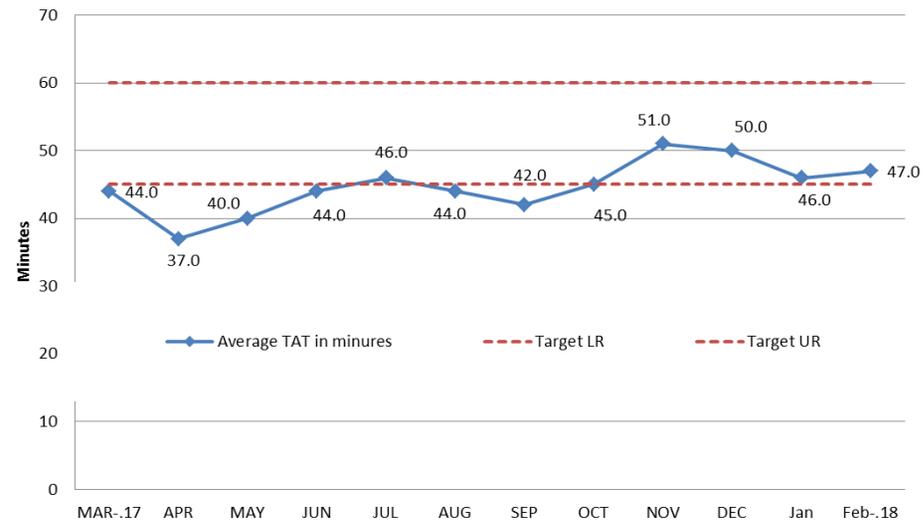


ANNEXURE 3

Quality Monitor Indicator 2017-2018 Radiology Department

Quality Monitor Indicator 2017-2018 Radiology Department												
Measure name: Turn Around Time - Ultrasound	Rationale for selection: Timely final imaging reports support informed and efficient decision making for treatment plans by referring physicians, and ultimately the delivery of care to patients. While important to timely treatment and potentially better health outcomes, short turnaround of reports also improves patients' experience with care, cuts input costs, and improves the throughput of imaging exams.											
Target Goal: Ultrasound = 45 – 60 minutes	Numerator statement: Mean time from bill to result entry *100											
	Denominator statement: Total number of exams											
Specify data collection plan:	Retrospective. Whole month report generated through HMIS											
Reporting schedule:	Monthly											
Month	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB
Percentage	43.00	42.00	44.00	37.00	40.00	44.00	46.00	44.00	42.00	45.00	51.00	50.00
Analysis: Overall average TAT for ultrasound is 44 minutes												
PLAN-DO-CHECK-ACT:												
Plan:	Findings are discussed with departmental staff to review them against set goals											
Do:	Evaluation will be done for all the data recived from radiology on a monthly basis to check when TAT is outside the set time period											
Check:	Providers in the radiology department ensure that proper instructions regarding patient preparations are clear e.g. intake of fluids for full urinary bladder in pelvic examinations. Instructing patients appropriately can reduce errors, inconvenience, and delays in waiting for both patients and the staff.											
Act:	Continuos monitoring											
Responsibility: Head of Radiology												

Average TAT - Ultrasound(2017-2018)



