

6.1 BROWARD HEALTH HOME HEALTH



CMS IQIES			
MANAGEMENT OF DAILY ACTIVITIES	DEC 21- FEB 22 BHHH	National Avg.	Comparison to National Average
Improvement in Ambulation	89.0	82.8	6.2% above national avg.
Improvement in Bed Transferring	85.1	84.1	1.0% above national avg.
Improvement in Bathing	85.8	85.1	0.7% above national avg.
Improvement in Dyspnea	89.6	85.6	4.0% above national avg.
Improvement in Management of Oral Medications	82.6	80.7	1.9% above national avg.
Stabilization in Grooming	98.5	98.7	0.2% below national avg.
Stabilization in bathing	98.5	98.5	At national avg.

CMS IQIES

Management of Daily Activities	DEC 21 – FEB 22 BHHH	National Avg.	Comparison to National Average
Improvement in upper body dressing	89.0	83.5	5.2% above national avg.
Improvement in lower body dressing	86.3	82.6	0.7% above national avg.
Improvement in toilet transferring	77.5	76.4	0.9% above national avg.
Improvement in bowel incontinence	72.7	70.4	2.3% above national avg.
Improvement in confusion frequency	69.2	55.7	14.5% above national avg.

PRESS GANEY REPORT	CMS Target Percentage	BLUE at or above target GREEN target within 5 pts. ORANGE opportunity for improvement				
Home Health HHCAHPS	Fiscal Year	Q4 21	Q1 22	Q2 22	Q3 22	Rolling YTD AVG
Patients who reported their HH team gave care in a compassionate way	88	84.4	86.3	85.6	87.8	86
Patients who reported that their home health team communicated well with them	85	81.7	87.3	86.6	89.2	86.2
Patients who reported that their HH team discussed meds, pain and home safety with them	83	63.7	84.9	79.1	82.5	78.4
Patients who gave their HH agency a 9 or 10	84	75	90.5	93.3	93.8	88.2
Patients who reported YES, they would definitely recommend HH Agency	78	81.3	71.4	86.7	84	80.9

HOME HEALTH OVERVIEW

Strengths

- HHCAHPS: **Improvement in 4 out of 5 indicators.**
 - ❖ Agency exceeds national averages for:
 - Rate Agency 0-10
 - Recommend Agency
 - Communication between Providers and Patients
 - Specific Care Issues

CMS Star Ratings

- ❖ **4 Stars for Patient Experience**
- ❖ 2.5 for Quality – Opportunity for improvement, attributable to low census and therefore low survey returns.

CMS Quality Indicators

- ❖ 11 of 12 quality indicators are either **above or at the National Average.**

6.2 ENVIRONMENT OF CARE





Quality

KEY QUALITY DRIVER: Improve negatively performing trends



People

KEY PEOPLE DRIVER: Keep our employees and patients safe



Finance

KEY FINANCE DRIVER: Reduce the direct, indirect and total occupational injury cost

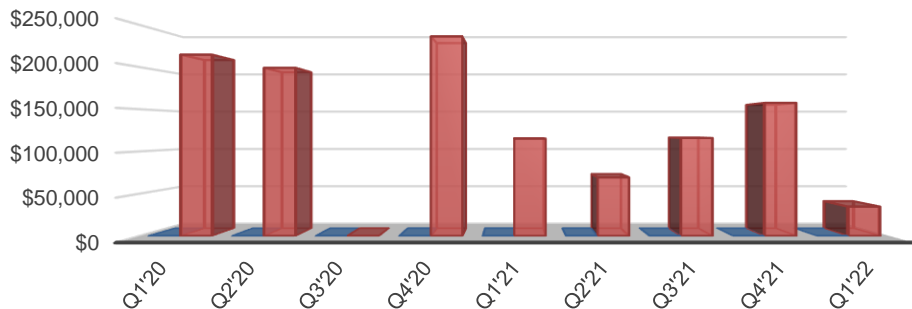
QUARTERLY ENVIRONMENT OF CARE REPORT TO THE QUALITY ASSESSMENT AND OVERSIGHT COMMITTEE

Q1CY22

ENVIRONMENT OF CARE PERFORMANCE REPORT – PI INITIATIVE

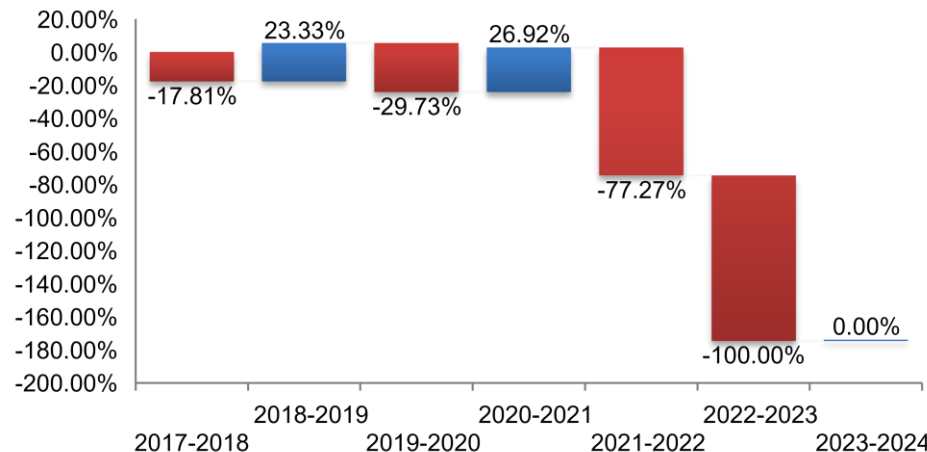
(REDUCE PATIENT HANDLING INJURY BY 10% WHEN COMPARED TO THE PREVIOUS YEAR)

QUARTERLY OVEREXERTION INJURIES

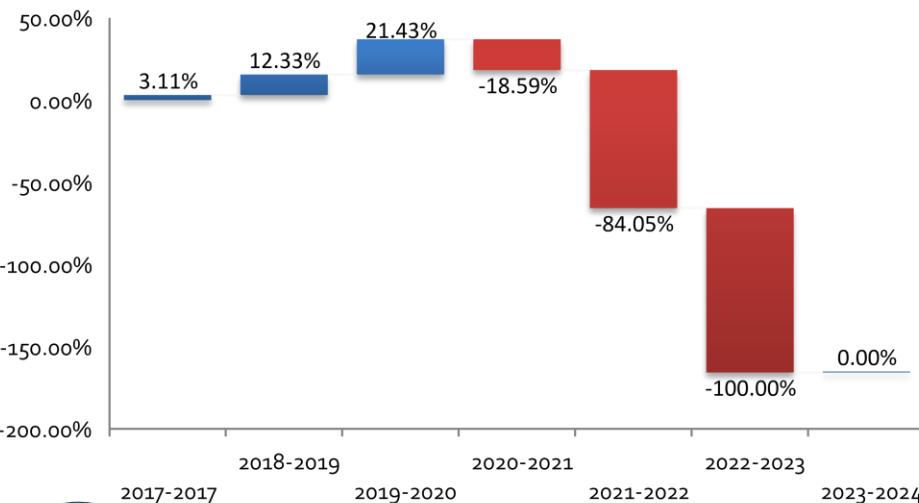


	Q1'20	Q2'20	Q3'20	Q4'20	Q1'21	Q2'21	Q3'21	Q4'21	Q1'22
AMT	14	14	5	19	25	24	13	12	9
COST	\$214,586	\$198,994	\$24.00	\$236,214	\$115,002	\$69,355	\$115,875	\$157,439	\$34,792

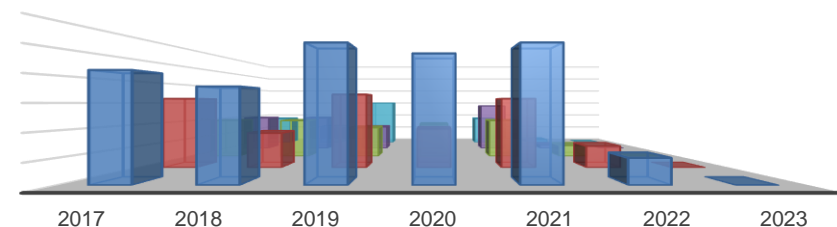
BH YR - YR INJURY %AGE DIFFERENCE



BH YR - YR COST %AGE DIFFERENCE



BH PATIENT HANDLING INJURY BY TASK



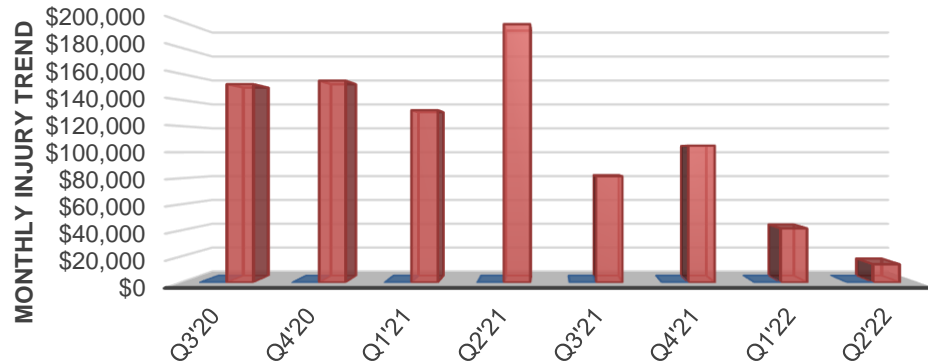
	2017	2018	2019	2020	2021	2022	2023
Reposition	21	18	26	24	26	5	0
Transfers	16	8	17	9	16	5	0
Lifts	10	10	8	9	10	3	0
Ambulation	10	10	7	6	14	1	0
Patient Contact	9	6	15	2	9	1	0



ENVIRONMENT OF CARE PERFORMANCE REPORT – PI INITIATIVE

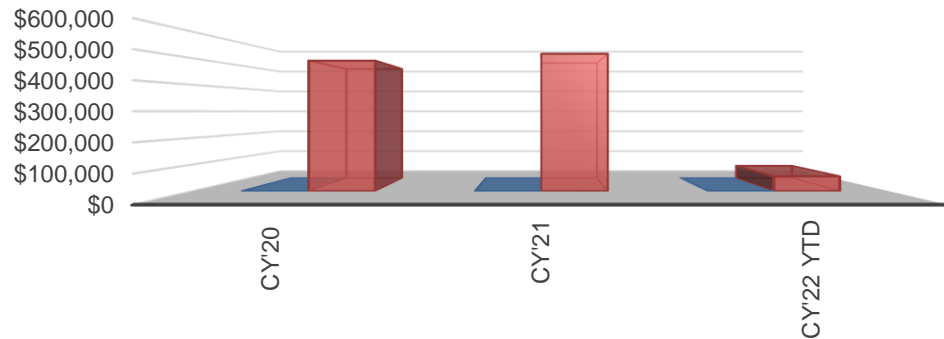
(REDUCE SLIP, TRIP AND FALL INJURIES BY 10% COMPARED TO PREVIOUS YEAR)

QUARTERLY SLIP & FALL INJURIES



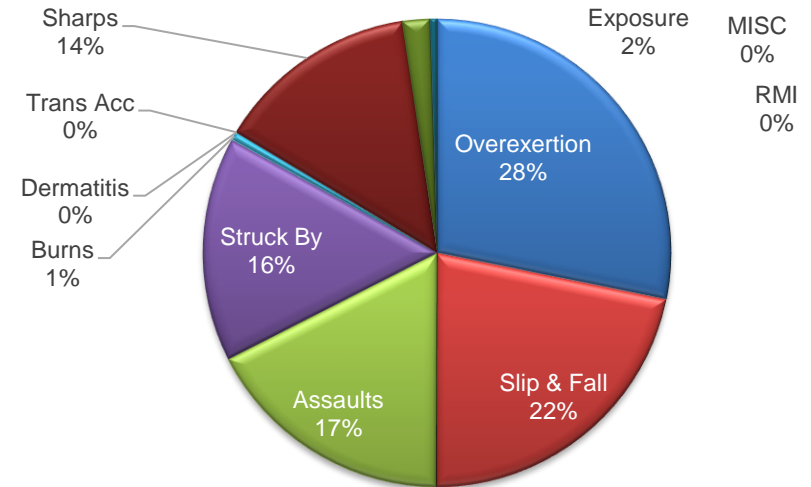
	Q3'20	Q4'20	Q1'21	Q2'21	Q3'21	Q4'21	Q1'22	Q2'22
AMT	21	12	29	21	17	15	17	2
COST	\$152,039	\$154,746	\$132,154	\$197,877	\$81,569	\$105,068	\$41,559	\$14,024

