



# North Mississippi Medical Center - HAMILTON

## Core Measures Scorecard FY 2016

Inpatient Core Measures							
Indicator	FY 2015 Baseline	TJC Top 10% Benchmark	Jul-Sep 15	Oct -Dec 15	Jan-Mar 16	Apr-Jun 16	YTD
<b>Tobacco</b>							
Tobacco Use Screening	100.0%	—	—	100.0%	100.0%	100.0%	100.0%
Tobacco Use Treatment Provided or Offered	92.9%	—	—	100.0%	100.0%	100.0%	100.0%
Tobacco Use Treatment Provided or Offered at Discharge	90.0%	—	—	100.0%	100.0%	69.2%	89.7%
<b>Stroke</b>							
Venous Thromboembolism (VTE) Prophylaxis	100.0%	99.0%	100.0%	100.0%	Retired Measure	Retired Measure	100.0%
Discharged on Antithrombotic Therapy	100.0%	100.0%	100.0%	100.0%	Retired Measure	Retired Measure	100.0%
Anticoagulation Therapy for Atrial Fib/Flutter	100.0%	100.0%	100.0%	100.0%	Retired Measure	Retired Measure	100.0%
Thrombolytic Therapy	—	100.0%	—	—	—	—	—
Antithrombotic Therapy By End of Hospital Day 2	100.0%	100.0%	100.0%	100.0%	Retired Measure	Retired Measure	100.0%
Discharged on Statin Medication	100.0%	99.0%	100.0%	100.0%	Retired Measure	Retired Measure	100.0%
Stroke Education	100.0%	100.0%	100.0%	—	Retired Measure	Retired Measure	100.0%
Assessed for Rehab	100.0%	100.0%	100.0%	100.0%	Retired Measure	Retired Measure	100.0%
<b>Stroke Composite Score</b>	100.0%	100.0%	100.0%	100.0%	—	—	100.0%
<b>Venous Thromboembolism</b>							
Venous Thrombolism Prophylaxis	99.3%	100.0%	97.8%	97.9%	Retired Measure	Retired Measure	97.9%
ICU Venous Thrombolism Prophylaxis	—	100.0%	—	—	Retired Measure	Retired Measure	—
VTE Therapy Pts with Anticoagulation Overlap	100.0%	100.0%	100.0%	100.0%	Retired Measure	Retired Measure	100.0%
VTE Warfarin Therapy Discharge Instructions	100.0%	100.0%	100.0%	—	—	—	100.0%
Hospital Acquired Potentially Preventable VTE	0.0%	0.0%	—	—	—	—	—
<b>VTE Composite Score</b>	99.3%	100.0%	97.9%	98.0%	—	—	97.9%
<b>Immunizations</b>							
Influenza Immunization	95.6%	96.3%	—	91.1%	98.0%	—	94.6%
<b>Severe Sepsis / Septic Shock</b>							
Early Management Bundle, Severe Sepsis/Septic Shock	66.7%	—	—	66.7%	71.4%	62.5%	67.0%
<b>Emergency Department</b>							
Median Time from ED Arrival to ED Departure for Admitted ED Pts	198.0	176.0*	199.0	205.0	217.0	199.0	205.0
Admit Decision Time to ED Departure Time for Admitted Patients	35.3	43.0*	30.0	33.0	36.0	32.0	32.8

Outpatient Core Measures							
Indicator	FY 2015 Baseline	TJC Top 10% Benchmark	Jul-Sep 15	Oct -Dec 15	Jan-Mar 16	Apr-Jun 16	YTD
<b>OP - Acute Myocardial Infarction</b>							
Aspirin at Arrival	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Median Time to EKG	6.9	2.0*	8.5	1.0	3.0	9.0	5.4

<b>OP - Chest Pain</b>							
Aspirin at Arrival	100.0%	100.0%	100.0%	88.9%	100.0%	100.0%	97.2%
Median Time to EKG	8.6	2.0*	5.0	8.0	4.5	9.0	6.6
<b>OP - Stroke</b>							
Head CT/MRI Results for Stroke Pts Scan Interpreted w/in 45 min of Arrival	66.7%	100.0%	100.0%	100.0%	50.0%	—	83.3%
<b>OP - Pain Management</b>							
Median Time to Pain Management for Long Bone Fracture	71.5	33.0*	58.0	51.0	32.0	36.0	44.3
<b>OP - Colonoscopy</b>							
Appropriate Follow-Up for Normal Colonoscopy	66.7%	—	—	50.0%	50.0%	100.0%	66.7%
Colonoscopy Interval for Pt w/ History Adeno Polyps	64.6%	—	—	88.9%	63.6%	72.7%	75.1%
<b>OP - ED Throughput</b>							
Median Time from ED Arrival to ED Departure for Discharged ED Pts	105.9	91.0*	109.0	109.5	124.0	116.0	114.6
Door to Diagnostic Evaluation by Medical Personnel	27.6	11.0*	32.0	28.0	24.0	26.0	27.5

— No Cases

\*Top Tenth Percentile Median, Hospital IQR Benchmarks