



# *CLINICAL AND SAFETY PERFORMANCE METRICS*

## Executive Dashboard

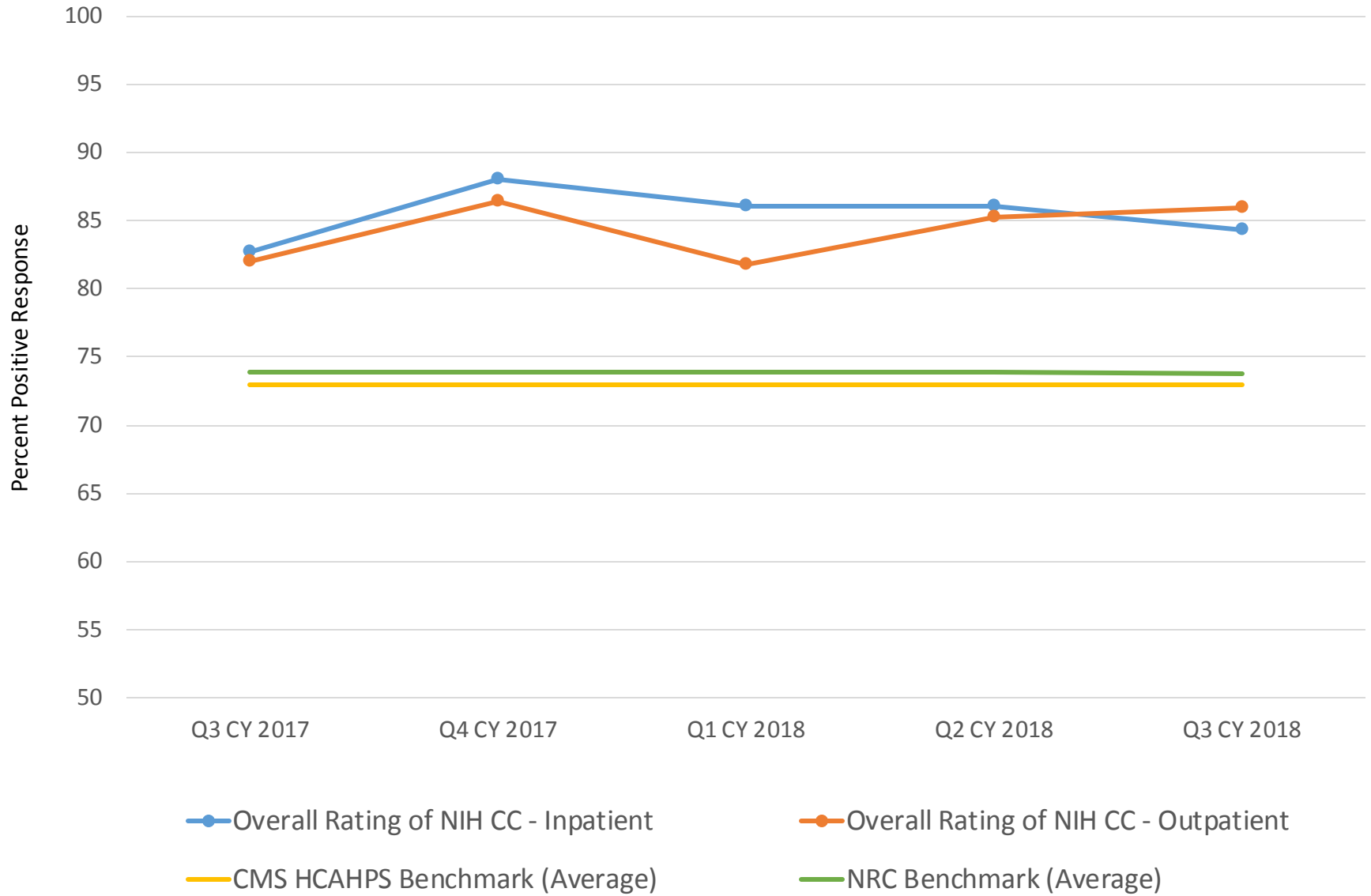
NIH Clinical Center

October 2018

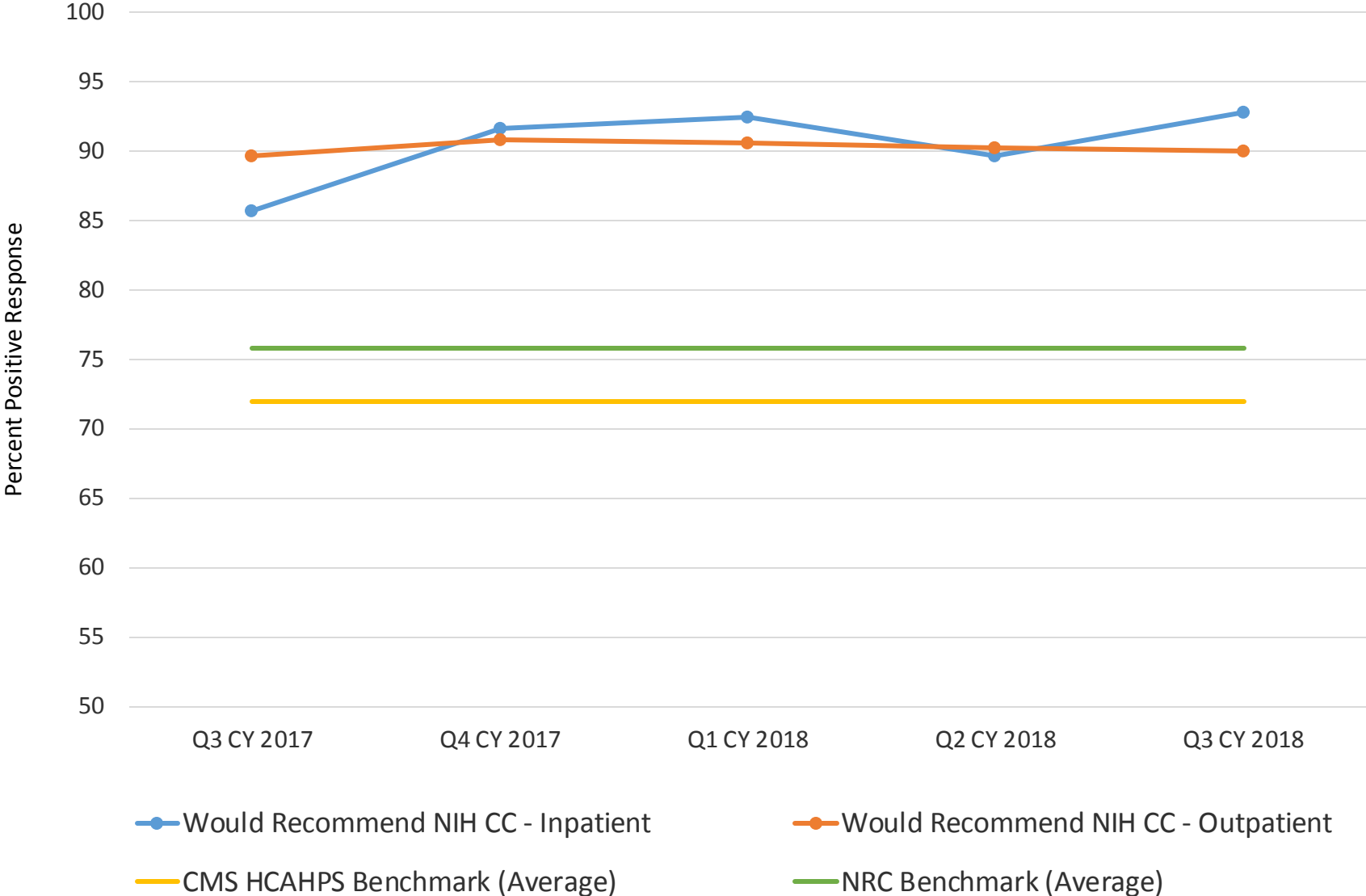
# Patients' Perceptions

- Overall Hospital Rating
- Would you Recommend the NIH CC?

# Overall Hospital Rating



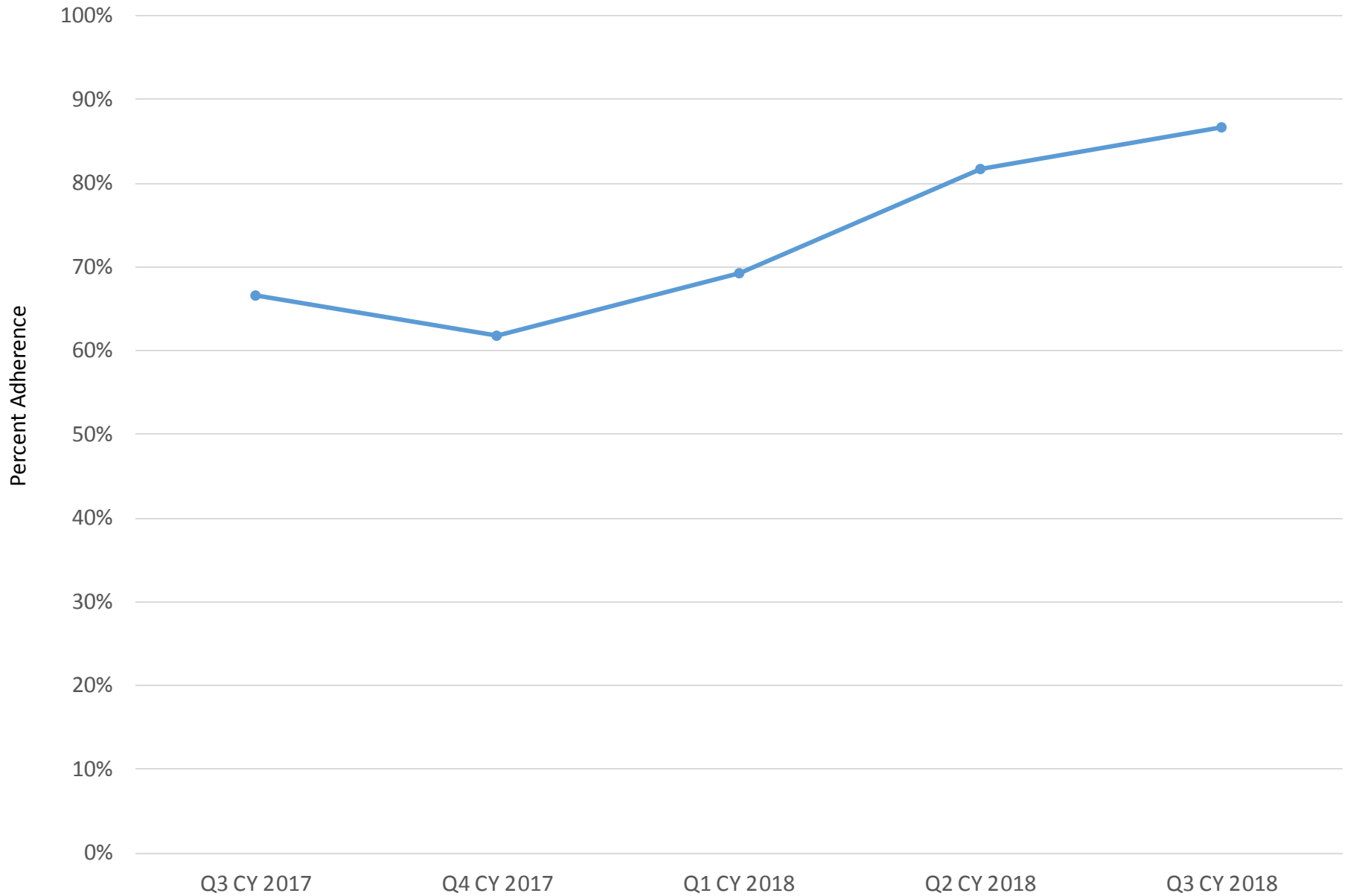
# Would You Recommend the NIH CC?