ANNUAL SLIP & FALL INJURIES

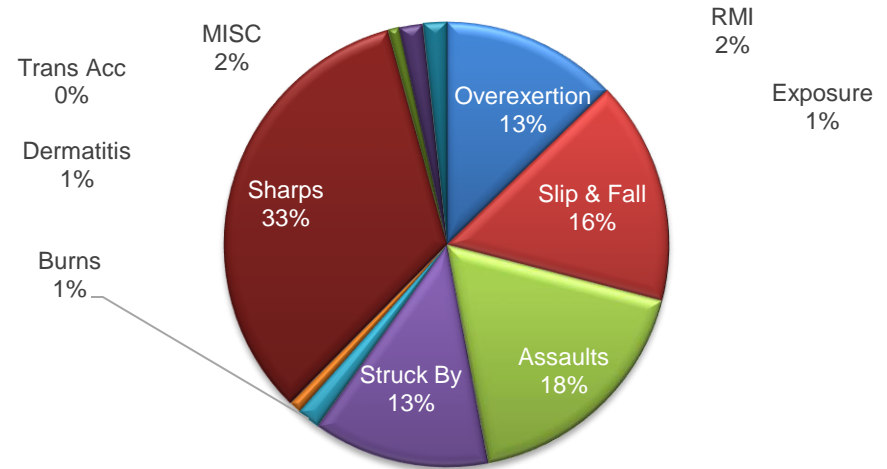


	CY'20	CY'21	CY'22 YTD
AMT	70	82	19
COST	\$490,707.00	\$516,668.97	\$55,583.00

CY'22 Dir YTD COST BY INJURY TYPE



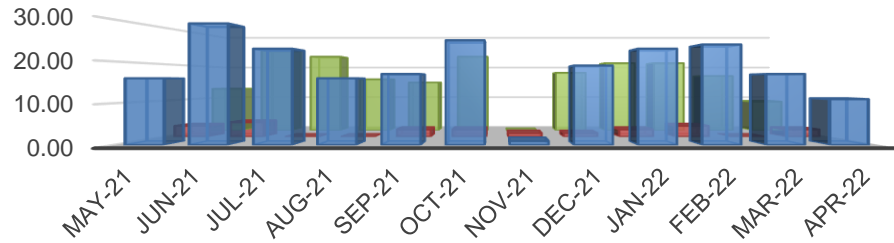
CY'22 YTD INJURY BY TYPE



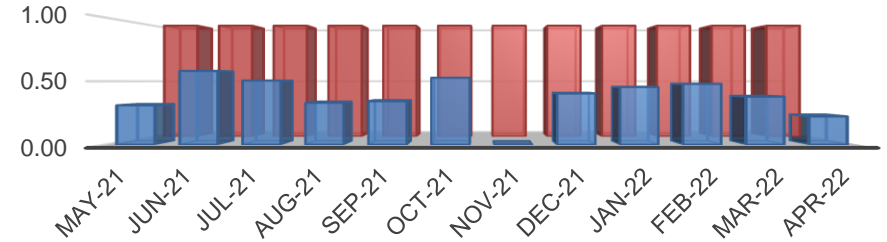
ENVIRONMENT OF CARE PERFORMANCE REPORT – PI INITIATIVE

REDUCE MISSING PATIENT PROPERTY BY 10% COMPARED TO PREVIOUS CALENDAR YEAR

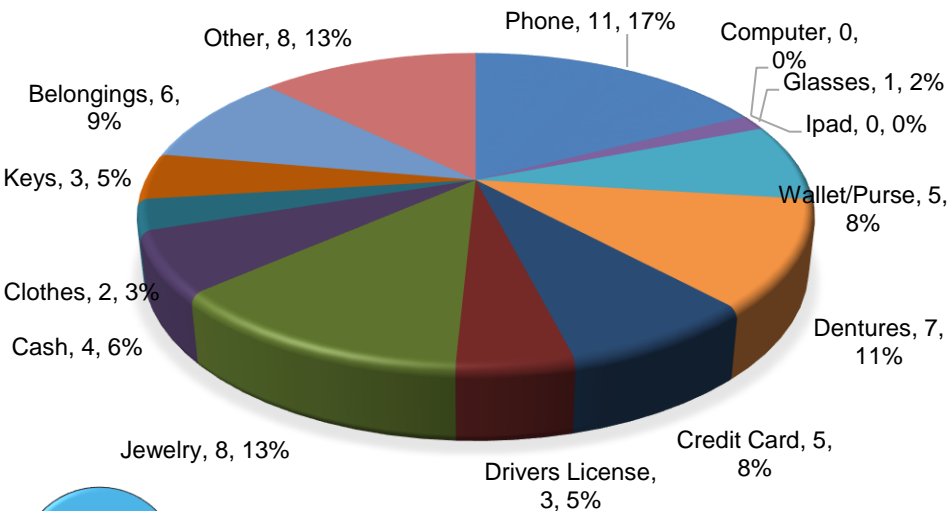
ORG-WIDE MISSING PATIENT'S PROPERTY



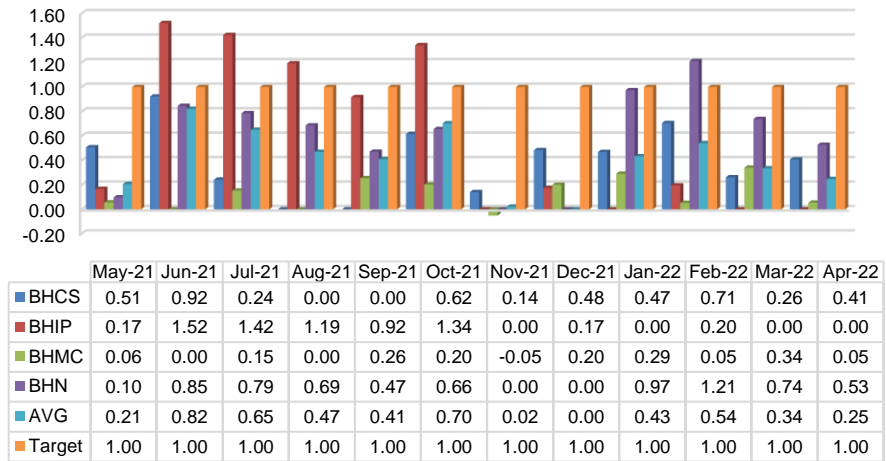
MISSING PATIENT'S PROPERTY RATE



BH MISSING PATIENTS' PROPERTY CY'22



REGIONAL MONTHLY MISSING PATIENT'S PROPERTY PERFORMANCE RATE



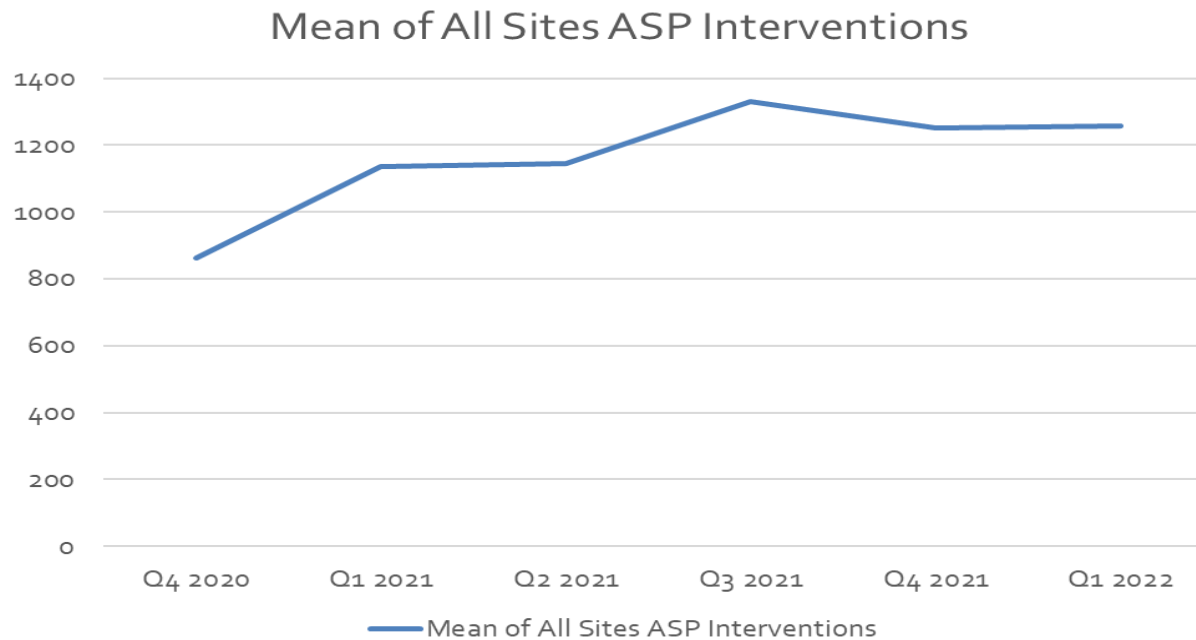
6.3 ANTIMICROBIAL STEWARDSHIP



BROWARD HEALTH PHARMACY ANTIMICROBIAL STEWARDSHIP

Intervention Type	2 nd Quarter 2021	3 rd Quarter 2021	4 th Quarter 2021	1 st Quarter 2022	12 Month Total
De-escalation	244	341	261	276	1,122
Dose adjustment	2,817	2,902	2,945	2,765	11,429
Bug-Drug mismatch	59	74	78	90	301
IV to PO conversion	166	456	260	424	1,306
Therapeutic duplication	64	88	92	69	313
Totals	3,350	3,861	3,636	3,624	14,471

QUARTERLY COMPARISON



ANTIMICROBIAL STEWARDSHIP INITIATIVES

2022-2023
Updated Antibigram, Adult and Pediatric Specific
MRSA ICU Decolonization Protocol
Implementation of Extended Infusion Protocols to include Cefepime in addition to Meropenem and Piperacillin/tazobactam
Implementation of Pharmacist Driven Procalcitonin Protocol-All 4 Sites
Implementation Antiviral and Antifungal indication and duration requirement
Continued Engagement of C. Diff Task Force with Clinical Epidemiology
Evaluation of New Formulary Gram Negative Agents and Place in Therapy
Addition of CPOE based restriction Criteria for All Restricted Antimicrobials

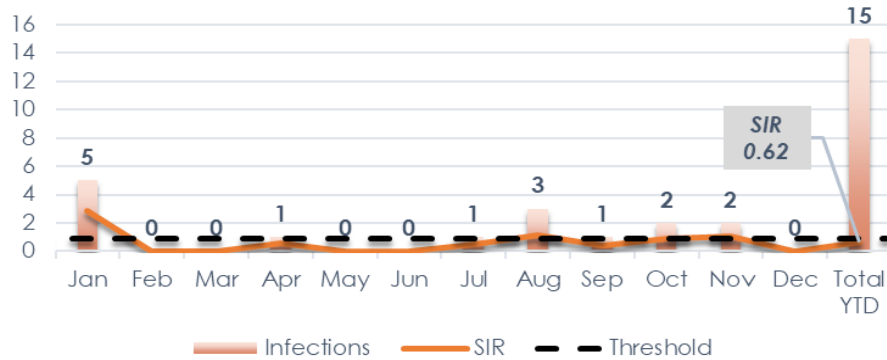
6.4 INFECTION PREVENTION



CLABSI ~ ALL REPORTING UNITS

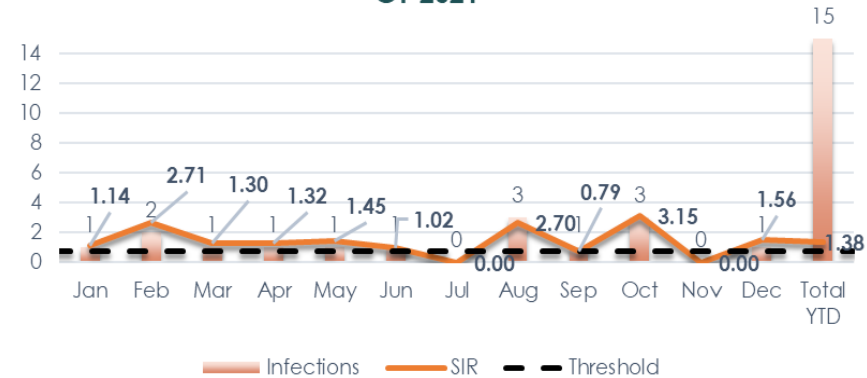
BHMC NHSN - CLABSI
SIR ~All Reporting Units
CY 2021

Threshold 0.687
Benchmark 0



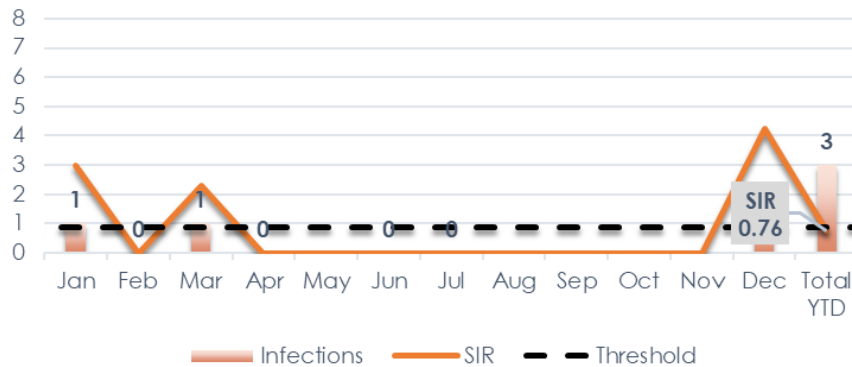
BHN NHSN - CLABSI
SIR ~All Reporting Units
CY 2021

Threshold 0.687
Benchmark 0



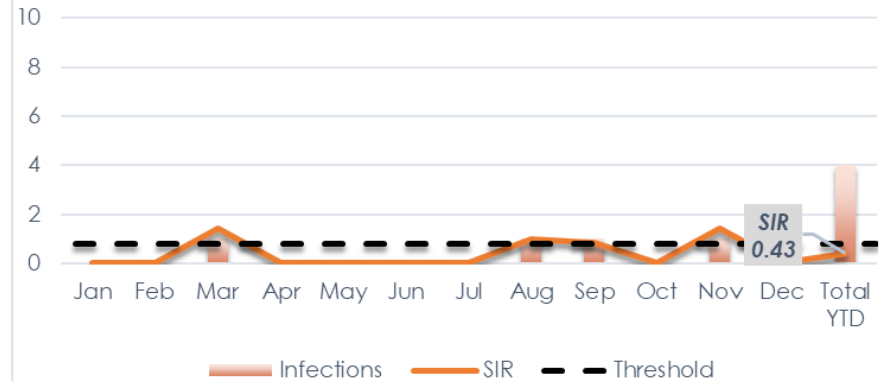
BHIP NHSN - CLABSI
SIR ~All Reporting Units
CY 2021

