



Indicator Reference Number															Reporti	ıg Period	Periods	
	Domain	Theme	Measure	Rationale	Name of Indicator /Description	Numerator	Denominator	Period Type	Frequency	Data Source Numerator	Data Source Denominator	Interpretation Guidance	Notes	Q1	Q2	Q3	Q4	
ACC02ai	Domain 4: Ensuring that people have a positive experience of care	Process measure	Discharge		to discharge (Validated)	Critical care bed days utilised for critical care unit survivors discharged more than 24 hours after the decision to discharge to a ward in the same hospita (or directly to home)		Quarterly	Quarterly	ICNARC	ICNARC	Lower is better			Jun 21	Sep 21	Oct 20 - 1 Dec 21	
ACC02aii	Domain 4: Ensuring that people have a positive experience of care	Process measure	Discharge		to discharge (Non-Validated)	Critical care bed days utilised for critical care unit survivors discharged more than 24 hours after the decision to discharge to a ward in the same hospita (or directly to home)	Total available critical care bed days	Quarterly	Quarterly	ICNARC	ICNARC	Lower is better		Jun 21	Sep 21	Dec 2	- Jan 22 - 1 Mar 22	
ACC02bi	Domain 4: Ensuring that people have a positive experience of care.	Process measure	Discharge times		Proportion of live discharges, discharged within 4 hours post decision to discharge (Validated)	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home) within 4 hours of the decision to discharge	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home)	Quarterly	Quarterly	ICNARC	ICNARC	Higher is better					- Oct 20 - 1 Dec 21	
ACC02bii	Domain 4: Ensuring that people have a positive experience of care	Process measure	Discharge times		Proportion of live discharges, discharged within 4 hours post decision to discharge (Non-Validated)	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home) within 4 hours of the decision to discharge	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home)	Quarterly	Quarterly	ICNARC	ICNARC	Higher is better					- Jan 22 - 1 Mar 22	
ACC02ci	Domain 4: Ensuring that people have a positive experience of care	Process measure	Discharge times		Proportion of live discharges, discharged greater than 24hrs after decision to discharge (Validated)	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home) greater than 24 hours after the decision to discharge	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home)	Quarterly	Quarterly	ICNARC	ICNARC	Lower is better					Oct 20 - 1 Dec 21	
ACC02cii	Domain 4: Ensuring that people have a positive experience of care	Process measure	Discharge times		Proportion of live discharges, discharged greater than 24hrs after decision to discharge (Non-Validated)	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home) greater than 24 hours after the decision to discharge	Number of critical care unit survivors discharged to a ward in the same hospital (or directly to home)	Quarterly	Quarterly	ICNARC	ICNARC	Lower is better					- Jan 22 - 1 Mar 22	
ACC02e	Domain 4: Ensuring that people have a positive experience of care	Process measure	Discharge times		Proportion of live discharges, discharged from critical care between 07:00am and 21:59pm	Number of critical care unit survivors discharged to a ward in the same hospital between 07:00 and 21:59	Number of critical care unit survivors discharged to a ward in the same hospital	Quarterly	Quarterly	ICNARC	ICNARC	Higher is better					Oct 20 - 1 Dec 21	
ACC03a	Domain 4: Ensuring that people have a positive experience of care	Process measure	Discharge times		Proportion of live discharges between 07:00am and 19:59pm	Number of critical care unit survivors discharged to a ward in the same hospital between 07:00 and 19:59	Number of critical care unit survivors discharged to a ward in the same hospital	Quarterly	Quarterly	ICNARC	ICNARC	Higher is better		Jan 21 Mar 21			Oct 20 - 1 Dec 21	
ACC15	Domain 1: Preventing people from dying prematurely	Outcome measure	Standardised mortality ratio		Standardised mortality ratio (using ICNARC risk adjustment model) for critical care patients	Observed number of deaths before ultimate discharge from acute hospital	Expected number of deaths before ultimate discharge from acute hospital	Rolling Annual	Quarterly	ICNARC	ICNARC	Lower is better		Apr 20 Mar 21			- Jan 21 - 1 Dec 21	

Data collection has been approved by the Review of Central Returns - ROCR ROCR/OR/2230/001MAND