

**INTERNSHIP TRAINING
AT
SHRI HOSPITAL
VENDOR PERFORMANCE ANALYSIS**

BY

DR. DIVYA YADAV

PG / 13 / 019

UNDER THE GUIDANCE OF

DR. A. K. KHOKHAR

**POST GRADUATE DIPLOMA IN HOSPITAL AND
HEALTH MANAGEMENT**

2013-15



International Institute of Health Management Research

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INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT RESEARCH

NEW DELHI

(Completion of Dissertation from Shri Hospital)

The certificate is awarded to

Dr. Divya Yadav

In recognition of having successfully completed her
Internship in the department of

Supply Chain Management

and has successfully completed her Project on

Vendor Performance Analysis

30th April, 2015

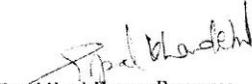
Shri Hospital, Jagatpura, Jaipur

She comes across as a committed, sincere & diligent person who has a
strong drive & zeal for learning

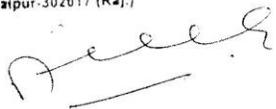
We wish her all the best for future endeavors


Training & Development

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TO WHOMSOEVER IT MAY CONCERN

This is to certify that Dr. Divya Yadav student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from International Institute of Health Management Research, New Delhi has undergone internship training at Shri Hospital, Jaipur from 02.02.15 to 30.04.15.

The Candidate has successfully carried out the study designated to him during internship training and his approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish him all success in all his future endeavors.

Dr. A.K. Agarwal
Dean, Academics and Student Affairs
IIHMR, New Delhi

Name of the mentor
Dr. A. K. Khokhar
IIHMR, New Delhi

Certificate Of Approval

The following dissertation titled "Vendor Performance Analysis" at "Shri Hospital" is hereby approved as a certified study in management carried out and presented in a manner satisfactorily to warrant its acceptance as a prerequisite for the award of **Post Graduate Diploma in Health and Hospital Management** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

Dissertation Examination Committee for evaluation of dissertation.

Name

Signature

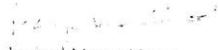
D. V. K. Kuntekar

[Handwritten Signature]

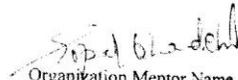
Certificate from Dissertation Advisory Committee

This is to certify that **Dr. Divya Yadav**, a graduate student of the **Post- Graduate Diploma in Health and Hospital Management** has worked under our guidance and supervision. He/ She is submitting this dissertation titled "Vendor Performance Analysis" at "Shri Hospital" in partial fulfillment of the requirements for the award of the **Post- Graduate Diploma in Health and Hospital Management**.

This dissertation has the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.


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INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT RESEARCH,
NEW DELHI

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled VENDOR PERFORMANCE ANALYSIS

..... and submitted by (Name) DR. DIVYA YADAV

..... Enrollment No. PG/13/019

under the supervision of DR. A.K. KHOKAR

for award of Postgraduate Diploma in Hospital and Health Management of the Institute
carried out during the period from 02.02.15 to 30.04.15

embodies my original work and has not formed the basis for the award of any
degree, diploma associate ship, fellowship, titles in this or any other Institute or
other similar institution of higher learning.

Signature
Divya Yadav

FEEDBACK FORM

Name of the Student: DR. DIUYA YADAV

Dissertation Organization: SHRI HOSPITAL, JAIPUR

Area of Dissertation: MATERIAL MANAGEMENT

Attendance: REGULAR STUDENT

Objectives achieved: Provided useful insights particularly in purchase department

Deliverables: Report on Vendor Performance Analysis

Strengths: Committed, team player

Suggestions for Improvement: Need to work on other aspects of material management as well.

Signature of the Officer-in-Charge/ Organization Mentor (Dissertation)

SHRI HOSPITAL
4 Vishnupuri, Jagatpura Road
Jaipur-302017 (Raj.)

Date: 18th May, 2015
Place: Jaipur

The healthcare sector is considerably different than other sectors having patient care as the most important objective. Nevertheless, survival of the healthcare organizations still depends on money, because of emerging severe competition.

One of the most vital objectives of purchasing departments is obtaining the inputs at the right cost in the right quantity with the right quality at the right time from the right source.

Thus, companies must select the most appropriate suppliers, and reevaluate their performance periodically since it brings significant savings for the organization.

The study aims to bring forward the Preliminary Vendor Performance Analysis to strengthen the procurement process for the health facility.

To uncover hidden waste and cost drivers in the supply chain. Useful to make informed business decisions that impact the enterprise.

Access to timely, relevant and concise information to procurement managers. Making it more supportive by both management and operational personnel.

