

NORTHWESTERN LAKE FOREST HOSPITAL

Performance Scorecard – 2011

updated November 2011

Performance Scorecard – 2011

Northwestern Lake Forest Hospital is committed to providing the communities we serve the highest quality health care through exceptional access to state-of-the-art clinical services with compassionate and personal care.

Areas of Consideration in this Scorecard:

- Patient Satisfaction
- Core Measures
- National Patient Safety Goals
- Infection Control

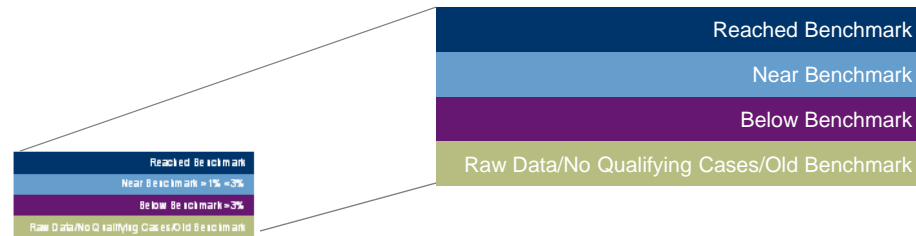
How to Read the Scorecard

Performance Scorecard – 2010

SERVICE

Patient Satisfaction

Press Ganey



These colors represent an internal assessment of the progress being made toward the listed benchmarks.

	Quarter				Benchmark	YTD Average
	1	2	3	4		
Patient Satisfaction Overall	91				91.32	91
Inpatient Overall*	86.1				86.70	86.1
Outpatient Overall*	93				94.35	93
Emergency Department Overall*	88.4				89.03	88.4
Ambulatory Surgery Overall*	94.4				94.22	94.4
Home Care Overall*	93				94.15	93

Each Scorecard is organized to intuitively display each measure's quarterly trending over the course of 2010-2011.

1st Quarter= September 10-November 10

2nd Quarter= December 10-February 11

3rd Quarter= March 11-May 11

4th Quarter= June 11- August 11

SERVICE

Patient Satisfaction

The journey toward becoming the hospital of choice for the communities we serve begins and ends with the interactions we have with the patients who come through our doors. With the help of Press Ganey, a nationally recognized surveyor of patient satisfaction, we are able track our patients' opinions about our employees and the services we provide.

Scores are based upon the cumulative scores of the following departmental overall scores: *Inpatient, Outpatient, Emergency Department, Ambulatory Surgery and Home Care.*

SERVICE

Patient Satisfaction

Press Ganey

Reached Benchmark
Near Benchmark >1% <3%
Below Benchmark >3%
Raw Data/No Qualifying Cases/Old Benchmark

	Quarter				Benchmark	YTD Average
	1	2	3	4		
Inpatient Overall*	59%	61%	56%	66%	64.0%	60%
Outpatient Overall*	78%	80%	80%	79%	78.0%	79%
Emergency Department Overall*	69%	70%	66%	71%	71.0%	69%
Ambulatory Surgery Overall*	75%	80%	77%	74%	77.0%	77%
Home Care Overall*	81%	84%	79%	83%	77.0%	82%

**Departmental Overall Scores Roll-up into Patient Satisfaction Overall. Only Year-to-Date Overall Target Established.*

SERVICE

HCAHPS

HOSPITAL CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SYSTEMS

Hospital consumer assessment of healthcare providers and systems is a tool developed by the Centers for Medicare and Medicaid Services (CMS) and the Agency for Healthcare Research and Quality (AHRQ) to measure patient perceptions of care. This measurement is used to publicly report hospital quality of care as perceived by hospital inpatients. As stated by CMS, the goal is to provide consumers with information that might be helpful in choosing a hospital. CMS has also stated that it should complement rather than compete with quality improvement instruments already being used by hospitals.

Performance Scorecard – 2011

SERVICE

HCAHPS 2011

Press Ganey – Mean Scores

Reached Benchmark
Near Benchmark >1% <3%
Below Benchmark >3%
Raw Data/No Qualifying Cases/Old Benchmark

Quarter

Hospital Consumer Assessment of
Healthcare Providers and Systems

	1	2	3	4	Benchmark	YTD Average
Recommend this Hospital	82.0%	82.0%	69%	77%	84.0%	77%
Communication with Doctors	78.0%	79.0%	80%	83%	86.0%	81%
Communication with Nurses	75.0%	74.0%	66%	76%	82.0%	73%
Responsiveness of Hospital Staff	58.0%	60.0%	61%	69%	71.0%	64%
Pain Control	69.0%	74.0%	66%	71%	76.0%	70%
Communication about Medicine	55.0%	52.0%	57%	61%	70.0%	58%
Clean Environment	75.0%	65.0%	71%	75%	80.0%	72%
Quiet Environment	44.0%	51.0%	47%	58%	64.0%	52%
Discharge Information	81.0%	75.0%	77%	84%	85.0%	81%

QUALITY

Core Measures

Core Measures, often known as “Care Measures,” are indicators that show – as a percentage – how well a healthcare organization is providing the recommended care. These are generally accepted as the best methods for delivering the safest and highest quality results to patients.