Threshold
Benchmark 0



BHCS NHSN - CLABSI
SIR ~All Reporting Units
CY 2021

Threshold 0.687
Benchmark 0

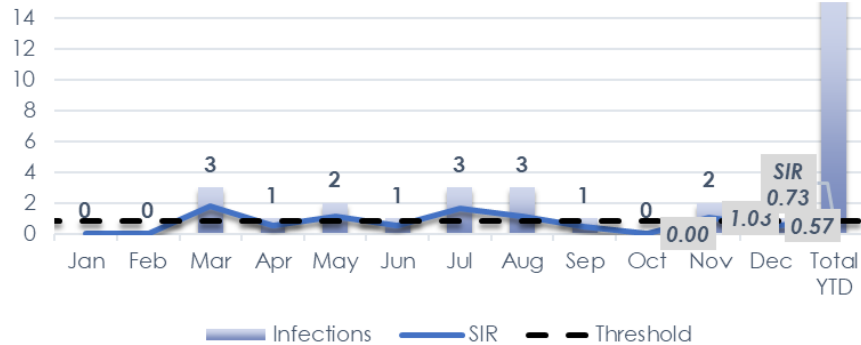


BROWARD HEALTH

CAUTI ~ ALL REPORTING UNITS

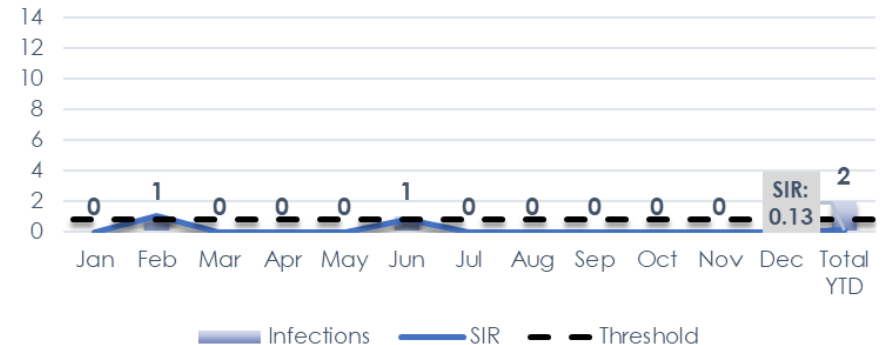
BHMC NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0



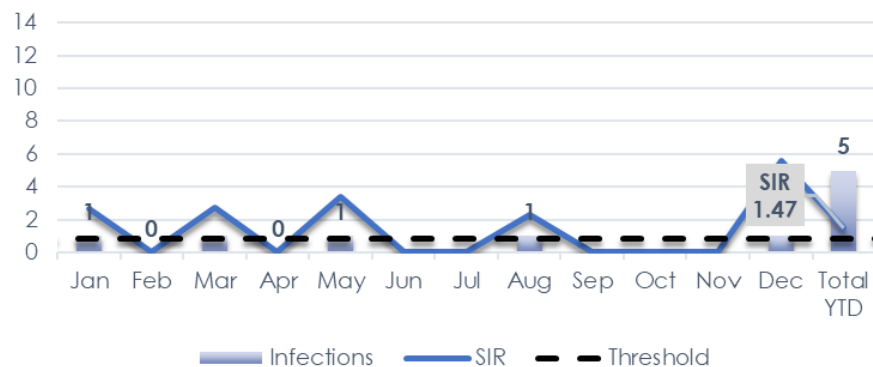
BHN NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0



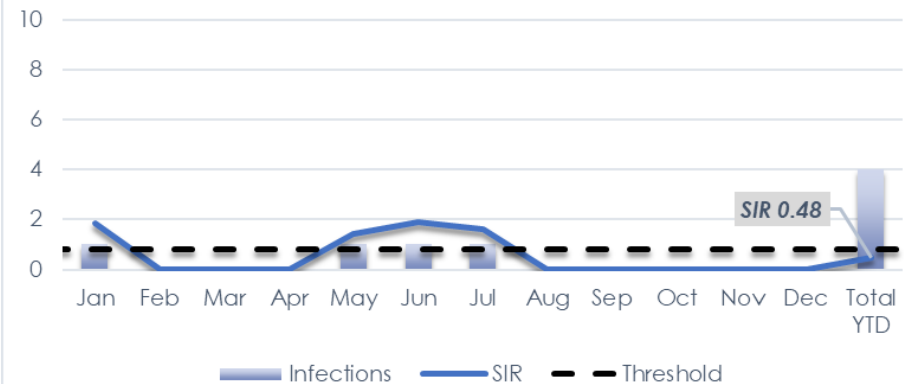
BHIP NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0

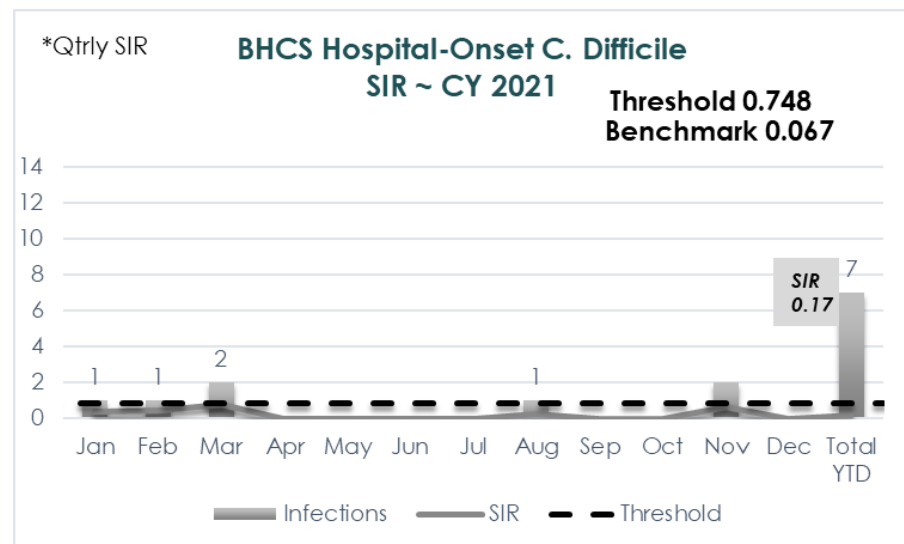
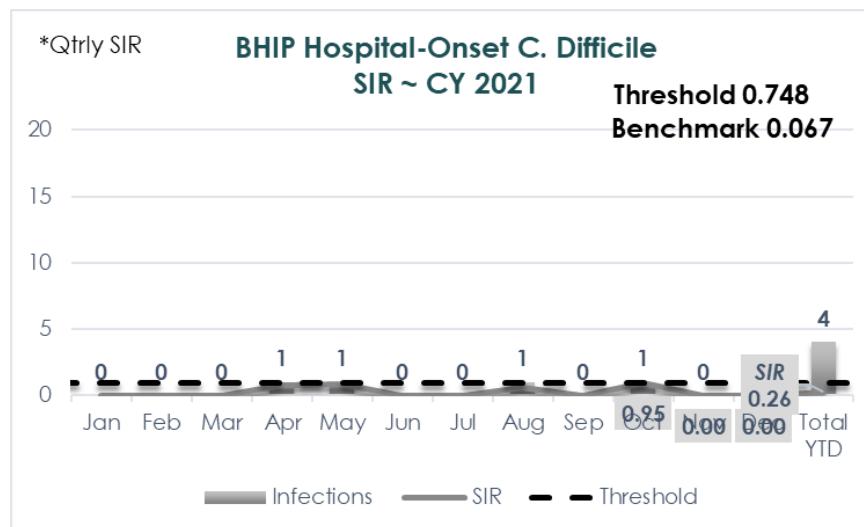
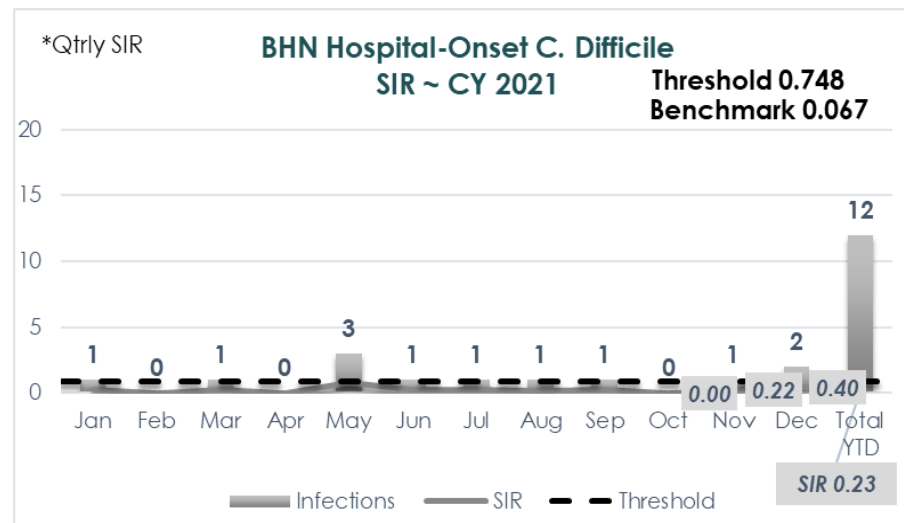
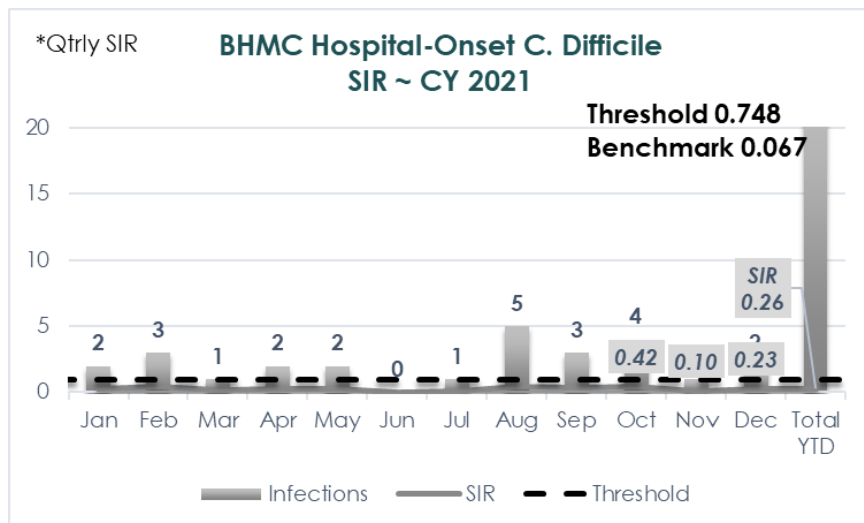


BHCS NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0

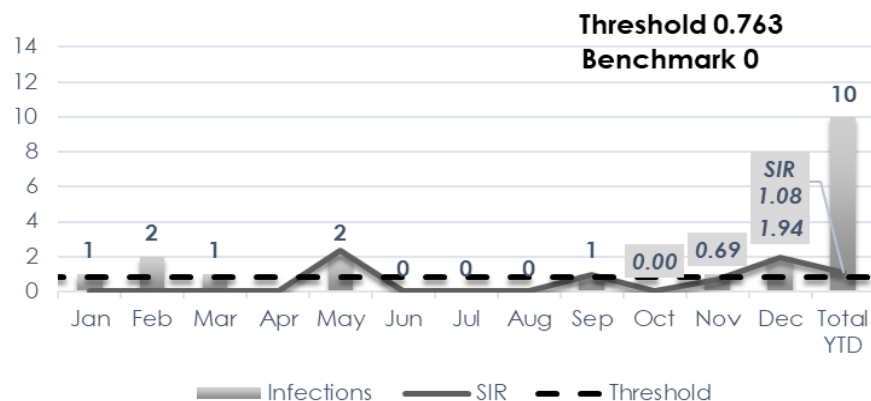


HOSPITAL-ONSET C. DIFFICILE

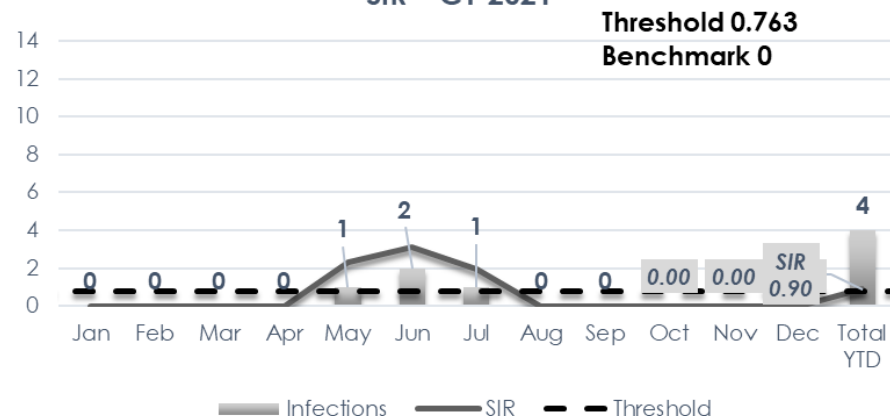


HOSPITAL-ONSET MRSA BACTEREMIA

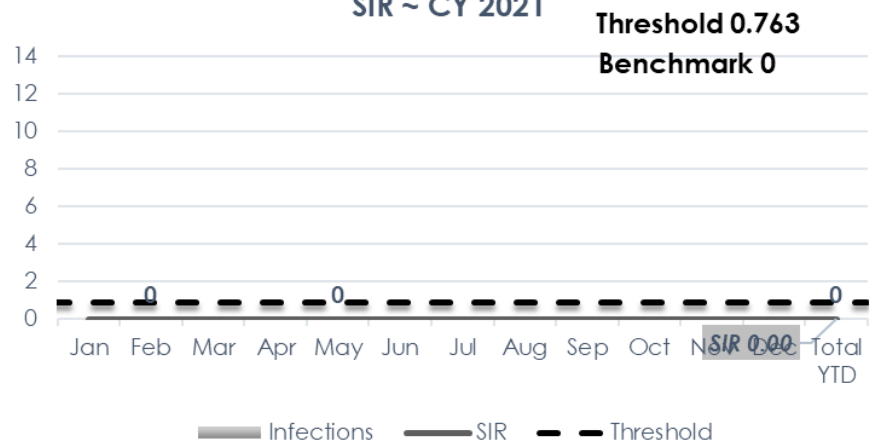
*Qtrly SIR **BHMC Hospital-Onset MRSA Bacteremia**
SIR ~ CY 2021