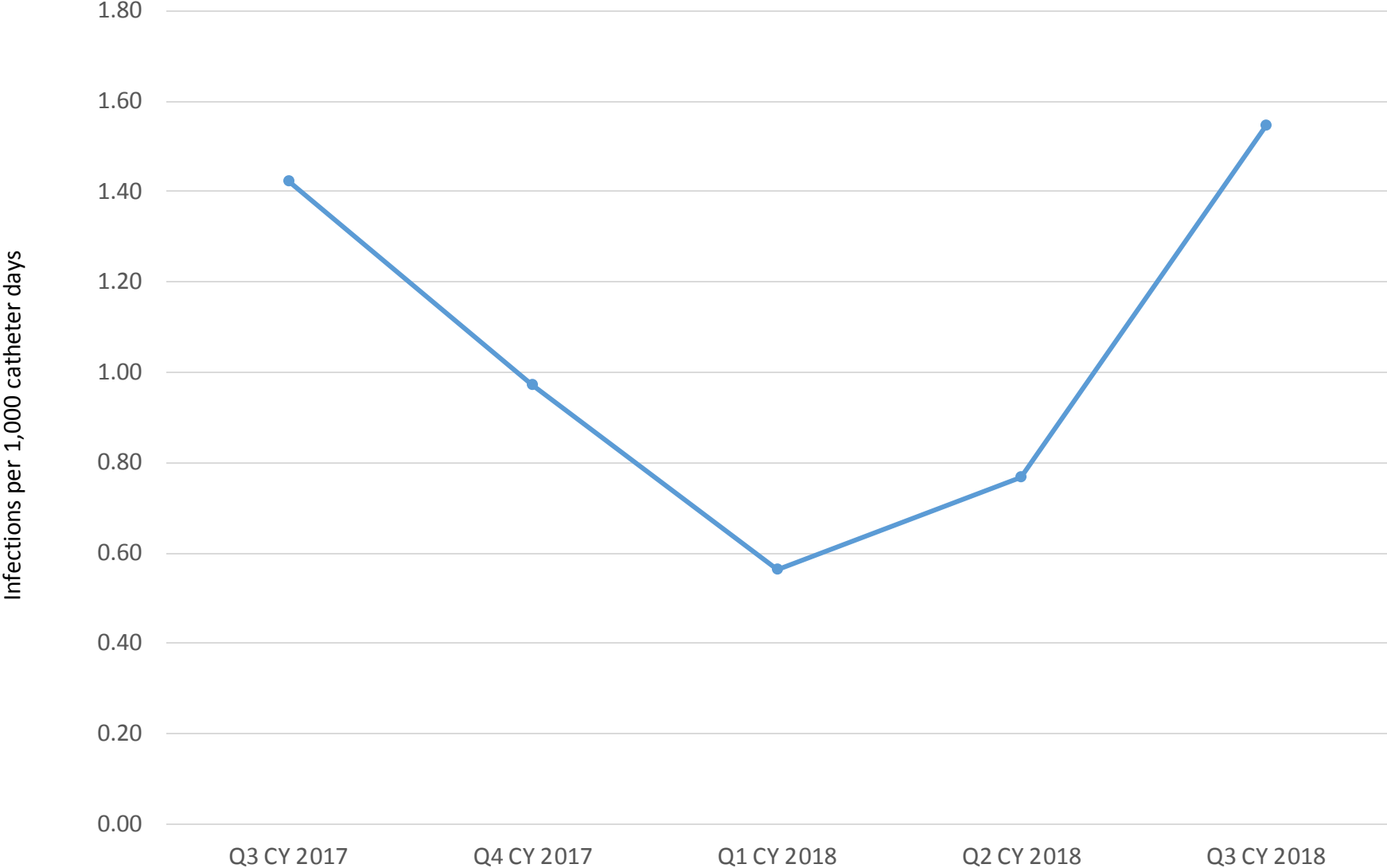
# Infection Control Metrics

- Hand Hygiene
- Central-Line Associated Bloodstream Infections
  - Whole-house
  - Intensive Care Unit
- Catheter Associated Urinary Tract Infections
  - Intensive Care Unit
  - Surgical Oncology

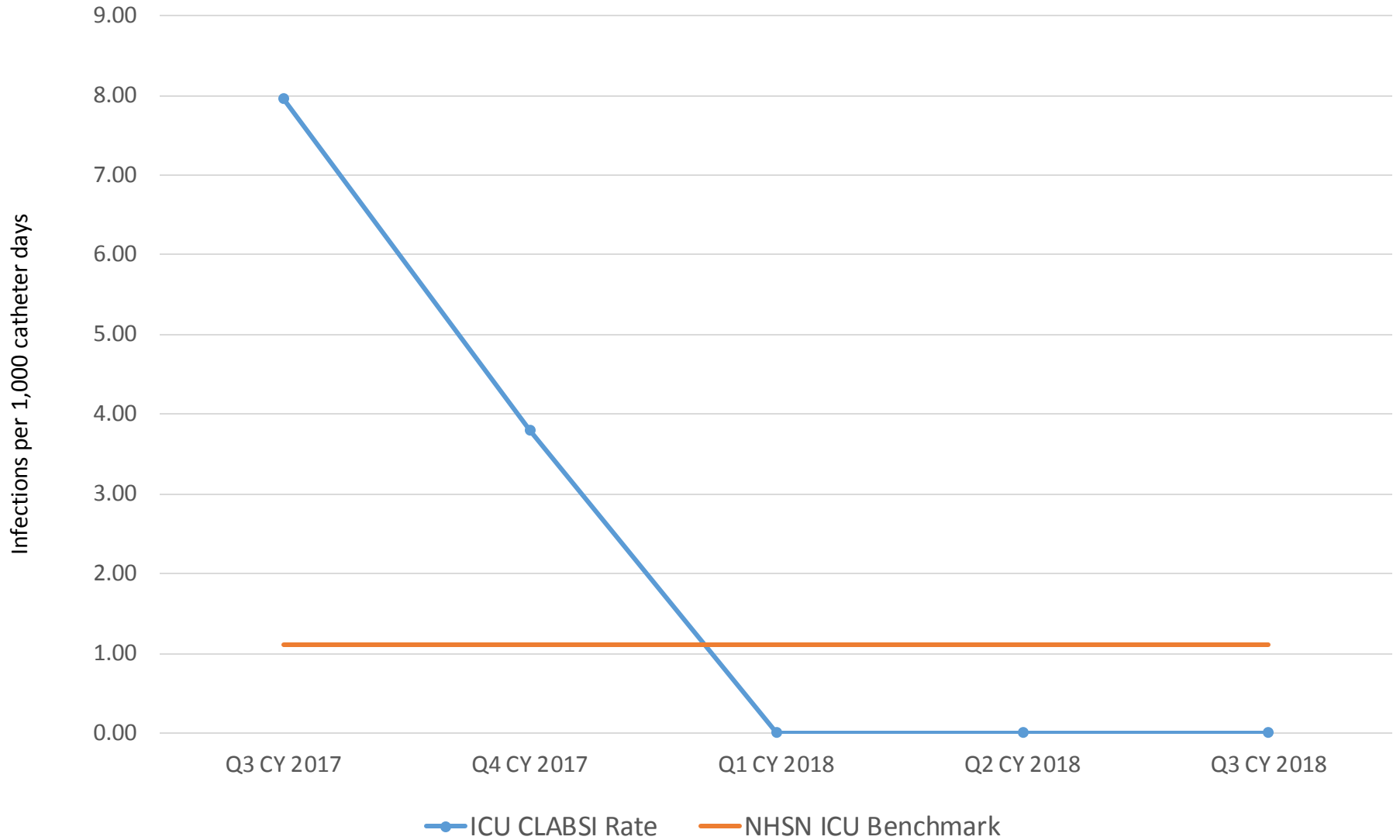
# Hand Hygiene Compliance



# Wholehouse Central-Line Associated Bloodstream Infection (CLABSI) Rate



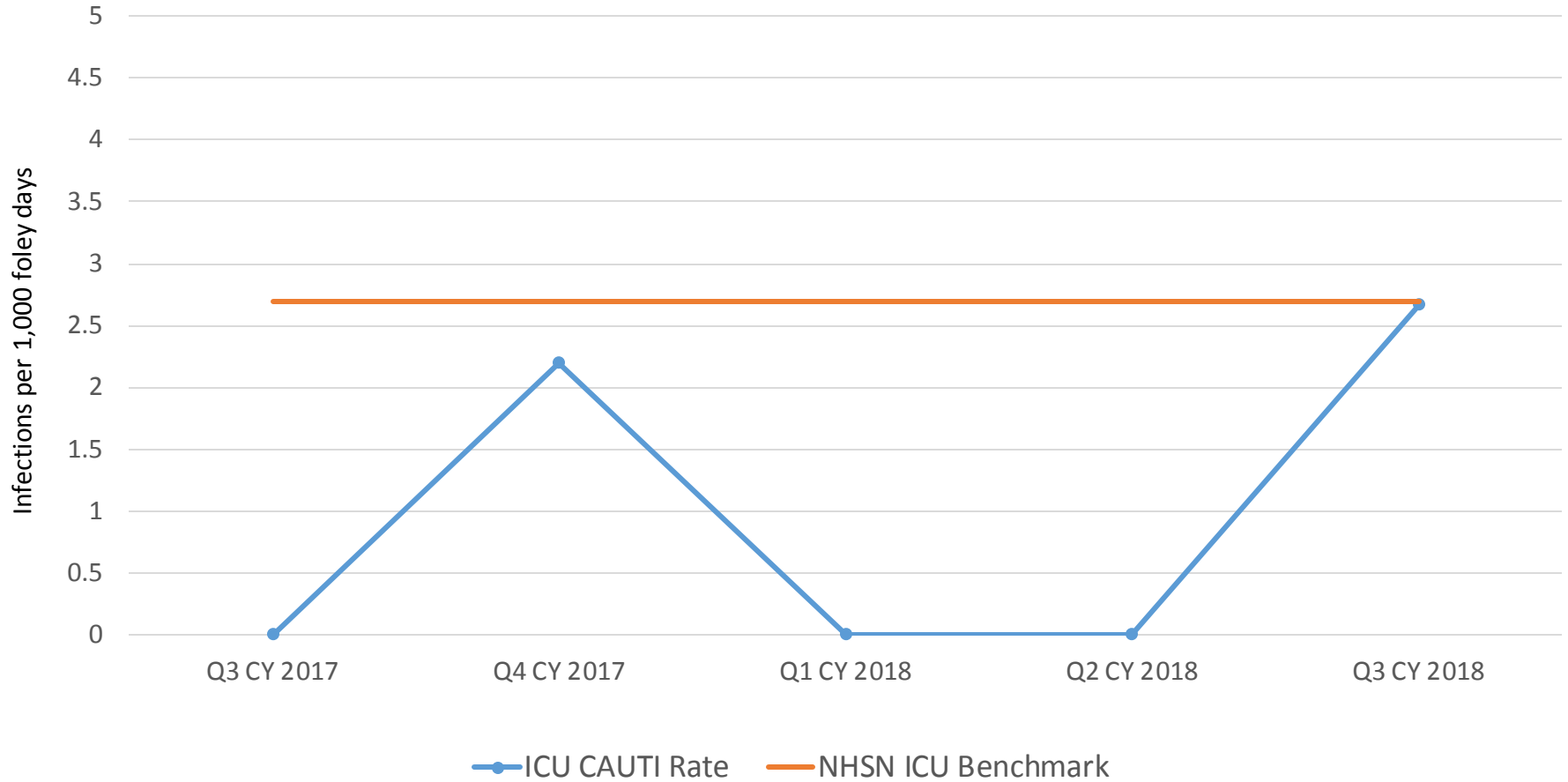
# ICU Central-Line Associated Bloodstream Infection (CLABSI) Rate



2013 CDC National Healthcare Safety Network (NHSN) Benchmark: Critical Care Units, Medical/Surgical -major teaching mean 1.1

