



CLINICAL AND SAFETY PERFORMANCE METRICS

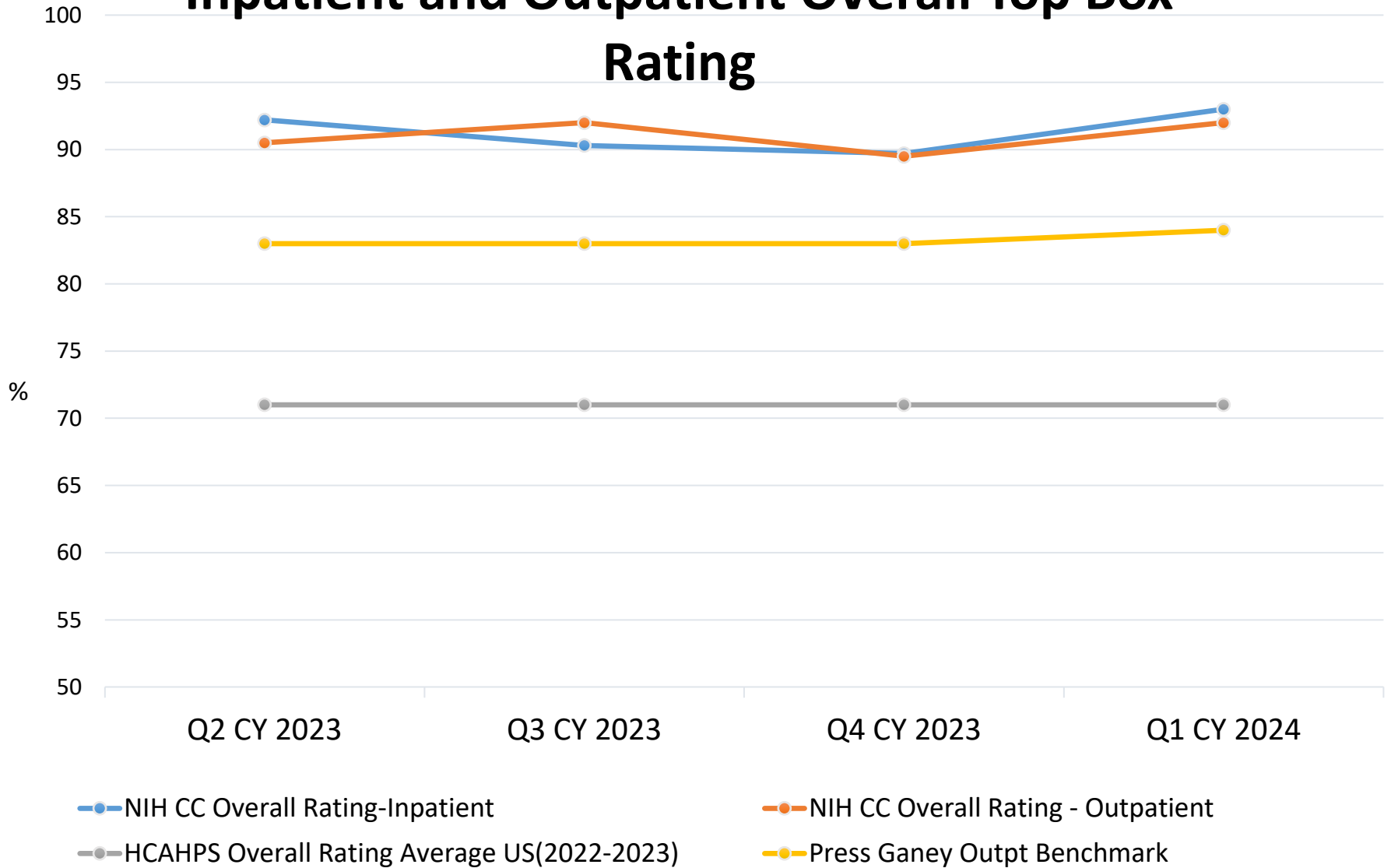
Executive Dashboard

NIH Clinical Center
June 2024

Patient Perceptions

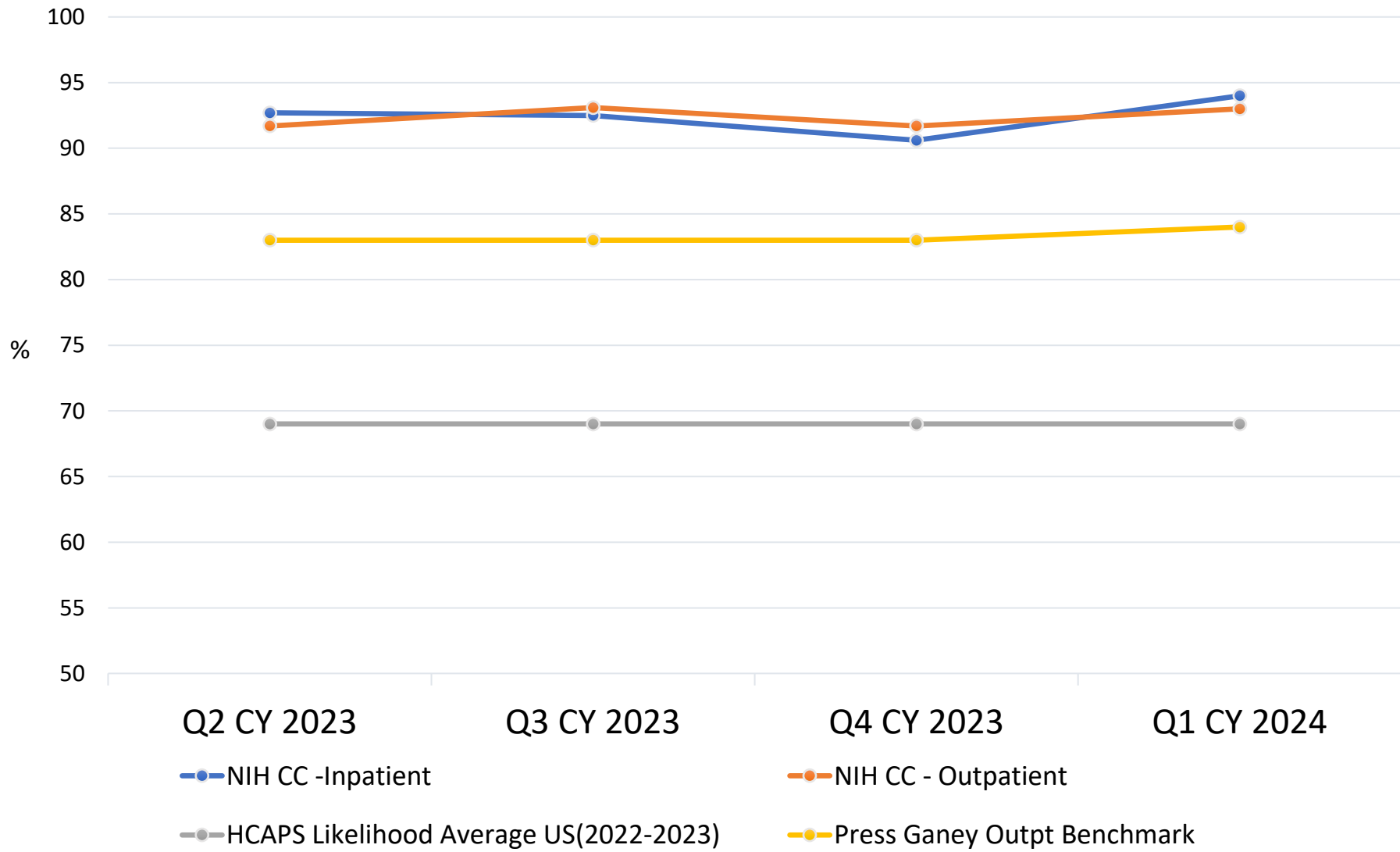
- Press-Ganey Survey Results:
 - Overall Assessment
 - Likelihood of Recommending