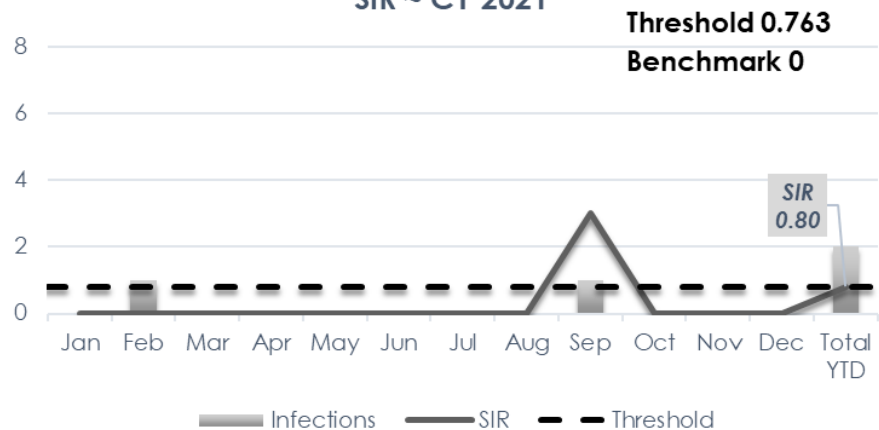
*Qtrly SIR **BHN Hospital-Onset MRSA Bacteremia**
SIR ~ CY 2021



*Qtrly SIR **BHIP Hospital-Onset MRSA Bacteremia**
SIR ~ CY 2021



*Qtrly SIR **BHCS Hospital-Onset MRSA Bacteremia**
SIR ~ CY 2021



6.5 NPSG HAND HYGIENE



NPSG OBSERVED HAND HYGIENE

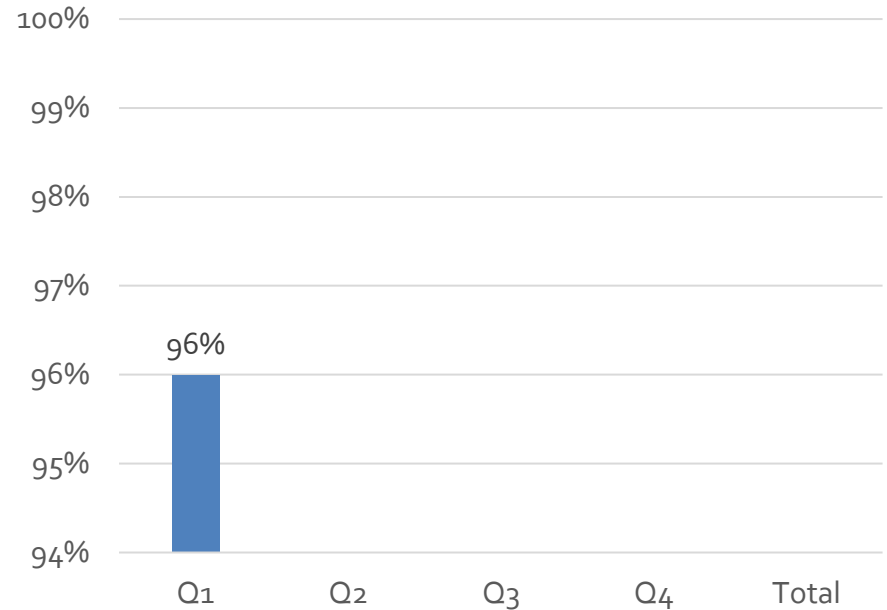
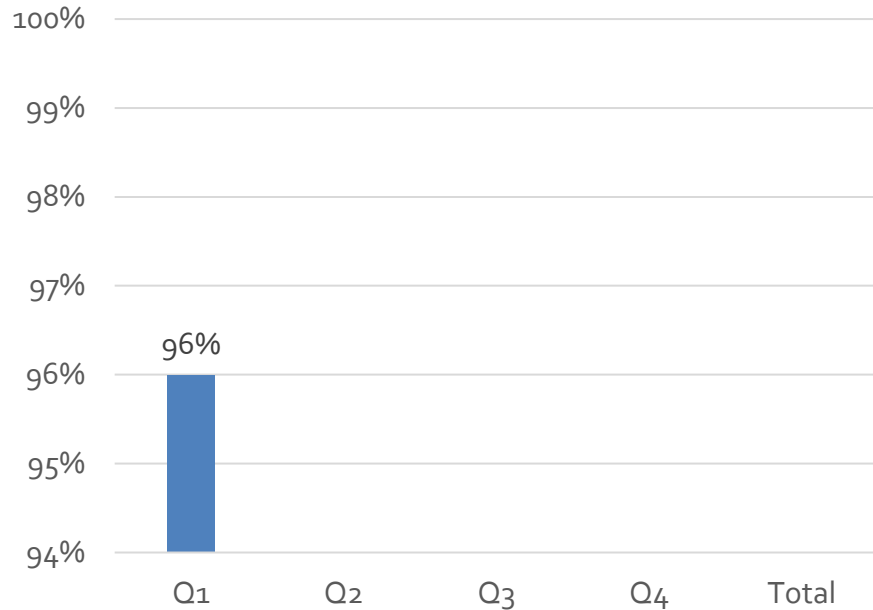
**BHN
2022**

