

Jersey City Medical Center Clinical Process Council Scorecard 2011

I. Key Performance Indicators Measures		Responsible Party	Baseline	Target	Jan-11	Feb-11	Mar-11	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11
IOM Aim: Safe					Projected start date 2012											
1. Percent of patients in ICU screened for delirium.	M. Laforgia	50%	100%													
2. Survival rate following intubation for ARDS.	Dr. Rao	65%	65%	67%	54%	71%	68%	69%	59%	85%	86%	83%	65.5%	77%	82%	
3. Rate of healthcare-associated infections with clostridium	Dr. Grigoriu	0	0	0.39	0.14	0	0.57	0.28	0.15	0.28	0.42	0.29	0.26	0.41	0.41	
4. Urinary Catheter-Associated Symptomatic Urinary Tract Infection Rate	V. DeChirico	0	0	2.84	0	0	0	0.01	0	0	1.02	4.53	0	0	1.17	
5. Central-line bloodstream infections per 1000 line day	C. Garzon-Rivera	0	0	0	0	0	0	0	0	1.02	0	2.25	0	0	0	
6a. Falls Rate (Falls/1000patient days): Behavioral Health	P. Petrucelli	10.2	10 or <	5.61	9.49	9.38	4.38	4.09	4.21	2.15	1.03	1.02	5.17	2.32	4.58	
6b. Falls Rate (Falls/1000patient days): Med-Surg/ CC	P. Petrucelli	4.15	2.4 or <	5.94	4.67	2.61	3.27	2.16	6.54	6.63	4.86	5.14	4.17	3.90	2.26	
7. The percent of patient encounters in which care-givers perform with all three key hand hygiene procedures correctly.	V. DeChirico	85%	100%	82%	81%	84%	88%	77%	85%	88%	90%	87%	88%	89%	87%	
8. MRSA Infection Rate (hospital acquired)	V. DeChirico	0	0	0.13	0	0	0	0	0.3	0.14	0.14	0.29	0.13	0	0.14	
9. Number of medication errors through observation and incident reports (HR e-i).	M. Curci	0	0	0	0	0	0	0	1	0	0	0	0	0	0	
10. Percent of complete medication reconciliation forms. (NPSG)	C. Cinelli	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
11. Elective induction bundle compliance:	L. Reyes/ Dr. Bimonte	100%	100%	Process in place				Target Date July			91%	95%	100%	100%	100%	100%
12. Primary C-Section Rate	R. Dalalian/ Dr. Bimonte	31%	27.5%<	31.1%	32.0%	31.6%	26.7%	37.3%	26.6%	36.4%	36.2%	34.1%	27.1%	36.5%	32.4%	
13. Elective Induction	R. Dalalian/ Dr. Bimonte	16%	15%<	8%	15%	15%	6%	7%	7%	7%	8%	13.2%	13%	14%	11%	
14. Rate of Adverse Drug Events using IHI trigger tool. (HR e-i)	M. Curci	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15. Percent of patients with appropriate diagnostic results available at time of anesthesia assessment	K. Loo	95%	100%	99%	100.0%	100.0%	98%	100%	100%	99%	100%	100%	100%	100%	100%	
16. Percent Compliance with contact precautions.	V. DeChirico	90%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	88%	100%	
17. Adverse drug events (harm) associated with anticoagulant medications.	Dr. Ratner	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

Patient Safety

Legend

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