Inpatient and Outpatient Overall Top Box Rating



3 questions in the Overall Assessment Domain

Inpatient and Outpatient Likelihood to Recommend

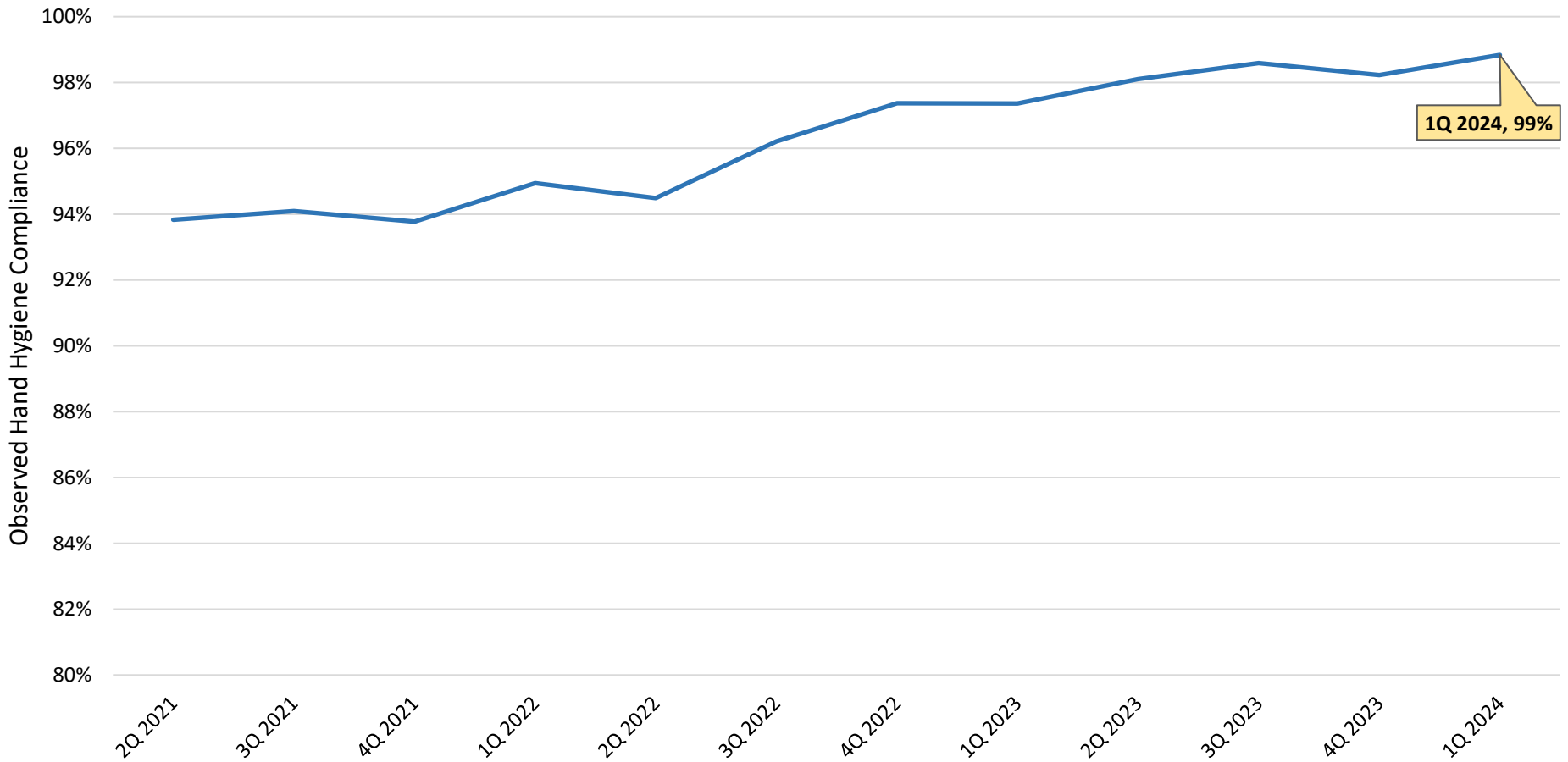


Infection Control Metrics

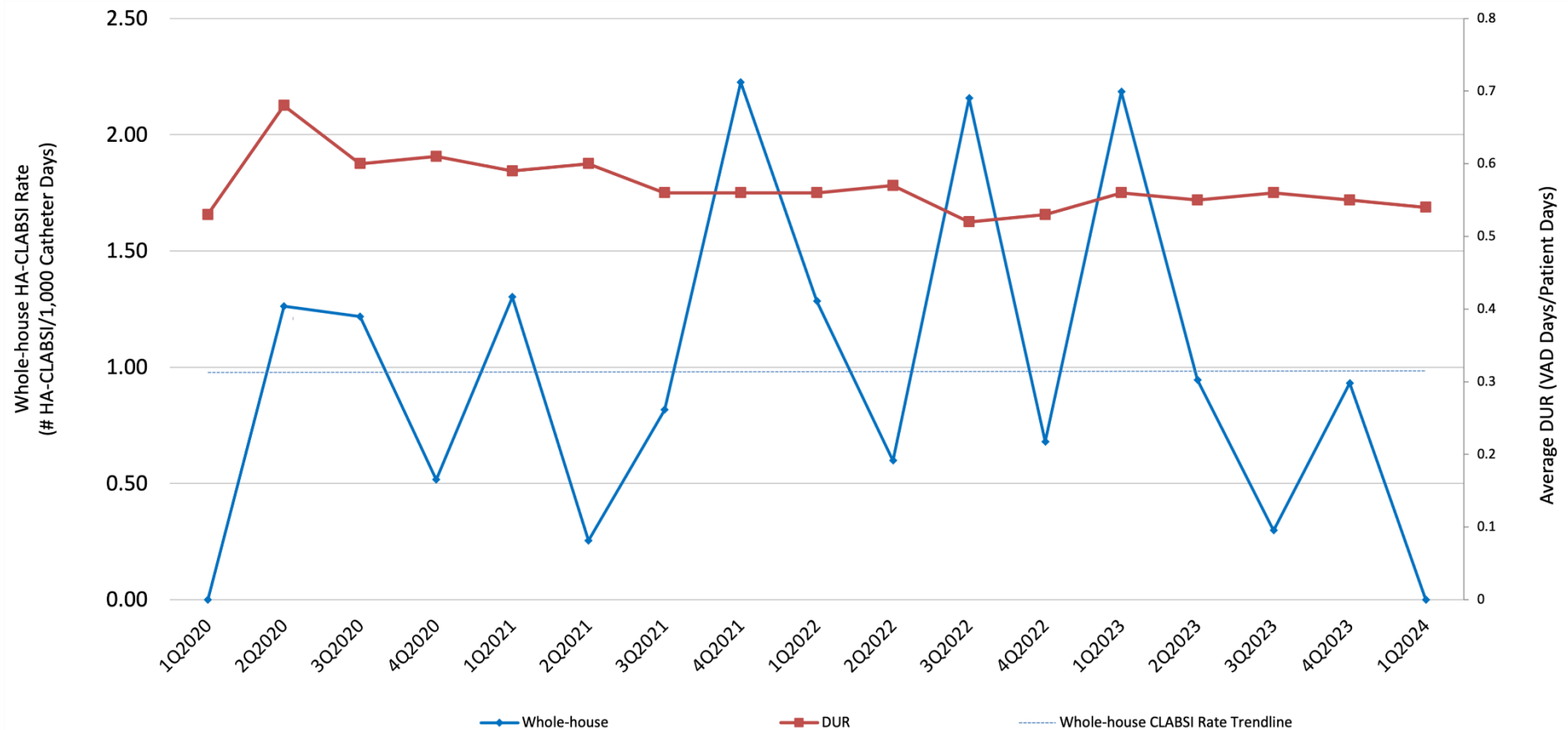
- Hand Hygiene
- Central-Line Associated Bloodstream Infections
 - Whole-House
 - Intensive Care Unit
- Catheter Associated Urinary Tract Infections
 - Intensive Care Unit
 - Surgical Oncology
- Surgical Site Infections

Staff Hand Hygiene Compliance by Quarter

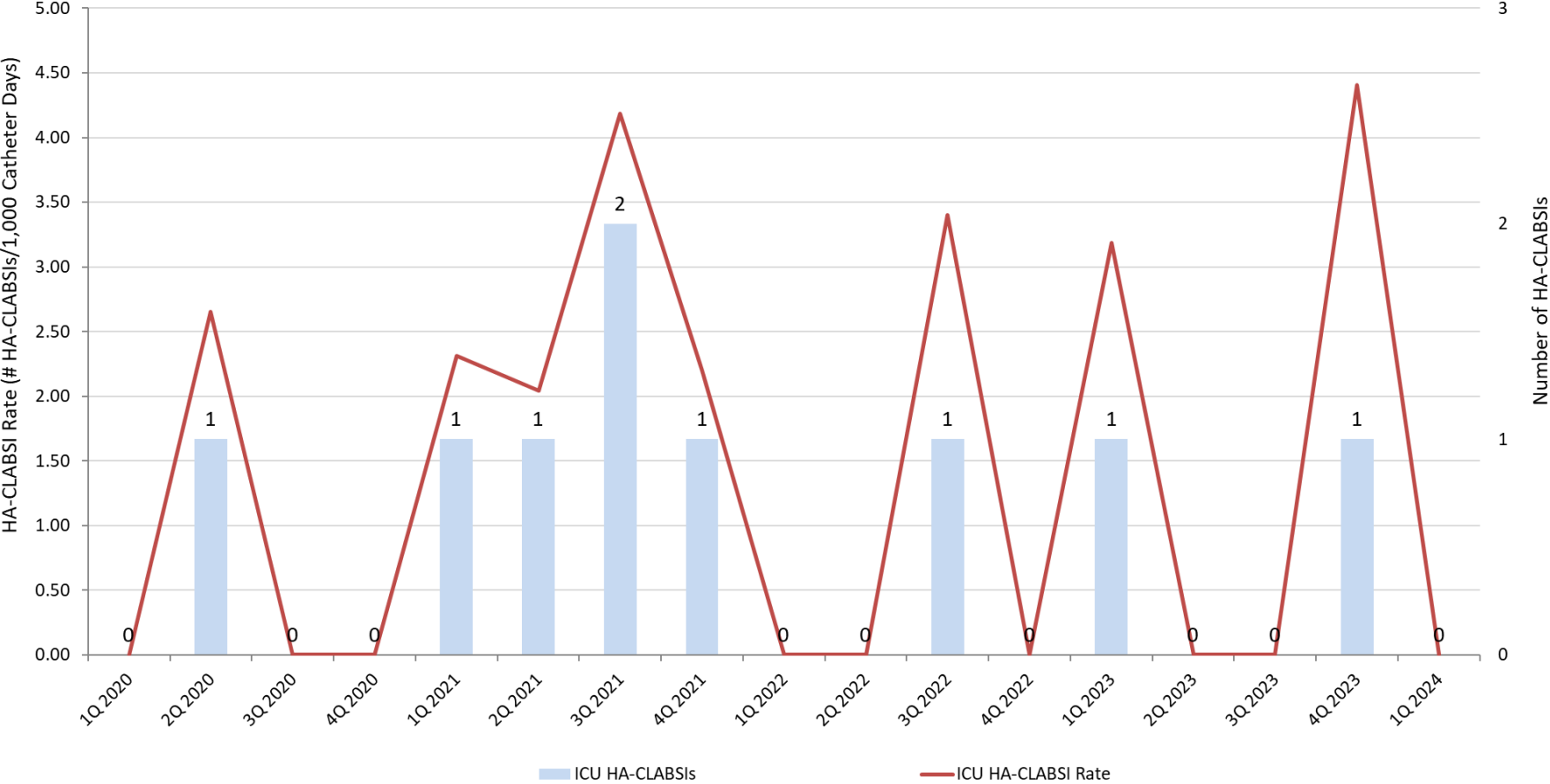
Whole House Hand Hygiene Compliance, 1Q 2024



