

Top Quartile Indicator Summary
Siena

Top quartile CMS reports top quartile.

Indicator	Regulatory Requirement	Met TQ (Y/N)	TQ Goal	Actual (April 2010)	Top 10%	National Average
CHF Readmits <30 days	CHW	Y	15.04%	15.00		
NPOA PU All Stages/1000 inpatients	CMS (financial implications)	N	0.76	2.876		
Air Embolism	CMS (financial implications)	Y	0	0		
Foreign Body/Object Accidentally Left During Procedure	CMS (financial implications)	Y	0	0		
Hospital Acquired Injuries/1000 inpatients	CMS (financial implications)	Y	0.28	0.248		
Poor Glycemic Control/ 1000 inpatients	CMS (financial implications)	Y	0	0		
Acute Care Age >64 % Readmit within 7 days	CHW	N	4.09%	4.35%		
Acute Care Age >64 % Readmit < 30 days	CHW	N	10.27%	11.00%		
Core AMI Aspirin at Arrival	CMS, JC public reported	Y	95%	100%	100%	95%
Core AMI Aspirin at Discharge	CMS, JC public reported	Y	95%	100%	100%	94%
Core AMI ACEI or ARB for LVSD (medications prescribed for left heart dysfunction)	CMS, JC public reported	Y	95%	100%	100%	92%
Core AMI Beta Blocker (heart medication) at discharge	CMS, JC public reported	Y	95%	99%	100%	94%
Core AMI PCI within 90 minutes of arrival	CMS, JC public reported	Y	88%	100%	100%	79%
CHF Discharge Instructions	CMS, JC public reported	Y	91%	92%	100%	90%
CHF Evaluation of left ventricle (heart) function	CMS, JC public reported	Y	95%	100%	100%	90%
CHF – ACEI or ARB for LVSD (medications prescribed for left heart dysfunction)	CMS, JC public reported	Y	95%	100%	100%	87%
Surgical Outpatient – Antibiotic Timing	To be publicly reported in 2010.	N	95%	93%	100%	93%
Surgical Outpatient – Antibiotic Selection	To be publicly reported in 2010.	N	95%	92%	100%	87%
Pneumonia – pneumococcal vaccination	CMS, JC public reported	Y	94%	100%	100%	92%
Pneumonia – Blood culture in ED prior to initial antibiotic	CMS, JC public reported	Y	95%	99%	100%	94%
Pneumonia – Antibiotic Within 6 hours of arrival	CMS, JC public reported	Y	95%	100%	99%	89%
Pneumonia – Antibiotic Selection for ICU/Non-ICU Patients	CMS, JC public reported	Y	94%	96%	100%	85%
Pneumonia – Influenza Vaccination (seasonal indicator October through April)	CMS, JC public reported	Y	92%	99%	100%	92%
SCIP (Surgical Care Improvement Program) Antibiotic within 1 Hour of Incision	CMS, JC public reported	Y	95%	99%	100%	95%
SCIP Antibiotic Selection Overall	CMS, JC public reported	Y	95%	99%	99%	90%
SCIP Antibiotic Discontinued Within 24 Hours Overall	CMS, JC public reported	Y	94%	97%	100%	88%
SCIP VTE Prophylaxis Ordered	CMS, JC public reported	Y	95%	97%	100%	87%
SCIP VTE Prophylaxis Timing	CMS, JC public reported	Y	93%	94%		
Discharge to Hospice	CHW	Y	2.07%	2.33%		
ED LOS Discharged Patients	CHW	N	120 min.	168 min.		
ED LOS Admitted Patients	CHW	N	210 min.	510 min.		
ED Left Without Being Seen	CHW	Y	2.00%	1.08%		
ED Recommend	CHW – Avatar Patient Satisfaction	Y	85.14	86.93		
CABG Observed to Expected Mortality	Society of Thoracic Surgery (STS); Being considered for public reporting.	N	0.85	2.02		
Inlier Opportunity Index (LOS Medicare Indicator)	CHW	N	-0.100	0.274		
NPSG #1 Patient Identification	JC Standard	Y	98%	100%		
NPSG #13 Patient/Family Communication	JC Standard	Y	90%	93%		
NPSG #15 Safety Risks	JC Standard	Y	90%	96%		
NPSG #16 Response to Pt. Changes (MERT)	JC Standard	Y	95%	100%		
NPSG #2 Communication (SBAR)	JC Standard	Y	93%	98%		
NPSG #3 Medication Safety	JC Standard	Y	97%	97%		
NPSG #7 Infection Control	JC Standard	N	94%	89%		
NPSG #8 Medication Reconciliation	JC Standard	N	90%	86%		
NPSG #9 Falls	JC Standard	Y	95%	100%		
NPSG UP Universal Protocol (Time Out)	JC Standard	Y	97%	97%		68.00
Patient Satisfaction – Willing to Recommend	HCAHPS CMS	Y	75.00	83.26		70.00
Patient Experience – Cleanliness	HCAHPS CMS	N	75.00	73.26		63.00
Patient Experience – Help when Needed	HCAHPS CMS	N	68.00	59.51		69.00
Patient Experience – Pain Management	HCAHPS CMS	Y	72.00	73.24		66.00
Overall Hospital Rating	HCAHPS CMS	Y	70.00	74.93		
Risk Adjusted Mortality PCI (Cardiology)	American College Cardiology Database (ACC)	N	0.96%	1.53 %		
Safety Attitude Climate Survey	CHW	Y	60%	81%		
Smoking Cessation	CMS, JC	Y	95%	100%		
Total Indicators at TQ				39 = 73.6%		

