%	-2.4 percentage points
Percentage of P2 call to arrival within 60 minutes		94.4%	95.0%	-0.6 percentage points
Local response areas meeting 90% threshold (arrival within 60 minutes)		147 (of 150)	150 (of 150)	
Mobilisation time				
P1: Emergency	Median	2.4m	2.4m	unchanged
	90th percentile	6.0m	6.2m	-0.2m
	Percentage P1 within 3 minutes	63.1%	62.5%	0.6 percentage points
P2: Urgent	Median	4.1m	4.0m	0.1m
	90th percentile	20.8m	19.8m	1.0m
Ambulance response time				
P1: Emergency	Median	11.1m	11.1m	unchanged
	90th percentile	22.9m	22.8m	0.1m
P1A: Highest priority	Median	7.4m	7.5m	-0.1m
	90th percentile	15.6m	15.0m	0.6m
P2: Urgent	Median	18.2m	17.3m	0.9m
	90th percentile	46.1m	43.8m	2.3m
Percentage of P1A responses within 10 minutes		73.1%	71.9%	1.2 percentage points
Number of days median priority 1A response time > 10 minutes		1 day	3 days	-2 days
Turnaround time				
P1: Emergency	Median	36.6m	35.9m	0.7m
	90th percentile	59.2m	58.5m	0.7m
	Percentage within 45 minutes	70.3%	71.7%	-1.4 percentage points
P2: Urgent	Median	34.5m	33.2m	1.3m
	90th percentile	56.1m	55.1m	1.0m
	Percentage within 45 minutes	75.1%	77.1%	-2.0 percentage points

* In September 2017, a change in protocol was introduced when triaging patients for inter-facility transport. Some of these responses remain as priority 3 while others require a higher priority response.

Notes: Data drawn from the Computer Aided Dispatch system on 13 April 2018. Ambulance activity data do not include outage estimates.

About this module

Data for this module are drawn from the NSW Ambulance Computer Aided Dispatch (CAD) system, which is used to manage and record ambulance activity and service time points.

Detailed data specifications and analytic methods used in this module are described in the technical supplements section of the Bureau of Health Information (BHI) website at bhi.nsw.gov.au

About the measures

Activity is measured as the number of ambulance calls, incidents, responses and transports during the quarter. Timeliness is measured using four key measures: call to ambulance arrival time, mobilisation time, response time and turnaround time. These measures cover different combinations of time points captured in the electronic data system (Figure 1).

Results are reported at NSW and zone levels. Results for local response areas (or stations) have been shown to be subject to random variation and impacted by non-modifiable factors and so are not reported on a nominal (named) basis.

More detailed state and zone level information is available from the BHI interactive data portal, Healthcare Observer at bhi.nsw.gov.au/healthcare_observer

Background

A triple zero call generally initiates ambulance activity. An **incident** is an event that results in a response by one or more ambulances. A **response** is the dispatch of an ambulance from a local response area. Not all triple zero calls result in an ambulance response. Responses are prioritised according to the urgency of the case, based on the information provided by the caller.

Depending on the seriousness of an incident, or the number of people involved, multiple responses (vehicles) may be required for a single incident. Most incidents have one vehicle assigned. Around two in 10 incidents have multiple vehicles assigned. Some vehicles are cancelled en route.

Incidents involve one or multiple patients. Once an ambulance arrives at the scene, patients are either treated and transported, or treated at the scene only. About six in 10 responses result in patient transport.

Descriptions of ambulance indicator development, validation and sensitivity testing, are provided in the supplementary report, *Spotlight on Measurement: Measuring and reporting performance of NSW ambulance services*.

Figure 1 Ambulance service time points and timeliness measures

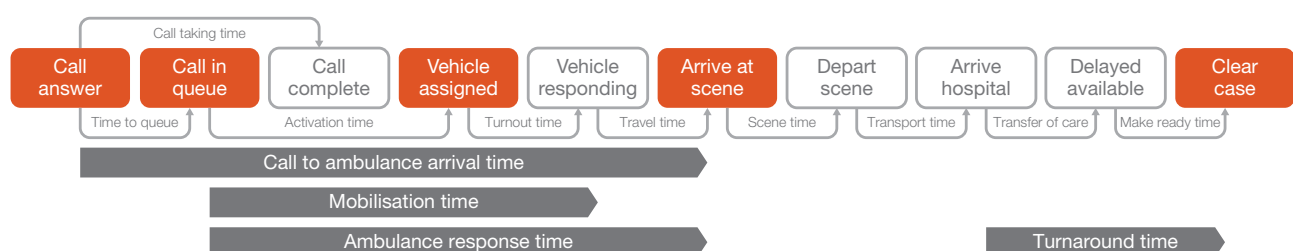


Table 1 Incident and response priority codes

Code	Priority	Description	Example	Response required
1	1A Emergency	Highest priority – life-threatening case	Cardiac or respiratory arrest, unconscious, ineffective breathing	Immediate response – median within 10 minutes – under ‘lights and sirens’
	1B Emergency	High priority	Unconscious	Emergency response – under ‘lights and sirens’
	1C Emergency	Priority	Breathing problems, chest or neck injury, serious haemorrhage	Emergency response – under ‘lights and sirens’
2	Urgent	Urgent	Abdominal pain	Urgent response without ‘lights and sirens’ within specified timeframes
3	Time-critical	Time-critical	Medical responses requested by medical practitioners often pre-booked	Undelayed response within specified timeframes
4-9	Non-emergency	Non-emergency	Routine transport	Routine

Table 2 Ambulance local response area typology

Service type	Description
24-hour	Primarily situated in urban areas providing mostly urban, 24-hour operation. These are higher volume response areas, the majority with multiple vehicles and ambulance staff.
24-hour (with on-call)	Primarily situated in regional areas providing 24-hour operation, supplemented with on-call staff.
Non-24-hour	Primarily situated in regional and rural areas providing 8, 12 or 16-hour operation with remaining time covered by on-call staff.
Community and volunteer (volunteer ambulance officers, community first responder programs and community initiated groups)	<p>Volunteer ambulance officers provide a first response and transport role in more remote areas. Some are attached to smaller stations, work with certified paramedics and respond in an ambulance vehicle.</p> <p>Members of community first responder programs are attached to emergency services, such as Fire Rescue NSW, NSW Rural Fire Service and the NSW State Emergency Service, and respond in their agency vehicle. Community-initiated groups (not attached to a response agency) can form a community first responder unit. Members agree to be available on a regular basis and respond from within the community in a private, or community-funded, vehicle.</p>

Ambulance activity and performance

Ambulance activity

In the January to March 2018 quarter, there were 284,412 calls and 279,390 ambulance responses; up 1.0% and 0.8% over the same quarter last year, respectively (Figure 2). Most responses were categorised as emergency (priority 1; 44.1%) or urgent (priority 2; 48.0%). Of priority 1 responses, 5,374 (4.4%) were categorised as highest priority (1A) (Figure 2).

Since 2015, there has been a gradual increase in activity. Compared with the same quarter in 2015, there was a 2.4% and 2.6% rise in the number of incidents and responses, respectively (Figure 3).

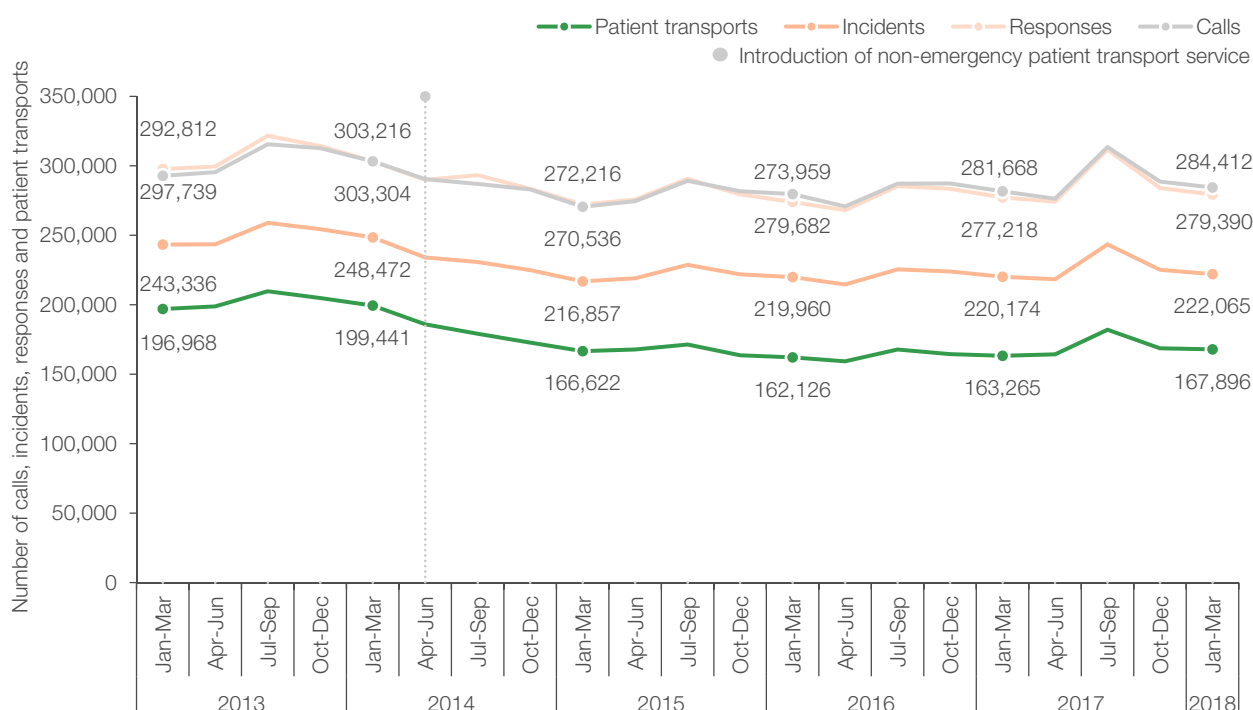
The number of priority 1 responses in the January to March 2018 quarter had the widest daily range that varied by 802 responses (Figure 4).