Goal: >95%

**BHMC
2022**

2021

2021

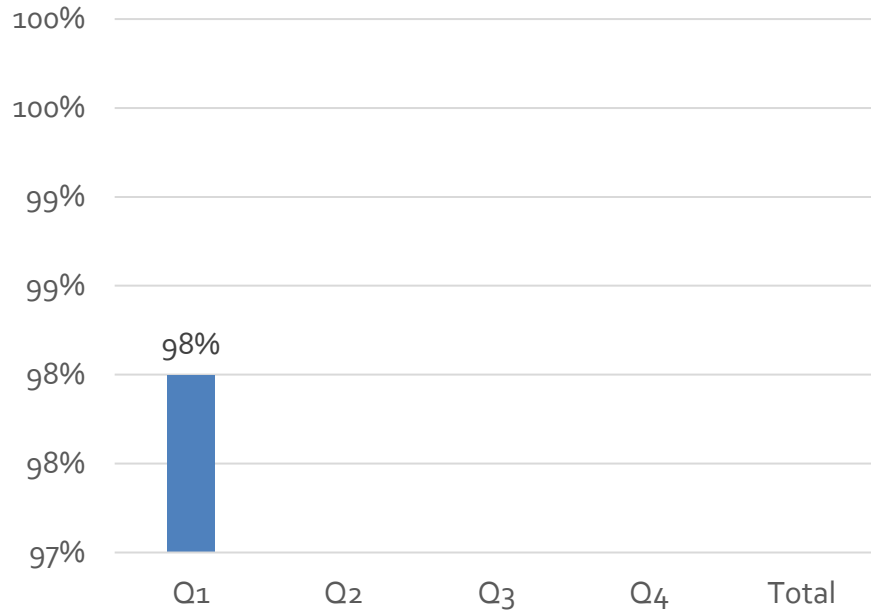


NPSG OBSERVED HAND HYGIENE

Goal: >95%

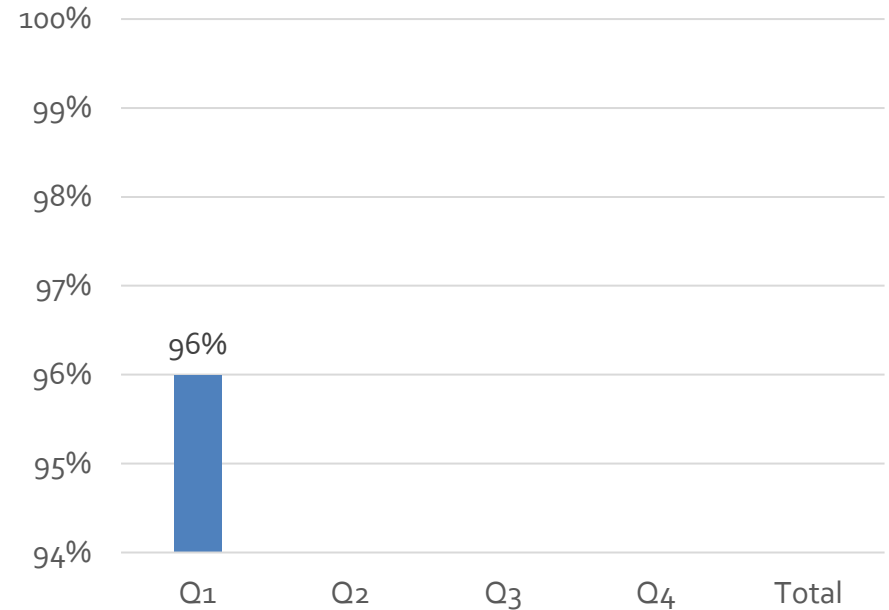
**BHIP
2022**

2021



**BHCS
2022**

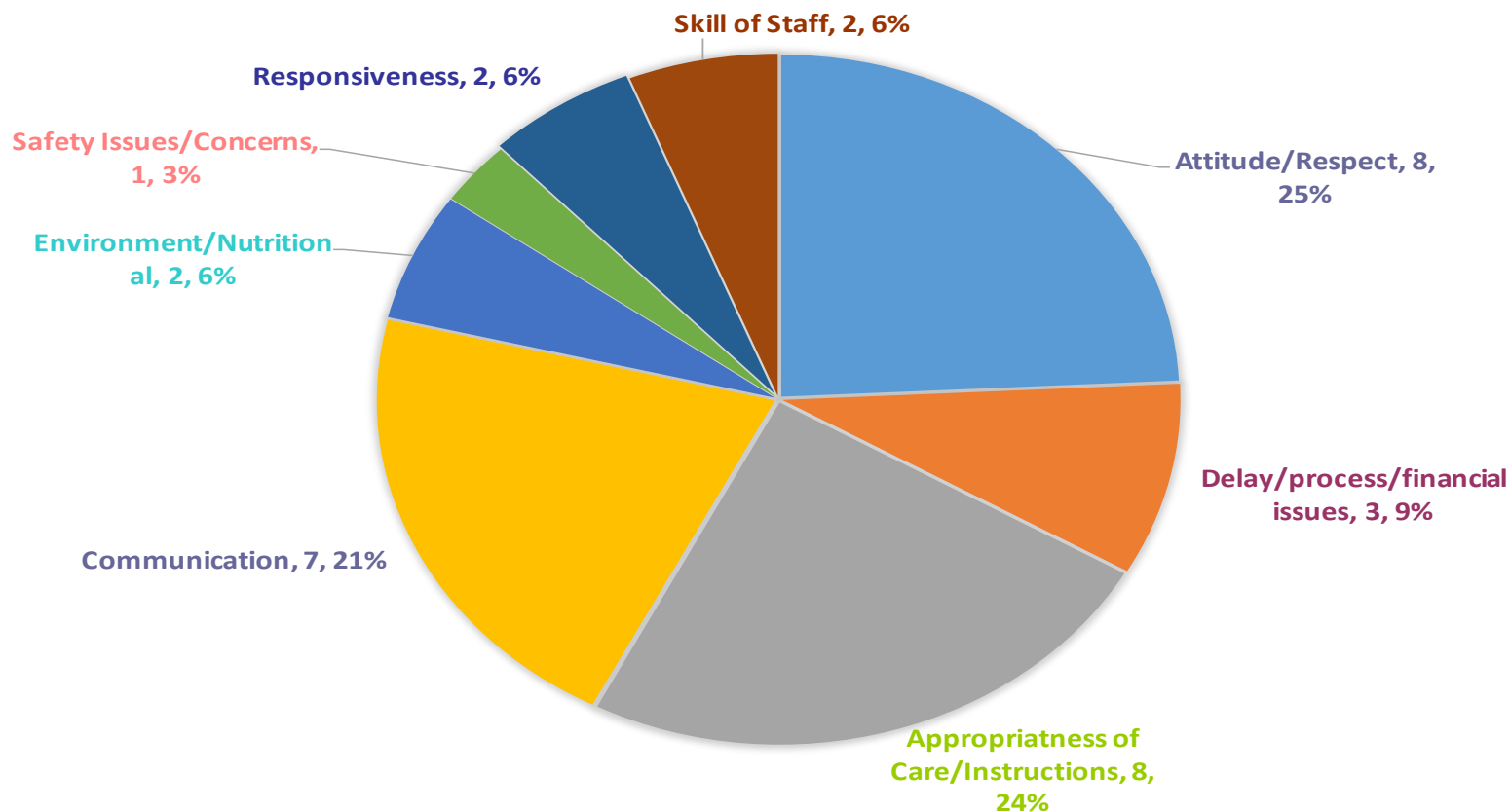
2021



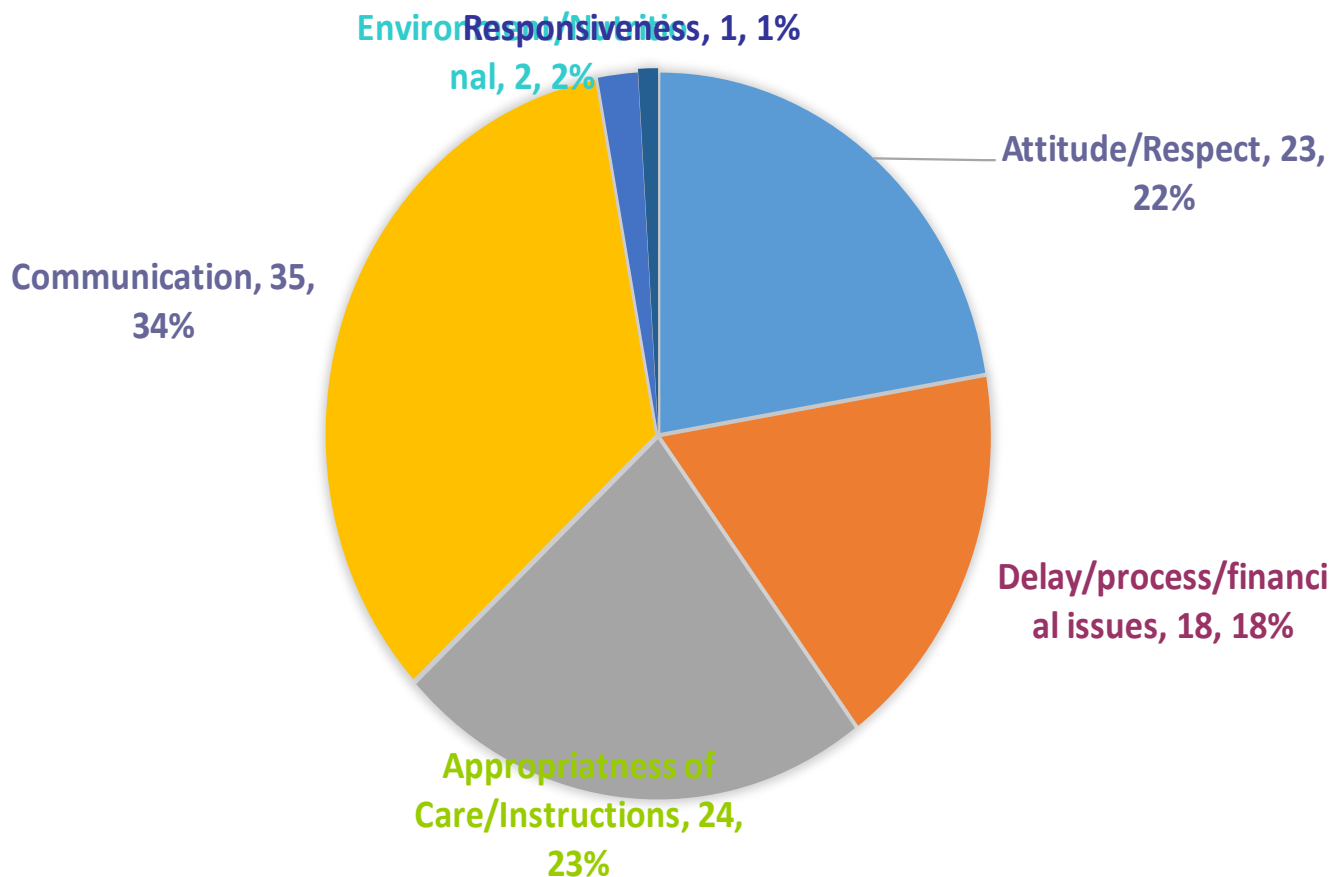
6.6 GRIEVANCES



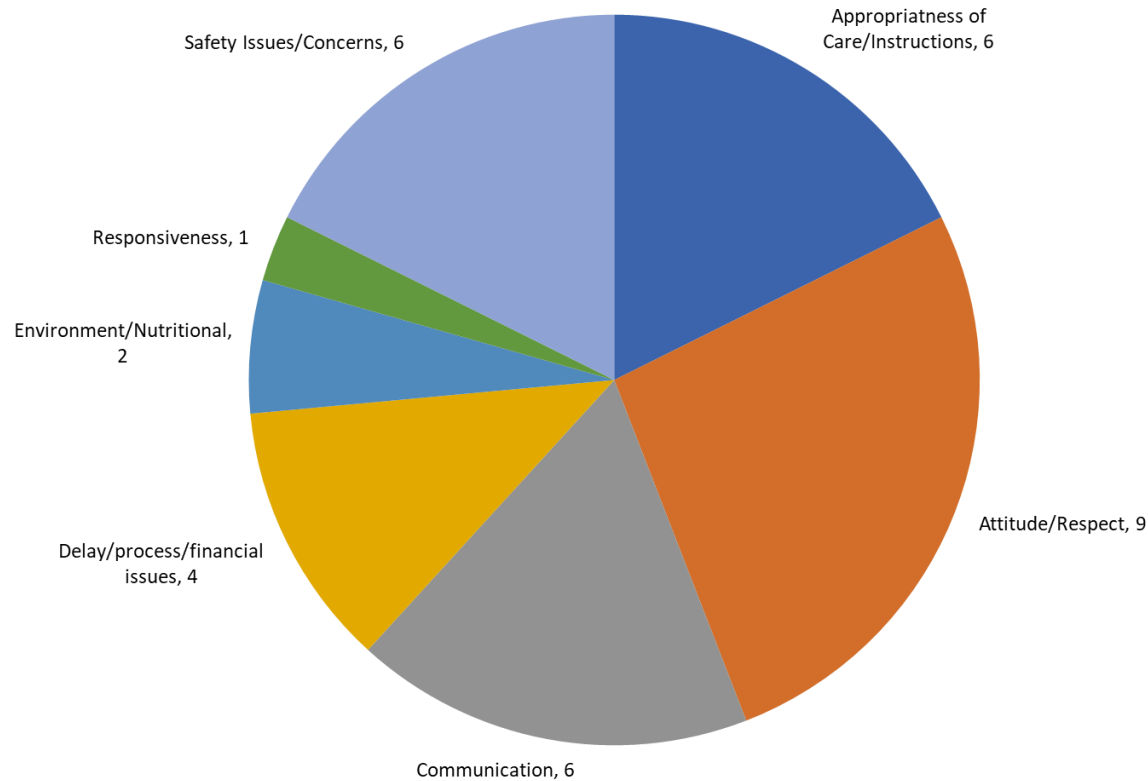
Q1 2022 BHN CAPTURED COMPLAINTS & GRIEVANCES



