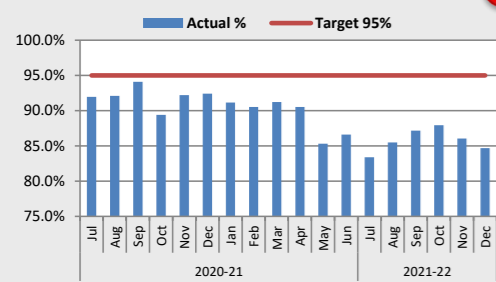
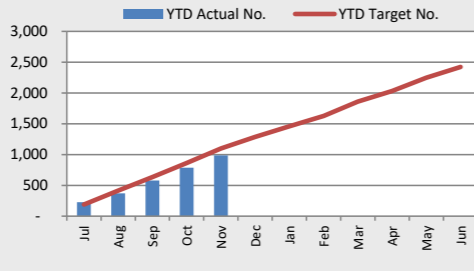


## MOH PERFORMANCE MEASURES

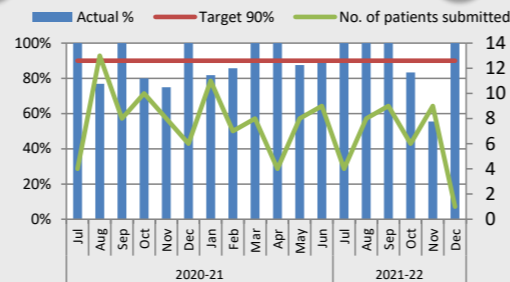
95% of patients will be admitted, discharged or transferred from ED within six hours.



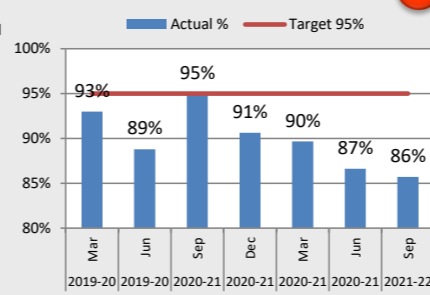
2021/22 Planned Care - Inpatient Surgical Discharges



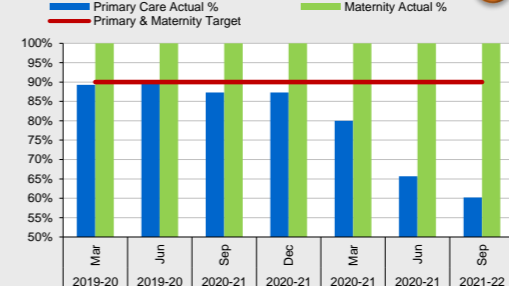
90% of patients receive their first cancer treatment within 62 days



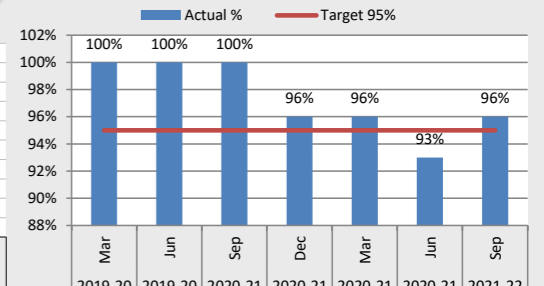
95% of children fully immunised at 8 months (quarterly)



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

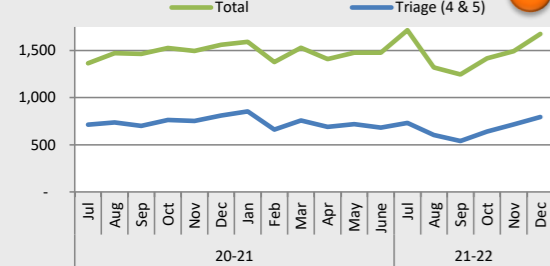


95% of identified obese children will be referred for assessment (quarterly)

