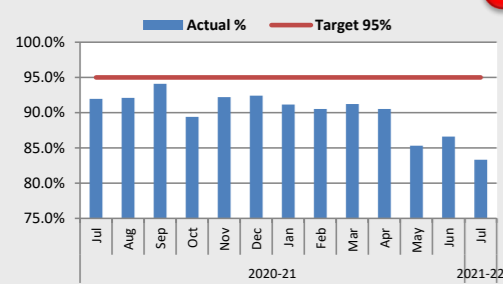
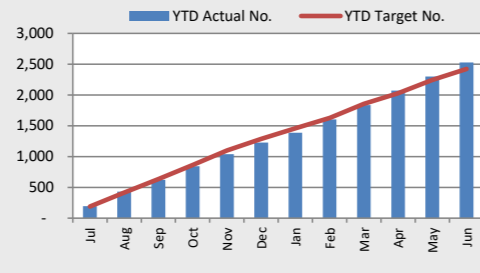


MOH PERFORMANCE MEASURES

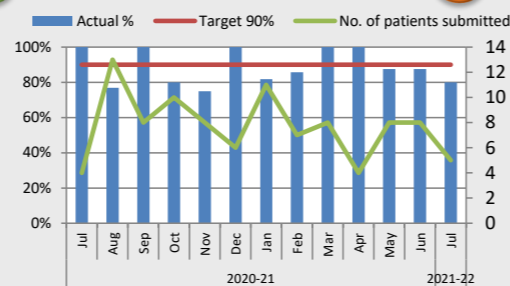
95% of patients will be admitted, discharged or transferred from ED within six hours.



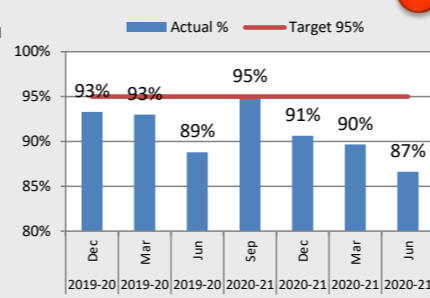
2020/21 Planned Care - Inpatient Surgical Discharges



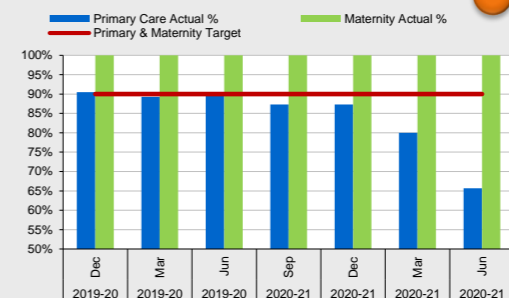
90% of patients receive their first cancer treatment within 62 days



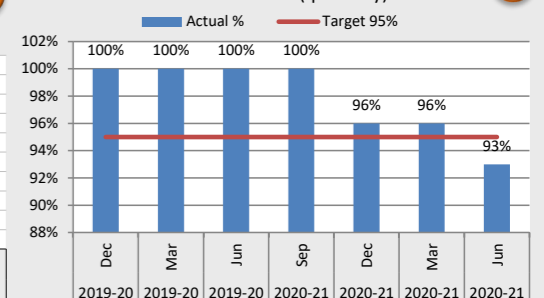
95% of children fully immunised at 8 months (quarterly)



90% of Maternity & PHO identified smokers are offered advice and support to quit (quarterly)

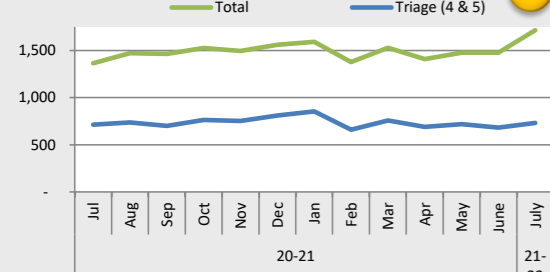


95% of identified obese children will be referred for assessment (quarterly)

