Safety

The DCHC Safety Committee is dedicated to building a culture of safety through, Risk Analysis & Mitigation, Training, Education and Policy Development.

Clinical Measures:

| Measure | February 2023 | Fiscal Year |
|---------------------------------------------|---------------|-------------|
| Decrease Patient Falls | Count = 0 | Count=3 |
| Decrease 30-day same hospital readmissions | Count = 0 | Count = 3 |
| Decrease Adverse Drug Events (category D-I) | Count = 0 | Count = 1 |

Safety Initiatives/Celebrations:

- 1. Over 6 months without an Inpatient fall last one August 2nd
- 2. Aggressive Intruder training for clinical staff continues throughout March.

Quality

The mission of Davis County Hospital and Clinics is to provide high-quality, patient-centered care with integrity and trust

Infection Prevention Spotlight:

| Department | Measure | Target Goal | July | Aug | Sept | Oct | Nov | Dec | Jan |
|----------------------|---------------------------------------------------------------------------------------------------|----------------|------|------|------|-----|-----|------|---------|
| QUALITY AND SAFETY | | | | | | | | | |
| INFECTION PREVENTION | Patients at DCHC will experience no healthcare associated infections during FY2023 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| INFECTION PREVENTION | Patients at DCHC will experience no catheter-associated urinary tract infections during FY2023 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| INFECTION PREVENTION | 100% of catheters inserted during FY2023 will be due to appropriate reasons for use | 100% | 100% | 100% | 100% | 60% | 60% | 100% | 40% |
| INFECTION PREVENTION | Patients at DCHC will experience no central line associated infections during FY2023 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | #DIV/0! |
| INFECTION PREVENTION | Patients at DCHC will experience no surgical site infections during FY2023 | 0% | 0% | 0% | 0% | 0% | 0% | 0% | 0% |
| INFECTION PREVENTION | DCHC employees will practice hand hygiene at every opportunity during FY2023 | 100% | 100% | 90% | 100% | 82% | 86% | 100% | 100% |

Patient Satisfaction – Top Box – FY2023

| Service Line | FY23 Likelihood to Recommend Current |
|---------------------------|--------------------------------------|
| Ambulatory Surgery | 87.65% |
| Emergency Department | 94.92% |
| Inpatient | 64.29% |
| Medical Associates Clinic | 94.66% |
| Outpatient Services | 94.88% |

*August 1, 2022, to February 28, 2023, received by Mar. 1, 2023