

QPS Benchmarking Report Day Hospital

Quarter 2 Oct-Dec 2022

Eastern Endoscopy Centre



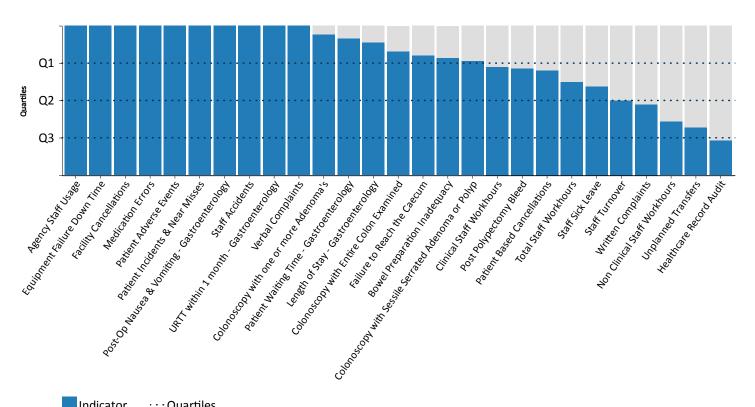
QPS Benchmarking 306A Crown Street Wollongong, NSW Australia P: +61 242 295 880 E: office@qpsbenchmarking.com W: www.qpsbenchmarking.com

Result Comments

1c.S1.11 - Unplanned Transfers							
Gail Bogiatzis (Data Entry) – 13/01/2023							
Persistent chest pain post procedure- investigated at Redlands Hospital no cause found.							
2.2b.S1.11 - Failure to Reach the Caecum							
Gail Bogiatzis (Data Entry) – 13/01/2023							
Failure to reach caecum because of poor bowel prep. Patient rebooked and more prep solution given.							
2.2e.S1.11 - Colonoscopy with Sessile Serrated Adenoma or Polyp							
Gail Bogiatzis (Data Entry) – 13/01/2023							
This SPPR is still much higher than average rates for this type of polyp.							
3d.S1.14 - Written Complaints							
Gail Bogiatzis (Data Entry) – 13/01/2023							
Patient had to ask for GF refreshment (coeliac Disease). Changed nursing duty to check if any dietary requirement.							
4b.S1.16 - Healthcare Record Audit							
Gail Bogiatzis (Data Entry) – 13/01/2023							
Areas that require improvement have been identified and passed on to staff and VMOs.							
7b.S1.8 - Total Staff Workhours							
QPS (Data Cleansing) – 14/01/2023							
Admissions have increased by an additional 43 patients, and the results demonstrate there is an average of 6.5 hours provided per patient.							

