



# KEY PERFORMANCE INDICATORS

## SA Ambulance Service

Master Definition Document  
2024-2025



Government  
of South Australia

SA Health



SA  
Ambulance  
Service

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Version Control

Version No.	Changes Made	By Whom	Date
V1.0	First iteration	Lauren Bell	08/01/2021
V2.0	Second Iteration	Lincy Varghese	28/01/2022
V3.0	Updated to include 2022-23 KPIs	Lyndal Beer	06/07/2022
V4.0	Updated to include 2023-24 KPIs	Chris Killington	
V5.0	Added in ED Avoidance Specification	Damian Robinson	20/09/2023
V6.0	Updated to include 2024-25 KPIs	Dale Heinze	02/08/2024

# Timely Access to Care

## Emergency Department

### Ambulance Hospital Clearance Time ≤ 20 Minutes

#### Identifying and definitional attributes

Short Name:	Ambulance Hospital Clearance Time
Tier:	Tier 1
KPI ID:	TAC-ED-T1-1
Description:	Percentage (%) of ambulance presentations that subsequently depart the emergency department (ED) less than or equal to 20 minutes following a patient's transfer of care at a metropolitan public hospital, otherwise known as Ambulance Hospital Clearance Time.
Computation:	(Numerator/Denominator)*100
Numerator:	Count (#) of ambulance presentations to a major metropolitan hospital ED where the time difference between transfer of patient care to ambulance availability for redeployment is less than or equal to 20 minutes.
Denominator:	Count (#) of ambulance presentations at a major metropolitan hospital ED.

#### More Information

Scope:	Data is reported for: <ul style="list-style-type: none"> <li>&gt; CALHN</li> <li>&gt; SALHN</li> <li>&gt; NALHN</li> <li>&gt; WCHN</li> <li>&gt; State</li> </ul>			
Benchmarks:	Target	≥80.0%	75.0%	<75%
	Performance Score	5	2.5	0
Representation class:	Percentage			
Data Type:	Real			
Unit of Measure:	Services Type			
Data Source:	SAAS CAD as per BUI database			
Frequency of Reporting:	Monthly (i.e., July data reported in August)			

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<b>Notes:</b>	<ul style="list-style-type: none"><li>&gt; Transfer of care is deemed complete only when clinical handover has occurred between hospital staff and paramedics, the patient has been offloaded from the ambulance stretcher and/or the care of the ambulance paramedics is no longer required.</li><li>&gt; Includes metropolitan public hospitals only.</li><li>&gt; Includes patients arriving at ED where the ambulance incident priority is P1 to P5.</li><li>&gt; Excludes any P6 to P8 incidents.</li><li>&gt; Data with missing timestamps or Negative times are excluded.</li></ul>
<b>Related Information:</b>	<ul style="list-style-type: none"><li>&gt; <a href="#">Service Agreements 2024-25 SA Health</a></li></ul>

Timeliness

**'000' Calls Answered in 10 Seconds**

**Identifying and definitional attributes**

Short Name:	'000' Calls Answered
Tier:	Tier 1
KPI ID:	TAC-TI-T1-1
Description:	Percentage (%) of '000' emergency calls answered within 10 seconds.
Computation:	(Numerator/Denominator)*100
Numerator:	Count (#) of '000' emergency calls that have been answered in the Emergency Operations Centre in 10 seconds or under.
Denominator:	Count (#) of all calls presented to '000' queues in the Emergency Operations Centre.

**More Information**

Scope:	Data is reported for: > SAAS								
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≥95.0%</td> <td>90.0%</td> <td>&lt;90%</td> </tr> <tr> <td>Performance Score</td> <td>5</td> <td>2.5</td> <td>0</td> </tr> </table>	Target	≥95.0%	90.0%	<90%	Performance Score	5	2.5	0
Target	≥95.0%	90.0%	<90%						
Performance Score	5	2.5	0						
Representation class:	Percentage								
Data Type:	Real								
Unit of Measure:	Service Type								
Data Source:	SAAS Automated Call Distributor Data (Genesys / BRIO), as per BIU database								
Frequency of Reporting:	Monthly (i.e. July data reported in August)								
Notes:	<ul style="list-style-type: none"> <li>&gt; Includes primary queue only.</li> <li>&gt; Excludes short-abandoned calls.</li> <li>&gt; Excludes time between presentation to Telstra triple-000 line and subsequent transfer to SAAS.</li> </ul>								
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>								

**Response Time (Urban Centres) - Priority 1**  
**Response Time (Urban Centres) - Priority 2**  
**Response Time (Urban Centres) - Priority 3**

**Identifying and definitional attributes**

<b>Short Name:</b>	Response Time – Priority 1 Response Time – Priority 2 Response Time – Priority 3
<b>Tier:</b>	Tier 1 Tier 1 Tier 2
<b>KPI ID:</b>	TAC-TI-T1-2 TAC-TI-T1-3 TAC-TI-T2-1
<b>Description:</b>	Percentage (%) of Priority 1, 2 or 3 (urban centres) incidents where the first SA Ambulance Service (SAAS) resource arrived within the specified timeframe for the Priority.
<b>Computation:</b>	(Numerator/Denominator)*100
<b>Numerator:</b>	Count (#) of: a) Priority 1 incidents where the ambulance responds within 8 minutes. b) Priority 2 incidents where the ambulance responds within 16 minutes. c) Priority 3 incidents where the ambulance responds within 30 minutes.
<b>Denominator:</b>	Count (#) of: a) Priority 1 incidents. b) Priority 2 incidents. c) Priority 3 incidents.

**More Information**

<b>Scope:</b>	Data is reported for: > SAAS																																										
<b>Benchmarks:</b>	<p>Tier 1:</p> <table border="1"> <tr> <td>Priority 1 Target</td> <td>≥60.0%</td> <td>57.5%</td> <td>55.0%</td> <td>52.5%</td> <td>50.0%</td> <td>&lt;50%</td> </tr> <tr> <td>Performance Score</td> <td>5</td> <td>4</td> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Priority 2 Target</p> <table border="1"> <tr> <td>Priority 2 Target</td> <td>≥90%</td> <td>80%</td> <td>70%</td> <td>60%</td> <td>50%</td> <td>&lt;50%</td> </tr> <tr> <td>Performance Score</td> <td>5</td> <td>4</td> <td>3</td> <td>2</td> <td>1</td> <td>0</td> </tr> </table> <p>Tier 2:</p> <table border="1"> <tr> <td>Priority 3 Target</td> <td>≥60%</td> <td>50%</td> <td>40%</td> <td>30%</td> <td>25%</td> <td>&lt;25%</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>2</td> <td>1.5</td> <td>1</td> <td>0.5</td> <td>0</td> </tr> </table>	Priority 1 Target	≥60.0%	57.5%	55.0%	52.5%	50.0%	<50%	Performance Score	5	4	3	2	1	0	Priority 2 Target	≥90%	80%	70%	60%	50%	<50%	Performance Score	5	4	3	2	1	0	Priority 3 Target	≥60%	50%	40%	30%	25%	<25%	Performance Score	2.5	2	1.5	1	0.5	0
Priority 1 Target	≥60.0%	57.5%	55.0%	52.5%	50.0%	<50%																																					
Performance Score	5	4	3	2	1	0																																					
Priority 2 Target	≥90%	80%	70%	60%	50%	<50%																																					
Performance Score	5	4	3	2	1	0																																					
Priority 3 Target	≥60%	50%	40%	30%	25%	<25%																																					
Performance Score	2.5	2	1.5	1	0.5	0																																					
<b>Representation class:</b>	Percentage																																										
<b>Data Type:</b>	Real																																										
<b>Unit of Measure:</b>	Services Type																																										