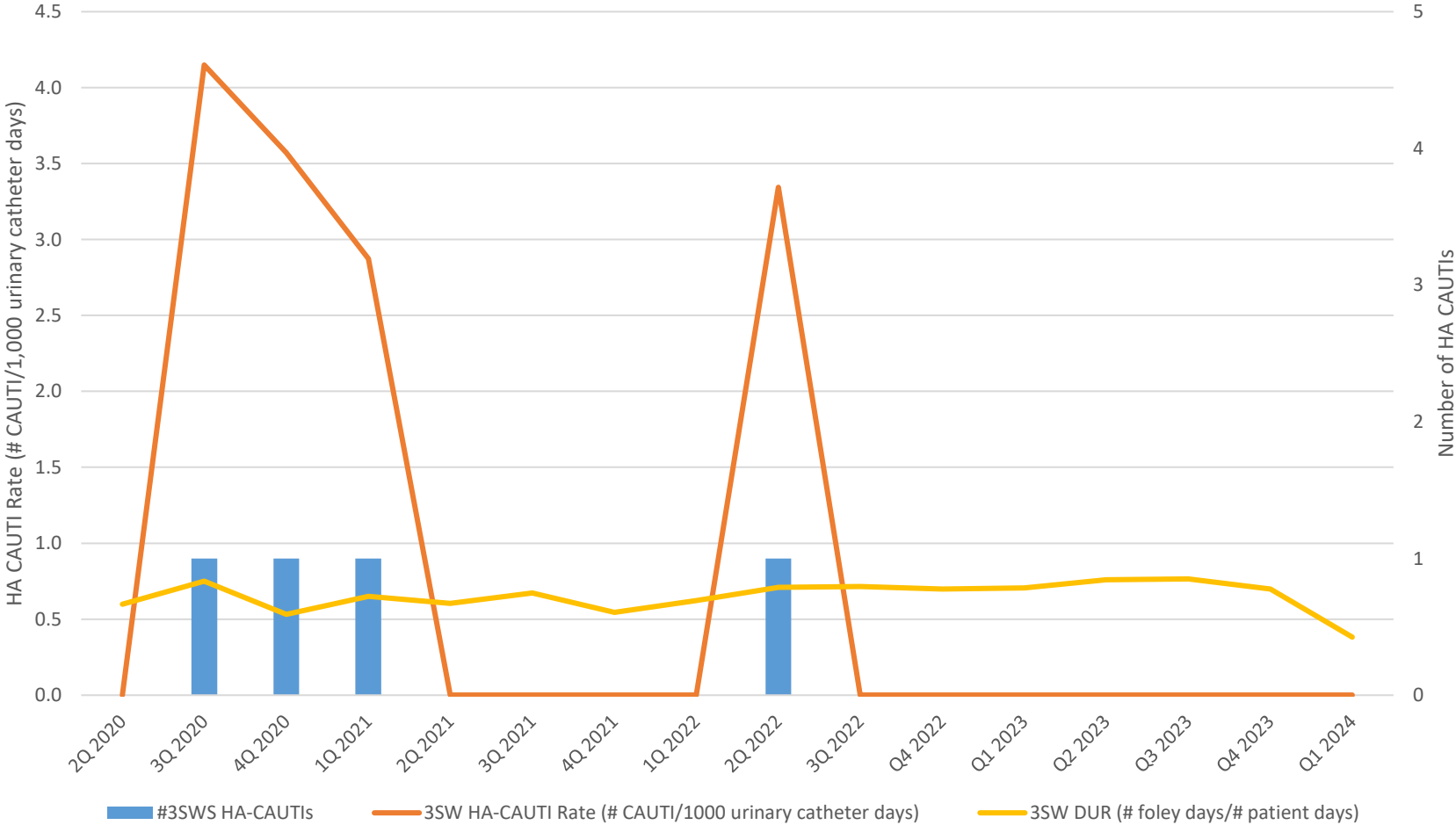
Whole-House Hospital-Acquired Central Line-Associated Bloodstream Infection Rates



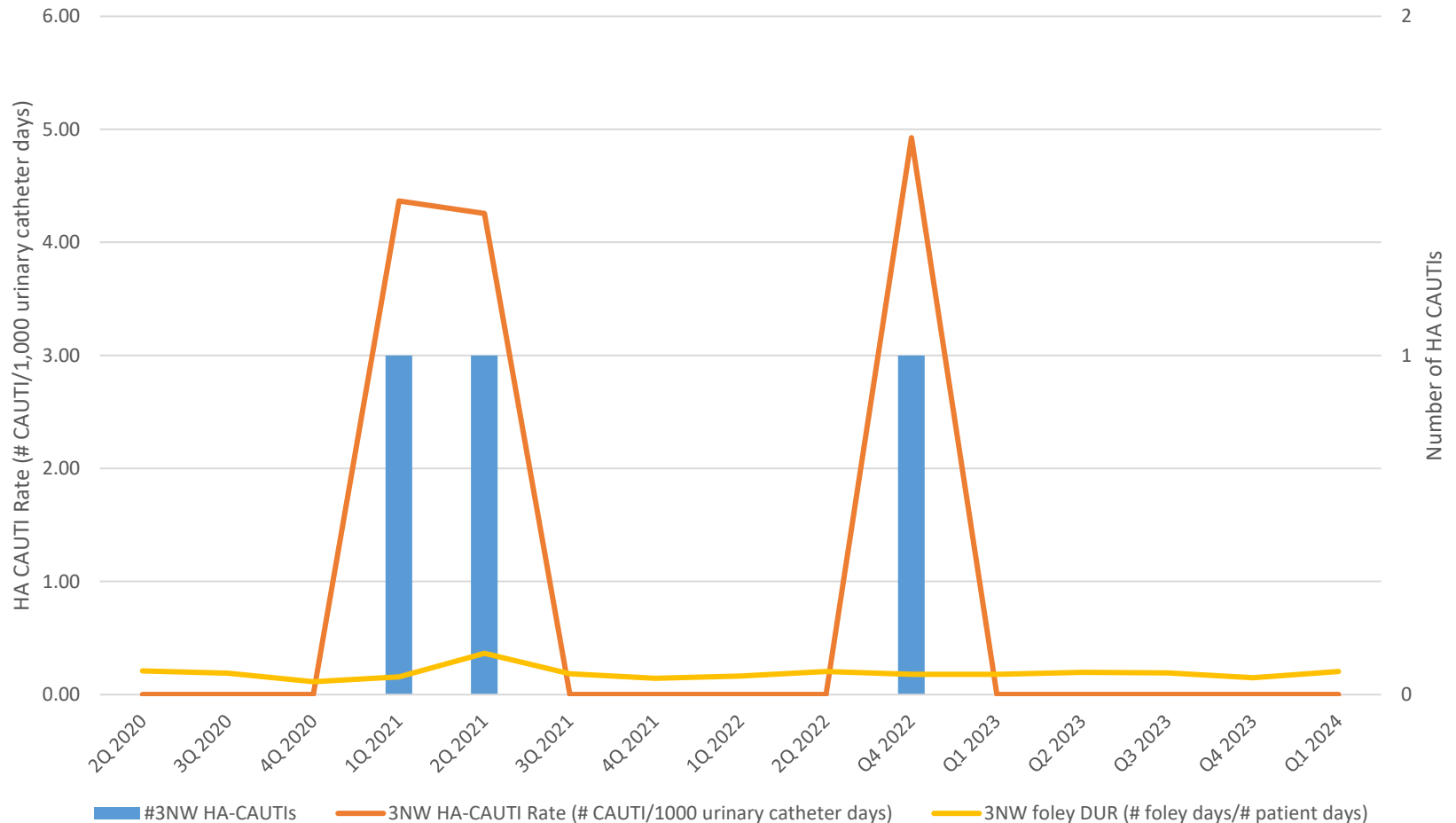
HA-CLABSI Incidence and Rates by Unit, ICU



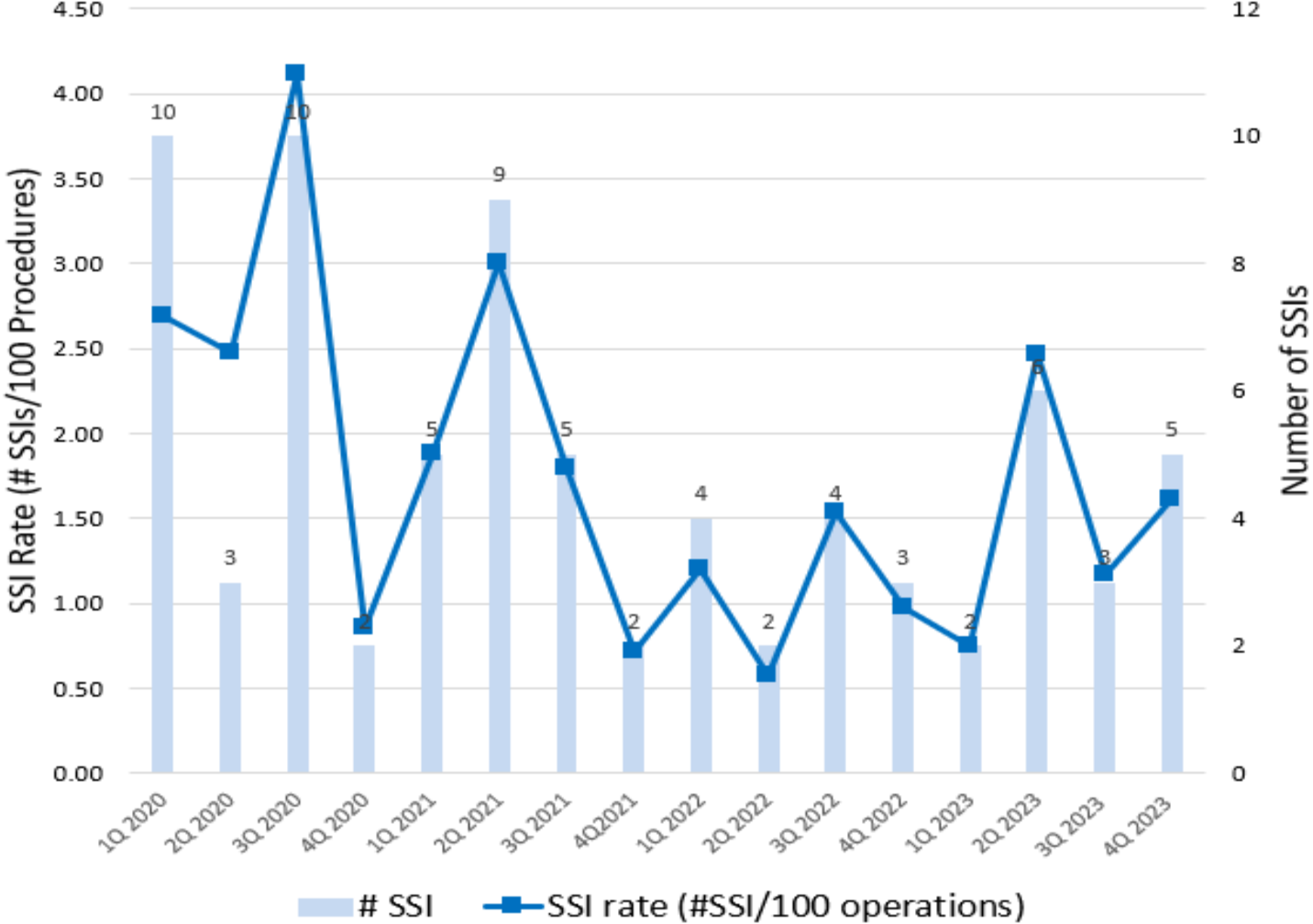
Hospital-Acquired Catheter-Associated UTI (3SWS/ICU)



Hospital-Acquired Catheter-Associated UTI (3NW)