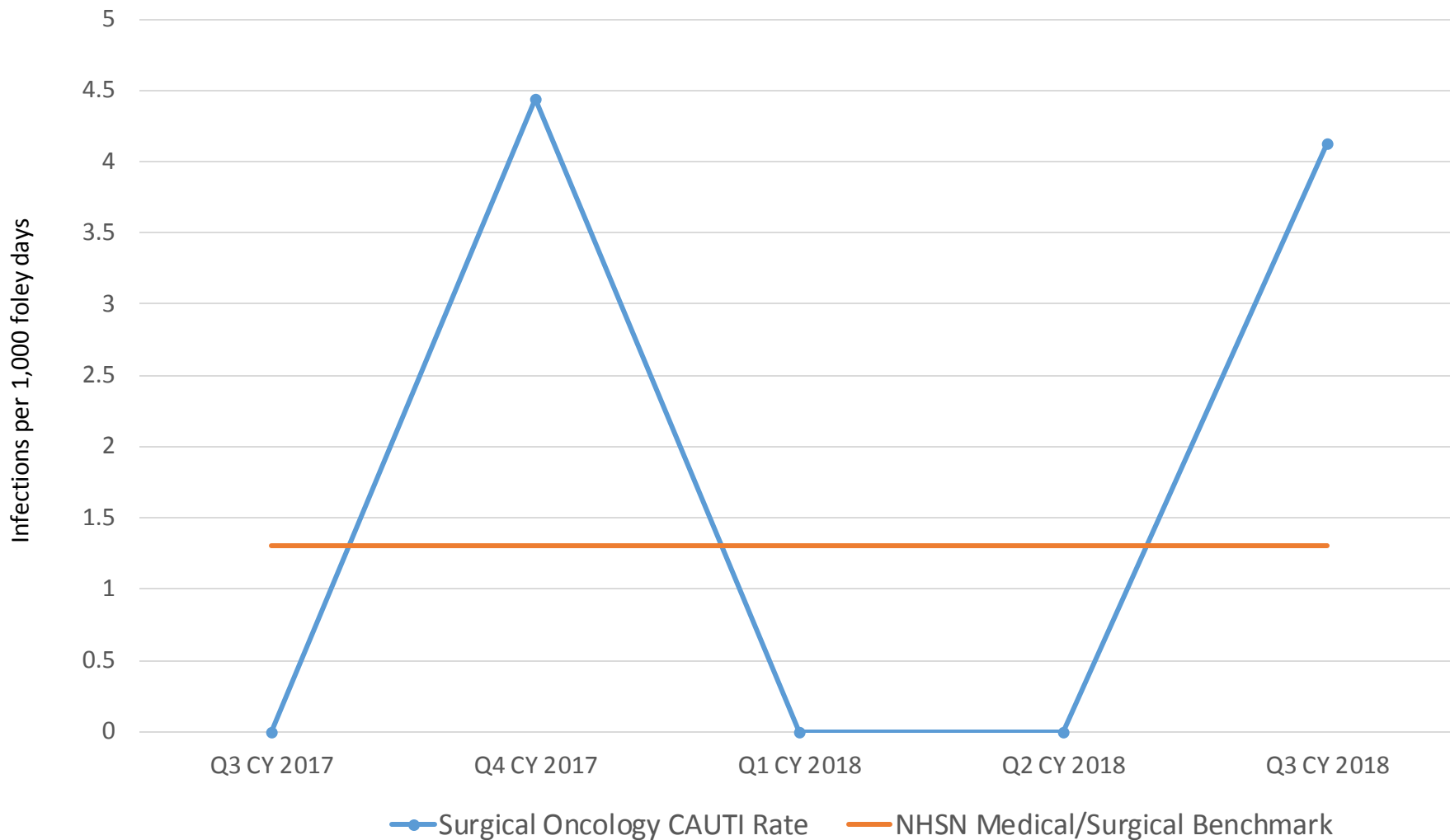


# ICU Catheter-Associated Urinary Tract Infections (CAUTI) Rate



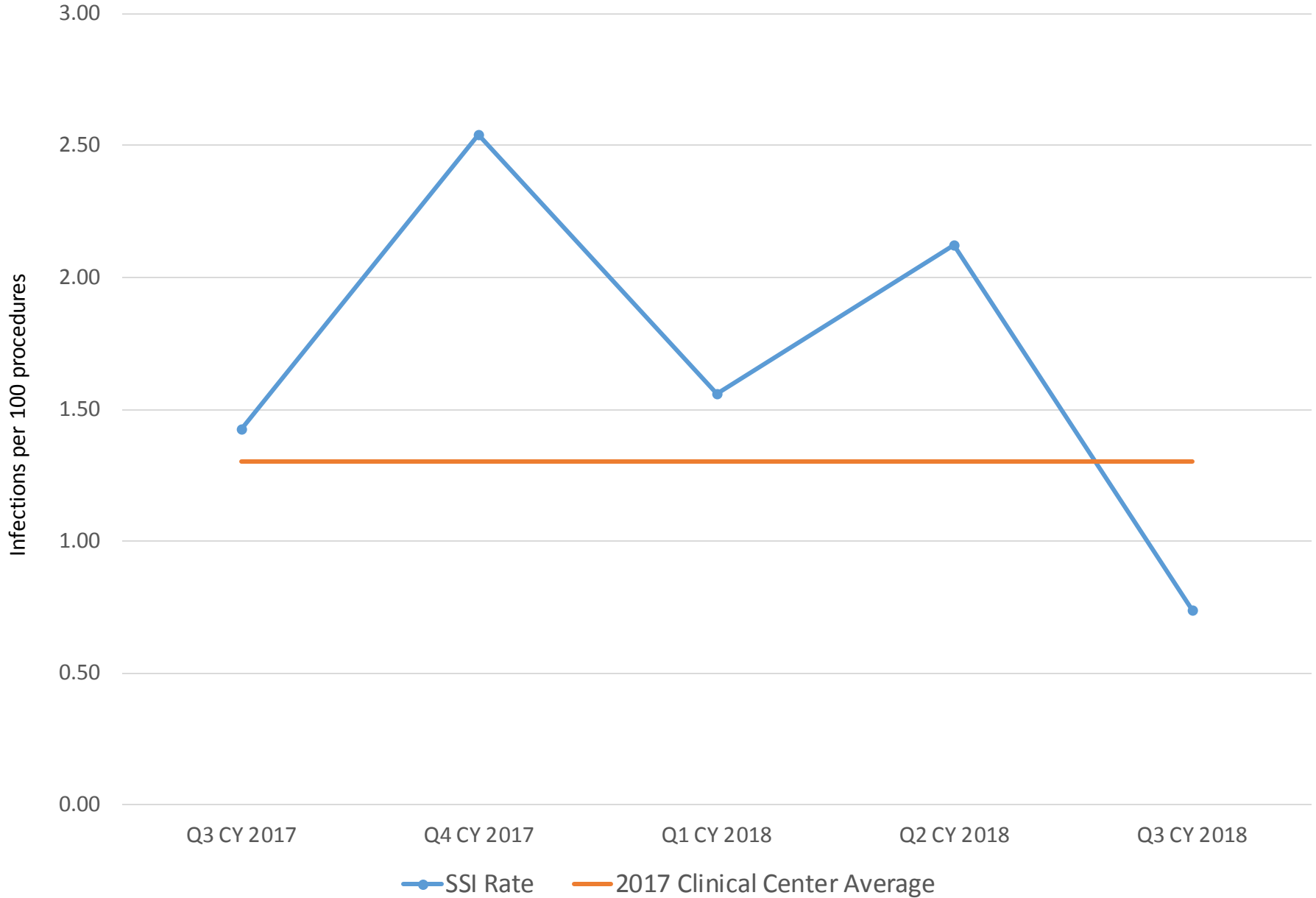
2013 CDC National Healthcare Safety Network (NHSN) Benchmark: Critical Care Units, Medical/Surgical -major teaching mean 2.7

