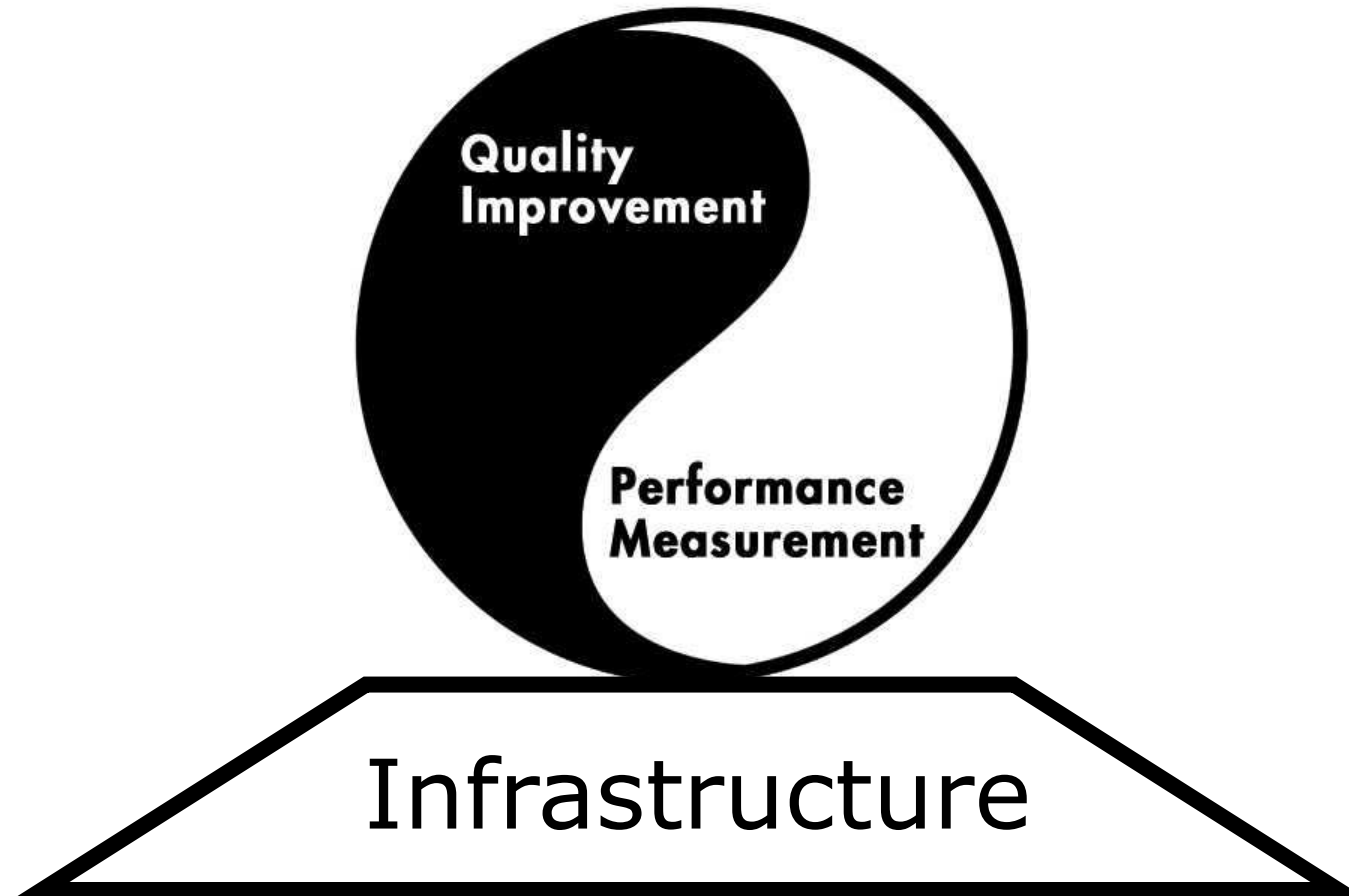


**MEASURING AND
IMPROVING
PERFORMANCE**

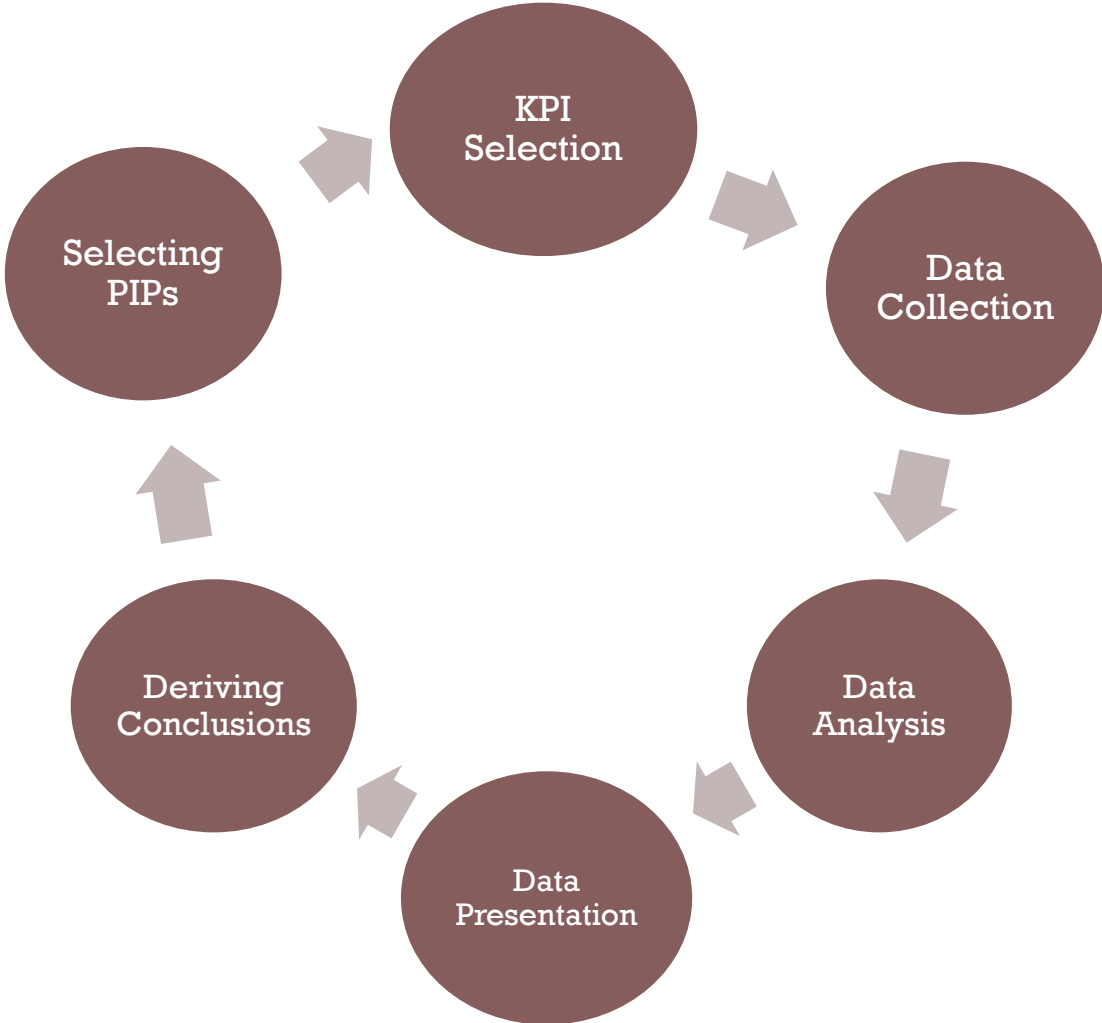
OBJECTIVES

- Understand Key Performance Indicators (KPIs)..... Why, What, How
- Understand the Performance Measurement and Improvement Cycle
- KPI Selection
- Understand the variety of sources of data
- Interpret data graphs and draw conclusions
- Understand how data displays facilitate decision making

LINKING ROBUST PERFORMANCE MONITORING AND PERFORMANCE IMPROVEMENT



PERFORMANCE MEASUREMENT AND IMPROVEMENT CYCLE



MEASURE SELECTION

- Alignment with Organization's Strategic Objectives
- Based on Leadership Prioritization Criteria
- Establishes baseline for improvement

