

DIVISION OF HOSPITAL MEDICINE
 QUALITY IMPROVEMENT COMMITTEE DASHBOARD

Key: Exceeded stretch goal
 Above target and below stretch
 Below target goal

Ref	Indicator	Target	Stretch	CY 2010	Q3 2010	Q4 2010	Q1 2011	Q2 2011	YTD
FY 2011 Division Incentive Metrics (Michelle Mourad)									
1	Time to attending signature of e-discharge summary (days)	2		5.8	4.1	1.3			2.3
2	30 Day Readmission Rates for patients >65 (%)	15	12	13.1*	13.3	13.8*			13.5
3	HCAHPS: Communication with Doctors – Top Box	80	90	84	83	87			86
4	MD Hand Hygiene Compliance 14L (%)	75	82	Not Avail.	72	55			65
Publicly Reported Data (My Nguy/Katie Quinn)									
5	PNA: Pneumococcal screen/vaccination (%)	90	100	TBD	96	96			96
6	PNA: Initial Antibiotic Selection – ICU (%)	90	100	TBD	Not Avail.	Not Avail.			Not Avail.
7	PNA: Initial Antibiotic Selection – Non ICU (%)	90	100	TBD	100	100			100
8	PNA: Blood Cultures in ED (%)	90	100	TBD	100	100			100
9	PNA: Blood Cultures w/in 24 hr of transf to ICU (%)	90	100	TBD	100	100			100
10	PNA: Adult Smoking Cessation Advice	90	100	TBD	100	100			100
11	PNA: Initial Antibiotic in 6 hours	90	100	TBD	90	96			94
12	Pneumonia Mortality Rate (%)	TBD	TBD	TBD	TBD	TBD			TBD
13	30 Day Readmission Rates: Pneumonia (%)	15	10	13.4	9.68	15.0			11.76
14	30 Day Readmission Rates: Pneumonia >65 (%)	15	10	9.6	5.9	9.1			7.1
Hospital Acquired Conditions (My Nguy/Katie Quinn)									
15	HAC: C-diff rates (%)	0.5	0.25	13 (0.32%)	4 (.34%)	4 (.31%)			8 (.33%)
16	HAC: Respiratory Failure (%)	2	1	42 (1.03%)	11 (.9%)	6 (.47%)			17 (.69%)
17	HAC: Sepsis rates (%)	1.3	0.75	26 (.64%)	9 (.77%)	11 (.86%)			20 (.81%)
18	HAC: VTE rates (%)	1	0.5	17 (0.42%)	6 (.51%)	7 (.55%)			13 (.53%)
19	HAC: Catheter Associated UTI (%)	0.1	0.05	4 (0.1%)	0	1 (.08%)			1 (.04%)
20	Ventilator Associated Pneumonia (VAP)	TBD	TBD	8	1	4			5
21	Catheter Related Blood Stream Infection (CRBSI)	TBD	TBD	6	1	2			3
Performance Improvement (Brad Sharpe/Brad Monash)									
22	ED to Floor Time (min)	120	90	TBD	134	TBD			134
23	MD Hand Hygiene Compliance (14M) (%)	75	82	Not Avail.	52	60			62
Patient Satisfaction (Diane Sliwka)									
24	Press Ganey Overall MD Score – Med (mean)	88	90	87.7 (84%)	87.2 (82%)	91.0 (99%)			88.8 (94%)
25	Press Ganey Overall Physician Score – Medicine - % in Top Box (5s)	65%	70%	64.1	62.3	68.4			64.3
26	HCAHPS: Pain Management – Top Box	85%	90%	82	100	86			88
Discharge Improvement (Michelle Mourad)									
27	Patients with Follow Up Appointments (%)	80	90	79	83	75			78.6

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28	DGIM Patients with F/U within 2 weeks (%)	80	90	Not Avail.	Not Avail.	Not Avail.			
29	Patients reached by follow up phone calls (%)	70	80	65	60	70			65.5
30	D/C Summary on the Day of Discharge (%)	75	90	55	56	87			75.53
31	Compliance on HIMS DSUM items (%)	90	100	79	77	82			
32	PCP communication note completion rate (%)	75	80	78	74	TBD			74
33	Pt Sat: Extent felt ready for disch (mean score)	80	90	81.6	80	84.1			81.2
34	HCAHPS: Discharge Information – Top Box (%)	80	85	83	83	79			81
35	Pt Sat: Helpfulness of call after discharge (mean)	80	90	Not Avail.	Not Avail.	Not Avail.			