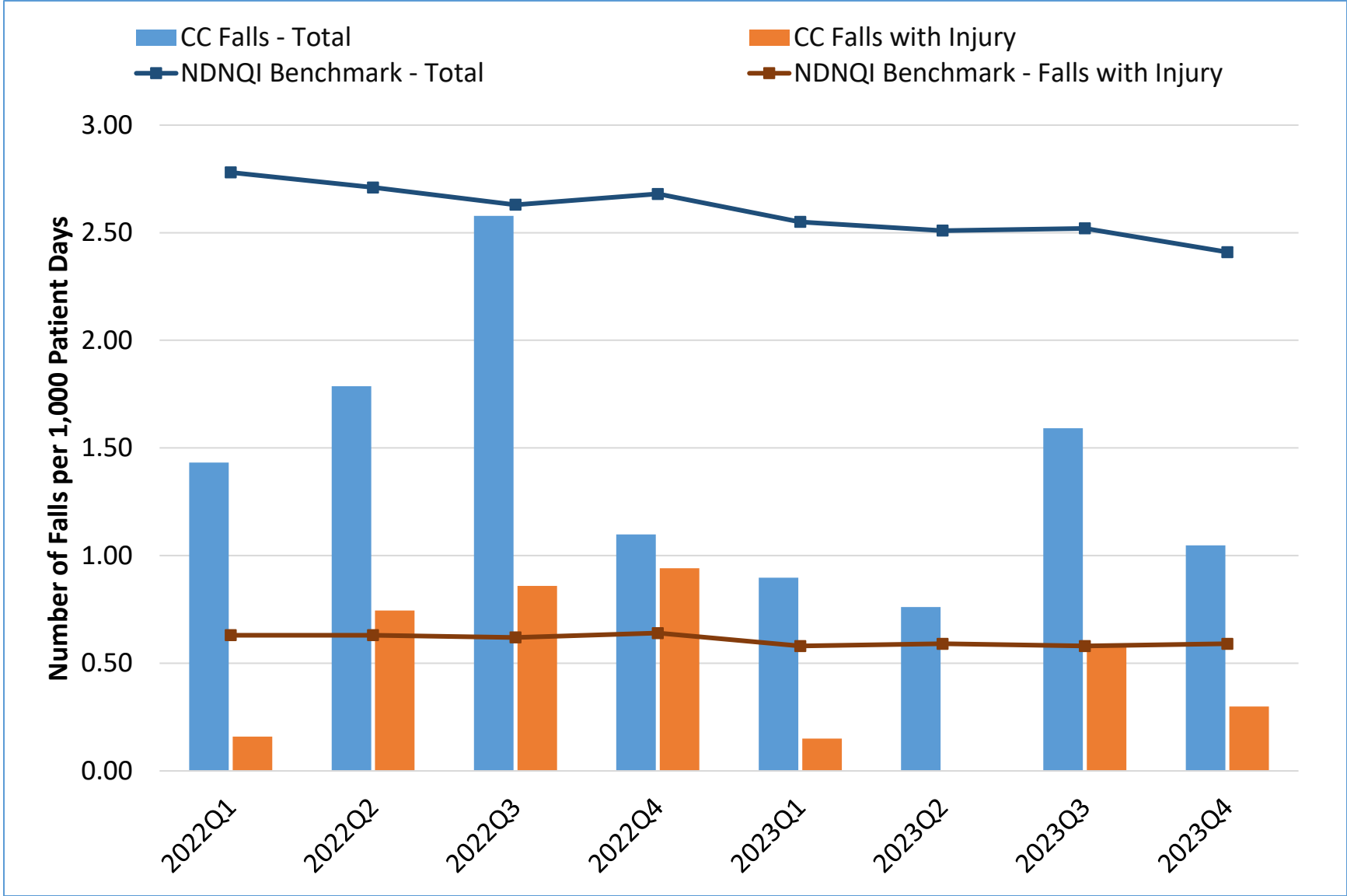
Surgical Site Infection Rate



Nursing Quality Metrics

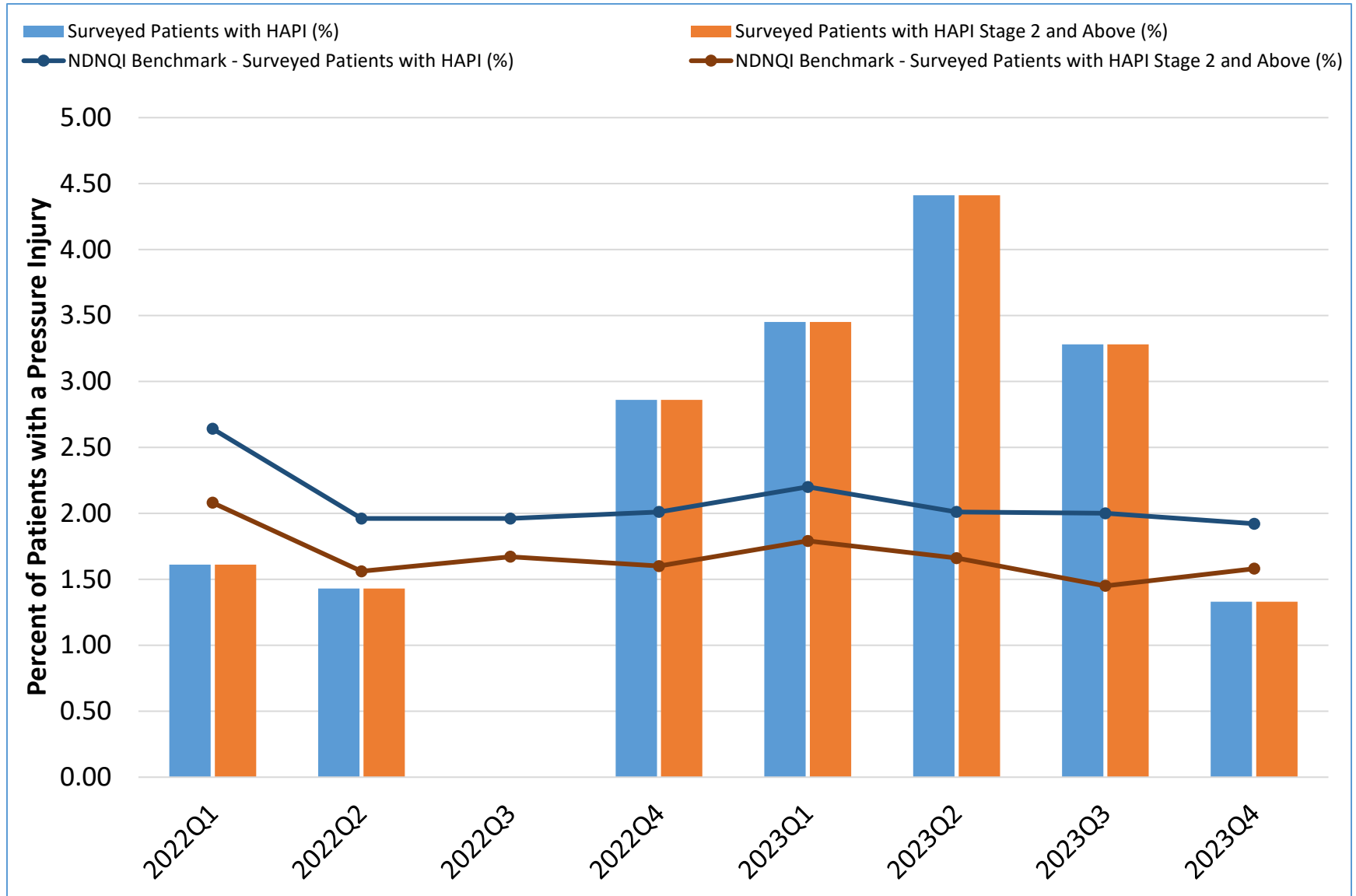
- Falls
- Pressure Injury
- Note: See prior section for CLABSI and CAUTI

Inpatient Falls Rate



NDNQI Benchmark Data for Teaching Hospitals (Bed Size 100-199)

Pressure Injury Prevalence

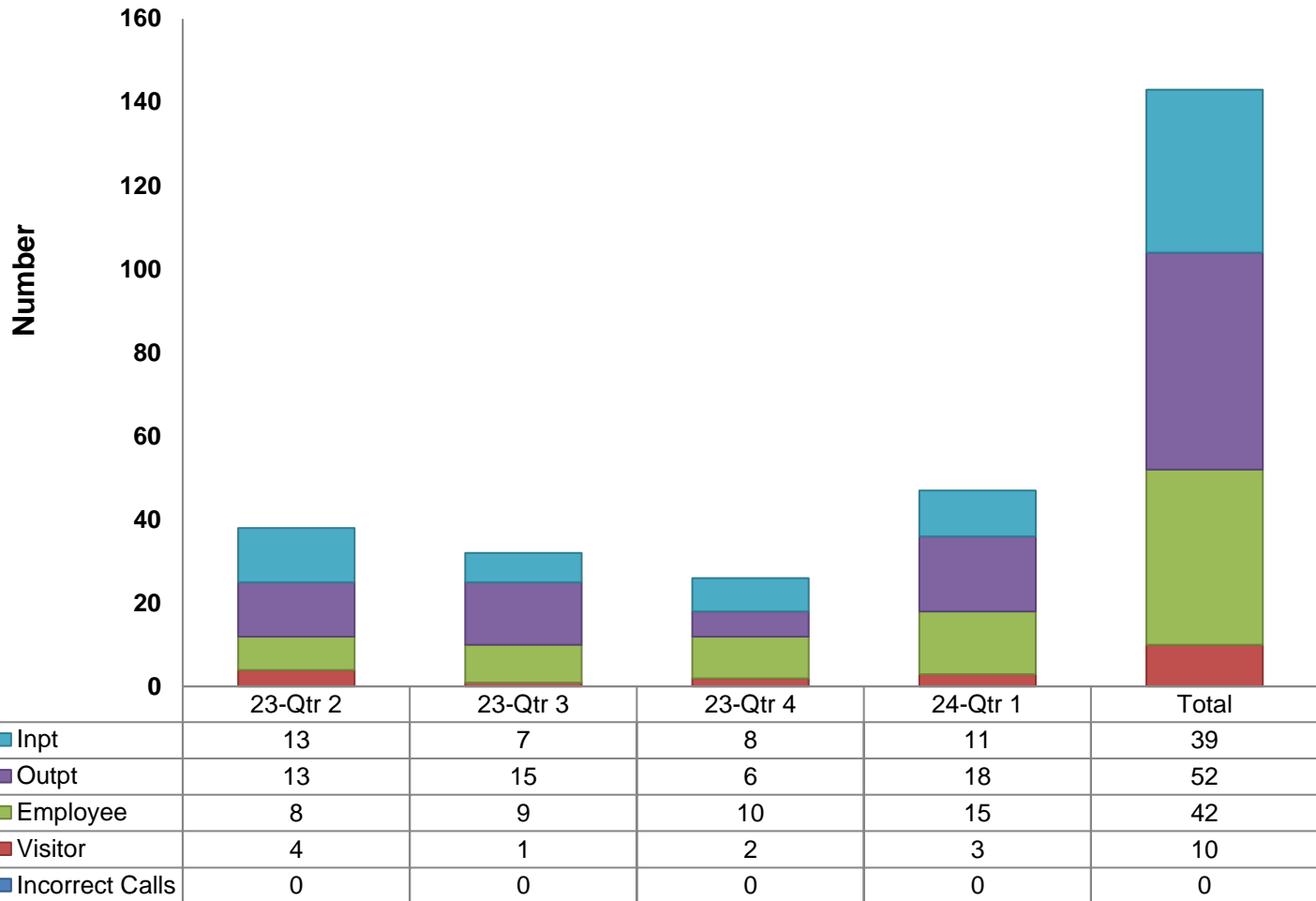


NDNQI Benchmark Data for Teaching Hospitals (Bed Size 100-199)

