

## COOK COUNTY HEALTH & HOSPITALS SYSTEM

## CCHHS Board of Directors Dashboard Overview

29 January 2016 Krishna Das, MD, Chief Quality Officer



CCHHS Board

## **Board Quality Dashboard**

CCHHS QPS Committee Dashboard	CCHHS Board Metrics - Quality								
Data as of 1/11/2016									
PERFORMANCE MEASURES	CY 2014			CY 2015 4Q15					
	3Q14	4014	1015	2Q15	3Q15			TARGET	VARIANCE*
	542.	1421	1425	2425	5415	ОСТ	NOV		
ger									
Core Measures	Monthly Composite								
Venous Thromboembolism (VTE) Prevention Only (%)	92	87	86	92	89	93	87	99%	-10%
Venous Thromboembolism (VTE) Prevention & Treatment (%)	88	85	83	86	86	93	91	99%	-13%
Efficiency - Operating Room	Monthly %								
Surgery Begins at the Scheduled Time (%)	37	38	46	50*	56*	52*	46*	80%	-24%
Safety	Total # of Events								
Events: Ulcers, Falls, CLABSI and CAUTI	15	15	12	33	24	6	10		
Patient Experience									
Willing to Recommend Hosp (% top box)	68	66	70	66	69	71	70	85%	-16%
Provident									
Core Measures									
Venous Thromboembolism (VTE) Prevention Only (%)	89	87	98	94	96	100	100	99%	-3%
Venous Thromboembolism (VTE) Prevention & Treatment (%)	92	89	98	95	97	100	100	99%	-2%
Efficiency - Operating Room	Monthly %								
Surgery Begins at the Scheduled Time (%)	37	38	16	65	84	80	81	80%	4%
Patient Experience									
Willing to Recommend Hosp (% top box)	66	68	67	68	59	44	40	85%	-26%
ACHN									
Diabetes Control % with Hgb A1C < 9%	77	78	73	74	76	76	76	78%	-2%
Patient Experience: Moving Through Visit	68	67	67	63	60	61	67	75%	-15%
Patient Experience: Telephone Access	63	62	62	61	60	61	70	75%	-15%
LEGEND	IFGFND								

LEGEND	LEGEND					
CLABSI: Central line-associated blood stream infections	* Data represents automated collection					
CAUTI: Catheter-associated urinary tract infections	* Variance is target to recent quarter					
*Variance is target to recent full quarter						