Heart Attack – Acute Myocardial Infarction (AMI)

Heart attacks occur when the heart does not receive enough oxygen. This usually happens after a blood clot or when the heart’s arteries narrow.

Heart Failure

Heart failure is a weakening of the heart’s pumping power. If you suffer from heart failure, then your body is not receiving enough oxygen or nutrients in order to meet its needs.

Pneumonia

Pneumonia is a serious lung infection causing symptoms such as fever, cough and fatigue.

Surgical Care Improvement Project (SCIP)

SCIP is a national partnership of organizations committed to improving the safety of surgical care by reducing the number of postoperative complications.

Performance Scorecard – 2011

QUALITY

Core Measures

Centers for Medicare and Medicaid Services

Reached Benchmark
Near Benchmark >1% <3%
Below Benchmark >3%
Raw Data/No Qualifying Cases/Old Benchmark

Quarter

	1	2	3	4	Benchmark	YTD Average
Acute Myocardial Infarction (AMI)*	93.3	100.0	89.0	100.0	95.0	95.1
Pneumonia (PN)*	86.7	94.1	96.8	94.7	94.0	93.5
Heart Failure (HF)*	97.5	93.3	100.0	90.6	95.0	95.2
Surgical Care Improvement Project (SCIP)*	91.5	94.4	89.1	92.3	95.0	92.1
Stroke	70.0	82.4	83.0	84.4	61.0	83.3

*Targets are determined by comparing Northwestern Lake Forest Hospital to peer hospitals in the 95th percentile.

**Preliminary data (1 case remains to be abstracted for February)

QUALITY

National Patient Safety Goals

The Joint Commission, an independent healthcare accreditation organization, created the National Patient Safety Goals to help improve outcomes in hospitals and reduce risks in the healthcare setting.

Time Out Before Surgical / Invasive Procedures

A “Time Out” is required as a safety check prior to proceeding with surgery or other invasive procedures. During a “Time Out,” the entire team stops to verify the patient’s identity, procedure being performed and availability of special equipment. A member of the team should also mark the location of the procedure on the patient’s body when applicable.

Falls – Inpatient Fall Rate

A fall rate, calculated per 1,000 patient days, is the number of documented patient falls, with or without injury, experienced by an inpatient on a hospital unit within a month.

Hand Hygiene Compliance

Healthcare providers make a significant impact on patient safety simply by washing their hands. Hand washing is the single most important way to prevent the spread of infections.

QUALITY

National Patient Safety Goals

The Joint Commission

Reached Benchmark
Near Benchmark >1% <3%
Below Benchmark >3%
Raw Data/No Qualifying Cases/Old Benchmark

Quarter

	1	2	3	4	Benchmark	YTD Average
Time-Out Before Surgical/ Invasive Procedures (OR only)*	99.8%	99.8%	99.7%	99.8%	100%	99.8%
Time-Out Before Surgical/ Invasive Procedures (All other departments)	No data	98%	97%	98%	95%	97.8%
Falls - Inpatient Fall Rate	2.6	2.1	2.2	1.9	<4.0	2.2
Hand Hygiene Compliance*	98%	97%	94%	93%	95%	96%

QUALITY

Infection Control

Ventilator Associated Pneumonia (VAP)

VAP is a healthcare-associated pneumonia that occurs in patients whose breathing is being assisted by a ventilation machine. The number measured is presented as infections per 1,000 patient days.

Surgical Site Infections

Surgical patients are often at risk for postoperative infections, but certain interventions can reduce this risk. Hospitals measure the number of surgical site infections to determine if these interventions are successful.

Central Line Infections

Because they pose a significant risk, every central line is monitored for infection. The infection rate is calculated as infections per 1,000 line days.

QUALITY

Infection Control

Reached Benchmark
Near Benchmark >1% <3%
Below Benchmark >3%
Raw Data/No Qualifying Cases/Old Benchmark

Quarter

	1	2	3	4	Benchmark	YTD Average
Ventilator Pneumonia (per 1,000 ventilator days)	0.0	0.0	0.0	0.0	<2.7	0.0
Surgical Site Infections (per 100 procedures)	0.39	0.56	0.30	0.70	<2.70%	0.49
Central Line Infections* (per 1,000 line days)	0.0	0.0	0.0	0.0	<3.2	0.0

*Central Line Infections in ICU &/or Special Care Nursery only