Figure 2 Ambulance calls, incidents and responses by priority, January to March 2018

		This quarter	Same quarter last year	Change since one year ago
Calls		284,412	281,668	1.0%
Incidents		222,065	220,174	0.9%
All responses		279,390	277,218	0.8%
P1: Emergency	44.1%	123,150	121,162	1.6%
P1A: Highest priority	4.4%	5,374	5,141	4.5%
P2: Urgent	48.0%	134,018	122,958	9.0%
P3: Time-critical	5.0%	14,010	23,769	-41.1%
P4-9: Non-emergency	2.9%	8,212	9,329	-12.0%
Patient transports		167,896	163,265	2.8%

* In September 2017, a change in protocol was introduced when triaging patients for inter-facility transport. Some of these responses remain as priority 3 while others require a higher priority response.

Figure 3 Ambulance calls, incidents, responses and patient transports, January 2013 to March 2018



Changes in urgency categorisation resulted in an apparent increase in the number of priority 2 responses and a corresponding decrease in the

number of priority 1 responses between 2013 and 2016 (Figure 5).

Figure 4 Daily number of priority 1, 2 and 3 responses, January to March 2018

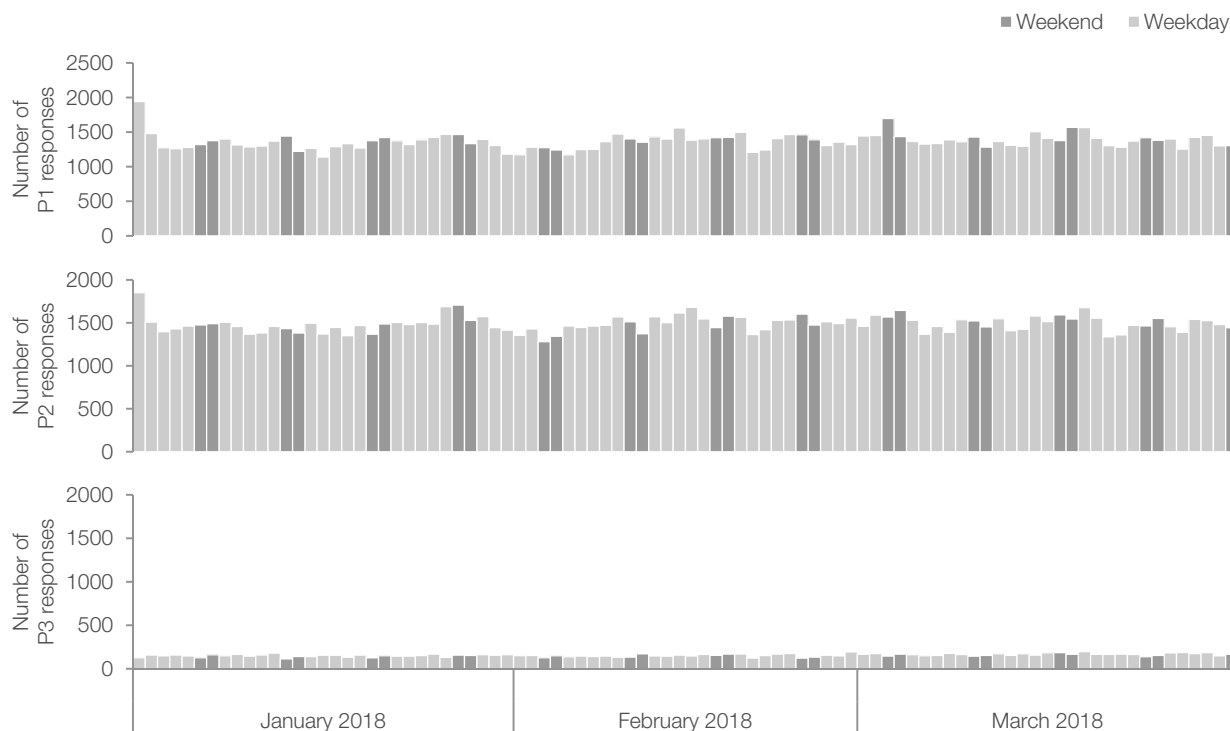
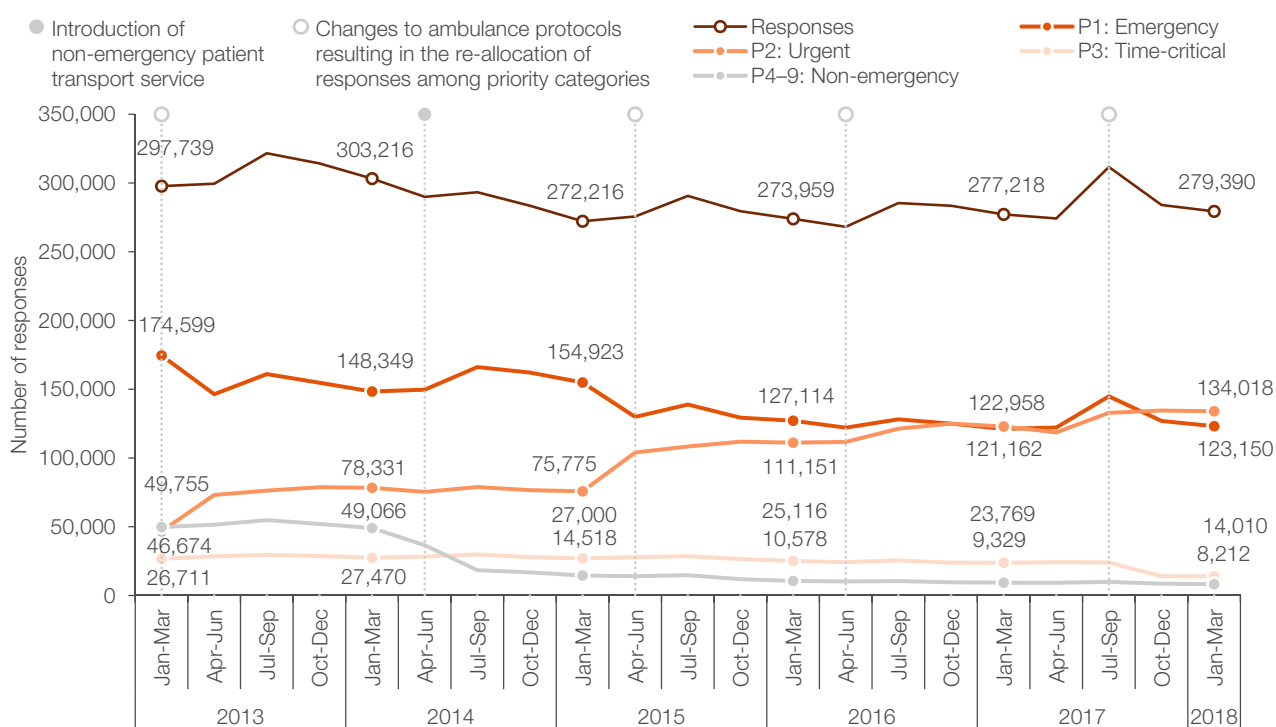


Figure 5 Ambulance responses by priority, January 2013 to March 2018



Call to ambulance arrival time

– NSW and zone performance

Call to ambulance arrival time reflects patients' experiences, spanning the time from when a call is first answered in the ambulance control centre (phone pick-up), to the time the first ambulance arrives at the scene (Figure 6).

In the January to March 2018 quarter, 62.6% of priority 1 call to ambulance arrival times were within 15 minutes and 94.6% were within 30 minutes – down 0.6 and 0.1 percentage points, respectively, compared with the same quarter last year. For priority 2 call to ambulance arrival times, 73.2% were within 30 minutes and 94.4% were within 60 minutes – down 2.4 and 0.6 percentage points, respectively, compared with the same quarter last year (Figure 7).

Call to ambulance arrival time percentages within 15 minutes for priority 1 and 30 minutes for priority 2 fluctuated over a five year period. Compared with the same quarter five years ago, the percentage of priority 1 cases within 15 minutes was 62.6% (down 1.6 percentage points). For priority 2 cases in 30 minutes, the percentage was 73.2% (up 4.0 percentage points) (Figure 8).

Less than 90% of priority 1 cases in Mid North Coast, Northern Rivers and Southern NSW zones had call to ambulance arrival times within 30 minutes. For priority 2 cases, the percentage of call to ambulance arrival times within 60 minutes ranged from 91.5% in Northern Rivers to 98.5% in New England (Figure 9).

Figure 6 Intervals covering call to ambulance arrival time, NSW



Figure 7 Call to ambulance arrival time, by priority category, January to March 2018

Priority category		This quarter	Same quarter last year	Change since one year ago
P1 responses	91,632			
Within 15 minutes		62.6%	63.2%	-0.6 percentage points
Within 30 minutes		94.6%	94.7%	-0.1 percentage points
Local response areas meeting 90% threshold (arrival within 30 minutes)		109 (of 150)	115 (of 150)	
P2 responses	103,479			
Within 30 minutes		73.2%	75.6%	-2.4 percentage points
Within 60 minutes		94.4%	95.0%	-0.6 percentage points
Local response areas meeting 90% threshold (arrival within 60 minutes)		147 (of 150)	150 (of 150)	

Figure 8 Percentage of call to ambulance arrival times, by priority category, January 2013 to March 2018