*Top Quartile Indicator Summary
Rose*

Indicator	Regulatory Requirement	Met TQ (Y/N)	TQ Goal	Actual (April 2010)	Top 10%	National Average
CHF Readmits <30 days	CHW	N	15.04%	23.00%		
NPOA PU All Stages/1000 inpatients	CMS (financial implications)	N	0.76	3.569		
Air Embolism	CMS (financial implications)	Y	0	0		
Foreign Body/Object Accidentally Left During Procedure	CMS (financial implications)	Y	0	0		
Hospital Acquired Injuries/1000 inpatients	CMS (financial implications)	N	0.28	0.335		
Poor Glycemic Control/ 1000 inpatients	CMS (financial implications)	Y	0	0		
Acute Care Age >64 % Readmit within 7 days	CHW	N	4.09%	4.47%		
Acute Care Age >64 % Readmit < 30 days	CHW	N	10.27%	12.00%		
Core AMI Aspirin at Arrival	CMS, JC public reported	Y	95%	100%	100%	95%
Core AMI Aspirin at Discharge	CMS, JC public reported	Y	95%	100%	100%	94%
Core AMI ACEI or ARB for LVSD (medications prescribed for left heart dysfunction)	CMS, JC public reported	Y	95%	100%	100%	92%
Core AMI Beta Blocker (heart medication) at discharge	CMS, JC public reported	Y	95%	100%	100%	94%
CHF Discharge Instructions	CMS, JC public reported	Y	91%	91%	100%	79%
CHF Evaluation of left ventricle (heart) function	CMS, JC public reported	Y	95%	100%	100%	90%
CHF – ACEI or ARB for LVSD (medications prescribed for left heart dysfunction)	CMS, JC public reported	Y	95%	97%	100%	90%
Surgical Outpatient – Antibiotic Timing	To be publicly reported in 2010.	Y	95%	96%	100%	87%
Surgical Outpatient – Antibiotic Selection	To be publicly reported in 2010.	Y	95%	98%	100%	93%
Pneumonia – pneumococcal vaccination	CMS, JC public reported	Y	94%	97%	100%	87%
Pneumonia – Blood culture in ED prior to initial antibiotic	CMS, JC public reported	Y	95%	99%	100%	92%
Pneumonia – Antibiotic Within 6 hours of arrival	CMS, JC public reported	Y	95%	98%	100%	94%
Pneumonia – Antibiotic Selection for ICU/Non-ICU Patients	CMS, JC public reported	Y	94%	96%	99%	89%
Pneumonia – Influenza Vaccination (seasonal indicator October through April)	CMS, JC public reported	Y	92%	96%	100%	85%
SCIP (Surgical Care Improvement Program) Antibiotic within 1 Hour of Incision	CMS, JC public reported	Y	95%	100%	100%	92%