# Surgical Oncology Catheter-Associated Urinary Tract Infections (CAUTI) Rate



2013 CDC National Healthcare Safety Network (NHSN) Benchmark: Inpatient Wards, Medical/Surgical mean 1.3

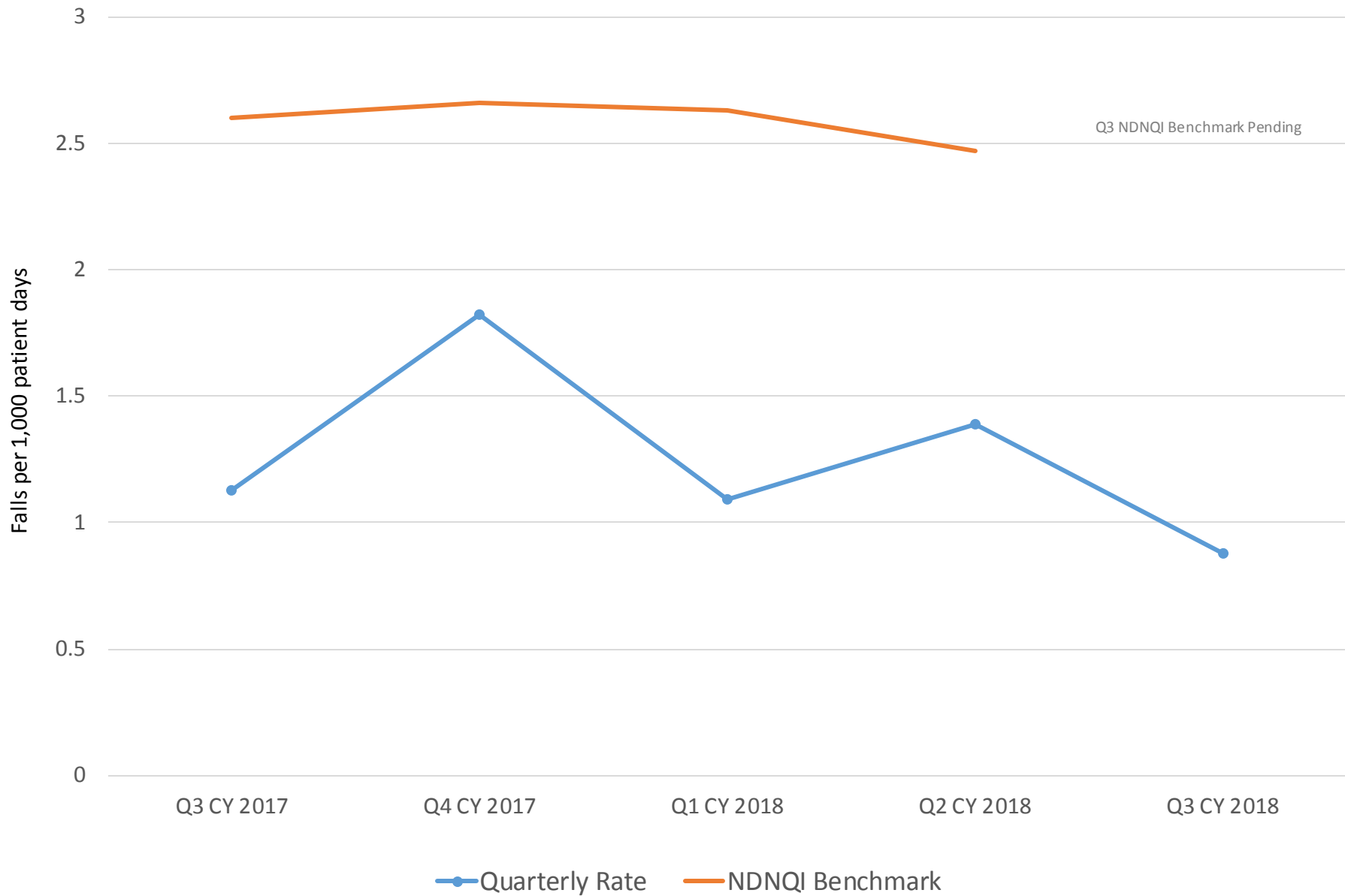
# Surgical Site Infections (SSI) Rate



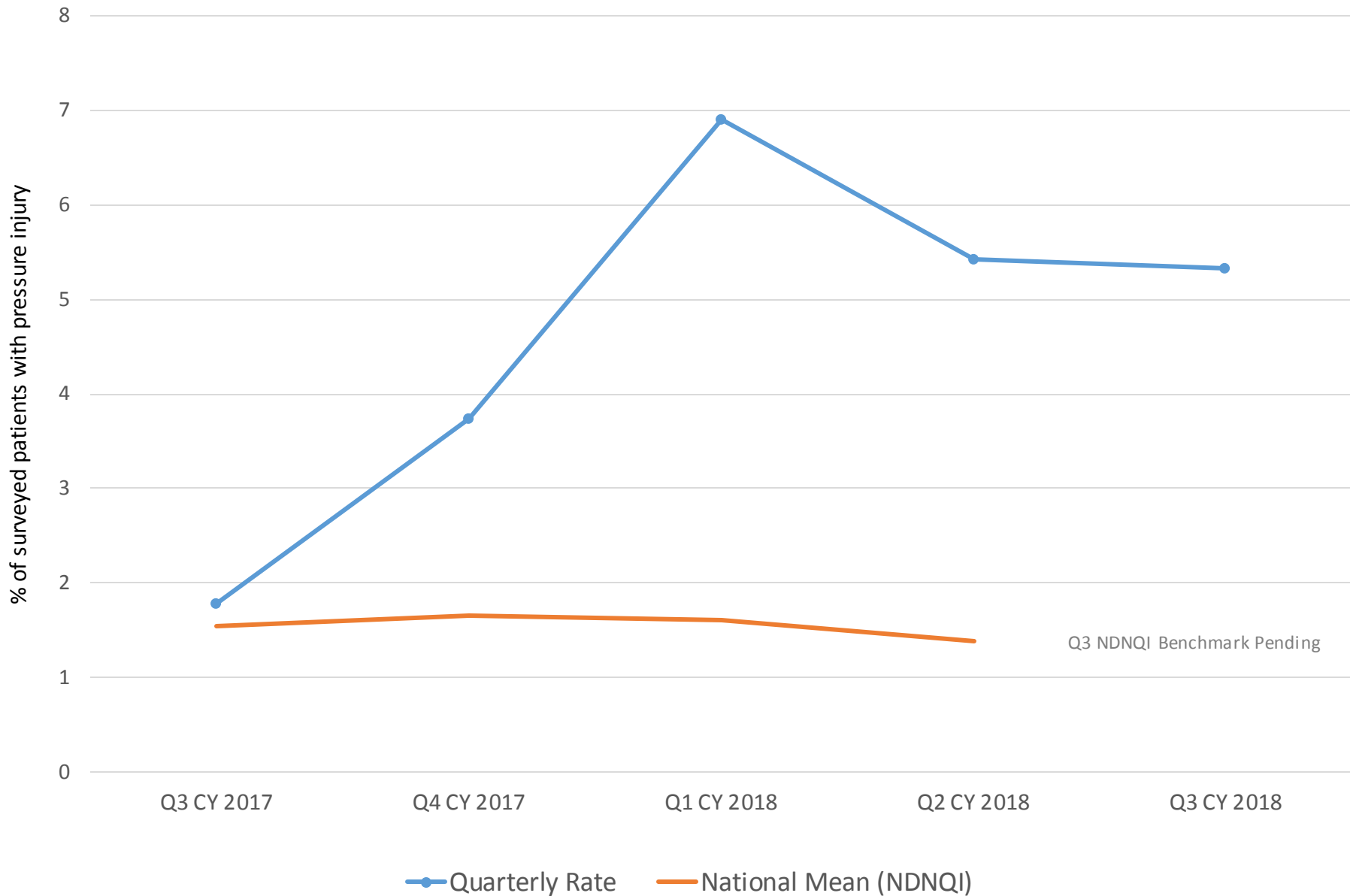
# Nursing Quality Metrics

- Falls
- Pressure Injury
- Medication Administration Barcoding

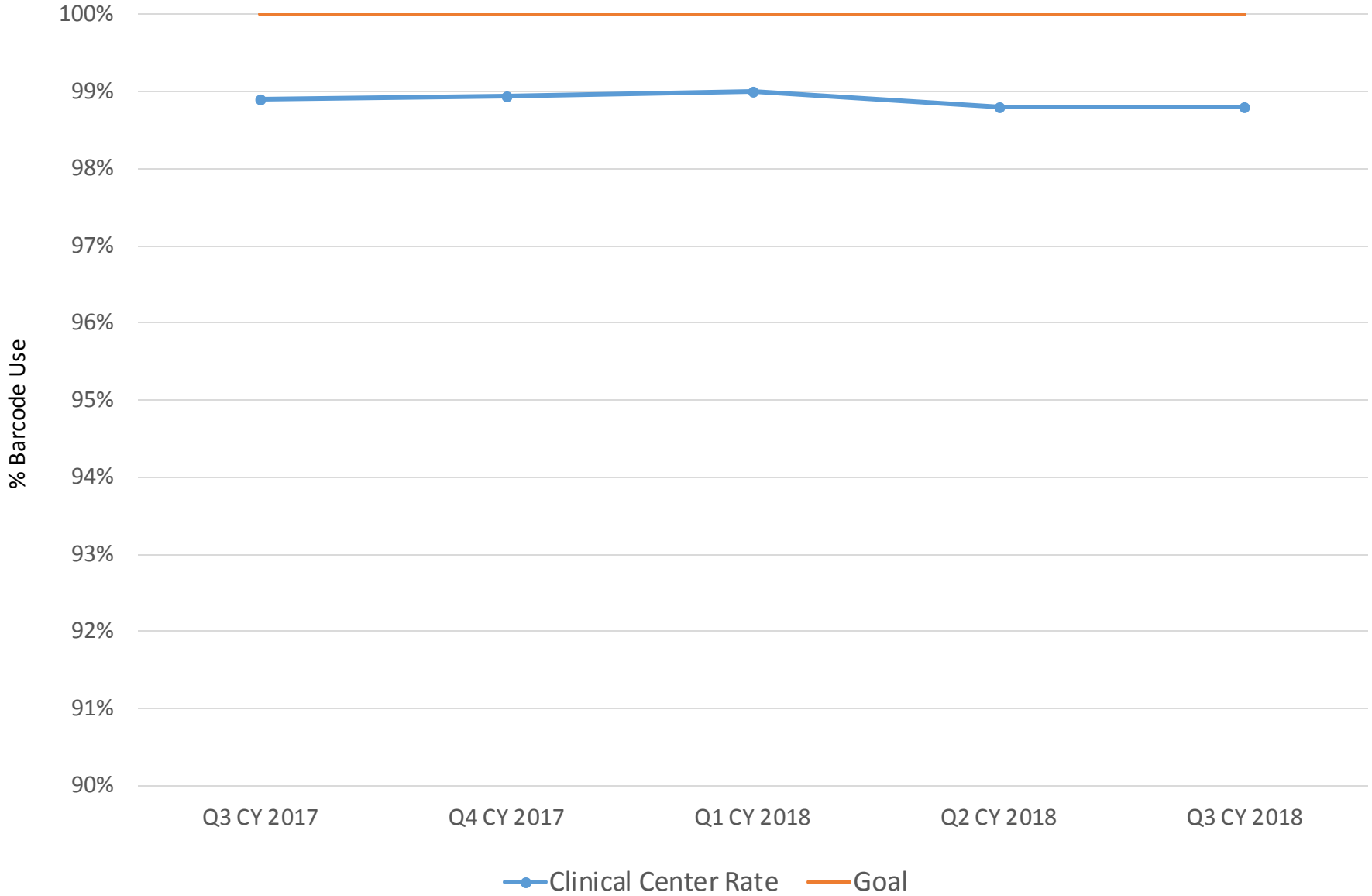
# Inpatient Falls Rate



# Pressure Injury Prevalence



# Medication Administration Barcode Use

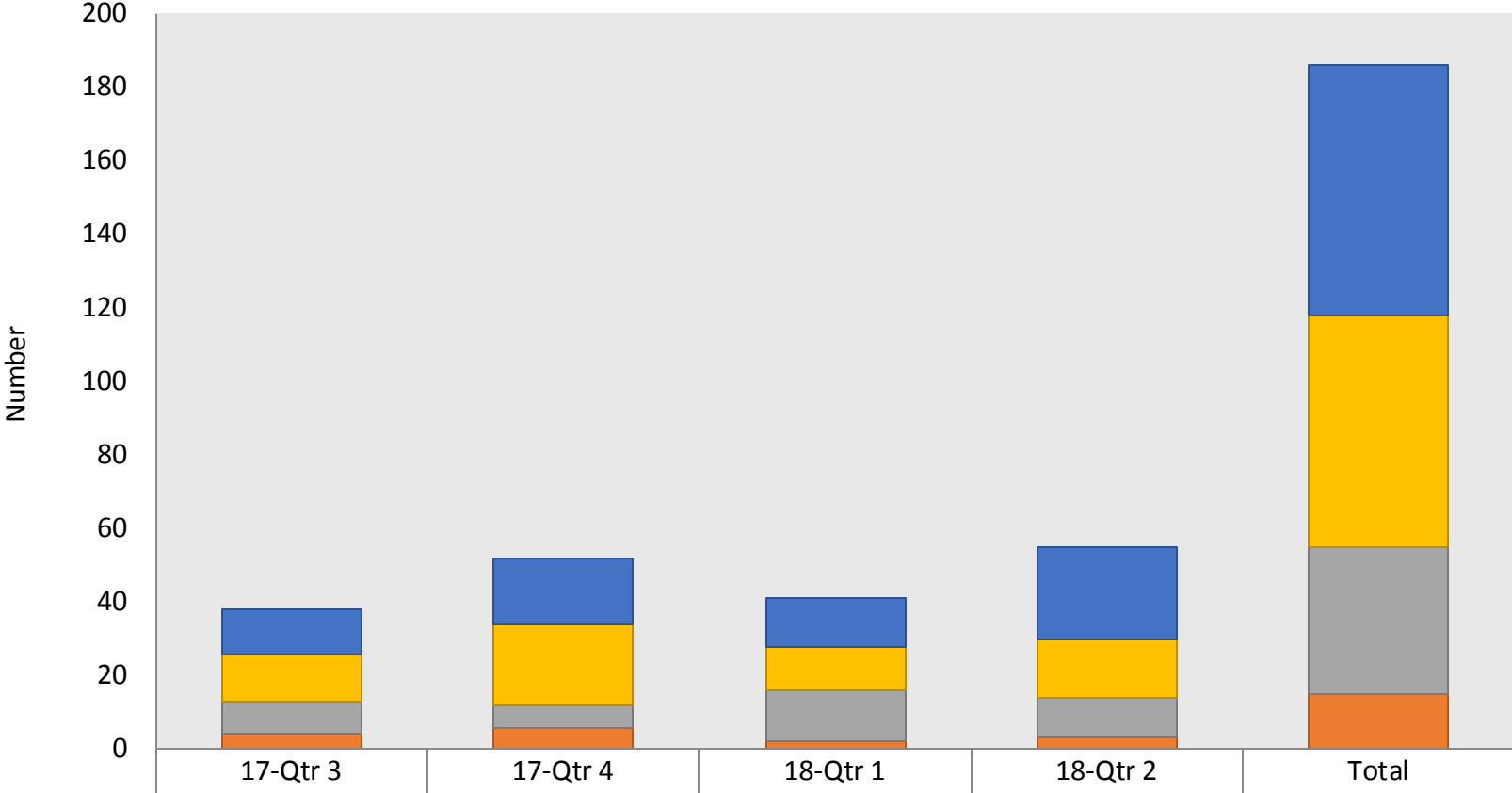


# Emergency Response

- Code Blue and Rapid Response
  - Types of Patients
  - Type of Event
  - Patient Disposition

