

Jersey City Medical Center Patient Safety Clinical Quality Council Scorecard 2012

Patient Safety	Strategy: Ongoing evaluation of our patient population and areas of risk to identify innovative approaches for achieving and maintaining top-decile performance in safety	Baseline	Target	Chair	Responsible Party	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12
	Patient safety - Strategic Plan Measures																
	Decrease rate of patients being admitted to Critical Care within 24 hours of admission. (failure to rescue)	14%	10%	Hall	Garzon-Rivera	14%	9%	18%									
	Reduce catheter-associated infections (central venous catheters, PICCs, arterial lines, urinary catheters) CLABSI (Hospitalwide)	0.25	0	Hall	DeChirico	0.94	0	0									
	Reduce catheter-associated infections (central venous catheters, PICCs, arterial lines, urinary catheters) CAUTI (Hospitalwide)	0.95	0.75	Hall	DeChirico	0	0	0									
	Reduce incidence of postoperative physiologic and metabolic derangement	1.00	0.72	Hall	Curci	0	22.2	0									
	Reduce the incidence of postoperative abdominal wound dehiscence in abdominopelvic surgical patients	3.13	0.18	Petrocelli	Simeone	0	0	0									
	Increase percent of Summit Avenue diabetic patients who have annual eye and dental exam (Delete)			Hall	Kharode												
2011 - Strategic/ Regulatory						Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12
	1. Rate of healthcare-associated infections with clostridium	0.30	0.25	Hall	Dr. Grigoriu	0.26	0.57	0.28									
	2a. Falls Rate (Falls/1000patient days): Med-Surg/CC	4.15	2.4 or <	Hall	P. Petrucelli	5.26	4.02	2.08									
	2b. Falls Rate (Falls/1000patient days): Behavioral Health	4.49	4.05	Hall	P. Petrucelli	3.3	5.88	4.18									
	3. The percent of patient encounters in which care-givers perform with all three key hand hygiene procedures correctly.	86%	88%	Hall	V. DeChirico	85%	88%	87%									
	4. MRSA Infection Rate (hospital acquired)	0.10	0.05	Hall	V. DeChirico	0.00	0.14	0.14									
	5. Elective induction bundle compliance:	100%	100%	Hall	L. Reyes/ Dr. Bimonte	100%	100%	100%									
	6. Elective Induction	16%	15%<	Hall	R. Dalalian/ Dr. Bimonte	10.3%	14%	14%									
	7. Rate of Adverse Drug Events using IHI trigger tool. (HR e-i)	0	0	Hall	M. Curci	0	0	0									
	8. PCI in 90 minute compliance.	100%	100%	Hall	L. Semenov	100%	100%	100%									
	9. Total number of codes outside critical care/ED.	3.75	0	Hall	C. Garzon-Rivera	3	4	8									
	10. RRT calls per 1000 discharges	18	25	Hall	C. Garzon-Rivera	38.6	23.4	44									
QUALITY - Strategic Plan Measures																	
	Decrease severe sepsis & septic shock mortality rate	36%	30%	Flores	LaForgia	27%	36%	21%									
	Decrease cardiac cath w/o AMI ALOS DRG 287	3.13	1.70	Abed	Lester	2.55	3.79	3.35									
	Decrease Primary C-section rate	32%	27.5%<	Bimonte	Reyes	18%	30%	16.4									
	Decrease CHF 30-day readmission rate	22%	17%	Abed	Baillie	22%	30%										
	Decrease AMI 30-day readmission rate	16%	13%	Abed	Baillie	16%	13%										
	Decrease Pneumonia 30-day readmission rate	7%	6%	Abed	Baillie	12%	4%										
	Decrease Behavioral health 30-day readmission rate	7.9%	7% or <	Chandak	Sacco	8.5%	5.7%	2.4									
	Increase HCAHPS pain management score	65.0%	78.0%	Ratner	Kozzi	62%	70%	64%									
	Decrease inappropriate use of PICC lines, MRIs and CTs	0.0%	20.0%	Garay	Kharode												
2011 Strategic / Regulatory						Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12
	1. Pressure Ulcer: Pressure ulcer incidence (Med-Surg).	0	2.8		P. Petrucelli	After 1st Quarter											
	2. Pressure Ulcer: Pressure ulcer incidence (ICU/CCU)	0	7.0		P. Petrucelli	After 1st Quarter											
	3. AMI appropriate care score.	100%	100%		Dr. Abed	100%	100%	100%									
	4. CHF appropriate care Score.	100%	100%		Dr. Abed	100%	100%	100%									
	5. SCIP appropriate care score.	100%	100%		Dr. Holmes	100%	100%	100%									
	6. PNEUMONIA appropriate care scorecard	100%	100%		Dr. Bessette	100%	100%	100%									
	7. STROKE Defect Free Score	100%	100%		M. Lopez	100%	100%	100%									
	8. Immunizations appropriate care score	na	100%		Nurse Mgr	70.2%	82.8%	78.7%									
	9. IED appropriate care score	na	na		Dr. Bessette												
	10. OET appropriate care score	na	100%		Dr. Bessette	37.8%	100%	99.2									
	11. OED appropriate care score	na	na		Dr. Bessette												
	12. OPM appropriate care score	na	na		Dr. Bessette												
	13. OST appropriate care score	na	na		Dr. Bessette												
	14. VAP rate	0.62	0.31		C. Garzon-Rivera	0.00	0.00	3.56									

Legend

	Meets or Exceeds Target
	Within 5% of Target Variance
	Outside Acceptable Target Variance
	No Target or Actual Results