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<b>Data Source:</b>	SAAS CAD as per BIU database
<b>Frequency of Reporting:</b>	Monthly (i.e., July data reported in August)
<b>Notes:</b>	<ul style="list-style-type: none"><li>&gt; Data is for urban centres, population greater than 10,000 - Australian Bureau of Statistics, Urban Centre and Locality (UCL) Ed 2016.</li><li>&gt; Response time is the difference between the event start time (first keystroke of incident in South Australian Computer Aided Dispatch System (SACAD) creation) of an incident and the time the resource arrives at the incident.</li><li>&gt; The final Priority of an incident is to be the assigned Priority at the time of the first SAAS resource arrival.</li><li>&gt; Note – this definition of ambulance response time differs to the Report on Government Services (RoGS) definition. RoGS defines response time as the time taken between the arrival of the first responding ambulance resource at the scene of an incident, and the initial receipt of the call for an emergency ambulance at the communications centre.</li></ul>
<b>Related Information:</b>	> <a href="#">Service Agreements 2024-25 SA Health</a>



# Productivity and Efficiency

## Finance

End Of Year Net Variance to Budget									
Identifying and definitional attributes									
Short Name:	EOY Variance to Budget								
Tier:	Tier 1								
KPI ID:	PE-F-T1-1								
Description:	End of year forecasted expenditure of providing services for a given period, minus the end of year adjusted budget for the same period.								
Computation:	Variance								
More Information									
Scope:	Data is reported for: <ul style="list-style-type: none"> <li>&gt; CALHN</li> <li>&gt; SALHN</li> <li>&gt; NALHN</li> <li>&gt; WCHN</li> <li>&gt; BHFLHN</li> <li>&gt; FUNLHN</li> <li>&gt; EFNLHN</li> <li>&gt; RMCLHN</li> <li>&gt; LCLHN</li> <li>&gt; YNLHN</li> <li>&gt; DHW (including Drug and Alcohol Services South Australia)</li> <li>&gt; South Australian Ambulance Services</li> <li>&gt; Statewide Clinical Support Services</li> </ul>								
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≤0%</td> <td>≤+1%</td> <td>&gt;+1%</td> </tr> <tr> <td>Performance Score</td> <td>5</td> <td>2.5</td> <td>0</td> </tr> </table>	Target	≤0%	≤+1%	>+1%	Performance Score	5	2.5	0
Target	≤0%	≤+1%	>+1%						
Performance Score	5	2.5	0						
Representation class:	Dollar								
Data Type:	Real								
Unit of Measure:	Monetary amount								
Data Source:	SHARP								
Frequency of Reporting:	Monthly (i.e., July data reported in August)								

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<b>Notes:</b>	<ul style="list-style-type: none"><li>&gt; Net Grant Funded Services impact.</li><li>&gt; For monthly reporting, indicator data is disaggregated to show the following elements:<ul style="list-style-type: none"><li>• End of year Projection Net Variance to Budget</li><li>• Expenditure Variance to Budget</li><li>• Revenue (All) Variance to Budget</li><li>• Revenue (Earned) Variance to Budget</li></ul></li><li>&gt; A percentage calculation is also available in the monthly workbooks.</li></ul>
<b>Related Information:</b>	<ul style="list-style-type: none"><li>&gt; <a href="#">Service Agreements 2024-25 SA Health</a></li></ul>

## Workforce Cost

### Identifying and definitional attributes

Short Name:	Workforce Cost
Tier:	Tier 2
KPI ID:	PE-F-T2-1
Description:	Percentage (%) variance of actual workforce costs compared to budgeted workforce costs
Computation:	$(\text{Numerator}/\text{Denominator}) \times 100$
Numerator:	Actual dollar value (\$) spend for salaried employees and agency staff for a given period minus the allocated budget for salaried employees and agency staff for the same period.
Denominator:	Allocated budget for salaried employees and agency staff for a given period.

### More Information

Scope:	Data is reported for: > SAAS								
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≤0%</td> <td>≤0.5%</td> <td>&gt;0.5%</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>1.25</td> <td>0</td> </tr> </table>	Target	≤0%	≤0.5%	>0.5%	Performance Score	2.5	1.25	0
Target	≤0%	≤0.5%	>0.5%						
Performance Score	2.5	1.25	0						
Representation class:	Percentage								
Data Type:	Real								
Unit of Measure:	Monetary amount								
Data Source:	SHARP								
Frequency of Reporting:	Monthly (i.e., July data reported in August)								
Notes:	<p>&gt; Includes:</p> <ul style="list-style-type: none"> <li>• 71000 - Employee Benefit Costs: <ul style="list-style-type: none"> <li>○ 71100 - Salaries and Wages – Nursing</li> <li>○ 71200 - Salaries and Wages - Medical Officers</li> <li>○ 71300 - Salaries and Wages - Weekly Paid</li> <li>○ 71400 - Salaries and Wages - Clinical Academics</li> <li>○ 71500 - Salaries and Wages - Salaried Employees</li> <li>○ 71600 - Other Employee Related Expense</li> </ul> </li> <li>• 75100 - Agency Staffing</li> </ul>								

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- 75110 - Agency Staffing - Nursing
- 75120 - Agency Staffing - Medical Officer
- 75130 - Agency Staffing - Weekly Paid
- 75140 - Agency Staffing - Clinical Academics
- 75150 - Agency Staffing - Salaried Employees

Related Information:

> [Service Agreements 2024-25 SA Health](#)

## Roster Performance (Metropolitan)

### Identifying and definitional attributes

Short Name:	Roster Performance
Tier:	Monitor
KPI ID:	PE-F-M-1
Description:	Percentage (%) of double crew emergency ambulance paramedics in the metropolitan region who fill the rostered shifts.
Computation:	(Numerator/Denominator)*100
Numerator:	Count (#) of double crew emergency ambulance paramedics in the metropolitan region logged for rostered shift.
Denominator:	Count (#) of double crew emergency ambulance paramedics in the metropolitan region on the planned roster for shift.