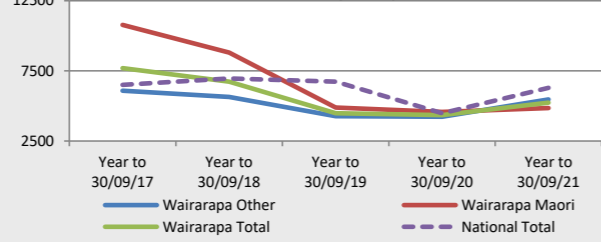


## KEY INDICATORS

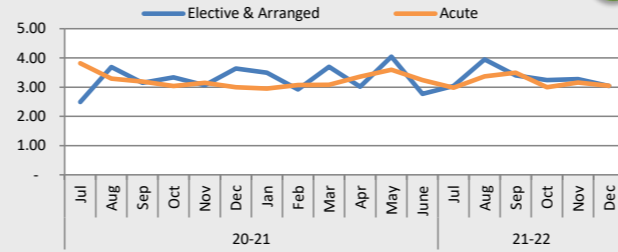
ED Presentations



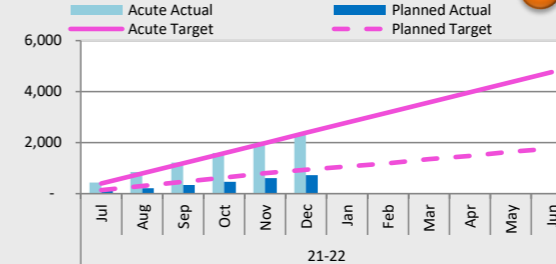
Ambulatory Sensitive Hospitalisations (ASH) (per 100,000 population) - 0-04 Age Group



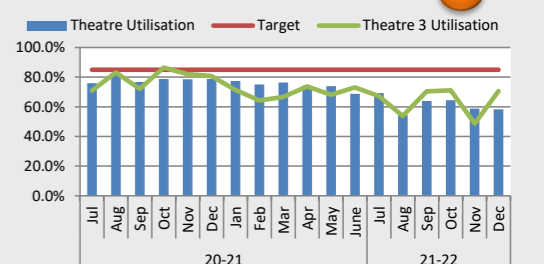
Average Length of Stay (ALOS)



Caseweight (local delivery)

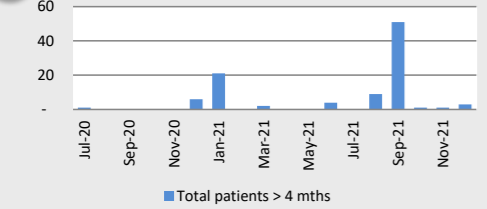


Theatre Utilisation

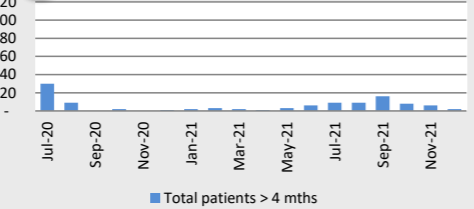


## NUMBER LONG WAIT PATIENTS (>4 Months)

First Specialist Assessment - ESPI 2



Treatment- ESPI 5

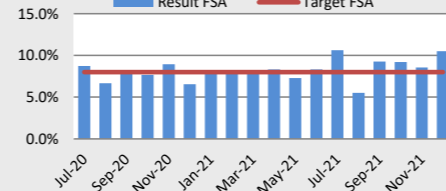


## PROCESS & EFFICIENCY

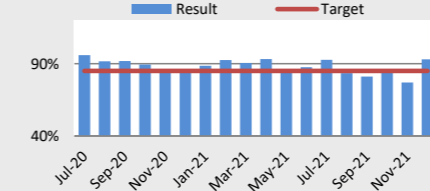
- Elective/Arranged Day Surgery rate
- Ward Bed Utilisation - MSW
- Caesarean Rate (Elective & Acute)
- Acute Readmission Rate
- Theatre Sessions Starting on Time
- Theatre Session Utilisation (Time in Theatre)
- Cancellation on Day of Surgery
- Did Not Attend (DNA) Rate - FSA
- Did Not Attend (DNA)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

