Key Performance Indicators in ER What & How?



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Our Objective in ED?

 To solve the patients' health problems (efficacy) in the best manner (quality) and in the most economic way possible (efficiency).

 Performance = Extent to which set objectives are accomplished

What is KPIs?

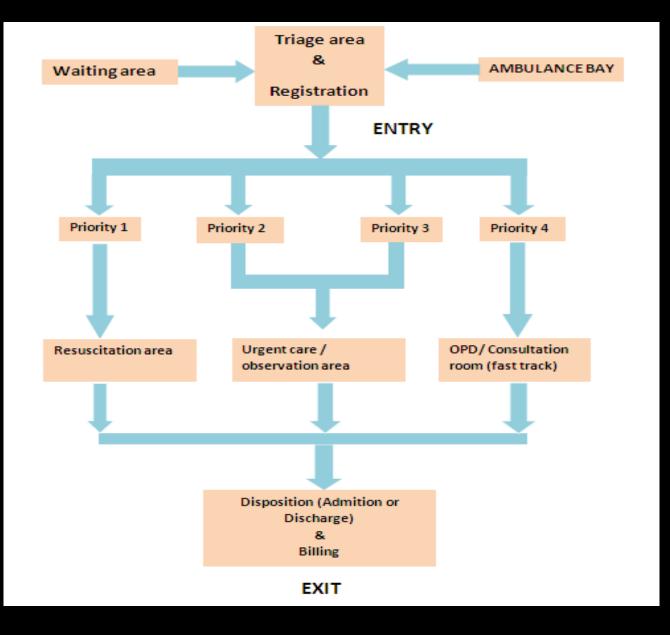
• Key Performance Indicators (KPIs) help to systematically monitor, evaluate, and continuously improve service performance

• "Signposts" in the Journey

Well designed KPI's?

- Establish baseline information
- Set performance standards and targets to motivate continuous improvement
- Measure and report improvements over time
- Compare performance across geographic locations
- Benchmark performance against regional and international peers or norms

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OUTCOME PARAMETERS

TRIAGE Interval

Time from patient arrival to time when triage is completed for a particular category of patient

Left Before being seen

Total no. of Pat. who leave ED before examination / Tot. no of patients presented to the ED during time of study X 100

Blood TAT

Total turn around time / Total number of blood & blood components is used

Pain Assess

Pat. with documented pain assessment using a validated pain score / Total No. of pt presenting with pain X 100

Initial Assess

Sum of time taken for the assessment / Total number of patients in emergency

Imaging TAT

Avg. time taken for result of an imaging modality to be available after the test is ordered.

Lab TAT

Avg. time taken for result of a lab test to be available after the test is ordered.

Pres. Error

Total no. of prescription errors/ No. of total prescriptions X 1000

Disp. Error

Tot. no of medication dispensing errors / No of total prescriptions X 1000.

LOS in ED

Tot. length of stay (in hrs) of all pts. in ED / No of pt visiting ED during that particular period.

Discharge Time

Sum of time taken for discharge / No of Patients Discharged.

LAMA

Total no. of Pat. who LAMA / Tot. No of Pat. who presented to the ED during time of study X 100.

Pt Satisfaction

Avg. Score achieved / Max Possible score X 100

Nurse Pt. Ratio

No. of Nursing Staff / No of beds (each Shift)

Return to ER

No. of returns to ER with in 72 hrs with similar presenting complaints / No of pat. Who have been discharged from ED.

Equip. Down time

Sum of down time for all critical equipment in hrs in a month.

PEP

Tot. no. of employees who were provided pre exposure prophylaxis / No of employees who were due to be provided Pre exposure prophylaxis X 100.

Fall

No. of patients who fall from beds/ trolleys while in ED / Tot. No of Patients attending the ED X 100.

Proportion of Pat. with Acute Chest Pain - ECG

No. of pat. With chest pain who got their ECGs within 10 min of arrival / Tot. No of Patients with chest pain where an ECG was done X 100.

Proportion of patients with ST¹- Thrombolytics

No of Pat. with STEMI who got thrombolytics within 30 min of arrival / Tot. no of Pat. who received thrombolytics for STEMI X 100.

Pain Mgt- Analgesic

1. Time taken to administer an analgesic agent after arrival

Pain Mgt – Non analgesic

2. % of pat with pain not administered analgesic.
a. No of pat. with pain who were not administered an analgesic in ED / Total No of Patients with pain X 100.

Proportion of Patients With STEMI - PCI

No. of pat. with STEMI where door to device time of 90 min was achieved / Total no of STEMI patients who underwent PCI X100.

CT Scan following Head Injury

Avg. time taken for getting a CT head in pts with head injury with GCS <15.

App. of 3hr Sepsis bundle - Severe sepsis & Septic Shock

No of Pat. with severe sepsis or septic shock where blood culture was taken within 3hrs of arrival to ED & before administering antibiotics / Tot. no of patients with severe sepsis or septic shock where blood cultures were taken in the ED X 100.

Urine Pregnancy Test

No of UPT performed in women in reproductive age group (pain abdomen or bleeding per vagina) / Tot No of women in reproductive age group who present with pain abdomen or bleeding per vagina X 100.

Proportion of patients with eye emergencies

No of Patients in whom visual acuity was checked before performing any procedure / Tot. no of patients attending the eye emergency X 100.

Time taken for Conducting LSCS after decision in ED

Mean of time taken for Cesarean section to perform it is taken in ED.

Spine Immobilization in trauma patients

No of pat. with suspected blunt trauma in whom cervical immobilization was done / Total no of Patients with blunt trauma above clavicle X 100.

Complication Occurring in Emergency Delivery

- a. No of Pt developing postpartum hemorrhage more than 500ml after emergency vaginal delivery / Tot. no of emergency vaginal deliveries done X 100.
- b. No of Patients developing 3rd degree tear following emergency vaginal delivery / Tot. no of emergency vaginal deliveries conducted X 100.

Neurovascular Status Documentation in extremity injuries

No. of patients with extremity injury in whom neurovascular status is documented / Total no. of patients with extremity injuries X 100.

Proportion of Patients with Acute stroke- Investigation

Number of patients with suspected acute stroke where ECG, random blood sugar and CT scan was done within 25 minutes of arrival / Total number of patients with suspected stroke X 100.

Focused assessment with Ultrasound in trauma (FAST)

Time taken from arrival to ED to performing FAST in patients with acute trauma

Trans. Reactions

No. of transfusion reactions / No of Units transfused X 100.

CLABSI

No of Central line associated blood stream infection in a month / No of central line inserted in ED in that month.

Mortality Rate

No. of deaths / No of discharges and deaths X 100

Maternal Mortality Rate

Tot. no. of maternal deaths / Total no of deaths X 100.

Infant Mortality Rate

Total no of Infant deaths / Tot. no of deaths X 100.

Perinatal Mortality

No. of stillbirths and deaths in the first week of life / Total live births.

Thank you