### More Information

Scope:	Data is reported for: > SAAS (metropolitan)				
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≥95%</td> <td>≥92.5% and &lt;95%</td> <td>&lt;92.5%</td> </tr> </table> <p>Note: Benchmarks are a guide only as Monitor KPI do not form part of the performance assessment process.</p>	Target	≥95%	≥92.5% and <95%	<92.5%
Target	≥95%	≥92.5% and <95%	<92.5%		
Representation class:	Percentage				
Data Type:	Real				
Unit of Measure:	Service Type				
Data Source:	SAAS CAD as per BIU database and GRS				
Frequency of Reporting:	Monthly (i.e. July data reported in August)				
Notes:	<p>&gt; Excludes:</p> <ul style="list-style-type: none"> <li>• Regional and volunteer crews.</li> <li>• Single Responders.</li> <li>• Area Team Leads.</li> <li>• Operational Team Leads.</li> <li>• Operational Managers</li> <li>• Patient Transport Services.</li> <li>• Emergency Support Services</li> <li>• Clinical Telephone Assessors</li> <li>• Emergency Operations Centre Clinicians</li> </ul>				
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>				

## Activity

## Average Incident Cost

## Identifying and definitional attributes

Short Name:	Average Incident Cost
Tier:	Tier 1
KPI ID:	PE-ACT-T1-1
Description:	Average cost per incident attended to by SA Ambulance Service (SAAS).
Computation:	(Numerator/Denominator)
Numerator:	SAAS expenditure.
Denominator:	Count (#) of incidents attended by SAAS.

## More Information

Scope:	Data is reported for: > SAAS						
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≤\$1,400</td> <td>&gt;\$1,400</td> </tr> <tr> <td>Performance Score</td> <td>5</td> <td>0</td> </tr> </table>	Target	≤\$1,400	>\$1,400	Performance Score	5	0
Target	≤\$1,400	>\$1,400					
Performance Score	5	0					
Representation class:	Mean (Average)						
Data Type:	Monetary Amount						
Unit of Measure:	Currency						
Data Source:	ORACLE Financial Reporting and SAAS CAD as per BIU database						
Frequency of Reporting:	6-monthly (i.e., July to December data reported in January)						
Notes:	<ul style="list-style-type: none"> <li>&gt; The expenditure is determined as the total expenses reported in SHARP, plus the user cost of capital calculated as 8% of assets. SHARP codes are: <ul style="list-style-type: none"> <li>• 71000 – Operating Expenditure</li> <li>• 9000 – Capital Expenditure.</li> </ul> </li> <li>&gt; An incident is defined as an event that resulted in a demand for an ambulance service(s) to respond.</li> <li>&gt; This indicator is to be reported against YTD same time previous year – once for the first 6 months of the financial year (July-December) and again at the end of the financial year, including any financial adjustments performed at that time (January-June + adjustments).</li> </ul>						
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>						

## SAAS Emergency Department (ED) Avoidance

### Identifying and definitional attributes

Short Name:	SAAS ED Avoidance
Tier:	Tier 2
KPI ID:	PE-ACT-T2-1
Description:	Percentage (%) of all P1-P6 Incidents (excluding P6 ATAC and IHT incidents) with an included Disposition Code OR Destination recorded who received care at the scene or who were transferred to a facility other than an ED.
Computation:	(Numerator/Denominator)*100
Numerator:	Count (#) of ED Avoidance Incidents (patients who received care at the scene or who were transferred to a facility other than an ED.)
Denominator:	Count (#) All P1-P6 Incidents (excluding P6 ATAC and IHT incidents) with an included Disposition Code OR Destination recorded.

### More Information

Scope:	Data is reported for: > SAAS								
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≥30.0%</td> <td>&lt;30 and ≥25%</td> <td>&lt;25%</td> </tr> <tr> <td>Score</td> <td>2.5</td> <td>1.25</td> <td>0</td> </tr> </table>	Target	≥30.0%	<30 and ≥25%	<25%	Score	2.5	1.25	0
Target	≥30.0%	<30 and ≥25%	<25%						
Score	2.5	1.25	0						
Representation class:	Percentage								
Data Type:	Real								
Unit of Measure:	Services Type								
Data Source:	SAAS CAD as per BUI database								
Frequency of Reporting:	Monthly (i.e., July data reported in August)								
Notes:	<ul style="list-style-type: none"> <li>&gt; SAAS Emergency Department (ED) Avoidance reporting includes all P1 to P6 incidents who received care at the scene or were transported to a facility other than an ED. ED Avoidance Reporting typically shows the total number of ED Avoidances per month and the percentage of ED Avoidance against the total number of P1-P6 Incidents (excluding P6 ATAC and IHT incidents).</li> <li>&gt; SAAS Performance Target for ED Avoidance is 20% or more.</li> <li>&gt; Incident Priority = 1 to 6</li> <li>&gt; Event has an included Disposition Code OR a Destination recorded</li> <li>&gt; NOT P6 ATAC Incident (Ambulance Transport Assist Covid 19)</li> <li>&gt; NOT IHT Incident (Inter-Hospital Transfers)</li> </ul>								
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>								

## Ambulance Attendance - No Transport to ED

### Identifying and definitional attributes

Short Name:	Treat no Transport
Tier:	Monitor
KPI ID:	PE-ACT-M-1
Description:	Percentage (%) of incidents attended by SA Ambulance Service (SAAS) where a patient is treated at the scene with no subsequent transport to the Emergency Department.
Computation:	$(\text{Numerator}/\text{Denominator}) * 100$
Numerator	Count (#) of incidents attended by SAAS where a patient is treated at the scene with no subsequent transport to the Emergency Department.
Denominator	Count (#) of incidents attended by SAAS

### More Information

Scope:	Data is reported for: > SAAS
Benchmarks:	N/A
Representation class:	Percentage
Data Type:	Real
Unit of Measure:	Service Type
Data Source:	SAAS CAD as per BIU database
Frequency of Reporting:	Monthly (i.e., July data reported in August)
Notes:	> National Safety and Quality Health Service (NSQHS) Standards
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>