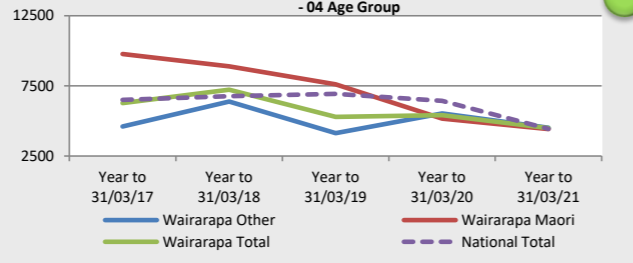


KEY INDICATORS

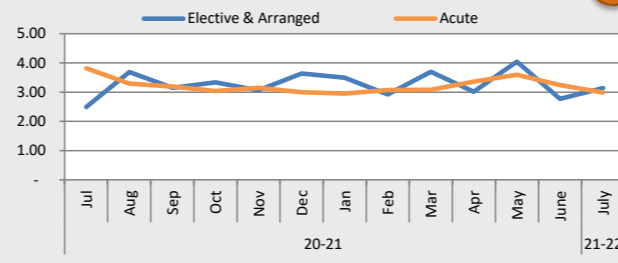
ED Presentations



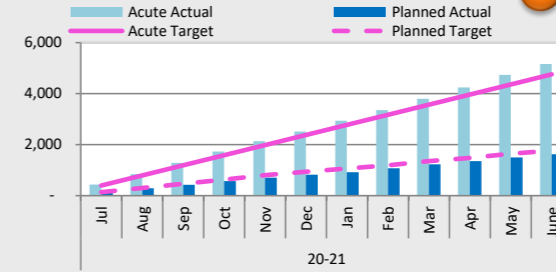
Ambulatory Sensitive Hospitalisations (ASH) (per 100,000 population) - 0-04 Age Group



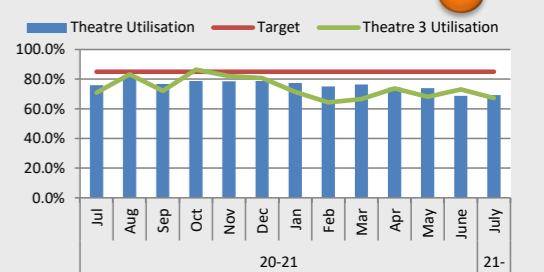
Average Length of Stay (ALOS)



Caseweight (local delivery)

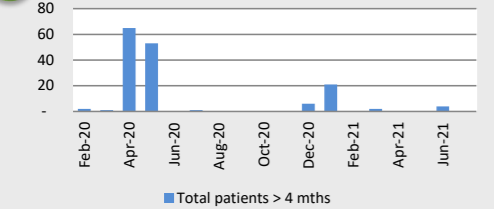


Theatre Utilisation

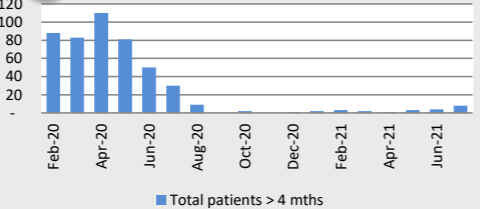


NUMBER LONG WAIT PATIENTS (>4 Months)

First Specialist Assessment - ESPI 2



Treatment- ESPI 5



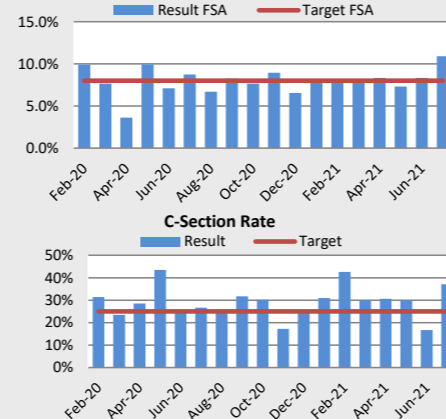
PROCESS & EFFICIENCY

Elective/Arranged Day Surgery rate
Ward Bed Utilisation - MSW
Caesarean Rate (Elective & Acute)
Acute Readmission Rate
Theatre Sessions Starting on Time
Theatre Session Utilisation (Time in Theatre)
Cancellation on Day of Surgery
Did Not Attend (DNA) Rate - FSA
Did Not Attend (DNA) Rate - FUP
Did Not Attend (DNA) Rate - Maori all

