SKMCH&RC – Peshawar

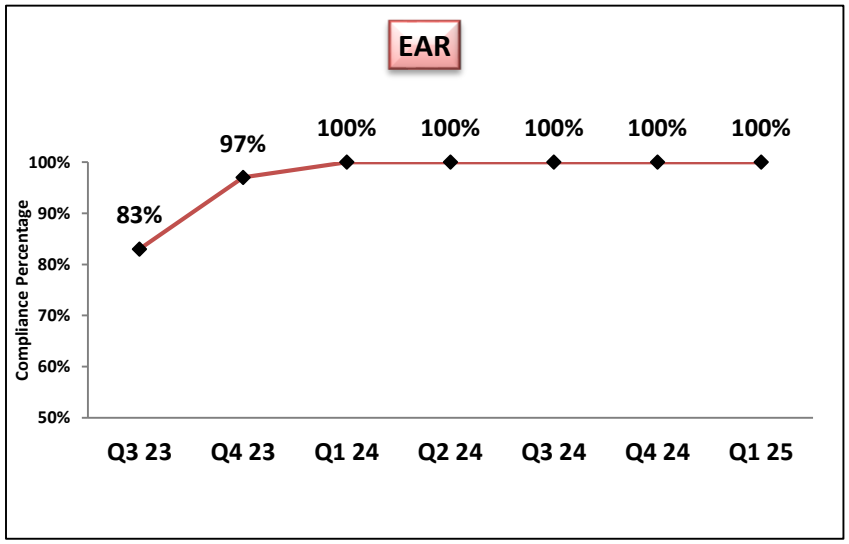
Clinical Performance Dashboard

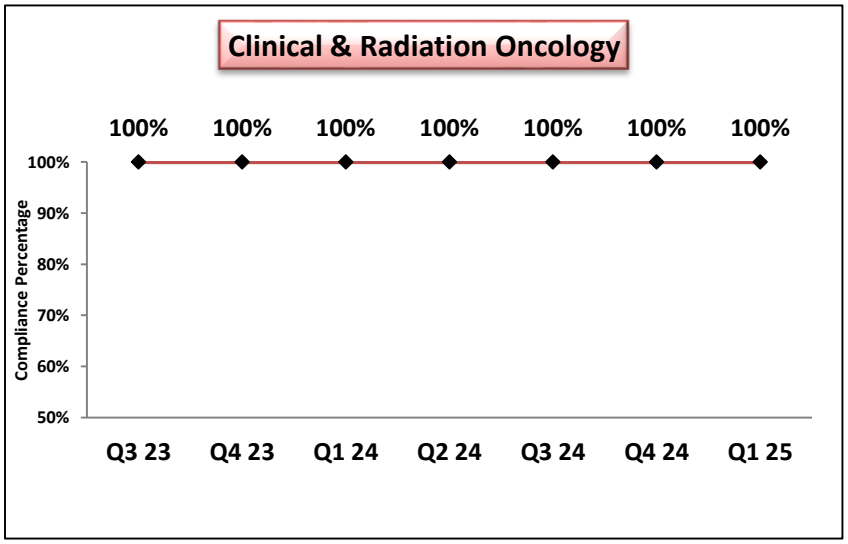
1st Quarter 2025 (Jan – Feb 2025)

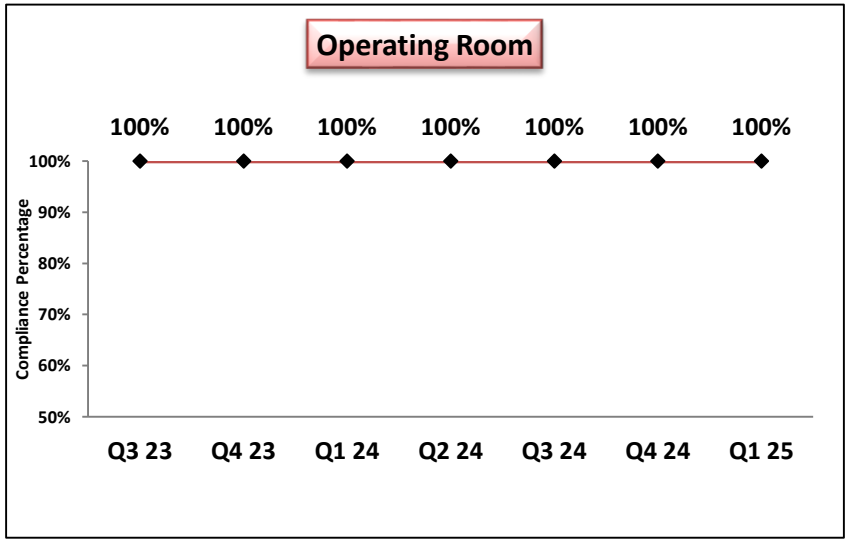
International Patient Safety Goals

Patient Identification Compliance

Target = 100%







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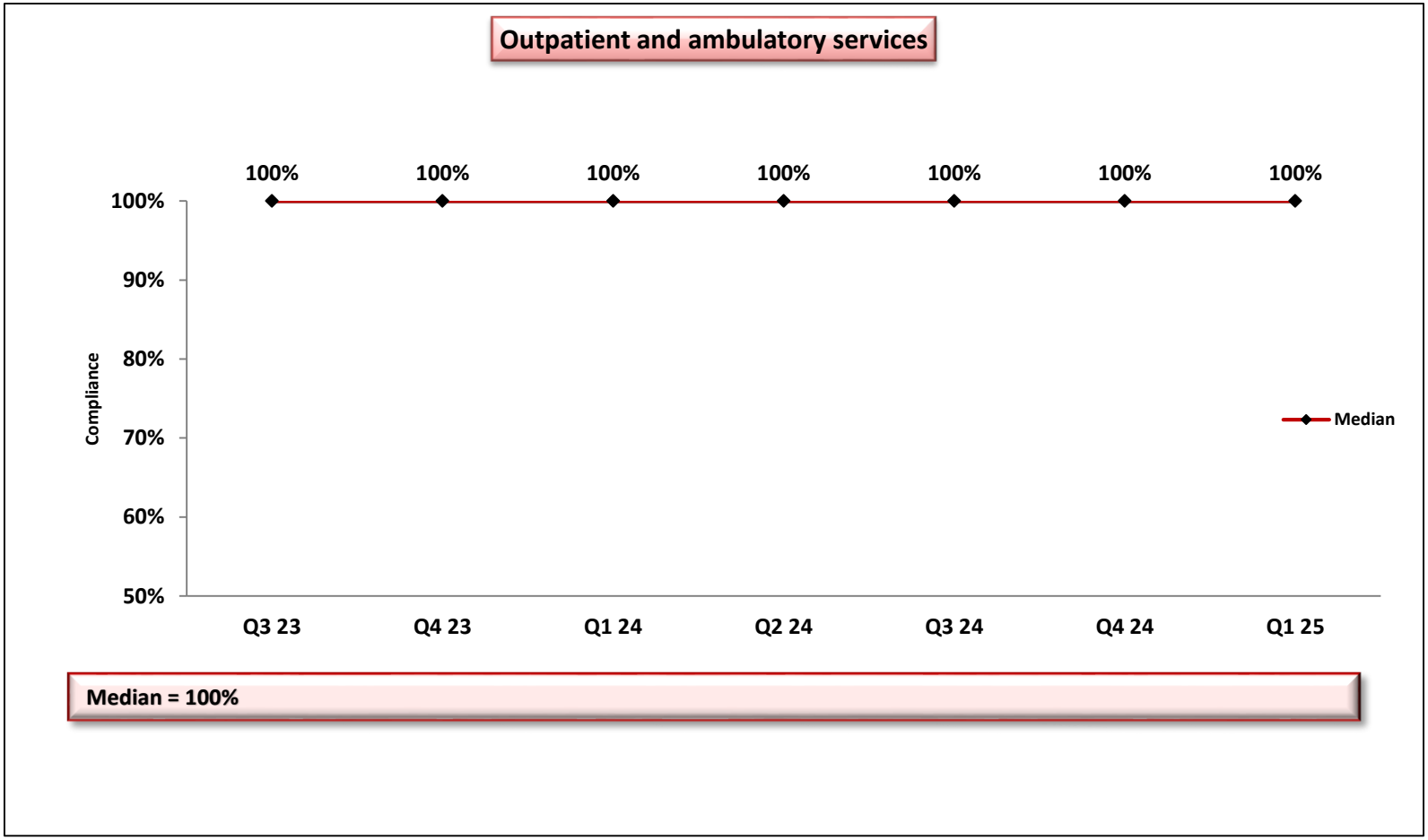
Indicator tool updated in Q2-2023 (Real-time observational audits started in Q2-2023)

International Patient Safety Goals

Patient Identification Compliance (OPD)

Target = 100%



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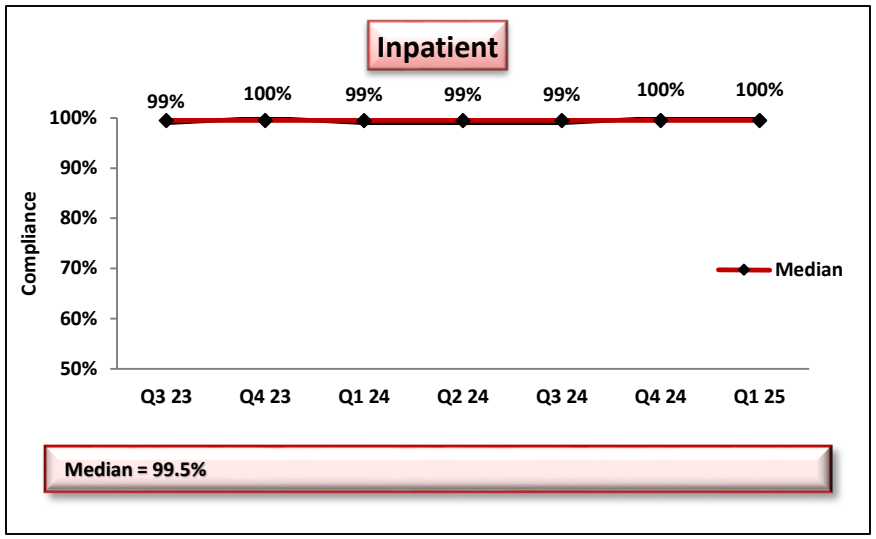
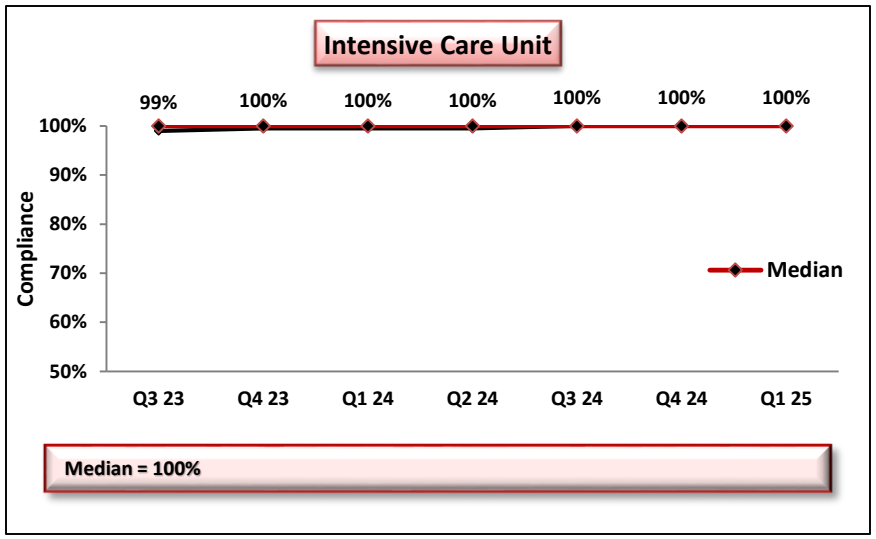
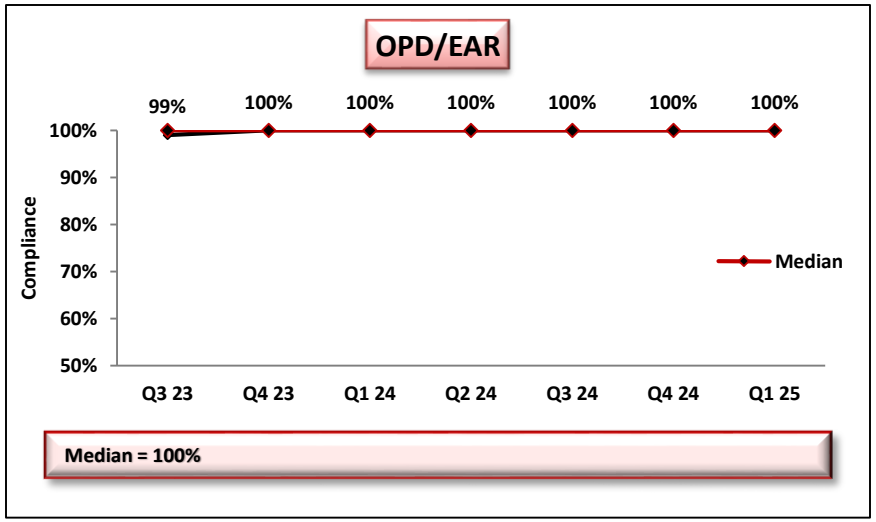
International Patient Safety Goals

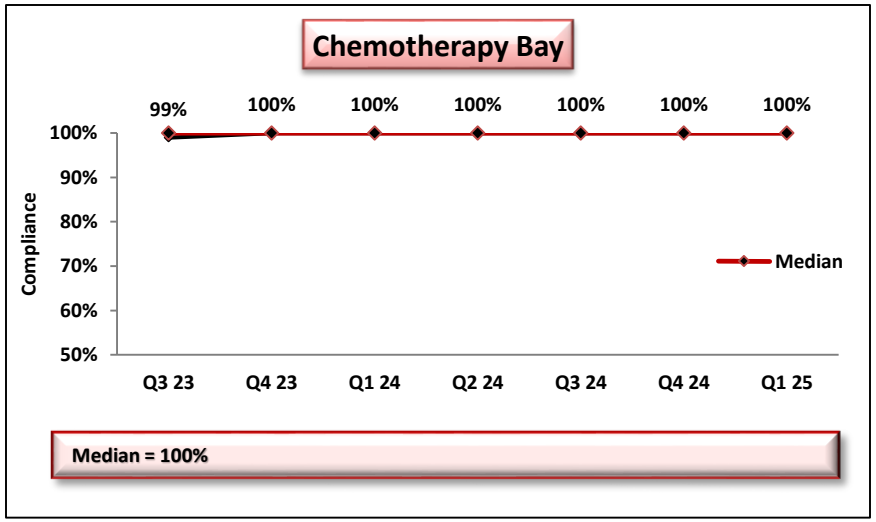
Nursing Handover Completeness

Target = 100%









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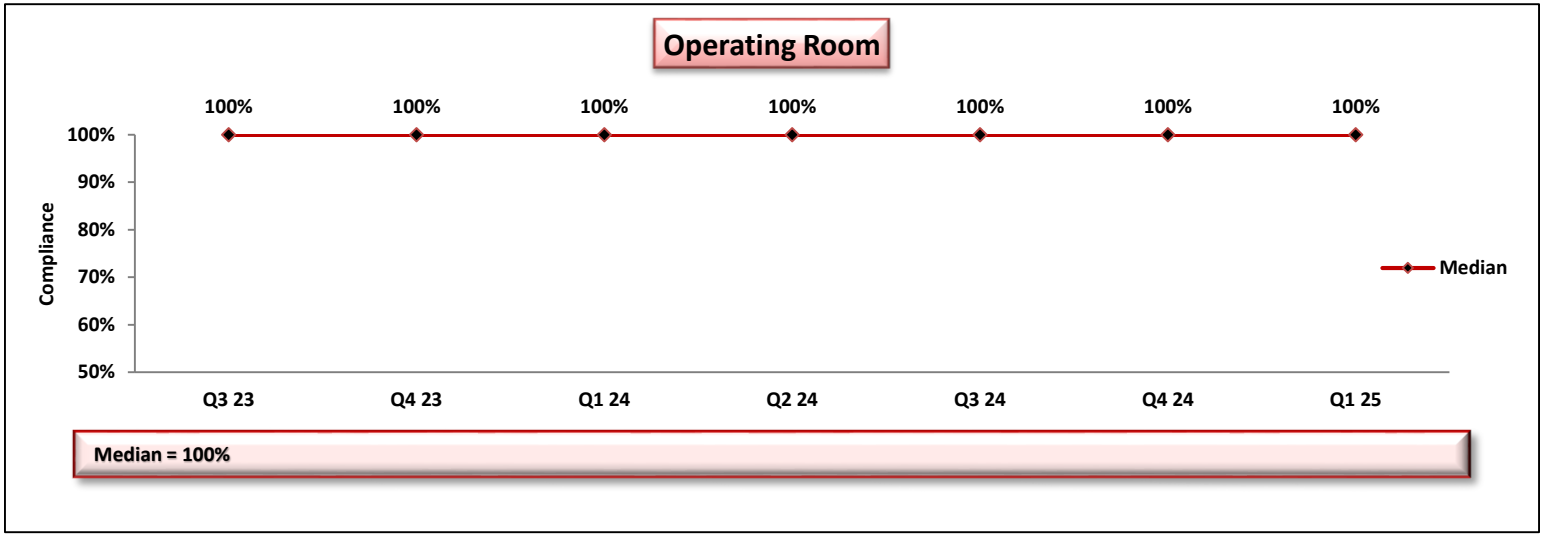
International Patient Safety Goals

Nursing Handover Completeness

Target = 100%



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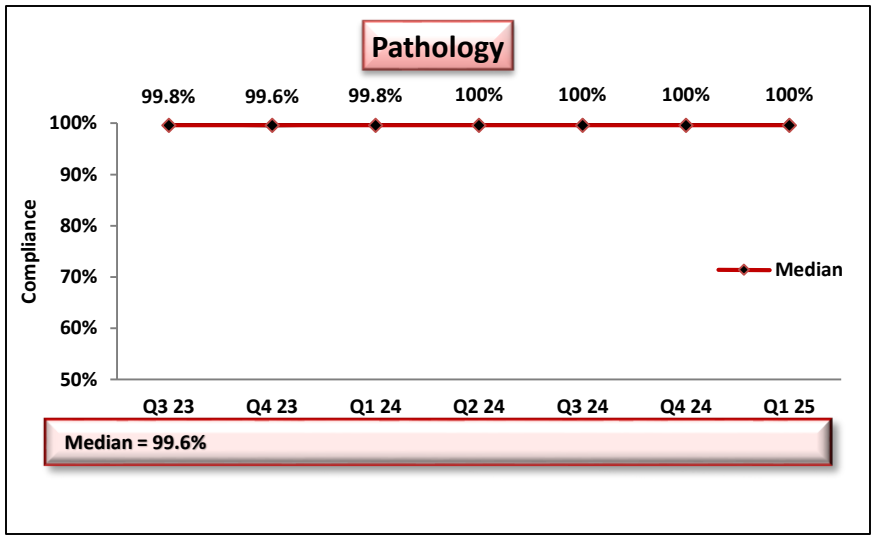
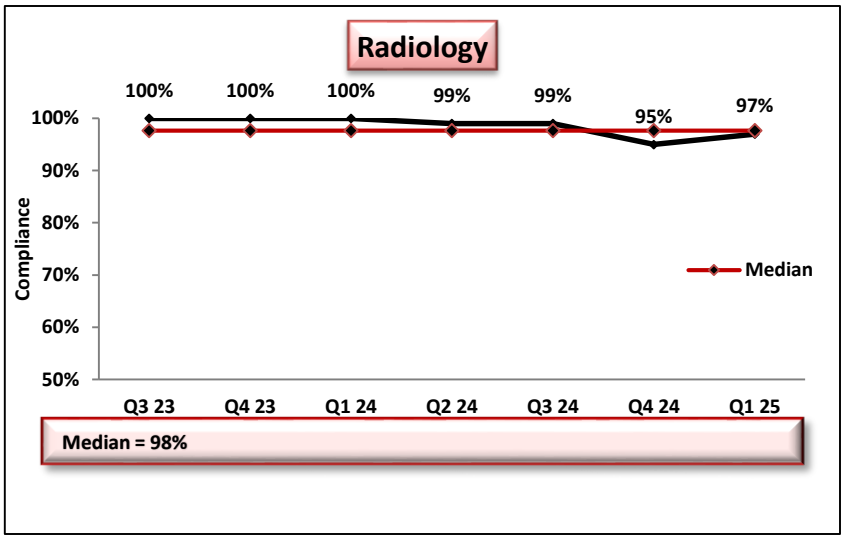
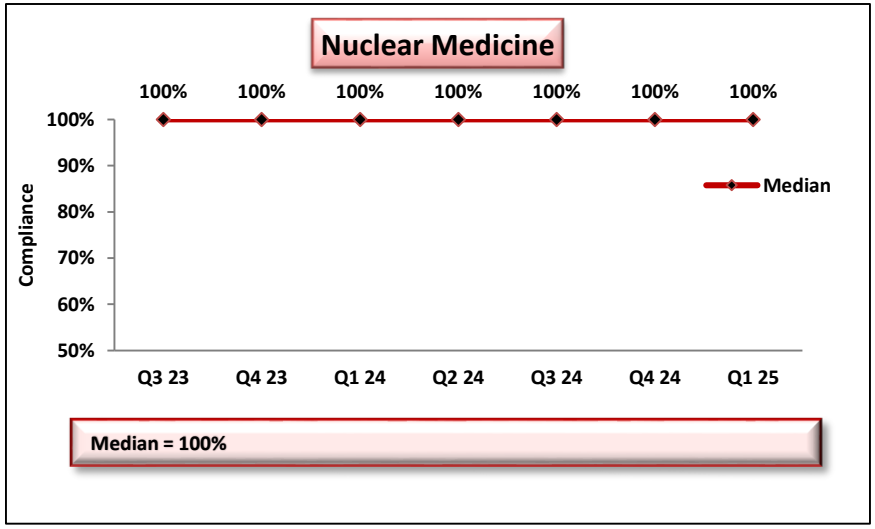
International Patient Safety Goals