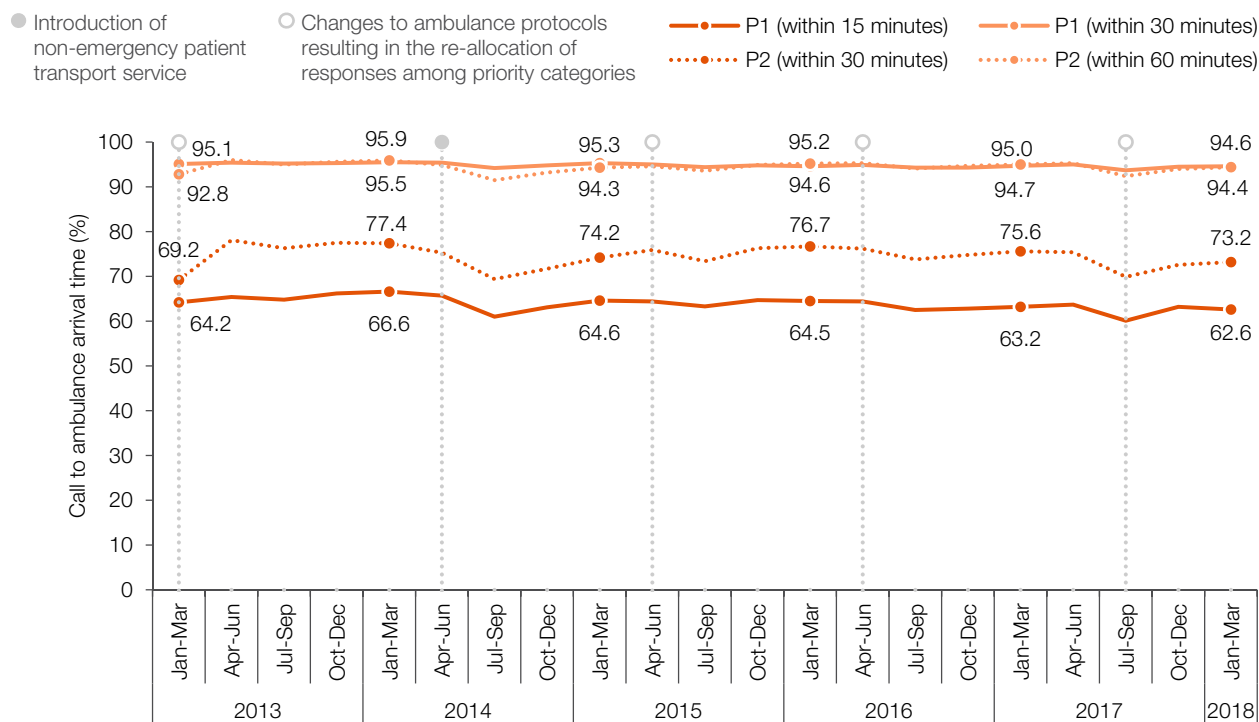
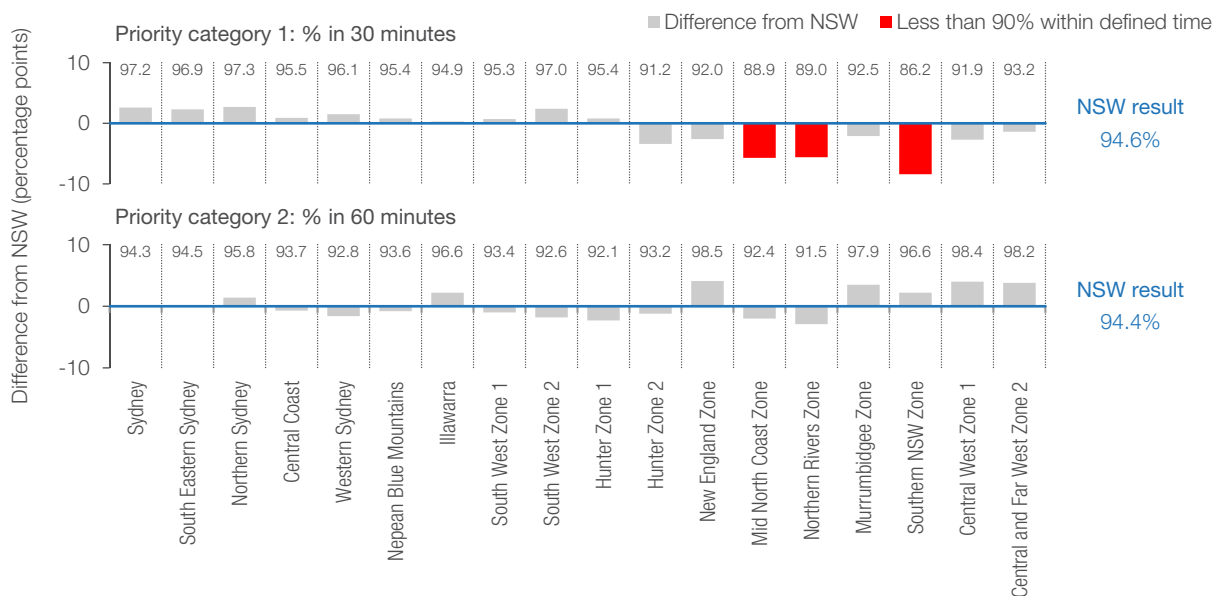


Figure 9 Percentage of call to ambulance arrival times, by zone, relative to NSW, January to March 2018



Call to ambulance arrival time – variation

For priority 1 responses in the January to March 2018 quarter, 109 of 150 local response areas (LRAs) achieved 90% of call to ambulance arrival times within 30 minutes (Figure 10). For priority

2 responses, 147 of 150 LRAs achieved 90% of call to ambulance arrival times within 60 minutes (Figure 12). As a percentage of the total number of NSW priority 1 and 2 responses, Figures 11

Figure 10 Percentage of priority 1 call to ambulance arrival times within 30 minutes, by zone and local response area type, January to March 2018

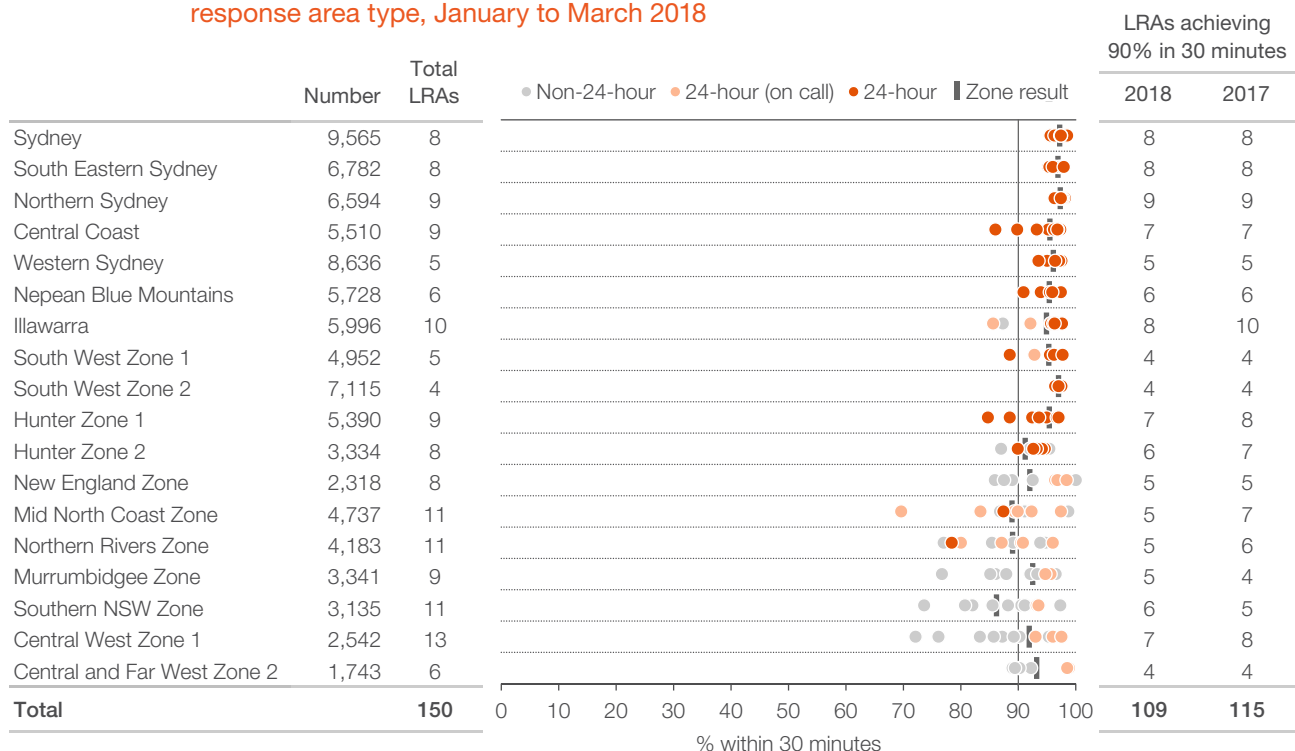
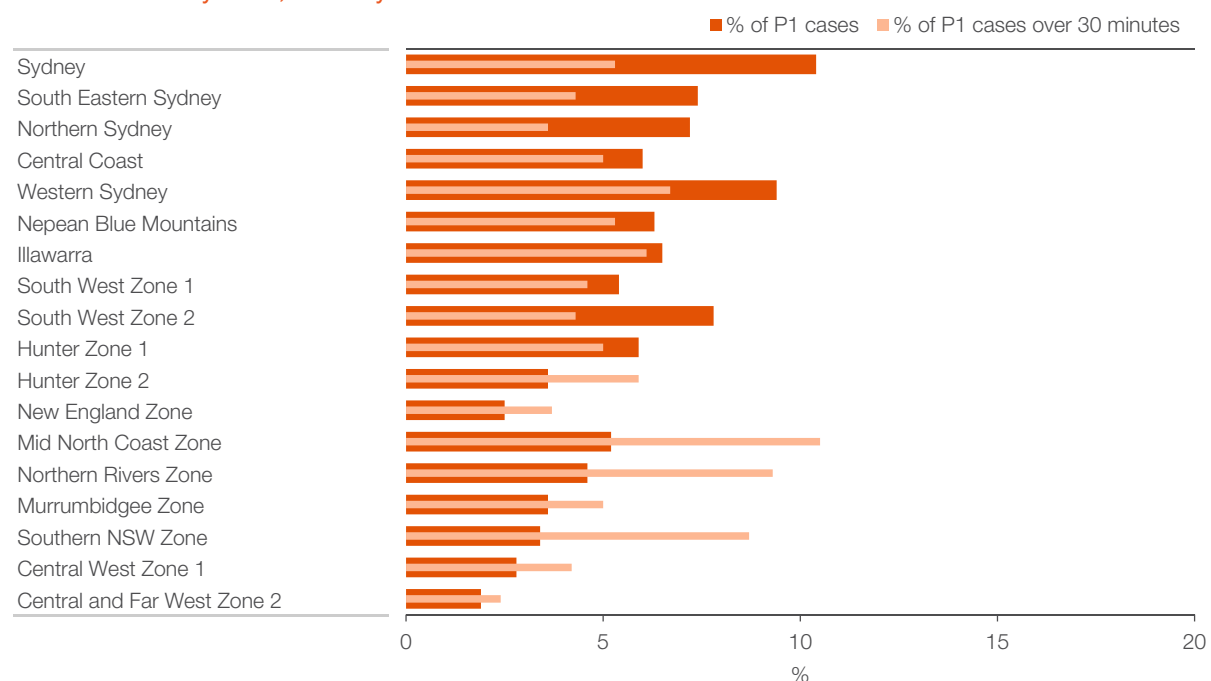


Figure 11 Percentage of priority 1 cases and call to ambulance arrival times outside 30 minutes, by zone, January to March 2018



and 13 compare each zone's share of responses that were over 30 or 60 minutes, respectively. Mid North Coast crews met 5.2% of NSW priority 1 responses, but had 10.5% of the call to ambulance

arrival times over 30 minutes in NSW (Figure 11). Discrepancies were less pronounced for the percentage of priority 2 call to ambulance arrival times within 60 minutes (Figure 13).

