

QUALITY AND SAFETY MEASURES UPDATE
March 2016

CORE MEASURES 2015

See attached Results

Joint Commission and CMS Core Measure Dashboard updated with most recent data available: Q4 2014 – Q3 2015.

Highlights of results and improvement work:

- **Stroke:** All measures at 100%
- **Perinatal measures:** Continued performance on all measures better than UHC median
- **VTE measures:**
 - **ICU Prophylaxis** –VTE prophylaxis decreased to 82% (N=22). The small sample size continues to be a challenge in reliably assessing overall compliance. The ICU Performance Improvement team conducts real time audits with feedback, and added application of Sequential Compression Devices (SCDs) to the ICU report card. Improvement work continues to focus on easier access to SCDs, which are now stored on the units.
 - **Warfarin Therapy Discharge Instructions:** Warfarin therapy discharge instructions decreased to 78% (n=18). Improvement work includes:
 - In-service education for staff on warfarin discharge education.
 - Inclusion of warfarin discharge education as a performance improvement watch metric.
 - Exploring opportunities for alignment with the work in progress on inpatient flow (specifically discharge flow).
 - Clinical Nurse Leader student planned project related to warfarin discharge education this semester.
- **ED Time to Pain Management for Long Bone Fracture:** Median time increased to 72 minutes. 3 cases noted with long wait times. ED staff are currently analyzing these outlier cases.
- **Emergency Dept Throughput** – Median times continue to be longer than UHC Median.
 - Median time from arrival to departure admitted patients decreased to 422 (from 529 - Q4 2014).
 - Median time from Admit decision time to ED departure time for admitted patients decreased to 190 (from 220 - Q4 2014).
 - An Emergency Dept Kaizen was held the week of February 8, focused on decreasing the lead time for Emergency Severity Index (ESI) 3 patients:
 - From greet time to provider time: Baseline 35 min; Target 10 min; Kaizen outcome 34 min.;
 - From greet time to discharge disposition: Baseline 300 min; Target 180 min; Kaizen outcome 131 min.
- **Psychiatry measures:**
 - **Newly updated CMS National Rates used for benchmarking** – CY2014 discharges
 - **ZSFG Performance rate is better than national rate on all metrics except Hours of Seclusion Use and Admission Screening.**
 - **Tobacco Use Treatment/Counseling during stay:** Revisions to Salar Team Notes templates in process of vetting by content experts with changes to be implemented week of February 15th. This will assist with improving compliance.

2015 SFGH JOINT COMMISSION/CMS CORE MEASURE RESULTS

Measure	Measure Name	Q4 2014	Q1 2015	Q2 2015	Q3 2015	UHC Median (Q2 2015)
STROKE						
STK-1	Venous Thromboembolism (VTE) Prophylaxis	100%	100%	100%	100%	100%
STK-2	Discharged on Antithrombotic Therapy	100%	100%	100%	100%	100%
STK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	100%	100%	100%	100%	100%
STK-4	Thrombolytic Therapy	100%	100%	100%	100%	100%
STK-5	Antithrombotic Therapy by End of Hospital Day 2	100%	100%	100%	100%	100%
STK-6	Discharged on Statin Medication	100%	100%	100%	100%	100%
STK-8	Stroke Education	94%	100%	100%	100%	100%
STK-10	Assessed for Rehabilitation	100%	100%	100%	100%	100%
PERINATAL CARE						
PC-01	Elective Delivery Prior to 39 Completed Weeks Gestation (lower = better)	0%	0%	0%	0%	0%
PC-02	Cesarean Section Rate (lower = better)	32%	8%	17%	18%	23%
PC-03	Antenatal Steroids Given as Appropriate	no cases		100%	no cases	100%
PC-04	Health Care-Associated Bloodstream Infections in Newborns (lower = better)	0%	0%	0%	0%	0%
PC-05	Exclusive Breast Milk Feeding During Hospital Stay	73%	70%	79%	73%	54%
VENOUS THROMBOEMBOLISM (VTE)						
VTE-1	Venous Thromboembolism Prophylaxis	85%	89%	91%	91%	96%
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	85%	75%	96%	82%	100%
VTE-3	Venous Thromboembolism Patients with Anticoagulation Overlap Therapy	100%	100%	97%	95%	100%
VTE-5	Venous Thromboembolism Warfarin Therapy Discharge Instructions	94%	89%	81%	78%	100%
VTE-6	Hospital Acquired Potentially-Preventable Venous Thromboembolism	7%	0%	0%	0%	0%
IMMUNIZATION						
IMM-2	Influenza Immunization	65%	71%	Not Flu Season	Not Flu Season	Not Flu Season
PAIN MANAGEMENT (Minutes)						
OP-21	Median Time to Pain Management for Long Bone Fracture in the ED	34	50	40	72	54
EMERGENCY THROUGHPUT (Minutes)						
ED-1	Median Time from ED Arrival to ED Departure for Admitted ED Patients	529	506	469	422	348
ED-2	Median Time -Admit Decision Time to ED Departure Time for Admitted Patients	220	215	222	190	140
OP-18	Median Time from ED Arrival to ED Departure for Discharged ED Patients	263	257	229	238	185
OP-20	Median Time - ED Door to Diagnostic Evaluation by a Qualified Medical Personnel	99	62	46	28	33
HOSPITAL BASED INPATIENT PSYCHIATRY						CMS Natl Rate
HBIPS-1	Admission Screening Completed		92%	88%	97%	100%*
HBIPS-2	Hours of Physical Restraint Use (per 1000 patient hours)	0.69	0.81	1.09	0.41	0.41
HBIPS-3	Hours of Seclusion Use (per 1000 patient hours)	4	6	4	3	0.21
HBIPS-4	Patients discharged on multiple antipsychotic medications (lower=better)	9%	15%	6%	9%	9.4%
HBIPS-5	Patients discharged on multiple antipsychotic medications with appropriate justification	40%	42%	40%	50%	36.6%
HBIPS-6	Post discharge continuing care plan created	90%	100%	100%	100%	84.7%
HBIPS-7	Post discharge continuing care plan transmitted to next level of care provider upon discharge	74%	84%	52%	90%	77.5%
SUB-1	Alcohol Use Screening	84%	91%	97%	94%	71%
TOB-1	Tobacco Use Screening		95%	97%	99%	⊙
TOB-2	Tobacco Use Treatment/ Practical Counseling Provided or Offered		0%	0%	0%	⊙
IMM-2	Influenza Immunization (Screened/Administered if Appropriate)		13%	Not Flu Season	Not Flu Season	Not Flu Season

* UHC Median - CMS National Rate not available

⊙ National Rate Pending