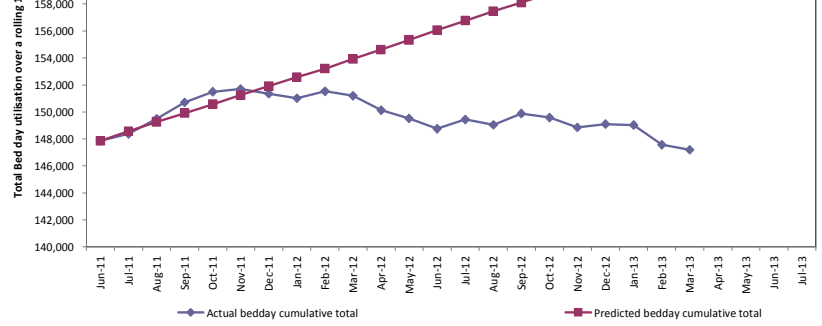
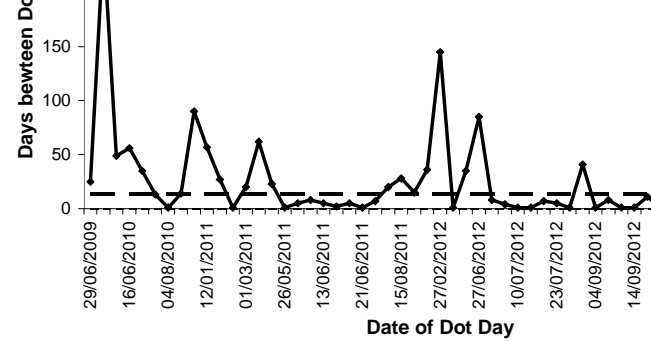


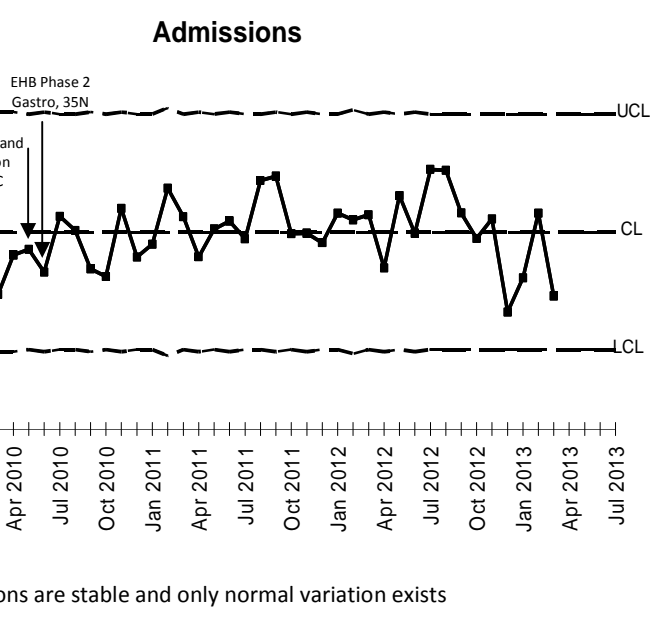
Cumulative bed day saving as at 03rd March is 17,653



Comments: The graph shows the difference between the Predicted and actual cumulative bed days.