To leverage the supply base. To increase performance visibility and to mitigate risk.

The approach towards achieving the goals include aligning performance goals with organizational goals and objectives.

To choose evaluation approach keeping in mind the operational performance, availability of personnel, time consumption and pattern of evaluation.

Developing methodology which would give a complete overview into the management processes.

Methodology includes primary data collection based on on-site observations and past record analysis, questionnaire was prepared to conduct stakeholder analysis to scrutinize the vendors in question.

Participant observation field notes, non-participant observation were a part of the process. Based on the findings and in-depth analysis results were constructed and the aim of the study was justified.

ACKNOWLEDGEMENT

I express my sincere gratitude to Shri Hospital, Jaipur as well as to Mr. Gopal Khandelwal and Mrs. Manju Khandelwal for giving me the opportunity to work with them, guiding me in times of ambiguity and help me make the best out of the available opportunities.

I would also love to thank Mr. Thomas, Mr. Jitu Khandelwal and Mr. Virender Aggarwal for their guidance and for taking out time from their responsibilities for the project.

I express my gratitude to the staff and employees, and many others for cooperating and helping me to get accustomed with the working of the hospital and prepare the projects assigned to me.

I thank my institute, IIHMR, Delhi and Mr. Khokhar Sir for giving me an opportunity to put to practical use the theoretical aspects of the knowledge we have gained from the program.

Last but not the least I would love to thank my parents Mr. Ashok Kumar Yadav, Mrs. Sushila Yadav and my sister Mrs. Neha Singh and brother in law Mr. Abhishek Vasudev Singh for their immense support and guidance to help me bring out the best of every situation.

TABLE OF CONTENTS

<u>CHAPTER</u>	<u>PAGE NUMBER</u>
1. Introduction	1
1.1 Outline of the Research	3
2. Approach.	
3. Literature Review	4
Methodology	8
4. Result	10
5. Conclusion	15
6. Instrumentation	17
7. 8.1 Vendor performance Evaluation Form	17
8. Appendices	19
9.1 Purchase Order	
9. 9.2 Registration Form	20
9.3 Indent	21
9.4 Indent form (Equipments)	22
9.5 Requisition Form	23
9.6 Requisition Form -First Time Purchase	24
AMC/CMC Tracker	25
Measure Information Form	26

INTRODUCTION

Health facilities are the last component of pharmaceutical supply chain. Managing pharmaceutical supply at the facility level directly affects the quality of healthcare.

Pharmaceuticals are not only at the core of hospital functionality and efficiency but also represent an intense financial obligation. Successfully managing hospital inventory levels will not only increase the efficiency with which the facility treats its patients but increase its economic efficiency and profit margins. A constant pharmaceutical supply promotes effective care, inspires confidence in the health facility and contributes to job satisfaction and self-esteem among staff.

Managing the business side of medical operations has become a major obstacle to medical professionals at almost every level. The purchasing aspect of the job duties is not considered as important as the other things that they are doing, and as a result, often rely on less than scientific methods when it comes to managing the supply and demand side of hospital Inventory Management.

The most important aspect of any hospital inventory management system is the maximization of technological resources. While many inventory managers might take the use of technology for granted, many facilities are still lagging behind when it comes to converting to a completely electronic based management system. Many designated inventory managers still rely on a pen and paper based system for tracking supply usage and dispersal.

Health workers and managers often believe that inventory control is possible only when resources are plentiful. This is not the case. Inventory control is about managing and using

the resources available. There will be "sufficient resources" only if effective inventory control is implemented. Sound purchasing and inventory control are closely inter-related because one cannot be effective without the other. Purchasing requires knowing the right quality and quantity to buy, when to order, at what price, and from what resources.

Inventory is simply the result of this buying.

Good inventory control makes ordering and pharmaceutical management easier. Essential medicine programs place a high priority on improving inventory control to ensure a reliable supply of essential medicines, vaccines and other items at a health facility.

While most of the software's can be fully automated to calculate everything from reorder points based on previous levels of daily, monthly, yearly usage to reducing the amount of monthly labor devoted towards hospital inventory management, a certain amount of human interaction is still necessary. Trained personnel are still required to anticipate change based on future trends independent of past experience.

Every organization is aware that it should be assessing supplier performance [KPIs] or more sophisticated data gathering. Any method which fits the individual organizational needs can be deployed. With increased reliance on suppliers for one's own ability to meet requirements and expectations and even in certain cases, comply with legal and regulatory requirements, organizations are under increasing pressure to avoid supplier problems, particularly among the long term partners. Paying attention to performance both prevents problems and promotes improvement and efficiency. Need is to influence performance with elements of the process that we can control.