Eastern Endoscopy Centre

Quartile Ranking



Indicator · · · Quartiles

Code	Title	Result	Ranking	Quartile	Quartile Range
7h.S1.25	Agency Staff Usage	0.00	1st/36	1st	0.00 - 0.56
3c.S1.10	Equipment Failure Down Time	0.00	1st/12	1st	0.00 - 0.09
3b.S1.5	Facility Cancellations	0.00	1st/41	1st	0.00 - 0.17
3f.S4.2	Medication Errors	0.00	1st/13	1st	0.00 - 0.07
1b.S1.11	Patient Adverse Events	0.00	1st/39	1st	0.00 - 0.16
1a.S1.11	Patient Incidents & Near Misses	0.00	1st/45	1st	0.00 - 0.19
2.2g.S1.11	Post-Op Nausea & Vomiting - Gastroenterology	0.00	1st/10	1st	0.00 - 0.11
7k.S1.11	Staff Accidents	0.00	1st/20	1st	0.00 - 0.09
2.2h.S1.11	URTT within 1 month - Gastroenterology	0.00	1st/4	1st	0.00 - 0.08
3e.S1.14	Verbal Complaints	0.00	1st/18	1st	0.00 - 0.08
2.2d.S1.11	Colonoscopy with one or more Adenoma's	64.69	3rd/34	1st	98.94 - 56.11
2.2i.S1.8	Patient Waiting Time - Gastroenterology	26.10	4th/35	1st	6.04 - 39.00
2.2j.S1.8	Length of Stay - Gastroenterology	128.00	5th/35	1st	101.47 - 137.39
2.2c.S1.11	Colonoscopy with Entire Colon Examined	99.78	5th/23	1st	100.00 - 99.74
2.2b.S1.11	Failure to Reach the Caecum	0.22	6th/25	1st	0.00 - 0.23
2.2a.S1.11	Bowel Preparation Inadequacy	0.22	6th/23	1st	0.00 - 0.23
2.2e.S1.11	Colonoscopy with Sessile Serrated Adenoma or Polyp	24.48	9th/34	1st	67.92 - 23.87
7d.S1.8	Clinical Staff Workhours	4.31	24th/83	2nd	4.11 - 5.32
2.2f.S1.11	Post Polypectomy Bleed	0.30	3rd/8	2nd	0.27 - 0.36
3a.S1.5	Patient Based Cancellations	0.65	24th/77	2nd	0.59 - 1.33
7b.S1.8	Total Staff Workhours	6.45	33rd/85	2nd	5.78 - 7.01



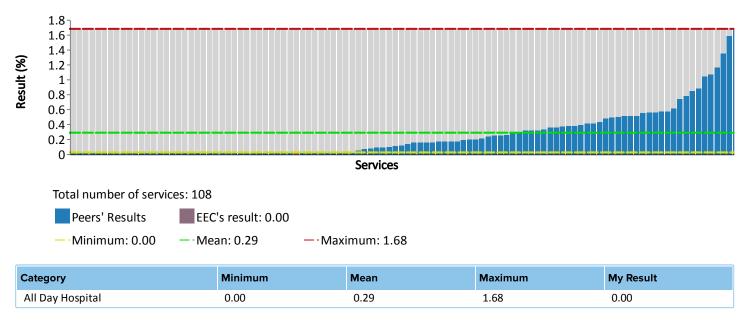
Eastern Endoscopy Centre

Code	Title	Result	Ranking	Quartile	Quartile Range
7j.S1.10	Staff Sick Leave	2.07	36th/86	2nd	1.51 - 2.38
7i.S1.10	Staff Turnover	5.26	27th/52	3rd	5.22 - 8.08
3d.S1.14	Written Complaints	0.16	11th/19	3rd	0.15 - 0.20
7f.S1.8	Non Clinical Staff Workhours	2.14	50th/76	3rd	1.76 - 2.81
1c.\$1.11	Unplanned Transfers	0.16	14th/19	3rd	0.12 - 0.20
4b.S1.16	Healthcare Record Audit	94.20	61st/78	4th	94.57 - 62.00

1a.S1.11 Patient Incidents & Near Misses

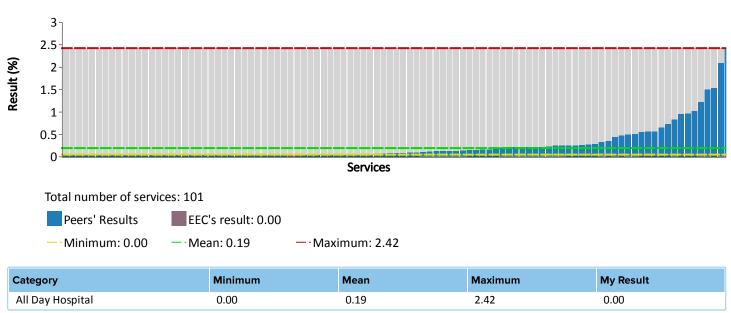
Patient Incidents & Near Misses are defined as the total number of patient incidents and near misses, i.e. those that do not result in unintended harm e.g. medication error resulting in no harm, slip or falls resulting in no injury, potential accident, lack of consent, blood product near miss resulting in no harm or injury, expressed as a percentage of the total number of patients admitted.