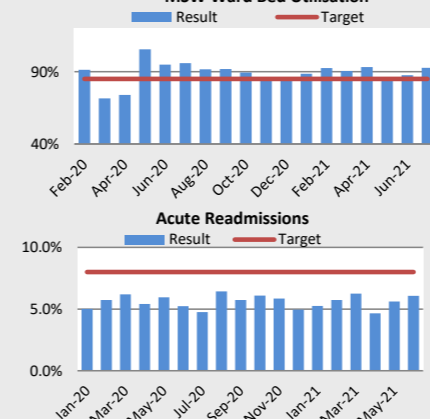
Target	Actual Mnth	Actual YTD	YTD vs Target
62%	67.2%	67.2%	✓✓
85%	92.7%	92.7%	✓✓
25%	37.1%	37.1%	✗
8%	6.1%	5.6%	✓✓
90%	85.7%	85.7%	✗
85%	69.2%	69.2%	✗
5%	5.2%	5.2%	✗
8.0%	10.9%	10.9%	✗
6.0%	7.1%	7.1%	✗
8.0%	20.0%	20.0%	✗

✓ = Meets Target ✓✓ = Exceeds Target ✗ = Does Not Meet Target

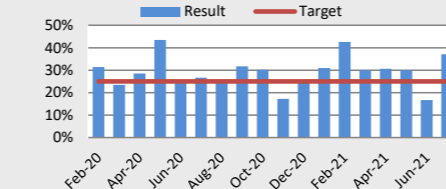
Did Not Attend (DNA) Appointments - FSA



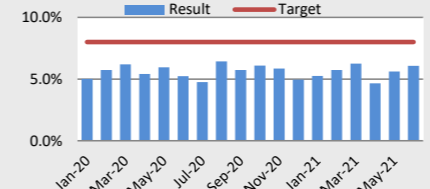
MSW Ward Bed Utilisation



C-Section Rate



Acute Readmissions

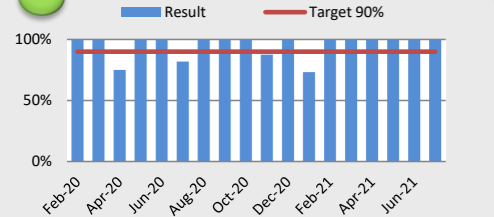


DIAGNOSTIC WAIT TIMES

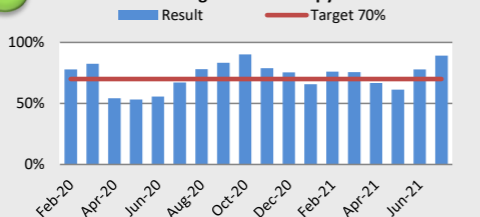
Diagnostics

Metric	Target	Actual	Status
MRI Wait List seen in 42 days	90.0%	48.8%	✗
Ultrasound Waitlist seen in 42 days	85.0%	50.2%	✗
CT Waitlist seen in 42 days	95.0%	96.3%	✓✓
Urgent Colonoscopy - Wait or Procedure within 14 Days	90.0%	100.0%	✓✓
Non-Urgent Colonoscopy - Wait or Procedure within 42 Days	70.0%	89.2%	✓✓
Surveillance Colonoscopy - Wait or Procedure within 84 Days	70.0%	79.3%	✓✓