Critical Alert Reporting

Target = 100%







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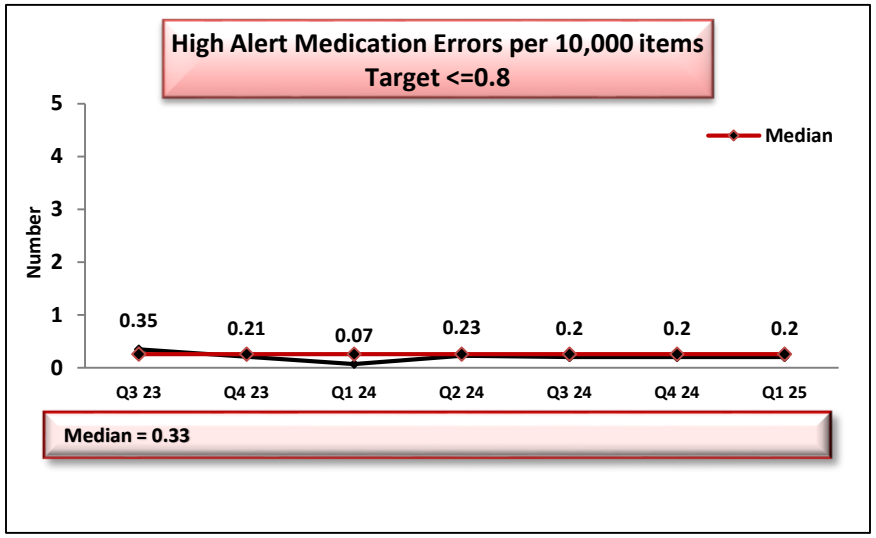
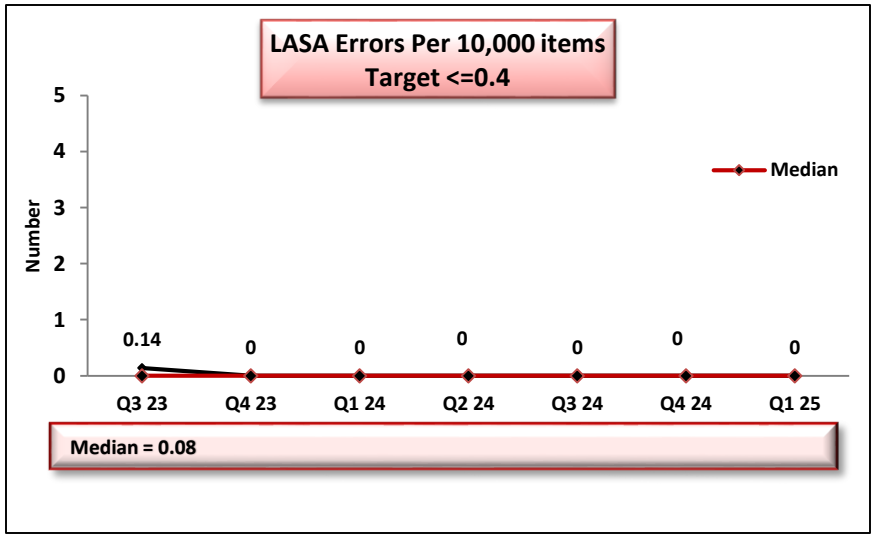
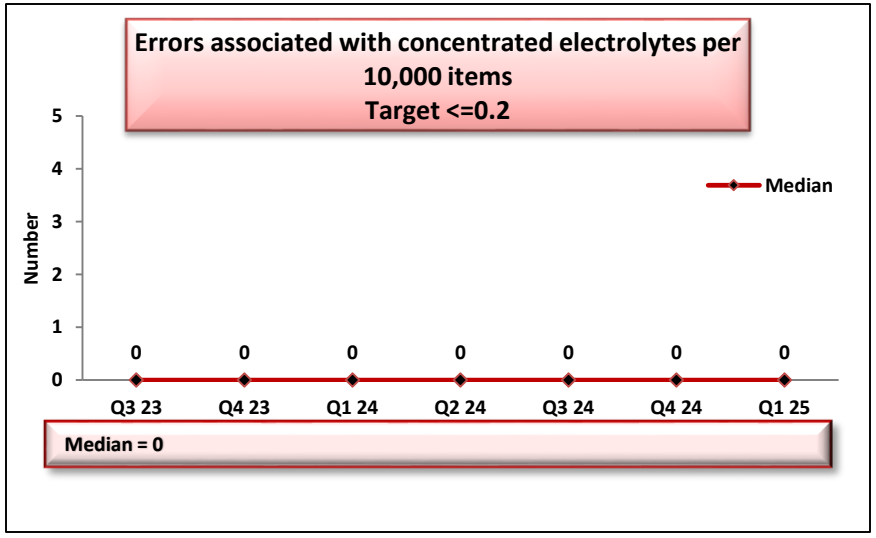
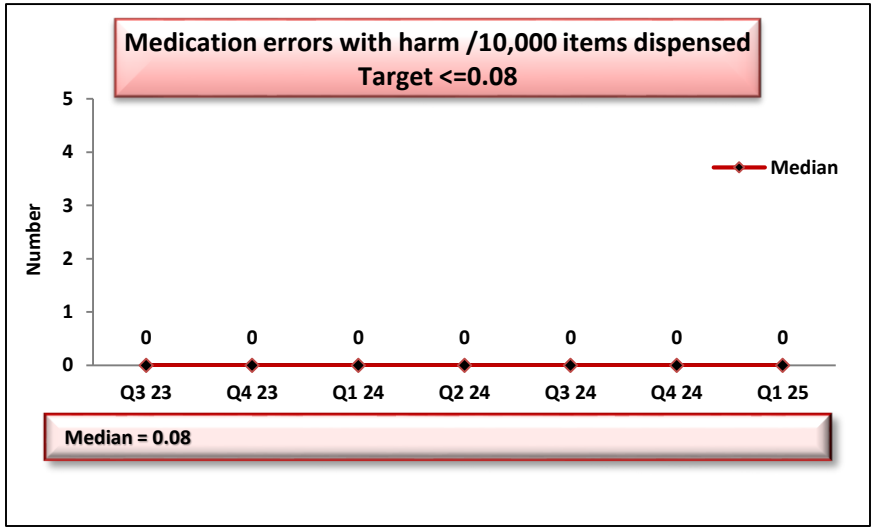
International Patient Safety Goals

Safety of High Alert Medications









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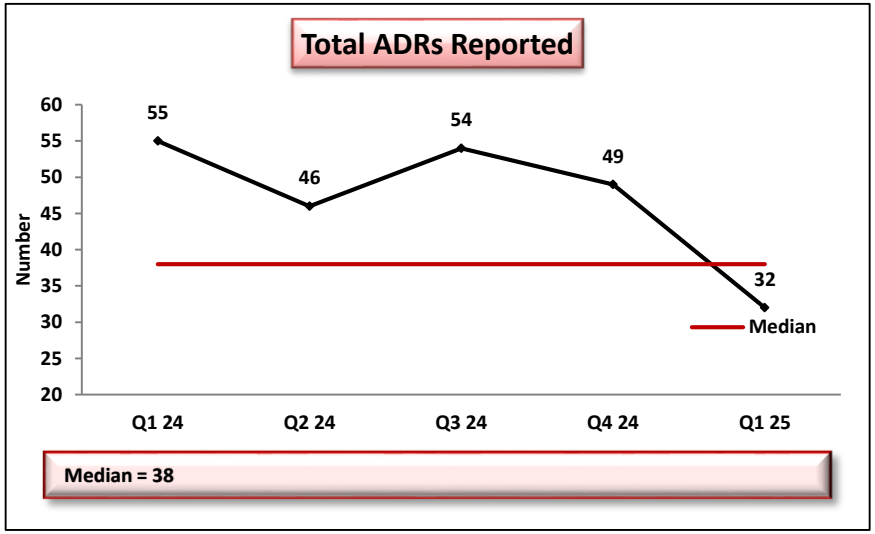
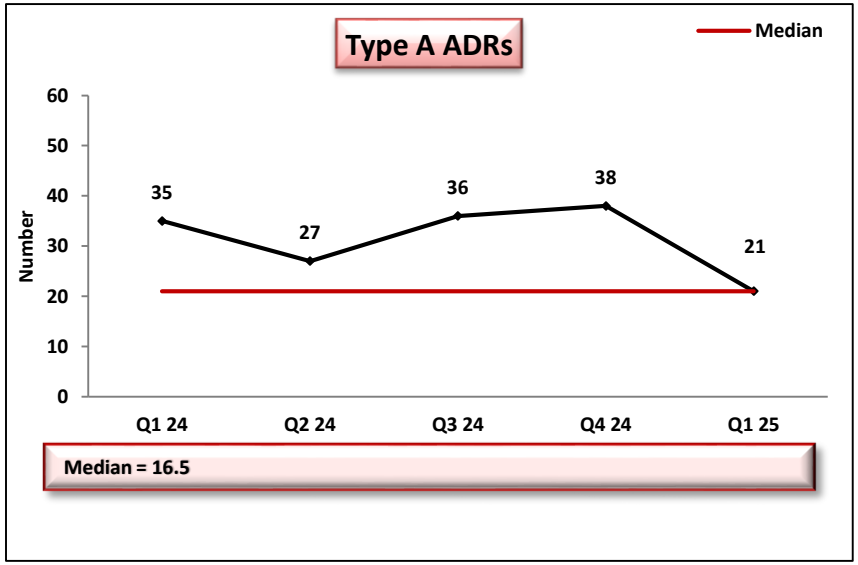
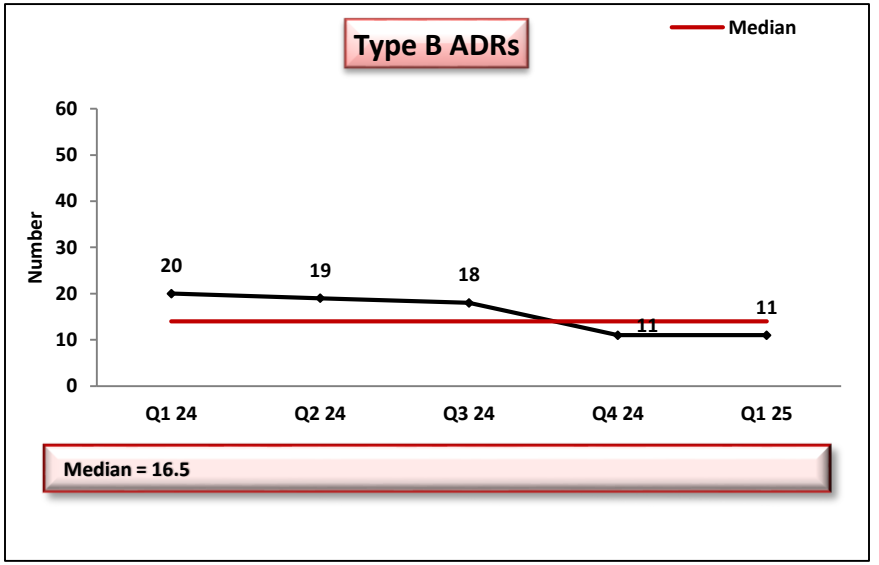
Average Items dispensed per month = 50, 546

Adverse Drug Reactions







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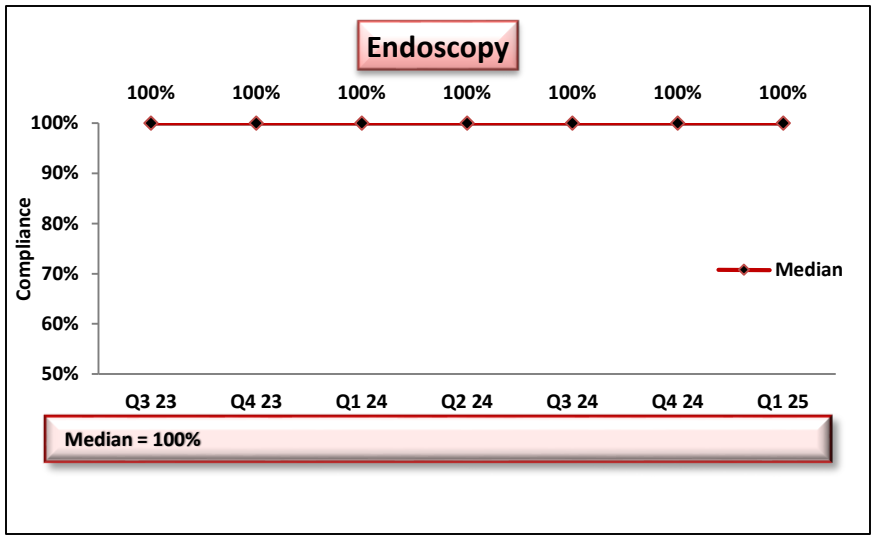
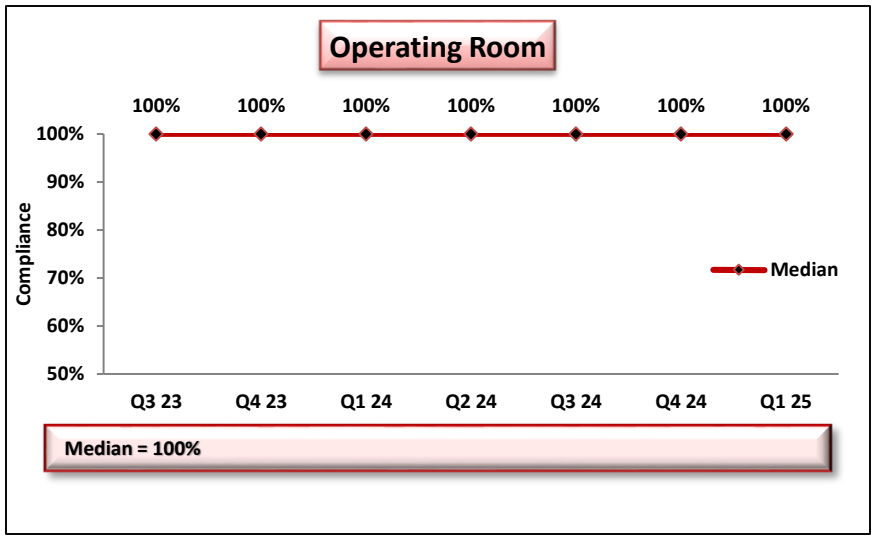
ADRs – Adverse Drug Reactions

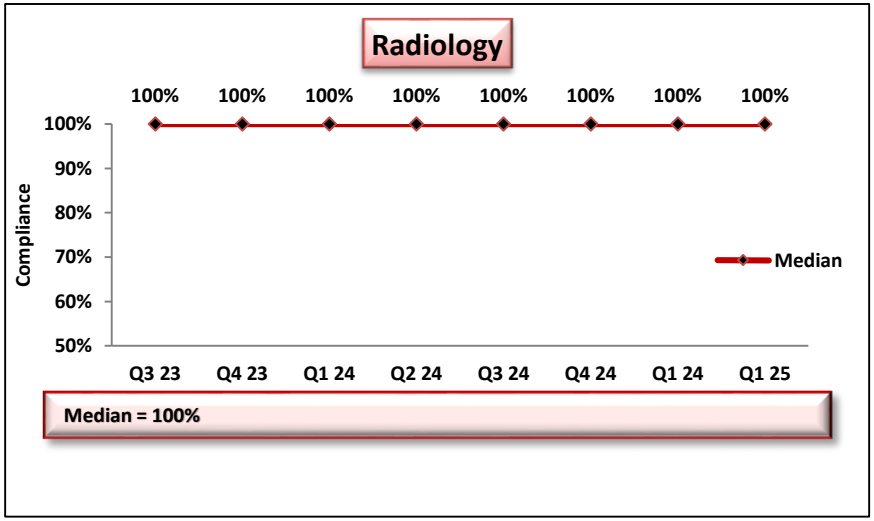
International Patient Safety Goals

Time out Process Compliance

Target = 100%







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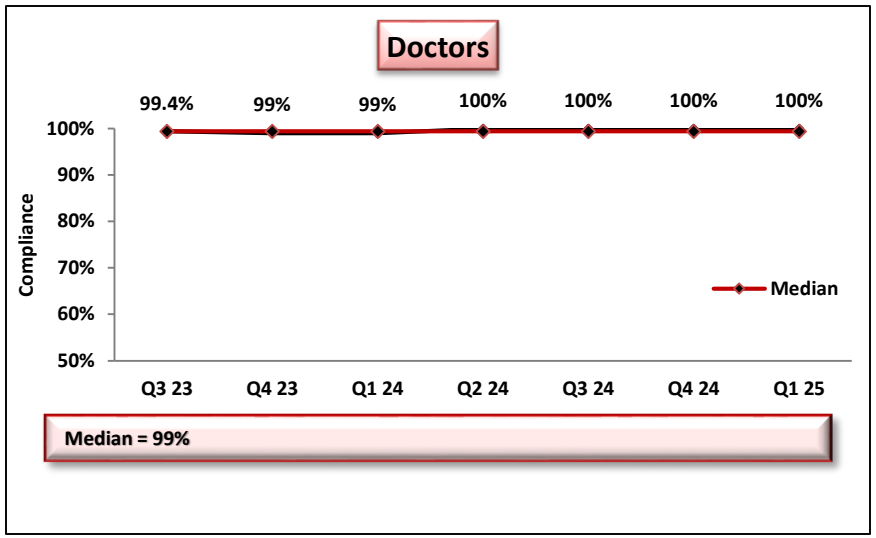
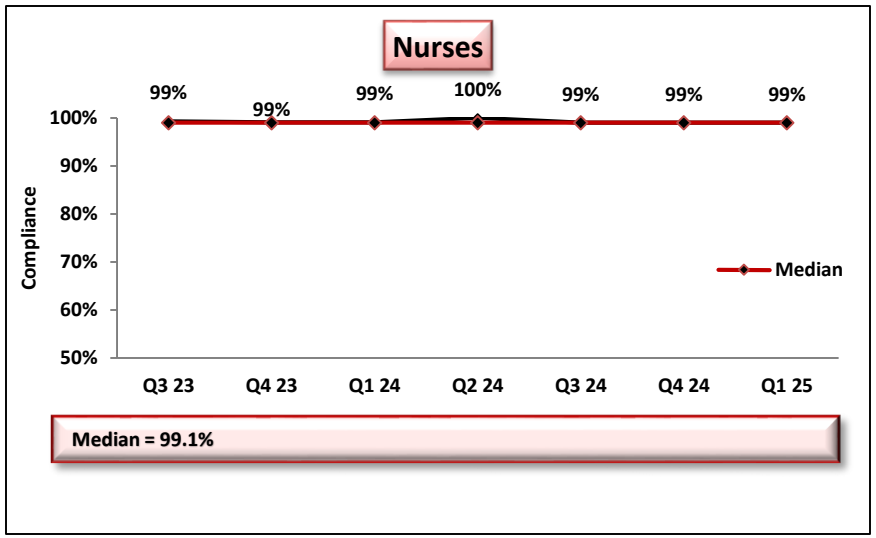
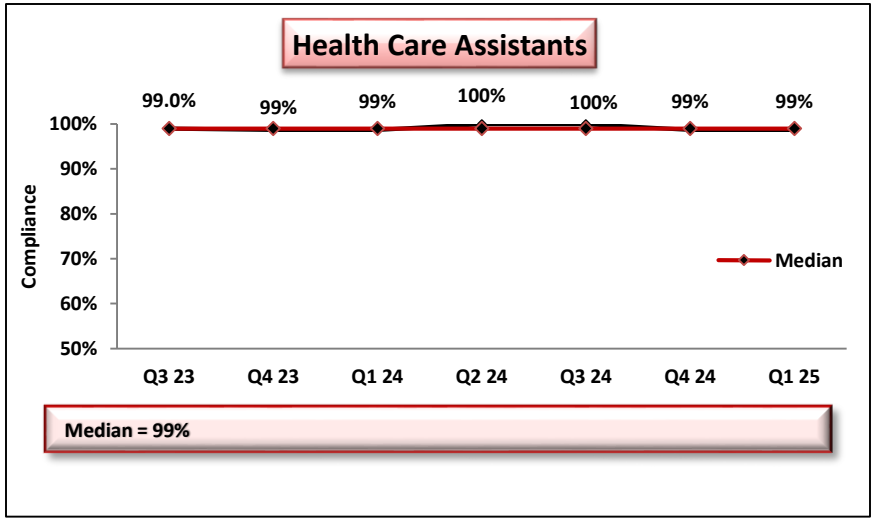
International Patient Safety Goals