Figure 12 Percentage of priority 2 call to ambulance arrival times within 60 minutes, by zone and local response area type, January to March 2018

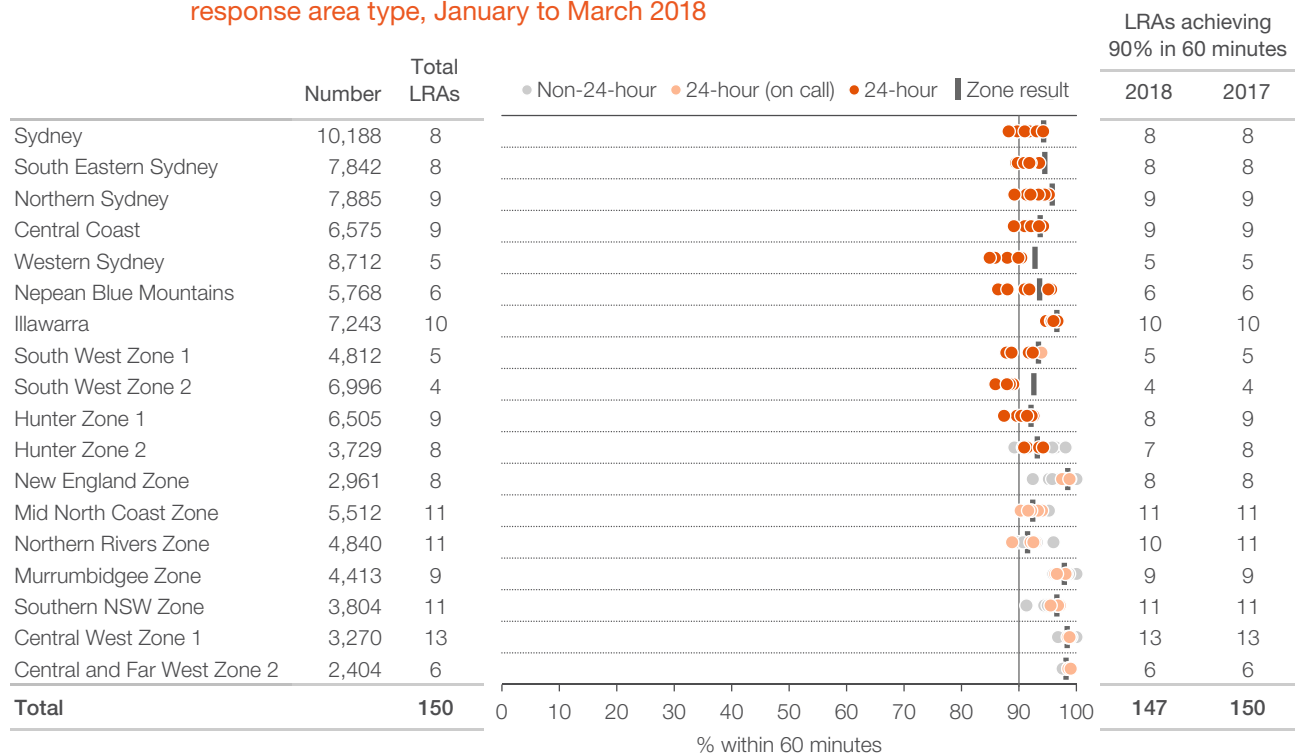
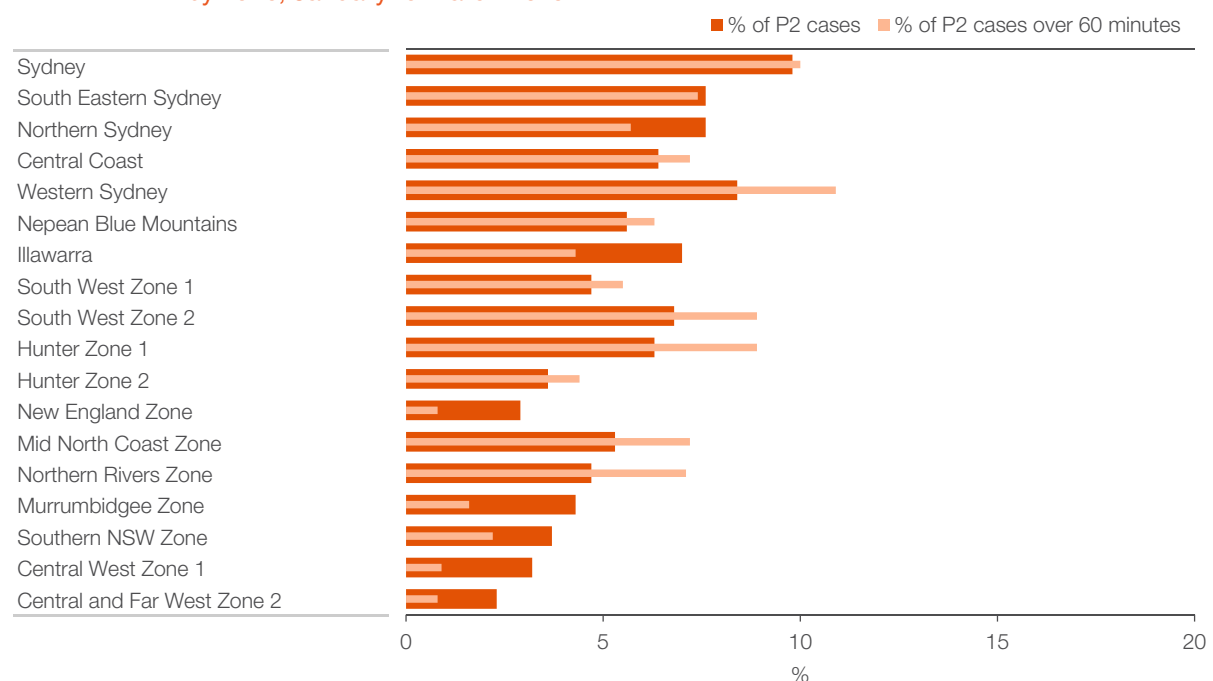


Figure 13 Percentage of priority 2 cases and call to ambulance arrival times outside 60 minutes, by zone, January to March 2018



Mobilisation time – NSW performance

Once a call has been placed 'in queue' for vehicle dispatch, there is typically a short period of time before crews begin driving to the scene (Figure 14).






This period – the mobilisation time – is a measure of preparedness and system responsiveness. For operational purposes, NSW Ambulance monitors the percentage of priority 1 mobilisation times within three minutes.

In the January to March 2018 quarter, the median mobilisation time was 2.4 minutes for priority 1 and 4.1 minutes for priority 2 responses. For priority 1 responses, 63.1% were within three minutes (Figure 15).

Figure 14 Intervals covering mobilisation time, NSW

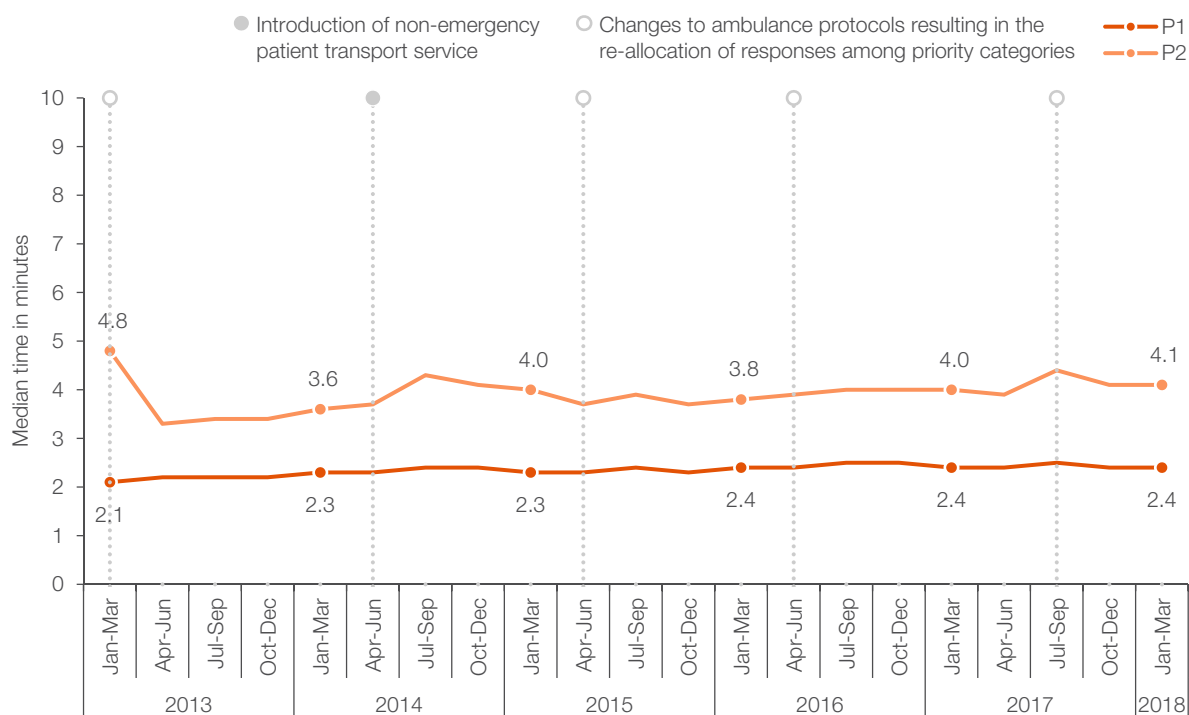


Figure 15 Mobilisation time, by priority category, January to March 2018

	Volume		This quarter	Same quarter last year	Change since one year ago
P1	91,519				
Median			2.4m	2.4m	unchanged
90th percentile			6.0m	6.2m	-0.2m
Percentage P1 within 3 minutes			63.1%	62.5%	0.6 percentage points
P2	103,427				
Median			4.1m	4.0m	0.1m
90th percentile			20.8m	19.8m	1.0m

For January to March quarters between 2013 and 2018, priority 1 median mobilisation time has remained relatively stable (Figure 16).