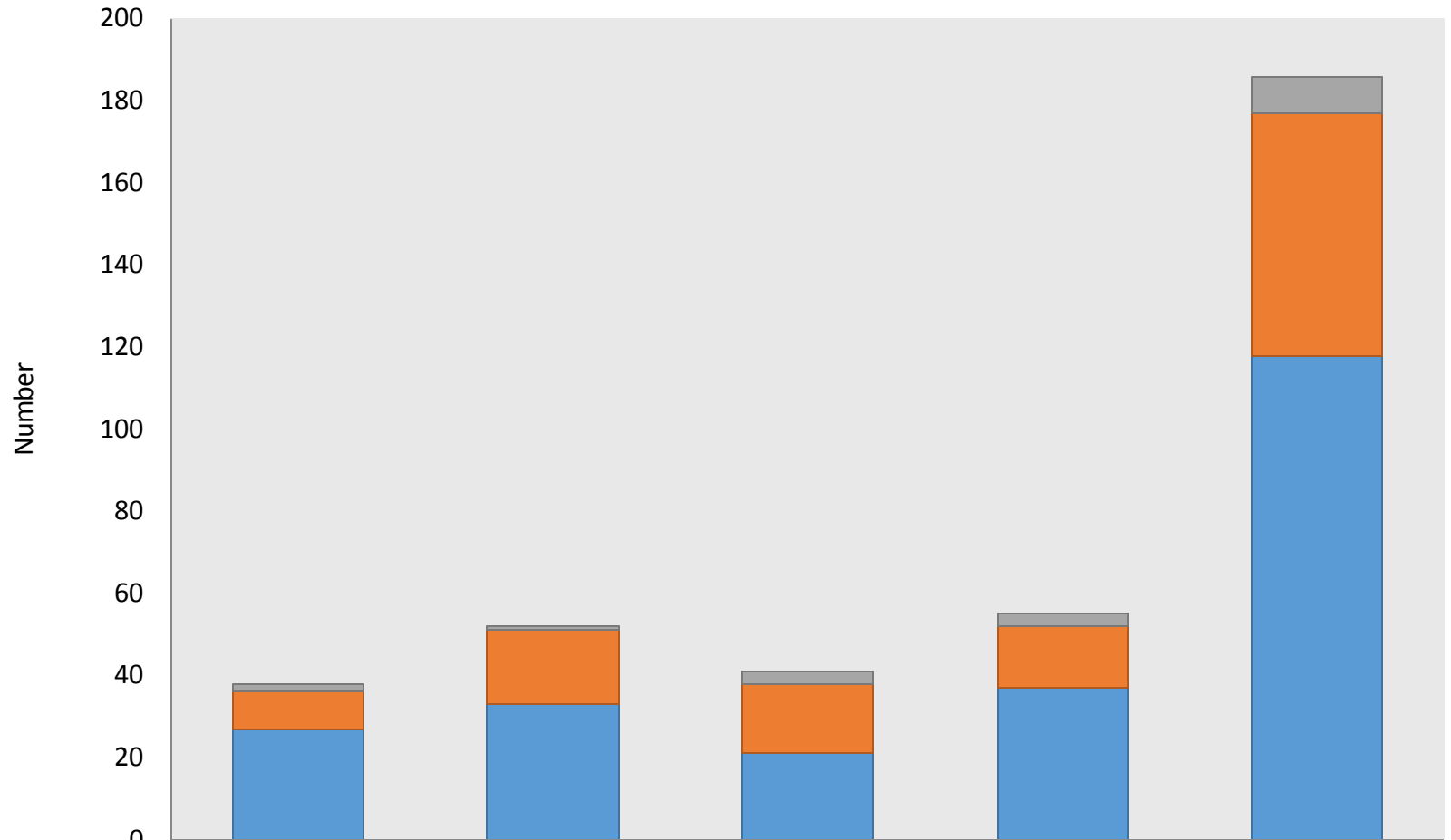


# Code Blue Response: Types of "Patients"



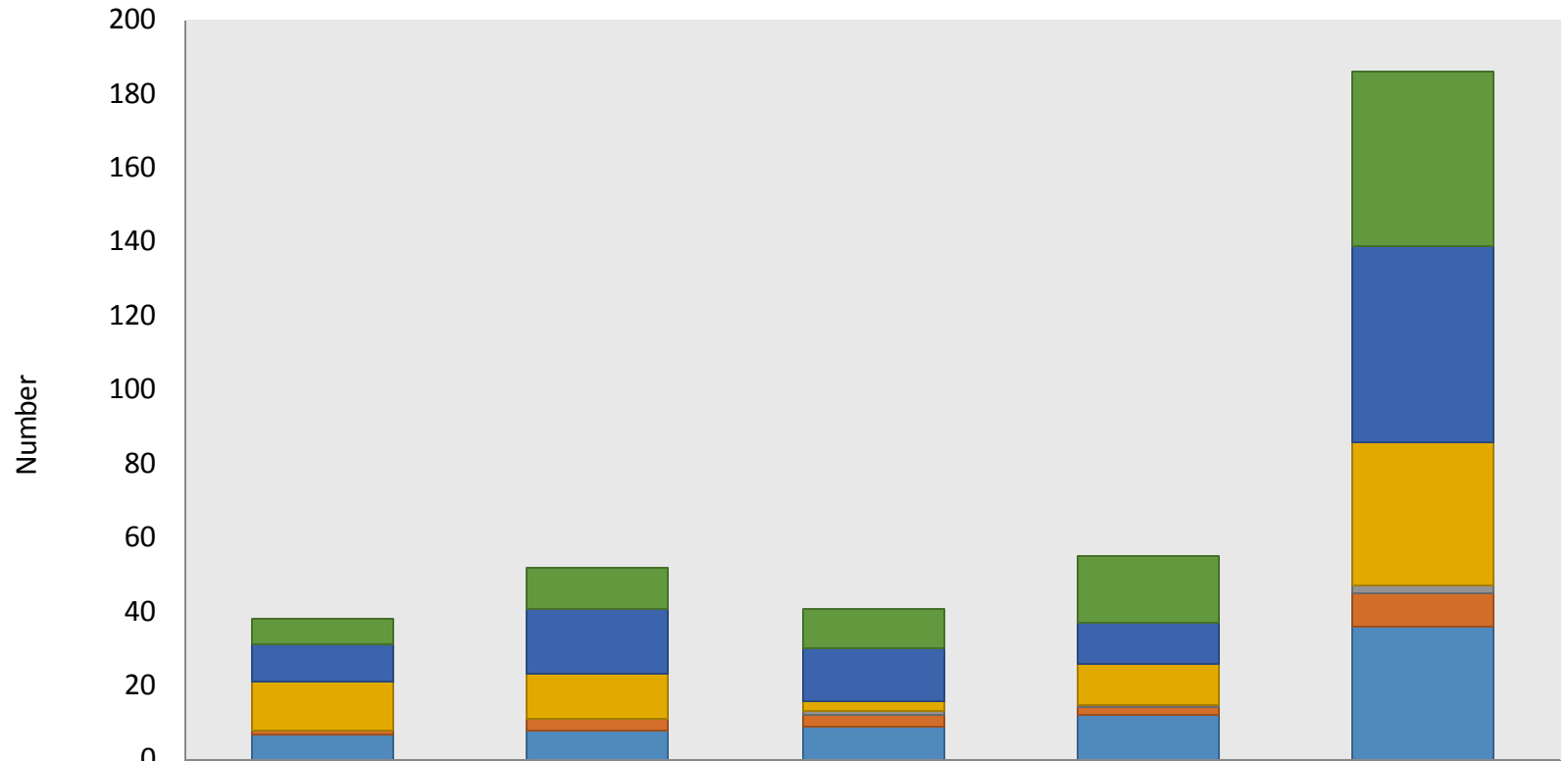
Inpt	12	18	13	25	68
Outpt	13	22	12	16	63
Employee	9	6	14	11	40
Visitor	4	6	2	3	15
Incorrect Calls	0	0	0	0	0

## Code Blue Response: Type of Event



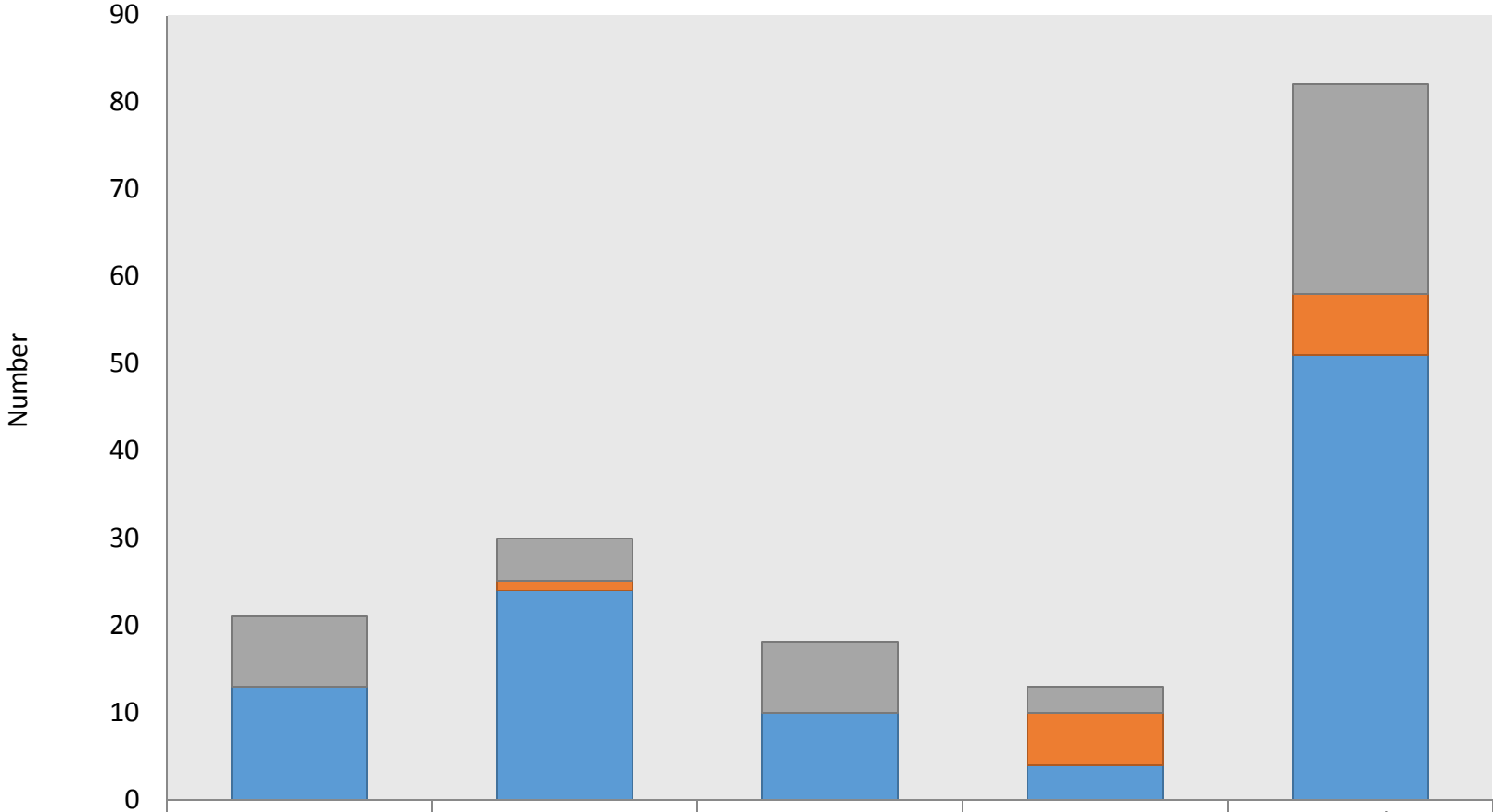
	Q3 CY 2017	Q4 CY 2017	Q1 CY 2018	Q2 CY 2018	TOTAL
Arrest	2	1	3	3	9
Acute Emergency	9	18	17	15	59
Stable Event	27	33	21	37	118

