



CLINICAL QUALITY INDICATOR | User Guide

2026

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INTRODUCTION

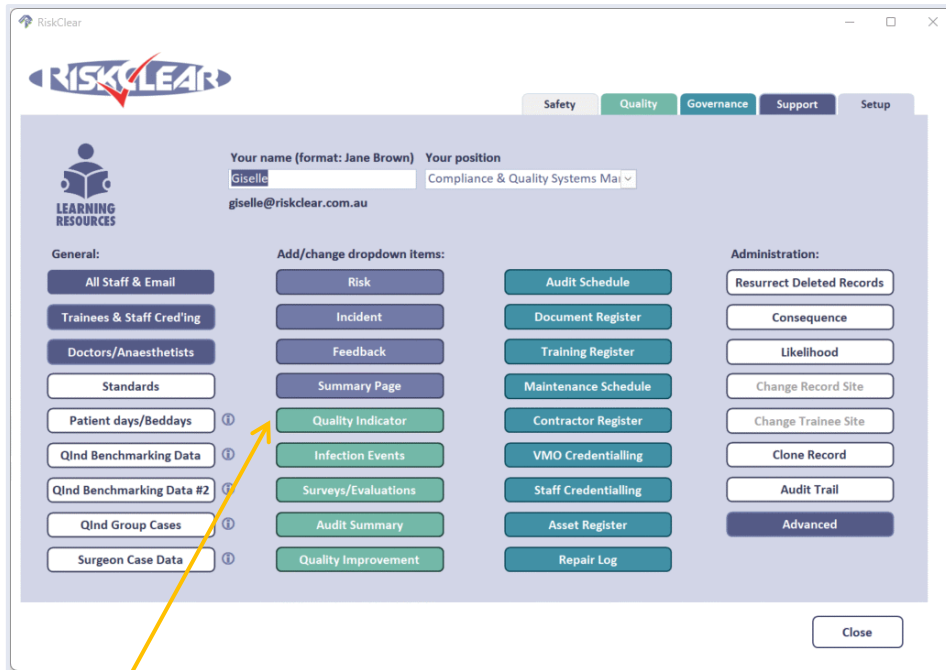
Clinical/Quality Indicators measure the extent to which set targets are achieved. They are expressed as numbers, rates, or averages that can provide a basis clinicians, organisations, and planners aiming to achieve improvement in care and the process in which patient/resident care is provided.

Clinical/Quality Indicators in RiskClear can be found on the **Quality Tab** and can be configured via **Setup** which is explained in the following section of this guide.



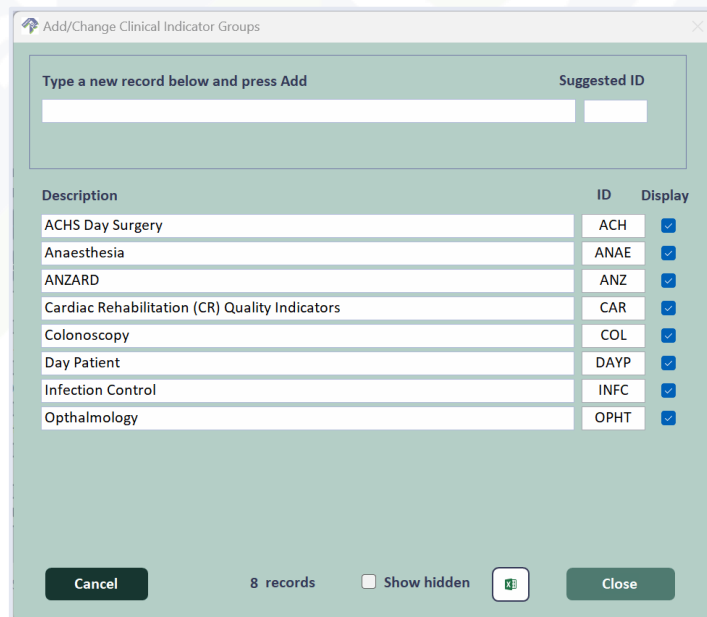
SETTING UP CLINICAL/QUALITY INDICATORS

Before Clinical/Quality Indicators can be recorded, they must be configured in Setup. Go to the **Setup Tab** and click **Clinical/Quality Indicators**.



