

Kia ora Richard

Thank you for agreeing to review and advise on appropriate measures for the Health Targets including balancing measures. Health NZ teams have developed intervention logic models (similar to a driver diagram), implementation plans setting out intended actions, and 'measure sets' for each of the targets: SSED, ESPI2, ESPI5, FCT and immunisation at age 2yrs.

The Minister has requested a paper on balancing measures for the targets. The measure sets that have been developed are focused on process measures (positive and negative impact including outcomes), which seems to Dale and me to miss the point of the targets.

Some ideas:

- SSED I have attached a couple of papers from Peter Jones which you are no doubt familiar with he has explored the impact of SSED on quality relatively extensively and there are a number of possible measures we could/should include eg mortality (broken down in one study to mortality in ED/acute admissions/elective admissions/ED discharges/ward discharges; but not by self discharges and triage category); time to treatment for STEMI; antibiotics for severe sepsis; analgesia for moderate or severe pain; theatre for #NOF; theatre for
- ESPI 2&5 morbidity (disease progression & admissions with acute exacerbations); QoL (PROMS another reason why we need to measure systematically); mortality
- FCT late presentations (diagnosis following ED admission data recently published by Te Aho); life expectancy/mortality

▼ Measure sets including balancing measures for Health Targets - Message (HTML)

Immunisation – nos & rates of preventable disease; outbreaks

I have attached the ILM, implementation plan (high level – there is a detailed one too), and measure set for SSED. I'll send the same docs for the other targets in instalments to avoid a firewall!

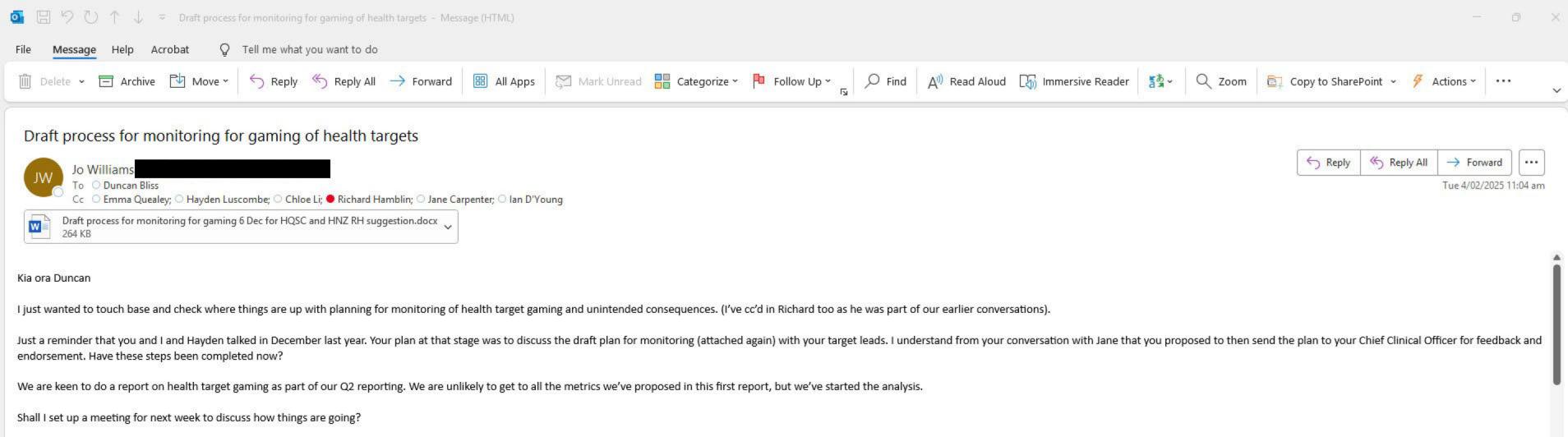
Really appreciate your help

Penny

Penny Andrew (she/her)

Director Te Whatu Ora Improve | Kaiwhakahaere





Regards

Jo Williams

Principal Advisor

Thanks very much

Regulation and Monitoring

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