

Ballad Health Quarterly Report

Reporting Period:
July 1 – September 30, 2018

November 20, 2018

via: FedEx and Email

John Dreyzehner, MD, MPH, FACEOM
Commissioner, Tennessee Department of Health
5th Floor Andrew Johnson Tower
710 James Robertson Parkway
Nashville, Tennessee 37243

Dear Commissioner Dreyzehner,

Pursuant to Section 6.04(c) of the Tennessee Terms of Certification, we hereby submit Ballad Health's FY19 First Quarter Report and the COPA Compliance Office FY19 First Quarter Report. These reports cover the timeframe of July 1, 2018 through September 30, 2018 ("Reporting Period").

As always, we welcome any questions or comments that you may have.

Sincerely,



Gary Miller, Senior Vice President Ballad Health
Interim COPA Compliance Officer

CC: M. Norman Oliver, MD, MA
Commissioner, Virginia Department of Health

Cc via email: Jeff Ockerman, Director, Division of Health Planning
Janet Kleinfelter, Deputy Attorney General
Erik Bodin, Director, Office of Licensure and Certification
Allyson Tysinger, Sr. Assistant Attorney General/Chief
Larry Fitzgerald, COPA Monitor
Tim Belisle, General Counsel Ballad Health



Quarterly Report for FY19 1st Quarter

Covering 07/01/2018 – 09/30/2018 (Reporting Period)

Submitted pursuant to the Terms of Certification Governing the Certificate of Public Advantage Issued to Ballad Health Pursuant to the Master Affiliation Agreement and Plan of Integration by and between Wellmont Health System and Mountain State Health Alliance Approved on September 19, 2017 and Issued on January 31, 2018 (TOC) and the Virginia Order and Letter Authorizing a Cooperative Agreement dated October 30, 2017 (CA).

CERTIFICATION OF COMPLIANCE WITH THE TOC AND THE CA

Pursuant to section 6.04(a) of the TOC and Conditions 39 and 40 of the CA, the undersigned hereby certify the following report and its attachments are true and correct to the best of his/her knowledge after due inquiry and are accurate and complete.



Alan Levine
Executive Chairman
Chief Executive Officer
Ballad Health



Lynn Krutak
Executive Vice President
Chief Financial Officer
Ballad Health

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QUARTERLY REPORT

1. **Requirements.** Section 6.04 of the TOC and Condition 40 of the CA require the quarterly submission of the items listed on Exhibit G attached to the TOC. The section of Exhibit G relevant to Quarterly Reports is attached hereto as Attachment 1a. A copy of Condition 40 is attached as Attachment 1b.

2. **Description of Process.** In compiling the information and materials for this Quarterly Report, the Ballad Health COPA Compliance Office (CCO) re-evaluated the departments responsible for gathering and preparing these materials. Leaders of the departments were identified and given responsibility to submit the required materials and information (Responsible Parties). The CCO revised the spreadsheets, as necessary, assigning sections of the TOC and the Conditions of the CA to the appropriate Responsible Parties. The CCO resubmitted the spreadsheets to all Responsible Parties to allow them to certify, to their knowledge and belief after due inquiry, that Ballad Health is in compliance with the requirements of the TOC and CA. In instances where Responsible Parties had questions about the interpretation of the requirements or whether there might be concerns regarding compliance, they could make notes or provide qualifications.

3. **Deliverables.** Deliverables due to the State and the Commonwealth during this Reporting Period were submitted by the required times as are listed below in Table A. As part of the process described above, the Responsible Parties certified to the completion of those submissions.

Table A

ITEM	STATUS	PURSUANT TO TOC AND CA
Health Services Plans	Submitted on 7/30.	TOC 3.02(a-c), 3.06(a-c) CA Conditions 33-36
Capital Plan	Submitted on 7/30.	TOC 3.07(a) & 3.07(b)(i)
Career Development Plan	Submitted on 7/30.	TOC 3.08(c) CA Condition 22
Annual Quality Improvement Priorities	Submitted on 7/30.	CA Condition 12
HIE Plan Outline	Submitted on 7/30.	CA Condition 8
HR/GME Plan Outline	Submitted on 7/30.	CA Condition 24 & 25
Established Population Health Department	Certified on 7/30.	TOC 3.04(c) CA Condition 36
Physician Services Index	Submitted on 8/8.	TOC Addendum 1, Part V
Community Health Needs Assessments Follow-Up	Submitted on 8/20.	As requested based on 8/10/2018 meeting with state officials
Revised Health Services Plans	Submitted on 8/24.	As requested based on 8/10/2018 meeting with state officials
Monthly Quality Report	Submitted on 8/30.	CA Condition 12

Request for exemption of Addendum 1 Part IV	Submitted on 8/27/18. Received response from Tennessee DOH for further information on 9/14/18.	Addendum 1 Part IV
Monthly Quality Reports	Submitted on 9/25.	CA Condition 12
Revised Health Plans	Submitted to Virginia on 9/28.	CA Conditions 33-36

4. Pursuant to § 6.04 of the TOC and Condition 40 of the CA, Ballad Health is pleased to report as follows (using the outline of requirements on Exhibit G):

A. Any revisions to Charity Care Policy – TOC:4.03(e)/CA:14 and 39:

- There were no revisions to the Charity Care Policy during this Reporting Period. Discussions with State are ongoing regarding possible revisions.

B. Report on Population Health and Social Responsibility Committee meetings and member attendance at meetings – TOC:4.04(e), Exhibit G/CA:38

- Summary and attendance sheet, Attachment 2

C. Key Financial Metrics and comparison of performance against the same quarter in the prior year, prior quarter and year to date – TOC:6.04(c)/CA:40

- Balance Sheet, Attachment 3
- Statements of Income, Attachment 4
- Statement of Cash Flow, Attachment 5

D. Year-to-Date Community Benefit Spending: By Category, compared to commitment spending – TOC: Exhibit G

- Progress towards distributing grants – Nothing to report at this time.
- Internal Spending, Attachment 6

E. Quality Metrics reported to CMS – TOC: Exhibit G/CA:12

- Quality Priority Metrics Attachment 7
- Quality Measures by Facility Attachment 8

F. Status of any outstanding Cures, Corrective Actions, or other remedial actions – TOC: Exhibit G/CA:17

- As of the end of this Reporting Period, Ballad Health does not have any outstanding Cures, Corrective Actions, or other remedial actions.

G. Any requirements or commitments outlined in the TOC or in the Index which Ballad Health will not meet or anticipates it will not meet:

- Regarding Quality reporting via Ballad Health website to the public pursuant to Section 4.02(d)(ii) of the TOC and Condition 12 of the CA, Centers for Medicare and Medicaid Services are delayed this quarter in posting the preview report of Hospital Compare data. The Ballad Health Quality Team will post the report to the external website as soon as the data becomes available.
- During this Reporting Period, discussions have continued with the state regarding the application of the 35% rule. Ballad Health utilized employed CVT surgeons to provide call coverage at BRMC. This was deemed necessary to provide the required care for Ballad Health patients.
- Prior to the creation of Ballad Health, both Holston Valley Medical Center (“HVMC”) and Indian Path Medical Center (“IPMC”) offered radiation oncology services in Kingsport, Tennessee. In September, the independent group providing radiation oncology services at IPMC notified Ballad Health that it no longer intended to offer these services at this location. Ballad Health was not involved in the independent group’s decision to terminate radiation oncology services at IPMC and was therefore unable to provide the Department with prior notice of this development. However, the independent oncology group’s decision has effectively eliminated a component of a Service Line at Indian Path Medical Center (recently renamed Indian Path Community Hospital). Ballad Health anticipates that radiation oncology services will continue to be offered in the Kingsport market by other independent radiation oncologists – just not at the IPMC location.

H. Closures/Opening:

- Plans: Update on plans to close or open any Service Lines or facilities.
 - Surgical Service Lines Alignment: Per TOC Article 4.03(c)(ii) consolidation of surgery services at IPMC and HVMC are permitted without notice to and approval of the Department. It is anticipated that during the 2nd Quarter, the Orthopedic and Neurosurgical service lines at IPMC will be moved to HVMC which has ample capacity to accommodate the volume.
- Progress: Update on the status of any closures or openings of facilities or Service Lines.
 - IPMC Cardiac Catheterization Laboratory Closure: The catheterization laboratory went on diversion beginning 8/31 due to staffing shortages and patients needing this service have been directed to HVMC which has ample capacity. Emergency Medical Services agencies have been made aware of the unavailability of interventional cardiology services at IPMC. Ballad Health received a letter of approval, dated 9/20 from the Tennessee Department of Health to permanently close the cardiac catheterization laboratory at IPMC.

5. Quality reporting via Ballad Health website to the public pursuant to Section 4.02(d)(ii) of the TOC and Condition 12 of the CA:
 - Centers for Medicare and Medicaid Services are delayed this quarter in posting the preview report of Hospital Compare data. The Ballad Health Quality Team will post the report to the external website as soon as the data becomes available.

ATTACHMENT 1

QUARTERLY REPORT CONTENTS

- TOC, Exhibit G, Page 3 – 1a
- CA, Condition 40 – 1b

TOC, Exhibit G, Page 3

The Department reserves the right to change these quarterly reporting requirements upon adequate notice.

- Any revisions to Charity Care Policy; Section 4.03(e).
- Report of Population Health and Social Responsibility Committee meetings and member attendance at meeting; Section 4.04(e).
- Key Financial Metrics (comparing each to same quarter in prior year and the quarter prior to the quarter in question); Section 6.04(c).
 - o Balance sheet
 - o Statements of income and cash flow
- YTD Community Benefit Spending
 - o By Category, compared to commitment spending
 - Progress towards distributing grants
 - Internal spending
- Quality Metrics reported to CMS
- Once, within thirty (30) days of the Issue Date: a List of Ancillary and Post-Acute Services offered by competitors (with respect to each COPA Hospital); Section 5.04(a).
 - o Includes but is not limited to: SNF; home health providers; diagnostic service providers; imaging centers; ambulatory surgery centers; physicians and other providers; etc.
 - o Include at least three competitors for each category of service.
- Compliance Office Quarterly Reports
 - o Complaints by type
 - o Resolution of complaints
- Status of any outstanding Cures, Corrective Actions, or other remedial actions.
- Any requirements or commitments outlined in the Terms of Certification or in the Index which the New Health System is not meeting or anticipates it will not meet
- Closures / Openings
 - o Plans. Update on plans to close or open any Service Lines or facilities.
 - o Progress. Update on the status of any closures or openings of facilities or Service Lines.

CA, Condition 40

The New Health System shall provide information on a quarterly basis of the key financial metrics and the balance sheet comparing performance to the similar prior year period and year to date. This information shall be provided on the same timetable as what is publicly reported through Electronic Municipal Market Access.

ATTACHMENT 2

POPULATION HEALTH AND SOCIAL RESPONSIBILITY COMMITTEE MEETING SUMMARY

BALLAD HEALTH COMMUNITY BENEFIT & POPULATION HEALTH COMMITTEE
EXECUTIVE SUMMARY FROM UNAPPROVED MINUTES
 BALLAD HEALTH EXECUTIVE BOARDROOM
 September 20, 2018

Members:									
P	Barbara Allen	P	Sue Cantrell	P	Marvin Eichorn	P	Rachel Fowlkes	A	Joanne Gilmer
P	Tony Keck	P	Martin Kent	A	Steve Kilgore	P	Alan Levine	P	Matt Luff
A	Gary Miller	A	Rick Moulton	P	Roger Mowen	P	Todd Norris	A	Donnie Ratliff
A	Scott Richards	P	Allison Rogers	P	Suzanne Rollins	P	Doug Springer, Chair	P	Randy Wykoff
Staff:									
P	Andy Hall	P	Cathi Snodgrass	A	Jan Ponder	P	Melanie Stanton	P	Jerry Blackwell
P	Taylor Hamilton	A	Eric Deaton	P	Lynn Krutak	P	Linda Edwards	P	Tim Belisle
P	Bo Wilkes								
Guests:									

P = Present, P* = Via Phone, A = Absent

TOPIC	DISCUSSION	ACTION/APPROVAL
CALL TO ORDER	The meeting was called to order at 4:08 pm.	Dr. Doug Springer
A. DECLARATION		
1. Quorum		Dr. Doug Springer declared a quorum with 14 members present. Mr. Levine and Mr. Eichorn were in attendance as required.
2. Conflict(s) of Interest		Dr. Doug Springer declared no conflicts of interest.

<p>B. Consent Agenda</p>	<p>Dr. Doug Springer asked if there were any questions, comments or corrections to the Community Benefit and Population Health June 21, 2018 meeting minutes.</p>	<p>ACTION: <i>Approve June 21, 2018 minutes.</i></p> <p>APPROVAL: Approved</p>
<p>C. Action Items</p>		
<p>1. COPA Plans for Ratification</p>	<p>Mr. Tony Keck walked through the draft COPA plans. The process itself allowed the State 30 days to review and Ballad 30 days to respond. The plans submitted received positive feedback from the State of Tennessee.</p> <p>Mr. Keck also addressed the response from the Commonwealth of Virginia and stated we are very close to being finalized with Virginia.</p> <p>The recommendation to the committee is to ratify the plans prior to the Board meeting.</p>	<p>ACTION 1: <i>Approve COPA Plans for Ratification with the provision of notifying the committee of any significant changes.</i></p> <p>APPROVAL: Approved</p>
<p>D. Reports/Education/Discussion</p>		
<p>1. Value-Based Contracts and Dashboard Review</p>	<p>Ms. Allison Rogers started by referencing the in-depth education session that was held in May around the concept behind the value-based contracts. At that time we shared the dashboard that legacy Mountain States to track contracts that we have, the range of upsides and downsides, and the revenue obtained from them. Since the educational session, time has been spent trying to dig into the legacy Wellmont side and see what that looks like so we could develop a true Ballad value-based scorecard.</p> <p>Ms. Rogers reviewed the dashboard with the committee. She discussed the complexity of the budgeting aspect of value-based contracts. The challenge of forecasting and making assumptions for patients with a certain insurance is becoming harder to predict. We have not historically included this in our budgeting. Mr. Tony Keck mentioned that we are</p>	<p>Ms. Allison Rogers</p>

	<p>working towards a new contract management system that allow contractual obligations input and more real time measures.</p> <p>Mr. Keck discussed the education that has been provided to physicians in the community. Dr. Jerry Blackwell added that the physician community is also watching due to legislative reasons, regulations and the complexity of the matter.</p> <p>Ms. Rogers touched on our work with our own team members using Ballard as an example, our completion of all team members HRA, and our team member diabetic program.</p>	
2. CHNA Implementation Status & Plan for Approval	<p>Ms. Rogers did a follow-up on the Community Health Needs Assessment. We approved the CHNA assessments for legacy Mountain States. The other component is the implementation strategies. Those are being developed and worked on with the Community Health team. We do have an IRS timeline that we have to follow. The IRS due date for publication is November 15, 2018. We plan to make sure these plans align with our population health plans and working towards a unified community approach to community needs.</p>	Ms. Allison Rogers
3. Contributions Update	<p>Ms. Allison Rogers reviewed the charitable care contributions for the first quarter. Ms. Taylor Hamilton's group is working on a high-level dashboard to track where contributions are being given, how the contributions are being used, and whether it is a contribution or sponsorship.</p>	Ms. Allison Rogers
ADJOURN	<p>Dr. Springer adjourned the meeting at 6:06 p.m.</p>	Dr. Doug Springer

Tim Belisle, Board Secretary

ATTACHMENT 3

BALANCE SHEET

**Ballad Health
Comparative Balance Sheet
TN COPA Requirements**

	30-Sep 2018	30-Jun 2018	Quarter Activity	30-Sep 2017	Year Activity
ASSETS					
CURRENT ASSETS					
Cash and Cash Equivalents	94,158,649	86,843,707	7,314,942	126,663,181	(32,504,532)
Current Portion AWUIL	1,851,397	8,526,640	(6,675,243)	4,248,628	(2,397,231)
Accounts Receivable (Net)	290,989,642	288,085,728	2,903,914	291,946,149	(956,507)
Other Receivables	29,406,416	34,965,462	(5,559,046)	31,514,989	(2,108,573)
Due From Affiliates	6,951,242	1,322,174	5,629,068	1,082,854	5,868,388
Due From Third Party Payors	0	(0)	0	0	(0)
Inventories	47,645,372	48,439,110	(793,738)	48,544,020	(898,648)
Prepaid Expense	19,964,876	17,359,164	2,605,712	25,791,671	(5,826,795)
	<u>490,967,595</u>	<u>485,541,985</u>	<u>5,425,610</u>	<u>529,791,492</u>	<u>(38,823,897)</u>
ASSETS WHOSE USE IS LIMITED	<u>58,941,660</u>	<u>59,143,475</u>	<u>(201,815)</u>	<u>54,600,238</u>	<u>4,341,422</u>
OTHER INVESTMENTS	<u>1,218,028,886</u>	<u>1,203,943,419</u>	<u>14,085,467</u>	<u>1,166,232,374</u>	<u>51,796,512</u>
PROPERTY, PLANT AND EQUIPMENT					
Land, Buildings and Equipment	3,119,176,833	3,080,374,780	38,802,053	3,108,398,317	10,778,516
Less Allowances for Depreciation	1,835,709,494	1,801,223,387	34,486,107	1,791,543,253	44,166,241
	<u>1,283,467,340</u>	<u>1,279,151,393</u>	<u>4,315,946</u>	<u>1,316,855,064</u>	<u>(33,387,725)</u>
OTHER ASSETS					
Pledges Receivable	621,292	824,392	(203,100)	1,365,953	(744,661)
Long Term Compensation Investment	32,544,692	32,211,612	333,080	31,021,368	1,523,324
Investments in Unconsolidated Subsidiaries	17,508,708	17,562,549	(53,841)	17,179,854	328,854
Land / Equipment Held for Resale	6,646,369	6,646,369	0	6,646,369	0
Assets Held for Expansion	11,268,702	11,361,384	(92,682)	11,361,384	(92,682)
Investments in Subsidiaries	0	(0)	0	0	(0)
Goodwill	209,528,550	209,602,215	(73,665)	209,935,114	(406,564)
Deferred Charges and Other	9,873,877	12,329,037	(2,455,160)	10,215,719	(341,842)
	<u>287,992,190</u>	<u>290,537,558</u>	<u>(2,545,368)</u>	<u>287,725,761</u>	<u>266,429</u>
TOTAL ASSETS	<u>3,339,397,670</u>	<u>3,318,317,830</u>	<u>21,079,840</u>	<u>3,355,204,929</u>	<u>(15,807,259)</u>
LIABILITIES AND NET ASSETS					
CURRENT LIABILITIES					
Accounts Payable and Accrued Expense	148,352,479	138,767,994	9,584,486	144,550,945	3,801,535
Accrued Salaries, Benefits, and PTO	95,131,310	105,687,610	(10,556,300)	105,767,317	(10,636,007)
Claims Payable	1,953,448	1,953,448	0	1,896,224	57,224
Accrued Interest	9,505,257	9,486,141	19,116	9,372,101	133,156
Due to Affiliates	0	0	0	0	0
Due to Third Party Payors	14,897,316	14,608,326	288,990	18,496,060	(3,598,744)
Call Option Liability	0	0	0	0	0
Current Portion of Long Term Debt	28,092,947	14,036,863	14,056,085	45,756,214	(17,663,267)
	<u>297,932,757</u>	<u>284,540,380</u>	<u>13,392,377</u>	<u>325,838,860</u>	<u>(27,906,103)</u>
OTHER NON CURRENT LIABILITIES					
Long Term Compensation Payable	16,651,270	16,318,189	333,080	15,838,412	812,857
Long Term Debt	1,321,809,408	1,341,728,650	(19,919,242)	1,314,374,025	7,435,383
Estimated Fair Value of Interest Rate Swaps	8,232,986	8,949,730	(716,744)	10,627,861	(2,394,875)
Deferred Income	8,194,706	6,819,324	1,375,382	9,848,600	(1,653,894)
Professional Liability Self-Insurance and Other	58,571,693	56,474,925	2,096,768	57,562,368	1,009,326
	<u>1,413,460,063</u>	<u>1,430,290,820</u>	<u>(16,830,756)</u>	<u>1,408,251,266</u>	<u>5,208,797</u>
TOTAL LIABILITIES	<u>1,711,392,820</u>	<u>1,714,831,200</u>	<u>(3,438,380)</u>	<u>1,734,090,127</u>	<u>(22,697,306)</u>
NET ASSETS					
Restricted Net Assets	21,548,865	20,612,107	936,759	22,913,049	(1,364,183)
Unrestricted Net Assets	1,359,339,736	1,341,069,857	18,269,879	1,371,529,734	(12,189,997)
Noncontrolling Interests in Subsidiaries	247,116,248	241,804,666	5,311,582	226,672,020	20,444,228
	<u>1,628,004,850</u>	<u>1,603,486,630</u>	<u>24,518,220</u>	<u>1,621,114,803</u>	<u>6,890,047</u>
TOTAL LIABILITIES AND NET ASSETS	<u>3,339,397,670</u>	<u>3,318,317,830</u>	<u>21,079,840</u>	<u>3,355,204,929</u>	<u>(15,807,259)</u>

**Ballad Health
Comparative Balance Sheet
VA COPA Requirements**

	30-Sep 2018	30-Sep 2017	Year Activity	Year to Date 2018
ASSETS				
CURRENT ASSETS				
Cash and Cash Equivalents	94,158,649	126,663,181	(32,504,532)	94,158,649
Current Portion AWUIL	1,851,397	4,248,628	(2,397,231)	1,851,397
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Other Receivables	29,406,416	31,514,989	(2,108,573)	29,406,416
Due From Affiliates	6,951,242	1,082,854	5,868,388	6,951,242
Due From Third Party Payors	0	0	(0)	0
Inventories	47,645,372	48,544,020	(898,648)	47,645,372
Prepaid Expense	19,964,876	25,791,671	(5,826,795)	19,964,876
	<u>490,967,595</u>	<u>529,791,492</u>	<u>(38,823,897)</u>	<u>490,967,595</u>
ASSETS WHOSE USE IS LIMITED	<u>58,941,660</u>	<u>54,600,238</u>	<u>4,341,422</u>	<u>58,941,660</u>
OTHER INVESTMENTS	<u>1,218,028,886</u>	<u>1,166,232,374</u>	<u>51,796,512</u>	<u>1,218,028,886</u>
PROPERTY, PLANT AND EQUIPMENT				
Land, Buildings and Equipment	3,119,176,833	3,108,398,317	10,778,516	3,119,176,833
Less Allowances for Depreciation	1,835,709,494	1,791,543,253	44,166,241	1,835,709,494
	<u>1,283,467,340</u>	<u>1,316,855,064</u>	<u>(33,387,725)</u>	<u>1,283,467,340</u>
OTHER ASSETS				
Pledges Receivable	621,292	1,365,953	(744,661)	621,292
Long Term Compensation Investment	32,544,692	31,021,368	1,523,324	32,544,692
Investments in Unconsolidated Subsidiaries	17,508,708	17,179,854	328,854	17,508,708
Land / Equipment Held for Resale	6,646,369	6,646,369	0	6,646,369
Assets Held for Expansion	11,268,702	11,361,384	(92,682)	11,268,702
Investments in Subsidiaries	0	0	(0)	0
Goodwill	209,528,550	209,935,114	(406,564)	209,528,550
Deferred Charges and Other	9,873,877	10,215,719	(341,842)	9,873,877
	<u>287,992,190</u>	<u>287,725,761</u>	<u>266,429</u>	<u>287,992,190</u>
TOTAL ASSETS	<u>3,339,397,670</u>	<u>3,355,204,929</u>	<u>(15,807,259)</u>	<u>3,339,397,670</u>
LIABILITIES AND NET ASSETS				
CURRENT LIABILITIES				
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Accrued Salaries, Benefits, and PTO	95,131,310	105,767,317	(10,636,007)	95,131,310
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Accrued Interest	9,505,257	9,372,101	133,156	9,505,257
Due to Affiliates	0	0	0	0
Due to Third Party Payors	14,897,316	18,496,060	(3,598,744)	14,897,316
Call Option Liability	0	0	0	0
Current Portion of Long Term Debt	28,092,947	45,756,214	(17,663,267)	28,092,947
	<u>297,932,757</u>	<u>325,838,860</u>	<u>(27,906,103)</u>	<u>297,932,757</u>
OTHER NON CURRENT LIABILITIES				
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Long Term Debt	1,321,809,408	1,314,374,025	7,435,383	1,321,809,408
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Deferred Income	8,194,706	9,848,600	(1,653,894)	8,194,706
Professional Liability Self-Insurance and Other	58,571,693	57,562,368	1,009,326	58,571,693
	<u>1,413,460,063</u>	<u>1,408,251,266</u>	<u>5,208,797</u>	<u>1,413,460,063</u>
TOTAL LIABILITIES	<u>1,711,392,820</u>	<u>1,734,090,127</u>	<u>(22,697,306)</u>	<u>1,711,392,820</u>
NET ASSETS				
Restricted Net Assets	21,548,865	22,913,049	(1,364,183)	21,548,865
Unrestricted Net Assets	1,359,339,736	1,371,529,734	(12,189,997)	1,359,339,736
Noncontrolling Interests in Subsidiaries	247,116,248	226,672,020	20,444,228	247,116,248
	<u>1,628,004,850</u>	<u>1,621,114,803</u>	<u>6,890,047</u>	<u>1,628,004,850</u>
TOTAL LIABILITIES AND NET ASSETS	<u>3,339,397,670</u>	<u>3,355,204,929</u>	<u>(15,807,259)</u>	<u>3,339,397,670</u>

ATTACHMENT 4

STATEMENT OF INCOME

Ballad Health
Statement of Revenue and Expense
As of September 30, 2018 and September 30, 2017

TN COPA Requirements

	Quarter 1 Sep-18	Quarter 4 Jun-18	Quarter 1 Sep-17
Revenue, Gains and Support			
Patient service revenue, net of contractual allowances and discount	545,208,604	543,833,140	542,179,148
Provision for bad debts	(39,093,911)	(35,541,555)	(44,951,689)
Net patient service revenue	506,114,693	508,291,586	497,227,459
Other operating revenue	13,689,986	20,350,178	12,515,694
TOTAL REVENUE, GAINS AND SUPPORT	519,804,679	528,641,764	509,743,153
Expenses:			
Salaries and wages	197,124,930	194,522,925	195,699,608
Physician salaries and wages	23,297,706	22,872,615	21,960,042
Contract Labor	8,572,128	11,855,188	10,839,607
Employee Benefits	38,138,418	43,329,111	37,181,657
Fees	55,094,370	61,235,135	53,591,966
Supplies	102,507,673	102,536,795	98,738,472
Utilities	8,639,293	7,488,982	8,587,245
Medical Costs	0	0	0
Other Expense	37,974,771	28,580,693	39,236,015
Depreciation	35,071,359	32,569,999	33,741,563
Amortization	978,289	507,730	435,632
Interest & Taxes	12,595,532	12,823,320	12,389,824
TOTAL EXPENSES	519,994,468	518,322,494	512,401,630
OPERATING INCOME	(189,789)	10,319,269	(2,658,477)
Nonoperating gains (losses):			
Interest and dividend income	5,020,378	8,243,589	4,089,697
Net realized gains (losses) on the sale of securities	3,742,936	5,352,039	3,377,298
Change in net unrealized gains on securities	14,756,285	227,615	24,904,226
Derivative related income	884,290	744,616	658,536
Loss on extinguishment of LTD / derivatives	0	(23,002,460)	(429,984)
Change in estimated fair value of derivatives	620,979	8,385,715	(989,694)
Gain (loss) on discontinued operations	0	0	0
Other nonoperating gains (losses)	(202,624)	(8,725,204)	(5,011,346)
Noncontrolling interests in subsidiaries	(5,321,181)	(7,219,244)	(5,023,309)
NET NONOPERATING GAINS	19,501,063	(15,993,335)	21,575,424
EXCESS OF REVENUE, GAINS AND SUPPORT OVER EXPENSES AND LOSSES	19,311,274	(5,674,066)	18,916,947
EBITDA	52,579,189	54,616,115	41,999,417

Ballad Health
Statement of Revenue and Expense
As of September 30, 2018 and September 30, 2017

VA COPA Requirements

	Quarter 1 Sep-18	Quarter 1 Sep-17	Year to Date Sep-18
Revenue, Gains and Support			
Patient service revenue, net of contractual allowances and discount	545,208,604	542,179,148	545,208,604
Provision for bad debts	(39,093,911)	(44,951,689)	(39,093,911)
Net patient service revenue	506,114,693	497,227,459	506,114,693
Other operating revenue	13,689,986	12,515,694	13,689,986
TOTAL REVENUE, GAINS AND SUPPORT	519,804,679	509,743,153	519,804,679
Expenses:			
Salaries and wages	197,124,930	195,699,608	197,124,930
Physician salaries and wages	23,297,706	21,960,042	23,297,706
Contract Labor	8,572,128	10,839,607	8,572,128
Employee Benefits	38,138,418	37,181,657	38,138,418
Fees	55,094,370	53,591,966	55,094,370
Supplies	102,507,673	98,738,472	102,507,673
Utilities	8,639,293	8,587,245	8,639,293
Medical Costs	0	0	0
Other Expense	37,974,771	39,236,015	37,974,771
Depreciation	35,071,359	33,741,563	35,071,359
Amortization	978,289	435,632	978,289
Interest & Taxes	12,595,532	12,389,824	12,595,532
TOTAL EXPENSES	519,994,468	512,401,630	519,994,468
OPERATING INCOME	(189,789)	(2,658,477)	(189,789)
Nonoperating gains (losses):			
Interest and dividend income	5,020,378	4,089,697	5,020,378
Net realized gains (losses) on the sale of securities	3,742,936	3,377,298	3,742,936
Change in net unrealized gains on securities	14,756,285	24,904,226	14,756,285
Derivative related income	884,290	658,536	884,290
Loss on extinguishment of LTD / derivatives	0	(429,984)	0
Change in estimated fair value of derivatives	620,979	(989,694)	620,979
Gain (loss) on discontinued operations	0	0	0
Other nonoperating gains (losses)	(202,624)	(5,011,346)	(202,624)
Noncontrolling interests in subsidiaries	(5,321,181)	(5,023,309)	(5,321,181)
NET NONOPERATING GAINS	19,501,063	21,575,424	19,501,063
EXCESS OF REVENUE, GAINS AND SUPPORT OVER EXPENSES AND LOSSES	19,311,274	18,916,947	19,311,274
EBITDA	52,579,189	41,999,417	52,579,189

ATTACHMENT 5

STATEMENT OF CASH FLOW

Ballad Health
Statement of Cash Flows
As of September 30, 2018 and September 30, 2017

	Quarter 1 Sep-18	Quarter 4 Jun-18	Quarter 1 Sep-17
<u>CASH FLOWS FROM OPERATING ACTIVITIES</u>			
Increase / (Decrease) in Unrestricted Net Assets	19,206,638	(3,744,198)	19,422,872
<u>Adjustments to Reconcile Increase in Net Assets to Net Cash Provided by Operating Activities</u>			
Provision for Depreciation	35,071,359	32,569,999	33,741,563
Provision for Amortization	978,289	507,730	435,632
Net Realized (Gain) / Loss on Sales of Securities	(3,742,936)	(5,352,039)	(3,377,298)
Net Loss on Early Extinguishment of Debt	0	23,002,460	429,984
Change in Estimated Fair Value of Derivatives	(620,979)	(8,385,715)	989,694
Equity in Net Income of Joint Ventures	(500,022)	(376,898)	(465,932)
(Gain) / Loss on Sale of Assets Held for Resale and Dispo	(51,209)	(27,794)	217,466
Net Amounts Received on Interest Rate Swap Settlements	(2,888,497)	(3,361,710)	(3,930,773)
Minority Interest in Consolidated Subsidiaries Income	5,311,582	6,721,962	4,905,789
Change in Net Unrealized Gains on Investments	(14,756,285)	(227,615)	(24,904,226)
Increase / (Decrease) in Cash due to Change in:			
Net Patient Accounts Receivable	(2,903,914)	2,733,863	(16,562,600)
Other Receivables (Net)	5,559,046	(4,620,299)	4,337,789
Inventories and Prepaid Expenses	(1,811,974)	6,355,865	(4,598,266)
Other Assets	2,325,179	(2,304,468)	(2,012,691)
Accrued Interest Payable (incl Capital Appreciation Bc	19,116	(77,107)	(7,893,230)
Accounts Payable and Accrued Expenses	3,955,418	(7,507,862)	(9,512,328)
Accrued Salaries, Compensated Absences, and Amou	(10,556,300)	(106,230)	(2,098,525)
Estimated Amounts due from/to Third Party Payors (N	288,991	(7,132,854)	(192,514)
Other Long-Term Liabilities	1,708,462	(5,161,119)	2,062,049
Professional Liability Self Insurance and Other	2,096,768	(14,092,193)	1,699,886

Ballad Health
Statement of Cash Flows
As of September 30, 2018 and September 30, 2017

	Quarter 1 Sep-18	Quarter 4 Jun-18	Quarter 1 Sep-17
Total Adjustments	19,482,093	13,157,976	(26,728,534)
Net Cash Provided by Operating Activities	38,688,731	9,413,778	(7,305,662)
<u>CASH FLOWS FROM INVESTING ACTIVITIES</u>			
Purchases of Property, Plant, and Equipment, Property Held for Resale, and Property Held for Expansion (Net)	(39,294,623)	(43,263,562)	(22,689,809)
Additions to Goodwill	73,665	110,699	63,815
Purchases of Investments (Net)	3,944,772	(26,217,467)	671,943
Net Decrease / (Increase) in Assets Limited as to Use	6,877,057	1,068,382	24,063,961
Net Cash Used in Investing Activities	(28,399,128)	(68,301,948)	2,109,910
<u>CASH FLOWS FROM FINANCING ACTIVITIES</u>			
Payments on Long-Term Debt and Capital Lease Obligations (incl Deposits to Escrow)	(5,863,157)	2,507,990	(38,055,497)
Net Amounts Received on Interest Rate Swap Settlements	2,888,497	3,361,710	3,930,773
Net Cash Used in Financing Activities	(2,974,660)	5,869,700	(34,124,723)
<u>NET INCREASE / (DECREASE) IN CASH AND CASH EQUIV</u>	7,314,943	(53,018,470)	(39,320,475)
<u>CASH AND CASH EQUIVALENTS - BEG OF PERIOD</u>	86,843,707	139,862,177	165,983,656
<u>CASH AND CASH EQUIVALENTS - END OF PERIOD</u>	94,158,649	86,843,707	126,663,180

ATTACHMENT 6

YEAR-TO-DATE COMMUNITY BENEFIT INTERNAL SPENDING

Ballad Health Community Benefit Spending

FY19 YTD through September 30, 2018

**Estimated based on available information*

	TOTAL
990, line 7:	
a. Financial assistance (charity)	9,686,702
b. Medicaid and TennCare	12,727,063
c. Other means-tested gov't programs (TennCare included in line 7b)	-
e. Community health improvements	2,459,736
f. Health professions education	6,321,629
g. Subsidized health services	2,935,983
h. Research	51,359
i. Cash and in-kind contributions	248,493
	34,430,965

ATTACHMENT 7

QUALITY METRICS

	Ballad Health		
	FY18	Jul-18	Aug-18
Quality Target Measures			
↓ Pressure Ulcer Rate	1.12	1.14	0.69
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.05	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284
↓ SSI COLON Surgical Site Infection	1.910	10.140	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395
Quality Priority Metrics			
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42
↓ Sepsis In House Mortality	0.07	0.09	0.09
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12
↓ Left Without Being Seen	0.74%	1.23%	0.89%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934
↑ COMM WITH NURSES	77.8%	0.801	0.811
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804

	Ballad Health			Bristol Regional Medical Center		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	2.28	2.33	2.31
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.07	0.85	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.16	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	4.54	7.69	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	10.80	9.52	13.33
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	2.43	7.30	6.19
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	1.25	0.00	4.59
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.756	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.784	0.707	1.566
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	0.000	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.219	0.311	0.469
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.493	0.311	0.156
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	45.0	36.9	27.4
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	41.6	34.3	28.8
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.11	0.12	0.04
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	40.3%	22.2%	46.2%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	1.81	0.99	1.04
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.16	0.15	0.13
↓ Left Without Being Seen	0.74%	1.23%	0.89%	1.00%	0.81%	0.93%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	151	150	126.8
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	284	275	288
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	67.2%	58.7%	68.3%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	89.7%	90.4%	82.7%
↑ COMM WITH NURSES	77.8%	0.801	0.811	85.4%	85.2%	89.4%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	83.0%	81.3%	87.8%



	Ballad Health			Johnston Memorial Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.15	2.10	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.17	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.89	0.00	0.21
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	13.89	0.00	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	4.84	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.00	0.00	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	1.608
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	4.167	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.244	0.000	0.390
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.325	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	41.7	42.9	28.3
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	41.7	36.2	39.9
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.10	0.14	--
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	54.9%	45.5%	58.3%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.87	0.95	1.00
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.15	0.17	0.14
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.20%	0.31%	0.10%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	137.5	135	140
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	60.5	253	235
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	60.2%	64.0%	58.5%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	87.0%	83.0%	84.6%
↑ COMM WITH NURSES	77.8%	0.801	0.811	76.9%	83.3%	76.1%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	78.7%	81.9%	78.9%



	Ballad Health			Russell County Medical Center		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.00	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.00	--	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	0.00	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	375.00	--	0.00
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	250.00	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	--	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.00	0.00	0.00
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	4.762	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.137	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	25.2	18.9	14.6
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	2.5	--	--
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.07	0.00	0.08
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	75.0%	66.7%	66.7%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.30	0.25	0.22
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.14	0.13	0.12
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.26%	1.29%	0.56%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	106	106	106
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	189.25	176.5	158
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	64.5%	70.0%	100.0%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	82.3%	81.8%	100.0%
↑ COMM WITH NURSES	77.8%	0.801	0.811	89.6%	90.2%	75.0%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	88.3%	69.0%	25.0%



	Ballad Health			Smyth County Community Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.00	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	0.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.00	0.00	0.00
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	0.000	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.317	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	56.3	56.4	65.3
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	10.1	1.5	19.3
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.03	0.06	0.00
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	79.7%	100.0%	60.0%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.78	0.88	0.75
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.14	0.17	0.14
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.33%	--	0.43%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	106.75	117	96.5
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	175	--	195.5
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	66.3%	71.1%	76.5%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	88.8%	96.4%	93.5%
↑ COMM WITH NURSES	77.8%	0.801	0.811	85.9%	84.0%	84.2%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	88.1%	87.1%	83.3%



	Ballad Health			Dickenson County Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	--	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	--	--	--
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	--	0.00	0.00
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.05	0.00	0.00	--	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	0.00	13.33	6.19
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	--	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	--	--	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	--	--	--
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	--	--	--
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.386	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	--	--	--
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	--	--	--
↓ Sepsis In House Mortality	0.07	0.09	0.09	--	--	0.00
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	--	--	--
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	--	--	--
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	--	--	--
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.81%	0.36%	0.52%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	103	105	112
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	136	347.5	229
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	100.0%	--	--
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	100.0%	--	--
↑ COMM WITH NURSES	77.8%	0.801	0.811	57.1%	--	--
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	100.0%	--	--



	Ballad Health			Hancock County Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.00	0.00	--
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	--	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	--	--	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDI/F facility-wide inhouse surveillance	0.630	0.423	0.395	0.000	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	143.9	137.9	133.9
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	72.1	43.1	205.4
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.00	0.00	0.00
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	77.8%	100.0%	0.0%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.79	0.07	0.10
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.20	0.19	0.17
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.53%	0.91%	0.76%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	128	121	126
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	--	--	--
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	88.9%	75.0%	50.0%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	86.2%	83.3%	--
↑ COMM WITH NURSES	77.8%	0.801	0.811	92.4%	100.0%	--
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	86.8%	100.0%	--



	Ballad Health			Hawkins County Memorial Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.00	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.00	0.00	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	0.00	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	0.00	0.00	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	0.00	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	12.99	0.00	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.000	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	135.9	135.6	102.8
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	74.5	109.0	62.7
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.03	0.09	0.00
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	46.0%	75.0%	60.0%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	1.58	0.87	0.90
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.12	0.12	0.11
↓ Left Without Being Seen	0.74%	1.23%	0.89%	2.24%	0.00%	0.49%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	91	68	82.5
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	215	257	202
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	70.2%	83.3%	90.0%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	87.3%	86.7%	80.0%
↑ COMM WITH NURSES	77.8%	0.801	0.811	83.5%	81.5%	86.7%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	79.8%	88.5%	80.0%



	Ballad Health			Holston Valley Medical Center		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	3.21	3.23	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.48	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.09	0.00	0.00
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.92	0.00	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.31	0.00	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	6.40	10.42	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	3.77	6.24	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	3.57	4.02	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	1.70	0.00	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	1.59	0.00	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.431	1.152	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	2.500	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.891	0.398	0.705
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	37.6	41.9	34.2
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	84.8	84.5	70.8
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.13	0.13	0.11
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	30.7%	53.8%	35.7%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	2.15	1.22	1.13
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.18	0.15	0.15
↓ Left Without Being Seen	0.74%	1.23%	0.89%	2.01%	3.03%	1.31%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	175	129	151
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	434	320.5	446
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	66.9%	59.5%	70.4%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	90.3%	86.6%	88.4%
↑ COMM WITH NURSES	77.8%	0.801	0.811	81.3%	80.5%	82.8%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	81.0%	80.2%	81.3%



	Ballad Health			Indian Path Medical Center		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.25	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	7.61	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	4.23	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	10.08	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.00	0.00	0.00
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.898	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	6.349	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.135	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.359	0.000	0.732
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	33.6	45.6	31.9
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	49.2	48.9	52.6
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.07	0.05	0.04
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	70.5%	88.9%	62.5%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	1.06	0.98	0.84
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.09	0.12	0.08
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.94%	1.43%	1.14%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	130	127	134
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	102	221	223.5
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	63.8%	64.3%	59.1%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	87.1%	88.6%	83.1%
↑ COMM WITH NURSES	77.8%	0.801	0.811	80.1%	80.6%	84.2%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	82.8%	73.6%	83.9%



	Ballad Health			Lonesome Pine Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	1.79	0.00	18.52
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.00	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.00	0.00	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	0.00	0.00	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	0.00	0.00	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	0.00	0.00	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.00	0.00	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.000	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	125.0	65.9	122.0
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	36.0	80.5	40.7
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.04	0.09	0.06
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	41.8%	50.0%	53.3%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	1.40	0.69	0.78
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.12	0.14	0.13
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.31%	0.13%	0.25%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	117	114.25	126.5
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	244	223.5	240
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	75.6%	75.0%	70.0%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	85.8%	85.0%	85.0%
↑ COMM WITH NURSES	77.8%	0.801	0.811	83.3%	81.8%	73.3%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	82.9%	90.6%	76.7%



