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## A Literature Review Analysing Endorsed Performance and Quality-In-Care Measures for Emergency Department Assessment

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DTU Management Engineering Institut for Systemer, Produktion og Ledelse

# A Literature Review Analysing Endorsed Performance and Quality-In-Care **Measures for Emergency Department Assessment**

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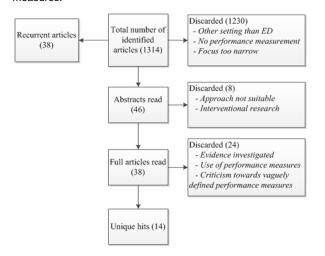
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#### Purpose of research

Evaluation of the performance of an emergency department (ED) remains a difficult task due to the lack of consensus on which performance measures reflects high quality and efficiency. Hence, this study describes, maps, and critically evaluates what performance measures that the published literature regards as being most relevant in assessing overall ED performance seen from a clinicians perspective.

#### **Method**

A systematic literature review in the databases of PubMed, Cochrane Library, and Web of Science of articles on suggested ED performance measures.



#### Discussion

The investigated articles differ in both abstraction level and approach, yet share their primary objective; to propose a series of performance measures that reflect key performance- and quality-in-care measures in emergency departments. During the recent five years, there has been an intensified debate on ED performance measurement. This comes in response to a previous low prioritisation of the emergency medicine area and an increase in ED patient volume over recent years.

#### How many performance indicators to include?

As an ED decision-maker, it is impossible to investigate causes and effects from all registered data. Therefore, it is a necessity to determine which registrations appear most rich in information. The important issue is to find equilibrium between 1) the optimum number of performance measures and 2) the invested work in collecting data.

#### Potential future research areas

Future research tasks includes 1) distinguishing local- from global performance measures, 2) establishing clear definitions on each consensus agreed performance measure, and 3) analysing interconnections through causal networking. If all three issues are addressed, a better understanding of ED performance would be obtained.

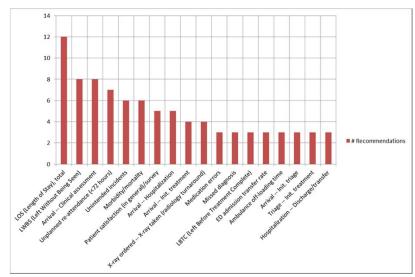
#### Results

A number of articles addressed this study's objective (n = 14 of 46 unique hits). Time intervals and patient-related measures were dominant in the recommendations made in studies from US. UK. Sweden and Canada.

#### Conclusion

54 performance measures have been extracted from 14 studies. ED time intervals are the most recommended performance measures followed by patient centeredness and safety performance measures. A condensed overview of the key performance measures is deemed a solid point of departure for future in depth analysis of departmental performance levels.

Understanding the interconnections between the included performance measures would enable more precise tracking of how different initiatives, such as triage or a specialist doctor in the reception, impact total ED performance.



Top quartile of recommended performance measures in included literature.