



**CITY UNIVERSITY
LONDON**

**QUALITY IN OCCUPATIONAL HEALTH PRACTICE
IN HIGHER EDUCATION**

Can we define common standards for our sector?

**Christine Rajah
City University London**





CITY UNIVERSITY
LONDON

WHY DO WE NEED KEY PERFORMANCE INDICATORS?

- Our stakeholders
- Professional standards – regulation, revalidation
- Competitive market for OH provision
- Essential to a professionally managed OH service
- Evidence of value for money





CITY UNIVERSITY
LONDON

Who are our stakeholders?

- Staff/ students using service
- Managers/ employer
- HR
- Trade unions
- Professional bodies
- Our OH service staff
- Others?





CITY UNIVERSITY
LONDON

Identifying Key Performance Indicators (KPI s)

Four components required for useful KPI s are:

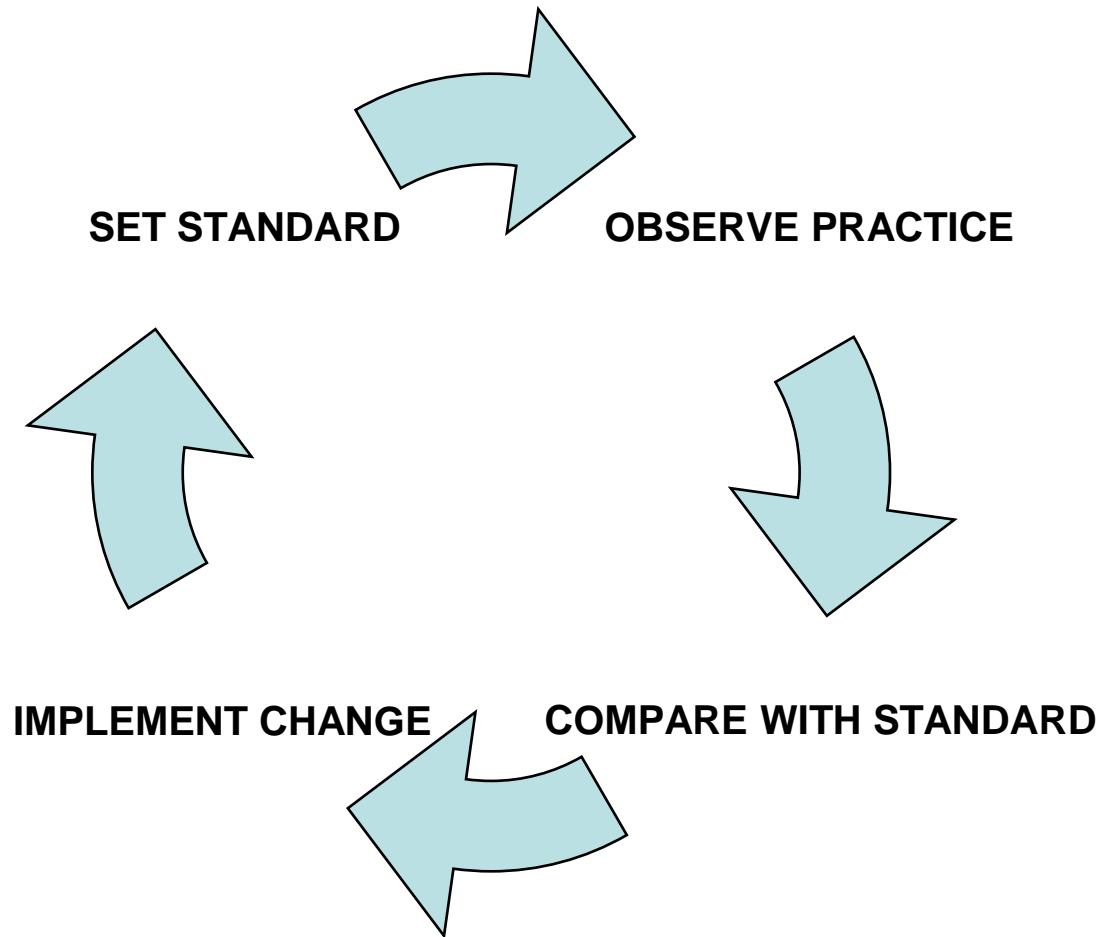
- Identify business **objectives**
- Identify KPI's that are **measurable** and tied into these objectives
- Robust **data and collection systems** to enable provision of good quality management information
- Identify **management processes** to focus on KPI's





**CITY UNIVERSITY
LONDON**

Audit Cycle - its all about continuous improvement





CITY UNIVERSITY
LONDON

What do we Audit ?

- Structure

Organization
Staff
Facilities

- Process

What is done?

- Outcome

Ill health retirements
Morbidity
Sickness absence
Income



What Can we set KPIs for

- **Service delivery** – SLAs, customer feedback, policies, communication
- **Professional standards** – staff competence /development, legal, ethical. Revalidation, PREP, working with professional bodies relevant to our clients
- **Clinical Governance** –including clinical audit eg back pain, mental health
- **Benchmarking/ National standards** eg HSE targets ?
- ???