## Code Blue Response: Patient Disposition



	17-Qtr 3	17-Qtr 4	18-Qtr 1	18-Qtr 2	TOTAL
Transfer to ICU	7	11	11	18	47
Transfer to OSH	10	18	14	11	53
Remained on Unit	13	12	3	11	39
Expired	0	0	1	1	2
Released	1	3	3	2	9
Other	7	8	9	12	36

# Rapid Response Team: Patient Disposition



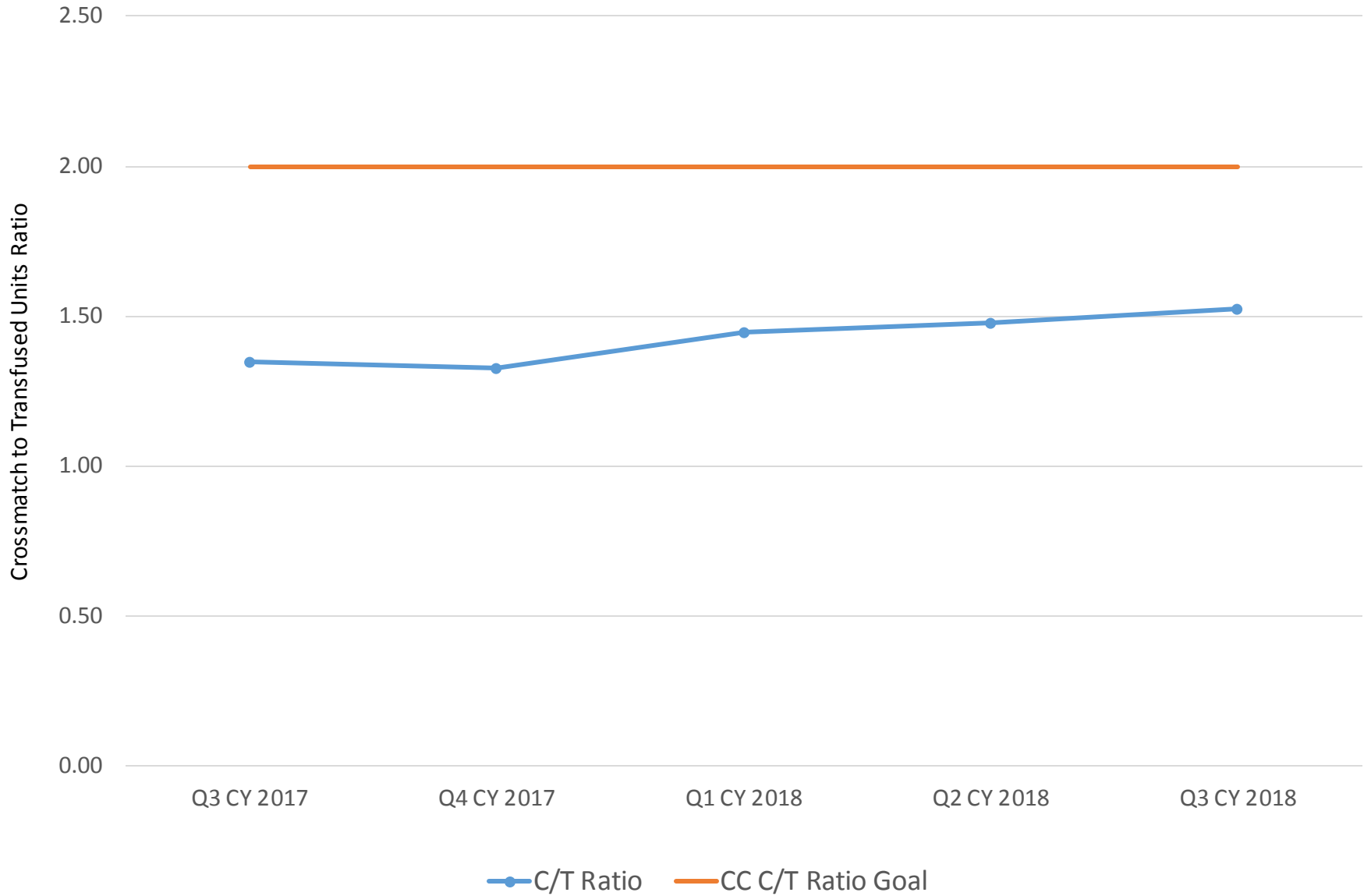
	17-Qtr 3	17-Qtr 4	18-Qtr 1	18-Qtr 2	Total
ICU	8	5	8	3	24
Unit/Other	0	1	0	6	7
Remained on Unit	13	24	10	4	51

# Blood and Blood Product Use

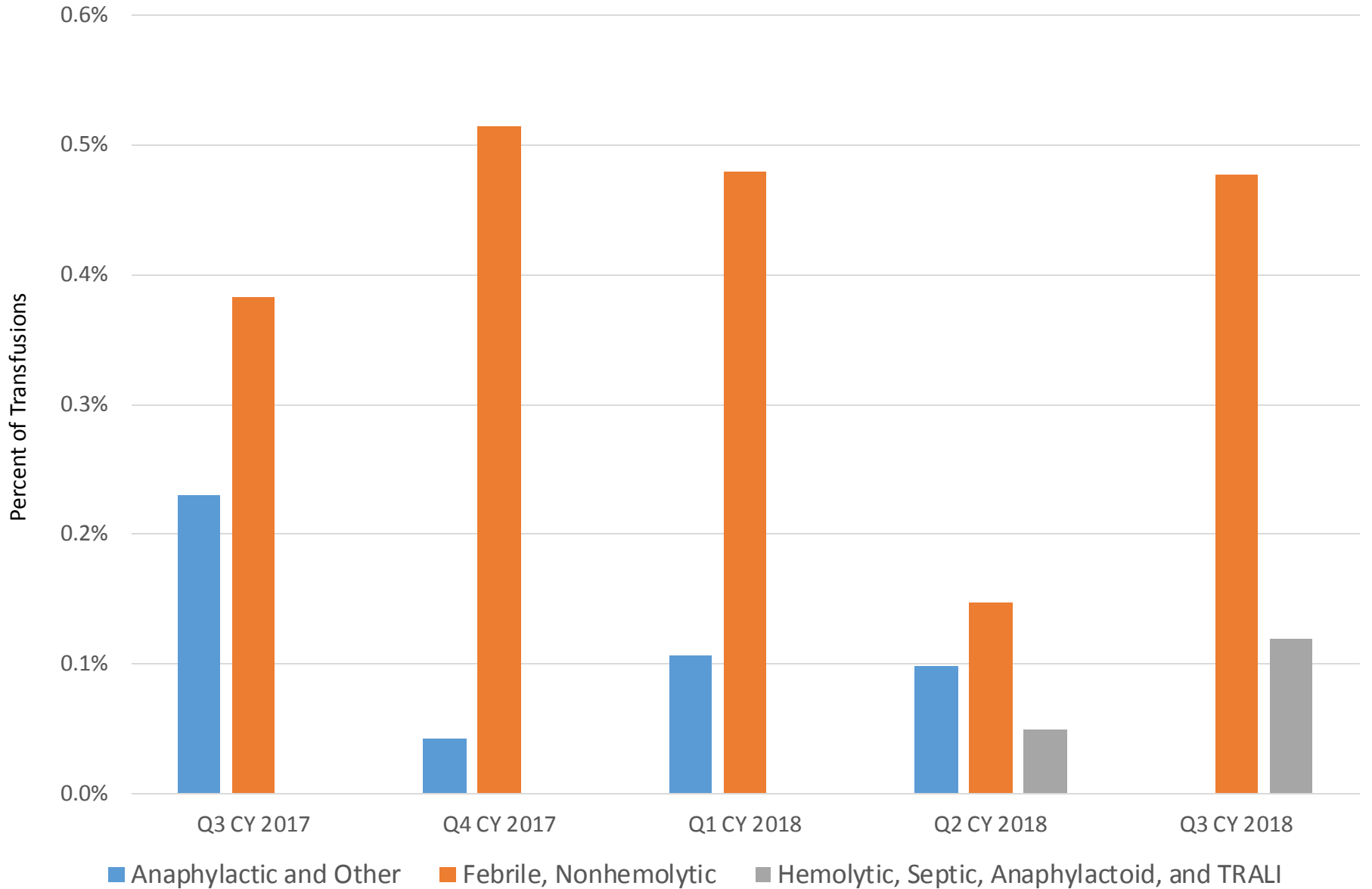
- Crossmatch to Transfusion (C:T) Ratio
- Transfusion Reaction by Class
- Unacceptable Blood Bank Specimens

# Crossmatch to Transfusion (C/T) Ratio

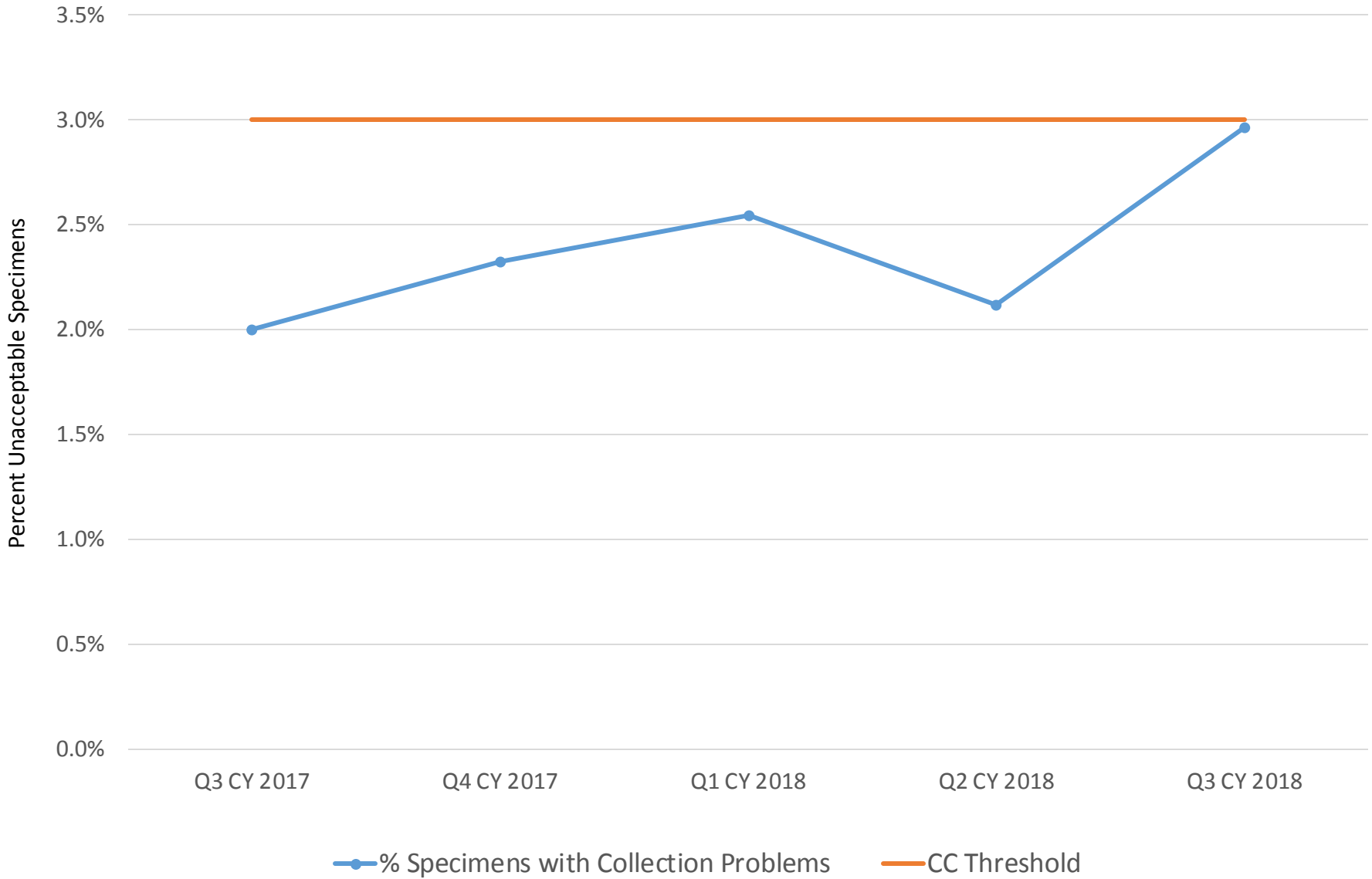
*(The NIH CC goal is to have a C:T ratio of 2.0 or less. Monitoring this metric ensures that blood is not held unused in reserve when it could be available for another patient.)*



