

HEALTH CARE STAFFING SERVICES PERFORMANCE MEASURES GLOSSARY

administrative performance measures: Measures that address the organizational structure for coordinating and integrating services, functions, or activities across operational components, (for example: staff recruitment, credentialing, filling assignments).

aggregate (measurement data): Measurement data collected and reported by organizations as a sum or total over a given time period (e.g., monthly, quarterly), or for certain groupings (e.g., health care organization level).

clinical performance measures: Measures designed to evaluate the processes or outcomes of care associated with the delivery of clinical services; allow for intra- and inter-organizational comparisons to be used to continuously improve patient health outcomes; may focus on the appropriateness of clinical decision making and implementation of these decisions; and must be condition or procedure specific, or address important functions of patient care (for example: medication use, clinical events, sentinel events etc.).

continuous variable: An aggregate data measure in which the value of each measurement can fall anywhere along a continuous scale (for example: average number of days to fill open positions).

customer satisfaction measures: Measurement data that focus on the client's perception of care or services provided by the organization, (for example: staff satisfaction, patient satisfaction, or client satisfaction).

data collection: The act or process of capturing raw or primary data from a single or number of sources. Also called "data gathering."

data collection effort: The availability and accessibility of the required data elements, the relative effort required, and associated cost of abstracting or collecting the data.

data element: A discrete piece of data, such as "filled job orders" or "clinical staff."

data sources: The primary source document(s) used for data collection (for example, billing or administrative data, personnel files, agency logs).

denominator: The lower part of a fraction used to calculate a rate, proportion, or ratio. A statement that depicts the primary or overall population of interest that the measure is interested in evaluating, (for example: all clinical staff participating in direct patient care).

flowchart: An ordered sequence of data element retrieval and aggregation through which numerator and denominator events or continuous variable values are identified by a measure.

measure information form: Tool to provide specific and technical information on a measure. The information contained includes: measure set, measure I.D., performance measure name, rationale, type of measure, improvement noted as, numerator/denominator/continuous variable statements, inclusions, exclusions, data elements, data collection approach, sampling, data reported as, report period, and selected references.

measure set: Grouping of carefully selected information that when analyzed, provides a comprehensive understanding of the HCSS firm's performance.

minimum data set: An accepted set of data terms and definitions related to data collection.

numerator: The upper portion of a fraction used to calculate a rate, proportion, or ratio. The numerator depicts the portion of the denominator population that satisfies the condition of the performance measure to be an indicator event (for example: number of staff who has had their annual performance reviews).

original source of measure: An individual, group of individuals or an organization who is initially responsible for developing the measure.

outcome measure: A measure that indicates the result of the performance (or non-performance) of a function or process.

performance measure: A quantitative tool (for example, rate, ratio, index, percentage) that provides an indication of an organization's performance in relation to a specified process or outcome.

process measure: A measure which focuses on a process which leads to a certain outcome, meaning that a scientific basis exists for believing that the process, when executed well, will increase the probability of achieving a desired outcome.

proportion: A type of rate in which the numerator is expressed as a subset of the denominator (for example: proportion of staff who has had required screenings for TB).

rate based: An aggregate data measure in which the value of each measurement is expressed as a proportion or ratio.

ratio: The relationship between two counted sets of data, which may have a value of zero or greater. In a ratio, the numerator is not necessarily a subset of the denominator (for example: the number of Do Not Returns per hours worked).

rationale: An explanation of why an indicator is useful in specifying and assessing the process or outcome of care measured by the indicator. The rationale may include supportive evidence such as published literature, unpublished studies, focus group results, etc.

reliability: The ability of the indicator to accurately and consistently identify the events it was designed to identify across multiple settings.

sampling: A basic statistical technique or process consisting of drawing a limited number of measurements from a larger source (population) and then analyzing those measurements to estimate characteristics of the population from which the measurements have been drawn.

validity: Ability to identify opportunities for improvement in the quality of service/care; demonstration that the indicator use results in improvements in outcomes and/or quality of service/care.

verification: The process of confirming the accuracy or truth of information. Verification of previous employers substantiates that an individual was an employee of a business or organization for a certain period of time. Verification of prior work experience substantiates that an individual was employed to perform specific clinical duties or skills.