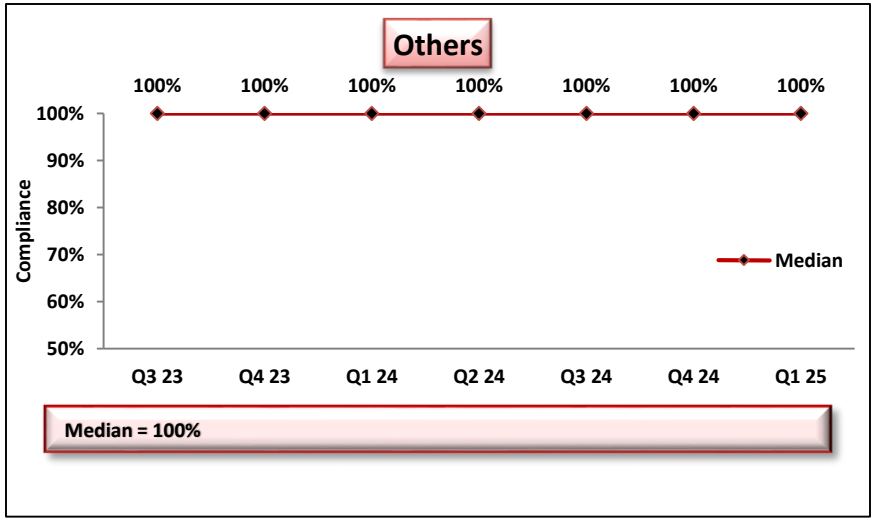
Hand Hygiene Compliance

Target = 100%









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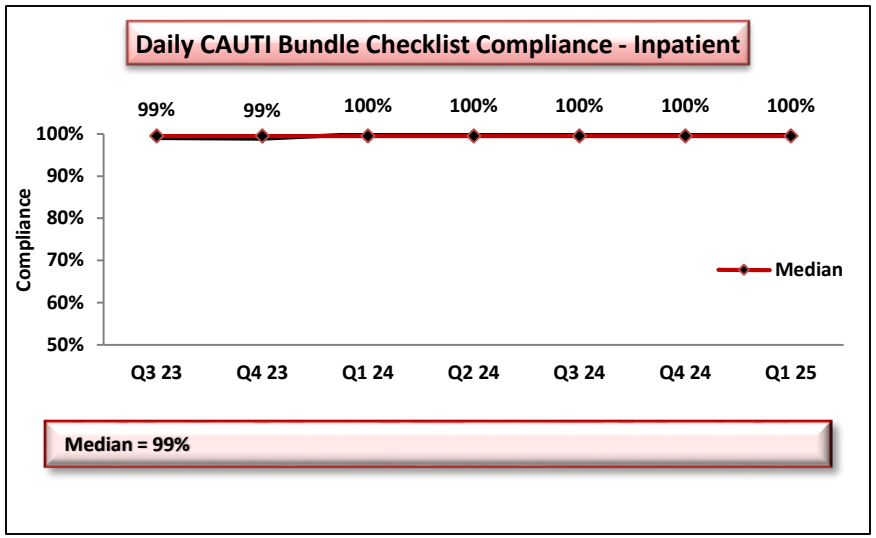
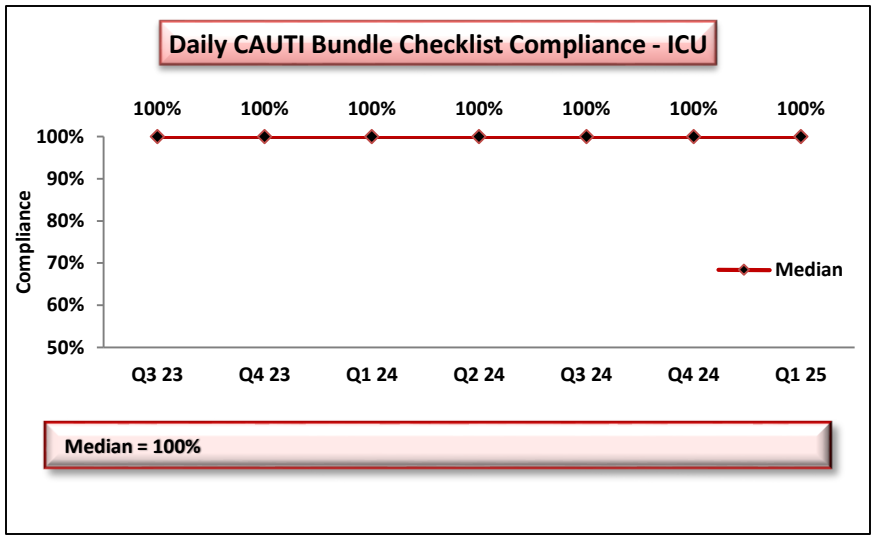
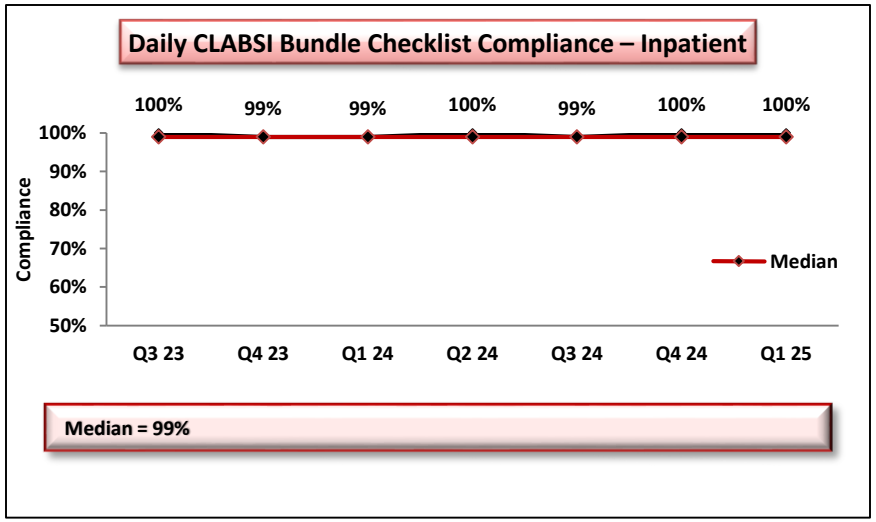
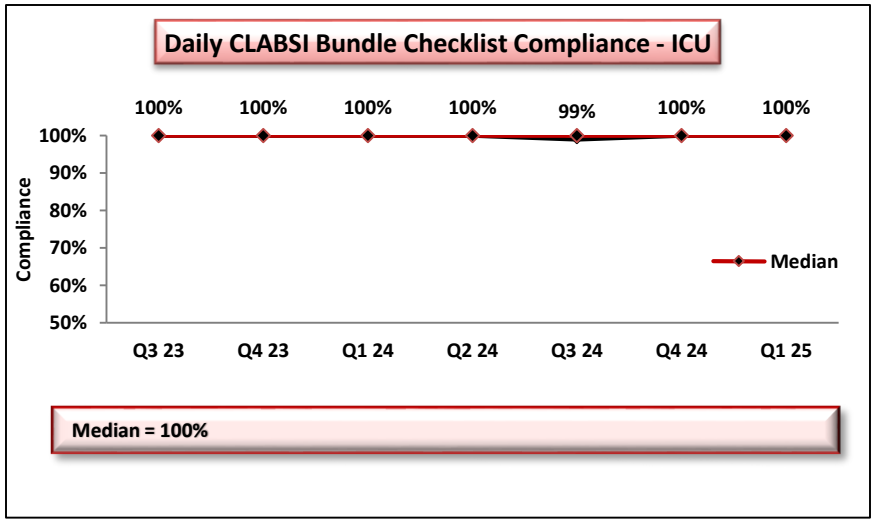
International Patient Safety Goals
Compliance with Care Bundles









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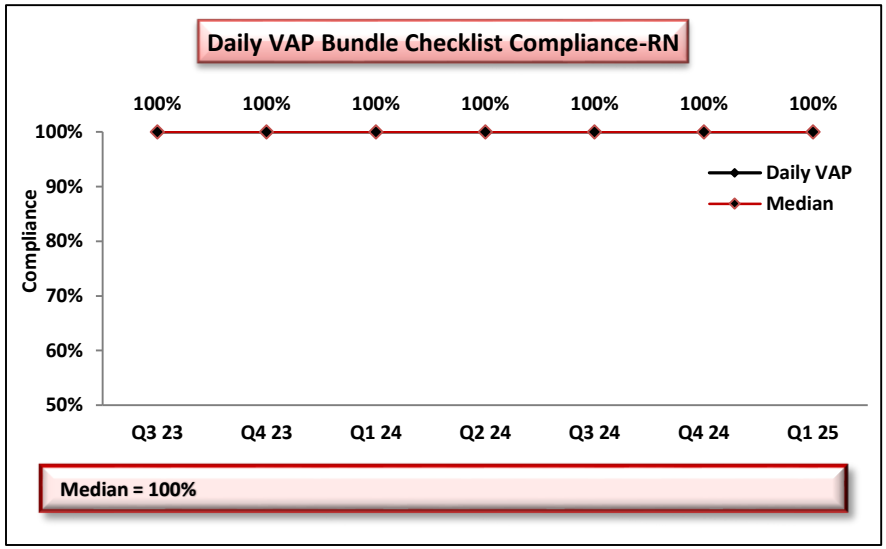
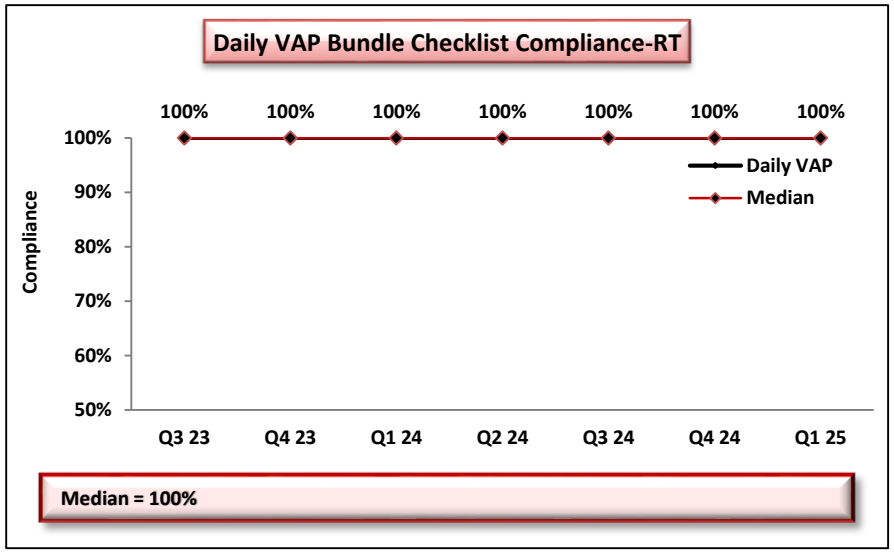
International Patient Safety Goals

Compliance with Care Bundles





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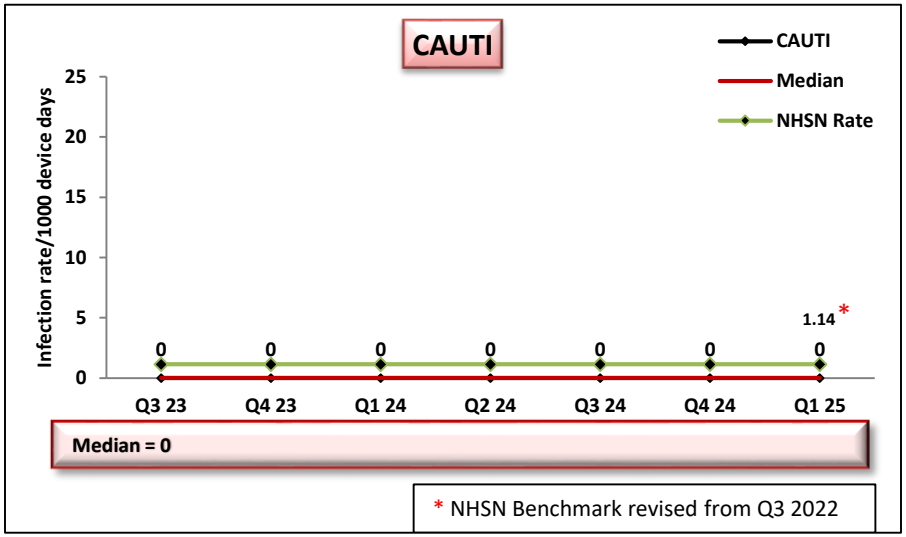
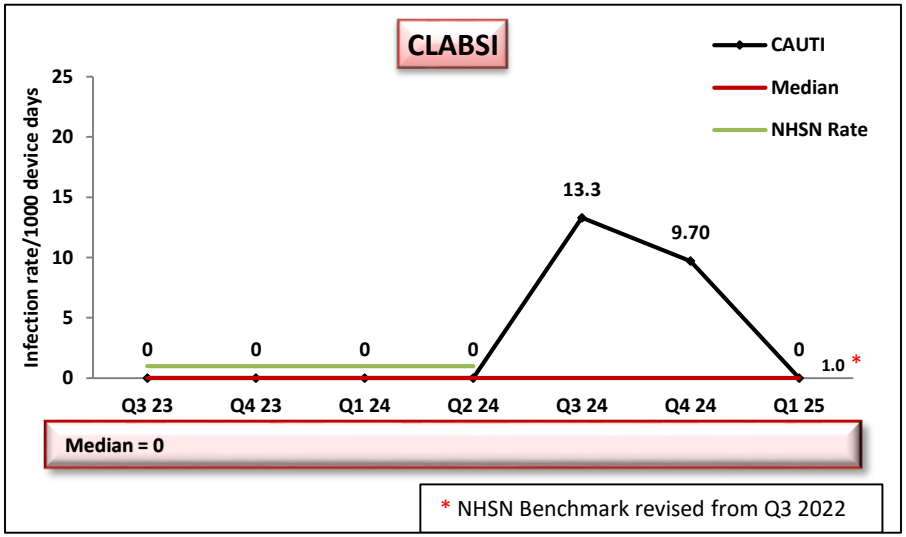
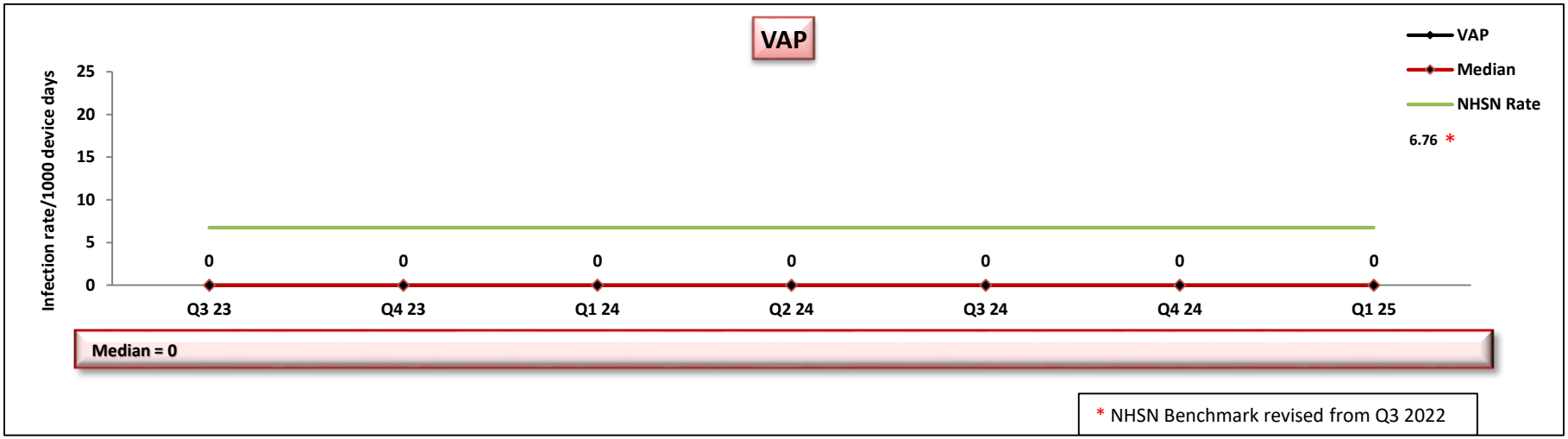
Infection Control Statistics-Intensive Care Unit







CAUTI – Catheter Associated Urinary Tract Infection, **CLABSI** – Central Line Associated Blood Stream Infection
VAP – Ventilator Associated Pneumonia, **NHSN** – National Healthcare Safety Network

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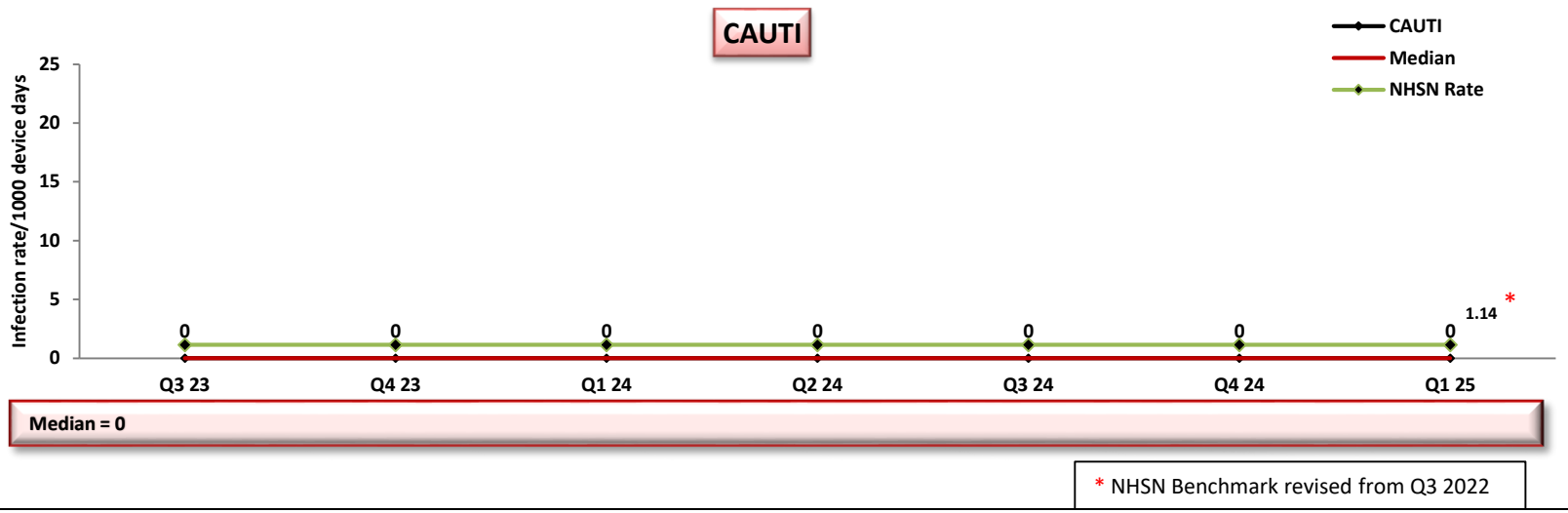
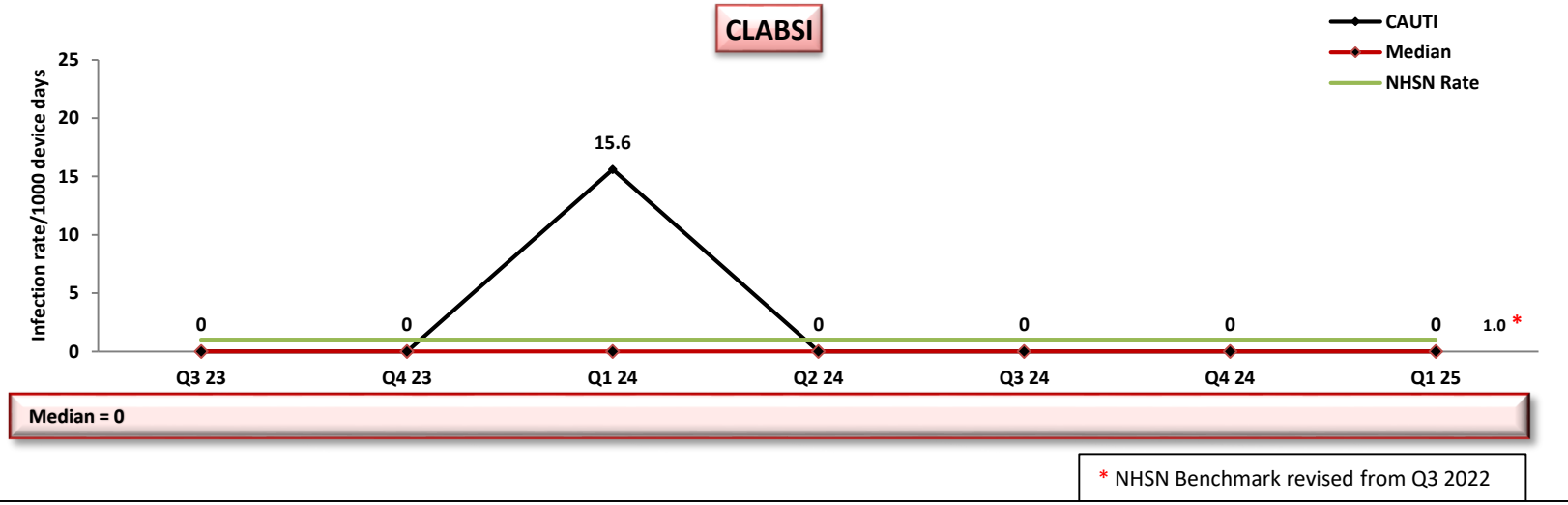
Infection Control Statistics-Inpatient





CAUTI – Catheter Associated Urinary Tract Infection, **CLABSI** – Central Line Associated Blood Stream Infection **NHSN** – National Healthcare Safety Network

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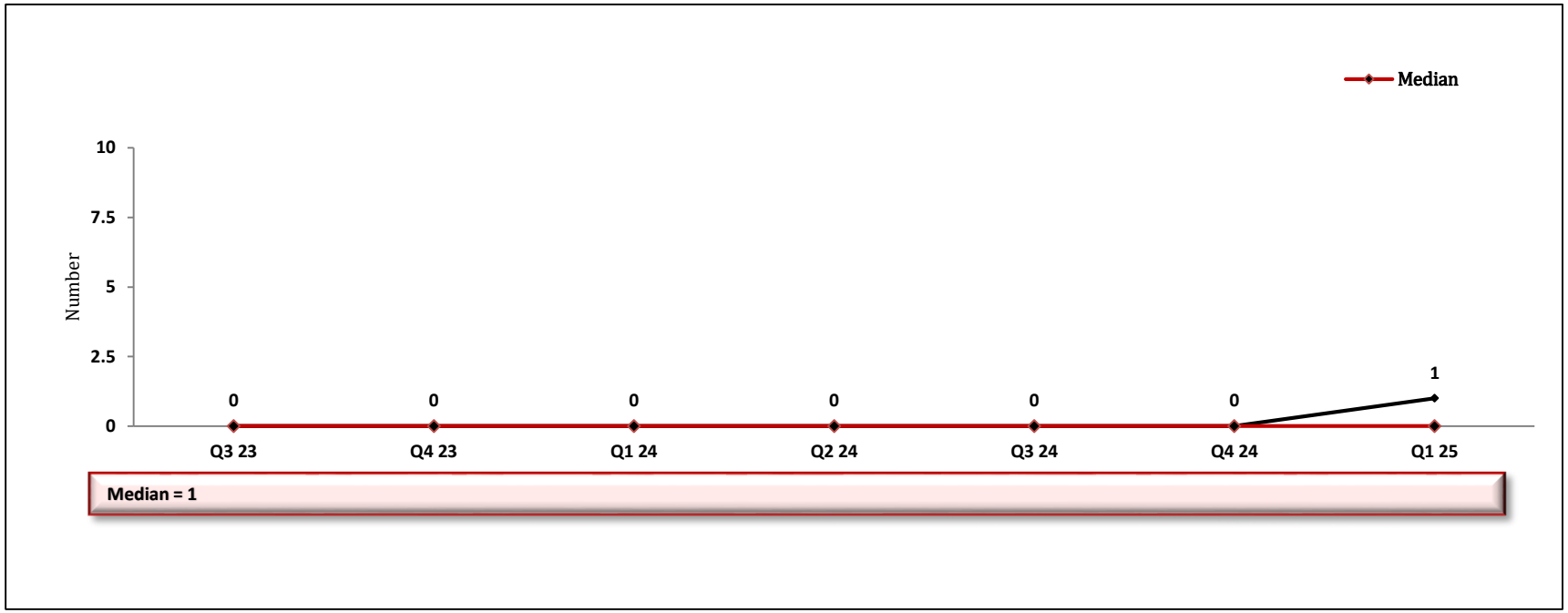
Pre & Post Operative Diagnostic Discrepancies



