

# Quality Performance Reports

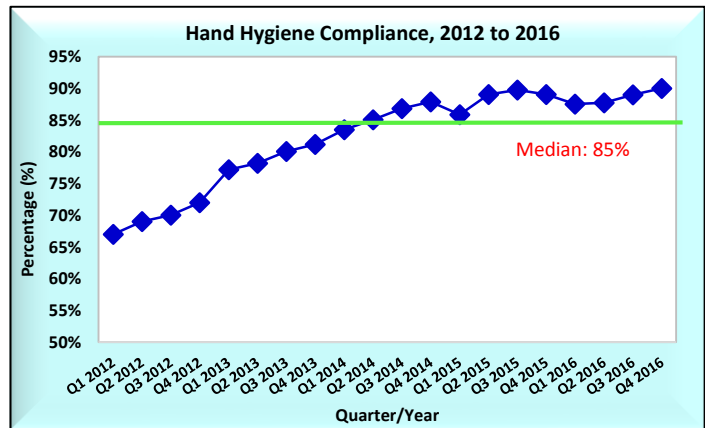
## Infection Prevention & Control

Infection Prevention Program designed to improve the quality of care through the management of infection prevention, education and research. The Infection Control team collects data on hospital acquired infections and analyses the data to identify patterns and trends.

### Hand Hygiene Compliance Rate

The graph shows compliance rate by healthcare worker category that includes doctors, nurses, therapists, radiographers and dietitian. The overall rates have been encouraging as the hospital targets achieving >85% hand hygiene compliance.

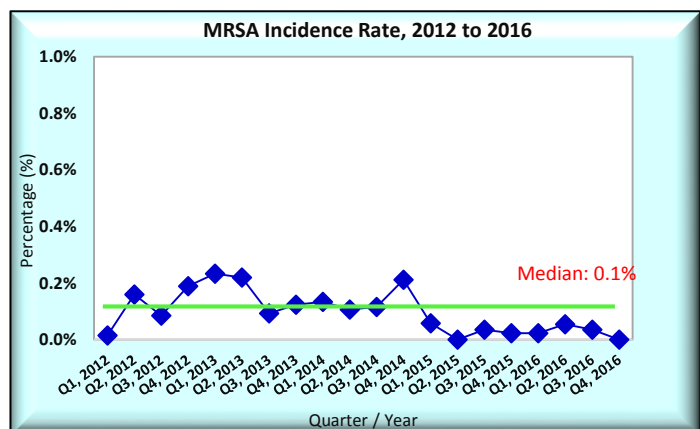
IJN is committed to promoting hand hygiene practice at the point of care amongst our staff.



### Methicillin Resistant Staphylococcus Aureus (MRSA)

MRSA is a bacterium that causes infections in different parts of the body.

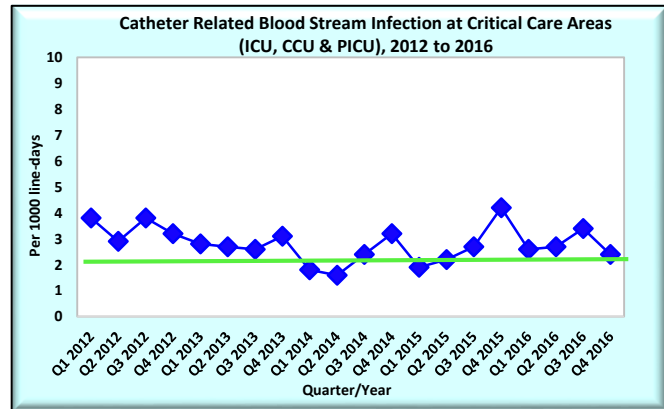
In IJN, MRSA incidence rate still achieving the target, 0.03% in year 2016.



## Catheter-related bloodstream infection (CRBSI)

CRBSI is the resident microorganisms on the patient's skin. A hospital-wide team is dedicated to staff education and promoting best practices that reduce CRBSI.

We calculated the total number of CRBSI cases against 1000 lines-days. In 2016, CRBSI rate was 2.8 per 1000 lines-days.

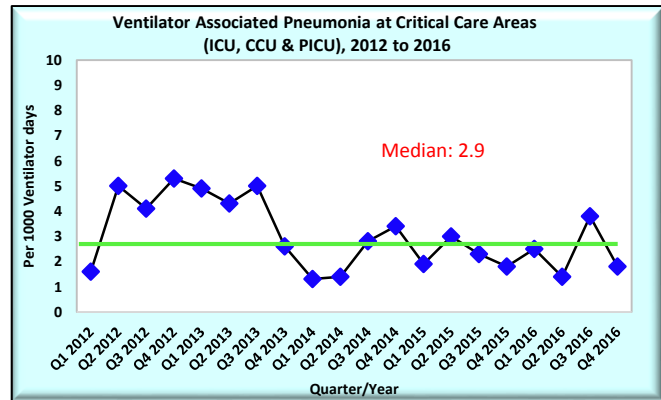


## Ventilator Associated Pneumonia (VAP)

VAP rate is defined as a hospital acquired pneumonia in a patient on mechanical ventilatory support (by endotracheal tube or tracheostomy)

In this case, for a particular time period, we calculate the total number of VAP cases against 1000 ventilator-days.