# Transfusion Reactions by Class



# Unacceptable Blood Bank Specimens

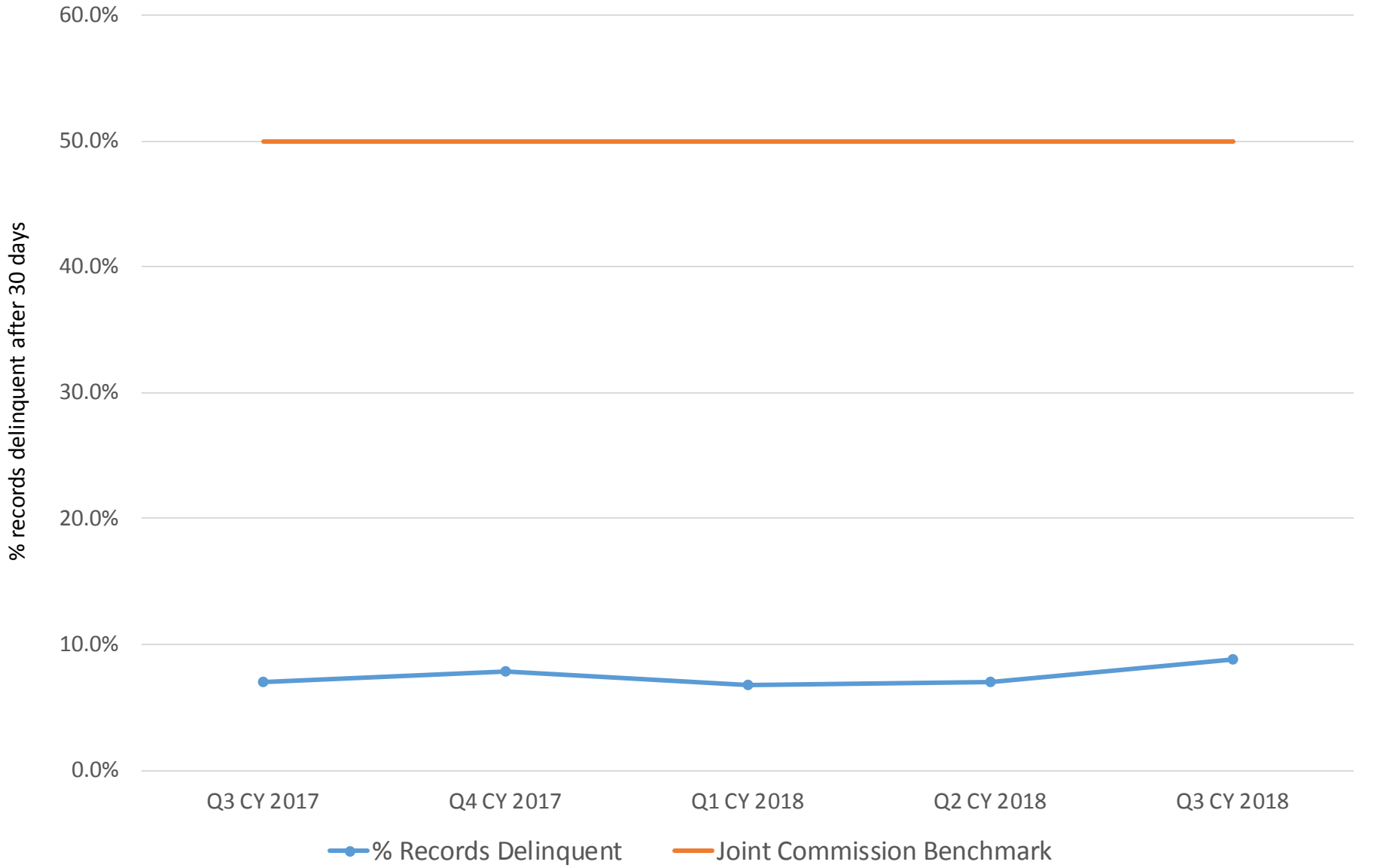




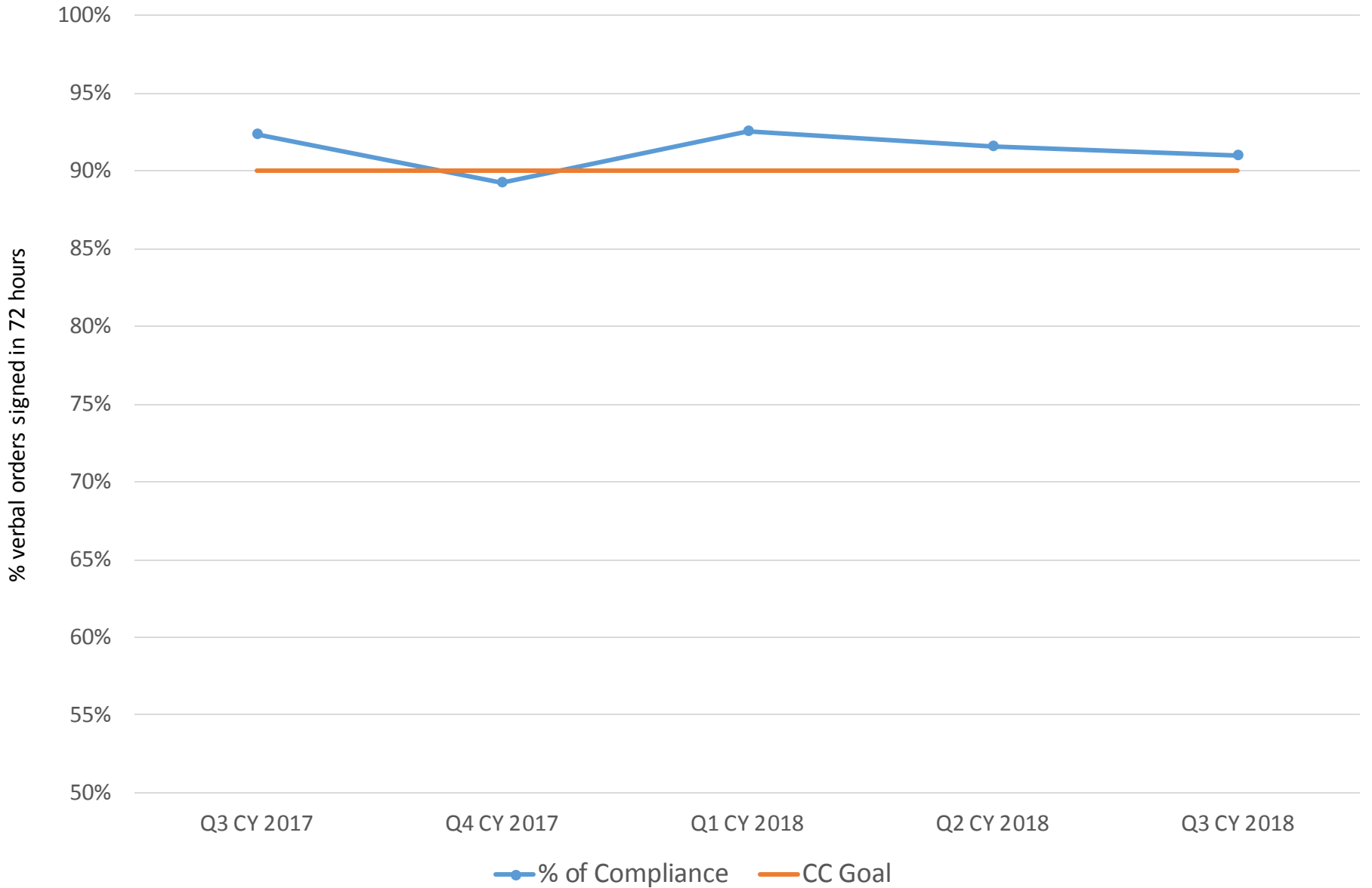
# Clinical Documentation

- Medical Record Completeness
  - Delinquent Records
  - “Agent for” Countersignature Adherence
  - Unacceptable Abbreviation Use
- Accuracy of Coding

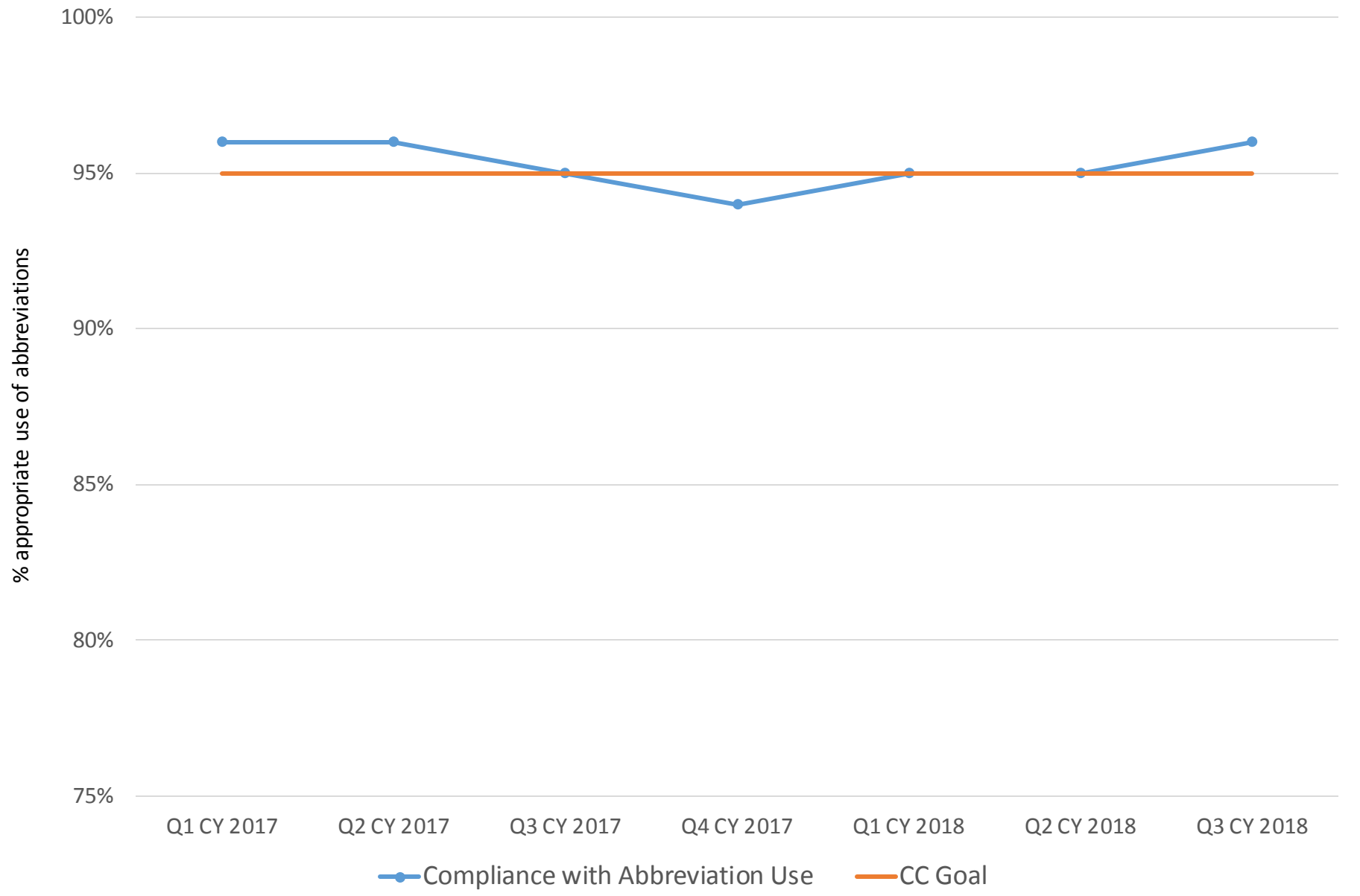
# Delinquent Records (>30 days post discharge)