	Ballad Health			Norton Community Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.54	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	0.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.00	0.00	0.00
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	4.348
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	0.000	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.077	1.000	0.894
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.542	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	50.1	59.6	49.7
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	53.3	64.9	24.2
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.04	0.03	0.05
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	72.5%	100.0%	66.7%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.61	0.79	0.82
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.11	0.15	0.15
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.19%	0.20%	0.25%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	138.75	150.5	127
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	225	230	213
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	65.1%	64.5%	69.4%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	79.9%	81.5%	88.9%
↑ COMM WITH NURSES	77.8%	0.801	0.811	82.9%	83.3%	85.5%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	81.9%	77.4%	82.9%



	Ballad Health			Franklin Woods Community Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.00	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.24	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	1.18	15.15	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	20.88	57.64	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	2.27	0.00	14.71
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	10.04	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	1.77	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.85	0.00	0.00
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.673	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.297	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	6.897	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.081	0.000	0.574
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.163	0.484	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	33.6	24.7	35.1
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	29.9	25.8	28.7
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.04	0.05	0.11
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	60.0%	75.0%	60.0%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.71	0.65	0.69
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.14	0.19	0.13
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.63%	2.09%	0.52%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	139	157	121
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	131.75	251.5	236
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	69.7%	62.1%	71.6%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	86.6%	90.9%	80.0%
↑ COMM WITH NURSES	77.8%	0.801	0.811	83.8%	79.3%	87.8%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	82.5%	81.2%	84.6%



	Ballad Health			Johnson City Medical Center		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.21	0.00	0.52
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.71	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	1.12	0.00	0.21
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.42	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	7.03	6.62	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	3.76	6.33	0.00
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	3.39	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	1.52	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.73	0.00	0.00
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.528	0.000	2.107
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	1.496	3.712	3.287
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	2.740	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.183	0.212	0.102
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.400	0.106	0.406
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	22.7	22.2	23.2
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	32.7	36.0	36.8
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.17	0.11	0.13
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	55.6%	33.3%	77.8%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.92	0.96	0.97
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.04	0.06	0.06
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.72%	1.44%	1.39%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	153	206	140
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	260	320.5	266
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	60.4%	64.3%	58.2%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	81.8%	85.7%	83.6%
↑ COMM WITH NURSES	77.8%	0.801	0.811	76.9%	75.1%	73.6%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	76.4%	75.3%	74.4%



	Ballad Health			Johnson County Community Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	--	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	--	--	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	--	0.00	0.00
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.05	0.00	0.00	--	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	--	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	--	--	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	--	--	--
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	--	--	--
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	--	--	--
↓ CDI/F facility-wide inhouse surveillance	0.630	0.423	0.395	--	--	--
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	--	--	--
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	--	--	--
↓ Sepsis In House Mortality	0.07	0.09	0.09	--	--	--
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	--	--	--
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	--	--	--
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	--	--	--
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.69%	0.94%	1.42%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	86	73.5	96
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	152	143	153
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	100.0%	--	--
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	100.0%	--	--
↑ COMM WITH NURSES	77.8%	0.801	0.811	100.0%	--	--
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	100.0%	--	--



	Ballad Health			Sycamore Shoals Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	0.00	0.00	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	5.65	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	5.88	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	5.78	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	0.00	0.00	0.00
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.883	0.000	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.346	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	8.571	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.453	0.000	0.709
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.623	0.675	0.709
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	29.2	21.1	25.6
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	31.0	24.2	38.4
↓ Sepsis In House Mortality	0.07	0.09	0.09	0.14	0.10	0.09
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	72.0%	50.0%	66.7%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.68	0.88	0.71
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.12	0.16	0.13
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.65%	0.59%	0.58%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	166	150	182
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	222	225	200.5
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	63.7%	79.3%	66.7%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	86.2%	88.6%	93.3%
↑ COMM WITH NURSES	77.8%	0.801	0.811	78.5%	81.6%	76.0%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	75.5%	92.2%	81.3%



	Ballad Health			Unicoi County Memorial Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	--	--	--
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	--	--	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	--	--	--
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.05	0.00	0.00	--	--	--
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	--	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	--	--	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	--	0.000
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.000	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	--	--	--
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	5.5	--	--
↓ Sepsis In House Mortality	0.07	0.09	0.09	--	--	--
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	61.8%	66.7%	50.0%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	--	--	--
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	--	--	--
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.46%	0.67%	1.17%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	124	170	134
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	206	206	222
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	75.3%	52.4%	75.0%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	86.8%	71.4%	90.9%
↑ COMM WITH NURSES	77.8%	0.801	0.811	85.7%	72.7%	100.0%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	83.1%	84.4%	94.4%



	Ballad Health			Laughlin Memorial Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	--	--	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	--	--	--
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	--	--	--
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.05	0.00	0.00	--	--	--
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	--	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	--	--	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	9.174
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	--	0.000	3.774
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	--	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	--	0.000	0.000
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.000	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	--	74.0	69.0
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	--	45.0	10.0
↓ Sepsis In House Mortality	0.07	0.09	0.09	--	--	--
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	52.6%	--	--
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	--	0.78	0.96
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	--	--	--
↓ Left Without Being Seen	0.74%	1.23%	0.89%	0.54%	0.47%	1.21%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	110	--	--
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	192	--	--
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	--	49.2%	60.5%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	86.9%	80.6%	80.8%
↑ COMM WITH NURSES	77.8%	0.801	0.811	78.5%	69.4%	75.6%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	84.0%	77.7%	82.6%



	Ballad Health			Takoma Regional Hospital		
	FY18	Jul-18	Aug-18	FY18	Jul-18	Aug-18
Quality Target Measures						
↓ Pressure Ulcer Rate	1.12	1.14	0.69	--	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.23	0.32	0.15	--	--	0.00
↓ In-Hospital Fall with Hip Fracture Rate	0.07	0.19	0.00	--	--	--
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.05	0.00	0.00	--	--	--
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	1.67	2.03	3.85	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.11	0.00	0.00	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.34	10.56	9.24	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.51	5.03	3.60	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	3.88	1.46	3.94	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.99	0.00	0.00	--	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.98	0.00	1.12	--	--	--
↓ CLABSI facility-wide inhouse surveillance	0.660	0.000	1.088	0.000	0.000	24.390
↓ CAUTI facility-wide inhouse surveillance	0.630	0.594	1.284	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.910	10.140	--	0.000	--	--
↓ MRSA facility-wide inhouse surveillance	0.050	0.086	0.287	0.000	0.000	1.302
↓ CDIFF facility-wide inhouse surveillance	0.630	0.423	0.395	0.000	0.000	0.000
Quality Priority Metrics						
↓ Levofloxacin Days Of Therapy per 1000 patient days	50.0	58.4	57.31	62.8	92.4	96.7
↓ Meropenem Days Of Therapy per 1000 patient days	42.9	43.87	35.42	13.9	16.8	21.6
↓ Sepsis In House Mortality	0.07	0.09	0.09	--	--	--
↑ SMB: Sepsis Management Bundle	57.7%	65.1%	52.6%	31.7%	50.0%	25.0%
↓ Inpatient Opioid Administration Rate by Patient Days	1.26	0.95	0.94	0.80	0.78	0.49
↓ Emergency Department Opioid Administration Rate by ED Visits	0.12	0.14	0.12	0.07	0.10	0.09
↓ Left Without Being Seen	0.74%	1.23%	0.89%	2.48%	0.07%	0.35%
↓ Median Time from ED Arrival to Departure for Outpatients (18b)	148	129	127.5	163	166	127
↓ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	316	230	229	277	--	294
↑ COMM ABOUT MEDICINES	64.5%	0.631	0.646	69.9%	71.4%	67.9%
↑ COMM RE DISCHARGE INFORMATION	85.2%	0.705	0.934	91.0%	88.6%	91.7%
↑ COMM WITH NURSES	77.8%	0.801	0.811	84.5%	88.9%	77.9%
↑ COMM WITH PHYSICIANS	80.2%	0.799	0.804	82.5%	80.3%	77.3%



ATTACHMENT 8

QUALITY MEASURES BY FACILITY

Target Quality Measures Rate

↓	PSI 3 Pressure Ulcer Rate	0.69	0.24
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.14
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.15	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.08
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.71	0.62
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.16	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	13.85	9.67
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.55	4.53
↓	PSI 13 Postoperative Sepsis Rate	15.52	1.85
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.36	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.31	0.00
↓	CLABSI	0.000	0.220
↓	CAUTI	0.000	0.089
↓	SSI COLON Surgical Site Infection	4.167	0.000
↓	SSI HYST Surgical Site Infection	1.389	0.000
↓	MRSA	0.000	0.019
↓	CDIFF	0.461	0.470

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.8%	80.8%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	12.8%	14.3%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.4%	4.9%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.8%	81.7%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	13.4%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	4.2%	4.8%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	71.2%	63.4%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.8%	25.2%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	11.7%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	73.2%	68.2%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	20.4%	22.6%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.4%	9.5%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	68.8%	64.2%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	14.6%	17.1%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	16.6%	18.1%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	72.5%	77.0%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	15.8%	16.1%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	11.8%	7.3%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.6%	63.4%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	28.2%	28.7%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	7.2%	7.9%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.4%	85.5%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.6%	14.1%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	52.8%	46.0%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	43.0%	45.9%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	4.2%	5.7%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.2%	9.3%

↓	HSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	22.4%	19.8%
↑	HSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	69.4%	70.9%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	68.8%	68.1%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	26.0%	26.0%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.2%	6.0%
Timely & Effective care Cataract Surgery Outcome %			
↑	OP31 Cataracts Improvement	--	--
Timely & Effective care Colonoscopy follow-up %			
↑	OP29 Avg Risk Polyp Surveillance	48.8%	68.2%
↑	OP30 High risk Polyp Surveillance	90.0%	80.9%
Timely & Effective Care Heart Attack			
↓	OP3b Median Time to Transfer AMI	48.0	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.6	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	0.0%
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.4%	99.1%
Timely & Effective Care Stroke Care %			
↑	STK4 Thrombolytic Therapy (retired)	--	--
Timely & Effective Care- Emergency Department (ED) Throughput			
↓	EDV Emergency Department Volume	16.67	16.667
↓	ED1b ED Door to Transport	214.6	182.1
↓	ED2b ED Decision to Transport	63.6	55.4
↓	OP18b Avg time ED arrival to discharge	120.8	111.9
↓	OP20 Door to Diagnostic Evaluation	13.2	--
↓	OP21 Time to pain medication for long bone fractures2	38.0	--
↓	OP22 Left without being seen	0.8%	1.1%
↑	OP23 Head CT stroke patients	46.4%	65.6%
Timely & Effective Care Preventive Care %			
↑	IMM2 Immunization for Influenza	98.4%	98.8%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.4%	--
Timely & Effective Care Blood Clot Prevention & Treatment %			
↑	VTE5 Warfarin Therapy at Discharge	88.0%	--
↓	VTE6 HAC VTE	0.0%	0.0%
Timely & Effective Care Pregnancy & delivery care %			
↓	PC01 Elective Delivery	1.67%	0.00%
Complications - Surgical Complications Rate			
↓	Hip and Knee Complications2	0.0	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.85	0.92
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	147.36	89.09
Readmissions & deaths 30 day rates of readmission %			
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.2%	18.0%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	13.9%	17.0%
↓	READM30HF Heart Failure 30Day readmissions rate	22.5%	22.7%
↓	READM30PN Pneumonia 30day readmission rate	19.0%	13.7%
↓	READM30 STK Stroke 30day readmission rate	9.7%	4.7%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.5%	5.6%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.4%	13.1%
Readmissions & deaths 30 day death (mortality) rates %			
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.0%	2.1%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	3.7%	5.4%
↓	MORT30HF Heart failure 30day mortality rate	3.7%	3.3%
↓	MORT30PN Pneumonia 30day mortality rate	2.6%	3.6%
↓	MORT30STK Stroke 30day mortality rate	6.0%	4.4%
Use of medical imaging Outpatient imaging efficiency %			
↕	OP8 MRI Lumbar Spine for Low Back Pain	42.0%	--
↕	OP9 Mammography Followup Rates	3.4%	--

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		Baseline	FYTD18
↕	OP10 Abdomen CT Use of Contrast Material	4.0%	--
↕	OP11 Thorax CT Use of Contrast Material	1.3%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.1%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.7%	--

Target Quality Measures Rate

↓	PSI 3 Pressure Ulcer Rate	0.44	1.28
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.40	0.25
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.14	0.06
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.49	1.77
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.05	0.11
↓	PSI 11 Postoperative Respiratory Failure Rate	13.08	8.24
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.52	3.41
↓	PSI 13 Postoperative Sepsis Rate	8.60	4.01
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	1.12
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.48	1.14
↓	CLABSI	0.386	0.699
↓	CAUTI	0.319	0.757
↓	SSI COLON Surgical Site Infection	1.148	2.083
↓	SSI HYST Surgical Site Infection	1.469	0.646
↓	MRSA	0.031	0.059
↓	CDIFF	0.423	0.644
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %			
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.8%	80.7%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.9%	14.1%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.3%	5.2%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.1%	80.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	12.0%	14.1%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.8%	6.2%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	73.5%	67.3%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.5%	23.3%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	6.0%	9.7%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	74.5%	70.0%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	19.3%	22.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.7%	8.0%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	67.8%	64.6%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	17.3%	16.5%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	15.7%	19.1%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	74.5%	71.3%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	17.0%	16.9%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	8.5%	11.6%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	67.4%	62.3%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	26.3%	27.6%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	6.4%	10.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.1%	86.3%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.9%	12.4%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	55.3%	51.4%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	39.0%	40.8%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	4.8%	5.4%

	Baseline	FYTD18
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.5%	8.8%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	17.4%	18.6%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	75.1%	70.0%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	75.9%	73.7%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	19.5%	20.6%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.6%	5.6%
Timely & Effective care Cataract Surgery Outcome %		
↑ OP31 Cataracts Improvement	--	--
Timely & Effective care Colonoscopy follow-up %		
↑ OP29 Avg Risk Polyp Surveillance	82.3%	89.4%
↑ OP30 High risk Polyp Surveillance	76.8%	91.3%
Timely & Effective Care Heart Attack		
↓ OP3b Median Time to Transfer AMI	65.0	64.5
↓ OP5 Median Time to ECG AMI and Chest Pain	7.1	9.4
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	97.5%	99.3%
Timely & Effective Care Stroke Care %		
↑ STK4 Thrombolytic Therapy (retired)	83.0%	92.9%
Timely & Effective Care- Emergency Department (ED) Throughput		
↓ EDV Emergency Department Volume	21.67	21.667
↓ ED1b ED Door to Transport	231.5	215.0
↓ ED2b ED Decision to Transport	90.0	68.2
↓ OP18b Avg time ED arrival to discharge	128.9	134.5
↓ OP20 Door to Diagnostic Evaluation	19.7	7.1
↓ OP21 Time to pain medicaton for long bone fractures2	49.0	31.3
↓ OP22 Left without being seen	0.9%	1.1%
↑ OP23 Head CT stroke patients	44.4%	83.6%
Timely & Effective Care Preventive Care %		
↑ IMM2 Immunization for Influenza	96.9%	98.2%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	99.0%
Timely & Effective Care Blood Clot Prevention & Treatment %		
↑ VTE5 Warfarin Therapy at Discharge	55.5%	--
↓ VTE6 HAC VTE	1.4%	4.0%
Timely & Effective Care Pregnancy & delivery care %		
↓ PC01 Elective Delivery	0.00%	0.00%
Complications - Surgical Complications Rate		
↓ Hip and Knee Complications2	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.92	0.89
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	135.72	133.74
Readmissions & deaths 30 day rates of readmission %		
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	17.8%	16.2%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.6%	12.0%
↓ READM30HF Heart Failure 30Day readmissions rate	19.7%	16.8%
↓ READM30PN Pneumonia 30day readmission rate	17.0%	12.1%
↓ READM30 STK Stroke 30day readmission rate	9.4%	7.5%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.9%	11.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.4%	3.9%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.3%	12.2%
Readmissions & deaths 30 day death (mortality) rates %		
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%
↓ MORT30 COPD 30day mortality rate COPD patients	2.8%	2.3%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	7.1%	3.2%
↓ MORT30HF Heart failure 30day mortality rate	5.3%	3.1%
↓ MORT30PN Pneumonia 30day mortality rate	7.2%	4.4%
↓ MORT30STK Stroke 30day mortality rate	10.4%	4.7%

Use of medical imaging Outpatient imaging efficiency %

		Baseline	FYTD18
↕	OP8 MRI Lumbar Spine for Low Back Pain	40.7%	43.2%
↕	OP9 Mammography Followup Rates	8.3%	9.1%
↕	OP10 Abdomen CT Use of Contrast Material	7.1%	4.0%
↕	OP11 Thorax CT Use of Contrast Material	0.9%	0.2%
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.5%	4.0%
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.4%	0.8%



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	Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate				
↓ PSI 3 Pressure Ulcer Rate	0.71	1.12	0.30	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.38	0.24
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.15	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.24
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.37	2.45
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.09	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	12.09	17.02
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	4.36	2.34
↓ PSI 13 Postoperative Sepsis Rate	8.81	3.88	0.00	8.35
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.15	1.79
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.45	0.87
↓ CLABSI	0.774	0.652	0.000	0.910
↓ CAUTI	0.613	0.640	0.428	0.434
↓ SSI COLON Surgical Site Infection	1.17	1.901	1.50	5.109
↓ SSI HYST Surgical Site Infection	1.00	0.607	0.00	1.198
↓ MRSA	0.040	0.054	0.039	0.000
↓ CDIFF	0.585	0.623	0.259	0.252
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %				
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	84.0%	83.6%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	13.0%	13.1%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	3.0%	3.5%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	84.0%	82.4%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	15.0%	13.8%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	4.0%	4.2%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	72.0%	72.1%

FY18 June 2018

	Ballad Health		Franklin Woods Community Hospital	
	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	21.0%	21.2%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	7.0%	6.9%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	76.0%	73.1%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	19.0%	22.2%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	5.0%	4.7%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	68.0%	69.6%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	16.0%	15.4%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	16.0%	15.4%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	83.0%	84.2%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	13.0%	11.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	4.0%	4.8%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	74.0%	72.7%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	22.0%	23.3%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	4.0%	3.7%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	88.0%	86.5%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	12.0%	13.4%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	61.0%	58.9%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	34.0%	33.0%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	5.0%	5.0%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	4.0%	5.3%

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		Ballad Health		Franklin Woods Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	14.0%	13.9%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	82.0%	81.1%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	85.0%	85.0%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	13.0%	11.5%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	2.0%	3.6%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	78.0%	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	100.0%	100.0%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	8.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	98.0%	96.4%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			<i>MEDIUM</i>	<i>MEDIUM</i>
↓	ED1b ED Door to Transport	227.3	316.0	234.0	131.8
↓	ED2b ED Decision to Transport	124.5	60.8	106.4	74.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	130.0	139.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	16.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	36.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.6%
↑	OP23 Head CT stroke patients	63.2%	78.9%	66.7%	100.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	99.0%	99.5%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	--	25.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	0.00	0.000
<i>Complications - Surgical Complications Rate</i>				
↓ Hip and Knee Complications	0.0	0.0	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.82	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	27.03
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	10.1%	15.4%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	9.7%	19.6%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	16.3%	9.5%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	0.0%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	4.6%	9.5%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	2.6%	1.1%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	0.0%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	2.1%	2.5%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	2.0%	2.7%
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	--	0.0%
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	33.9%	--
↕↕ OP9 Mammography Followup Rates	8.0%	6.9%	--	--
↕↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	12.7%	--

FY18 June 2018

		Ballad Health		Franklin Woods Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.0%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	1.6%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.26	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.26	0.25
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.10	0.11
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	3.60	1.13
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.08	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	11.98	6.57
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	5.85	3.63
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	14.88	3.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.35	1.54
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.34	0.74
↓	CLABSI	0.774	0.652	1.080	1.132
↓	CAUTI	0.613	0.640	0.997	1.498
↓	SSI COLON Surgical Site Infection	1.17	1.901	1.91	1.515
↓	SSI HYST Surgical Site Infection	1.00	0.607	2.50	0.000
↓	MRSA	0.040	0.054	0.055	0.073
↓	CDIFF	0.585	0.623	0.531	0.496
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	77.0%	76.9%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	17.0%	17.1%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	6.0%	6.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	77.0%	76.4%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	18.0%	17.6%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	5.0%	6.8%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	66.0%	62.8%

FY18 June 2018

	Ballad Health		Johnson City Medical Center	
	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	25.0%	26.0%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	9.0%	11.2%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	66.0%	65.0%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	25.0%	25.7%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	9.0%	9.3%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	60.0%	60.4%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	18.0%	17.8%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	22.0%	21.7%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	62.0%	65.0%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	24.0%	20.4%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	14.0%	14.7%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	52.0%	50.1%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	37.0%	36.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	11.0%	13.7%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	84.0%	81.8%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	16.0%	14.3%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	48.0%	46.4%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	47.0%	43.2%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	5.0%	6.9%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	10.0%	12.7%

FY18 June 2018

		Ballad Health		Johnson City Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	24.0%	23.7%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	66.0%	63.6%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	65.0%	63.1%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	29.0%	29.0%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	6.0%	7.9%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	67.0%	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	68.0%	100.0%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			VERY HIGH	VERY HIGH
↓	ED1b ED Door to Transport	227.3	316.0	245.0	260.0
↓	ED2b ED Decision to Transport	124.5	60.8	95.0	96.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	152.0	153.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	19.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	35.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.7%
↑	OP23 Head CT stroke patients	63.2%	78.9%	0.0%	50.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	96.0%	98.1%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	98.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	0.0%	3.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	0.00	0.000
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.89	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	153.53	192.16
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	20.1%	16.9%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	13.5%	12.5%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	22.6%	24.4%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	18.8%	16.0%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	9.4%	8.4%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	8.7%	11.3%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	3.0%	2.8%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	10.6%	13.3%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	1.2%	2.8%
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	2.3%	3.1%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	4.8%	3.6%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	4.2%	5.0%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	5.1%	5.4%
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	7.7%	7.9%
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	35.4%	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	5.8%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	4.6%	--



FY18 June 2018

		Ballad Health		Johnson City Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.2%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	2.9%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	2.8%	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	--	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	--	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	--	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	--	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	--	--
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	--	--
↓	CLABSI	0.774	0.652	--	--
↓	CAUTI	0.613	0.640	--	--
↓	SSI COLON Surgical Site Infection	1.17	1.901	--	--
↓	SSI HYST Surgical Site Infection	1.00	0.607	--	--
↓	MRSA	0.040	0.054	--	--
↓	CDIFF	0.585	0.623	--	--
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	--	57.1%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	--	42.9%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	--	0.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	--	100.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	--	0.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	--	0.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	--	100.0%

FY18 June 2018

		Ballad Health		Dickenson County Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	--	0.0%
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	--	0.0%
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	--	100.0%
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	--	0.0%
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	--	0.0%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	--	100.0%
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	--	0.0%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	--	0.0%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	--	100.0%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	--	0.0%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	--	0.0%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	--	100.0%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	--	0.0%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	--	0.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	--	100.0%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	--	0.0%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	--	52.4%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	--	33.3%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	--	4.8%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	--	14.3%

FY18 June 2018

		Ballad Health		Dickenson County Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	--	0.0%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	--	85.7%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	--	85.7%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	--	28.6%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	--	0.0%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	--	--
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	--	--
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			LOW	LOW
↓	ED1b ED Door to Transport	227.3	316.0	--	136.0
↓	ED2b ED Decision to Transport	124.5	60.8	--	27.5
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	--	103.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	--	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	--	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.8%
↑	OP23 Head CT stroke patients	63.2%	78.9%	25.0%	100.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	--	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	--	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	--	--
Complications - Surgical Complications Rate					
↓	Hip and Knee Complications	0.0	0.0	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	--	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	--	--
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	--
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	--	--
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	--	--
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	--	--
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	--	--
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	--	--
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	--
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	--	--
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	--	--
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	--	--
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	--	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	--	--

FY18 June 2018

		<i>Ballad Health</i>		<i>Dickenson County Hospital</i>	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	--	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	--	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	--	0.00
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	--	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	--	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	--	--
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	--	--
↓	CLABSI	0.774	0.652	--	--
↓	CAUTI	0.613	0.640	--	--
↓	SSI COLON Surgical Site Infection	1.17	1.901	--	--
↓	SSI HYST Surgical Site Infection	1.00	0.607	--	--
↓	MRSA	0.040	0.054	--	--
↓	CDIFF	0.585	0.623	--	--
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	90.0%	92.4%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	8.0%	7.6%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	2.0%	5.7%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	92.0%	86.8%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	6.0%	9.4%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	2.0%	3.8%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	95.0%	96.2%

FY18 June 2018

	Ballad Health		Hancock County Hospital	
	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	4.0%	3.8%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	1.0%	0.0%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	89.0%	33.3%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	5.0%	25.0%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	1.0%	41.7%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	77.0%	88.9%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	18.0%	3.7%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	5.0%	7.4%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	86.0%	94.7%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	14.0%	2.6%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	0.0%	2.9%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	79.0%	86.5%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	18.0%	13.5%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	3.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	92.0%	86.2%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	8.0%	13.8%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	70.0%	50.5%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	22.0%	43.2%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	8.0%	6.3%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	13.0%	5.9%

FY18 June 2018

		Ballad Health		Hancock County Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	7.0%	2.9%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	80.0%	91.2%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	81.0%	84.8%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	9.0%	6.1%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	10.0%	3.0%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	--	--
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	--	--
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	316.0	--	--
↓	ED2b ED Decision to Transport	124.5	60.8	102.0	61.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	--	128.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	--	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	--	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.5%
↑	OP23 Head CT stroke patients	63.2%	78.9%	--	--
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	--	--
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	100.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	--	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	--	--
Complications - Surgical Complications Rate					
↓	Hip and Knee Complications	0.0	0.0	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	--	1.00
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	--	30.8%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	--
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	--	0.0%
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	17.0%	0.0%
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	--	--
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	15.6%	11.4%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	--	0.0%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	--
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	--	0.0%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	16.9%	2.4%
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	--	--
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	--	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	--	--



FY18 June 2018

		Ballad Health		Hancock County Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	--	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.45	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.40	0.00
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.17	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	--	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	--	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	--	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	--	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	--	0.00
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	--	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	--	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.36	12.99
↓	CLABSI	0.774	0.652	0.000	0.000
↓	CAUTI	0.613	0.640	0.000	1.623
↓	SSI COLON Surgical Site Infection	1.17	1.901	0.00	0.000
↓	SSI HYST Surgical Site Infection	1.00	0.607	--	--
↓	MRSA	0.040	0.054	0.000	0.000
↓	CDIFF	0.585	0.623	0.000	0.260
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	87.0%	83.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	11.0%	11.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	2.0%	5.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	92.0%	79.8%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	7.0%	10.7%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	1.0%	9.5%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	78.0%	76.3%

FY18 June 2018

		Ballad Health		Hawkins County Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	20.0%	16.0%
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	2.0%	7.7%
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	81.0%	67.5%
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	13.0%	18.4%
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	6.0%	14.0%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	83.0%	70.2%
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	10.0%	17.1%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	7.0%	18.3%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	86.0%	77.6%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	9.0%	10.2%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	5.0%	12.8%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	74.0%	76.4%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	23.0%	14.4%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	3.0%	9.2%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	92.0%	87.3%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	8.0%	12.7%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	55.0%	51.3%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	41.0%	44.7%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	4.0%	4.0%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	5.0%	9.1%

FY18 June 2018

		Ballad Health		Hawkins County Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	21.0%	18.8%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	74.0%	72.0%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	76.0%	67.4%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	21.0%	27.6%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	3.0%	5.0%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	97.0%	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	95.0%	96.6%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	9.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	100.0%	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			LOW	LOW
↓	ED1b ED Door to Transport	227.3	316.0	175.0	215.0
↓	ED2b ED Decision to Transport	124.5	60.8	49.0	42.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	80.0	91.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	14.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	38.0	--
↓	OP22 Left without being seen	0.9%	0.7%	0.0%	2.2%
↑	OP23 Head CT stroke patients	63.2%	78.9%	50.0%	--
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	97.0%	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	1.0%	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	--	--
Complications - Surgical Complications Rate					
↓	Hip and Knee Complications	0.0	0.0	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	0.88	0.96
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	18.6%	12.5%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	50.0%
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	21.1%	16.0%
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	16.8%	11.6%
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	--	12.5%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	14.6%	13.9%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	0.0%	0.0%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	0.0%
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	0.0%	1.4%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	2.6%	0.7%
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	--	0.0%
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	3.7%	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	6.0%	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	3.2%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	1.07	3.21
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.57	0.48
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.16	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.07
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.04	0.92
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	0.87	0.31
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	16.84	6.40
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	6.14	3.77
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	9.47	3.57
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.42	1.70
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.62	1.59
↓	CLABSI	0.774	0.652	0.682	0.334
↓	CAUTI	0.613	0.640	0.938	0.496
↓	SSI COLON Surgical Site Infection	1.17	1.901	1.36	1.282
↓	SSI HYST Surgical Site Infection	1.00	0.607	0.64	0.292
↓	MRSA	0.040	0.054	0.012	0.034
↓	CDIFF	0.585	0.623	0.741	1.056
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	81.0%	81.3%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	16.0%	12.8%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	3.0%	5.9%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	82.0%	81.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	15.0%	12.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	3.0%	7.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	66.0%	65.6%

FY18 June 2018

	Ballad Health		Holston Valley Medical Center	
	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	26.0%	23.8%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	8.0%	10.5%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	73.0%	71.7%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	21.0%	20.4%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	6.0%	7.9%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	63.0%	66.9%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	17.0%	16.3%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	20.0%	16.8%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	66.0%	66.5%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	21.0%	19.1%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	13.0%	14.1%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	63.0%	64.9%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	29.0%	24.4%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	8.0%	10.7%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	87.0%	90.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	13.0%	9.7%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	54.0%	53.9%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	40.0%	42.5%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	6.0%	3.5%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	7.0%	7.2%

FY18 June 2018

		Ballad Health		Holston Valley Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	19.0%	18.0%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	74.0%	74.9%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	78.0%	79.8%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	19.0%	16.1%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	3.0%	4.1%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	--	73.7%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	62.0%	95.7%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	83.0%	85.7%
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			VERY HIGH	VERY HIGH
↓	ED1b ED Door to Transport	227.3	316.0	340.0	434.0
↓	ED2b ED Decision to Transport	124.5	60.8	186.0	143.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	153.0	175.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	24.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	52.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	2.0%
↑	OP23 Head CT stroke patients	63.2%	78.9%	78.6%	86.7%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	95.0%	98.1%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	94.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	56.0%	--

FY18 June 2018

		Ballad Health		Holston Valley Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	3.0%	3.6%
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	0.00	0.000
<i>Complications - Surgical Complications Rate</i>					
↓	Hip and Knee Complications	0.0	0.0	0.0	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	1.07	0.80
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	130.24	185.19
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	19.7%	20.1%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	8.5%	13.3%
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	21.6%	22.2%
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	19.4%	16.6%
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	14.6%	10.1%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	8.0%	8.5%
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	4.2%	4.2%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	12.7%	12.0%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	1.4%	2.4%
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	1.4%	2.3%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	4.5%	2.4%
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	3.8%	2.6%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	2.6%	5.4%
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	17.4%	3.3%
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	43.1%	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	2.9%	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	14.3%	--



FY18 June 2018

		<i>Ballad Health</i>		<i>Holston Valley Medical Center</i>	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.0%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	4.4%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	1.0%	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.23	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.45	0.26
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.14	0.34
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.78	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.10	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	12.36	7.69
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	5.38	4.30
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	9.09	10.23
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.20	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.38	0.00
↓	CLABSI	0.774	0.652	0.000	0.000
↓	CAUTI	0.613	0.640	0.000	0.000
↓	SSI COLON Surgical Site Infection	1.17	1.901	0.00	1.695
↓	SSI HYST Surgical Site Infection	1.00	0.607	7.14	0.000
↓	MRSA	0.040	0.054	0.080	0.048
↓	CDIFF	0.585	0.623	0.813	0.507
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	82.0%	80.2%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	14.0%	15.6%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	4.0%	4.2%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	85.0%	82.6%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	10.0%	13.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	5.0%	4.2%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	65.0%	65.8%

FY18 June 2018

		Ballad Health		Indian Path Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	25.0%	24.9%
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	10.0%	9.3%
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	72.0%	74.6%
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	22.0%	21.0%
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	6.0%	4.4%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	63.0%	63.8%
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	18.0%	17.4%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	19.0%	18.8%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	74.0%	81.0%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	16.0%	14.4%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	10.0%	4.6%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	66.0%	66.0%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	28.0%	26.8%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	6.0%	7.2%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	86.0%	87.1%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	14.0%	12.9%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	55.0%	50.7%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	40.0%	40.0%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	5.0%	5.1%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	8.0%	7.7%

FY18 June 2018

		Ballad Health		Indian Path Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	19.0%	16.4%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	73.0%	75.9%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	78.0%	79.3%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	17.0%	15.4%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	5.0%	5.3%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	--	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	73.0%	100.0%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	4.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	93.0%	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	316.0	220.0	102.0
↓	ED2b ED Decision to Transport	124.5	60.8	78.0	67.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	121.0	130.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	18.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	32.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.9%
↑	OP23 Head CT stroke patients	63.2%	78.9%	--	57.1%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	99.0%	99.5%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	97.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	0.0%	0.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	0.00	0.000
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.87	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	135.61	68.18
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	18.4%	11.9%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	10.4%	8.5%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	18.1%	18.9%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	14.8%	12.0%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	6.2%	8.7%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	3.4%	1.6%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	9.5%	9.8%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	0.0%
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	2.0%	1.5%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	4.5%	3.8%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	2.2%	1.8%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	2.0%	4.0%
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	3.3%	0.0%
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	5.6%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	7.9%	--

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		<i>Ballad Health</i>		<i>Indian Path Medical Center</i>	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.0%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	1.5%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	1.29	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.38	0.00
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.16	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.69	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.12	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	10.64	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	4.61	0.00
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	5.82	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.26	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.34	0.00
↓	CLABSI	0.774	0.652	0.000	0.000
↓	CAUTI	0.613	0.640	0.000	1.214
↓	SSI COLON Surgical Site Infection	1.17	1.901	0.00	0.000
↓	SSI HYST Surgical Site Infection	1.00	0.607	5.56	0.000
↓	MRSA	0.040	0.054	0.000	0.000
↓	CDIFF	0.585	0.623	0.315	0.371
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	83.0%	83.3%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	12.0%	9.1%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	5.0%	7.6%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	82.0%	82.9%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	13.0%	10.2%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	5.0%	6.9%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	72.0%	79.0%

FY18 June 2018

		Ballad Health		Lonesome Pine Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	20.0%	14.1%
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	8.0%	7.0%
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	75.0%	78.5%
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	18.0%	11.5%
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	7.0%	9.6%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	71.0%	75.6%
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	13.0%	8.4%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	16.0%	13.4%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	72.0%	80.5%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	17.0%	14.8%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	11.0%	8.2%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	66.0%	74.0%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	27.0%	17.9%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	7.0%	8.1%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	86.0%	85.8%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	14.0%	14.2%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	51.0%	46.7%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	44.0%	47.6%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	5.0%	5.6%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	7.0%	7.3%

FY18 June 2018

		Ballad Health		Lonesome Pine Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	23.0%	22.7%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	70.0%	69.3%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	70.0%	72.3%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	24.0%	21.7%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	6.0%	6.0%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	31.0%	41.2%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	70.0%	64.7%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	10.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	95.0%	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	316.0	213.0	244.0
↓	ED2b ED Decision to Transport	124.5	60.8	53.0	51.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	120.0	117.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	23.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	64.0	--
↓	OP22 Left without being seen	0.9%	0.7%	0.0%	0.3%
↑	OP23 Head CT stroke patients	63.2%	78.9%	54.5%	50.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	96.0%	98.1%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	88.0%	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	--	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	0.05	0.000
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	--	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.89	0.92
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	0.00
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	28.4%	16.8%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	17.2%	14.3%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	32.5%	32.8%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	24.8%	26.3%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	--	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	11.1%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	16.5%	9.1%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	1.2%	2.1%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	2.8%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	6.1%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	2.1%	3.0%
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	14.5%	0.0%
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	47.7%	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	5.2%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	9.4%	--

FY18 June 2018

		<i>Ballad Health</i>		<i>Lonesome Pine Hospital</i>	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	3.9%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	5.5%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	1.4%	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.33	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.38	0.54
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.15	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.96	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.10	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	12.33	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	4.14	0.00
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	35.72	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.79	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.74	0.00
↓	CLABSI	0.774	0.652	0.000	0.000
↓	CAUTI	0.613	0.640	0.000	0.000
↓	SSI COLON Surgical Site Infection	1.17	1.901	0.00	0.000
↓	SSI HYST Surgical Site Infection	1.00	0.607	0.00	0.000
↓	MRSA	0.040	0.054	0.000	0.000
↓	CDIFF	0.585	0.623	0.265	0.301
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	82.0%	82.9%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	14.0%	13.6%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	4.0%	3.6%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	85.0%	81.9%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	11.0%	15.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	4.0%	3.1%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	70.0%	65.6%

FY18 June 2018

	Ballad Health		Norton Community Hospital	
	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	22.0%	24.1%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	8.0%	10.3%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	71.0%	60.3%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	22.0%	31.1%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	7.0%	8.6%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	66.0%	65.1%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	14.0%	17.4%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	20.0%	17.4%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	71.0%	76.8%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	18.0%	15.6%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	11.0%	7.6%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	61.0%	57.1%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	28.0%	32.5%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	11.0%	10.3%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	88.0%	79.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	12.0%	16.7%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	53.0%	45.3%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	42.0%	46.4%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	5.0%	6.2%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	8.0%	9.2%

FY18 June 2018

		Ballad Health		Norton Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	19.0%	20.4%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	73.0%	70.4%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	73.0%	65.6%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	21.0%	28.8%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	6.0%	5.6%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	13.0%	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	--	--
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	9.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	0.0%
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	94.0%	96.6%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	316.0	244.0	225.0
↓	ED2b ED Decision to Transport	124.5	60.8	74.0	61.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	154.0	138.8
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	14.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	53.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.3%
↑	OP23 Head CT stroke patients	63.2%	78.9%	66.7%	66.7%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	99.0%	99.2%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	97.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

		Ballad Health		Norton Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	--	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	0.00	0.000
<i>Complications - Surgical Complications Rate</i>					
↓	Hip and Knee Complications	0.0	0.0	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	0.89	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	150.00
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	14.8%	16.9%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	2.4%	5.9%
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	20.1%	14.3%
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	16.1%	12.4%
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	10.0%	4.0%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	0.0%	0.0%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	9.2%	11.7%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	0.7%	1.0%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	8.9%	7.7%
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	1.4%	3.3%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	1.6%	2.5%
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	2.5%	1.6%
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	42.9%	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	3.2%	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	4.7%	--

FY18 June 2018

		Ballad Health		Norton Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.8%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	2.6%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	0.5%	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate				
↓ PSI 3 Pressure Ulcer Rate	0.71	1.12	0.80	2.28
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.32	0.07
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.09	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.16
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.72	4.54
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	0.97	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	16.50	10.80
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	4.25	2.43
↓ PSI 13 Postoperative Sepsis Rate	8.81	3.88	8.88	3.57
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	1.95	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.38	1.25
↓ CLABSI	0.774	0.652	1.202	0.722
↓ CAUTI	0.613	0.640	0.824	0.958
↓ SSI COLON Surgical Site Infection	1.17	1.901	0.00	1.333
↓ SSI HYST Surgical Site Infection	1.00	0.607	0.00	1.587
↓ MRSA	0.040	0.054	0.056	0.094
↓ CDIFF	0.585	0.623	0.719	0.740
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %				
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	82.0%	85.4%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	14.0%	9.7%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	4.0%	4.9%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	84.0%	83.0%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	14.0%	10.6%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	2.0%	6.5%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	69.0%	71.3%

FY18 June 2018

Ballad Health

**Bristol Regional
Medical Center**

	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	23.0%	20.6%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	8.0%	9.5%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	74.0%	74.2%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	21.0%	16.8%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	5.0%	9.0%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	67.0%	67.2%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	17.0%	14.1%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	16.0%	18.7%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	62.0%	67.8%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	22.0%	17.2%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	16.0%	15.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	65.0%	68.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	28.0%	22.2%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	7.0%	9.8%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	88.0%	89.7%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	12.0%	10.1%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	53.0%	55.7%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	42.0%	40.6%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	5.0%	3.5%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	7.0%	7.0%

FY18 June 2018

		Ballad Health		Bristol Regional Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	16.0%	17.2%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	77.0%	75.7%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	78.0%	80.0%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	19.0%	16.1%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	3.0%	3.9%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	57.0%	72.7%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	46.0%	70.0%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	83.0%	100.0%
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			HIGH	HIGH
↓	ED1b ED Door to Transport	227.3	316.0	255.0	316.0
↓	ED2b ED Decision to Transport	124.5	60.8	96.0	81.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	147.0	148.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	23.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	43.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	1.0%
↑	OP23 Head CT stroke patients	63.2%	78.9%	60.0%	100.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	96.0%	99.6%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	99.0%
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	55.0%	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	3.0%	0.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	0.00	0.000
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.81	0.81
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	123.34	204.92
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	20.1%	20.3%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	8.9%	11.6%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	22.6%	23.1%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	14.7%	17.2%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	13.4%	9.7%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	10.0%	13.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	1.8%	3.5%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	13.1%	12.1%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	3.3%	2.3%
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	0.0%	2.2%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	3.8%	3.5%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	3.7%	1.6%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	3.4%	3.9%
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	15.0%	2.9%
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	43.2%	43.2%
↕ OP9 Mammography Followup Rates	8.0%	6.9%	9.1%	9.1%
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	4.0%	4.0%

FY18 June 2018

		Ballad Health		Bristol Regional Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.2%	0.2%
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	4.0%	4.0%
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	0.8%	0.8%

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate				
↓ PSI 3 Pressure Ulcer Rate	0.71	1.12	1.08	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.34	0.15
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.13	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.17
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.50	0.91
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.29	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	16.39	14.29
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	5.25	5.79
↓ PSI 13 Postoperative Sepsis Rate	8.81	3.88	10.75	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.11	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	0.64	0.00
↓ CLABSI	0.774	0.652	0.000	0.000
↓ CAUTI	0.613	0.640	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.17	1.901	0.00	0.000
↓ SSI HYST Surgical Site Infection	1.00	0.607	0.00	0.000
↓ MRSA	0.040	0.054	0.000	0.000
↓ CDIFF	0.585	0.623	1.052	0.550
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %				
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	77.0%	76.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	17.0%	18.0%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	6.0%	5.1%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	80.0%	78.7%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	14.0%	16.0%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	6.0%	5.3%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	60.0%	52.5%

