UNIT – IV   CLINICAL ENGINEERING PROGRAM INDICATOR

Clinical engineering: program services, Program database – Clinical Engineering Program management, Program indicator, Managing clinical engineering performance using program indicators – Indicator management process.
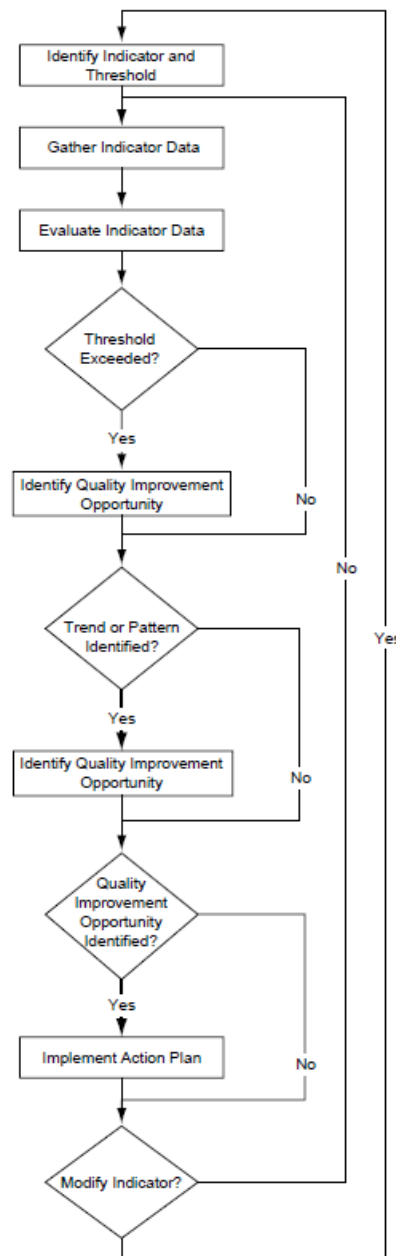

e 50-1   Indicator management process.

Gather Indicator Data: After choosing an indicator, the data sources and data details must be clearly defined. Using a standard database helps because staff can collect data in the same way as before. Collecting data on time is important.

Staff should be encouraged to record activities quickly so data can be gathered without delay.

Evaluate Indicator Data: After selecting an indicator, the sources and details of the data must be clearly set. A standard database makes this easier because staff can collect data in the same way as before. It is important to collect data on time, so staff should be encouraged to record activities quickly.

Determine Threshold: Next, check if the threshold (goal) for the indicator was met.

- If yes, move to the next step of looking for trends and patterns.
- If no, it may show a chance for quality improvement, and a deeper analysis of the data is needed.

Sometimes, the department may also change the threshold based on past data and the need to show performance more clearly.

Identify Trends or Patterns: Trend and Pattern:

- A **trend** is the overall direction an indicator moves over time. It can be **positive**, **negative**, or **neutral**.
- A **pattern** is the way indicator measurements are spread out. Pattern analysis usually happens after a threshold is crossed or a trend is noticed.
- Extra information may be needed to understand trends or patterns, and staff involvement is important.

Identify Quality Improvement Opportunities:

- Review the data with staff to find out why a threshold was not met or to spot trends or patterns.
- Look closely at the process to find problems. Ask questions like:
  - ❖ Were enough resources available to complete the task on time?
  - ❖ Was the task given proper priority?
- When obstacles are found, consider ways to remove them.
- Work with staff to identify improvements and create an action plan.
  - ❖ The action plan should show the problem, data reviewed, analysis, and recommended actions.

❖ It documents what the department is doing, what was found, and how to improve.

- After implementing the plan, use the same indicators to check if performance improved. This process repeats and keeps improving over time.

Modify Indicator:

- When a quality improvement is found, the indicator may need to be updated.

- Redefine the indicator and threshold, then start the process again.

- Eventually, the indicator may no longer need close monitoring. It can be retired or used for reporting, and further action is only needed if a threshold is crossed.