

Quality indicators in Landspítali Hospital

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Organisation: Landspítali University Hospital Iceland

Country: Iceland

Level of government: Central government

Sector: Health

Type: Communication, Data, Digital

Launched in: 2012

Overall development time: 4 month(s)

Link to the innovation's website

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Description

Continually improving the quality of care and the security of staff and patients is the hallmark of Landspítali University Hospital's Emergency Department. Implementing real-time quality indicators is a new way for administrators and staff at the emergency department to track various quality, safety and operational indicators. Among the indicators tracked are waiting times, numbers of patients, service times, admittance rates and blood sample hemolytic rates.

Why the innovation was developed

- To assist with process redesign
 - To improve patient processes
 - To improve patient and staff safety
 - To improve administrative efforts
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Objectives

Develop staff capacity, Enhance transparency, Improve effectiveness, Improve service quality, Improve user satisfaction

- To gather and display key quality, procedural and safety data in real time in an accessible and user friendly manner.
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Main beneficiaries

General population, Government staff

- Patients of the emergency department in Landspítali.
- Staff in the Emergency department in Landspítali.
- Administrators of the Emergency department in Landspítali.
- Any organisation in need of daily real time operational, safety or quality data.

Results

Efficiency

- The indicators mean that challenges and problems in the hospital's daily operations are clearly highlighted which means that they can be promptly dealt with.
 - Improvements in terms of cost efficiency have not been evaluated.
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Effectiveness

- The indicators allow for the continuous monitoring of quality in single procedures.
 - They have enabled us to maintain improvements in hospital processes.
 - The reduction in defects in blood samples (from 12% to 3%) has been maintained for 18 months due to the use of the indicators for continuous monitoring of blood sample quality.
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Service quality

Accessibility:

- The indicators allow us to continuously monitor time to triage.
- Allow us to continuously monitor time from door to doctor.
- Allow us to continuously monitor time of decision to admit until time admitted.
- Allow us to continuously monitor length of stay for patients.
- Many more similar service quality improvements aided by the real time indicators.

Responsiveness:

- The realtime indicators instantly show where within our service processes are overloaded or compromised allowing us to allocate resources correctly to solve the issue before problems escalate. For example if a delay from door to triage is observed, a third triage nurse is allocated to triage to solve the issue.
- Similarly other resources are shifted in response to the trends or stressors shown by the indicators.

Reliability:

- As mentioned, key processes are made very visible and thus we are able to increase quality and reliability of service.
 - If time from door to doctor rises above acceptable limits, we will respond accordingly for instance by re-triaging unseen patients.
 - Having continuous monitoring of the quality of blood samples has been extremely helpful. Each instance where blood samples have to be redrawn due to hemolysis adds approximately 90 minutes to the length of stay for that patient.
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Other improvements

Development

Design

The idea to ask for a data display system in real time came from the Chief Executive of the Emergency Services. The idea to display the data as a dashboard came from the Landspítali Information Technology department and was developed by them in collaboration with the administrators in the Emergency Department.

Testing

- Direct and timed observation of indicators versus environment in the Emergency Department on site.
 - Data analysis, retrospective comparisons.
 - Through discussion, staff concerns have been mitigated.
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Implementation

Tools used:

- Strategic goal setting.
- Information Communication Technology tools.
- Brainstorming.

Resources used:

- Staff.
 - General budget.
 - Monitors.
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Diffusion

- The project and its results (i.e. the quality indicators) have been published and discussed in the hospital during staff and administrative meetings.
 - This has led to great interest. Over 20 new dashboards for real time quality, safety and operational indicators are now being developed for other wards and units within our hospital.
 - The project has also been shared with members of parliament, foreign consultants and leaders of quality improvements both in Iceland and outside of Iceland. In all cases it has been very well received.
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Challenges and solutions

- Adjusting indicators to the observed environment.
- Adjusting levels within the indicators according to the observed environment.
- Identifying the best combination of indicators.

Lessons Learned

Lessons Learned

- Real-time indicators presented in a visibly accessible manner and incorporated into the daily operations of an organisation can be invaluable to quality and operational process improvement.
 - The way we have implemented the indicators into our organisation is adaptable to any environment, anywhere.
 - A key component to successful implementation of real-time indicators is according to our experience, being selective and precise on what you wish to monitor.
 - Monitoring the 'wrong' thing might affect the organisation more negatively than not monitoring the processes at all.
 - Observing and re-evaluating the indicators according to precision, sensitivity and reliability and comparing the information displayed to the actual surroundings perceived by a trained eye is very important.
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Conditions for success

- Information Technology support.
- Culture of continuous improvement.

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