Ref #	Indicator Title/Description Type	Source	Numerator	Denominator
	Metric name & description	Where metric is stored	Description of case count that qualify for metric (N) rate – list inclusion/exclusion criteria or reference where to find details	Description of data pool count for metric (D) rate – inclusion/exclusion criteria or reference where to find data
1	Time to attending signature of e-discharge summary (hrs)	Weekly discharge summary automated reports	For patients discharged from Medicine Service who require a discharge summary: time from patient discharge to attending signature of discharge summary	
2	30 Day Overall Readmission Rates for Patients >65	Readmission report from Medical Center QI	30 day all-cause readmission (Readmission for any cause within 30 days from the date of discharge of the index admission) for patients >65	All discharged medicine patients over 65; Excludes: patients with in hospital death; transfers to another facility; patients discharged against medical advice)
3	HCAHPS: Communication with Doctors	Press Ganey Reporting System	Report obtained with the following: filtered by “Medical Specialty” and Discharge Date; Grouped by Discharge Date	Score is located in the COMM W/ DOCTORS section; Communication with Doctors Overall
4	MD Hand Hygiene Compliance 14L (%)	UCSF MC Audit	Physicians demonstrating hand hygiene compliance on 14L Adult Medicine Unit	Physicians audited for hand hygiene compliance on 14L Adult Medicine Unit
5	Pneumococcal Vaccination (%)	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received the pneumococcal vaccine	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia
6	Initial ABX Selection – ICU (%)	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received the appropriate antibiotic	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia
7	Initial ABX Selection – Non-ICU (%)	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received the appropriate antibiotic	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia
8	Blood Cultures in the ED (%)	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia

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8	Blood Cultures in the ED (%)	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received blood cultures in the ED	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia
9	Blood Cultures within 24 hours of transfer to ICU (%)	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received blood cultures in the ICU within 24 hours of transfer	Number of audited patients discharged from Medicine Service who were transferred to the ICU and had a diagnosis of pneumonia
10	Adult Smoking Cessation Advice (%)	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received adult smoking cessation advice	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia
11	Initial ABX in 6 hours	UHC Database	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia who received initial ABX in 6 hours	Number of audited patients discharged from Medicine Service with a diagnosis of pneumonia
12	Pneumonia Mortality (%)	UHC Database	# of medicine patients with primary diagnosis of pneumonia who died	All medicine patients with primary diagnosis of pneumonia
13	30 Day Readmission: Pneumonia (%)	UHC Database	30 day all-cause readmission (Readmission for any cause within 30 days from the date of discharge of the index pneumonia admission) – all ages	All discharged patients with a principal diagnosis of pneumonia (480.0, 480.1, 480.2, 480.3, 480.8, 480.9, 481, 482.0, 482.1, 482.2, 482.30, 482.31, 482.32, 482.39, 482.40, 482.41, 482.49, 482.81, 482.82, 482.83, 482.84, 482.89, 482.9, 483.0, 483.1, 483.8, 485, 486, 487.0); Excludes: patients with in hospital death; transfers to another facility; patients discharged against medical advice)
14	HAC: C-Diff (%)	UHC Database	# of medicine patients with C-Diff code 008.45 (any diagnosis not present on admission; Primary discharge provider specialty = general internal medicine)	All medicine patients
15	HAC: Respiratory Failure (%)	UHC Database	# of medicine patients with Resp. Failure codes 518.81, 518.82, 518.84 (any diagnosis not present on admission; Primary provider specialty = general internal medicine)	All medicine patients
16	HAC: Sepsis (%)	UHC Database	# of medicine patients with Sepsis codes 78552, 995.90-.94, 38.0, 38.1-.12, 38.19, 38.2, 38.3, 38.4-.44, 38.49, 38.8, 38.9 (any diagnosis not present on admission; Primary provider specialty = general internal medicine)	All medicine patients
17	HAC: VTE (%)	UHC Database	# of medicine patients with VTE Codes: 451.1-.9; 453.1-.9 (any diagnosis not present on admission; primary provider specialty = general internal medicine)	All medicine patients
18	HAC: Catheter Associated UTI (%)	UHC Database	# of medicine patients with UTI code 996.64 (any diagnosis not present on admission; Primary discharge provider specialty = general internal medicine)	All medicine patients
19	Ventilator Associated Pneumonia (VAP)	Infection Control Database	Number of general medicine patients with Ventilator Associated Pneumonia	Number of general medicine patients

