

## **QM.8 Hospital leaders select a set of process indicators based on the mission and scope of services.**

- QM.8.1 Hospital leaders utilize the information provided by process indicators.
- QM.8.2 Process indicators may include, but are not limited to, the following:
  - QM.8.2.1 The timing and use of antibiotics prior to surgery.
  - QM.8.2.2 Blood and blood products administration.
  - QM.8.2.3 Documentation in medical records.
  - QM.8.2.4 Delay of physicians answering nurses' phone calls and pagers.
  - QM.8.2.5 Waiting times for treatment.
  - QM.8.2.6 Venous thrombo-embolism prophylaxis for surgical patients.
  - QM.8.2.7 Neuropathy testing in diabetic patients.

## **QM.9 Hospital leaders select a set of outcome indicators based on the mission and scope of services.**

- QM.9.1 Hospital leaders utilize information provided by outcome indicators.
- QM.9.2 Outcome indicators may include, but are not limited to, the following:
  - QM.9.2.1 Mortality rates.
  - QM.9.2.2 Healthcare associated infections.
  - QM.9.2.3 Staff satisfaction.
  - QM.9.2.4 Patient satisfaction.
  - QM.9.2.5 Unplanned return to the operating room.
  - QM.9.2.6 Return to the emergency room within 24 hours.
  - QM.9.2.7 Unplanned transfer to the critical care unit.
  - QM.9.2.8 Resuscitation of patients (cardiac/respiratory arrest).
  - QM.9.2.9 Readmission to the hospital within 30 days of discharge.
  - QM.9.2.10 Various adverse events (e.g., falls, injuries, and pressure ulcers).
  - QM.9.2.11 Medication errors.
  - QM.9.2.12 Sentinel events.
  - QM.9.2.13 Patient complaints.
  - QM.9.2.14 Length of stay.

## **QM.10 Data collected are aggregated and analyzed.**

- QM.10.1 Data collected are analyzed by staff qualified in data management.
- QM.10.2 Data collected are regularly aggregated and analyzed to yield useful trends and variances.
- QM.10.3 Data are utilized for internal and external benchmarking to identify deficiencies and opportunities for improvement.
- QM.10.4 Information is communicated to the appropriate stakeholders in a way they can understand and use.

## **QM.11 The hospital uses the information resulting from data analysis to make improvements.**

- QM.11.1 Information resulting from data analysis is used for prioritizing quality improvement projects as well as strategic and operational planning.
- QM.11.2 When appropriate, the hospital tests improvement interventions prior to full implementation.