Comments: There were no Dot Days in March

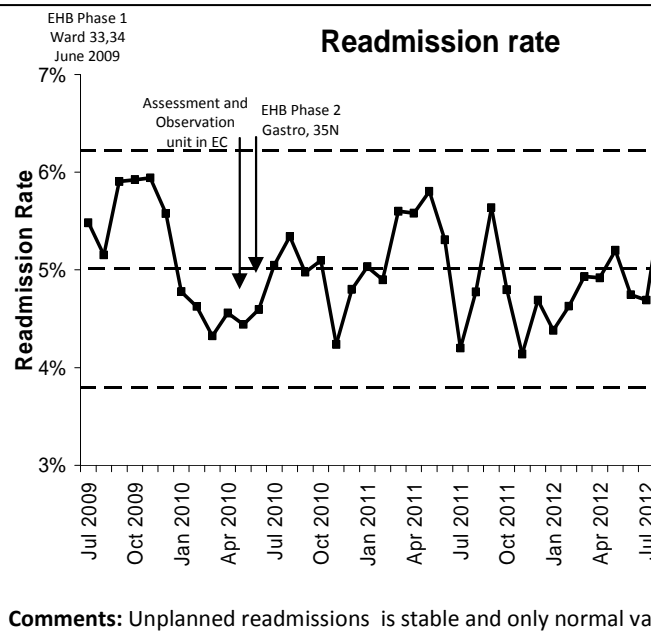


Admissions are stable and only normal variation exists

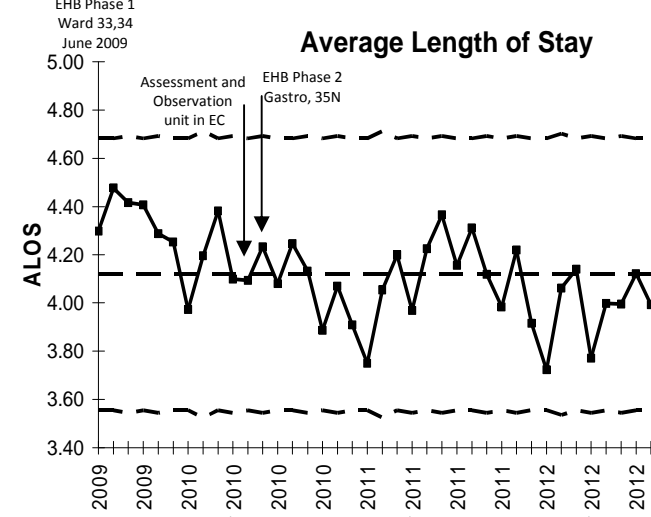
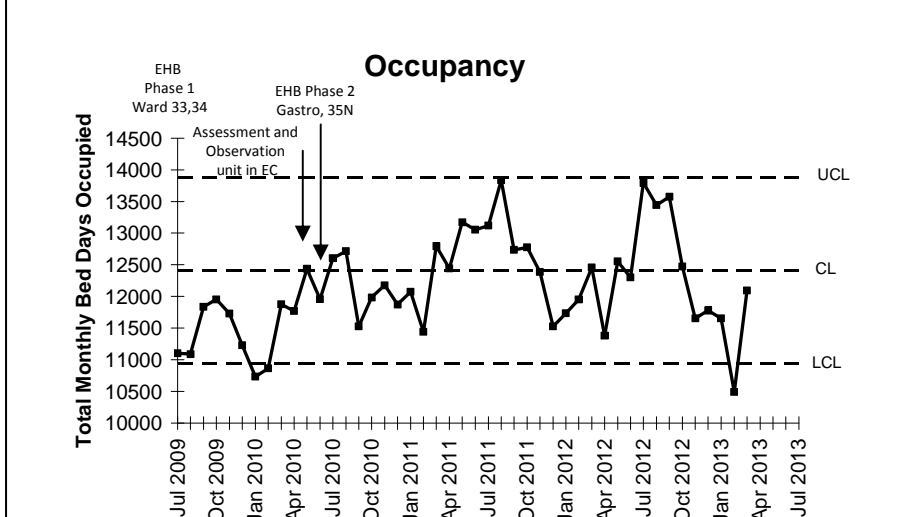
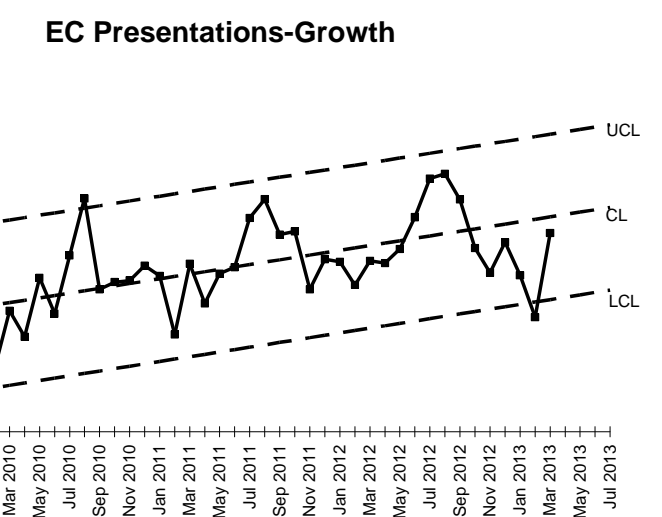
Dashboard Summary: Cumulative bed day saving of 17653 is a reflection of the difference between actual bed day usage and the predicted growth. This is reflection of the system as a whole.
EC presentations and occupancy are showing special causes in February with lower than expected values. All other measures are stable and exhibiting normal variation.