SCIP Antibiotic Selection Overall	CMS, JC public reported	Y	95%	99%	100%	95%
SCIP Antibiotic Discontinued Within 24 Hours Overall	CMS, JC public reported	Y	94%	98%	99%	90%
SCIP VTE Prophylaxis Ordered	CMS, JC public reported	Y	95%	100%	100%	88%
SCIP VTE Prophylaxis Timing	CMS, JC public reported	Y	93%	96%	100%	87%
Discharge to Hospice	CHW	Y	2.07%	2.79%		
ED LOS Discharged Patients	CHW	N	120 min.	157 min.		
ED LOS Admitted Patients	CHW	N	210 min.	393 min.		
ED Left Without Being Seen	CHW	Y	2.00%	1.05%		
ED Recommend	CHW – Avatar Patient Satisfaction	Y	85.14	85.16		
Home Health In/Out of Bed	CMS, JC public reported measure part of Outcomes Based Quality Improvement (OBQI)	Y	61%	61%		
Home Health Medications Taken	CMS, JC public reported measure part of Outcomes Based Quality Improvement (OBQI)	Y	49%	52%		
Inlier Opportunity Index (LOS Medicare Indicator)	CHW	N	-0.100	0.091		
NPSG #1 Patient Identification	JC Standard	Y	98%	99%		
NPSG #13 Patient/Family Communication	JC Standard	Y	90%	99%		
NPSG #15 Safety Risks	JC Standard	Y	90%	100%		
NPSG #16 Response to Pt. Changes (MERT)	JC Standard	Y	95%	100%		
NPSG #2 Communication (SBAR)	JC Standard	Y	93%	95%		
NPSG #3 Medication Safety	JC Standard	Y	97%	99%		
NPSG #7 Infection Control	JC Standard	N	94%	92%		
NPSG #8 Medication Reconciliation	JC Standard	N	90%	66%		
NPSG #9 Falls	JC Standard	Y	95%	100%		
NPSG UP Universal Protocol (Time Out)	JC Standard	Y	97%	98%		68.00
Patient Satisfaction – Willing to Recommend	HCAHPS CMS	N	75.00	69.30		70.00
Patient Experience – Cleanliness	HCAHPS CMS	N	75.00	70.92		63.00
Patient Experience – Help when Needed	HCAHPS CMS	N	68.00	55.16		69.00
Patient Experience – Hospice Care	Avatar Home Health	N	85.00	56.00		66.00
Patient Experience – Pain Management	HCAHPS CMS	N	72.00	67.21		
Overall Hospital Rating	HCAHPS CMS	N	70.00	61.65		
Risk Adjusted Mortality PCI (Cardiology)	American College Cardiology Database (ACC)	N	0.96%	4.80%		
Safety Attitude Climate Survey	CHW	Y	60%	67%		
Smoking Cessation	CMS, JC	Y	95%	100%		
Total Indicators at TQ				37 = 68.5%		