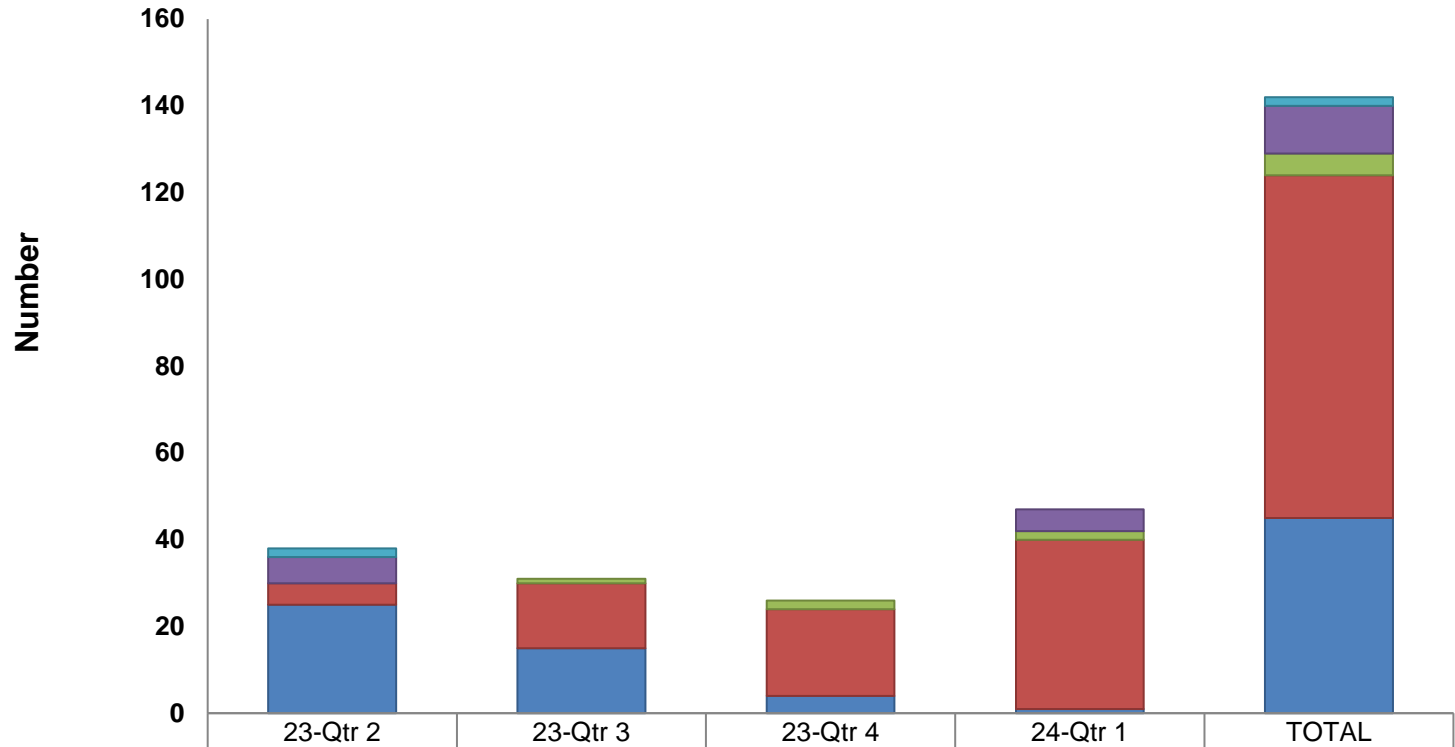
Emergency Response

- Code Blue
 - Types of Patients
 - Type of Event
 - Patient Disposition
- Rapid Response- Disposition

Code Blue Response: Types of “Patients”

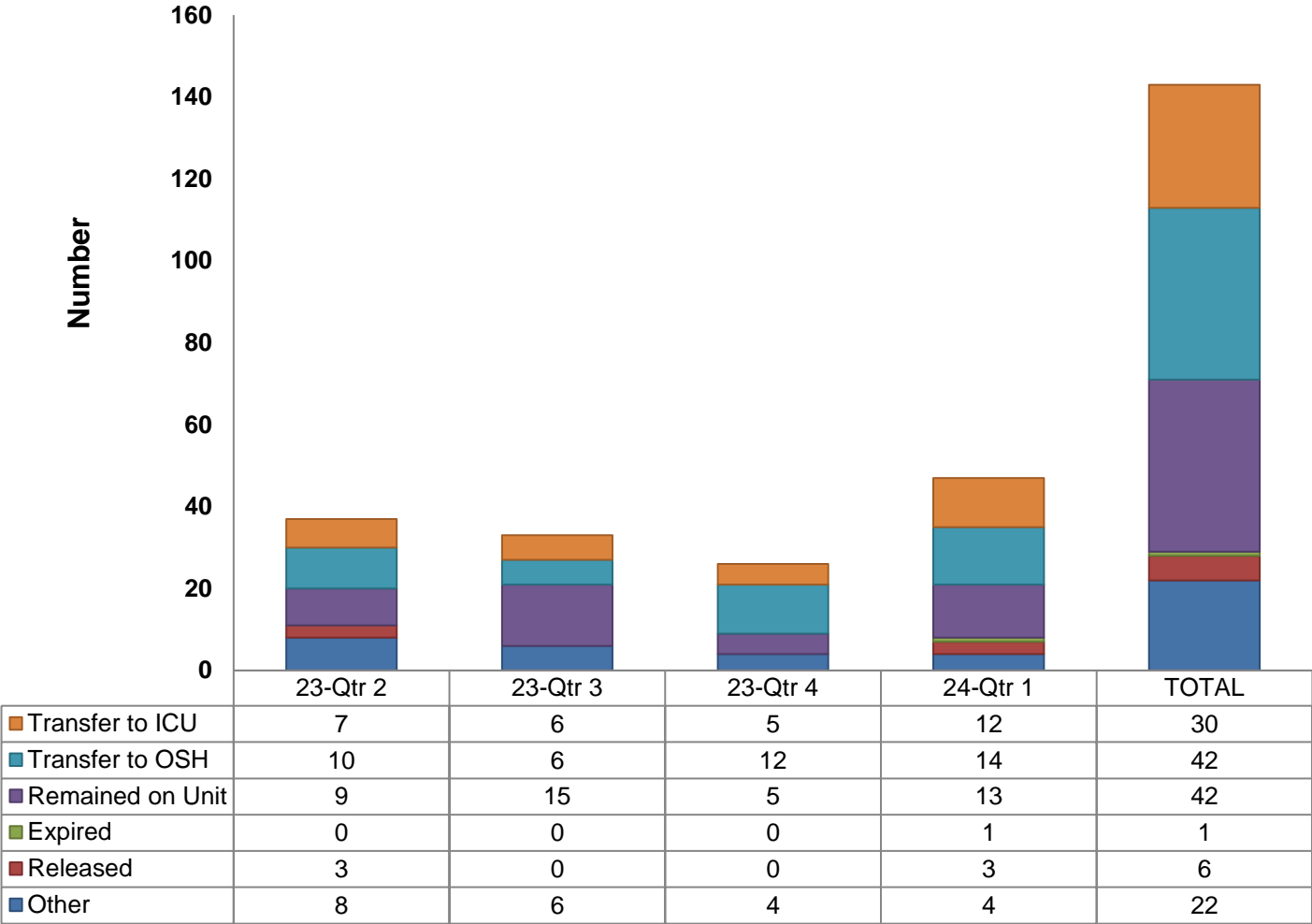


Code Blue Response: Type of Event

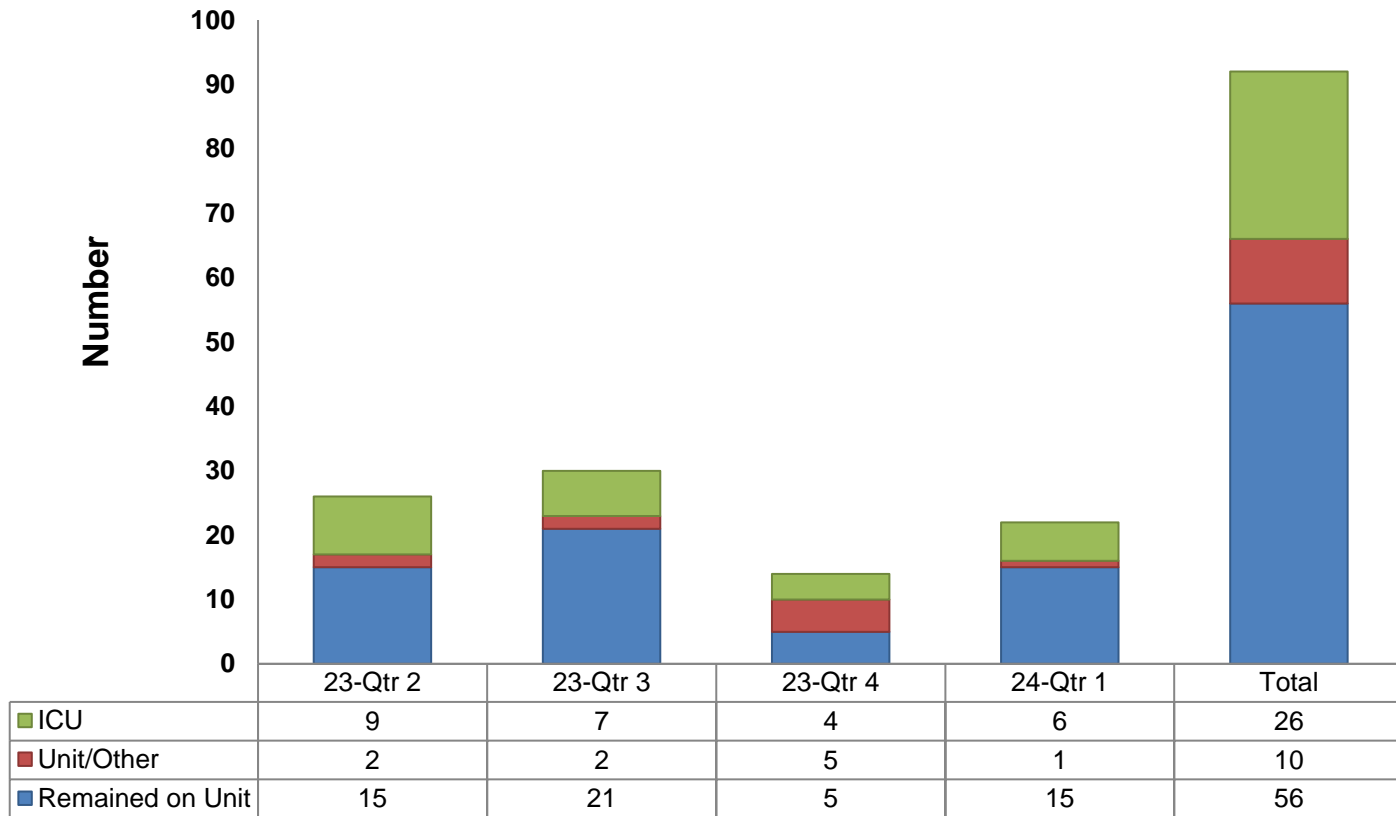


| | 23-Qtr 2 | 23-Qtr 3 | 23-Qtr 4 | 24-Qtr 1 | TOTAL |
|-----------------|----------|----------|----------|----------|-------|
| DART | 2 | 0 | 0 | 0 | 2 |
| Brain Code | 6 | 0 | 0 | 5 | 11 |
| Arrest | 0 | 1 | 2 | 2 | 5 |
| Acute Emergency | 5 | 15 | 20 | 39 | 79 |
| Stable Event | 25 | 15 | 4 | 1 | 45 |