The image shows the RiskClear Setup Panel. At the top, there are tabs for Safety, Quality, Governance, Support, and Setup. The Quality tab is selected. Below the tabs, there is a section for user information: 'Your name (format: Jane Brown)' with a text input field containing 'Giselle', 'Your position' with a dropdown menu showing 'Compliance & Quality Systems Mai', and an email field 'giselle@riskclear.com.au'. Below this, there are three columns of buttons. The first column, 'General:', contains buttons for 'All Staff & Email', 'Trainees & Staff Cred'ing', 'Doctors/Anaesthetists', 'Standards', 'Patient days/Beddays', 'QInd Benchmarking Data', 'QInd Benchmarking Data #2', 'QInd Group Cases', and 'Surgeon Case Data'. The second column, 'Add/change dropdown items:', contains buttons for 'Risk', 'Incident', 'Feedback', 'Summary Page', 'Quality Indicator', 'Infection Events', 'Surveys/Evaluations', 'Audit Summary', and 'Quality Improvement'. The third column, 'Administration:', contains buttons for 'Audit Schedule', 'Document Register', 'Training Register', 'Maintenance Schedule', 'Contractor Register', 'VMO Credentialling', 'Staff Credentialling', 'Asset Register', 'Repair Log', 'Resurrect Deleted Records', 'Consequence', 'Likelihood', 'Change Record Site', 'Change Trainee Site', 'Clone Record', 'Audit Trail', and 'Advanced'. A yellow arrow points from the 'Quality Indicator' button in the second column to the 'Clinical/Quality Indicator Group' panel below.

Select **Clinical/Quality Indicator Group** and the following panel will appear:



The image shows the 'Add/Change Clinical Indicator Groups' panel. It has a title bar with a plus icon and a close icon. Below the title bar, there is a section for adding a new record: 'Type a new record below and press Add' with a text input field and a 'Suggested ID' field. Below this, there is a table with the following columns: 'Description', 'ID', and 'Display'. The table contains the following rows:

Description	ID	Display
ACHS Day Surgery	ACH	☒
Anaesthesia	ANAE	☒
ANZARD	ANZ	☒
Cardiac Rehabilitation (CR) Quality Indicators	CAR	☒
Colonoscopy	COL	☒
Day Patient	DAYP	☒
Infection Control	INFC	☒
Ophthalmology	OPHT	☒

At the bottom of the panel, there is a 'Cancel' button, a status bar showing '8 records' and a 'Show hidden' checkbox, and a 'Close' button.

CLINICAL/QUALITY INDICATOR GROUPS

Remove the tick alongside the groups that you do not use, and then click 'Close'. The un-ticked items will no longer appear in RiskClear. Select the Clinical/Quality Indicator Group from the drop-down at the top of the panel. This will display any Clinical/Quality Indicators that have been previously added to this group on the list underneath. Initially, these lists are empty.

Repeat this for all Clinical/Quality Indicator Sets that are relevant to your facility.

For reporting purposes, Clinical/Quality Indicators also need to have monthly bed days/patient/resident day and benchmark data recorded (if desired).

1. Go to the Setup Tab
2. Click the patient/resident days/bed days button



The following panel will appear:

Patient Beddays

ENTER/CHECK PATIENT BEDDAYS

☒ Beddays
☐ Admissions
☐ Patients

Month	Beddays
Dec 2023	0
Nov 2023	621
Oct 2023	654
Sep 2023	440
Aug 2023	550
Jul 2023	440
Jun 2023	554
May 2023	554
Apr 2023	456
Mar 2023	765
Feb 2023	543
Jan 2023	432
Dec 2022	567
Nov 2022	123
Oct 2022	324
Sep 2022	450
Aug 2022	45
Jul 2022	5
Jun 2022	10
...	...