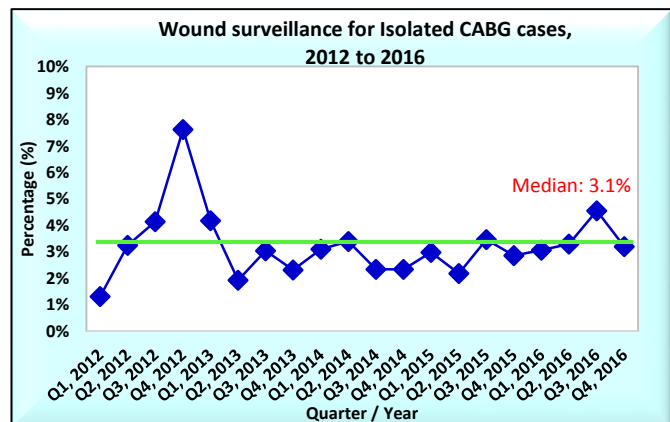
***NB: There is no minimum period of time that the ventilator must be in place in order for the pneumonia to be considered ventilator-associated.***



## Wound surveillance for Isolated CABG

We are monitoring the rate of surgical site infection for isolated CABG procedure based on the total number of infection cases against the total number of patients who undergoes CABG procedure.

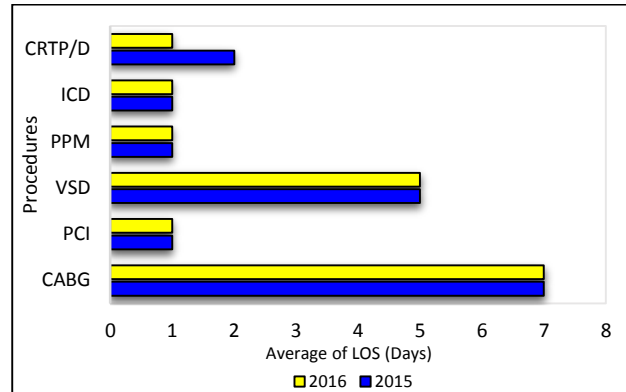
In 2016, the average of surgical site infection rate was 3.5%.



## Length of stay

We at IJN would like our patients to get back on their feet and resume normal life as soon as possible. Therefore, it is our priority to rehabilitate patients and reduce the length of stay.

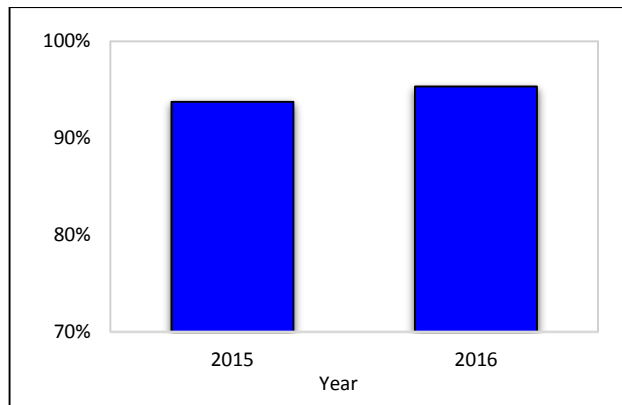
- CABG - Coronary Artery bypass grafting
- VSD - Ventricular Septal Defect
- CRTP/D - Cardiac Resynchronization Therapy Pacemaker/ Defibrillator
- PPM - Pacemaker Implantation
- PCI - Percutaneous Coronary Intervention
- ICD - Implantable Cardioverter Defibrillator



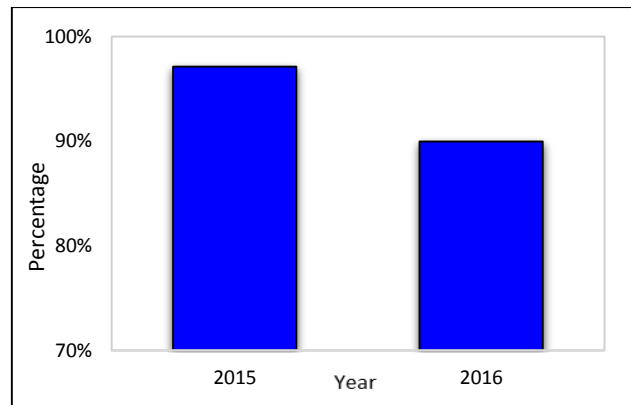
## Patient Experience

Your experience at IJN is important to us. IJN continually strives to meet patients' needs and expectations through patient satisfaction surveys. Your valuable feedback will help us improve our services. We identified the results based on 'Excellent' & 'Good' of patient & families satisfaction.

### Inpatient Satisfaction Survey 2015-2016



### Outpatient Satisfaction Survey 2015-2016



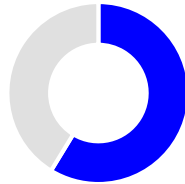
## Waiting Time

Our goal is to make our services more accessible to you and reduce waiting time for patients to obtain clinic appointments with us.

We have reduced the waiting time for new case appointments of **Adult (Cardiology & Cardiothoracic)** and **Paediatric Cardiology** Clinics to **2 weeks**.

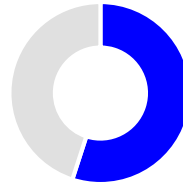
*\*For urgent cases, you can be seen immediately at the outpatient clinic or Emergency department*

**Adult Clinic**



■ <2 weeks

**Paediatric Clinic**



■ <2 weeks