Target	Actual Mnth	Actual YTD	YTD vs Target
62%	80.3%	69.5%	✓✓
85%	93.0%	85.5%	✓✓
25%	29.6%	27.4%	✗
8%	4.9%	5.4%	✓✓
90%	86.4%	86.9%	✗
85%	58.3%	61.5%	✗
5%	2.7%	5.4%	✗
8.0%	10.5%	9.1%	✗
6.0%	8.5%	7.5%	✗
8.0%	16.6%	16.5%	✗

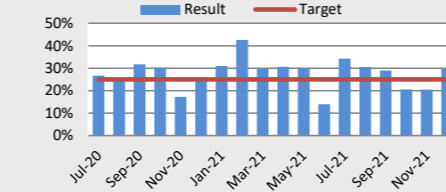
Did Not Attend (DNA) Appointments - FSA



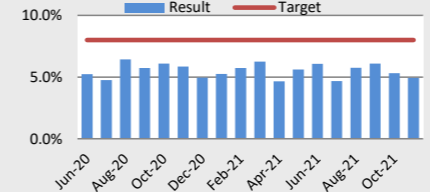
MSW Ward Bed Utilisation



C-Section Rate



Acute Readmissions

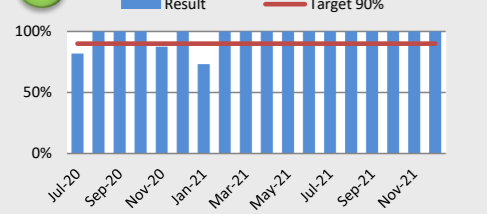


## DIAGNOSTIC WAIT TIMES

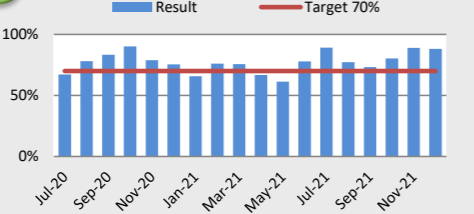
Diagnostics

	Target	Actual	
MRI Wait List seen in 42 days	90.0%	51.7%	✗
Ultrasound Waitlist seen in 42 days	85.0%	44.3%	✗
CT Waitlist seen in 42 days	95.0%	90.4%	✗
Urgent Colonoscopy - Wait or Procedure within 14 Days	90.0%	100.0%	✓✓
Non-Urgent Colonoscopy - Wait or Procedure within 42 Days	70.0%	88.2%	✓✓
Surveillance Colonoscopy - Wait or Procedure within 84 Days	70.0%	71.3%	✓✓

Urgent Colonoscopy

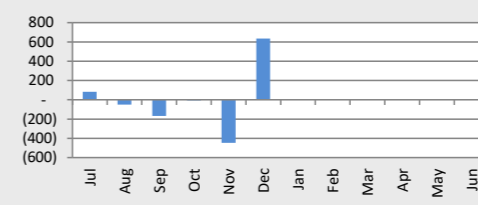


Non-Urgent Colonoscopy

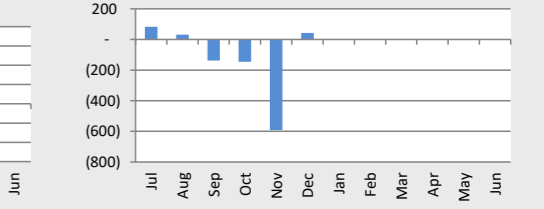


## FINANCIAL RESULT

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



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



MTD (\$000)

