

6.1 COMMUNITY HEALTH SERVICES: HEALTHCARE FOR HOMELESS



Performance Measure for HCH Patients with Diabetes, CY 2021		Target	July	August	September	Sum/Avg Report #3	YTD 2021
Goal 1: Decrease No-Show rate AADE certified diabetes self-management session by at least ten percent (10%) by June 2021. Goal 40%	Measurement of monthly attendance in diabetes sessions		100%	100%	100%	100%	77%
	# of patients who attended sessions		2	6	3	11	44
	# of patients who were scheduled for a session		2	6	3	11	57
	NO SHOW RATE 	less than 40%	0%	0%	0%	0%	23%
Goal 2: Reduce participating HCH patients with uncontrolled HbA1c of 9% or higher	Complete outreach to all patients with HbA1c 5.7% or greater and schedule at least 75% of identified patients for DSM session.	75%	14%	30%	21%	23%	23%
	# of patients with HbA1c 5.7% or greater and scheduled for session		2	6	3	11	57
	# of patients identified as having HbA1c 5.7% or greater		14	20	14	48	252
	Monitor Percentage of patients with uncontrolled diabetes who had hemoglobin A1c (HbA1c) greater than 9.0 percent	≤16.20 %	14%	12%	13%	13%	9%
	# of patients with HbA1c greater than or equal to 9% over the past 3 months.		16	13	16	45	161
	# of established Diabetic patients the last 3 months		112	110	124	346	1966

Performance Measure for HCH Patients with Hypertension, CY 2021		Target	July	August	September	Sum/Avg Report #3	YTD 2021
Goal 1: Provide Educational Sessions on Controlling High Blood Pressure Patients diagnosed with hypertension are provided with an educational session and have a no show rate of less than 45%	Measurement of monthly attendance in Hypertension sessions		100%	100%	100%	100%	100%
	# of patients who attended sessions		1	4	9	14	21
	# of patients who were scheduled for a session		1	4	9	14	21
	NO SHOW RATE 	less than 45%	0%	0%	0%	0%	0%
Goal 2: Controlling High Blood Pressure Patients diagnosed with Hypertension and whose most recent blood pressure (BP) was adequately controlled (less than 140/90 mmHg)	Complete outreach to all patients diagnosed with Hypertension with a BP above 140/90, schedule at least 50% of identified patients for an educational session.	50%	5%	9%	17%	12%	4%
	# of patients who were scheduled for an educational session		1	4	9	14	21
	# of patients diagnosed with hypertension and whose BP was over 140/90 mm/Hg during their last visit.		20	45	52	117	581
	Proportion of patients with a BP of less than 140/90	65% County goal	49%	57%	51%	52%	55%
	# of patients with controlled BP of less than 140/90		57	69	58	184	707
	# of established patients with diagnosis of hypertension		116	122	113	351	1311

6.2 BROWARD HEALTH HOME HEALTH

Quality Management
Process Measures
Outcome Measures
HHCAHPS



CMS IQIES			BLUE at or above target GREEN within 5 pts. ORANGE opportunity for improvement								
MANAGING DAILY ACTIVITIES	CMS Target Percentage	JAN 21	FEB 21	MAR 21	APR 21	MAY 21	JUN 21	JUL 21	AUG 21	SEP 21	YTD 21
Improvement in Ambulation	79.9	84.7	84.6	84.7	84.2	86.1	87.9	92.6	89.3	No data	86.8
Improvement in Bed Transferring	81.4	84.6	84.2	83.4	86.8	97.1	90.9	88.9	96.4	No data	89
Improvement in Bathing	82.6	84.9	84.8	84.0	100	100	90.9	92.6	89.3	No data	91.7
Improvement in Dyspnea	83.2	88.9	88.7	88.6	83.1	91.9	96.3	85.7	80.8	No data	88
MANAGING PAIN AND TREATING SYMPTOMS	CMS Target Percentage	JAN 21	FEB 21	MAR 21	APR 21	MAY 21	JUN 21	JUL 21	AUG 21	SEP 21	YTD 21
Improvement in Management of Oral Medications	93.8	80.0	80.0	80.3	100	81.2	87.9	88.0	77.8	No data	84.4

CMS IQIES			BLUE at or above target GREEN target within 5 pts. ORANGE opportunity for improvement								
PREVENTING HARM	CMS Target Percentage	JAN 21	FEB 21	MAR 21	APR 21	MAY 21	JUN 21	JUL 21	AUG 21	SEP 21	YTD 21
Timely Initiation of Care	95.4	100	100	100	100	100	100	100	100	No data	100
Drug Education on all medication provided to patient/caregivers during an Episode of Care	99	99	99	99	97	95	100	86	75	No data	93.8
Discharge to Community	72.5	82.7	82.7	81.9	87.2	81.4	82.1	77.1	75	No data	81.3
PREVENTING UNPLANNED HOSPITAL CARE	CMS Target Percentage	JAN 21	FEB 21	MAR 21	APR 21	MAY 21	JUN 21	JUL 21	AUG 21	SEP 21	YTD 21
CMS/Risk Adjusted Hospitalizations	15.4	11.8	14.8	18.4	20.7	20.7	25.5	25.5	25.5	No data	20.4
ER use without Hospitalization	13	9.2	9.8	12.2	10.3	10.3	9.8	9.8	9.8	No data	10.2

PRESS GANEY REPORT	CMS Target Percentage	BLUE at or above target GREEN target within 5 pts. ORANGE opportunity for improvement				
		Home Health HHCAPHS	Fiscal Year	Q2 21	Q3 21	Q4 21
Patients who reported their HH team gave care in a compassionate way	88	93.75	89.02	84.38	86.28	88.36
Patients who reported that their home health team communicated well with them	85	89.5	88.5	81.74	87.32	86.77
Patients who reported that their HH team discussed meds, pain and home safety with them	83	71.63	68.41	63.73	84.91	72.17
Patients who gave their HH agency a 9 or 10	84	91.67	86.96	75	90.48	86.03
Patients who reported YES, they would definitely recommend HH Agency	78	66.67	75	81.25	71.43	73.58

HOME HEALTH CHAP SURVEY 2021

Strengths

- Excellent management of high acuity patients.
- Compassionate care by invested staff as evidenced by multiple Star Awards.
- Detailed patient education both written and verbal provided to each patient.

Opportunities

- The individualized clinical plan of care must include indications for PRN medications.
- The timely submission of discharge and transfer summaries to the pertinent physicians.
- Hand hygiene is performed by clinical staff when indicated.

Action Plan

- Monthly Chart Audits
- Field supervisory visits
- Mandatory staff education

6.3 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

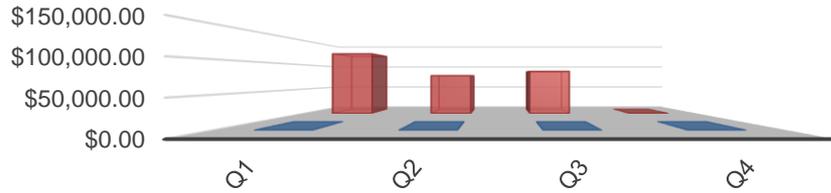
**QUARTERLY ENVIRONMENT OF CARE REPORT TO THE
QUALITY ASSESSMENT AND OVERSIGHT COMMITTEE**

Q3CY21

ENVIRONMENT OF CARE PERFORMANCE REPORT – PI INITIATIVE

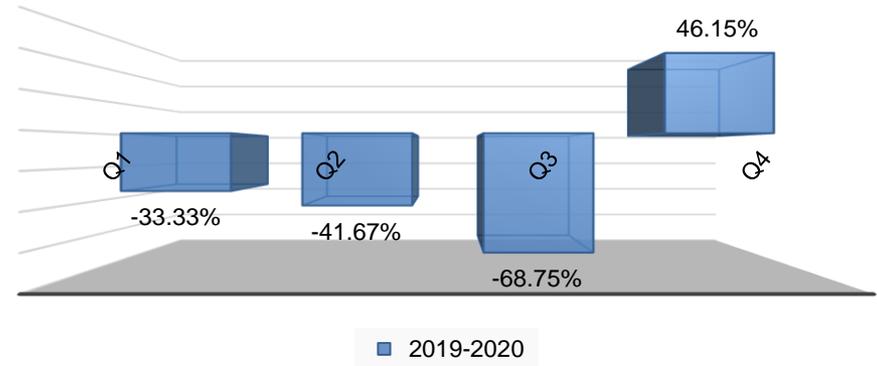
(REDUCE PATIENT HANDLING INJURY BY 10% WHEN COMPARED TO THE PREVIOUS YEAR)

**QUARTERLY BH PATIENT HANDLING INJURY REPORT
CY2021**

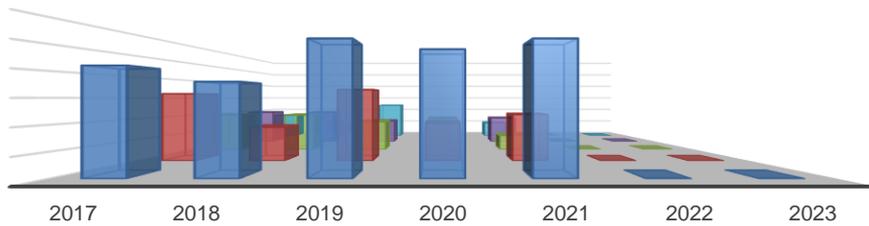


	Q1	Q2	Q3	Q4
■ INJURIES	24	16	8	0
■ COST	\$122,406.00	\$77,792.00	\$86,634.00	\$-

BH INJURY QUARTERLY %AGE DIFFERENCE

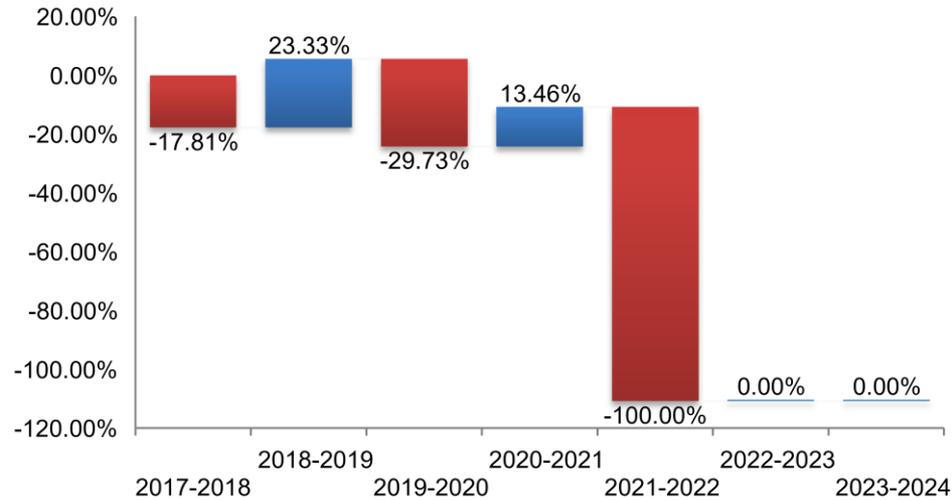


BH PATIENT HANDLING INJURY BY TASK



	2017	2018	2019	2020	2021	2022	2023
■ Reposition	21	18	26	24	26	0	0
■ Transfers	16	8	17	9	11	0	0
■ Lifts	10	10	8	9	4	0	0
■ Ambulation	10	10	7	5	8	0	0
■ Patient Contact	8	5	12	2	5	0	0

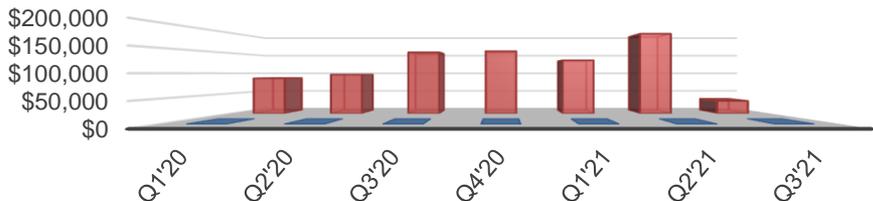
BH YR - YR INJURY %AGE DIFFERENCE



ENVIRONMENT OF CARE PERFORMANCE REPORT – PI INITIATIVE

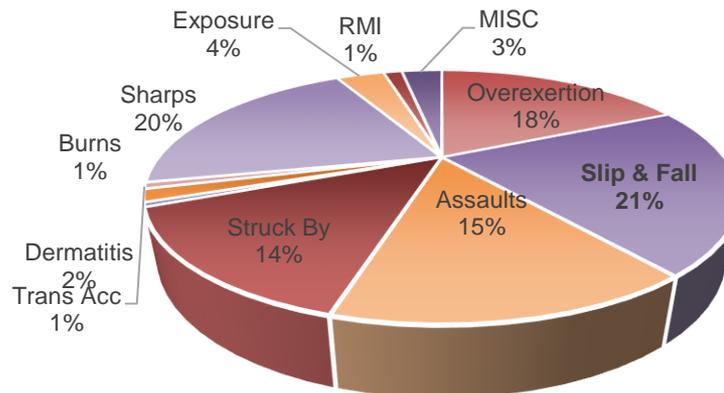
(REDUCE SLIP, TRIP AND FALL INJURIES BY 10% COMPARED TO PREVIOUS YEAR)

QUARTERLY SLIP & FALL INJURIES

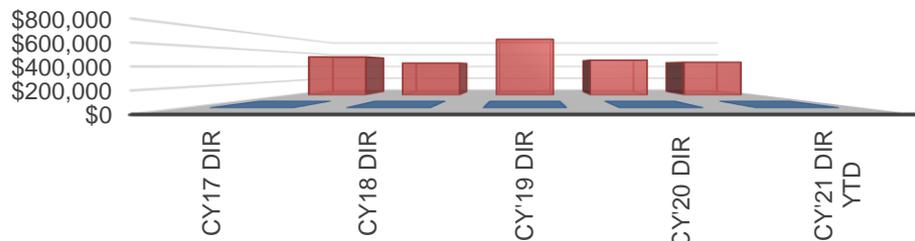


	Q1'20	Q2'20	Q3'20	Q4'20	Q1'21	Q2'21	Q3'21
■ AMT	20	17	21	12	29	26	5
■ COST	\$87,319.	\$96,603.	\$152,039	\$154,746	\$132,154	\$197,877	\$31,145.