FY18 June 2018

		Ballad Health		Johnston Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	27.0%	32.0%
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	13.0%	15.5%
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	68.0%	62.5%
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	23.0%	26.1%
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	9.0%	11.5%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	61.0%	60.2%
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	16.0%	19.8%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	23.0%	20.0%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	68.0%	73.3%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	20.0%	18.8%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	12.0%	7.9%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	60.0%	60.6%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	32.0%	31.2%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	8.0%	8.2%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	86.0%	87.0%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	14.0%	13.0%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	49.0%	44.2%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	45.0%	46.8%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	6.0%	6.1%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	12.0%	11.4%

FY18 June 2018

		Ballad Health		Johnston Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	20.0%	20.9%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	68.0%	67.7%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	65.0%	65.1%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	28.0%	27.9%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	7.0%	7.0%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	100.0%	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	100.0%	--
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	0.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	100.0%	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			HIGH	HIGH
↓	ED1b ED Door to Transport	227.3	316.0	272.0	60.5
↓	ED2b ED Decision to Transport	124.5	60.8	112.0	90.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	143.0	137.5
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	11.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	28.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.2%
↑	OP23 Head CT stroke patients	63.2%	78.9%	57.1%	60.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	97.0%	96.2%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	0.0%	0.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	0.00	0.000
Complications - Surgical Complications Rate					
↓	Hip and Knee Complications	0.0	0.0	0.0	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	0.75	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	147.36	206.35
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	16.6%	23.2%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	12.1%	7.9%
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	22.1%	26.3%
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	18.9%	14.1%
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	9.9%	14.4%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	7.3%	1.0%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	11.5%	13.6%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	0.0%
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	0.7%	3.3%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	3.0%	5.4%
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	2.3%	4.0%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	4.2%	4.8%
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	2.4%	6.0%
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	35.4%	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	3.4%	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	2.0%	--

FY18 June 2018

		Ballad Health		Johnston Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.8%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	4.7%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	1.0%	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate				
↓ PSI 3 Pressure Ulcer Rate	0.71	1.12	0.35	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.39	0.00
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.16	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.00
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.69	0.00
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.12	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	16.04	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	4.21	5.99
↓ PSI 13 Postoperative Sepsis Rate	8.81	3.88	9.79	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.29	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.46	0.00
↓ CLABSI	0.774	0.652	0.000	0.000
↓ CAUTI	0.613	0.640	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.17	1.901	16.67	--
↓ SSI HYST Surgical Site Infection	1.00	0.607	0.00	0.000
↓ MRSA	0.040	0.054	0.000	0.000
↓ CDIFF	0.585	0.623	0.174	0.331
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %				
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	85.0%	85.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	12.0%	11.4%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	3.0%	2.7%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	88.0%	88.1%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	9.0%	8.9%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	3.0%	3.1%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	76.0%	73.2%

FY18 June 2018

Ballad Health

**Smyth County
Community Hospital**

	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	18.0%	18.7%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	6.0%	8.2%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	73.0%	79.6%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	22.0%	17.1%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	5.0%	3.3%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	73.0%	66.3%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	16.0%	15.7%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	11.0%	18.0%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	75.0%	84.1%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	8.0%	10.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	17.0%	5.2%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	72.0%	66.5%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	24.0%	28.6%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	4.0%	4.8%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	91.0%	88.8%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	9.0%	11.2%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	61.0%	53.2%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	37.0%	40.4%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	2.0%	3.2%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	5.0%	5.2%

FY18 June 2018

		Ballad Health		Smyth County Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	18.0%	11.6%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	77.0%	83.2%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	75.0%	75.1%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	22.0%	21.7%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	3.0%	3.2%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	100.0%	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	100.0%	92.3%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	48.0	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	3.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	99.0%	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			LOW	LOW
↓	ED1b ED Door to Transport	227.3	316.0	176.0	175.0
↓	ED2b ED Decision to Transport	124.5	60.8	40.0	41.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	97.0	106.8
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	11.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	25.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.3%
↑	OP23 Head CT stroke patients	63.2%	78.9%	75.0%	66.7%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	100.0%	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	--	0.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	--	--
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.83	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	0.00
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	18.5%	15.6%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	17.9%	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	18.8%	20.0%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	16.3%	9.2%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	11.8%	5.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	3.1%	10.2%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	9.7%	12.6%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	1.5%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	0.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	5.5%	1.2%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	2.8%	2.7%
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	4.5%	7.7%
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	3.8%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	0.5%	--



FY18 June 2018

		Ballad Health		Smyth County Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.0%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	3.7%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	0.0%	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.41	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.40	0.00
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.17	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	--	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	--	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	--	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	--	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	--	0.00
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	--	250.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	--	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.39	0.00
↓	CLABSI	0.774	0.652	0.000	4.785
↓	CAUTI	0.613	0.640	0.000	0.000
↓	SSI COLON Surgical Site Infection	1.17	1.901	--	0.000
↓	SSI HYST Surgical Site Infection	1.00	0.607	--	0.000
↓	MRSA	0.040	0.054	0.000	0.310
↓	CDIFF	0.585	0.623	0.498	0.621
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	87.0%	89.6%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	9.0%	6.8%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	4.0%	3.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	89.0%	88.3%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	8.0%	7.4%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	3.0%	4.3%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	78.0%	77.2%

FY18 June 2018

	Ballad Health		Russell County Medical Center	
	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	17.0%	19.3%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	5.0%	7.5%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	79.0%	70.6%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	17.0%	21.6%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	4.0%	7.8%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	73.0%	64.5%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	14.0%	16.8%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	13.0%	18.7%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	76.0%	82.3%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	16.0%	13.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	8.0%	3.8%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	64.0%	64.6%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	30.0%	30.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	6.0%	4.6%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	86.0%	82.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	14.0%	21.3%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	50.0%	45.8%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	47.0%	45.0%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	3.0%	5.8%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	9.0%	6.1%

FY18 June 2018

		Ballad Health		Russell County Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	32.0%	17.6%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	59.0%	78.1%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	61.0%	71.8%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	35.0%	22.9%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	4.0%	5.3%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	0.0%	0.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	--	85.7%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	6.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	99.0%	98.1%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			LOW	LOW
↓	ED1b ED Door to Transport	227.3	316.0	168.0	189.3
↓	ED2b ED Decision to Transport	124.5	60.8	39.0	39.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	90.0	106.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	7.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	20.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.3%
↑	OP23 Head CT stroke patients	63.2%	78.9%	0.0%	50.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	100.0%	99.6%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	98.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--



Ballad Health

Russell County Medical Center

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	--	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	--	--
<i>Complications - Surgical Complications Rate</i>					
↓	Hip and Knee Complications	0.0	0.0	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	0.89	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	17.6%	17.3%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	20.0%	57.1%
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	19.0%	20.0%
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	18.7%	6.7%
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	7.1%	0.0%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	15.0%	17.3%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	0.9%	2.2%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	6.3%
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	3.4%	9.1%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	2.1%	3.6%
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	--	0.0%
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	1.4%	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	3.3%	--



FY18 June 2018

		Ballad Health		Russell County Medical Center	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	1.1%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	3.8%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

FY18 June 2018

		Ballad Health		Sycamore Shoals Hospital	
		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.31	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.44	0.00
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.16	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.66	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.11	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	13.37	4.63
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	5.23	4.57
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	0.00	4.65
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.26	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.35	0.00
↓	CLABSI	0.774	0.652	0.900	1.088
↓	CAUTI	0.613	0.640	0.000	0.460
↓	SSI COLON Surgical Site Infection	1.17	1.901	3.23	3.125
↓	SSI HYST Surgical Site Infection	1.00	0.607	0.00	0.000
↓	MRSA	0.040	0.054	0.067	0.134
↓	CDIFF	0.585	0.623	0.604	0.672
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	85.0%	78.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	12.0%	16.5%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	3.0%	5.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	86.0%	79.7%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	11.0%	15.3%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	3.0%	5.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	82.0%	69.3%

FY18 June 2018

		Ballad Health		Sycamore Shoals Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	13.0%	21.8%
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	5.0%	8.9%
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	75.0%	66.9%
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	19.0%	25.7%
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	6.0%	7.4%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	73.0%	63.5%
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	14.0%	16.9%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	13.0%	19.5%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	82.0%	80.5%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	13.0%	13.9%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	5.0%	5.6%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	73.0%	64.6%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	23.0%	28.4%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	4.0%	7.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	86.0%	86.1%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	14.0%	13.9%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	59.0%	45.3%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	38.0%	42.4%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	3.0%	9.1%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	4.0%	8.3%

FY18 June 2018

		Ballad Health		Sycamore Shoals Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	17.0%	20.5%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	79.0%	71.2%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	78.0%	71.5%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	18.0%	23.0%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	4.0%	5.5%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	100.0%	100.0%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	75.0%	75.0%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	5.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	95.7%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	316.0	210.0	222.0
↓	ED2b ED Decision to Transport	124.5	60.8	69.0	77.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	124.0	166.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	14.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	63.0	--
↓	OP22 Left without being seen	0.9%	0.7%	0.0%	0.7%
↑	OP23 Head CT stroke patients	63.2%	78.9%	0.0%	75.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	98.0%	99.6%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

		Ballad Health		Sycamore Shoals Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	--	0.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	--	--
<i>Complications - Surgical Complications Rate</i>					
↓	Hip and Knee Complications	0.0	0.0	0.0	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	0.87	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	125.00
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	14.6%	14.7%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	17.5%	0.0%
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	16.1%	18.4%
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	--	13.3%
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	7.2%	10.5%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	3.3%	3.9%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	10.4%	15.5%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	0.7%	2.2%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	10.0%	6.3%
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	3.5%	9.1%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	3.8%	3.6%
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	0.0%	0.0%
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	7.2%	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	3.2%	--

FY18 June 2018

		<i>Ballad Health</i>		<i>Sycamore Shoals Hospital</i>	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.5%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	0.0%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	1.2%	--

FY18 June 2018

		Ballad Health		Johnson County Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	--	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	--	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	--	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	--	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	--	--
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	--	--
↓	CLABSI	0.774	0.652	--	--
↓	CAUTI	0.613	0.640	--	--
↓	SSI COLON Surgical Site Infection	1.17	1.901	--	--
↓	SSI HYST Surgical Site Infection	1.00	0.607	--	--
↓	MRSA	0.040	0.054	--	--
↓	CDIFF	0.585	0.623	--	--
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	--	100.0%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	--	0.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	--	0.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	--	100.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	--	0.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	--	0.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	--	100.0%

FY18 June 2018

	Ballad Health		Johnson County Community Hospital	
	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	--	0.0%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	--	0.0%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	--	100.0%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	--	0.0%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	--	0.0%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	--	100.0%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	--	66.7%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	--	66.7%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	--	100.0%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	--	0.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	--	0.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	--	100.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	--	20.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	--	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	--	100.0%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	--	0.0%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	--	58.3%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	--	46.7%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	--	0.0%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	--	0.0%

FY18 June 2018

		Ballad Health		Johnson County Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	--	25.0%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	--	100.0%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	--	100.0%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	--	25.0%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	--	0.0%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	--	--
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	--	--
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			LOW	LOW
↓	ED1b ED Door to Transport	227.3	316.0	--	152.0
↓	ED2b ED Decision to Transport	124.5	60.8	--	36.9
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	--	86.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	--	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	--	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.7%
↑	OP23 Head CT stroke patients	63.2%	78.9%	--	100.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	--	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	--	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	--	--
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	--	--
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	--	--
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	--	--
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	--	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	--
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	--	--
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	--	0.0%
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	--	--
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	--	--

FY18 June 2018

		Ballad Health		Johnson County Community Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	--	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

FY18 June 2018

	Ballad Health		Unicoi County Memorial Hospital	
	Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate				
↓ PSI 3 Pressure Ulcer Rate	0.71	1.12	0.40	--
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.40	--
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.17	--
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	--
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.75	--
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	4.76	--
↓ PSI 13 Postoperative Sepsis Rate	8.81	3.88	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.26	--
↓ CLABSI	0.774	0.652	0.000	0.000
↓ CAUTI	0.613	0.640	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.17	1.901	--	--
↓ SSI HYST Surgical Site Infection	1.00	0.607	--	--
↓ MRSA	0.040	0.054	0.000	0.000
↓ CDI/F	0.585	0.623	0.000	0.000
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %				
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	79.0%	85.7%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	18.0%	13.2%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	3.0%	1.1%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	80.0%	83.1%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	12.0%	14.6%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	8.0%	2.3%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	71.0%	75.7%

FY18 June 2018

		Ballad Health		Unicoi County Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	23.0%	20.0%
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	6.0%	4.7%
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	71.0%	80.0%
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	25.0%	20.0%
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	4.0%	0.0%
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	68.0%	75.3%
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	21.0%	13.3%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	20.0%	11.8%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	72.0%	85.1%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	23.0%	11.5%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	5.0%	3.4%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	68.0%	72.1%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	23.0%	18.6%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	9.0%	9.3%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	76.0%	86.8%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	24.0%	13.2%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	47.0%	52.0%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	40.0%	40.8%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	4.0%	2.8%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	12.0%	1.2%

FY18 June 2018

		Ballad Health		Unicoi County Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	21.0%	6.1%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	67.0%	19.6%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	62.0%	71.6%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	28.0%	23.9%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	10.0%	4.5%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	--	--
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	--	--
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	64.5
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	8.0	9.4
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			LOW	LOW
↓	ED1b ED Door to Transport	227.3	316.0	209.0	206.0
↓	ED2b ED Decision to Transport	124.5	60.8	--	49.8
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	119.0	124.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	18.0	7.1
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	56.0	31.3
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.5%
↑	OP23 Head CT stroke patients	63.2%	78.9%	0.0%	--
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	93.0%	92.3%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	--	--
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	--	--
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.82	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	--	--
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	--	--
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	--	--
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	--
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	--	--
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	--	--
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	--	--
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	4.7%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	4.7%	--



FY18 June 2018

		Ballad Health		Unicoi County Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.0%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	0.7%	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.27	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.37	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.15	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.52	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.10	--
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	8.98	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	6.16	--
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	9.38	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.22	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	2.17	--
↓	CLABSI	0.774	0.652	0.000	0.000
↓	CAUTI	0.613	0.640	0.000	0.000
↓	SSI COLON Surgical Site Infection	1.17	1.901	2.33	1.538
↓	SSI HYST Surgical Site Infection	1.00	0.607	--	--
↓	MRSA	0.040	0.054	0.000	0.000
↓	CDIFF	0.585	0.623	0.441	0.223
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	81.0%	--
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	16.0%	--
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	3.0%	--
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	85.0%	--
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	13.0%	--
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	2.0%	--
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	73.0%	--

FY18 June 2018

		Ballad Health		Laughlin Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	22.0%	--
↓	HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	5.0%	--
↑	HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	70.0%	--
↓	HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	22.0%	--
↓	HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	8.0%	--
↑	HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	61.0%	--
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	20.0%	--
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	19.0%	--
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	70.0%	--
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	18.0%	--
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	12.0%	--
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	61.0%	--
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	30.0%	--
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	9.0%	--
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	88.0%	--
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	12.0%	--
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	50.0%	--
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	45.0%	--
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	5.0%	--
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	6.0%	--

FY18 June 2018

		Ballad Health		Laughlin Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	17.0%	--
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	77.0%	--
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	76.0%	--
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	22.0%	--
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	2.0%	--
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	86.0%	89.6%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	89.0%	87.9%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	47.0	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	7.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	316.0	206.0	192.0
↓	ED2b ED Decision to Transport	124.5	60.8	--	56.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	124.0	110.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	25.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	65.0	--
↓	OP22 Left without being seen	0.9%	0.7%	1.0%	0.5%
↑	OP23 Head CT stroke patients	63.2%	78.9%	100.0%	100.0%
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	96.0%	98.1%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	96.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
↓	VTE6 HAC VTE	1.7%	2.0%	--	0.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>					
↓	PC01 Elective Delivery	0.00	0.007	--	0.000
Complications - Surgical Complications Rate					
↓	Hip and Knee Complications	0.0	0.0	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.83	--	1.09	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	135.88	--
<i>Readmissions & deaths 30 day rates of readmission %</i>					
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	19.8%	--
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	16.6%	--
↓	READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	24.2%	--
↓	READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	18.3%	--
↓	READM30 STK Stroke 30day readmission rate	9.3%	10.4%	12.1%	--
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	3.8%	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	16.3%	--
<i>Readmissions & deaths 30 day death (mortality) rates %</i>					
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	6.9%	--
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	14.7%	--
↓	MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	15.4%	--
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	19.9%	--
↓	MORT30STK Stroke 30day mortality rate	8.2%	4.7%	14.1%	--
<i>Use of medical imaging Outpatient imaging efficiency %</i>					
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	47.8%	--
↕	OP9 Mammography Followup Rates	8.0%	6.9%	17.7%	--
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	7.1%	--

FY18 June 2018

		Ballad Health		Laughlin Memorial Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	3.2%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	4.1%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	2.0%	--

FY18 June 2018

		Baseline	FYTD18	Baseline	FYTD18
Target Quality Measures Rate					
↓	PSI 3 Pressure Ulcer Rate	0.71	1.12	0.34	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.23	0.45	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.05	0.15	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.07	0.06	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	1.67	4.98	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.11	1.11	--
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	8.34	12.51	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.51	7.58	--
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.88	9.48	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.99	2.24	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.98	1.49	--
↓	CLABSI	0.774	0.652	0.000	1.149
↓	CAUTI	0.613	0.640	0.000	0.000
↓	SSI COLON Surgical Site Infection	1.17	1.901	0.00	2.222
↓	SSI HYST Surgical Site Infection	1.00	0.607	0.00	0.000
↓	MRSA	0.040	0.054	0.000	0.000
↓	CDIFF	0.585	0.623	0.124	0.415
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %					
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	80.7%	83.0%	84.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.2%	14.0%	10.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.1%	3.0%	5.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.4%	78.0%	82.5%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.0%	11.0%	10.1%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	7.0%	7.5%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	71.0%	73.0%

FY18 June 2018

Ballad Health

**Takoma Regional
Hospital**

	Baseline	FYTD18	Baseline	FYTD18
↓ HCOMP3U P Patients who reported that they “Usually” received help as soon as they wanted	25.8%	23.6%	24.0%	20.3%
↓ HCOMP3 SNP Patients who reported that they “Sometimes” or “Never” received help as soon as they wanted	9.1%	10.1%	5.0%	7.3%
↑ HCOMP4A P Patients who reported that their pain was “Always” well controlled	68.4%	69.7%	73.0%	73.0%
↓ HCOMP4U P Patients who reported that their pain was “Usually” well controlled	22.7%	22.1%	20.0%	17.0%
↓ HCOMP4 SNP Patients who reported that their pain was “Sometimes” or “Never” well controlled	9.3%	8.3%	7.0%	9.8%
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.5%	63.0%	69.9%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.6%	21.0%	11.7%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.9%	16.0%	18.4%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.6%	72.5%	77.0%	76.2%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.4%	16.8%	14.0%	15.3%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	10.8%	9.0%	10.2%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.5%	66.0%	77.8%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.8%	28.0%	13.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	9.6%	6.0%	8.4%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.2%	91.0%	91.0%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.7%	9.0%	9.0%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	50.3%	56.0%	55.0%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	41.2%	41.8%	40.0%	36.1%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.4%	3.0%	3.4%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	8.9%	7.0%	8.1%

FY18 June 2018

		Ballad Health		Takoma Regional Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	18.9%	16.0%	13.1%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	70.2%	77.0%	78.7%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	72.6%	78.0%	76.5%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	21.7%	19.0%	17.3%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	5.7%	3.0%	6.2%
Timely & Effective care Cataract Surgery Outcome %					
↑	OP31 Cataracts Improvement	--	--	--	--
Timely & Effective care Colonoscopy follow-up %					
↑	OP29 Avg Risk Polyp Surveillance	73.0%	85.6%	91.0%	68.3%
↑	OP30 High risk Polyp Surveillance	83.0%	81.3%	83.0%	96.3%
Timely & Effective Care Heart Attack					
↓	OP3b Median Time to Transfer AMI	47.4	47.5	79.0	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	9.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	99.0%	100.0%
Timely & Effective Care Stroke Care %					
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓	EDV Emergency Department Volume			MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	316.0	221.0	277.0
↓	ED2b ED Decision to Transport	124.5	60.8	29.0	53.0
↓	OP18b Avg time ED arrival to discharge	124.5	148.0	139.0	163.0
↓	OP20 Door to Diagnostic Evaluation	15.1	16.5	26.0	--
↓	OP21 Time to pain medication for long bone fractures	37.8	56.1	70.0	--
↓	OP22 Left without being seen	0.9%	0.7%	2.0%	2.5%
↑	OP23 Head CT stroke patients	63.2%	78.9%	--	--
Timely & Effective Care Preventive Care %					
↑	IMM2 Immunization for Influenza	97.4%	98.2%	100.0%	95.2%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	87.0%	--
Timely & Effective Care Blood Clot Prevention & Treatment %					
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--

FY18 June 2018

	Baseline	FYTD18	Baseline	FYTD18
↓ VTE6 HAC VTE	1.7%	2.0%	--	0.0%
<i>Timely & Effective Care Pregnancy & delivery care %</i>				
↓ PC01 Elective Delivery	0.00	0.007	0.00	0.000
Complications - Surgical Complications Rate				
↓ Hip and Knee Complications	0.0	0.0	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	1.05	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--
<i>Readmissions & deaths 30 day rates of readmission %</i>				
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	19.1%	3.2%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	21.3%	8.6%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	17.1%	12.2%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	12.2%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	4.5%	7.4%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.4%	15.2%	3.9%
<i>Readmissions & deaths 30 day death (mortality) rates %</i>				
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.5%	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.2%	8.9%	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	3.5%	--	--
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	12.5%	--
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.2%	14.1%	--
↓ MORT30STK Stroke 30day mortality rate	8.2%	4.7%	15.1%	--
<i>Use of medical imaging Outpatient imaging efficiency %</i>				
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	17.7%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	6.9%	--

FY18 June 2018

		Ballad Health		Takoma Regional Hospital	
		Baseline	FYTD18	Baseline	FYTD18
↕	OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	1.3%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	9.4%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	0.71	0.00	1.63	1.00	1.12
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.40	0.15	0.20	0.23
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.15	0.00	0.00	0.00	0.05
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.89	0.00	0.00	0.07
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.15	2.35	1.95	1.34	1.67
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.00	0.89	0.00	0.00	0.11
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	6.73	9.07	8.03	8.34
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.21	3.83	2.49	3.51
↓	PSI 13 Postoperative Sepsis Rate	8.81	4.65	3.39	2.19	3.88
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.98	1.52	0.80	0.99
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	1.60	0.69	0.72	0.98
↓	CLABSI	0.774	0.721	0.601	0.770	0.652
↓	CAUTI	0.613	0.658	0.738	0.379	0.640
↓	SSI COLON Surgical Site Infection	1.166	2.510	2.174	1.117	1.901
↓	SSI HYST Surgical Site Infection	0.996	0.000	0.526	0.000	0.607
↓	MRSA	0.040	0.037	0.054	0.040	0.054
↓	CDIFF	0.585	0.705	0.608	0.888	0.623

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS)

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	77.5%	76.8%	77.0%	80.7%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.1%	13.9%	14.4%	14.2%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.2%	5.4%	5.3%	5.1%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	79.6%	80.1%	80.0%	80.4%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.1%	14.7%	13.9%	14.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	6.3%	5.3%	6.1%	5.9%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	68.0%	65.9%	66.5%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.8%	23.3%	23.5%	23.8%	23.6%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.1%	9.7%	9.7%	10.3%	10.1%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.4%	68.6%	70.9%	--	69.7%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.7%	23.1%	21.0%	--	22.1%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.3%	8.7%	7.8%	--	8.3%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	64.1%	64.9%	65.0%	63.3%	64.5%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	19.9%	16.4%	16.1%	17.0%	16.6%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.7%	18.7%	18.8%	19.5%	18.9%
↑ clean	73.6%	72.2%	73.5%	72.2%	72.5%
↓ “Usually” clean	16.4%	16.6%	16.6%	17.1%	16.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.5%	11.3%	9.8%	10.8%	10.8%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.7%	62.2%	64.0%	58.9%	62.5%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	27.5%	27.4%	31.5%	27.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.6%	10.3%	9.0%	9.6%	9.6%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	87.1%	87.8%	83.3%	86.2%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.9%	12.2%	12.6%	12.7%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.1%	51.0%	51.4%	49.1%	50.3%
↓ hospital	41.2%	40.7%	41.0%	42.5%	41.8%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.5%	5.0%	5.3%	5.4%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	9.6%	9.1%	9.6%	8.9%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	19.2%	18.5%	20.0%	18.9%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	68.8%	70.0%	66.9%	70.2%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	71.3%	71.4%	72.4%	69.4%	72.6%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	22.2%	22.9%	22.4%	24.3%	21.7%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	6.6%	5.9%	6.3%	5.7%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	73.0%	84.8%	78.3%	95.0%	85.6%
↑ OP30 High risk Polyp Surveillance	83.0%	90.7%	86.3%	90.0%	81.3%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	47.4	24.7	25.4	--	47.5
↓ OP5 Median Time to ECG AMI and Chest Pain	5.2	--	--	--	11.3
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	97.0%	97.2%	99.1%	--	98.1%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume					
↓ ED1b ED Door to Transport	227.3	824.2	274.4	--	316.0
↓ ED2b ED Decision to Transport	124.5	82.4	89.7	89.7	60.8
↓ OP18b Avg time ED arrival to discharge	124.5	122.2	96.6	--	148.0
↓ OP20 Door to Diagnostic Evaluation	15.1	21.1	16.4	--	16.5
↓ OP21 Time to pain medication for long bone fracture	37.8	54.0	49.3	49.3	56.1
↓ OP22 Left without being seen	0.9%	1.1%	0.8%	0.5%	0.7%
↑ OP23 Head CT stroke patients	63.2%	88.9%	80.0%	55.0%	78.9%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	97.4%	--	98.2%	98.1%	98.2%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	98.0%	98.0%	98.0%
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	1.7%	4.5%	2.6%	0.0%	2.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.30%	0.00%	0.00%	0.00%	0.72%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.8	--	--	--	--
↓ complications	140.6	164.3	192.6	169.6	176.7
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.6%	19.4%	18.9%	19.4%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	13.7%	12.7%	10.4%	12.9%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	24.9%	23.0%	21.8%	23.6%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	17.5%	17.3%	14.6%	16.7%
↓ READM30 STK Stroke 30day readmission rate	9.3%	11.1%	11.3%	5.7%	10.4%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.7%	3.9%	3.9%	12.5%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.9%	13.1%	13.6%	3.8%



FY18 June 2018

		Ballad Health				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓	rate2	8.7%	12.1%	12.4%	14.8%	12.4%
Readmissions & deaths 30 day death (mortality) rates						
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.1%	5.2%	1.8%	2.5%
↓	MORT30 COPD 30day mortality rate COPD patients	1.8%	2.5%	2.3%	2.9%	2.2%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	4.2%	5.0%	5.6%	3.5%
↓	MORT30HF Heart failure 30day mortality rate	3.9%	2.5%	2.7%	3.9%	3.0%
↓	MORT30PN Pneumonia 30day mortality rate	4.7%	4.0%	5.9%	5.8%	4.2%
↓	MORT30STK Stroke 30day mortality rate	8.2%	5.1%	7.0%	4.3%	4.7%
Use of medical imaging Outpatient imaging efficiency						
↕	OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.0%	34.0%	--	34.1%
↕	OP9 Mammography Followup Rates	8.0%	--	--	--	6.9%
↕	OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	7.0%	6.8%	7.0%
↕	OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	--	0.7%
↕	OP12 Outpatients with CT scans who got contrast imaging on the same date as their outpatient surgery	3.0%	4.0%	4.0%	--	3.8%
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	1.0%	--	1.0%

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	0.30	0.00	0.00	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.00	0.00	0.00	0.24
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.15	--	--	--	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.98	0.00	0.24
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.37	0.00	0.00	4.44	2.45
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.09	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	12.09	35.40	16.13	16.39	17.02
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.36	0.00	0.00	4.27	2.34
↓	PSI 13 Postoperative Sepsis Rate	0.00	34.48	0.00	7.58	8.35
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.15	0.00	0.00	7.04	1.79
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.45	3.64	0.00	0.00	0.87
↓	CLABSI	0.000	0.000	3.922	0.000	0.910
↓	CAUTI	0.428	1.538	0.000	0.000	0.434
↓	SSI COLON Surgical Site Infection	1.504	8.824	2.778	0.000	5.109
↓	SSI HYST Surgical Site Infection	0.000	0.000	1.754	0.000	1.198
↓	MRSA	0.039	0.000	0.000	0.000	0.000
↓	CDIFF	0.259	0.868	0.000	0.000	0.252

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.0%	83.5%	81.8%	82.7%	83.6%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.0%	13.3%	14.0%	13.1%	13.1%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	3.2%	4.2%	4.2%	3.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.0%	82.5%	79.9%	82.4%	82.4%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	15.0%	12.8%	15.2%	14.6%	13.8%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	4.0%	4.6%	4.9%	3.0%	4.2%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	72.0%	71.2%	70.0%	70.7%	72.1%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	21.0%	22.8%	22.4%	21.0%	21.2%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	7.0%	6.0%	7.5%	8.3%	6.9%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	76.0%	74.1%	72.0%	--	73.1%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	19.0%	21.6%	22.9%	--	22.2%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.0%	4.3%	5.0%	--	4.7%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	68.0%	70.7%	65.4%	68.6%	69.6%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	16.0%	15.5%	18.2%	14.4%	15.4%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	16.0%	12.7%	18.3%	15.8%	15.4%
↑ clean	83.0%	84.4%	83.0%	82.8%	84.2%
↓ “Usually” clean	13.0%	10.8%	9.5%	12.8%	11.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	4.0%	4.7%	7.6%	4.4%	4.8%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	74.0%	72.7%	71.7%	74.4%	72.7%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	22.0%	23.9%	23.9%	20.9%	23.3%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	4.0%	3.5%	4.4%	4.7%	3.7%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	85.4%	87.4%	86.1%	86.5%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	14.6%	12.6%	13.9%	13.4%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	61.0%	57.5%	57.0%	59.0%	58.9%
↓ hospital	34.0%	32.7%	34.0%	33.8%	33.0%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	5.0%	5.7%	5.6%	4.4%	5.0%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	4.0%	5.4%	6.9%	6.5%	5.3%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	14.0%	14.5%	11.9%	13.9%	13.9%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	82.0%	80.1%	81.1%	79.6%	81.1%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	85.0%	83.9%	85.1%	83.5%	85.0%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	13.0%	12.3%	10.5%	11.8%	11.5%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	2.0%	3.8%	4.4%	4.7%	3.6%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	78.0%	100.0%	100.0%	--	100.0%
↑ OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	38.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	8.0	9.2	27.3	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	98.0%	96.4%	93.8%	100.0%	96.4%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	234.0	260.0	231.0	--	131.8
↓ ED2b ED Decision to Transport	106.4	79.0	66.0	--	74.0
↓ OP18b Avg time ED arrival to discharge	130.0	147.0	134.5	--	139.0
↓ OP20 Door to Diagnostic Evaluation	16.0	11.0	11.0	--	--
↓ OP21 Time to pain medication for long bone fracture	36.0	49.5	43.0	--	--
↓ OP22 Left without being seen	1.0%	0.8%	0.3%	0.6%	0.6%
↑ OP23 Head CT stroke patients	66.7%	100.0%	--	--	100.0%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	99.0%	--	99.6%	99.4%	99.5%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	--	33.3%	0.0%	--	25.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.8	1.1	1.1	--	--
↓ complications	--	71.4	0.0	0.0	27.0
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	10.1%	14.8%	7.7%	23.5%	15.4%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	0.0%	0.0%	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	9.7%	25.0%	15.8%	20.0%	19.6%
↓ READM30PN Pneumonia 30day readmission rate	16.3%	10.5%	5.0%	11.9%	9.5%
↓ READM30 STK Stroke 30day readmission rate	0.0%	0.0%	--	0.0%	0.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	4.6%	7.3%	5.9%	7.9%	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	9.5%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	2.6%	0.0%	3.0%	1.5%	1.1%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	0.0%	0.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	2.1%	0.0%	0.0%	4.8%	2.5%
↓ MORT30PN Pneumonia 30day mortality rate	2.0%	1.7%	2.4%	1.6%	2.7%
↓ MORT30STK Stroke 30day mortality rate	--	0.0%	--	0.0%	0.0%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	33.9%	33.9%	33.9%	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	12.7%	12.7%	12.7%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	--	--
↕ surgery	1.6%	1.6%	1.6%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	0.26	0.00	0.00	0.00	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.26	0.67	0.17	0.00	0.25
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.10	0.00	0.00	--	0.11
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	3.60	0.80	0.73	1.49	1.13
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.08	1.88	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	11.98	0.00	8.26	2.17	6.57
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.85	2.93	5.98	3.42	3.63
↓ PSI 13 Postoperative Sepsis Rate	14.88	1.91	1.65	1.71	3.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.35	3.37	2.95	0.00	1.54
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	1.54	0.00	0.00	0.74
↓ CLABSI	1.080	0.623	1.456	1.620	1.132
↓ CAUTI	0.997	1.281	1.875	0.573	1.498
↓ SSI COLON Surgical Site Infection	1.911	0.000	2.778	0.000	1.515
↓ SSI HYST Surgical Site Infection	2.500	0.000	0.000	0.000	0.000
↓ MRSA	0.055	0.057	0.058	0.085	0.073
↓ CDI/F	0.531	0.552	0.599	--	0.496

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	77.0%	78.4%	77.0%	77.4%	76.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	17.0%	15.7%	16.6%	17.4%	17.1%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	6.0%	5.9%	6.4%	5.3%	6.0%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	77.0%	76.7%	75.1%	75.6%	76.4%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	18.0%	16.0%	19.4%	17.5%	17.6%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.0%	7.4%	5.5%	6.9%	6.8%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	66.0%	63.6%	62.8%	63.0%	62.8%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.0%	24.5%	26.1%	26.2%	26.0%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.0%	11.8%	11.1%	10.8%	11.2%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	66.0%	63.5%	66.9%	--	65.0%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.0%	26.6%	24.6%	--	25.7%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.0%	10.0%	8.5%	--	9.3%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	60.0%	59.8%	61.3%	59.3%	60.4%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	18.0%	17.9%	17.2%	18.7%	17.8%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	22.0%	22.3%	21.5%	22.0%	21.7%
↑ clean	62.0%	65.2%	65.1%	65.1%	65.0%
↓ "Usually" clean	24.0%	19.1%	22.0%	19.5%	20.4%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	14.0%	15.7%	13.0%	15.4%	14.7%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	52.0%	51.5%	53.2%	48.2%	50.1%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	37.0%	33.1%	33.2%	38.5%	36.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	11.0%	15.4%	13.6%	13.3%	13.7%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.0%	85.8%	84.9%	85.8%	81.8%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	16.0%	14.2%	15.1%	14.2%	14.3%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	48.0%	48.0%	47.7%	45.8%	46.4%
↓ hospital	47.0%	41.6%	43.2%	43.6%	43.2%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.0%	6.8%	5.8%	7.1%	6.9%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10.0%	13.4%	12.5%	11.9%	12.7%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	24.0%	23.3%	20.0%	24.9%	23.7%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	66.0%	63.2%	67.5%	63.1%	63.6%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	65.0%	63.4%	65.0%	63.5%	63.1%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	29.0%	28.0%	27.5%	29.1%	29.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.0%	8.5%	7.5%	7.3%	7.9%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	67.0%	100.0%	100.0%	--	100.0%
↑ OP30 High risk Polyp Surveillance	68.0%	100.0%	100.0%	100.0%	100.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	--	7.0	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	--	--	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH
↓ ED1b ED Door to Transport	245.0	255.3	257.0	--	260.0
↓ ED2b ED Decision to Transport	95.0	75.5	96.5	--	96.0
↓ OP18b Avg time ED arrival to discharge	152.0	152.0	148.0	--	153.0
↓ OP20 Door to Diagnostic Evaluation	19.0	5.0	4.0	--	--
↓ OP21 Time to pain medication for long bone fracture	35.0	40.0	37.0	--	--
↓ OP22 Left without being seen	1.0%	0.9%	0.7%	0.8%	0.7%
↑ OP23 Head CT stroke patients	0.0%	100.0%	--	0.0%	50.0%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	96.0%	--	98.2%	97.8%	98.1%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	7.7%	0.0%	0.0%	3.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.1	1.0	--	--
↓ complications	153.5	130.4	231.6	197.8	192.2
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	20.1%	20.2%	13.8%	16.0%	16.9%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	13.5%	12.7%	12.6%	12.3%	12.5%
↓ READM30HF Heart Failure 30Day readmissions rate	22.6%	24.1%	22.8%	26.3%	24.4%
↓ READM30PN Pneumonia 30day readmission rate	18.8%	15.3%	17.2%	15.6%	16.0%
↓ READM30 STK Stroke 30day readmission rate	9.4%	4.1%	15.6%	6.8%	8.4%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.0%	1.6%	3.0%	3.9%	11.3%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	10.6%	11.8%	12.4%	12.4%	2.8%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	8.7%	15.5%	7.8%	9.8%	13.3%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	1.2%	3.3%	3.8%	2.4%	2.8%
↓ MORT30 COPD 30day mortality rate COPD patients	2.3%	3.5%	4.2%	5.1%	3.1%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.8%	6.8%	6.4%	7.5%	3.6%
↓ MORT30HF Heart failure 30day mortality rate	4.2%	2.1%	4.8%	6.6%	5.0%
↓ MORT30PN Pneumonia 30day mortality rate	5.1%	6.5%	7.9%	10.4%	5.4%
↓ MORT30STK Stroke 30day mortality rate	7.7%	9.3%	15.9%	6.4%	7.9%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	35.4%	35.4%	35.4%	--	--
↕ OP9 Mammography Followup Rates	5.8%	5.8%	5.8%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	4.6%	4.6%	4.6%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.2%	0.2%	0.2%	--	--
↕ Outpatients who got cardiac imaging services before returning to outpatient surgery	2.9%	2.9%	2.9%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.8%	2.8%	2.8%	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	--	--	--	--	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	--	--	--	--	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	--	--	--	--	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	--	--	--	--	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	--	--	--	--	--
↓	CLABSI	--	--	--	--	--
↓	CAUTI	--	--	--	--	--
↓	SSI COLON Surgical Site Infection	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--
↓	MRSA	--	--	--	--	--
↓	CDIFF	--	--	--	--	--

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	--	100.0%	100.0%	0.0%	57.1%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	--	0.0%	0.0%	100.0%	42.9%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	--	100.0%	100.0%	100.0%	100.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	--	0.0%	0.0%	0.0%	0.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	--	100.0%	100.0%	100.0%	100.0%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	--	100.0%	100.0%	--	100.0%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	--	0.0%	0.0%	--	0.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	--	0.0%	0.0%	--	0.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	--	100.0%	100.0%	--	100.0%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	--	0.0%	0.0%	--	0.0%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	--	0.0%	--	0.0%	0.0%
↑ clean	--	100.0%	100.0%	100.0%	100.0%
↓ “Usually” clean	--	0.0%	0.0%	0.0%	0.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	--	0.0%	0.0%	0.0%	0.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	--	100.0%	100.0%	100.0%	100.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	--	0.0%	0.0%	0.0%	0.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	--	0.0%	0.0%	0.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	--	100.0%	100.0%	100.0%	100.0%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	--	0.0%	0.0%	0.0%	0.0%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	--	77.8%	33.3%	33.3%	52.4%
↓ hospital	--	22.2%	33.3%	66.7%	33.3%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	--	0.0%	33.3%	0.0%	4.8%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	--	33.3%	0.0%	0.0%	14.3%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	--	0.0%	0.0%	0.0%	0.0%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	--	66.7%	100.0%	100.0%	85.7%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	--	100.0%	100.0%	50.0%	85.7%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	--	0.0%	0.0%	50.0%	28.6%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	--	0.0%	0.0%	0.0%	0.0%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	--	--
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--

		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack						
↓	OP3b Median Time to Transfer AMI	--	--	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	--	11.7	11.6	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care						
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput						
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	--	96.0	88.5	--	136.0
↓	ED2b ED Decision to Transport	--	2.0	8.0	--	27.5
↓	OP18b Avg time ED arrival to discharge	--	93.5	104.5	--	103.0
↓	OP20 Door to Diagnostic Evaluation	--	3.7	5.0	--	--
↓	OP21 Time to pain medication for long bone fracture	--	71.5	49.0	--	--
↓	OP22 Left without being seen	1.0%	0.4%	0.8%	0.7%	0.8%
↑	OP23 Head CT stroke patients	25.0%	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Preventive Care						
↑	IMM2 Immunization for Influenza	--	--	100.0%	100.0%	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	--	--	--	--	--
Timely & Effective Care Blood Clot Prevention & Treatment						
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓	VTE6 HAC VTE	--	--	--	--	--
Timely & Effective Care Pregnancy & delivery care						
↓	PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications						
↓	Hip and Knee Complications2	--	--	--	--	--
↓	PSI90 Complications / patient safety for selected indicators	--	--	--	--	--
↓	complications	--	--	--	--	--
Readmissions & deaths 30 day rates of readmission						
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--
↓	READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--
↓	READM30PN Pneumonia 30day readmission rate	--	--	--	--	--
↓	READM30 STK Stroke 30day readmission rate	--	--	--	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--
↓	READM30 HOSPOWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	--
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	--	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	--	--	--	--	--
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	--	--	--	--	--
↕ OP12 Outpatients who got cardiac imaging services before returning to outpatient surgery	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

