

Selecting and Structuring Quality Indicators and Signals in the Health sector – and planning for their analysis

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One of the first requirements of successful systems design is the identification of “the client.” The “client” is the primary recipient of outcomes from the systems concerned and may not be the commissioning or paying entity, or even represented in the project governance structure.

In the health sector, however, there are often multiple clients. They may include Health providers (both public and private); Government departments; Researchers; Health Industry bodies; Health insurers; Professional Institutes; Charities; Carers; and, most importantly, Patients.

Each of these client groups have a legitimate interest in higher quality health outcomes, and, potentially, a role to play in achieving optimum outcomes.

The relevance of that role, however, varies, depending on what *type* of Quality Indicator (QI) is being considered, as, in general, the opinions of qualified, certified, experienced professionals in the relevant discipline should prevail.

Thus, if the QI is a clinical one, then Clinicians should be primarily responsible for consideration and selection, whereas if the QI is administrative, logistic, or procedural, then other professional disciplines become relevant.

In an environment in which significant digital processing and analysis applies to such signals, professional disciplines of data design and analytics, computer science, and statistical analysis may usefully be applied, to the *structure* of the QI concerned, to optimise data storage, analytical capability, multi-factor analysis, and statistical projection certitude.

There is no professional qualification for the patient, however, so the “consumer” input to this process is as the lead client, the most important recipient of the outcomes. The key patient role, therefore, is that of attaching outcome significance to the QI selection process, such that, data collection and analysis resources are used to optimum effect. This might require the specific consideration of Patient ranking questions by any QI selection panel.

Suggested Patient ranking questions for QI selection

What % of patients presenting are potentially positively impacted by this Indicator?	<30%	30-70%	>70%
Will this QI positively impact on Patient survival?	Minimally	Moderately	Significantly
Will this QI positively impact on reducing duration/complexity/severity of treatment?	Minimally	Moderately	Significantly
Will this QI positively impact on post-treatment Patient Quality of Life?	Minimally	Moderately	Significantly