Quality Assessment & Performance Improvement Report Board of Trustees

February 2024

Department	Aligns With	Measure	Target Goal	Month
Acute Care	IHC	DCHC will maintain no hospital-acquired pressure injuries.	0	0
Acute Care	MercyOne & IHC	Fall rate of 4.5 or less in FY 2024	≤ 4.5 per 1,000 pt days	0 in February 8 for FY
Infection Prevention	IHC	Patients at DCHC will experience no healthcare associated infections during FY2023 (CLABSI, SSI, CAUTI)	0	0 (to date)
Pharmacy	MercyOne & IHC	Zero Category D-I adverse drug events	0	0

Patient Safety/Performance Improvement Activities:

- Fall prevention measures rollout.
 - Staff education and expectations completed in February.
 - Rolled out these measures, with full adoption expectation of March 1.

5 High-Priority Interventions for Fall Prevention **Early Mobility BUS STOP Check** Visual Displays Huddles Purposeful Rounds Hourly Days Every Two Hours Nights Days Without Falls Incorporate Fall Patient & family Bed Alarm On Huddle Board education Information Hallway Pain Safety Huddle Focus on Patient Safety -Position Ambulate 4 x per day Up Walking x Ask Open-Ended Questions > Assist to chair or Patient Visual bed/reposition Record on White Board Who's at high risk Potty Indicators Stay With Me in Toileting for falls? Bracelet Offer toileting at Who call tell me our Document in Record Socks each rounding falls safety Blanket > Check and change if interventions? STOP and Check These Safety Interventions incontinent *Refer to Policy Possessions How many days > Personal belongings without falls? Bedside Shift Report and call light in reach Periphery Clear room of slip/trip hazards Implementation February 1 - March 1, 2024