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1b.S1.11 Patient Adverse Events

Patient Adverse Events are defined as the total number of patient adverse events occurring, expressed as a percentage of the total number of patients admitted. An adverse event is an incident in which unintended harm resulted to a person receiving health care. E.g. skin tears, pressure injury, return to theatre, haemorrhage, aspiration, other complications.

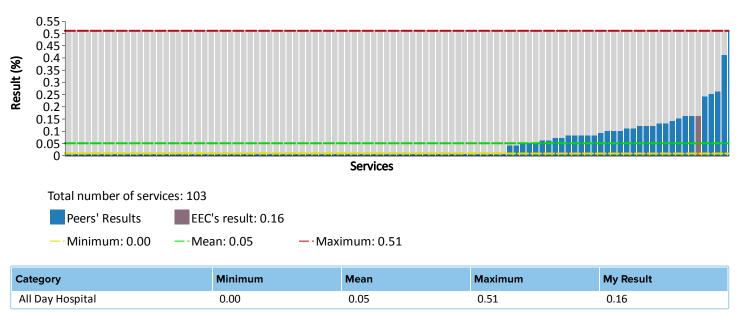




1c.S1.11 Unplanned Transfers

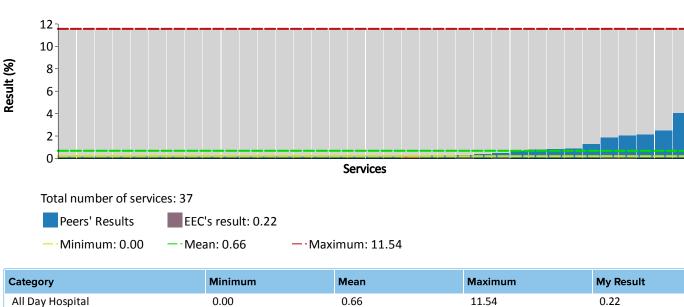
Unplanned Transfers are defined as the total number of patients having an unexpected or emergency transfer directly from the Day Hospital, expressed as a percentage of the total number of patients admitted.

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2.2a.S1.11 Bowel Preparation Inadequacy

Bowel Preparation Inadequacy is defined as the total number of patients undergoing gastroenterological procedures with inadequate bowel preparation causing difficulty in fully viewing the bowel during full colonoscopy to effectively perform the gastroenterological procedure, expressed as a percentage of the total number of patients undergoing planned full colonoscopy.



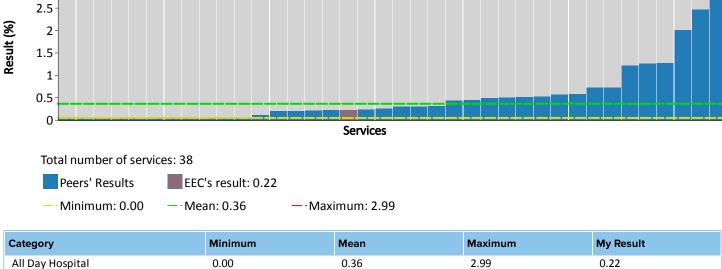


2.2b.S1.11 Failure to Reach the Caecum

Failure to Reach the Caecum is defined as the total number of patients where the caecum was not viewed due to failure in reaching this part of the colon whilst undergoing planned full colonoscopy, expressed as a percentage of the total number of patients undergoing planned full colonoscopic procedures.

