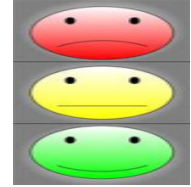


# Childress Regional Medical Center

Dashboard Overview for Governing Board  
2015



## TARGET KEY

**Go** - meeting goal

**Caution** - < goal but > state avg

**Stop** - < state average

**No Cases**

QUALITY/PATIENT SAFETY	1st Qtr 15	2nd Qtr 15	3rd Qtr 15	4th Qtr 15
Patient Grievances <i>Goal: &lt;3 per quarter</i>	0	0	1	0
Patient Fall Rate <i>Goal: &lt;4.15 fall rate per quarter</i>	1.93	1.10	4.26	2.44
Falls with Trauma HAC Rate <i>Goal: &lt;0.56%</i>	0.97%	0.00%	0.00%	0.00%
Preventable Readmissions All-Diagnosis HAC Rate <i>Goal: &lt;16%</i>	0%	9%	3%	6%
Influenza Vaccination Coverage Healthcare Personnel <i>Goal: &gt;82%</i>	NA	NA	NA	92%
Cases in Litigation <i>Goal: no cases</i>	0	0	0	0
<b>NATIONAL QUALITY INDICATORS</b>				
	4th Qtr 14	1st Qtr 15	2nd Qtr 15	3rd Qtr 15
<b>Inpatient - Heart Attack (AMI) Care</b> <i>Goal: &gt;90%</i>				
Aspirin at Arrival	NC	NC	NC	NC
ACE Inhibitor for Left Ventricular Systolic Dysfunction	NC	NC	NC	NC
Beta Blocker Prescribed at Discharge	NC	NC	NC	NC
Fibrinolytic Therapy received within 30 minutes of Arrival	NC	NC	NC	NC
<b>Inpatient - Global Immunization</b> <i>Goal: &gt;90%</i>				
Influenza Immunization	99	98	NC	NC
<b>Inpatient - ED Admit</b> <i>Goal: &lt; state average</i>				
Median Time from ED Arrival to ED Departure for Admitted ED Pts	145 min	134 min	136 min	147 min
Admit Decision to ED Departure Time for Admitted Patients	30 min	31 min	22 min	24 min
<b>VTE</b> <i>Goal: &gt;90%</i>				
VTE Prophylaxis	96	99	98	96
VTE patients with Anticoagulation Overlap Therapy	NC	NC	NC	0
VTE patients receiving Unfractionated Heparin monitoring	NC	NC	NC	retired
VTE Discharge Instructions	NC	NC	NC	100
Incidence of Potentially-Preventable VTE	NC	0	NC	0
<b>Inpatient - Stroke</b> <i>Goal: &gt;90%</i>				
DVT Prophylaxis	100	100	100	100
Discharged on antithrombotics	100	NC	NC	NC
Anticoag Therapy for Afib/Aflutter	100	NC	NC	NC
Thrombotic therapy Administered	NC	NC	NC	NC
Antithrombotic Therapy by End of Hospital Day 2	100	NC	NC	NC
Discharge on Cholesterol Reducing Medication	100	NC	NC	100
Stroke Education	100	NC	NC	100
Assessed for Rehabilitation	100	NC	NC	NC
<b>Inpatient - Perinatal Care Moms</b> <i>Goal: 0%</i>				
Elective Delivery <39 weeks	0	0	0	0
<b>Inpatient - Sepsis</b> <i>Goal &gt;75%</i>				
Severe Sepsis and Septic Shock: Management Bundle	New	New	New	50

NATIONAL QUALITY INDICATORS CONTINUED		4th Qtr 14	1st Qtr 15	2nd Qtr 15	3rd Qtr 15
<b>Outpatient - Heart Attack Care/Chest Pain</b>		Goal: >90%			
Median Time to Fibrinolysis		23 min	27 min	30 min	NC
Fibrinolytic Therapy Received within 30 Minutes		100	100	100	NC
Aspirin at Arrival		100	100	100	75
Median Time to ECG		8 min	7 min	7 min	4 min
<b>Outpatient - ED Throughput</b>		Goal: < state average			
Median Time from ED Arrival to ED Departure for Discharged Pts		106 min	106 min	104 min	104 min
Door to Diagnostic Evaluation by Qualified Professional	Goal =<30min	28 min	29 min	26 min	30 min
<b>Outpatient - Pain Management</b>		Goal: < 60 minutes			
Median Time to Pain Management for Long Bone Fracture		56 min	55 min	54 min	37 min
<b>Outpatient - Stroke</b>		Goal: >90%			
Head CT or MRI Scan Results for Acute Stroke with 45 minutes		NC	NC	NC	NC
<b>Outpatient Web Measure - Colonoscopy Normal</b>		Goal: >75%			
Documentation of recommended follow-up interval of at least 10 yrs		0%	0%	0%	0%
<b>Outpatient - Web Measure Colonoscopy History</b>		Goal: >75%			
Documentation of interval of 3 or more years since last colonoscopy		100%	100%	100%	100%

HCAHPS - CUSTOMER EXPERIENCE SURVEY		4th Qtr 14	1st Qtr 15	2nd Qtr 15	3rd Qtr 15
Nurse Communication		87	91	87	88
Doctor Communication		89	94	89	97
Responsiveness of Hospital Staff		90	82	91	97
Cleanliness of Hospital Environment		92	83	94	91
Quietness of Hospital Environment		68	87	78	83
Pain Management		74	83	80	93
Communication about Medicines		77	83	89	75
Discharge Information		96	94	92	93
Overall Rating of Hospital		80	86	77	83
Likelihood to Recommend CRMC		92	84	87	91
Transition of Care (Patient Advocacy)		60	71	66	70
Check Patient ID Band Prior to Giving Medications or Treatment		84	87	100	96
Washing Hands/Using Alcohol Hand Rub Before Caring for Patient		96	89	96	91

Medicare Payment Reduction Programs		
Value Based Purchasing (Core Measures, Pt Safety & Pt Satisfaction)	No	+2.95% VBP minus 1.75% all facilities reduction = +1.2%
Readmissions	No	0%
Hospital Acquired Conditions (HAC)	No	0%

Total = +1.2%