Target Quality Measures

Baseline FY18Q1 FY18Q2 FY18Q3 FYTD18

↓	PSI 3 Pressure Ulcer Rate	--	0.00	0.00	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	--	0.00	0.00	0.00	0.00
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	--	0.00	0.00	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	--	0.00	0.00	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	--	--	--	--	--
↓	CLABSI	--	--	--	--	--
↓	CAUTI	--	--	--	--	--
↓	SSI COLON Surgical Site Infection	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--
↓	MRSA	--	--	--	--	--
↓	CDIFF	--	--	--	--	--
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider						
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	90.0%	77.8%	95.5%	91.4%	92.4%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	8.0%	11.1%	4.5%	2.9%	7.6%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	2.0%	11.1%	0.0%	5.7%	5.7%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	92.0%	77.8%	69.6%	91.4%	86.8%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	6.0%	22.2%	21.7%	2.9%	9.4%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	2.0%	0.0%	8.7%	5.7%	3.8%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	95.0%	100.0%	100.0%	94.1%	96.2%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	4.0%	0.0%	0.0%	5.9%	3.8%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	1.0%	0.0%	0.0%	0.0%	0.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	89.0%	33.3%	33.3%	--	33.3%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	5.0%	33.3%	16.7%	--	25.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	1.0%	33.3%	50.0%	--	41.7%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	77.0%	50.0%	100.0%	90.9%	88.9%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	18.0%	0.0%	0.0%	9.1%	3.7%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	5.0%	50.0%	0.0%	0.0%	7.4%
↑ clean	86.0%	100.0%	87.5%	100.0%	94.7%
↓ "Usually" clean	14.0%	0.0%	0.0%	0.0%	2.6%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	0.0%	0.0%	12.5%	0.0%	2.9%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	79.0%	66.7%	62.5%	92.3%	86.5%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	18.0%	33.3%	37.5%	7.7%	13.5%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	3.0%	0.0%	0.0%	0.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	92.0%	50.0%	83.3%	89.5%	86.2%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	8.0%	50.0%	16.7%	10.5%	13.8%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	70.0%	50.0%	65.2%	58.6%	50.5%
↓ hospital	22.0%	25.0%	21.7%	41.4%	43.2%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	8.0%	25.0%	13.0%	0.0%	6.3%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	13.0%	33.3%	12.5%	0.0%	5.9%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	7.0%	0.0%	0.0%	9.1%	2.9%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	80.0%	66.7%	87.5%	90.9%	91.2%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	81.0%	66.7%	57.1%	91.7%	84.8%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	9.0%	0.0%	14.3%	8.3%	6.1%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	10.0%	33.3%	0.0%	0.0%	3.0%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	--	--
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	--	8.5	21.0	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	--	--	--	--	--
↓ ED2b ED Decision to Transport	102.0	--	--	--	61.0
↓ OP18b Avg time ED arrival to discharge	--	118.0	117.0	--	128.0
↓ OP20 Door to Diagnostic Evaluation	--	28.0	22.0	--	--
↓ OP21 Time to pain medication for long bone fracture	--	37.0	57.0	--	--
↓ OP22 Left without being seen	1.0%	0.3%	0.7%	--	0.5%
↑ OP23 Head CT stroke patients	--	--	--	--	--
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	--	--	--	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	100.0%	100.0%	100.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications					
↓ Hip and Knee Complications2	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	--	1.0	1.0	1.0	1.0
↓ complications	--	--	--	--	--
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	0.0%	75.0%	20.0%	30.8%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	--	0.0%	0.0%	0.0%	0.0%
↓ READM30PN Pneumonia 30day readmission rate	17.0%	0.0%	0.0%	0.0%	0.0%
↓ READM30 STK Stroke 30day readmission rate	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	15.6%	18.2%	16.3%	2.3%	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	11.4%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	0.0%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	16.9%	16.7%	0.0%	0.0%	2.4%
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	--	--	--	--	--
↕ OP12 Outpatients who got cardiac imaging services before returning to outpatient surgery	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	0.45	0.00	0.00	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.40	0.00	0.00	0.00	0.00
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.17	0.00	0.00	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	--	0.00	0.00	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	--	0.00	0.00	0.00	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	--	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	--	0.00	0.00	0.00	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	0.00	0.00	0.00	0.00
↓	PSI 13 Postoperative Sepsis Rate	--	0.00	0.00	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	0.00	0.00	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.36	0.00	0.00	0.00	12.99
↓	CLABSI	0.000	0.000	0.000	0.000	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	1.623
↓	SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000
↓	SSI HYST Surgical Site Infection	--	--	--	--	--
↓	MRSA	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	0.000	0.000	1.025	0.000	0.260

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	87.0%	81.4%	84.8%	78.3%	83.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	11.0%	10.9%	8.6%	15.9%	11.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	2.0%	7.7%	6.6%	5.7%	5.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	92.0%	78.6%	81.7%	71.3%	79.8%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	7.0%	8.8%	11.8%	14.6%	10.7%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	1.0%	12.6%	6.5%	14.0%	9.5%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	78.0%	73.4%	80.3%	73.4%	76.3%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.0%	19.0%	15.2%	13.9%	16.0%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	2.0%	7.6%	4.5%	12.7%	7.7%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	81.0%	70.0%	63.6%	--	67.5%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	13.0%	15.7%	22.7%	--	18.4%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.0%	14.3%	13.6%	--	14.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	83.0%	66.7%	77.8%	55.3%	70.2%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	10.0%	11.9%	8.3%	27.7%	17.1%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	7.0%	21.4%	13.9%	17.0%	18.3%
↑ clean	86.0%	82.7%	84.3%	81.1%	77.6%
↓ “Usually” clean	9.0%	13.5%	13.7%	9.4%	10.2%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	5.0%	5.8%	2.0%	9.4%	12.8%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	74.0%	79.2%	77.6%	77.4%	76.4%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	23.0%	15.1%	12.2%	15.1%	14.4%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	3.0%	5.7%	10.2%	7.5%	9.2%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	92.0%	83.3%	89.5%	84.8%	87.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	8.0%	16.7%	10.5%	15.2%	12.7%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	55.0%	56.8%	53.0%	48.6%	51.3%
↓ hospital	41.0%	39.0%	43.2%	45.8%	44.7%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	4.0%	4.1%	3.8%	5.6%	4.0%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	5.0%	10.2%	14.3%	8.0%	9.1%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	21.0%	16.3%	16.3%	28.0%	18.8%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	74.0%	73.5%	69.4%	64.0%	72.0%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	76.0%	66.0%	75.6%	62.5%	67.4%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	21.0%	26.0%	17.8%	35.4%	27.6%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	8.0%	6.7%	2.1%	5.0%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	97.0%	100.0%	100.0%	100.0%	100.0%
↑ OP30 High risk Polyp Surveillance	95.0%	90.9%	100.0%	100.0%	96.6%

		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack						
↓	OP3b Median Time to Transfer AMI	--	26.0	171.0	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	9.0	9.5	13.0	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	--	100.0%
Timely & Effective Care Stroke Care						
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput						
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	175.0	222.0	207.0	--	215.0
↓	ED2b ED Decision to Transport	49.0	37.0	49.0	--	42.0
↓	OP18b Avg time ED arrival to discharge	80.0	--	--	--	91.0
↓	OP20 Door to Diagnostic Evaluation	14.0	13.0	14.0	--	--
↓	OP21 Time to pain medication for long bone fracture	38.0	--	--	--	--
↓	OP22 Left without being seen	0.0%	2.7%	1.8%	--	2.2%
↑	OP23 Head CT stroke patients	50.0%	--	--	--	--
Timely & Effective Care Preventive Care						
↑	IMM2 Immunization for Influenza	97.0%	--	100.0%	100.0%	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment						
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓	VTE6 HAC VTE	1.0%	--	--	--	--
Timely & Effective Care Pregnancy & delivery care						
↓	PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications						
↓	Hip and Knee Complications2	--	--	--	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.9	1.0	1.0	1.0	1.0
↓	complications	--	--	--	--	--
Readmissions & deaths 30 day rates of readmission						
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.6%	13.6%	4.2%	22.2%	12.5%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	0.0%	100.0%	0.0%	50.0%
↓	READM30HF Heart Failure 30Day readmissions rate	21.1%	25.0%	14.3%	10.0%	16.0%
↓	READM30PN Pneumonia 30day readmission rate	16.8%	8.3%	12.5%	11.9%	11.6%
↓	READM30 STK Stroke 30day readmission rate	--	0.0%	0.0%	50.0%	12.5%
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	14.6%	12.1%	12.4%	18.2%	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	13.9%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	4.3%	1.4%
↓ MORT30PN Pneumonia 30day mortality rate	2.6%	0.0%	2.6%	0.0%	0.7%
↓ MORT30STK Stroke 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	3.7%	3.7%	3.7%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	6.0%	6.0%	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.2%	3.2%	3.2%	--	--
↕ surgery	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	1.07	0.00	4.72	3.45	3.21
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.57	0.48	0.24	0.71	0.48
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.16	0.00	0.00	0.00	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.26	0.07
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.04	4.10	1.44	0.00	0.92
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.87	1.40	0.00	0.00	0.31
↓ PSI 11 Postoperative Respiratory Failure Rate	16.84	3.85	8.10	1.68	6.40
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	6.14	4.46	4.73	0.70	3.77
↓ PSI 13 Postoperative Sepsis Rate	9.47	5.78	2.47	1.29	3.57
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.42	0.00	3.37	0.00	1.70
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.62	4.27	0.00	1.68	1.59
↓ CLABSI	0.682	0.667	0.000	0.304	0.334
↓ CAUTI	0.938	0.307	0.530	0.535	0.496
↓ SSI COLON Surgical Site Infection	1.364	1.754	1.724	0.000	1.282
↓ SSI HYST Surgical Site Infection	0.641	0.000	0.000	0.000	0.292
↓ MRSA	0.012	0.000	0.091	0.000	0.034
↓ CDI/F	0.741	0.688	0.997	1.610	1.056

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	81.0%	80.8%	81.6%	80.3%	81.3%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	16.0%	13.8%	11.4%	13.1%	12.8%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	5.4%	7.0%	6.6%	5.9%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	82.0%	80.2%	80.8%	79.9%	81.0%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	15.0%	13.3%	12.0%	12.0%	12.0%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.0%	6.4%	7.2%	8.1%	7.0%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	66.0%	65.8%	66.7%	61.1%	65.6%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	26.0%	23.5%	23.2%	27.7%	23.8%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	10.7%	10.1%	11.2%	10.5%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	73.0%	71.9%	71.5%	--	71.7%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	21.0%	18.8%	22.1%	--	20.4%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.0%	9.3%	6.4%	--	7.9%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	63.0%	71.4%	69.4%	63.1%	66.9%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	17.0%	12.5%	14.6%	18.0%	16.3%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	20.0%	16.1%	16.0%	18.9%	16.8%
↑ clean	66.0%	68.2%	66.5%	68.5%	66.5%
↓ "Usually" clean	21.0%	18.0%	19.3%	21.8%	19.1%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	13.0%	13.8%	14.2%	12.1%	14.1%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	63.0%	61.2%	66.5%	65.4%	64.9%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	29.0%	24.5%	25.1%	24.6%	24.4%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	8.0%	14.2%	8.5%	10.0%	10.7%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.0%	88.7%	90.7%	92.0%	90.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	13.0%	11.3%	9.3%	8.0%	9.7%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	54.0%	55.0%	56.2%	51.4%	53.9%
↓ hospital	40.0%	41.8%	39.1%	44.9%	42.5%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	3.2%	4.7%	3.7%	3.5%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.0%	6.6%	7.7%	7.9%	7.2%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.0%	21.5%	16.8%	16.1%	18.0%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	74.0%	71.8%	75.6%	76.0%	74.9%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	78.0%	79.5%	79.0%	78.2%	79.8%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	19.0%	16.8%	17.2%	16.5%	16.1%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	3.8%	3.8%	5.4%	4.1%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	--	50.0%	76.9%	100.0%	73.7%
↑ OP30 High risk Polyp Surveillance	62.0%	90.0%	100.0%	100.0%	95.7%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	--	--	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	--	--	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	83.0%	83.3%	83.3%	100.0%	85.7%
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH
↓ ED1b ED Door to Transport	340.0	352.0	431.0	--	434.0
↓ ED2b ED Decision to Transport	186.0	111.0	130.0	--	143.0
↓ OP18b Avg time ED arrival to discharge	153.0	--	--	--	175.0
↓ OP20 Door to Diagnostic Evaluation	24.0	--	--	--	--
↓ OP21 Time to pain medication for long bone fracture	52.0	--	--	--	--
↓ OP22 Left without being seen	1.0%	2.3%	1.7%	--	2.0%
↑ OP23 Head CT stroke patients	78.6%	100.0%	90.0%	0.0%	86.7%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	95.0%	--	98.2%	97.8%	98.1%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	94.0%	96.0%	96.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	56.0%	--	--	--	--
↓ VTE6 HAC VTE	3.0%	0.0%	10.0%	0.0%	3.6%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.0	0.0	--	0.0
↓ PSI90 Complications / patient safety for selected indicators	1.1	0.9	1.0	0.6	0.8
↓ complications	130.2	200.0	229.5	117.6	185.2
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.7%	17.8%	21.0%	21.3%	20.1%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	8.5%	9.6%	15.4%	15.0%	13.3%
↓ READM30HF Heart Failure 30Day readmissions rate	21.6%	24.5%	18.9%	23.8%	22.2%
↓ READM30PN Pneumonia 30day readmission rate	19.4%	15.3%	16.6%	17.3%	16.6%
↓ READM30 STK Stroke 30day readmission rate	14.6%	13.0%	8.5%	9.1%	10.1%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	4.2%	3.3%	4.2%	5.0%	8.5%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.7%	12.0%	11.8%	12.3%	4.2%

		Holston Valley Medical Center				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓	rate2	8.0%	5.2%	12.3%	8.2%	12.0%
Readmissions & deaths 30 day death (mortality) rates						
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	1.4%	1.7%	3.3%	3.2%	2.4%
↓	MORT30 COPD 30day mortality rate COPD patients	1.4%	2.6%	1.8%	1.7%	2.3%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.5%	1.1%	3.1%	3.3%	2.4%
↓	MORT30HF Heart failure 30day mortality rate	3.8%	3.0%	3.6%	1.2%	2.6%
↓	MORT30PN Pneumonia 30day mortality rate	2.6%	4.8%	6.0%	6.6%	5.4%
↓	MORT30STK Stroke 30day mortality rate	17.4%	3.6%	4.0%	2.6%	3.3%
Use of medical imaging Outpatient imaging efficiency						
↕	OP8 MRI Lumbar Spine for Low Back Pain	43.1%	43.1%	43.1%	--	--
↕	OP9 Mammography Followup Rates	2.9%	2.9%	2.9%	--	--
↕	OP10 Abdomen CT Use of Contrast Material	14.3%	14.3%	14.3%	--	--
↕	OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	--	--
↕	OP13 Outpatients who got cardiac imaging services before returning to outpatient surgery	4.4%	4.4%	4.4%	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	0.23	0.00	0.00	0.00	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.45	0.00	0.00	0.94	0.26
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.14	--	--	--	0.34
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.78	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.10	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	12.36	0.00	9.52	9.62	7.69
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.38	0.00	4.17	4.15	4.30
↓ PSI 13 Postoperative Sepsis Rate	9.09	8.85	9.35	0.00	10.23
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.20	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.38	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	0.000	0.000	6.667	0.000	1.695
↓ SSI HYST Surgical Site Infection	7.143	0.000	0.000	0.000	0.000
↓ MRSA	0.080	0.000	0.000	0.261	0.048
↓ CDI/F	0.813	0.640	0.918	--	0.507

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.0%	79.7%	81.0%	78.8%	80.2%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	16.4%	14.8%	15.8%	15.6%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	3.9%	4.2%	5.4%	4.2%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	85.0%	82.1%	82.1%	82.0%	82.6%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	10.0%	13.8%	14.1%	12.5%	13.0%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.0%	4.1%	3.8%	5.5%	4.2%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	65.0%	68.4%	69.2%	60.9%	65.8%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.0%	25.3%	21.4%	26.2%	24.9%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.0%	6.3%	9.4%	12.9%	9.3%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	72.0%	70.4%	79.8%	--	74.6%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	24.7%	16.4%	--	21.0%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.0%	4.9%	3.8%	--	4.4%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	63.0%	63.0%	62.1%	63.5%	63.8%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	18.0%	19.5%	16.8%	16.5%	17.4%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	19.0%	17.5%	21.1%	20.0%	18.8%
↑ clean	74.0%	82.3%	79.7%	80.8%	81.0%
↓ “Usually” clean	16.0%	12.2%	17.0%	14.8%	14.4%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.0%	5.5%	3.3%	4.4%	4.6%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	66.0%	64.6%	65.7%	66.9%	66.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	28.0%	29.8%	26.0%	24.2%	26.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	6.0%	5.5%	8.3%	9.0%	7.2%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	88.4%	87.9%	83.5%	87.1%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	11.6%	12.1%	16.5%	12.9%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	55.0%	53.8%	51.4%	46.0%	50.7%
↓ hospital	40.0%	36.1%	37.2%	43.0%	40.0%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	5.0%	4.7%	6.4%	6.3%	5.1%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.0%	6.7%	6.5%	10.5%	7.7%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.0%	16.2%	13.6%	18.8%	16.4%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	73.0%	77.1%	79.9%	70.7%	75.9%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	78.0%	79.9%	82.3%	75.7%	79.3%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	17.0%	16.2%	12.7%	17.7%	15.4%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.0%	3.9%	5.0%	6.6%	5.3%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	--	100.0%	100.0%	--	100.0%
↑ OP30 High risk Polyp Surveillance	73.0%	100.0%	100.0%	--	100.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	4.0	30.0	58.0	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	93.0%	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	220.0	217.0	205.5	--	102.0
↓ ED2b ED Decision to Transport	78.0	72.2	63.0	--	67.0
↓ OP18b Avg time ED arrival to discharge	121.0	132.0	122.0	--	130.0
↓ OP20 Door to Diagnostic Evaluation	18.0	10.0	7.0	--	--
↓ OP21 Time to pain medication for long bone fracture	32.0	47.0	40.0	--	--
↓ OP22 Left without being seen	1.0%	1.2%	0.8%	0.7%	0.9%
↑ OP23 Head CT stroke patients	--	66.7%	66.7%	0.0%	57.1%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	99.0%	--	99.2%	100.0%	99.5%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	0.0%	0.0%	0.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.1	1.0	--	--
↓ complications	135.6	125.0	66.7	0.0	68.2
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.4%	15.6%	7.9%	11.5%	11.9%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	10.4%	9.1%	10.0%	6.1%	8.5%
↓ READM30HF Heart Failure 30Day readmissions rate	18.1%	14.3%	19.6%	21.7%	18.9%
↓ READM30PN Pneumonia 30day readmission rate	14.8%	14.8%	10.9%	11.8%	12.0%
↓ READM30 STK Stroke 30day readmission rate	6.2%	10.0%	11.8%	0.0%	8.7%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.4%	0.0%	1.8%	3.6%	--
↓ READM30 HOSPOWIDE 30day hospitalwide allcause unplanned readmission	9.5%	10.1%	9.7%	9.3%	1.6%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	9.8%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	0.0%
↓ MORT30 COPD 30day mortality rate COPD patients	2.0%	2.2%	5.0%	0.0%	1.5%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.5%	8.3%	4.8%	8.6%	3.8%
↓ MORT30HF Heart failure 30day mortality rate	2.2%	0.0%	0.0%	4.2%	1.8%
↓ MORT30PN Pneumonia 30day mortality rate	2.0%	2.9%	12.0%	3.9%	4.0%
↓ MORT30STK Stroke 30day mortality rate	3.3%	0.0%	0.0%	0.0%	0.0%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	5.6%	5.6%	5.6%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	7.9%	7.9%	7.9%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	--	--
↕ surgery	1.5%	1.5%	1.5%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	1.29	0.00	0.00	0.00	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.00	0.00	0.00	0.00
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.16	0.00	0.00	0.00	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.69	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.12	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	10.64	0.00	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.61	0.00	0.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	5.82	0.00	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.26	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.34	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	3.891	1.214
↓ SSI COLON Surgical Site Infection	0.000	--	--	0.000	0.000
↓ SSI HYST Surgical Site Infection	5.556	0.000	0.000	--	0.000
↓ MRSA	0.000	0.000	0.000	0.000	0.000
↓ CDIIF	0.315	1.529	0.000	0.000	0.371

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	83.0%	83.6%	82.0%	85.7%	83.3%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	12.0%	9.6%	10.3%	6.2%	9.1%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	5.0%	6.8%	7.6%	8.1%	7.6%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	82.0%	82.0%	85.0%	81.7%	82.9%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.0%	11.7%	9.3%	10.3%	10.2%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.0%	6.3%	6.2%	7.3%	6.9%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	72.0%	78.6%	80.6%	79.3%	79.0%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.0%	15.1%	9.2%	12.1%	14.1%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	6.3%	9.2%	8.6%	7.0%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	75.0%	77.4%	79.3%	--	78.5%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	18.0%	9.5%	13.5%	--	11.5%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	7.0%	13.1%	6.0%	--	9.6%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	71.0%	77.4%	72.3%	73.3%	75.6%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	13.0%	9.4%	7.7%	10.0%	8.4%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	16.0%	13.2%	10.5%	16.7%	13.4%
↑ clean	72.0%	82.6%	86.5%	73.6%	80.5%
↓ “Usually” clean	17.0%	8.7%	8.3%	16.7%	14.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	11.0%	8.7%	5.2%	11.0%	8.2%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	66.0%	71.8%	75.5%	73.9%	74.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	27.0%	19.7%	16.3%	17.4%	17.9%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	7.0%	8.5%	8.2%	8.7%	8.1%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	85.8%	85.9%	83.9%	85.8%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	14.2%	14.1%	16.1%	14.2%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	51.0%	49.1%	45.7%	44.4%	46.7%
↓ hospital	44.0%	45.3%	50.2%	48.4%	47.6%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	5.0%	5.7%	4.1%	7.2%	5.6%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.0%	8.7%	5.3%	9.0%	7.3%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	23.0%	25.2%	25.5%	21.3%	22.7%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.0%	66.1%	69.1%	69.7%	69.3%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	70.0%	71.4%	78.0%	69.8%	72.3%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	24.0%	21.4%	17.6%	23.3%	21.7%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.0%	7.1%	4.4%	7.0%	6.0%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	31.0%	43.5%	30.0%	100.0%	41.2%
↑ OP30 High risk Polyp Surveillance	70.0%	73.3%	57.1%	60.0%	64.7%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	10.0	--	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	95.0%	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	213.0	--	--	--	244.0
↓ ED2b ED Decision to Transport	53.0	--	--	--	51.0
↓ OP18b Avg time ED arrival to discharge	120.0	--	--	--	117.0
↓ OP20 Door to Diagnostic Evaluation	23.0	--	--	--	--
↓ OP21 Time to pain medication for long bone fracture	64.0	--	--	--	--
↓ OP22 Left without being seen	0.0%	0.3%	0.3%	--	0.3%
↑ OP23 Head CT stroke patients	54.5%	66.7%	--	0.0%	50.0%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	96.0%	--	97.5%	100.0%	98.1%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	88.0%	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	5.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	--	0.0	0.0	--	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.0	1.0	1.0	0.9
↓ complications	--	0.0	0.0	--	0.0
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	28.4%	10.2%	24.5%	17.1%	16.8%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	17.2%	33.3%	0.0%	0.0%	14.3%
↓ READM30HF Heart Failure 30Day readmissions rate	32.5%	40.0%	43.8%	23.3%	32.8%
↓ READM30PN Pneumonia 30day readmission rate	24.8%	26.3%	31.3%	21.6%	26.3%
↓ READM30 STK Stroke 30day readmission rate	--	0.0%	0.0%	0.0%	0.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	0.0%	20.0%	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	16.5%	10.5%	12.8%	11.9%	11.1%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	9.1%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.2%	3.1%	0.0%	6.0%	2.1%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	2.8%	0.0%	0.0%	0.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	6.1%	0.0%	0.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	2.1%	2.1%	1.8%	4.5%	3.0%
↓ MORT30STK Stroke 30day mortality rate	14.5%	0.0%	0.0%	0.0%	0.0%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	47.7%	47.7%	47.7%	--	--
↕ OP9 Mammography Followup Rates	5.2%	5.2%	5.2%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	9.4%	9.4%	9.4%	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.9%	3.9%	3.9%	--	--
↕ Outpatients who got cardiac imaging services before returning to outpatient surgery	5.5%	5.5%	5.5%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.4%	1.4%	1.4%	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	0.33	0.00	0.00	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.38	0.00	1.66	0.00	0.54
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.15	0.00	0.00	--	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.96	0.00	0.00	0.00	0.00
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.10	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	12.33	0.00	0.00	0.00	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.14	0.00	0.00	0.00	0.00
↓	PSI 13 Postoperative Sepsis Rate	35.72	0.00	0.00	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.79	0.00	0.00	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.74	0.00	0.00	0.00	0.00
↓	CLABSI	0.000	0.000	0.000	0.000	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000
↓	SSI HYST Surgical Site Infection	0.000	0.000	0.000	--	0.000
↓	MRSA	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	0.265	0.782	0.279	0.402	0.301

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.0%	83.3%	84.3%	80.6%	82.9%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	12.8%	12.6%	15.2%	13.6%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	3.8%	3.1%	4.2%	3.6%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	85.0%	80.4%	87.1%	76.9%	81.9%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	15.4%	11.2%	19.9%	15.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	4.0%	4.2%	1.7%	3.3%	3.1%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	70.0%	70.4%	61.1%	65.6%	65.6%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	22.0%	19.3%	28.6%	24.4%	24.1%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	10.4%	10.3%	9.9%	10.3%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	71.0%	56.7%	63.4%	--	60.3%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	32.0%	30.4%	--	31.1%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	7.0%	11.3%	6.3%	--	8.6%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	66.0%	71.2%	70.0%	63.0%	65.1%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	14.0%	15.4%	12.9%	19.3%	17.4%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	20.0%	13.5%	17.1%	17.6%	17.4%
↑ clean	71.0%	74.7%	85.4%	72.8%	76.8%
↓ “Usually” clean	18.0%	13.7%	9.4%	21.4%	15.6%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	11.0%	11.6%	5.2%	5.8%	7.6%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	61.0%	56.7%	61.7%	54.9%	57.1%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	28.0%	33.0%	28.7%	35.3%	32.5%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	11.0%	10.3%	9.6%	9.8%	10.3%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	83.6%	83.8%	81.5%	79.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	16.4%	16.3%	18.5%	16.7%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	53.0%	45.2%	47.3%	43.7%	45.3%
↓ hospital	42.0%	44.1%	44.9%	49.5%	46.4%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	5.0%	7.1%	4.9%	4.2%	6.2%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.0%	12.5%	4.3%	10.7%	9.2%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.0%	18.8%	23.7%	18.4%	20.4%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	73.0%	68.8%	72.0%	70.9%	70.4%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	73.0%	58.5%	70.7%	68.6%	65.6%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	21.0%	34.0%	25.0%	26.5%	28.8%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.0%	7.4%	4.3%	4.9%	5.6%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	13.0%	100.0%	100.0%	100.0%	100.0%
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	130.0	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	9.0	10.8	7.1	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	0.0%	--	--	0.0%
↑ OP4 Aspirin at Arrival AMI Chest Pain	94.0%	92.3%	100.0%	100.0%	96.6%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	244.0	216.0	224.0	--	225.0
↓ ED2b ED Decision to Transport	74.0	69.0	60.0	--	61.0
↓ OP18b Avg time ED arrival to discharge	154.0	146.5	151.0	--	138.8
↓ OP20 Door to Diagnostic Evaluation	14.0	7.0	9.0	--	--
↓ OP21 Time to pain medication for long bone fracture	53.0	67.5	58.0	--	--
↓ OP22 Left without being seen	1.0%	0.2%	0.3%	0.3%	0.3%
↑ OP23 Head CT stroke patients	66.7%	100.0%	50.0%	--	66.7%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	99.0%	--	100.0%	97.8%	99.2%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.1	1.1	--	--
↓ complications	--	500.0	0.0	83.3	150.0
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	14.8%	22.0%	20.0%	8.1%	16.9%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	2.4%	0.0%	0.0%	33.3%	5.9%
↓ READM30HF Heart Failure 30Day readmissions rate	20.1%	10.3%	13.8%	19.2%	14.3%
↓ READM30PN Pneumonia 30day readmission rate	16.1%	17.4%	12.5%	11.0%	12.4%
↓ READM30 STK Stroke 30day readmission rate	10.0%	0.0%	0.0%	12.5%	4.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	0.0%	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	9.2%	12.5%	12.8%	10.3%	0.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	11.7%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.7%	0.0%	0.0%	2.6%	1.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	8.9%	14.3%	0.0%	25.0%	7.7%
↓ MORT30HF Heart failure 30day mortality rate	1.4%	5.3%	0.0%	7.1%	3.3%
↓ MORT30PN Pneumonia 30day mortality rate	1.6%	3.4%	3.0%	1.2%	2.5%
↓ MORT30STK Stroke 30day mortality rate	2.5%	0.0%	0.0%	11.1%	1.6%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	42.9%	42.9%	42.9%	--	--
↕ OP9 Mammography Followup Rates	3.2%	3.2%	3.2%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	4.7%	4.7%	4.7%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.8%	0.8%	0.8%	--	--
↕ surgery	2.6%	2.6%	2.6%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.5%	0.5%	0.5%	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	0.80	0.00	3.64	1.57	2.28
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.32	0.29	0.00	0.00	0.07
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.09	0.00	0.00	0.00	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.34	0.32	0.16
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.72	3.58	6.89	3.45	4.54
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.97	7.45	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	16.50	9.15	11.36	19.18	10.80
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.25	2.17	2.19	1.09	2.43
↓	PSI 13 Postoperative Sepsis Rate	8.88	0.00	6.17	4.10	3.57
↓	PSI 14 Postoperative Wound Dehiscence Rate	1.95	0.00	0.00	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.38	0.00	3.44	1.67	1.25
↓	CLABSI	1.202	1.338	0.000	0.834	0.722
↓	CAUTI	0.824	1.301	1.047	0.573	0.958
↓	SSI COLON Surgical Site Infection	0.000	2.500	0.000	2.857	1.333
↓	SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	1.587
↓	MRSA	0.056	0.109	0.108	0.000	0.094
↓	CDIFF	0.719	1.191	0.505	0.757	0.740

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.0%	83.4%	85.7%	84.8%	85.4%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	10.8%	9.6%	10.1%	9.7%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	5.8%	4.7%	5.1%	4.9%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.0%	82.5%	83.5%	82.8%	83.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	14.0%	11.5%	10.7%	10.1%	10.6%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	2.0%	6.0%	5.9%	7.3%	6.5%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	69.0%	65.5%	81.4%	70.9%	71.3%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	23.0%	23.5%	21.5%	18.2%	20.6%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	7.6%	8.4%	10.9%	9.5%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	74.0%	72.5%	76.3%	--	74.2%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	21.0%	19.2%	13.8%	--	16.8%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.0%	8.3%	9.8%	--	9.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	67.0%	68.0%	66.2%	67.5%	67.2%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	17.0%	14.1%	14.5%	13.9%	14.1%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	16.0%	18.0%	19.3%	18.6%	18.7%
↑ clean	62.0%	65.2%	71.0%	65.2%	67.8%
↓ “Usually” clean	22.0%	19.1%	14.8%	19.4%	17.2%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	16.0%	15.7%	14.2%	15.4%	15.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	65.0%	65.2%	66.7%	68.6%	68.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	28.0%	22.9%	25.5%	20.2%	22.2%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	7.0%	11.9%	7.8%	11.2%	9.8%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	91.1%	91.3%	87.6%	89.7%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	8.9%	8.2%	12.4%	10.1%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	53.0%	55.5%	56.9%	54.7%	55.7%
↓ hospital	42.0%	40.8%	40.3%	41.2%	40.6%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	5.0%	3.1%	2.8%	4.2%	3.5%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.0%	7.5%	6.0%	7.1%	7.0%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	16.0%	18.7%	16.2%	16.8%	17.2%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	77.0%	73.8%	77.8%	76.1%	75.7%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	78.0%	76.6%	80.0%	81.5%	80.0%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	19.0%	19.6%	15.5%	14.8%	16.1%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	3.8%	4.5%	3.7%	3.9%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	57.0%	--	88.9%	0.0%	72.7%
↑ OP30 High risk Polyp Surveillance	46.0%	--	75.0%	50.0%	70.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	--	--	2.0	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	--	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	83.0%	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	HIGH	HIGH	HIGH	HIGH	HIGH
↓ ED1b ED Door to Transport	255.0	289.0	270.0	--	316.0
↓ ED2b ED Decision to Transport	96.0	82.0	80.0	--	81.0
↓ OP18b Avg time ED arrival to discharge	147.0	156.0	144.0	--	148.0
↓ OP20 Door to Diagnostic Evaluation	23.0	42.0	23.0	--	--
↓ OP21 Time to pain medication for long bone fracture	43.0	61.0	60.0	--	--
↓ OP22 Left without being seen	1.0%	1.7%	1.1%	--	1.0%
↑ OP23 Head CT stroke patients	60.0%	--	100.0%	100.0%	100.0%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	96.0%	--	100.0%	98.9%	99.6%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	99.0%
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	55.0%	--	--	--	--
↓ VTE6 HAC VTE	3.0%	0.0%	0.0%	--	0.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.0	0.0	--	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.8	0.9	0.9	1.0	0.8
↓ complications	123.3	218.8	215.7	179.5	204.9
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	20.1%	23.7%	17.8%	19.7%	20.3%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	8.9%	10.0%	8.3%	16.2%	11.6%
↓ READM30HF Heart Failure 30Day readmissions rate	22.6%	25.2%	26.0%	17.8%	23.1%
↓ READM30PN Pneumonia 30day readmission rate	14.7%	20.6%	18.8%	14.1%	17.2%
↓ READM30 STK Stroke 30day readmission rate	13.4%	11.0%	3.9%	13.4%	9.7%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	1.8%	2.3%	5.0%	3.0%	13.0%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	13.1%	11.9%	11.7%	12.3%	3.5%

		Bristol Regional Medical Center				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓	rate2	10.0%	13.0%	9.3%	16.4%	12.1%
Readmissions & deaths 30 day death (mortality) rates						
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	3.3%	1.4%	8.2%	0.0%	2.3%
↓	MORT30 COPD 30day mortality rate COPD patients	0.0%	0.6%	3.1%	2.9%	2.2%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	3.8%	1.6%	8.1%	0.7%	3.5%
↓	MORT30HF Heart failure 30day mortality rate	3.7%	0.6%	2.5%	2.6%	1.6%
↓	MORT30PN Pneumonia 30day mortality rate	3.4%	2.8%	5.6%	4.9%	3.9%
↓	MORT30STK Stroke 30day mortality rate	15.0%	3.7%	3.7%	2.3%	2.9%
Use of medical imaging Outpatient imaging efficiency						
↕	OP8 MRI Lumbar Spine for Low Back Pain	43.2%	43.2%	43.2%	--	43.2%
↕	OP9 Mammography Followup Rates	9.1%	9.1%	9.1%	--	9.1%
↕	OP10 Abdomen CT Use of Contrast Material	4.0%	4.0%	4.0%	--	4.0%
↕	OP11 Thorax CT Use of Contrast Material	0.2%	0.2%	0.2%	--	0.2%
↕	OP12 Outpatients who got cardiac imaging services before returning to outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.8%	0.8%	0.8%	0.8%	0.8%

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	1.08	0.00	0.00	0.00	0.00
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.34	0.55	0.00	0.00	0.15
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.13	0.00	0.00	--	0.00
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.67	0.17
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.50	3.28	0.00	0.00	0.91
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.29	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	16.39	23.26	15.15	0.00	14.29
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.25	5.92	0.00	3.29	5.79
↓	PSI 13 Postoperative Sepsis Rate	10.75	0.00	0.00	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.11	0.00	0.00	0.00	0.00
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.64	0.00	0.00	0.00	0.00
↓	CLABSI	0.000	0.000	0.000	--	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000
↓	SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	0.000
↓	MRSA	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	1.052	0.782	0.279	--	0.550

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	77.0%	75.6%	76.3%	76.7%	76.9%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	17.0%	18.4%	17.8%	17.7%	18.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	6.0%	5.9%	5.9%	5.6%	5.1%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	72.9%	80.9%	81.4%	78.7%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	14.0%	19.1%	14.6%	14.0%	16.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.0%	8.0%	4.5%	4.6%	5.3%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	60.0%	54.4%	54.7%	55.5%	52.5%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	27.0%	30.1%	33.2%	30.8%	32.0%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	13.0%	15.5%	12.0%	13.6%	15.5%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.0%	60.6%	64.6%	--	62.5%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	23.0%	28.3%	23.5%	--	26.1%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.0%	11.1%	11.9%	--	11.5%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	61.0%	58.3%	64.3%	57.8%	60.2%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	16.0%	21.6%	18.1%	18.9%	19.8%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	23.0%	20.1%	17.7%	23.4%	20.0%
↑ clean	68.0%	68.5%	74.1%	72.3%	73.3%
↓ "Usually" clean	20.0%	22.1%	19.8%	17.5%	18.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	12.0%	9.3%	6.2%	10.2%	7.9%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	60.0%	57.8%	59.9%	63.0%	60.6%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	32.0%	33.7%	30.8%	29.1%	31.2%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	8.0%	8.5%	9.3%	7.9%	8.2%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	83.4%	89.3%	89.6%	87.0%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	16.6%	10.7%	10.4%	13.0%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	49.0%	42.9%	44.9%	43.6%	44.2%
↓ hospital	45.0%	45.2%	46.4%	48.1%	46.8%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	8.4%	4.9%	5.4%	6.1%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	12.0%	11.5%	12.6%	11.8%	11.4%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	20.0%	22.6%	19.9%	20.7%	20.9%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	68.0%	65.9%	67.5%	67.5%	67.7%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	65.0%	61.9%	68.6%	64.0%	65.1%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	28.0%	29.4%	24.8%	28.1%	27.9%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	7.0%	8.7%	6.6%	7.9%	7.0%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	100.0%	--	--	100.0%	100.0%
↑ OP30 High risk Polyp Surveillance	100.0%	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	23.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	0.0	13.7	3.0	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	HIGH	HIGH	HIGH	HIGH	HIGH
↓ ED1b ED Door to Transport	272.0	271.0	242.5	--	60.5
↓ ED2b ED Decision to Transport	112.0	97.5	83.0	--	90.0
↓ OP18b Avg time ED arrival to discharge	143.0	164.0	147.0	--	137.5
↓ OP20 Door to Diagnostic Evaluation	11.0	16.0	16.0	--	--
↓ OP21 Time to pain medication for long bone fracture	28.0	26.0	26.0	--	--
↓ OP22 Left without being seen	1.0%	0.4%	0.1%	0.2%	0.2%
↑ OP23 Head CT stroke patients	57.1%	100.0%	66.7%	40.0%	60.0%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	97.0%	--	97.5%	94.3%	96.2%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	0.0%	0.0%	0.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.8	1.1	1.1	--	--
↓ complications	147.4	190.5	136.4	300.0	206.3
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	16.6%	25.2%	22.4%	21.3%	23.2%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.1%	10.9%	3.8%	9.1%	7.9%
↓ READM30HF Heart Failure 30Day readmissions rate	22.1%	27.4%	25.3%	25.9%	26.3%
↓ READM30PN Pneumonia 30day readmission rate	18.9%	14.4%	15.8%	12.6%	14.1%
↓ READM30 STK Stroke 30day readmission rate	9.9%	15.6%	16.7%	9.1%	14.4%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	7.3%	2.9%	0.0%	0.0%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.5%	14.7%	14.4%	12.3%	1.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	13.6%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	0.0%
↓ MORT30 COPD 30day mortality rate COPD patients	0.7%	5.8%	1.3%	6.9%	3.3%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	3.0%	5.3%	1.9%	16.3%	5.4%
↓ MORT30HF Heart failure 30day mortality rate	2.3%	6.4%	1.3%	5.6%	4.0%
↓ MORT30PN Pneumonia 30day mortality rate	4.2%	4.3%	5.4%	6.9%	4.8%
↓ MORT30STK Stroke 30day mortality rate	2.4%	4.2%	3.2%	12.5%	6.0%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	35.4%	35.4%	35.4%	--	--
↕ OP9 Mammography Followup Rates	3.4%	3.4%	3.4%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	2.0%	2.0%	2.0%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.8%	0.8%	0.8%	--	--
↕ surgery	4.7%	4.7%	4.7%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	0.35	0.00	0.00	0.00	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.39	0.00	0.00	0.00	0.00
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.16	0.00	0.00	--	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.69	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.12	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	16.04	0.00	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.21	0.00	0.00	0.00	5.99
↓ PSI 13 Postoperative Sepsis Rate	9.79	0.00	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.29	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.46	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	16.667	--	--	--	--
↓ SSI HYST Surgical Site Infection	0.000	0.000	--	--	0.000
↓ MRSA	0.000	0.000	0.000	0.000	0.000
↓ CDIIF	0.174	0.000	0.000	1.185	0.331

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	85.0%	90.0%	85.7%	84.1%	85.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	12.0%	7.4%	11.3%	13.4%	11.4%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	2.6%	3.0%	2.5%	2.7%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	88.0%	87.5%	91.5%	87.1%	88.1%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	9.0%	9.4%	7.0%	9.0%	8.9%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.0%	3.1%	1.5%	4.0%	3.1%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	76.0%	77.3%	76.2%	63.7%	73.2%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	18.0%	12.4%	17.8%	27.5%	18.7%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	6.0%	10.3%	5.9%	8.8%	8.2%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	73.0%	74.3%	84.6%	--	79.6%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	23.0%	11.5%	--	17.1%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.0%	2.7%	3.8%	--	3.3%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	73.0%	60.8%	67.8%	71.8%	66.3%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	16.0%	18.9%	11.1%	11.8%	15.7%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	11.0%	20.3%	21.1%	16.5%	18.0%
↑ clean	75.0%	87.5%	85.3%	83.3%	84.1%
↓ “Usually” clean	8.0%	6.3%	10.3%	13.6%	10.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	17.0%	6.3%	4.4%	3.0%	5.2%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	72.0%	74.2%	65.7%	66.2%	66.5%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.0%	22.6%	29.9%	29.2%	28.6%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	4.0%	3.2%	4.5%	4.6%	4.8%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	91.0%	93.3%	89.8%	86.6%	88.8%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	9.0%	6.7%	10.2%	13.4%	11.2%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	61.0%	55.9%	59.7%	50.8%	53.2%
↓ hospital	37.0%	38.8%	32.8%	41.7%	40.4%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	2.0%	2.1%	4.0%	3.5%	3.2%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	5.0%	3.1%	6.0%	6.2%	5.2%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	18.0%	9.4%	11.9%	12.3%	11.6%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	77.0%	87.5%	82.1%	81.5%	83.2%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	75.0%	79.7%	74.2%	75.8%	75.1%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	22.0%	18.8%	22.7%	21.2%	21.7%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	1.6%	3.0%	3.0%	3.2%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%
↑ OP30 High risk Polyp Surveillance	100.0%	100.0%	90.3%	--	92.3%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	48.0	89.0	101.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	3.0	12.5	3.5	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	99.0%	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW
↓ ED1b ED Door to Transport	176.0	190.0	180.0	--	175.0
↓ ED2b ED Decision to Transport	40.0	40.0	43.0	--	41.0
↓ OP18b Avg time ED arrival to discharge	97.0	91.0	95.0	--	106.8
↓ OP20 Door to Diagnostic Evaluation	11.0	11.0	12.0	--	--
↓ OP21 Time to pain medication for long bone fracture	25.0	22.7	32.3	--	--
↓ OP22 Left without being seen	1.0%	0.3%	0.3%	0.4%	0.3%
↑ OP23 Head CT stroke patients	75.0%	50.0%	100.0%	--	66.7%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	100.0%	--	100.0%	100.0%	100.0%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	98.0%	98.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	0.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.1	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.8	1.0	1.0	--	--
↓ complications	--	0.0	--	--	0.0
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.5%	9.7%	21.4%	16.2%	15.6%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	17.9%	0.0%	0.0%	0.0%	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	18.8%	0.0%	13.6%	36.4%	20.0%
↓ READM30PN Pneumonia 30day readmission rate	16.3%	7.4%	6.3%	12.0%	9.2%
↓ READM30 STK Stroke 30day readmission rate	11.8%	0.0%	20.0%	0.0%	5.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.1%	12.5%	3.4%	21.4%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	9.7%	6.5%	10.3%	12.8%	10.2%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	12.6%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.5%	0.0%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	5.5%	0.0%	4.3%	0.0%	1.2%
↓ MORT30PN Pneumonia 30day mortality rate	2.8%	0.0%	3.0%	6.0%	2.7%
↓ MORT30STK Stroke 30day mortality rate	4.5%	0.0%	16.7%	0.0%	7.7%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	3.8%	3.8%	3.8%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	0.5%	0.5%	0.5%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	--	--
↕ OP12 Outpatients who got cardiac imaging services before returning to outpatient surgery	3.7%	3.7%	3.7%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.0%	0.0%	0.0%	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	0.41	0.00	0.00	0.00	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.40	0.00	0.00	0.00	0.00
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.17	0.00	0.00	--	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	--	0.00	0.00	0.00	0.00
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	--	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	--	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	--	0.00	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	0.00	333.33	--	0.00
↓ PSI 13 Postoperative Sepsis Rate	--	0.00	1000.00	--	250.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	--	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.39	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	16.667	0.000	0.000	4.785
↓ CAUTI	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	--	--	--	--	0.000
↓ SSI HYST Surgical Site Infection	--	--	--	--	0.000
↓ MRSA	0.000	0.000	0.000	0.000	0.310
↓ CDI/F	0.498	0.000	1.410	0.000	0.621