Code Blue Response: Patient Disposition



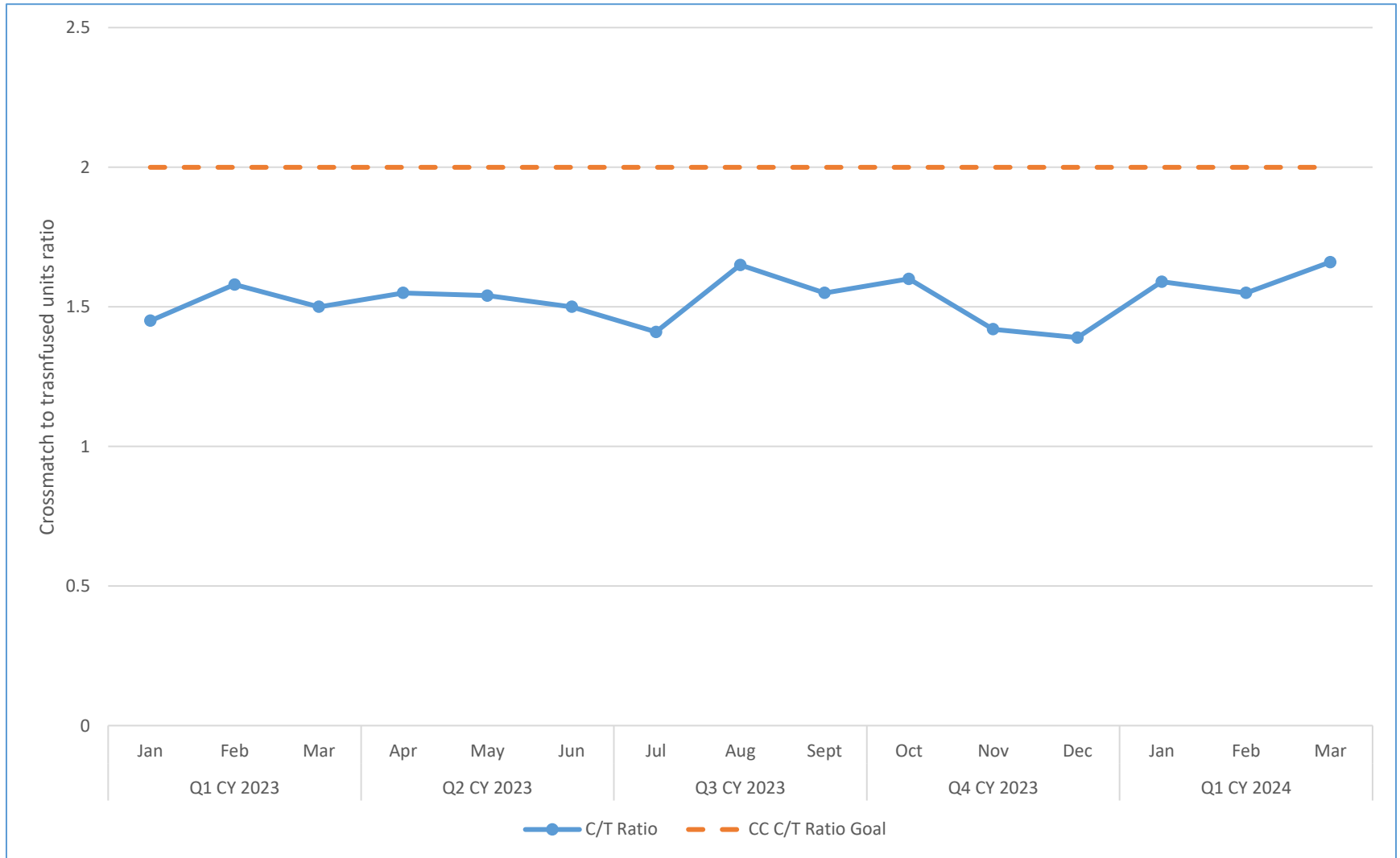
Rapid Response Team: Patient Disposition



Blood and Blood Product Use

- Crossmatch to Transfusion (C:T) Ratio
- Transfusion Reaction by Class
- Unacceptable Blood Bank Specimens

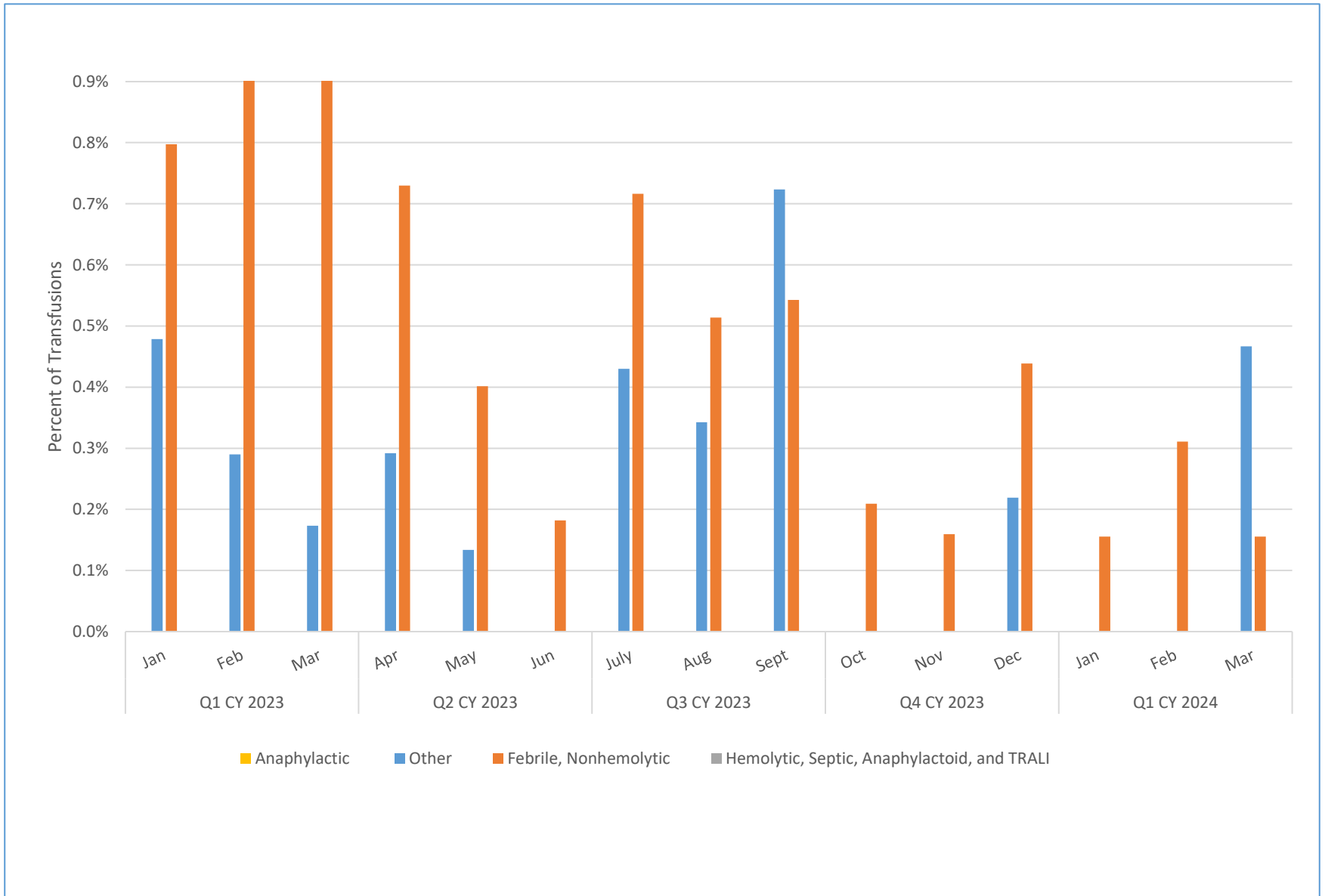
Crossmatch to Transfusion (C/T) Ratio



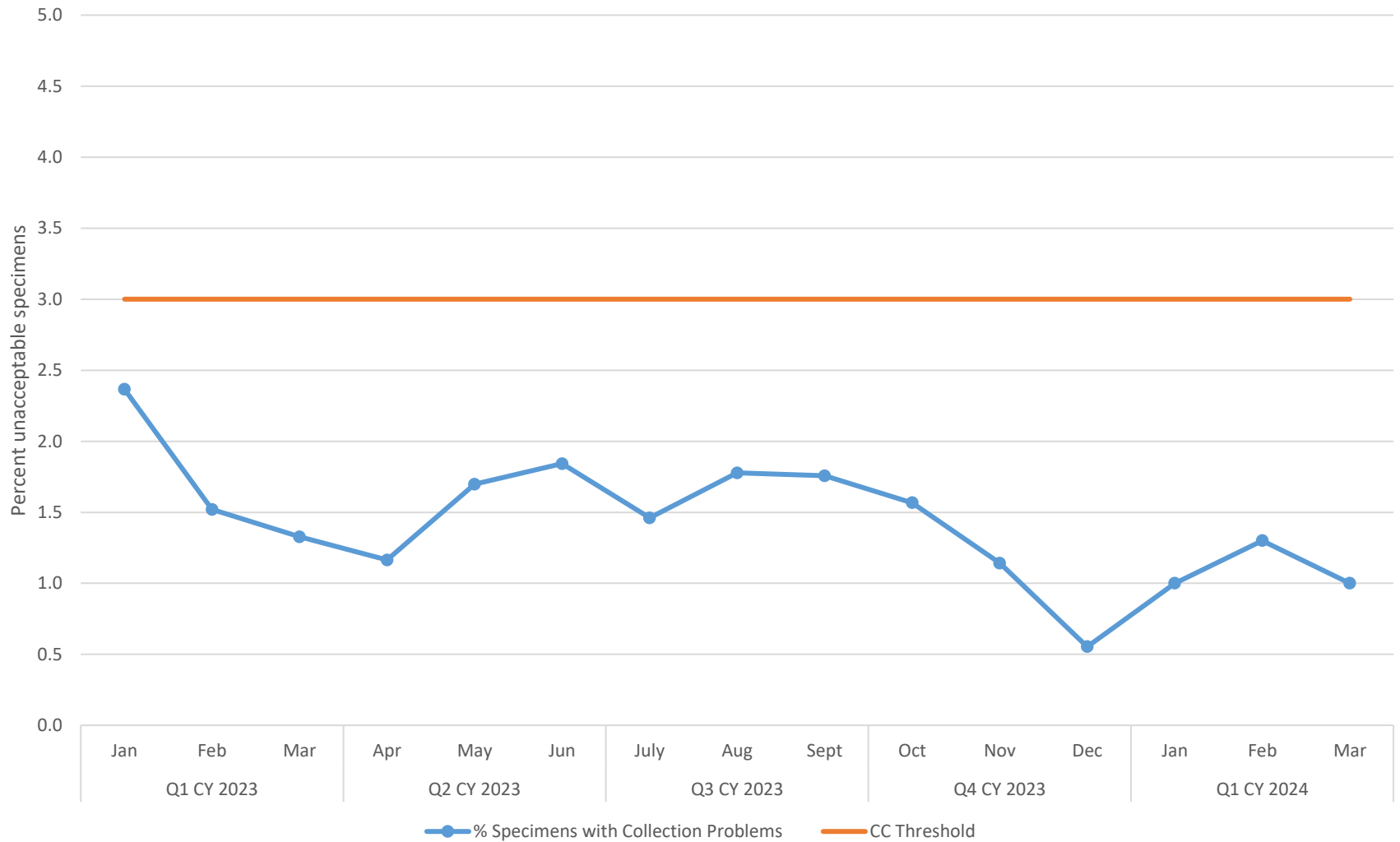
The NIH CC goal is to have a C:T ratio of 2.0 or less.

