



مستشفى كند
KANAD HOSPITAL
إيمان أمل سلام محبة
FAITH HOPE PEACE LOVE
Birthplace of Leaders for the Nation
مهدّ لقادة الوطن، تأسست عام 1960
Founded in 1960



QUARTERLY PERFORMANCE REPORT 2024

INTERNATIONAL RANKING KPIS | Q1-Q4 2024

At Kanad Hospital, we are committed to delivering world-class healthcare guided by international standards. This report presents our performance across key quality and safety indicators for the year 2024. These metrics reflect our dedication to patient safety, clinical excellence, and timely access to care.

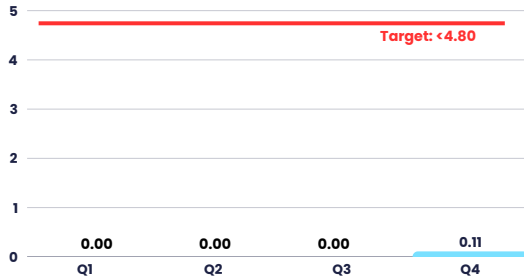
PATIENT SAFETY & INFECTION CONTROL

KPI Title	Target (Benchmark)	Q1	Q2	Q3	Q4	Performance Summary
MDRO Bloodstream Infection Rate (Q1006)	< 4.80 per 1,000 pt. days	0.00	0.00	0.00	0.11	✅ Maintained well below target
Clostridium Difficile Infection Rate (Q1031)	0 (Zero tolerance)	0.00	0.00	0.00	0.00	✅ Zero infections reported
Perioperative PE/DVT Rate (Q1005)	Lower is better	0.00	0.00	0.00	0.00	✅ No reported cases
30-Day Unplanned Readmission Rate (Q1029)	≤ 5% (Internal benchmark)	6.43%	4.83%	4.10%	4.90%	⚠️ The 30-Day Unplanned Readmission Rate (Q1029) exceeded the internal target of <5% in Q1 with a rate of 6.43%, but demonstrated consistent improvement across subsequent quarters: 4.83%, 4.10%, and 4.90%, successfully outperforming the international benchmark and signaling enhanced care coordination and discharge planning.**

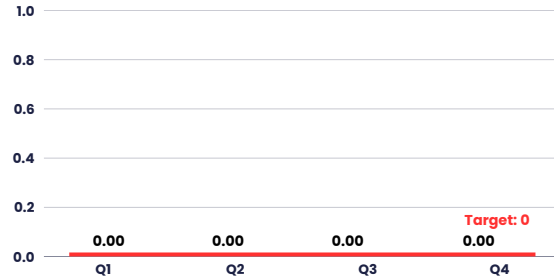
**30-day unplanned readmission rate international comparison

Country/Region	Benchmark Rate	Notes
United States (CMS)	~15-20%	Risk-standardized for Medicare patients aged 65+ across all conditions <u>2024 All-Cause, Unplanned Hospital-Wide Readmission Measure - QPP</u>
Canada (CIHI)	~9-12%	Varies by province and condition; includes medical and surgical patients <u>2024 All-Cause, Unplanned Hospital-Wide Readmission Measure - QPP</u>
United Kingdom (NHS)	~7-11%	Focuses on emergency readmissions; excludes planned procedures <u>2024 All-Cause, Unplanned Hospital-Wide Readmission Measure - QPP</u>
Australia	~6-12%	Rates vary by state and hospital; benchmarking still evolving <u>2024 All-Cause, Unplanned Hospital-Wide Readmission Measure - QPP</u>
France	~8.8%	Based on national methodology for patients 18+ <u>2024 All-Cause, Unplanned Hospital-Wide Readmission Measure - QPP</u>

MDRO Bloodstream Infection Rate (QI006)