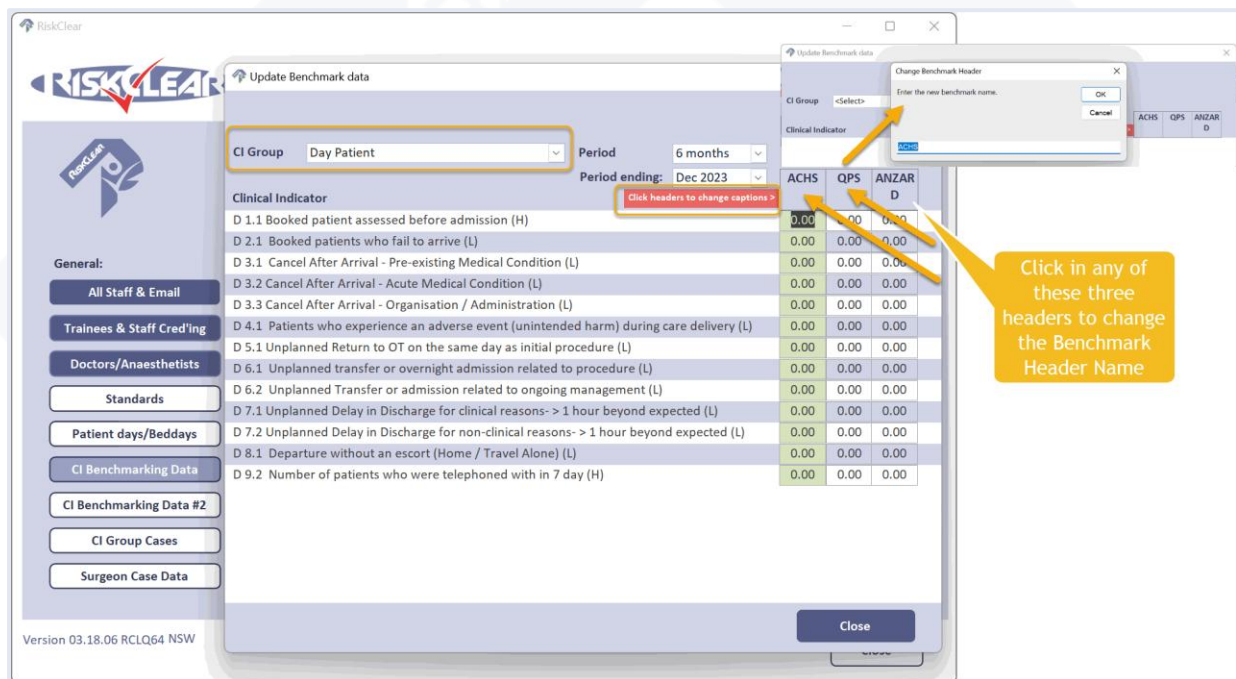
Close

The **bed days panel** displays all existing bed days/patient/resident days/admissions data up to the current month (even if blank).

Go to the **Setup Tab > CI/QUAL IND Benchmarking Data** - the **benchmarking panel** will display all the Clinical/Quality Indicators that you have created for the current half-year. To change half-year periods, select from the drop-down at the top left of the panel.

This data is optional and will appear in the Clinical/Quality Indicators Benchmarking report. Note that before you run this report, these two panels will appear in succession, showing the periods relevant for the period selected in the report.

Note that the Benchmarking headings can be customised with your own descriptions of the benchmarking data entered. Simply click headers to change captions – refer to diagram below.



Update Benchmark data

CI Group: Day Patient Period: 6 months Period ending: Dec 2023

Click headers to change captions >

Clinical Indicator	ACHS	QPS	ANZARD
D 1.1 Booked patient assessed before admission (H)	0.00	0.00	0.00
D 2.1 Booked patients who fail to arrive (L)	0.00	0.00	0.00
D 3.1 Cancel After Arrival - Pre-existing Medical Condition (L)	0.00	0.00	0.00
D 3.2 Cancel After Arrival - Acute Medical Condition (L)	0.00	0.00	0.00
D 3.3 Cancel After Arrival - Organisation / Administration (L)	0.00	0.00	0.00
D 4.1 Patients who experience an adverse event (unintended harm) during care delivery (L)	0.00	0.00	0.00
D 5.1 Unplanned Return to OT on the same day as initial procedure (L)	0.00	0.00	0.00
D 6.1 Unplanned transfer or overnight admission related to procedure (L)	0.00	0.00	0.00
D 6.2 Unplanned Transfer or admission related to ongoing management (L)	0.00	0.00	0.00
D 7.1 Unplanned Delay in Discharge for clinical reasons- > 1 hour beyond expected (L)	0.00	0.00	0.00
D 7.2 Unplanned Delay in Discharge for non-clinical reasons- > 1 hour beyond expected (L)	0.00	0.00	0.00
D 8.1 Departure without an escort (Home / Travel Alone) (L)	0.00	0.00	0.00
D 9.2 Number of patients who were telephoned with in 7 day (H)	0.00	0.00	0.00