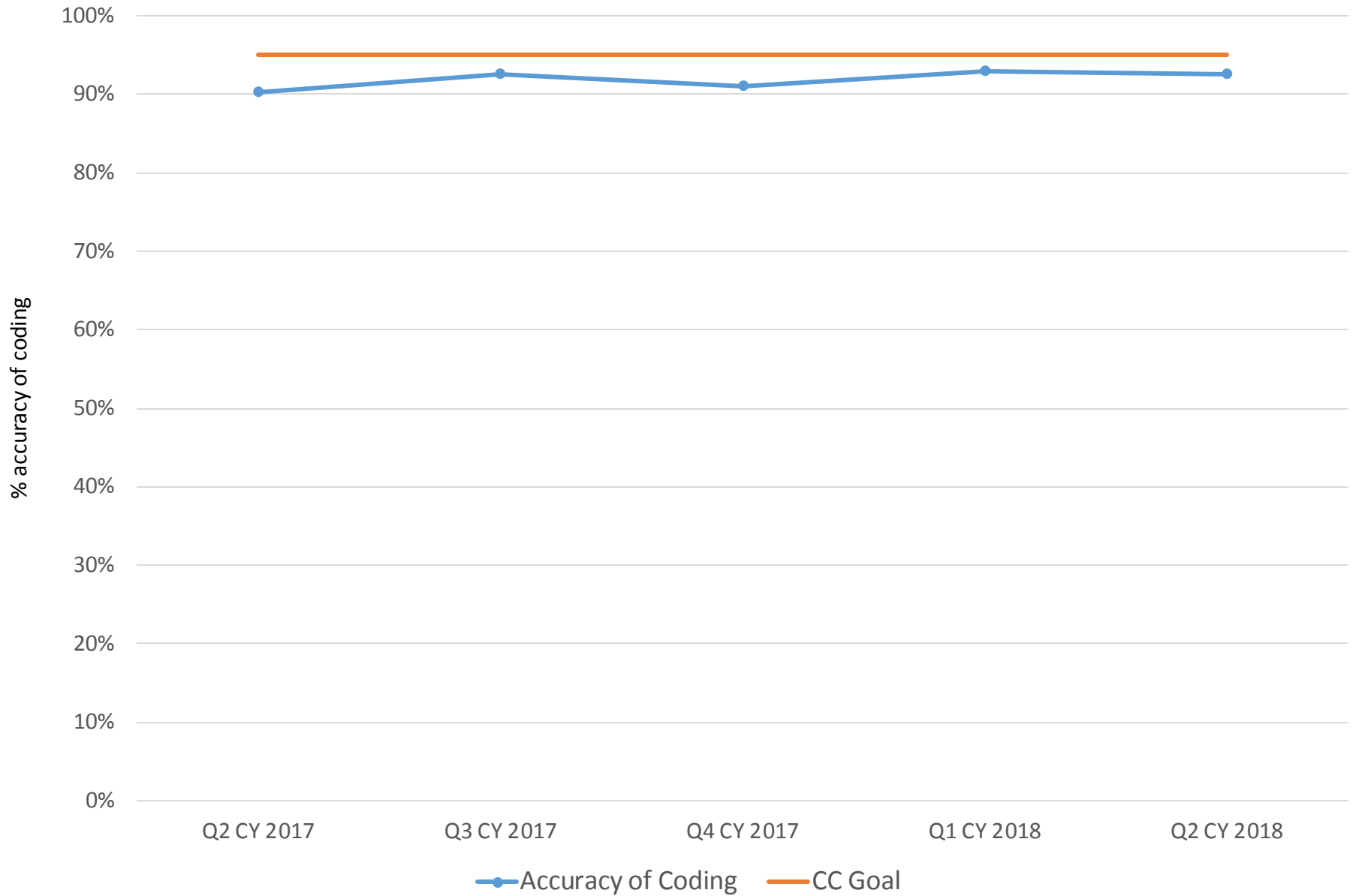
# "Agent for" Orders Countersignature Compliance



# "Do Not Use" Abbreviation Adherence



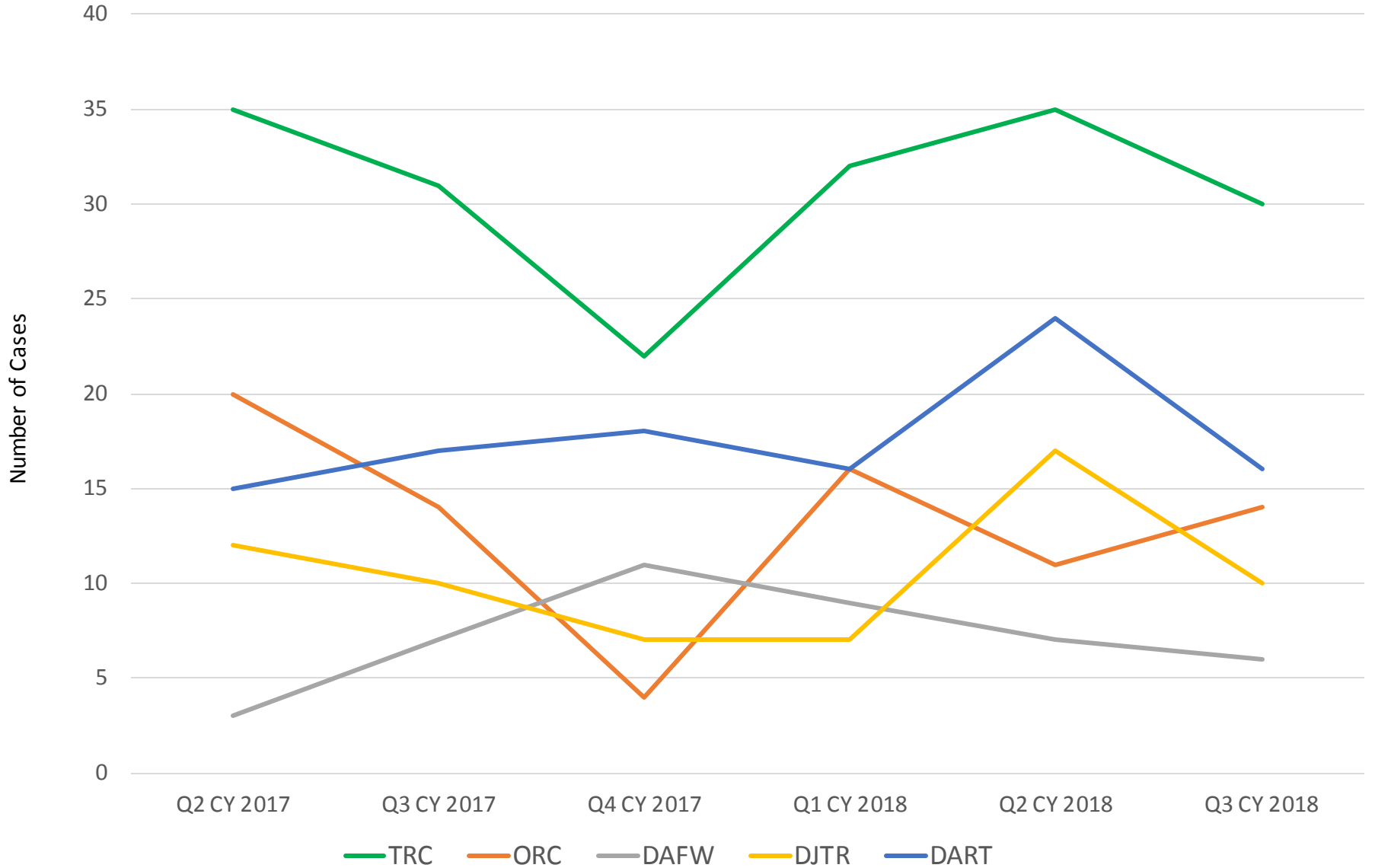
# Accuracy of Record Coding



# Employee Safety

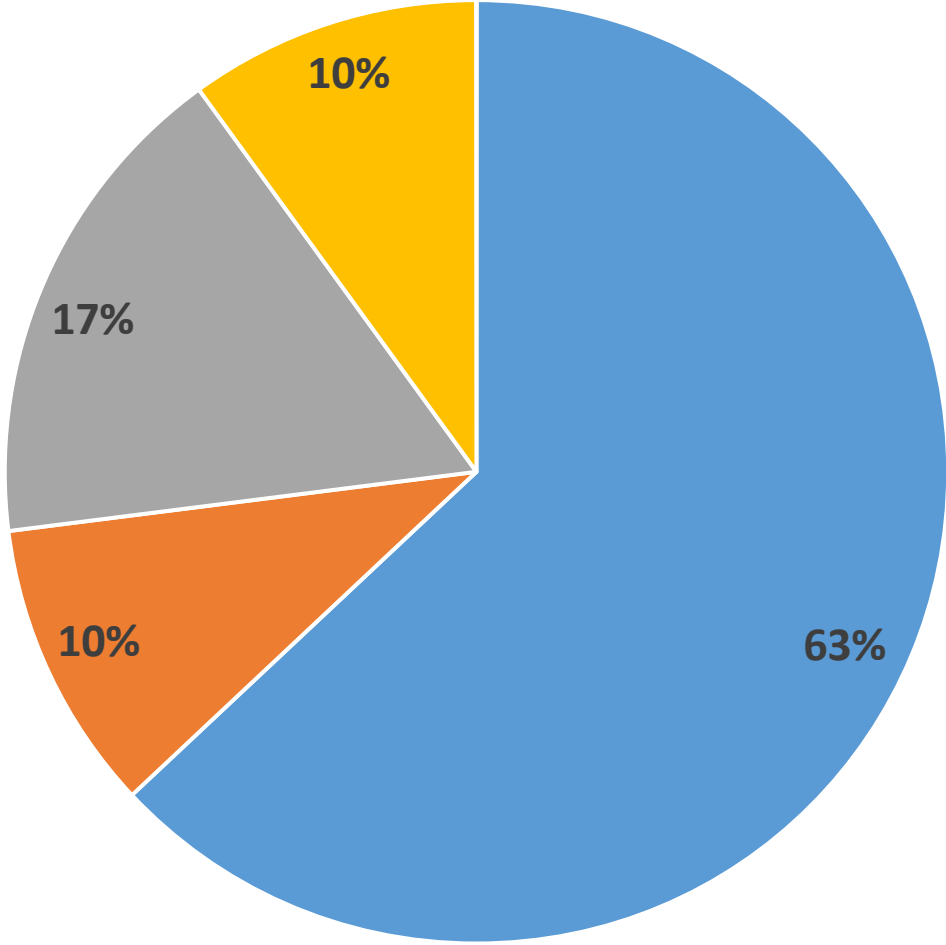
- Occupational Injury and Illness

# Occupational Injuries and Illnesses for CC Employees



**TRC:** Total Recordable Cases; **ORC:** Other Recordable Cases; **DAFW:** Days Away From Work; **DJTR:** Days Job Transfer, Restriction; **DART:** Days Away, Restricted or Transferred (DAFW + DJTR)

Percent of Occupational Injuries and Illnesses  
July 1, 2018 - September 31, 2018



■ Musculoskeletal   ■ Wounds   ■ Ergonomic   ■ Other