Urgent Colonoscopy

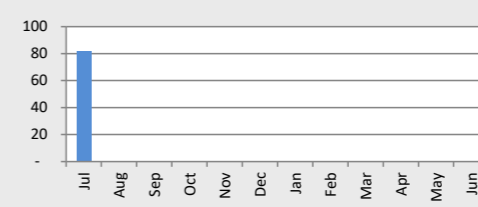


Non-Urgent Colonoscopy

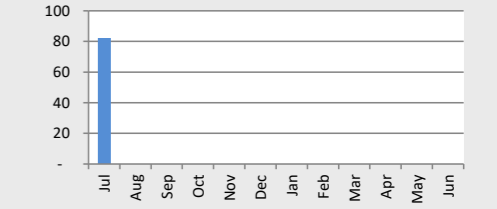


FINANCIAL RESULT

Variance Surplus/(Deficit) - MTD (\$000)



Variance Surplus/(Deficit) - YTD (\$000)



MTD (\$000)

Actual	Budget	Variance	Actual vs Budget
(400)	(482)	82	✓✓

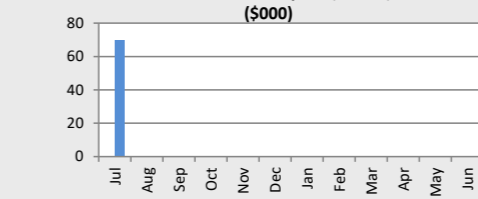
PROVIDER MTD (\$000)

Actual	Budget	Variance	Actual vs Budget
(529)	(599)	70	✓✓

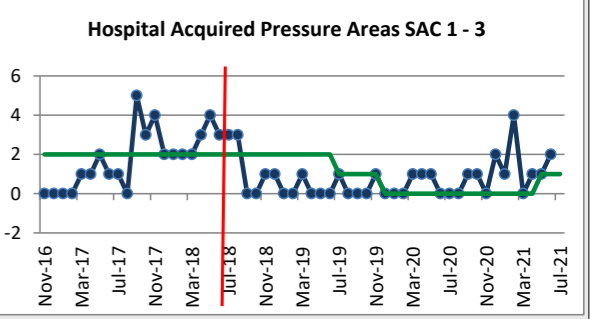
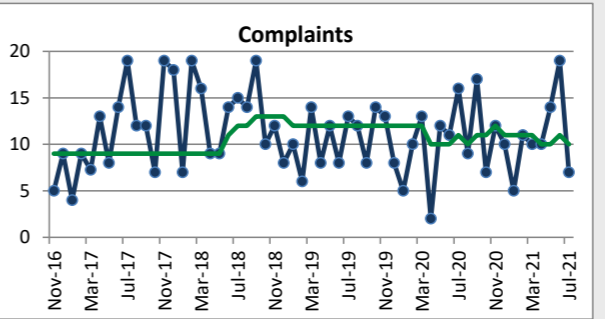
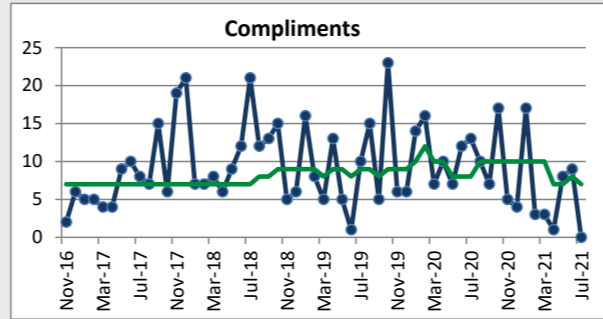
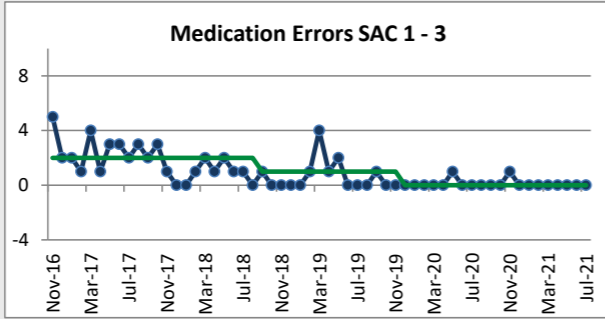
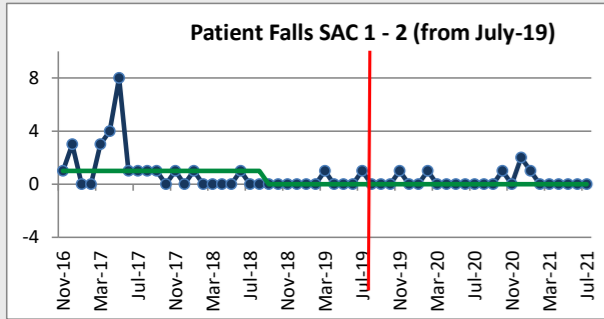
FUNDER MTD (\$000)