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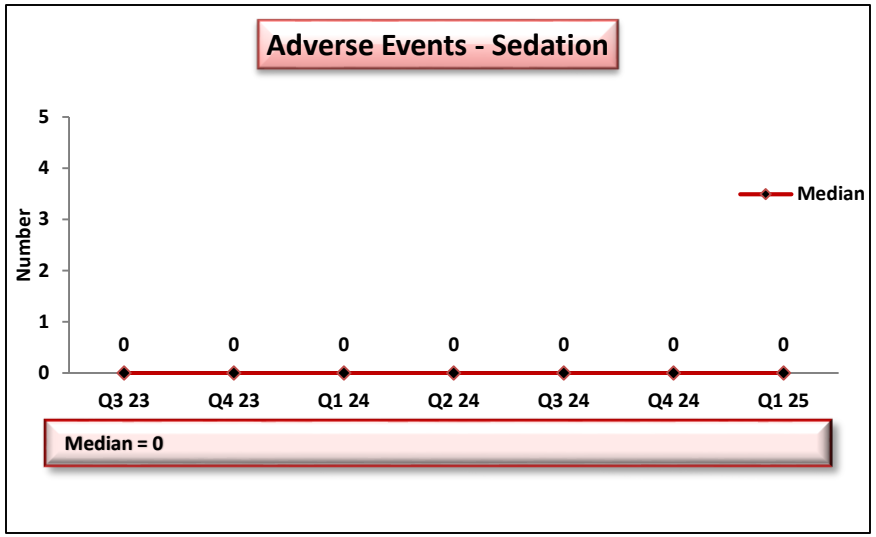
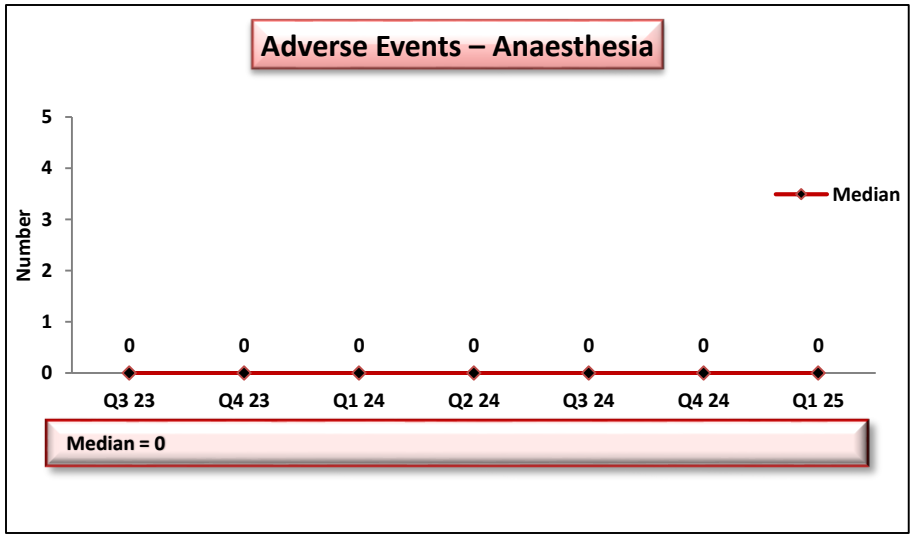
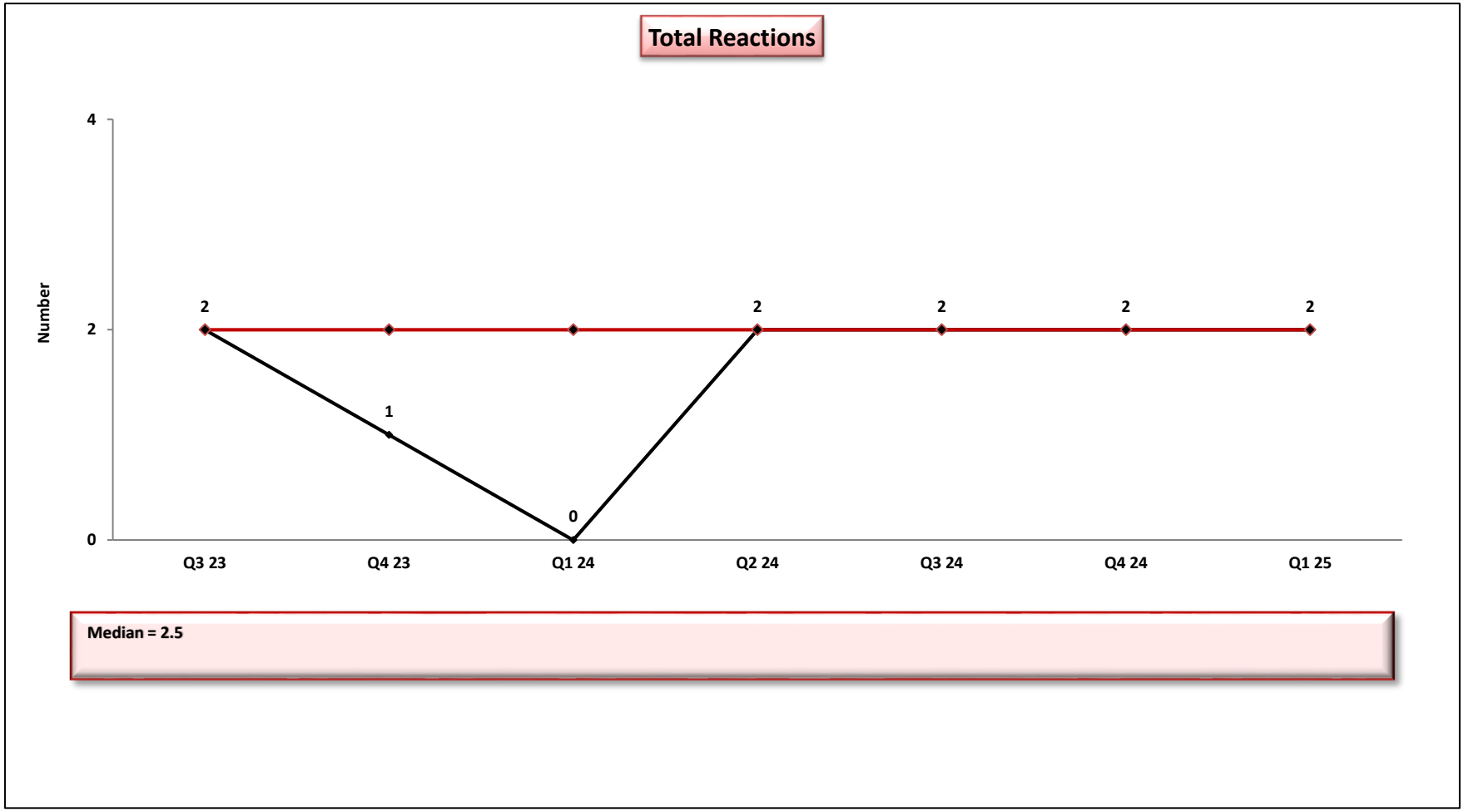
Adverse Events





Blood Transfusion Reactions



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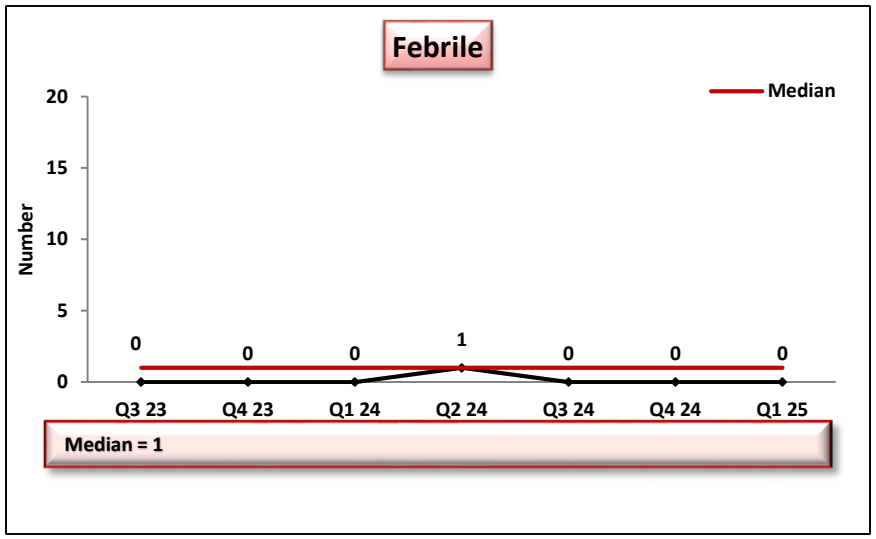
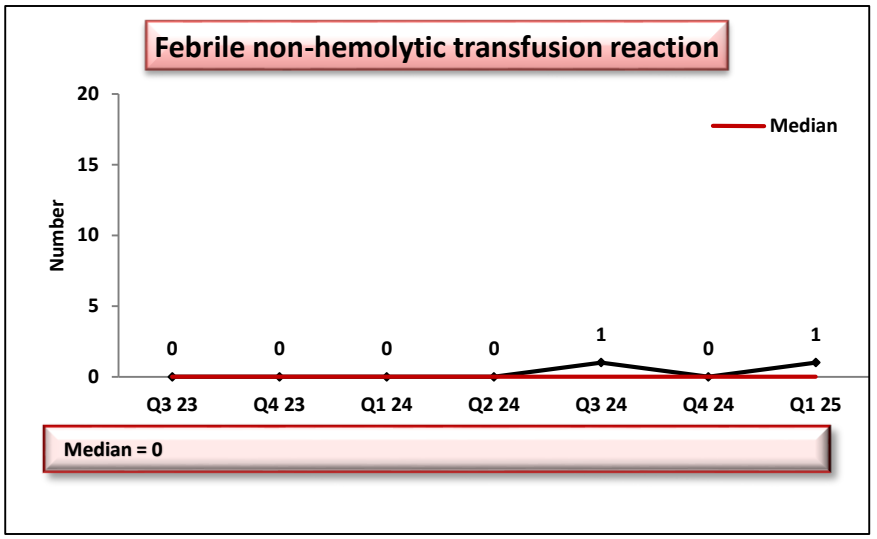
Blood Transfusion Reactions





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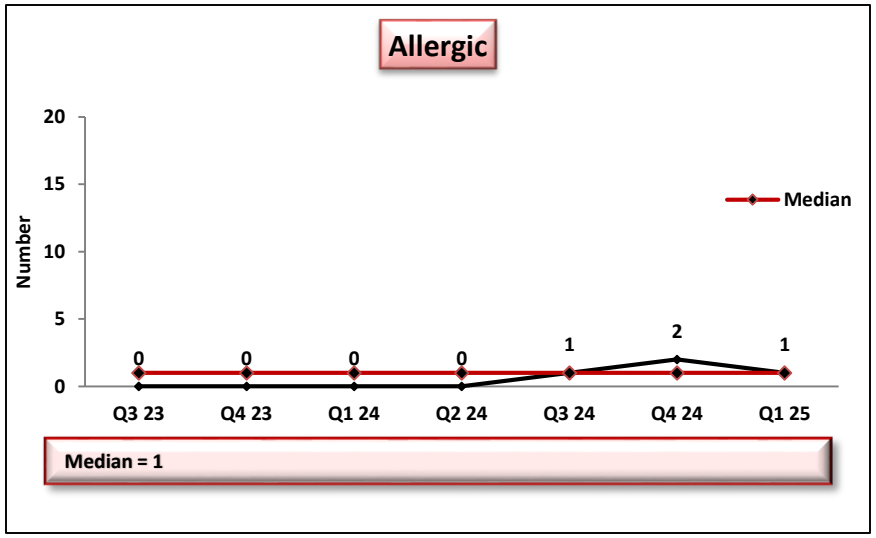
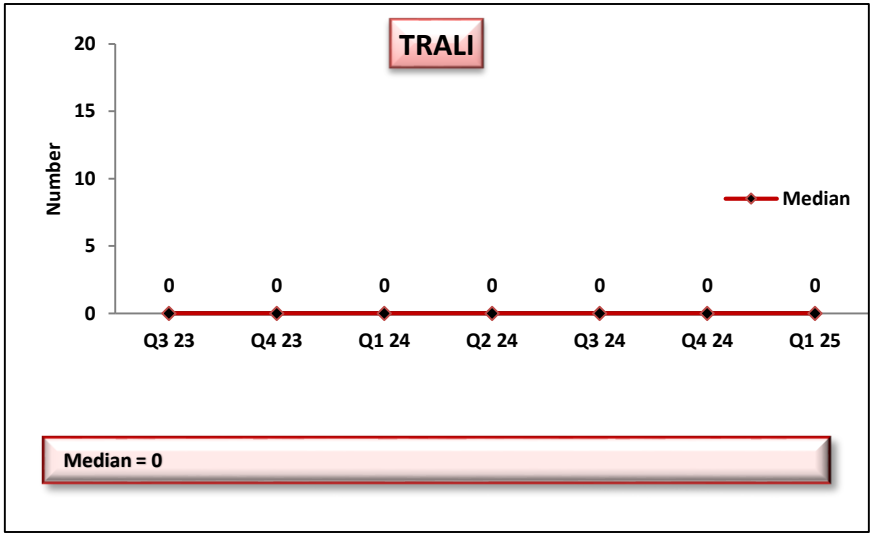
Blood Transfusion Reactions





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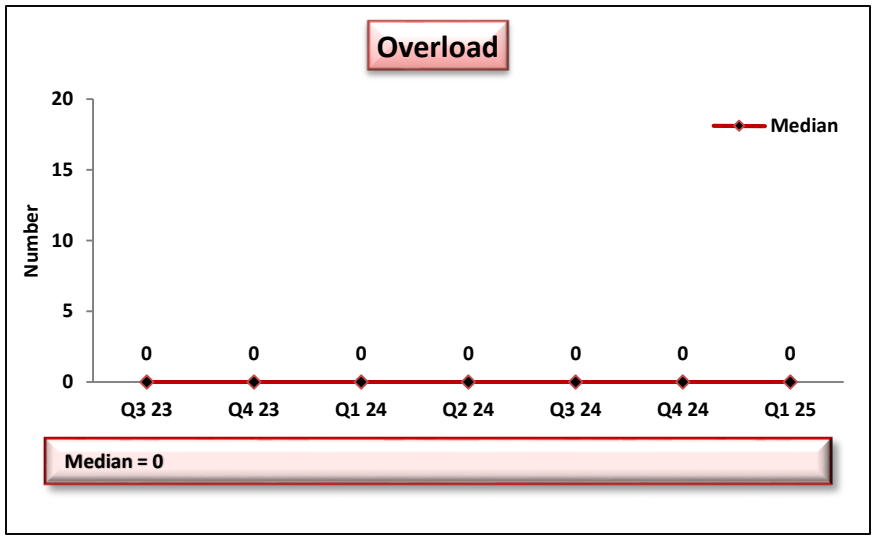
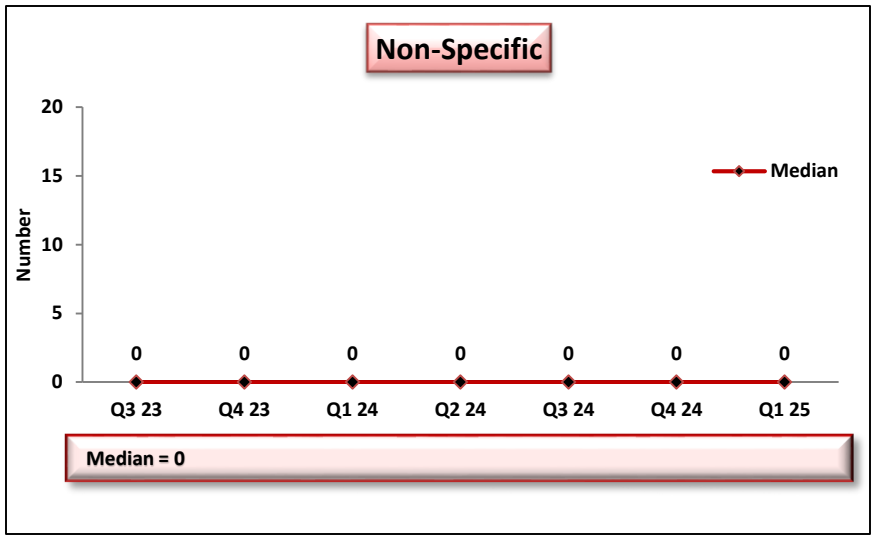
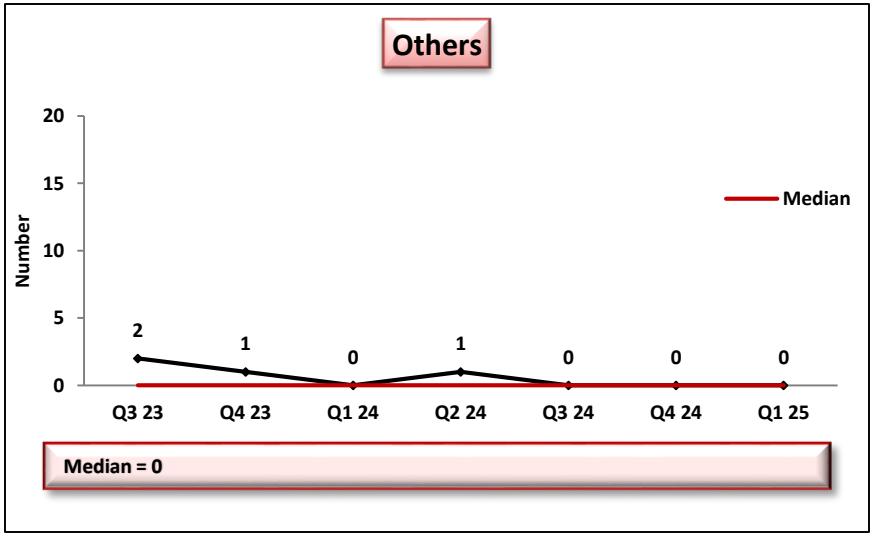
Blood Transfusion Reactions







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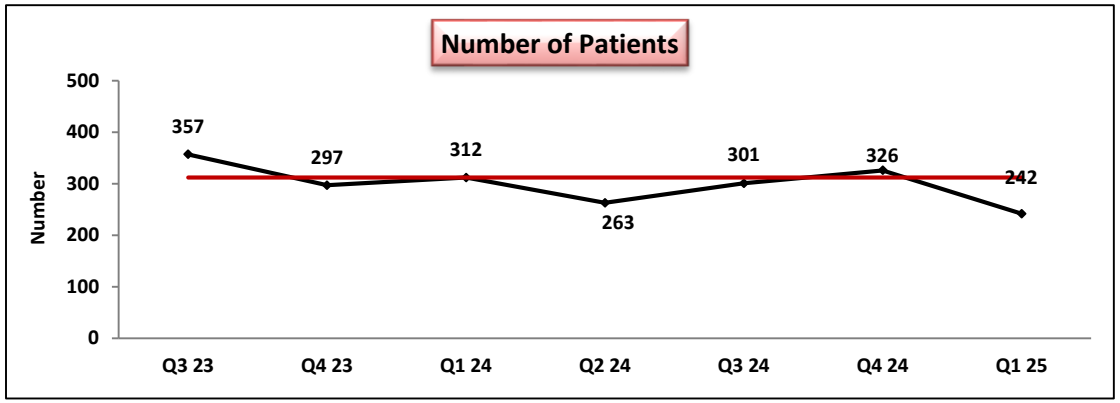
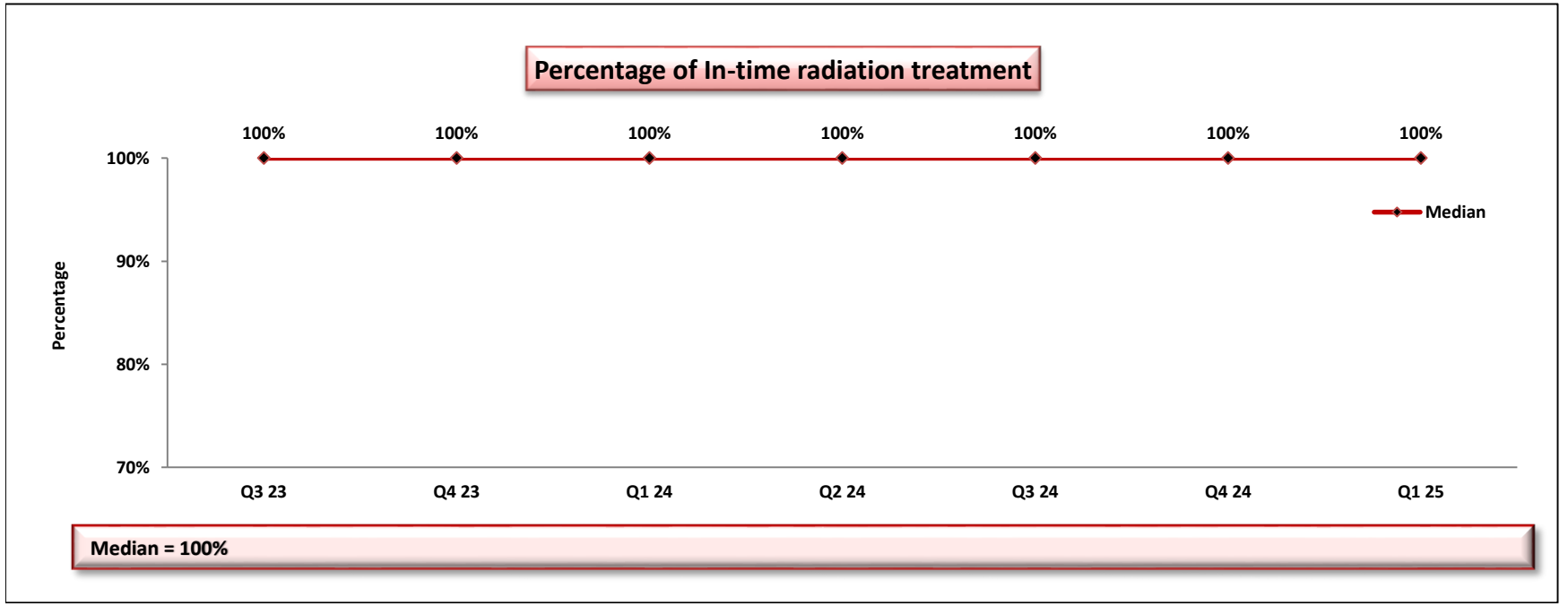
Radiation Oncology Activity



Machine	Down Time
Vital Beam 1	06.00 Hours
Vital Beam 2	11.5 Hours
CT	0 Hours



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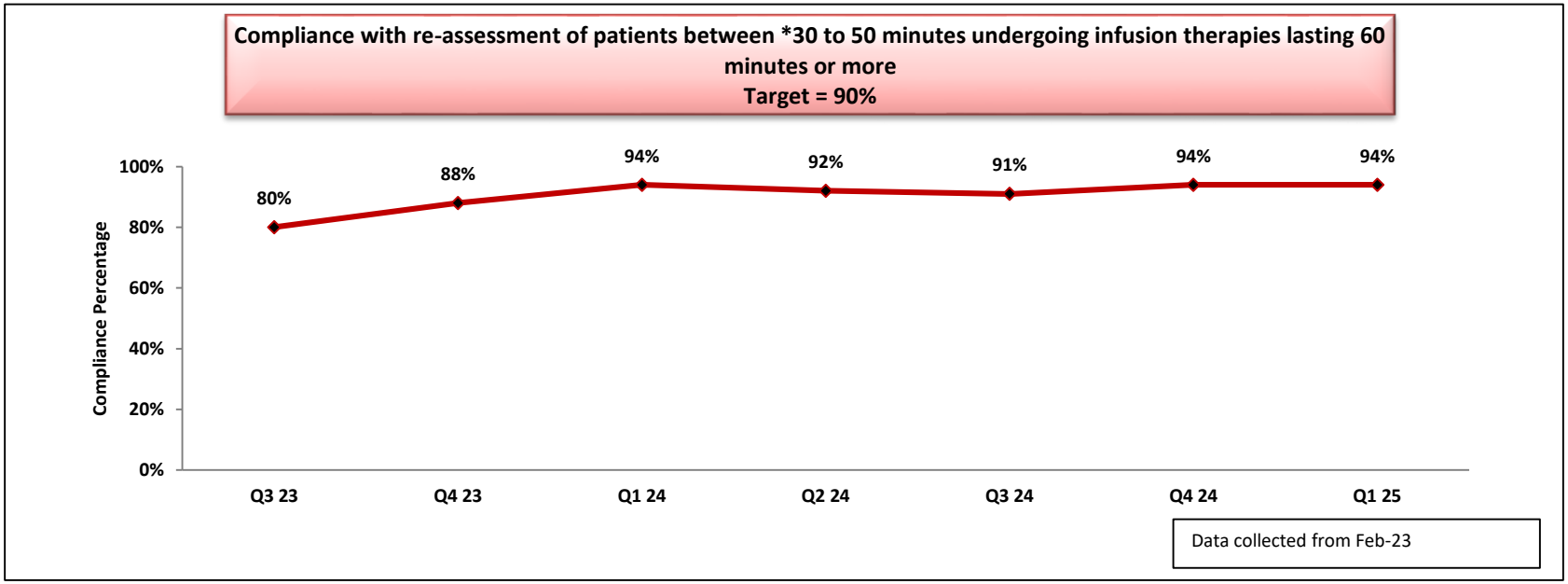
Hospital-wide Indicators 2024



