

Performance Indicators



Chronic Conditions

Indicator	How is it measured?	Why was this indicator chosen?	Target
% of clients who reside in low socio-economic areas*	Through the Commissioned Services Reporting Portal. Specifically, it will be captured through the entry of the client's residential postcode. WA Primary Health Alliance will then use the postcode information to map to an ABS SEIFA decile. This approach was chosen because it delivers the greatest level of reliability in ascertaining socio-economic status.	A critical component of WA Primary Health Alliance's purpose is to ensure that the people most at risk of poor health have access to quality care, many of whom are of lower socio economic status. These indicators were chosen as there is overwhelming evidence that individuals from these cohorts are most at risk of poor health outcomes.	>50% clients residing in SEIFA deciles 1-3**
% Aboriginal clients	Through the Commissioned Services Reporting Portal. Specifically, it will be captured through the entry of the client's Aboriginal status.		No target set initially. Monitor for 12 months and re-evaluate target.
Clients had access to the service when they needed it	Wait time in days between referral and first service contact (or episode start date, if service contact date cannot be supplied).		No target set initially. Monitor for 12 months and re-evaluate target.
% clients reporting that their individuality and values were respected (e.g. culture, faith, gender identity)	Captured through data entered into the Commissioned Services Reporting portal for Question 5 of Partners in Health or My Health My View: My health service providers respect me, my beliefs and culture. Measurement taken from instrument administered at conclusion of treatment.	Understanding patients' views of their experiences is critical in optimising care, and Patient Experience is one of the five domains of the Quintuple Aim.	>80% of clients reporting 6-8/8 on Qu 5 of Partners in Health or My Health My View.
% of clients reporting they shared in decisions made about their health with their doctor/health worker	Captured through data entered into the Commissioned Services Reporting portal for Question 4 of Partners in Health or My Health My View: My doctor, or health worker and I listen and talk well together. Measurement taken from instrument administered at conclusion of treatment.		>80% of clients reporting 6-8/8 on Qu 4 of Partners in Health or My Health My View.

Improved health equity

Improved patient experience

*A client is considered to reside in a low socio-economic area if their postcode of residence falls in the lower 3 deciles of socio-economic advantage and disadvantage, as per the Australian Bureau of Statistics definition of people's access to material and social resources, and their ability to participate in society.

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Indicator	How is it measured?	Why was this indicator chosen?	Target	
Improved health outcomes	% of clients who report improved ability to self-manage their condition	Captured through data entered into the Commissioned Services Reporting portal for Questions 3, 4, 6, 8 and 12 of Partners in Health or My Health My View. A sum of items at the end of treatment larger than the sum at the start indicates improved ability to self-manage their condition.	Health Outcomes is one of the five domains of the Quintuple Aim, and understanding patients' health outcomes from the services they receive is critical in optimising their care. Moreover, it helps ensure WA Primary Health Alliance is appropriately investing its funds in a way that positively impacts health.	>50% of clients report improved ability to self-manage their condition at the end of treatment.
	Outcome compliance	Captured through completed clinical evaluation (Partners in Health or My Health My View) as submitted to the Commissioned Services Reporting Portal.	Standardised outcome measures, collected at the first and last occasions of service at a minimum, provide the means for assessing effectiveness of services in improving client's health outcomes.	>70% of completed episodes of care have recorded valid outcome measures at episode start and episode end.
Improved cost effectiveness	Average cost per episode	Using episode data submitted to the Commissioned Services Reporting Portal, combined with contract financials from WAPHA finance: contract funding divided by number of episodes	To better measure the impact of WA Primary Health Alliance's finite funding.	No targets – included for reporting and monitoring.
	Total number of episodes	Using episode data from the Commissioned Services Reporting Portal: total number of episodes.		

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