Actual	Budget	Variance	Actual vs Budget
137	126	11	✓✓

PROVIDER - Variance Surplus/(Deficit) - YTD (\$000)



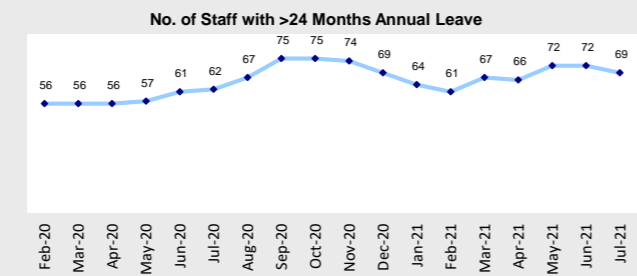
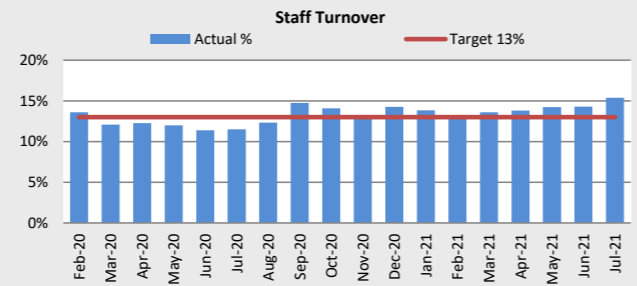
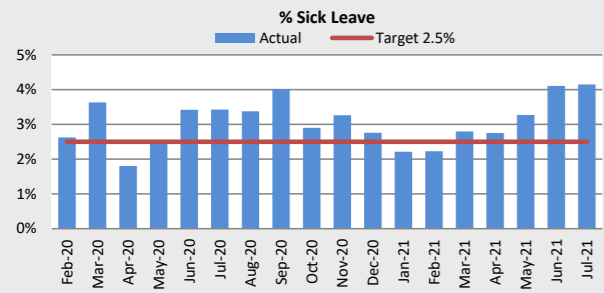
QUALITY MEASURES



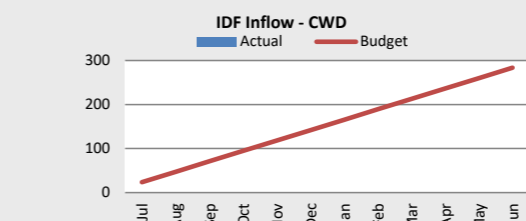
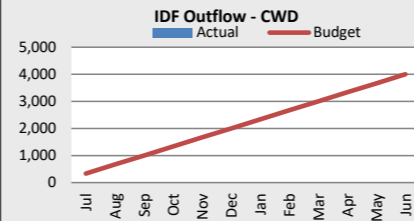
STAFF

YTD FTE	Actual	Budget	Var
Medical	45.3	46.7	1.3
Nursing	253.6	241.0	- 12.6
Allied	65.9	75.8	9.9
Support	15.2	15.8	0.6
Mgmt/Admin	129.4	109.5	- 19.9
Total	509.3	488.7	- 20.6

Appraisals Last 14m 41%



INTER DISTRICT FLOWS



NOTES - JULY 2021

Some financial year 21/22 measure are not available. From July-18 the definitions for Hospital Acquired Pressure Areas and Patient Falls have been redefined. Faster Cancer and Planned Care are impacted by timing of data submission.