**This indicator was revised from Jan – 2024 (Compliance with the reassessment of patients between 30 to 50 minutes).*

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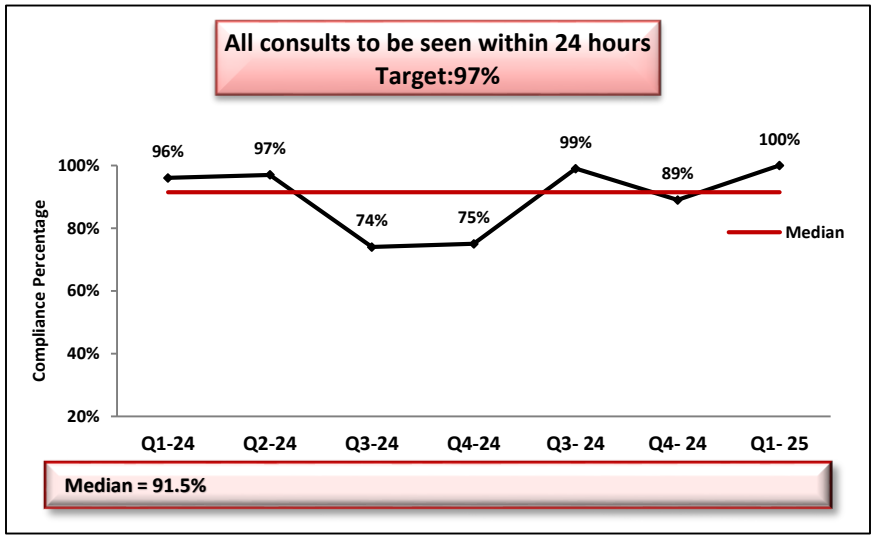
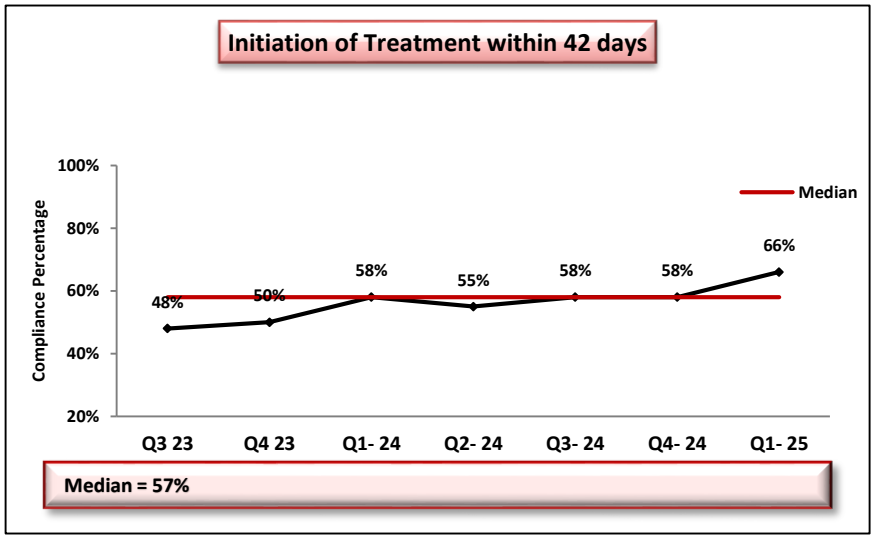
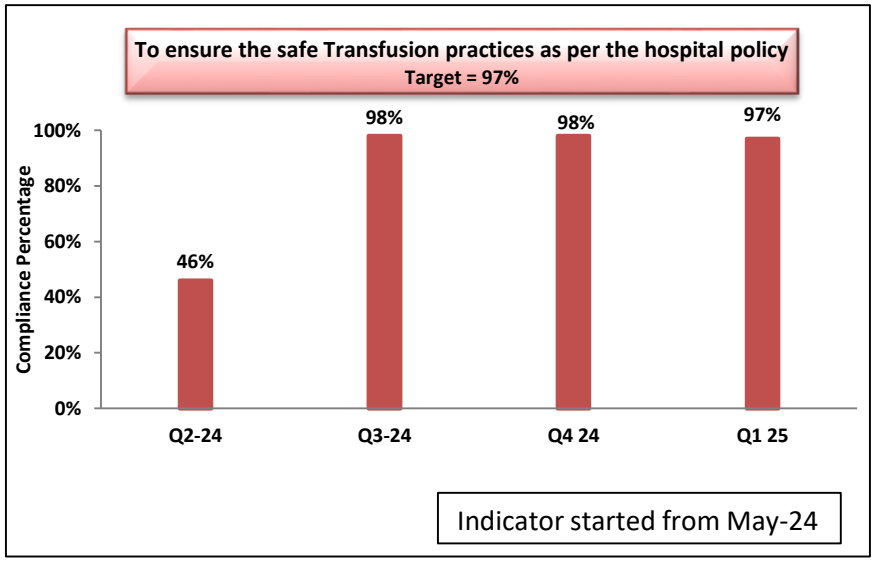
Hospital-wide Indicators-2024







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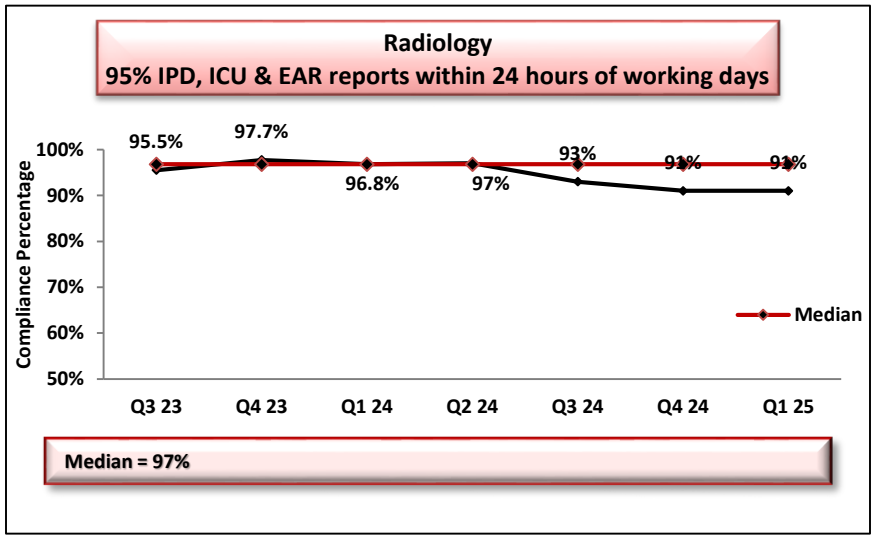
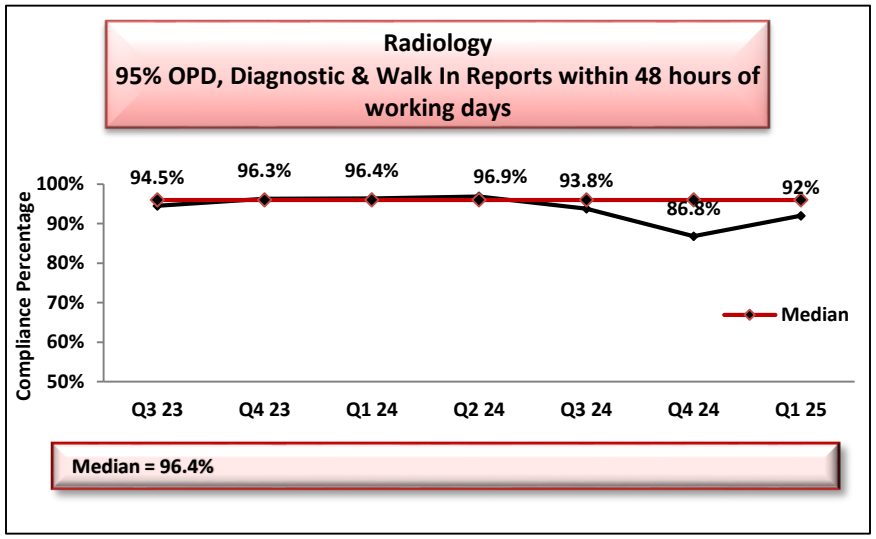
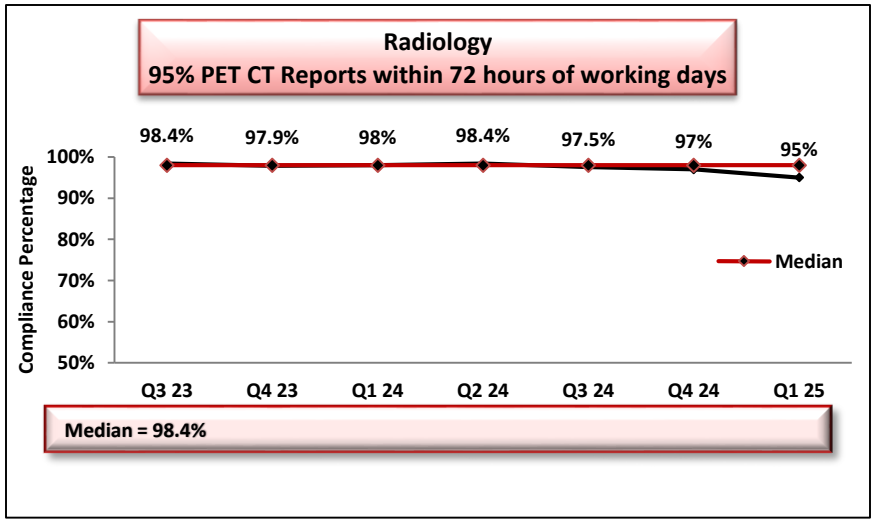
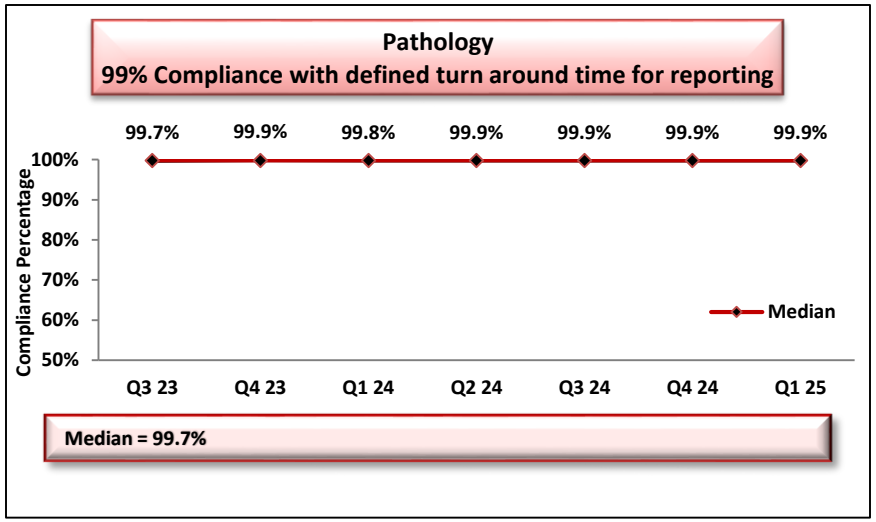
Compliance with defined Turnaround Time for Reporting









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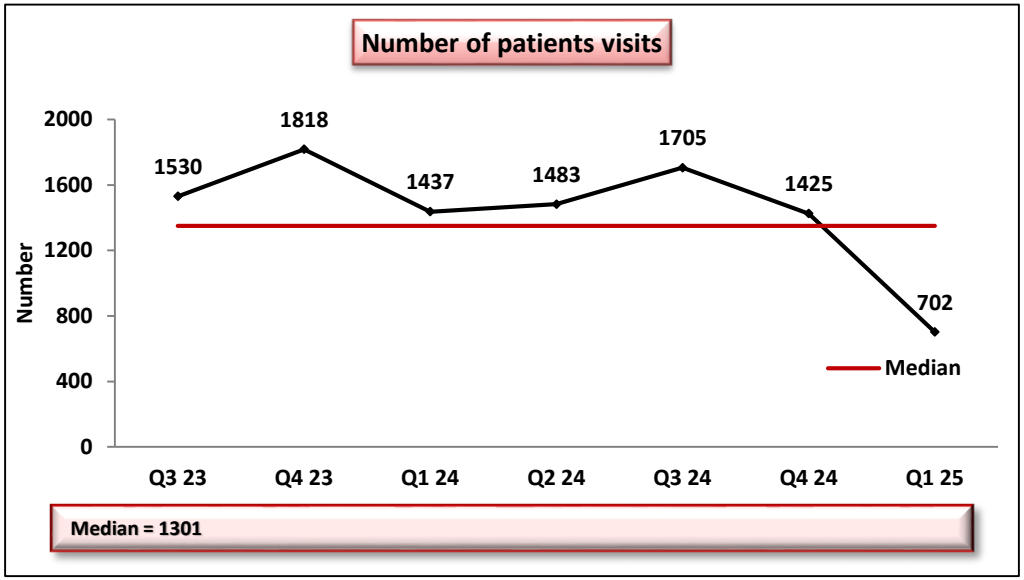
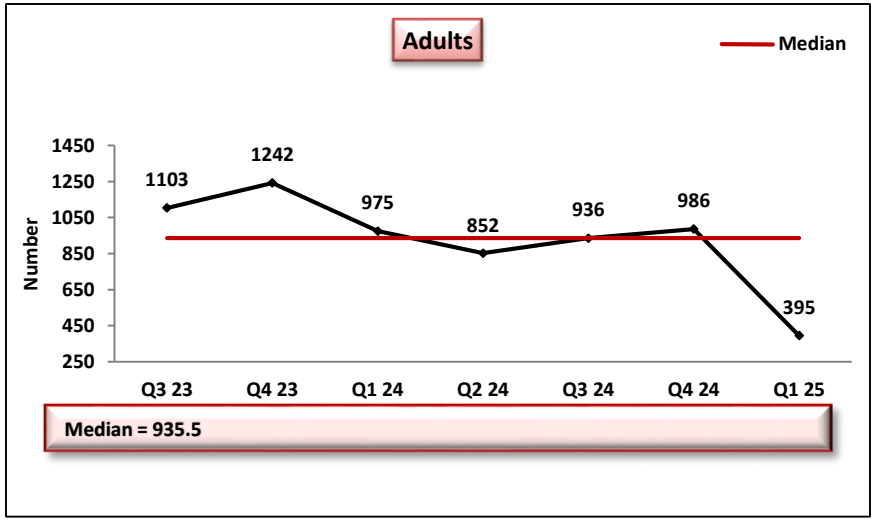
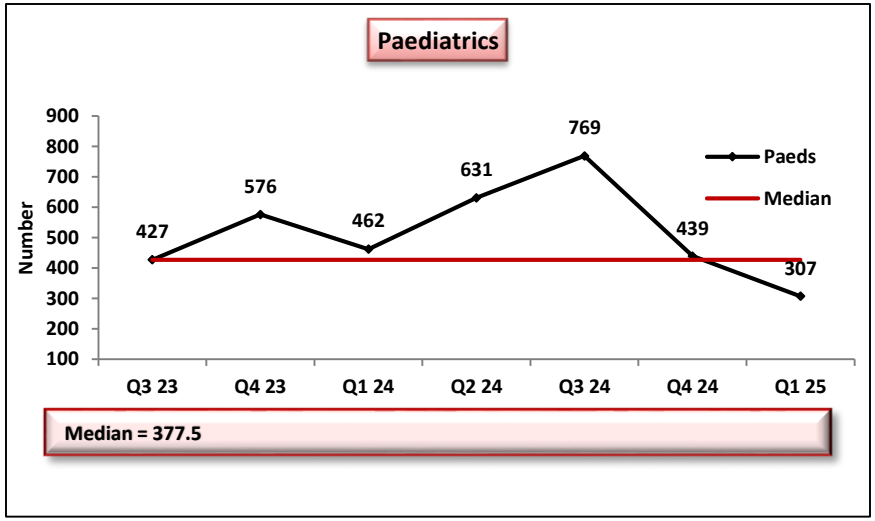
Outpatient Parenteral Antibiotic Therapy







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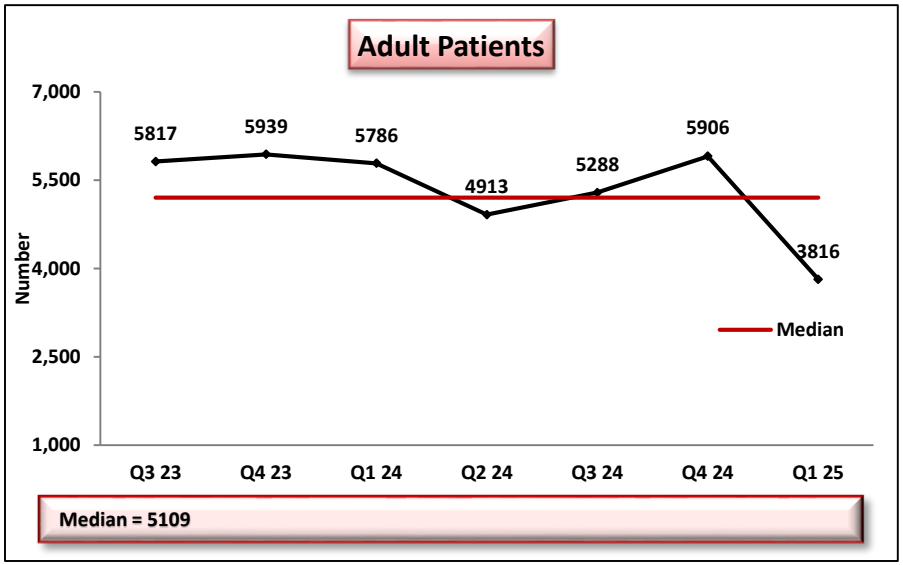
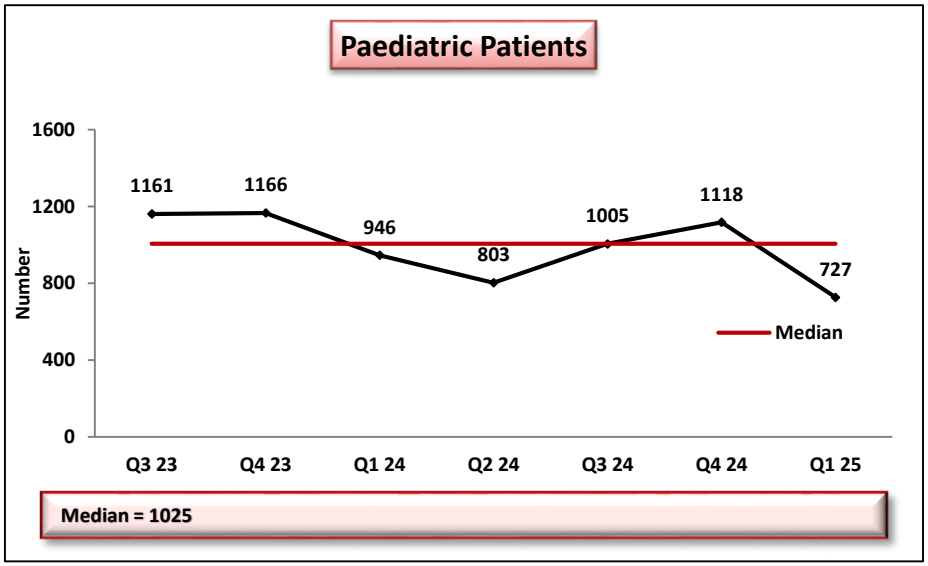
Chemotherapy Activity





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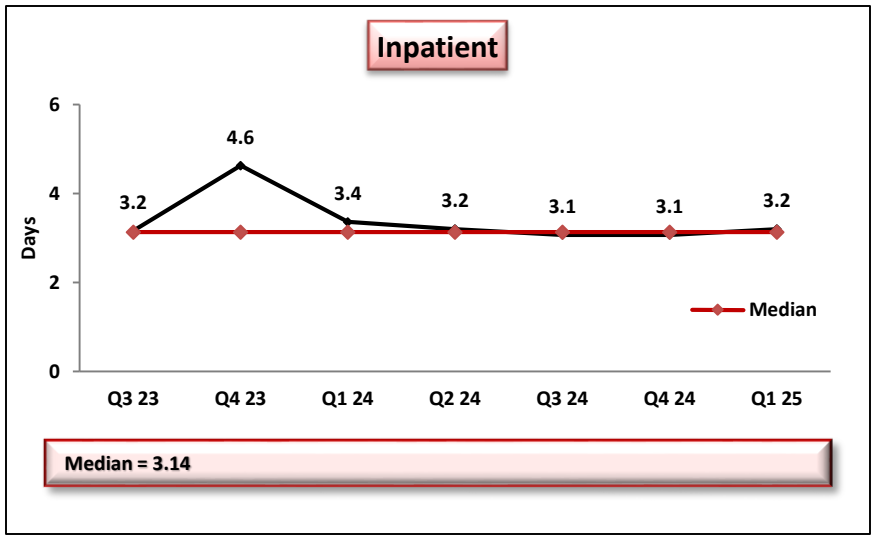
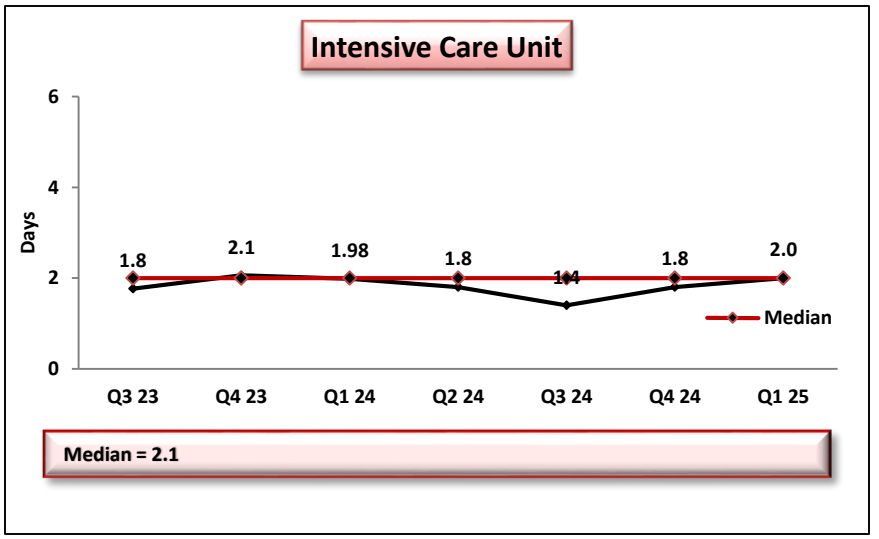
Average Length of Stay