A healthy combination of technology, human ingenuity and basic managerial techniques are required for successful inventory management.

The study aims to bring forward the Preliminary Vendor Performance Analysis to strengthen the procurement process for the health facility.

- To uncover hidden waste and cost drivers in the supply chain.
- Useful to make informed business decisions that impact the enterprise.
- Access to timely, relevant and concise information to procurement managers.
- Making it more supportive by both management and operational personnel.
- To leverage the supply base.
- To increase performance visibility.
- To mitigate risk.

OUTLINE OF THE RESEARCH APPROACH -

Align performance goals with organizational goals and objectives.

Choose evaluation approach keeping in mind the operational performance, availability of personnel, time consumption and pattern of evaluation.

Developing methodology which would give a complete overview into the management processes.

LITERATURE REVIEW

Inventory control process consists of five steps:

Purchasing

Receiving

Storage

Issue

Report

Objective of purchase is to obtain the right product in the right quantity at the right price at the right time from the right vendor.

Computerized inventory management system integrates the management of inventory, information and cost.

Inventory Performance Indicators :

Indicator is an important tool to measure performance. Can be used to assess the present situation of the organization. The objective of these indicators is to reflect healthcare services which relate to cause of needed outcome.

Indicators are composed of three important categories -

✚ Structural Indicators

✚ Process Indicators

✚ Outcome Indicators

[improving rol]

✚ **TABLE - Definitions of Sub - Criteria for Healthcare Supplier**

Selection

Criteria	Sub-Criterion	Definition
Cost products	Total Cost	Overall cost of purchasing from supplier, including product price, freight cost and custom duties.
Service	Delivery Schedule	Suitability of the supplier's Proposed delivery schedule to the healthcare center's operational schedules.
On-time Delivery	Shipping time and supplier's correspondence to the promised due dates.	
Response to Changes		

The ability of the supplier to response to change based on the healthcare center's demand, price structure, order frequency and current business scenario.

Technical Support - Technical support for the possible problems.

Warranty Period - Length of the warranty period for supplied product.

- The report validates the importance of supply chain transformation and provides practical, workable advice on how best to measure the efficiency and effectiveness of supply chain practices.
- ✚ proposes a series of standards and metrics to be used to evaluate and improve supply chain performance, known as the 'balanced scorecard';
- ✚ recommends that the metrics be adopted provincewide so that hospitals can consistently measure and report their performance;
- ✚ advises supply chain professionals on how to adopt and use the metrics in support of underlying leading practices; and
- ✚ stresses the need for hospital senior managers to be champions of supply chain leading practices.

Supply chain performance measurement can drive improvement and the evolution of the supply chain function from a transactional role to a more strategic one, contributing to ensuring that the organizations has an efficient, effective and responsive healthcare system.

The scorecard works as a perfect performance management tool by setting out explicitly the outcomes in each of these areas that support the strategy, vision and mission of the organization, and also provides ways to measure progress towards those outcomes.

Institutions should begin data collection as soon as possible. The initial data collection will create baseline statistics for comparison and enable the creation of targets.

For some measures it may be necessary to carry out calculations manually, possibly using a random sample for the data. Despite the time this takes, it is a worthwhile investment.

Bpsbperformncemetrics

- Akin to "No man is an island to himself", companies alone donot compete....Supply chains compete.Thus, one having the best supply chain has a sustainable strength.To effectively manage a well performing supply chain, leadership should utilize a scorecard and ranking approach that provides a balanced perspective.

Both objective and subjective data must be collected and analyzed to determine if corrective action/improvements are needed. Need to perform the Performance reviews on the suppliers.

Developing a shared mindset on the vision, mission, and strategy. An example of a mission from a procurement perspective could be "the Right parts, at the Right time, at the right cost".

METHODOLOGY

Primary data collection based on on-site observations and past record analysis, questionnaire was prepared to conduct stakeholder analysis to scrutinize the vendors in question.

Participant observation field notes, non-participant observation

PERFORMANCE MEASUREMENT FORMS/ SELF COMPLETION QUESTIONNAIRES

Unlike Program evaluation, Performance measurement is straightforward. Objectives and corresponding outcomes are identified; measures are found to track outcomes; and data is gathered that permit managers or other stakeholders to monitor program performance.

Respondent will complete on his/her own. Where money, time and personnel present themselves as constraints in such cases, performance measure forms act as useful tools.

Measurement Criteria Forms were used to establish the right indicators to map the vendor performance.