Safe and Effective Care

Effectiveness of Care

Pain Reduction									
Identifying and definitional attributes									
Short Name:	Pain Reduction								
Tier:	Tier 1								
KPI ID:	SEC-EC-T1-1								
Description:	Percentage (%) of patients who reported a clinically meaningful pain reduction.								
Computation:	(Numerator/Denominator)*100								
Numerator:	Count (#) of patients who reported a clinically meaningful pain reduction.								
Denominator:	Count (#) of patients for whom there is an initial pain score of 7 or above.								
More Information									
Scope:	Data is reported for: <ul style="list-style-type: none"> <li>SAAS</li> </ul>								
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≥50.0%</td> <td>&lt;50 and ≥45%</td> <td>&lt;45%</td> </tr> <tr> <td>Performance Score</td> <td>5</td> <td>2.5</td> <td>0</td> </tr> </table>	Target	≥50.0%	<50 and ≥45%	<45%	Performance Score	5	2.5	0
Target	≥50.0%	<50 and ≥45%	<45%						
Performance Score	5	2.5	0						
Representation class:	Percentage								
Data Type:	Real								
Unit of Measure:	Services Type								
Data Source:	SAAS Patient Case Card as per BIU database								
Frequency of Reporting:	Monthly (i.e., July data reported in August)								
Notes:	<ul style="list-style-type: none"> <li>&gt; Clinically meaningful pain reduction is defined as a minimum of a 2-point reduction in pain score from first to final recorded measurement (based on a 1-10 numeric rating scale of pain intensity).</li> <li>&gt; Includes:                             <ul style="list-style-type: none"> <li>• Patients aged 16 years or over and received care from the ambulance service.</li> <li>• Patients where at least 2 pain scores (pre- and post-treatment) were recorded.</li> </ul> </li> <li>&gt; Patients where any pain score was recorded as 7 or above.</li> <li>&gt; Excluded are patients who refuse pain medication.</li> </ul>								
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>								

## Cardiac Arrest with ROSC Rate – VF/VT cardiac arrest

### Identifying and definitional attributes

Short Name:	Cardiac Arrest with ROSC – VF/VT
Tier:	Tier 1
KPI ID:	SEC-EC-T1-2
Description:	Percentage (%) of patients who were in out-of-hospital cardiac arrest and had a return to spontaneous circulation (ROSC) at the time of transfer of care to the medical team at the receiving hospital.
Computation:	(Numerator/Denominator)*100
Numerator:	Count (#) of patients with ROSC at time of transfer of care to the medical team at the receiving hospital where the patient suffered an out-of-hospital, ventricular fibrillation (VF) or ventricular tachycardia (VT), cardiac arrest.
Denominator:	Count (#) of patients where the patient suffered an out-of-hospital, ventricular fibrillation (VF) or ventricular tachycardia (VT), cardiac arrest.

### More Information

Scope:	Data is reported for: > SAAS		
Benchmarks:	Target	≥12 month rolling average	<12 month rolling average
	Score	5	0
Representation class:	Percentage		
Data Type:	Real		
Unit of Measure:	Services Type		
Data Source:	Cardiac Arrest Registry		
Frequency of Reporting:	Monthly (3 month lag i.e., July data reported in October)		
Notes:	<ul style="list-style-type: none"> <li>&gt; Includes metropolitan and country patients aged 16 years and over.</li> <li>&gt; Excludes data with incomplete time stamps.</li> <li>&gt; Year to date data (produced monthly) will contribute to SAAS's performance assessment.</li> <li>&gt; A VF/VT cardiac arrest is defined as an out-of-hospital cardiac arrest (not witnessed by a paramedic) where the arrest rhythm on the first ECG assessment was either VF or VT (irregular and/or fast heartbeat).</li> </ul>		
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>		

## STEMI - Arrival at PCI Facility within 60 minutes

### Identifying and definitional attributes

Short Name:	STEMI – PCI Arrival
Tier:	Tier 1
KPI ID:	SEC-EC-T1-3
Description:	Percentage (%) of metropolitan patients with chest pain, including evidence of ST elevation myocardial infarction (STEMI) who are transported to a hospital with percutaneous coronary intervention (PCI) facilities within 60 minutes of ambulance dispatch.
Computation:	(Numerator/Denominator)*100
Numerator:	Count (#) of metropolitan patients with chest pain, including evidence of STEMI, who are transported to a site with PCI facilities within 60 minutes of ambulance dispatch.
Denominator:	Count (#) of metropolitan patients with chest pain, including evidence of STEMI, who are transported to a treatment facility.

### More Information

Scope:	Data is reported for: > SAAS								
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≥70%</td> <td>&lt;70 and ≥65%</td> <td>&lt;65%</td> </tr> <tr> <td>Performance Score</td> <td>5</td> <td>2.5</td> <td>0</td> </tr> </table>	Target	≥70%	<70 and ≥65%	<65%	Performance Score	5	2.5	0
Target	≥70%	<70 and ≥65%	<65%						
Performance Score	5	2.5	0						
Representation class:	Percentage								
Data Type:	Real								
Unit of Measure:	Services Type								
Data Source:	SAAS CAD as per BIU database								
Frequency of Reporting:	Monthly (i.e. July data reported in August)								
Notes:	<ul style="list-style-type: none"> <li>&gt; Metropolitan patients only.</li> <li>&gt; Excludes data with incomplete time stamps.</li> <li>&gt; A transport is defined as a patient transported from an incident to a treatment facility. Multiple transports can occur from a single incident, but not all incidents may result in a transport.</li> </ul>								
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>								

## Cardiac Arrest with ROSC Rate – Resuscitation was attempted

### Identifying and definitional attributes

Short Name:	Cardiac Arrest with ROSC – Resuscitation was attempted
Tier:	Tier 2
KPI ID:	SEC-EC-T2-1
Description:	Percentage (%) of patients who were in out-of-hospital cardiac arrest and had a return to spontaneous circulation (ROSC) at the time of transfer of care to the medical team at the receiving hospital.
Computation:	$(\text{Numerator}/\text{Denominator}) * 100$
Numerator:	Count (#) of patients with ROSC at time of transfer of care to the medical team at the receiving hospital where the patient suffered an out-of-hospital cardiac arrest and resuscitation was attempted.
Denominator:	Count (#) of patients where the patient suffered an out-of-hospital cardiac arrest and resuscitation was attempted.

### More Information

Scope:	Data is reported for: > SAAS		
Benchmarks:	Target	≥12 month rolling average	<12 month rolling average
	Score	2.5	0
Representation class:	Percentage		
Data Type:	Real		
Unit of Measure:	Services Type		
Data Source:	Cardiac Arrest Registry		
Frequency of Reporting:	Monthly (3 month lag i.e., July data reported in October)		
Notes:	<ul style="list-style-type: none"> <li>&gt; Includes metropolitan and country patients aged 16 years and over.</li> <li>&gt; Excludes data with incomplete time stamps.</li> <li>&gt; Year to date data (produced monthly) will contribute to SAAS's performance assessment.</li> <li>&gt; A cardiac arrest where resuscitation was attempted is defined as an out-of-hospital cardiac arrest (not witnessed by a paramedic) where chest compressions and/or defibrillation was undertaken by ambulance or emergency medical services personnel.</li> </ul>		
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>		

## Suspected Stroke - Arrival at CSU Facility within 60 Minutes

### Identifying and definitional attributes

Short Name:	STROKE – CSU Arrival
Tier:	Tier 2
KPI ID:	SEC-EC-T2-2
Description:	Percentage (%) of metropolitan patients with suspected stroke who are transported to a hospital with a Comprehensive Stroke Unit (CSU) within 60 minutes of ambulance dispatch.
Computation:	(Numerator/Denominator)*100
Numerator:	Count (#) of metropolitan patients with suspected stroke, who are transported to a site with a CSU within 60 minutes of ambulance dispatch.
Denominator:	Count (#) of metropolitan patients with suspected stroke, who are transported to a treatment facility.

