

JEENA SIKHO LIFECARE PVT. LTD.

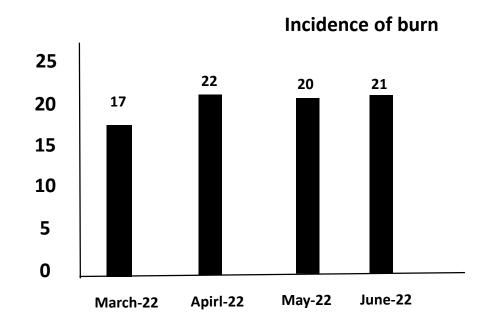
Shop No.14 Upper Ground, Bharat Nagar, New Friends Colony, New Delhi-110025

REPORT OF KPI

To prevent the incidence of fall, the cause was studied and clear instructions were given to the concerned department (Safety and Therapists) to rectify and to prevent further incidence

- d) No Incidence of Bedsores after admission was reported.
- e) Incidence of burn injuries during Clinic stay during the period from March to June 2022

Month	Total No. of Patients	No. of incidence	Percentage (%)
March-22	17	0	0
Apirl-22	22	0	0
May-22	20	0	0
June-22	21	0	0



Detailed Report

• Initial assessment a) In the month of March to June 2022 evaluation was done where we had

	March-22	Apirl-22	May-22	June-22
No. of OP Caese	33	43	39	39
Total Time taken for Initial Assessement(Min.)	450	645	585	585
Average Time Taken (Min.)	15-20 Min	15-20 Min	15-20 Min	15-20 Min

Minimum Staff to Patient Ratio was maintained for uninterrupted caring of the Patients and proper functioning of the institution.

- Attrition Rate from the month of March to June 2022 is 0.69%
- 1 Employee resigned due to some personal reasons.
- Employees Satisfaction Index done in the month of March 2022

EMPLOYEE SATISFACTION INDEX								
No. of	Related to Organization			Relate	ESI			
Feedback	Average	Total	%	Average	Total	%	Score %	
44	61	85	72.05	84	135	62	67	

Monitoring further quality improvement program

a) Patient Feed-back system is monitored

Month	No. of Feedbacks	Doctor	Therapists	Other Staff	Room	Support Services	Overall	(%)
March-22	8	72	70	69	70	70	68	87.3
		90%	87.25%	86.25%	87.5%	87.5%	85%	
April-22	6	57	53	54	56	56	56	91.4
		95%	88.3%	90%	88.3%	93.3%	93.3%	
May-22	18	166	161	162	159	159	162	89.8
		92.2 %	89.4%	90%	88.9%	88.3%	90%	
June-22	6	55	90	54	54	54	53	90
		91.7 %	90%	90%	90%	90%	88.3%	

b) The least score is 88.8% regarding the therapists to improve the quality of the treatment, weekly Continuous Therapy training were implemented and is looked

REPORT ON MEDICAL-KEY PERFORMANCE INDICATORS FROM MARCH TO JUNE 2022

Medical key performance indicators are identified in different sections and under each section different criteria are monitored, and reviews are done.

Initial assessment

- a) OP waiting time Index
- b) Percentage of cases where care plan and desired outcome are documented
- c) Percentage of cases where treatment outcome is documented
- d) Bed occupancy rate

Medication management

- a) Incidence of medication errors
- b) Percentage of inpatients with adverse drug reaction
- c) Percentage of medications charts with errors
- d) Percentage of cases developing ADR receiving high alert medicines

Treatment procedure

- a) Percentage of rescheduling of procedures
- b) Treatment Room Utilization
- c) Percentage of wrong procedure/wrong site/wrong patient
- d) Therapy incident report

Infection control activities

- a) Percentage of UTI after admission
- b) Percentage of infection caused due to basti
- c) HAl incident report

Outcome of the treatments

- a) Performance target report
- b) Patient rerewery status

OP Waiting Period

Initial	1008	769	818	722	1562
assessment (Min)					
average time taken (Min)	15.5	12.6	10.9	8.5	20.8

- a) The average time taken for initial assessment for Op is 17. minutes.
- b) OP Initial assessment time should be reduced to within 10 minutes from the registration of Patient in the reception
- c) Since the infrastructure of the campus is different from other Clinic, intimation to the concerned Doctors takes time. So the delay
- d) Steps are taken and proper instructions were given to the front office staff to intimate the consulting doctor immediately upon arrival of the patient
- e) Need to improve the time taken for Daycare by lowering another 5 minutes for the next quarter. Doctor should be intimated as soon as the patient arrives at the reception and further assessment can be done after

Treatment Procedures

- a) Percentage of rescheduling is 0%
- b) Percentage of treatment room utilization:

	March-22	Apirl-22	June-22	June-22
Total No. of Therapy	17	22	20	21
Total No. of Treatment Hours	1,020	1,980	1,800	1,890
Total No. of Treatment room used	2	2	2	2
Total Treatment room available hours	445	550	810	102
Average % of utilization Rate	33.82%	33.47%	29.8%	31.30

- c) Percentage of wrong procedure / wrong site / wrong patient %.
- d) 0 Incidents were reported therapy incidence and rectified.

THANKS