## APPENDIX G Additional quality and safety performance indicators

FIGURE G1: Additional quality and safety performance indicators in board KPI reports at the four audited health services, grouped under timely, person-centred, safe and effective care categories.

Performance indicator	МН	РН	BHS	DjHS
Timely care				
1. Patients requiring transfer for more specialised care				$\checkmark$
2. Hospital discharge summaries within specific times	$\checkmark$	$\checkmark$	$\checkmark$	
3. Emergency surgery patients treated on time	$\checkmark$			
Person-centred care				
4. Patient compliments and complaints and/or time taken to close complaints			$\checkmark$	
5. Patients who identify as Aboriginal or Torres Strait Islander	$\checkmark$	$\checkmark$		
6. Open disclosure for serious adverse events	$\checkmark$			
7. Patients informed of their healthcare rights		$\checkmark$		
Safe care				
8. Perineal tears				$\checkmark$
9. Unplanned intensive care unit admissions and/or returns to operating theatres		$\checkmark$		$\checkmark$
<ol> <li>Risk assessments completed for specific types of clinical incidents or medical conditions, such as falls, pressure injuries and VTE</li> </ol>		$\checkmark$		
11. ISR 1 and ISR 2 incidents	$\checkmark$	$\checkmark$	$\checkmark$	
12. Common clinical incidents, such as medication errors, falls and pressure injuries	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
13. Emergency response calls, such as Code Blue and medical emergency teams	$\checkmark$	$\checkmark$		
14. Sexual safety incidents			$\checkmark$	
15. Unintended patient care (as a result of inadequate patient identification)			$\checkmark$	
16. Patient self-harm			$\checkmark$	

Performance indicator	МН	PH	BHS	DjHS
17. Other hospital-acquired infections, such as Clostridium difficile infection and Vancomycin-resistant Enterococcus infections		$\checkmark$	$\checkmark$	
18. Occupational violence incidents	$\checkmark$			
19. Staff unplanned or excess annual leave			$\checkmark$	
Effective care				
20. Birthing outcomes, such as caesarean section and vaginal delivery				$\checkmark$
21. Antenatal/postpartum outcomes, such as postpartum haemorrhage and eclampsia				$\checkmark$
22. Breastfeeding				$\checkmark$
23. Delirium screening			$\checkmark$	
24. Unexpected weight loss in residential care			$\checkmark$	
25. Completed patient goals of care			$\checkmark$	
26. Patients who did not attend outpatient clinics	$\checkmark$			
27. Door-to-artery time	$\checkmark$			
28. Discarded blood or blood products			$\checkmark$	
29. Approvals for restricted antimicrobials	$\checkmark$			
30. Care of the dying management plans (for eligible patients)			$\checkmark$	
31. Mortality, such as hospital standardised, Aboriginal or Torres Strait Islander, sepsis- related and perinatal mortality	$\checkmark$			
<ol> <li>Unplanned readmissions under the Hospital Admission Risk Program or for specific community groups or medical conditions/procedures, such as Aboriginal or Torres Strait Islander and cardiothoracic surgery</li> </ol>	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
33. Workforce training, such as on cultural competency and clinical aggression	$\checkmark$		$\checkmark$	

*Note:* We used MH's grouping of KPIs into STEP care and grouped KPIs for the other three health services into these categories. *Source:* VAGO.