Figure 16 Median mobilisation time, by priority category, January 2013 to March 2018



Mobilisation time – variation

The NSW priority 1 median mobilisation time for January to March 2018 was 2.4 minutes. Across zones, median times ranged from 2.1 minutes in the Sydney zone, and South West Zones 1 and 2 to 3.5 minutes in Southern NSW (a 1.4 minute range) (Figure 17).

The NSW priority 2 median mobilisation time was 4.1 minutes and ranged across zones from 3.5 minutes in Northern Sydney to 5.1 minutes in Northern Rivers (a 1.6 minute range). In general, zones in non-metropolitan areas had longer mobilisation times for both priority 1 and priority 2 responses (Figure 17).

Within zones, median mobilisation times for individual LRAs were more variable in non-metropolitan zones (Figures 18 and 19).

This may reflect differences in the distribution of LRA types across zones. Metropolitan zones primarily have 24-hour LRAs while non-metropolitan zones mostly have non-24 hour and 24-hour (on-call) LRAs, which rely on staff that are not always based at the ambulance station.

The degree of variation seen within metropolitan zones was smaller for priority 1 compared with priority 2 responses (Figures 18 and 19).

Figure 17 Median mobilisation time, by zone, relative to NSW, January to March 2018

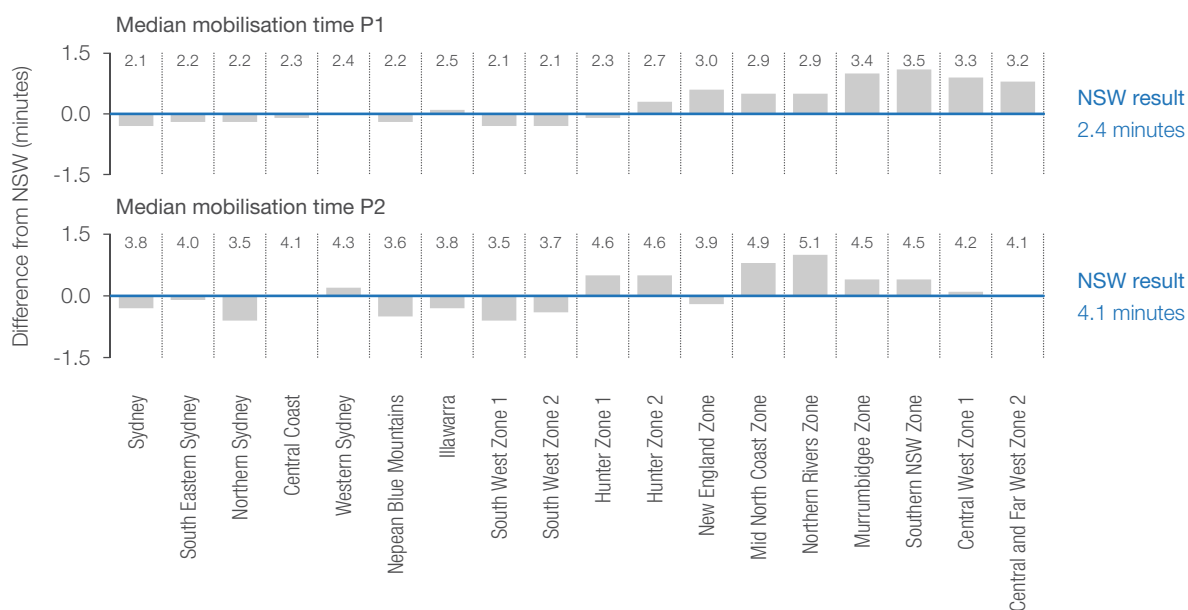


Figure 18 Median priority 1 mobilisation time, by zone and local response area type, January to March 2018

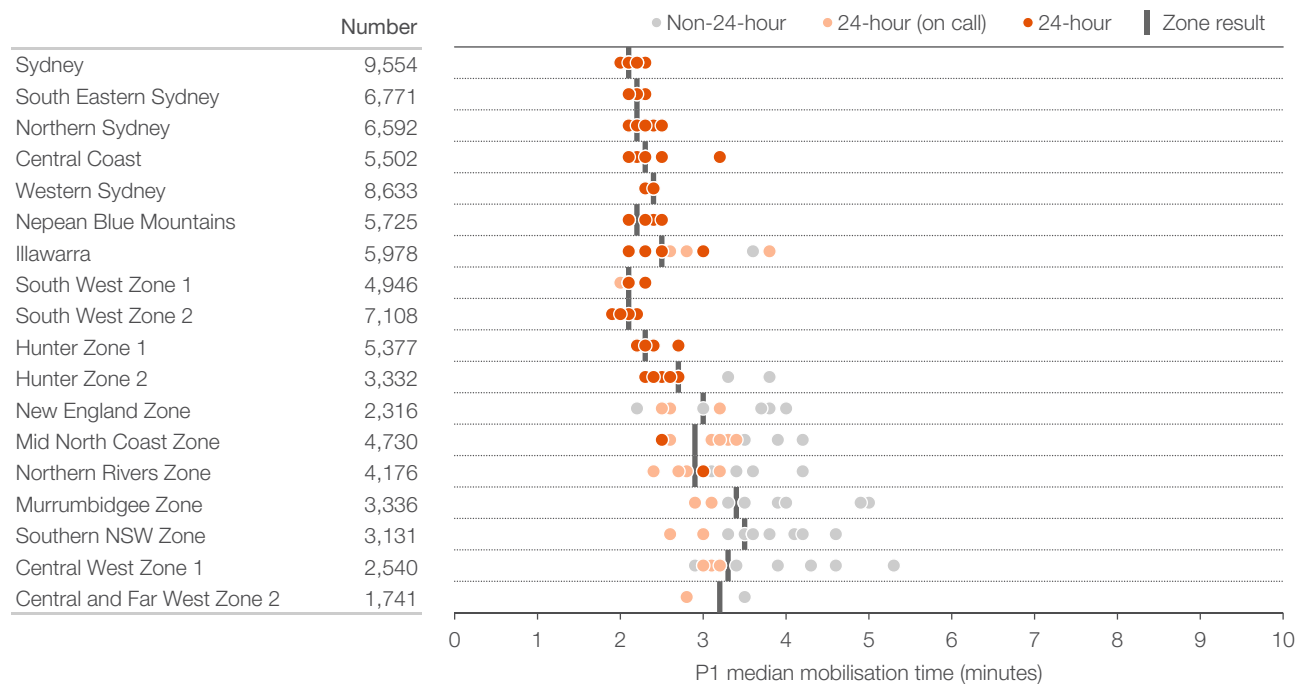
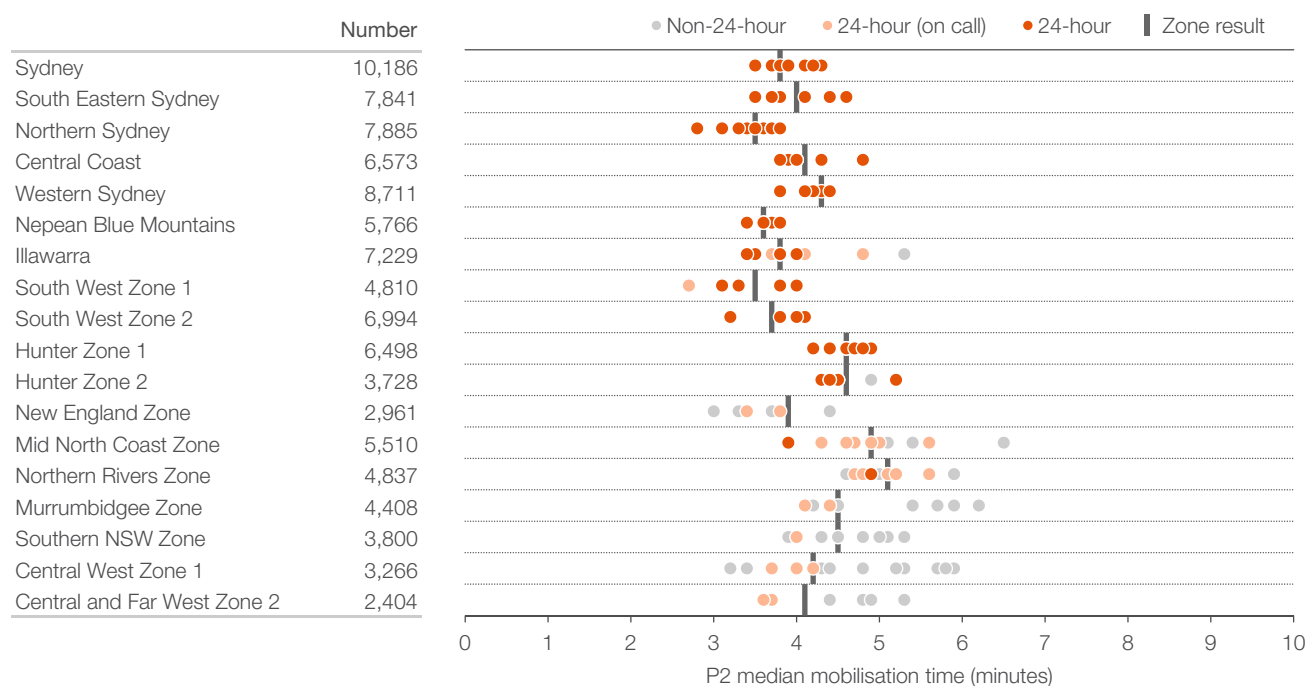


Figure 19 Median priority 2 mobilisation time, by zone and local response area type, January to March 2018



Response time – NSW performance

Ambulance response time is measured from when a call for an ambulance is placed 'in queue' for vehicle dispatch by the ambulance control centre to the time the first vehicle arrives at the scene (Figure 20).

