

15.

MEASURES

It is important that we measure the impact of our actions. We include some measures that may be of use.

OUTCOME MEASURES

Outcome measures should be collected in order to support the monitoring of effective provider (hospital) epidemic/pandemic response including the capacity to adequately treat patients with other common severe conditions like heart attacks, strokes, trauma, COPD in order to assure that the health of the public is protected to the fullest extent possible:

1. Hospitalisation rate for COVID-19 (indirect outcome measure of the territory).
2. In-hospital Mortality rate of patients hospitalized for COVID-19.
3. Average Length of Stay of COVID-19 patients.
4. Percentage of COVID-19 patients admitted to ICU.
5. In-hospital mortality rate of NO-COVID-19 patients hospitalised for AMI.
6. In-hospital mortality rate of NO-COVID-19 patients hospitalized for Stroke.
7. In-hospital mortality rate of NO-COVID-19 patients hospitalized for COPD.
8. Percentage of NO-COVID-19 hospitalized patients that acquired COVID during the hospitalisation.

9. COVID-19 infection rate among staff / Number of tests performed to hospital staff (as process measure).
10. Survival rates.

Where possible indicators 1-7 should be stratified by age groups.

Additionally, the proposed outcome measures should be used and interpreted with great caution if used to benchmarking care quality between providers. In this case, consistent data definitions should be adopted and measures from 1 to 7 should be adjusted for potential confounding factors (i.e. patient case mix) in order to draw meaningful and correct comparisons among providers of Mortality rate.

LENGTH OF STAY MEASURES

1. Length of Stay.
2. Average length of stay in ICU of infected.
3. Average length of stay in hospital.

PROCESS MEASURES (SOME EXAMPLES)

1. Percentage of infected individuals admitted to ICU
2. Percentage of people with comorbidities
3. Percentage of staff with and without correct equipment
4. Number of patients not treated in appropriate level of care
5. Percentage staff trained to use equipment

BALANCING MEASURES

1. Staff infection rate.
2. Staff mortality rate.
3. Staff well being.
4. Illness and sickness rates.
5. Mental illness.

PATIENT PROFILES TO CONSIDER

- Age.
- Gender.
- Ethnicity.
- Comorbidity.
- Region.
- Contacts.