Performance evaluation data collection and analysis employs quantitative, qualitative methods or both.

In Quantitative Methods- usage of close- ended questions is done. The variables are represented numerically on a scale of 1 to 4.

In Qualitative Analysis- usage of open-ended questions is done. The variables are in the form of explanations, perspectives and non-numerical representation.

RESULTS

The following section provides the values for each parameter for the suppliers under study. This work instruction details the method used to monitor the performance of suppliers. Areas monitored include Quality, Delivery, lead time, and Emergency aid availability.

DREAM SURGICALS

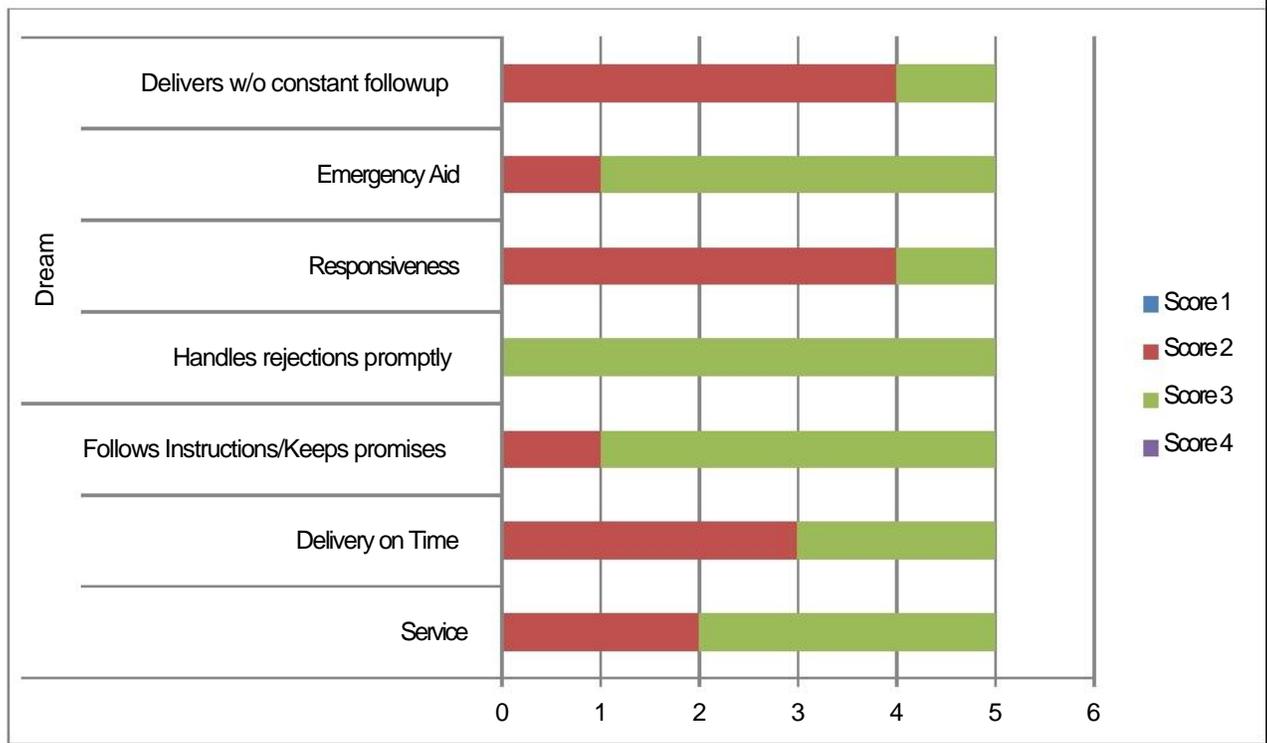


Figure 6.1

DR.REDDY'S

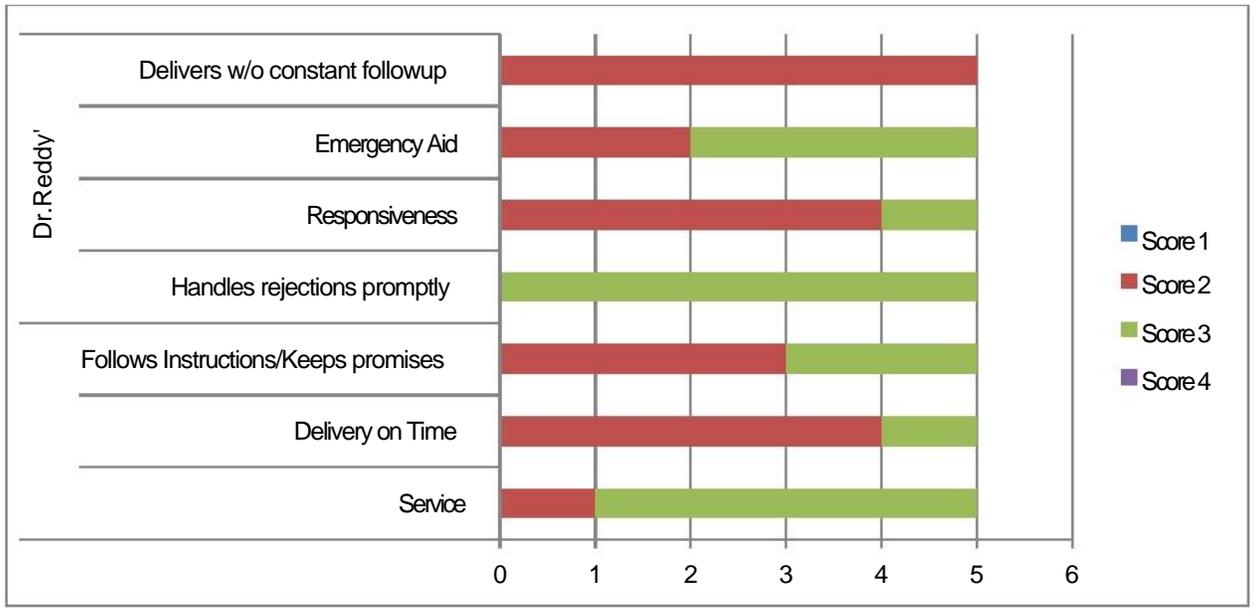


Figure 6.2

INTERNATIONAL SURGICALS

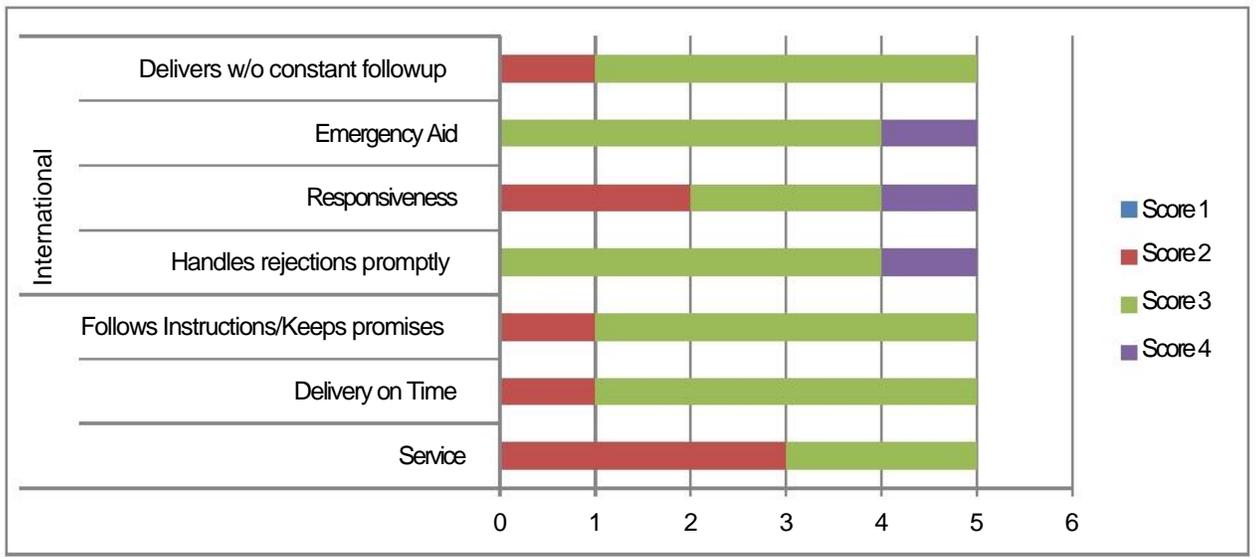


Figure 6.3

LUPIN PHARMACEUTICALS

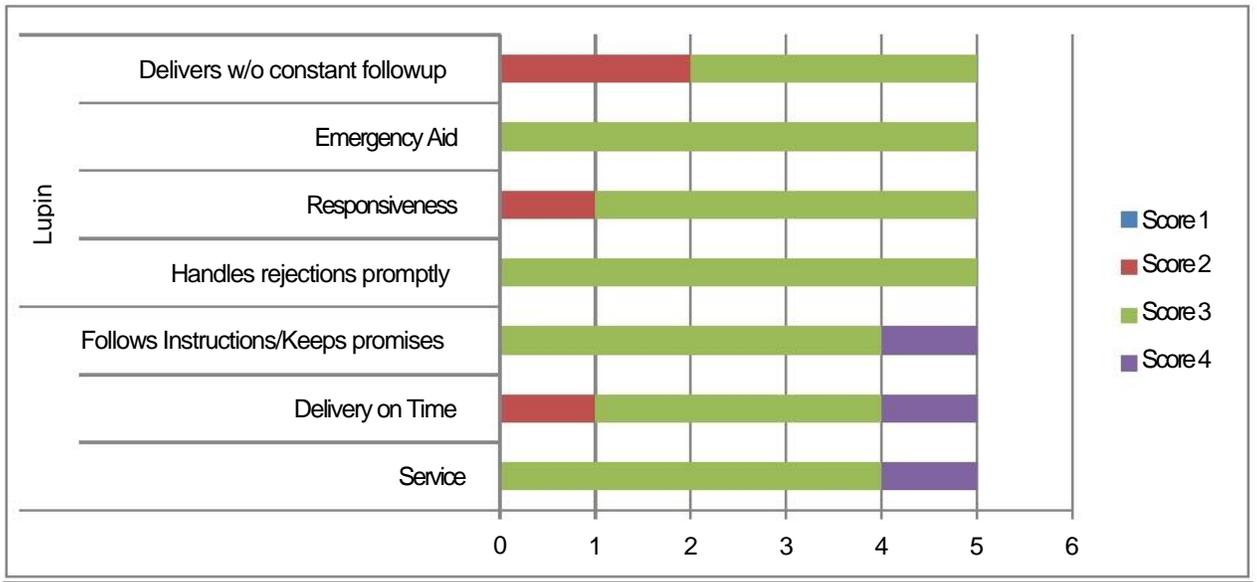


Figure 6.4

MEDIZONE PHARMA