### More Information

Scope:	Data is reported for: > SAAS								
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≥80%</td> <td>&lt;80 and ≥75%</td> <td>&lt;75%</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>1.25</td> <td>0</td> </tr> </table>	Target	≥80%	<80 and ≥75%	<75%	Performance Score	2.5	1.25	0
Target	≥80%	<80 and ≥75%	<75%						
Performance Score	2.5	1.25	0						
Representation class:	Percentage								
Data Type:	Real								
Unit of Measure:	Services Type								
Data Source:	SAAS CAD as per BIU database								
Frequency of Reporting:	Monthly (i.e., July data reported in August)								
Notes:	<ul style="list-style-type: none"> <li>&gt; Metropolitan patients only.</li> <li>&gt; Excludes data with incomplete time stamps.</li> <li>&gt; A transport is defined as a patient transported from an incident to a treatment facility. Multiple transports can occur from a single incident, but not all incidents may result in a transport.</li> </ul>								
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>								

**'000' Emergency Call Audit – Partial Compliance**  
**'000' Emergency Call Audit – Low Compliance**  
**'000' Emergency Call Audit – Non-Compliance**

**Identifying and definitional attributes**

<b>Short Name:</b>	'000' Emergency Call Audit
<b>Tier:</b>	Tier 2 Tier 2 Tier 2
<b>KPI ID:</b>	SEC-EC-T2-3 Partial compliance SEC-EC-T2-4 Low compliance SEC-EC-T2-5 Non-compliance
<b>Description:</b>	Percentage (%) of '000' emergency calls in compliance with Emergency Medical Dispatch Quality Improvement (EMD-Q) Performance Standards and Accredited Center of Excellence (ACE) accreditation for correct application of a Medical Priority Dispatch System.
<b>Computation:</b>	(Numerator/Denominator)*100
<b>Numerator:</b>	Count (#) of audited calls that showed: a) Partial compliance b) Low compliance c) Non-compliance against accreditation standards.
<b>Denominator:</b>	Count (#) of audited calls.

**More Information**

<b>Scope:</b>	Data is reported for: > SAAS												
<b>Benchmarks:</b>	<table border="1"> <tr> <td>Partial Compliance Target</td> <td>≤10%</td> <td>&gt;10%</td> </tr> <tr> <td>Low Compliance Target</td> <td>≤10%</td> <td>&gt;10%</td> </tr> <tr> <td>Non-Compliance Target</td> <td>≤7%</td> <td>&gt;7%</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>0</td> </tr> </table>	Partial Compliance Target	≤10%	>10%	Low Compliance Target	≤10%	>10%	Non-Compliance Target	≤7%	>7%	Performance Score	2.5	0
Partial Compliance Target	≤10%	>10%											
Low Compliance Target	≤10%	>10%											
Non-Compliance Target	≤7%	>7%											
Performance Score	2.5	0											
<b>Representation class:</b>	Percentage												
<b>Data Type:</b>	Integer												
<b>Unit of Measure:</b>	Services Type												
<b>Data Source:</b>	SAAS CAD as per BIU database												
<b>Frequency of Reporting:</b>	Monthly (i.e., July data reported in August)												

## OFFICIAL

<b>Notes:</b>	<ul style="list-style-type: none"><li>&gt; Evidence of compliance is with the Twenty Points of accreditation, as published by the International Academies of Emergency Dispatch (IAED) Board of Accreditation.</li><li>&gt; Audit volume is determined using the International Academies of Emergency Dispatch Random Case Review Calculator and is dependent upon the SA Ambulance Service's annual call volume.</li><li>&gt; Calls that meet High Compliance and Compliant levels will also be provided by SA Ambulance Services to assist with analysis.</li></ul>
<b>Related Information:</b>	<ul style="list-style-type: none"><li>&gt; <a href="#">Service Agreements 2024-25 SA Health</a></li></ul>

## People and Culture

### Workforce

#### Employees with Excess Annual Leave Balance

##### Identifying and definitional attributes

Short Name:	Excess Leave
Tier:	Tier 1
KPI ID:	PC-WF-T1-1
Description:	Percentage (%) of employees with annual leave balance greater than or equal to 2 years entitlement (as recorded on LAC).
Computation:	(Numerator/Denominator)*100.
Numerator:	Employee headcount whose annual leave balance is greater than or equal to 2 years entitlement.
Denominator:	Employee headcount of employees eligible to annual leave that are not: <ul style="list-style-type: none"> <li>&gt; Terminated.</li> <li>&gt; Seconded.</li> <li>&gt; Non-employees;</li> <li>&gt; Board and Committee members.</li> </ul>

##### More Information

Scope:	<p>Data is reported for:</p> <ul style="list-style-type: none"> <li>&gt; CALHN: TEQH, RAH</li> <li>&gt; SALHN: FMC, RGH, NHS</li> <li>&gt; NALHN: LMHS, MH</li> <li>&gt; WCHN: WCH</li> <li>&gt; RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>&gt; LCLHN: Mount Gambier, LC Other</li> <li>&gt; FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>&gt; EFNLHN: Port Lincoln, EFN Other</li> <li>&gt; YNLHN: Port Pirie, YN Other</li> <li>&gt; BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>&gt; South Australian Ambulance Service</li> <li>&gt; Statewide Clinical Support Services</li> <li>&gt; Drug and Alcohol Services South Australia</li> <li>&gt; Department for Health and Wellbeing</li> <li>&gt; Commission on Excellence &amp; Innovation in Health</li> <li>&gt; Wellbeing SA</li> <li>&gt; State Total</li> </ul>						
Benchmarks:	Target	≤5%	7%	9%	11%	13%	>13%
	Performance Score	5	4	3	2	1	0