In the January to March 2018 quarter, median response times were 11.1 minutes for priority 1, 7.4 minutes for priority 1A and 18.2 minutes for priority 2 (Figure 21).

In the January to March 2018 quarter, 73.1% of priority 1A response times were within 10 minutes; 1.2 percentage points higher than the same quarter last year.

The median response time for priority 1A cases exceeded 10 minutes on one day during the January to March 2018 quarter; down by two days compared with the same quarter last year.

Figure 20 Intervals covering response time, NSW

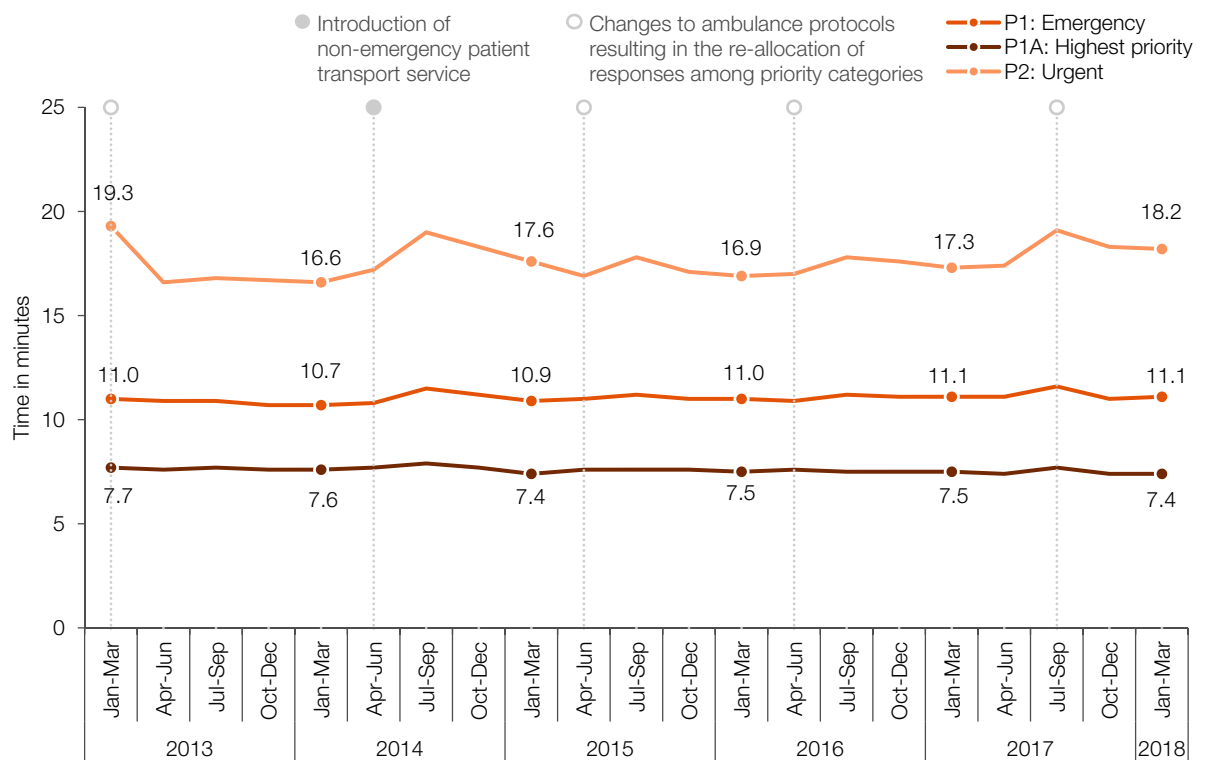


Figure 21 Ambulance response time, by priority category, January to March 2018

	This quarter	Same quarter last year	Change since one year ago
P1: emergency (91,632 responses)			
Median response time	11.1m	11.1m	unchanged
90th percentile response time	22.9m	22.8m	0.1m
P1A: Highest priority (2,021 responses)			
Median response time	7.4m	7.5m	-0.1m
90th percentile response time	15.6m	15.0m	0.6m
P2: urgent (103,479 responses)			
Median response time	18.2m	17.3m	0.9m
90th percentile response time	46.1m	43.8m	2.3m
Percentage P1A responses within 10 minutes	73.1%	71.9%	1.2 percentage points
Number of days P1A median response time exceeded 10 minutes	1 day	3 days	-2 days

There has been little change in median priority 1 and 1A response times since 2013 (Figure 22). Median priority 2 response times showed more variation. This quarter saw the highest median priority 2 response time for a January to March quarter since 2014 (18.2 minutes; up 1.6 minutes) (Figure 22).

Figure 22 Median ambulance response time, by priority category, January 2013 to March 2018



Response time – variation

The NSW priority 1A median response time was 7.4 minutes in the January to March 2018 quarter. Across zones, priority 1A median response times ranged from 6.2 minutes in the Sydney zone to 9.8 minutes in Mid North Coast (a 3.6 minute range) (Figure 23).

The statewide priority 1 median response time was 11.1 minutes in the January to March 2018 quarter. Across zones, median response times ranged from 9.0 minutes in Central and Far West Zone 2 to 13.1 minutes in Hunter Zone 2 (a 4.1 minute range) (Figure 23).

The median priority 2 response time for NSW was 18.2 minutes this quarter. Across zones, median response times ranged from 10.8 minutes in Central and Far West Zone 2 to 22.2 minutes in Western Sydney (a 11.4 minute range) (Figure 23).

Within zones, the median response times of constituent LRAs varied more widely in non-metropolitan settings. Within-zone variation was more marked for priority 2 responses than for priority 1 responses (Figures 24 and 25).

Figure 23 Median ambulance response time, by zone, relative to NSW, January to March 2018

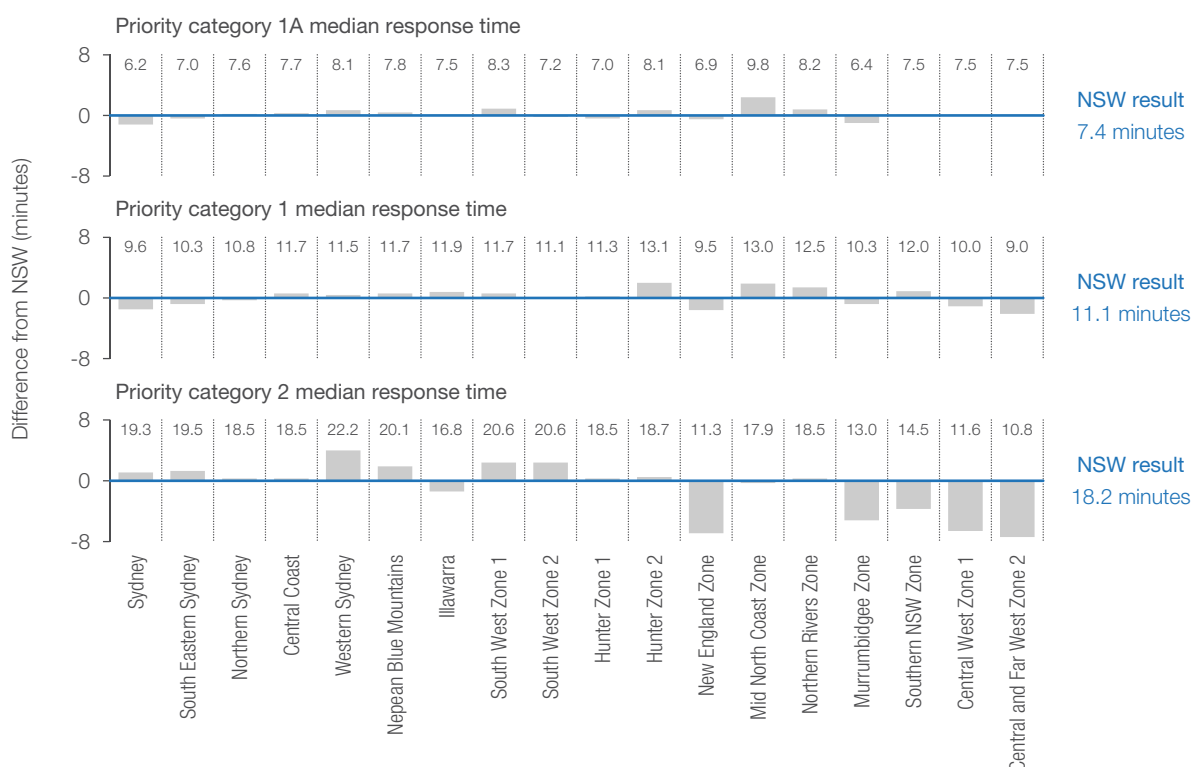


Figure 24 Median priority category 1 ambulance response time, by zone and local response area type, January to March 2018