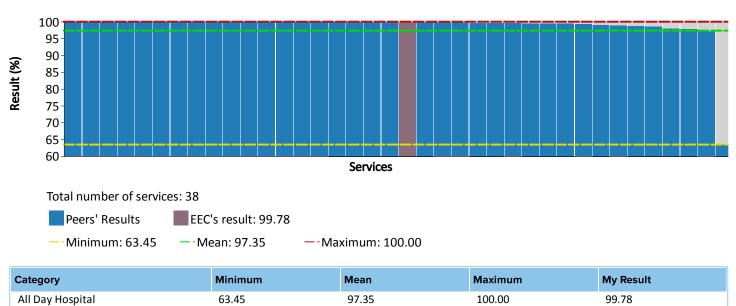


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2.2c.S1.11 Colonoscopy with Entire Colon Examined

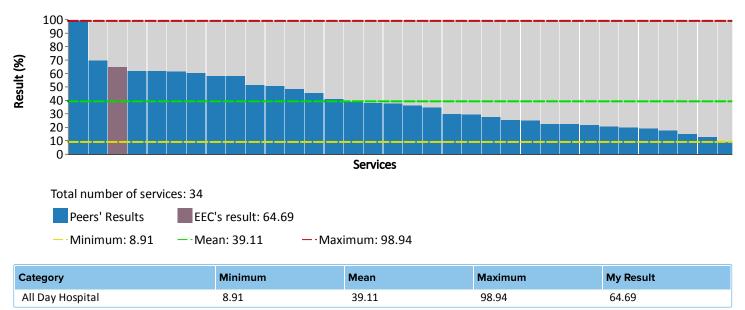
Colonoscopy with Entire Bowel Examined is defined as the total number of patients who had their entire colon examined whilst undergoing a colonoscopy where photographic documentation of caecal intubation has been obtained, expressed as a percentage of the total number of patients undergoing a colonoscopy.





2.2d.S1.11 Colonoscopy with one or more Adenoma's

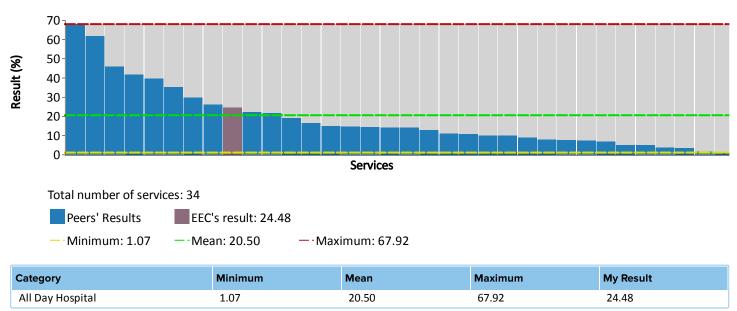
Colonoscopy with one or more Adenoma's is defined as the total number of patients 50 years and older with an intact colon undergoing a colonoscopy where one or more adenoma(s) was detected, with at least one adenoma histologically confirmed, expressed as a percentage of the total number of patients with an intact colon undergoing a colonoscopy.



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2.2e.S1.11 Colonoscopy with Sessile Serrated Adenoma or Polyp

Colonoscopy with one or more Adenoma's is defined as the total number of patients 50 years and older with an intact colon undergoing a colonoscopy where at least one sessile serrated adenoma or sessile serrated polyp was detected and histologically confirmed, expressed as a percentage of the total number of patients with an intact colon undergoing a colonoscopy.





2.2f.S1.11 Post Polypectomy Bleed

Post Polypectomy Bleed is defined as the total number of patients suffering a post-polypectomy bleed noted during the procedure, recovery period and post discharge, expressed as a percentage of the total number of patients undergoing colonoscopy procedures with polypectomy.