Actual	Budget	Variance	Actual vs Budget
96	(539)	634	✓✓

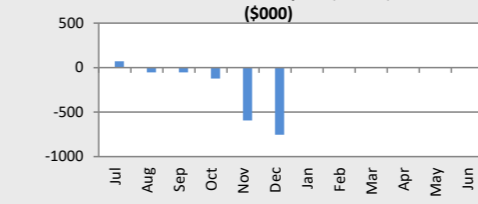
PROVIDER MTD (\$000)

Actual	Budget	Variance	Actual vs Budget
(1,011)	(852)	(159)	✗

FUNDER MTD (\$000)

Actual	Budget	Variance	Actual vs Budget
1,039	316	723	✓✓

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



YTD (\$000)

Actual	Budget	Variance	Actual vs Budget
821	864	(43)	✗

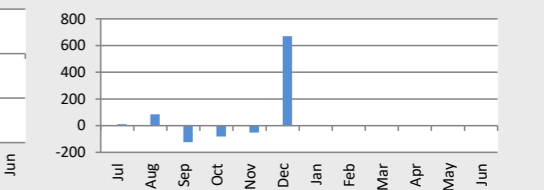
PROVIDER YTD (\$000)

Actual	Budget	Variance	Actual vs Budget
(4,423)	(3,669)	(754)	✗

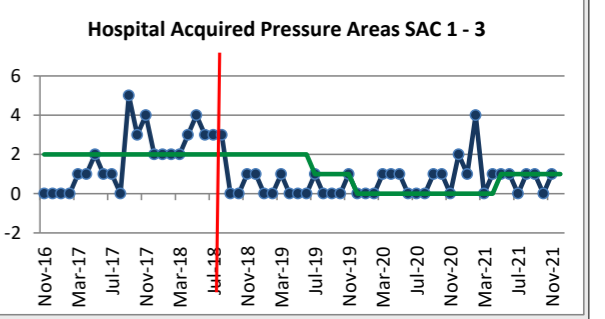
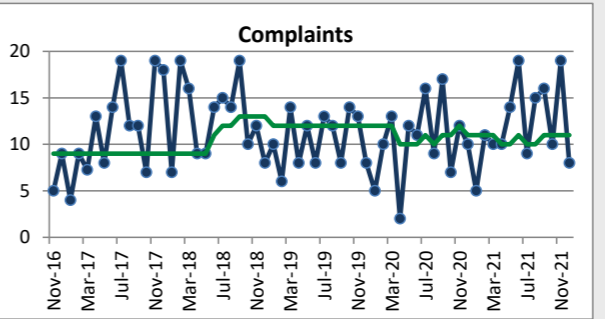
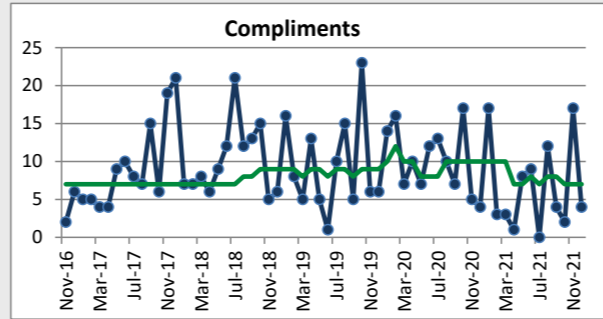
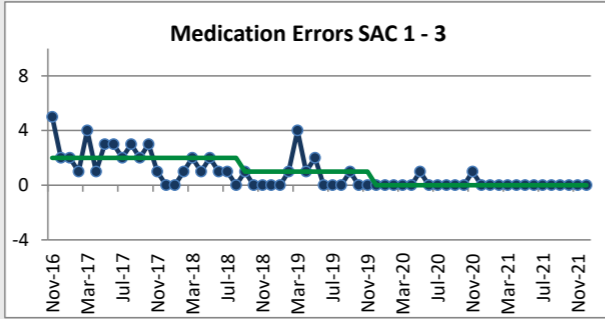
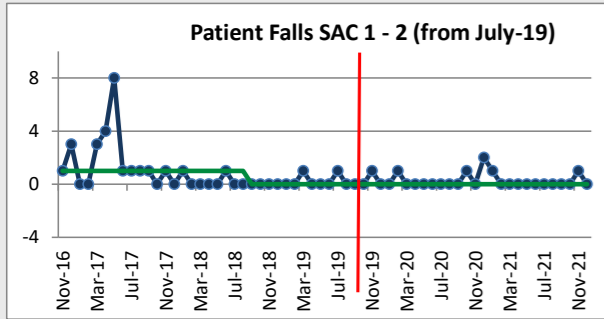
FUNDER YTD (\$000)