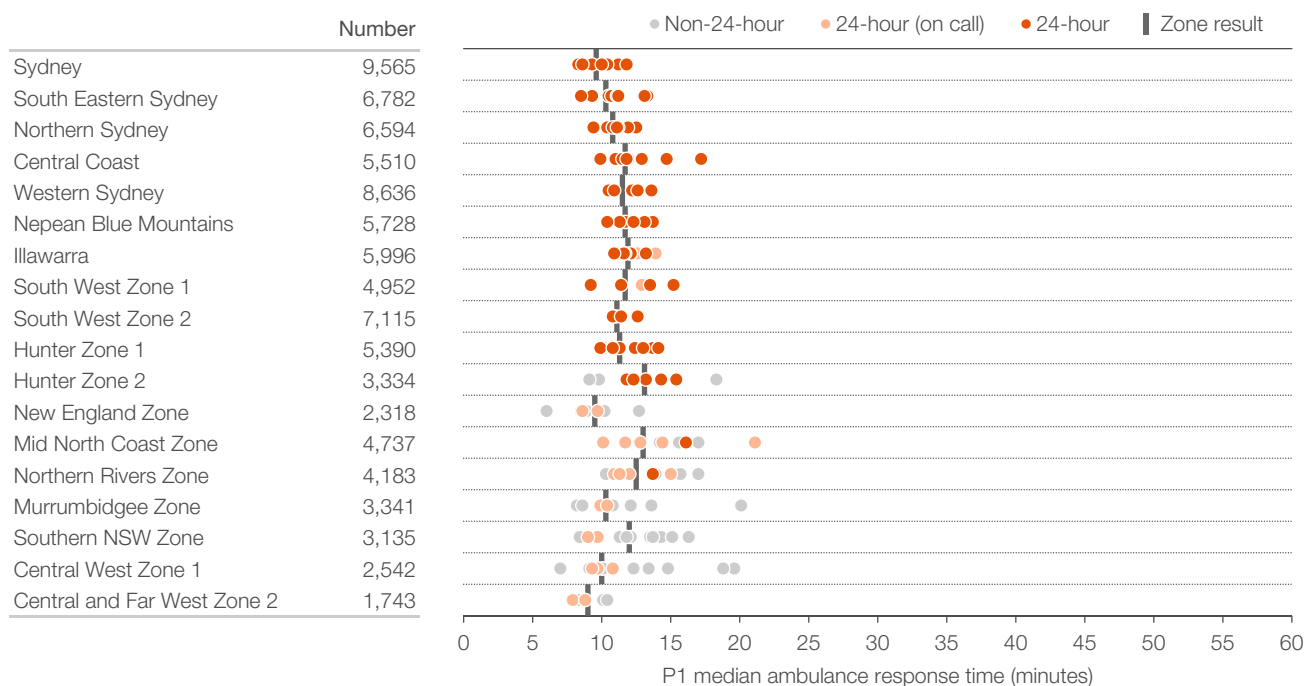
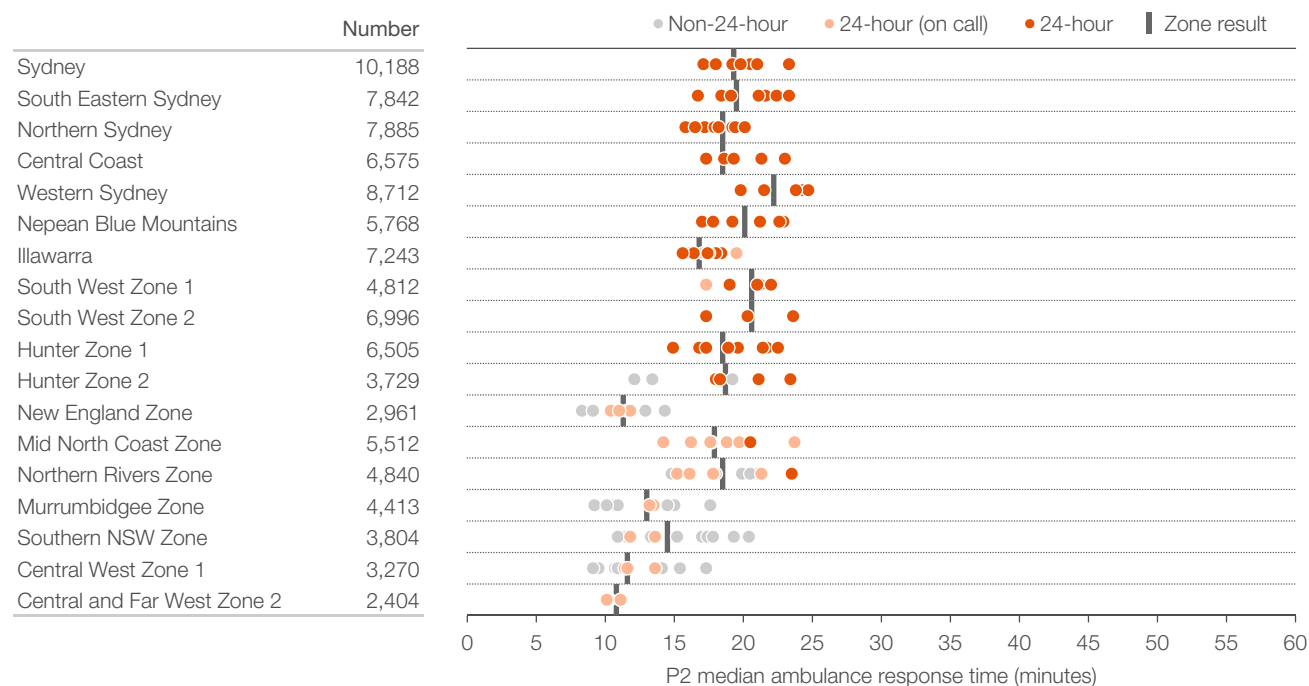


Figure 25 Median priority category 2 ambulance response time, by zone and local response area type, January to March 2018



Turnaround time – NSW and zone performance

Turnaround time refers to the length of time paramedics spend at hospital emergency departments. It is measured from the time an ambulance arrives with a patient at a hospital until the time it is cleared and available to respond to another incident (Figure 26).

Turnaround time encapsulates transfer of care, off stretcher time and make ready time. In the January to March 2018 quarter, the number of patients transported to hospital rose by 12,636 (up 9.5%) over the same quarter last year. The percentage of turnaround times occurring within 45 minutes for priority 1 cases was 70.3% and 75.1% of priority 2 (down 1.4 and 2.0 percentage points from the same quarter last year, respectively) (Figure 27).

Amid some seasonal fluctuation, median turnaround time has fallen compared with the January to March 2013 quarter (Figure 28). Across zones, median turnaround times combining priorities 1 and 2 ranged from 22.2 minutes in Central and Far West Zone 2 to 42.1 minutes in South Eastern Sydney (a 19.9 minute range) (Figure 29). Non-metropolitan zones generally had lower turnaround times compared with the NSW result (Figure 29).

Figure 26 Intervals covering turnaround time, NSW



Figure 27 Turnaround time, by priority category, January to March 2018

	This quarter	Same quarter last year	Change since one year ago
Patients transported to hospital	145,882	133,246	9.5%
P1: Emergency			
Median	36.6m	35.9m	0.7m
90th percentile	59.2m	58.5m	0.7m
Percentage P1 within 45 minutes	70.3%	71.7%	-1.4 percentage points
P2: Urgent			
Median	34.5m	33.2m	1.3m
90th percentile	56.1m	55.1m	1.0m
Percentage P2 within 45 minutes	75.1%	77.1%	-2.0 percentage points

Figure 28 Median turnaround time, by priority category, January 2013 to March 2018

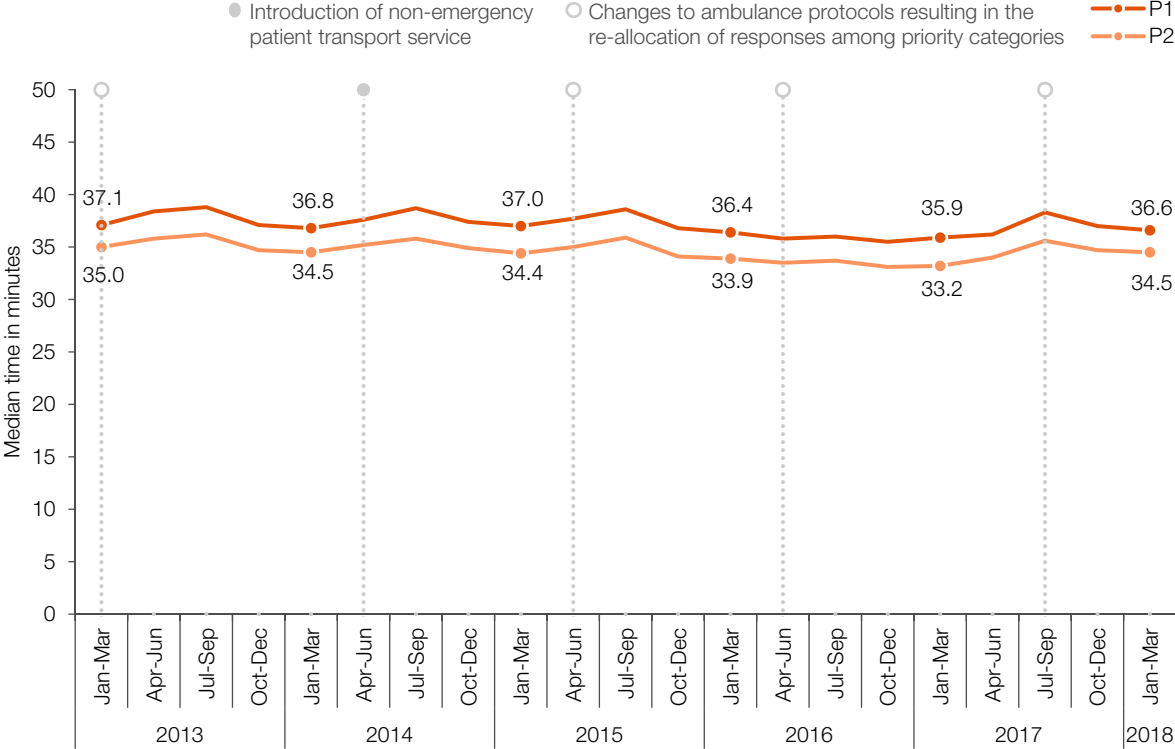
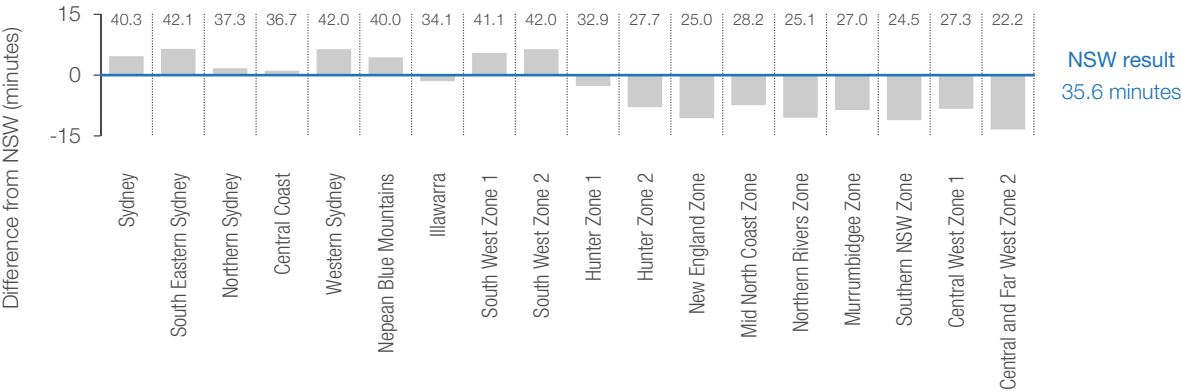


Figure 29 Median turnaround time, by zone, priority category 1 and 2, relative to NSW, January to March 2018



Daily activity and performance

The daily demand for ambulance services varies and can be affected by a range of factors such as local events, adverse weather conditions and outbreaks of disease. Some of this variation occurs in predictable patterns, however there are days when demand is either much higher (surge days) or much lower (lull days) than historical patterns would predict on the basis of the day of the week, the week and month of the year, and public holidays (Figure 30).

