

GUIDANCE NOTES FOR COLLECTING KEY PERFORMANCE INDICATORS BY MI CENTRES

Background

UKMi have developed a number of Key Performance Indicators (KPIs). This document provides some guidance to be used alongside the KPIs which are available in an Excel spreadsheet template which can be found [here](#).

This spreadsheet uses the aims of the UKMi strategy as the basis for KPIs and can be used as a starting point for measuring Medicines Information service activity.

It is intended for use by all MI centres and may be adapted according to local needs.

Performance indicators are worth measuring for several reasons including:

- to enable benchmarking (regional or national)
- to help demonstrate the value of the service
- to inform staff allocation, service developments and/or business cases
- to help identify training needs

Core and Expanded KPIs

The KPIs are divided into Core and Expanded KPIs

It is recommended that Core KPIs are collected annually by all MI centres.

Centres may wish, at their discretion, to collect KPIs more frequently, eg quarterly.

Centres may wish to collect performance data additional to the Core KPIs. These can be taken from the list of suggestions in the Expanded KPI tab and pasted into the spreadsheet of the Core KPIs, or centres can create their own.

The use of topics included in the Expanded KPIs are at the discretion of each MI centre. It is expected that these will be tailored to, and informed by, local need.

The Expanded KPIs can be used as a basis for discussion within your organisation or can be adapted for your own requirements or circumstances such as additional specialist roles or workload eg commissioning roles, horizon scanning. Centres may wish to collect data on a wider range of indicators for local performance management.

Please note: Patient Helplines/ Patient User Surveys are only a core KPI for centres that have a Patient Helpline.

Guidance notes and tips for individual KPIs (Core)

Level of enquiries

Enquiry levels have been split into Simple (level 1) enquiries and Specialist Knowledge (level 2 and 3) enquiries. The reasons for this include:

- They are more meaningful for people outside of Medicines Information to understand
- The boundary between level 2 and level 3 enquiries is not very clear

The term simple is used to measure the level of complexity and is not a reflection of value to service users or patient safety.

Number of yellow cards submitted

This may not be something captured by all MI services, but if it is being captured then it is worth reporting as a KPI as promotion of Yellow Card reporting is important for improving patient safety.

Guidance notes and tips for individual KPIs (Expanded)

Inclusion of “time spent” measures

Caution is advised when using time spent as a measure because it may be inaccurate and unrepresentative of workload and there is a risk that it may be incorrectly used to manage workforce provision. This measure may depend on the skill mix and experience of the staff involved, for example senior pharmacist or trainee pharmacist/ pharmacy technician and checker. Thus the aim of collecting the data and any conclusions drawn should be carefully considered.

QA and Audit

Currently the use of QA and Audit is under review within UKMi nationally. In the interim the use of these audits is at the discretion of local MI centres. The available UKMi Peer Review paperwork can be used as guidance.

Discharge queries from HCPs / patients

This metric has several functions such as:

1. to gauge the amount of staff time being spent on this call type
2. to provide evidence for a need for specific service/investment to deal with these enquiries
3. to identify pro-active interventions, which may include further training for specific staff groups to reduce the need for calls, communication to relevant stakeholders or a change of process.

Cost savings

Identification of cost savings may be something that you are asked to report on and a measure for these could then be agreed locally. An example of a possible measure of savings is provided.

Risks to High Quality MI Service

This measure is included to help support MI Service managers to identify any gaps and inform their local risk management policy.

References

- [FutureNHS / Running an MI service/ \(https://future.nhs.uk/UKMedsInfoNetwk/view?objectID=31096048 \)](https://future.nhs.uk/UKMedsInfoNetwk/view?objectID=31096048)
 - Standards and Audit / UKMI Audit Standards and Toolkit
 - Peer Review / Patient Outcome Impact Rating Scale for Enquiries
 - User Satisfaction Survey / Guidance for the use of User Surveys in UKMI Services
 - Risk Management / Standard Operating Procedures

Contact

Authors:

Georgina Glass, Manager Medicines Advice Service/ Endocrinology Pharmacist, Royal Free London NHS Trust

Charlotte Hay, Pharmacist Team Leader, Medicines Advice, Betsi Cadwaladr University Health Board

Paula Russell, Principal Pharmacist – Medicines Information, Regional Drug and Therapeutic Centre, Newcastle Upon Tyne

and the UKMi QRMG working group (email any queries to QRMG.ukmi@nhs.net)