20,000 Days Campaign Dashboard

March 2013



Comments: Unplanned readmissions is stable and only normal variation exists



<p>Definition</p> <p>patient time on bed</p> <p>ive savings is the difference between the forecasted bed</p> <p>actual bed used since June 2011.Savings can be a</p> <p>ive figure.</p> <p>>-15 years, Surgical/Medical specialty</p> <p>e and Elective</p>	<p>Operational Definition</p> <p>Bed Days: Actual patient time on bed</p> <p>Predicted bed day: Cumulative bed required calculated based on bed modelling</p> <p>Cumulative: Previous 12 months of data from the current month</p> <p>Criteria</p> <p>Middlemore, Age >-15 years, Surgical/Medical specialty (incl Gynae), Acute and Elective</p>	<p>minimise the Dot days and increase the time be</p> <p>days. One of the contributing factor to achieve</p> <p>day saving</p> <p>Operational Definition</p> <p>Dot Days: A day is referred as “Dot Day” when Middlem</p> <p>central send an email when the Hospital is full.</p> <p>Date of Dot Days: The actual date when the email was s</p> <p>Criteria</p> <p>All emails sent by Middlemore central with a subject “H</p>
<p>n</p> <p>ws the admission of acute adult patient</p> <p>iddlemore over a period of time.</p> <p>Definition</p> <p>nt admitted to MMH wards for more than 3 hours</p> <p>by time</p> <p>>-15 years, Surgical/Medical specialty</p>	<p>UCL: Upper control Limit is automatically calculated by the software it selves.</p> <p>CL: Centre Line can also be called as Average.</p> <p>LCL: Upper control Limit is automatically calculated by the software it selves.</p> <p>Note: The graphs will help us to detect Shifts, Trends and variations. The lines within control limits indicate that the data is stable and in Statistical control.</p> <div data-bbox="689 715 1503 1043" data-label="Section-Header"> <h2 style="text-align: center;">20,000 Days</h2> <h3 style="text-align: center;">Campaign Dashboard Definitions</h3>  </div>	<p>Unplanned Re admission</p> <p>This graph shows the readmission rate over a p</p> <p>time.</p> <p>Operational Definition</p> <p>Re-admission: An unplanned acute readmission to same</p> <p>discharged within 7 days</p> <p>Criteria</p> <p>Middlemore, Age >-15 years, Surgical/Medical specialty</p> <p>(incl Gynae), Data extracted based on Inpatient discharg</p>
<p>ntation</p> <p>resents the Average daily presentation to</p> <p>ncy care.</p> <p>Definition</p>	<p>Occupancy</p> <p>This graph reflects the total monthly occupancy of Surgical, Medical and Gyne specialty combined on a monthly basis</p> <p>Operational Definition</p> <p>Occupancy: Actual patient time on bed</p> <p>C.L in the graph represents Median</p> <p>Criteria</p>	<p>Average Length of Stay (ALOS)</p> <p>This graph reflects the ALOS over a period of ti</p> <p>Operational Definition</p> <p>LOS: Days between admission to discharge</p> <p>Criteria</p>