## OFFICIAL

<b>Representation Class:</b>	Percentage
<b>Data Type:</b>	Real
<b>Unit of Measure:</b>	Person
<b>Data Source:</b>	CHRIS21 and SHARP
<b>Frequency of Reporting:</b>	Monthly (i.e., July data reported in August)
<b>Notes:</b>	<ul style="list-style-type: none"> <li>&gt; Employees as recorded in CHRIS21.</li> <li>&gt; Leave balance (years) for annual leave is a derived figure dependent on an employee being paid a leave average or contract hours when on annual leave represented by a field in PYD for all awards (except SA Public Sector Salaried employees who are all paid contract hours when on leave – the Shared Sector Model).</li> <li>&gt; Payment Type: <ul style="list-style-type: none"> <li>• Contract Hours (Shared Sector Model): Takes into account the employee’s total accrual in hours, any future leave bookings, the leave entitlement in weeks specified by an employee’s industrial instrument, and the number of hours per week that they are contracted to work.</li> <li>• Average Hours: Takes into account an employee’s total accrual in days, any future leave bookings, the leave entitlement in weeks specified by an employee’s industrial instrument, and the number of days per week they are contracted to work.</li> </ul> </li> </ul>
<b>Related Information:</b>	> <a href="#">Service Agreements 2024-25 SA Health</a>

## Completion of Performance Reviews in line with the Commissioner’s Determination

### Identifying and definitional attributes

Short Name:	Performance Review Completion
Tier:	Tier 1
KPI ID:	PC-WF-T1-2
Description:	Percentage (%) of employees who have completed a Performance Review in the <u>prior</u> 6 month period.
Computation:	$(\text{Numerator}/\text{Denominator}) * 100$
Numerator:	Employee headcount where a Performance Review was completed in the prior 6-month period.
Denominator:	Employee headcount at the time of the extract that are not: <ul style="list-style-type: none"> <li>&gt; Terminated.</li> <li>&gt; Position ended (with a POS end date 2 months before the reporting period date) and no current position.</li> <li>&gt; Seconded to other agencies.</li> <li>&gt; Non-employees.</li> <li>&gt; Board and Committee members.</li> <li>&gt; Absent on unpaid leave greater than 28 days.</li> <li>&gt; Casual that have not been paid greater than 28 days.</li> </ul>

### More Information

Scope:	Data is reported for: <ul style="list-style-type: none"> <li>&gt; CALHN: TEQH, RAH</li> <li>&gt; SALHN: FMC, RGH, NHS</li> <li>&gt; NALHN: LMHS, MH</li> <li>&gt; WCHN: WCH</li> <li>&gt; RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>&gt; LCLHN: Mount Gambier, LC Other</li> <li>&gt; FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>&gt; EFNLHN: Port Lincoln, EFN Other</li> <li>&gt; YNLHN: Port Pirie, YN Other</li> <li>&gt; BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>&gt; South Australian Ambulance Service</li> <li>&gt; Statewide Clinical Support Services</li> <li>&gt; Drug and Alcohol Services South Australia</li> <li>&gt; Department for Health and Wellbeing</li> <li>&gt; Commission on Excellence &amp; Innovation in Health</li> <li>&gt; Wellbeing SA</li> <li>&gt; State Total</li> </ul>						
Benchmarks:	Target	≥80%	70%	60%	50%	40%	<40%
	Performance Score	5	4	3	2	1	0

## OFFICIAL

<b>Representation Class:</b>	Percentage
<b>Data Type:</b>	Real
<b>Unit of Measure:</b>	Person
<b>Data Source:</b>	CHRIS21
<b>Frequency of Reporting:</b>	6-monthly (i.e., July to December data reported in January)
<b>Notes:</b>	<ul style="list-style-type: none"> <li>&gt; An ended position is determined by an employee's POS end date being more than 2 months from the report date, i.e. for August data (compiled in September), employees who have a POS end date of 30 June and prior are excluded.</li> <li>&gt; Performance reviews with a future date are excluded from the calculation.</li> <li>&gt; Absent on unpaid leave greater than 20 days for contracted staff excluded from denominator. 20 days represents working days or 4 weeks.</li> <li>&gt; Casual staff who have not been paid greater than 28 days excluded from denominator. 28 days represents 2 pay cycles, or 4 weeks.</li> <li>&gt; Indicator aligns with the Officer for the Commissioner of Public Sector Employment reporting metrics.</li> <li>&gt; This metric will be RAG rated and contribute to performance level assessment on a 6-monthly basis, with monthly data available via the workbooks.</li> </ul>
<b>Related Information:</b>	<ul style="list-style-type: none"> <li>&gt; <a href="#">Guideline of the Commissioner for Public Sector Employment: Performance Management and Development</a></li> <li>&gt; <a href="#">Service Agreements 2024-25 SA Health</a></li> </ul>

## Aboriginal or Torres Strait Islander Workforce Participation Rate

### Identifying and definitional attributes

Short Name:	Indigenous Workforce Rate
Tier:	Tier 2
KPI ID:	PC-WF-T2-1
Description:	Percentage (%) of current employees who identify as being of Aboriginal or Torres Strait Islander origin.
Computation:	Employee headcount who identified as being of Aboriginal and/or Torres Strait Islander origin, in receipt of a pay summary that includes the last pay day of the month divided by total employee headcount, in receipt of a pay summary that includes the last pay day of the month. Represented as a percentage.
Numerator:	Employee headcount who identified as being of Aboriginal and/or Torres Strait Islander origin, in receipt of a pay summary that includes the last pay day of the month.
Denominator:	Employee headcount, in receipt of a pay summary that includes the last pay day of the month.

### More Information

Scope:	<p>Data is reported for</p> <ul style="list-style-type: none"> <li>CALHN: TEQH, RAH</li> <li>NALHN: LMHS, MH</li> <li>SALHN: FMC, RGH, NHS</li> <li>WCHN: WCH</li> <li>BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>EFNLHN: Port Lincoln, Ceduna, EFN Other</li> <li>FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>LCLHN: Mount Gambier, LC Other</li> <li>RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>YNLHN: Port Pirie, Northern Yorke (Wallaroo), YN Other</li> <li>BHFLHN: Rural Support Service</li> <li>South Australian Ambulance Service</li> <li>State-wide Clinical Support Services</li> <li>Drug and Alcohol Services South Australia</li> <li>Department for Health and Wellbeing</li> <li>Commission on Excellence &amp; Innovation in Health</li> <li>Wellbeing SA</li> <li>Rural Support Service</li> <li>State Total</li> </ul>														
Benchmarks:	<table border="1"> <tr> <td>Metro Target</td> <td>≥3%</td> <td>2.5%</td> <td>2%</td> <td>1.5%</td> <td>1%</td> <td>&lt;1.0%</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>2</td> <td>1.5</td> <td>1</td> <td>0.5</td> <td>0</td> </tr> </table>	Metro Target	≥3%	2.5%	2%	1.5%	1%	<1.0%	Performance Score	2.5	2	1.5	1	0.5	0
Metro Target	≥3%	2.5%	2%	1.5%	1%	<1.0%									
Performance Score	2.5	2	1.5	1	0.5	0									
Representation Class:	Percentage (%)														
Data Type:	Real														
Unit of Measure:	Person														
Data Source:	SHARP														
Frequency of Reporting:	Monthly (i.e., July data reported in August)														
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>														