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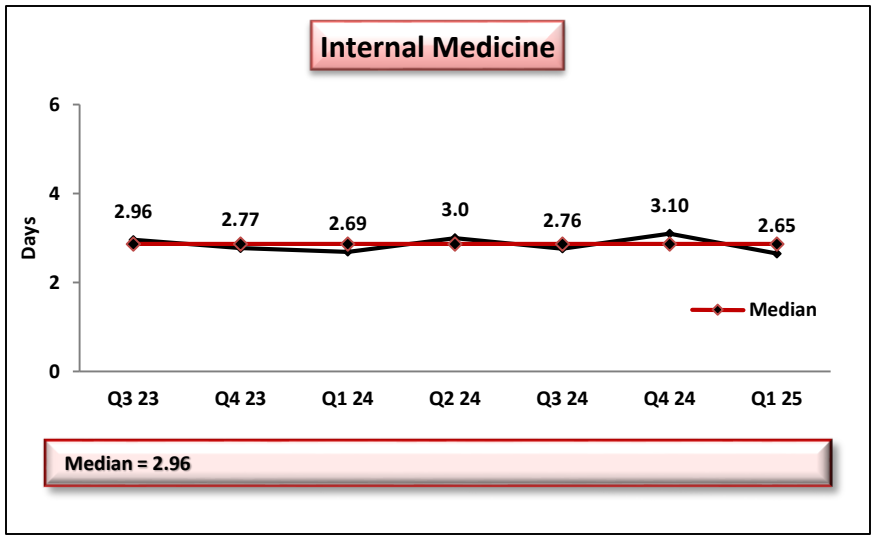
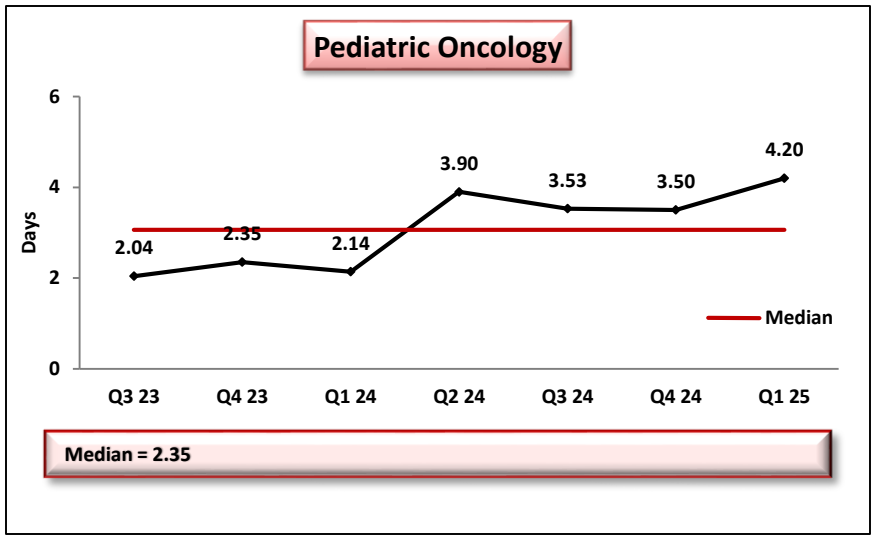
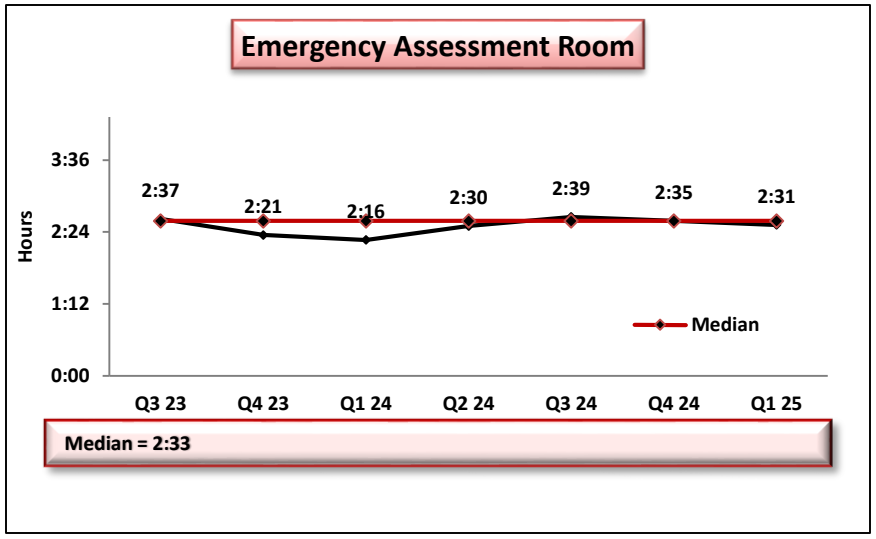
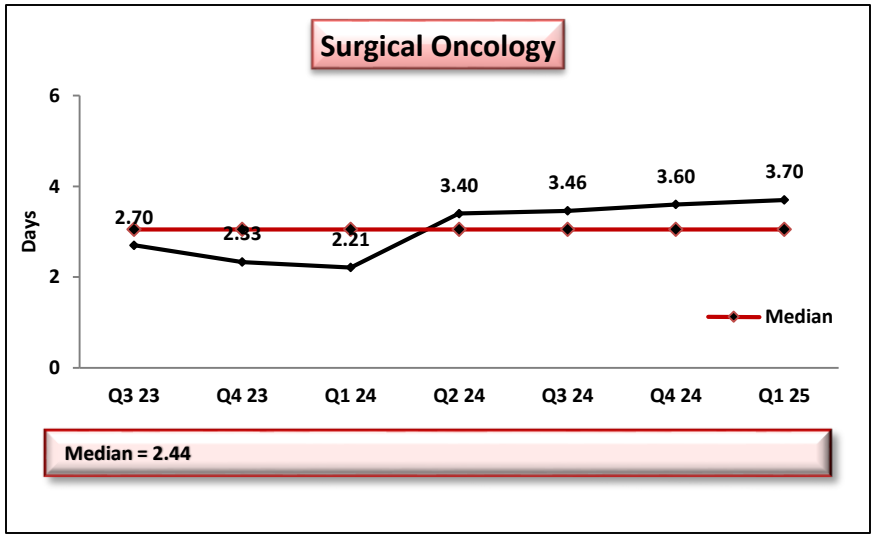
Average Length of Stay









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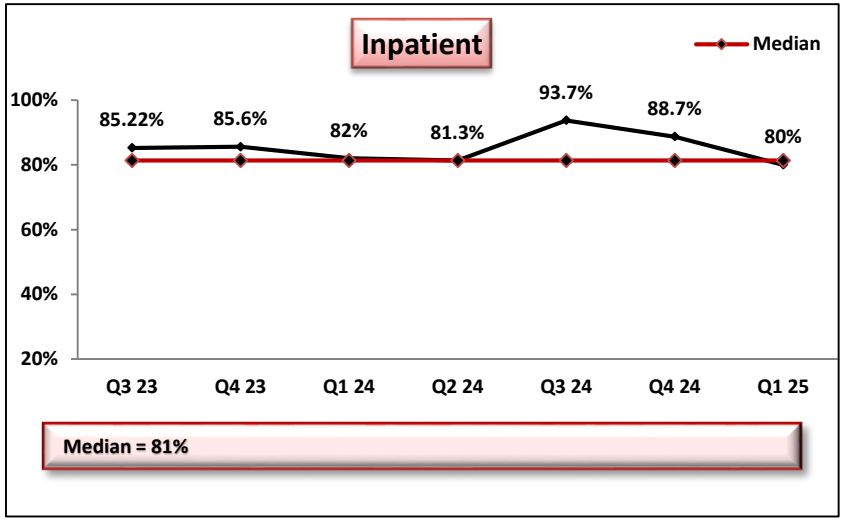
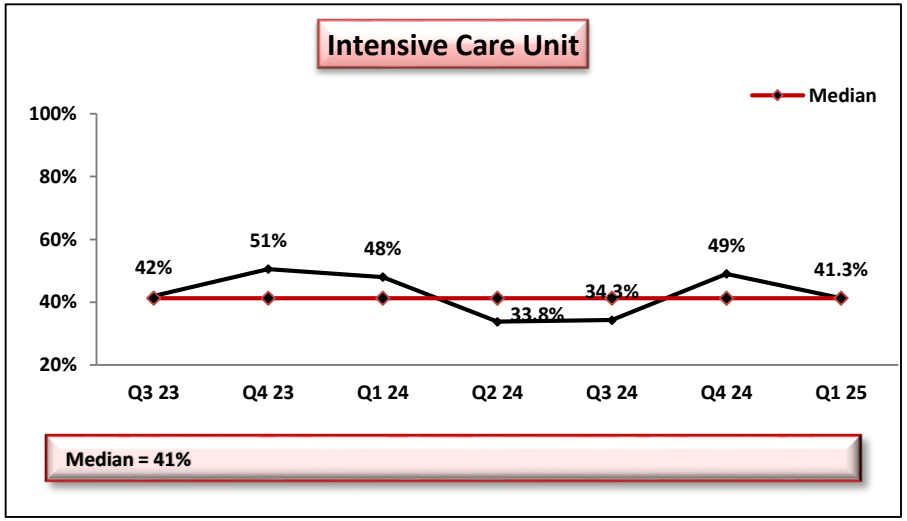
Bed Occupancy Rate





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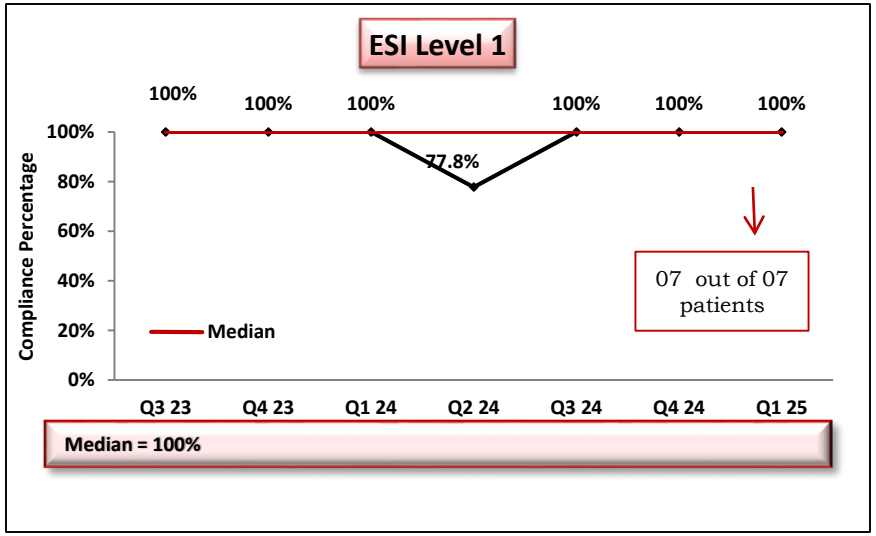
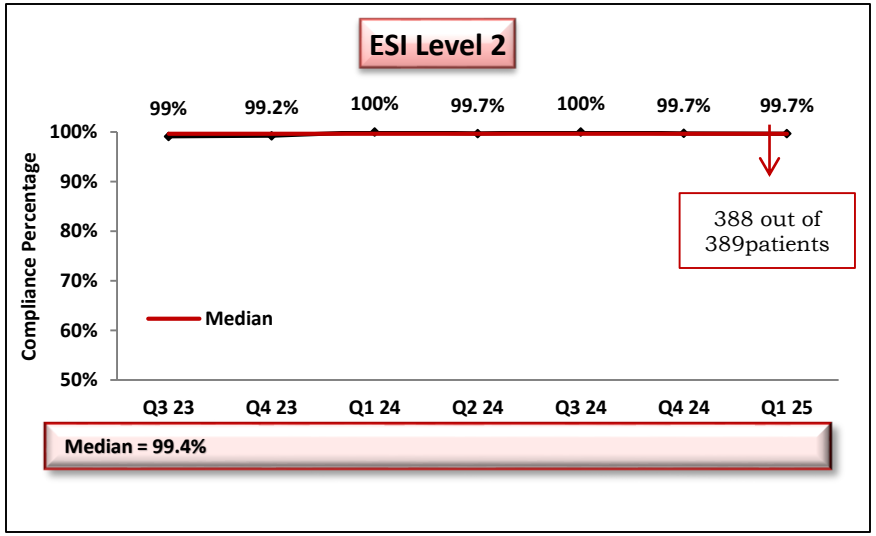
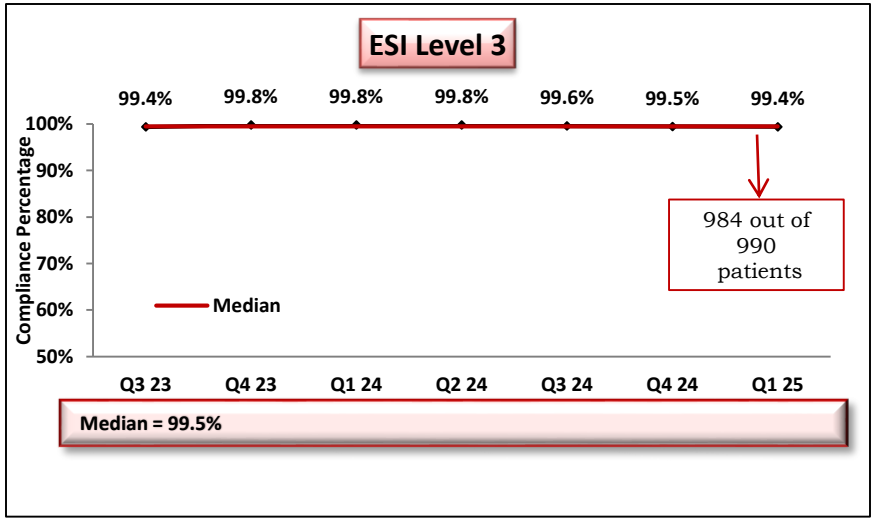
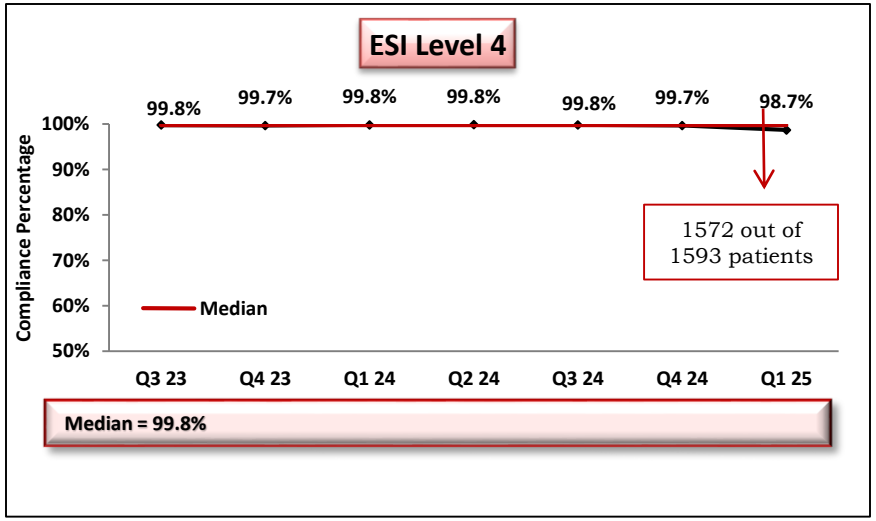
Emergency Assessment Room Statistics

Patients Seen within Defined Waiting Times – ADULTS









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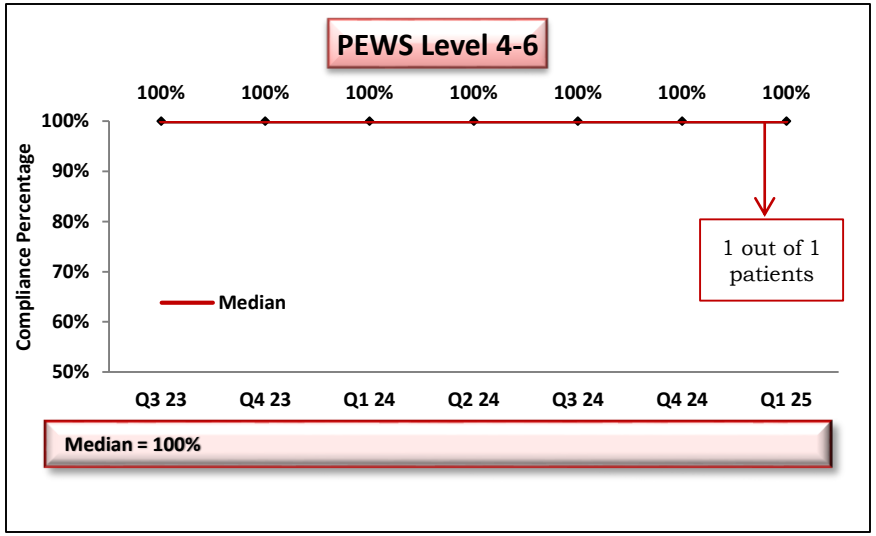
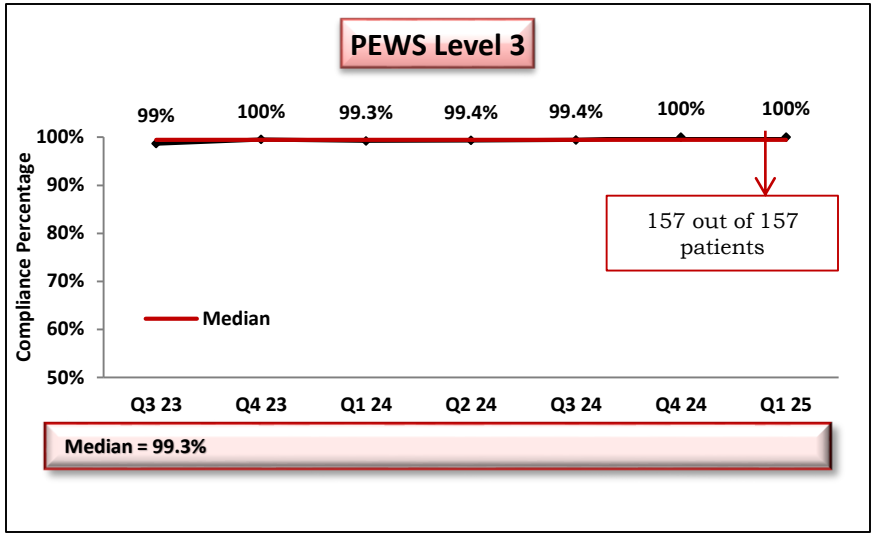
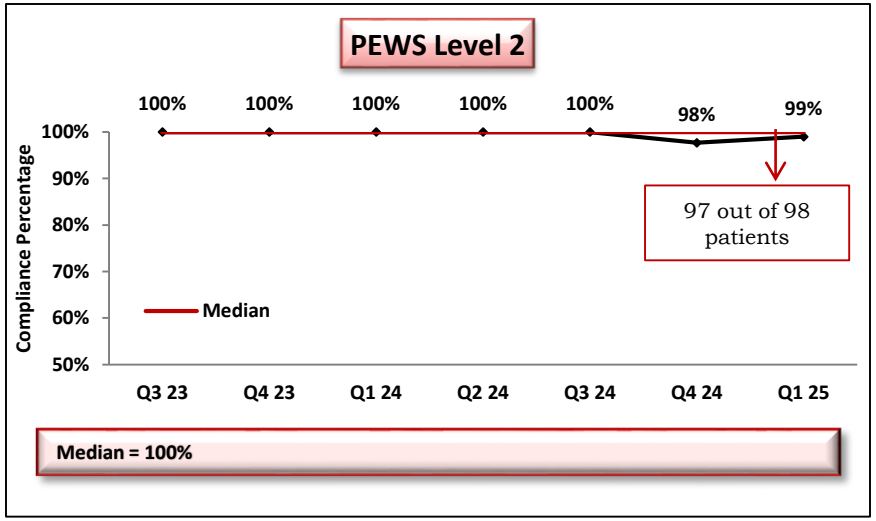
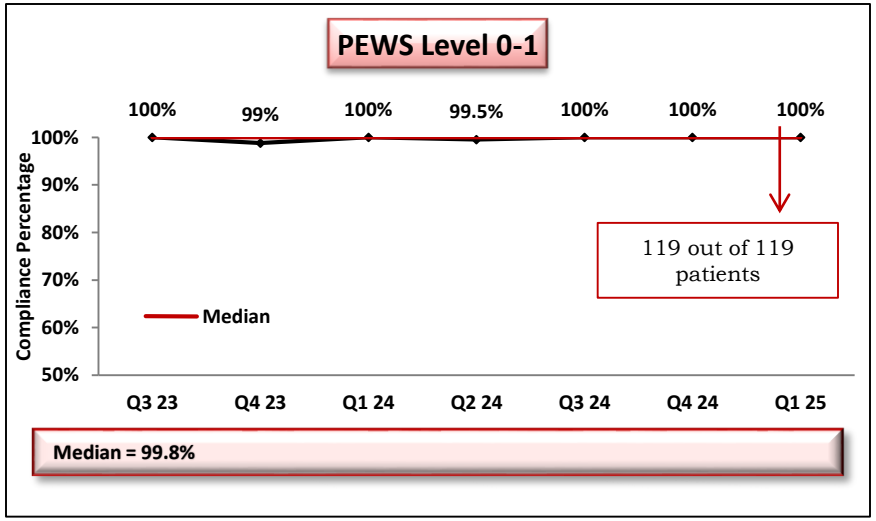
Emergency Assessment Room Statistics