CY'21 Dir YTD

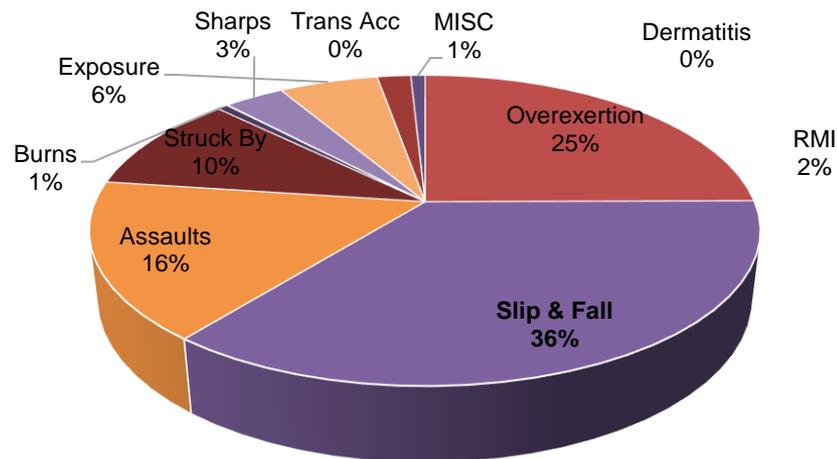


ANNUAL SLIP & FALL INJURIES



	CY17 DIR	CY18 DIR	CY'19 Dir	CY'20 Dir	CY'21 Dir YTD
■ AMT	127	96	121	70	79
■ COST	\$535,116.00	\$448,521.24	\$780,834.00	\$490,707.00	\$460,396.97

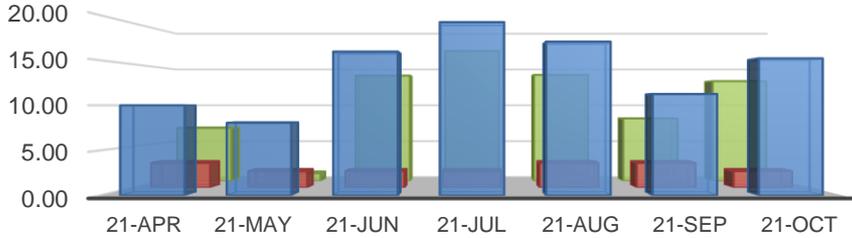
CY'21 DIR YTD COST %AGE BY INJURY TYPE



ENVIRONMENT OF CARE PERFORMANCE REPORT – PI INITIATIVE

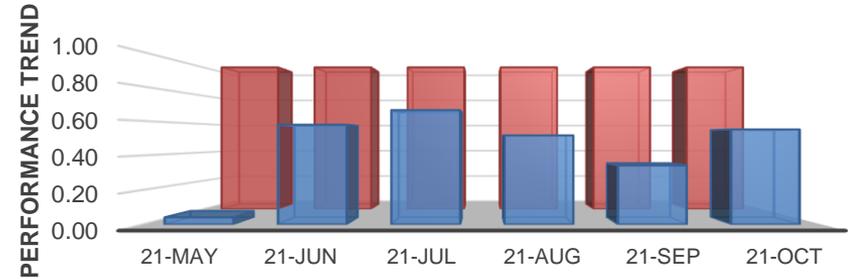
REDUCE MISSING PATIENT PROPERTY BY 10% COMPARED TO PREVIOUS CALENDAR YEAR

Reported Missing Patient's Property



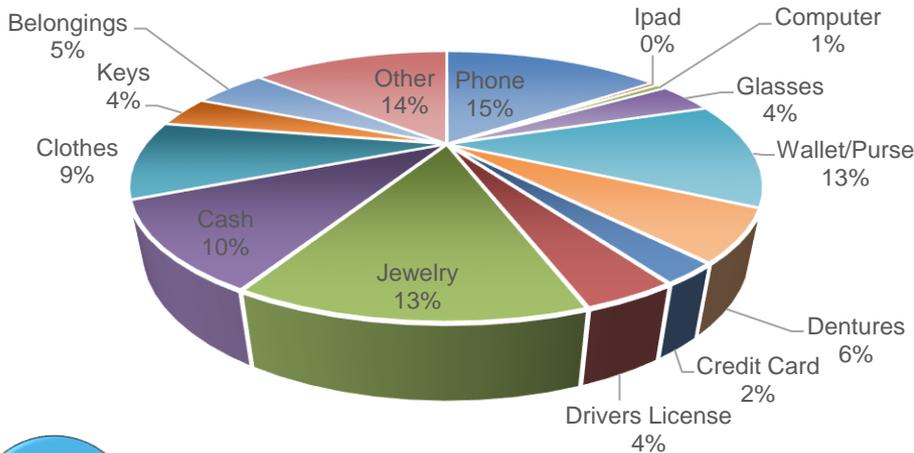
	21-Apr	21-May	21-Jun	21-Jul	21-Aug	21-Sep	21-Oct
# of Missing Patient Property	10.00	8.06	15.95	19.21	17.05	11.26	15.20
# of Property Recovered	3.00	2.00	2.00	2.00	3.00	3.00	2.00
Actual Missing Property	7.00	1.00	13.95	17.21	14.05	8.26	13.20

BHIP Missing Patient's Property Rate

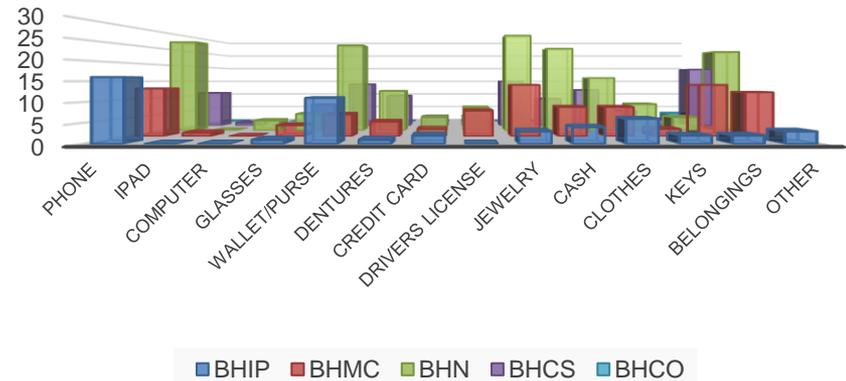


	21-May	21-Jun	21-Jul	21-Aug	21-Sep	21-Oct
Performance	0.04	0.58	0.66	0.52	0.34	0.55
Threshold	1.00	1.00	1.00	1.00	1.00	1.00

Org-Wide Missing Patients' Property 2020-2021



Regional Missing Patient's Property



Quality



BROWARD HEALTH

6.4 ANTIMICROBIAL STEWARDSHIP



BROWARD HEALTH PHARMACY ANTIMICROBIAL STEWARDSHIP

Intervention Type	4 th Quarter 2020	1 st Quarter 2021	2 nd Quarter 2021	3 rd Quarter 2021	12 Month Total
De-escalation	221	254	244	341	1,060
Dose adjustment	2,877	2,811	2,817	2,902	11,407
Bug-Drug mismatch	56	57	59	74	246
IV to PO conversion	125	136	166	456	883
Therapeutic duplication	71	77	64	88	300
Totals	3,350	3,335	3,350	3,861	13,896

ANTIMICROBIAL STEWARDSHIP INITIATIVES

2020-2021

Removal of probiotics from inpatient formulary

New polymyxin B subphase created

Splenectomy and EMR Sepsis Antibiotics and Fluid Resuscitation subphase updated

Creation of Clostridioides Difficile Policy and Powerplan

Addition of Recarbrio® and Fetroja® to formulary to combat resistant infections

Development of 2020 Antibigram and Pocket cards

Implementation of PCR testing for MRSA nasal colonization

Bezlotoxumab approved for outpatient infusion for CDI patients

Implementation of Extended Infusion Protocols to include Cefepime in addition to meropenem and piperacillin/tazobactam

Implementation of Pharmacist Driven Procalcitonin Protocol

Implementation Antiviral and Antifungal indication and duration requirement

Creation of C. Diff Task Force with Clinical Epidemiology

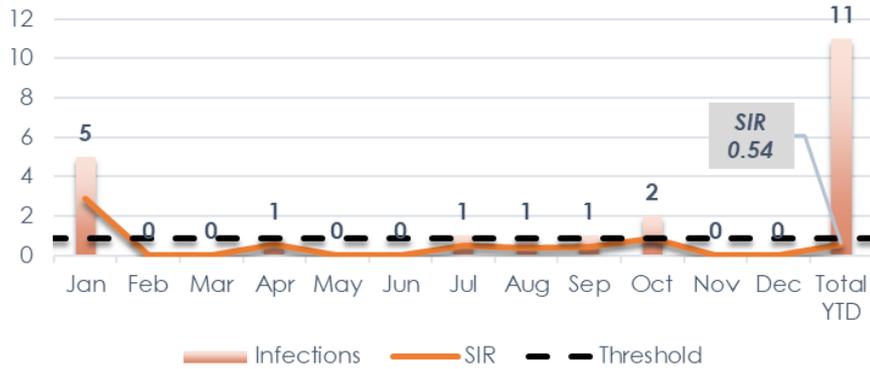
Creation of Cascade reporting pathways for new antimicrobials added to formulary with microbiology

6.5 INFECTION PREVENTION

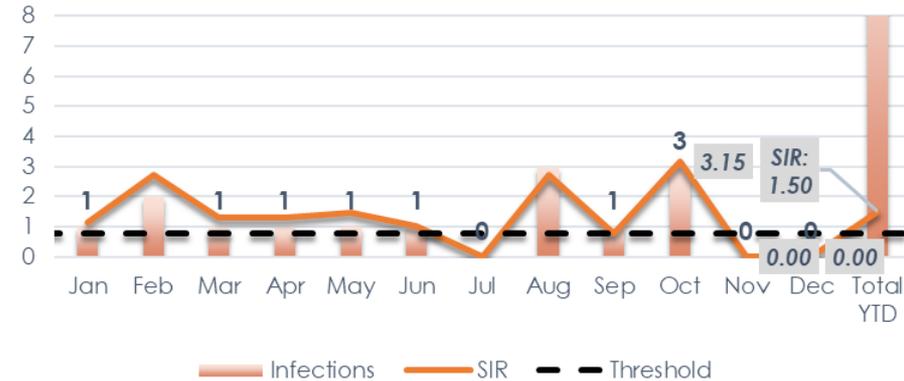


CLABSI ~ ALL REPORTING UNITS

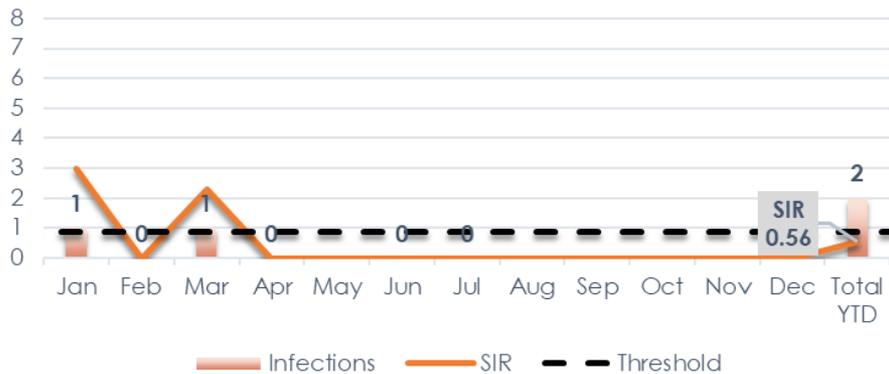
BHMC NHSN - CLABSI
SIR ~All Reporting Units
CY 2021
Threshold
Benchmark 0



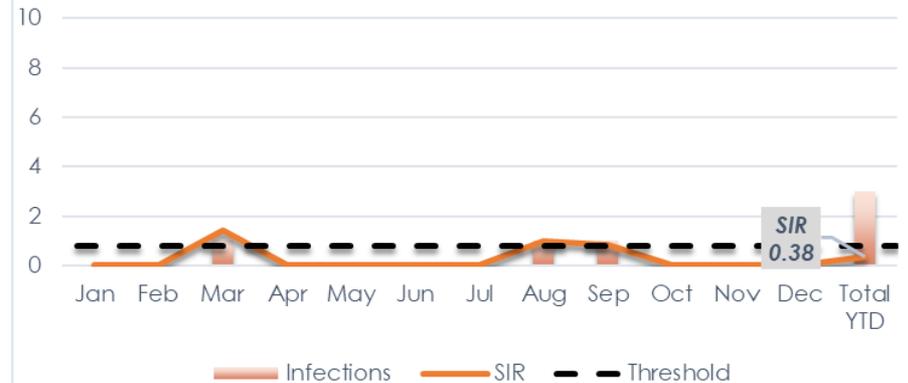
BHN NHSN - CLABSI
SIR ~All Reporting Units
CY 2021
Threshold 0.687
Benchmark 0



BHIP NHSN - CLABSI
SIR ~All Reporting Units
CY 2021
Threshold
Benchmark 0



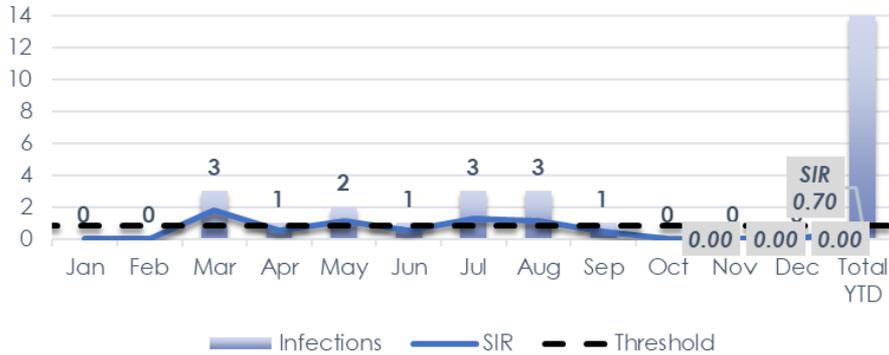
BHCS NHSN - CLABSI
SIR ~All Reporting Units
CY 2021
Threshold 0.687
Benchmark 0



CAUTI ~ ALL REPORTING UNITS

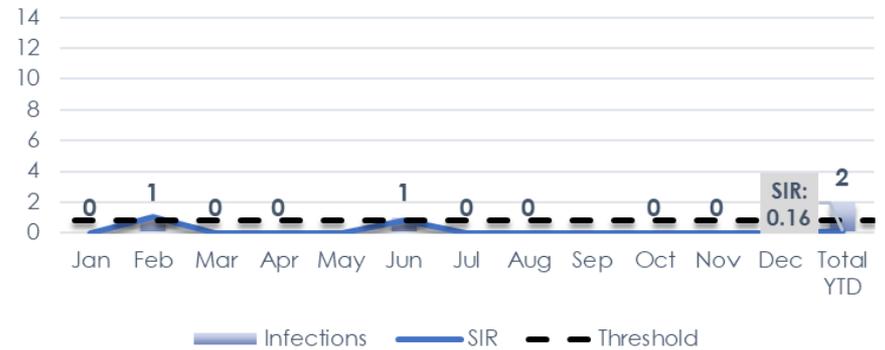
BHMC NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0



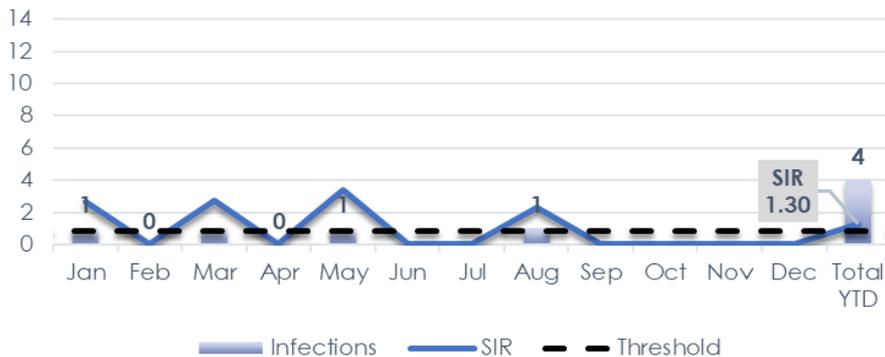
BHN NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0



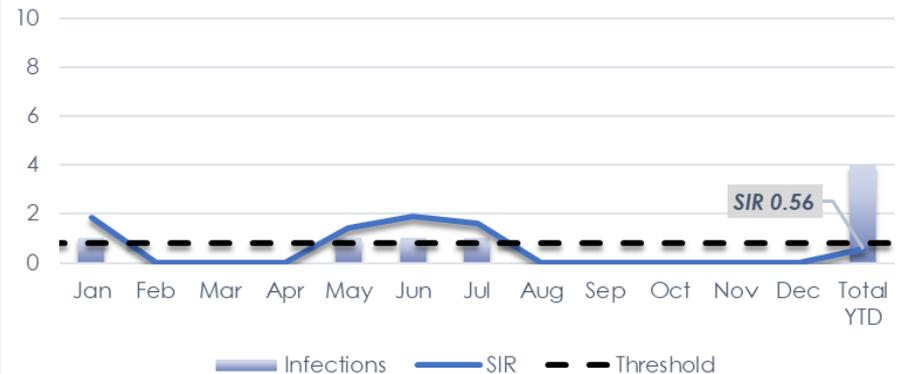
BHIP NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0

