

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	FY21 Result	FY22
Decrease Patient Falls	Count=8	Count = 5
Decrease 30-day same hospital readmissions	Count = 7; Rate 5.69%	Count = 5; Rate = 3.37%
Decrease Adverse Drug Events (category D-I)	Count = 1	Count = 2
Decrease Potential ADEs (category C)	Count = 13	Count = 17

Safety Initiatives:

1. Handrail being added to east side of surgery hallway at recommendation of the Safety Committee
2. HazMat training for ER/EMS/Plant Ops/Senior Leaders
3. Upgraded security light in East employee parking lot
4. Handrail added to Senior Life Solution entrance
5. Missing person drill conducted during the month of June
6. Medication Error Reduction Project

Quality

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

Pharmacy Department Quality Spotlight:

Measure	Goal	Source		Overall YTD
Pharmacy				
Reduction of Adverse Drug Events	≤ 1	HQIC/Me rcy	NUM	20
			DEN	892
			RATE	0.02
Antibiotic Days of Therapy (DOT)	trending down	HQIC	NUM	663
			DEN	892
			RATE	0.74
% of high Dose opioid precribing upon discharge	≤ 25%	HQIC	NUM	2
			DEN	83
			RATE	2%
% of patient that have a 48-hour timeout completed	≥ 90%	HQIC	NUM	205
			DEN	225
			RATE	91%

Quality Initiatives:

1. Process improvement: workflow for patients presenting with in-hand orders
2. Process improvement: patient's presenting for multiple services

Patient Satisfaction – Top Box

Service Line	FY22 Likelihood to Recommend Current
Ambulatory Surgery	83.63%
Emergency Department	89.92%
Inpatient	68.42%
Medical Associates Clinic	95.59%
Outpatient Services	94.62%