

Quality Assessment & Performance Improvement Report
Board of Trustees

April 2024

Department	Aligns With	Measure	Target Goal	Month	Fiscal Year
Acute Care	IHC	DCHC will maintain no hospital-acquired pressure injuries.	0	0	0
Acute Care	MercyOne & IHC	Fall rate of 4.5 or less in FY 2024	≤ 4.5 per 1,000 pt days	0	10/1k pt days (Mar) Last 12/27/23
Infection Prevention	IHC	Patients at DCHC will experience no healthcare associated infections during FY2023 (CLABSI, SSI, CAUTI)	0	0	0
Pharmacy	MercyOne & IHC	Zero Category D-I adverse drug events	0	0	2 Last 11/27/23
Emergency	IHC	75% of patients meeting criteria for severe sepsis or septic shock have antibiotics administered within one hour of identifying last criteria. <i>(SIS alert to 1st atb admin report)</i>	75%	100%	80.39%

Patient Safety/Performance Improvement Activities:

- Changes were made to UR report beginning in March to increase monitoring of returns to ED, changes in level of care, and any level of care readmissions.