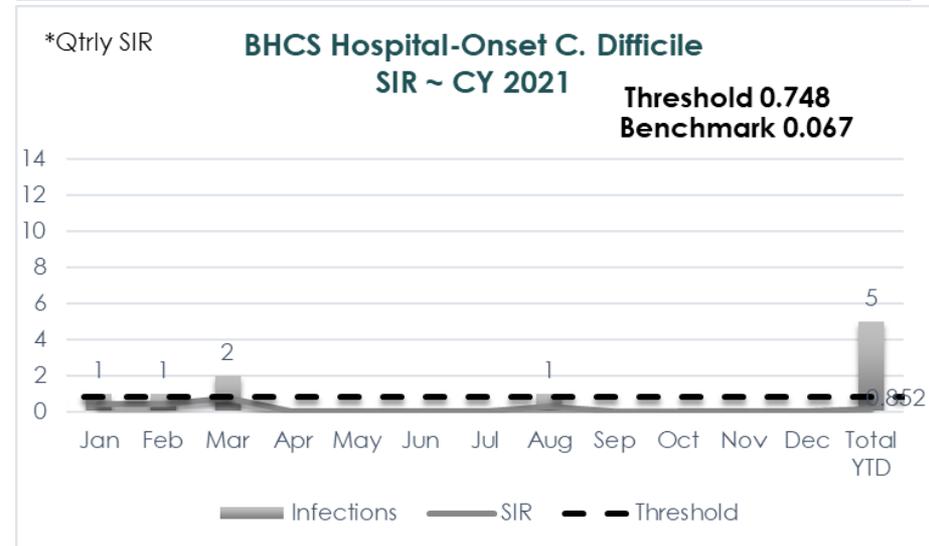
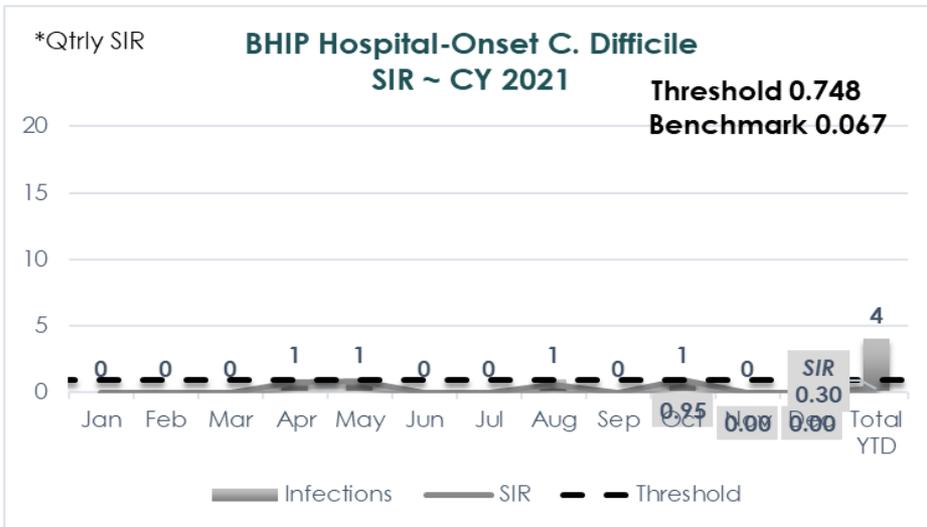
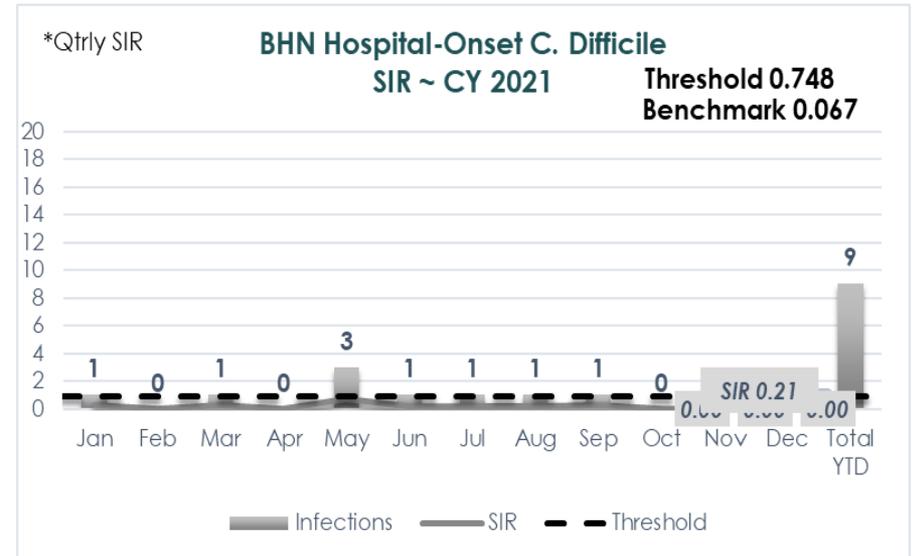
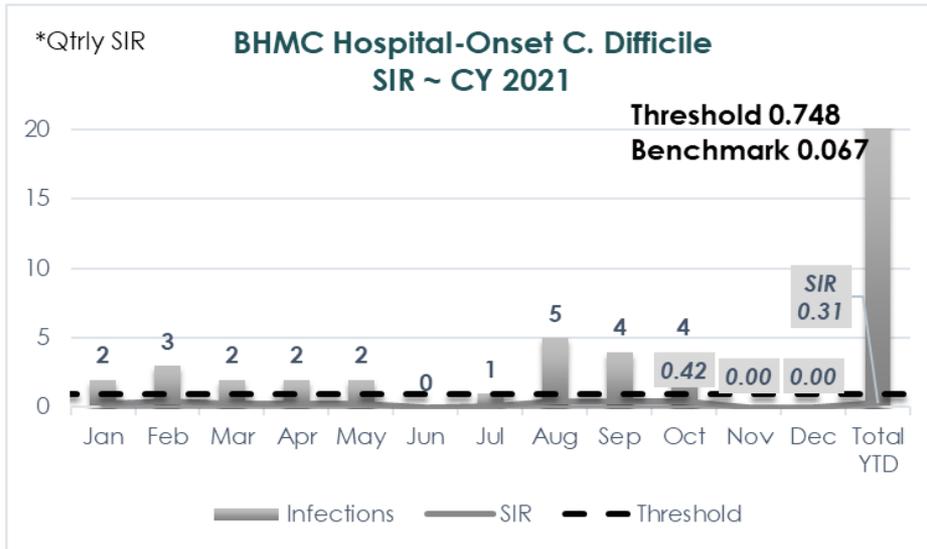


BHCS NHSN - CAUTI
SIR ~ All Reporting Units
CY 2021

Threshold 0.774
Benchmark 0

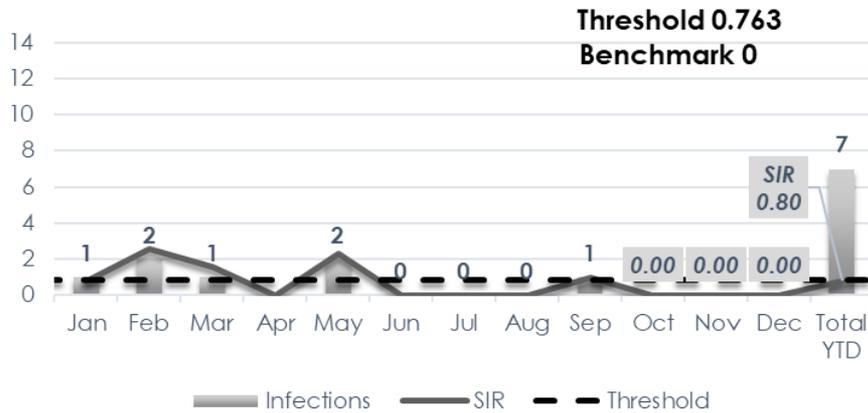


HOSPITAL-ONSET C. DIFFICILE

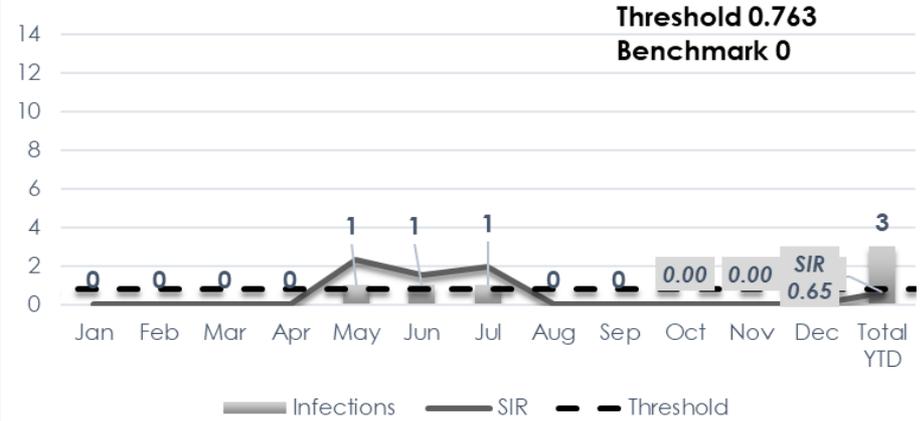


HOSPITAL-ONSET MRSA BACTEREMIA

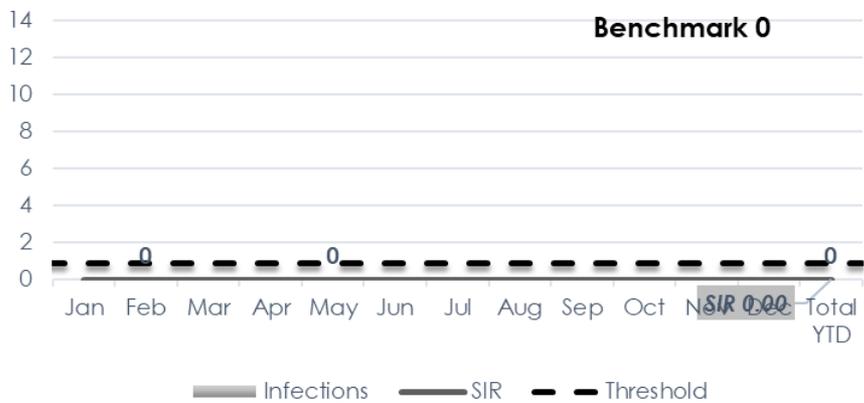
*Qtrly SIR **BHMC Hospital-Onset MRSA Bacteremia**
SIR ~ CY 2020



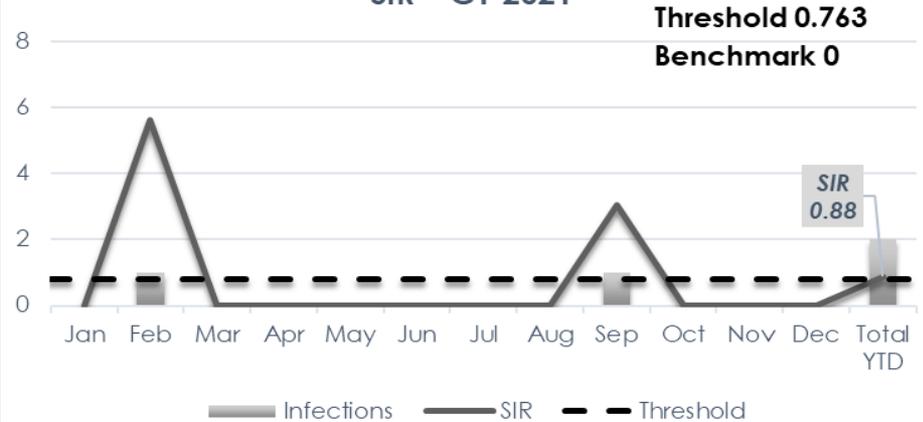
*Qtrly SIR **BHN Hospital-Onset MRSA Bacteremia**
SIR ~ CY 2021



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

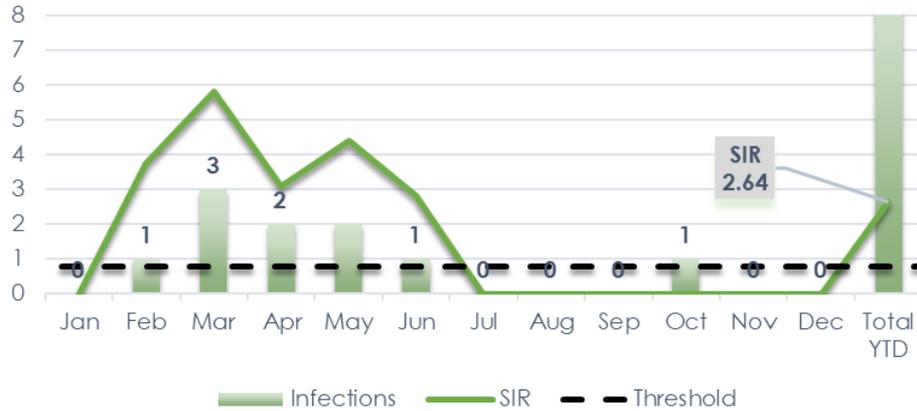


*Qtrly SIR **BHCS Hospital-Onset MRSA Bacteremia**
SIR ~ CY 2021

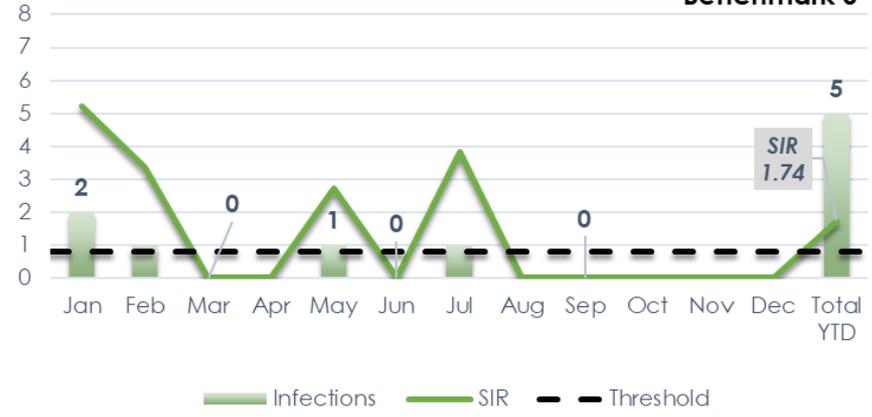


COLORECTAL SSI

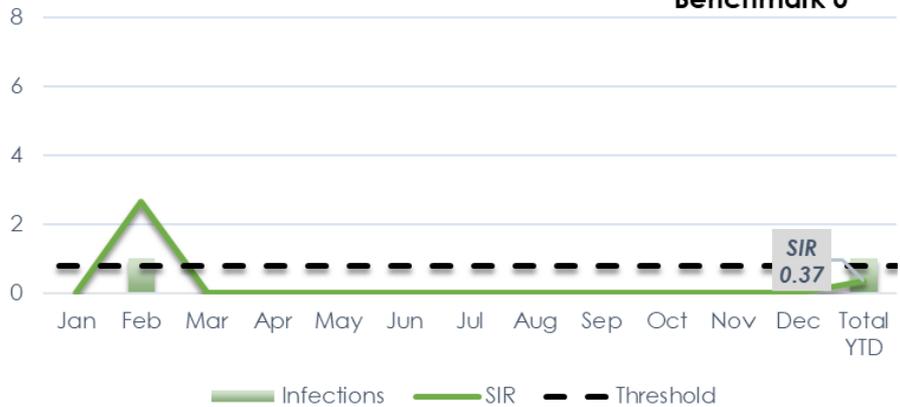
BHMC NHSN - Colorectal SSI
SIR ~ CY 2021