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	87.0%	93.3%	86.5%	91.2%	89.6%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	9.0%	1.7%	9.9%	7.9%	6.8%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	5.0%	3.6%	0.9%	3.5%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	89.0%	91.2%	86.5%	90.4%	88.3%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	8.0%	8.8%	9.0%	4.4%	7.4%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.0%	0.0%	4.5%	5.3%	4.3%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	78.0%	91.3%	58.8%	78.6%	77.2%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	17.0%	8.7%	31.4%	21.4%	19.3%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.0%	0.0%	9.8%	0.0%	7.5%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	79.0%	78.9%	65.6%	--	70.6%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	17.0%	21.1%	21.9%	--	21.6%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	4.0%	0.0%	12.5%	--	7.8%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	73.0%	76.9%	70.0%	50.0%	64.5%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	14.0%	15.4%	13.3%	30.0%	16.8%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	13.0%	7.7%	16.7%	20.0%	18.7%
↑ clean	76.0%	80.0%	77.8%	84.2%	82.3%
↓ "Usually" clean	16.0%	15.0%	22.2%	7.9%	13.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	8.0%	5.0%	0.0%	7.9%	3.8%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.0%	75.0%	56.8%	62.2%	64.6%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	30.0%	20.0%	32.4%	37.8%	30.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	6.0%	5.0%	10.8%	0.0%	4.6%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	80.8%	86.0%	78.3%	82.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	19.2%	14.0%	21.7%	21.3%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	50.0%	48.3%	46.7%	40.7%	45.8%
↓ hospital	47.0%	40.0%	45.8%	54.0%	45.0%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	3.0%	5.0%	4.7%	4.4%	5.8%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.0%	0.0%	8.3%	5.3%	6.1%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	32.0%	25.0%	25.0%	7.9%	17.6%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	59.0%	75.0%	66.7%	86.8%	78.1%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	61.0%	75.0%	62.2%	70.3%	71.8%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	35.0%	25.0%	32.4%	27.0%	22.9%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.0%	0.0%	5.4%	2.7%	5.3%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	0.0%	--	0.0%	--	0.0%
↑ OP30 High risk Polyp Surveillance	--	100.0%	66.7%	--	85.7%

		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack						
↓	OP3b Median Time to Transfer AMI	--	315.0	62.0	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	6.0	6.1	8.4	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	99.0%	100.0%	100.0%	93.8%	98.1%
Timely & Effective Care Stroke Care						
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput						
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	168.0	164.7	163.5	--	189.3
↓	ED2b ED Decision to Transport	39.0	38.7	36.0	--	39.0
↓	OP18b Avg time ED arrival to discharge	90.0	95.0	93.0	--	106.0
↓	OP20 Door to Diagnostic Evaluation	7.0	8.0	10.0	--	--
↓	OP21 Time to pain medication for long bone fracture	20.0	21.0	16.0	--	--
↓	OP22 Left without being seen	1.0%	0.2%	0.3%	0.1%	0.3%
↑	OP23 Head CT stroke patients	0.0%	100.0%	50.0%	0.0%	50.0%
Timely & Effective Care Preventive Care						
↑	IMM2 Immunization for Influenza	100.0%	--	99.3%	100.0%	99.6%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment						
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓	VTE6 HAC VTE	--	--	--	--	--
Timely & Effective Care Pregnancy & delivery care						
↓	PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications						
↓	Hip and Knee Complications2	--	--	--	--	--
↓	PSI90 Complications / patient safety for selected indicators	0.9	1.0	1.0	--	--
↓	complications	--	--	--	--	--
Readmissions & deaths 30 day rates of readmission						
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	17.6%	26.3%	17.2%	6.5%	17.3%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	20.0%	50.0%	0.0%	200.0%	57.1%
↓	READM30HF Heart Failure 30Day readmissions rate	19.0%	33.3%	8.3%	12.5%	20.0%
↓	READM30PN Pneumonia 30day readmission rate	18.7%	0.0%	11.5%	5.9%	6.7%
↓	READM30 STK Stroke 30day readmission rate	7.1%	--	0.0%	--	0.0%
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--
↓	READM30 HOSPOWIDE 30day hospitalwide allcause unplanned readmission	15.0%	17.1%	9.7%	12.8%	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	17.3%
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.9%	2.6%	3.3%	0.0%	2.2%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	0.0%	0.0%	0.0%	6.3%
↓ MORT30HF Heart failure 30day mortality rate	3.4%	11.8%	0.0%	0.0%	9.1%
↓ MORT30PN Pneumonia 30day mortality rate	2.1%	0.0%	7.1%	2.9%	3.6%
↓ MORT30STK Stroke 30day mortality rate	--	--	0.0%	--	0.0%
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	1.4%	1.4%	1.4%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	3.3%	3.3%	3.3%	--	--
↕ OP11 Thorax CT Use of Contrast Material	1.1%	1.1%	1.1%	--	--
↕ surgery	3.8%	3.8%	3.8%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	0.31	0.00	0.00	0.00	0.00
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.44	0.00	0.00	0.00	0.00
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.16	0.00	0.00	--	0.00
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.66	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.11	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	13.37	0.00	0.00	17.24	4.63
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.23	9.80	0.00	8.93	4.57
↓ PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	17.54	4.65
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.26	0.00	0.00	0.00	0.00
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.35	0.00	0.00	0.00	0.00
↓ CLABSI	0.900	0.000	5.051	0.000	1.088
↓ CAUTI	0.000	0.000	2.000	0.000	0.460
↓ SSI COLON Surgical Site Infection	3.226	0.000	0.000	20.000	3.125
↓ SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	0.000
↓ MRSA	0.067	0.000	0.000	0.249	0.134
↓ CDI/F	0.604	0.295	1.722	0.497	0.672

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	85.0%	5.5%	3.1%	25.9%	78.5%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	12.0%	18.3%	16.5%	16.6%	16.5%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	5.5%	3.1%	5.3%	5.0%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	86.0%	79.3%	78.3%	80.5%	79.7%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	14.7%	16.3%	15.2%	15.3%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.0%	6.0%	5.4%	4.3%	5.0%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	82.0%	67.2%	71.5%	66.7%	69.3%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	13.0%	23.4%	20.5%	24.4%	21.8%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.0%	9.4%	8.0%	8.9%	8.9%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	75.0%	68.2%	65.4%	--	66.9%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	19.0%	24.7%	26.8%	--	25.7%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.0%	7.1%	7.8%	--	7.4%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	73.0%	60.9%	64.6%	67.6%	63.5%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	14.0%	14.5%	19.3%	15.9%	16.9%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	13.0%	24.6%	16.0%	16.5%	19.5%
↑ clean	82.0%	81.8%	80.1%	82.0%	80.5%
↓ “Usually” clean	13.0%	13.6%	16.3%	11.3%	13.9%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	5.0%	4.5%	3.5%	6.8%	5.6%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	73.0%	64.9%	63.8%	64.4%	64.6%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	23.0%	29.1%	30.5%	28.0%	28.4%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	4.0%	6.0%	5.7%	7.6%	7.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	87.9%	85.5%	88.2%	86.1%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	12.1%	14.5%	11.8%	13.9%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	59.0%	44.2%	49.8%	47.6%	45.3%
↓ hospital	38.0%	43.4%	39.4%	42.8%	42.4%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	3.0%	7.8%	6.4%	5.3%	9.1%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	4.0%	9.1%	9.4%	6.0%	8.3%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	17.0%	21.2%	16.7%	24.8%	20.5%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	79.0%	69.7%	73.9%	69.2%	71.2%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	78.0%	72.9%	73.0%	69.2%	71.5%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	18.0%	20.2%	21.9%	25.4%	23.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.0%	7.0%	5.1%	5.4%	5.5%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	100.0%	--	100.0%	100.0%	100.0%
↑ OP30 High risk Polyp Surveillance	75.0%	100.0%	66.7%	--	75.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	139.0	57.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	5.0	6.9	5.3	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	93.5%	96.3%	97.4%	95.7%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	210.0	207.7	222.0	--	222.0
↓ ED2b ED Decision to Transport	69.0	73.0	79.0	--	77.0
↓ OP18b Avg time ED arrival to discharge	124.0	129.0	125.0	--	166.0
↓ OP20 Door to Diagnostic Evaluation	14.0	0.5	0.0	--	--
↓ OP21 Time to pain medication for long bone fracture	63.0	20.0	23.0	--	--
↓ OP22 Left without being seen	0.0%	0.7%	0.6%	0.4%	0.7%
↑ OP23 Head CT stroke patients	0.0%	100.0%	50.0%	83.3%	75.0%
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	98.0%	--	99.4%	100.0%	99.6%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	--	0.0%	--	--	0.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications					
↓ Hip and Knee Complications2	0.0	0.0	0.1	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.0	1.3	--	--
↓ complications	--	0.0	111.1	500.0	125.0
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	14.6%	10.8%	20.2%	14.0%	14.7%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	17.5%	0.0%	0.0%	0.0%	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	16.1%	17.2%	17.9%	21.1%	18.4%
↓ READM30PN Pneumonia 30day readmission rate	--	7.7%	12.9%	15.3%	13.3%
↓ READM30 STK Stroke 30day readmission rate	7.2%	40.0%	0.0%	0.0%	10.5%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.3%	6.1%	4.7%	0.0%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	10.4%	7.9%	10.5%	10.1%	3.9%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
rate2	--	--	--	--	15.5%
Readmissions & deaths 30 day death (mortality) rates					
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
MORT30 COPD 30day mortality rate COPD patients	0.7%	3.8%	0.0%	1.9%	2.2%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	10.0%	0.0%	0.0%	16.7%	6.3%
MORT30HF Heart failure 30day mortality rate	3.5%	3.3%	0.0%	9.5%	9.1%
MORT30PN Pneumonia 30day mortality rate	3.8%	4.9%	4.5%	5.4%	3.6%
MORT30STK Stroke 30day mortality rate	0.0%	16.7%	0.0%	0.0%	0.0%
Use of medical imaging Outpatient imaging efficiency					
OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
OP9 Mammography Followup Rates	7.2%	7.2%	7.2%	--	--
OP10 Abdomen CT Use of Contrast Material	3.2%	3.2%	3.2%	--	--
OP11 Thorax CT Use of Contrast Material	0.5%	0.5%	0.5%	--	--
OP13 Outpatients who got cardiac imaging services before returning to outpatient surgery	0.0%	0.0%	0.0%	--	--
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.2%	1.2%	1.2%	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	--	--	--	--	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	--	--	--	--	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	--	--	--	--	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	--	--	--	--	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	--	--	--	--	--
↓	CLABSI	--	--	--	--	--
↓	CAUTI	--	--	--	--	--
↓	SSI COLON Surgical Site Infection	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--
↓	MRSA	--	--	--	--	--
↓	CDIFF	--	--	--	--	--

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	--	100.0%	100.0%	100.0%	100.0%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	--	0.0%	0.0%	0.0%	0.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	--	100.0%	100.0%	100.0%	100.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	--	0.0%	0.0%	0.0%	0.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	--	100.0%	100.0%	100.0%	100.0%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	--	100.0%	100.0%	--	100.0%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	--	0.0%	0.0%	--	0.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	--	0.0%	0.0%	--	0.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	--	100.0%	100.0%	100.0%	100.0%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	--	100.0%	100.0%	0.0%	66.7%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	--	100.0%	100.0%	0.0%	66.7%
↑ clean	--	100.0%	100.0%	100.0%	100.0%
↓ “Usually” clean	--	0.0%	0.0%	0.0%	0.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	--	0.0%	0.0%	0.0%	0.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	--	100.0%	100.0%	100.0%	100.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	--	0.0%	0.0%	0.0%	20.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	--	0.0%	0.0%	0.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	--	100.0%	100.0%	100.0%	100.0%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	--	0.0%	0.0%	0.0%	0.0%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	--	0.0%	83.3%	66.7%	58.3%
↓ hospital	--	100.0%	0.0%	33.3%	46.7%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	--	0.0%	0.0%	0.0%	0.0%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	--	0.0%	0.0%	0.0%	0.0%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	--	100.0%	0.0%	0.0%	25.0%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	--	100.0%	100.0%	100.0%	100.0%
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	--	100.0%	100.0%	100.0%	100.0%
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	--	0.0%	0.0%	100.0%	25.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	--	0.0%	0.0%	0.0%	0.0%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	--	--
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--

		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack						
↓	OP3b Median Time to Transfer AMI	--	--	70.0	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	--	4.5	9.2	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care						
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput						
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	--	166.0	178.8	--	152.0
↓	ED2b ED Decision to Transport	--	53.0	28.0	--	36.9
↓	OP18b Avg time ED arrival to discharge	--	92.8	98.5	--	86.0
↓	OP20 Door to Diagnostic Evaluation	--	4.7	5.2	--	--
↓	OP21 Time to pain medication for long bone fracture	--	39.0	24.8	--	--
↓	OP22 Left without being seen	1.0%	0.9%	0.6%	0.6%	0.7%
↑	OP23 Head CT stroke patients	--	--	100.0%	--	100.0%
Timely & Effective Care Preventive Care						
↑	IMM2 Immunization for Influenza	--	--	100.0%	100.0%	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	--	--	--	--	--
Timely & Effective Care Blood Clot Prevention & Treatment						
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓	VTE6 HAC VTE	--	--	--	--	--
Timely & Effective Care Pregnancy & delivery care						
↓	PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications						
↓	Hip and Knee Complications2	--	--	--	--	--
↓	PSI90 Complications / patient safety for selected indicators	--	--	--	--	--
↓	complications	--	--	--	--	--
Readmissions & deaths 30 day rates of readmission						
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--
↓	READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--
↓	READM30PN Pneumonia 30day readmission rate	--	--	--	--	--
↓	READM30 STK Stroke 30day readmission rate	--	--	--	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	--
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	--	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	--	--	--	--	0.0%
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	--	--	--	--	--
↕ OP12 Outpatients who got cardiac imaging services before returning to outpatient surgery	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

Target Quality Measures

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ PSI 3 Pressure Ulcer Rate	0.40	--	--	--	--
↓ PSI 6 Iatrogenic Pneumothorax Rate	0.40	--	--	--	--
↓ PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.17	--	--	--	--
↓ PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	--	--	--	--
↓ PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.75	--	--	--	--
↓ PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	--	--	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.76	--	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	--	--	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--
↓ PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.26	--	--	--	--
↓ CLABSI	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	--	--	--	--	--
↓ SSI HYST Surgical Site Infection	--	--	--	--	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000
↓ CDIIF	0.000	0.000	0.000	0.000	0.000

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	79.0%	95.0%	88.0%	74.2%	85.7%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	18.0%	5.0%	12.0%	22.7%	13.2%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	0.0%	0.0%	3.0%	1.1%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	94.7%	79.8%	79.7%	83.1%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	12.0%	1.8%	16.7%	18.8%	14.6%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	8.0%	3.5%	3.6%	1.6%	2.3%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	71.0%	83.3%	78.1%	72.0%	75.7%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	23.0%	16.7%	15.6%	28.0%	20.0%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	6.0%	0.0%	6.3%	0.0%	4.7%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	71.0%	81.8%	78.6%	--	80.0%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.0%	18.2%	21.4%	--	20.0%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	4.0%	0.0%	0.0%	--	0.0%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	68.0%	88.9%	76.0%	66.7%	75.3%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	21.0%	11.1%	12.0%	16.7%	13.3%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	20.0%	0.0%	12.0%	16.7%	11.8%
↑ clean	72.0%	90.0%	81.5%	85.7%	85.1%
↓ “Usually” clean	23.0%	10.0%	11.1%	14.3%	11.5%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	5.0%	0.0%	7.4%	0.0%	3.4%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	68.0%	78.9%	70.4%	71.4%	72.1%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	23.0%	21.1%	18.5%	14.3%	18.6%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	9.0%	0.0%	11.1%	14.3%	9.3%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	76.0%	87.1%	88.1%	81.3%	86.8%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	24.0%	12.9%	11.9%	18.8%	13.2%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	47.0%	61.4%	45.6%	57.1%	52.0%
↓ hospital	40.0%	31.6%	44.3%	38.1%	40.8%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	4.0%	1.8%	2.5%	1.6%	2.8%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	12.0%	0.0%	2.0%	0.0%	1.2%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	21.0%	5.4%	6.9%	4.3%	6.1%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	67.0%	16.3%	18.6%	19.6%	19.6%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	62.0%	84.2%	67.9%	81.8%	71.6%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	28.0%	15.8%	25.0%	18.2%	23.9%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	10.0%	0.0%	7.1%	0.0%	4.5%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	--	--
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	--	--	56.0	73.0	64.5
↓ OP5 Median Time to ECG AMI and Chest Pain	8.0	12.8	10.4	5.0	9.4
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	100.0%	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW
↓ ED1b ED Door to Transport	209.0	183.0	197.0	241.8	206.0
↓ ED2b ED Decision to Transport	--	42.0	47.0	56.1	49.8
↓ OP18b Avg time ED arrival to discharge	119.0	119.3	107.5	146.2	124.0
↓ OP20 Door to Diagnostic Evaluation	18.0	7.5	6.5	7.3	7.1
↓ OP21 Time to pain medication for long bone fracture	56.0	53.5	25.5	20.3	31.3
↓ OP22 Left without being seen	1.0%	0.5%	0.4%	0.5%	0.5%
↑ OP23 Head CT stroke patients	0.0%	--	--	--	--
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	93.0%	--	91.0%	93.4%	92.3%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	98.0%	98.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	--	--	--	--	--
Complications - Surgical Complications					
↓ Hip and Knee Complications2	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.8	--	--	--	--
↓ complications	--	--	--	--	--
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--
↓ READM30PN Pneumonia 30day readmission rate	--	--	--	--	--
↓ READM30 STK Stroke 30day readmission rate	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	--
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	--	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	--	--	--	--	--
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
↕ OP9 Mammography Followup Rates	4.7%	4.7%	4.7%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	4.7%	4.7%	4.7%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	--	--
↕ OP12 Outpatients who got cardiac imaging versus those who did not get cardiac	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.7%	0.7%	0.7%	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	0.27	--	--	--	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.37	--	--	--	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.15	--	--	--	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	--	--	--	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.52	--	--	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.10	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	8.98	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	6.16	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	9.38	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	--	--	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	2.17	2.17	2.17	--	--
↓	CLABSI	0.000	0.000	0.000	0.000	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	2.326	5.263	0.000	0.000	1.538
↓	SSI HYST Surgical Site Infection	--	--	--	--	--
↓	MRSA	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	0.441	0.320	0.000	0.300	0.223

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider:

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	81.0%	--	--	--	--
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	16.0%	--	--	--	--
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	--	--	--	--
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	85.0%	--	--	--	--
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.0%	--	--	--	--
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	2.0%	--	--	--	--
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	73.0%	--	--	--	--
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	22.0%	--	--	--	--
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.0%	6.0%	6.0%	--	--
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	70.0%	--	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	--	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	8.0%	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	61.0%	--	--	--	--
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	20.0%	--	--	--	--
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	19.0%	--	--	--	--
↑ clean	70.0%	--	--	--	--
↓ “Usually” clean	18.0%	--	--	--	--
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	12.0%	--	--	--	--
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	61.0%	--	--	--	--
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	30.0%	--	--	--	--
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	9.0%	--	--	--	--
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	--	--	--	--
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	--	--	--	--
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	50.0%	--	--	--	--
↓ hospital	45.0%	--	--	--	--
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	5.0%	--	--	--	--
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	6.0%	--	--	--	--
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	17.0%	--	--	--	--
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	77.0%	--	--	--	--
↑ HRECMND Y1 Patients who reported YES, they would definitely recommend the hospital	76.0%	--	--	--	--
↓ HRECMND P1 Patients who reported YES, they would probably recommend the hospital	22.0%	--	--	--	--
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	2.0%	--	--	--	--
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	86.0%	88.6%	91.3%	--	89.6%
↑ OP30 High risk Polyp Surveillance	89.0%	88.5%	85.0%	--	87.9%

Timely & Effective Care Heart Attack		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓	OP3b Median Time to Transfer AMI	47.0	122.7	122.7	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	7.0	7.3	7.3	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	--	100.0%
Timely & Effective Care Stroke Care						
↑	STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput						
↓	EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	206.0	--	--	--	192.0
↓	ED2b ED Decision to Transport	--	--	--	--	56.0
↓	OP18b Avg time ED arrival to discharge	124.0	97.3	97.3	--	110.0
↓	OP20 Door to Diagnostic Evaluation	25.0	18.7	18.7	--	--
↓	OP21 Time to pain medication for long bone fracture	65.0	64.3	64.3	--	--
↓	OP22 Left without being seen	1.0%	0.4%	0.6%	--	0.5%
↑	OP23 Head CT stroke patients	100.0%	100.0%	100.0%	--	100.0%
Timely & Effective Care Preventive Care						
↑	IMM2 Immunization for Influenza	96.0%	--	98.1%	--	98.1%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	96.0%	97.0%	97.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment						
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓	VTE6 HAC VTE	--	0.0%	--	--	0.0%
Timely & Effective Care Pregnancy & delivery care						
↓	PC01 Elective Delivery	--	0.00%	0.00%	--	0.00%
Complications - Surgical Complications						
↓	Hip and Knee Complications2	--	--	--	--	--
↓	PSI90 Complications / patient safety for selected indicators	1.1	--	--	--	--
↓	complications	135.9	--	--	--	--
Readmissions & deaths 30 day rates of readmission						
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.8%	--	--	--	--
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	16.6%	--	--	--	--
↓	READM30HF Heart Failure 30Day readmissions rate	24.2%	--	--	--	--
↓	READM30PN Pneumonia 30day readmission rate	18.3%	--	--	--	--
↓	READM30 STK Stroke 30day readmission rate	12.1%	--	--	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	--	--	--	--
↓	READM30 HOSPOWIDE 30day hospitalwide allcause unplanned readmission	16.3%	--	--	--	--

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ rate2	--	--	--	--	--
Readmissions & deaths 30 day death (mortality) rates					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	6.9%	--	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	14.7%	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	15.4%	19.9%	14.1%	--	--
↓ MORT30PN Pneumonia 30day mortality rate	19.9%	--	--	--	--
↓ MORT30STK Stroke 30day mortality rate	14.1%	--	--	--	--
Use of medical imaging Outpatient imaging efficiency					
↕ OP8 MRI Lumbar Spine for Low Back Pain	47.8%	47.8%	47.8%	--	--
↕ OP9 Mammography Followup Rates	17.7%	17.7%	17.7%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	7.1%	7.1%	7.1%	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.2%	3.2%	3.2%	--	--
↕ surgery	4.1%	4.1%	4.1%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	2.0%	2.0%	--	--

Target Quality Measures

↓	PSI 3 Pressure Ulcer Rate	0.34	0.34	0.34	--	--
↓	PSI 6 Iatrogenic Pneumothorax Rate	0.45	--	--	--	--
↓	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.15	0.15	0.15	--	--
↓	PSI 8 In Hospital Fall with Hip Fracture Rate	0.06	0.06	0.06	--	--
↓	PSI 9 Perioperative Hemorrhage or Hematoma Rate	4.98	4.98	4.98	--	--
↓	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	1.11	1.11	1.11	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	12.51	12.51	12.51	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	7.58	7.58	7.58	--	--
↓	PSI 13 Postoperative Sepsis Rate	9.48	9.48	9.48	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.24	2.24	2.24	--	--
↓	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	1.49	1.49	1.49	--	--
↓	CLABSI	0.000	0.000	0.000	3.891	1.149
↓	CAUTI	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	0.000	0.000	9.091	0.000	2.222
↓	SSI HYST Surgical Site Infection	0.000	0.000	--	--	0.000
↓	MRSA	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	0.124	0.000	0.000	1.437	0.415

Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Provider

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	83.0%	86.0%	80.8%	87.8%	84.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	10.4%	12.4%	6.7%	10.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	3.6%	6.8%	5.5%	5.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	78.0%	83.3%	79.3%	86.9%	82.5%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	11.2%	14.1%	5.8%	10.1%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	7.0%	5.4%	6.6%	7.3%	7.5%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	71.0%	79.1%	73.5%	84.4%	73.0%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	24.0%	16.3%	15.4%	12.5%	20.3%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.0%	4.7%	11.6%	3.1%	7.3%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	73.0%	74.1%	71.6%	--	73.0%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	20.0%	14.8%	19.2%	--	17.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	7.0%	11.1%	8.5%	--	9.8%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ HCOMP5A P Patients who reported that staff “Always” explained about medicines before giving it to them	63.0%	70.8%	62.1%	71.7%	69.9%
↓ HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	21.0%	12.3%	10.3%	13.0%	11.7%
↓ HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	16.0%	16.9%	27.6%	15.2%	18.4%
↑ clean	77.0%	76.1%	77.3%	76.4%	76.2%
↓ “Usually” clean	14.0%	17.4%	8.0%	18.0%	15.3%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	9.0%	6.5%	14.8%	8.2%	10.2%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	66.0%	82.8%	76.7%	70.4%	77.8%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	28.0%	8.6%	16.7%	18.5%	13.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	6.0%	8.6%	6.7%	11.1%	8.4%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	91.0%	93.8%	90.4%	91.5%	91.0%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	9.0%	6.3%	9.6%	8.5%	9.0%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	56.0%	56.7%	51.4%	51.9%	55.0%
↓ hospital	40.0%	40.9%	45.3%	25.6%	36.1%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	3.0%	2.4%	3.3%	3.6%	3.4%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.0%	7.5%	6.8%	8.3%	8.1%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	16.0%	10.8%	17.0%	11.9%	13.1%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	77.0%	81.7%	76.1%	79.8%	78.7%
↑ HRECMND Y Patients who reported YES, they would definitely recommend the hospital	78.0%	82.2%	70.2%	79.4%	76.5%
↓ HRECMND P Patients who reported YES, they would probably recommend the hospital	19.0%	12.2%	23.8%	13.1%	17.3%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	5.6%	6.0%	7.5%	6.2%
Timely & Effective care Cataract Surgery Outcome					
↑ OP31 Cataracts Improvement	--	--	--	--	--
Timely & Effective care Colonoscopy follow-up					
↑ OP29 Avg Risk Polyp Surveillance	91.0%	88.4%	25.0%	--	68.3%
↑ OP30 High risk Polyp Surveillance	83.0%	95.1%	100.0%	--	96.3%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
Timely & Effective Care Heart Attack					
↓ OP3b Median Time to Transfer AMI	79.0	76.3	146.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	9.0	--	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	99.0%	100.0%	100.0%	--	100.0%
Timely & Effective Care Stroke Care					
↑ STK4 Thrombolytic Therapy (retired)	--	--	--	--	--
Timely & Effective Care- Emergency Department (ED) Throughput					
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	221.0	--	--	--	277.0
↓ ED2b ED Decision to Transport	29.0	--	--	--	53.0
↓ OP18b Avg time ED arrival to discharge	139.0	139.0	139.0	--	163.0
↓ OP20 Door to Diagnostic Evaluation	26.0	26.0	26.0	--	--
↓ OP21 Time to pain medication for long bone fracture	70.0	70.0	70.0	--	--
↓ OP22 Left without being seen	2.0%	2.7%	2.2%	--	2.5%
↑ OP23 Head CT stroke patients	--	--	--	--	--
Timely & Effective Care Preventive Care					
↑ IMM2 Immunization for Influenza	100.0%	--	95.2%	--	95.2%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	87.0%	93.0%	93.0%	--	--
Timely & Effective Care Blood Clot Prevention & Treatment					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	0.0%	--	0.0%
Timely & Effective Care Pregnancy & delivery care					
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	--	0.00%
Complications - Surgical Complications					
↓ Hip and Knee Complications2	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.1	1.1	1.1	--	--
↓ complications	--	--	--	--	--
Readmissions & deaths 30 day rates of readmission					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.1%	4.2%	0.0%	--	3.2%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	0.0%	0.0%	--	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	21.3%	0.0%	25.0%	--	8.6%
↓ READM30PN Pneumonia 30day readmission rate	17.1%	5.3%	18.2%	--	12.2%
↓ READM30 STK Stroke 30day readmission rate	12.2%	0.0%	0.0%	--	0.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	4.5%	9.1%	0.0%	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	15.2%	4.0%	3.6%	--	7.4%

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
rate2	--	--	--	--	3.9%
Readmissions & deaths 30 day death (mortality) rates					
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--
MORT30 COPD 30day mortality rate COPD patients	8.9%	--	--	--	--
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--
MORT30HF Heart failure 30day mortality rate	12.5%	12.5%	12.5%	--	--
MORT30PN Pneumonia 30day mortality rate	14.1%	14.1%	14.1%	--	--
MORT30STK Stroke 30day mortality rate	15.1%	15.1%	15.1%	--	--
Use of medical imaging Outpatient imaging efficiency					
OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--
OP9 Mammography Followup Rates	17.7%	17.7%	17.7%	--	--
OP10 Abdomen CT Use of Contrast Material	6.9%	6.9%	6.9%	--	--
OP11 Thorax CT Use of Contrast Material	1.3%	1.3%	1.3%	--	--
OP13 Outpatients who got cardiac imaging versus those who did not get cardiac imaging	9.4%	9.4%	9.4%	--	--
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	2.02	2.48	0.43	1.18	0.00	1.76	0.89	1.77	0.47
PSI 6 Iatrogenic Pneumothorax Rate	0.44	0.72	0.00	0.15	0.15	0.15	0.41	0.16	0.00	0.15	0.00	0.16
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.28	0.00
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.17	0.18	0.00	0.16	0.18	0.17	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.72	1.99	4.41	1.32	3.82	0.66	1.33	2.18	0.61	0.69	1.95	1.39
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	4.22	3.82	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	8.90	9.60	1.67	12.68	9.96	4.62	3.33	5.21	12.89	3.63	18.06	11.04
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.27	2.44	3.98	4.23	5.37	1.84	3.09	1.35	2.30	3.18	5.50	4.46
PSI 13 Postoperative Sepsis Rate	7.36	5.28	1.40	5.31	2.41	2.62	1.38	4.26	2.38	4.44	6.49	5.43
PSI 14 Postoperative Wound Dehiscence Rate	2.84	0.00	0.00	0.00	4.60	0.00	0.00	2.72	0.00	0.00	0.00	2.42
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	3.12	1.51	0.00	0.00	0.00	2.06	1.05	1.19	0.00	0.00	1.09	1.11
CLABSI	1.120	0.810	0.260	0.500	0.780	0.520	0.660	1.080	0.510	0.530	1.200	0.000
CAUTI	0.590	0.770	0.610	1.120	0.180	0.930	0.630	0.000	0.540	0.770	0.600	0.860
SSI COLON Surgical Site Infection	1.37	3.23	2.74	1.19	1.47	3.85	0.00	2.94	2.47	0.00	2.22	1.23
SSI HYST Surgical Site Infection	0.00	0.00	0.00	0.00	1.52	0.00	0.00	0.00	0.00	0.00	2.04	3.57
MRSA	0.000	0.080	0.030	0.030	0.110	0.030	0.070	0.030	0.030	0.080	0.080	0.090
CDIFF	0.770	0.600	0.710	0.560	0.640	0.670	0.630	0.840	0.780	0.350	0.310	0.660
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SURVEY SYSTEM (HCAHPS)%												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	79.0%	76.0%	77.0%	75.0%	79.0%	77.0%	77.0%	75.0%	78.0%	80.0%	81.0%	79.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.0%	15.0%	15.0%	14.0%	13.0%	15.0%	14.0%	16.0%	14.0%	12.0%	15.0%	16.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	5.0%	5.0%	5.0%	6.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	80.0%	79.0%	79.0%	80.0%	81.0%	79.0%	79.0%	82.0%	81.0%	81.0%	80.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	14.0%	14.0%	14.0%	15.0%	14.0%	15.0%	15.0%	14.0%	13.0%	12.0%	14.0%	14.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.0%	6.0%	6.0%	6.0%	5.0%	4.0%	6.0%	7.0%	6.0%	7.0%	5.0%	6.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.0%	66.0%	66.0%	65.0%	66.0%	73.0%	66.0%	64.0%	68.0%	68.0%	67.0%	68.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	23.0%	23.0%	24.0%	24.0%	24.0%	22.0%	24.0%	26.0%	22.0%	21.0%	25.0%	23.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.0%	9.0%	10.0%	11.0%	10.0%	9.0%	10.0%	11.0%	10.0%	11.0%	8.0%	9.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.0%	69.0%	68.0%	69.0%	69.0%	75.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	23.0%	23.0%	24.0%	22.0%	22.0%	19.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.0%	8.0%	8.0%	9.0%	8.0%	6.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	65.0%	64.0%	65.0%	65.0%	65.0%	65.0%	66.0%	61.0%	63.0%	66.0%	65.0%	62.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	17.0%	17.0%	15.0%	16.0%	17.0%	15.0%	16.0%	20.0%	16.0%	17.0%	15.0%	20.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	18.0%	19.0%	19.0%	19.0%	18.0%	20.0%	18.0%	19.0%	21.0%	17.0%	20.0%	18.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	88.0%	88.0%	88.0%	88.0%	88.0%	86.0%	87.0%	77.0%	87.0%	88.0%	87.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	12.0%	12.0%	12.0%	12.0%	12.0%	14.0%	13.0%	11.0%	13.0%	12.0%	13.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	51.0%	51.0%	52.0%	51.0%	50.0%	53.0%	50.0%	46.0%	51.0%	50.0%	50.0%	52.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.0%	42.0%	40.0%	41.0%	43.0%	40.0%	40.0%	46.0%	41.0%	42.0%	44.0%	43.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	5.0%	6.0%	5.0%	5.0%	5.0%	5.0%	5.0%	6.0%	6.0%	6.0%	5.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	74.0%	72.0%	71.0%	71.0%	74.0%	75.0%	71.0%	72.0%	73.0%	71.0%	71.0%	75.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.0%	17.0%	17.0%	19.0%	16.0%	15.0%	17.0%	16.0%	18.0%	16.0%	18.0%	157.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	11.0%	11.0%	12.0%	11.0%	9.0%	10.0%	11.0%	12.0%	10.0%	13.0%	11.0%	10.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10.0%	9.0%	10.0%	11.0%	9.0%	8.0%	8.0%	10.0%	11.0%	8.0%	9.0%	9.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.0%	20.0%	18.0%	17.0%	16.0%	22.0%	21.0%	20.0%	19.0%	18.0%	19.0%	21.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	69.0%	68.0%	69.0%	70.0%	72.0%	68.0%	67.0%	67.0%	67.0%	71.0%	72.0%	70.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	65.0%	61.0%	60.0%	62.0%	64.0%	66.0%	61.0%	58.0%	58.0%	62.0%	63.0%	64.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.0%	29.0%	29.0%	28.0%	29.0%	24.0%	31.0%	32.0%	31.0%	28.0%	29.0%	27.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	11.0%	11.0%	10.0%	11.0%	7.0%	9.0%	9.0%	10.0%	10.0%	10.0%	8.0%	9.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.0%	6.0%	7.0%	7.0%	5.0%	6.0%	5.0%	8.0%	6.0%	6.0%	5.0%	5.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.0%	72.0%	71.0%	71.0%	76.0%	71.0%	71.0%	69.0%	68.0%	75.0%	73.0%	70.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.0%	23.0%	23.0%	23.0%	19.0%	25.0%	24.0%	23.0%	26.0%	20.0%	22.0%	25.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOWUP %												
OP29 Avg Risk Polyp Surveillance	76.0%	84.0%	79.0%	88.0%	76.0%	90.0%	82.0%	94.0%	88.0%	84.0%	96.0%	84.0%
OP30 High risk Polyp Surveillance	69.0%	75.0%	86.0%	89.0%	88.0%	82.0%	89.0%	81.0%	82.0%	77.0%	69.0%	66.0%
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI	17.27	38.45	18.27	22.13	16.77	37.28	25	5.22	13.48			
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	10.54	8.95	8.2	7.52	11.86	7.36	4.4	4.57	6.03			
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)	29.0%	46.0%	38.0%	24.0%	30.0%	38.0%	46.0%	29.0%	29.0%	18.0%	27.0%	14.0%
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT (ED) THROUGHPUT												
ED2b ED Decision to Transport	65.5	69	64.5	66	59.5	61.25	54	59.5	73	69.25	62.5	65
OP21 Time to pain medication for long bone fractures	53.41	53.33	55.35	46.38	46.83	54.78	43.82	41.24	39.34			
OP22 Left without being seen	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01
OP23 Head CT stroke patients	0.82	0.63	0.79	1	1	0.92	0.56	0.86	0.6	0.75	0.67	0.92
Median Time from ED Arrival to Departure for Outpatients (18b)	127.03	120.49	119.2	138.86	133.07	17.82	127	225.91	121.95			
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	24.95	18.42	19.97	17.2	15.68	16.34	9.69	10.61	7.76			
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION AND TREATMENT %												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE	0.29	0.46	0.38	0.24	0.3	0.38	0.46	0.29	0.29	0.18	0.27	0.14
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY CARE %												
PC01 Elective Delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.04	0.00	0.06
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS RATE												
Hip and Knee Complications	0	0.02	0.01	0.01	0.02	0.03	0.05	0.02	0.01			
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0.19	0.15	0.15	0.18	0.18	0.23	0.18	0.15	0.15	0.1	0.16	0.11
PSI90 Complications / patient safety for selected indicators	0.68	0.92	0.9	0.96	0.97	0.96						