## Staff Turnover Rate

### Identifying and definitional attributes

Short Name:	Turnover Rate
Tier:	Tier 2
KPI ID:	PC-WF-T2-2
Description:	Percentage (%) of Staff Turnover Based on average total employee headcount and ongoing terminations for the previous 12 months
Computation:	$(\text{Numerator}/\text{Denominator}) \times 100$ .
Numerator:	Count (#) of Ongoing Terminations for the reporting month
Denominator:	Average No of Staff (Headcount) for the previous 12 month period

### More Information

Scope:	<p>Data is reported for:</p> <ul style="list-style-type: none"> <li>CALHN: RAH, TEQH</li> <li>SALHN: FMC, NHS, RGH</li> <li>NALHN: LMHS, MH</li> <li>WCHN: WCH</li> <li>RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>LCLHN: Mount Gambier, LC Other</li> <li>FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>EFNLHN: Port Lincoln, Ceduna, EFN Other</li> <li>YNLHN: Port Pirie, Northern Yorke (Wallaroo), YN Other</li> <li>BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>BHFLHN: Rural Support Service</li> <li>South Australian Ambulance Service</li> <li>State-wide Clinical Support Services</li> <li>Drug and Alcohol Services South Australia</li> <li>Department for Health and Wellbeing</li> <li>Commission on Excellence &amp; Innovation in Health</li> <li>Wellbeing SA</li> <li>Rural Support Service</li> <li>State Total</li> </ul>						
Benchmarks:	Target	≤4%	5%	6%	7%	8%	>8%
	Performance Score	2.5	2	1.5	1	0.5	0
Representation Class:	Percentage (%)						
Data Type:	Real						

## OFFICIAL

Unit of Measure:	Person
Data Source:	C21 - based on LHN and Medical, Nursing, Allied Health & All Other
Frequency of Reporting:	Monthly (i.e., July data reported in August)
Notes:	<ul style="list-style-type: none"><li>&gt; Average No of Staff excludes:<ul style="list-style-type: none"><li>• Non-employees</li><li>• Board &amp; Committee Members</li><li>• Clinical Academics</li><li>• Sessional employees</li></ul></li><li>&gt; Dependant on notification to and SSSA processing of terminations within a timely manner</li></ul> Note data may include ended positions with the active employee count
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>

## Productive Overtime Hours Rate

### Identifying and definitional attributes

Short Name:	Overtime Hours
Tier:	Tier 2
KPI ID:	PC-WF-T2-3
Description:	Percentage (%) of Productive Overtime Hours as proportion of total productive hrs.
Computation:	(Numerator/Denominator)*100.
Numerator:	Count (#) of Productive Overtime paid hours
Denominator:	Count (#) of Productive Ordinary paid hours

### More Information

Scope:	Data is reported for: <ul style="list-style-type: none"> <li>CALHN: RAH, TEQH</li> <li>SALHN: FMC, NHS, RGH</li> <li>NALHN: LMHS, MH</li> <li>WCHN: WCH</li> <li>RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>LCLHN: Mount Gambier, LC Other</li> <li>FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>EFNLHN: Port Lincoln, Ceduna, EFN Other</li> <li>YNLHN: Port Pirie, Northern Yorke (Wallaroo), YN Other</li> <li>BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>BHFLHN: Rural Support Service</li> <li>South Australian Ambulance Service</li> <li>State-wide Clinical Support Services</li> <li>Drug and Alcohol Services South Australia</li> <li>Department for Health and Wellbeing</li> <li>Commission on Excellence &amp; Innovation in Health</li> <li>Wellbeing SA</li> <li>Rural Support Service</li> <li>State Total</li> </ul>														
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≤6%</td> <td>7%</td> <td>8%</td> <td>9%</td> <td>10%</td> <td>&gt;10%</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>2</td> <td>1.5</td> <td>1</td> <td>0.5</td> <td>0</td> </tr> </table>	Target	≤6%	7%	8%	9%	10%	>10%	Performance Score	2.5	2	1.5	1	0.5	0
Target	≤6%	7%	8%	9%	10%	>10%									
Performance Score	2.5	2	1.5	1	0.5	0									
Representation Class:	Percentage (%)														
Data Type:	Real														
Unit of Measure:	Person														
Data Source:	C21 - based on LHN and Medical, Nursing, Allied Health & All Other														

OFFICIAL

Frequency of Reporting:	Monthly (i.e., July data reported in August)
Notes:	<ul style="list-style-type: none"><li>&gt; Average No of Staff excludes:<ul style="list-style-type: none"><li>• Non-employees</li><li>• Board &amp; Committee Members</li><li>• Clinical Academics</li><li>• Sessional employees</li></ul></li><li>&gt; Dependant on notification to and SSSA processing of terminations within a timely manner Note data may include ended positions with the active employee count</li></ul>
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>



## Sick and Carers Leave Rate

### Identifying and definitional attributes

Short Name:	Sick/Carers Leave Rate
Tier:	Tier 2
KPI ID:	PC-WF-T2-4
Description:	Percentage (%) of Unproductive Leave Paid Hours as proportion of Total Productive Ordinary Hours.
Computation:	(Numerator/Denominator)*100.
Numerator:	Count (#) of Sick and Carers Leave paid hours.
Denominator:	Count (#) of Productive Ordinary paid hours.

### More Information

Scope:	<p>Data is reported for:</p> <ul style="list-style-type: none"> <li>CALHN: RAH, TEQH</li> <li>SALHN: FMC, NHS, RGH</li> <li>NALHN: LMHS, MH</li> <li>WCHN: WCH</li> <li>RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>LCLHN: Mount Gambier, LC Other</li> <li>FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>EFNLHN: Port Lincoln, Ceduna, EFN Other</li> <li>YNLHN: Port Pirie, Northern Yorke (Wallaroo), YN Other</li> <li>BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>BHFLHN: Rural Support Service</li> <li>South Australian Ambulance Service</li> <li>State-wide Clinical Support Services</li> <li>Drug and Alcohol Services South Australia</li> <li>Department for Health and Wellbeing</li> <li>Commission on Excellence &amp; Innovation in Health</li> <li>Wellbeing SA</li> <li>Rural Support Service</li> <li>State Total</li> </ul>											
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≤4.5%</td> <td>&gt;4.5% and ≤5.5%</td> <td>&gt;5.5%</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>1.25</td> <td>0</td> </tr> </table>	Target	≤4.5%	>4.5% and ≤5.5%	>5.5%	Performance Score	2.5	1.25	0			
Target	≤4.5%	>4.5% and ≤5.5%	>5.5%									
Performance Score	2.5	1.25	0									
Representation Class:	Percentage (%)											
Data Type:	Real											
Unit of Measure:	Hour											
Data Source:	SHARP - based on the RIAT Financial structure for LHN and Major Hospital via GL Seg2 Unit											