2.2g.S1.11 Post-Op Nausea & Vomiting - Gastroenterology

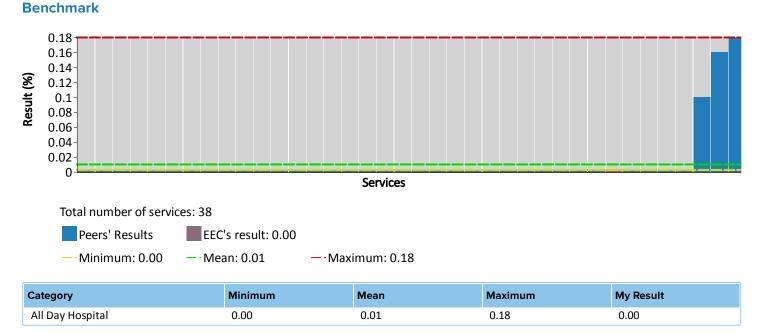
Post-Op Nausea & Vomiting - Gastroenterology is defined as the total number of gastroenterology patients undergoing a procedure who receives an intervention by an anesthetist for post-operative nausea and vomiting, not responding to PACU protocol, in the recovery period, expressed as a percentage of the total number of gastroenterology patients admitted.





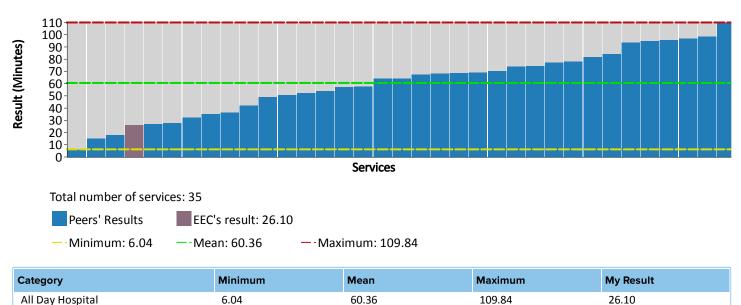
2.2h.S1.11 URTT within 1 month - Gastroenterology

URTT (Unexpected return to Theatre) within 1 month - Gastroenterology is defined as the total number of gastroenterology patients returning to the theatre for same condition/procedure within 1 month of most recent discharge, expressed as a percentage of the total number of gastroenterology patients undergoing surgery.



2.2i.S1.8 Patient Waiting Time - Gastroenterology

Patient Waiting Time - Gastroenterology is defined as the average preoperative or pre-procedure waiting time (in minutes) for gastroenterology patients. Waiting time is measured from booked appointment time to anesthesia.

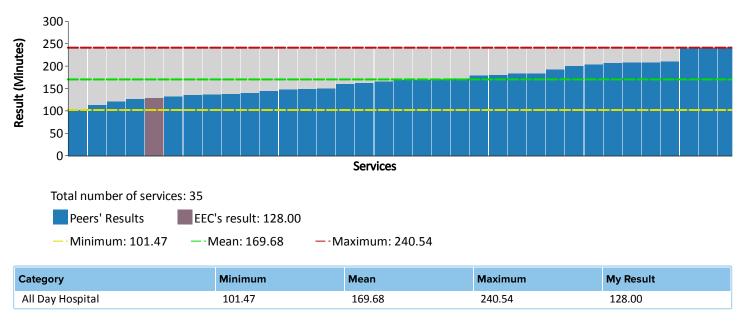


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2.2j.S1.8 Length of Stay - Gastroenterology

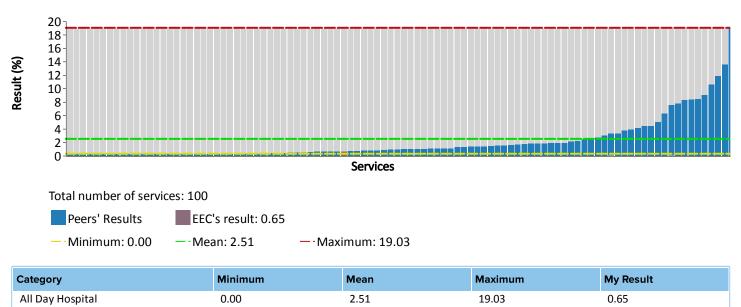
Length of Stay - Gastroenterology is defined as the average length of stay (in minutes) for gastroenterology patients. Waiting time is measured from patient's appointment time to discharge.