CITY UNIVERSITY
LONDON

Workshop

- The following set of slides represents the discussion we had in relation to the process of setting KPIs and how we would measure them.
- It is not intended to be a blue print or in anyway a guidance document but a reflection of how we thought we could approach measuring quality in various aspects of our services.
- It is easy to look at simple measures such as “turnaround times”, “numbers seen” or “customer satisfaction” but outcomes may be more challenging to assess.





Service Delivery Objective	Measurables	Data collection	Process
<p>To see referrals and respond to them in a timely fashion</p> <ul style="list-style-type: none"> •sickness absence •work related ill health •stress •musculoskeletal 	<ul style="list-style-type: none"> •percentage of appointments offered within agreed time •percentage of reports issued within agreed time •DNA rate 	<ul style="list-style-type: none"> •Date referral received, •date of appointment, •date report issued recorded on database 	<ul style="list-style-type: none"> •Bespoke database •Data entry managed by admin
<ul style="list-style-type: none"> •Carry out all statutory health surveillance at required intervals •Issue 'Fit to work' slips for those who need them 	<ul style="list-style-type: none"> •Percentage of statutory healthy surveillance carried out within a year •Percentage of employees past fit, unfit and not seen 	<ul style="list-style-type: none"> •Database of required health surveillance maintained with date of next appointment •Date at which seen and fit slip issued recorded on database 	<ul style="list-style-type: none"> •Bespoke database •Data entry managed by admin
<ul style="list-style-type: none"> •Carry out all required pre-employment and pre-placement screening in a timely fashion •pre-employment student assessments on course where this is required (eg PGCE) •Research passports and other honoraries 	<ul style="list-style-type: none"> •Number of fitness reports issued within the agreed time 	<ul style="list-style-type: none"> •Date of request for assessment and date of assessment recorded on a database 	<ul style="list-style-type: none"> • set service levels with employer



Service Delivery Objective	Measurables	Data collection	Process
Ensure that all persons requiring immunisation are immunised	<ul style="list-style-type: none">• Percentage immunised within agreed time scale• Percentage of staff who require immunisation receiving it	Auditing of departments where immunisation is commonly required	Follow Green book and DH guidelines
Service delivered on budget	Process <ul style="list-style-type: none">•Managing invoicing•Payments•Income generation	Audit	Agree budget Budget forecast reviewed quarterly





Professional Standards Objective	Measurables	Data collection	Process
Competence & appropriate qualification			
Accredited Physician	GMC registration FOM CPD scheme Annual Appraisal	Records/certificates	Annual appraisal
OHA	PREP RCN reg OH dip/ BSc	Records/certificates	Annual appraisal
Confidentiality- Staff -Students	Incidents Complaints	Random audit	Policy Audit
Record keeping	% records complying with policy	Audit	Policy
Professional behaviour • Patients • Admin and fellow colleagues	Complaints Grievances Disciplinarys	• Customer feedback • 360 degree feedback	Staff required to adhere to RCN and GMC code of conduct.



Clinical Governance Objective	Measurables	Data collection	Process
Appropriate qualification: Registered nurse, OHA, accredited specialist OHP	Current registration	Evidence e.g. certification	Annual registration check. Record % of staff with appropriate qualification
Practice complies with current legislation and DH, HSE, FOM guidance and ethical standards etc.	Clinical audit Audit medical records /database	Record keeping	Review policies and procedures against evidence based practice and guidelines etc
Clinical activity relevant to organisation eg health surveillance	Needs analysis: activity : % OH service delivered to requirement	Audit records	Needs and Risk analysis for the organisation





Clinical Governance Objective	Measurables	Data collection	Process
Risk control: Clinical equipment	Calibrated and serviced as recommended	% equipment calibrated % staff competent in use of equipment	Policy and protocols for care of equipment
Quality	Complaints procedure in place and adhered to	Number of complaints	<ul style="list-style-type: none">•Written procedures•Critical incident process
Continuous improvement	Clinical activity	<ul style="list-style-type: none">•Clinical audit•% meeting CPD requirements	<ul style="list-style-type: none">•Protocols /guidelines/algorithms available to all staff•Annual appraisals



CITY UNIVERSITY
LONDON

Summary of Feedback

- Use of KPIs and SLAs variable amongst delegates
- Format used for defining KPIs in group work thought to be helpful
- Dr Paul Nicholson about to publish KPIs for OH services
- The references (not a comprehensive literature search) that follow show very helpful information about SLAs and setting standards





REFERENCES

- Faculty of Occupational Medicine. Audit and Quality in Occupational medicine. Royal College of Physicians of London
- NHS Plus Standards accreditation standard
<http://www.nhsplus.nhs.uk/providers/images/library/files/forms/StandardsSurveyForm.doc>
- NHS plus standards
http://www.nhsplus.nhs.uk/providers/images/library/files/pdf/NHS_PlusStandards3.pdf
- Audit and quality in occupational health MacDonald EB Occup. Med. 1992; 42: 7-11
- How I address quality and teamwork issues in the occupational health department Addley K. Occup. Med. Vol. 48, No. 4, pp. 273-278, 1998
- Quality in occupational health and many more parts of Raymond Agius amazing site <http://www.agius.com/hew/resource/quality.htm>