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Frequency of Reporting:	Monthly (i.e., July data reported in August)
Notes:	<ul style="list-style-type: none"><li>&gt; Includes the following allowance code types:<ul style="list-style-type: none"><li>• SIC</li><li>• PERS</li><li>• FAML</li><li>• SICW</li><li>• PCPW</li></ul></li><li>&gt; Sick and Carers Leave includes:<ul style="list-style-type: none"><li>• Total number of hours paid identified as FTE Category UL (Unproductive Paid Leave) Inclusive of Allowance Codes SIC, PERS, FAML, SICW &amp; PCPW</li></ul></li><li>&gt; Productive Ordinary Paid Hours includes:<ul style="list-style-type: none"><li>• Allowance Codes with an FTE Category of PO Productive Ordinary - normal hours of work</li></ul></li><li>&gt; Data Disaggregations are required for the following Operational Groups:<ul style="list-style-type: none"><li>• Medical Officers</li><li>• Nurses/Midwives</li><li>• Allied Health Professionals</li><li>• Other</li></ul></li></ul>
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>

## New Workplace Injury Claims

### Identifying and definitional attributes

Short Name:	New Workplace Injury Claims
Tier:	Tier 2
KPI ID:	PC-WF-T2-5
Description:	Count (#) of new workplace injury claims reported.
Computation:	Count

### More Information

Scope:	<p>Data is reported for:</p> <ul style="list-style-type: none"> <li>&gt; CALHN: TEQH, RAH</li> <li>&gt; SALHN: FMC, RGH, NHS</li> <li>&gt; NALHN: LMHS, MH</li> <li>&gt; WCHN: WCH</li> <li>&gt; RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>&gt; LCLHN: Mount Gambier, LC Other</li> <li>&gt; FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>&gt; EFNLHN: Port Lincoln, EFN Other</li> <li>&gt; YNLHN: Port Pirie, YN Other</li> <li>&gt; BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>&gt; South Australian Ambulance Service</li> <li>&gt; Statewide Clinical Support Services</li> <li>&gt; Drug and Alcohol Services South Australia</li> <li>&gt; Department for Health and Wellbeing</li> <li>&gt; Commission on Excellence &amp; Innovation in Health</li> <li>&gt; Wellbeing SA</li> <li>&gt; State Total</li> </ul>										
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≤8.5</td> <td>&gt;8.5 and ≤9.0</td> <td>&gt;9.0</td> </tr> <tr> <td>Performance Score</td> <td>2.5</td> <td>1.25</td> <td>0</td> </tr> </table>	Target	≤8.5	>8.5 and ≤9.0	>9.0	Performance Score	2.5	1.25	0		
Target	≤8.5	>8.5 and ≤9.0	>9.0								
Performance Score	2.5	1.25	0								
Representation Class:	Count (#)										
Data Type:	Real										
Unit of Measure:	Claims										
Data Source:	Self-Insurance Management System (SIMS)										
Frequency of Reporting:	6-monthly (i.e., July to December data reported in January)										

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<b>Notes:</b>	<ul style="list-style-type: none"><li>&gt; This metric will be RAG rated and contribute to performance level assessment on a 6-monthly basis, with monthly data available via the workbooks.</li><li>&gt; The number of new workplace injury claims is calculated as the total number of new claims registered in the period, regardless of date of injury, determination or any other factor. This includes all claims whether accepted, rejected, pending determination or withdrawn. Every new claim has a 'Date Registered' date that does not change.</li></ul>
<b>Related Information:</b>	<ul style="list-style-type: none"><li>&gt; South Australia's Strategic Plan Target 21: Greater Safety at Work. <a href="https://data.sa.gov.au/data/dataset/sasp-target-21-greater-safety-at-work">https://data.sa.gov.au/data/dataset/sasp-target-21-greater-safety-at-work</a></li><li>&gt; <a href="#">Service Agreements 2024-25 SA Health</a></li></ul>

## Gross Expenditure for Workplace Injury Claims

### Identifying and definitional attributes

Short Name:	Expenditure for workplace injury claims
Tier:	Monitor
KPI ID:	PC-WF-M-1
Description:	Gross workers compensation expenditure
Computation:	Gross workers compensation expenditure financial year to date

### More Information

Scope:	<p>Data is reported for:</p> <ul style="list-style-type: none"> <li>CALHN: TEQH, RAH</li> <li>SALHN: FMC, RGH, NHS</li> <li>NALHN: LMHS, MH</li> <li>WCHN: WCH</li> <li>RMCLHN: Riverland (Berri), Murray Bridge, RMC Other</li> <li>LCLHN: Mount Gambier, LC Other</li> <li>FUNLHN: Port Augusta, Whyalla, FUN Other</li> <li>EFNLHN: Port Lincoln, Ceduna, EFN Other</li> <li>YNLHN: Port Pirie, Northern Yorke (Wallaroo), YN Other</li> <li>BHFLHN: Gawler, South Coast, Mount Barker, BHF Other</li> <li>BHFLHN: Rural Support Service</li> <li>South Australian Ambulance Service</li> <li>State-wide Clinical Support Services</li> <li>Drug and Alcohol Services South Australia</li> <li>Department for Health and Wellbeing</li> <li>Commission on Excellence &amp; Innovation in Health</li> <li>Wellbeing SA</li> <li>Rural Support Service</li> <li>State Total</li> </ul>		
Benchmarks:	<table border="1"> <tr> <td>Target</td> <td>≤ previous year</td> </tr> </table> <p>Note: Benchmarks are a guide only as Monitor KPI do not form part of the performance assessment process</p>	Target	≤ previous year
Target	≤ previous year		
Representation Class:	Count (#)		
Data Type:	Real		
Unit of Measure:	Currency		
Data Source:	Self-Insurance Management System (SIMS)		
Frequency of Reporting:	Monthly (i.e., July data reported in August)		
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>		

## Number of Work Health and Safety Related Incidents Due to Challenging Behaviour in the Workplace

### Identifying and definitional attributes

Short Name:	WHS Incidents – Challenging Behaviour
Tier:	Monitor
KPI ID:	PC-WF-M-2
Description:	Count (#) of incidents occurring in the workplace due to challenging behaviour.
Computation:	Count (#) of work health and safety related incidents occurring in the reference period which are attributed to 'challenging behaviour'.

### More Information

Scope:	Data is reported for: > SAAS
Benchmarks:	N/A
Representation class:	Count
Data Type:	Real
Unit of Measure:	Person
Data Source:	SAAS Work Health Safety Information Management system
Frequency of Reporting:	Monthly (i.e. July data reported in August)
Related Information:	> <a href="#">Service Agreements 2024-25 SA Health</a>

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## For more information

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