Monitoring this metric ensures that blood is not held unused in reserve when it could be available for another patient

Transfusion Reactions by Class



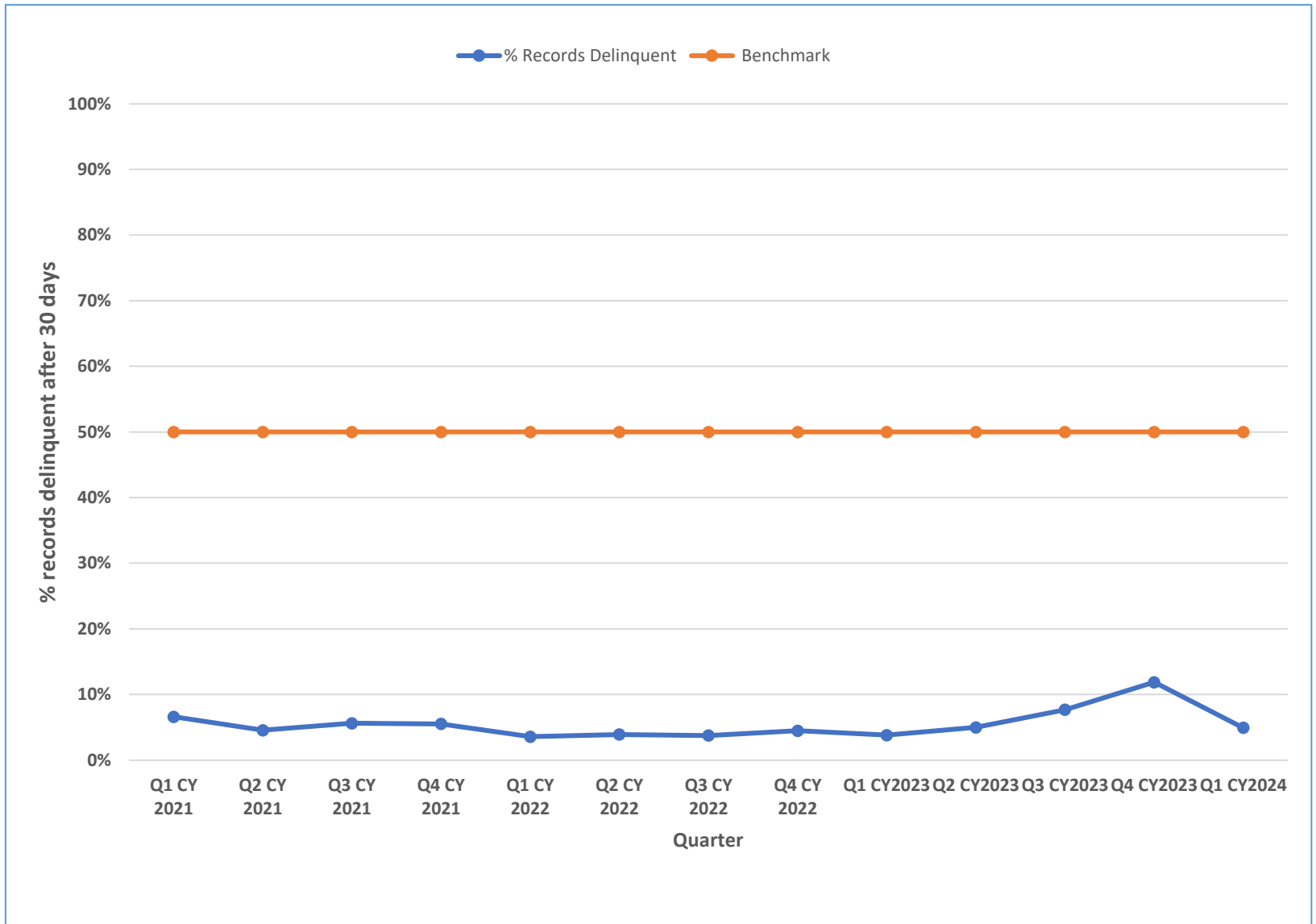
Unacceptable Blood Bank Specimens



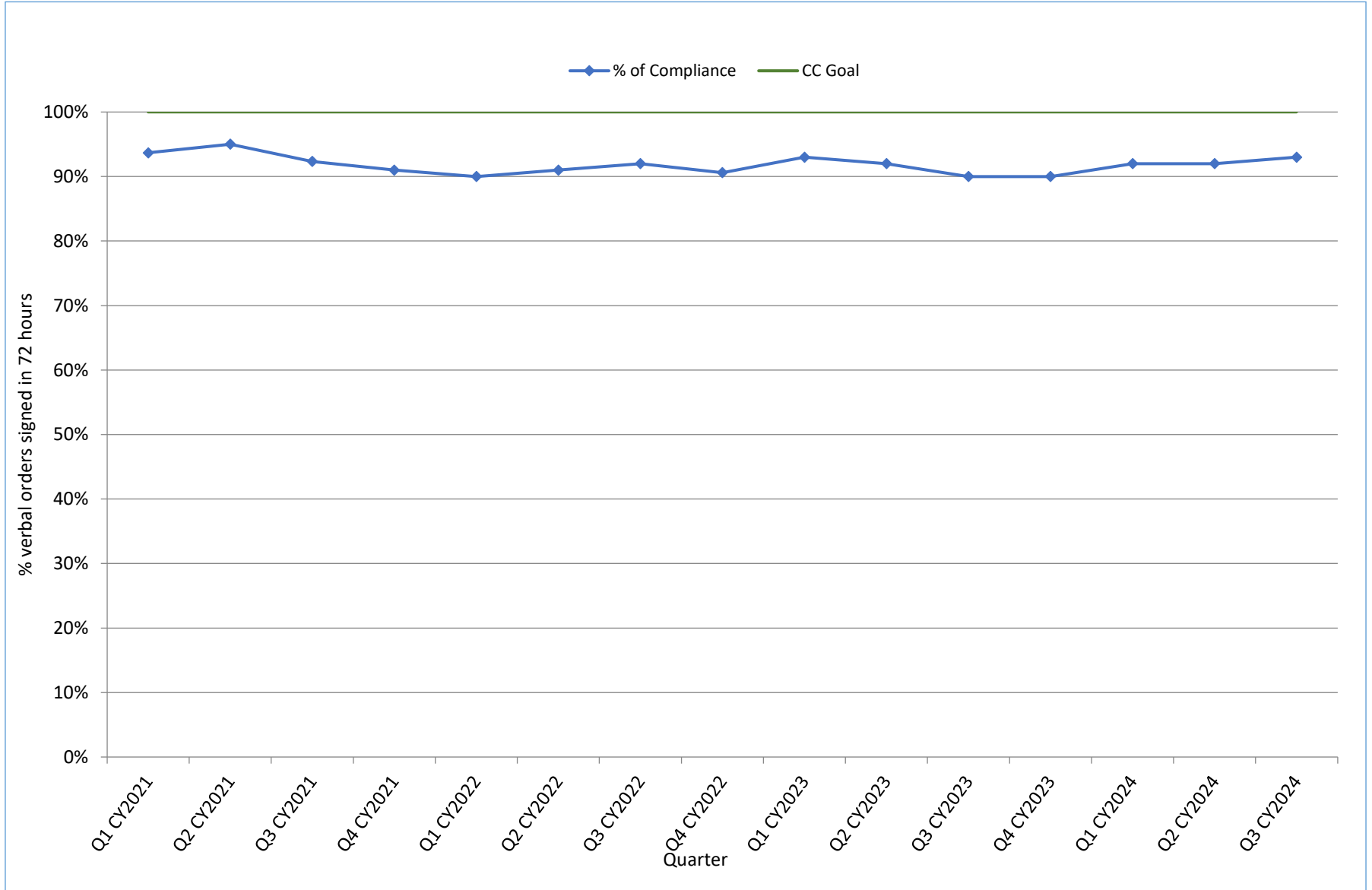
Clinical Documentation

- Medical Record Completeness
 - Delinquent Records
 - “Agent for” Countersignature Adherence
 - Unacceptable Abbreviation Use
- Accuracy of Coding