Top Quartile Indicator Summary
San Martin

Indicator	Regulatory Requirement	Met TQ (Y/N)	TQ Goal	Actual (April 2010)	Top 10%	National Average
CHF Readmits <30 days	CHW	Y	15.04%	13.00		
NPOA PU All Stages/1000 inpatients	CMS (financial implications)	N	0.76	4.784		
Air Embolism	CMS (financial implications)	Y	0	0		
Foreign Body/Object Accidentally Left During Procedure	CMS (financial implications)	Y	0	0		
Hospital Acquired Injuries/1000 inpatients	CMS (financial implications)	N	0.28	0.455		
Poor Glycemic Control/ 1000 inpatients	CMS (financial implications)	Y	0	0		
Acute Care Age >64 % Readmit within 7 days	CHW	Y	4.09%	3.37%		
Acute Care Age >64 % Readmit < 30 days	CHW	Y	10.27%	9.00%		
Core AMI Aspirin at Arrival	CMS, JC public reported	Y	95%	97%	100%	95%
Core AMI Aspirin at Discharge	CMS, JC public reported	Y	95%	99%	100%	94%
Core AMI ACEI or ARB for LVSD (medications prescribed for left heart dysfunction)	CMS, JC public reported	Y	95%	100%	100%	92%
Core AMI Beta Blocker (heart medication) at discharge	CMS, JC public reported	Y	95%	99%	100%	94%
CHF Discharge Instructions	CMS, JC public reported	Y	91%	92%	100%	79%
CHF Evaluation of left ventricle (heart) function	CMS, JC public reported	Y	95%	100%	100%	90%
CHF – ACEI or ARB for LVSD (medications prescribed for left heart dysfunction)	CMS, JC public reported	Y	95%	96%	100%	90%
Surgical Outpatient – Antibiotic Timing	To be publicly reported in 2010.	N	95%	94%	100%	87%
Surgical Outpatient – Antibiotic Selection	To be publicly reported in 2010.	Y	95%	95%	100%	93%
Pneumonia – pneumococcal vaccination	CMS, JC public reported	N	94%	92%	100%	87%
Pneumonia – Blood culture in ED prior to initial antibiotic	CMS, JC public reported	N	95%	93%	100%	92%
Pneumonia – Antibiotic Within 6 hours of arrival	CMS, JC public reported	Y	95%	100%	100%	94%
Pneumonia – Antibiotic Selection for ICU/Non-ICU Patients	CMS, JC public reported	N	94%	91%	99%	89%
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SCIP Antibiotic Selection Overall	CMS, JC public reported	Y	95%	99%	100%	95%
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SCIP VTE Prophylaxis Ordered	CMS, JC public reported	N	95%	93%	100%	88%
SCIP VTE Prophylaxis Timing	CMS, JC public reported	Y	93%	93%	100%	87%
Discharge to Hospice	CHW	N	2.07%	1.86%		
ED LOS Discharged Patients	CHW	N	120 min.	150 min.		
ED LOS Admitted Patients	CHW	N	210 min.	293 min.		
ED Left Without Being Seen	CHW	Y	2.00%	0.62%		
ED Recommend	CHW – Avatar Patient Satisfaction	Y	85.14	88.86		
CABG Observed to Expected Mortality	Society of Thoracic Surgery (STS); Being considered for public reporting.	N	0.85	1.28		
Inlier Opportunity Index (LOS Medicare Indicator)	CHW	N	-0.100	0.230		
NPSG #1 Patient Identification	JC Standard	Y	98%	100%		
NPSG #13 Patient/Family Communication	JC Standard	Y	90%	98%		
NPSG #15 Safety Risks	JC Standard	Y	90%	97%		
NPSG #16 Response to Pt. Changes (MERT)	JC Standard	Y	95%	100%		
NPSG #2 Communication (SBAR)	JC Standard	Y	93%	97%		
NPSG #3 Medication Safety	JC Standard	Y	97%	97%		
NPSG #7 Infection Control	JC Standard	N	94%	91%		
NPSG #8 Medication Reconciliation	JC Standard	N	90%	78%		
NPSG #9 Falls	JC Standard	Y	95%	100%		
NPSG UP Universal Protocol (Time Out)	JC Standard	Y	97%	98%		
Patient Satisfaction – Willing to Recommend	HCAHPS CMS	Y	75.00	82.64		68.00
Patient Experience – Cleanliness	HCAHPS CMS	N	75.00	72.78		70.00
Patient Experience – Help when Needed	HCAHPS CMS	N	68.00	64.46		63.00
Patient Experience – Pain Management	HCAHPS CMS	Y	72.00	72.63		69.00
Overall Hospital Rating	HCAHPS CMS	Y	70.00	78.32		66.00
Risk Adjusted Mortality PCI (Cardiology)	American College Cardiology Database (ACC)	Y	0.96%	0.00 %		
Safety Attitude Climate Survey	CHW	N	60%	43%		
Smoking Cessation	CMS, JC	Y	95%	100%		
Total Indicators at TQ				35 = 67.3%		