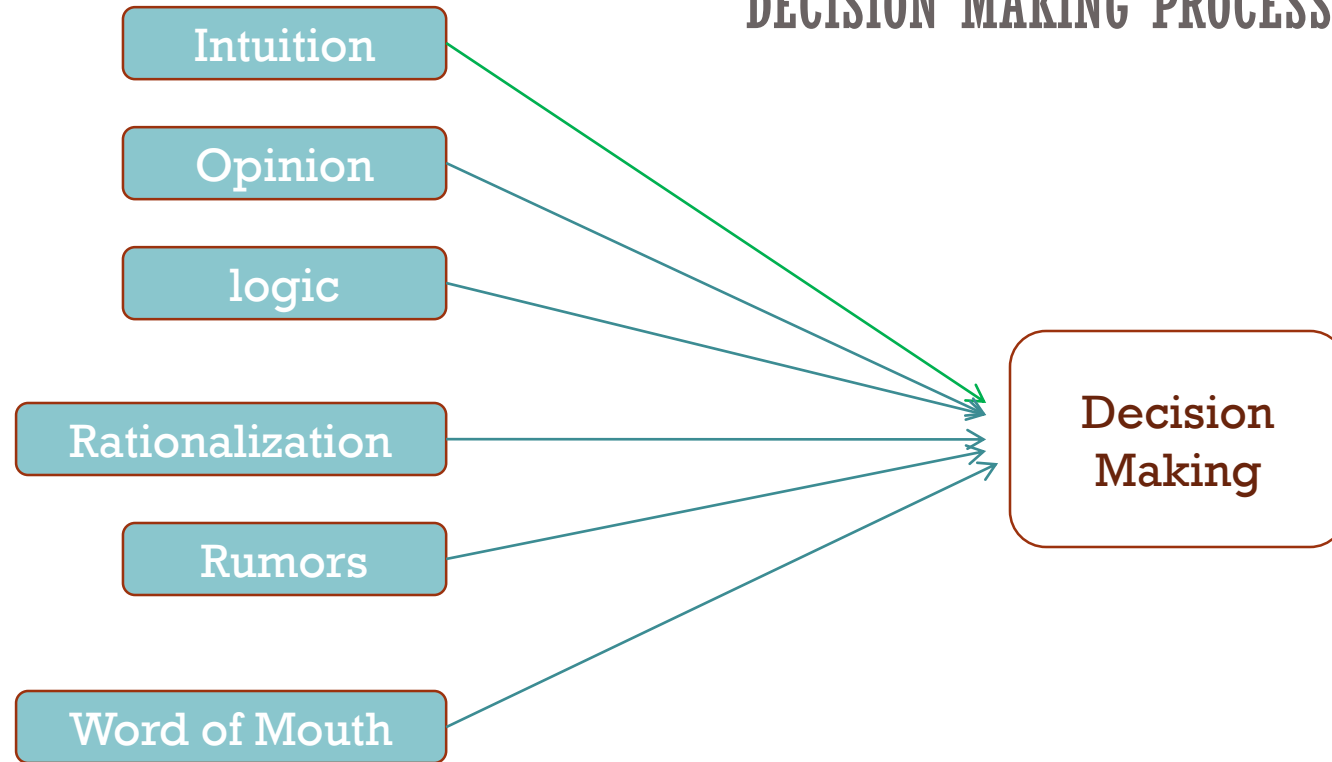
PROCESS VS. OUTCOME MEASURES

- Process measure is a measure of how much or how well
- Outcome measure is a measure which addresses if anyone is better off.
- Because outcome measures often vary considerably due to patient specific factors, it often is more beneficial to measure the process that most influenced the outcome rather than the outcome itself

SETTING PERFORMANCE TARGETS

- External Benchmarks
- Internal: related to your organization's strategic goals and mission, your performance improvement priorities, and your teams project goal
 - you must set the goal for where you want to go based on where you have been
 - keep your goals realistic, and you must balance the need for improvement against what is feasible
 - never set a performance goal simply because a benchmarking partner has set the same one

DECISION MAKING PROCESSES



**Decision Making: Traditional Model
(Data Deficient)**

EXAMPLES OF DATA SOURCES FOR PATIENT SAFETY

- Agency for Healthcare Research and Quality (AHRQ)
- Veterans Affairs National Center for Patient Safety (NCPS)
- CMS Hospital compare (Patient Safety Indicators, HCAHPS)
- Occupational Health Safety Administration (OSHA)
- World Health Organization (WHO)
- Saudi Food and Drug Organization
- The Joint Commission Sentinel events
- Other

EXAMPLES OF INTERNAL HOSPITAL DATA SOURCES FOR PATIENT SAFETY

- Safety event data
- Survey results
- Medication safety events
- Sentinel event trends
- Complaints & grievances and compliments
- Claims
- Financial losses
- Dashboards/scorecards
- Safety huddles, walk-rounds
- Standard operating procedures
- Patient safety culture surveys

DATA REPOSITORIES

- Questions about data management
 - Who oversees?
 - Central vs. decentralized?
 - Is there an internal data integrity or validation processes?
 - Is data “locked” after a period of time once validated?
 - How to manage qualitative vs. quantitative information

SCORECARDS AND DASHBOARDS

- Scorecards:
 - A collection of key performance indicators together with their associated performance targets
- Dashboards:
 - A container for a related group of items and reports, sometimes including scorecards

SCORECARD EXAMPLE

Goal	Target	Owner	Review Frequency	Aug-16	Sep-16	Oct-16	YTD 2016
Finance							
Patient Information Accuracy Rate	99%	Paul	Monthly	99%	100%	97%	100%
Denials and Write-offs as % of Overall Charges	4%	Sarah	Monthly	5%	4%	3%	5%
Number of Days Charged in A/R	5	Sarah	Monthly	2	6	1	4
People							
Absenteeism Hours	30	Joseph	Monthly	15	20	30	22
Acceptable Overtime Hours	7%	Joseph	Monthly	8%	4%	5%	6%
Staffing: Open Positions	3	Jennifer	Monthly	2	1	1	1
Clinical							
Hospital-Wide 30 Day Readmissions	10.0%	Mark	Monthly	13.0%	11.0%	9.8%	12.2%
Heart Failure Mortality	13.2%	Mark	Monthly	12.7%	11.0%	9.0%	10.7%
Inpatient LOS (Days)	3	Catherine	Monthly	2.7%	2.3%	2.6%	2.5%

DASHBOARD EXAMPLE