Patients Seen within Defined Waiting Times – Paediatrics









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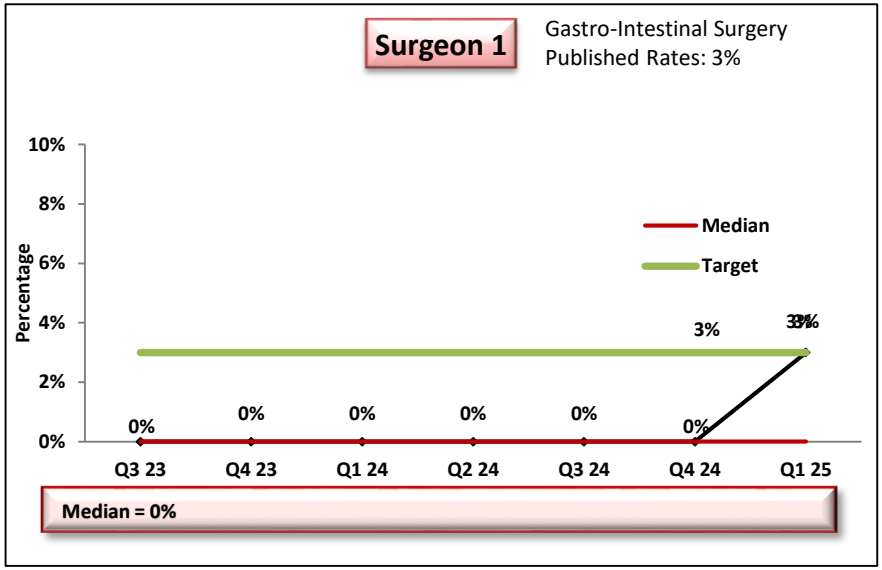
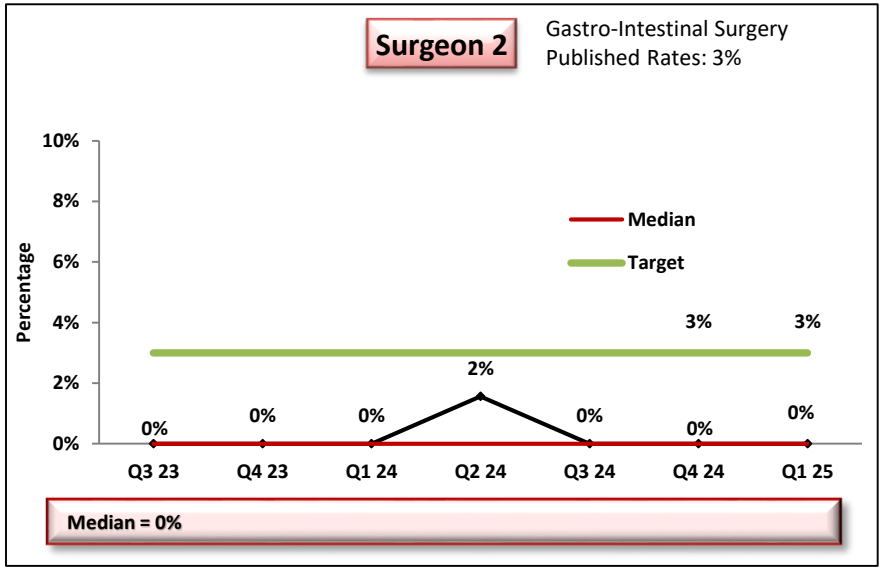
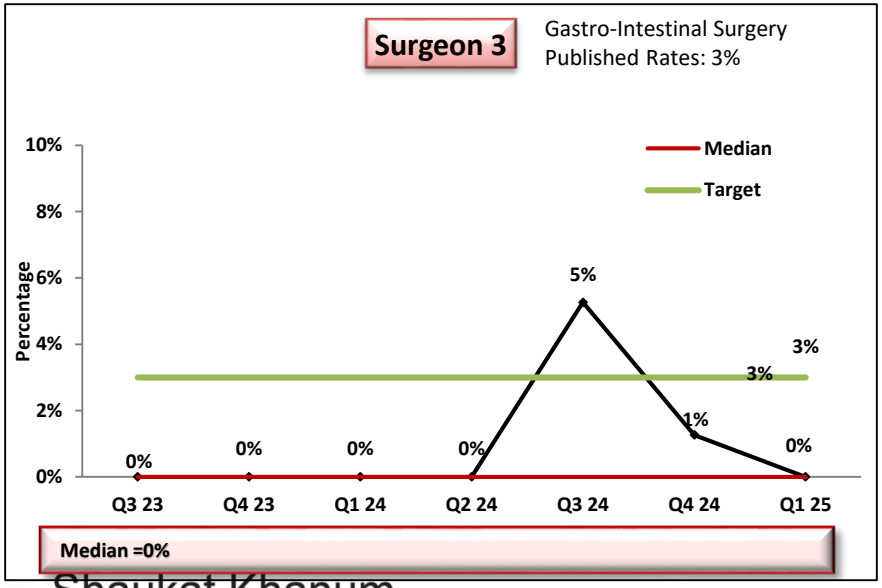
Clinical Performance Indicators

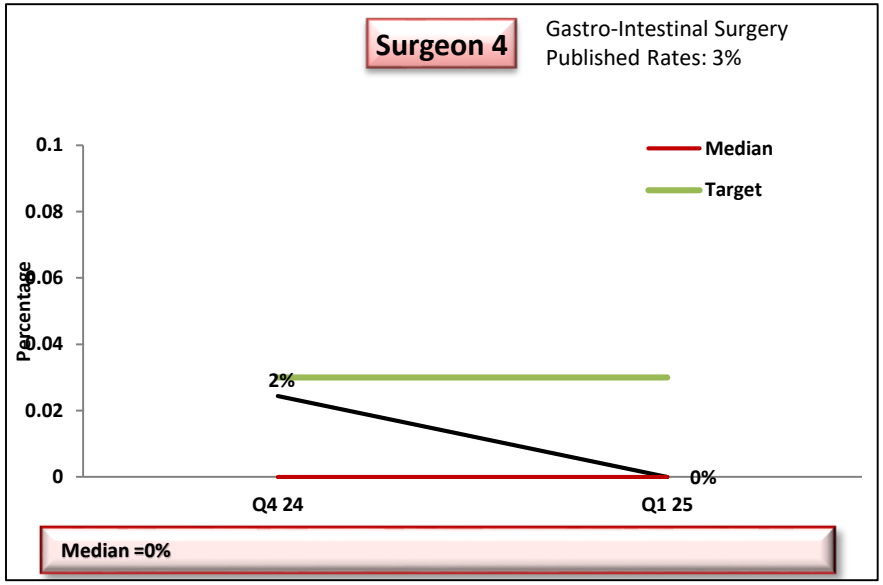
Re-admission within 30 days of discharge

Surgical Oncology









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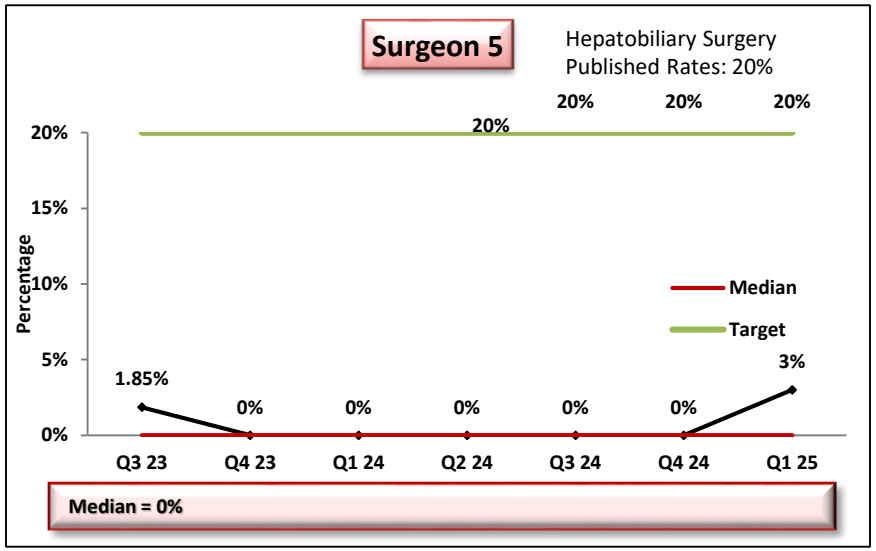
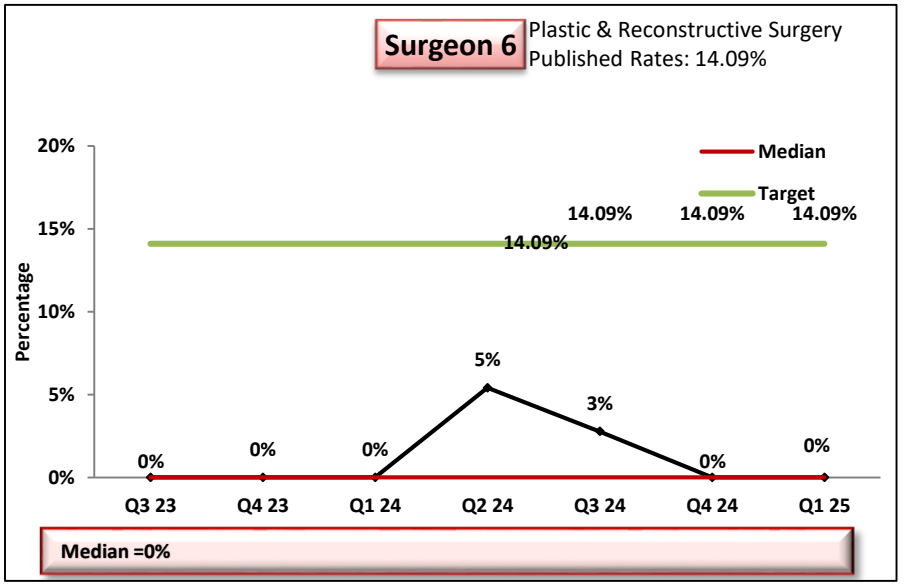
Clinical Performance Indicators

Re-admission within 30 days of discharge

Surgical Oncology





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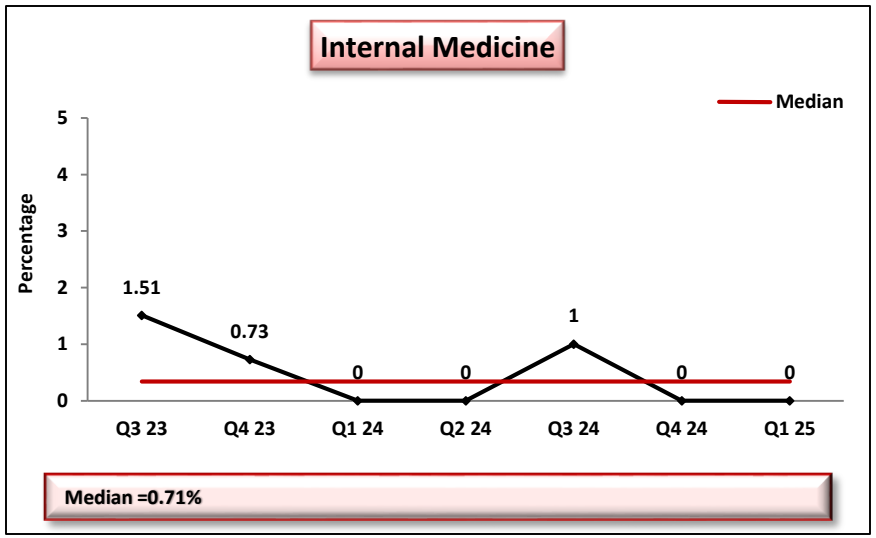
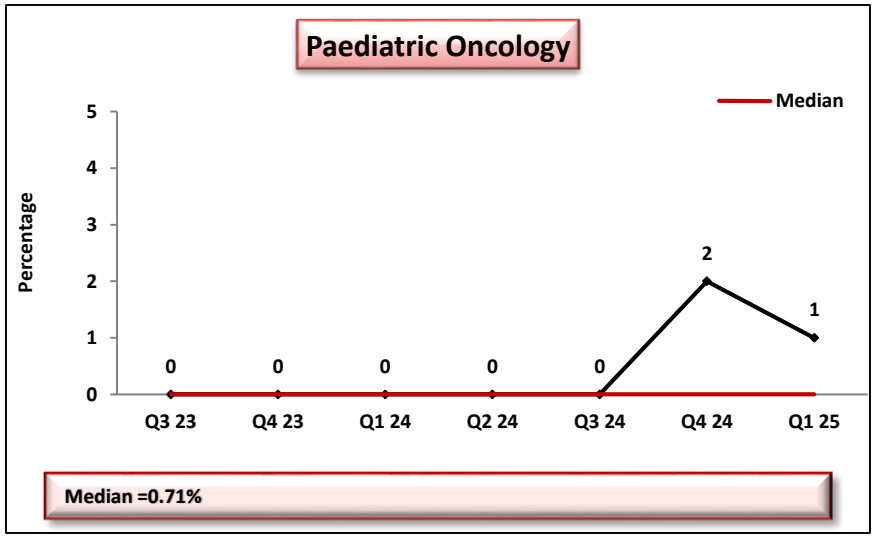
Clinical Performance Indicators

Re-admission within 7 days of discharge

Specialty wise





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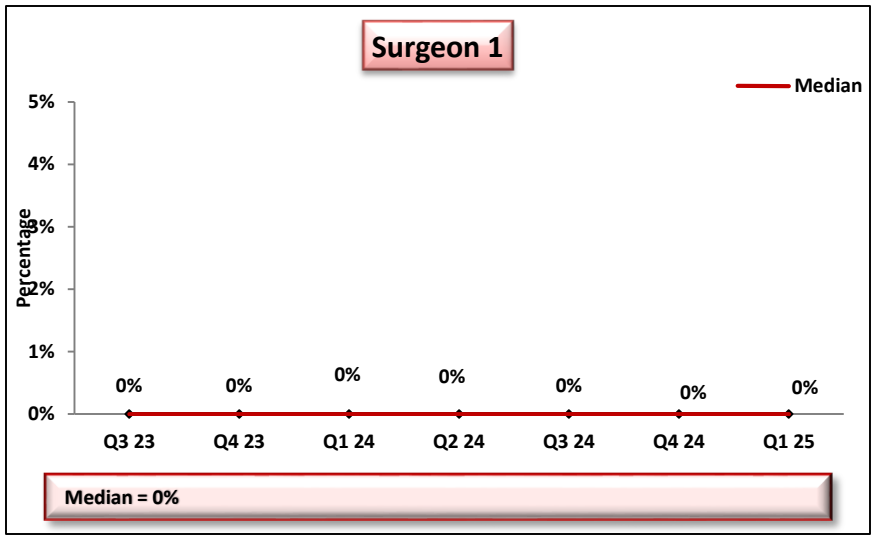
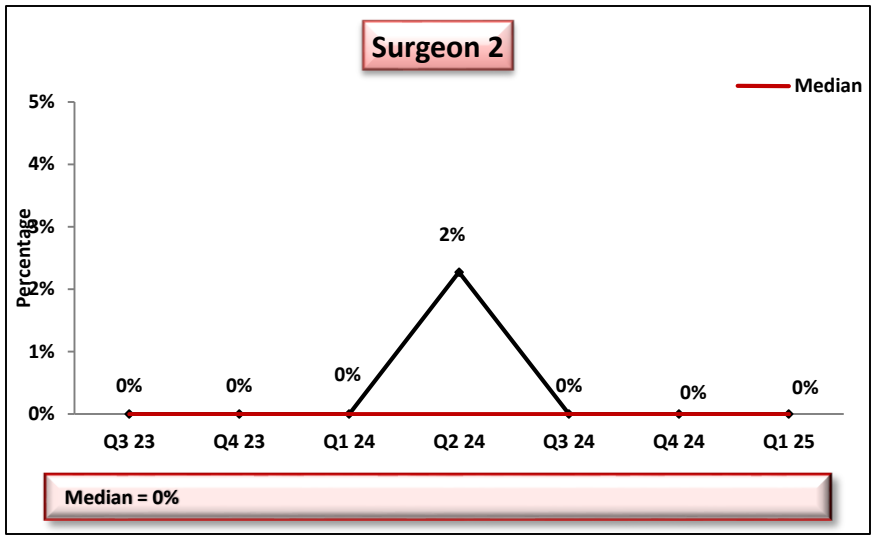
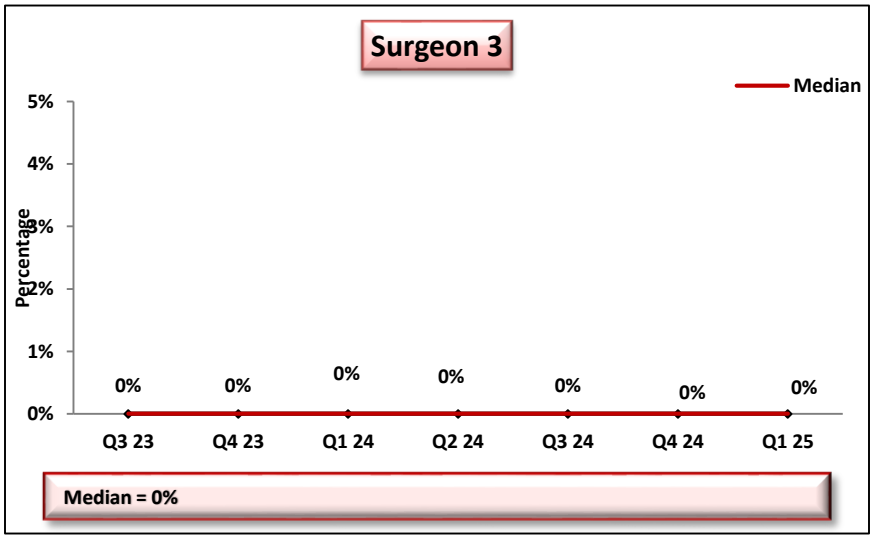
Clinical Performance Indicators

Multiple Surgical Procedures in One admission







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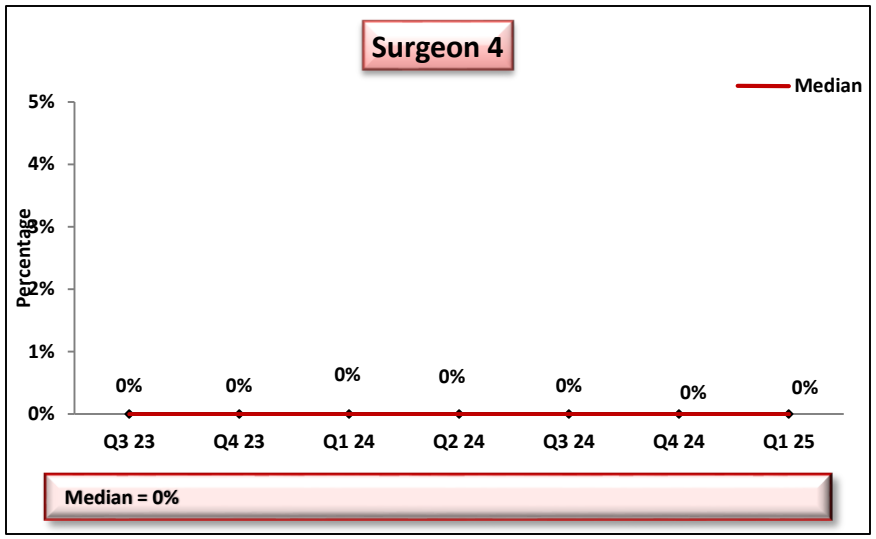
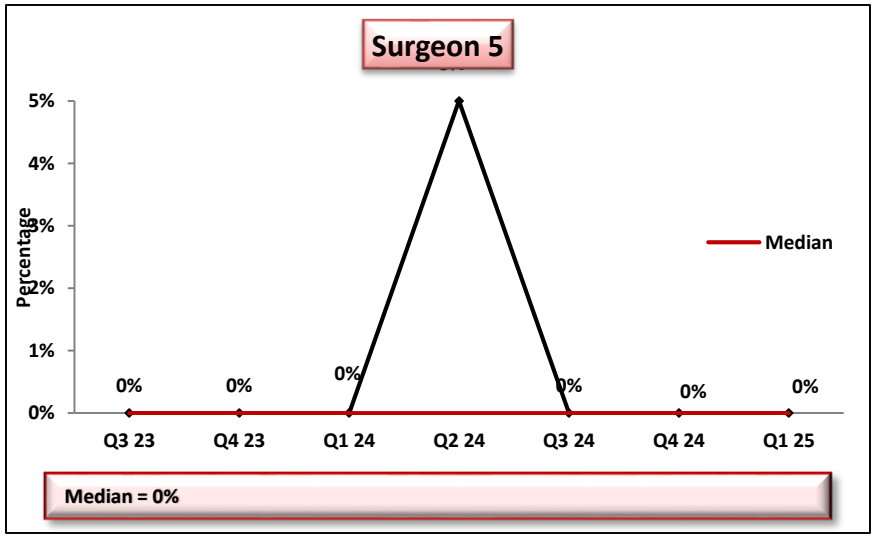
Clinical Performance Indicators

Multiple Surgical Procedures in One admission





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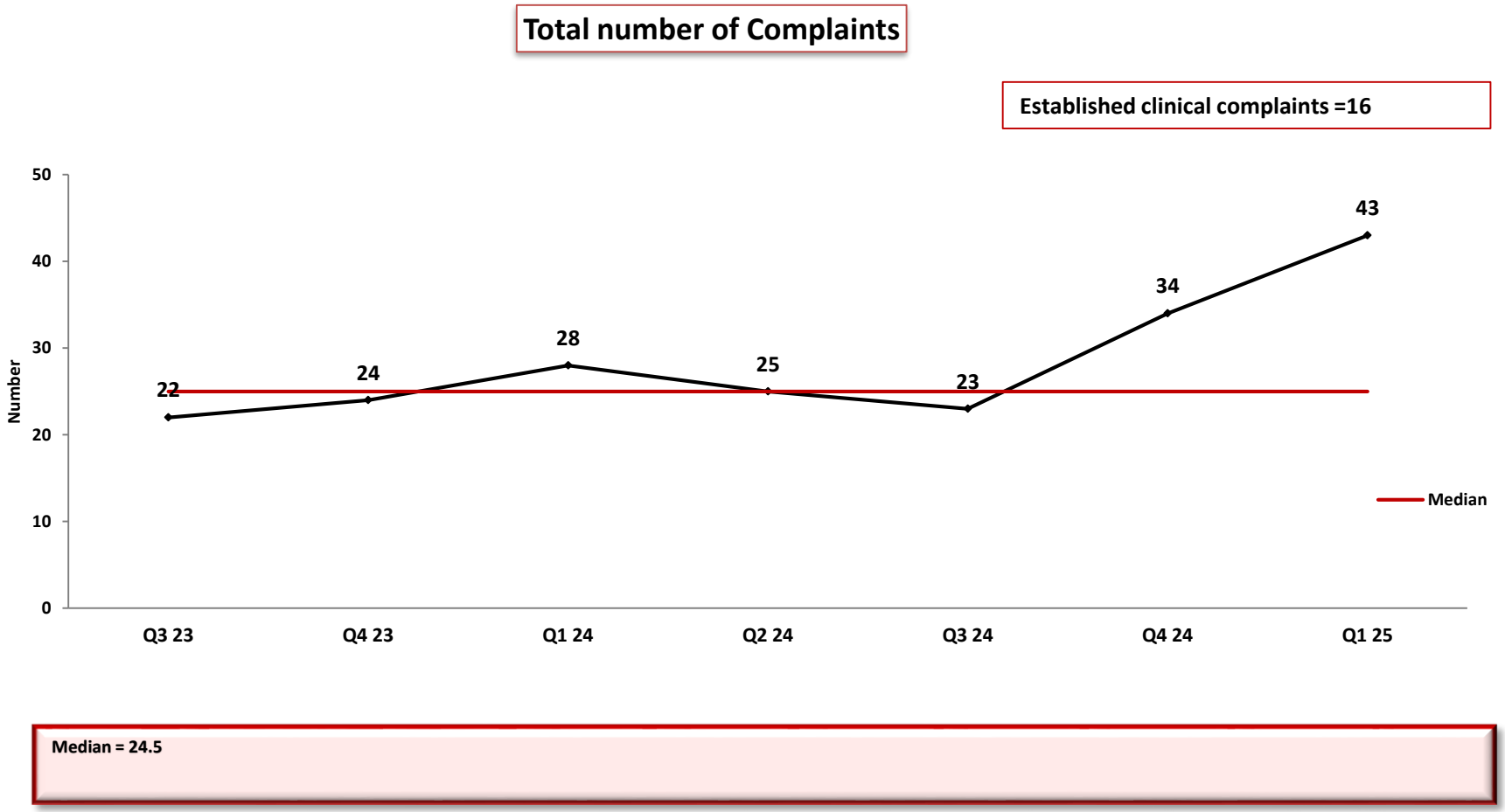
Complaints–Clinical Departments