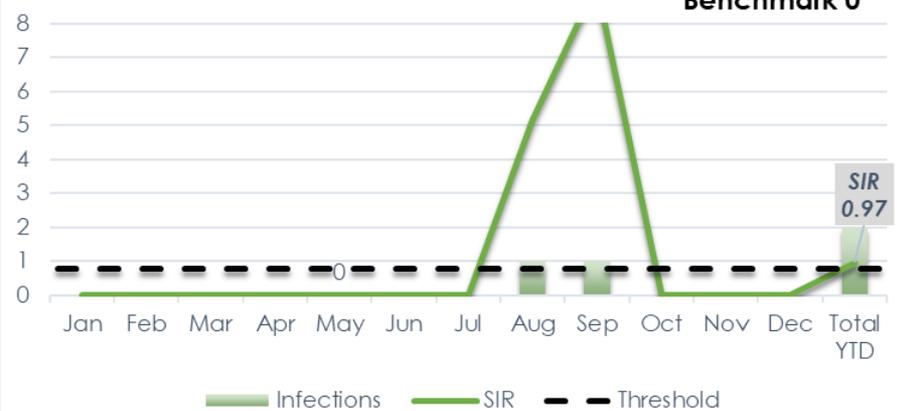
BHN NHSN - Colorectal SSI
SIR ~ CY 2021



BHCS NHSN - Colorectal SSI
SIR ~ CY 2021

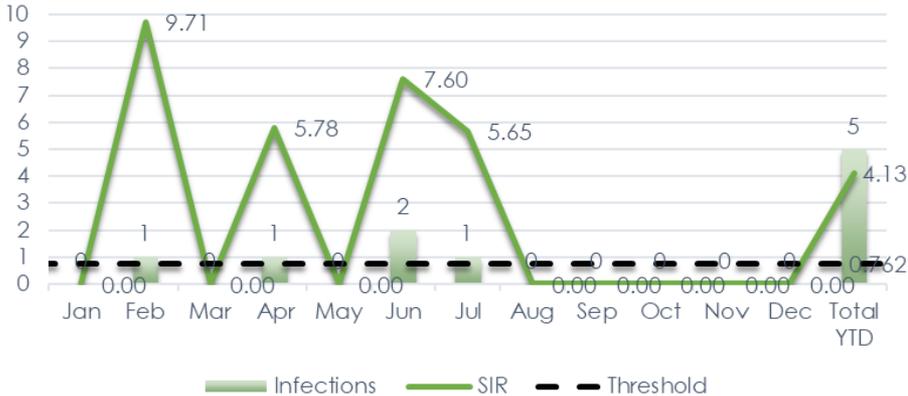


BHIP NHSN - Colorectal SSI
SIR ~ CY 2021

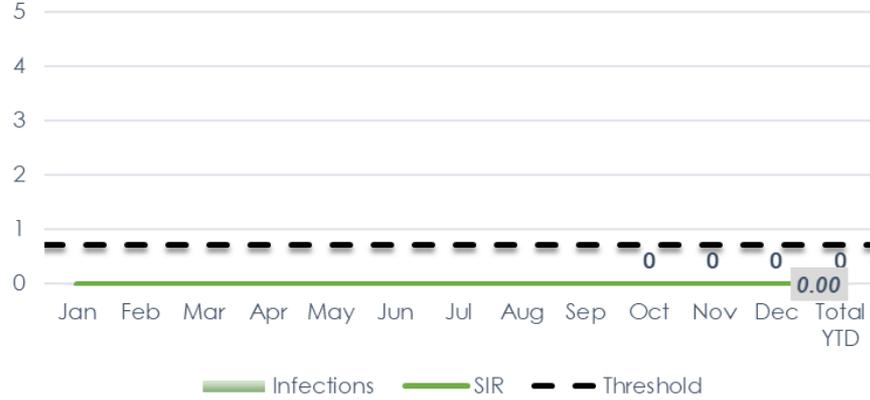


HYSTERECTOMY SSI

BHMC NHSN - Hysterectomy SSI
SIR ~ CY 2020

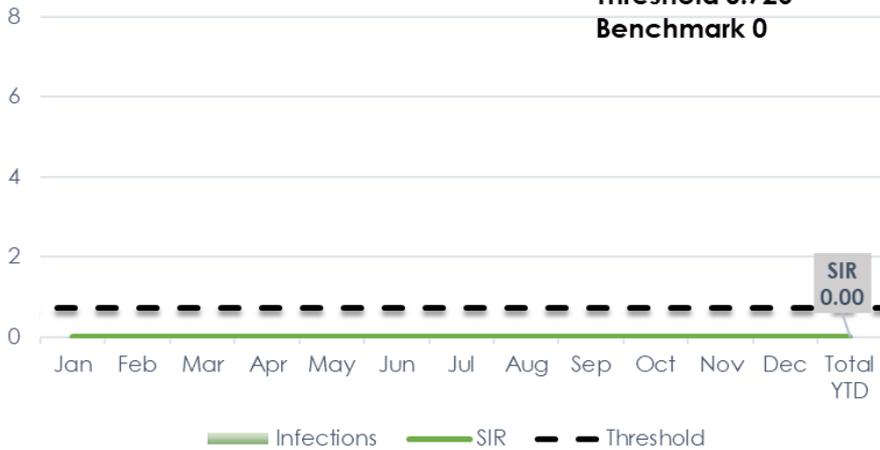


BHN NHSN - Hysterectomy SSI
SIR ~ CY 2021



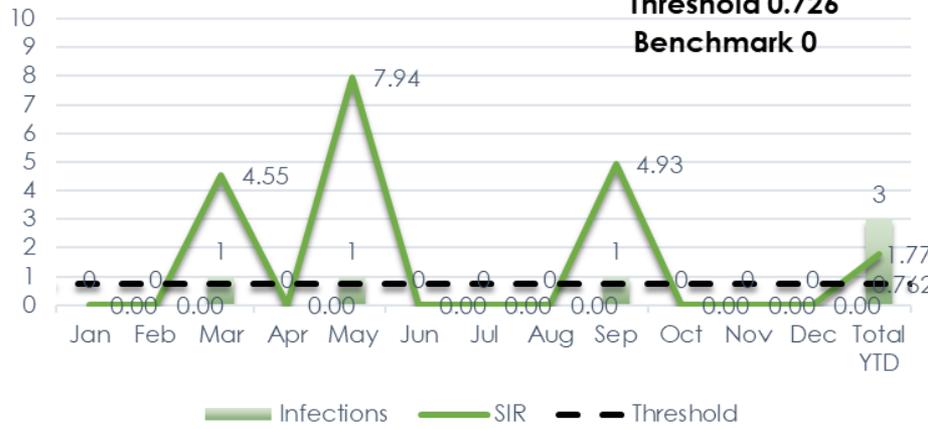
BHCS NHSN - Hysterectomy SSI
SIR ~ CY 2021

Threshold 0.726
Benchmark 0



BHIP NHSN - Hysterectomy SSI
SIR ~ CY 2021

Threshold 0.726
Benchmark 0



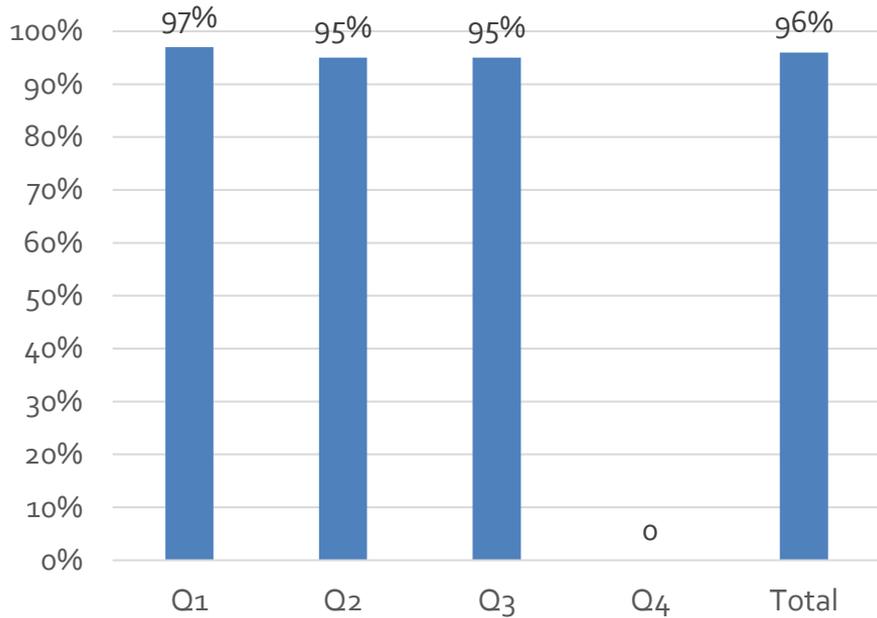
6.6 NPSG HAND HYGIENE



NPSG OBSERVED HAND HYGIENE

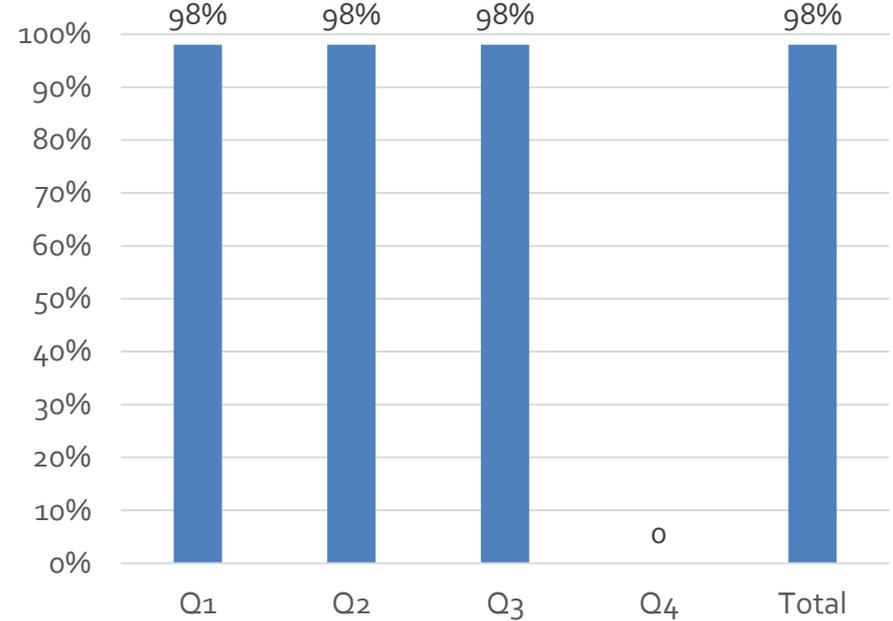
BHN

2021



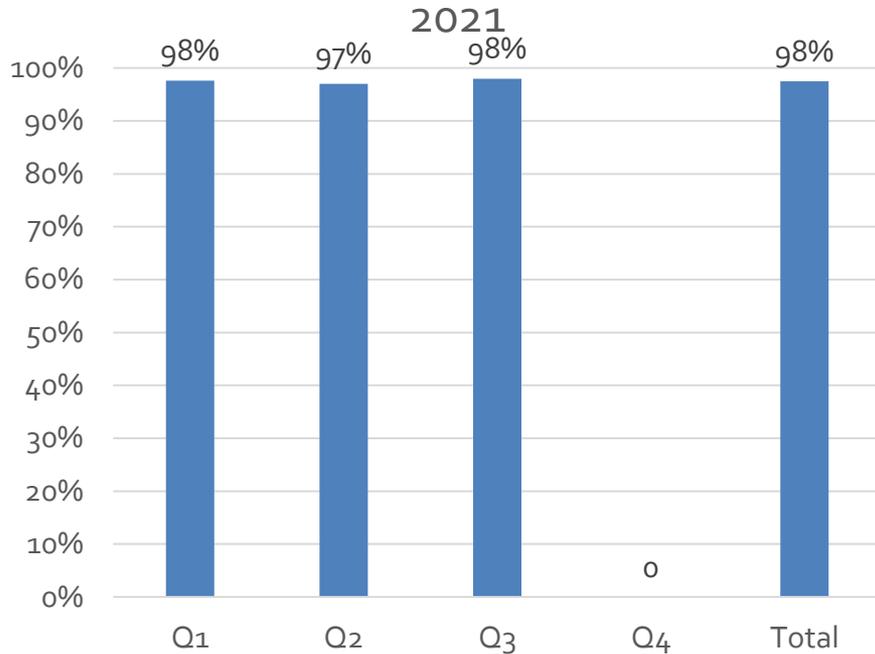
BHMC

2021

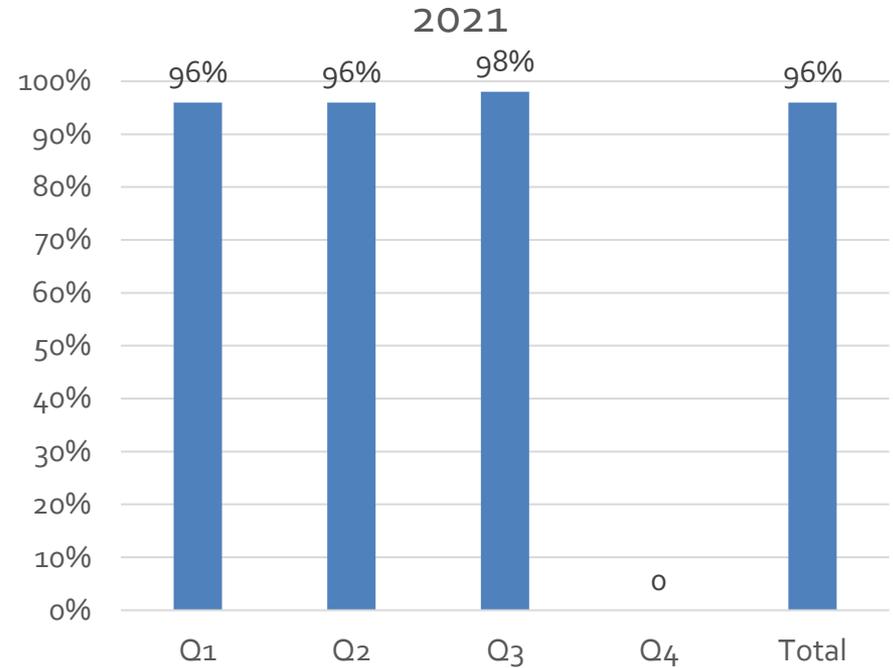


NPSG OBSERVED HAND HYGIENE

BHCS



BHIP



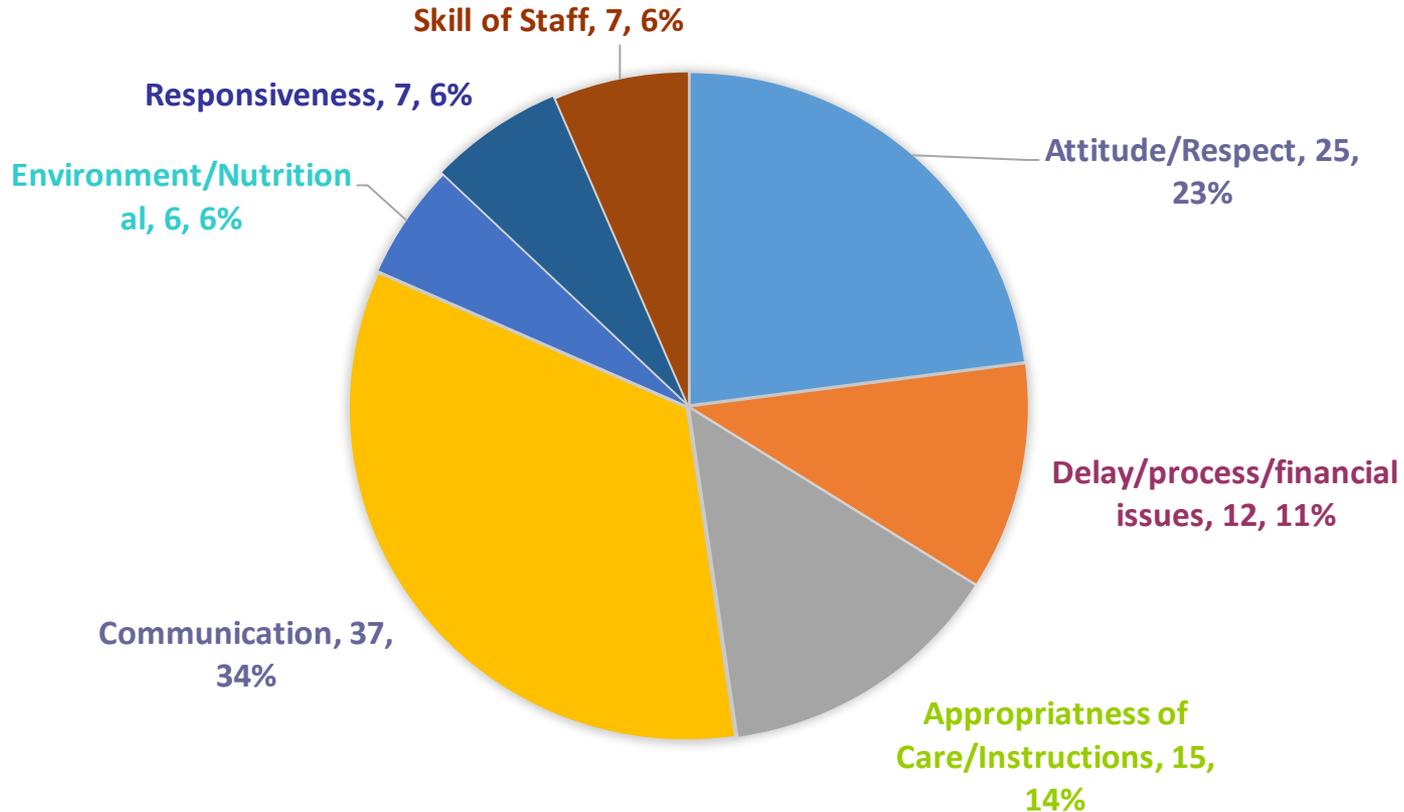
6.7 GRIEVANCES



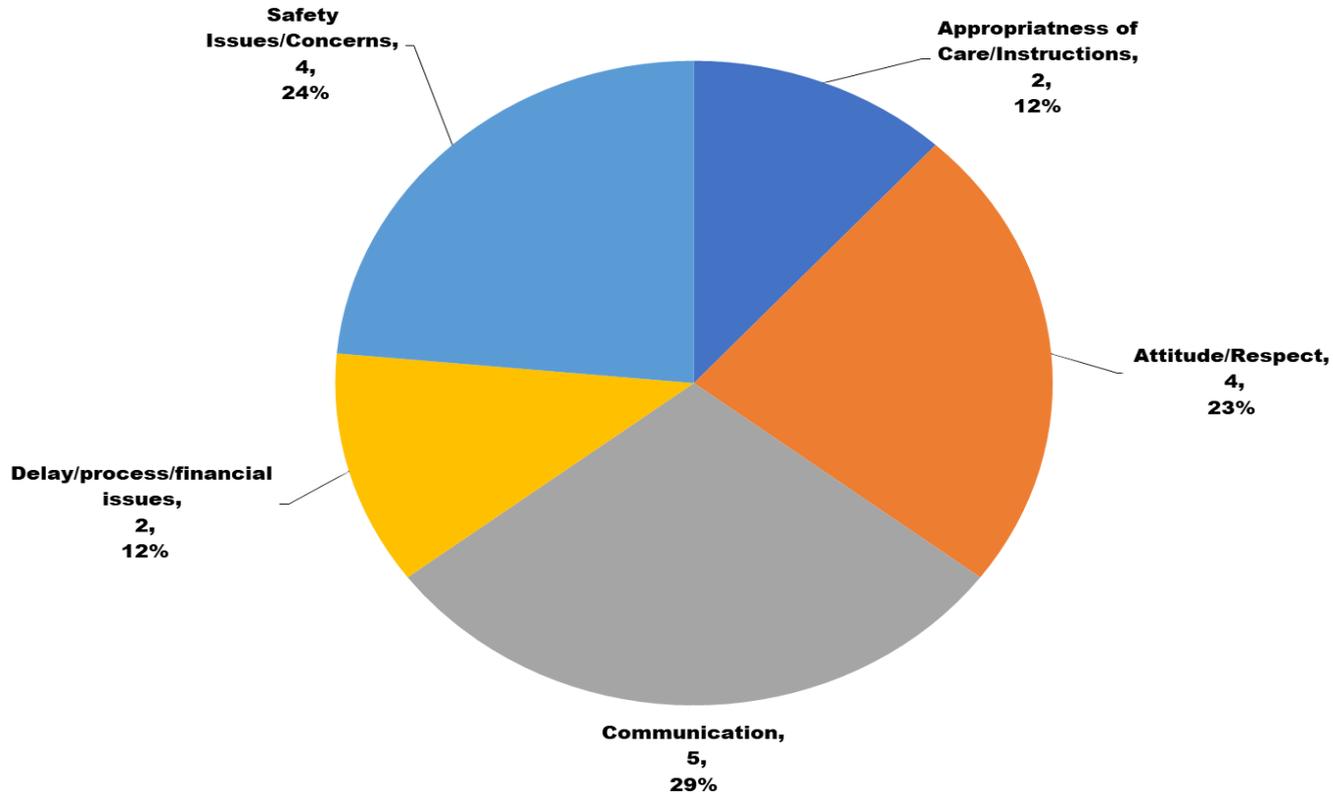
COMPLAINTS & GRIEVANCES

- All Grievances follow policy GA 001-010
Complaint/Grievance Management
- Monthly Grievance Committee meetings represented
by Customer Service Manager, Administration and
Quality