**Quality Monitor Indicator 2017-2018
Radiology Department**

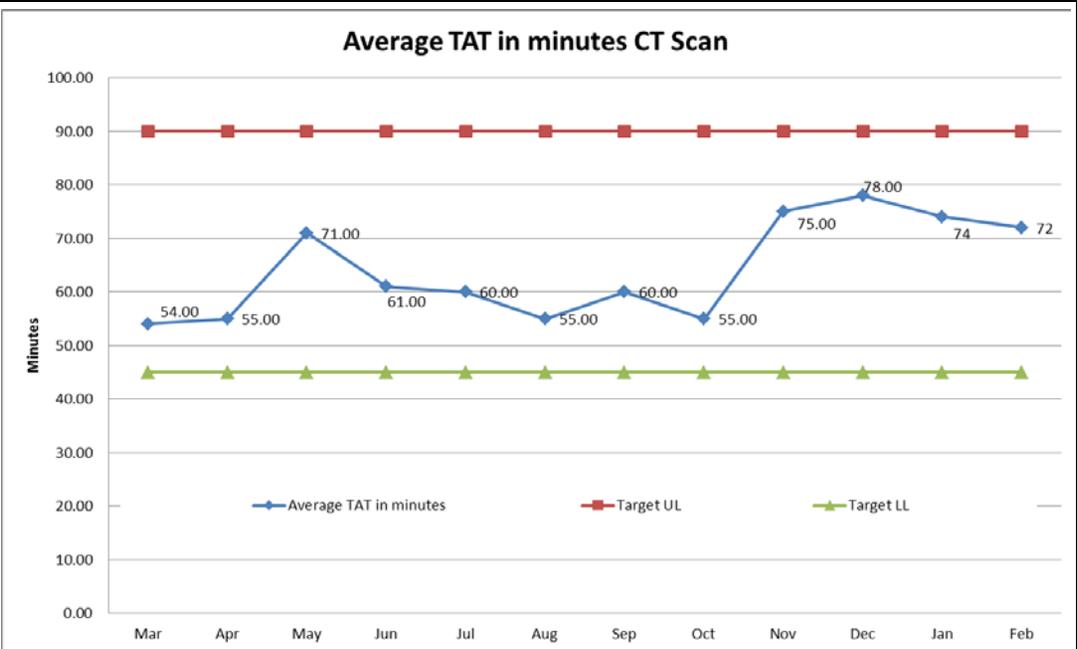
Measure name: Turn Around Time - CT	Rationale for selection: Timely final imaging reports support informed and efficient decision making for treatment plans by referring physicians, and ultimately the delivery of care to patients. While important to timely treatment and potentially better health outcomes, short turnaround of reports also improves patients' experience with care, cuts input costs, and improves the throughput of imaging exams.											
Target Goal: CT =45 minutes - 90 minutes	Numerator statement: Mean time from bill to result entry *100 Denominator statement: Total number of exams											
Specify data collection plan:	Retrospective. Whole month report generated through HMIS											
Reporting schedule:	Monthly											
Month	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB
Percentage	54.00	55.00	71.00	61.00	60.00	55.00	60.00	55.00	75.00	78.00	74.00	72.00

Analysis:
Overall average TAT for CT scan is within 64 minutes

PLAN-DO-CHECK-ACT:

Plan:	Findings are discussed with departmental staff to review them against set goals
Do:	Evaluation is done when TAT is outside the set time period to assess reasons/factors leading to delay and devise improvement interventions
Check:	Providers in the radiology department ensure that proper instructions regarding patient preparations are clear. Instructing patients appropriately can reduce errors, inconvenience, and delays in waiting for both patients and the staff.
Act:	Continuous monitoring

Responsibility: Head Of Radiology



**Quality Monitor Indicator 2017-2018
Radiology Department**

Measure name: Turn Around Time - MRI	Rationale for selection: Timely final imaging reports support informed and efficient decision making for treatment plans by referring physicians, and ultimately the delivery of care to patients. While important to timely treatment and potentially better health outcomes, short turnaround of reports also improves patients' experience with care, cuts input costs, and improves the throughput of imaging exams.											
Target Goal: MRI = 90 – 120 minutes	Numerator statement: Mean time from bill to result entry *100											
	Denominator statement: Total number of exams											
Specify data collection plan:	Retrospective. Whole month report generated through HMIS											
Reporting schedule:	Monthly											
Month	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB
Percentage	82.00	72.00	74.00	80.00	73.00	70.00	62.00	79.00	76.00	74.00	71.00	70.00

Analysis:
Overall average TAT for MRI is within 73 minutes

PLAN-DO-CHECK-ACT:

Plan:	Findings are discussed with departmental staff to review them against set goals
Do:	Evaluation is done when TAT is outside the set time period to assess reasons/factors leading to delay and devise improvement interventions
Check:	Providers in the radiology department ensure that proper instructions regarding patient preparations are clear. Instructing patients appropriately can reduce errors, inconvenience, and delays in waiting for both patients and the staff.
Act:	Continuous monitoring

Responsibility: Head of Radiology

