

	Current Through	FYTD Performance	Threshold	Target	Reach	Trend	Info
<b>FY10 Quality Pillar Metrics</b>							
<b>UHC O/E Mortality</b> Indicator shown by Department Division and Practice Group - VUMC	09/30/2010	0.71	0.76	0.73	0.68	▲	
<b>Healthcare Associated Infections - SIR</b> Infection Control and Prevention by SIR - VUMC	10/31/2010	0.83	1.17	1.11	0.98	N/A	
<b>Hand Hygiene</b> Hand Hygiene by Observation Location - VUMC	01/31/2011	79%	85%	90%	95%	▲	
<b>Ventilator Associated Pneumonia - SIR</b> Infection Control and Prevention by ICU - VUMC	11/30/2010	1.24	1.43	1.26	1.09	▲	
<b>Central Line Associated Bloodstream Infections - SIR</b> Infection Control and Prevention by ICU - VUMC	11/30/2010	0.80	1.45	1.28	0.85	▲	
<b>Catheter Associated Urinary Tract Infections - SIR</b> Infection Control and Prevention by ICU - VUMC	11/30/2010	0.55	0.67	0.63	0.56	▼	
<b>Adverse Events/Inpatient 1000 Pt Days Monthly</b> Nursing Indicator Shown by Hospital and Unit No Pt Detail - VUMC	11/30/2010	9.41	8	7.67	7.27	■	
<b>PU Nosocomial /Inpatient 1000 Pt Days Monthly</b> Nursing Indicator Shown by Hospital and Unit No Pt Detail - VUMC	11/30/2010	1.06	0.91	0.86	0.82	▼	
<b>Falls/Inpatient 1000 Pt Days Monthly - FY10 - FY11</b> Nursing Indicator shown by Hospital and Unit - VUMC	11/30/2010	3.72	3.16	3.00	2.84	■	
<b>Falls/Inpatient 1000 Pt Days Monthly VPH - FY11</b> Nursing Indicator shown by Hospital and Unit - VUMC : VPH	11/30/2010	4.51	6.17	5.55	4.94	▲	
<b>Falls with Harm/Inpatient 1000 Pt Days Monthly VPH - FY11</b> Nursing Indicator shown by Hospital and Unit - VUMC : VPH	11/30/2010	0.99	1.66	1.49		▼	
<b>Med Errors/Inpatient 1000 Pt Days Monthly</b> Nursing Indicator Shown by Hospital and Unit No Pt Detail - VUMC	11/30/2010	4.63	4.01	3.81	3.61	■	
<b>HF - Appropriate Care</b> Indicator shown by Patient - VUMC	11/30/2010	94%	85%	90%	95%	▲	
<b>PN - Appropriate Care</b> Indicator shown by Patient - VUMC	11/30/2010	76%	85%	90%	95%	▲	
<b>Stroke Appropriate Care Measure</b> Indicator shown by Patient - VUMC	11/30/2010	89%	86%	91%	95%	▲	
<b>SCIP - Appropriate Care</b> Indicator shown by Patient - VUMC	09/30/2010	95%	90%	93%	95%	■	
<b>OP Surgery - Appropriate Care</b> Stratified Outpatient Indicator shown by Patient - VUMC	06/30/2010	92%	72%	75%	80%	▼	
<b>EBM: Inpatients on EBM Pathways</b> EBM Path - VUMC	05/31/2010	64%	56%	60%	65%	■	
<b>EBM: Outpatient</b> EBM Path - VUMC	06/30/2010	12	9	12		■	
<b>CAC 1 - Use of Relievers for Inpatient Asthma</b> Indicator shown by Patient - VUMC	09/30/2010	100%	96%	98%	100%	■	
<b>CAC 2 - Use of Systemic Corticosteroids for Inpatient Asthma</b> Indicator shown by Patient - VUMC	09/30/2010	100%	96%	98%	100%	■	
<b>CAC 3 - Home Management Plan of Care Given to Patient/Caregiver</b> Indicator shown by Patient - VUMC	09/30/2010	63%				▲	
<b>MR1 - PAML Completed Within 8 Hours of Admission</b> Medication Reconciliation by Hospital and Unit - VUMC	11/30/2010	57%	65%	68%	71%	■	
<b>MR2 - PAML Signed off Within 8 Hours of Admission</b> Medication Reconciliation by Hospital and Unit - VUMC	11/30/2010	45%	43%	45%	47%	▲	
<b>INR &gt;= 4.0 while on Warfarin (ADE Days / Drug Days)</b> VUMC - VUMC	11/30/2010	1.45%	2.10%	1.98%	1.86%	■	
<b>PTT &gt; 200 while on Heparin Infusion</b> VUMC - VUMC	11/30/2010	1.91%	2.87%	2.71%	2.55%	▲	
<b>Blood Transfusions Documented in HED (Inpatient Only)</b> Blood Transfusion Nursing Unit Hierarchy - VUMC	12/31/2010	48%	45%	47%		■	
<b>Blood Transfusions - Outpatient (Manual Abstraction of Sampled Blood Units)</b> Blood Transfusion Nursing Unit Hierarchy - VUMC	11/30/2010	61%	53%	56%		▲	