Change Benchmark Header

Enter the new benchmark name.

OK Cancel

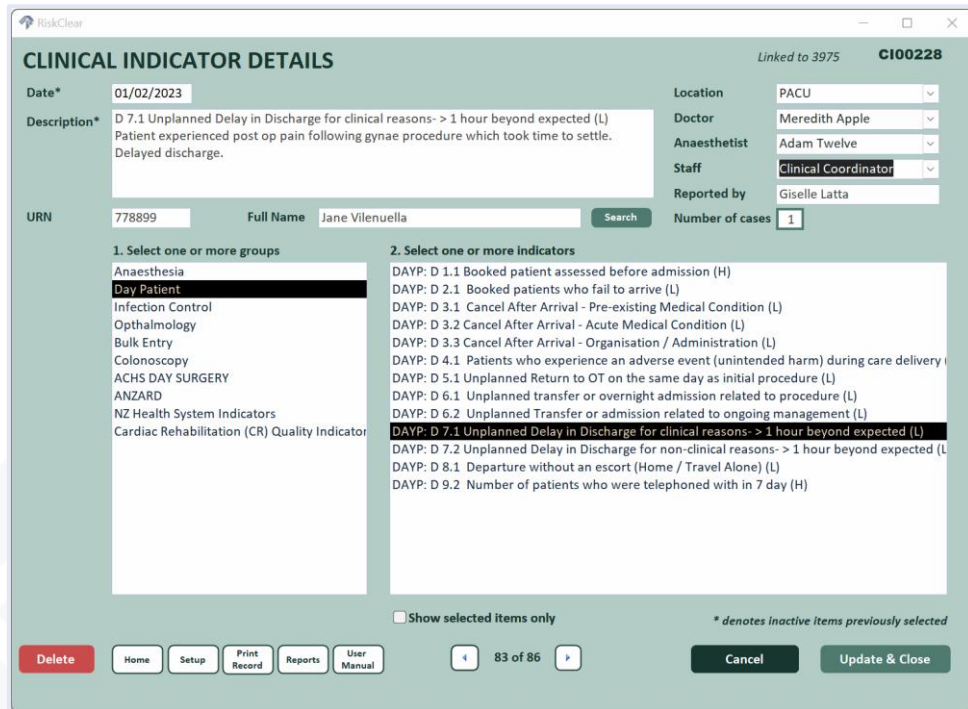
Click in any of these three headers to change the Benchmark Header Name

Close

Version 03.18.06 RCLQ64 NSW

CLINICAL/QUALITY INDICATOR RECORDS

A completed **Clinical/Quality Indicator Record** is shown below:



Enter the **Date** and a short **description** on the Clinical/Quality Indicator. Enter the **MRN/RESIDENT ID** or 0 (zero if unknown) and/or the name of the patient/resident.

If RiskClear is **linked to your patient/resident administration system**, entering the MRN/RESIDENT ID will auto-fill the patient/resident's name. In this case, you will also see a "Search" button to the left of the "Full Name" field. Click this to open the search dialog and enter the surname. You can filter names further by entering the first few characters of the first name. Double-click an entry to select and auto-fill the MRN/RESIDENT ID and patient/resident name.