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	17.0%	11.0%	13.0%	10.0%	12.0%	16.0%	13.0%	8.0%				
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate	18.0%	12.0%	7.0%	12.0%	11.0%	15.0%	27.0%	0.0%				
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	20.0%	17.0%	21.0%	17.0%	22.0%	19.0%	20.0%	18.0%				
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.0%	5.0%	3.0%	2.0%	6.0%	4.0%	5.0%	3.0%				
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	13.0%	12.0%	13.0%	12.0%	13.0%	13.0%	13.0%	12.0%	12.0%	12.0%	12.0%	12.0%
READM30 STK Stroke 30day readmission rate	8.0%	11.0%	13.0%	9.0%	14.0%	10.0%	9.0%	0.0%				
READM30HF Heart Failure 30Day readmissions rate	24.0%	30.0%	21.0%	26.0%	23.0%	20.0%	24.0%	19.0%				
READM30PN Pneumonia 30day readmission rate	15.0%	15.0%	21.0%	15.0%	20.0%	17.0%	15.0%	15.0%				
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	4.0%	2.0%	0.0%	4.0%	8.0%	2.0%	0.0%	2.0%	3.0%			
MORT30 COPD 30day mortality rate COPD patients	2.0%	3.0%	3.0%	3.0%	3.0%	2.0%	2.0%	4.0%	3.0%			
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	7.0%	2.0%	5.0%	4.0%	5.0%	5.0%	3.0%	7.0%	7.0%			
MORT30HF Heart failure 30day mortality rate	2.0%	3.0%	2.0%	2.0%	2.0%	4.0%	5.0%	3.0%	4.0%			
MORT30PN Pneumonia 30day mortality rate	5.0%	4.0%	3.0%	5.0%	6.0%	7.0%	7.0%	4.0%	6.0%			
MORT30STK Stroke 30day mortality rate	6.0%	5.0%	5.0%	7.0%	8.0%	6.0%	4.0%	6.0%	3.0%			
USE OF MEDICAL IMAGING OUTPATIENT IMAGING EFFICIENCY %												
OP8 MRI Lumbar Spine for Low Back Pain	34.0%	34.0%	34.0%	34.0%	34.0%	34.0%	40.0%	40.0%	40.0%			
OP9 Mammography Followup Rates	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	8.0%	8.0%	8.0%			
OP10 Abdomen CT Use of Contrast Material	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	8.0%	8.0%	8.0%	7.0%	7.0%	7.0%
OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	5.04	5.94	0.00	1.06	0.00	3.52	0.00	4.85	1.19
PSI 6 Iatrogenic Pneumothorax Rate	0.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	1.01	0.00	0.00	1.06	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	3.50	0.00	7.84	3.60	13.03	3.50	3.37	7.55	0.00	0.00	7.12	7.04
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	11.05	10.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	13.79	12.27	0.00	20.13	13.51	0.00	14.18	8.26	32.26	0.00	8.20	
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.21	3.15	0.00	3.41	3.14	0.00	0.00	0.00	3.06	6.35	3.39	0.00
PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	18.99	0.00	0.00	5.88	0.00	5.65	13.79	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	11.24	0.00	5.99	0.00	0.00	0.00	0.00
CLABSI	2.560	0.000	1.130	0.000	0.000	0.000	1.250	1.360	0.000	2.230	1.410	0.000
CAUTI	0.720	1.740	1.540	2.370	0.000	0.860	0.000	0.000	1.860	0.840	0.880	1.030
SSI COLON Surgical Site Infection	0.00	0.00	8.33	0.00	0.00	0.00	0.00	7.14	0.00	0.00	0.00	0.00
SSI HYST Surgical Site Infection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	14.29
MRSA	0.000	0.160	0.160	0.000	0.330	0.000	0.000	0.000	0.000	0.320	0.000	0.170
CDIFF	0.680	0.860	2.020	0.510	0.510	0.500	0.760	0.520	0.980	0.340	0.510	0.690
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	85.0%	81.0%	84.0%	86.0%	86.0%	85.0%	87.0%	81.0%	86.0%	89.0%	87.0%	88.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	12.0%	11.0%	10.0%	10.0%	8.0%	12.0%	8.0%	13.0%	10.0%	7.0%	9.0%	8.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	8.0%	6.0%	4.0%	6.0%	4.0%	5.0%	7.0%	3.0%	4.0%	4.0%	4.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	83.0%	85.0%	83.0%	82.0%	86.0%	83.0%	83.0%	82.0%	82.0%	82.0%	86.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.0%	10.0%	12.0%	11.0%	10.0%	10.0%	11.0%	10.0%	9.0%	9.0%	14.0%	7.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	7.0%	7.0%	3.0%	6.0%	8.0%	4.0%	6.0%	7.0%	9.0%	9.0%	4.0%	7.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	63.0%	67.0%	65.0%	74.0%	61.0%	141.0%	69.0%	71.0%	73.0%	72.0%	65.0%	73.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	31.0%	17.0%	26.0%	19.0%	27.0%	18.0%	19.0%	17.0%	18.0%	19.0%	23.0%	14.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	6.0%	8.0%	9.0%	7.0%	12.0%	6.0%	11.0%	12.0%	9.0%	9.0%	12.0%	13.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	75.0%	70.0%	74.0%	77.0%	74.0%	78.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	16.0%	20.0%	21.0%	13.0%	16.0%	12.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	8.0%	10.0%	6.0%	10.0%	10.0%	9.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	58.0%	68.0%	79.0%	73.0%	63.0%	63.0%	64.0%	71.0%	68.0%	69.0%	59.0%	70.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	22.0%	10.0%	10.0%	8.0%	18.0%	15.0%	14.0%	15.0%	14.0%	13.0%	20.0%	10.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	20.0%	22.0%	10.0%	19.0%	18.0%	21.0%	22.0%	15.0%	19.0%	18.0%	20.0%	19.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	90.0%	93.0%	90.0%	91.0%	91.0%	92.0%	84.0%	90.0%	89.0%	84.0%	93.0%	91.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	10.0%	7.0%	10.0%	8.0%	9.0%	8.0%	16.0%	10.0%	11.0%	16.0%	7.0%	9.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	53.0%	60.0%	52.0%	59.0%	55.0%	57.0%	56.0%	50.0%	58.0%	62.0%	46.0%	59.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	43.0%	37.0%	42.0%	39.0%	40.0%	42.0%	40.0%	44.0%	39.0%	33.0%	50.0%	38.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	3.0%	3.0%	3.0%	2.0%	5.0%	1.0%	4.0%	6.0%	3.0%	5.0%	4.0%	3.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	70.0%	66.0%	60.0%	72.0%	67.0%	75.0%	63.0%	63.0%	70.0%	68.0%	66.0%	78.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.0%	18.0%	24.0%	16.0%	15.0%	13.0%	21.0%	19.0%	17.0%	16.0%	18.0%	11.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	14.0%	17.0%	16.0%	12.0%	18.0%	12.0%	16.0%	17.0%	13.0%	17.0%	15.0%	11.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.0%	9.0%	6.0%	6.0%	8.0%	4.0%	6.0%	8.0%	8.0%	7.0%	11.0%	5.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	24.0%	20.0%	12.0%	19.0%	14.0%	16.0%	16.0%	17.0%	18.0%	17.0%	21.0%	13.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	69.0%	71.0%	83.0%	76.0%	78.0%	80.0%	79.0%	75.0%	74.0%	76.0%	68.0%	81.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	66.0%	70.0%	59.0%	65.0%	68.0%	67.0%	72.0%	66.0%	67.0%	73.0%	68.0%	74.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	18.0%	20.0%	31.0%	26.0%	26.0%	24.0%	17.0%	26.0%	18.0%	20.0%	24.0%	16.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	16.0%	10.0%	11.0%	8.0%	6.0%	9.0%	11.0%	8.0%	15.0%	7.0%	7.0%	10.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.0%	2.0%	5.0%	6.0%	6.0%	1.0%	4.0%	3.0%	4.0%	3.0%	5.0%	3.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	70.0%	76.0%	83.0%	79.0%	80.0%	81.0%	84.0%	79.0%	82.0%	84.0%	79.0%	83.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	25.0%	21.0%	12.0%	16.0%	14.0%	18.0%	13.0%	18.0%	14.0%	13.0%	16.0%	14.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance	50.0%	100.0%	0.0%	60.0%	0.0%	100.0%	100.0%		0.0%	0.0%		0.0%
OP30 High risk Polyp Surveillance	27.0%	20.0%	67.0%	100.0%	50.0%	33.0%	100.0%	100.0%	50.0%	0.0%	50.0%	50.0%
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI												
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain					2		6					
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	77	82	102.5	76	76.5	79	79.5	87	126	106.5	120.5	101
OP21 Time to pain medication for long bone fractures	78.5	39.5	55	44	78	75	55					
OP22 Left without being seen	0.02	0.01	0.02	0.01	0.01	0.01						
OP23 Head CT stroke patients	1			1		1	1		1			1
Median Time from ED Arrival to Departure for Outpatients (18b)	161.5	125.5	149.5	185	136	139.5	158.5	128.5	159.5	134	164	182
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	28.5	21	42	22	28	23	23.5					
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						100.0%	100.0%	100.0%	99.0%	99.0%	99.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination						100.0%	100.0%	100.0%	99.0%	98.0%	99.0%	
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE	0	0	0	0	0	0						
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications	0	0.01	0	0.02	0.02	0						
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0.22	0.21	0.22	0.15	0.1	0.55	0.24	0.17	0.13	0.22	0	0.19
PSI90 Complications / patient safety for selected indicators	0.93	0.93	0.82	1.08	0.97	0.77	1	0.89	1.13	0.9		

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	10.0%	3.0%	15.0%	9.0%	10.0%	6.0%	19.0%	15.0%	14.0%	8.0%		
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate	15.0%	15.0%	6.0%	11.0%	13.0%	0.0%	24.0%	14.0%	11.0%	0.0%		
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	26.0%	29.0%	18.0%	11.0%	29.0%	15.0%	20.0%	17.0%	24.0%	14.0%		
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	2.0%	4.0%	0.0%	0.0%	9.0%	6.0%	3.0%	4.0%	2.0%	8.0%		
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.0%	13.0%	12.0%	11.0%	14.0%	10.0%	14.0%	11.0%	12.0%	12.0%	12.0%	13.0%
READM30 STK Stroke 30day readmission rate	15.0%	8.0%	11.0%	0.0%	5.0%	7.0%	15.0%	6.0%	20.0%	13.0%		
READM30HF Heart Failure 30Day readmissions rate	18.0%	30.0%	26.0%	27.0%	32.0%	17.0%	21.0%	16.0%	16.0%	23.0%		
READM30PN Pneumonia 30day readmission rate	11.0%	17.0%	30.0%	19.0%	20.0%	17.0%	15.0%	14.0%	13.0%	13.0%		
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	3.0%	0.0%	0.0%	10.0%	8.0%	6.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30 COPD 30day mortality rate COPD patients	0.0%	2.0%	0.0%	6.0%	2.0%	1.0%	2.0%	3.0%	5.0%	2.0%	3.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	5.0%	0.0%	0.0%	8.0%	5.0%	12.0%	0.0%	2.0%	0.0%	5.0%	3.0%	2.2%
MORT30HF Heart failure 30day mortality rate	0.0%	2.0%	0.0%	4.0%	3.0%	0.0%	4.0%	0.0%	4.0%	2.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	8.0%	2.0%	0.0%	0.0%	4.0%	14.0%	4.0%	3.0%	8.0%	2.0%	3.0%	1.4%
MORT30STK Stroke 30day mortality rate	4.0%	5.0%	3.0%	0.0%	4.0%	6.0%	0.0%	6.0%	0.0%	0.0%	3.0%	3.0%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING %												
OP8 MRI Lumbar Spine for Low Back Pain	43.0%	43.0%	43.0%	43.0%	43.0%	43.0%						
OP9 Mammography Followup Rates	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%						
OP10 Abdomen CT Use of Contrast Material	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						

Quality Target Measures

- PSI 3 Pressure Ulcer Rate
- PSI 6 Iatrogenic Pneumothorax Rate
- PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)
- PSI 8 In Hospital Fall with Hip Fracture Rate
- PSI 9 Perioperative Hemorrhage or Hematoma Rate
- PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis
- PSI 11 Postoperative Respiratory Failure Rate
- PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate
- PSI 13 Postoperative Sepsis Rate
- PSI 14 Postoperative Wound Dehiscence Rate
- PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate
- CLABSI
- CAUTI
- SSI COLON Surgical Site Infection
- SSI HYST Surgical Site Infection
- MRSA
- CDIFF

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	100.0%	100.0%	100.0%	0.0%	0.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	0.0%	0.0%	0.0%	100.0%	100.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	0.0%	0.0%	0.0%	0.0%	0.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	100.0%	100.0%	100.0%	100.0%	100.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	0.0%	0.0%	0.0%	0.0%	0.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	0.0%	0.0%	0.0%	0.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	100.0%	100.0%	100.0%	100.0%	
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	0.0%	0.0%	0.0%	0.0%	
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	0.0%	0.0%	0.0%	0.0%	

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled			100.0%			100.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled			0.0%			0.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled			0.0%			0.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them			100.0%		100.0%							
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them			0.0%		0.0%							
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them			0.0%				0.0%					
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home			100.0%		100.0%		100.0%				100.0%	
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home			0.0%		0.0%		0.0%				0.0%	
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital		33.0%	100.0%		33.0%		17.0%			67.0%		
HCOMP7A Patients who "Agree" they understood their care when they left the hospital		67.0%	0.0%		33.0%		67.0%				0.0%	
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital		0.0%	0.0%		33.0%		0.0%				0.0%	
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	100.0%		100.0%		100.0%		100.0%				100.0%	
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean		0.0%	0.0%		0.0%		0.0%				0.0%	
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean		0.0%	0.0%		0.0%		0.0%				0.0%	
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	100.0%		0.0%		0.0%			0.0%			0.0%	
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)		0.0%	0.0%		0.0%			0.0%			0.0%	
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)		0.0%	100.0%		100.0%			100.0%			100.0%	
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	100.0%		100.0%		100.0%		100.0%				100.0%	
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night		0.0%	0.0%		0.0%		0.0%				0.0%	

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night		0.0%	0.0%		0.0%		0.0%			0.0%		
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital		0.0%	0.0%		0.0%		0.0%			0.0%		
HRECMND DY Patients who reported YES, they would definitely recommend the hospital		100.0%	100.0%		100.0%		50.0%			100.0%		
HRECMND PY Patients who reported YES, they would probably recommend the hospital		0.0%	0.0%		0.0%		50.0%			100.0%		
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLL												
OP29 Avg Risk Polyp Surveillance												
OP30 High risk Polyp Surveillance												
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI												
							195					
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	25.25	5.75	4	16.25	2.25	16.3	10.8	11.5				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTI												
ED2b ED Decision to Transport	20.5	137			2		4	12	23		9	23.5
OP21 Time to pain medicaton for long bone fractures	45.5		97.5	33	65			68				
OP22 Left without being seen	0	0.01	0	0.01	0.01	0.01	0.01	0	0.01	0.02	0.01	0.01
OP23 Head CT stroke patients	0	1	1			1	1	1		1		1
Median Time from ED Arrival to Departure for Outpatients (18b)	92.5	95.5	88.5	87	105	118	108	87.5	110	136	102	131
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	3	5	3	6	5	4	7	4				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza												
							100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
IMM3OP27 FACADHPCT HCW Influenza Vaccination												
	99.0%											
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications												
PSI90 Complications / patient safety for selected indicators												

Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18

READMISSIONS 30 DAYS RATES OF READMISSION %

READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate												
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate												
READM30 HIPKNEE 30day readmission rate following elective THA / TKA												
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission		100.0%	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
READM30 STK Stroke 30day readmission rate	50.0%											
READM30HF Heart Failure 30Day readmissions rate												
READM30PN Pneumonia 30day readmission rate												

MORTALITY 30 DAYS DEATH RATE %

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients												0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate												
MORT30HF Heart failure 30day mortality rate												
MORT30PN Pneumonia 30day mortality rate												
MORT30STK Stroke 30day mortality rate												

USE OF MEDICAL IMAGING OUTPATIENT IMAGING E

- OP8 MRI Lumbar Spine for Low Back Pain
- OP9 Mammography Followup Rates
- OP10 Abdomen CT Use of Contrast Material
- OP11 Thorax CT Use of Contrast Material
- OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery
- OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)												
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	2.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	16.13	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	44.44	32.26	27.03	25.64	0.00	25.00	0.00	26.32	20.41	0.00	66.67	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.33	0.00	14.49	17.54	0.00
PSI 13 Postoperative Sepsis Rate	71.43	29.41	0.00	0.00	0.00	0.00	0.00	0.00	19.61	0.00	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.83	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	10.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	9.800	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	4.070	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection	7.69	7.69	12.50	0.00	0.00	10.00	0.00	0.00	6.67	0.00	25.00	0.00
SSI HYST Surgical Site Infection	0.00	0.00	0.00	0.00	5.88	0.00	0.00	0.00	0.00	0.00	0.00	6.25
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	1.370	0.360	1.020	0.000	0.000	0.000	0.000	0.000	0.000	0.000		
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	83.0%	84.0%	84.0%	79.0%	85.0%	82.0%	87.0%	82.0%	79.0%	91.0%	84.0%	91.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	13.0%	13.0%	16.0%	13.0%	13.0%	10.0%	13.0%	17.0%	7.0%	12.0%	16.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	3.0%	3.0%	5.0%	2.0%	5.0%	3.0%	6.0%	4.0%	2.0%	4.0%	2.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	79.0%	85.0%	83.0%	77.0%	80.0%	83.0%	82.0%	85.0%	80.0%	85.0%	86.0%	91.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	15.0%	11.0%	12.0%	17.0%	16.0%	13.0%	16.0%	12.0%	16.0%	13.0%	9.0%	15.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.0%	3.0%	5.0%	6.0%	5.0%	4.0%	2.0%	3.0%	4.0%	3.0%	5.0%	5.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	71.0%	71.0%	72.0%	69.0%	70.0%	71.0%	78.0%	68.0%	67.0%	83.0%	73.0%	81.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.0%	26.0%	17.0%	24.0%	23.0%	21.0%	19.0%	20.0%	23.0%	11.0%	21.0%	22.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.0%	3.0%	10.0%	7.0%	7.0%	8.0%	3.0%	12.0%	10.0%	5.0%	7.0%	5.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	69.0%	79.0%	75.0%	70.0%	72.0%	75.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	26.0%	17.0%	22.0%	24.0%	24.0%	21.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.0%	4.0%	3.0%	6.0%	4.0%	4.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	72.0%	70.0%	70.0%	61.0%	68.0%	67.0%	76.0%	68.0%	61.0%	73.0%	77.0%	73.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	15.0%	21.0%	10.0%	29.0%	12.0%	15.0%	12.0%	16.0%	15.0%	17.0%	6.0%	19.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	13.0%	10.0%	16.0%	16.0%	15.0%	22.0%	10.0%	17.0%	21.0%	9.0%	17.0%	18.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	85.0%	85.0%	87.0%	86.0%	89.0%	88.0%	84.0%	86.0%	94.0%	82.0%	88.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	15.0%	15.0%	13.0%	14.0%	11.0%	12.0%	16.0%	14.0%	6.0%	18.0%	13.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	59.0%	60.0%	53.0%	59.0%	53.0%	58.0%	60.0%	63.0%	54.0%	61.0%	63.0%	72.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	33.0%	31.0%	35.0%	31.0%	41.0%	32.0%	34.0%	30.0%	37.0%	31.0%	32.0%	31.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.0%	6.0%	6.0%	6.0%	4.0%	6.0%	3.0%	5.0%	5.0%	5.0%	4.0%	4.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	81.0%	91.0%	82.0%	82.0%	84.0%	83.0%	83.0%	87.0%	78.0%	88.0%	86.0%	91.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	15.0%	8.0%	9.0%	10.0%	10.0%	8.0%	11.0%	9.0%	18.0%	11.0%	11.0%	11.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	5.0%	1.0%	9.0%	8.0%	6.0%	8.0%	6.0%	4.0%	4.0%	1.0%	2.0%	3.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	3.0%	5.0%	9.0%	8.0%	5.0%	7.0%	1.0%	9.0%	9.0%	1.0%	4.0%	1.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	12.0%	13.0%	19.0%	14.0%	11.0%	11.0%	14.0%	18.0%	10.0%	12.0%	11.0%	23.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	85.0%	82.0%	72.0%	78.0%	84.0%	82.0%	85.0%	73.0%	80.0%	87.0%	84.0%	78.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	72.0%	72.0%	74.0%	67.0%	74.0%	75.0%	76.0%	73.0%	74.0%	78.0%	63.0%	81.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.0%	24.0%	24.0%	28.0%	24.0%	20.0%	20.0%	21.0%	22.0%	22.0%	33.0%	19.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	4.0%	4.0%	2.0%	5.0%	2.0%	6.0%	4.0%	7.0%	4.0%	0.0%	4.0%	2.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	3.0%	6.0%	5.0%	2.0%	6.0%	1.0%	7.0%	6.0%	1.0%	2.0%	1.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	84.0%	87.0%	80.0%	83.0%	87.0%	86.0%	87.0%	81.0%	82.0%	94.0%	86.0%	84.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	13.0%	10.0%	14.0%	13.0%	10.0%	8.0%	12.0%	11.0%	12.0%	5.0%	12.0%	16.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance		100.0%		100.0%			100.0%	100.0%				100.0%
OP30 High risk Polyp Surveillance	67.0%		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI				52		38	80.5					
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	15.25	5.75	6.5	8.3	25.75	47.75	7.5	22.5				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	81	80	86	89	69.5	75	62.5	60.5	86.5	72	71.5	70
OP21 Time to pain medication for long bone fractures	57.5	59	35	43	48	28	99	47				
OP22 Left without being seen						0	0	0.01	0.01	0.01	0.01	0.01
OP23 Head CT stroke patients			1	1								
Median Time from ED Arrival to Departure for Outpatients (18b)	166	151	148	147	141.5	132.5	137	135	162	173	150	141
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	14.5	15	8	10.5	11.5	11	16	19.5				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						100.0%	100.0%	100.0%	99.0%	100.0%	99.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE		0	0	0	1	0						0
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0.25	0	0	0	0	0	0	0	0	0	0	0
PSI90 Complications / patient safety for selected indicators	0.98	1.17	1.09	1.05	1.03	0.98	1.11					

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate					0.0%	0.0%		0.0%				
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	29.0%	14.0%	17.0%	4.0%	19.0%	15.0%	36.0%	17.0%	30.0%	15.0%	21.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA												
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	10.0%	10.0%	10.0%	9.0%	8.0%	9.0%	11.0%	9.0%	10.0%	9.0%	10.0%	10.0%
READM30 STK Stroke 30day readmission rate	0.0%	0.0%	0.0%				0.0%		0.0%	0.0%		
READM30HF Heart Failure 30Day readmissions rate	25.0%	75.0%	75.0%	33.0%	0.0%	50.0%	0.0%	0.0%	30.0%	80.0%	29.0%	
READM30PN Pneumonia 30day readmission rate	18.0%	15.0%	14.0%	13.0%	13.0%	20.0%	17.0%	13.0%	21.0%	14.0%	15.0%	
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	4.0%	5.0%	0.0%	0.0%	4.0%	0.0%	0.0%	0.0%	5.6%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate					0.0%	0.0%		0.0%				
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	14.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	4.0%	4.0%	6.0%	0.0%	2.0%	0.0%	3.0%	12.0%	2.0%	3.9%
MORT30STK Stroke 30day mortality rate	0.0%	0.0%	0.0%				0.0%		0.0%	0.0%		0.0%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING B												
OP8 MRI Lumbar Spine for Low Back Pain	34.0%	34.0%	34.0%	34.0%	34.0%	34.0%						
OP9 Mammography Followup Rates												
OP10 Abdomen CT Use of Contrast Material	13.0%	13.0%	13.0%	13.0%	13.0%	13.0%						
OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time												

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
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Quality Target Measures

PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate												
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis												
PSI 11 Postoperative Respiratory Failure Rate												
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate												
PSI 13 Postoperative Sepsis Rate												
PSI 14 Postoperative Wound Dehiscence Rate												
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate												
CLABSI												
CAUTI												
SSI COLON Surgical Site Infection												
SSI HYST Surgical Site Infection												
MRSA												
CDIFF												

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	100.0%	67.0%	100.0%	88.0%	100.0%	100.0%	100.0%	86.0%	100.0%	100.0%	92.0%	100.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	0.0%	17.0%	0.0%	13.0%	0.0%	0.0%	0.0%	5.0%	0.0%	100.0%	8.0%	0.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	0.0%	17.0%	0.0%	0.0%	0.0%	0.0%	0.0%	10.0%	0.0%	100.0%	0.0%	0.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	100.0%	67.0%	67.0%	75.0%	67.0%	100.0%	100.0%	86.0%	100.0%	100.0%	92.0%	100.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	0.0%	33.0%	33.0%	0.0%	33.0%	0.0%	0.0%	5.0%	0.0%	0.0%	8.0%	0.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	0.0%	0.0%	25.0%	0.0%	0.0%	0.0%	10.0%	0.0%	0.0%	0.0%	0.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	100.0%	100.0%	86.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	0.0%	14.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled		50.0%	25.0%	50.0%	0.0%	50.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled		50.0%	25.0%	0.0%	0.0%	50.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled		0.0%	50.0%	50.0%	100.0%	0.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them		50.0%	50.0%	100.0%	100.0%	100.0%	100.0%	83.0%	100.0%	100.0%	100.0%	100.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	17.0%	0.0%	0.0%	0.0%	0.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them		50.0%	50.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home		50.0%	50.0%	100.0%	67.0%	100.0%	100.0%	75.0%	100.0%	100.0%	92.0%	88.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home		50.0%	50.0%	0.0%	33.0%	0.0%	0.0%	25.0%	0.0%	0.0%	8.0%	13.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital		33.0%	60.0%	100.0%	67.0%	38.0%	100.0%	67.0%	42.0%	0.0%	29.0%	55.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital		33.0%	20.0%	0.0%	0.0%	63.0%	0.0%	33.0%	58.0%	67.0%	71.0%	45.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital		33.0%	20.0%	0.0%	33.0%	0.0%	0.0%	0.0%	0.0%	33.0%	0.0%	0.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean		100.0%	100.0%	100.0%	67.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean		0.0%	0.0%	0.0%	33.0%	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)		0.0%	50.0%	0.0%	33.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	0.0%	0.0%	0.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)		100.0%	50.0%	100.0%	67.0%	100.0%	100.0%	80.0%	100.0%	100.0%	100.0%	100.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night		0.0%	100.0%	50.0%	67.0%	67.0%	100.0%	100.0%	75.0%	100.0%	100.0%	100.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night		100.0%	0.0%	50.0%	33.0%	33.0%	0.0%	0.0%	25.0%	0.0%	0.0%	0.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital		0.0%	50.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital		100.0%	50.0%	50.0%	100.0%	33.0%	100.0%	80.0%	100.0%	100.0%	100.0%	100.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital		0.0%	0.0%	50.0%	0.0%	0.0%	0.0%	20.0%	0.0%	0.0%	0.0%	0.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLL												
OP29 Avg Risk Polyp Surveillance												
OP30 High risk Polyp Surveillance												
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI												
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	3.5	12	34	58	7.5	11	8.75					
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTI												
ED2b ED Decision to Transport												61
OP21 Time to pain medicaton for long bone fractures	59		36.5	38	196	173	46					
OP22 Left without being seen			0	0.01	0	0.01	0.01	0.01				
OP23 Head CT stroke patients												
Median Time from ED Arrival to Departure for Outpatients (18b)	145	132	81	137.5	160	106.5	117	133.5	128	142		111
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	29	29	23	17	19	25	25					
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza												
IMM3OP27 FACADHPCT HCW Influenza Vaccination	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications												
PSI90 Complications / patient safety for selected indicators	1	1	1	1	1	1	1	1	1	1	1	1

Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18

READMISSIONS 30 DAYS RATES OF READMISSION %

READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate												
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate		0.0%	0.0%	50.0%	100.0%	100.0%	0.0%	0.0%	50.0%	0.0%		
READM30 HIPKNEE 30day readmission rate following elective THA / TKA												
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	0.0%	27.0%	11.0%	20.0%	13.0%	15.0%	0.0%	0.0%	9.0%	13.0%	17.0%	7.0%
READM30 STK Stroke 30day readmission rate												
READM30HF Heart Failure 30Day readmissions rate		0.0%	0.0%	0.0%	0.0%	0.0%			0.0%			
READM30PN Pneumonia 30day readmission rate		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			

MORTALITY 30 DAYS DEATH RATE %

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate												
MORT30HF Heart failure 30day mortality rate			0.0%	0.0%	0.0%	0.0%		0.0%	0.0%		0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30STK Stroke 30day mortality rate												

USE OF MEDICAL IMAGING OUTPATIENT IMAGING E

- OP8 MRI Lumbar Spine for Low Back Pain
- OP9 Mammography Followup Rates
- OP10 Abdomen CT Use of Contrast Material
- OP11 Thorax CT Use of Contrast Material
- OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery
- OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00		0.00	0.00	0.00		0.00		0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00				0.00	0.00	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 13 Postoperative Sepsis Rate	0.00		0.00	0.00	0.00		0.00		0.00	0.00	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	66.670
SSI COLON Surgical Site Infection		0.00		0.00	0.00				0.00		0.00	
SSI HYST Surgical Site Infection												
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	0.000	0.000	0.000	3.440	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	87.0%	80.0%	77.0%	78.0%	88.0%	88.0%	82.0%	72.0%	80.0%	88.0%	90.0%	97.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	11.0%	11.0%	10.0%	8.0%	10.0%	8.0%	14.0%	21.0%	13.0%	10.0%	10.0%	3.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	2.0%	9.0%	13.0%	14.0%	2.0%	4.0%	5.0%	6.0%	7.0%	2.0%	0.0%	0.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	82.0%	80.0%	70.0%	80.0%	80.0%	84.0%	77.0%	59.0%	76.0%	83.0%	98.0%	89.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	7.0%	10.0%	10.0%	14.0%	12.0%	11.0%	22.0%	13.0%	10.0%	2.0%	8.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	7.0%	13.0%	20.0%	10.0%	6.0%	4.0%	12.0%	20.0%	11.0%	7.0%	0.0%	3.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	71.0%	78.0%	64.0%	85.0%	71.0%	86.0%	70.0%	82.0%	70.0%	70.0%	81.0%	89.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.0%	17.0%	14.0%	15.0%	21.0%	9.0%	17.0%	5.0%	19.0%	22.0%	14.0%	11.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	4.0%	5.0%	21.0%	0.0%	8.0%	5.0%	13.0%	14.0%	11.0%	9.0%	5.0%	0.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	61.0%	71.0%	79.0%	50.0%	50.0%	83.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	16.0%	7.0%	17.0%	50.0%	6.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	17.0%	13.0%	14.0%	33.0%	0.0%	11.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	76.0%	60.0%	60.0%	75.0%	80.0%	83.0%	61.0%	89.0%	53.0%	45.0%	75.0%	63.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	18.0%	5.0%	20.0%	5.0%	20.0%	0.0%	17.0%	42.0%	29.0%	27.0%	0.0%	25.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	6.0%	35.0%	20.0%	20.0%	0.0%	17.0%	22.0%	8.0%	18.0%	27.0%	25.0%	13.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	79.0%	84.0%	88.0%	94.0%	87.0%	88.0%	89.0%	79.0%	85.0%	100.0%	82.0%	100.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	21.0%	16.0%	13.0%	6.0%	13.0%	13.0%	11.0%	21.0%	15.0%	0.0%	18.0%	0.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	59.0%	53.0%	64.0%	53.0%	50.0%	56.0%	51.0%	45.0%	49.0%	40.0%	51.0%	45.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.0%	40.0%	32.0%	47.0%	41.0%	42.0%	46.0%	55.0%	37.0%	60.0%	43.0%	55.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	6.0%	4.0%	0.0%	9.0%	2.0%	3.0%	0.0%	15.0%	0.0%	5.0%	0.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	79.0%	79.0%	100.0%	71.0%	88.0%	94.0%	86.0%	75.0%	80.0%	14.0%	71.0%	92.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	21.0%	14.0%	0.0%	24.0%	12.0%	6.0%	0.0%	19.0%	13.0%	0.0%	0.0%	8.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	7.0%	7.0%	0.0%	6.0%	0.0%	0.0%	14.0%	6.0%	7.0%	86.0%	29.0%	0.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.0%	8.0%	25.0%	12.0%	18.0%	13.0%	5.0%	7.0%	13.0%	7.0%	0.0%	0.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	13.0%	23.0%	0.0%	24.0%	6.0%	20.0%	33.0%	36.0%	13.0%	29.0%	0.0%	9.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	80.0%	69.0%	75.0%	65.0%	76.0%	67.0%	62.0%	57.0%	73.0%	64.0%	100.0%	91.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	73.0%	79.0%	90.0%	76.0%	81.0%	75.0%	86.0%	69.0%	73.0%	64.0%	71.0%	75.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	20.0%	14.0%	10.0%	6.0%	13.0%	19.0%	9.0%	19.0%	20.0%	14.0%	14.0%	17.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	7.0%	7.0%	0.0%	18.0%	6.0%	6.0%	5.0%	13.0%	7.0%	21.0%	14.0%	8.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	12.0%	11.0%	13.0%	7.0%	0.0%	0.0%	0.0%	7.0%	0.0%	8.0%	0.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	80.0%	65.0%	44.0%	73.0%	73.0%	80.0%	68.0%	64.0%	53.0%	50.0%	62.0%	91.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	20.0%	23.0%	44.0%	13.0%	20.0%	20.0%	32.0%	36.0%	40.0%	50.0%	31.0%	9.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%
OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	88.0%	100.0%	100.0%	100.0%	100.0%	100.0%		80.0%
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI			26		36	306						
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	10	65	9.5	9	23	39						
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	125	40	38	40	35.5	46	52.5	40	73	90	55	61
OP21 Time to pain medication for long bone fractures	61	37.5	101.5	35	20.5	73	93					
OP22 Left without being seen	0.02	0.01	0.06	0.02	0.02	0.01						
OP23 Head CT stroke patients												
Median Time from ED Arrival to Departure for Outpatients (18b)	72	109	79	103	54	72	101	81	117	91	117	95.5
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	17	12.5	10.5	12	13.5	14.5	19					
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications											0	
PSI90 Complications / patient safety for selected indicators	1	1	1	1	1	1	1	1	1	1		

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate			0.0%		100.0%	100.0%			0.0%	0.0%		
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	13.0%	13.0%	17.0%	0.0%	11.0%	0.0%	38.0%	14.0%	0.0%	0.0%		
READM30 HIPKNEE 30day readmission rate following elective THA / TKA												
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	17.0%	9.0%	10.0%	9.0%	16.0%	11.0%	22.0%	17.0%	14.0%	4.0%	11.0%	20.0%
READM30 STK Stroke 30day readmission rate	0.0%		0.0%		0.0%	0.0%	100.0%	0.0%		0.0%		
READM30HF Heart Failure 30Day readmissions rate	60.0%	20.0%	0.0%	0.0%	25.0%	17.0%	0.0%	0.0%	22.0%	0.0%		
READM30PN Pneumonia 30day readmission rate	0.0%	0.0%	20.0%	0.0%	18.0%	18.0%	17.0%	0.0%	25.0%	0.0%		
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate		0.0%	0.0%	0.0%	0.0%	0.0%			0.0%	0.0%		
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	7.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30STK Stroke 30day mortality rate	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%		0.0%	0.0%	0.0%	0.0%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING B												
OP8 MRI Lumbar Spine for Low Back Pain												
OP9 Mammography Followup Rates	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP10 Abdomen CT Use of Contrast Material	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%						
OP11 Thorax CT Use of Contrast Material	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery												
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time												

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	5.52	6.64	2.12	4.87	0.00	5.21	4.40	3.12	1.10
PSI 6 Iatrogenic Pneumothorax Rate	0.70	0.73	0.00	0.73	0.00	0.00	1.34	0.75	0.00	0.75	0.00	0.75
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.75	0.00	0.00	0.00	0.00	
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	7.14	4.90	0.00	4.40	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	4.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	6.17	5.49	0.00	10.58	9.35	4.67	0.00	5.78	0.00	6.33	14.02	16.30
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.57	0.00	8.89	10.27	2.04	1.99	0.00	0.00	1.92	2.18	7.83	4.31
PSI 13 Postoperative Sepsis Rate	9.43	8.30	0.00	0.00	7.41	0.00	0.00	4.26	0.00	0.00	3.60	12.20
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	11.24	0.00	0.00	0.00	0.00	0.00	0.00	10.64
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	12.20	0.00	0.00	0.00	0.00	0.00	4.78	0.00	0.00	0.00	0.00	4.78
CLABSI	0.000	2.050	0.000	0.000	0.000	0.000	0.000	0.000	0.850	0.000	1.340	0.000
CAUTI	0.970	0.000	0.000	1.550	0.000	0.000	1.590	0.000	0.000	0.880	0.960	0.000
SSI COLON Surgical Site Infection	0.00	5.56	0.00	0.00	0.00	5.26	0.00	0.00	0.00	0.00	0.00	0.00
SSI HYST Surgical Site Infection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3.45	0.00
MRSA	0.000	0.000	0.000	0.140	0.140	0.000	0.000	0.000	0.000	0.000	0.000	0.140
CDIFF	1.330	0.610	0.140	1.150	1.280	0.560	1.190	1.890	1.770	1.430	0.430	0.850

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	81.0%	85.0%	76.0%	81.0%	81.0%	83.0%	82.0%	80.0%	79.0%	83.0%	83.0%	81.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	12.0%	15.0%	9.0%	14.0%	11.0%	14.0%	13.0%	13.0%	12.0%	13.0%	14.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	5.0%	3.0%	8.0%	10.0%	6.0%	6.0%	4.0%	7.0%	9.0%	5.0%	4.0%	5.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	82.0%	84.0%	74.0%	79.0%	82.0%	81.0%	77.0%	83.0%	80.0%	84.0%	84.0%	81.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	12.0%	12.0%	16.0%	11.0%	12.0%	13.0%	15.0%	4.0%	17.0%	9.0%	11.0%	12.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.0%	4.0%	9.0%	10.0%	6.0%	6.0%	8.0%	12.0%	4.0%	7.0%	5.0%	7.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	72.0%	68.0%	57.0%	65.0%	62.0%	73.0%	61.0%	59.0%	63.0%	67.0%	73.0%	65.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.0%	22.0%	29.0%	23.0%	26.0%	20.0%	29.0%	29.0%	25.0%	20.0%	19.0%	25.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	11.0%	14.0%	13.0%	12.0%	6.0%	10.0%	11.0%	13.0%	13.0%	8.0%	10.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	74.0%	75.0%	66.0%	72.0%	66.0%	77.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	17.0%	18.0%	21.0%	19.0%	25.0%	21.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.0%	7.0%	12.0%	9.0%	8.0%	2.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	77.0%	73.0%	63.0%	66.0%	69.0%	72.0%	68.0%	58.0%	63.0%	68.0%	67.0%	55.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	12.0%	11.0%	15.0%	11.0%	19.0%	13.0%	19.0%	21.0%	14.0%	18.0%	15.0%	28.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	12.0%	16.0%	22.0%	22.0%	13.0%	15.0%	13.0%	21.0%	22.0%	14.0%	18.0%	17.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	90.0%	91.0%	88.0%	92.0%	92.0%	91.0%	93.0%	92.0%	88.0%	90.0%	92.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	10.0%	9.0%	12.0%	8.0%	8.0%	9.0%	7.0%	8.0%	12.0%	10.0%	8.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	51.0%	60.0%	55.0%	53.0%	56.0%	59.0%	55.0%	51.0%	49.0%	50.0%	55.0%	55.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	45.0%	38.0%	42.0%	40.0%	39.0%	38.0%	40.0%	48.0%	46.0%	48.0%	42.0%	43.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	4.0%	2.0%	3.0%	7.0%	4.0%	3.0%	4.0%	1.0%	5.0%	3.0%	3.0%	2.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	74.0%	66.0%	64.0%	65.0%	67.0%	67.0%	67.0%	69.0%	69.0%	59.0%	65.0%	66.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	14.0%	20.0%	20.0%	17.0%	21.0%	19.0%	24.0%	19.0%	13.0%	0.0%	17.0%	24.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	13.0%	14.0%	15.0%	18.0%	12.0%	14.0%	10.0%	14.0%	13.0%	19.0%	18.0%	10.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	4.0%	5.0%	12.0%	10.0%	8.0%	5.0%	8.0%	6.0%	10.0%	6.0%	8.0%	6.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	24.0%	18.0%	22.0%	16.0%	20.0%	14.0%	14.0%	16.0%	19.0%	15.0%	18.0%	19.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	72.0%	76.0%	67.0%	74.0%	72.0%	81.0%	79.0%	79.0%	71.0%	79.0%	74.0%	75.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	62.0%	66.0%	56.0%	71.0%	64.0%	65.0%	62.0%	67.0%	67.0%	64.0%	72.0%	64.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.0%	20.0%	29.0%	19.0%	26.0%	29.0%	28.0%	23.0%	23.0%	25.0%	21.0%	25.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	14.0%	14.0%	15.0%	9.0%	10.0%	6.0%	10.0%	10.0%	10.0%	11.0%	7.0%	12.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.0%	2.0%	5.0%	6.0%	5.0%	1.0%	6.0%	2.0%	8.0%	4.0%	4.0%	3.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	82.0%	81.0%	75.0%	76.0%	76.0%	85.0%	81.0%	78.0%	76.0%	84.0%	81.0%	82.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	13.0%	17.0%	20.0%	18.0%	20.0%	14.0%	13.0%	21.0%	16.0%	12.0%	15.0%	15.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLL												
OP29 Avg Risk Polyp Surveillance	0.0%	83.0%	33.0%		100.0%	100.0%	50.0%	100.0%	100.0%	100.0%	67.0%	88.0%
OP30 High risk Polyp Surveillance	80.0%	75.0%	75.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	86.0%	83.0%
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI												
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain							16.5					
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	8.0%	0.0%
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTI												
ED2b ED Decision to Transport	56	241	128.5	92	125.5	176	159.5	111	176	305	236	202.5
OP21 Time to pain medicaton for long bone fractures	75	93.5	84	49	56	46.5	69					
OP22 Left without being seen			0.02	0.03	0.02	0.02	0.02	0.01				
OP23 Head CT stroke patients	1	1		1	1	1	0.5	1	0			1
Median Time from ED Arrival to Departure for Outpatients (18b)	144.5	145	188	165	165	201	146	142.5	194.5	232	202	130.5
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	53	37	36	48	30	41	32					
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						98.0%	98.0%	99.0%	98.0%	99.0%	100.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE	0	0	0	0	0	0	0	0.33	0	0		0
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL												
PC01 Elective Delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA												
Hip and Knee Complications	0.02	0.03	0.01	0	0.01	0.04						
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0.29	0.06	0.24	0.22	0.27	0.21	0.13	0.11	0.12	0.06	0.26	0.09
PSI90 Complications / patient safety for selected indicators	0.98	0.89	0.82	1.04	1.01	0.86	0.77	0.88	0.69	0.85		