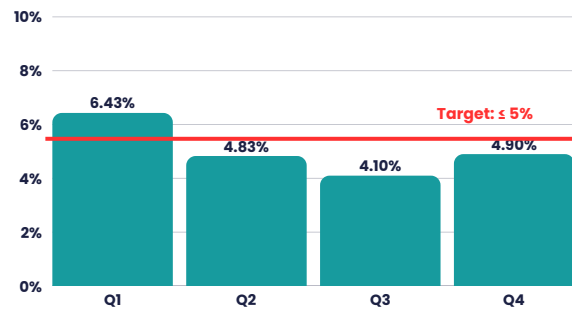
Clostridium Difficile Infection Rate (QI031)



Perioperative PE/DVT Rate (QI005)

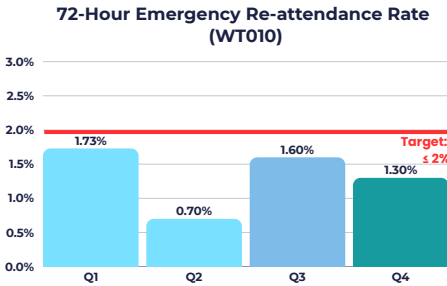
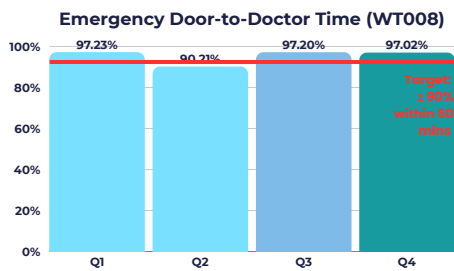
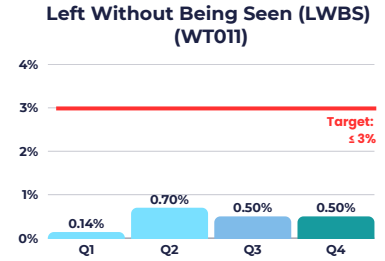
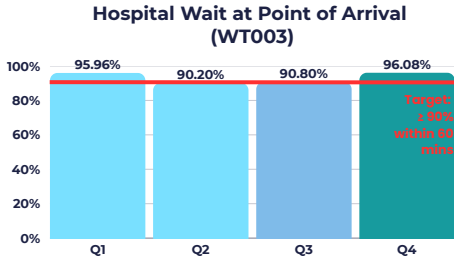


30-Day Unplanned Readmission Rate (QI029)



ACCESS TO CARE & TIMELINESS

KPI Title	Target (Benchmark)	Q1	Q2	Q3	Q4	Performance Summary
Hospital Wait at Point of Arrival (WT003)	≥ 90% within 60 mins	95.96%	90.20%	90.80%	96.08%	✅ Consistently met or exceeded target
First Available Specialist Appointment (WT004)	≥ 90% within 10 days	85.51%	80.41%	79.90%	92.20%	⚠️ Below target in Q1-Q3; exceeded in Q4
Emergency Door-to-Doctor Time (WT008)	≥ 90% within 60 mins	97.23%	90.21%	97.20%	97.02%	✅ Excellent performance throughout
72-Hour Emergency Re-attendance Rate (WT010)	≤ 2%	1.73%	0.70%	1.60%	1.30%	✅ Maintained below threshold
Left Without Being Seen (LWBS) (WT011)	≤ 3%	0.14%	0.70%	0.50%	0.50%	✅ Significantly below target




SUMMARY OF ACHIEVEMENTS



✓ Zero tolerance infection goals met for CDI and surgical complications.



✓ Emergency care KPIs consistently exceeded, ensuring rapid response and patient satisfaction.



⚠ Readmission rates improved after Q1, reflecting enhanced discharge planning and follow-up care.



⚠ Specialist appointment access improved significantly in Q4 after earlier challenges.

OUR COMMITMENT

We continuously monitor and improve our performance to align with international best practices. These results reflect our unwavering commitment to patient safety, clinical quality, and operational excellence.