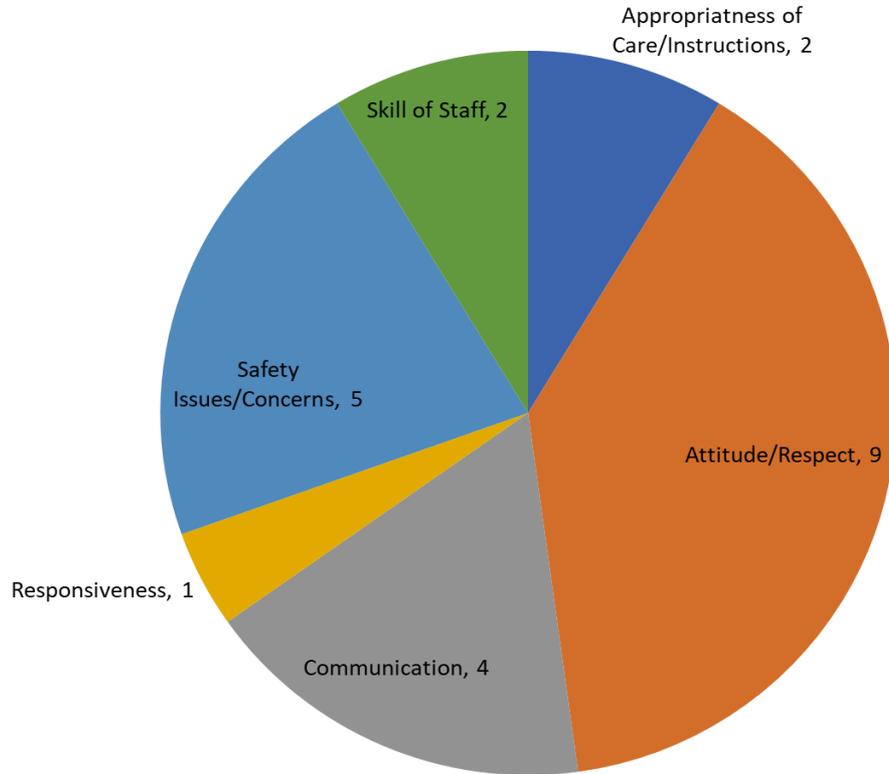
Q3 2021 BHIP CAPTURED COMPLAINTS & GRIEVANCES



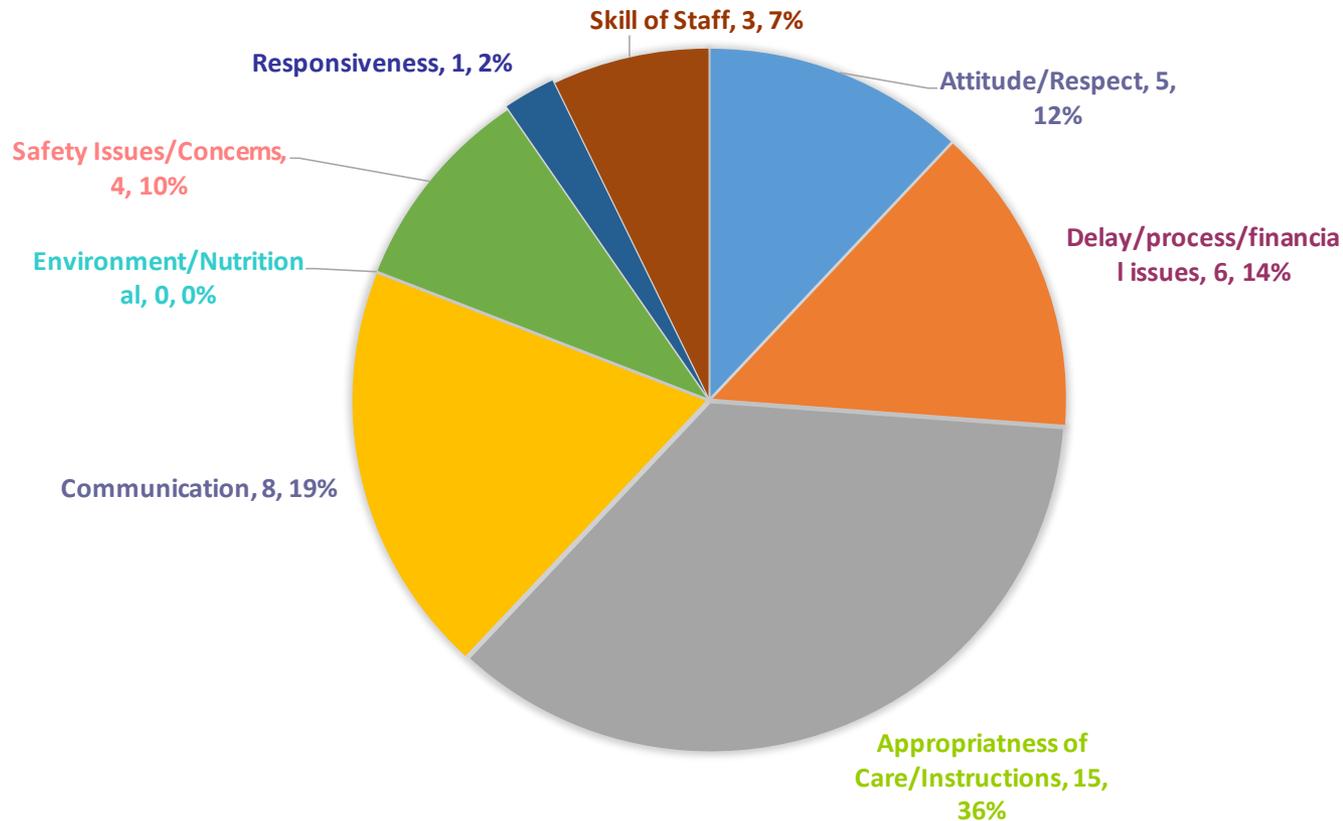
Q3 2021 BHCS CAPTURED COMPLAINTS & GRIEVANCES



Q3 2021 BHMC CAPTURED COMPLAINTS & GRIEVANCES



Q3 2021 BHN CAPTURED COMPLAINTS & GRIEVANCES



6.8 RISK MANAGEMENT REGIONAL REPORTS

A1. BHMC	Q3 2021
B1. BHN	Q3 2021
C1. BHIP	Q3 2021
D1. BHCS	Q3 2021
E1. BH AMB	Q3 2021



6.9 MEDICARE READMISSIONS



Readmissions – Medicare

BHMC	National	LCY-20	2020n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	19.5%	17	25.0%	20.0%	0.0%	28.6%	0.0%	33.3%	37.5%	12.5%	28.6%	16.7%	22.2%	15.4%	22.4%	13
COPD	19.5%	13.3%	6	0.0%	0.0%	33.3%	0.0%	33.3%	0.0%	0.0%	50.0%	0.0%	0.0%	0.0%	0.0%	10.0%	1
Pneumonia	16.6%	24.7%	20	66.7%	66.7%	0.0%	11.1%	57.1%	0.0%	14.3%	0.0%	16.7%	0.0%	0.0%	16.7%	9.7%	3
AMI	16.1%	10.6%	5	0.0%	0.0%	0.0%	33.3%	25.0%	0.0%	0.0%	20.0%	0.0%	0.0%	0.0%	20.0%	9.1%	2
Hip/Knee	4.0%	6.3%	1	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%	0.0%	0.0%	25.0%	1
CABG	12.7%	16.1%	5	0.0%	0.0%	0.0%	50.0%	0.0%	50.0%	60.0%	0.0%	0.0%	0.0%	33.3%	0.0%	16.7%	4

BHN	National	LCY-20	2020n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	20.5%	17	0.0%	33.3%	20.0%	54.6%	33.3%	0.0%	16.7%	37.5%	0.0%	42.9%	60.0%	40.0%	32.7%	17
COPD	19.5%	20.8%	15	33.3%	25.0%	0.0%	0.0%	37.5%	0.0%	0.0%	0.0%	0.0%	66.7%	100.0%	50.0%	42.9%	6
Pneumonia	16.6%	17.7%	25	37.5%	0.0%	12.5%	17.7%	22.2%	35.7%	30.8%	20.0%	12.5%	45.5%	14.3%	27.3%	27.3%	15
AMI	16.1%	12.1%	4	0.0%	0.0%	20.0%	0.0%	25.0%	0.0%	33.3%	0.0%	0.0%	0.0%	0.0%	0.0%	4.6%	1
Hip/Knee	4.0%	9.7%	14	0.0%	0.0%	11.1%	25.0%	0.0%	14.3%	25.0%	0.0%	16.7%	0.0%	11.1%	20.0%	12.5%	5

BHIP	National	LCY-20	2020n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	16.7%	4	0.0%	50.0%	0.0%	0.0%	0.0%	25.0%	33.3%	0.0%	0.0%	16.7%	50.0%	0.0%	14.3%	3
COPD	19.5%	22.2%	6	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	50.0%	0.0%	15.4%	2
Pneumonia	16.6%	11.1%	9	25.0%	50.0%	0.0%	50.0%	0.0%	12.5%	50.0%	0.0%	0.0%	0.0%	33.3%	0.0%	21.1%	4
AMI	16.1%	0.0%	0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%	16.7%	1
Hip/Knee	4.0%	11.1%	2	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0

BHCS	National	LCY-20	2020n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	10.9%	6	0.0%	0.0%	0.0%	14.3%	0.0%	50.0%	20.0%	16.7%	20.0%	20.0%	40.0%	0.0%	17.1%	6
COPD	19.5%	18.4%	9	33.3%	25.0%	0.0%	25.0%	33.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	33.3%	12.5%	2
Pneumonia	16.6%	19.2%	15	0.0%	18.2%	14.3%	50.0%	28.6%	33.3%	0.0%	0.0%	0.0%	0.0%	8.3%	28.6%	8.3%	3
AMI	16.1%	0.0%	0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%	16.7%	0.0%	0.0%	25.0%	16.7%	3
Hip/Knee	4.0%	20.0%	1	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0

Readmissions – All Payer

BHMC	National	LCY-20	2020 n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	22.7%	104	35.1%	22.2%	28.2%	14.6%	15.4%	22.6%	18.4%	17.1%	14.6%	15.0%	7.3%	16.0%	14.7%	37
COPD	19.5%	13.9%	29	16.7%	0.0%	16.7%	14.3%	22.2%	10.5%	7.1%	21.4%	20.0%	15.0%	25.0%	9.1%	16.7%	15
Pneumonia	16.6%	16.9%	76	17.9%	27.3%	17.2%	16.1%	24.2%	18.2%	15.4%	22.2%	13.8%	4.8%	12.5%	13.3%	14.4%	26
AMI	16.1%	12.6%	38	16.7%	12.5%	12.5%	3.9%	11.1%	12.5%	16.7%	22.2%	12.0%	13.8%	29.2%	27.3%	19.9%	27
Hip/Knee	4.0%	5.8%	6	0.0%	0.0%	0.0%	0.0%	0.0%	9.1%	20.0%	0.0%	16.7%	0.0%	14.3%	0.0%	10.0%	3
CABG	12.7%	11.9%	23	11.1%	0.0%	0.0%	5.0%	5.9%	23.1%	30.0%	8.3%	19.2%	10.5%	10.0%	21.1%	17.9%	19

BHN	National	LCY-20	2020 n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	18.6%	63	25.0%	20.0%	15.8%	31.6%	20.0%	25.0%	18.2%	30.0%	15.4%	33.3%	34.4%	22.2%	24.7%	47
COPD	19.5%	19.6%	45	23.5%	23.1%	30.0%	6.3%	19.2%	13.3%	0.0%	6.7%	9.1%	27.3%	26.3%	20.0%	17.8%	16
Pneumonia	16.6%	16.5%	91	25.6%	20.4%	20.5%	13.3%	20.5%	28.6%	19.4%	16.1%	13.9%	31.3%	9.4%	19.4%	20.5%	43
AMI	16.1%	10.5%	19	10.5%	5.9%	9.1%	8.3%	16.7%	15.0%	7.1%	5.9%	5.9%	0.0%	16.7%	0.0%	6.7%	6
Hip/Knee	4.0%	9.9%	39	16.7%	16.7%	16.1%	25.0%	22.2%	14.3%	20.0%	25.0%	11.1%	13.3%	12.5%	35.7%	18.1%	17

BHIP	National	LCY-20	2020 n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	21.4%	33	0.0%	21.4%	25.0%	23.8%	16.7%	18.8%	10.0%	28.6%	8.3%	30.0%	44.4%	23.5%	21.3%	16
COPD	19.5%	25.7%	39	14.3%	100.0%	35.7%	25.0%	25.0%	18.2%	22.2%	14.3%	16.7%	28.6%	30.0%	11.1%	20.4%	11
Pneumonia	16.6%	12.9%	39	15.0%	22.2%	40.0%	18.2%	6.7%	13.0%	35.3%	10.0%	0.0%	14.3%	29.4%	9.1%	20.0%	16
AMI	16.1%	5.4%	3	0.0%	0.0%	0.0%	25.0%	0.0%	0.0%	0.0%	25.0%	0.0%	0.0%	14.3%	0.0%	6.9%	2
Hip/Knee	4.0%	5.3%	5	25.0%	0.0%	0.0%	7.7%	25.0%	0.0%	33.3%	0.0%	0.0%	0.0%	0.0%	0.0%	9.1%	1

BHCS	National	LCY-20	2020 n	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	2021	2021n
HF	21.9%	15.2%	32	0.0%	10.0%	26.3%	15.4%	13.6%	23.1%	19.1%	4.8%	16.0%	11.1%	33.3%	12.0%	15.2%	19
COPD	19.5%	16.8%	31	15.4%	40.0%	0.0%	13.3%	11.1%	0.0%	18.8%	15.4%	0.0%	15.4%	18.2%	16.7%	15.8%	12
Pneumonia	16.6%	12.9%	54	4.2%	19.4%	3.3%	19.4%	24.2%	21.7%	11.1%	12.5%	4.4%	4.4%	10.0%	9.1%	9.7%	17
AMI	16.1%	11.1%	5	0.0%	0.0%	50.0%	28.6%	0.0%	0.0%	11.1%	7.1%	6.3%	0.0%	0.0%	12.5%	6.6%	5
Hip/Knee	4.0%	10.6%	7	0.0%	0.0%	0.0%	28.6%	14.3%	0.0%	25.0%	0.0%	0.0%	0.0%	0.0%	0.0%	6.7%	1