Q1 2022 BHCS CAPTURED COMPLAINTS & GRIEVANCES

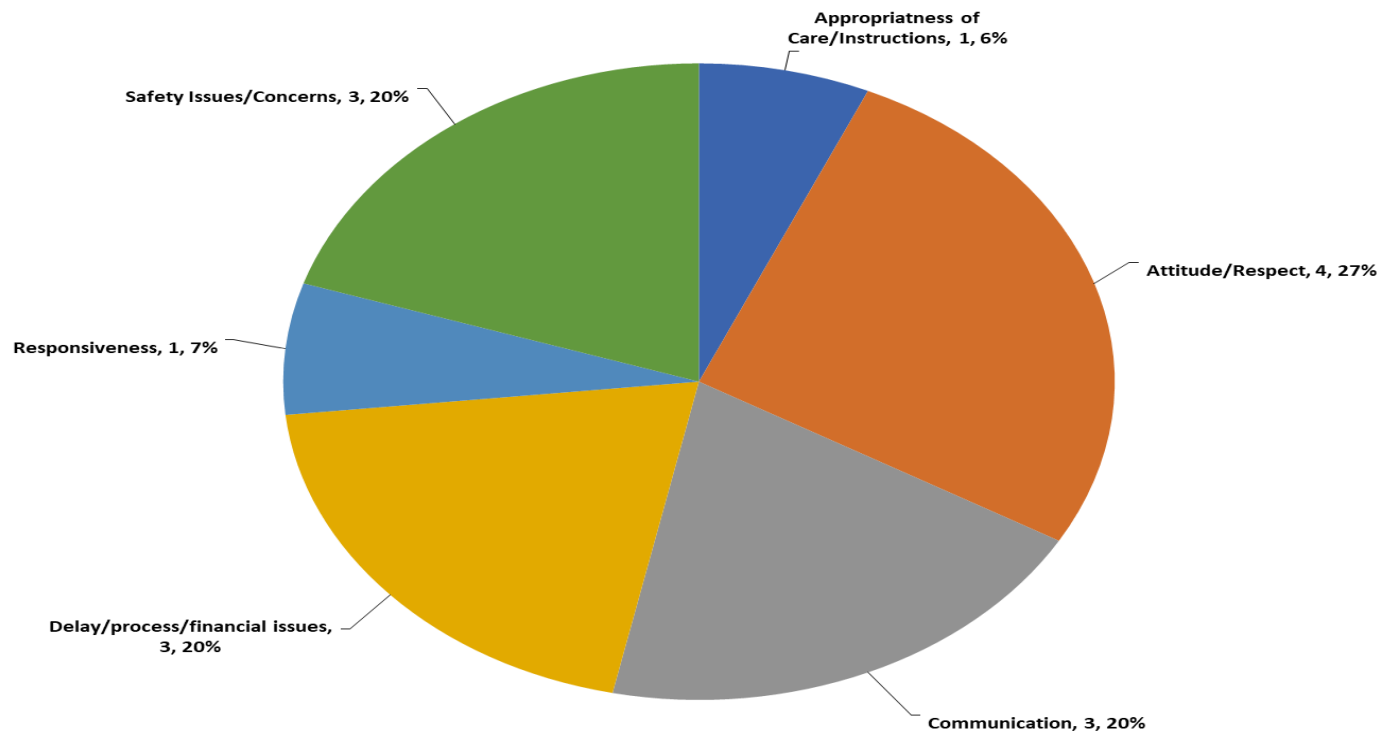


Q1 2022 BHMC CAPTURED COMPLAINTS & GRIEVANCES



Q1 2022 BHIP CAPTURED COMPLAINTS & GRIEVANCES

Count



YEAR Quarter

6.7 MEDICARE MORTALITIES

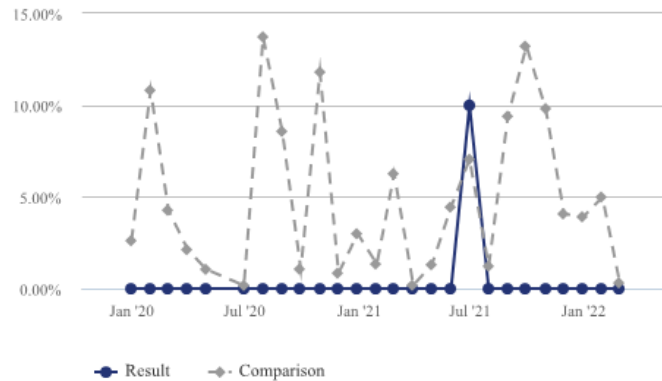


AMI Medicare Mortalities 1st Q 2022

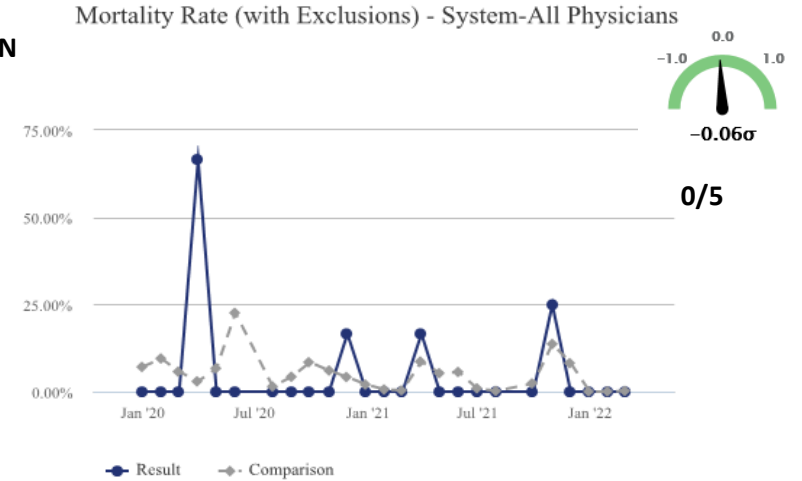
Hospital Compare CMS benchmark 13.6%

Mortality Rate (with Exclusions) - System-All Physicians

BHMC

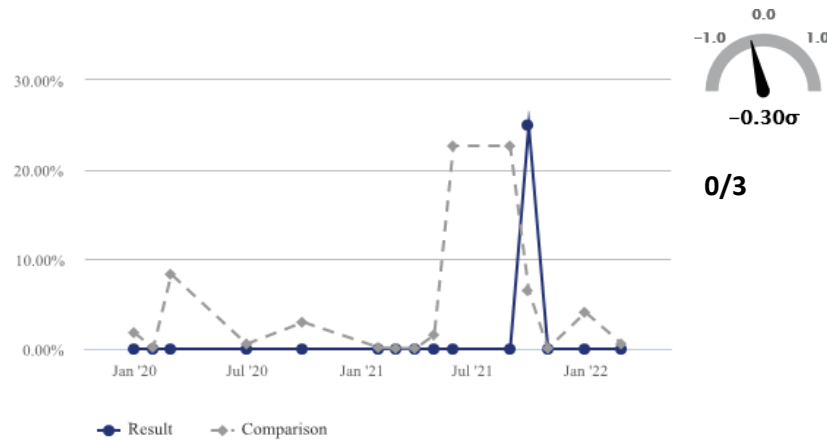


BHN

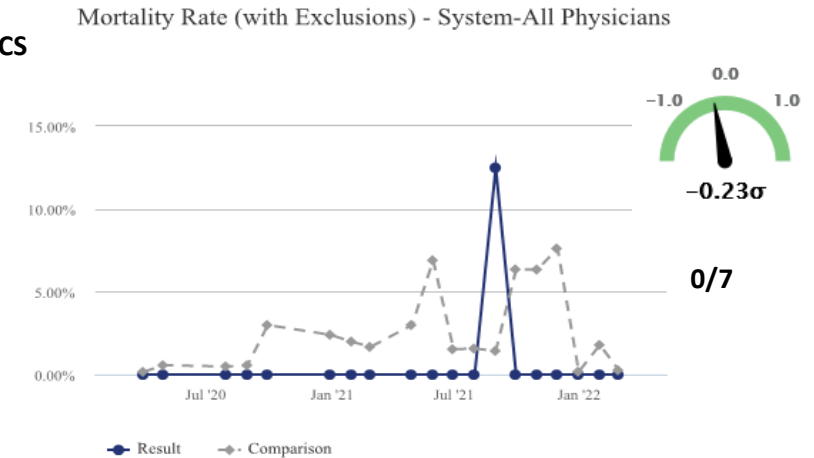


Mortality Rate (with Exclusions) - System-All Physicians

BHIP



BHCS

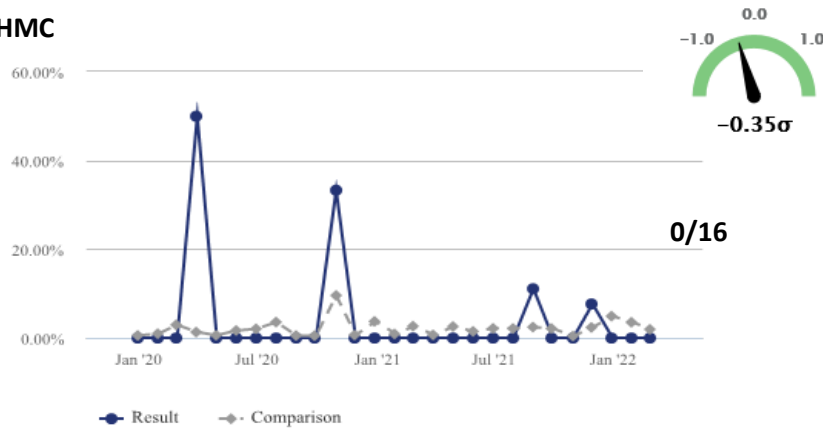


HF Medicare Mortalities 1st Q 2022

Hospital Compare CMS benchmark 12.0%

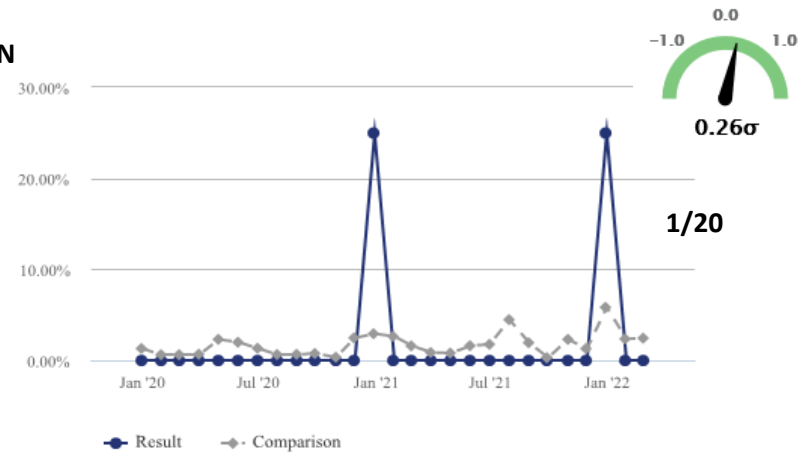
Mortality Rate (with Exclusions) - System-All Physicians

BHMC



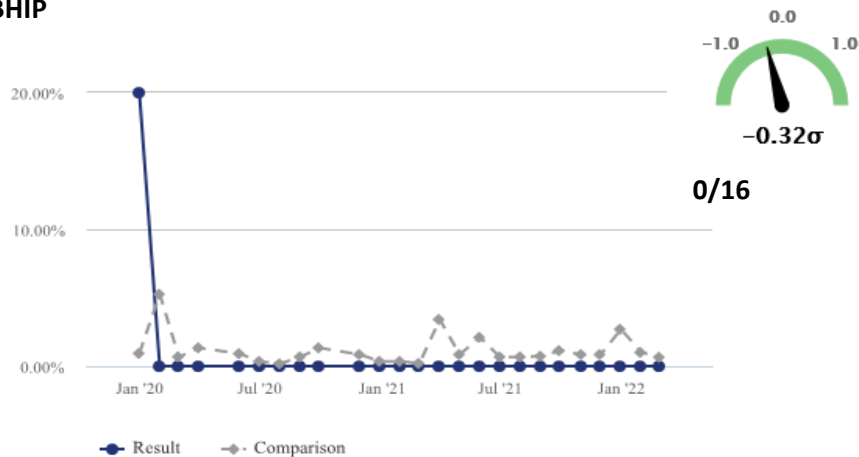
Mortality Rate (with Exclusions) - System-All Physicians

BHN



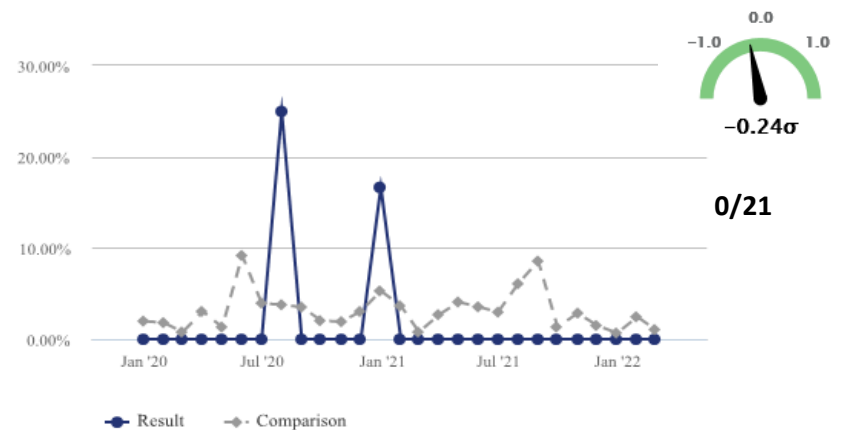
Mortality Rate (with Exclusions) - System-All Physicians

BHIP



Mortality Rate (with Exclusions) - System-All Physicians

BHCS

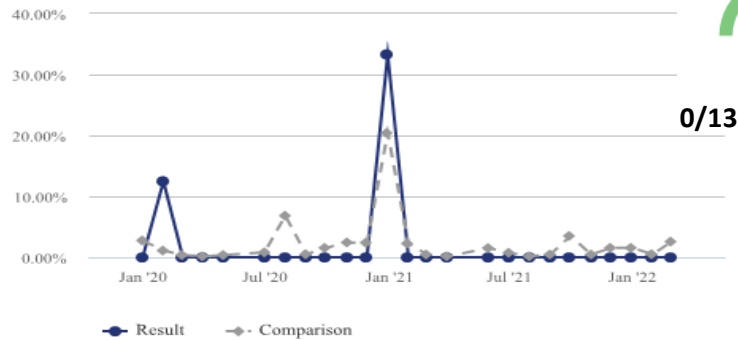


COPD Medicare Mortalities 1st Q 2022

Hospital Compare CMS benchmark 8.1%

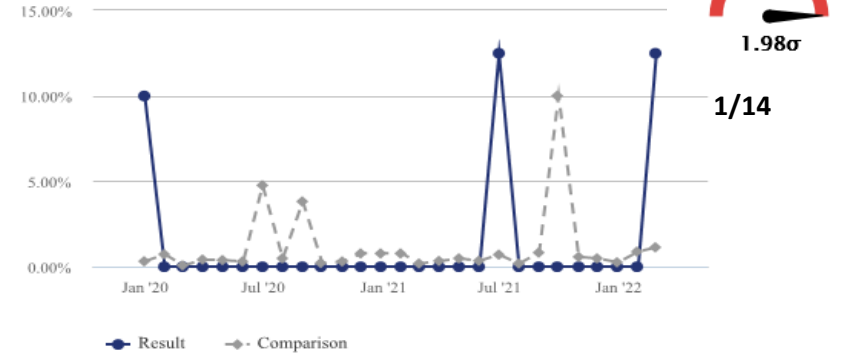
Mortality Rate (with Exclusions) - System-All Physicians

BHMC



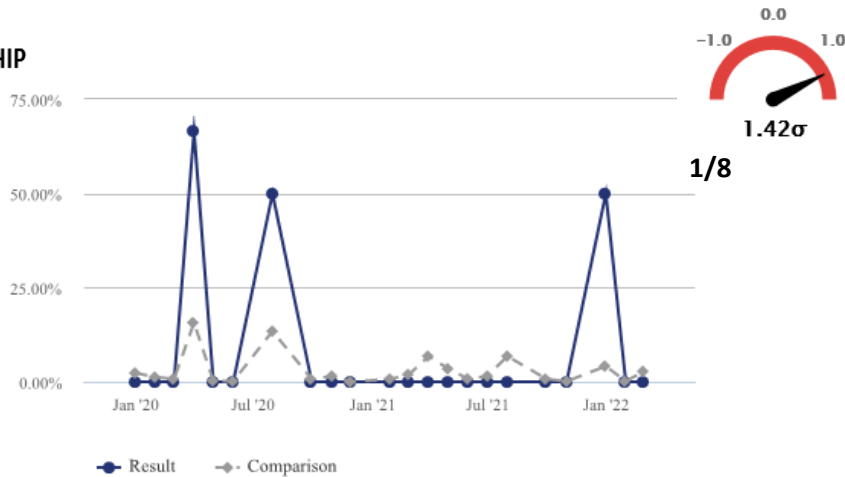
Mortality Rate (with Exclusions) - System-All Physicians

BHN



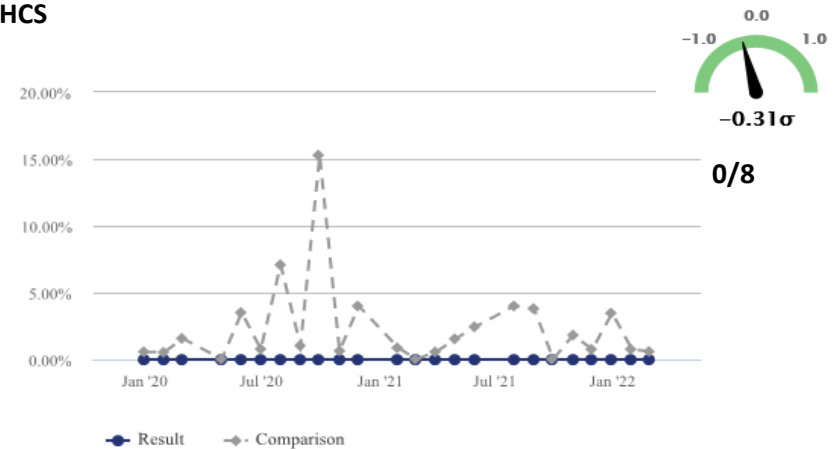
Mortality Rate (with Exclusions) - System-All Physicians

BHIP



Mortality Rate (with Exclusions) - System-All Physicians

BHCS

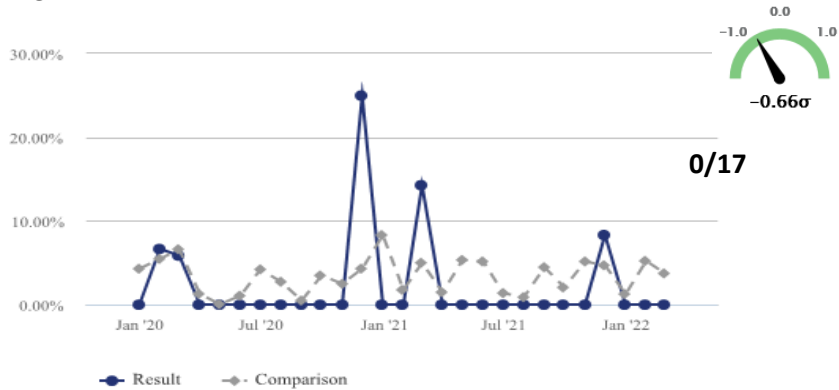


PN Medicare Mortalities 1st Q 2022

Hospital Compare CMS benchmark 16.0%

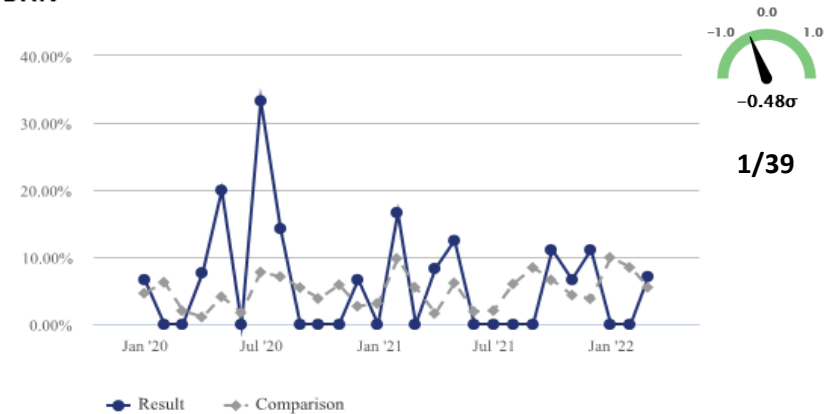
Mortality Rate (with Exclusions) - System-All Physicians