The daily number of priority 1 to 3 responses ranged between 2,666 and 3,920 during the January to March 2018 quarter. Of the days falling outside the expected range, nine were above expected (surge days) and four were below expected (lull days) (Figure 30).

Looking at patterns of activity, identifying surge days and presenting this information alongside performance results can reflect on the system's resilience and preparedness. Days in the highest and lowest 10% of performance were flagged in red and green, respectively (Figure 31).

Figure 32 describes performance on surge days and busy days, as well as levels of activity on the days with the lowest performance levels.

Figure 30 Daily ambulance responses, observed and expected, January to March 2018

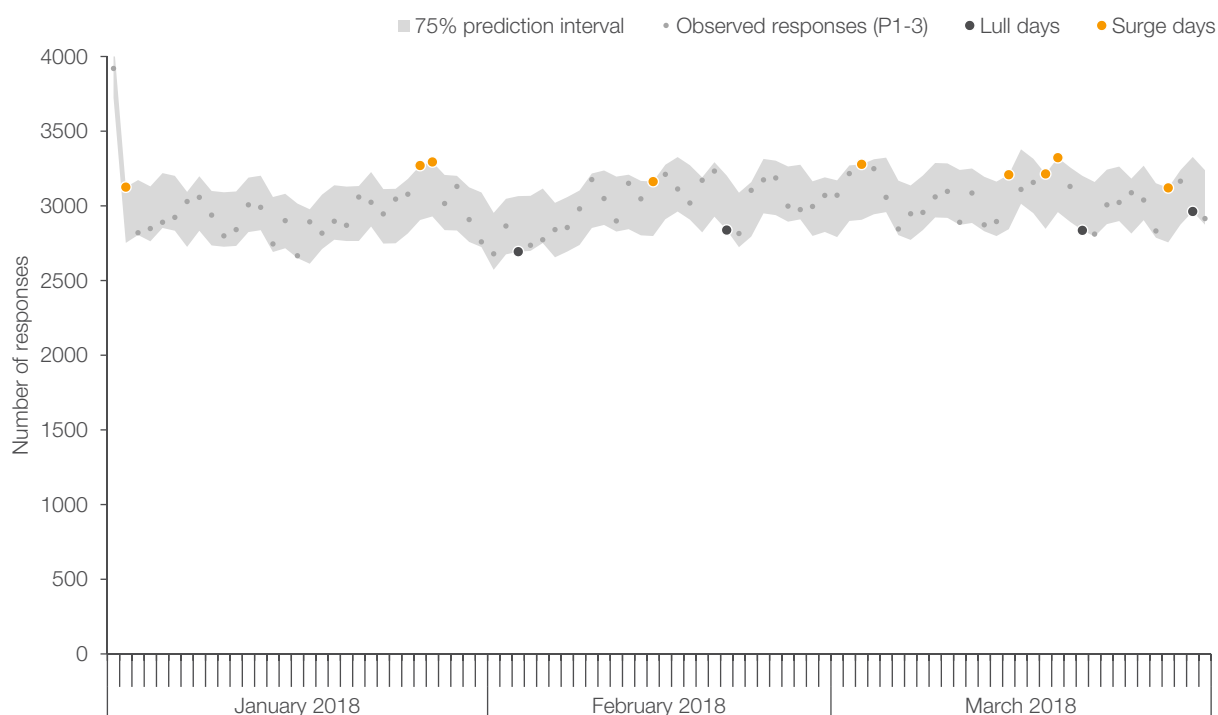


Figure 31 Daily activity and timeliness measures, January to March 2018

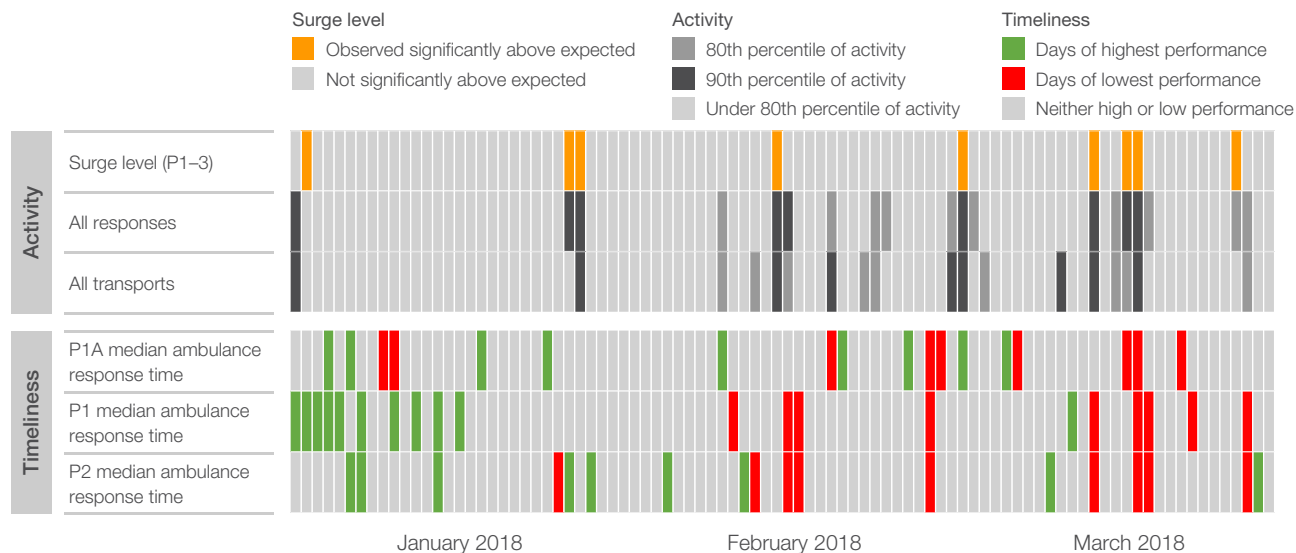


Figure 32 Summary of daily activity and timeliness measures, January to March 2018

	Of the nine surge days this quarter, performance was:		Of the nine busy days this quarter (all responses), performance was:		Of the 10% of days this quarter with relatively poor performance:		
	Relatively low	Relatively high	Relatively low	Relatively high	Normal days	Busy days	Surge days
P1A median ambulance response time	2	6	2	6	7	2	2
P1 median ambulance response time	2	6	3	5	6	3	2
P2 median ambulance response time	2	6	3	5	6	3	2

Note: The range of daily median response times was: 5.4 minutes to 10.0 minutes for priority 1A, 10.1 minutes to 12.1 minutes for priority 1 and 15.7 minutes to 21.7 minutes for priority 2.

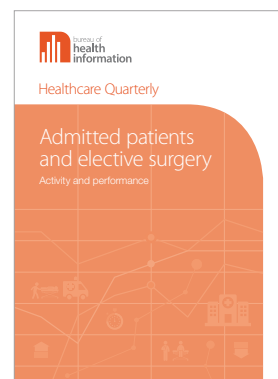
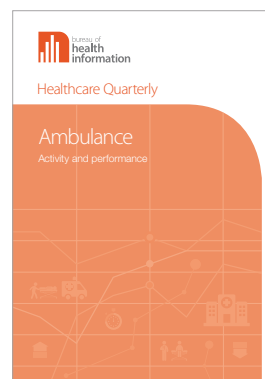
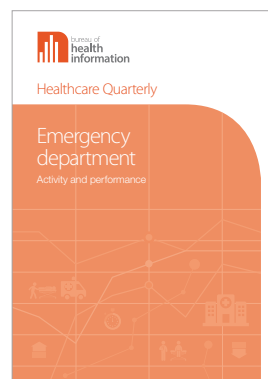
Healthcare Quarterly

Healthcare Quarterly is a series of regular reports that describes the number and types of services provided to the people of NSW and the timeliness with which they are provided.

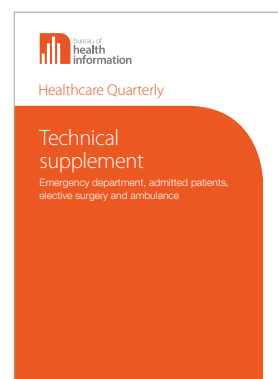
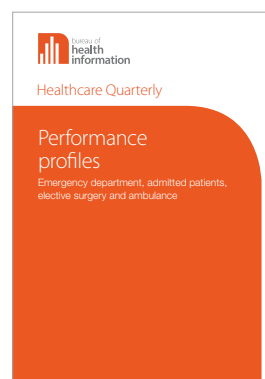
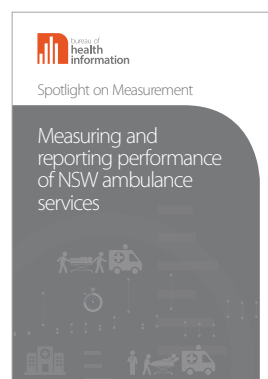
The reports feature key indicators of activity and performance across ambulance and public hospital services in NSW.



Healthcare Quarterly is published alongside three standalone modules that provide more detailed information about emergency department care, admitted patients and elective surgery, and ambulance services.



Additional information on local performance is available in our hospital profiles or from BHI's interactive portal Healthcare Observer, at bhi.nsw.gov.au/healthcare_observer



All reports and profiles are available at bhi.nsw.gov.au

Additional information on local performance is available from BHI's interactive data portal Healthcare Observer, at bhi.nsw.gov.au/healthcare_observer

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 public healthcare system.

BHI was established in 2009 to provide system-wide support through transparent reporting.

BHI 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 in public hospitals and other healthcare facilities.

BHI publishes a range of reports and tools that provide relevant, accurate and impartial information about how the health system is measuring up in terms of:

- Accessibility – healthcare when and where needed
- Appropriateness – the right healthcare, the right way
- Effectiveness – making a difference for patients
- Efficiency – value for money
- Equity – health for all, healthcare that's fair
- Sustainability – caring for the future

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 report 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