

## Quality Assessment & Performance Improvement Report

### Medical Staff and Board of Trustees

**October 2024 Report**  
September data

Department	Aligns With	Measure	Target Goal	Month	Fiscal Year 2025	Calendar Year 2024
Acute Care	IHC	DCHC will maintain no hospital acquired pressure injuries	0	0	0	0
Acute Care	MercyOne, IHC, QAPI Plan	Fall rate of 4.5 or less in FY 2024	≤ 4.5 per 1,000 pt days	0	0/1k pt days <small>Last 5/28/24</small>	1.61/1k pt days <small>(August)</small>
Infection Prevention	IHC	Patients at DCHC will experience no healthcare associated infections during FY2025 (CLABSI, SSI, CAUTI)	0	0	0	0
Clinical Departments, Pharmacy	MercyOne, IHC, QAPI Plan	Zero Category D-I adverse drug events (hospital-wide)	0	0	0 <small>Last 11/27/23</small>	0

#### Patient Safety/Performance Improvement Activities:

- EMS and Medical Records have been working together to improve documentation on release of responsibility forms for EMS refusals.
- Surgery and lab are working together to improve the process for patients needing lab work prior to a procedure as a result of a patient delay.
- Recently improved communication of events reported through hospital wide Safety Huddles.
- Added Safety Spotlight and Quality Corner to hospital newsletter to improve staff education and knowledge on how they are able to improve patient and personal safety and the quality of care provided to patients.
- The University of Iowa simulation truck came on site to provide nursing and EMS education. Simulations performed include a trauma patient as well as an infant in respiratory distress.