6.10 MEDICARE MORTALITIES

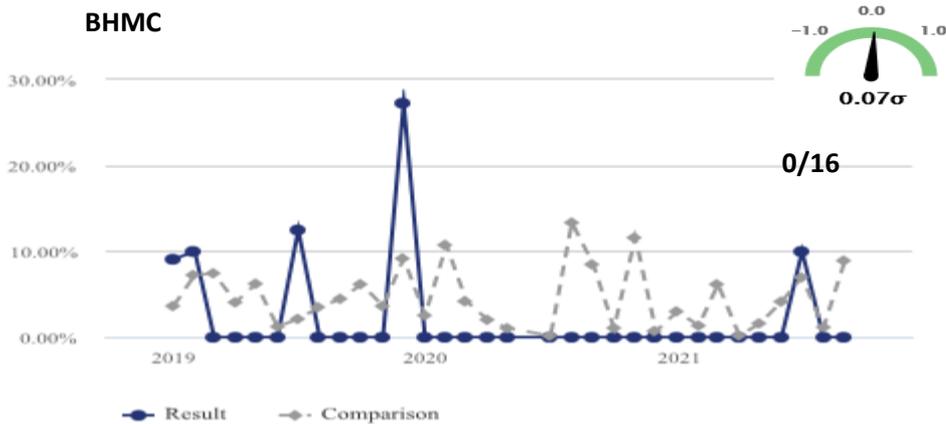


AMI Medicare Mortalities 3rd Q 2021

Hospital Compare CMS benchmark 13.6%

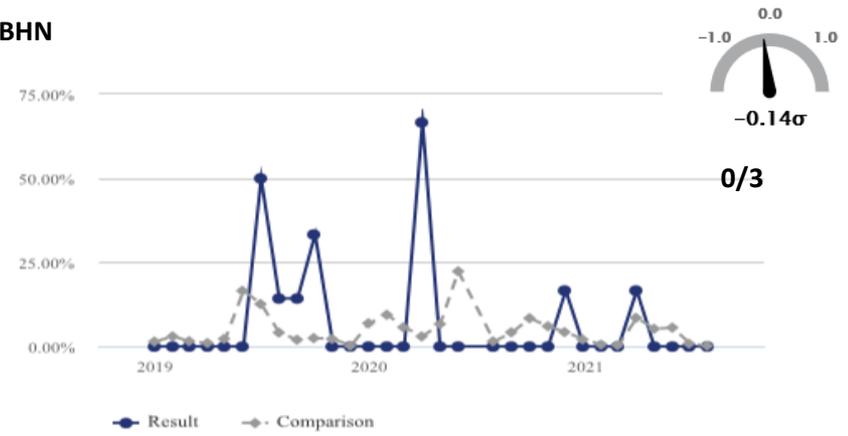
Mortality Rate (with Exclusions) - System-All Physicians

BHMC



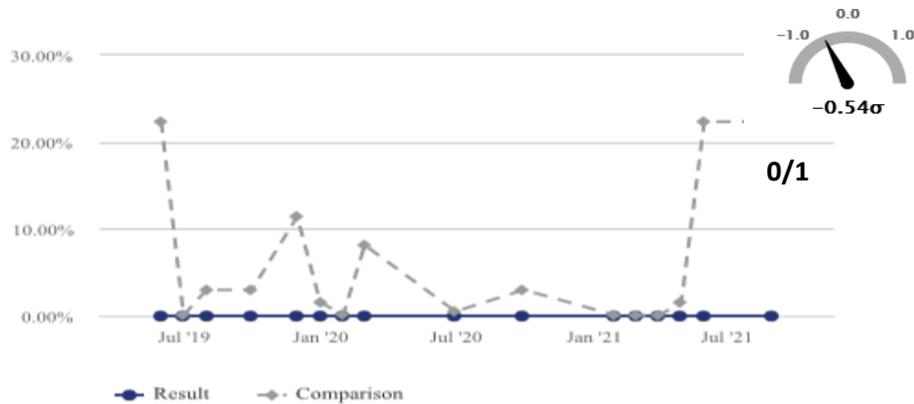
Mortality Rate (with Exclusions) - System-All Physicians

BHN



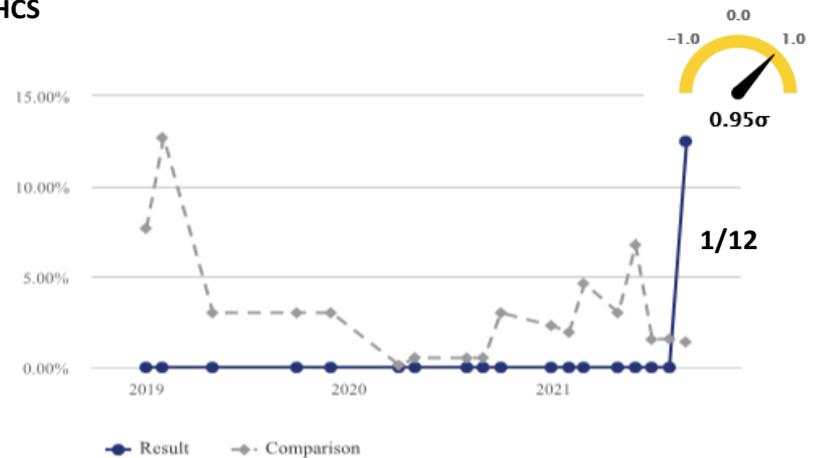
Mortality Rate (with Exclusions) - System-All Physicians

BHIP



Mortality Rate (with Exclusions) - System-All Physicians

BHCS

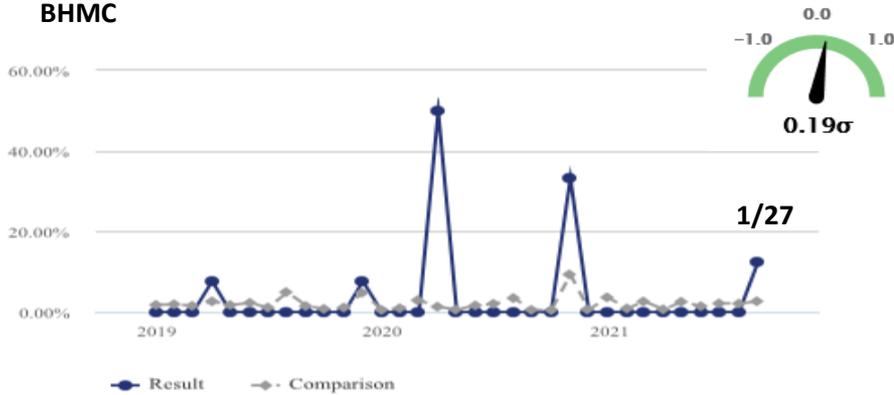


HF Medicare Mortalities 3rd Q 2021

Hospital Compare CMS benchmark 12.0%

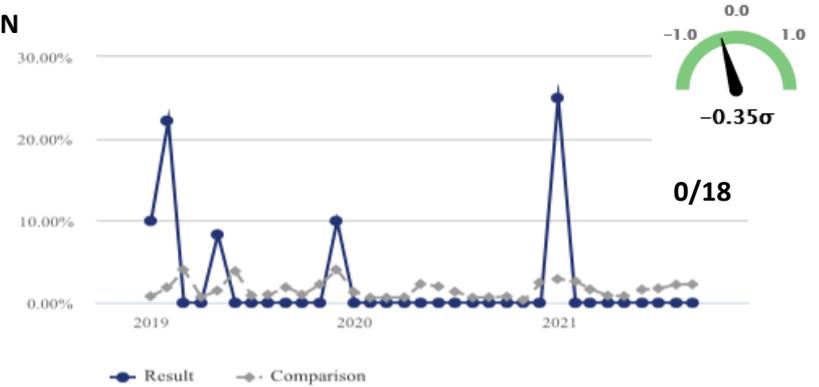
Mortality Rate (with Exclusions) - System-All Physicians

BHMC



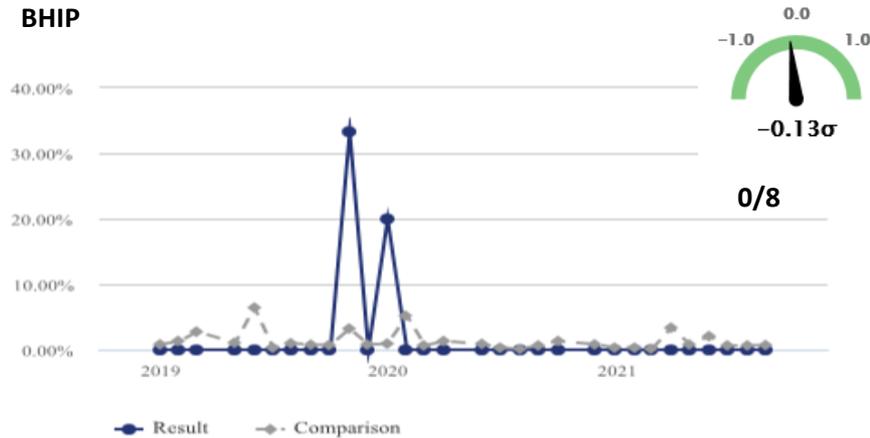
Mortality Rate (with Exclusions) - System-All Physicians

BHN



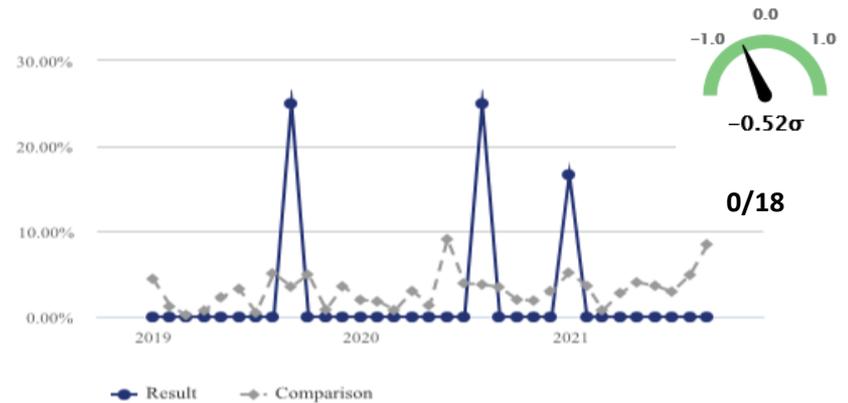
Mortality Rate (with Exclusions) - System-All Physicians

BHIP



Mortality Rate (with Exclusions) - System-All Physicians

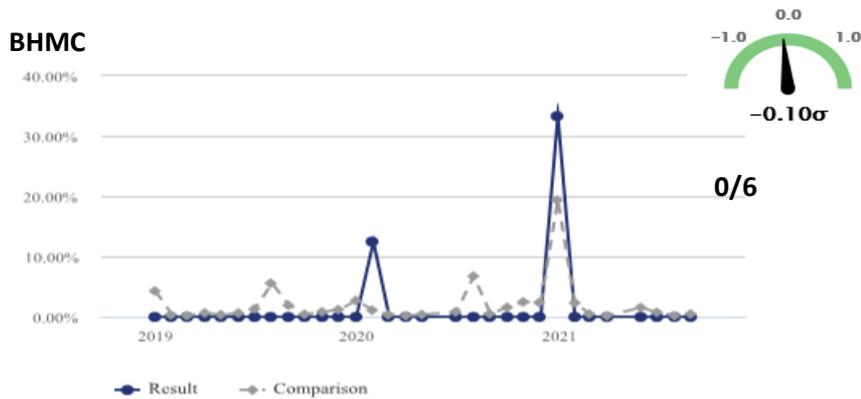
BHCS



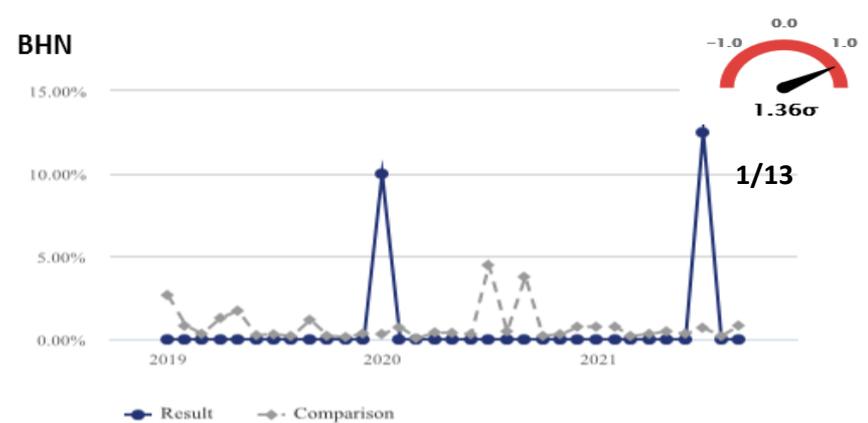
COPD Medicare Mortalities 3rd Q 2021

Hospital Compare CMS benchmark 8.1%

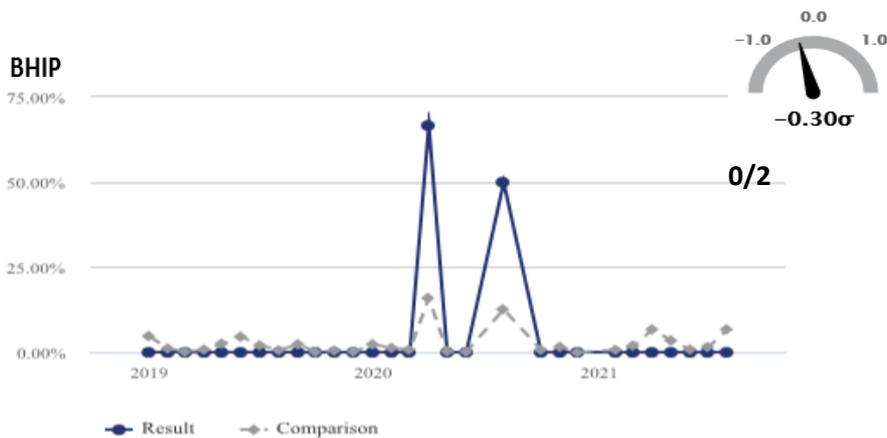
Mortality Rate (with Exclusions) - System-All Physicians



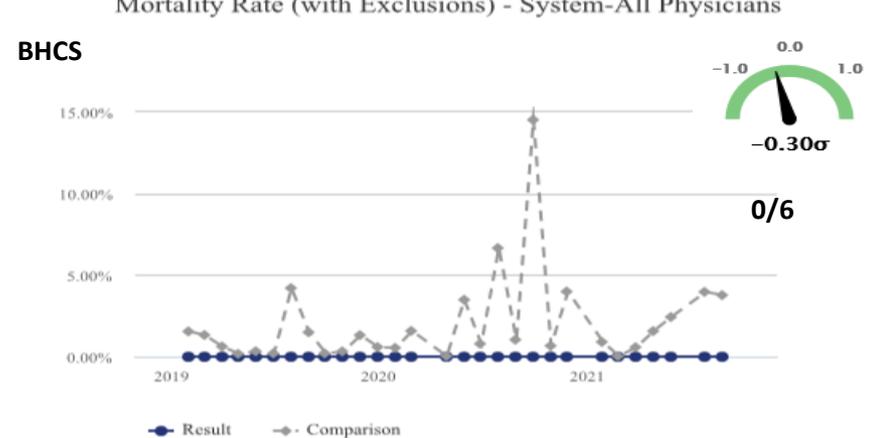
Mortality Rate (with Exclusions) - System-All Physicians