BHMC



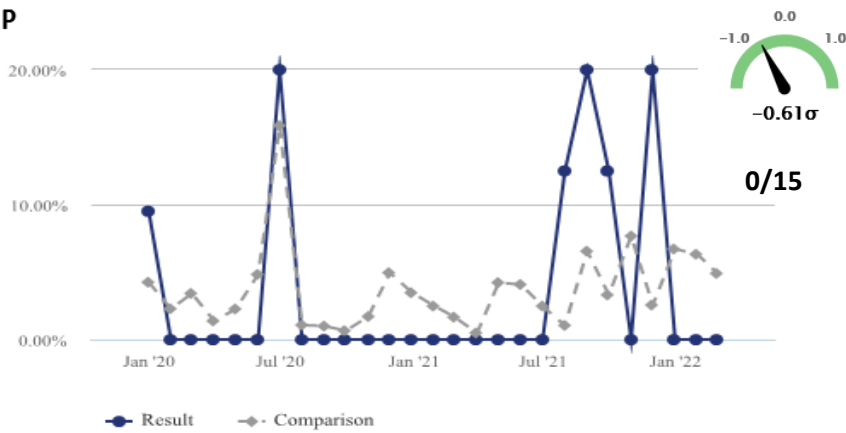
Mortality Rate (with Exclusions) - System-All Physicians

BHN



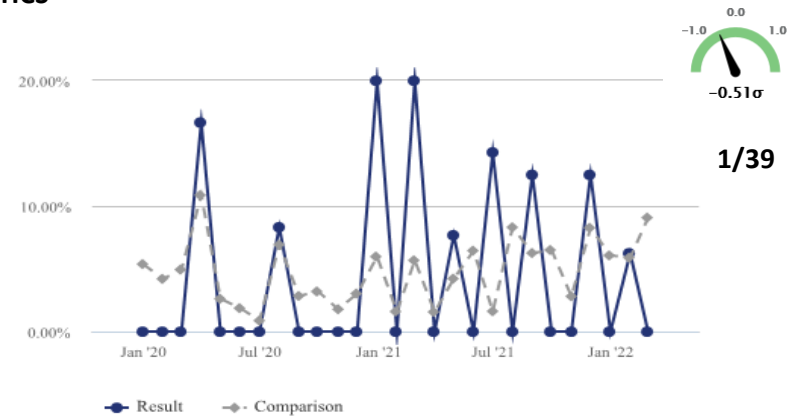
Mortality Rate (with Exclusions) - System-All Physicians

