CLINICAL AND SAFETY PERFORMANCE METRICS

Executive Dashboard

NIH Clinical Center
June 2024
Patient Perceptions

- Press-Ganey Survey Results:
  - Overall Assessment
  - Likelihood of Recommending
Inpatient and Outpatient Overall Top Box Rating

Q1 CY 2024
Q4 CY 2023
Q3 CY 2023
Q2 CY 2023

NIH CC Overall Rating - Inpatient
NIH CC Overall Rating - Outpatient
HCAHPS Overall Rating Average US(2022-2023)
Press Ganey Outpt Benchmark

3 questions in the Overall Assessment Domain
Inpatient and Outpatient Likelihood to Recommend

Q2 CY 2023  Q3 CY 2023  Q4 CY 2023  Q1 CY 2024

NIH CC - Inpatient
NIH CC - Outpatient
HCAPS Likelihood Average US(2022-2023)
Press Ganey Outpt Benchmark
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
- Surgical Site Infections
Whole House Hand Hygiene Compliance, 1Q 2024

Staff Hand Hygiene Compliance by Quarter

Observed Hand Hygiene Compliance

1Q 2024, 99%
Whole-House Hospital-Acquired Central Line-Associated Bloodstream Infection Rates
HA-CLABSI Incidence and Rates by Unit, ICU
Hospital-Acquired Catheter-Associated UTI (3SWS/ICU)
Hospital-Acquired Catheter-Associated UTI (3NW)
Surgical Site Infection Rate
Nursing Quality Metrics

- Falls
- Pressure Injury
- Note: See prior section for CLABSI and CAUTI
Inpatient Falls Rate

NDNQI Benchmark Data for Teaching Hospitals (Bed Size 100-199)
Pressure Injury Prevalence

NDNQI Benchmark Data for Teaching Hospitals (Bed Size 100-199)
Emergency Response

• Code Blue
  • Types of Patients
  • Type of Event
  • Patient Disposition

• Rapid Response- Disposition
Code Blue Response: Types of “Patients”

<table>
<thead>
<tr>
<th>Type</th>
<th>23-Qtr 2</th>
<th>23-Qtr 3</th>
<th>23-Qtr 4</th>
<th>24-Qtr 1</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpt</td>
<td>13</td>
<td>7</td>
<td>8</td>
<td>11</td>
<td>39</td>
</tr>
<tr>
<td>Outpt</td>
<td>13</td>
<td>15</td>
<td>6</td>
<td>18</td>
<td>52</td>
</tr>
<tr>
<td>Employee</td>
<td>8</td>
<td>9</td>
<td>10</td>
<td>15</td>
<td>42</td>
</tr>
<tr>
<td>Visitor</td>
<td>4</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Incorrect Calls</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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</tbody>
</table>
### Code Blue Response: Type of Event

<table>
<thead>
<tr>
<th></th>
<th>23-Qtr 2</th>
<th>23-Qtr 3</th>
<th>23-Qtr 4</th>
<th>24-Qtr 1</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DART</strong></td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td><strong>Brain Code</strong></td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>11</td>
</tr>
<tr>
<td><strong>Arrest</strong></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td><strong>Acute Emergency</strong></td>
<td>5</td>
<td>15</td>
<td>20</td>
<td>39</td>
<td>79</td>
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<tr>
<td><strong>Stable Event</strong></td>
<td>25</td>
<td>15</td>
<td>4</td>
<td>1</td>
<td>45</td>
</tr>
</tbody>
</table>

**Chart:** Frequency distribution of Code Blue responses by type and quarter.
## Code Blue Response: Patient Disposition

<table>
<thead>
<tr>
<th></th>
<th>23-Qtr 2</th>
<th>23-Qtr 3</th>
<th>23-Qtr 4</th>
<th>24-Qtr 1</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transfer to ICU</td>
<td>7</td>
<td>6</td>
<td>5</td>
<td>12</td>
<td>30</td>
</tr>
<tr>
<td>Transfer to OSH</td>
<td>10</td>
<td>6</td>
<td>12</td>
<td>14</td>
<td>42</td>
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<tr>
<td>Remained on Unit</td>
<td>9</td>
<td>15</td>
<td>5</td>
<td>13</td>
<td>42</td>
</tr>
<tr>
<td>Expired</td>
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<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Released</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>6</td>
<td>4</td>
<td>4</td>
<td>22</td>
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</tbody>
</table>
Rapid Response Team: Patient Disposition

<table>
<thead>
<tr>
<th>Quarter</th>
<th>ICU</th>
<th>Unit/Other</th>
<th>Remained on Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>23-Qtr 2</td>
<td>9</td>
<td>2</td>
<td>15</td>
</tr>
<tr>
<td>23-Qtr 3</td>
<td>7</td>
<td>2</td>
<td>21</td>
</tr>
<tr>
<td>23-Qtr 4</td>
<td>4</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>24-Qtr 1</td>
<td>6</td>
<td>1</td>
<td>15</td>
</tr>
<tr>
<td>Total</td>
<td>26</td>
<td>10</td>
<td>56</td>
</tr>
</tbody>
</table>

Legend:
- Green: ICU
- Red: Unit/Other
- Blue: Remained on Unit
Blood and Blood Product Use

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

![Transfusion Reactions by Class](image-url)
Unacceptable Blood Bank Specimens

Percent unacceptable specimens

% Specimens with Collection Problems

CC Threshold

Jan Feb Mar Apr May Jun July Aug Sept Oct Nov Dec Jan Feb Mar
Q1 CY 2023 Q2 CY 2023 Q3 CY 2023 Q4 CY 2023 Q1 CY 2024
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

% of Compliance vs. CC Goal

% of orders signed in 72 hours

Quarter:
- Q1 CY2021
- Q2 CY2021
- Q3 CY2021
- Q4 CY2021
- Q1 CY2022
- Q2 CY2022
- Q3 CY2022
- Q4 CY2022
- Q1 CY2023
- Q2 CY2023
- Q3 CY2023
- Q4 CY2023
- Q1 CY2024
- Q2 CY2024
- Q3 CY2024
"Do Not Use" Abbreviation Adherence

% appropriate use of abbreviations

Quarter

Q1

CC Goal

Compliance with Abbreviation Use
Accuracy of Record Coding

![Graph showing accuracy of coding over quarters from CY2021-Q1 to CY2024-Q1. The graph indicates a trend of steady accuracy with slight fluctuations, consistently remaining above 90%. The CC Goal line stays at a constant 90%.](image-url)
Employee Safety

• Recordable Occupational Injury and Illness
• Types of Occupational Injury for Quarter
Recordable Occupational Injuries and Illnesses Among CC Employees CY21-24Q1

TRC= Total Recordable cases
ORC = Other recordable cases
DJTR = Days of job transfer or restriction
DAFW = Days away from work
DART = Days away, restricted, or transferred (DJTR+DAFW)
Types of Occupational Injuries Among CC Employees
1st Quarter CY2024
n=19