Mortality Rate (with Exclusions) - System-All Physicians

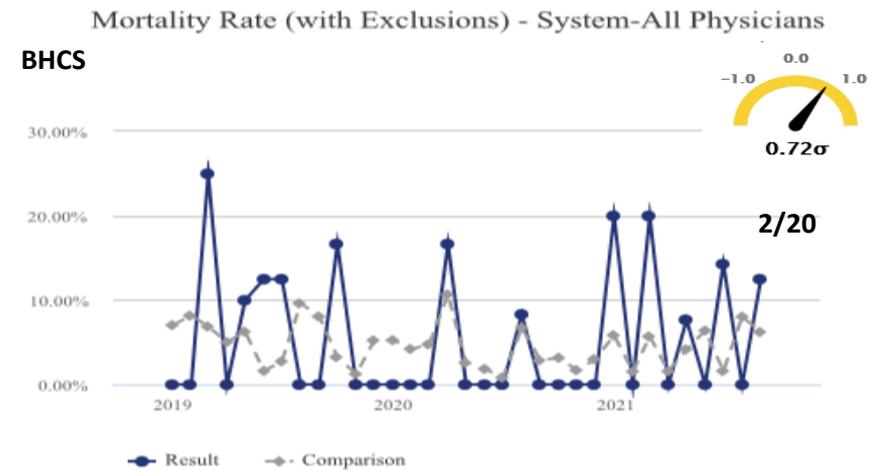
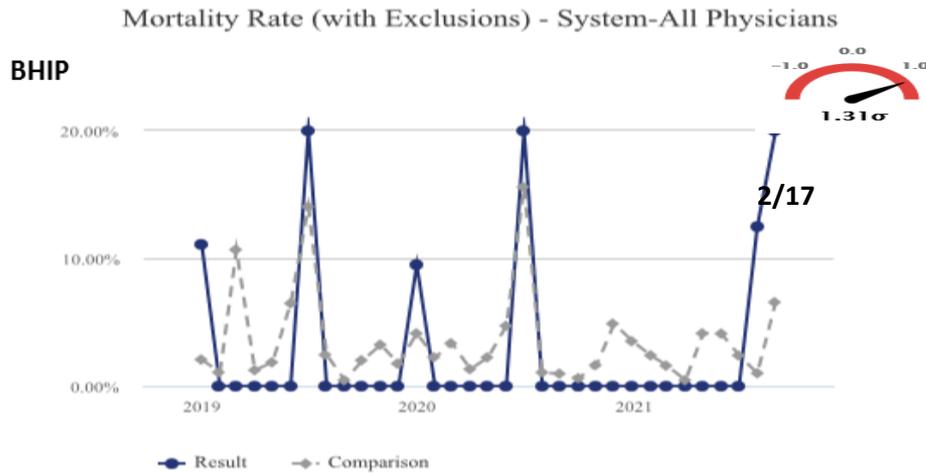
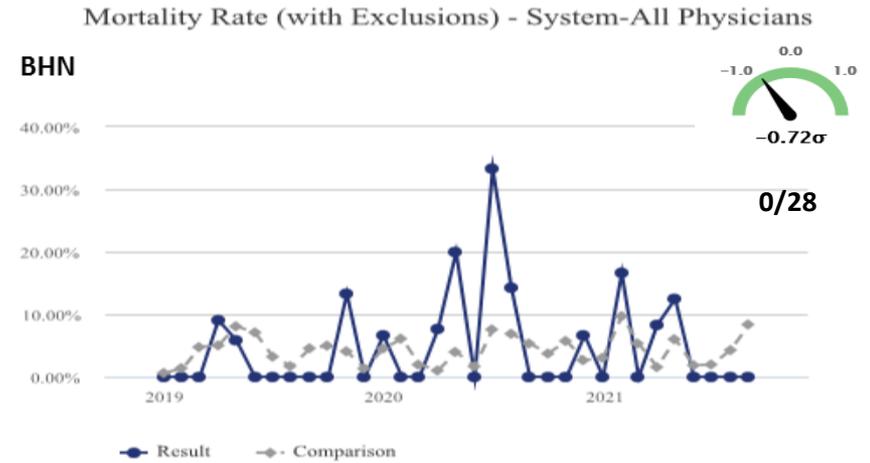
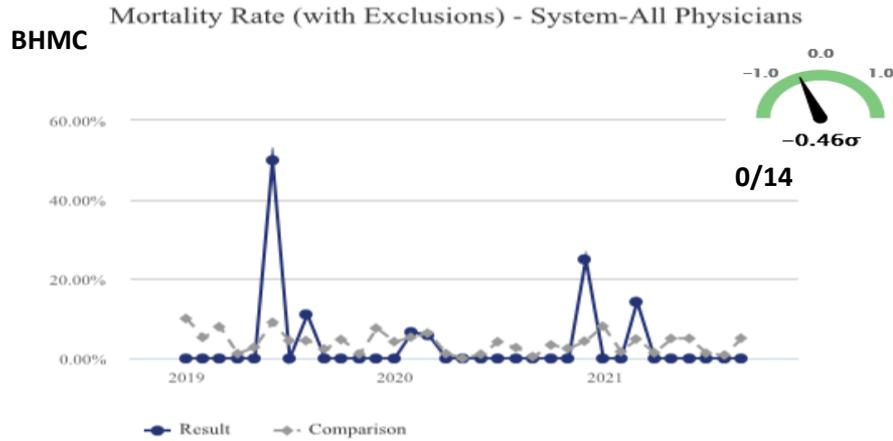


Mortality Rate (with Exclusions) - System-All Physicians



PN Medicare Mortalities 3rd Q 2021

Hospital Compare CMS benchmark 16.0%

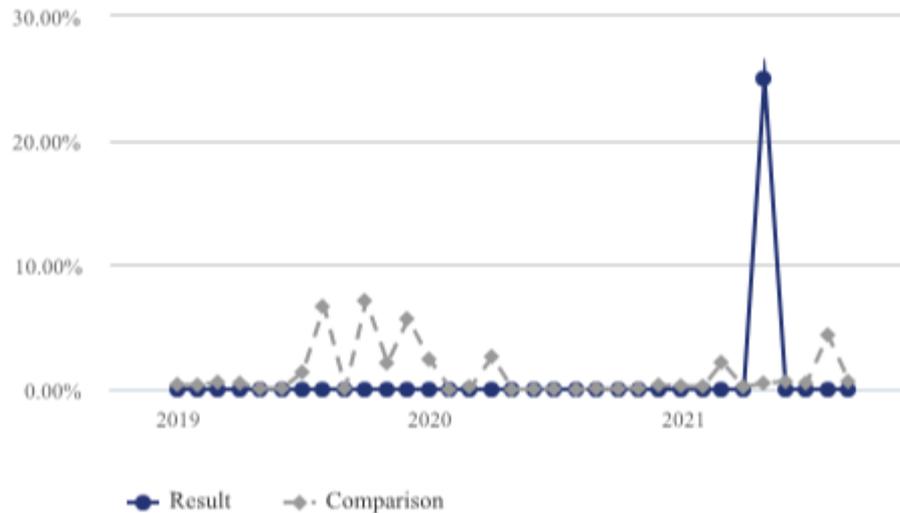


CABG Medicare Mortalities 3rd Q 2021

Hospital Compare CMS benchmark 3.3%

BHMC

Mortality Rate (with Exclusions) - System-All Physicians



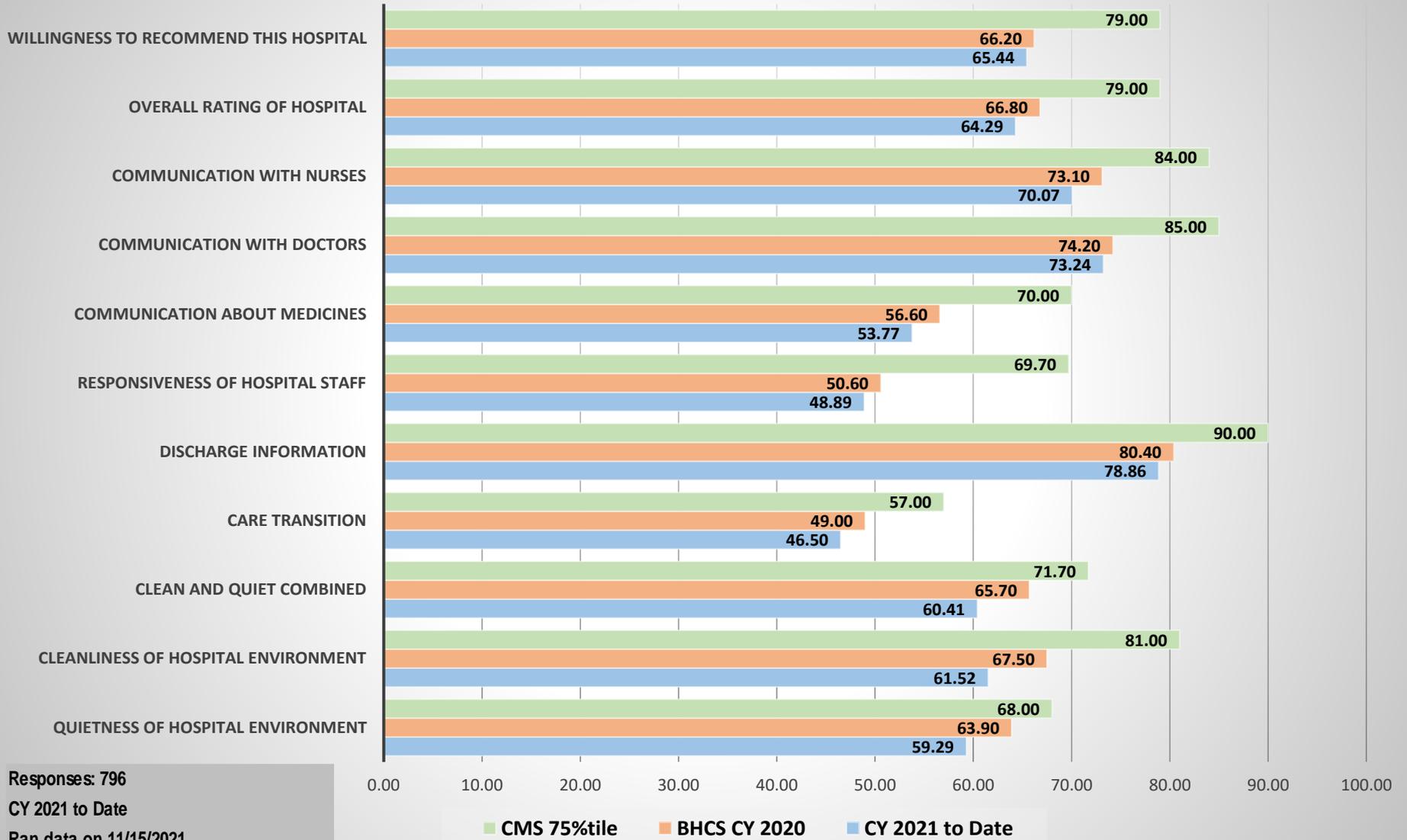
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6.11 BHC 2021 HCAHPS PMR/MOR REPORT