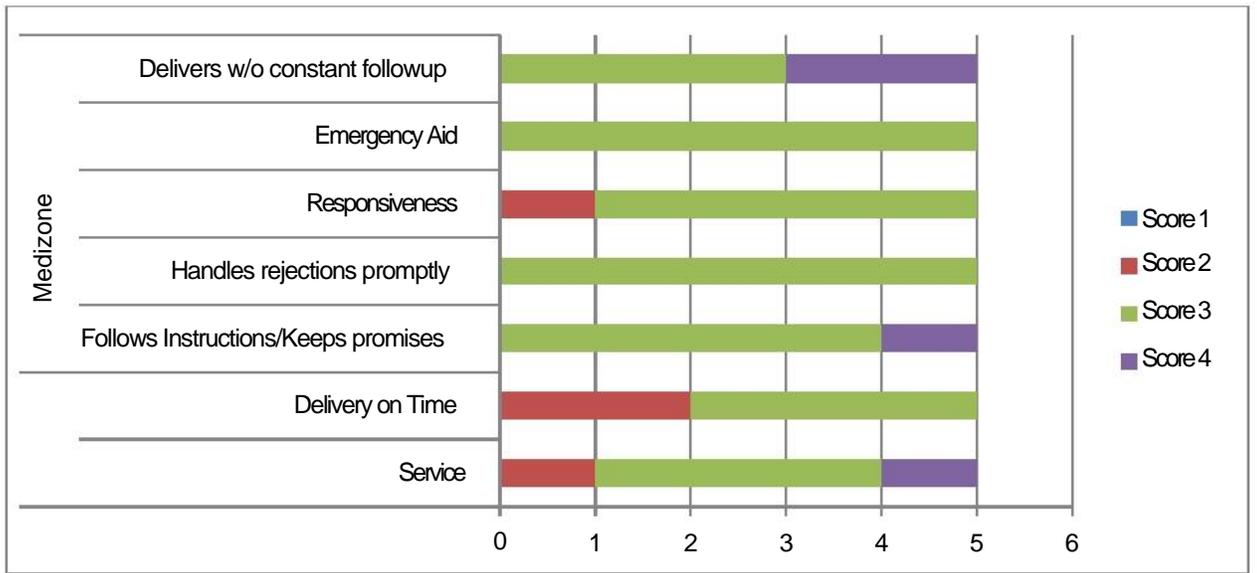


Figure6.5

As per the Findings and Analysis, we can conclude :

- In terms of Service Delivery - Lupin Pharmaceuticals has been rated 90% above average.

This indicated the best practices followed by Lupin Pharmaceuticals in comparison to the other vendors, out of which International Surgicals has a score of 60% below average performance. Also, constant unavailability of supplies with some of the vendors shows its capacity to sustain in fluctuating phases of business.