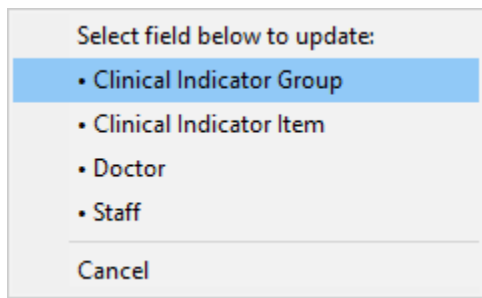
Select one or more **Clinical/Quality Indicator Groups**. A list of Clinical/Quality Indicators belonging to the group(s) selected will be displayed. You can display only selected Clinical/Quality Indicators by clicking "**show selected items only**". Select one or more items from this list.

For reporting purposes, you may also record one or two doctors (usually surgeon and anaesthetist or physician) and a staff member.

Clicking the **Delete** button will remove the record from view including all reports. If the record was deleted by mistake it can be resurrected by going to Setup/Resurrect Records.

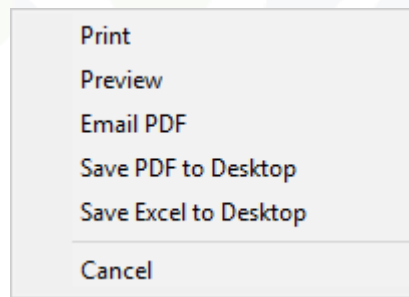
Pressing the "**Home**" button will take you back to the RiskClear menu page.

If you have access, clicking the **"Setup"** button will display a pop-up menu showing the updatable drop-down fields from that page.



Select an entry to display the relevant update box so you can add, change, or hide entries from that field.

Clicking the **"Print Record"** button will display a print options menu.



Select an option to print that page in the format chosen.

Clicking the **"Reports"** button will take you to the RiskClear Reports section. When finished with reports, you will be taken back to this page.

This user manual can be displayed by clicking the **"User Manual"** button.

Use the **back and forward arrows** to scroll through records.

Click **Close** to close and save your changes or **Cancel** to undo them and close the page.

A Summary Page is not displayed when either creating or opening a Clinical/Quality Indicator record.

Clinical/Quality Indicator records can also be created from incident record. When done in this way, the incident and Clinical/Quality Indicator record will be linked and can be reported on using specific reports. The record number will be displayed at the top right of the page. Click this to open the linked CI/Qual Ind record.

Bulk/Multiple Clinical (or Quality) Indicators can also be entered into RiskClear. Simply complete the Date, Location, and other details and then in the **Number of Cases** field enter a number (between 2-20) and the enter key. The URN and Full Name fields are replaced with the **Multiple Clinical/Quality Indicator** bar. Select the appropriate Clinical/Quality Indicator item/s and click update and close.

RiskClear

not linked

CI00246

CLINICAL INDICATOR DETAILS

Date*

24/10/2023

Description*

COLCI 1 -Patients scheduled for a colonoscopy whose bowel preparation was adequate
COLCI 2- Patients scheduled for Colonoscopy who have their entire colon examined

Location

Hospital

Doctor

Meredith Grey

Anaesthetist

Stephen Blue

Staff

Clinical Health Team

Reported by

Multiple clinical indicators

Number of cases

15

1. Select one or more groups

Colonoscopy

2. Select one or more indicators

COL: COLCI 1 -Patients scheduled for a colonoscopy whose bowel preparation was adequate

COL: COLCI 2- Patients scheduled for Colonoscopy who have their entire colon examined