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3a.S1.5 Patient Based Cancellations

Patient Based Cancellations are defined as the total number of patients cancelled within 24 hours prior to admission (by either the facility or the patient) where the cause is attributed to the patient, e.g. patient has not fasted, has become unwell, presented with flu like symptoms, expressed as a percentage of the total number of booked patients.

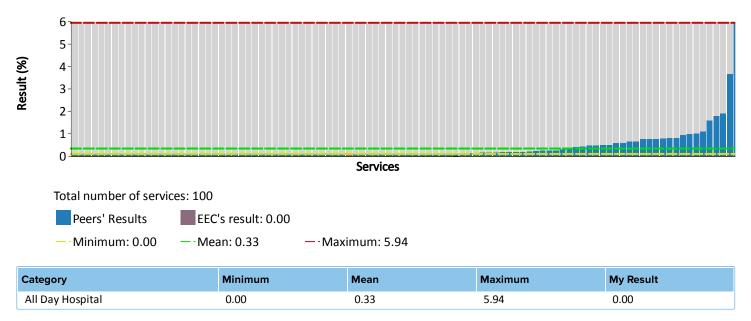




3b.S1.5 Facility Cancellations

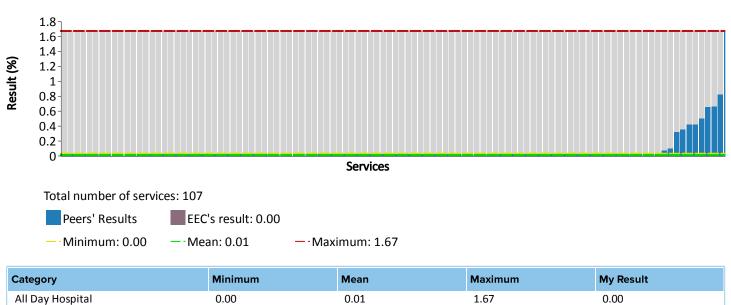
Facility Cancellations are defined as the total number of patients cancelled where causes are attributed to either the facility or referral e.g. patients procedure cancelled due to equipment failure or inappropriate referral, expressed as a percentage of the total number of booked patients.

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3c.S1.10 Equipment Failure Down Time

Equipment Failure Down Time is defined as the total number of hours where normal operations of services cannot proceed due to equipment failure, expressed as a percentage of the total operating hours for the Day Hospital.

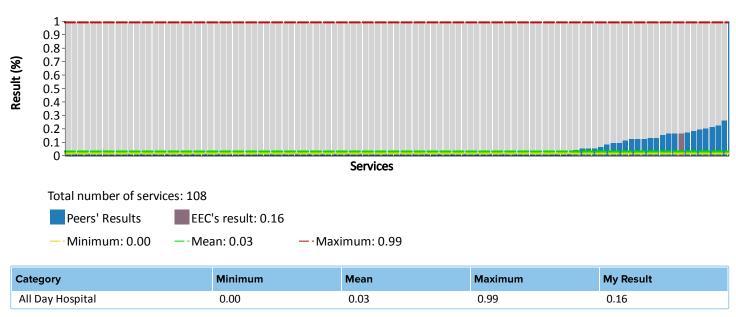




3d.S1.14 Written Complaints

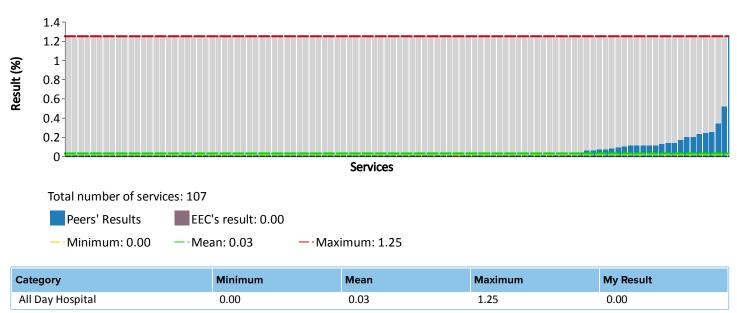
Written Complaints are defined as the total number of written complaints received from patients and relatives, expressed as a percentage of the total number of patients admitted.