- In terms of On-Time Delivery - Lupin Pharmaceuticals has been rated 80 to 85% above average in comparison to Dr.Reddys which is 80% below average.

- In concern with keeping promises and following instructions - Dr.Reddys has a score of 605 below average in relations to other vendors.

- When we talk about responsiveness of vendors in case of emergencies and complaints - Dream Surgicals has a dropping score of 80% below average which is an alarming sign.

- Maximum follow-ups for purchase orders being dispatched on a certain date for delivery are made for Dream Surgicals and Dr.Reddys.

- Based on the above figures, its safe to conclude that performance mapping is indeed an efficient tool to analyze our vendors on an ongoing basis in order to increase efficiency.

CONCLUSION

Based on above findings and analysis, we could sum up a few solutions that could possibly help in elevating the system processes., which are as follows-

- Supplier scorecard information can be submitted to the suppliers every 4 weeks detailing quality, delivery, lead time and emergency aid against reestablished goals.
- Written policies and procedures for pharmacy services shall guide all personnel in the performance of their duties. This would bring things in order.
- A comprehensive policy and procedures manual containing information relating to the administrative and financial aspects of pharmacy services as well as to medication related activities should be there.
- Policies and procedures shall be reviewed annually, revised, if necessary, and dated to indicate the time of the last review and/or revision.

Any detected non-compliance with the approved pharmacy related policies and procedures shall be reported to the hospital administrator.
- The pharmacist shall direct the purchasing of all medications within the institution, using professional judgment to ensure all medications are of acceptable quality and quantity.
- The pharmacy and purchase manager shall ensure procedures are in place to obtain emergency supplies of medications, when needed.
- Inventory control procedures should include, but not be limited to: a) the establishment of minimum and maximum stock levels, b) procedures to ensure proper stock rotation, c) accountability for medications as they are removed from stock, d) analysis and interpretation of medication usage trends and their economic impact.

- In case of Rate Contracts, which is made on sales price and not MRP, It can be reviewed on a six month basis along with the terms of trade in question.
- No data of on time deliveries, full deliveries, lead time performance.
- Vendor performance evaluation helps the organization to negotiate lower prices with the supplier based on previous performances.

INSTRUMENTATION

VENDOR PERFORMANCE EVALUATION FORM

VENDOR: _____ **DATE:** _____
ADDRESS: _____ **PREPARED BY:** _____
COMMODITY/SERVICE: _____ **DEPARTMENT:** _____
EXCELLENT (4) GOOD (3) FAIR (2) POOR (1) COMMENTS: _____

Service				
Delivers on Time				
Condition of goods on Arrival				
Follows Instructions				
Number of Rejections				
Handles Rejections promptly				
Handling of Complaints				
Technical Assistance				
Emergency Aid				
Furnishes Specially Requested Information				
Delivers Without Constant Follow-up				
Keeps Promises				
Past Reliability Record				
Technical Ability For Difficult Work				
Personal Preference				
Other ()				
Overall Rating By Using Agency				
Overall Rating By Purchasing				

Instructions:

- 1. Evaluate Vendor on items listed and check the appropriate columns.
Some items may not apply.**
 - 2. Indicate Vendor's overall rating by checking the appropriate column.**
 - 3. If Vendor's overall rating is fair or poor, please explain under "Comments" 4.**
- Return to the Office of Purchasing.**

ANNEXURE2

**APPLICATION FORM FOR "REGISTRATION OF VENDOR"
WITH SHRI HOSPITAL - JAIPUR**

(TO BE SUBMITTED ON VENDOR'S LETTER HEAD)

1. Category of Vendor:

A) Medical/Pharma B) Consignment C) Non-Medical

Note: If others, please specify. _____

2. Name of firm with contact details:

- A) Name of the Firm :
- B) Name of the contact person :
- C) Address :
- D) Contact Numbers :
- E) Fax No.: E-mail :
- F)

3. Contact person / Contact no. (in case of emergency) :

4. Address of service Centre with Cont. No./ E-mail / Fax No.

5. Statuary details (Copy attached, if applicable) :

- A) Drug License. No.
- B) DVAT TIN No.
- C) CST No.
- D) Income Tax PAN
- E) Service Tax Regn. No.
- F) Work Contract Tax Regn. No.
- G) Bank Account Details
- H) Want to Opt for Direct Transfer to Bank Account -
If Yes, Copy of Cancelled Cheque required
If No - Reason -