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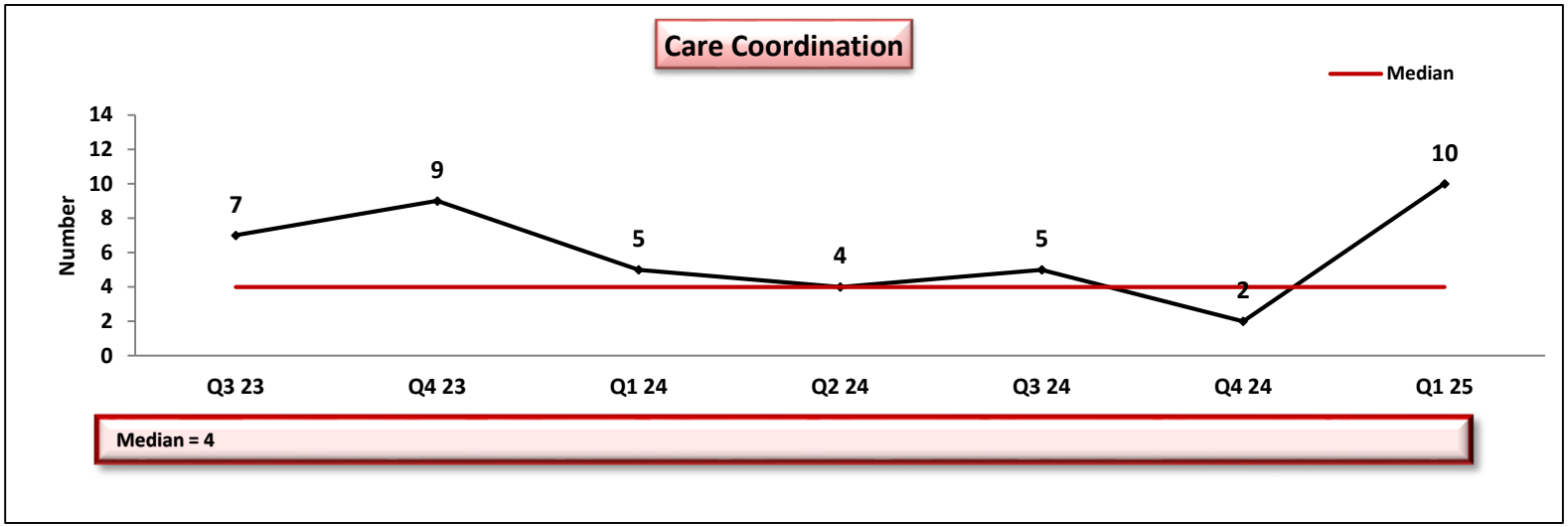
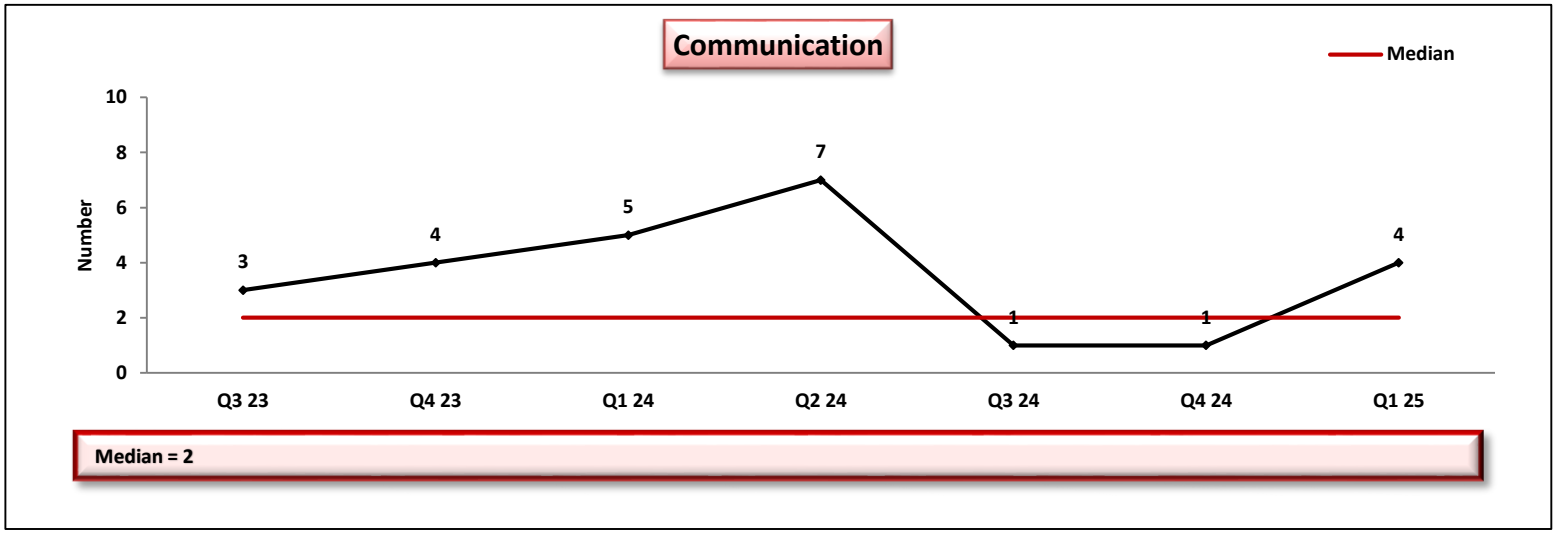
Established Clinical Complaints by Categories - Top 4



Care Coordination

- Delay in chemo protocol verification
- Incorrect appointment of CT scan
- Delay in assessing patient in WIC
- Delay in taking history of MRII
- CT scan list was not reviewed a day prior , resulting patient reached the hospital
- Delay in CT scan report verification
- Patient waited longer for X-ray
- Delay in appointment

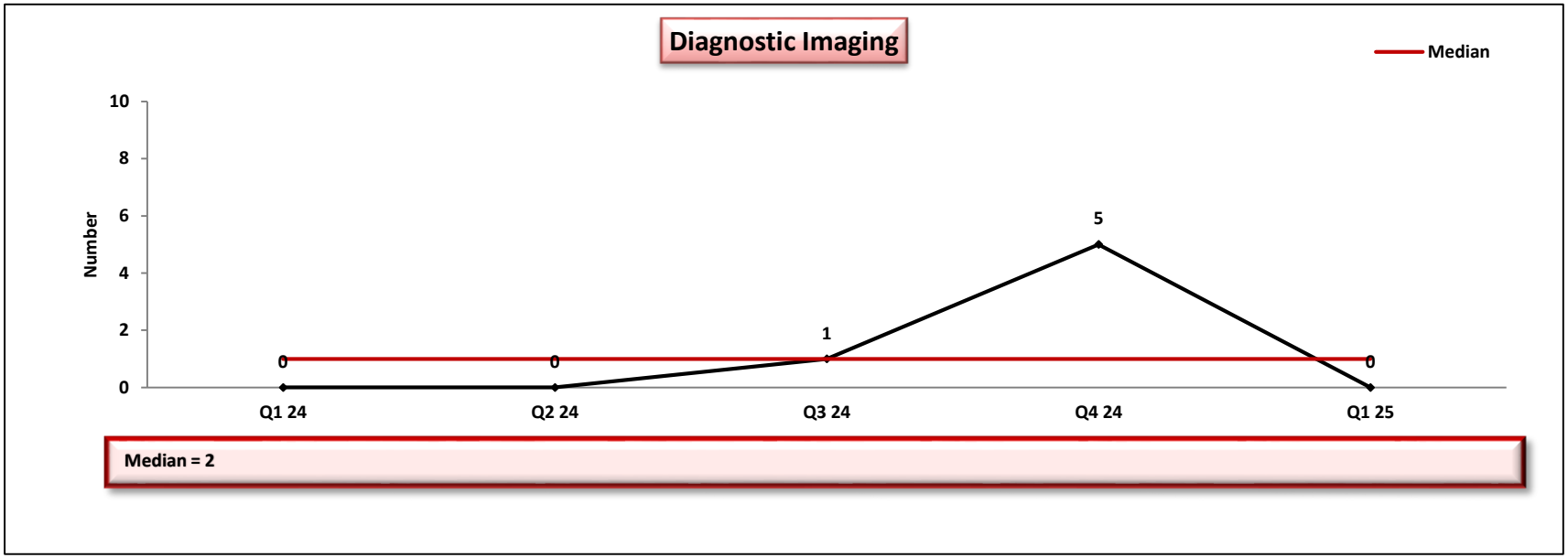
Established Clinical Complaints by Categories - Top 4



Communication

- Patient was not informed about CT scan report
- Patient chemotherapy was cancelled but it was not informed to the patient
- Patient was not informed about the cancellation of Ultrasound appointment
- Improper information was given about medication

Established Clinical Complaints by Categories - Top 4



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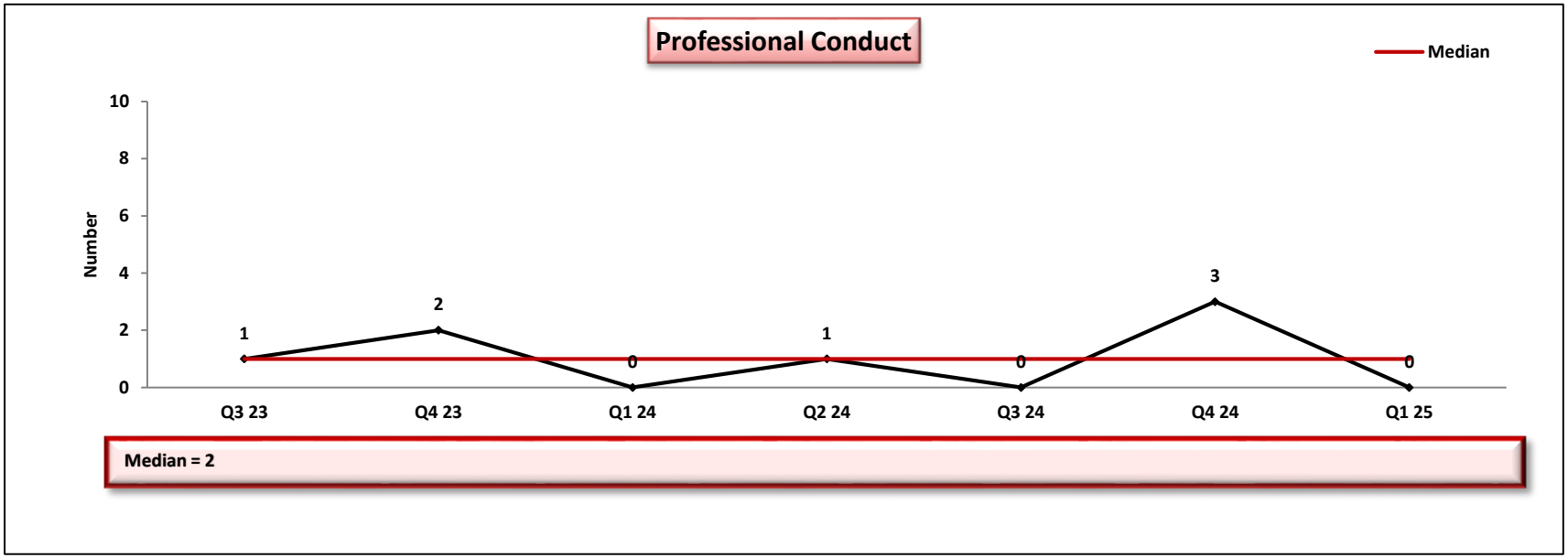
Established Clinical Complaints by Categories - Top 4



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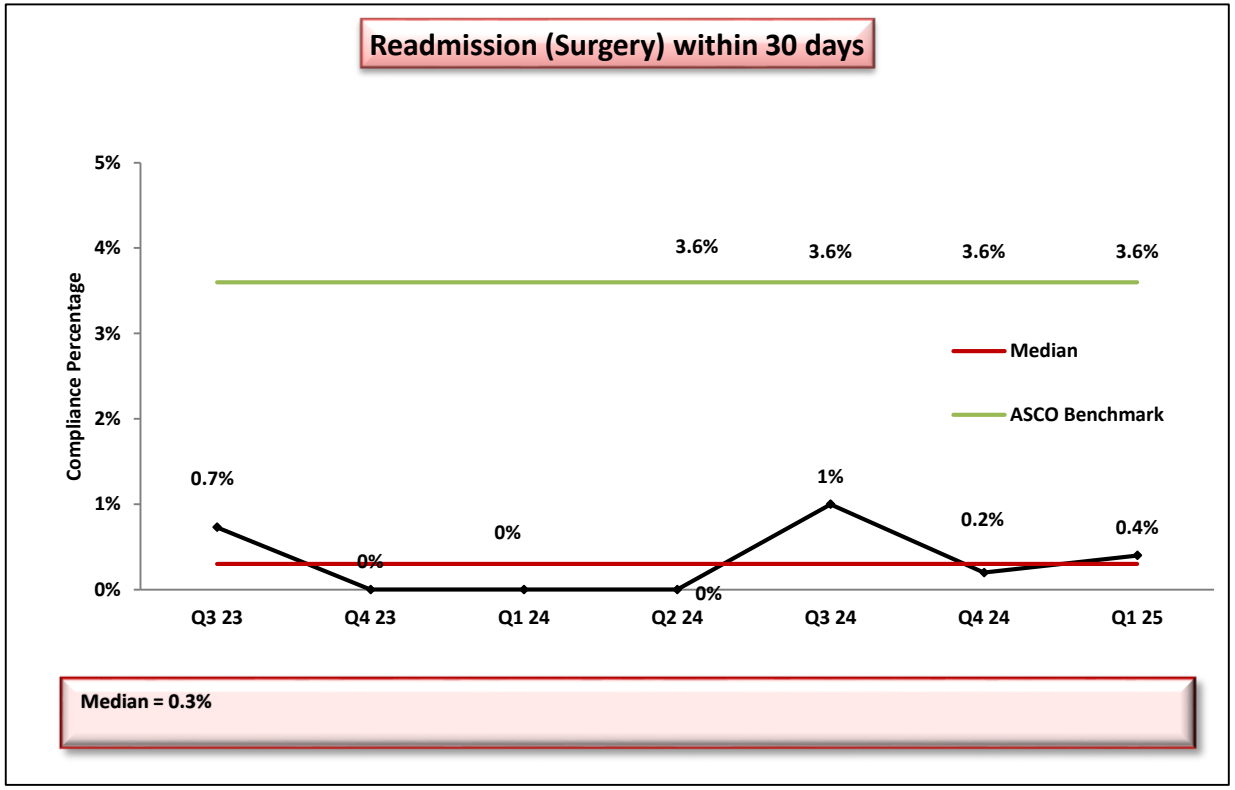
ASCO Indicators



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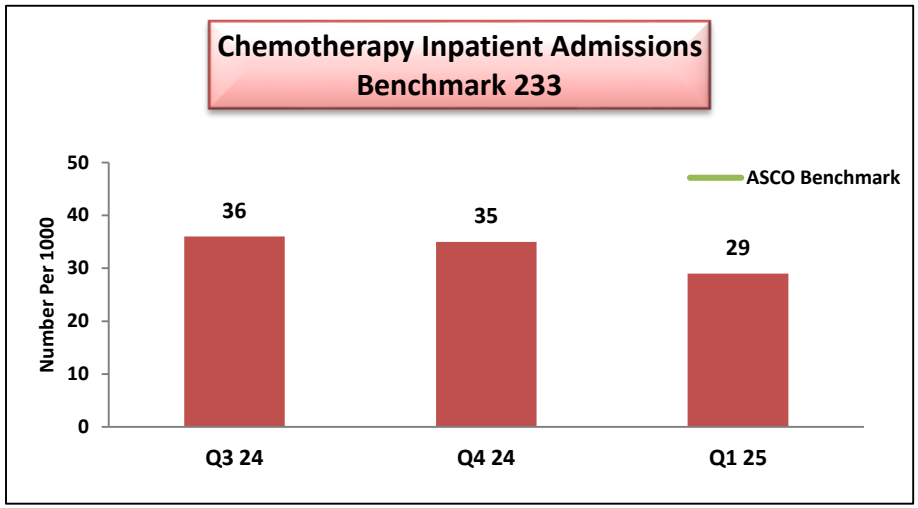
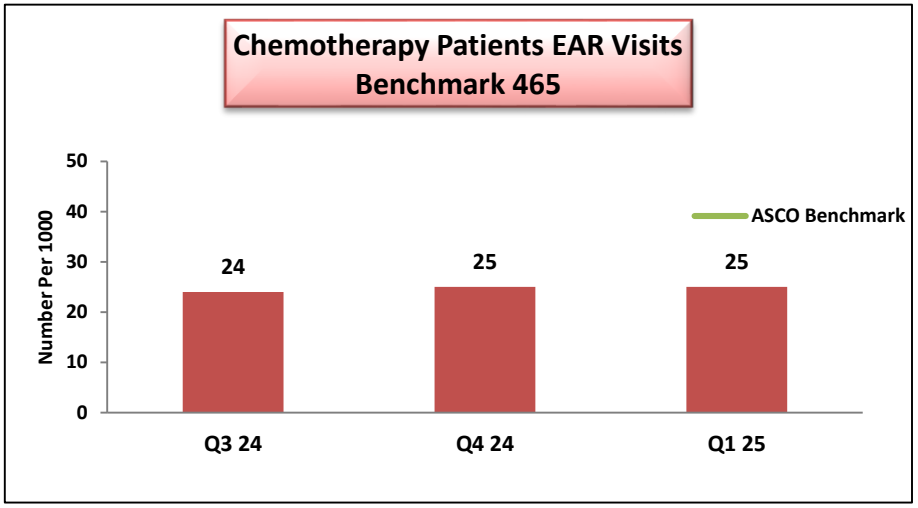
ASCO Indicators





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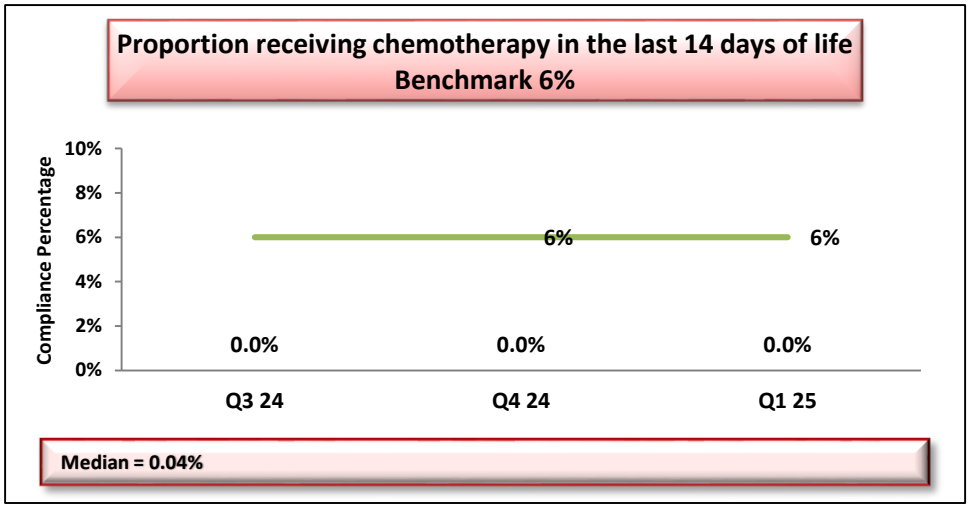
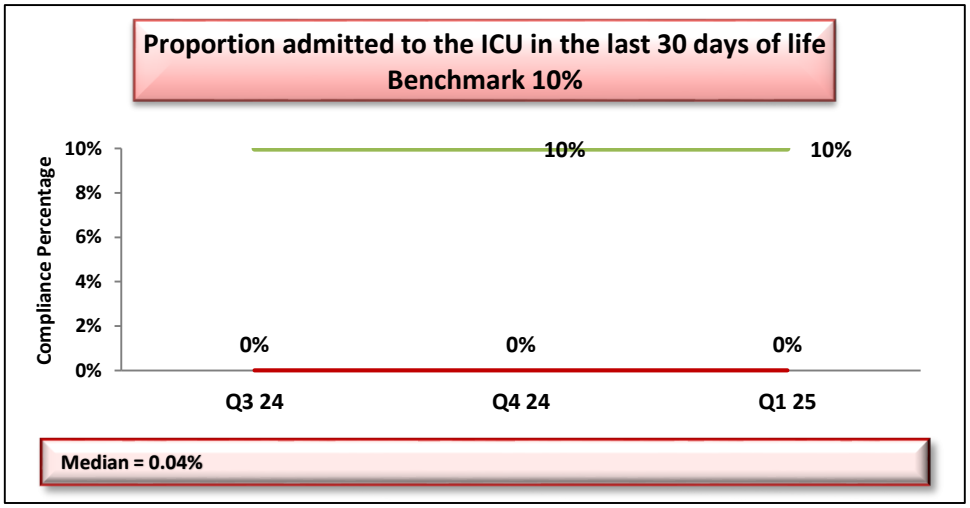
ASCO Indicators





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Thank you