**KPI Name:** Patient fall rate (in-patient)

**Rationale and Description:** A fall is defined as an event which results in a person coming to rest inadvertently on the ground or floor or other lower level (WHO 2017). Patient Days Conceptually, a patient day is 24 hours, beginning with the hour of admission. There are different methods for calculating the number of patient days. Two of the most common methods are:

1. Track the actual time spent in the facility by each patient. Sum actual hours for all patients, whether in-patient or short stay, and divide by 24.
2. Collect censuses multiple times per day, e.g. every shift. Sum the daily average census to calculate patient days for the month.

Hospitals can use their current method of calculating patient days for reporting quarterly patient day denominator data. Fall rate is an average of number of patient falls occurred within a specific period over total no. of inpatients days per month.

<table>
<thead>
<tr>
<th>Inclusion</th>
<th>Exclusion</th>
<th>Source of Data</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Numerator:</strong> Number of patient falls occurred within a month.</td>
<td>1. Patient fall due to syncope of overwhelming external force 2. Visitors, Ambulatory care patients, watcher, and staff. 3. All not admitted patients whom they fall in any department.</td>
<td>Nursing administration, HIS</td>
</tr>
<tr>
<td><strong>Denominator:</strong> Total number of inpatients days per month</td>
<td>Patients transferred to other hospitals</td>
<td>Bed management (Admission office), HIS</td>
</tr>
</tbody>
</table>

**Formula:** Numerator/Denominator  

**Output Value:** Rate  

**Unit of Measure:** Rate

**Grouping:** Per department, gender, per duty (8 hours or 12 hours), risk score before fall (No risk 0-24, Low to moderate risk 25 - 45, High risk 46+) location of fall, per age group (neonate from birth to 28 days –pediatric from 1 month to 14 years –adult from 14 and above)

**Indicator Level:** Operational  

**Indicator Category:** Effectiveness

**Benchmark:** 0.31 per 1000 patient care days  

**Care setting for Data Source:** All in-patient care area (including ICU)

**Threshold:**  
- **Green:** <=0.31  
- **Amber:**  
- **Red:**  
- **Black:**

**Data Collection responsibility:** Clinical Audit Department
Data Collection Frequency: Monthly | Reporting Frequency: Monthly
---|---
Data Collection Methods: Manual | Reporting Methods: Email
Approval Date: 19-06-2019

Prepared by:
Ismail Alabdullah
Clinical Audit Coordinator

Approved By:
Dr. Yaqoub Almousa
Clinical Audit Director
**KPI Name:** Pressure Ulcer Rate (incident )

**Rationale and Description:** Pressure ulcer Rate is new Pressure ulcers are occurring (incident). Total number of patients with incident within a particular population overall total number of patient with same condition. **Patient Days** Conceptually, a patient day is 24 hours, beginning with the hour of admission. There are different methods for calculating the number of patient days. Two of the most common methods are:

1. Track the actual time spent in the facility by each patient. Sum actual hours for all patients, whether in-patient or short stay, and divide by 24.
2. Collect censuses multiple times per day, e.g. every shift. Sum the daily average census to calculate patient days for the month. Hospitals can use their current method of calculating patient days for reporting quarterly patient day denominator data.

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<tr>
<td>Total number of newly cases that developed PU (stage 2 or greater) in-hospital within a specific period</td>
<td>4. Stage 1 pressure ulcer 5. Patient admitted with principle diagnosis of pressure ulcer 6. Any admitted cases with home developed pressure ulcer 7. Transferred from other hospital with pressure ulcer</td>
<td>Nursing administration, HIS</td>
</tr>
</tbody>
</table>

<table>
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<tr>
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<th><strong>Output Value:</strong> Rate</th>
<th><strong>Unit of Measure:</strong> Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of inpatients days per month</td>
<td>Patients transferred to other hospitals</td>
<td>Bed management (Admission office), HIS</td>
</tr>
</tbody>
</table>

**Formula:** Numerator/Denominator

**Grouping:** Per department, gender, per duty and diagnosis

**Indicator Level:** Operational  
**Indicator Category:** Effectiveness

**Benchmark:** 1.3 per 1000 patient care days  
**Care setting for Data Source:** All in-patient care area (including ICU)

**Threshold:**  
- **Green:** <=1.3  
- **Amber:**  
- **Red:**  
- **Black:**

**Data Collection responsibility:** Clinical Audit Department  
**Data Collection Frequency:** Monthly  
**Reporting Frequency:** Monthly  
**Data Collection Methods:** Manual  
**Reporting Methods:** Email