6. Bank Account Details (not mandatory)

- A) BANK NAME :
- B) BANK ADDRESS :
- C) Bank tel. No. :
- D) Account name
- :E)
- Bank account no
- :F)
- Account type :
- G) Swift code :
- H) Ifs code
- :I)
- Micr code :
- J) Contact person :
- K) E-mail id :

ANNEXURE 3

SHRI HOSPITAL <b style="font-size: 1.2em;">INDENT (for Goods/Service Requisition : For Projects, Medical Equipment and other operational items)																					
Users' Indent No.: _____					Deptt.: _____																
Date: _____																					
NO	ITEM / SERVICE	UNIT	QTY	DETAILED SPECIFICATION	REQUIRED BY PREFERRED		APPROX S	BUDGETED													
	DESCRIPTION				(DATE)	BRAND	COST	YES	NO												
JUSTIFICATION NOTE																					
New Item _____ Repeat Item _____ Status of Old Item _____																					
Emergency Procurement																					
Deptt. Head (Sign) _____			GM Admn (Sign) _____			Purchase Manager(Sign) _____		CEO (Sign) _____													
Name: _____			Name: _____			Name: _____		Name: _____													
ACKNOWLEDGEMENT (by Commercial Department)		Indent Received on :		<table border="1" style="font-size: 0.8em;"> <tr><td> </td><td> </td></tr> <tr><td>Detailed Specifications received</td><td>Yes / No</td></tr> <tr><td>Used time</td><td>feasible / not-feasible</td></tr> <tr><td>repaired by</td><td>attended / not attended</td></tr> <tr><td>requisition</td><td>Yes / No (L/REGISER attached)</td></tr> <tr><td>ADMIN/SERVICER signed by E.D./C.E.</td><td>Yes / No</td></tr> </table>				Detailed Specifications received	Yes / No	Used time	feasible / not-feasible	repaired by	attended / not attended	requisition	Yes / No (L/REGISER attached)	ADMIN/SERVICER signed by E.D./C.E.	Yes / No	By :			
Detailed Specifications received	Yes / No																				
Used time	feasible / not-feasible																				
repaired by	attended / not attended																				
requisition	Yes / No (L/REGISER attached)																				
ADMIN/SERVICER signed by E.D./C.E.	Yes / No																				
		Indent No. (for future ref.) :																			

SHRI HOSPITAL

Requisition Form

(FOR PHARMA ITEM PURCHASE)

1. Request for (Please Tick)

OP Pharmacy	IP Pharmacy	Both Pharmacy
----------------	----------------	------------------

2. Request for Brand / Generic Drug

Please Tick

Whether request is for inclusion of a Particular Brand, for an existing Generic Drug/Implant or Biologic in the Formulary

--

OR

Whether request is for inclusion of a New Generic/ Biologic

--

2. Details of the requested Drug			
a) Generic Detail(Only for Drugs)			
b) Suggested Brand Name c)			
Name of Manufacturer			
d) Use of the suggested Drug			
e) Quantity Required (Mandatory)			
f) Formulations		<u>Syrup</u>	<u>Injection</u>
		Cap/Tab	Ointment
		<u>Implant</u>	<u>Inhaler</u>
g) Justification for inclusion in the Formulary (use additional pages if required)			
3. Other Brand Names available			
4. Other Therapeutic Alternative			
5. Name and Signature of requesting Consultant			
Signature	Name	Date	Time
6. Name and Signature of Head of the Dept.			
Signature	Name	Date	Time
7. Approval of Medical Director/Med.Supt. :			
Signature	Name	Date	Time
Approved For :		Signature of Head Commercial:	
OPPharmacy	IP Pharmacy	Both Pharmacy	
Not approved (Reason thereof):		NAME :	
		DATE :	
		TIME :	

ANNEXURE 8

1.0 Measure Name: (Name of the indicator)
2.0 Description/ Definition: (Write the complete description with the metrics involved)
3.0 Rationale: (Why did you chose this indicator for your department, how does monitoring this data help you, what is the significance of choosing this measure)
4.0 Type of Measure: (Process or an outcome indicator)
5.0 Improvement Noted as: (Increasing or decreasing trend)
6.0 Numerator Statement: (Describe the numerator, exclusions if any)
7.0 Denominator Statement: (Describe the denominator, exclusions if any)
8.0 Working Formula: (Write the complete formula)
9.0 Data Collection Methodology: (How is data collected, mention the sources, source documents)
10.0 Unit of Measure: (Result expressed as %/ minutes/ numbers etc)
11.0 Sample Size: (% of the Total Population)
12.0 Frequency of Data Reporting: (Write monthly reporting)
13.0 Target: (Target you want to achieve)

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