Show selected items only

* denotes inactive items previously selected

Delete

Home

Setup

Print Record

Reports

User Manual

88 of 89

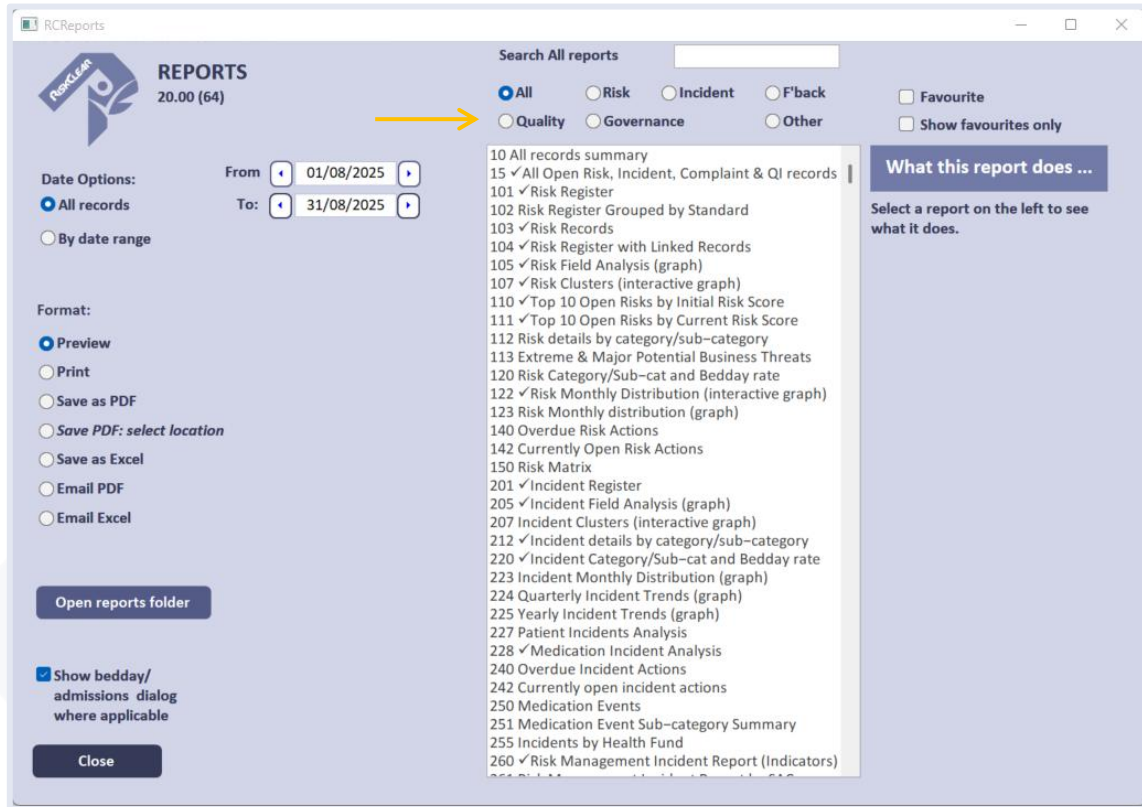
Cancel

Update & Close

7

CLINICAL/QUALITY INDICATOR REPORTS

Clinical/Quality Indicator (CI/QUAL IND) reports can be generated in the Report Suite of RiskClear.



The following reports can be run via the Reports Suite in RiskClear and include:

REPORT NUMBER		REPORT FUNCTION
REPORT 410	Clinical/Quality Indicator Listing	Displays a list of CI/QUAL IND records for the specified period
REPORT 411	Clinical/Quality Indicator Counts and bed day Rate	Total counts by CI/QUAL IND and CI/QUAL IND group with bed day rate and patient/resident count based on MRN/RESIDENT IDs entered. Totals will be combined if 'all sites' selected. Patient/resident days can be entered on the panel that displays before the report is run.
REPORT 412	Benchmarks indicators against benchmark data.	

REPORT 413	Clinical/Quality Indicator Benchmarking using Indicator Groups	Benchmarks CI/QUAL INDs for a selected Indicator Group. e.g. Colonoscopy Indicators/against Colonoscopy data. Data can be entered/checked in panels which appear before the report runs. Will be combined totals if 'all sites' selected
REPORT 414	Clinical/Quality Indicator by Individual Surgeon (graph)	Displays a bar-graph of the selected surgeons CI/QUAL IND rates and comparisons for the CI/QUAL IND selected. Surgeon cases and benchmark data can be entered on the panels displayed before the report runs. A site must be selected.
REPORT 416	Clinical/Quality Indicator – All Surgeons (graph)	Displays a bar graph of all surgeons' CI/QUAL IND rates and comparisons for the CI/QUAL IND selected. Case and benchmark data will be displayed for checking before the report runs. A site must be selected.
REPORT 417	Clinical/Quality Indicator Monthly Trends	Displays 12 months of data ending the month selected giving the average, high and low monthly counts. For multi-site clients this will benchmark sites.

Note – you can highlight favourite reports by placing a tick in the Favourite Box. Some reports can also be de-identified by placing a tick in the corresponding box.