

Indicator Madness

Challenges in Prospective Risk Assessment in Healthcare

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Some questions:

1. What are the problems of healthcare indicators as presently used – to create “scorecards” or “dashboards” – to apparently reflect quality and safety in an organization?
1. What kind of widgets are “produced” by healthcare systems?
1. Should our mantra be “You can’t manage what you can’t measure” or should we first ask what is important to measure and what is the appropriate way to take that measure?
1. Can we measure suffering, hope, fear, or caring?

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A definition of patient safety indicators:

“A set of measures of adverse events that patients experience as a result of exposure to the health care system”

Ideally, indicators should:

- Actually measure what they are intended to [validity]
- Provide the same answer when measured by different people in similar circumstances [reliability]
- Should be able to measure change [sensitivity]
- Should reflect changes only in the situation concerned [specificity]

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Think about the definition again for a moment:

“A set of measures of adverse events that patients experience as a result of exposure to the health care system”

A dilemma:

Is what the **patients experience** (as reflected by what can be measured) the same thing as the **patient's experience** of the adverse event (think of things like suffering, family disruption, fear, isolation)

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Healthcare indicator challenges [relevance]:

Story #1 [involving already hospitalized patients]:

Time to get the patient to the OR after falling and fracturing the hip

Versus

Efforts to **prevent patients from falling** in the first place

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Healthcare indicator challenges [gaming]:

Story #2 [also involving already hospitalized patients]:

Average length of stay [LOS] of **17.5 days** in an acute care facility

Versus

Average LOS of **64 days** in a different acute care facility

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Healthcare widgets:

1. Are we producing better LOS, reduced HSMR, decreased time to OR, reduced cases of C. difficile, or decreased VAP?

Or,

2. Are we providing care to individuals experiencing illness in the context of their family and social life situation?

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Assessing [measuring?] important healthcare indicators:

Can we **quantify** suffering, hope, fear, or caring?

What are the **units** to measure these?

Can qualitative assessments provide us with valid useful
“measures”?

Do scorecards and dashboards always require **numbers**?

Holistic perspectives

“ Wholeness is revealed only as shapes, not facts.

Systems reveal themselves as patterns, not as isolated incidents or data.

It's not easy to give up the role of master creator and move into the dance of life.”

- Meg Wheatley

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I need your help!!

To create meaningful healthcare indicators to assist me in undertaking prospective risk assessments.

Questions/Contact Info

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