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3e.S1.14 Verbal Complaints

Verbal Complaints are defined as the total number of verbal complaints received from patients and relatives, expressed as a percentage of the total number of patients admitted.





3f.S4.2 Medication Errors

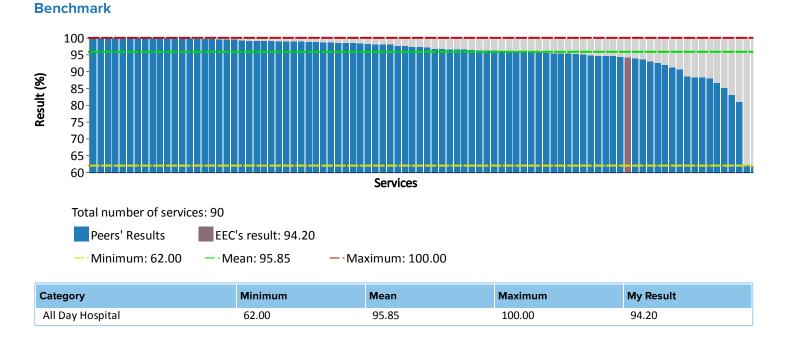
Medication Errors are defined as the total number of medication errors, expressed as a percentage of the total number of patients admitted. A Medication error is described as errors in prescribing, dispensing, or administering medication.

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4b.S1.16 Healthcare Record Audit

The Healthcare Record Audit result is the aggregated percentage score for all patient clinical records audited, and measures compliance to the National Safety and Quality Health Service Standards criterion.

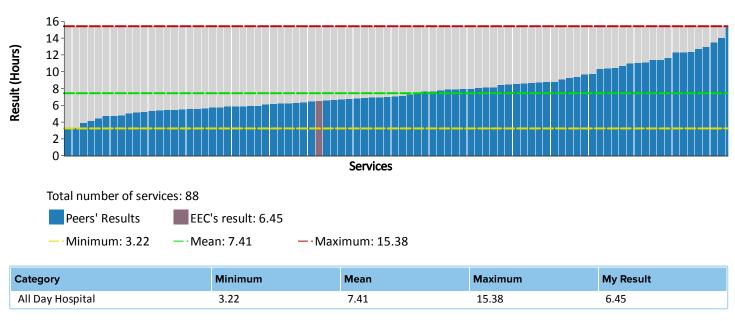




7b.S1.8 Total Staff Workhours

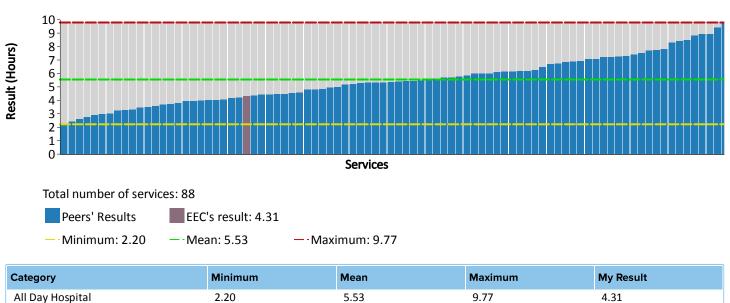
Total Staff Workhours are defined as the average actual hours worked by all staff per patient and includes hours worked by all disciplines e.g. clinical and non clinical staff.