Actual	Budget	Variance	Actual vs Budget
3,484	2,814	670	✓✓

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



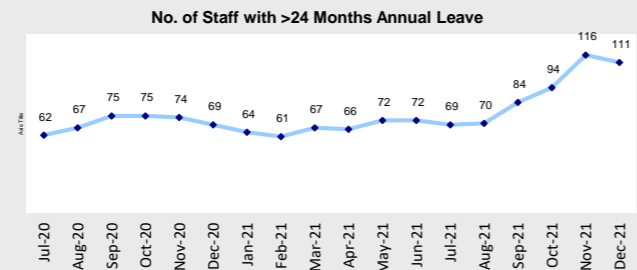
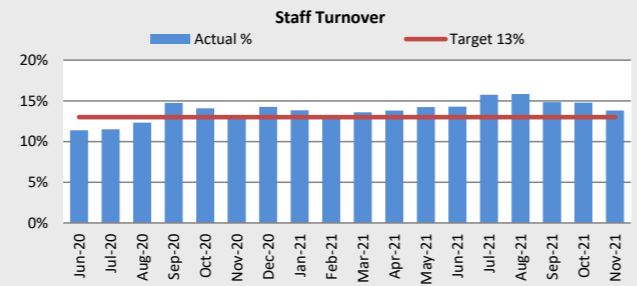
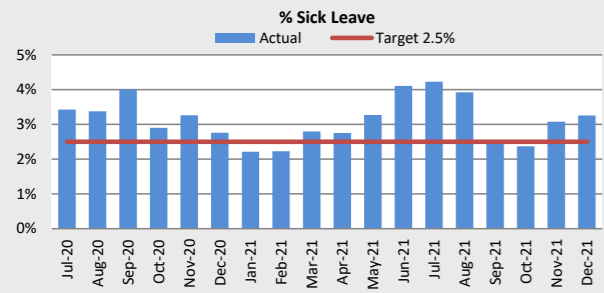
QUALITY MEASURES



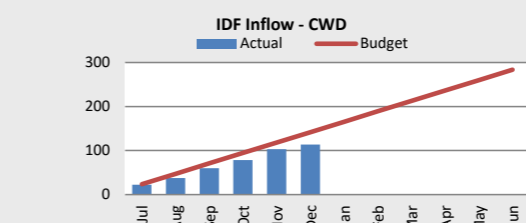
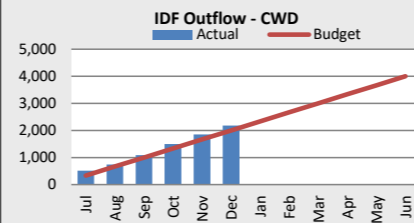
STAFF

YTD FTE	Actual	Budget	Var
Medical	42.6	46.6	4.1
Nursing	257.6	241.0	- 16.6
Allied	63.5	75.8	12.3
Support	15.4	15.8	0.4
Mgmt/Admin	133.2	109.5	- 23.7
Total	512.2	488.7	- 23.5

Appraisals Last 14m 40%



INTER DISTRICT FLOWS



NOTES - DECEMBER 2021

Some quarterly measures and staff turnover is not available at the time of report writing. 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.