

186: DEVELOPMENT OF HOSPITAL WIDE PERFORMANCE INDICATOR PROGRAMME

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Objective:

The objective of the programme is to establish a system for ensuring that safe and effective medical practise is provided for patients and staff at St James's Hospital, Ireland.

Method:

Framework Progression: In 2001, clinicians and managers were tasked with the objective of developing a framework whereby clinical/non clinical performance could be readily identified/measured in a multidisciplinary, participatory non-statutory environment led by the Deputy Chief Executive and supported by the Quality Initiative Officer. It was agreed that the best way forward was to focus on performance rather than analysis of process.

Development of Programme: Each Performance Indicator has been designed to assist in the ongoing assessment of clinical effectiveness and appropriateness. Whilst not exact standards, these act as flags, which alert to possible problems and / or opportunities for improvement.

Criteria for Selection: Indicators have been selected based on key aspects of the service which is deemed to be important to speciality groups / individual clinicians, affects the majority of patients/staff or is currently unsatisfactory/problematic.

Indicator Type / Category: A total 62 Indicators are currently tracked within four broad categories,

- Hospital Wide Clinical Indicator (10), eg: Unplanned Readmission within 28 days of discharge
- Speciality Specific Clinical Indicator (12), eg: Abdominal Aortic Aneurysm Resection Surgery
- Operational Performance Indicator (25), eg: Elective Inpatient Waiting List
- Non Clinical Practise / Process Indicator (15), eg: Staff trained in Moving & Handling Techniques.

Promulgation: Performance Indicator reports are compiled and submitted to the peer review group / departments / individual clinicians.

Continuous Quality Improvement: In each instance a continuous quality initiative team has been established to validate performance and where possible institute changes necessary to further enhance performance.

Results:

Benefits of the Performance Indicator Programme: The Hospital is now able to track performance at corporate / departmental / individual clinician level in a safe non-advisoral manner.

The Programme Indicator Programme has led to:

1. improved performance within specific services through development of initiatives implemented by continuous quality improvement teams, results of initiatives include:
 - Hospital Wide Clinical Indicator – Outpatient New/Follow-up Attendance Ratio
 - 2001 / 2002 – 11% reduction in new/follow-up attendance ratio achieved.
 - Operational Performance Indicators
 - Elective inpatient waiting list CQI initiative
 - target of 0 patients waiting greater than 1 year achieved – December 2002.
 - % of reattendances to Emergency Department
 - 2001 / 2002 – 3% reduction secured.
 - Length of wait before being transferred to Hospice care
 - 23% reduction in average waiting time for transfer secured.
 - Availability of Patient's Medical Record for an Outpatient Appointment
 - 2002 – target of 99% availability achieved.
2. ability to comprehend the complexity of presenting patient population has led to development of informed joint Hospital and Community initiatives, for example identification of reasons as to why medical patients are coming back to hospital within 28 days of discharge.
3. creation of a comprehensive database facilitating year on year trend analysis and review of changes in clinical performance for specific periods.
4. development of an initial benchmarking exercise with a similar Hospital in the UK has facilitated the progression of a wider international performance indicator benchmarking initiative, led by St James's Hospital. Agreement to participate in this exercise has been reached by 8 similar hospitals in the UK, Holland, Belgium, Malta and Australia.

Main difficulty encountered: Initial reservations expressed by clinicians / staff have been overcome through the development of the programme in a learning, supportive non-advisoral manner.

Conclusions:

The Hospital now has a valid method of measuring performance in a robust manner and the opportunity to compare and contrast clinical and non clinical performance, outcomes and supporting processes with similar hospitals.