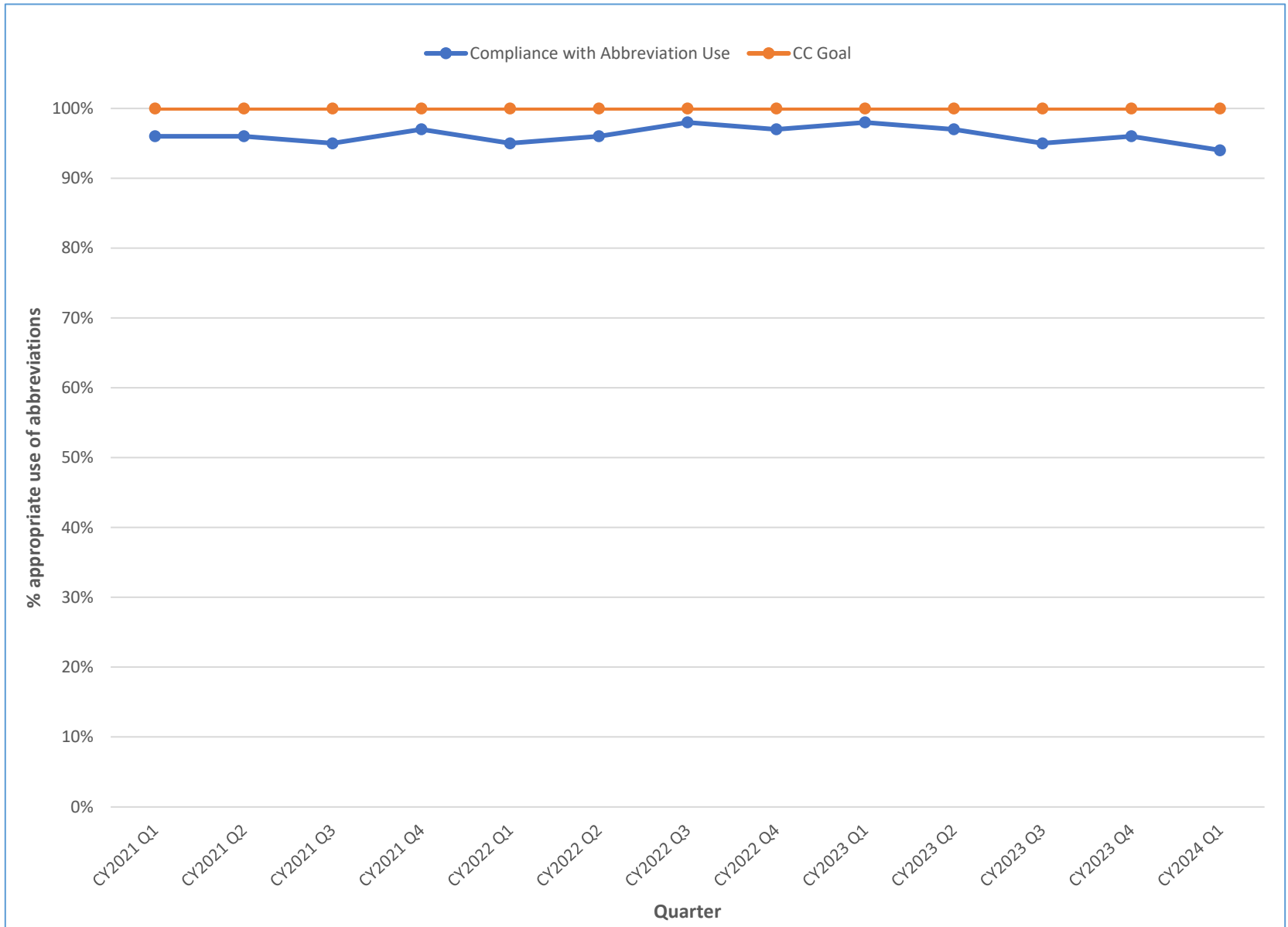
Delinquent Records (>30 days post discharge)



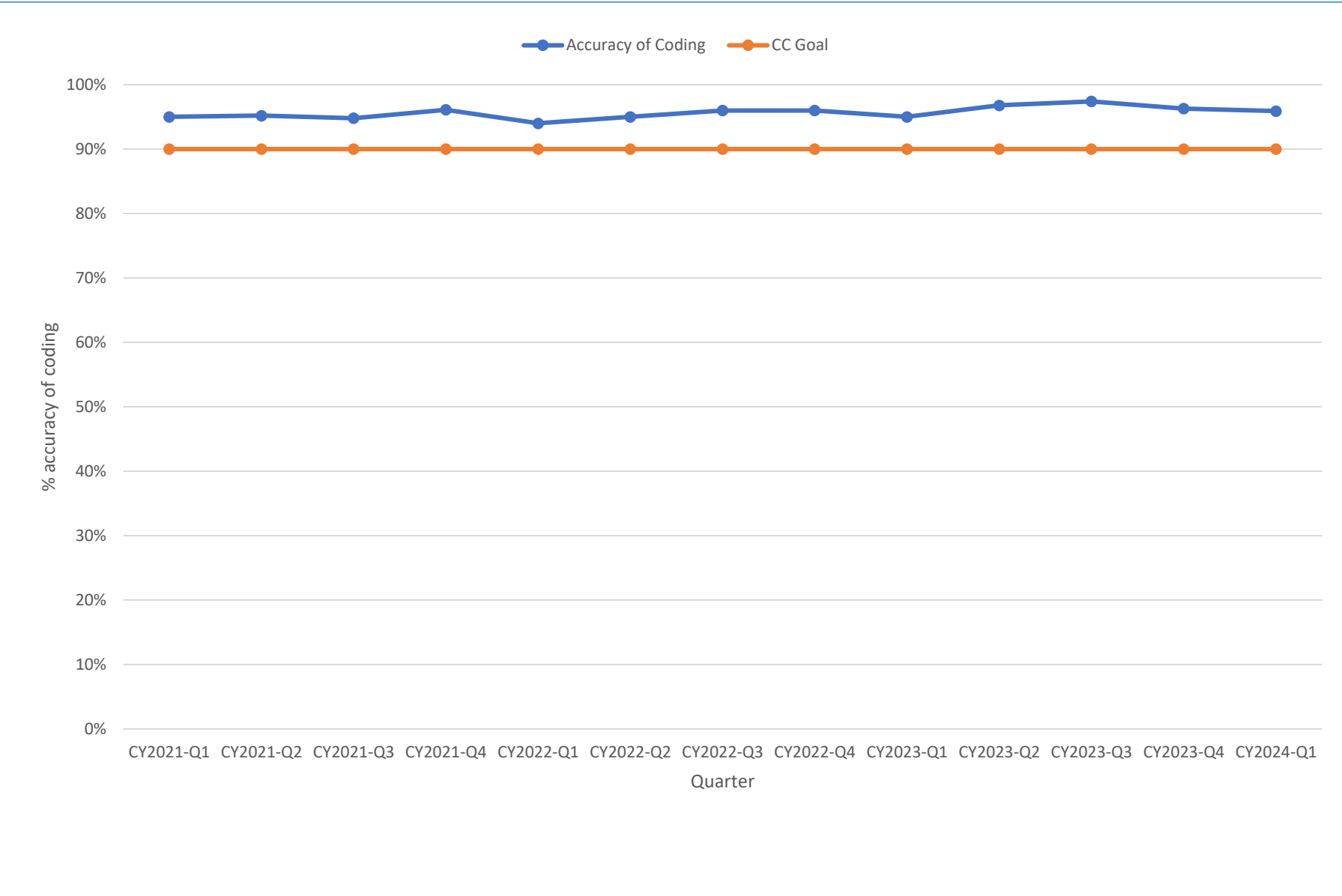
"Agent for" Orders Countersignature Compliance



"Do Not Use" Abbreviation Adherence



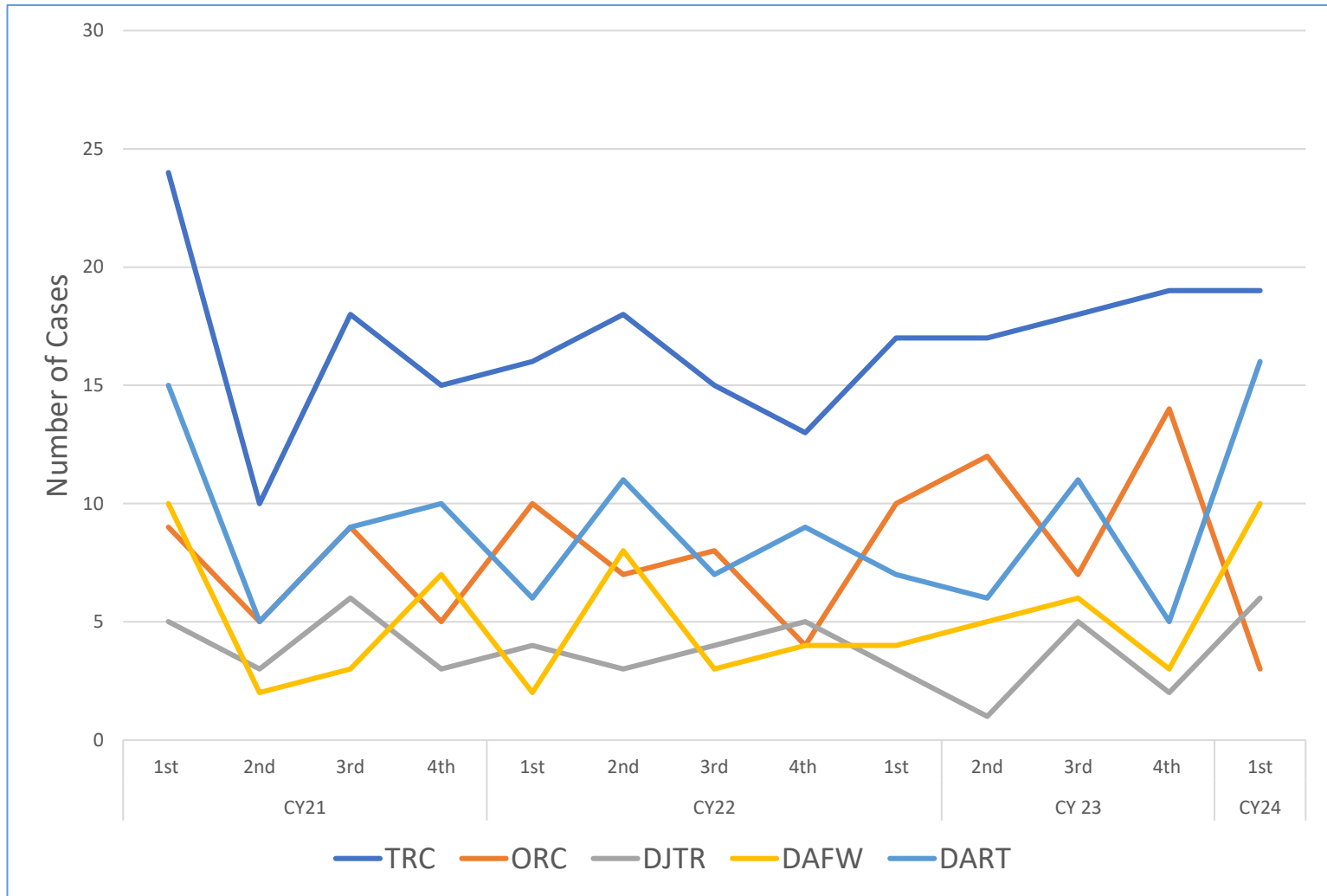
Accuracy of Record Coding



Employee Safety

- Recordable Occupational Injury and Illness
- Types of Occupational Injury for Quarter

Recordable Occupational Injuries and Illnesses Among CC Employees CY21-24Q1



TRC= Total Recordable cases DJTR= Days of job transfer or restriction
 ORC = Other recordable cases DAFW= Days away from work
 DART= Days away, restricted, or transferred (DJTR+DAFW)

Types of Occupational Injuries Among CC Employees 1st Quarter CY2024 n=19