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7d.S1.8 Clinical Staff Workhours

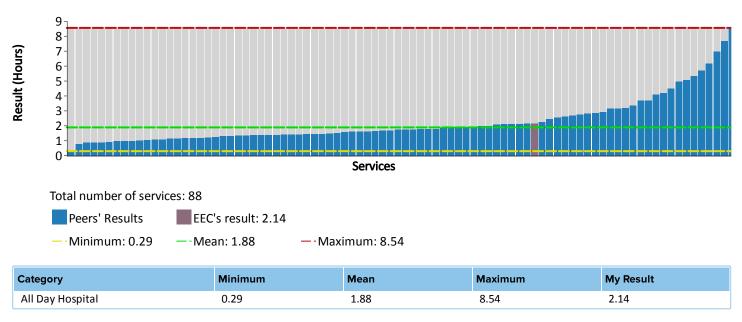
Clinical Staff Workhours are defined as the average actual hours worked by all clinical staff per patient.



7f.S1.8 Non Clinical Staff Workhours

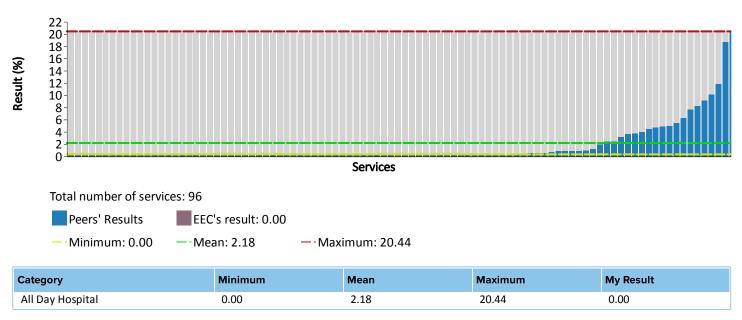
Non Clinical Staff Workhours are defined as the average actual hours worked by managers, clerical, administrative & service staff per patient.

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7h.S1.25 Agency Staff Usage

Agency Staff Usage is defined as the total agency staff hours worked, expressed as a percentage of the total number of actual hours worked by all staff.

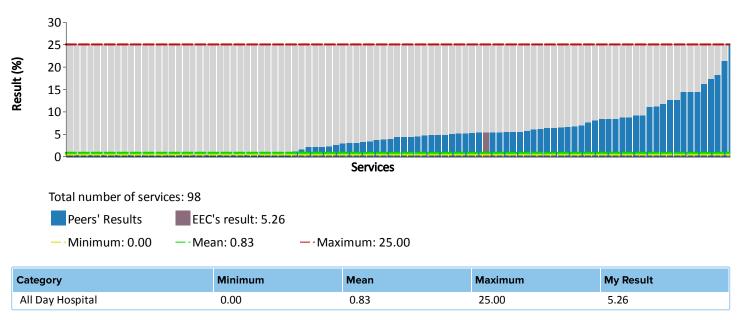




7i.S1.10 Staff Turnover

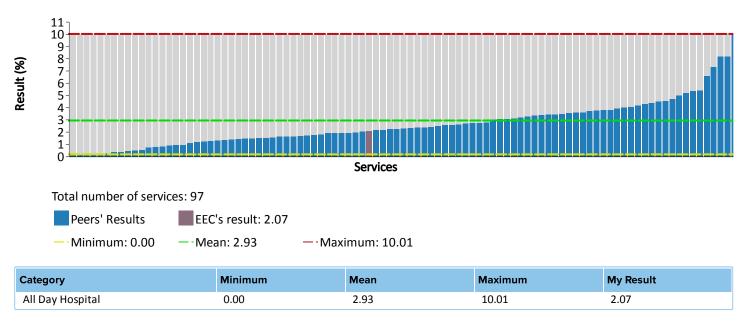
Staff Turnover is defined as the total number of employee terminations for whatever reason, expressed as a percentage of the total number of staff employed.

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7j.S1.10 Staff Sick Leave

Staff Sick Leave is defined as the total sick leave hours for all staff, expressed as a percentage of the total number of actual hours worked by all staff.





7k.S1.11 Staff Accidents

Staff Accidents are defined as the total number of all staff accidents reported, expressed as a rate of the total number of actual hours worked by all staff.

