

Quality Assessment & Performance Improvement Report

Board of Trustees

August 2024 Report

July 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>	2.27/1k pt days
Infection Prevention	IHC	Patients at DCHC will experience no healthcare associated infections during FY2023 (CLABSI, SSI, CAUTI)	0	0	0	0
Pharmacy	MercyOne, IHC, QAPI Plan	Zero Category D-I adverse drug events	0	0	0 <small>Last 11/27/23</small>	0
Emergency	IHC, QAPI Plan	75% of patients meeting criteria for severe sepsis or septic shock have antibiotics administered within one hour of identifying last criteria. <small>(SJS alert to 1st atb admin report)</small>	75%	100%	100%	77.78%
<p><i>Time frame for antibiotic administration for severe sepsis/septic shock is three hours, though the gold standard is within one hour. We are at 94.44% compliance with administration within three-hours for the calendar year.</i></p>						

Patient Safety/Performance Improvement Activities:

- Public Health completed their transition of historic immunization records from paper to IRIS, the electronic system used in Iowa for vaccine administration records.
- The ParaPac ventilators that were in use in our ambulances were pulled due to safety recalls and replaced with new ventilators that had already been purchased.
- Due to a shortage of blood culture bottles, CDC/FDA recommendations for conservation of supplies was sent to applicable areas.