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21	ED to Floor Time (min)	UCSF MC Audit	Time from Decision to Admit by ED attending/staff until Medicine Housestaff submit orders.	
22	Hand Hygiene Compliance 14M (%)	UCSF MC Audit	Physicians demonstrating hand hygiene compliance on 14M Adult Medicine Unit	Physicians audited for hand hygiene compliance on 14M Adult Medicine Unit
23	Press Ganey Overall Physician Score – Medicine (mean score)	Press Ganey Reporting System	Report obtained with the following: filtered by “Medical Specialty” and Discharge Date; Grouped by Discharge Date	Score is located in the Std Overall Assessment, Physician section: Physician Overall
24	Press Ganey Overall Physician Score – Medicine - % in Top Box (5s)	Press Ganey Reporting System	Report obtained with the following: filtered by “Medical Specialty” and Discharge Date; Grouped by Discharge Date	Score is located in the Std Overall Assessment, Physician section: Physician Overall
25	HCAHPS: Pain Management	Press Ganey Reporting System	Report obtained with the following: filtered by “Medical Specialty” and Discharge Date; Grouped by Discharge Date	Score is located in the PAIN MANAGEMENT section; Pain Management Overall
26	% of Patients with Follow Up Appointments	Follow Up Calls Data	Number of patients contacted by follow up phone calls who had a follow up appointment at the time of call	Number of medicine patients contacted by follow up phone calls
27	% of DGIM Patients with F/U within 2 weeks	List of Follow up Appointments	Number of DGIM patients whose follow up appointment was within two weeks of discharge	Number of DGIM patients with follow up appointments
28	% of patients reached by follow up phone calls	Follow Up Calls Data	Number of patients contacted by follow up phone calls	Calls attempted (medicine patients)
29	D/C Summary on the Day of Discharge (P)	DSUM reports	Discharge Summaries from the Medicine Service completed on the day of discharge	All discharge summaries completed for Medicine Patients
30	Compliance on HIMS DSUM items (%)	Quarterly HIMS audits	# of discharge summaries with 90% compliance on HIMS audited fields	Total discharge summaries audited by HIMS for completeness
31	PCP Communication note completion rate (%)	PCP notes report	Patients admitted to the Medicine service for whom a PCP communication note was completed	Patients admitted to the Medicine Service
32	Pt Satisfaction: <i>Extent felt ready for discharge</i>	Press Ganey	Report obtained with the following: filtered by “Specialty: Medical” and “Unit: 14L, 14M, 5Mtz” and Discharge Date; Grouped by Discharge Date	Score is located in the Std Discharge section
33	HCAHPS: Discharge Information – Top Box (%)	Press Ganey	Report obtained with the following: filtered by “Medical Specialty” and Discharge Date; Grouped by Discharge Date	Score is located in the DISCHARGE INFORMATION section; Discharge Information Overall
34	Pt Satisfaction: <i>Helpfulness of call after discharge</i>	Press Ganey	TBD	TBD