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.0%	10.0%	7.0%	16.0%	16.0%	14.0%	15.0%	17.0%	14.0%	5.0%		
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate	7.0%	6.0%	4.0%	14.0%	5.0%	19.0%	0.0%	10.0%	13.0%	5.0%		
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	20.0%	11.0%	21.0%	17.0%	23.0%	22.0%	17.0%	23.0%	25.0%	28.0%		
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	4.0%	3.0%	3.0%	4.0%	5.0%	4.0%	6.0%	6.0%	3.0%	4.0%		
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.0%	13.0%	11.0%	13.0%	12.0%	12.0%	13.0%	12.0%	12.0%	13.0%	11.0%
READM30 STK Stroke 30day readmission rate	11.0%	13.0%	14.0%	14.0%	9.0%	5.0%	9.0%	3.0%	14.0%	7.0%		
READM30HF Heart Failure 30Day readmissions rate	19.0%	39.0%	20.0%	27.0%	19.0%	11.0%	23.0%	24.0%	25.0%	23.0%		
READM30PN Pneumonia 30day readmission rate	13.0%	18.0%	15.0%	10.0%	19.0%	20.0%	20.0%	19.0%	13.0%	18.0%		
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	0.0%	5.0%	0.0%	0.0%	8.0%	0.0%	0.0%	0.0%	8.0%	0.0%	4.0%	0.0%
MORT30 COPD 30day mortality rate COPD patients	3.0%	2.0%	3.0%	5.0%	0.0%	1.0%	0.0%	1.0%	5.0%	2.0%	3.0%	6.7%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	0.0%	3.0%	4.0%	4.0%	1.0%	1.0%	2.0%	6.0%	2.0%	1.0%	3.6%
MORT30HF Heart failure 30day mortality rate	2.0%	5.0%	3.0%	2.0%	3.0%	6.0%	0.0%	2.0%	2.0%	4.0%	0.0%	2.9%
MORT30PN Pneumonia 30day mortality rate	7.0%	7.0%	0.0%	8.0%	6.0%	4.0%	11.0%	3.0%	5.0%	5.0%	4.0%	2.6%
MORT30STK Stroke 30day mortality rate	10.0%	2.0%	0.0%	11.0%	0.0%	2.0%	2.0%	3.0%	3.0%	3.0%	0.0%	3.1%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING E												
OP8 MRI Lumbar Spine for Low Back Pain	43.0%	43.0%	43.0%	43.0%	43.0%	43.0%						
OP9 Mammography Followup Rates	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP10 Abdomen CT Use of Contrast Material	14.0%	14.0%	14.0%	14.0%	14.0%	14.0%						
OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	2.57	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)												
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	26.32	0.00	0.00	0.00	34.48	0.00	0.00	50.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	14.49	10.75	0.00	0.00	0.00	0.00	37.04
PSI 13 Postoperative Sepsis Rate	0.00	0.00	25.00	0.00	0.00	31.25	0.00	0.00	0.00	0.00	43.48	50.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection	0.00	0.00	0.00	12.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SSI HYST Surgical Site Infection			0.00	0.00	0.00	0.00		0.00				
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.490	0.000	0.000	0.000	0.000	0.000
CDIFF	1.270	0.600	0.000	0.570	0.510	1.740	0.000	0.000	0.610	0.000	0.680	0.000
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	79.0%	78.0%	82.0%	78.0%	92.0%	72.0%	82.0%	76.0%	78.0%	83.0%	82.0%	79.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	15.0%	18.0%	16.0%	18.0%	7.0%	21.0%	12.0%	19.0%	16.0%	11.0%	17.0%	18.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	6.0%	4.0%	2.0%	4.0%	2.0%	7.0%	5.0%	5.0%	6.0%	6.0%	1.0%	3.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	77.0%	84.0%	84.0%	84.0%	87.0%	75.0%	79.0%	83.0%	84.0%	87.0%	82.0%	86.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	18.0%	14.0%	10.0%	13.0%	10.0%	19.0%	15.0%	12.0%	10.0%	10.0%	12.0%	11.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.0%	1.0%	6.0%	4.0%	3.0%	5.0%	6.0%	5.0%	6.0%	3.0%	4.0%	4.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	69.0%	60.0%	76.0%	67.0%	77.0%	62.0%	67.0%	56.0%	60.0%	63.0%	57.0%	75.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	21.0%	33.0%	21.0%	21.0%	19.0%	25.0%	18.0%	37.0%	24.0%	23.0%	37.0%	20.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.0%	7.0%	3.0%	11.0%	4.0%	14.0%	15.0%	7.0%	16.0%	14.0%	6.0%	5.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	65.0%	72.0%	74.0%	76.0%	87.0%	75.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.0%	24.0%	25.0%	20.0%	13.0%	16.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	10.0%	5.0%	1.0%	4.0%	0.0%	9.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	55.0%	66.0%	66.0%	61.0%	74.0%	50.0%	69.0%	55.0%	65.0%	65.0%	73.0%	55.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	29.0%	18.0%	14.0%	14.0%	15.0%	22.0%	11.0%	24.0%	16.0%	17.0%	12.0%	27.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	16.0%	16.0%	19.0%	25.0%	11.0%	28.0%	20.0%	21.0%	19.0%	19.0%	15.0%	18.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	86.0%	93.0%	90.0%	90.0%	83.0%	84.0%	82.0%	85.0%	88.0%	92.0%	86.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	14.0%	7.0%	10.0%	10.0%	17.0%	16.0%	18.0%	15.0%	13.0%	8.0%	14.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	50.0%	51.0%	60.0%	46.0%	60.0%	46.0%	51.0%	39.0%	48.0%	49.0%	53.0%	55.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	39.0%	39.0%	31.0%	39.0%	34.0%	39.0%	36.0%	50.0%	43.0%	45.0%	44.0%	44.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	7.0%	3.0%	4.0%	9.0%	1.0%	10.0%	10.0%	4.0%	5.0%	3.0%	2.0%	1.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	75.0%	79.0%	91.0%	70.0%	88.0%	80.0%	82.0%	81.0%	79.0%	90.0%	75.0%	79.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	15.0%	16.0%	6.0%	28.0%	11.0%	13.0%	12.0%	15.0%	17.0%	6.0%	18.0%	16.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	9.0%	5.0%	3.0%	2.0%	2.0%	7.0%	5.0%	3.0%	5.0%	4.0%	7.0%	5.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	11.0%	5.0%	5.0%	9.0%	0.0%	11.0%	16.0%	7.0%	9.0%	4.0%	7.0%	11.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	11.0%	18.0%	19.0%	9.0%	17.0%	15.0%	16.0%	15.0%	25.0%	14.0%	23.0%	13.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	78.0%	77.0%	77.0%	82.0%	83.0%	74.0%	67.0%	79.0%	66.0%	82.0%	70.0%	76.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	65.0%	59.0%	70.0%	66.0%	67.0%	64.0%	70.0%	60.0%	71.0%	68.0%	66.0%	67.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	28.0%	36.0%	26.0%	29.0%	25.0%	25.0%	18.0%	32.0%	23.0%	28.0%	29.0%	25.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	7.0%	5.0%	5.0%	5.0%	8.0%	11.0%	13.0%	9.0%	6.0%	4.0%	5.0%	8.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.0%	5.0%	2.0%	7.0%	0.0%	8.0%	11.0%	3.0%	6.0%	6.0%	4.0%	8.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	83.0%	82.0%	75.0%	83.0%	86.0%	77.0%	73.0%	82.0%	72.0%	83.0%	80.0%	74.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	11.0%	13.0%	24.0%	9.0%	14.0%	15.0%	16.0%	15.0%	22.0%	10.0%	16.0%	18.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance	100.0%	100.0%		100.0%	100.0%	100.0%		100.0%				
OP30 High risk Polyp Surveillance				100.0%		100.0%	100.0%					
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI												
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	30			10	82			3				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport		82.5	87.5	69	60	60	51	74	70	66.5	65	65
OP21 Time to pain medication for long bone fractures	39	49	53	73.5	33	36	45.5	46.5				
OP22 Left without being seen	0.02	0.02	0	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.02
OP23 Head CT stroke patients		0.5	0.5		1		0	1	0			
Median Time from ED Arrival to Departure for Outpatients (18b)	133.5	135	121	130.5	132	124	125	115	142	136	131	110
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	9	11	9	7	7	7	9	12				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						99.0%	99.0%	100.0%	100.0%	100.0%	100.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE	0	0	0	0		0	0	0		0		
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications	0	0	0	0	0	0.06	0.1	0	0			
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0	0.2	0	0.14	0	0	0	0	0	0.17	0.5	0.2
PSI90 Complications / patient safety for selected indicators	0.99	1.05	1.06	1.05	0.99	1.09	1.2					

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	11.0%	7.0%	20.0%	0.0%	19.0%	12.0%	15.0%	8.0%	13.0%	7.0%	18.0%	
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	14.0%	17.0%	21.0%	20.0%	0.0%	0.0%	5.0%	22.0%	13.0%	19.0%	11.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	0.0%	0.0%	0.0%	5.0%	0.0%	8.0%	0.0%		0.0%	10.0%	
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.0%	7.0%	13.0%	13.0%	8.0%	11.0%	9.0%	10.0%	10.0%	8.0%	8.0%	8.0%
READM30 STK Stroke 30day readmission rate	0.0%	8.0%	20.0%	0.0%	14.0%	33.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
READM30HF Heart Failure 30Day readmissions rate	18.0%	8.0%	8.0%	43.0%	19.0%	17.0%	17.0%	19.0%	17.0%	0.0%	17.0%	
READM30PN Pneumonia 30day readmission rate	16.0%	8.0%	22.0%	14.0%	11.0%	11.0%	13.0%	13.0%	13.0%	26.0%	11.0%	
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	7.0%	0.0%	0.0%	6.0%	0.0%	8.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	18.0%	7.0%	0.0%	0.0%	6.0%	6.0%	0.0%	8.0%	20.0%	0.0%	0.0%	0.0%
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	14.0%	0.0%	0.0%	12.5%
MORT30PN Pneumonia 30day mortality rate	0.0%	4.0%	4.0%	3.0%	19.0%	12.0%	5.0%	3.0%	3.0%	3.0%	0.0%	0.0%
MORT30STK Stroke 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING B												
OP8 MRI Lumbar Spine for Low Back Pain												
OP9 Mammography Followup Rates	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%						
OP10 Abdomen CT Use of Contrast Material	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%						
OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time												

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	1.95	0.00	0.00	0.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00					0.67	
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	2.59	2.27	0.00	0.00	0.00	2.40	2.12	2.18	2.05	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	5.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	13.79	11.05	0.00	0.00	0.00	5.59	0.00	25.64	6.21
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	2.24	4.09	2.34	1.99	13.57	2.05	6.12	2.20	1.93	0.00	3.91	4.05
PSI 13 Postoperative Sepsis Rate	0.00	5.68	0.00	5.43	0.00	0.00	0.00	5.78	0.00	4.98	14.15	0.00
PSI 14 Postoperative Wound Dehiscence Rate	10.53	0.00	0.00	0.00	8.77	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	4.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4.08	0.00
CLABSI	2.010	0.000	0.000	0.870	1.730	1.770	0.710	2.800	1.010	0.880	1.790	0.000
CAUTI	1.320	1.170	1.380	0.000	1.010	4.500	1.040	0.000	1.150	2.440	1.170	2.790
SSI COLON Surgical Site Infection	0.00	0.00	0.00	0.00	7.69	0.00	0.00	0.00	11.11	0.00	0.00	
SSI HYST Surgical Site Infection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
MRSA	0.000	0.170	0.000	0.000	0.090	0.090	0.150	0.000	0.090	0.090	0.170	0.000
CDIFF	0.540	0.450	0.670	0.270	0.710	0.850	0.410	0.950	0.290	0.000	0.180	0.750

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS.

HCOMP1A P Patients who reported that their nurses "Always" communicated well	83.0%	76.0%	76.0%	74.0%	77.0%	80.0%	75.0%	76.0%	81.0%	77.0%	75.0%	72.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.0%	17.0%	18.0%	18.0%	17.0%	14.0%	19.0%	19.0%	15.0%	16.0%	19.0%	21.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	7.0%	6.0%	8.0%	5.0%	6.0%	6.0%	5.0%	5.0%	7.0%	6.0%	6.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	81.0%	72.0%	75.0%	74.0%	74.0%	78.0%	73.0%	74.0%	78.0%	76.0%	75.0%	84.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.0%	18.0%	18.0%	19.0%	22.0%	17.0%	18.0%	20.0%	15.0%	16.0%	18.0%	18.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.0%	10.0%	7.0%	7.0%	4.0%	5.0%	9.0%	6.0%	6.0%	7.0%	7.0%	8.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	65.0%	62.0%	63.0%	60.0%	64.0%	66.0%	58.0%	61.0%	69.0%	62.0%	62.0%	60.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	24.0%	24.0%	25.0%	27.0%	26.0%	24.0%	29.0%	28.0%	22.0%	26.0%	27.0%	30.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.0%	14.0%	12.0%	13.0%	10.0%	10.0%	13.0%	11.0%	9.0%	13.0%	10.0%	10.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	64.0%	63.0%	63.0%	66.0%	64.0%	73.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	26.0%	27.0%	27.0%	25.0%	28.0%	20.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	10.0%	10.0%	10.0%	9.0%	8.0%	7.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	62.0%	58.0%	59.0%	63.0%	55.0%	66.0%	60.0%	56.0%	61.0%	61.0%	62.0%	62.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	16.0%	19.0%	19.0%	16.0%	22.0%	14.0%	16.0%	23.0%	18.0%	19.0%	15.0%	18.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	22.0%	24.0%	21.0%	22.0%	23.0%	20.0%	24.0%	21.0%	21.0%	20.0%	23.0%	20.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	84.0%	85.0%	85.0%	84.0%	86.0%	85.0%	85.0%	87.0%	87.0%	88.0%	36.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	16.0%	15.0%	15.0%	16.0%	14.0%	15.0%	15.0%	13.0%	13.0%	12.0%	17.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	51.0%	45.0%	47.0%	45.0%	46.0%	52.0%	48.0%	41.0%	47.0%	45.0%	43.0%	44.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	39.0%	46.0%	41.0%	45.0%	46.0%	38.0%	40.0%	48.0%	43.0%	44.0%	45.0%	44.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	6.0%	9.0%	6.0%	6.0%	5.0%	8.0%	7.0%	7.0%	8.0%	8.0%	8.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	69.0%	65.0%	62.0%	62.0%	66.0%	68.0%	63.0%	67.0%	65.0%	64.0%	61.0%	68.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	19.0%	18.0%	20.0%	24.0%	22.0%	20.0%	21.0%	18.0%	19.0%	21.0%	25.0%	18.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	12.0%	18.0%	18.0%	14.0%	13.0%	13.0%	15.0%	15.0%	16.0%	14.0%	15.0%	15.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10.0%	16.0%	15.0%	15.0%	11.0%	11.0%	11.0%	12.0%	12.0%	12.0%	13.0%	14.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	23.0%	25.0%	22.0%	22.0%	18.0%	19.0%	25.0%	26.0%	24.0%	26.0%	24.0%	30.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	66.0%	60.0%	63.0%	62.0%	71.0%	70.0%	64.0%	62.0%	64.0%	62.0%	63.0%	56.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	57.0%	44.0%	52.0%	51.0%	53.0%	56.0%	47.0%	50.0%	48.0%	45.0%	48.0%	49.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	30.0%	36.0%	34.0%	33.0%	36.0%	31.0%	42.0%	36.0%	38.0%	41.0%	39.0%	38.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	13.0%	20.0%	14.0%	16.0%	11.0%	13.0%	12.0%	14.0%	14.0%	14.0%	10.0%	13.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.0%	11.0%	10.0%	9.0%	5.0%	7.0%	8.0%	8.0%	6.0%	8.0%	9.0%	9.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	69.0%	58.0%	62.0%	59.0%	70.0%	66.0%	62.0%	64.0%	64.0%	59.0%	64.0%	58.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	26.0%	31.0%	28.0%	31.0%	24.0%	26.0%	30.0%	28.0%	30.0%	33.0%	28.0%	33.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLL												
OP29 Avg Risk Polyp Surveillance	100.0%		100.0%	100.0%		100.0%		100.0%			100.0%	100.0%
OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%		
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI												
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain		7										
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	67.0%	50.0%	100.0%	50.0%
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTI												
ED2b ED Decision to Transport	68.5	90	71	78.5	77	98	85	106	132	97	92	138
OP21 Time to pain medicaton for long bone fractures	32	33.5	48	38.5	35	39	28.5	44				
OP22 Left without being seen	0.01	0.01	0	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01	0.01
OP23 Head CT stroke patients			1							0	1	
Median Time from ED Arrival to Departure for Outpatients (18b)	160	153	149	140	152	156	148	170				
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	3.5	5	7	3	3	6	6	8				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						97.0%	98.0%	100.0%	99.0%	97.0%	100.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE	0	0	0	0.17	0	0	0	0	0	0	0	0
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL												
PC01 Elective Delivery		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA												
Hip and Knee Complications	0	0.02	0	0	0.02	0.03	0.05	0.02	0.01			
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0.1	0.24	0.05	0.22	0.23	0.24	0.22	0.2	0.17	0.1	0.21	0.1
PSI90 Complications / patient safety for selected indicators	1.06	0.99	1.07	1.06	1.36	0.96	1					

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	21.0%	10.0%	14.0%	11.0%	13.0%	23.0%	13.0%	10.0%	15.0%	5.0%	14.0%	
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate	29.0%	9.0%	16.0%	0.0%	15.0%	11.0%	27.0%	0.0%	14.0%	6.0%	0.0%	
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	17.0%	22.0%	28.0%	17.0%	18.0%	16.0%	19.0%	20.0%	15.0%	21.0%	25.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	4.0%	3.0%	0.0%	6.0%	4.0%	5.0%	3.0%	4.0%	1.0%	5.0%	
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	14.0%	12.0%	14.0%	14.0%	12.0%	14.0%	15.0%	14.0%	11.0%	14.0%	13.0%	13.0%
READM30 STK Stroke 30day readmission rate	3.0%	6.0%	6.0%	16.0%	23.0%	12.0%	11.0%	0.0%	9.0%	11.0%	0.0%	
READM30HF Heart Failure 30Day readmissions rate	22.0%	32.0%	24.0%	23.0%	27.0%	21.0%	28.0%	21.0%	30.0%	30.0%	23.0%	
READM30PN Pneumonia 30day readmission rate	25.0%	9.0%	19.0%	14.0%	26.0%	18.0%	18.0%	18.0%	14.0%	24.0%	16.0%	
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	11.0%	0.0%	0.0%	0.0%	9.0%	0.0%	0.0%	8.0%	0.0%	0.0%	0.0%	7.1%
MORT30 COPD 30day mortality rate COPD patients	5.0%	0.0%	5.0%	0.0%	8.0%	4.0%	3.0%	6.0%	7.0%	3.0%	2.0%	7.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	10.0%	1.0%	9.0%	4.0%	9.0%	6.0%	7.0%	10.0%	5.0%	3.0%	5.0%	5.6%
MORT30HF Heart failure 30day mortality rate	2.0%	3.0%	1.0%	3.0%	4.0%	7.0%	7.0%	6.0%	7.0%	6.0%	5.0%	12.3%
MORT30PN Pneumonia 30day mortality rate	7.0%	6.0%	7.0%	9.0%	5.0%	9.0%	11.0%	11.0%	9.0%	8.0%	5.0%	3.5%
MORT30STK Stroke 30day mortality rate	6.0%	11.0%	11.0%	14.0%	21.0%	13.0%	8.0%	6.0%	5.0%	10.0%	15.0%	9.8%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING E												
OP8 MRI Lumbar Spine for Low Back Pain	35.0%	35.0%	35.0%	35.0%	35.0%	35.0%						
OP9 Mammography Followup Rates	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%						
OP10 Abdomen CT Use of Contrast Material	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%						
OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						

Jul-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18

Quality Target Measures

- PSI 3 Pressure Ulcer Rate
- PSI 6 Iatrogenic Pneumothorax Rate
- PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)
- PSI 8 In Hospital Fall with Hip Fracture Rate
- PSI 9 Perioperative Hemorrhage or Hematoma Rate
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- PSI 11 Postoperative Respiratory Failure Rate
- PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate
- PSI 13 Postoperative Sepsis Rate
- PSI 14 Postoperative Wound Dehiscence Rate
- PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate
- CLABSI
- CAUTI
- SSI COLON Surgical Site Infection
- SSI HYST Surgical Site Infection
- MRSA
- CDIFF

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	100.0%				100.0%	100.0%		100.0%			
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	0.0%				0.0%	0.0%		0.0%			
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	0.0%				0.0%	0.0%		0.0%			
HCOMP2A P Patients who reported that their doctors "Always" communicated well	100.0%				100.0%	100.0%		100.0%			100.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	0.0%				0.0%	0.0%		0.0%			
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%				0.0%	0.0%		0.0%			
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	100.0%				100.0%	100.0%	100.0%				100.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	0.0%				0.0%	0.0%	0.0%				
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	0.0%				0.0%	0.0%	0.0%				

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	100.0%				100.0%							
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	0.0%				0.0%							
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%				0.0%							
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	100.0%				100.0%			100.0%			100.0%	
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	100.0%				100.0%			0.0%				
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	100.0%				100.0%			0.0%				
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	100.0%				100.0%	100.0%		100.0%				
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	0.0%				0.0%	0.0%		0.0%				
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	0.0%				100.0%	67.0%		67.0%				
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	100.0%				0.0%	0.0%		33.0%			100.0%	
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%				0.0%	0.0%		0.0%				
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	100.0%				100.0%	100.0%		100.0%			100.0%	
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	0.0%				0.0%	0.0%		0.0%				
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	0.0%				0.0%	0.0%		0.0%				
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	0.0%				0.0%	0.0%		0.0%				
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	100.0%				0.0%	0.0%		0.0%				
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	100.0%				100.0%	100.0%		100.0%			100.0%	
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	100.0%				100.0%	100.0%		100.0%			100.0%	
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	0.0%				0.0%	0.0%		0.0%			100.0%	

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HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%				0.0%	0.0%		0.0%				
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%				0.0%	0.0%		0.0%				
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	100.0%				100.0%	100.0%		100.0%			100.0%	
HRECMND PY Patients who reported YES, they would probably recommend the hospital	0.0%				0.0%	0.0%		100.0%				
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance												
OP30 High risk Polyp Surveillance												
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI						70	79					
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	6	3		8.5	16	3	13.5	12.5				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport		4	53				43.5	12.5	86.5	13.5		45
OP21 Time to pain medication for long bone fractures	22	76	19	22		27.5	34	43				
OP22 Left without being seen	0.01	0.01	0.01	0.01	0.01	0	0	0.01	0	0	0.01	0.01
OP23 Head CT stroke patients		1						1				
Median Time from ED Arrival to Departure for Outpatients (18b)	78	96	104.5	103.5	96.5	95.5	90	79				
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	5	5	4	4	7.5	4	6.5	5.5				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination												
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications												
PSI90 Complications / patient safety for selected indicators												

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READMISSIONS 30 DAYS RATES OF READMISSION %

READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate
 READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate
 READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate
 READM30 HIPKNEE 30day readmission rate following elective THA / TKA
 READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission
 READM30 STK Stroke 30day readmission rate
 READM30HF Heart Failure 30Day readmissions rate
 READM30PN Pneumonia 30day readmission rate

0.0% 0.0% 100.0% 0.0% 0.0% 33.0% 0.0% 0.0% 0.0% 0.0% 33.0%

MORTALITY 30 DAYS DEATH RATE %

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate
 MORT30 COPD 30day mortality rate COPD patients
 MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate
 MORT30HF Heart failure 30day mortality rate
 MORT30PN Pneumonia 30day mortality rate
 MORT30STK Stroke 30day mortality rate

USE OF MEDICAL IMAGING OUTPATIENT IMAGING E

OP8 MRI Lumbar Spine for Low Back Pain
 OP9 Mammography Followup Rates
 OP10 Abdomen CT Use of Contrast Material
 OP11 Thorax CT Use of Contrast Material
 OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery
 OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time

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Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	1.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00						
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.29	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	9.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	54.05	0.00	0.00	0.00	50.00	0.00	0.00	0.00	0.00	41.67	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	9.52	8.20	0.00	0.00	0.00	0.00	10.00	0.00	0.00	0.00	8.62	11.11
PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	25.00
SSI HYST Surgical Site Infection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	0.740	1.210	0.400	0.820	0.000	0.000	0.720	0.430	0.430	0.000	0.400	1.540

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	72.0%	78.0%	77.0%	73.0%	83.0%	69.0%	78.0%	73.0%	79.0%	81.0%	80.0%	76.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	19.0%	17.0%	19.0%	18.0%	12.0%	26.0%	15.0%	23.0%	15.0%	15.0%	19.0%	21.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	9.0%	5.0%	4.0%	8.0%	4.0%	5.0%	6.0%	4.0%	6.0%	4.0%	1.0%	3.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	68.0%	75.0%	76.0%	80.0%	84.0%	77.0%	81.0%	78.0%	86.0%	80.0%	80.0%	82.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	20.0%	19.0%	18.0%	15.0%	12.0%	18.0%	17.0%	15.0%	10.0%	13.0%	17.0%	16.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	12.0%	6.0%	6.0%	5.0%	4.0%	5.0%	2.0%	7.0%	4.0%	6.0%	3.0%	2.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	56.0%	56.0%	51.0%	54.0%	61.0%	46.0%	58.0%	50.0%	60.0%	57.0%	58.0%	8.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	26.0%	30.0%	35.0%	31.0%	31.0%	40.0%	29.0%	35.0%	27.0%	34.0%	36.0%	32.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	18.0%	14.0%	14.0%	15.0%	8.0%	14.0%	13.0%	15.0%	13.0%	9.0%	6.0%	60.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	63.0%	57.0%	63.0%	61.0%	68.0%	63.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	34.0%	29.0%	22.0%	24.0%	25.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	15.0%	9.0%	9.0%	17.0%	8.0%	12.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	54.0%	63.0%	59.0%	62.0%	71.0%	56.0%	60.0%	56.0%	57.0%	69.0%	63.0%	51.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	23.0%	21.0%	20.0%	21.0%	16.0%	18.0%	18.0%	20.0%	19.0%	12.0%	18.0%	33.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	23.0%	16.0%	21.0%	17.0%	13.0%	26.0%	22.0%	24.0%	24.0%	19.0%	19.0%	15.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	75.0%	88.0%	87.0%	89.0%	90.0%	88.0%	88.0%	90.0%	91.0%	85.0%	87.0%	86.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	25.0%	13.0%	13.0%	11.0%	10.0%	12.0%	12.0%	10.0%	9.0%	15.0%	13.0%	14.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	38.0%	38.0%	53.0%	41.0%	46.0%	48.0%	40.0%	40.0%	51.0%	38.0%	51.0%	44.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	46.0%	52.0%	38.0%	49.0%	46.0%	44.0%	51.0%	51.0%	41.0%	51.0%	42.0%	52.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	12.0%	7.0%	6.0%	5.0%	4.0%	6.0%	5.0%	6.0%	5.0%	9.0%	4.0%	4.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	68.0%	67.0%	71.0%	77.0%	78.0%	65.0%	70.0%	69.0%	79.0%	73.0%	84.0%	81.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	21.0%	22.0%	23.0%	20.0%	16.0%	26.0%	19.0%	17.0%	16.0%	19.0%	12.0%	16.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.0%	11.0%	6.0%	4.0%	6.0%	10.0%	11.0%	14.0%	5.0%	8.0%	4.0%	3.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	19.0%	6.0%	9.0%	18.0%	10.0%	10.0%	7.0%	16.0%	12.0%	10.0%	7.0%	13.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	21.0%	26.0%	20.0%	14.0%	18.0%	31.0%	29.0%	19.0%	12.0%	22.0%	18.0%	20.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	59.0%	67.0%	71.0%	68.0%	72.0%	60.0%	64.0%	65.0%	75.0%	68.0%	74.0%	67.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	59.0%	57.0%	57.0%	61.0%	60.0%	59.0%	68.0%	58.0%	62.0%	59.0%	63.0%	63.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	29.0%	38.0%	34.0%	29.0%	33.0%	29.0%	26.0%	31.0%	30.0%	27.0%	32.0%	34.0%

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HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	11.0%	4.0%	9.0%	10.0%	7.0%	12.0%	6.0%	10.0%	8.0%	14.0%	4.0%	3.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	14.0%	6.0%	5.0%	11.0%	2.0%	8.0%	4.0%	13.0%	6.0%	6.0%	3.0%	3.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	55.0%	67.0%	65.0%	65.0%	75.0%	63.0%	67.0%	58.0%	67.0%	66.0%	68.0%	66.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	31.0%	27.0%	30.0%	24.0%	23.0%	29.0%	28.0%	29.0%	27.0%	27.0%	29.0%	31.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance										100.0%	100.0%	100.0%
OP30 High risk Polyp Surveillance												
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI					23							
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	34	3	4	5	0	4	4	0				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)	100.0%											
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	92	108	111	97	84.5	80	82	87	108	112	84.5	68
OP21 Time to pain medication for long bone fractures	51	25	22	47	15	40	34	31				
OP22 Left without being seen	0	0	0.01	0	0	0	0	0	0	0	0	0
OP23 Head CT stroke patients		1		1	1	1	0	1	0.5	0.5	0.5	1
Median Time from ED Arrival to Departure for Outpatients (18b)	172.5	161.5	161	150	139	148	162	153				
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	15	16	16.5	14.5	14	17.5	20	22				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						96.0%	98.0%	99.0%	94.0%	96.0%	95.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE		0	0	0	0	0			0			
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.50
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications	0	0.05	0	0	0	0	0.08	0.05	0			
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0.33	0	0.25	0.17	0.17	0	0.5	0.17	0.33	0	0	0.14
PSI90 Complications / patient safety for selected indicators	1.07	1.07	0.98	0.98	1.05	0.98	1.09					

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	17.0%	0.0%	11.0%	0.0%	0.0%	14.0%	6.0%	0.0%	19.0%	0.0%	10.0%	
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	29.0%	7.0%	36.0%	23.0%	29.0%	27.0%	32.0%	22.0%	8.0%	20.0%	25.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	7.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	10.0%	0.0%	
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	15.0%	15.0%	15.0%	13.0%	14.0%	17.0%	14.0%	13.0%	11.0%	11.0%	12.0%	11.0%
READM30 STK Stroke 30day readmission rate	0.0%	19.0%	0.0%	8.0%	25.0%	22.0%	18.0%	0.0%	0.0%	25.0%	0.0%	
READM30HF Heart Failure 30Day readmissions rate	35.0%	33.0%	25.0%	30.0%	20.0%	41.0%	22.0%	21.0%	41.0%	15.0%	26.0%	
READM30PN Pneumonia 30day readmission rate	5.0%	24.0%	21.0%	21.0%	14.0%	21.0%	11.0%	14.0%	15.0%	24.0%	17.0%	
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	0.0%	11.0%	7.0%	0.0%	4.0%	0.0%	3.0%	12.0%	4.0%	5.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	8.0%	6.0%	0.0%	0.0%	0.0%	4.0%	6.0%	17.0%	24.0%	10.0%	0.0%	11.8%
MORT30HF Heart failure 30day mortality rate	9.0%	6.0%	4.0%	0.0%	0.0%	4.0%	12.0%	5.0%	0.0%	0.0%	5.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	5.0%	0.0%	7.0%	3.0%	4.0%	8.0%	7.0%	4.0%	11.0%	2.0%	7.0%	13.6%
MORT30STK Stroke 30day mortality rate	0.0%	0.0%	17.0%	0.0%	11.0%	0.0%	9.0%	25.0%	0.0%	11.0%	0.0%	11.1%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING E												
OP8 MRI Lumbar Spine for Low Back Pain	35.0%	35.0%	35.0%	35.0%	35.0%	35.0%						
OP9 Mammography Followup Rates	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP10 Abdomen CT Use of Contrast Material	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%						
OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						

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Quality Target Measures

PSI 3 Pressure Ulcer Rate												
PSI 6 Iatrogenic Pneumothorax Rate												
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)												
PSI 8 In Hospital Fall with Hip Fracture Rate												
PSI 9 Perioperative Hemorrhage or Hematoma Rate												
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis												
PSI 11 Postoperative Respiratory Failure Rate												
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate												
PSI 13 Postoperative Sepsis Rate												
PSI 14 Postoperative Wound Dehiscence Rate												
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate												
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection	0.00	11.11	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
SSI HYST Surgical Site Infection												
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	0.000	0.880	0.000	0.000	0.000	0.000	0.000	0.000	0.930	0.000	0.790	0.000

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well												
HCOMP1U P Patients who reported that their nurses "Usually" communicated well												
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well												
HCOMP2A P Patients who reported that their doctors "Always" communicated well												
HCOMP2U P Patients who reported that their doctors "Usually" communicated well												
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well												
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted												
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted												
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted												

HCOMP4A P Patients who reported that their pain was "Always" well controlled

HCOMP4U P Patients who reported that their pain was "Usually" well controlled

HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled

HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them

HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them

HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them

HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home

HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home

HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital

HCOMP7A Patients who "Agree" they understood their care when they left the hospital

HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital

HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean

HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean

HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean

HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)

HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)

HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)

HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night

HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night

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HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night

HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital

HRECMND DY Patients who reported YES, they would definitely recommend the hospital

HRECMND PY Patients who reported YES, they would probably recommend the hospital

TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW

OP29 Avg Risk Polyp Surveillance			100.0%	82.0%	92.0%	91.0%	89.0%	82.0%				
OP30 High risk Polyp Surveillance			90.0%	87.0%	90.0%	85.0%	95.0%	90.0%				

TIMELY AND EFFECTIVE CARE - HEART ATTACK

OP3b Median Time to Transfer AMI	129	152	87	87	87	87						
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	7.3	7.5	7	7	7	7						

TIMELY AND EFFECTIVE CARE - STROKE CARE %

STK4 Thrombolytic Therapy (retired)

TIMELY AND EFFECTIVE CARE- EMERGENCY DEPART

ED2b ED Decision to Transport	52	53	47	57	56	52	60	62	54	55	60	74
OP21 Time to pain medication for long bone fractures	62	57	74	74	74	74						
OP22 Left without being seen	0	0	0	0.01	0	0	0.01	0.01	0.01	0.01		
OP23 Head CT stroke patients	1		1		1	1		1	1	1	1	1
Median Time from ED Arrival to Departure for Outpatients (18b)	77	108	107	107	107	107						

OP20 Door to Diagnostic Evaluation

OP20 Door to Diagnostic Evaluation	19	20	17	17	17	17						
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TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %

IMM2 Immunization for Influenza						100.0%	98.0%	96.0%	100.0%	98.0%	98.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%

TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN

VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE				0		0	0		0			

TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL

PC01 Elective Delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
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TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA

Hip and Knee Complications

PSI4SURG COMP Death rate among surgical patients with serious treatable complications

PSI90 Complications / patient safety for selected indicators	1.09	1.09	1.09	1.09	1.09	1.09						
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READMISSIONS 30 DAYS RATES OF READMISSION %

READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate
 READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate
 READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate
 READM30 HIPKNEE 30day readmission rate following elective THA / TKA
 READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission
 READM30 STK Stroke 30day readmission rate
 READM30HF Heart Failure 30Day readmissions rate
 READM30PN Pneumonia 30day readmission rate

MORTALITY 30 DAYS DEATH RATE %

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate
 MORT30 COPD 30day mortality rate COPD patients
 MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate
 MORT30HF Heart failure 30day mortality rate
 MORT30PN Pneumonia 30day mortality rate
 MORT30STK Stroke 30day mortality rate

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	9.0%	0.0%	0.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30STK Stroke 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

USE OF MEDICAL IMAGING OUTPATIENT IMAGING B

OP8 MRI Lumbar Spine for Low Back Pain
 OP9 Mammography Followup Rates
 OP10 Abdomen CT Use of Contrast Material
 OP11 Thorax CT Use of Contrast Material
 OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery
 OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time

OP8 MRI Lumbar Spine for Low Back Pain	48.0%	48.0%	48.0%	48.0%	48.0%	48.0%			
OP9 Mammography Followup Rates	18.0%	18.0%	18.0%	18.0%	18.0%	18.0%			
OP10 Abdomen CT Use of Contrast Material	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%			
OP11 Thorax CT Use of Contrast Material	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%			
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%			
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%			

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	11.76	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	11.630	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection							0.00					
SSI HYST Surgical Site Infection		0.00		0.00								0.00
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	0.000	4.760	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	88.0%	83.0%	80.0%	82.0%	79.0%	85.0%	87.0%	86.0%	84.0%	75.0%	81.0%	91.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	8.0%	9.0%	12.0%	10.0%	10.0%	11.0%	4.0%	7.0%	8.0%	16.0%	10.0%	2.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	7.0%	9.0%	9.0%	10.0%	5.0%	9.0%	7.0%	8.0%	8.0%	9.0%	8.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	86.0%	83.0%	77.0%	92.0%	80.0%	83.0%	83.0%	75.0%	85.0%	79.0%	86.0%	85.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	10.0%	13.0%	6.0%	11.0%	11.0%	9.0%	15.0%	8.0%	11.0%	5.0%	9.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.0%	7.0%	10.0%	2.0%	9.0%	7.0%	8.0%	7.0%	7.0%	9.0%	9.0%	6.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	83.0%	83.0%	70.0%	79.0%	80.0%	81.0%	71.0%	81.0%	85.0%	68.0%	78.0%	86.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	15.0%	10.0%	19.0%	9.0%	10.0%	9.0%	17.0%	7.0%	10.0%	24.0%	22.0%	14.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	2.0%	7.0%	11.0%	12.0%	10.0%	7.0%	12.0%	10.0%	4.0%	7.0%	0.0%	0.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	85.0%	76.0%	70.0%	90.0%	75.0%	77.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	6.0%	7.0%	16.0%	10.0%	18.0%	12.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	10.0%	17.0%	14.0%	0.0%	7.0%	10.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	87.0%	72.0%	72.0%	75.0%	72.0%	70.0%	68.0%	73.0%	78.0%	82.0%	71.0%	93.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	8.0%	13.0%	8.0%	15.0%	0.0%	7.0%	18.0%	9.0%	5.0%	5.0%	9.0%	0.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	5.0%	16.0%	19.0%	10.0%	28.0%	8.0%	14.0%	18.0%	18.0%	14.0%	21.0%	7.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	93.0%	89.0%	77.0%	91.0%	82.0%	85.0%	82.0%	80.0%	89.0%	88.0%	90.0%	83.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	7.0%	11.0%	23.0%	9.0%	18.0%	15.0%	18.0%	20.0%	11.0%	12.0%	10.0%	17.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	53.0%	50.0%	45.0%	72.0%	28.0%	40.0%	41.0%	44.0%	48.0%	49.0%	44.0%	49.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	42.0%	47.0%	47.0%	26.0%	64.0%	58.0%	50.0%	47.0%	48.0%	46.0%	45.0%	51.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	3.0%	8.0%	3.0%	8.0%	2.0%	9.0%	8.0%	5.0%	5.0%	10.0%	0.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	85.0%	82.0%	81.0%	81.0%	86.0%	91.0%	76.0%	63.0%	79.0%	75.0%	85.0%	73.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	5.0%	12.0%	10.0%	9.0%	10.0%	6.0%	12.0%	17.0%	18.0%	22.0%	7.0%	18.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.0%	6.0%	10.0%	9.0%	3.0%	3.0%	12.0%	21.0%	3.0%	7.0%	7.0%	9.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.0%	6.0%	12.0%	3.0%	7.0%	6.0%	12.0%	8.0%	6.0%	7.0%	11.0%	0.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	29.0%	20.0%	26.0%	13.0%	39.0%	26.0%	12.0%	36.0%	19.0%	14.0%	19.0%	19.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	63.0%	74.0%	62.0%	84.0%	54.0%	69.0%	76.0%	56.0%	74.0%	79.0%	70.0%	71.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	79.0%	71.0%	65.0%	84.0%	76.0%	68.0%	82.0%	68.0%	71.0%	62.0%	81.0%	86.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	15.0%	14.0%	28.0%	13.0%	10.0%	24.0%	12.0%	20.0%	21.0%	31.0%	11.0%	9.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	5.0%	14.0%	7.0%	3.0%	14.0%	8.0%	6.0%	12.0%	9.0%	7.0%	7.0%	5.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	8.0%	3.0%	10.0%	3.0%	7.0%	3.0%	9.0%	8.0%	3.0%	7.0%	7.0%	0.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	73.0%	73.0%	69.0%	84.0%	63.0%	85.0%	69.0%	64.0%	76.0%	70.0%	67.0%	71.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	19.0%	24.0%	21.0%	13.0%	30.0%	12.0%	22.0%	28.0%	21.0%	22.0%	26.0%	29.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance	0.0%	20.0%	50.0%	60.0%	25.0%	0.0%	0.0%	100.0%	100.0%	25.0%		14.0%
OP30 High risk Polyp Surveillance	83.0%	50.0%	60.0%	83.0%	75.0%	60.0%	0.0%	100.0%	60.0%	67.0%		70.0%
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI	88		0	66		76						
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	6.5	11	28	5	10	3.5	11					
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	49.5	43	54	37	59	61	35	52	77	77	101.5	80
OP21 Time to pain medication for long bone fractures	51	123	76	22	30	89	51					
OP22 Left without being seen	0	0	0	0	0	0	0	0	0	0	0.01	0
OP23 Head CT stroke patients			0.5		1				0			1
Median Time from ED Arrival to Departure for Outpatients (18b)	152.5	144	86.5	124.5	115	109.5	95					
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	30.5	24	29	30.5	27	34.5	22					
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						98.0%	98.0%	97.0%	100.0%	100.0%	100.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications	0		0		0	0						
PSI4SURG COMP Death rate among surgical patients with serious treatable complications		0		0	0	0						
PSI90 Complications / patient safety for selected indicators	1	1	1	1	1	1	1	0.99	1	1		

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	100.0%		0.0%		0.0%		0.0%	0.0%				
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	5.0%	8.0%	15.0%	15.0%	36.0%	28.0%	0.0%	23.0%	25.0%	5.0%		
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%		0.0%		25.0%	0.0%						
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	9.0%	11.0%	8.0%	16.0%	14.0%	9.0%	10.0%	17.0%	10.0%	11.0%	13.0%
READM30 STK Stroke 30day readmission rate	0.0%			0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
READM30HF Heart Failure 30Day readmissions rate	50.0%	50.0%	20.0%	25.0%	80.0%	29.0%	10.0%	33.0%	27.0%	22.0%		
READM30PN Pneumonia 30day readmission rate	40.0%	21.0%	21.0%	40.0%	20.0%	35.0%	15.0%	11.0%	35.0%	18.0%		
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	0.0%	7.0%	3.0%	0.0%	0.0%	0.0%	13.0%	6.0%	0.0%	0.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%	0.0%
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	6.0%	0.0%	4.0%	0.0%	8.0%	0.0%	5.0%	0.0%	0.0%	0.0%
MORT30STK Stroke 30day mortality rate	0.0%			0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING %												
OP8 MRI Lumbar Spine for Low Back Pain	48.0%	48.0%	48.0%	48.0%	48.0%	48.0%						
OP9 Mammography Followup Rates	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%						
OP10 Abdomen CT Use of Contrast Material			9.0%	9.0%	9.0%	9.0%						
OP11 Thorax CT Use of Contrast Material	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	5.10	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00						
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	166.67	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection		0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	0.00	
SSI HYST Surgical Site Infection			0.00			0.00		0.00	0.00		0.00	0.00
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	1.260	0.000	0.000	0.000	0.000	1.110	0.970	0.000	0.000	0.000	0.000	0.000