BHIP



Mortality Rate (with Exclusions) - System-All Physicians

BHCS

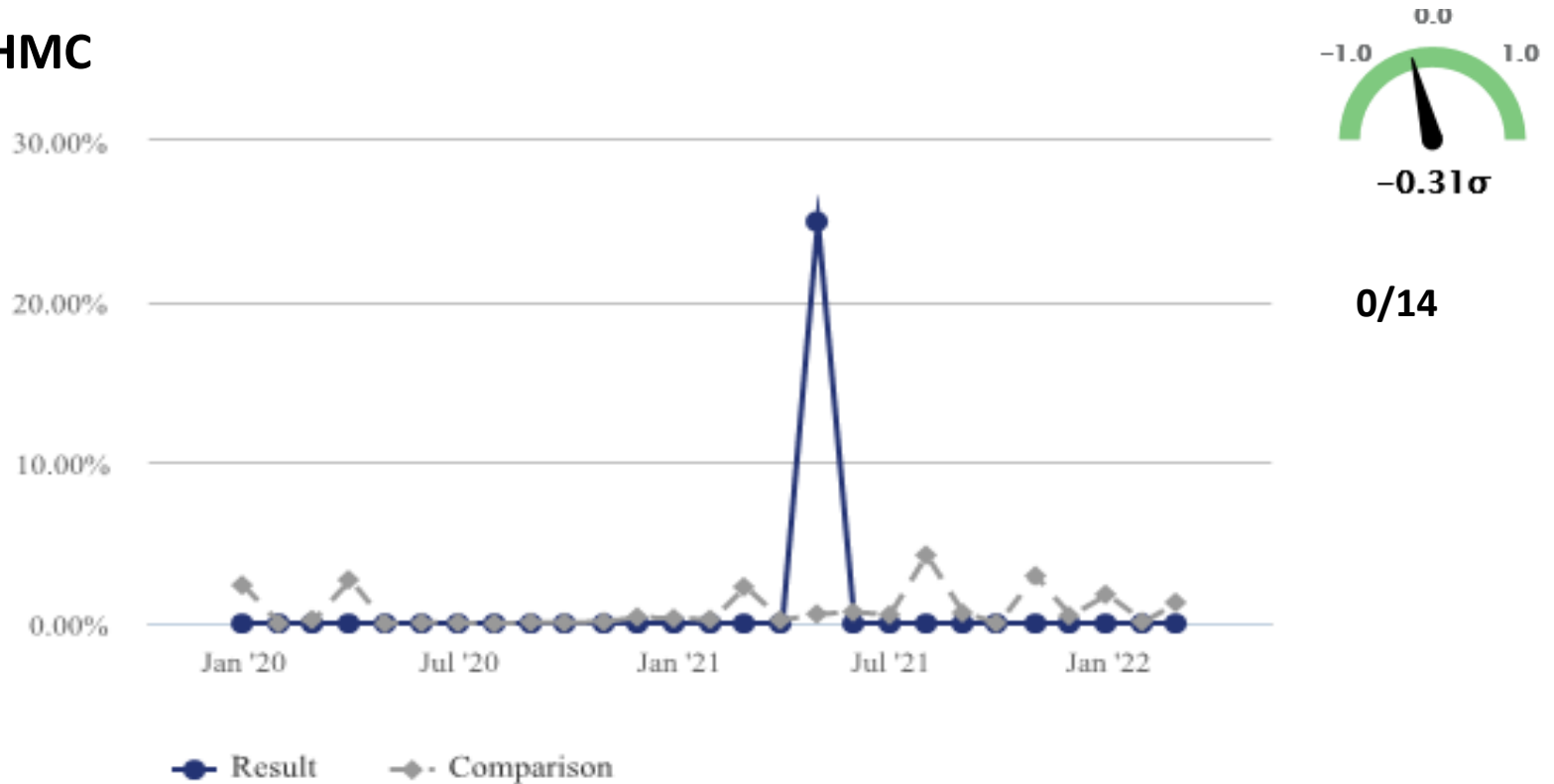


CABG Medicare Mortalities 1st Q 2022

Hospital Compare CMS benchmark 3.3%

Mortality Rate (with Exclusions) - System-All Physicians

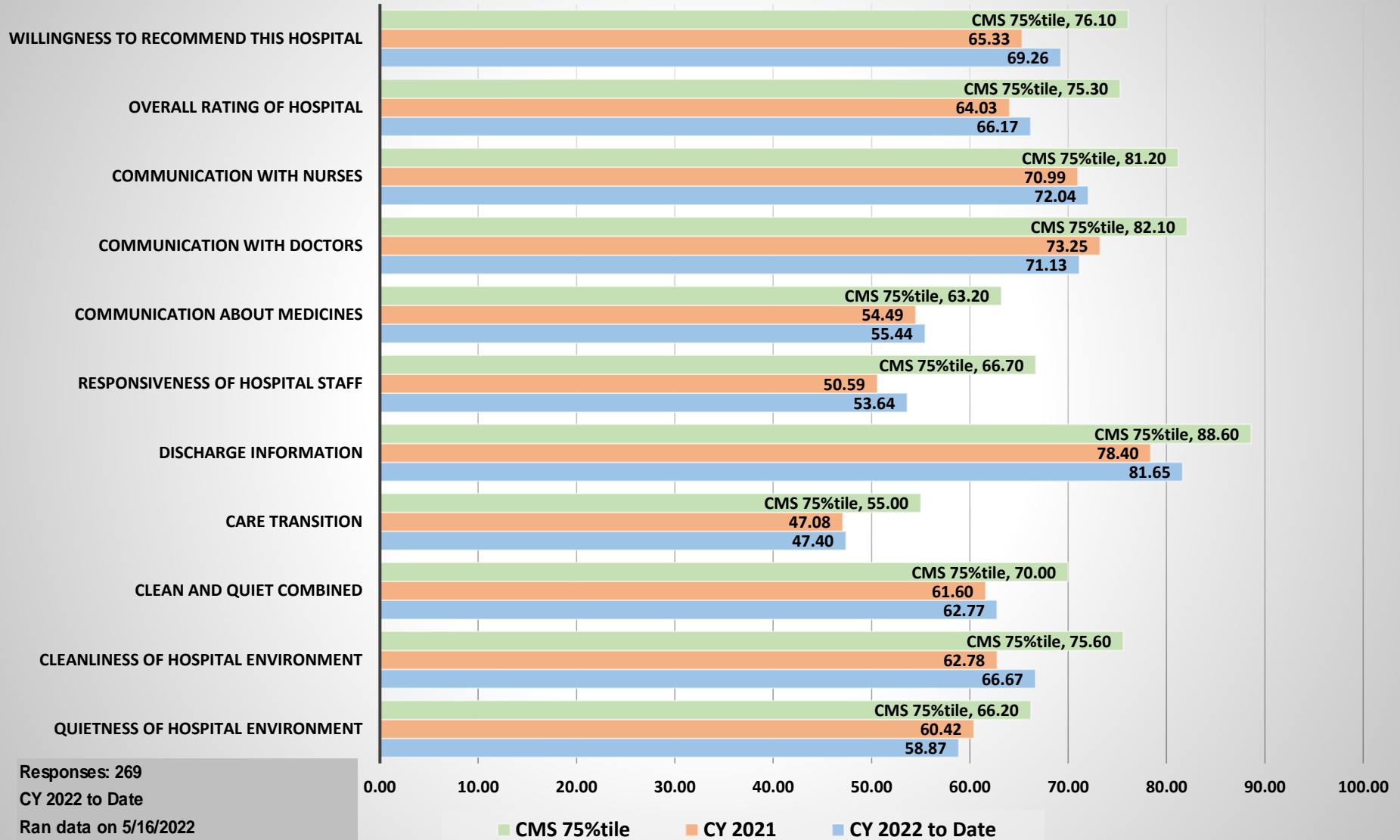
BHMC



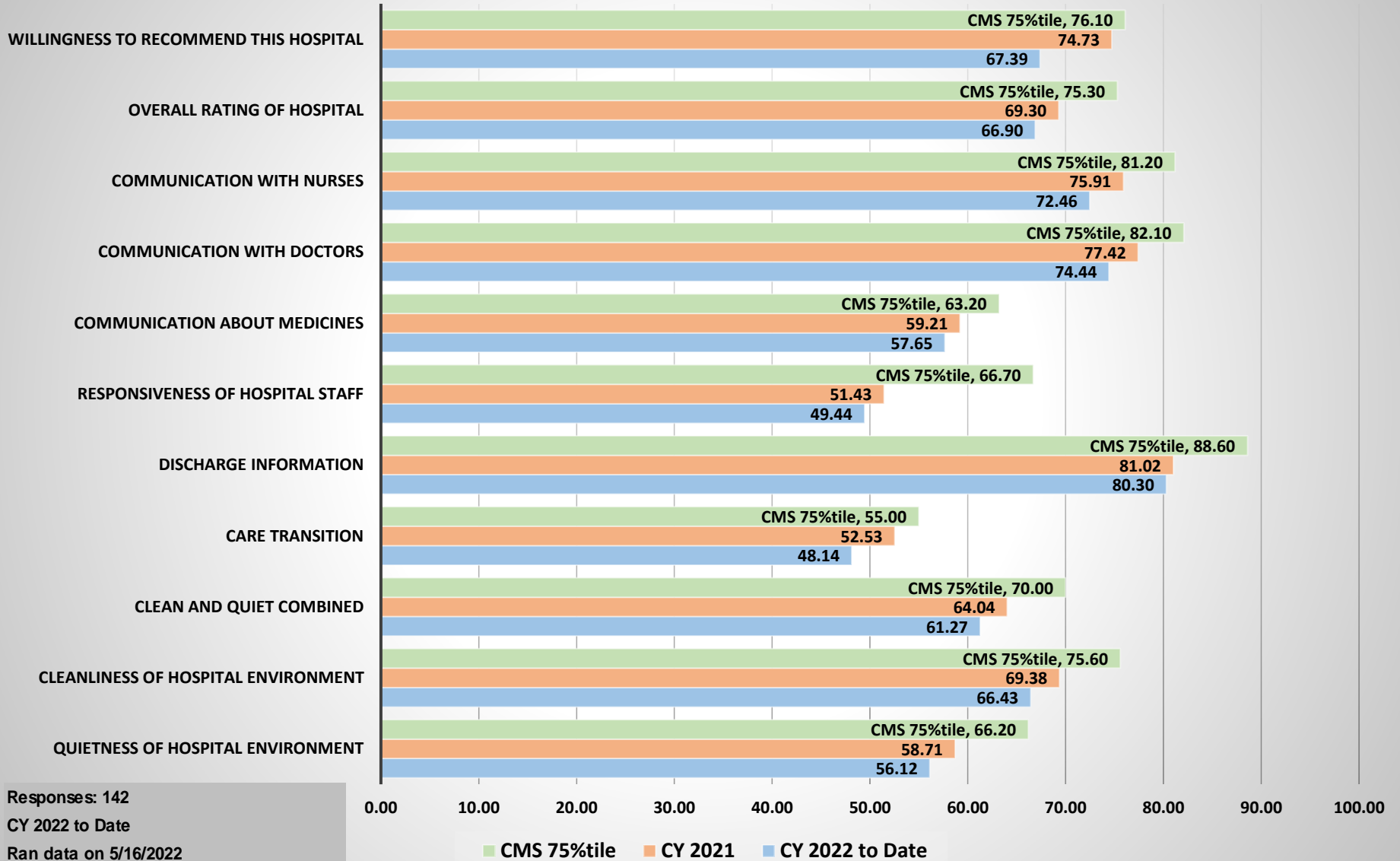
6.8 2022 HCAHPS



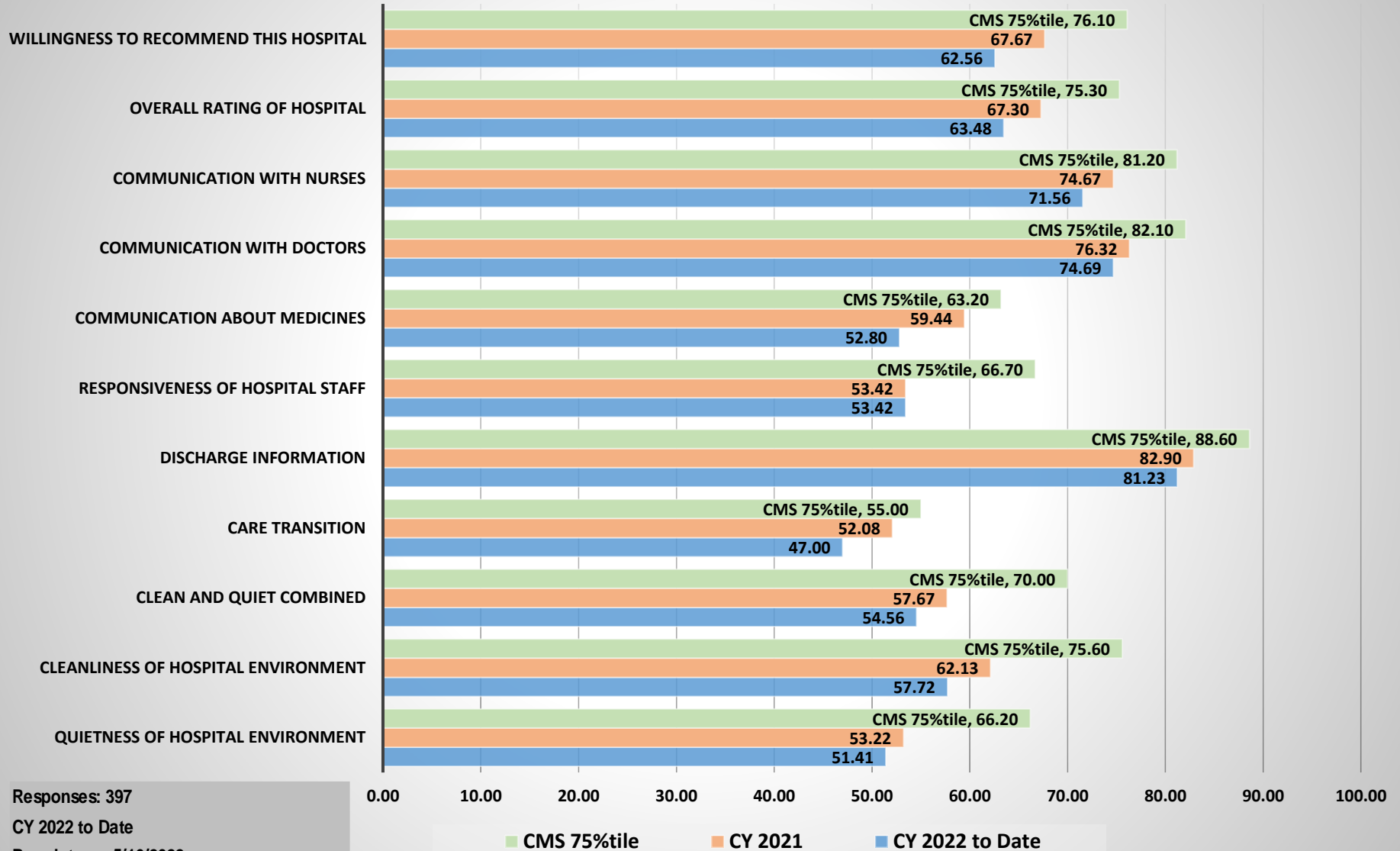
BHCS CMS HCAHPS CY 2022



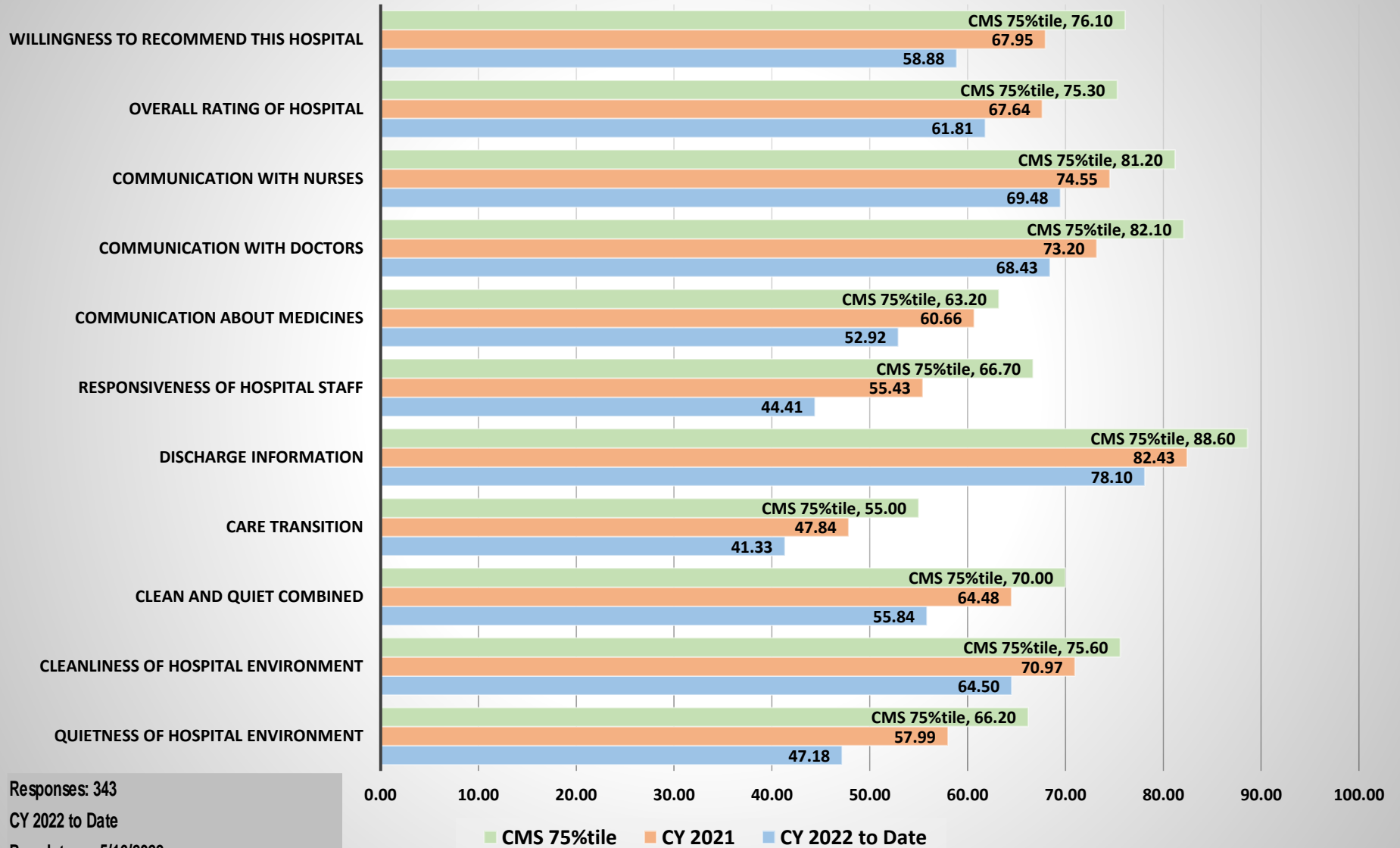
BHIP CMS HCAHPS CY 2022



BHMC CMS HCAHPS CY 2022



BHN CMS HCAHPS CY 2022



BH CMS HCAHPS Comparison CY 2022

BHMC Responses: 397

BHN Responses: 343

BHIP Responses: 142

BHCS Responses: 269

WILLINGNESS TO RECOMMEND THIS HOSPITAL

OVERALL RATING OF HOSPITAL

COMMUNICATION WITH NURSES

COMMUNICATION WITH DOCTORS

COMMUNICATION ABOUT MEDICINES

RESPONSIVENESS OF HOSPITAL STAFF

DISCHARGE INFORMATION

CARE TRANSITION

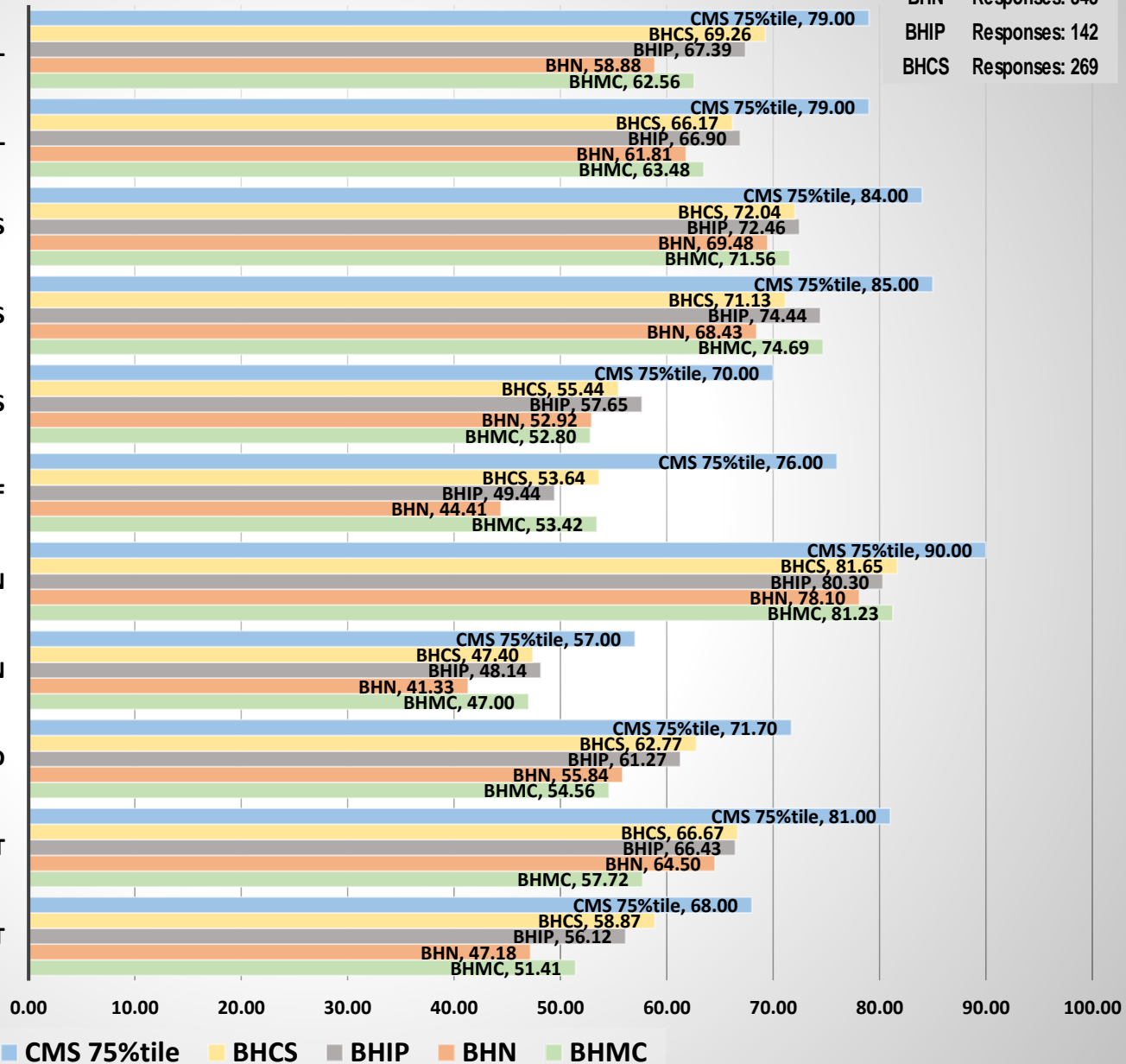
CLEAN AND QUIET COMBINED

CLEANLINESS OF HOSPITAL ENVIRONMENT

QUIETNESS OF HOSPITAL ENVIRONMENT

CY 2022 to Date

Ran data on 5/16/2022



6.9 RISK MANAGEMENT REGIONAL REPORTS

A1. BHMC	Q4 2021
B1. BHN	Q4 2021
C1. BHIP	Q4 2021
D1. BHCS	Q4 2021
E1. BH AMB	Q4 2021



6.10 2021 PATIENT SAFETY APPRAISAL BY REGION

A1. BHMC

B1. BHN

C1. BHIP

D1. BHCS



6.11 2021 PERFORMANCE IMPROVEMENT APPRAISAL BY REGION

A1. BHMC

B1. BHN

C1. BHIP

D1. BHCS



6.12 2021 INFECTION PREVENTION APPRAISAL BY REGION

A1. BHMC

B1. BHN

C1. BHIP

D1. BHCS



6.13 2021 ENVIRONMENT OF CARE APPRAISAL BY REGION

A1. BHMC

B1. BHN

C1. BHIP

D1. BHCS