November 29, 2021



BHCS CMS HCAHPS CY 2021

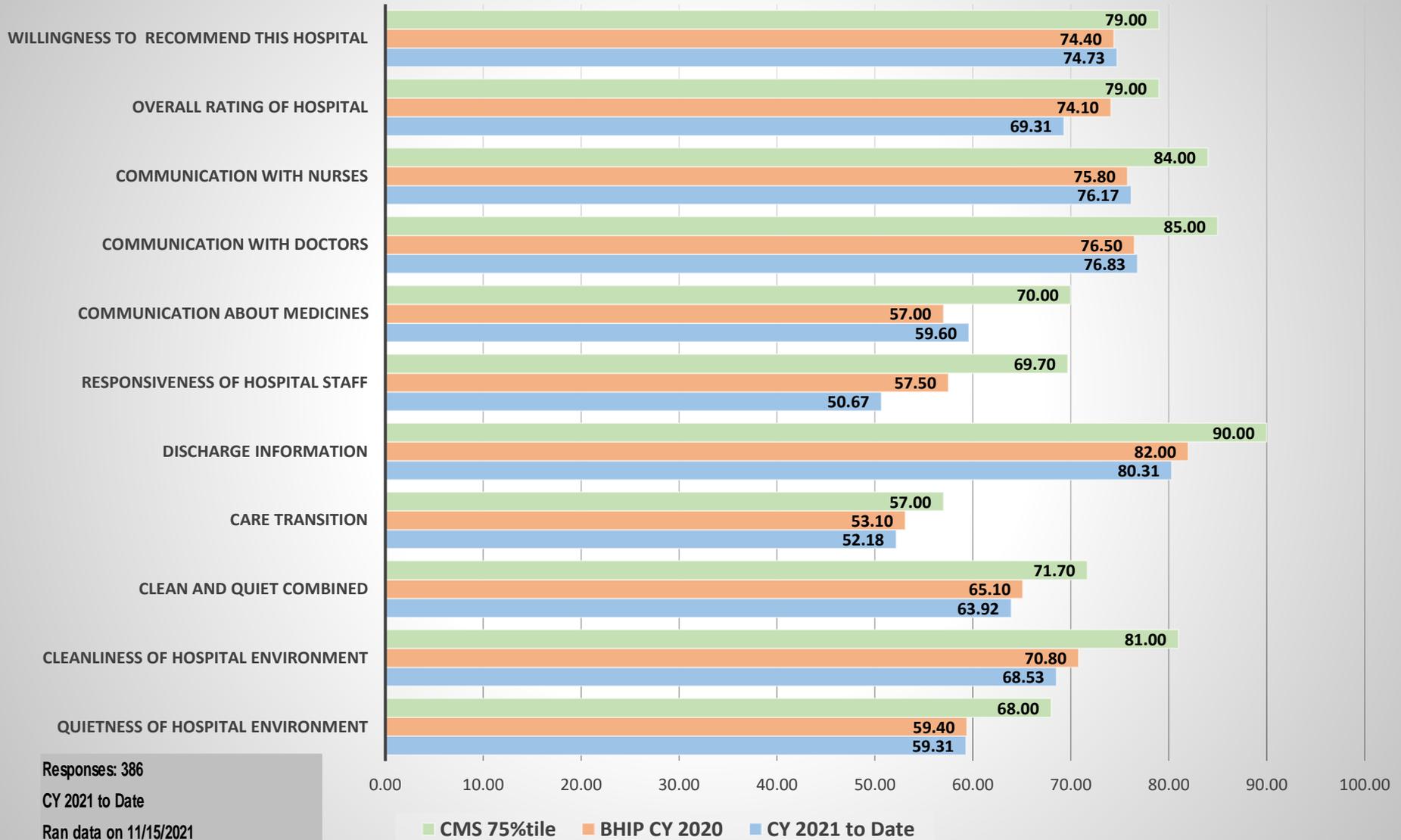


Responses: 796

CY 2021 to Date

Ran data on 11/15/2021

BHIP CMS HCAHPS CY 2021

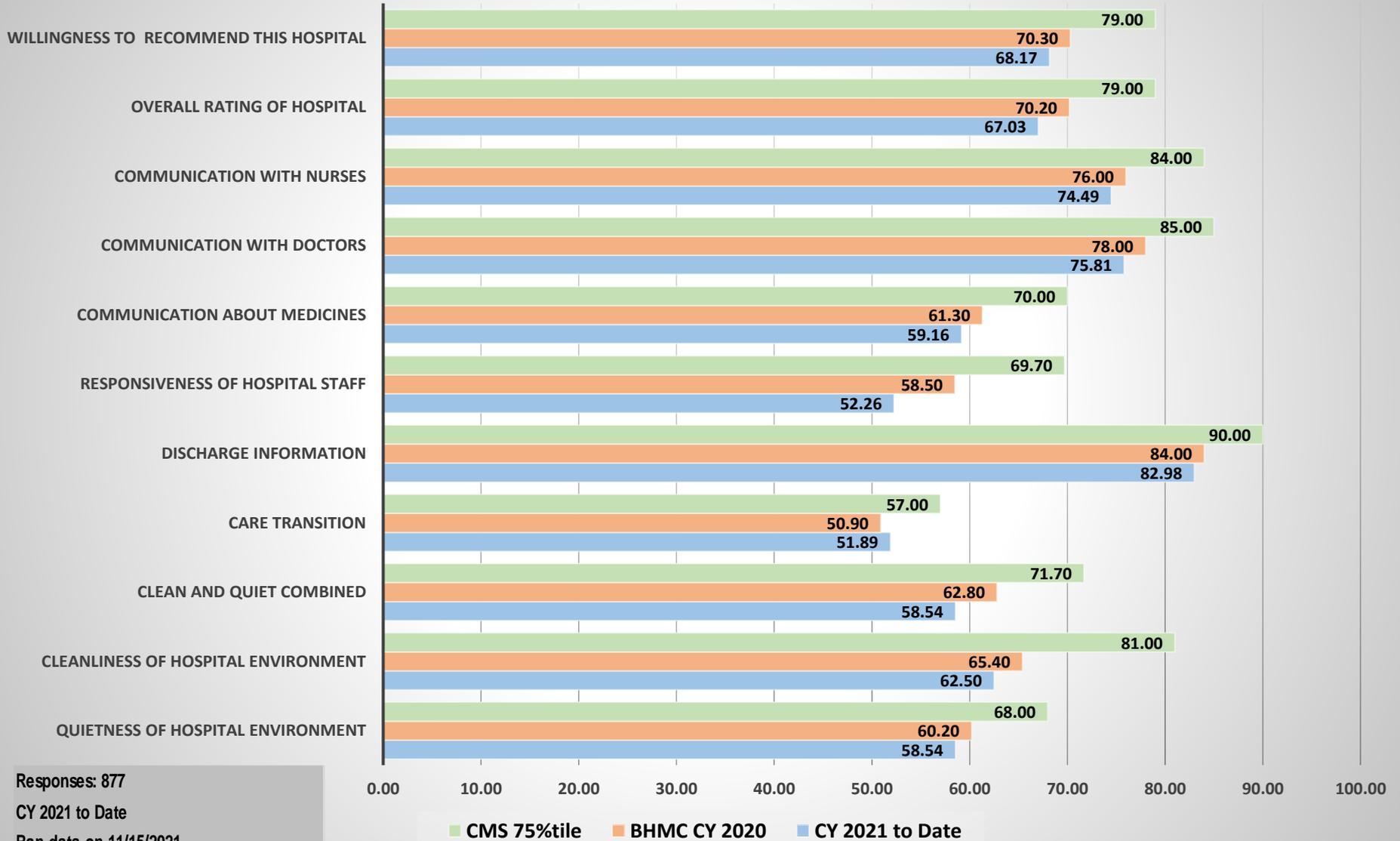


Responses: 386

CY 2021 to Date

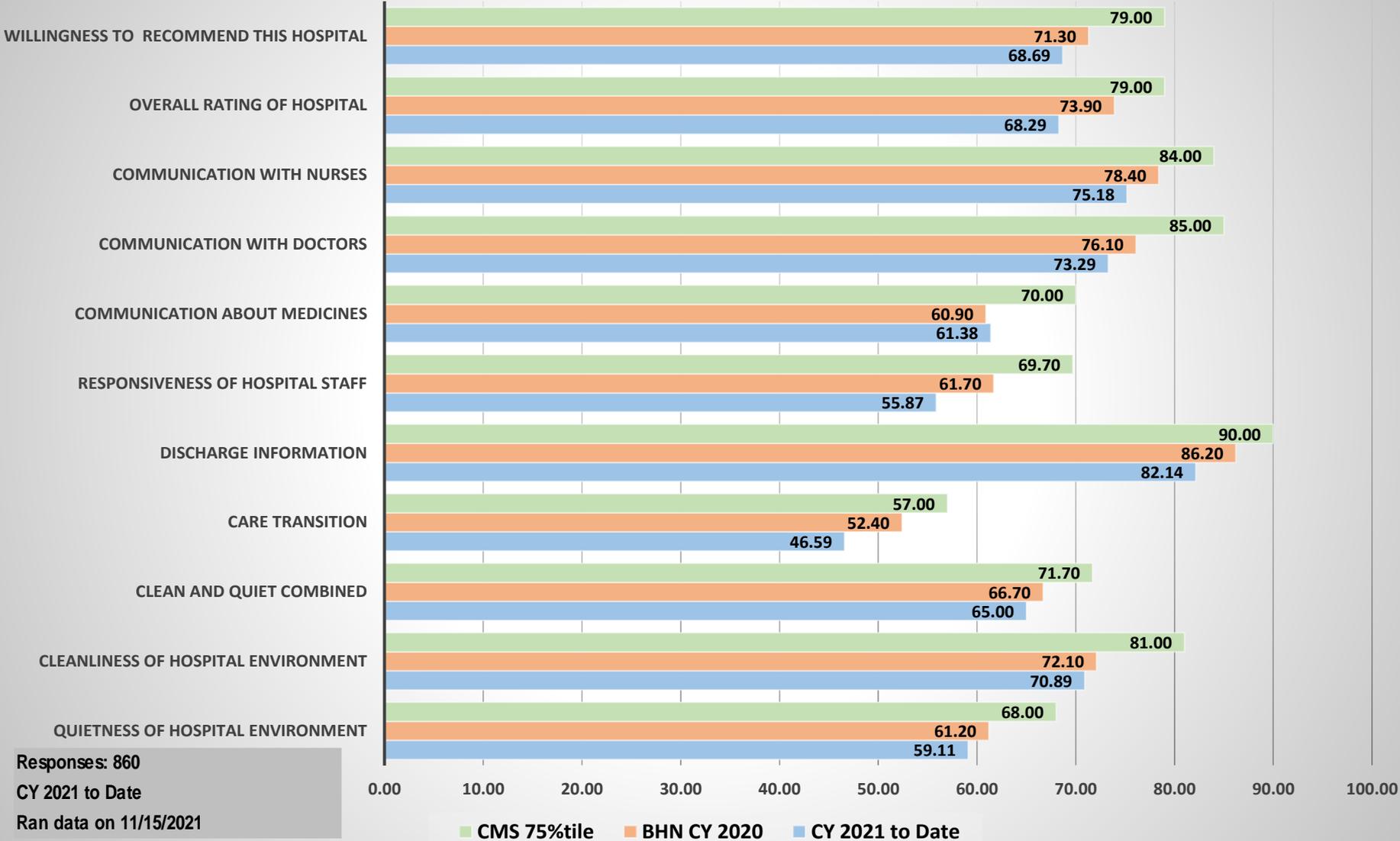
Ran data on 11/15/2021

BHMC CMS HCAHPS CY 2021



Responses: 877
 CY 2021 to Date
 Ran data on 11/15/2021

BHN CMS HCAHPS CY 2021

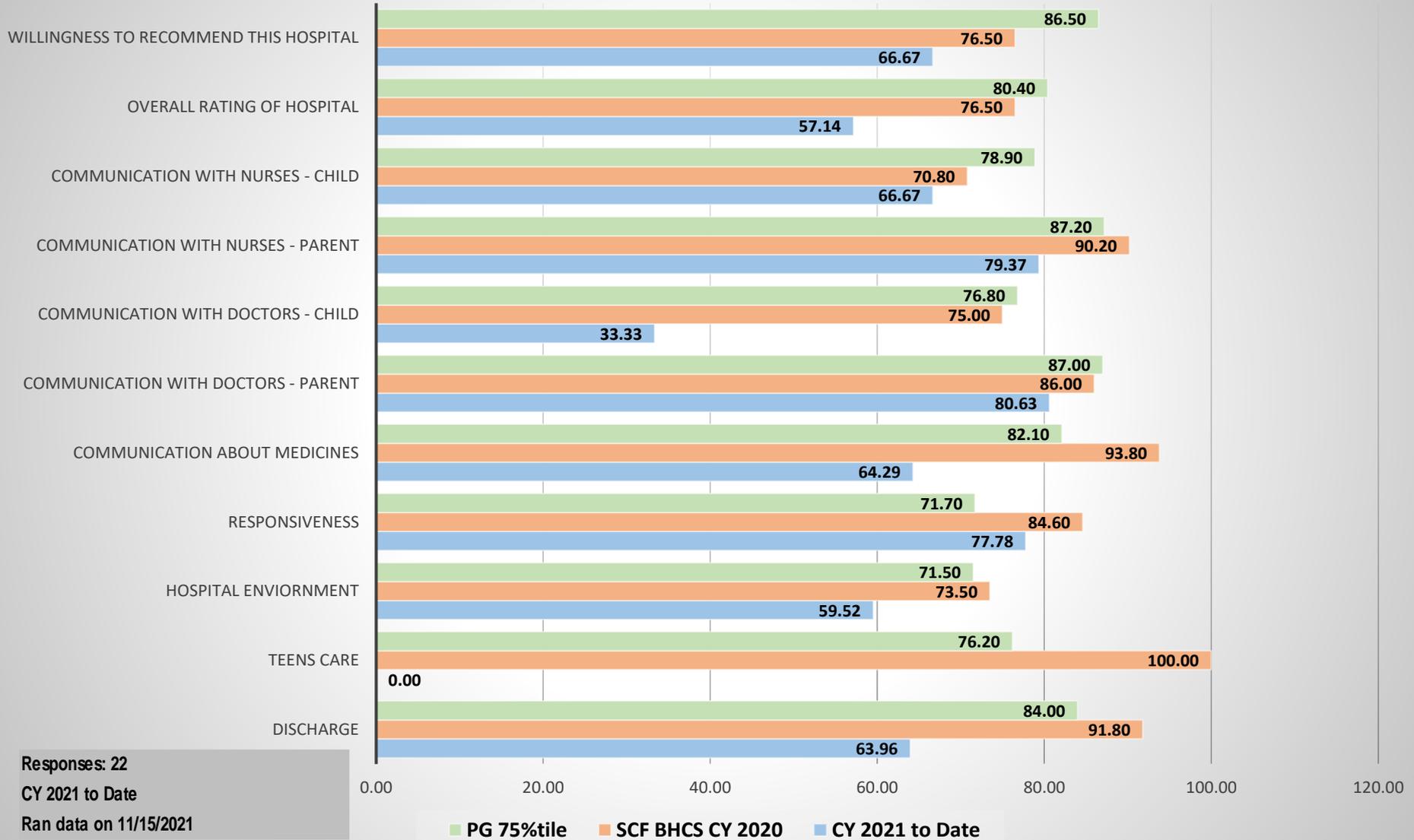


Responses: 860

CY 2021 to Date

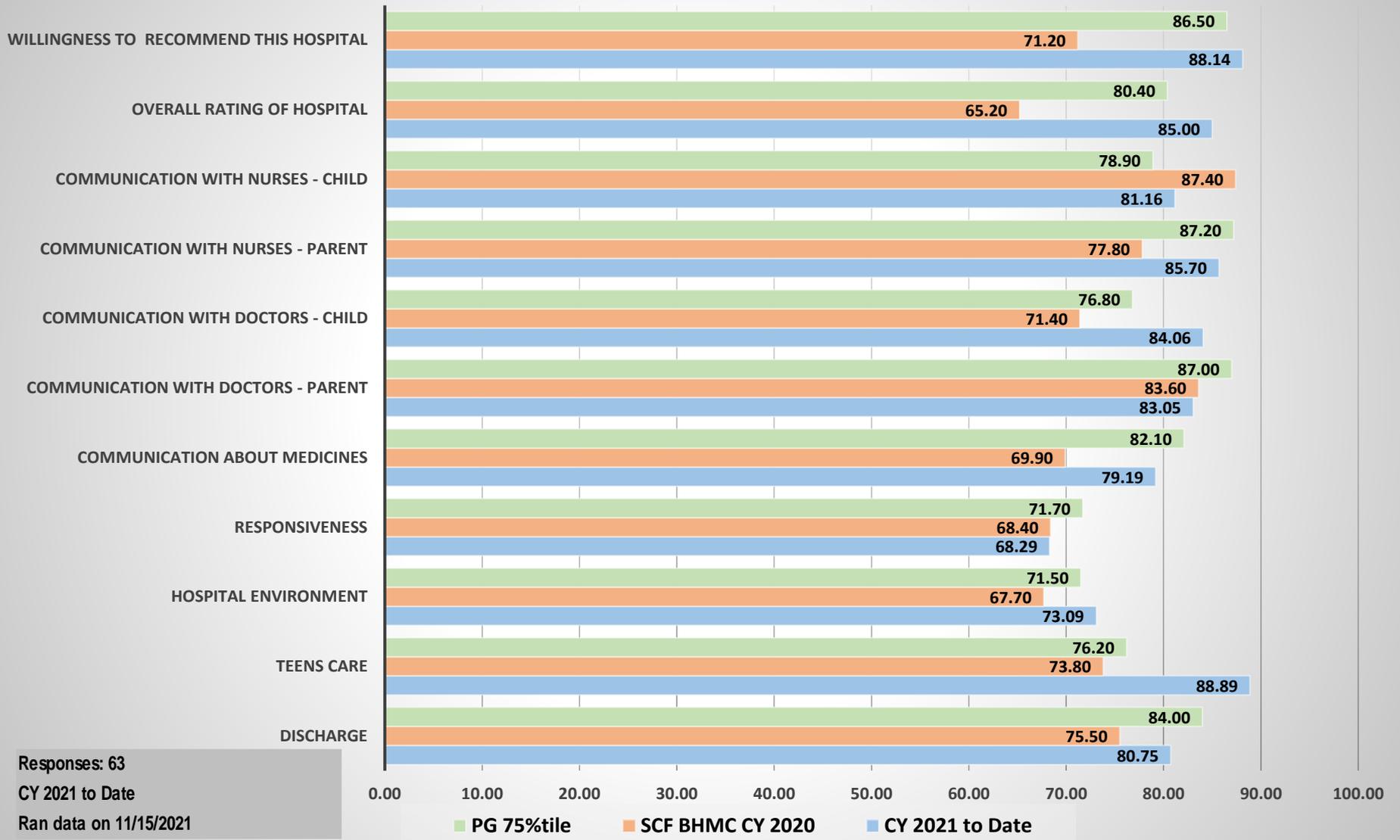
Ran data on 11/15/2021

Salah Children's BHCS HCAHPS CY 2021



Responses: 22
 CY 2021 to Date
 Ran data on 11/15/2021

Salah Children's Hospital BHMC CY 2021



Responses: 63
 CY 2021 to Date
 Ran data on 11/15/2021

BH CMS HCAHPS Comparison CY 2021

BHMC Responses: 877
 BHN Responses: 860
 BHIP Responses: 386
 BHCS Responses: 796

WILLINGNESS TO RECOMMEND THIS HOSPITAL

OVERALL RATING OF HOSPITAL

COMMUNICATION WITH NURSES

COMMUNICATION WITH DOCTORS

COMMUNICATION ABOUT MEDICINES

RESPONSIVENESS OF HOSPITAL STAFF

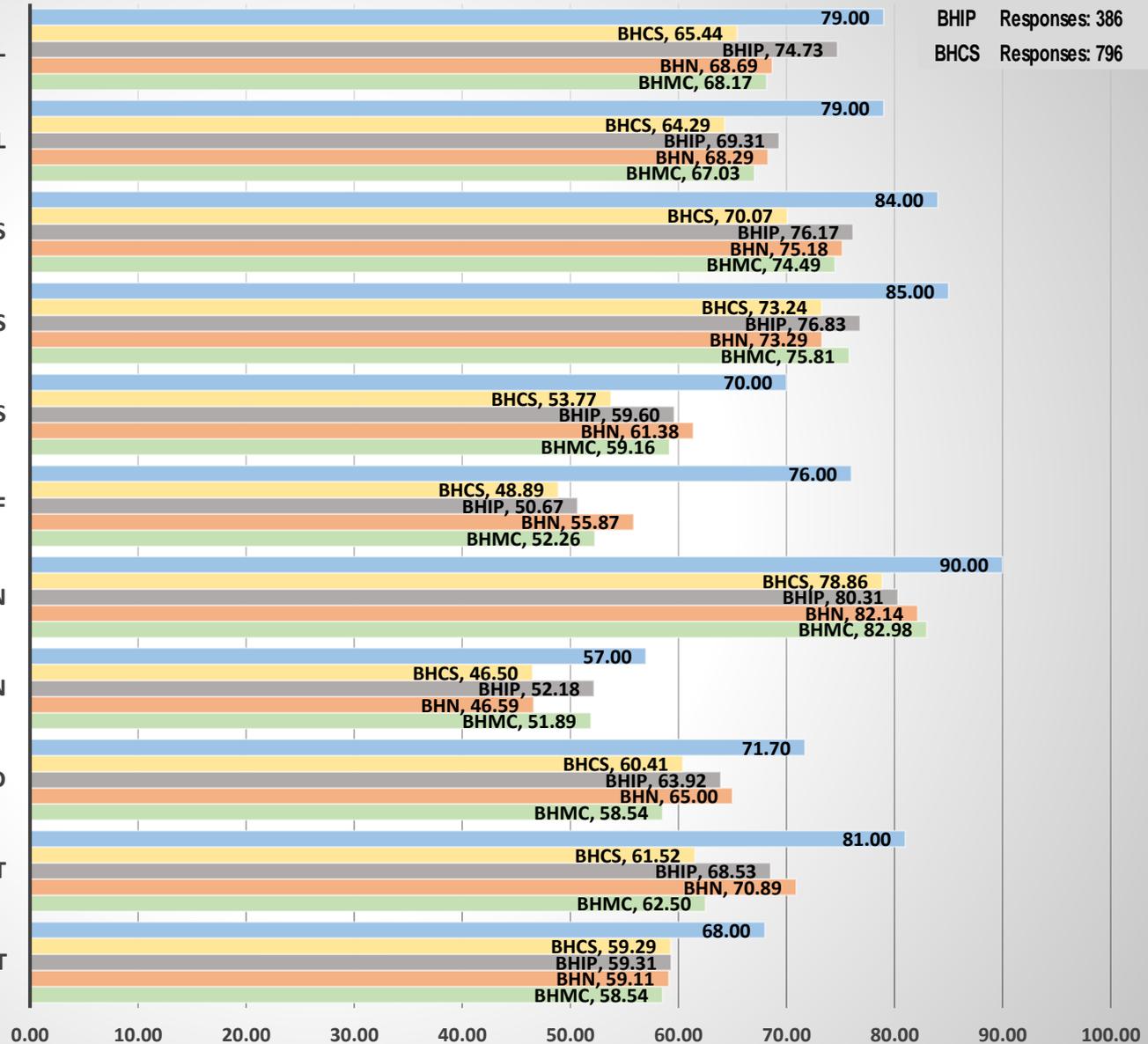
DISCHARGE INFORMATION

CARE TRANSITION

CLEAN AND QUIET COMBINED

CLEANLINESS OF HOSPITAL ENVIRONMENT

QUIETNESS OF HOSPITAL ENVIRONMENT



CY 2021 to Date

Ran data on 11/15/2021

■ CMS 75%tile ■ BHCS ■ BHIP ■ BHN ■ BHMC