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	81.0%	82.0%	90.0%	87.0%	83.0%	83.0%	77.0%	85.0%	79.0%	79.0%	86.0%	84.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	14.0%	8.0%	11.0%	15.0%	11.0%	16.0%	11.0%	19.0%	20.0%	11.0%	12.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	5.0%	4.0%	2.0%	2.0%	2.0%	6.0%	7.0%	3.0%	2.0%	2.0%	3.0%	4.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.0%	84.0%	82.0%	86.0%	85.0%	91.0%	78.0%	76.0%	77.0%	85.0%	85.0%	82.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	19.0%	14.0%	11.0%	13.0%	13.0%	7.0%	17.0%	23.0%	19.0%	9.0%	14.0%	14.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.0%	2.0%	6.0%	1.0%	2.0%	2.0%	5.0%	1.0%	4.0%	6.0%	1.0%	4.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	69.0%	71.0%	71.0%	64.0%	67.0%	50.0%	70.0%	62.0%	67.0%	63.0%	63.0%	68.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.0%	14.0%	29.0%	23.0%	27.0%	37.0%	14.0%	31.0%	25.0%	25.0%	28.0%	20.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	12.0%	14.0%	0.0%	13.0%	6.0%	13.0%	16.0%	7.0%	8.0%	13.0%	9.0%	11.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	54.0%	61.0%	54.0%	56.0%	70.0%	63.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	35.0%	31.0%	29.0%	31.0%	28.0%	33.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	11.0%	8.0%	17.0%	13.0%	2.0%	3.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	70.0%	79.0%	60.0%	67.0%	79.0%	61.0%	56.0%	56.0%	80.0%	55.0%	61.0%	55.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	19.0%	5.0%	28.0%	22.0%	10.0%	9.0%	26.0%	24.0%	6.0%	32.0%	17.0%	17.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	11.0%	17.0%	12.0%	11.0%	10.0%	30.0%	18.0%	20.0%	14.0%	14.0%	22.0%	28.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	79.0%	87.0%	86.0%	88.0%	81.0%	83.0%	77.0%	86.0%	82.0%	83.0%	86.0%	34.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	21.0%	13.0%	14.0%	12.0%	19.0%	17.0%	23.0%	14.0%	18.0%	18.0%	14.0%	15.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	48.0%	47.0%	38.0%	54.0%	46.0%	42.0%	36.0%	46.0%	48.0%	34.0%	43.0%	57.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	42.0%	41.0%	52.0%	40.0%	44.0%	50.0%	56.0%	49.0%	43.0%	52.0%	50.0%	38.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	9.0%	6.0%	2.0%	6.0%	6.0%	5.0%	2.0%	6.0%	10.0%	14.0%	5.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.0%	70.0%	86.0%	97.0%	76.0%	86.0%	66.0%	79.0%	73.0%	77.0%	70.0%	79.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	8.0%	22.0%	10.0%	0.0%	19.0%	7.0%	22.0%	18.0%	24.0%	14.0%	23.0%	14.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	19.0%	8.0%	5.0%	3.0%	5.0%	7.0%	13.0%	3.0%	3.0%	9.0%	8.0%	7.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10.0%	17.0%	10.0%	3.0%	9.0%	0.0%	9.0%	8.0%	15.0%	18.0%	5.0%	7.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	23.0%	8.0%	29.0%	20.0%	23.0%	29.0%	25.0%	13.0%	18.0%	23.0%	23.0%	18.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	67.0%	75.0%	62.0%	77.0%	69.0%	71.0%	66.0%	79.0%	67.0%	59.0%	73.0%	75.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	69.0%	43.0%	57.0%	66.0%	57.0%	64.0%	59.0%	49.0%	58.0%	38.0%	53.0%	73.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	21.0%	43.0%	38.0%	24.0%	41.0%	18.0%	31.0%	49.0%	24.0%	33.0%	39.0%	23.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10.0%	14.0%	5.0%	10.0%	3.0%	18.0%	9.0%	3.0%	18.0%	29.0%	8.0%	4.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.0%	9.0%	10.0%	0.0%	9.0%	4.0%	6.0%	8.0%	0.0%	14.0%	3.0%	4.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	58.0%	66.0%	48.0%	67.0%	68.0%	79.0%	63.0%	79.0%	63.0%	55.0%	70.0%	64.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	37.0%	26.0%	43.0%	33.0%	24.0%	18.0%	31.0%	13.0%	38.0%	32.0%	28.0%	32.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLL												
OP29 Avg Risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%		100.0%
OP30 High risk Polyp Surveillance												
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI		58	202				59					
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	16.5	7.8	8	5.8	6.5	9	8.25	9.5				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTI												
ED2b ED Decision to Transport	67	50	72	66	69	61.5	58	59.5	54	50	43	58.5
OP21 Time to pain medicaton for long bone fractures	66	69	62.5	43.5	57	123.5	43	110.5				
OP22 Left without being seen	0	0	0	0.01	0	0	0	0	0	0	0	0
OP23 Head CT stroke patients	0.5				1			0.5			0.5	
Median Time from ED Arrival to Departure for Outpatients (18b)	157	141	143	145.5	154	152.5	144	146				
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	8	7	6	8	9	9	7	9				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						100.0%	100.0%	100.0%	96.0%	100.0%	100.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE	0											
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL												
PC01 Elective Delivery	0.00	0.00	0.00			0.00	0.00	0.00	0.00	0.00	0.00	0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications		1	0.33	0	0		0.11		0		0.33	0
PSI90 Complications / patient safety for selected indicators	1	0.99	1.06	1.11	1	1.07	1					

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%			
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	33.0%	50.0%	17.0%	28.0%	38.0%	14.0%	7.0%	13.0%	0.0%	12.0%	16.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA		0.0%										
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	13.0%	13.0%	13.0%	11.0%	16.0%	14.0%	10.0%	12.0%	9.0%	11.0%	11.0%	8.0%
READM30 STK Stroke 30day readmission rate	50.0%	9.0%		0.0%	0.0%		0.0%	0.0%	33.0%	0.0%		
READM30HF Heart Failure 30Day readmissions rate	0.0%	18.0%	0.0%	9.0%	30.0%	0.0%	25.0%	20.0%	13.0%	22.0%	8.0%	
READM30PN Pneumonia 30day readmission rate	17.0%	17.0%	18.0%	4.0%	14.0%	35.0%	10.0%	12.0%	11.0%	5.0%	20.0%	
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	6.0%	0.0%	6.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	0.0%	25.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%			
MORT30HF Heart failure 30day mortality rate	9.0%	0.0%	0.0%	0.0%	0.0%	0.0%	11.0%	9.0%	0.0%	0.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	8.0%	0.0%	0.0%	5.0%	5.0%	0.0%	0.0%	5.0%	4.0%	0.0%	13.3%
MORT30STK Stroke 30day mortality rate	0.0%	0.0%		0.0%	0.0%		0.0%	0.0%	25.0%	0.0%		0.0%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING E												
OP8 MRI Lumbar Spine for Low Back Pain	43.0%	43.0%	43.0%	43.0%	43.0%	43.0%						
OP9 Mammography Followup Rates	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP10 Abdomen CT Use of Contrast Material	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%						
OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00						
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00		0.00		0.00		0.00	0.00			0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00				0.00			0.00			
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00				0.00			0.00			
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00		0.00		0.00		0.00	0.00	0.00		0.00
PSI 13 Postoperative Sepsis Rate	0.00	0.00										
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00			0.00	0.00	0.00				0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	45.450	0.000	0.000	0.000		0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection												
SSI HYST Surgical Site Infection												
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	4.180
CDIFF	0.000	0.000	0.000	4.480	0.000	0.000	0.000	0.000	0.000	0.000	0.000	4.180
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	100.0%	75.0%	96.0%	91.0%	83.0%	87.0%	97.0%	88.0%	83.0%	98.0%	83.0%	82.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	0.0%	0.0%	4.0%	9.0%	10.0%	10.0%	3.0%	13.0%	13.0%	2.0%	4.0%	10.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	0.0%	25.0%	0.0%	0.0%	6.0%	3.0%	0.0%	0.0%	3.0%	0.0%	13.0%	8.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	96.0%	83.0%	90.0%	97.0%	83.0%	80.0%	90.0%	83.0%	97.0%	94.0%	79.0%	82.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	4.0%	17.0%	10.0%	3.0%	8.0%	17.0%	2.0%	17.0%	0.0%	6.0%	8.0%	10.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	0.0%	0.0%	0.0%	8.0%	3.0%	8.0%	0.0%	3.0%	0.0%	13.0%	8.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	88.0%	100.0%	89.0%	53.0%	60.0%	64.0%	81.0%	70.0%	82.0%	96.0%	90.0%	76.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	13.0%	0.0%	11.0%	41.0%	20.0%	36.0%	19.0%	30.0%	18.0%	0.0%	10.0%	24.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	0.0%	0.0%	0.0%	6.0%	20.0%	0.0%	0.0%	0.0%	0.0%	4.0%	31.0%	14.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	89.0%	75.0%	67.0%	80.0%	56.0%	75.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	11.0%	25.0%	33.0%	20.0%	22.0%	25.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%	0.0%	0.0%	0.0%	22.0%	0.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	63.0%	100.0%	100.0%	75.0%	68.0%	75.0%	44.0%	63.0%	50.0%	67.0%	67.0%	83.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	25.0%	0.0%	0.0%	0.0%	14.0%	25.0%	39.0%	38.0%	14.0%	0.0%	0.0%	0.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	13.0%	0.0%	0.0%	25.0%	18.0%	0.0%	17.0%	0.0%	36.0%	33.0%	33.0%	17.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	75.0%	100.0%	75.0%	72.0%	91.0%	94.0%	70.0%	86.0%	88.0%	77.0%	69.0%	117.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	25.0%	0.0%	25.0%	28.0%	9.0%	6.0%	30.0%	14.0%	13.0%	23.0%	31.0%	33.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	46.0%	58.0%	46.0%	38.0%	53.0%	47.0%	34.0%	38.0%	57.0%	55.0%	38.0%	48.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	50.0%	17.0%	42.0%	56.0%	38.0%	47.0%	59.0%	63.0%	37.0%	38.0%	25.0%	45.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	17.0%	4.0%	3.0%	7.0%	3.0%	5.0%	0.0%	7.0%	2.0%	25.0%	6.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	88.0%	75.0%	75.0%	82.0%	87.0%	60.0%	85.0%	88.0%	80.0%	93.0%	63.0%	92.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	13.0%	0.0%	25.0%	18.0%	13.0%	40.0%	5.0%	0.0%	20.0%	7.0%	25.0%	8.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	0.0%	25.0%	0.0%	0.0%	0.0%	0.0%	10.0%	13.0%	0.0%	0.0%	13.0%	0.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	5.0%	0.0%	10.0%	0.0%	13.0%	15.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	25.0%	50.0%	13.0%	36.0%	13.0%	30.0%	15.0%	0.0%	0.0%	13.0%	25.0%	15.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	75.0%	50.0%	88.0%	64.0%	67.0%	70.0%	80.0%	100.0%	90.0%	88.0%	100.0%	69.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	75.0%	100.0%	63.0%	55.0%	56.0%	60.0%	79.0%	38.0%	50.0%	73.0%	75.0%	62.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	25.0%	0.0%	25.0%	27.0%	31.0%	40.0%	21.0%	63.0%	50.0%	27.0%	25.0%	31.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%	0.0%	13.0%	18.0%	13.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	8.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	0.0%	0.0%	0.0%	13.0%	0.0%	5.0%	0.0%	0.0%	6.0%	13.0%	15.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	75.0%	75.0%	75.0%	64.0%	63.0%	60.0%	74.0%	75.0%	60.0%	94.0%	75.0%	69.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	25.0%	25.0%	25.0%	36.0%	25.0%	40.0%	21.0%	25.0%	40.0%	0.0%	13.0%	15.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance	100.0%					0.0%		0.0%		100.0%		100.0%
OP30 High risk Polyp Surveillance	100.0%		100.0%	100.0%	100.0%	100.0%		0.0%				
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI		315		55		69		171.5				
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	4.5	7	6.8	7	4.2	14	10.25	8.5				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	34		41	44	31	37	33.5	43	39	42	43	40.5
OP21 Time to pain medication for long bone fractures	30	19	26	26	15	13.5	18	44				
OP22 Left without being seen	0	0.01	0	0	0.01	0	0	0	0	0.01	0	0
OP23 Head CT stroke patients			1			0.5			0			
Median Time from ED Arrival to Departure for Outpatients (18b)	98.5	99	84	87	93	97	108	91				
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	8	8	8	8	10	12	17.5	18				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						98.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications												
PSI90 Complications / patient safety for selected indicators	1	1	1	1	1	1	1					

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate		100.0%	0.0%		0.0%				50.0%		50.0%	
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	29.0%	31.0%	33.0%	20.0%	13.0%	18.0%	9.0%	11.0%	9.0%	0.0%	20.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA												
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	17.0%	23.0%	24.0%	27.0%	16.0%	12.0%	15.0%	15.0%	19.0%	14.0%	8.0%	15.0%
READM30 STK Stroke 30day readmission rate	19.0%				0.0%							
READM30HF Heart Failure 30Day readmissions rate	50.0%	40.0%	33.0%	0.0%	33.0%	25.0%	25.0%	0.0%	0.0%	0.0%	50.0%	
READM30PN Pneumonia 30day readmission rate	0.0%	0.0%	0.0%	57.0%	8.0%	14.0%	6.0%	0.0%	0.0%	0.0%	20.0%	
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	13.0%	0.0%	0.0%	0.0%	11.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate		0.0%	0.0%		0.0%			0.0%		100.0%	0.0%	
MORT30HF Heart failure 30day mortality rate	20.0%	0.0%	14.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%	0.0%	25.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	0.0%	13.0%	0.0%	13.0%	0.0%	0.0%	10.0%	0.0%	0.0%	9.1%
MORT30STK Stroke 30day mortality rate					0.0%							
USE OF MEDICAL IMAGING OUTPATIENT IMAGING B												
OP8 MRI Lumbar Spine for Low Back Pain												
OP9 Mammography Followup Rates	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						
OP10 Abdomen CT Use of Contrast Material	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time												

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Quality Target Measures

PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00						
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	250.00	0.00	0.00
PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate			0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection												
SSI HYST Surgical Site Infection			0.00									
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	4.130	0.000	0.000	

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	85.0%	94.0%	91.0%	86.0%	89.0%	82.0%	83.0%	82.0%	86.0%	91.0%	78.0%	86.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	11.0%	6.0%	5.0%	10.0%	6.0%	18.0%	14.0%	16.0%	12.0%	3.0%	22.0%	10.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	0.0%	4.0%	5.0%	5.0%	0.0%	3.0%	2.0%	3.0%	6.0%	0.0%	3.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	92.0%	80.0%	89.0%	92.0%	91.0%	92.0%	91.0%	82.0%	87.0%	79.0%	87.0%	88.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	8.0%	19.0%	4.0%	6.0%	6.0%	8.0%	8.0%	11.0%	9.0%	6.0%	13.0%	10.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	2.0%	7.0%	2.0%	3.0%	0.0%	2.0%	7.0%	4.0%	15.0%	0.0%	2.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	70.0%	74.0%	85.0%	73.0%	68.0%	86.0%	65.0%	59.0%	67.0%	79.0%	71.0%	81.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.0%	15.0%	5.0%	21.0%	26.0%	8.0%	23.0%	34.0%	26.0%	14.0%	21.0%	13.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.0%	11.0%	10.0%	6.0%	6.0%	5.0%	13.0%	7.0%	7.0%	7.0%	9.0%	6.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	56.0%	79.0%	81.0%	70.0%	92.0%	96.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	44.0%	17.0%	16.0%	20.0%	8.0%	4.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%	4.0%	3.0%	10.0%	0.0%	0.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	61.0%	64.0%	59.0%	86.0%	45.0%	68.0%	86.0%	70.0%	58.0%	55.0%	63.0%	68.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	17.0%	27.0%	14.0%	4.0%	14.0%	15.0%	7.0%	17.0%	12.0%	27.0%	29.0%	18.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	22.0%	9.0%	28.0%	11.0%	41.0%	18.0%	7.0%	13.0%	31.0%	18.0%	8.0%	14.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	97.0%	97.0%	88.0%	85.0%	97.0%	88.0%	95.0%	84.0%	81.0%	73.0%	91.0%	84.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	3.0%	3.0%	12.0%	15.0%	3.0%	13.0%	5.0%	16.0%	19.0%	27.0%	9.0%	16.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	47.0%	44.0%	72.0%	48.0%	54.0%	75.0%	59.0%	49.0%	45.0%	39.0%	44.0%	48.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	50.0%	46.0%	24.0%	44.0%	37.0%	20.0%	36.0%	42.0%	46.0%	48.0%	53.0%	48.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	4.0%	3.0%	3.0%	5.0%	4.0%	0.0%	4.0%	7.0%	9.0%	0.0%	4.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	86.0%	89.0%	88.0%	76.0%	82.0%	96.0%	90.0%	68.0%	88.0%	91.0%	74.0%	79.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	10.0%	6.0%	4.0%	14.0%	14.0%	4.0%	10.0%	21.0%	12.0%	9.0%	13.0%	16.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	5.0%	6.0%	8.0%	10.0%	5.0%	0.0%	0.0%	11.0%	0.0%	0.0%	13.0%	5.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	5.0%	0.0%	4.0%	10.0%	5.0%	4.0%	9.0%	0.0%	8.0%	18.0%	4.0%	0.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	5.0%	6.0%	16.0%	10.0%	10.0%	16.0%	9.0%	11.0%	16.0%	9.0%	4.0%	25.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	90.0%	94.0%	80.0%	81.0%	86.0%	80.0%	82.0%	89.0%	76.0%	73.0%	91.0%	75.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	81.0%	78.0%	65.0%	62.0%	64.0%	71.0%	81.0%	58.0%	60.0%	64.0%	61.0%	55.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	19.0%	22.0%	26.0%	29.0%	36.0%	25.0%	14.0%	37.0%	36.0%	36.0%	30.0%	35.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%	0.0%	9.0%	10.0%	0.0%	4.0%	5.0%	5.0%	4.0%	0.0%	9.0%	10.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	0.0%	4.0%	5.0%	5.0%	0.0%	0.0%	0.0%	8.0%	18.0%	5.0%	0.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.0%	83.0%	84.0%	70.0%	86.0%	68.0%	82.0%	74.0%	72.0%	73.0%	64.0%	75.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	29.0%	17.0%	12.0%	25.0%	10.0%	32.0%	18.0%	26.0%	20.0%	9.0%	32.0%	25.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLL												
OP29 Avg Risk Polyp Surveillance	100.0%			100.0%	100.0%	100.0%	100.0%	100.0%		100.0%		100.0%
OP30 High risk Polyp Surveillance												
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI	58	120		178.5		74		36.5				
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	5	24	8.5	3.5	2	5	8.8	3.5				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTI												
ED2b ED Decision to Transport		39.5	45	30.5	45	50	41.5	41	32	43	33.5	42
OP21 Time to pain medicaton for long bone fractures	28	16	24	14	41	42	35.5	27				
OP22 Left without being seen	0	0	0	0	0.01	0	0.01	0	0.01	0	0	0
OP23 Head CT stroke patients		0	0		1		1					1
Median Time from ED Arrival to Departure for Outpatients (18b)	97	85	94	112	83	93	120	109				
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	11	10	14	13	10	12	19	18.5				
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE		0										0
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA												
Hip and Knee Complications	0	0	0.08	0	0	0	0	0	0			
PSI4SURG COMP Death rate among surgical patients with serious treatable complications			0							0		
PSI90 Complications / patient safety for selected indicators	1	1	1	1	1	1	1					

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READMISSIONS 30 DAYS RATES OF READMISSION %

READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			50.0%	100.0%	
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	21.0%	0.0%	6.0%	0.0%	20.0%	36.0%	31.0%	0.0%	30.0%	0.0%	17.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	33.0%	0.0%	9.0%	8.0%	0.0%	0.0%	17.0%	25.0%	14.0%	0.0%	0.0%	
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	7.0%	12.0%	18.0%	11.0%	16.0%	10.0%	7.0%	19.0%	11.0%	15.0%	10.0%
READM30 STK Stroke 30day readmission rate	10.0%	0.0%		33.0%		0.0%	0.0%	0.0%	0.0%		0.0%	
READM30HF Heart Failure 30Day readmissions rate	0.0%	13.0%	0.0%	50.0%	0.0%	33.0%	25.0%	20.0%	44.0%	13.0%	33.0%	
READM30PN Pneumonia 30day readmission rate	33.0%	10.0%	25.0%	9.0%	25.0%	8.0%	15.0%	7.0%	30.0%	7.0%	13.0%	

MORTALITY 30 DAYS DEATH RATE %

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			0.0%	0.0%	0.0%
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	14.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	0.0%	8.0%	0.0%	0.0%	4.0%	13.0%	0.0%	0.0%	0.0%	0.0%
MORT30STK Stroke 30day mortality rate	0.0%	0.0%		0.0%	100.0%	0.0%	0.0%	0.0%	0.0%		0.0%	0.0%

USE OF MEDICAL IMAGING OUTPATIENT IMAGING E

OP8 MRI Lumbar Spine for Low Back Pain												
OP9 Mammography Followup Rates	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP10 Abdomen CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						
OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
Quality Target Measures												
PSI 3 Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 6 Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)	0.00	0.00	0.00	0.00	0.00	0.00						
PSI 8 In Hospital Fall with Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 9 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43.48	0.00	0.00	0.00
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00
PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45.45	0.00	0.00	0.00	0.00
PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CLABSI	0.000	0.000	0.000	0.000	12.500	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	5.920	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection	0.00	0.00	0.00	0.00	0.00	0.00	0.00	33.33	0.00	0.00	0.00	
SSI HYST Surgical Site Infection		0.00		0.00	0.00	0.00	0.00	0.00		0.00		
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.850	0.000	0.000	0.890	0.000
CDIFF	0.000	0.000	0.860	0.760	1.470	2.860	0.620	0.850	0.000	0.000	0.000	0.000
SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS												
HCOMP1A P Patients who reported that their nurses "Always" communicated well	77.0%	74.0%	79.0%	89.0%	76.0%	76.0%	83.0%	77.0%	75.0%	82.0%	76.0%	78.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	16.0%	22.0%	16.0%	11.0%	16.0%	22.0%	16.0%	18.0%	16.0%	9.0%	19.0%	17.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	8.0%	4.0%	5.0%	0.0%	8.0%	1.0%	1.0%	6.0%	9.0%	9.0%	6.0%	5.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	81.0%	80.0%	76.0%	85.0%	77.0%	74.0%	79.0%	80.0%	84.0%	83.0%	77.0%	81.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	18.0%	14.0%	15.0%	9.0%	23.0%	18.0%	18.0%	7.0%	9.0%	19.0%	19.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	8.0%	2.0%	10.0%	0.0%	14.0%	3.0%	3.0%	2.0%	9.0%	9.0%	4.0%	0.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.0%	63.0%	73.0%	76.0%	71.0%	68.0%	77.0%	72.0%	50.0%	67.0%	74.0%	75.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	19.0%	33.0%	16.0%	17.0%	18.0%	25.0%	17.0%	23.0%	34.0%	17.0%	18.0%	21.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	14.0%	4.0%	11.0%	6.0%	11.0%	7.0%	6.0%	5.0%	16.0%	15.0%	9.0%	4.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	69.0%	66.0%	70.0%	69.0%	65.0%	62.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	19.0%	33.0%	22.0%	30.0%	23.0%	28.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	12.0%	2.0%	8.0%	2.0%	12.0%	10.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	61.0%	42.0%	82.0%	69.0%	65.0%	60.0%	73.0%	67.0%	62.0%	53.0%	54.0%	75.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	11.0%	25.0%	7.0%	16.0%	17.0%	25.0%	13.0%	18.0%	17.0%	21.0%	22.0%	6.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	28.0%	33.0%	11.0%	15.0%	17.0%	16.0%	14.0%	15.0%	21.0%	26.0%	24.0%	19.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.0%	88.0%	93.0%	91.0%	84.0%	81.0%	87.0%	97.0%	80.0%	80.0%	79.0%	89.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	16.0%	13.0%	7.0%	9.0%	16.0%	19.0%	13.0%	3.0%	20.0%	20.0%	21.0%	11.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	46.0%	46.0%	42.0%	61.0%	46.0%	42.0%	54.0%	41.0%	47.0%	59.0%	46.0%	3.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	47.0%	41.0%	45.0%	29.0%	42.0%	48.0%	40.0%	52.0%	38.0%	31.0%	50.0%	52.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	7.0%	8.0%	9.0%	3.0%	10.0%	7.0%	1.0%	6.0%	10.0%	10.0%	4.0%	45.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	79.0%	81.0%	86.0%	75.0%	82.0%	83.0%	84.0%	85.0%	76.0%	79.0%	78.0%	76.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.0%	15.0%	8.0%	21.0%	11.0%	17.0%	8.0%	13.0%	14.0%	11.0%	12.0%	21.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	5.0%	4.0%	5.0%	4.0%	7.0%	0.0%	8.0%	3.0%	10.0%	11.0%	10.0%	3.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	12.0%	6.0%	11.0%	8.0%	12.0%	9.0%	2.0%	8.0%	10.0%	10.0%	10.0%	6.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	21.0%	27.0%	14.0%	10.0%	21.0%	19.0%	24.0%	30.0%	21.0%	10.0%	24.0%	24.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	67.0%	67.0%	76.0%	81.0%	67.0%	72.0%	75.0%	63.0%	69.0%	79.0%	66.0%	71.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	75.0%	62.0%	58.0%	58.0%	73.0%	60.0%	58.0%	70.0%	67.0%	73.0%	68.0%	55.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	18.0%	35.0%	34.0%	35.0%	22.0%	33.0%	34.0%	25.0%	24.0%	22.0%	25.0%	30.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	7.0%	4.0%	8.0%	6.0%	4.0%	6.0%	8.0%	5.0%	10.0%	5.0%	8.0%	15.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	12.0%	4.0%	6.0%	2.0%	7.0%	6.0%	2.0%	5.0%	10.0%	8.0%	2.0%	3.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	74.0%	73.0%	71.0%	83.0%	71.0%	65.0%	84.0%	60.0%	60.0%	76.0%	73.0%	62.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	14.0%	24.0%	23.0%	15.0%	22.0%	29.0%	14.0%	35.0%	30.0%	16.0%	24.0%	35.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance				100.0%				100.0%	100.0%	100.0%	100.0%	100.0%
OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%		86.0%	0.0%					
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI		139			58	26	27					
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	10	6.5	4.25	6.8	4.5	4.5	6	5				
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	65.5	69	70	81	68	84	77	69	89	90	74	95.5
OP21 Time to pain medication for long bone fractures	23	18.5	18.5	30	19.5	24	133	25				
OP22 Left without being seen	0.01	0.01	0	0.01	0.01	0	0	0.01	0	0.01	0.01	0.01
OP23 Head CT stroke patients	1	0	1		1		0.5	0.5	0.75	1		0
Median Time from ED Arrival to Departure for Outpatients (18b)	138	126.5	124	129.5	117.5	123	128.5	118.5				
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	0	0	1	0	0	0	1					
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza						100.0%	98.0%	100.0%	100.0%	100.0%	100.0%	100.0%
IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE		0			0							0
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications	0	0	0	0.07	0.06	0.06	0	0	0			
PSI4SURG COMP Death rate among surgical patients with serious treatable complications		0	0	0	0.2	0		0	1	0		
PSI90 Complications / patient safety for selected indicators	0.99	0.99	1	1.07	1.2	1.06	1					

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
READMISSIONS 30 DAYS RATES OF READMISSION %												
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	13.0%	13.0%	19.0%	44.0%	14.0%	27.0%	13.0%	18.0%	19.0%	22.0%	0.0%	
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	7.0%	8.0%	8.0%	0.0%	6.0%	0.0%	0.0%	0.0%	9.0%	13.0%	
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	17.0%	11.0%	11.0%	16.0%	14.0%	18.0%	15.0%	14.0%	19.0%	14.0%	18.0%	19.0%
READM30 STK Stroke 30day readmission rate	50.0%	33.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	50.0%	33.0%	
READM30HF Heart Failure 30Day readmissions rate	50.0%	25.0%	18.0%	43.0%	18.0%	30.0%	33.0%	17.0%	20.0%	18.0%	25.0%	
READM30PN Pneumonia 30day readmission rate	17.0%	8.0%	20.0%	13.0%	14.0%	15.0%	19.0%	20.0%	20.0%	9.0%	9.0%	
MORTALITY 30 DAYS DEATH RATE %												
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	3.0%	3.0%	5.0%	0.0%	0.0%	0.0%	3.0%	0.0%	3.0%	0.0%	7.0%	10.5%
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	33.0%	0.0%	0.0%	0.0%	
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	8.0%	0.0%	0.0%	0.0%	40.0%	0.0%	0.0%	0.0%	0.0%	0.0%
MORT30PN Pneumonia 30day mortality rate	0.0%	8.0%	6.0%	4.0%	7.0%	3.0%	10.0%	5.0%	0.0%	0.0%	0.0%	3.5%
MORT30STK Stroke 30day mortality rate	33.0%	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
USE OF MEDICAL IMAGING OUTPATIENT IMAGING B												
OP8 MRI Lumbar Spine for Low Back Pain												
OP9 Mammography Followup Rates	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%						
OP10 Abdomen CT Use of Contrast Material	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%						
OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						

Quality Target Measures

PSI 3 Pressure Ulcer Rate

PSI 6 Iatrogenic Pneumothorax Rate

PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate
(retired)

PSI 8 In Hospital Fall with Hip Fracture Rate

PSI 9 Perioperative Hemorrhage or Hematoma Rate

PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis

PSI 11 Postoperative Respiratory Failure Rate

PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis
Rate

PSI 13 Postoperative Sepsis Rate

PSI 14 Postoperative Wound Dehiscence Rate

PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration
Rate

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	7.580	0.000	0.000	0.000	0.000	0.000
CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
SSI COLON Surgical Site Infection	0.00	0.00	0.00	0.00	0.00	16.67	0.00	0.00	0.00	0.00	0.00	0.00
SSI HYST Surgical Site Infection			0.00									
MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
CDIFF	0.000	0.000	0.000	0.000	0.000	0.000	2.530	1.450	0.000	0.000	0.000	0.000

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well	87.0%	83.0%	89.0%	72.0%	80.0%	88.0%	86.0%	87.0%	91.0%	87.0%	83.0%	78.0%
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	9.0%	14.0%	7.0%	18.0%	12.0%	8.0%	8.0%	6.0%	6.0%	10.0%	9.0%	14.0%
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	3.0%	4.0%	9.0%	8.0%	4.0%	6.0%	7.0%	3.0%	4.0%	8.0%	7.0%
HCOMP2A P Patients who reported that their doctors "Always" communicated well	73.0%	86.0%	89.0%	67.0%	81.0%	88.0%	89.0%	77.0%	92.0%	80.0%	80.0%	79.0%
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	12.0%	11.0%	11.0%	22.0%	11.0%	11.0%	7.0%	8.0%	2.0%	11.0%	7.0%	13.0%
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	16.0%	3.0%	0.0%	12.0%	8.0%	2.0%	4.0%	14.0%	6.0%	10.0%	13.0%	9.0%
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	72.0%	83.0%	82.0%	61.0%	81.0%	77.0%	84.0%	85.0%	85.0%	74.0%	77.0%	20.0%
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	18.0%	17.0%	14.0%	22.0%	9.0%	17.0%	13.0%	12.0%	12.0%	10.0%	17.0%	76.0%
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.0%	0.0%	5.0%	17.0%	11.0%	9.0%	3.0%	3.0%	3.0%	17.0%	6.0%	9.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	73.0%	75.0%	75.0%	64.0%	74.0%	81.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	20.0%	12.0%	14.0%	29.0%	13.0%	17.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	8.0%	14.0%	11.0%	7.0%	13.0%	5.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.0%	65.0%	84.0%	44.0%	73.0%	65.0%	75.0%	64.0%	74.0%	78.0%	73.0%	68.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	21.0%	12.0%	8.0%	25.0%	9.0%	0.0%	11.0%	18.0%	12.0%	0.0%	19.0%	13.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	21.0%	23.0%	8.0%	31.0%	18.0%	35.0%	14.0%	18.0%	15.0%	22.0%	8.0%	19.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	98.0%	93.0%	89.0%	90.0%	92.0%	91.0%	92.0%	92.0%	83.0%	94.0%	87.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	2.0%	7.0%	11.0%	10.0%	8.0%	9.0%	8.0%	8.0%	17.0%	6.0%	13.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	56.0%	55.0%	59.0%	48.0%	54.0%	52.0%	43.0%	46.0%	65.0%	62.0%	66.0%	55.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	39.0%	42.0%	41.0%	45.0%	45.0%	46.0%	3.0%	53.0%	29.0%	33.0%	30.0%	41.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	2.0%	0.0%	7.0%	1.0%	2.0%	3.0%	1.0%	5.0%	5.0%	4.0%	4.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	81.0%	76.0%	72.0%	64.0%	83.0%	82.0%	71.0%	75.0%	83.0%	82.0%	73.0%	71.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	12.0%	21.0%	19.0%	12.0%	7.0%	6.0%	19.0%	17.0%	18.0%	18.0%	20.0%	14.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	8.0%	3.0%	9.0%	24.0%	10.0%	12.0%	10.0%	11.0%	5.0%	14.0%	7.0%	14.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	15.0%	6.0%	3.0%	12.0%	7.0%	3.0%	7.0%	14.0%	5.0%	15.0%	7.0%	9.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	12.0%	14.0%	6.0%	12.0%	24.0%	15.0%	17.0%	14.0%	5.0%	19.0%	10.0%	12.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	73.0%	80.0%	91.0%	77.0%	69.0%	82.0%	76.0%	71.0%	90.0%	67.0%	83.0%	79.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	77.0%	86.0%	84.0%	62.0%	80.0%	85.0%	62.0%	74.0%	77.0%	86.0%	77.0%	85.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	8.0%	11.0%	6.0%	27.0%	13.0%	12.0%	21.0%	19.0%	15.0%	7.0%	17.0%	9.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	15.0%	3.0%	9.0%	12.0%	7.0%	3.0%	17.0%	7.0%	8.0%	7.0%	7.0%	6.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	16.0%	3.0%	0.0%	8.0%	4.0%	7.0%	7.0%	11.0%	5.0%	8.0%	3.0%	6.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	76.0%	76.0%	94.0%	54.0%	75.0%	80.0%	78.0%	67.0%	90.0%	73.0%	72.0%	74.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	8.0%	21.0%	6.0%	38.0%	21.0%	13.0%	15.0%	22.0%	5.0%	19.0%	24.0%	20.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLL												
OP29 Avg Risk Polyp Surveillance							100.0%	100.0%	83.0%	67.0%	100.0%	83.0%
OP30 High risk Polyp Surveillance							100.0%	55.0%	50.0%	67.0%	50.0%	33.0%
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI	38	118	73		141	151						
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	24	26	22	46	37	8						
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTI												
ED2b ED Decision to Transport			59	49	56		53	47	40.5	40	35	34.5
OP21 Time to pain medicaton for long bone fractures	79	99	99	110	92	103						
OP22 Left without being seen	0.03	0.03	0.02	0.02	0.02	0.02						
OP23 Head CT stroke patients												
Median Time from ED Arrival to Departure for Outpatients (18b)	192	139	167	169	169	140						
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	21	22	23	18	29	24						
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza							100.0%	100.0%	100.0%	91.0%	97.0%	
IMM3OP27 FACADHPCT HCW Influenza Vaccination	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVEN												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DEL												
PC01 Elective Delivery							0.00	0.00	0.00	0.33	0.00	0.00
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICA												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications												
PSI90 Complications / patient safety for selected indicators	1.05	1.05	1.05	1.05	1.05	1.05						

READMISSIONS 30 DAYS RATES OF READMISSION %

READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate		0.0%	0.0%	0.0%								
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	13.0%	0.0%	0.0%	0.0%								
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	13.0%	0.0%	50.0%	0.0%								
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	4.0%	5.0%	3.0%	4.0%								
READM30 STK Stroke 30day readmission rate	0.0%	0.0%	0.0%	0.0%		0.0%						
READM30HF Heart Failure 30Day readmissions rate	0.0%	0.0%	0.0%	0.0%			33.0%					
READM30PN Pneumonia 30day readmission rate	0.0%	0.0%	20.0%	9.0%		27.0%						

MORTALITY 30 DAYS DEATH RATE %

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate												
MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%										
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate		0.0%										
MORT30HF Heart failure 30day mortality rate	0.0%	0.0%										
MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%										
MORT30STK Stroke 30day mortality rate												

USE OF MEDICAL IMAGING OUTPATIENT IMAGING E

OP8 MRI Lumbar Spine for Low Back Pain												
OP9 Mammography Followup Rates	18.0%	18.0%	18.0%	18.0%	18.0%	18.0%						
OP10 Abdomen CT Use of Contrast Material	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%						
OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%						
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%						
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time												

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Quality Target Measures

PSI 3 Pressure Ulcer Rate
 PSI 6 Iatrogenic Pneumothorax Rate
 PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate (retired)
 PSI 8 In Hospital Fall with Hip Fracture Rate
 PSI 9 Perioperative Hemorrhage or Hematoma Rate
 PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis
 PSI 11 Postoperative Respiratory Failure Rate
 PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate
 PSI 13 Postoperative Sepsis Rate
 PSI 14 Postoperative Wound Dehiscence Rate
 PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate
 CLABSI
 CAUTI
 SSI COLON Surgical Site Infection
 SSI HYST Surgical Site Infection
 MRSA
 CDI/F

0.000	0.000	0.000	0.000		0.000	0.000	0.000	0.000		0.000		
0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000

SURVEY OF PATIENT'S EXPERIENCE- HOSPITAL CONS

HCOMP1A P Patients who reported that their nurses "Always" communicated well
 HCOMP1U P Patients who reported that their nurses "Usually" communicated well
 HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well
 HCOMP2A P Patients who reported that their doctors "Always" communicated well
 HCOMP2U P Patients who reported that their doctors "Usually" communicated well
 HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well
 HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted
 HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted
 HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted

100.0%	83.0%	95.0%	87.0%	90.0%	88.0%	77.0%	56.0%	100.0%	86.0%	100.0%	79.0%	
0.0%	17.0%	5.0%	13.0%	10.0%	13.0%	18.0%	44.0%	0.0%	14.0%	0.0%	17.0%	
0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.0%	0.0%	0.0%	0.0%	0.0%	4.0%	
100.0%	67.0%	97.0%	80.0%	95.0%	70.0%	77.0%	75.0%	100.0%	76.0%	100.0%	74.0%	
0.0%	0.0%	3.0%	20.0%	5.0%	21.0%	21.0%	25.0%	0.0%	24.0%	0.0%	26.0%	
0.0%	33.0%	0.0%	0.0%	0.0%	9.0%	3.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
86.0%	100.0%	80.0%	60.0%	78.0%	92.0%	77.0%	50.0%	100.0%	67.0%	50.0%	75.0%	
14.0%	0.0%	20.0%	40.0%	0.0%	8.0%	23.0%	50.0%	0.0%	25.0%		17.0%	
0.0%	0.0%	0.0%	0.0%	22.0%	0.0%	0.0%	0.0%	0.0%	8.0%	50.0%	8.0%	

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HCOMP4A P Patients who reported that their pain was "Always" well controlled	75.0%	100.0%	81.0%	70.0%	75.0%	90.0%						
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.0%	0.0%	19.0%	30.0%	25.0%	10.0%						
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%						
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	100.0%	100.0%	80.0%	83.0%	86.0%	67.0%	75.0%	50.0%	100.0%	63.0%	50.0%	88.0%
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	0.0%	0.0%	20.0%	17.0%	14.0%	8.0%	17.0%	20.0%	0.0%	13.0%		13.0%
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%	8.0%	30.0%	0.0%	25.0%	50.0%	0.0%
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	100.0%	0.0%	90.0%	88.0%	90.0%	88.0%	75.0%	88.0%	100.0%	83.0%	83.0%	100.0%
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	0.0%	100.0%	10.0%	13.0%	10.0%	13.0%	25.0%	13.0%	0.0%	17.0%	17.0%	0.0%
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	80.0%	50.0%	56.0%	33.0%	53.0%	53.0%	54.0%	40.0%	100.0%	45.0%	78.0%	32.0%
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	13.0%	33.0%	39.0%	53.0%	37.0%	40.0%	41.0%	53.0%	0.0%	45.0%	22.0%	64.0%
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	17.0%	0.0%	3.0%	0.0%	3.0%	3.0%	0.0%	0.0%	10.0%	0.0%	5.0%
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	100.0%	100.0%	85.0%	70.0%	100.0%	82.0%	83.0%	83.0%	100.0%	86.0%	100.0%	75.0%
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	0.0%	0.0%	15.0%	30.0%	0.0%	0.0%	17.0%	17.0%	0.0%	14.0%	0.0%	13.0%
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	0.0%	0.0%	0.0%	0.0%	0.0%	18.0%	0.0%	0.0%	0.0%	0.0%	0.0%	13.0%
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	0.0%	0.0%	0.0%	3.0%	0.0%	3.0%	0.0%	0.0%	0.0%	4.0%	0.0%	13.0%
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	0.0%	0.0%	18.0%	8.0%	3.0%	9.0%	11.0%	0.0%	0.0%	4.0%	25.0%	25.0%
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	17.0%	6.0%	29.0%	15.0%	21.0%	21.0%	24.0%	24.0%	10.0%	14.0%	75.0%	63.0%
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	100.0%	100.0%	67.0%	60.0%	86.0%	70.0%	77.0%	67.0%	50.0%	71.0%	75.0%	63.0%
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	0.0%	0.0%	33.0%	30.0%	14.0%	10.0%	15.0%	17.0%	0.0%	29.0%	0.0%	25.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%	0.0%	0.0%	10.0%	0.0%	20.0%	8.0%	17.0%	50.0%	0.0%	25.0%	13.0%
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	0.0%	0.0%	10.0%	0.0%	9.0%	0.0%	0.0%	0.0%	14.0%	0.0%	13.0%
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	100.0%	100.0%	77.0%	70.0%	71.0%	64.0%	77.0%	83.0%	100.0%	71.0%	75.0%	25.0%
HRECMND PY Patients who reported YES, they would probably recommend the hospital	0.0%	0.0%	23.0%	20.0%	29.0%	27.0%	23.0%	17.0%	0.0%	14.0%	25.0%	63.0%
TIMELY AND EFFECTIVE CARE - COLONOSCOPY FOLLOW UP												
OP29 Avg Risk Polyp Surveillance												
OP30 High risk Polyp Surveillance												
TIMELY AND EFFECTIVE CARE - HEART ATTACK												
OP3b Median Time to Transfer AMI				56			73					
OP4 Aspirin at Arrival AMI Chest Pain												
OP5 Median Time to ECG AMI and Chest Pain	9.5	5.5	23.5	13.5	9.8	7.75	7	4.3	3.8			
TIMELY AND EFFECTIVE CARE - STROKE CARE %												
STK4 Thrombolytic Therapy (retired)												
TIMELY AND EFFECTIVE CARE- EMERGENCY DEPARTMENT												
ED2b ED Decision to Transport	45	52	46.5	34.5	45	37	54	50	60	54	55	65
OP21 Time to pain medication for long bone fractures	42	65		28	23		21.5	21.5	18			
OP22 Left without being seen	0.01	0	0	0.01	0	0	0.01	0	0.01	0	0	0
OP23 Head CT stroke patients												
Median Time from ED Arrival to Departure for Outpatients (18b)	124	112.5	121.5	108	115.5	99	140	156.5	142			
OP20 Door to Diagnostic Evaluation												
OP20 Door to Diagnostic Evaluation	7	8	7.5	7	4	8.5	7	8	7			
TIMELY AND EFFECTIVE CARE -PREVENTIVE CARE %												
IMM2 Immunization for Influenza												
IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%
TIMELY AND EFFECTIVE CARE - BLOOD CLOT PREVENTION												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE												
TIMELY AND EFFECTIVE CARE -PREGNANCY AND DELIVERY												
PC01 Elective Delivery												
TIMELY AND EFFECTIVE CARE - SURGICAL COMPLICATIONS												
Hip and Knee Complications												
PSI4SURG COMP Death rate among surgical patients with serious treatable complications												
PSI90 Complications / patient safety for selected indicators												

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READMISSIONS 30 DAYS RATES OF READMISSION %

READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate
 READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate
 READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate
 READM30 HIPKNEE 30day readmission rate following elective THA / TKA
 READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission
 READM30 STK Stroke 30day readmission rate
 READM30HF Heart Failure 30Day readmissions rate
 READM30PN Pneumonia 30day readmission rate

MORTALITY 30 DAYS DEATH RATE %

MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate
 MORT30 COPD 30day mortality rate COPD patients
 MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate
 MORT30HF Heart failure 30day mortality rate
 MORT30PN Pneumonia 30day mortality rate
 MORT30STK Stroke 30day mortality rate

USE OF MEDICAL IMAGING OUTPATIENT IMAGING B

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18
OP8 MRI Lumbar Spine for Low Back Pain												
OP9 Mammography Followup Rates	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
OP10 Abdomen CT Use of Contrast Material	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%
OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery												
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%